

# Dossier zur Nutzenbewertung gemäß § 35a SGB V

*Sacituzumab govitecan (Trodelvy®)*

Gilead Sciences GmbH

## Anhang 4-G

*Monotherapie zur Behandlung von erwachsenen Patienten mit nicht resezierbarem oder metastasiertem Hormonrezeptor (HR)-positivem, HER2-negativem Mammakarzinom, die eine Endokrin-basierte Therapie und mindestens zwei zusätzliche systemische Therapien bei fortgeschrittener Erkrankung erhalten haben*

Medizinischer Nutzen und  
medizinischer Zusatznutzen,  
Patientengruppen mit therapeutisch  
bedeutsamem Zusatznutzen

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**Anhang 4-G 1: Baseline-Charakteristika**

## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.1.1: participant Disposition  
Screened Population  
Excluding Participants Pre-selected to Gemcitabine

	SG n (%)	TPC n (%)	Total n (%)
Subjects Screened			651
Subjects Randomized (ITT Population)	205	213	418
Subjects Randomized but not Treated	4 ( 2.0%)	19 ( 8.9%)	23 ( 5.5%)
Received at Least One Dose of Study Treatment (Safety Population)	201 ( 98.0%)	194 ( 91.1%)	395 ( 94.5%)
<b>Treatment Status</b>			
Continuing on Treatment	7 ( 3.4%)	2 ( 0.9%)	9 ( 2.2%)
Discontinued from Study Treatment	194 ( 94.6%)	192 ( 90.1%)	386 ( 92.3%)
<b>Primary Reason for Discontinuing Treatment</b>			
Progressive Disease	162 ( 79.0%)	160 ( 75.1%)	322 ( 77.0%)
Clinical Progression	13 ( 6.3%)	11 ( 5.2%)	24 ( 5.7%)
Radiological Progression	149 ( 72.7%)	149 ( 70.0%)	298 ( 71.3%)
Protocol Deviation (Non-Compliance)	1 ( 0.5%)	3 ( 1.4%)	4 ( 1.0%)
Death	2 ( 1.0%)	2 ( 0.9%)	4 ( 1.0%)
Treatment Delay > 3 Weeks	3 ( 1.5%)	1 ( 0.5%)	4 ( 1.0%)
Withdrawal of Consent	8 ( 3.9%)	14 ( 6.6%)	22 ( 5.3%)
Treatment Only	6 ( 2.9%)	7 ( 3.3%)	13 ( 3.1%)
Survival Follow-up	2 ( 1.0%)	7 ( 3.3%)	9 ( 2.2%)
Adverse Event	14 ( 6.8%)	6 ( 2.8%)	20 ( 4.8%)
Pregnancy	0	0	0
Lost to Follow-Up	0	0	0
Covid-19	0	1 ( 0.5%)	1 ( 0.2%)
Study Drug Not Administered (After Randomization)	0	0	0
Other	4 ( 2.0%)	5 ( 2.3%)	9 ( 2.2%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

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Study IMMU-132-09Table 15.1.1.1: participant Disposition  
Screened Population  
Excluding Participants Pre-selected to Gemcitabine

	SG n (%)	TPC n (%)	Total n (%)
Number of Subjects Continuing on Study	54 ( 26.3%)	47 ( 22.1%)	101 ( 24.2%)
Number of Subjects who Discontinued from Study	151 ( 73.7%)	166 ( 77.9%)	317 ( 75.8%)
Primary Reason for Discontinuing from Study			
Death	136 ( 66.3%)	119 ( 55.9%)	255 ( 61.0%)
Withdrawal of Consent	8 ( 3.9%)	33 ( 15.5%)	41 ( 9.8%)
Lost to Follow-Up	3 ( 1.5%)	6 ( 2.8%)	9 ( 2.2%)
Sponsor Decision	0	1 ( 0.5%)	1 ( 0.2%)
Covid-19	0	1 ( 0.5%)	1 ( 0.2%)
Other	4 ( 2.0%)	6 ( 2.8%)	10 ( 2.4%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.1.1.2: Participant Disposition at Final OS Data  
Screened Population  
Excluding Participants Pre-selected to Gemcitabine

	SG n (%)	TPC n (%)	Total n (%)
Subjects Screened			651
Subjects Randomized (ITT Population)	205	213	418
Subjects Randomized but not Treated	4 ( 2.0%)	19 ( 8.9%)	23 ( 5.5%)
Received at Least One Dose of Study Treatment (Safety Population)	201 ( 98.0%)	194 ( 91.1%)	395 ( 94.5%)
<b>Treatment Status</b>			
Continuing on Treatment	5 ( 2.4%)	1 ( 0.5%)	6 ( 1.4%)
Discontinued from Study Treatment	196 ( 95.6%)	193 ( 90.6%)	389 ( 93.1%)
<b>Primary Reason for Discontinuing Treatment</b>			
Progressive Disease	164 ( 80.0%)	161 ( 75.6%)	325 ( 77.8%)
Clinical Progression	13 ( 6.3%)	11 ( 5.2%)	24 ( 5.7%)
Radiological Progression	151 ( 73.7%)	150 ( 70.4%)	301 ( 72.0%)
Protocol Deviation (Non-Compliance)	1 ( 0.5%)	3 ( 1.4%)	4 ( 1.0%)
Death	2 ( 1.0%)	2 ( 0.9%)	4 ( 1.0%)
Treatment Delay > 3 Weeks	3 ( 1.5%)	1 ( 0.5%)	4 ( 1.0%)
Withdrawal of Consent	8 ( 3.9%)	14 ( 6.6%)	22 ( 5.3%)
Treatment Only	6 ( 2.9%)	7 ( 3.3%)	13 ( 3.1%)
Survival Follow-up	2 ( 1.0%)	7 ( 3.3%)	9 ( 2.2%)
Adverse Event	14 ( 6.8%)	6 ( 2.8%)	20 ( 4.8%)
Pregnancy	0	0	0
Lost to Follow-Up	0	0	0
Covid-19	0	1 ( 0.5%)	1 ( 0.2%)
Study Drug Not Administered (After Randomization)	0	0	0
Other	4 ( 2.0%)	5 ( 2.3%)	9 ( 2.2%)

The denominator is the number of patients in the ITT Population excluding those assigned to Gemcitabine before randomized for each treatment group.  
Final OS data cut is at 01Dec2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09Table 15.1.1.1.2: Participant Disposition at Final OS Data  
Screened Population  
Excluding Participants Pre-selected to Gemcitabine

	SG n (%)	TPC n (%)	Total n (%)
Number of Subjects Continuing on Study	36 ( 17.6%)	28 ( 13.1%)	64 ( 15.3%)
Number of Subjects who Discontinued from Study	169 ( 82.4%)	185 ( 86.9%)	354 ( 84.7%)
Primary Reason for Discontinuing from Study			
Death	154 ( 75.1%)	138 ( 64.8%)	292 ( 69.9%)
Withdrawal of Consent	9 ( 4.4%)	33 ( 15.5%)	42 ( 10.0%)
Lost to Follow-Up	2 ( 1.0%)	6 ( 2.8%)	8 ( 1.9%)
Sponsor Decision	0	1 ( 0.5%)	1 ( 0.2%)
Covid-19	0	1 ( 0.5%)	1 ( 0.2%)
Other	4 ( 2.0%)	6 ( 2.8%)	10 ( 2.4%)

The denominator is the number of patients in the ITT Population excluding those assigned to Gemcitabine before randomized for each treatment group.  
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Study IMMU-132-09

Table 15.1.1.2: participant Disposition  
Screened Population  
Only including participants never dosed but excluding participants pre-selected to Gemcitabine

	SG n (%)	TPC n (%)	Total n (%)
Subjects Screened			256
Subjects Randomized but not Treated	4 (100.0%)	19 (100.0%)	23 (100.0%)
Number of Subjects who Discontinued from Study	4 (100.0%)	19 (100.0%)	23 (100.0%)
Primary Reason for Discontinuing from Study			
Withdrawal of Consent	1 ( 25.0%)	12 ( 63.2%)	13 ( 56.5%)
Sponsor Decision	0	1 ( 5.3%)	1 ( 4.3%)
Other	3 ( 75.0%)	6 ( 31.6%)	9 ( 39.1%)

The denominator is the number of patients in the ITT Population but never dosed excluding participants assigned to Gemcitabine before randomized for each treatment group.

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Study IMMU-132-09

Table 15.1.1.2.2: Participant Disposition at Final OS Data  
Screened Population  
Only including participants never dosed but excluding participants pre-selected to Gemcitabine

	SG n (%)	TPC n (%)	Total n (%)
Subjects Screened			256
Subjects Randomized but not Treated	4 (100.0%)	19 (100.0%)	23 (100.0%)
Number of Subjects who Discontinued from Study	4 (100.0%)	19 (100.0%)	23 (100.0%)
Primary Reason for Discontinuing from Study			
Withdrawal of Consent	1 ( 25.0%)	12 ( 63.2%)	13 ( 56.5%)
Sponsor Decision	0	1 ( 5.3%)	1 ( 4.3%)
Other	3 ( 75.0%)	6 ( 31.6%)	9 ( 39.1%)

The denominator is the number of patients in the ITT Population but never dosed excluding participants assigned to Gemcitabine before randomized for each treatment group.

Final OS data cut is at 01Dec2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.3.1: Demographics and Baseline Characteristics  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
<b>Age at Study Entry (years)</b>			
N	205	213	418
Mean (SD)	56.3 (10.99)	55.4 (10.34)	55.9 (10.66)
Median	56.0	55.0	55.0
Minimum	29	27	27
Maximum	86	78	86
<b>Age Group, n (%)</b>			
< 65 years	158 ( 77.1%)	161 ( 75.6%)	319 ( 76.3%)
>= 65 years	47 ( 22.9%)	52 ( 24.4%)	99 ( 23.7%)
< 50 years	55 ( 26.8%)	63 ( 29.6%)	118 ( 28.2%)
>= 50 and <65 years	103 ( 50.2%)	98 ( 46.0%)	201 ( 48.1%)
>= 65 years	47 ( 22.9%)	52 ( 24.4%)	99 ( 23.7%)
<b>Sex, n (%)</b>			
Male	2 ( 1.0%)	3 ( 1.4%)	5 ( 1.2%)
Female	203 ( 99.0%)	210 ( 98.6%)	413 ( 98.8%)
<b>If Female, Childbearing Potential, n (%)</b>			
N	203	210	413
Yes	23 ( 11.3%)	25 ( 11.9%)	48 ( 11.6%)
No	180 ( 88.7%)	183 ( 87.1%)	363 ( 87.9%)
Missing	0	2 ( 1.0%)	2 ( 0.5%)

[a] Not reported indicates local regulators did not allow collection of race or ethnicity information.

[b] BMI is calculated as  $BMI (kg/m^2) = (weight \text{ in kg}) / (height \text{ in m})^2$ . [c] Based on Du Bois formula  $0.007184 \times weight(kg)^{0.425} \times height(cm)^{0.725}$ .

[d] Creatinine clearance is derived by using Cockcroft-Gault Equation, which may deviate from the value collected by the site at screening.

[e] Normal: Bilirubin (BILI)  $\leq$  ULN and Aspartate transaminase (AST)  $\leq$  ULN; Mild Hepatic Impairment (HI): 1) BILI  $\leq$  ULN and AST  $>$  ULN or 2) ULN  $<$  BILI  $\leq$  1.5x ULN; Moderate HI: 1.5x ULN  $<$  BILI  $\leq$  3x ULN; Severe HI: BILI  $>$  3x ULN.

[f] Collected only if required per local guidelines for participants receiving capecitabine.

[g] Baseline UGT1A1 includes 2 participants with samples after C1D1 (7 and 49 days after C1D1 respectively); Other includes \*1|\*36, \*1|\*37 and

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.3.1: Demographics and Baseline Characteristics  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
<b>Race, n (%)</b>			
American Indian or Alaska Native	0	0	0
Asian	7 ( 3.4%)	5 ( 2.3%)	12 ( 2.9%)
Black or African American	7 ( 3.4%)	8 ( 3.8%)	15 ( 3.6%)
Multiple	0	1 ( 0.5%)	1 ( 0.2%)
Native Hawaiian or Other Pacific Islander	0	1 ( 0.5%)	1 ( 0.2%)
White	143 ( 69.8%)	143 ( 67.1%)	286 ( 68.4%)
Other	0	3 ( 1.4%)	3 ( 0.7%)
Not Reported [a]	48 ( 23.4%)	52 ( 24.4%)	100 ( 23.9%)
<b>Ethnicity, n (%)</b>			
Hispanic or Latino	4 ( 2.0%)	10 ( 4.7%)	14 ( 3.3%)
Not Hispanic or Latino	169 ( 82.4%)	161 ( 75.6%)	330 ( 78.9%)
Unknown	12 ( 5.9%)	8 ( 3.8%)	20 ( 4.8%)
Not Reported [a]	19 ( 9.3%)	27 ( 12.7%)	46 ( 11.0%)
Missing	1 ( 0.5%)	7 ( 3.3%)	8 ( 1.9%)
<b>Region, n (%)</b>			
North America	80 ( 39.0%)	83 ( 39.0%)	163 ( 39.0%)
Europe	125 ( 61.0%)	130 ( 61.0%)	255 ( 61.0%)

[a] Not reported indicates local regulators did not allow collection of race or ethnicity information.

[b] BMI is calculated as  $BMI (kg/m^2) = (weight \text{ in kg}) / (height \text{ in m})^2$ . [c] Based on Du Bois formula  $0.007184 \times weight(kg)^{0.425} \times height(cm)^{0.725}$ .

[d] Creatinine clearance is derived by using Cockcroft-Gault Equation, which may deviate from the value collected by the site at screening.

[e] Normal: Bilirubin (BILI)  $\leq$  ULN and Aspartate transaminase (AST)  $\leq$  ULN; Mild Hepatic Impairment (HI): 1) BILI  $\leq$  ULN and AST  $>$  ULN or 2) ULN  $<$  BILI  $\leq$  1.5x ULN; Moderate HI: 1.5x ULN  $<$  BILI  $\leq$  3x ULN; Severe HI: BILI  $>$  3x ULN.

[f] Collected only if required per local guidelines for participants receiving capecitabine.

[g] Baseline UGT1A1 includes 2 participants with samples after C1D1 (7 and 49 days after C1D1 respectively); Other includes \*1|\*36, \*1|\*37 and

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.3.1: Demographics and Baseline Characteristics  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
<b>Baseline Weight (kg)</b>			
N	203	212	415
Mean (SD)	69.0 (15.80)	67.1 (15.07)	68.0 (15.44)
Median	67.0	63.8	65.6
Minimum	40.1	35.6	35.6
Maximum	160.1	125.9	160.1
<b>Baseline Height (cm)</b>			
N	194	199	393
Mean (SD)	163.8 (6.91)	163.2 (6.82)	163.5 (6.86)
Median	163.3	163.0	163.0
Minimum	144.8	145.5	144.8
Maximum	185.0	180.3	185.0
<b>Baseline Body Mass Index (BMI) (kg/m<sup>2</sup>) [b]</b>			
N	194	199	393
Mean (SD)	25.8 (5.79)	25.2 (5.33)	25.5 (5.56)
Median	25.0	24.2	24.6
Minimum	16.3	15.8	15.8
Maximum	61.0	44.8	61.0

[a] Not reported indicates local regulators did not allow collection of race or ethnicity information.

[b] BMI is calculated as BMI (kg/m<sup>2</sup>) = (weight in kg) / (height in m)<sup>2</sup>. [c] Based on Du Bois formula 0.007184 x weight(kg)<sup>0.425</sup> x height(cm)<sup>0.725</sup>.

[d] Creatinine clearance is derived by using Cockcroft-Gault Equation, which may deviate from the value collected by the site at screening.

[e] Normal: Bilirubin (BILI) &lt;= ULN and Aspartate transaminase (AST) &lt;= ULN; Mild Hepatic Impairment (HI): 1) BILI &lt;= ULN and AST &gt; ULN or 2) ULN &lt; BILI &lt;= 1.5x ULN; Moderate HI: 1.5x ULN &lt; BILI &lt;= 3x ULN; Severe HI: BILI &gt; 3x ULN.

[f] Collected only if required per local guidelines for participants receiving capecitabine.

[g] Baseline UGT1A1 includes 2 participants with samples after C1D1 (7 and 49 days after C1D1 respectively); Other includes \*1|\*36, \*1|\*37 and

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.1.3.1: Demographics and Baseline Characteristics  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
<b>Baseline Body Surface Area (m2) [c]</b>			
N	194	199	393
Mean (SD)	1.7 (0.18)	1.7 (0.19)	1.7 (0.18)
Median	1.7	1.7	1.7
Minimum	1.4	1.2	1.2
Maximum	2.5	2.3	2.5
<b>Baseline Creatinine Clearance (Cockcroft-Gault Equation; mL/min)[d]</b>			
N	203	213	416
Mean (SD)	97.6 (34.11)	99.7 (34.53)	98.7 (34.30)
Median	92.9	94.9	93.4
Minimum	31.7	31.5	31.5
Maximum	282.1	263.1	282.1
<b>Baseline Renal Function, n (%) [d]</b>			
Creatinine clearance < 30 mL/min	0	0	0
30 mL/min <= Creatinine clearance < 60 mL/min	15 ( 7.3%)	17 ( 8.0%)	32 ( 7.7%)
60 mL/min <= Creatinine clearance < 90 mL/min	78 ( 38.0%)	77 ( 36.2%)	155 ( 37.1%)
Creatinine clearance >= 90 mL/min	110 ( 53.7%)	119 ( 55.9%)	229 ( 54.8%)
Missing	2 ( 1.0%)	0	2 ( 0.5%)

[a] Not reported indicates local regulators did not allow collection of race or ethnicity information.  
 [b] BMI is calculated as BMI (kg/m<sup>2</sup>) = (weight in kg) / (height in m)<sup>2</sup>. [c] Based on Du Bois formula 0.007184 x weight(kg)<sup>0.425</sup> x height(cm)<sup>0.725</sup>.  
 [d] Creatinine clearance is derived by using Cockcroft-Gault Equation, which may deviate from the value collected by the site at screening.  
 [e] Normal: Bilirubin (BILI) <= ULN and Aspartate transaminase (AST) <= ULN; Mild Hepatic Impairment (HI): 1) BILI <= ULN and AST > ULN or 2) ULN < BILI <= 1.5x ULN; Moderate HI: 1.5x ULN < BILI <= 3x ULN; Severe HI: BILI > 3x ULN.  
 [f] Collected only if required per local guidelines for participants receiving capecitabine.  
 [g] Baseline UGT1A1 includes 2 participants with samples after C1D1 (7 and 49 days after C1D1 respectively); Other includes \*1|\*36, \*1|\*37 and

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.3.1: Demographics and Baseline Characteristics  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
<b>Baseline Hepatic Function, n (%)</b> [e]			
Normal	88 ( 42.9%)	83 ( 39.0%)	171 ( 40.9%)
Mild	113 ( 55.1%)	126 ( 59.2%)	239 ( 57.2%)
Moderate	2 ( 1.0%)	4 ( 1.9%)	6 ( 1.4%)
Severe	0	0	0
Missing	2 ( 1.0%)	0	2 ( 0.5%)
<b>Baseline Blood Uracil Level (ng/mL) [f]</b>			
N		8	8
Mean (SD)		5758.0 (16260.23)	5758.0 (16260.23)
Median		9.3	9.3
Minimum		6.5	6.5
Maximum		46000.0	46000.0
<b>UGT1A1 Genotype (SG only), n (%)</b> [g]			
*1 *1	78 ( 38.0%)		78 ( 18.7%)
*1 *28	91 ( 44.4%)		91 ( 21.8%)
*28 *28	17 ( 8.3%)		17 ( 4.1%)
Other	2 ( 1.0%)		2 ( 0.5%)
Missing/Not Done	17 ( 8.3%)		17 ( 4.1%)

[a] Not reported indicates local regulators did not allow collection of race or ethnicity information.

[b] BMI is calculated as  $BMI (kg/m^2) = (weight \text{ in } kg) / (height \text{ in } m)^2$ . [c] Based on Du Bois formula  $0.007184 \times weight(kg)^{0.425} \times height(cm)^{0.725}$ .

[d] Creatinine clearance is derived by using Cockcroft-Gault Equation, which may deviate from the value collected by the site at screening.

[e] Normal: Bilirubin (BILI)  $\leq$  ULN and Aspartate transaminase (AST)  $\leq$  ULN; Mild Hepatic Impairment (HI): 1) BILI  $\leq$  ULN and AST  $>$  ULN or 2) ULN  $<$  BILI  $\leq$  1.5x ULN; Moderate HI: 1.5x ULN  $<$  BILI  $\leq$  3x ULN; Severe HI: BILI  $>$  3x ULN.

[f] Collected only if required per local guidelines for participants receiving capecitabine.

[g] Baseline UGT1A1 includes 2 participants with samples after C1D1 (7 and 49 days after C1D1 respectively); Other includes \*1|\*36, \*1|\*37 and

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.4.2: Enrollment by Randomization Stratum and Treatment  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
<b>Prior Chemotherapy Regimens for Treatment of Metastatic Disease, n (%)</b> [a]			
2 Lines	96 ( 46.8%)	102 ( 47.9%)	198 ( 47.4%)
3-4 Lines	109 ( 53.2%)	111 ( 52.1%)	220 ( 52.6%)
<b>Visceral Metastasis, n (%)</b> [a]			
Yes	196 ( 95.6%)	205 ( 96.2%)	401 ( 95.9%)
No	9 ( 4.4%)	8 ( 3.8%)	17 ( 4.1%)
<b>Endocrine Therapy in the Metastatic Setting for at Least 6 Months, n (%)</b> [a]			
Yes	183 ( 89.3%)	185 ( 86.9%)	368 ( 88.0%)
No	22 ( 10.7%)	28 ( 13.1%)	50 ( 12.0%)
<b>Treatment of Physician Choice, n (%)</b> [b]			
Eribulin		130 ( 61.0%)	130 ( 31.1%)
Capecitabine		22 ( 10.3%)	22 ( 5.3%)
Vinorelbine		61 ( 28.6%)	61 ( 14.6%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] The randomization strata data are based on IXRS.

[b] As specified by the investigator prior to randomization

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.4.1: Baseline Disease Characteristics  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Total (N = 418)
Screening ECOG Performance Status, n (%)			
0: Normal Activity	90 ( 43.9%)	99 ( 46.5%)	189 ( 45.2%)
1: Symptoms but Ambulatory	115 ( 56.1%)	114 ( 53.5%)	229 ( 54.8%)
Baseline Target/Non-Target Liver Lesion per RECIST1.1 per Local Investigator Review (LIR), n (%)			
Yes	181 ( 88.3%)	187 ( 87.8%)	368 ( 88.0%)
No	24 ( 11.7%)	26 ( 12.2%)	50 ( 12.0%)
Time from Metastatic Disease Diagnosis to Randomization (months) [a]			
N	205	213	418
Mean (SD)	53.7 (33.85)	52.3 (32.30)	53.0 (33.04)
Median	46.0	46.6	46.2
Minimum	6.7	3.0	3.0
Maximum	216.2	248.8	248.8

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] Time from metastatic disease to randomization is defined as number of days divided by 30.4375 from date of confirmed metastatic disease to date of randomization.

For screening ECOG performance status, if screening ECOG was not available, C1D1 ECOG was used.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.4.3: Breast Cancer History  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Total (N = 418)
<b>Breast Cancer Tumor Stage, n (%)</b>			
TX	76 ( 37.1%)	71 ( 33.3%)	147 ( 35.2%)
T0	16 ( 7.8%)	10 ( 4.7%)	26 ( 6.2%)
T1	18 ( 8.8%)	33 ( 15.5%)	51 ( 12.2%)
T2	33 ( 16.1%)	44 ( 20.7%)	77 ( 18.4%)
T3	20 ( 9.8%)	14 ( 6.6%)	34 ( 8.1%)
T4	26 ( 12.7%)	20 ( 9.4%)	46 ( 11.0%)
Missing	16 ( 7.8%)	21 ( 9.9%)	37 ( 8.9%)
<b>Breast Cancer Node Stage, n (%)</b>			
NX	84 ( 41.0%)	76 ( 35.7%)	160 ( 38.3%)
N0	28 ( 13.7%)	38 ( 17.8%)	66 ( 15.8%)
N1	43 ( 21.0%)	39 ( 18.3%)	82 ( 19.6%)
N2	19 ( 9.3%)	23 ( 10.8%)	42 ( 10.0%)
N3	10 ( 4.9%)	15 ( 7.0%)	25 ( 6.0%)
Missing	21 ( 10.2%)	22 ( 10.3%)	43 ( 10.3%)
<b>Breast Cancer Metastasis Stage, n (%)</b>			
M0	0	1 ( 0.5%)	1 ( 0.2%)
M1	198 ( 96.6%)	208 ( 97.7%)	406 ( 97.1%)
Missing	7 ( 3.4%)	4 ( 1.9%)	11 ( 2.6%)
<b>HER2 Status, n (%)</b>			
Positive	0	2 ( 0.9%)	2 ( 0.5%)
Negative	205 (100.0%)	211 ( 99.1%)	416 ( 99.5%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] Positive Estrogen Receptor or Progesterone Receptor are defined as  $\geq 1\%$ .

[b] Positive denotes patient is either BRCA1 positive or BRCA2 positive. Negative denotes patient is both BRCA1 negative and BRCA2 negative.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.4.3: Breast Cancer History  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Total (N = 418)
<b>Method of HER2 Status Diagnosis, n (%)</b>			
IHC	149 ( 72.7%)	156 ( 73.2%)	305 ( 73.0%)
0	72 ( 35.1%)	85 ( 39.9%)	157 ( 37.6%)
1+	64 ( 31.2%)	53 ( 24.9%)	117 ( 28.0%)
2+	12 ( 5.9%)	17 ( 8.0%)	29 ( 6.9%)
Missing	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
FISH	12 ( 5.9%)	15 ( 7.0%)	27 ( 6.5%)
Positive	0	1 ( 0.5%)	1 ( 0.2%)
Negative	12 ( 5.9%)	14 ( 6.6%)	26 ( 6.2%)
FISH and IHC	44 ( 21.5%)	40 ( 18.8%)	84 ( 20.1%)
Negative and 0	2 ( 1.0%)	8 ( 3.8%)	10 ( 2.4%)
Negative and 1+	5 ( 2.4%)	2 ( 0.9%)	7 ( 1.7%)
Negative and 2+	35 ( 17.1%)	29 ( 13.6%)	64 ( 15.3%)
Negative and 3+	2 ( 1.0%)	1 ( 0.5%)	3 ( 0.7%)
Missing Method	0	2 ( 0.9%)	2 ( 0.5%)
<b>Estrogen Receptor Status, n (%)</b>			
<1%	1 ( 0.5%)	4 ( 1.9%)	5 ( 1.2%)
Between 1-10%	8 ( 3.9%)	10 ( 4.7%)	18 ( 4.3%)
>10%	196 ( 95.6%)	195 ( 91.5%)	391 ( 93.5%)
Missing	0	4 ( 1.9%)	4 ( 1.0%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] Positive Estrogen Receptor or Progesterone Receptor are defined as  $\geq 1\%$ .

[b] Positive denotes patient is either BRCA1 positive or BRCA2 positive. Negative denotes patient is both BRCA1 negative and BRCA2 negative.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.4.3: Breast Cancer History  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Total (N = 418)
<b>Progesterone Receptor Status, n (%)</b>			
<1%	75 ( 36.6%)	81 ( 38.0%)	156 ( 37.3%)
Between 1-10%	37 ( 18.0%)	34 ( 16.0%)	71 ( 17.0%)
>10%	93 ( 45.4%)	93 ( 43.7%)	186 ( 44.5%)
Missing	0	5 ( 2.3%)	5 ( 1.2%)
<b>Subjects with Either Estrogen Receptor or Progesterone Receptor Positive, n (%) [a]</b>			
Yes	205 (100.0%)	209 ( 98.1%)	414 ( 99.0%)
No	0	0	0
Missing	0	4 ( 1.9%)	4 ( 1.0%)
<b>Subjects with Both Estrogen Receptor and Progesterone Receptor Positive, n (%) [a]</b>			
Yes	129 ( 62.9%)	123 ( 57.7%)	252 ( 60.3%)
No	76 ( 37.1%)	87 ( 40.8%)	163 ( 39.0%)
Missing	0	3 ( 1.4%)	3 ( 0.7%)
<b>BRCA1 Mutation Status, n (%)</b>			
Negative	91 ( 44.4%)	93 ( 43.7%)	184 ( 44.0%)
Positive	3 ( 1.5%)	3 ( 1.4%)	6 ( 1.4%)
Inconclusive	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
Unknown	36 ( 17.6%)	37 ( 17.4%)	73 ( 17.5%)
Not Done	72 ( 35.1%)	76 ( 35.7%)	148 ( 35.4%)
Missing	2 ( 1.0%)	3 ( 1.4%)	5 ( 1.2%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] Positive Estrogen Receptor or Progesterone Receptor are defined as  $\geq 1\%$ .

[b] Positive denotes patient is either BRCA1 positive or BRCA2 positive. Negative denotes patient is both BRCA1 negative and BRCA2 negative.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.4.3: Breast Cancer History  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Total (N = 418)
<b>BRCA2 Mutation Status, n (%)</b>			
Negative	84 ( 41.0%)	94 ( 44.1%)	178 ( 42.6%)
Positive	18 ( 8.8%)	3 ( 1.4%)	21 ( 5.0%)
Inconclusive	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
Unknown	29 ( 14.1%)	35 ( 16.4%)	64 ( 15.3%)
Not Done	71 ( 34.6%)	77 ( 36.2%)	148 ( 35.4%)
Missing	2 ( 1.0%)	3 ( 1.4%)	5 ( 1.2%)
<b>BRCA1 / BRCA2 Mutation Status, n (%) [b]</b>			
Negative	83 ( 40.5%)	90 ( 42.3%)	173 ( 41.4%)
Positive	19 ( 9.3%)	6 ( 2.8%)	25 ( 6.0%)
Missing	103 ( 50.2%)	117 ( 54.9%)	220 ( 52.6%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] Positive Estrogen Receptor or Progesterone Receptor are defined as  $\geq 1\%$ .

[b] Positive denotes patient is either BRCA1 positive or BRCA2 positive. Negative denotes patient is both BRCA1 negative and BRCA2 negative.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.5.1: Prior Systemic Anticancer Therapy  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
<b>Number of Prior Systemic Anti-cancer Regimens</b>			
N	205	213	418
Mean (SD)	7.0 (2.28)	7.0 (2.16)	7.0 (2.22)
Median	7.0	7.0	7.0
Min, Max	3, 15	3, 16	3, 16
<b>Number of Prior Systemic Anti-cancer Regimens by Category, n(%)</b>			
3	4 ( 2.0%)	2 ( 0.9%)	6 ( 1.4%)
4	19 ( 9.3%)	18 ( 8.5%)	37 ( 8.9%)
>4	182 ( 88.8%)	193 ( 90.6%)	375 ( 89.7%)
<b>Number of Prior Systemic Chemotherapy Regimen</b>			
N	205	213	418
Mean (SD)	3.5 (1.10)	3.6 (1.07)	3.6 (1.08)
Median	3.0	4.0	3.0
Min, Max	1, 7	2, 7	1, 7
<b>Number of Prior Systemic Chemotherapy Regimen by Category, n(%)</b>			
1	1 ( 0.5%)	0	1 ( 0.2%)
2	35 ( 17.1%)	34 ( 16.0%)	69 ( 16.5%)
3	71 ( 34.6%)	72 ( 33.8%)	143 ( 34.2%)
4	60 ( 29.3%)	69 ( 32.4%)	129 ( 30.9%)
>4	38 ( 18.5%)	38 ( 17.8%)	76 ( 18.2%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] Number of prior lines of chemotherapy for treatment of metastatic disease is counted as the number of chemotherapy regimens in the metastatic setting. It is based on the collected data from prior anti-cancer therapy eCRF and not from site reported prior number of chemotherapy regimens for treatment of metastatic disease in IXRS, which may include the additional line from neo/adjuvant chemotherapy if participant early relapsed.

[b] Early relapse is defined as relapse to metastatic disease within 1 year of the end of neo/adjuvant chemotherapy. participants without chemotherapy in

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.5.1: Prior Systemic Anticancer Therapy  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
Number of Prior Lines of Chemotherapy in Metastatic Setting, n(%) [a]			
1	6 ( 2.9%)	2 ( 0.9%)	8 ( 1.9%)
>1	199 ( 97.1%)	211 ( 99.1%)	410 ( 98.1%)
Number of Prior Lines of Chemotherapy in Metastatic Setting, n(%) [a]			
<=2	96 ( 46.8%)	112 ( 52.6%)	208 ( 49.8%)
>=3	109 ( 53.2%)	101 ( 47.4%)	210 ( 50.2%)
Number of Prior Lines of Chemotherapy in Metastatic Setting, n(%) [a]			
1	6 ( 2.9%)	2 ( 0.9%)	8 ( 1.9%)
2	90 ( 43.9%)	110 ( 51.6%)	200 ( 47.8%)
3	71 ( 34.6%)	63 ( 29.6%)	134 ( 32.1%)
4	34 ( 16.6%)	38 ( 17.8%)	72 ( 17.2%)
5	3 ( 1.5%)	0	3 ( 0.7%)
6	1 ( 0.5%)	0	1 ( 0.2%)
Number of Prior Lines of Chemotherapy in Metastatic Setting [a]			
N	205	213	418
Mean (SD)	3 (0.9)	3 (0.8)	3 (0.8)
Median	3	2	3
Min, Max	1, 6	1, 4	1, 6

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] Number of prior lines of chemotherapy for treatment of metastatic disease is counted as the number of chemotherapy regimens in the metastatic setting. It is based on the collected data from prior anti-cancer therapy eCRF and not from site reported prior number of chemotherapy regimens for treatment of metastatic disease in IXRS, which may include the additional line from neo/adjuvant chemotherapy if participant early relapsed.

[b] Early relapse is defined as relapse to metastatic disease within 1 year of the end of neo/adjuvant chemotherapy. participants without chemotherapy in

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.5.1: Prior Systemic Anticancer Therapy  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
Early Relapse, n(%) [b]			
Yes	13 ( 6.3%)	17 ( 8.0%)	30 ( 7.2%)
No	185 ( 90.2%)	192 ( 90.1%)	377 ( 90.2%)
Unknown	7 ( 3.4%)	4 ( 1.9%)	11 ( 2.6%)
Prior CDK 4/6 use, n(%)			
Yes	205 (100.0%)	213 (100.0%)	418 (100.0%)
Prior CDK 4/6 use, n(%) [c]			
<=12 months	118 ( 57.6%)	128 ( 60.1%)	246 ( 58.9%)
>12 months	82 ( 40.0%)	82 ( 38.5%)	164 ( 39.2%)
Missing	5 ( 2.4%)	3 ( 1.4%)	8 ( 1.9%)
Chemotherapy in neo/adjuvant setting, n(%)			
Yes	125 ( 61.0%)	145 ( 68.1%)	270 ( 64.6%)
No	80 ( 39.0%)	68 ( 31.9%)	148 ( 35.4%)
Reason for Administration of Anti-cancer Treatment, n(%)			
Neoadjuvant	45 ( 22.0%)	53 ( 24.9%)	98 ( 23.4%)
Adjuvant	136 ( 66.3%)	160 ( 75.1%)	296 ( 70.8%)
Advanced/Metastatic	205 (100.0%)	213 (100.0%)	418 (100.0%)
Other	6 ( 2.9%)	6 ( 2.8%)	12 ( 2.9%)
Unknown	2 ( 1.0%)	1 ( 0.5%)	3 ( 0.7%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] Number of prior lines of chemotherapy for treatment of metastatic disease is counted as the number of chemotherapy regimens in the metastatic setting. It is based on the collected data from prior anti-cancer therapy eCRF and not from site reported prior number of chemotherapy regimens for treatment of metastatic disease in IXRS, which may include the additional line from neo/adjuvant chemotherapy if participant early relapsed.

[b] Early relapse is defined as relapse to metastatic disease within 1 year of the end of neo/adjuvant chemotherapy. participants without chemotherapy in

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.5.1: Prior Systemic Anticancer Therapy  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Total (N=418)
Best Response for the Last Therapy Before Entering Study, n(%)			
CR	0	1 ( 0.5%)	1 ( 0.2%)
PR	24 ( 11.7%)	18 ( 8.5%)	42 ( 10.0%)
SD	47 ( 22.9%)	38 ( 17.8%)	85 ( 20.3%)
PD	87 ( 42.4%)	101 ( 47.4%)	188 ( 45.0%)
Not Reported/Not Available	38 ( 18.5%)	49 ( 23.0%)	87 ( 20.8%)
Not Applicable	7 ( 3.4%)	4 ( 1.9%)	11 ( 2.6%)
Missing	2 ( 1.0%)	2 ( 0.9%)	4 ( 1.0%)
Time from Last Disease Progression to Randomization (months)			
N	205	212	417
Mean (SD)	1.1 (0.97)	1.2 (1.19)	1.1 (1.09)
Median	0.9	0.9	0.9
Min, Max	0.2, 11.3	0.1, 11.7	0.1, 11.7

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

[a] Number of prior lines of chemotherapy for treatment of metastatic disease is counted as the number of chemotherapy regimens in the metastatic setting. It is based on the collected data from prior anti-cancer therapy eCRF and not from site reported prior number of chemotherapy regimens for treatment of metastatic disease in IXRS, which may include the additional line from neo/adjuvant chemotherapy if participant early relapsed.

[b] Early relapse is defined as relapse to metastatic disease within 1 year of the end of neo/adjuvant chemotherapy. participants without chemotherapy in

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.1.5.2: Prior Systemic Anticancer Therapy by Preferred Drug name  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

Preferred Drug Name	SG (N = 205)	TPC (N = 213)	Total (N = 418)
Subjects with Any Prior Anti-cancer Therapy, n (%)	205 (100.0%)	213 (100.0%)	418 (100.0%)
Palbociclib	176 ( 85.9%)	175 ( 82.2%)	351 ( 84.0%)
Fulvestrant	175 ( 85.4%)	174 ( 81.7%)	349 ( 83.5%)
Capecitabine	164 ( 80.0%)	179 ( 84.0%)	343 ( 82.1%)
Paclitaxel	167 ( 81.5%)	166 ( 77.9%)	333 ( 79.7%)
Letrozole	144 ( 70.2%)	168 ( 78.9%)	312 ( 74.6%)
Cyclophosphamide	151 ( 73.7%)	160 ( 75.1%)	311 ( 74.4%)
Tamoxifen	120 ( 58.5%)	129 ( 60.6%)	249 ( 59.6%)
Exemestane	109 ( 53.2%)	98 ( 46.0%)	207 ( 49.5%)
Docetaxel	79 ( 38.5%)	95 ( 44.6%)	174 ( 41.6%)
Everolimus	88 ( 42.9%)	85 ( 39.9%)	173 ( 41.4%)
Doxorubicin	89 ( 43.4%)	79 ( 37.1%)	168 ( 40.2%)
Epirubicin	57 ( 27.8%)	76 ( 35.7%)	133 ( 31.8%)
Anastrozole	61 ( 29.8%)	49 ( 23.0%)	110 ( 26.3%)
Fluorouracil	47 ( 22.9%)	59 ( 27.7%)	106 ( 25.4%)
Eribulin	53 ( 25.9%)	49 ( 23.0%)	102 ( 24.4%)
Bevacizumab	40 ( 19.5%)	33 ( 15.5%)	73 ( 17.5%)
Gemcitabine	30 ( 14.6%)	34 ( 16.0%)	64 ( 15.3%)
Carboplatin	27 ( 13.2%)	33 ( 15.5%)	60 ( 14.4%)
Abemaciclib	22 ( 10.7%)	34 ( 16.0%)	56 ( 13.4%)
Ribociclib	19 ( 9.3%)	21 ( 9.9%)	40 ( 9.6%)
Alpelisib	16 ( 7.8%)	20 ( 9.4%)	36 ( 8.6%)
Denosumab	18 ( 8.8%)	15 ( 7.0%)	33 ( 7.9%)
Vinorelbine	17 ( 8.3%)	15 ( 7.0%)	32 ( 7.7%)
Paclitaxel Nanoparticle Albumin-Bound	12 ( 5.9%)	19 ( 8.9%)	31 ( 7.4%)
Goserelin Acetate	16 ( 7.8%)	12 ( 5.6%)	28 ( 6.7%)
Goserelin	14 ( 6.8%)	12 ( 5.6%)	26 ( 6.2%)
Pegylated Liposomal Doxorubicin Hydrochloride	15 ( 7.3%)	11 ( 5.2%)	26 ( 6.2%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

Subjects were counted only once for each preferred drug name.

WHO Drug Dictionary (Version BMAR22) was used for coding.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.5.2: Prior Systemic Anticancer Therapy by Preferred Drug name  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

Preferred Drug Name	SG (N = 205)	TPC (N = 213)	Total (N = 418)
Trastuzumab	15 ( 7.3%)	8 ( 3.8%)	23 ( 5.5%)
Vinorelbine Tartrate	13 ( 6.3%)	10 ( 4.7%)	23 ( 5.5%)
Methotrexate	16 ( 7.8%)	6 ( 2.8%)	22 ( 5.3%)
Investigational Drug	7 ( 3.4%)	13 ( 6.1%)	20 ( 4.8%)
Leuprorelin Acetate	8 ( 3.9%)	9 ( 4.2%)	17 ( 4.1%)
Gemcitabine Hydrochloride	7 ( 3.4%)	9 ( 4.2%)	16 ( 3.8%)
Olaparib	6 ( 2.9%)	10 ( 4.7%)	16 ( 3.8%)
Zoledronic Acid	9 ( 4.4%)	7 ( 3.3%)	16 ( 3.8%)
Liposomal Doxorubicin	8 ( 3.9%)	5 ( 2.3%)	13 ( 3.1%)
Pembrolizumab	8 ( 3.9%)	4 ( 1.9%)	12 ( 2.9%)
Pertuzumab	7 ( 3.4%)	4 ( 1.9%)	11 ( 2.6%)
Leuprorelin	5 ( 2.4%)	5 ( 2.3%)	10 ( 2.4%)
Cisplatin	4 ( 2.0%)	5 ( 2.3%)	9 ( 2.2%)
Talazoparib	8 ( 3.9%)	1 ( 0.5%)	9 ( 2.2%)
Epirubicin Hydrochloride	2 ( 1.0%)	6 ( 2.8%)	8 ( 1.9%)
Gonadorelin Diacetate Tetrahydrate	3 ( 1.5%)	5 ( 2.3%)	8 ( 1.9%)
Liposomal Doxorubicin Hydrochloride	2 ( 1.0%)	5 ( 2.3%)	7 ( 1.7%)
Triptorelin	2 ( 1.0%)	5 ( 2.3%)	7 ( 1.7%)
Atezolizumab	3 ( 1.5%)	3 ( 1.4%)	6 ( 1.4%)
Doxorubicin Hydrochloride	1 ( 0.5%)	4 ( 1.9%)	5 ( 1.2%)
Etoposide	1 ( 0.5%)	4 ( 1.9%)	5 ( 1.2%)
Inavolisib	3 ( 1.5%)	2 ( 0.9%)	5 ( 1.2%)
Megestrol Acetate	3 ( 1.5%)	2 ( 0.9%)	5 ( 1.2%)
Neratinib	2 ( 1.0%)	3 ( 1.4%)	5 ( 1.2%)
Tamoxifen Citrate	2 ( 1.0%)	3 ( 1.4%)	5 ( 1.2%)
Tesetaxel	2 ( 1.0%)	3 ( 1.4%)	5 ( 1.2%)
Balixafortide	3 ( 1.5%)	1 ( 0.5%)	4 ( 1.0%)
Eribulin Mesilate	1 ( 0.5%)	3 ( 1.4%)	4 ( 1.0%)
Ixabepilone	2 ( 1.0%)	2 ( 0.9%)	4 ( 1.0%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

Subjects were counted only once for each preferred drug name.

WHO Drug Dictionary (Version BMAR22) was used for coding.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.5.2: Prior Systemic Anticancer Therapy by Preferred Drug name  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

Preferred Drug Name	SG (N = 205)	TPC (N = 213)	Total (N = 418)
Selective Estrogen Receptor Modulators	2 ( 1.0%)	2 ( 0.9%)	4 ( 1.0%)
Taselisib	1 ( 0.5%)	3 ( 1.4%)	4 ( 1.0%)
Trastuzumab Emtansine	3 ( 1.5%)	1 ( 0.5%)	4 ( 1.0%)
Alisertib	0	3 ( 1.4%)	3 ( 0.7%)
Avelumab	2 ( 1.0%)	1 ( 0.5%)	3 ( 0.7%)
Durvalumab	1 ( 0.5%)	2 ( 0.9%)	3 ( 0.7%)
Enzalutamide	1 ( 0.5%)	2 ( 0.9%)	3 ( 0.7%)
Gedatolisib	1 ( 0.5%)	2 ( 0.9%)	3 ( 0.7%)
Gonadotropin Releasing Hormone Analogues	1 ( 0.5%)	2 ( 0.9%)	3 ( 0.7%)
Ipatasertib	1 ( 0.5%)	2 ( 0.9%)	3 ( 0.7%)
Ipilimumab	3 ( 1.5%)	0	3 ( 0.7%)
Lenvatinib	3 ( 1.5%)	0	3 ( 0.7%)
Mitomycin	0	3 ( 1.4%)	3 ( 0.7%)
Nivolumab	3 ( 1.5%)	0	3 ( 0.7%)
Other Antineoplastic Agents	2 ( 1.0%)	1 ( 0.5%)	3 ( 0.7%)
Pegylated Liposomal Doxorubicin	1 ( 0.5%)	2 ( 0.9%)	3 ( 0.7%)
Sapanisertib	2 ( 1.0%)	1 ( 0.5%)	3 ( 0.7%)
Xentuzumab	1 ( 0.5%)	2 ( 0.9%)	3 ( 0.7%)
Zenocutuzumab	2 ( 1.0%)	1 ( 0.5%)	3 ( 0.7%)
Aromatase Inhibitors	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
Azacitidine	2 ( 1.0%)	0	2 ( 0.5%)
Cirtuzumab	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
Elacestrant	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
Enobosarm	0	2 ( 0.9%)	2 ( 0.5%)
Entinostat	0	2 ( 0.9%)	2 ( 0.5%)
Placebo	2 ( 1.0%)	0	2 ( 0.5%)
Rintodestrant	0	2 ( 0.9%)	2 ( 0.5%)
Sgn Livla	0	2 ( 0.9%)	2 ( 0.5%)
Trastuzumab Deruxtecan	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

Subjects were counted only once for each preferred drug name.

WHO Drug Dictionary (Version BMAR22) was used for coding.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/t-prior-ac-pt-exg.sas v9.4 Output file: t-prior-ac-pt-exg.pdf 28FEB2023:11:13

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.5.2: Prior Systemic Anticancer Therapy by Preferred Drug name  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

Preferred Drug Name	SG (N = 205)	TPC (N = 213)	Total (N = 418)
Vincristine	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
Amcenestrant	0	1 ( 0.5%)	1 ( 0.2%)
Amilomer	0	1 ( 0.5%)	1 ( 0.2%)
Anti-Estrogens	0	1 ( 0.5%)	1 ( 0.2%)
Azd 9496	1 ( 0.5%)	0	1 ( 0.2%)
Bay 1125976	1 ( 0.5%)	0	1 ( 0.2%)
Bazedoxifene	0	1 ( 0.5%)	1 ( 0.2%)
Bevacizumab Awwb	0	1 ( 0.5%)	1 ( 0.2%)
Bicalutamide	1 ( 0.5%)	0	1 ( 0.2%)
Bisphosphonates	0	1 ( 0.5%)	1 ( 0.2%)
Bleomycin	1 ( 0.5%)	0	1 ( 0.2%)
Brilanestrant	0	1 ( 0.5%)	1 ( 0.2%)
Buparlisib	0	1 ( 0.5%)	1 ( 0.2%)
Calcium	0	1 ( 0.5%)	1 ( 0.2%)
Calcium Folate	0	1 ( 0.5%)	1 ( 0.2%)
Capivasertib	1 ( 0.5%)	0	1 ( 0.2%)
Dasatinib	1 ( 0.5%)	0	1 ( 0.2%)
Derazantinib	1 ( 0.5%)	0	1 ( 0.2%)
Elimusertib	0	1 ( 0.5%)	1 ( 0.2%)
Estradiol	0	1 ( 0.5%)	1 ( 0.2%)
Ethiodized Oil	0	1 ( 0.5%)	1 ( 0.2%)
Ezabenlimab	1 ( 0.5%)	0	1 ( 0.2%)
Folinic Acid	0	1 ( 0.5%)	1 ( 0.2%)
Gene Therapy	0	1 ( 0.5%)	1 ( 0.2%)
Gonadotropin-Releasing Hormones	1 ( 0.5%)	0	1 ( 0.2%)
Ibandronic Acid	1 ( 0.5%)	0	1 ( 0.2%)
Lucitanib	1 ( 0.5%)	0	1 ( 0.2%)
Lurbinectedin	1 ( 0.5%)	0	1 ( 0.2%)
Medroxyprogesterone	1 ( 0.5%)	0	1 ( 0.2%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

Subjects were counted only once for each preferred drug name.

WHO Drug Dictionary (Version BMAR22) was used for coding.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.1.5.2: Prior Systemic Anticancer Therapy by Preferred Drug name  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

Preferred Drug Name	SG (N = 205)	TPC (N = 213)	Total (N = 418)
Megestrol	0	1 ( 0.5%)	1 ( 0.2%)
Methotrexate Sodium	1 ( 0.5%)	0	1 ( 0.2%)
Mitoxantrone	1 ( 0.5%)	0	1 ( 0.2%)
Mitoxantrone Hydrochloride	1 ( 0.5%)	0	1 ( 0.2%)
Molibresib	1 ( 0.5%)	0	1 ( 0.2%)
Nintedanib	1 ( 0.5%)	0	1 ( 0.2%)
Octreotide Acetate	0	1 ( 0.5%)	1 ( 0.2%)
Other Vaccines	1 ( 0.5%)	0	1 ( 0.2%)
Pamidronate Disodium	1 ( 0.5%)	0	1 ( 0.2%)
Pml4	1 ( 0.5%)	0	1 ( 0.2%)
Ribociclib Succinate	0	1 ( 0.5%)	1 ( 0.2%)
Rucaparib	1 ( 0.5%)	0	1 ( 0.2%)
Stn-Klh Vaccine	0	1 ( 0.5%)	1 ( 0.2%)
Talazoparib Tosylate	0	1 ( 0.5%)	1 ( 0.2%)
Talimogene Laherparepvec	0	1 ( 0.5%)	1 ( 0.2%)
Temozolomide	0	1 ( 0.5%)	1 ( 0.2%)
Toremifene	1 ( 0.5%)	0	1 ( 0.2%)
Trametinib	1 ( 0.5%)	0	1 ( 0.2%)
Vincristine Sulfate	1 ( 0.5%)	0	1 ( 0.2%)

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

Subjects were counted only once for each preferred drug name.

WHO Drug Dictionary (Version BMAR22) was used for coding.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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**Anhang 4-G 2: Behandlungs- und Beobachtungsdauern**

## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.3.1.1.1: Summary of Treatment Exposure  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N = 201)	Eribulin (N = 120)	Capecitabine (N = 22)	Vinorelbine (N = 52)	TPC (N = 194)
<b>Treatment Duration (months) [a]</b>					
N	201	120	22	52	194
Mean	5.61	4.34	4.80	1.94	3.75
SD	5.554	4.005	4.101	1.808	3.717
Median	3.98	3.37	4.53	1.18	2.56
Minimum	0.03	0.03	0.23	0.03	0.03
Maximum	30.36	22.18	12.91	8.05	22.18
>= 3 months, n (%)	120 ( 59.7%)	66 ( 55.0%)	13 ( 59.1%)	12 ( 23.1%)	91 ( 46.9%)
>= 6 months, n (%)	70 ( 34.8%)	33 ( 27.5%)	5 ( 22.7%)	3 ( 5.8%)	41 ( 21.1%)
>= 12 months, n (%)	26 ( 12.9%)	5 ( 4.2%)	2 ( 9.1%)	0	7 ( 3.6%)
>= 24 months, n (%)	3 ( 1.5%)	0	0	0	0
<b>Number of Cycles Received</b>					
N	201	120	22	52	194
Mean	8.31	6.70	7.09	3.12	5.78
SD	7.700	5.509	5.690	2.120	5.105
Median	6.00	5.50	6.50	2.00	4.00
Minimum	1.00	1.00	1.00	1.00	1.00
Maximum	43.00	33.00	19.00	10.00	33.00

[a] Treatment duration (in months) is (date of the last treatment administration - date of the first treatment administration +1)/30.4375.

[b] The dose unit for sacituzumab govitecan is mg/kg. The dose unit for all Treatment of Physician's Choice therapies is mg/m<sup>2</sup>.

[c] The number of durations of infusion interruptions, and duration of each infusion interruption is summarized.

[d] Relative dose intensity (in %) is calculated as cumulative dosage received (mg/kg or mg/m<sup>2</sup>) / total assigned dosage (mg/kg or mg/m<sup>2</sup>) x 100.

Total assigned dosage is calculated based on target dosage and number of doses subjects planned while on treatment.

No dose delay information is collected for the group of Capecitabine.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/t-trtdur-exg.sas v9.4 Output file: t-trtdur-exg.pdf 21APR2023:14:29

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.3.1.1.1: Summary of Treatment Exposure  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N = 201)	Eribulin (N = 120)	Capecitabine (N = 22)	Vinorelbine (N = 52)	TPC (N = 194)
<b>Cumulative Dosage (unit)[b]</b>					
N	199	117	22	51	
Mean	144.65	15.43	193673.35	172.91	
SD	130.773	12.758	163033.753	128.078	
Median	110.11	12.27	184336.41	118.87	
Minimum	9.88	1.22	12828.38	14.70	
Maximum	620.14	67.47	548503.56	524.89	
<b>Duration of Infusion Interruptions (hours)[c]</b>					
N	2	0		0	
Mean	0.85				
SD	0.141				
Median	0.85				
Minimum	0.75				
Maximum	0.95				
<b>Number of Subjects with Dose Reductions, n (%)</b>					
Any	70 ( 34.8%)	49 ( 40.8%)	6 ( 27.3%)	20 ( 38.5%)	75 ( 38.7%)
1	52 ( 25.9%)	40 ( 33.3%)	4 ( 18.2%)	16 ( 30.8%)	60 ( 30.9%)
2	17 ( 8.5%)	7 ( 5.8%)	2 ( 9.1%)	3 ( 5.8%)	12 ( 6.2%)
3	0	0	0	1 ( 1.9%)	1 ( 0.5%)
>3	1 ( 0.5%)	2 ( 1.7%)	0	0	2 ( 1.0%)

[a] Treatment duration (in months) is (date of the last treatment administration - date of the first treatment administration +1)/30.4375.

[b] The dose unit for sacituzumab govitecan is mg/kg. The dose unit for all Treatment of Physician's Choice therapies is mg/m<sup>2</sup>.

[c] The number of durations of infusion interruptions, and duration of each infusion interruption is summarized.

[d] Relative dose intensity (in %) is calculated as cumulative dosage received (mg/kg or mg/m<sup>2</sup>) / total assigned dosage (mg/kg or mg/m<sup>2</sup>) x 100.

Total assigned dosage is calculated based on target dosage and number of doses subjects planned while on treatment.

No dose delay information is collected for the group of Capecitabine.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/t-trtdur-exg.sas v9.4 Output file: t-trtdur-exg.pdf 21APR2023:14:29

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.3.1.1.1: Summary of Treatment Exposure  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N = 201)	Eribulin (N = 120)	Capecitabine (N = 22)	Vinorelbine (N = 52)	TPC (N = 194)
<b>Time to First Dose Reduction (months)</b>					
N	70	49	6	20	75
Mean	2.40	2.30	1.61	0.78	1.84
SD	2.269	2.441	1.393	0.508	2.124
Median	1.51	1.15	1.18	0.71	0.95
Minimum	0.23	0.03	0.03	0.03	0.03
Maximum	11.60	8.54	3.75	2.37	8.54
<b>Relative Dose Intensity (%) [d]</b>					
N	199	117	22	51	
Mean	91.75	89.82	85.86	89.99	
SD	12.235	15.736	28.386	14.014	
Median	99.29	96.42	90.79	98.00	
Minimum	50.00	14.26	31.39	56.24	
Maximum	106.06	121.55	145.81	105.07	
<b>Relative Dose Intensity, n (%)</b>					
<70%	15 ( 7.5%)	14 ( 11.7%)	4 ( 18.2%)	10 ( 19.2%)	
70% to <90%	50 ( 24.9%)	27 ( 22.5%)	7 ( 31.8%)	7 ( 13.5%)	
90% to <110%	134 ( 66.7%)	75 ( 62.5%)	9 ( 40.9%)	34 ( 65.4%)	
>=110%	0	1 ( 0.8%)	2 ( 9.1%)	0	

[a] Treatment duration (in months) is (date of the last treatment administration - date of the first treatment administration +1)/30.4375.

[b] The dose unit for sacituzumab govitecan is mg/kg. The dose unit for all Treatment of Physician's Choice therapies is mg/m<sup>2</sup>.

[c] The number of durations of infusion interruptions, and duration of each infusion interruption is summarized.

[d] Relative dose intensity (in %) is calculated as cumulative dosage received (mg/kg or mg/m<sup>2</sup>) / total assigned dosage (mg/kg or mg/m<sup>2</sup>) x 100.

Total assigned dosage is calculated based on target dosage and number of doses subjects planned while on treatment.

No dose delay information is collected for the group of Capecitabine.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.2.8: Follow-up Duration of Overall Survival (OS) at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)
Number of Deaths [n (%)]	165 ( 80.5%)	176 ( 82.6%)
Number of Subjects Alive [n (%)]	40 ( 19.5%)	37 ( 17.4%)
Follow-up Duration of OS (months)		
N	205	213
Mean (SD)	15.17 (8.837)	13.41 (9.048)
Median	13.93	10.78
Q1, Q3	8.90, 20.93	5.68, 20.67
Min, Max	0.03, 36.47	0.03, 38.05

The denominator is the number of patients in the ITT Population excluding those assigned to Gemcitabine before randomized for each treatment group.  
OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.  
For patients who are still alive, the last known alive date were used in the descriptive summary statistics.  
For min and max, + indicated participants are censored at last known alive date.  
Final OS data cut is at 01Dec2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
Source: .../germandossier/jan2023/prog/t-os-fud-fos-exg.sas v9.4 Output file: t-os-fud-fos-exg.pdf 12MAY2023:11:14

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.2.2.9: Follow-up Duration of Overall Survival (OS) at Final OS Data  
ITT Population  
Only including participants never dosed, excluding participants pre-selected to Gemcitabine

	SG (N=4)	TPC (N=19)
Number of Deaths [n (%)]	3 ( 75.0%)	17 ( 89.5%)
Number of Subjects Alive [n (%)]	1 ( 25.0%)	2 ( 10.5%)
Follow-up Duration of OS (months)		
N	4	19
Mean (SD)	5.92 (6.593)	7.90 (7.469)
Median	5.27	6.37
Q1, Q3	0.33, 11.52	1.45, 10.35
Min, Max	0.03, 13.11	0.03, 28.52

The denominator is the number of patients in the ITT Population but never dosed excluding participants assigned to Gemcitabine before randomized for each treatment group.

OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

For patients who are still alive, the last known alive date were used in the descriptive summary statistics.

For min and max, + indicated participants are censored at last known alive date.

Final OS data cut is at 01Dec2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/t-os-fud2-fos-exg.sas v9.4 Output file: t-os-fud2-fos-exg.pdf 12MAY2023:11:14

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.1.5: Follow-up Duration of Progression Free Survival (PFS) per BICR for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)
Number of Subjects with Disease Progression or Death [n (%)]	135 ( 65.9%)	142 ( 66.7%)
Number of Subjects Censored [n (%)]	70 ( 34.1%)	71 ( 33.3%)
Follow-up Duration of PFS (months)		
N	205	213
Mean (SD)	5.02 (4.875)	3.44 (3.230)
Median	3.71	2.60
Q1, Q3	1.48, 7.00	1.28, 5.36
Min, Max	0.03, 29.08	0.03, 16.59

PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022. Participants who are still alive by the data cut date without documented disease progression will be censored at their last evaluable tumor assessment. Follow-up duration of PFS is the number of months from randomization date to the death date or disease progression date, which comes first, or date of being censored, if no PFS event.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Table 15.2.5.1: Follow-up Duration for Tumor Assessments  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)
Follow-up Duration of Tumor Assessments (months)		
Total Patients	194	175
Mean (SD)	6.06 (5.387)	4.41 (3.706)
Median	4.40	3.32
Q1, Q3	1.61, 8.25	1.45, 5.78
Min, Max	0.33, 29.08	0.26, 22.70

Follow up duration starts from the randomization date to the last available assessment date on or before the data cut off  
This table includes those participants who have at least one image assessment per BICR on or after randomization date  
Follow-up Duration of Tumor Assessment is the number of months from randomization date to the last available image assessment per BICR before the new anti-cancer therapy.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Table 15.15.1.1.2  
 Summary of Follow-up Duration for EORTC QLQ-C30  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Statistic	SG (N=174)	TPC (N=165)	Overall (N=339)
N	174	165	339
Mean (SD)	6.8 (5.65)	4.7 (3.81)	5.8 (4.94)
95% CI	5.9, 7.6	4.1, 5.3	5.3, 6.3
Median	5.4	3.7	4.3
Q1, Q3	2.6, 8.3	1.8, 6.5	2.1, 7.6
Min, Max	0.0, 30.4	0.3, 22.9	0.0, 30.4

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Follow-up duration is defined as time from start of treatment until final study visit (or date of last questionnaire completion if occurred earlier) in months (days/30.4375). CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician

~~Sacituzumab govitecan (Trodelvy®)~~

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Table 15.15.1.2.2  
 Summary of Follow-up Duration for EQ-5D VAS  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Statistic	SG (N=175)	TPC (N=164)	Overall (N=339)
N	175	163	338
Mean (SD)	6.6 (5.63)	4.8 (3.82)	5.7 (4.93)
95% CI	5.8, 7.5	4.2, 5.4	5.2, 6.3
Median	5.0	3.9	4.3
Q1, Q3	2.6, 8.2	1.8, 6.7	2.1, 7.6
Min, Max	0.0, 30.4	-0.1, 22.9	-0.1, 30.4

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. Follow-up duration is defined as time from start of treatment until final study visit (or date of last questionnaire completion if occurred earlier) in months (days/30.4375). CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Dimensions, Five Dimensions, Five Dimensions, Five Dimensions; SD = Standard Deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

Sacituzumab govitecan (Trodelvy®)

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Table 15.15.1.3.2  
 Summary of Follow-up Duration for PRO-CTCAE  
 Safety Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Statistic	SG (N=201)	TPC (N=194)	Overall (N=395)
N	197	191	388
Mean (SD)	6.4 (5.58)	4.2 (3.84)	5.3 (4.92)
95% CI	5.6, 7.2	3.7, 4.8	4.8, 5.8
Median	5.0	3.1	4.2
Q1, Q3	2.1, 8.1	1.4, 5.9	1.6, 7.3
Min, Max	-0.8, 30.4	-0.2, 22.9	-0.8, 30.4

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. Follow-up duration is defined as time from start of treatment until final study visit (or date of last questionnaire completion if occurred earlier) in months (days/30.4375). CI = Confidence Interval; SD = standard deviation; SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician

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Table 15.3.1.2: Follow-up Duration for Safety  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)
Follow-up Duration for Safety (months)		
N	201	194
Mean (SD)	6.49 (5.509)	4.62 (3.748)
Median	4.96	3.53
Q1, Q3	2.17, 8.18	1.94, 6.24
Min, Max	0.20, 30.36	0.26, 23.16

Follow-up duration is time (months) from first dose date to 30 days after treatment and shortened to death date or last contact if occurred earlier.

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**Anhang 4-G 3: Gesamtüberleben**

## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.2.2: Overall Survival (OS) for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Treatment Comparison
Subjects with Events [n (%)]	145 ( 70.7%)	153 ( 71.8%)	
Subjects without Events (Censored) [n (%)]	60 ( 29.3%)	60 ( 28.2%)	
Median OS (95% CI) [a]	14.1 ( 12.8, 15.5)	11.3 ( 10.1, 12.9)	
Log-rank P-value (Stratified) [b]			0.2060
Stratified Cox Regression Analysis [b]			
Hazard Ratio (Relative to TPC)			0.862
95% CI for Hazard Ratio			(0.686, 1.085)
Kaplan-Meier Estimate of OS Rate (%) (95% CI) [c]			
At 6 Months	83.1 ( 77.2, 87.6)	76.1 ( 69.7, 81.4)	
At 9 Months	75.1 ( 68.5, 80.5)	64.8 ( 57.8, 70.9)	
At 12 Months	60.4 ( 53.2, 66.8)	47.5 ( 40.5, 54.2)	

OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[b] Stratified log-rank test and stratified Cox regression adjusted for stratification factors (IXRS): prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Y/N), and endocrine therapy in the metastatic setting for at least 6 months (Y/N).

[c] OS rate is the proportion of participants alive.

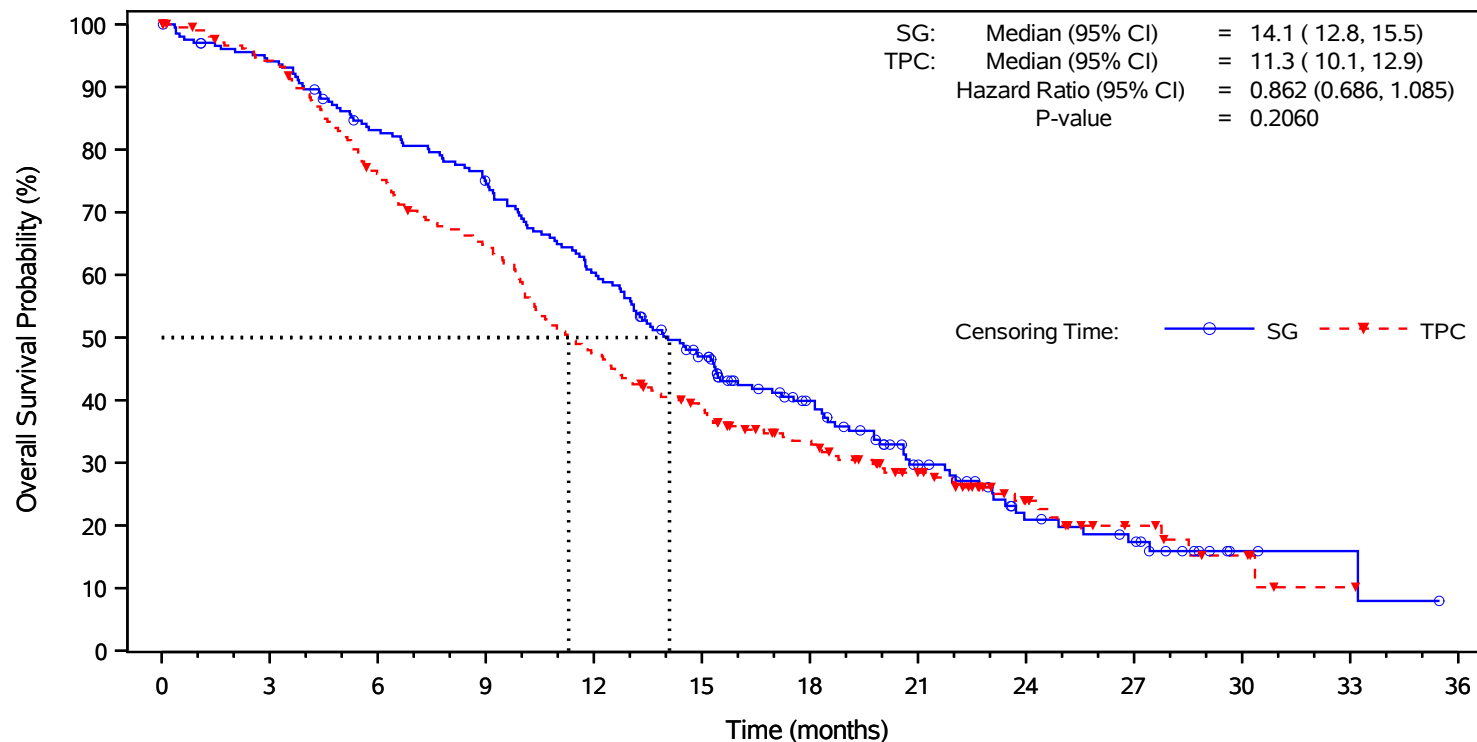
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Figure 15.2.2.2: Kaplan-Meier Estimates of Overall Survival (OS) for Interim Analysis 2 Data  
ITT Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)												
SG	205 (0)	190 (12)	165 (34)	148 (50)	119 (79)	87 (105)	59 (117)	35 (131)	19 (140)	14 (143)	3 (144)	2 (144)	0 (145)
TPC	213 (0)	194 (12)	155 (49)	131 (72)	96 (107)	74 (125)	56 (134)	38 (142)	20 (147)	10 (150)	5 (152)	1 (153)	0 (153)

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.2.7: Overall Survival (OS) at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Treatment Comparison
Subjects with Events [n (%)]	165 ( 80.5%)	176 ( 82.6%)	
Subjects without Events (Censored) [n (%)]	40 ( 19.5%)	37 ( 17.4%)	
Median OS (95% CI) [a]	14.4 ( 12.8, 16.0)	11.2 ( 10.1, 12.8)	
Log-rank P-value (Stratified) [b]			0.1363
Stratified Cox Regression Analysis [b]			
Hazard Ratio (Relative to TPC)			0.850
95% CI for Hazard Ratio			(0.686, 1.053)
Kaplan-Meier Estimate of OS Rate (%) (95% CI) [c]			
At 6 Months	82.8 ( 76.8, 87.3)	75.6 ( 69.2, 80.9)	
At 9 Months	74.8 ( 68.3, 80.3)	64.5 ( 57.6, 70.6)	
At 12 Months	60.5 ( 53.4, 66.8)	47.1 ( 40.1, 53.7)	

The denominator is the number of patients in the ITT Population excluding those assigned to Gemcitabine before randomized for each treatment group. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

[a] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[b] Stratified log-rank test and stratified Cox regression adjusted for stratification factors (IXRS): prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Y/N), and endocrine therapy in the metastatic setting for at least 6 months (Y/N).

[c] OS rate is the proportion of participants alive.

Final OS data cut is at 12/1/2022.

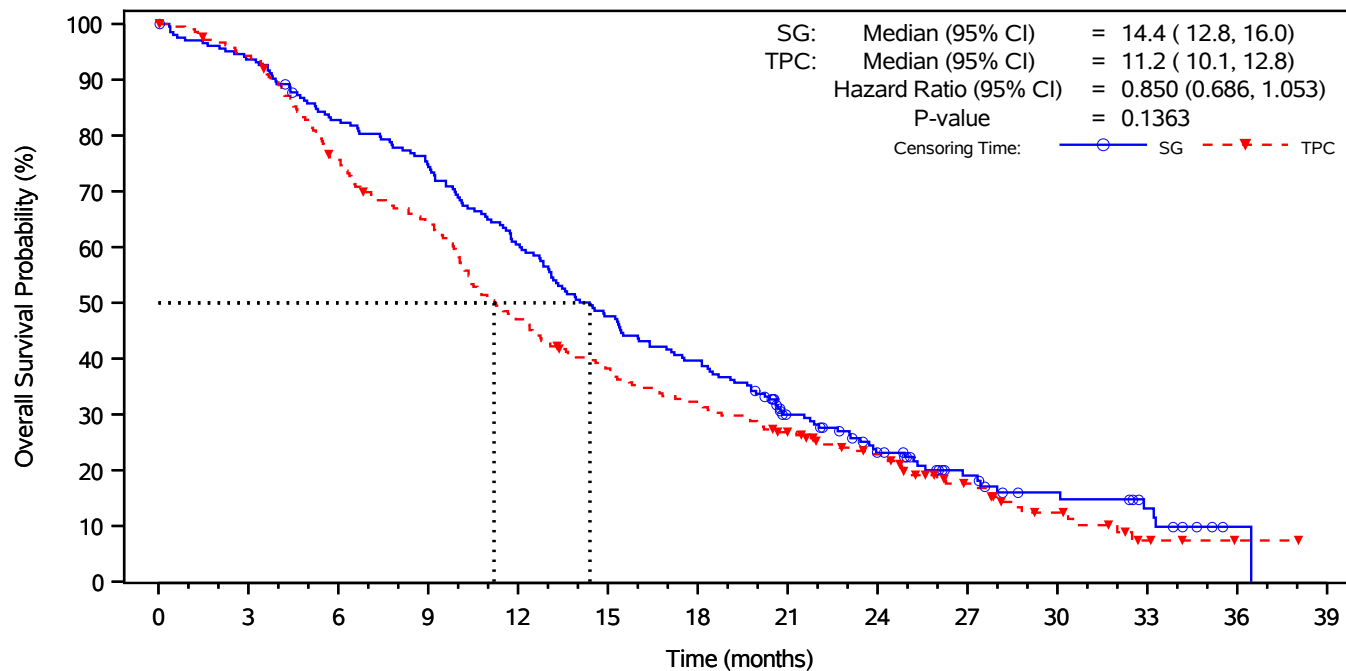
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Figure 15.2.2.3: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine



		No. of Patients Still at Risk (Events)													
		0	3	6	9	12	15	18	21	24	27	30	33	36	39
SG		205 (0)	191 (13)	167 (35)	151 (51)	122 (80)	96 (106)	80 (122)	51 (141)	34 (152)	20 (157)	13 (160)	8 (162)	1 (164)	0 (165)
TPC		213 (0)	198 (12)	157 (51)	133 (74)	97 (110)	77 (128)	65 (140)	51 (151)	38 (158)	22 (166)	12 (172)	4 (176)	1 (176)	0 (176)

Final OS data cut is at 01Dec2022.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.2.1: Overall Survival (OS)  
ITT Population

	SG (N = 272)	TPC (N = 271)	Treatment Comparison
Subjects with Events [n (%)]	214 ( 78.7%)	224 ( 82.7%)	
Subjects without Events (Censored) [n (%)]	58 ( 21.3%)	47 ( 17.3%)	
Median OS (95% CI) [a]	14.5 ( 13.0, 16.0)	11.2 ( 10.2, 12.6)	
Log-rank P-value (Stratified) [b]			0.0133
Stratified Cox Regression Analysis [b]			
Hazard Ratio (Relative to TPC)			0.788
95% CI for Hazard Ratio			(0.652, 0.952)
Kaplan-Meier Estimate of OS Rate (%) (95% CI) [c]			
At 12 Months	60.9 ( 54.8, 66.4)	47.1 ( 41.0, 53.0)	
At 18 Months	39.2 ( 33.4, 45.0)	31.7 ( 26.2, 37.4)	
At 24 Months	25.7 ( 20.5, 31.2)	21.1 ( 16.3, 26.3)	

OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause. Patients without documentation of death are censored on the date they were last known to be alive.

[a] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[b] Stratified log-rank test and stratified Cox regression adjusted for stratification factors (IXRS): prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Y/N), and endocrine therapy in the metastatic setting for at least 6 months (Y/N).

[c] OS rate is the proportion of subjects alive.

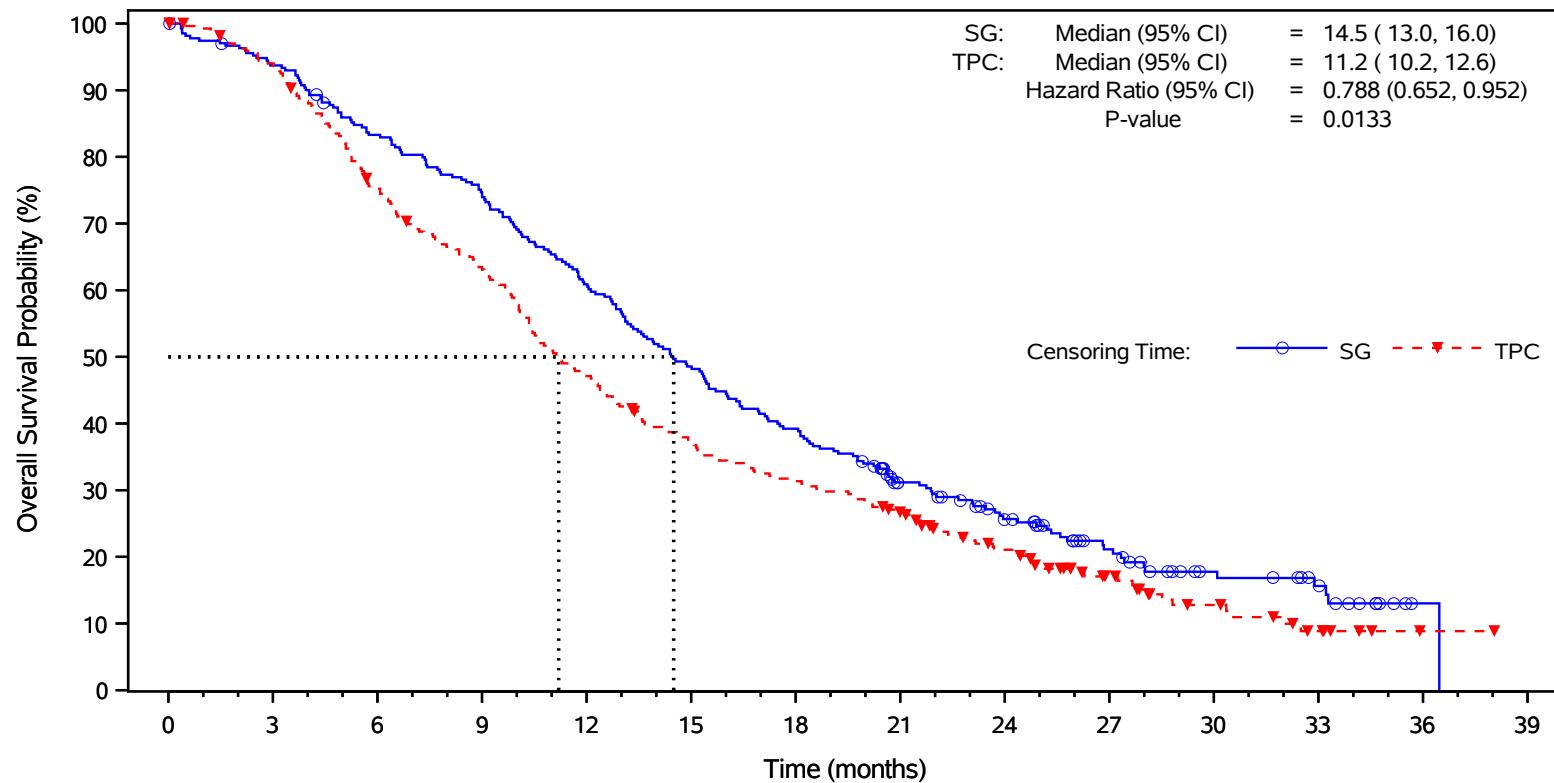
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Figure 15.2.2.1: Kaplan-Meier Estimates of Overall Survival (OS)  
ITT Population



		No. of Patients Still at Risk (Events)													
		0	3	6	9	12	15	18	21	24	27	30	33	36	39
SG		272 (0)	253 (17)	223 (45)	200 (68)	163 (105)	130 (138)	105 (163)	71 (184)	52 (196)	33 (204)	19 (209)	13 (211)	1 (213)	0 (214)
TPC		271 (0)	251 (16)	199 (66)	167 (97)	124 (140)	96 (166)	82 (180)	66 (193)	46 (206)	27 (214)	15 (220)	7 (224)	1 (224)	0 (224)

Data Extracted: 22FEB2023. Data Cut Date: 01DEC2022.  
 Source: .../final\_os/version1/prog/g-km.sas v9.4 Output file: g-os.pdf 07MAR2023:10:11

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.2.6: Overall Survival (OS) by Pre-selected Gemcitabine vs non-Gemcitabine at Final OS Data  
ITT Population

Subgroup/ Statistic	SG (N = 272)	TPC (N = 271)	Treatment Comparison
Interaction p-value [a]			0.3676
<b>Pre-selected Gemcitabine</b>			
Total Patients	67	58	
Patients (%) With Events	49 ( 73.1)	48 ( 82.8)	
Patients (%) Without Events (Censored)	18 ( 26.9)	10 ( 17.2)	
Median OS (months) [b]	15.5	11.1	
95% CI	(11.9, 17.6)	( 8.2, 13.5)	
Hazard Ratio (Relative to TPC) [c]			0.692
95% CI for Hazard Ratio			(0.464, 1.032)
p-value			0.0697
<b>Not pre-selected Gemcitabine</b>			
Total Patients	205	213	
Patients (%) With Events	165 ( 80.5)	176 ( 82.6)	
Patients (%) Without Events (Censored)	40 ( 19.5)	37 ( 17.4)	
Median OS (months) [b]	14.4	11.2	
95% CI	(12.8, 16.0)	(10.1, 12.8)	
Hazard Ratio (Relative to TPC) [c]			0.835
95% CI for Hazard Ratio			(0.675, 1.033)
p-value			0.0971

The denominator is the number of patients in the ITT Population. Patients without documentation of death are censored on their last known alive date. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Final OS data cut is at 12/1/2022.

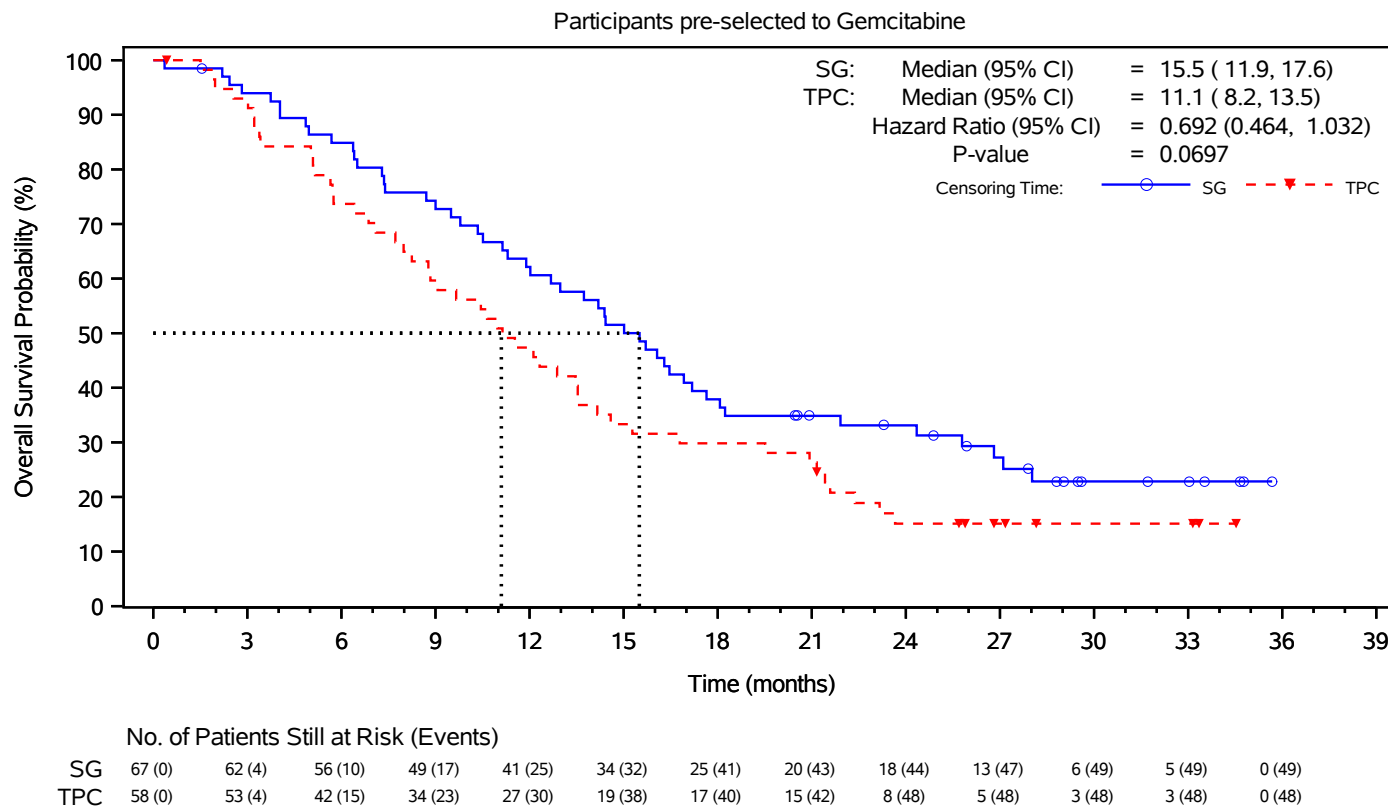
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Figure 15.2.2.4.1: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data by Pre-selected Gemcitabine vs Non-Gemcitabine ITT Population



Final OS data cut is at 01Dec2022.

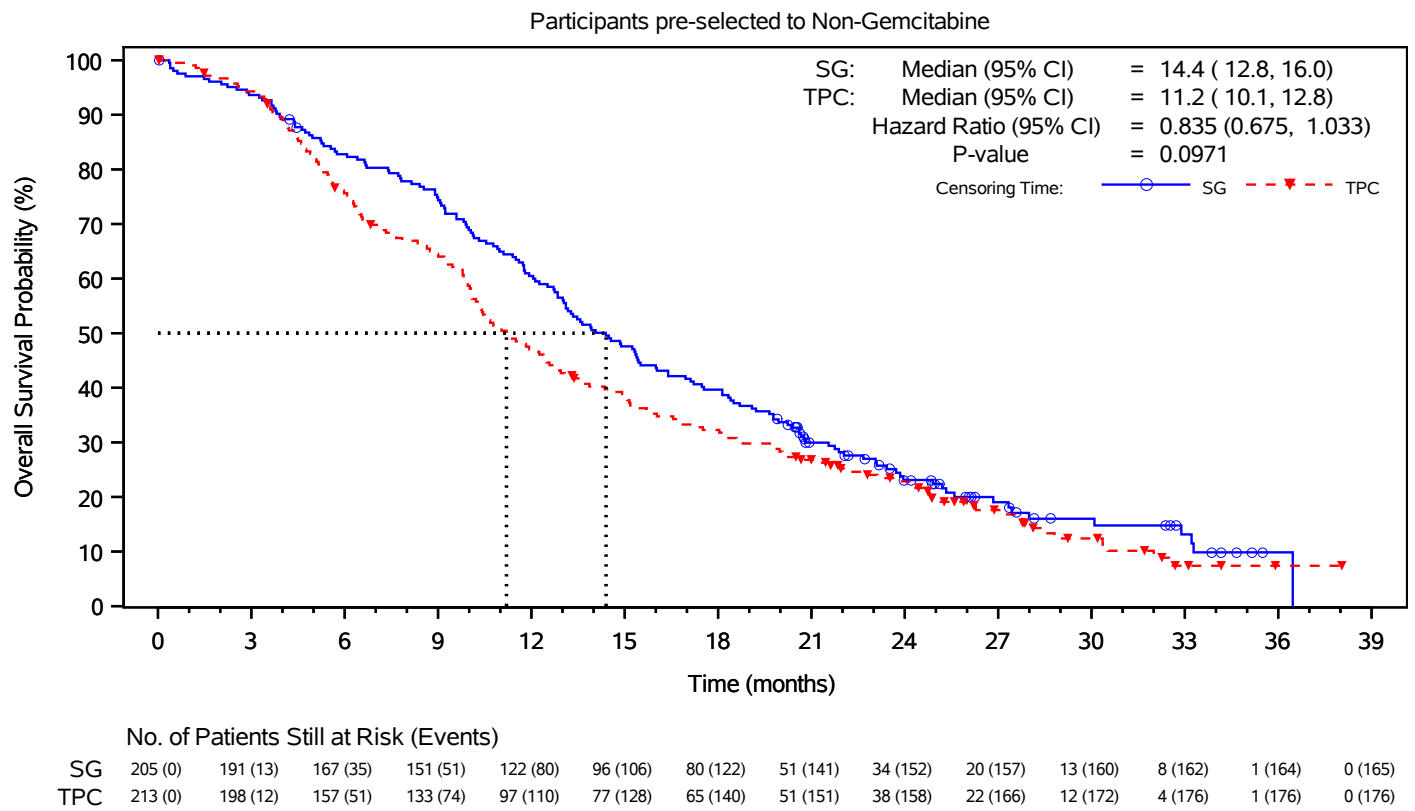
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.2.2.4.1: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data by Pre-selected Gemcitabine vs Non-Gemcitabine ITT Population



Final OS data cut is at 01Dec2022.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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g-os-gem-fos-exg1.pdf 12MAY2023:11:14

**Anhang 4-G 3.1: Subgruppenanalysen**



Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.6563
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	96	102	
Patients (%) With Events	75 ( 78.1%)	84 ( 82.4%)	
Patients (%) Without Events (Censored)	21 ( 21.9%)	18 ( 17.6%)	
Median OS (months) [b]	15.4	12.6	
95% CI	(12.5, 18.5)	(10.4, 15.8)	
Hazard Ratio (Relative to TPC) [c]			0.864
95% CI for Hazard Ratio			(0.632, 1.180)
p-value			0.3560
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	109	111	
Patients (%) With Events	90 ( 82.6%)	92 ( 82.9%)	
Patients (%) Without Events (Censored)	19 ( 17.4%)	19 ( 17.1%)	
Median OS (months) [b]	13.5	10.1	
95% CI	(11.8, 15.4)	(8.3, 12.4)	
Hazard Ratio (Relative to TPC) [c]			0.804
95% CI for Hazard Ratio			(0.601, 1.076)
p-value			0.1416

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Final OS data cut is at 12/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.3186
Stratification factor of visceral metastasis: Yes			
Total Patients	196	205	
Patients (%) With Events	158 ( 80.6%)	171 ( 83.4%)	
Patients (%) Without Events (Censored)	38 ( 19.4%)	34 ( 16.6%)	
Median OS (months) [b]	14.6	10.8	
95% CI	(12.8, 16.4)	(10.0, 12.6)	
Hazard Ratio (Relative to TPC) [c]			0.819
95% CI for Hazard Ratio			(0.659, 1.017)
p-value			0.0696
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	7 ( 77.8%)	5 ( 62.5%)	
Patients (%) Without Events (Censored)	2 ( 22.2%)	3 ( 37.5%)	
Median OS (months) [b]	12.8	15.1	
95% CI	(4.4, NE)	(5.5, NE)	
Hazard Ratio (Relative to TPC) [c]			1.904
95% CI for Hazard Ratio			(0.597, 6.072)
p-value			0.2685

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Final OS data cut is at 12/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.9512
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	183	185	
Patients (%) With Events	146 ( 79.8%)	150 ( 81.1%)	
Patients (%) Without Events (Censored)	37 ( 20.2%)	35 ( 18.9%)	
Median OS (months) [b]	14.6	11.8	
95% CI	(12.8, 17.2)	(10.4, 14.4)	
Hazard Ratio (Relative to TPC) [c]			0.846
95% CI for Hazard Ratio			(0.673, 1.064)
p-value			0.1514
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	22	28	
Patients (%) With Events	19 ( 86.4%)	26 ( 92.9%)	
Patients (%) Without Events (Censored)	3 ( 13.6%)	2 ( 7.1%)	
Median OS (months) [b]	10.8	8.3	
95% CI	(2.9, 15.4)	(4.6, 12.4)	
Hazard Ratio (Relative to TPC) [c]			0.830
95% CI for Hazard Ratio			(0.452, 1.526)
p-value			0.5483

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.7264
Age group: < 65 years			
Total Patients	158	161	
Patients (%) With Events	127 ( 80.4%)	133 ( 82.6%)	
Patients (%) Without Events (Censored)	31 ( 19.6%)	28 ( 17.4%)	
Median OS (months) [b]	13.6	11.8	
95% CI	(12.3, 16.4)	(10.3, 13.7)	
Hazard Ratio (Relative to TPC) [c]			0.849
95% CI for Hazard Ratio			(0.665, 1.083)
p-value			0.1875
Age group: >= 65 years			
Total Patients	47	52	
Patients (%) With Events	38 ( 80.9%)	43 ( 82.7%)	
Patients (%) Without Events (Censored)	9 ( 19.1%)	9 ( 17.3%)	
Median OS (months) [b]	14.9	10.1	
95% CI	(10.1, 19.6)	(6.6, 12.8)	
Hazard Ratio (Relative to TPC) [c]			0.791
95% CI for Hazard Ratio			(0.510, 1.228)
p-value			0.2980

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.9339
<b>Race: White</b>			
Total Patients	143	143	
Patients (%) With Events	114 ( 79.7%)	115 ( 80.4%)	
Patients (%) Without Events (Censored)	29 ( 20.3%)	28 ( 19.6%)	
Median OS (months) [b]	14.4	12.2	
95% CI	(12.1, 17.2)	(10.4, 13.6)	
Hazard Ratio (Relative to TPC) [c]			0.882
95% CI for Hazard Ratio			(0.680, 1.143)
p-value			0.3428
<b>Race: Non-white</b>			
Total Patients	14	18	
Patients (%) With Events	12 ( 85.7%)	14 ( 77.8%)	
Patients (%) Without Events (Censored)	2 ( 14.3%)	4 ( 22.2%)	
Median OS (months) [b]	13.8	10.5	
95% CI	(7.8, 20.6)	(3.7, 24.3)	
Hazard Ratio (Relative to TPC) [c]			0.870
95% CI for Hazard Ratio			(0.396, 1.911)
p-value			0.7278

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.7942
Screening ECOG Status: 0			
Total Patients	90	99	
Patients (%) With Events	68 ( 75.6%)	73 ( 73.7%)	
Patients (%) Without Events (Censored)	22 ( 24.4%)	26 ( 26.3%)	
Median OS (months) [b]	18.1	14.6	
95% CI	(12.8, 20.7)	(10.2, 19.7)	
Hazard Ratio (Relative to TPC) [c]			0.836
95% CI for Hazard Ratio			(0.599, 1.167)
p-value			0.2939
Screening ECOG Status: 1			
Total Patients	115	114	
Patients (%) With Events	97 ( 84.3%)	103 ( 90.4%)	
Patients (%) Without Events (Censored)	18 ( 15.7%)	11 ( 9.6%)	
Median OS (months) [b]	13.1	10.4	
95% CI	(11.0, 15.2)	(8.7, 11.8)	
Hazard Ratio (Relative to TPC) [c]			0.800
95% CI for Hazard Ratio			(0.606, 1.056)
p-value			0.1148

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause. Patients without documentation of death are censored on the date they were last known to be alive.  
[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.  
[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Final OS data cut is at 12/1/2022.

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Study IMMU-132-09Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.1728
Geographic Region: Europe			
Total Patients	125	130	
Patients (%) With Events	97 ( 77.6%)	110 ( 84.6%)	
Patients (%) Without Events (Censored)	28 ( 22.4%)	20 ( 15.4%)	
Median OS (months) [b]	15.3	11.5	
95% CI	(12.8, 18.3)	(9.8, 13.6)	
Hazard Ratio (Relative to TPC) [c]			0.739
95% CI for Hazard Ratio			(0.562, 0.972)
p-value			0.0301
Geographic Region: North America			
Total Patients	80	83	
Patients (%) With Events	68 ( 85.0%)	66 ( 79.5%)	
Patients (%) Without Events (Censored)	12 ( 15.0%)	17 ( 20.5%)	
Median OS (months) [b]	13.5	11.0	
95% CI	(10.8, 15.4)	(9.9, 13.7)	
Hazard Ratio (Relative to TPC) [c]			0.999
95% CI for Hazard Ratio			(0.711, 1.404)
p-value			0.9948

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.1301
Prior CDK treatment duration: <= 12 months			
Total Patients	118	128	
Patients (%) With Events	95 ( 80.5%)	110 ( 85.9%)	
Patients (%) Without Events (Censored)	23 ( 19.5%)	18 ( 14.1%)	
Median OS (months) [b]	14.4	10.5	
95% CI	(12.7, 17.0)	(9.8, 12.4)	
Hazard Ratio (Relative to TPC) [c]			0.708
95% CI for Hazard Ratio			(0.537, 0.934)
p-value			0.0140
Prior CDK treatment duration: > 12 months			
Total Patients	82	82	
Patients (%) With Events	66 ( 80.5%)	64 ( 78.0%)	
Patients (%) Without Events (Censored)	16 ( 19.5%)	18 ( 22.0%)	
Median OS (months) [b]	14.5	12.7	
95% CI	(11.8, 18.1)	(10.0, 18.0)	
Hazard Ratio (Relative to TPC) [c]			0.997
95% CI for Hazard Ratio			(0.706, 1.409)
p-value			0.9862

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.5692
<b>Early relapse: Yes</b>			
Total Patients	13	17	
Patients (%) With Events	11 ( 84.6%)	15 ( 88.2%)	
Patients (%) Without Events (Censored)	2 ( 15.4%)	2 ( 11.8%)	
Median OS (months) [b]	12.8	9.9	
95% CI	(6.7, 18.4)	(3.4, 15.8)	
Hazard Ratio (Relative to TPC) [c]			0.671
95% CI for Hazard Ratio			(0.300, 1.501)
p-value			0.3286
<b>Early relapse: No</b>			
Total Patients	185	192	
Patients (%) With Events	149 ( 80.5%)	159 ( 82.8%)	
Patients (%) Without Events (Censored)	36 ( 19.5%)	33 ( 17.2%)	
Median OS (months) [b]	14.5	11.3	
95% CI	(12.7, 16.4)	(10.1, 13.3)	
Hazard Ratio (Relative to TPC) [c]			0.855
95% CI for Hazard Ratio			(0.683, 1.069)
p-value			0.1694

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.3292
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	181	187	
Patients (%) With Events	149 ( 82.3%)	156 ( 83.4%)	
Patients (%) Without Events (Censored)	32 ( 17.7%)	31 ( 16.6%)	
Median OS (months) [b]	13.9	11.0	
95% CI	(12.3, 15.5)	(10.0, 12.8)	
Hazard Ratio (Relative to TPC) [c]			0.871
95% CI for Hazard Ratio			(0.696, 1.091)
p-value			0.2290
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	26	
Patients (%) With Events	16 ( 66.7%)	20 ( 76.9%)	
Patients (%) Without Events (Censored)	8 ( 33.3%)	6 ( 23.1%)	
Median OS (months) [b]	18.4	12.5	
95% CI	(11.9, NE)	(9.5, 15.3)	
Hazard Ratio (Relative to TPC) [c]			0.603
95% CI for Hazard Ratio			(0.307, 1.183)
p-value			0.1370

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.5788
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	125	145	
Patients (%) With Events	101 ( 80.8%)	119 ( 82.1%)	
Patients (%) Without Events (Censored)	24 ( 19.2%)	26 ( 17.9%)	
Median OS (months) [b]	14.3	10.6	
95% CI	(12.5, 17.0)	(9.9, 12.4)	
Hazard Ratio (Relative to TPC) [c]			0.795
95% CI for Hazard Ratio			(0.609, 1.037)
p-value			0.0891
Chemotherapy in neo/adjuvant setting: No			
Total Patients	80	68	
Patients (%) With Events	64 ( 80.0%)	57 ( 83.8%)	
Patients (%) Without Events (Censored)	16 ( 20.0%)	11 ( 16.2%)	
Median OS (months) [b]	14.4	13.6	
95% CI	(11.1, 18.1)	(9.2, 17.2)	
Hazard Ratio (Relative to TPC) [c]			0.925
95% CI for Hazard Ratio			(0.647, 1.323)
p-value			0.6703

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.6648
Trop2: H-Score < 100			
Total Patients	68	73	
Patients (%) With Events	57 ( 83.8%)	62 ( 84.9%)	
Patients (%) Without Events (Censored)	11 ( 16.2%)	11 ( 15.1%)	
Median OS (months) [b]	14.1	12.4	
95% CI	(11.8, 19.1)	(10.1, 13.9)	
Hazard Ratio (Relative to TPC) [c]			0.904
95% CI for Hazard Ratio			(0.630, 1.298)
p-value			0.5801
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	78	
Patients (%) With Events	59 ( 83.1%)	66 ( 84.6%)	
Patients (%) Without Events (Censored)	12 ( 16.9%)	12 ( 15.4%)	
Median OS (months) [b]	13.6	10.3	
95% CI	(10.8, 16.0)	(7.9, 11.8)	
Hazard Ratio (Relative to TPC) [c]			0.771
95% CI for Hazard Ratio			(0.541, 1.098)
p-value			0.1501

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	42	26	
Patients (%) With Events	31 ( 73.8%)	17 ( 65.4%)	
Patients (%) Without Events (Censored)	11 ( 26.2%)	9 ( 34.6%)	
Median OS (months) [b]	17.2	14.6	
95% CI	(11.8, 22.7)	(9.9, NE)	
Hazard Ratio (Relative to TPC) [c]			1.072
95% CI for Hazard Ratio			(0.590, 1.947)
p-value			0.8180

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause. Patients without documentation of death are censored on the date they were last known to be alive.  
[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.  
[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Final OS data cut is at 12/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.0408
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	19 ( 90.5%)	16 ( 69.6%)	
Patients (%) Without Events (Censored)	2 ( 9.5%)	7 ( 30.4%)	
Median OS (months) [b]	16.4	20.1	
95% CI	(11.4, 22.0)	(10.1, 30.4)	
Hazard Ratio (Relative to TPC) [c]			1.364
95% CI for Hazard Ratio			(0.694, 2.682)
p-value			0.3656
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	128	130	
Patients (%) With Events	100 ( 78.1%)	105 ( 80.8%)	
Patients (%) Without Events (Censored)	28 ( 21.9%)	25 ( 19.2%)	
Median OS (months) [b]	15.3	11.7	
95% CI	(12.7, 19.2)	(10.1, 13.9)	
Hazard Ratio (Relative to TPC) [c]			0.842
95% CI for Hazard Ratio			(0.640, 1.108)
p-value			0.2187

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Final OS data cut is at 12/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.2.3: Overall Survival (OS) by Selected Subgroup at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	56	60	
Patients (%) With Events	46 ( 82.1%)	55 ( 91.7%)	
Patients (%) Without Events (Censored)	10 ( 17.9%)	5 ( 8.3%)	
Median OS (months) [b]	12.9	8.3	
95% CI	(9.6, 14.4)	(6.3, 11.3)	
Hazard Ratio (Relative to TPC) [c]			0.642
95% CI for Hazard Ratio			(0.433, 0.950)
p-value			0.0254

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause.

Patients without documentation of death are censored on the date they were last known to be alive.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Final OS data cut is at 12/1/2022.

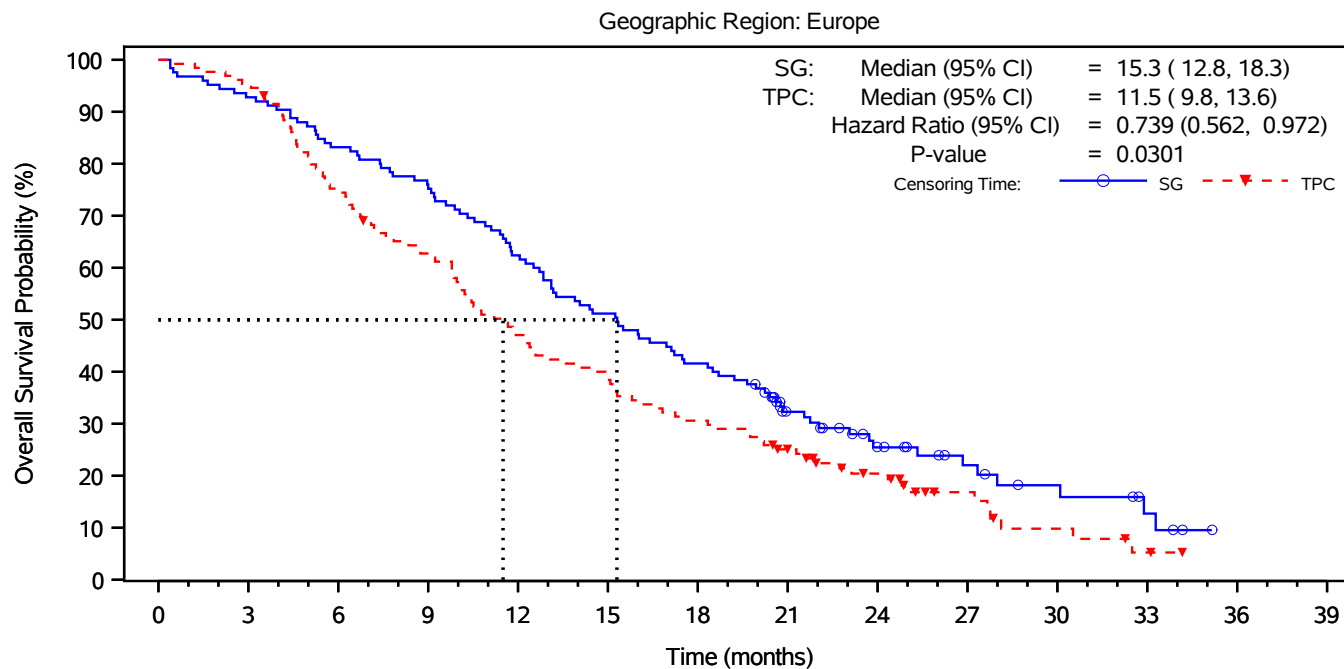
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Gilead Sciences, Inc.  
Study IMMU-132-09

Figure 15.2.2.5.7: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data by Geographic Region  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)													
	0	3	6	9	12	15	18	21	24	27	30	33	36	39
SG	125 (0)	116 (9)	104 (21)	95 (30)	78 (47)	64 (61)	52 (73)	31 (84)	19 (90)	12 (92)	8 (94)	4 (96)	0 (97)	
TPC	130 (0)	124 (6)	97 (32)	80 (48)	60 (68)	49 (79)	39 (89)	29 (96)	19 (101)	10 (104)	5 (108)	2 (110)	0 (110)	

Final OS data cut is at 01Dec2022.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

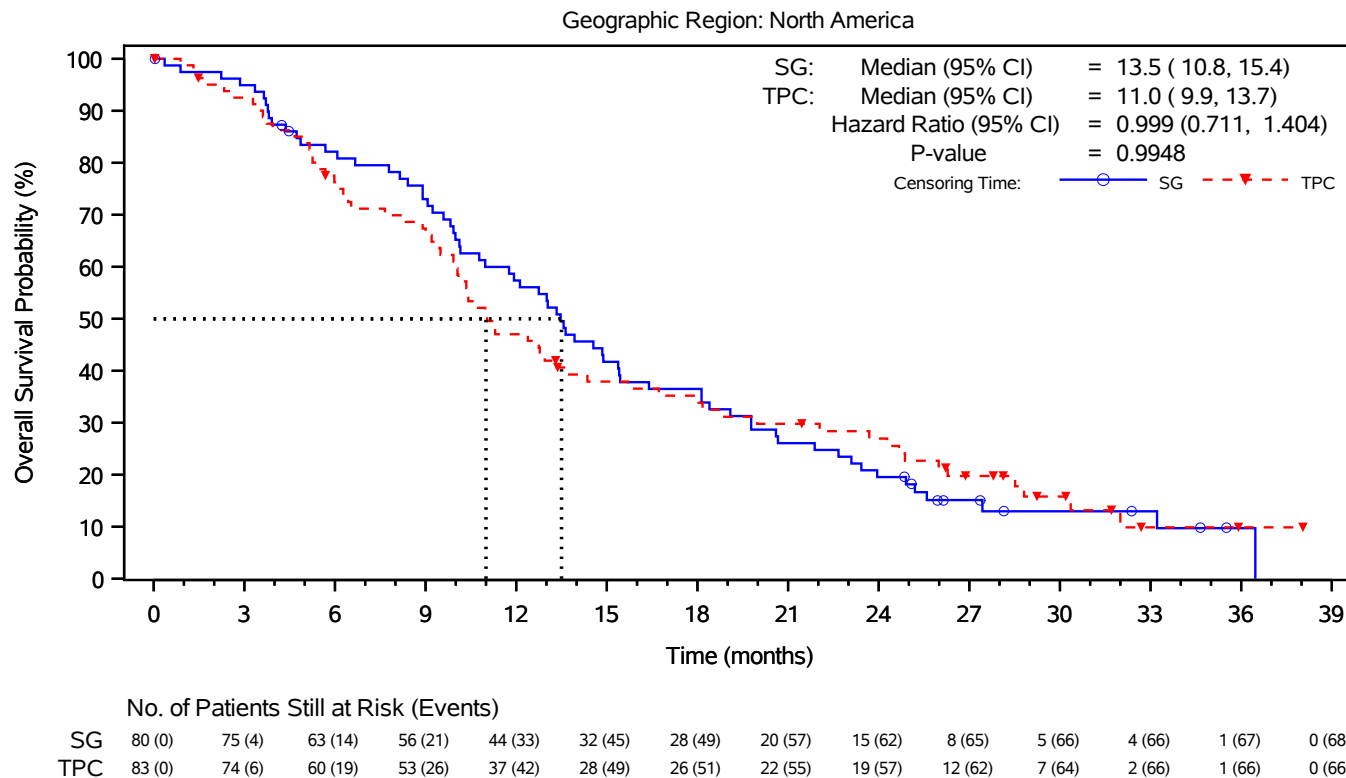
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Figure 15.2.2.5.7: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data by Geographic Region  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine



Final OS data cut is at 01Dec2022.

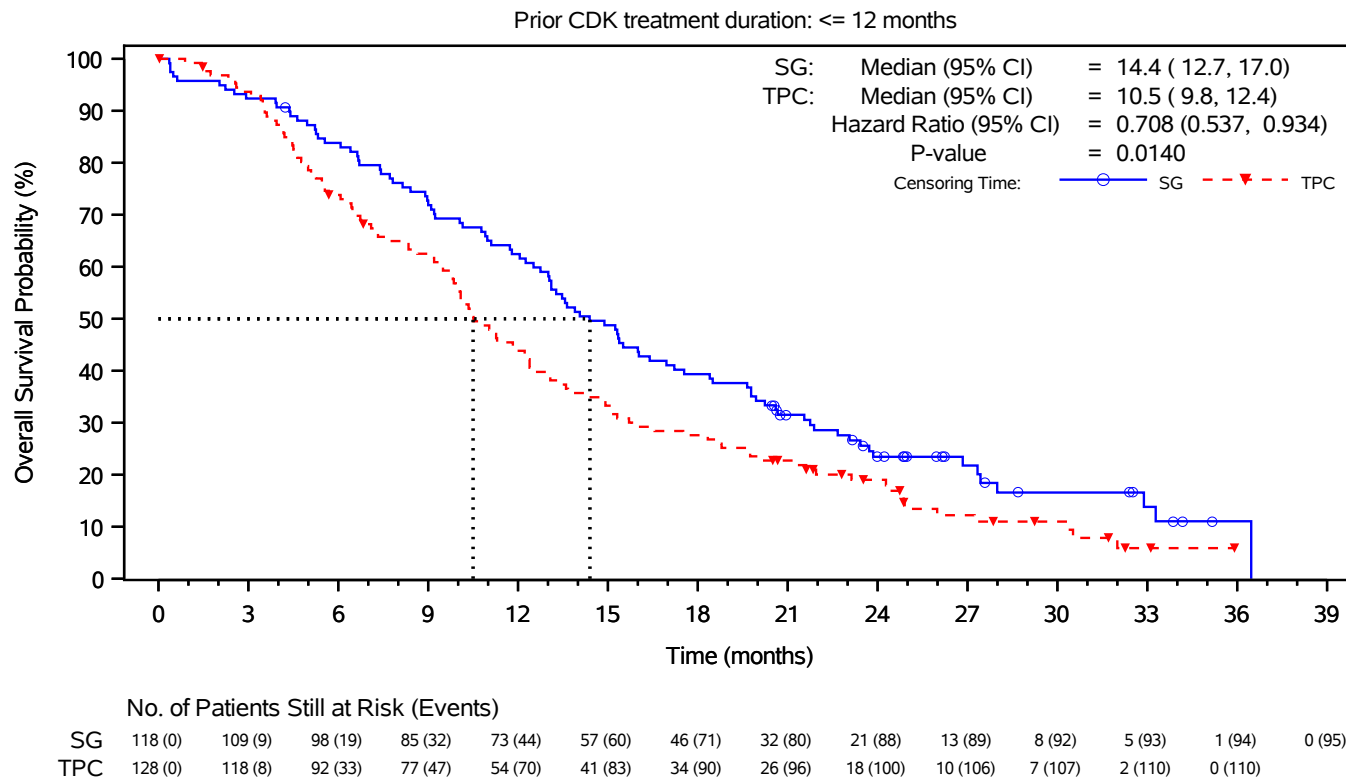
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.2.2.5.8: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data by Prior CDK Treatment Duration  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine



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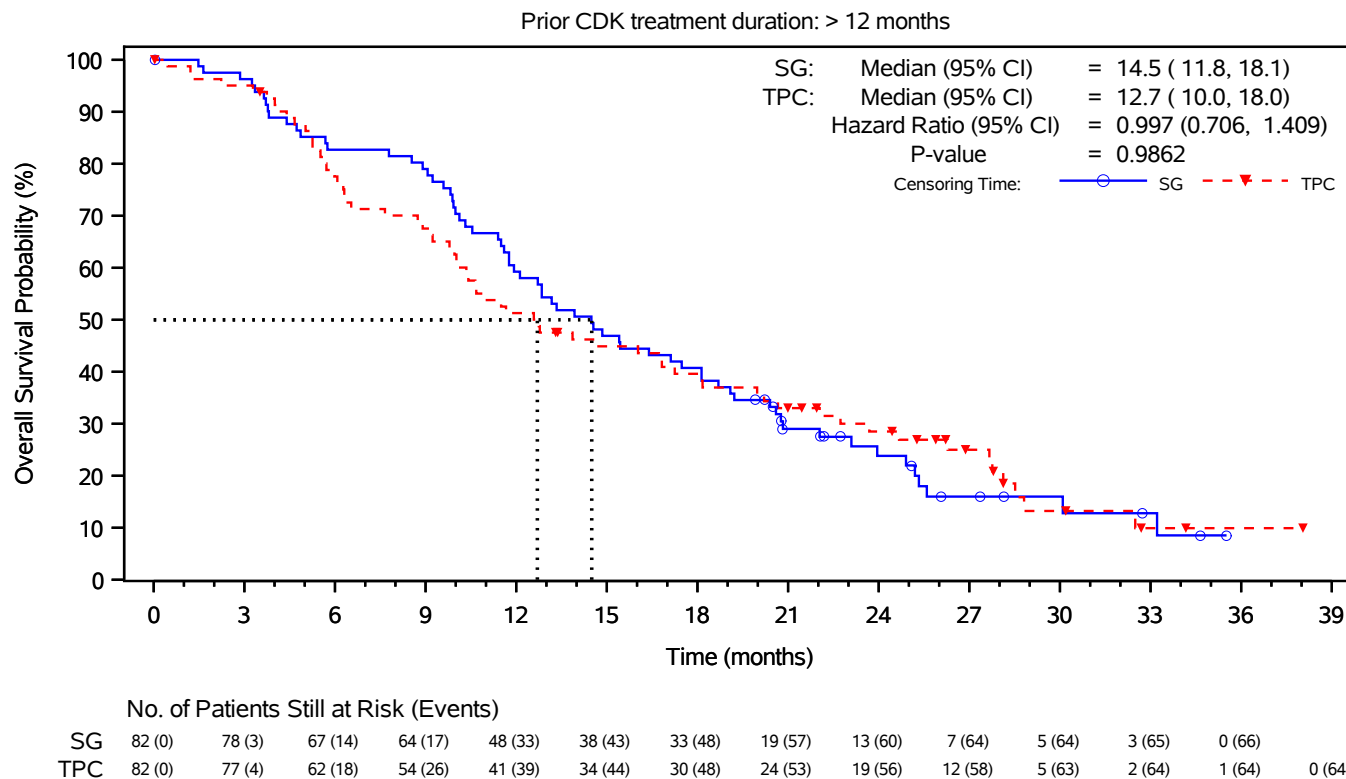
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.2.2.5.8: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data by Prior CDK Treatment Duration  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine



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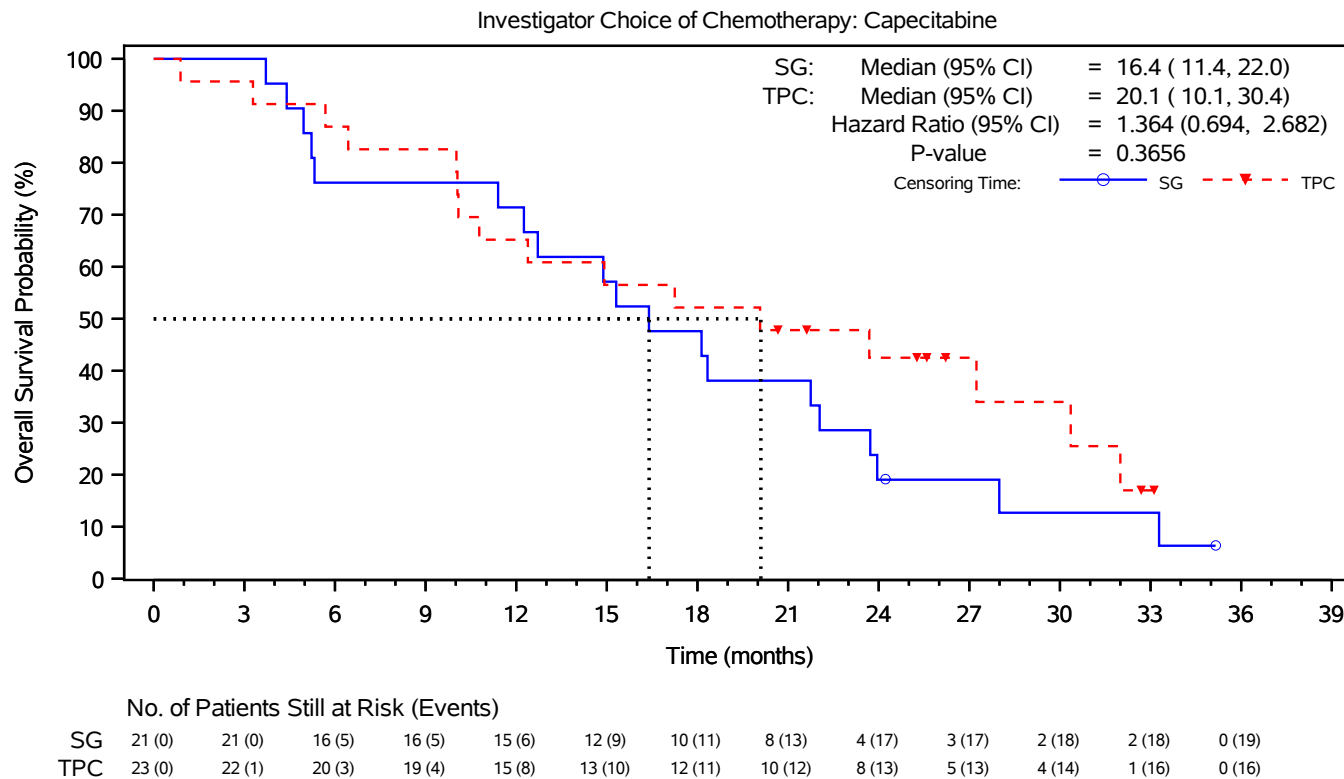
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.2.2.5.13: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data by Investigator Choice of Chemotherapy Prior to Randomization  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine



Final OS data cut is at 01Dec2022.

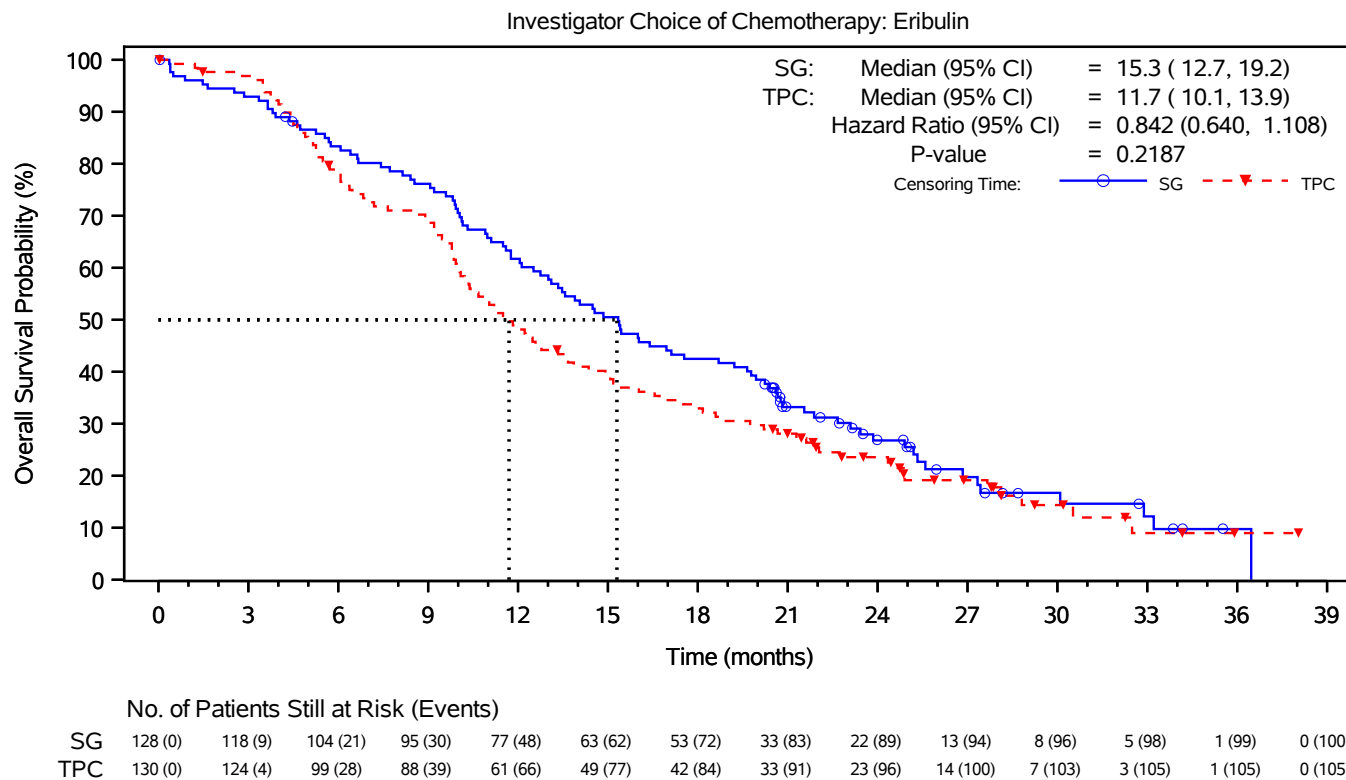
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.2.2.5.13: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data by Investigator Choice of Chemotherapy Prior to Randomization  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine



Final OS data cut is at 01Dec2022.

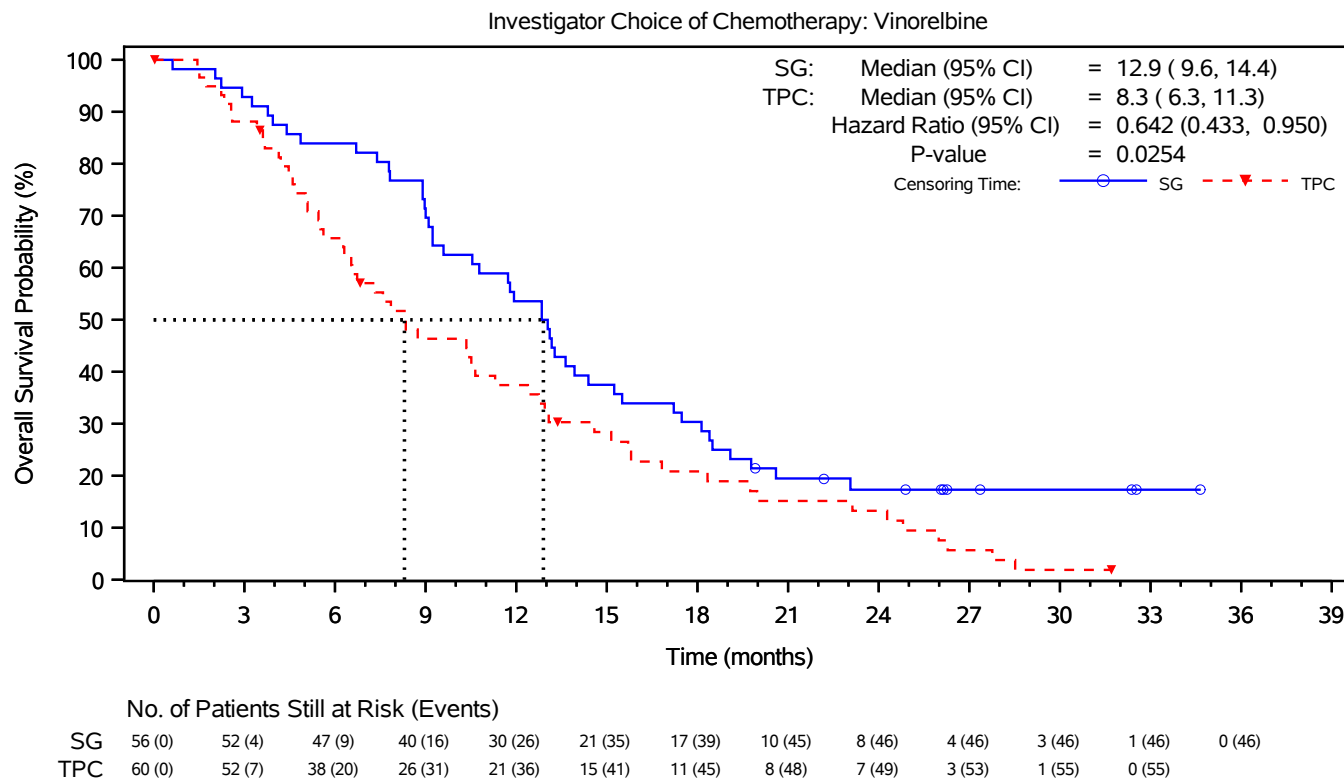
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.2.2.5.13: Kaplan-Meier Estimates of Overall Survival (OS) at Final OS Data by Investigator Choice of Chemotherapy Prior to Randomization  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine



Final OS data cut is at 01Dec2022.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.2.2.10: Overall Survival (OS) by CDK4/6 Duration (<6 vs >=6 months) at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

Subgroup/ Statistic	SG (N = 205)	TPC (N = 213)	Treatment Comparison
<b>Prior CDK treatment duration: &lt;6 months</b>			
Total Subjects	62	66	
OS Events [n (%)]	47 ( 75.8%)	59 ( 89.4%)	
Censored [n (%)]	15 ( 24.2%)	7 ( 10.6%)	
Median OS (months) [a]	15.3	10.4	
95% CI	( 13.0, 19.8)	( 9.0, 13.3)	
Hazard Ratio (Relative to TPC) [b]			0.634
95% CI for Hazard Ratio			(0.432, 0.932)
p-value			0.0195
<b>Prior CDK treatment duration: &gt;=6 months</b>			
Total Subjects	138	144	
OS Events [n (%)]	114 ( 82.6%)	115 ( 79.9%)	
Censored [n (%)]	24 ( 17.4%)	29 ( 20.1%)	
Median OS (months) [a]	13.9	11.2	
95% CI	( 12.1, 16.4)	( 10.1, 13.9)	
Hazard Ratio (Relative to TPC) [b]			0.925
95% CI for Hazard Ratio			(0.713, 1.199)
p-value			0.5543

The denominator is the number of patients in the ITT Population excluding those assigned to Gemcitabine before randomized for each treatment group. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause. Patients without documentation of death are censored on the date they were last known to be alive.  
[a] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.  
[b] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Prior CDK4/6 treatment duration calculated based on the total duration, defined as the sum of consecutive use of CDK4/6.  
Final OS data cut is at 01Dec2022.

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Study IMMU-132-09

Table 15.2.2.11: Overall Survival (OS) by CDK4/6 Duration (<18 vs >=18 months) at Final OS Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

Subgroup/ Statistic	SG (N = 205)	TPC (N = 213)	Treatment Comparison
<b>Prior CDK treatment duration: &lt;18 months</b>			
Total Subjects	153	165	
OS Events [n (%)]	122 ( 79.7%)	139 ( 84.2%)	
Censored [n (%)]	31 ( 20.3%)	26 ( 15.8%)	
Median OS (months) [a]	14.5	10.5	
95% CI	( 12.8, 17.0)	( 9.9, 12.3)	
Hazard Ratio (Relative to TPC) [b]			0.714
95% CI for Hazard Ratio			(0.559, 0.912)
p-value			0.0067
<b>Prior CDK treatment duration: &gt;=18 months</b>			
Total Subjects	47	45	
OS Events [n (%)]	39 ( 83.0%)	35 ( 77.8%)	
Censored [n (%)]	8 ( 17.0%)	10 ( 22.2%)	
Median OS (months) [a]	14.2	16.7	
95% CI	( 10.3, 19.2)	( 6.5, 24.7)	
Hazard Ratio (Relative to TPC) [b]			1.233
95% CI for Hazard Ratio			(0.778, 1.954)
p-value			0.3719

The denominator is the number of patients in the ITT Population excluding those assigned to Gemcitabine before randomized for each treatment group. OS is defined as the number of months (30.4375 days) from date of randomization to the date of death from any cause. Patients without documentation of death are censored on the date they were last known to be alive.  
[a] Median OS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.  
[b] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Prior CDK4/6 treatment duration calculated based on the total duration, defined as the sum of consecutive use of CDK4/6.  
Final OS data cut is at 01Dec2022.

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**Anhang 4-G 4: Progressionsfreies Überleben**

## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.1.1: Progression Free Survival (PFS) per Blinded Independent Central Review (BICR) for Interim Analysis 1 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Treatment Comparison
PFS Events [n (%)]	131 ( 63.9%)	133 ( 62.4%)	
Disease Progression	110 ( 53.7%)	118 ( 55.4%)	
Death	21 ( 10.2%)	15 ( 7.0%)	
Censored [n (%)]	74 ( 36.1%)	80 ( 37.6%)	
Death after Starting New Anti-cancer Therapy	26 ( 12.7%)	20 ( 9.4%)	
Death after 2 or More Consecutive Missing Visits	3 ( 1.5%)	2 ( 0.9%)	
No PD and No Death	37 ( 18.0%)	27 ( 12.7%)	
No Baseline Image or Postbaseline Evaluable	8 ( 3.9%)	31 ( 14.6%)	
Assessment [a]			
Median PFS (95% CI) [b]	5.3 ( 4.1, 6.7)	4.0 ( 3.0, 4.4)	
Log-rank P-value (Stratified) [c]			0.0030
Stratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.687
95% CI for Hazard Ratio			(0.536, 0.881)
Kaplan-Meier Estimate of PFS Rate (%) (95% CI) [d]			
At 6 Months	44.2 ( 36.6, 51.6)	27.9 ( 20.8, 35.4)	
At 9 Months	27.7 ( 20.5, 35.4)	16.6 ( 10.6, 23.8)	
At 12 Months	22.0 ( 15.1, 29.8)	7.0 ( 2.7, 14.0)	

PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 1 has data cut at 1/3/2022.

[a] Censoring due to no baseline or no post baseline evaluable assessment does not include death event before the 2nd scheduled visit postbaseline.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Stratified log-rank test and stratified Cox regression adjusted for stratification factors (IXRS): prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Y/N), and endocrine therapy in the metastatic setting for at least 6 months (Y/N).

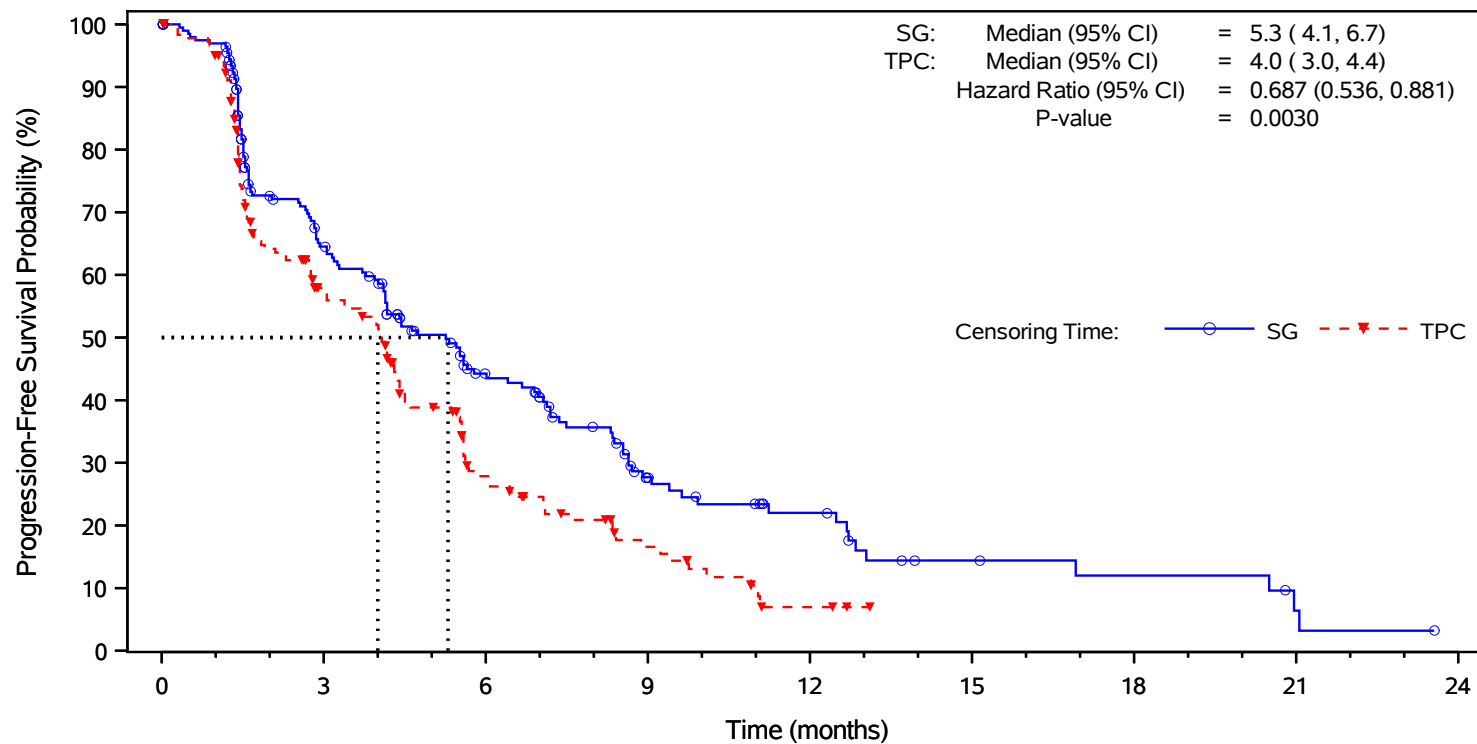
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Study IMMU-132-09

Figure 15.2.1.1: Kaplan-Meier Estimates of Progression Free Survival (PFS) per BICR for Interim Analysis 1 Data  
ITT Population  
Excluding participants pre-selected to Gemcitabine



		No. of Patients Still at Risk (Events)								
		0	3	6	9	12	15	18	21	24
SG	205 (0)	110 (65)	60 (97)	27 (117)	16 (122)	7 (127)	5 (128)	2 (130)	0 (131)	
TPC	213 (0)	88 (72)	34 (114)	15 (126)	3 (133)	0 (133)				

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.1.4: Progression Free Survival (PFS) per Blinded Independent Central Review (BICR) for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Treatment Comparison
PFS Events [n (%)]	135 ( 65.9%)	142 ( 66.7%)	
Disease Progression	112 ( 54.6%)	120 ( 56.3%)	
Death	23 ( 11.2%)	22 ( 10.3%)	
Censored [n (%)]	70 ( 34.1%)	71 ( 33.3%)	
Death after Starting New Anti-cancer Therapy	28 ( 13.7%)	24 ( 11.3%)	
Death after 2 or More Consecutive Missing Visits	9 ( 4.4%)	20 ( 9.4%)	
No PD and No Death	30 ( 14.6%)	17 ( 8.0%)	
No Baseline Image or Postbaseline Evaluable	3 ( 1.5%)	10 ( 4.7%)	
Assessment [a]			
Median PFS (95% CI) [b]	4.7 ( 4.1, 6.4)	4.0 ( 2.8, 4.4)	
Log-rank P-value (Stratified) [c]			0.0014
Stratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.673
95% CI for Hazard Ratio			(0.528, 0.859)
Kaplan-Meier Estimate of PFS Rate (%) (95% CI) [d]			
At 6 Months	43.8 ( 36.2, 51.1)	27.3 ( 20.4, 34.6)	
At 9 Months	27.6 ( 20.5, 35.2)	15.9 ( 10.2, 22.8)	
At 12 Months	22.0 ( 15.4, 29.5)	8.3 ( 4.0, 14.6)	

PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Censoring due to no baseline or no post baseline evaluable assessment does not include death event before the 2nd scheduled visit postbaseline.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Stratified log-rank test and stratified Cox regression adjusted for stratification factors (IXRS): prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Y/N), and endocrine therapy in the metastatic setting for at least 6 months (Y/N).

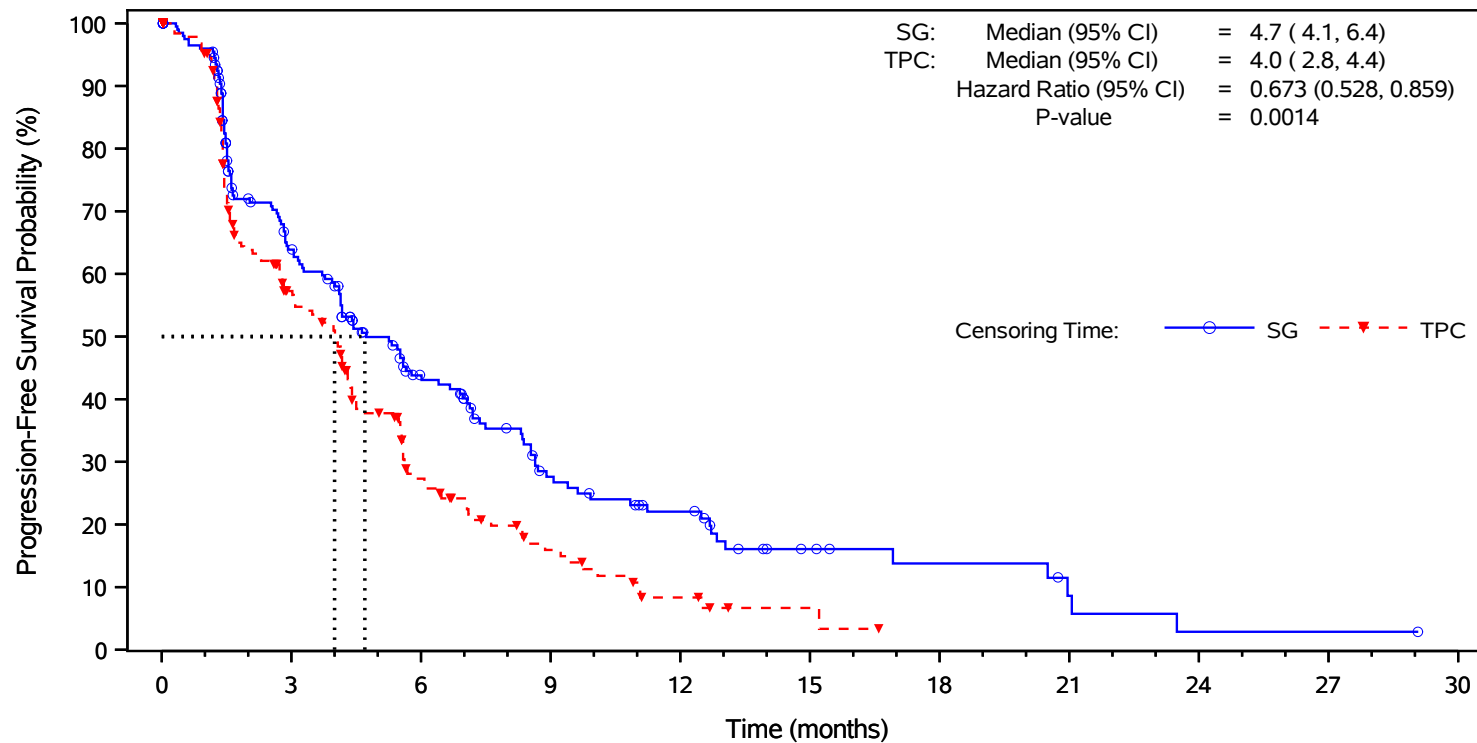
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Figure 15.2.1.3: Kaplan-Meier Estimates of Progression Free Survival (PFS) per BICR for Interim Analysis 2 Data  
ITT Population  
Excluding participants pre-selected to Gemcitabine



		No. of Patients Still at Risk (Events)										
		0	3	6	9	12	15	18	21	24	27	30
SG	205 (0)	110 (67)	60 (99)	31 (119)	21 (125)	9 (130)	6 (131)	3 (133)	1 (135)	1 (135)	0 (135)	
TPC	213 (0)	91 (76)	35 (120)	16 (133)	6 (140)	2 (141)	0 (142)					

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.1.9: Progression Free Survival (PFS) per Local Investigator Review (LIR) for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Treatment Comparison
PFS Events [n (%)]	176 ( 85.9%)	167 ( 78.4%)	
Disease Progression	161 ( 78.5%)	152 ( 71.4%)	
Death	15 ( 7.3%)	15 ( 7.0%)	
Censored [n (%)]	29 ( 14.1%)	46 ( 21.6%)	
PD after Starting New Anti-cancer Therapy	0 ( 0.0%)	1 ( 0.5%)	
Death after Starting New Anti-cancer Therapy	10 ( 4.9%)	11 ( 5.2%)	
Death after 2 or More Consecutive Missing Visits	5 ( 2.4%)	18 ( 8.5%)	
No PD and No Death	11 ( 5.4%)	6 ( 2.8%)	
No Baseline Image or Postbaseline Evaluable	3 ( 1.5%)	10 ( 4.7%)	
Assessment [a]			
Median PFS (95% CI) [b]	4.4 ( 4.0, 5.4)	3.3 ( 2.7, 4.1)	
Log-rank P-value (Stratified) [c]			0.0192
Stratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.773
95% CI for Hazard Ratio			(0.622, 0.961)
Kaplan-Meier Estimate of PFS Rate (%) (95% CI) [d]			
At 3 Months	62.3 ( 55.1, 68.7)	53.3 ( 45.8, 60.2)	
At 6 Months	33.9 ( 27.2, 40.7)	25.0 ( 18.7, 31.7)	
At 9 Months	17.8 ( 12.6, 23.7)	12.5 ( 7.9, 18.1)	
At 12 Months	11.9 ( 7.6, 17.1)	5.9 ( 2.8, 10.5)	
At 18 Months	6.3 ( 3.2, 10.8)	NE (NE, NE)	

PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Censoring due to no baseline or no post baseline evaluable assessment does not include death event before the 2nd scheduled visit postbaseline.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Stratified log-rank test and stratified Cox regression adjusted for stratification factors (IXRS): prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Y/N), and endocrine therapy in the metastatic setting for at least 6 months (Y/N).

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**Anhang 4-G 4.1: Subgruppenanalysen**

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.6916
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	96	102	
Patients (%) With Events	67 ( 69.8%)	73 ( 71.6%)	
Patients (%) Without Events (Censored)	29 ( 30.2%)	29 ( 28.4%)	
Median PFS (months) [b]	5.5	4.0	
95% CI	(4.1, 7.5)	(2.7, 4.6)	
Hazard Ratio (Relative to TPC) [c]			0.633
95% CI for Hazard Ratio			(0.452, 0.886)
p-value			0.0073
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	109	111	
Patients (%) With Events	68 ( 62.4%)	69 ( 62.2%)	
Patients (%) Without Events (Censored)	41 ( 37.6%)	42 ( 37.8%)	
Median PFS (months) [b]	4.2	4.0	
95% CI	(2.9, 6.7)	(2.7, 4.4)	
Hazard Ratio (Relative to TPC) [c]			0.727
95% CI for Hazard Ratio			(0.515, 1.024)
p-value			0.0678

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.9859
Stratification factor of visceral metastasis: Yes			
Total Patients	196	205	
Patients (%) With Events	129 ( 65.8%)	136 ( 66.3%)	
Patients (%) Without Events (Censored)	67 ( 34.2%)	69 ( 33.7%)	
Median PFS (months) [b]	4.7	4.0	
95% CI	(4.1, 6.0)	(3.0, 4.4)	
Hazard Ratio (Relative to TPC) [c]			0.675
95% CI for Hazard Ratio			(0.527, 0.862)
p-value			0.0016
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	6 ( 66.7%)	6 ( 75.0%)	
Patients (%) Without Events (Censored)	3 ( 33.3%)	2 ( 25.0%)	
Median PFS (months) [b]	6.7	1.6	
95% CI	(0.5, NE)	(0.9, NE)	
Hazard Ratio (Relative to TPC) [c]			0.690
95% CI for Hazard Ratio			(0.207, 2.302)
p-value			0.5554

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.1380
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	183	185	
Patients (%) With Events	119 ( 65.0%)	125 ( 67.6%)	
Patients (%) Without Events (Censored)	64 ( 35.0%)	60 ( 32.4%)	
Median PFS (months) [b]	5.3	4.1	
95% CI	(4.1, 7.2)	(3.0, 4.4)	
Hazard Ratio (Relative to TPC) [c]			0.635
95% CI for Hazard Ratio			(0.491, 0.821)
p-value			0.0005
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	22	28	
Patients (%) With Events	16 ( 72.7%)	17 ( 60.7%)	
Patients (%) Without Events (Censored)	6 ( 27.3%)	11 ( 39.3%)	
Median PFS (months) [b]	2.9	2.8	
95% CI	(1.5, 5.8)	(1.4, 6.1)	
Hazard Ratio (Relative to TPC) [c]			1.113
95% CI for Hazard Ratio			(0.561, 2.208)
p-value			0.7489

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.8282
Age group: < 65 years			
Total Patients	158	161	
Patients (%) With Events	107 ( 67.7%)	109 ( 67.7%)	
Patients (%) Without Events (Censored)	51 ( 32.3%)	52 ( 32.3%)	
Median PFS (months) [b]	4.6	4.0	
95% CI	(3.3, 6.4)	(2.8, 4.3)	
Hazard Ratio (Relative to TPC) [c]			0.668
95% CI for Hazard Ratio			(0.509, 0.878)
p-value			0.0035
Age group: >= 65 years			
Total Patients	47	52	
Patients (%) With Events	28 ( 59.6%)	33 ( 63.5%)	
Patients (%) Without Events (Censored)	19 ( 40.4%)	19 ( 36.5%)	
Median PFS (months) [b]	5.5	4.4	
95% CI	(3.7, 8.5)	(2.1, 5.6)	
Hazard Ratio (Relative to TPC) [c]			0.675
95% CI for Hazard Ratio			(0.402, 1.132)
p-value			0.1364

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.2920
<b>Race: White</b>			
Total Patients	143	143	
Patients (%) With Events	99 ( 69.2%)	95 ( 66.4%)	
Patients (%) Without Events (Censored)	44 ( 30.8%)	48 ( 33.6%)	
Median PFS (months) [b]	4.7	4.1	
95% CI	(4.1, 6.7)	(3.0, 4.5)	
Hazard Ratio (Relative to TPC) [c]			0.660
95% CI for Hazard Ratio			(0.494, 0.880)
p-value			0.0045
<b>Race: Non-white</b>			
Total Patients	14	18	
Patients (%) With Events	10 ( 71.4%)	13 ( 72.2%)	
Patients (%) Without Events (Censored)	4 ( 28.6%)	5 ( 27.8%)	
Median PFS (months) [b]	2.6	1.9	
95% CI	(1.4, NE)	(1.4, 8.9)	
Hazard Ratio (Relative to TPC) [c]			1.266
95% CI for Hazard Ratio			(0.535, 2.997)
p-value			0.6377

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.1633
Screening ECOG Status: 0			
Total Patients	90	99	
Patients (%) With Events	55 ( 61.1%)	64 ( 64.6%)	
Patients (%) Without Events (Censored)	35 ( 38.9%)	35 ( 35.4%)	
Median PFS (months) [b]	5.7	4.0	
95% CI	(4.1, 8.4)	(1.9, 5.6)	
Hazard Ratio (Relative to TPC) [c]			0.573
95% CI for Hazard Ratio			(0.395, 0.830)
p-value			0.0030
Screening ECOG Status: 1			
Total Patients	115	114	
Patients (%) With Events	80 ( 69.6%)	78 ( 68.4%)	
Patients (%) Without Events (Censored)	35 ( 30.4%)	36 ( 31.6%)	
Median PFS (months) [b]	4.2	4.0	
95% CI	(3.1, 5.8)	(2.8, 4.5)	
Hazard Ratio (Relative to TPC) [c]			0.774
95% CI for Hazard Ratio			(0.564, 1.063)
p-value			0.1150

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.6332
Geographic Region: Europe			
Total Patients	125	130	
Patients (%) With Events	79 ( 63.2%)	93 ( 71.5%)	
Patients (%) Without Events (Censored)	46 ( 36.8%)	37 ( 28.5%)	
Median PFS (months) [b]	5.3	4.1	
95% CI	(3.3, 7.4)	(2.8, 4.5)	
Hazard Ratio (Relative to TPC) [c]			0.644
95% CI for Hazard Ratio			(0.473, 0.876)
p-value			0.0048
Geographic Region: North America			
Total Patients	80	83	
Patients (%) With Events	56 ( 70.0%)	49 ( 59.0%)	
Patients (%) Without Events (Censored)	24 ( 30.0%)	34 ( 41.0%)	
Median PFS (months) [b]	4.7	3.7	
95% CI	(3.7, 7.0)	(1.9, 4.4)	
Hazard Ratio (Relative to TPC) [c]			0.741
95% CI for Hazard Ratio			(0.503, 1.092)
p-value			0.1270

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.3200
Prior CDK treatment duration: <= 12 months			
Total Patients	118	128	
Patients (%) With Events	75 ( 63.6%)	90 ( 70.3%)	
Patients (%) Without Events (Censored)	43 ( 36.4%)	38 ( 29.7%)	
Median PFS (months) [b]	5.6	3.7	
95% CI	(4.2, 7.2)	(2.8, 4.3)	
Hazard Ratio (Relative to TPC) [c]			0.589
95% CI for Hazard Ratio			(0.430, 0.807)
p-value			0.0009
Prior CDK treatment duration: > 12 months			
Total Patients	82	82	
Patients (%) With Events	56 ( 68.3%)	50 ( 61.0%)	
Patients (%) Without Events (Censored)	26 ( 31.7%)	32 ( 39.0%)	
Median PFS (months) [b]	4.1	4.2	
95% CI	(3.1, 7.0)	(2.7, 5.6)	
Hazard Ratio (Relative to TPC) [c]			0.789
95% CI for Hazard Ratio			(0.535, 1.163)
p-value			0.2307

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.0018
Early relapse: Yes			
Total Patients	13	17	
Patients (%) With Events	8 ( 61.5%)	13 ( 76.5%)	
Patients (%) Without Events (Censored)	5 ( 38.5%)	4 ( 23.5%)	
Median PFS (months) [b]	5.7	1.4	
95% CI	(2.7, NE)	(1.1, 1.6)	
Hazard Ratio (Relative to TPC) [c]			0.101
95% CI for Hazard Ratio			(0.030, 0.336)
p-value			<0.0001
Early relapse: No			
Total Patients	185	192	
Patients (%) With Events	124 ( 67.0%)	126 ( 65.6%)	
Patients (%) Without Events (Censored)	61 ( 33.0%)	66 ( 34.4%)	
Median PFS (months) [b]	4.6	4.2	
95% CI	(3.7, 6.4)	(3.1, 4.5)	
Hazard Ratio (Relative to TPC) [c]			0.741
95% CI for Hazard Ratio			(0.575, 0.954)
p-value			0.0197

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.3993
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	181	187	
Patients (%) With Events	122 ( 67.4%)	125 ( 66.8%)	
Patients (%) Without Events (Censored)	59 ( 32.6%)	62 ( 33.2%)	
Median PFS (months) [b]	4.2	4.0	
95% CI	(3.3, 5.6)	(3.0, 4.4)	
Hazard Ratio (Relative to TPC) [c]			0.703
95% CI for Hazard Ratio			(0.545, 0.908)
p-value			0.0068
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	26	
Patients (%) With Events	13 ( 54.2%)	17 ( 65.4%)	
Patients (%) Without Events (Censored)	11 ( 45.8%)	9 ( 34.6%)	
Median PFS (months) [b]	8.5	2.8	
95% CI	(4.4, 12.7)	(1.4, 7.1)	
Hazard Ratio (Relative to TPC) [c]			0.510
95% CI for Hazard Ratio			(0.246, 1.055)
p-value			0.0663

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.0735
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	125	145	
Patients (%) With Events	79 ( 63.2%)	99 ( 68.3%)	
Patients (%) Without Events (Censored)	46 ( 36.8%)	46 ( 31.7%)	
Median PFS (months) [b]	5.5	3.1	
95% CI	(4.1, 7.1)	(2.3, 4.1)	
Hazard Ratio (Relative to TPC) [c]			0.586
95% CI for Hazard Ratio			(0.433, 0.792)
p-value			0.0005
Chemotherapy in neo/adjuvant setting: No			
Total Patients	80	68	
Patients (%) With Events	56 ( 70.0%)	43 ( 63.2%)	
Patients (%) Without Events (Censored)	24 ( 30.0%)	25 ( 36.8%)	
Median PFS (months) [b]	4.1	4.5	
95% CI	(2.8, 7.0)	(4.0, 7.1)	
Hazard Ratio (Relative to TPC) [c]			0.904
95% CI for Hazard Ratio			(0.604, 1.354)
p-value			0.6299

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Study IMMU-132-09Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.7691
Trop2: H-Score < 100			
Total Patients	68	73	
Patients (%) With Events	45 ( 66.2%)	49 ( 67.1%)	
Patients (%) Without Events (Censored)	23 ( 33.8%)	24 ( 32.9%)	
Median PFS (months) [b]	4.2	4.0	
95% CI	(2.9, 6.0)	(2.7, 5.6)	
Hazard Ratio (Relative to TPC) [c]			0.876
95% CI for Hazard Ratio			(0.585, 1.314)
p-value			0.5221
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	78	
Patients (%) With Events	47 ( 66.2%)	54 ( 69.2%)	
Patients (%) Without Events (Censored)	24 ( 33.8%)	24 ( 30.8%)	
Median PFS (months) [b]	4.7	2.3	
95% CI	(3.2, 7.4)	(1.5, 4.2)	
Hazard Ratio (Relative to TPC) [c]			0.512
95% CI for Hazard Ratio			(0.340, 0.771)
p-value			0.0011

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Trop2: H-Score > 200			
Total Patients	42	26	
Patients (%) With Events	29 ( 69.0%)	21 ( 80.8%)	
Patients (%) Without Events (Censored)	13 ( 31.0%)	5 ( 19.2%)	
Median PFS (months) [b]	4.6	5.6	
95% CI	(1.5, 11.2)	(4.1, 5.7)	
Hazard Ratio (Relative to TPC) [c]			0.780
95% CI for Hazard Ratio			(0.436, 1.394)
p-value			0.4047

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Interaction p-value [a]			0.0020
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	15 ( 71.4%)	15 ( 65.2%)	
Patients (%) Without Events (Censored)	6 ( 28.6%)	8 ( 34.8%)	
Median PFS (months) [b]	4.4	4.5	
95% CI	(1.5, 7.1)	(1.6, 6.4)	
Hazard Ratio (Relative to TPC) [c]			1.183
95% CI for Hazard Ratio			(0.569, 2.459)
p-value			0.6522
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	128	130	
Patients (%) With Events	81 ( 63.3%)	89 ( 68.5%)	
Patients (%) Without Events (Censored)	47 ( 36.7%)	41 ( 31.5%)	
Median PFS (months) [b]	5.5	4.4	
95% CI	(4.0, 7.1)	(4.0, 5.6)	
Hazard Ratio (Relative to TPC) [c]			0.729
95% CI for Hazard Ratio			(0.536, 0.990)
p-value			0.0432

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.2.1.6: Progression Free Survival (PFS) per BICR by Selected Subgroup for Interim Analysis 2 Data  
ITT Population  
Excluding Participants Pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	56	60	
Patients (%) With Events	39 ( 69.6%)	38 ( 63.3%)	
Patients (%) Without Events (Censored)	17 ( 30.4%)	22 ( 36.7%)	
Median PFS (months) [b]	4.2	1.6	
95% CI	(3.1, 8.4)	(1.4, 2.6)	
Hazard Ratio (Relative to TPC) [c]			0.368
95% CI for Hazard Ratio			(0.225, 0.602)
p-value			<0.0001

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. PFS is defined as the number of months (30.4375 days) from the date of randomization to the date of the first radiological disease progression per RECIST 1.1 or death due to any cause, whichever comes first. Interim Analysis 2 has data cut at 7/1/2022.

[a] Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

[b] Median PFS is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE = Not Estimable.

[c] Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

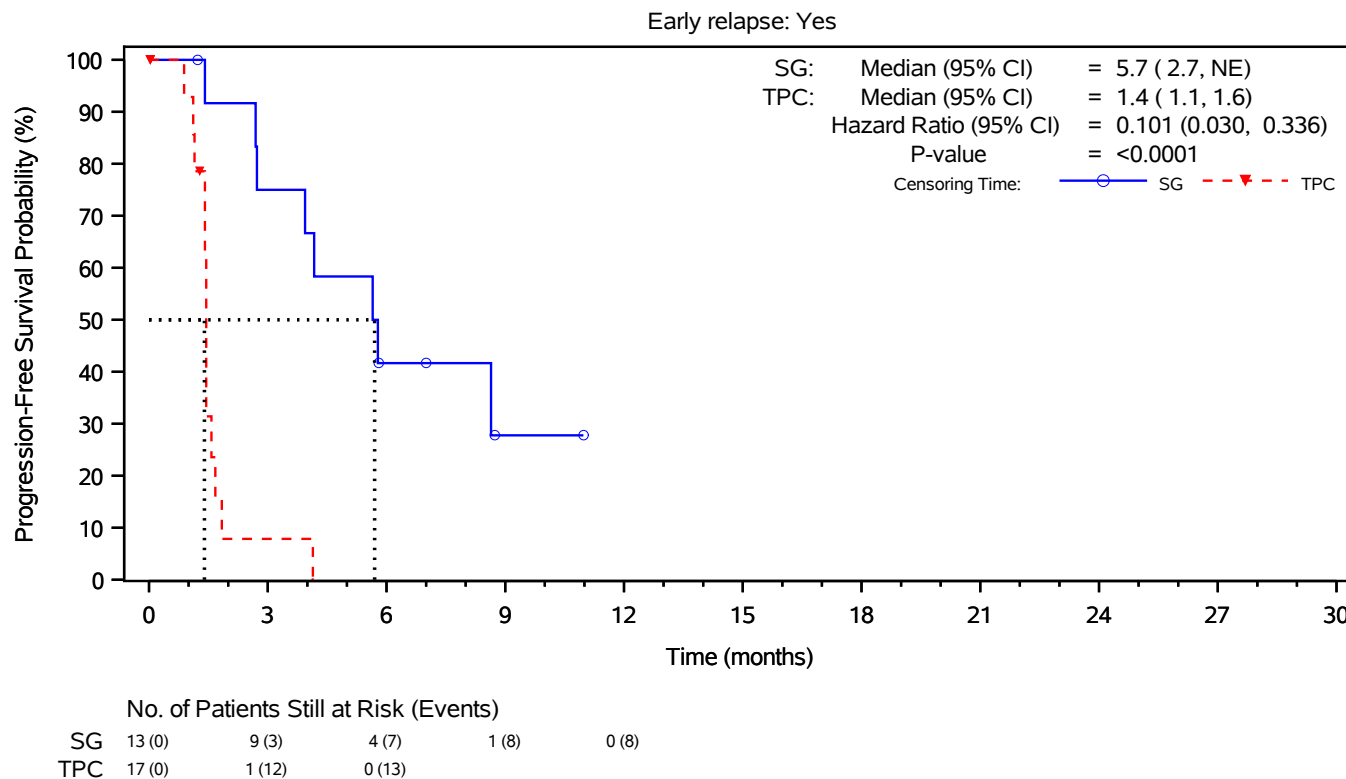
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Figure 15.2.1.4.9: Kaplan-Meier Estimates of PFS per BICR for Interim Analysis 2 Data by Early Relapse  
ITT Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

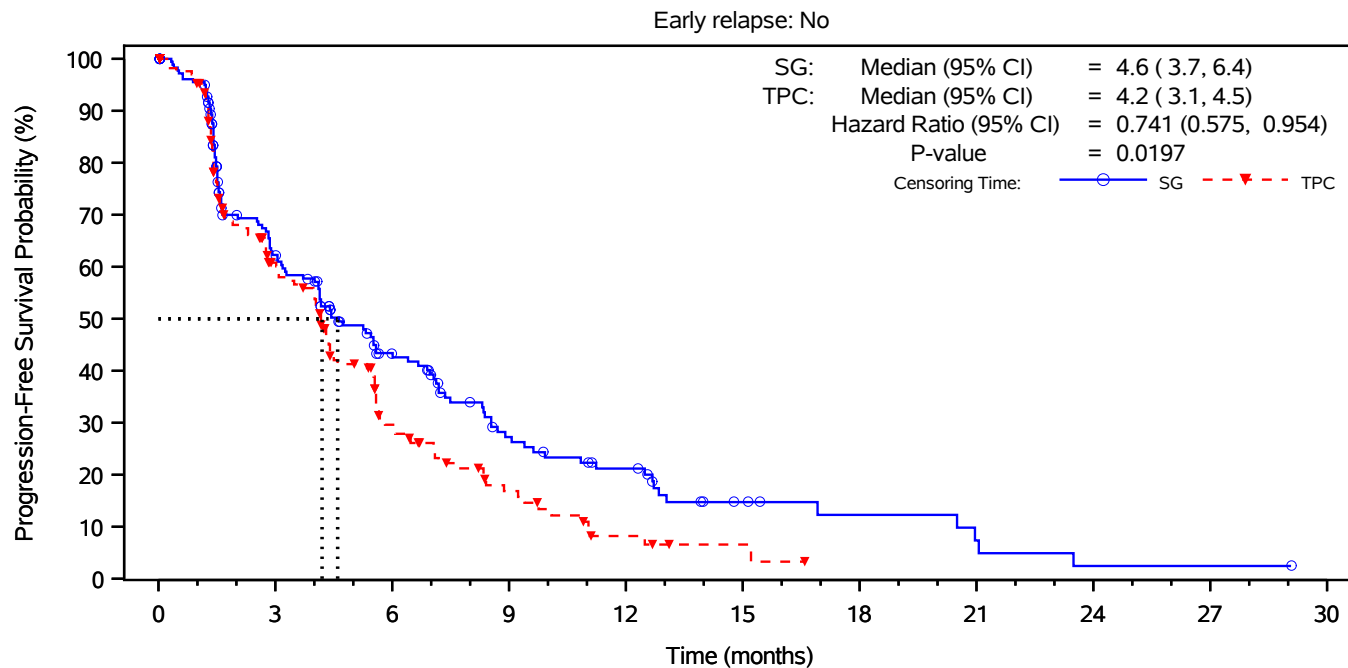
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.2.1.4.9: Kaplan-Meier Estimates of PFS per BICR for Interim Analysis 2 Data by Early Relapse  
ITT Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	185 (0)	97 (63)	53 (90)	28 (108)	19 (114)	8 (119)	5 (120)	3 (122)	1 (124)	1 (124)	0 (124)
TPC	192 (0)	87 (63)	34 (104)	15 (117)	5 (124)	2 (125)	0 (126)				

The analysis is based on Interim 2 data cut at 01Jul2022.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

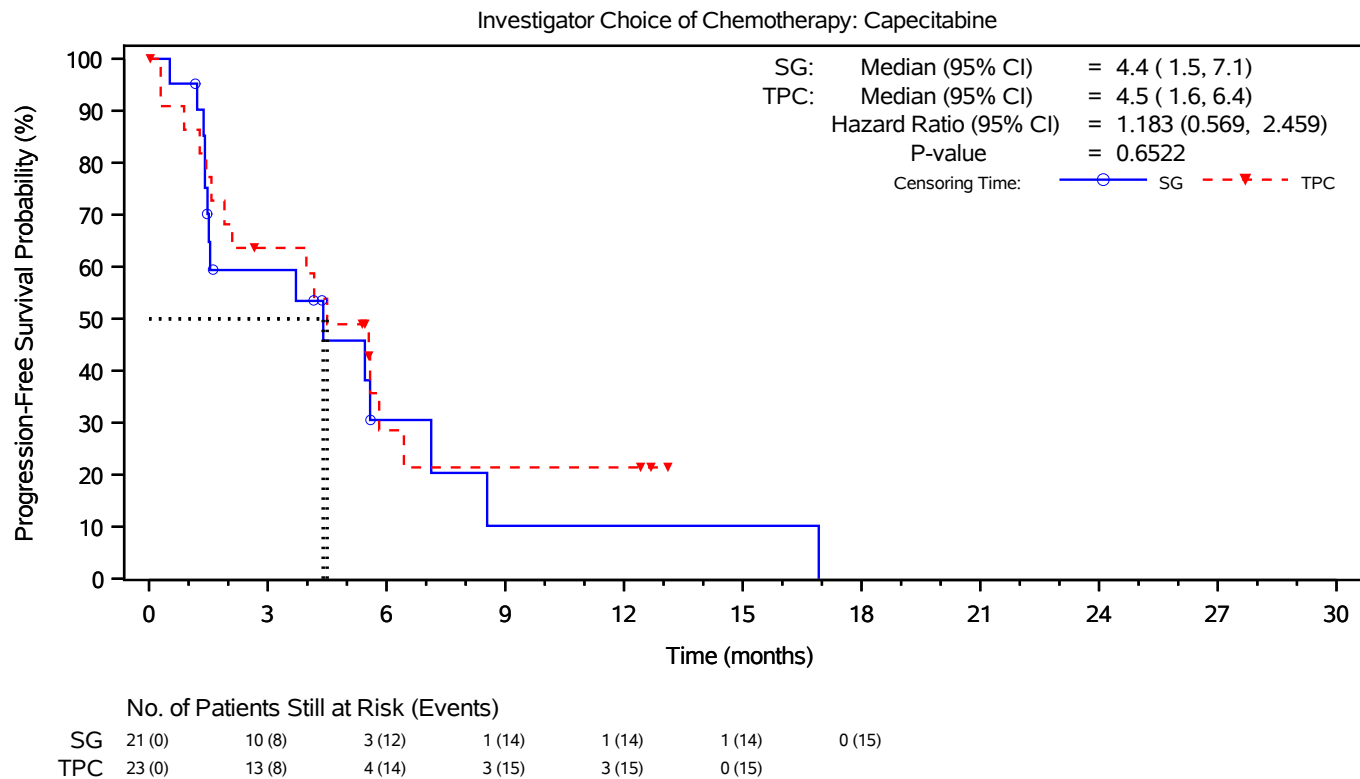
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Figure 15.2.1.4.13: Kaplan-Meier Estimates of PFS per BICR for Interim Analysis 2 Data by Investigator Choice of Chemotherapy Prior to Randomization  
ITT Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

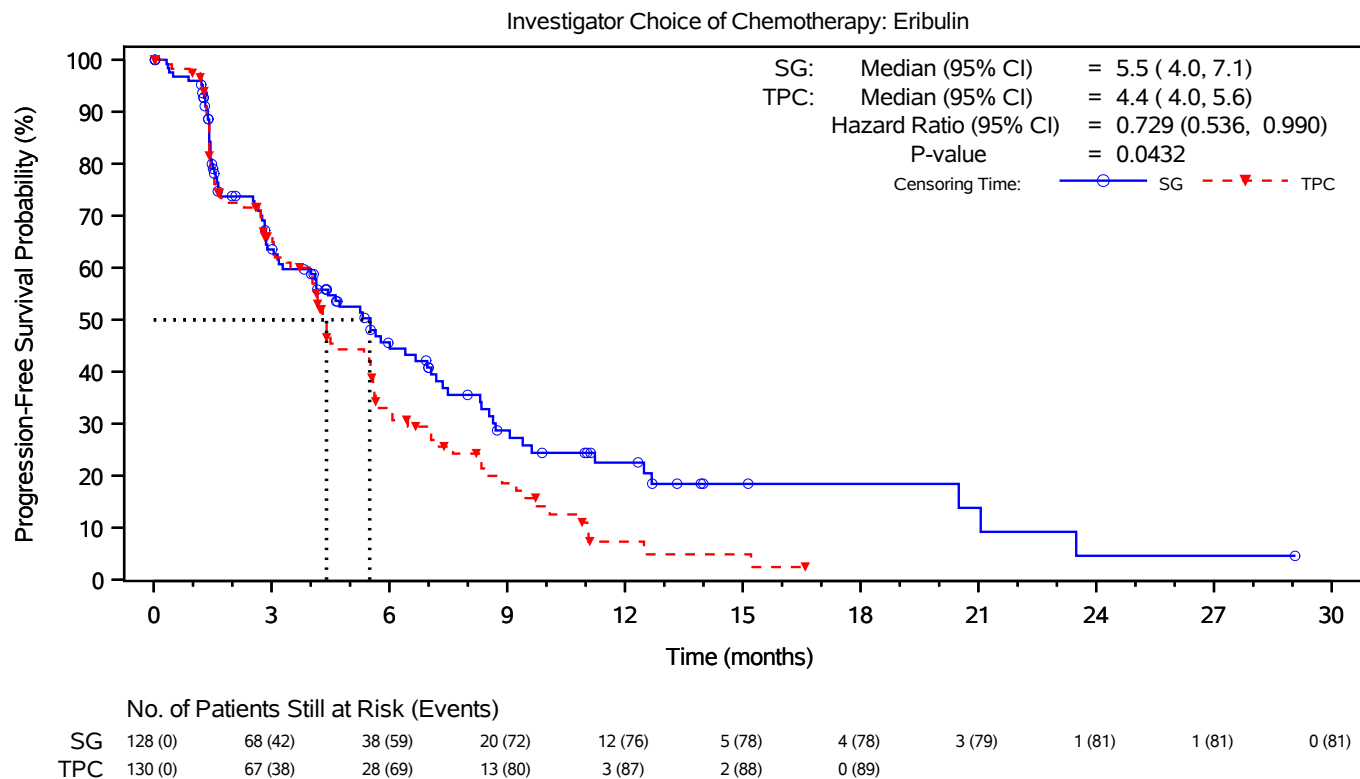
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.2.1.4.13: Kaplan-Meier Estimates of PFS per BICR for Interim Analysis 2 Data by Investigator Choice of Chemotherapy Prior to Randomization  
ITT Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

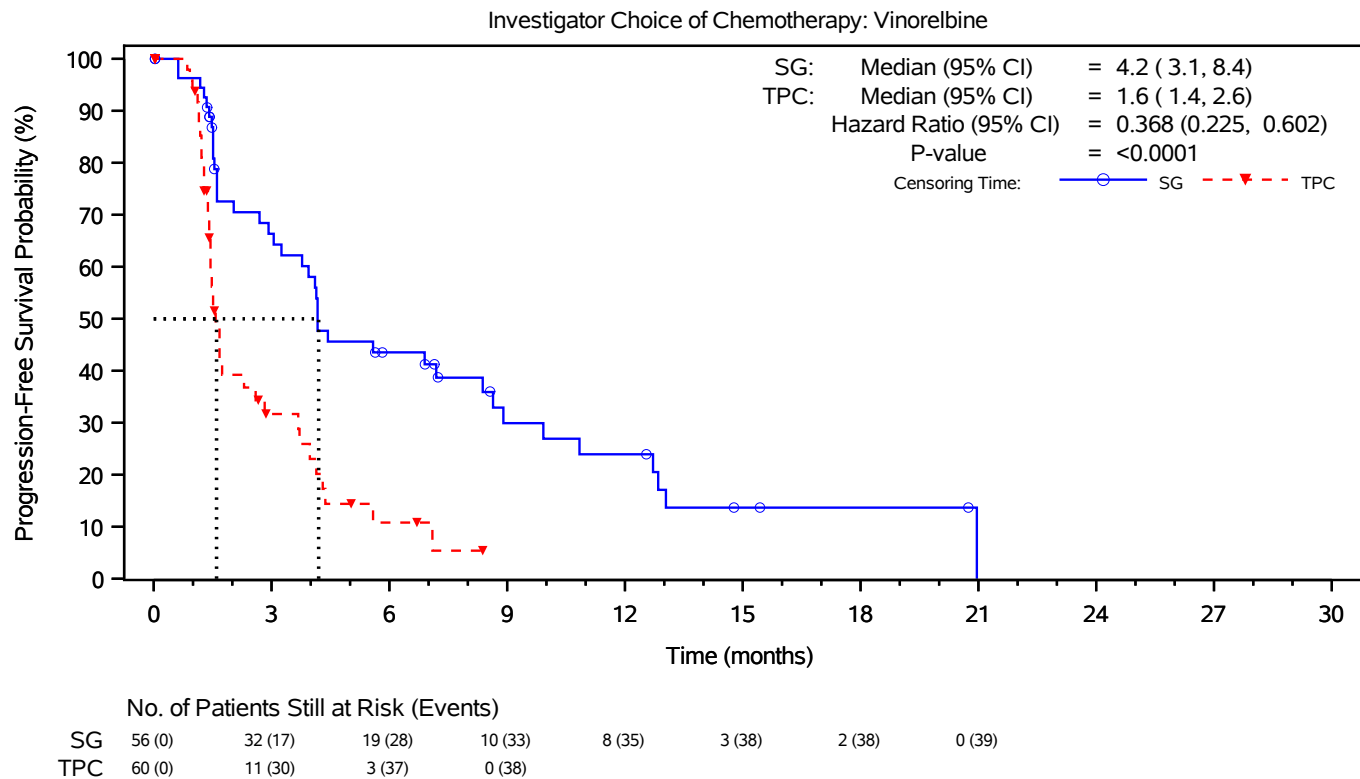
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.2.1.4.13: Kaplan-Meier Estimates of PFS per BICR for Interim Analysis 2 Data by Investigator Choice of Chemotherapy Prior to Randomization  
ITT Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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**Anhang 4-G 5: Tumoransprechen**

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Table 15.2.3.1: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) and Best Overall Response (BOR) per BICR  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Treatment Comparison
Patients with Measurable Disease at Baseline	203	210	
Objective Response (CR or PR)			
n (%)	43 ( 21.0%)	32 ( 15.0%)	
95% CI (Exact)	(15.6, 27.2)	(10.5, 20.5)	
Odds Ratio			1.501
95% CI			(0.909, 2.479)
P-value			0.1101
Relative Risk (RR)			1.399
95% CI (Exact)			(0.924, 2.120)
P-value			0.1101
Risk Difference (RD)			0.060
95% CI (Wald)			(-0.014, 0.134)
P-value			0.1111

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR and PR is confirmed no less than 4 weeks later. SD requires a minimum duration of 6 weeks to be classified as SD.

Clinical benefit rate (CBR) is defined as the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months

CI's for odds ratio and RR are from stratified Cochran-Mantel-Haenszel method, CI's for RD are derived from Wald method.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.2.3.1: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) and Best Overall Response (BOR) per BICR  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Treatment Comparison
<b>Clinical Benefit Rate (CR, PR or SD &gt;= 6 months)</b>			
n (%)	69 ( 33.7%)	51 ( 23.9%)	
95% CI (Exact)	(27.2, 40.6)	(18.4, 30.3)	
Odds Ratio			1.600
95% CI			(1.045, 2.450)
P-value			0.0309
Relative Risk (RR)			1.402
95% CI (Exact)			(1.030, 1.908)
P-value			0.0309
Risk Difference (RD)			0.096
95% CI (Wald)			(0.010, 0.183)
P-value			0.0296
<b>Best Overall Response, n (%)</b>			
Complete Response (CR)	2 ( 1.0%)	0	
Partial Response (PR)	41 ( 20.0%)	32 ( 15.0%)	
Stable Disease (SD)	101 ( 49.3%)	83 ( 39.0%)	
SD >= 6 months	26 ( 12.7%)	19 ( 8.9%)	
Progressive Disease (PD)	48 ( 23.4%)	58 ( 27.2%)	
Not Evaluable	13 ( 6.3%)	40 ( 18.8%)	

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR and PR is confirmed no less than 4 weeks later. SD requires a minimum duration of 6 weeks to be classified as SD.

Clinical benefit rate (CBR) is defined as the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months

CIs for odds ratio and RR are from stratified Cochran-Mantel-Haenszel method, CIs for RD are derived from Wald method.

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Table 15.2.3.3: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) and Best Overall Response (BOR) per LIR  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Treatment Comparison
Patients with Measurable Disease at Baseline	205	212	
Objective Response (CR or PR)			
n (%)	37 ( 18.0%)	21 ( 9.9%)	
95% CI (Exact)	(13.0, 24.0)	(6.2, 14.7)	
Odds Ratio			2.021
95% CI			(1.137, 3.591)
P-value			0.0150
Relative Risk (RR)			1.829
95% CI (Exact)			(1.111, 3.011)
P-value			0.0150
Risk Difference (RD)			0.082
95% CI (Wald)			(0.016, 0.148)
P-value			0.0151

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

The best overall response is derived based on the tumor response per LIR at each tumor assessment according to RECIST 1.1. Response of CR and PR is confirmed no less than 4 weeks later. SD requires a minimum duration of 6 weeks to be classified as SD.

Clinical benefit rate (CBR) is defined as the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months

CI's for odds ratio and RR are from stratified Cochran-Mantel-Haenszel method, CI's for RD are derived from Wald method.

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Table 15.2.3.3: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) and Best Overall Response (BOR) per LIR  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N = 205)	TPC (N = 213)	Treatment Comparison
<b>Clinical Benefit Rate (CR, PR or SD &gt;= 6 months)</b>			
n (%)	67 ( 32.7%)	49 ( 23.0%)	
95% CI (Exact)	(26.3, 39.6)	(17.5, 29.2)	
Odds Ratio			1.637
95% CI			(1.058, 2.534)
P-value			0.0272
Relative Risk (RR)			1.419
95% CI (Exact)			(1.039, 1.938)
P-value			0.0272
Risk Difference (RD)			0.096
95% CI (Wald)			(0.012, 0.181)
P-value			0.0258
<b>Best Overall Response, n (%)</b>			
Complete Response (CR)	0	0	
Partial Response (PR)	37 ( 18.0%)	21 ( 9.9%)	
Stable Disease (SD)	96 ( 46.8%)	89 ( 41.8%)	
SD >= 6 months	30 ( 14.6%)	28 ( 13.1%)	
Progressive Disease (PD)	57 ( 27.8%)	63 ( 29.6%)	
Not Evaluable	15 ( 7.3%)	40 ( 18.8%)	

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

The best overall response is derived based on the tumor response per LIR at each tumor assessment according to RECIST 1.1. Response of CR and PR is confirmed no less than 4 weeks later. SD requires a minimum duration of 6 weeks to be classified as SD.

Clinical benefit rate (CBR) is defined as the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months

CIs for odds ratio and RR are from stratified Cochran-Mantel-Haenszel method, CIs for RD are derived from Wald method.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.2.4.1: Duration of Response (DOR) for Objective Responders per Blinded Independent Central Review (BICR)  
ITT Population  
Only including participants with Confirmed Objective Response but excluding participants pre-selected to Gemcitabine

	SG (N = 43)	TPC (N = 32)	Treatment Comparison
Number of Responders (CR or PR)	43	32	
Subjects With Events [n(%)]	25 ( 58.1%)	20 ( 62.5%)	
Subjects Without Events (Censored) [n(%)]	18 ( 41.9%)	12 ( 37.5%)	
Median Duration of Response (months) [a]	7.4	5.1	
95% CI	( 5.8, 8.9)	( 2.9, 7.5)	
Log-rank P-value (Stratified) [b]			0.0212
Stratified Cox Regression analysis [b]			
Hazard Ratio (Relative to TPC)			0.485
95% CI for Hazard Ratio			(0.260, 0.906)
Kaplan-Meier Estimates of DOR Rate (%) (95% CI) [c]			
At 3 Months	92.7 (79.0, 97.6)	67.0 (45.9, 81.3)	
At 6 Months	65.7 (48.1, 78.5)	39.1 (19.8, 58.1)	
At 9 Months	30.9 (14.9, 48.6)	11.4 ( 2.0, 29.8)	
At 12 Months	22.1 ( 8.5, 39.6)	NE (NE, NE)	

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

Only patients achieving confirmed CR or PR are included in the analysis. DOR is defined as the number of months (30.4375 days) from the date of initial response to the date of the event defined as the first documented progression per RECIST 1.1 or death due to any cause, whichever is earlier.

[a] Median DOR is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE=Not Estimable.

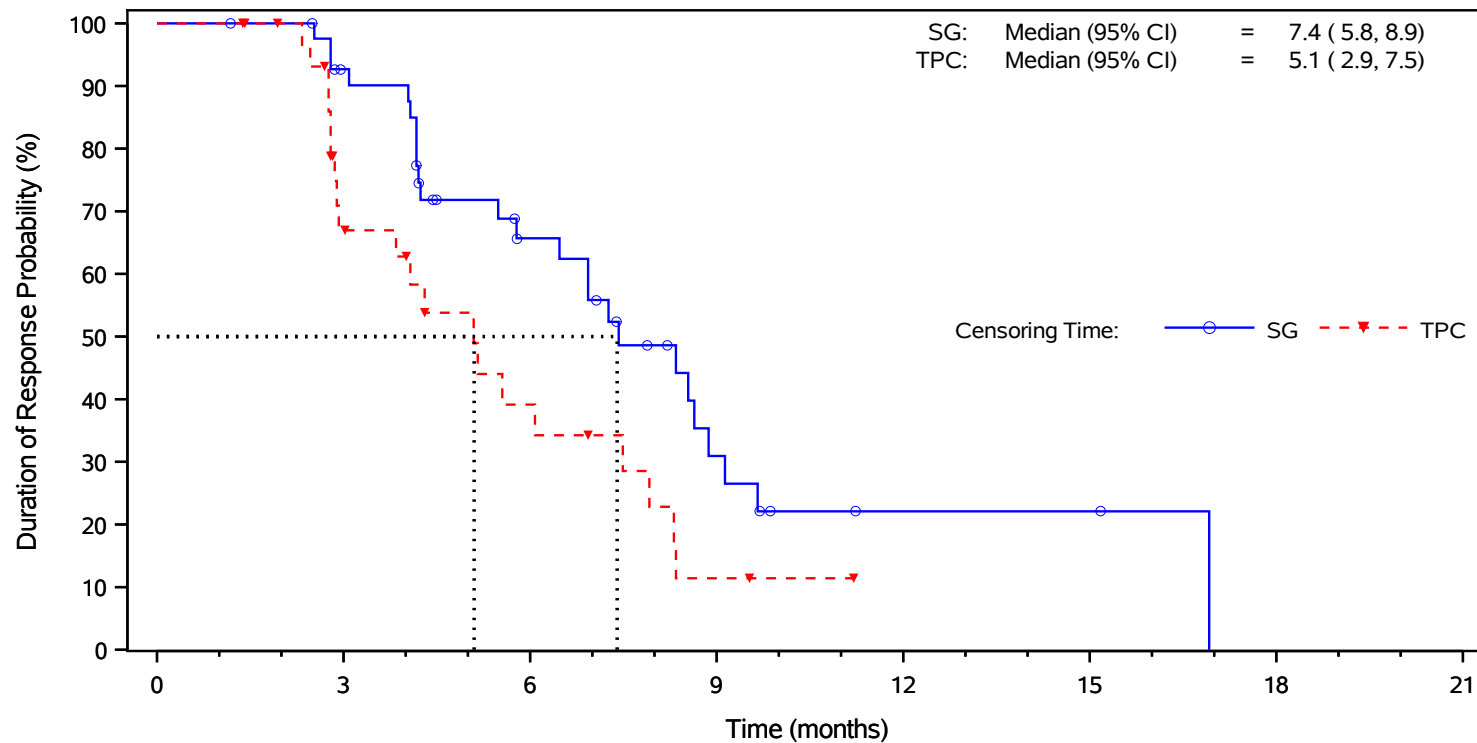
[b] Stratified log-rank test and stratified Cox regression adjusted for stratification factors (IXRS): prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Y/N), and endocrine therapy in the metastatic setting for at least 6 months (Y/N).

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Figure 15.2.3.1: Kaplan-Meier Estimates of Duration of Response (DOR) per Blinded Independent Central Review (BICR)  
ITT Population  
Only including participants with Confirmed Objective Response but excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)						
SG	43 (0)	36 (3)	20 (13)	7 (22)	2 (24)	2 (24)	0 (25)
TPC	32 (0)	17 (9)	8 (15)	2 (20)	0 (20)		

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Table 15.2.4.2: Duration of Response (DOR) for Objective Responders per Local Investigator Review (LIR)  
ITT Population  
Only including participants with Confirmed Objective Response but excluding participants pre-selected to Gemcitabine

	SG (N = 37)	TPC (N = 21)	Treatment Comparison
Number of Responders (CR or PR)	37	21	
Subjects With Events [n(%)]	31 ( 83.8%)	17 ( 81.0%)	
Subjects Without Events (Censored) [n(%)]	6 ( 16.2%)	4 ( 19.0%)	
Median Duration of Response (months) [a]	7.4	4.3	
95% CI	( 5.4, 9.2)	( 4.2, 6.1)	
Log-rank P-value (Stratified) [b]			0.0139
Stratified Cox Regression analysis [b]			
Hazard Ratio (Relative to TPC)			0.418
95% CI for Hazard Ratio			(0.206, 0.849)
Kaplan-Meier Estimates of DOR Rate (%) (95% CI) [c]			
At 3 Months	94.4 (79.3, 98.6)	85.0 (60.4, 94.9)	
At 6 Months	56.3 (38.2, 70.9)	37.3 (15.7, 59.1)	
At 9 Months	34.6 (19.2, 50.6)	18.6 ( 4.6, 39.9)	
At 12 Months	12.0 ( 3.2, 26.9)	NE ( NE, NE)	

The denominator is the number of patients in the ITT Population excluding participants assigned to Gemcitabine before randomized for each treatment group.

Only patients achieving confirmed CR or PR are included in the analysis. DOR is defined as the number of months (30.4375 days) from the date of initial response to the date of the event defined as the first documented progression per RECIST 1.1 or death due to any cause, whichever is earlier.

[a] Median DOR is from Kaplan-Meier estimate. CI for median is computed using the Brookmeyer-Crowley method. NE=Not Estimable.

[b] Stratified log-rank test and stratified Cox regression adjusted for stratification factors (IXRS): prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Y/N), and endocrine therapy in the metastatic setting for at least 6 months (Y/N).

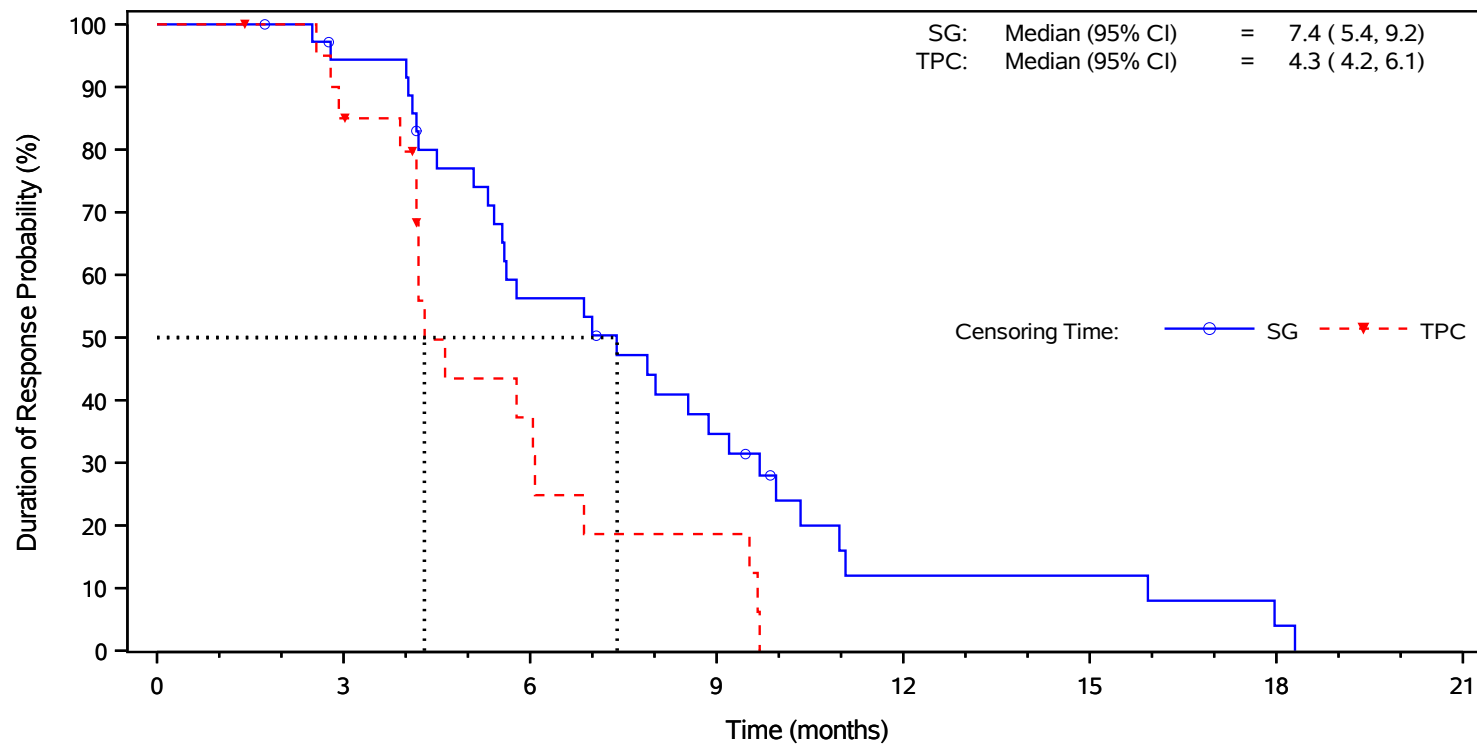
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Figure 15.2.3.2: Kaplan-Meier Estimates of Duration of Response (DOR) per Local Investigator Review (LIR)  
ITT Population

Only including participants with Confirmed Objective Response but excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)							
SG	37 (0)	33 (2)	19 (15)	11 (22)	3 (28)	3 (28)	1 (30)	0 (31)
TPC	21 (0)	17 (3)	6 (11)	3 (14)	0 (17)			

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**Anhang 4-G 5.1: Subgruppenanalysen**

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Stratification factor of prior chemotherapy regimens for treatment of metastatic disease			
ORR Relative Risk Cochran's Q p-value			0.0205
CBR Relative Risk Cochran's Q p-value			0.3307
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2	96	102	
Objective Response (CR or PR)			
n (%)	29 ( 30.2%)	14 ( 13.7%)	
95% CI (Exact)	(21.3, 40.4)	(7.7, 22.0)	
Odds Ratio			2.721
95% CI (Exact)			(1.334, 5.548)
P-value			0.0050
Relative Risk			2.201
95% CI (Exact)			(1.240, 3.906)
P-value			0.0050
Risk Difference			0.165
95% CI (Wald)			(0.051, 0.278)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2	96	102	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	37 ( 38.5%)	24 ( 23.5%)	
95% CI (Exact)	(28.8, 49.0)	(15.7, 33.0)	
Odds Ratio			2.038
95% CI (Exact)			(1.102, 3.770)
P-value			0.0226
Relative Risk			1.638
95% CI (Exact)			(1.064, 2.522)
P-value			0.0226
Risk Difference			0.150
95% CI (Wald)			(0.023, 0.278)
Best Overall Response, n (%)			
Complete Response (CR)	1 ( 1.0%)	0	
Partial Response (PR)	28 ( 29.2%)	14 ( 13.7%)	
Stable Disease (SD)	39 ( 40.6%)	40 ( 39.2%)	
SD >= 6 months	8 ( 8.3%)	10 ( 9.8%)	
Progressive Disease (PD)	23 ( 24.0%)	29 ( 28.4%)	
Not Evaluable	5 ( 5.2%)	19 ( 18.6%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4	109	111	
Objective Response (CR or PR)			
n (%)	14 ( 12.8%)	18 ( 16.2%)	
95% CI (Exact)	(7.2, 20.6)	(9.9, 24.4)	
Odds Ratio			0.761
95% CI (Exact)			(0.358, 1.619)
P-value			0.4791
Relative Risk			0.792
95% CI (Exact)			(0.415, 1.512)
P-value			0.4791
Risk Difference			-0.034
95% CI (Wald)			(-0.127, 0.059)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4	109	111	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	32 ( 29.4%)	27 ( 24.3%)	
95% CI (Exact)	(21.0, 38.8)	(16.7, 33.4)	
Odds Ratio			1.293
95% CI (Exact)			(0.711, 2.352)
P-value			0.4005
Relative Risk			1.207
95% CI (Exact)			(0.778, 1.872)
P-value			0.4005
Risk Difference			0.050
95% CI (Wald)			(-0.067, 0.167)
Best Overall Response, n (%)			
Complete Response (CR)	1 ( 0.9%)	0	
Partial Response (PR)	13 ( 11.9%)	18 ( 16.2%)	
Stable Disease (SD)	62 ( 56.9%)	43 ( 38.7%)	
SD >= 6 months	18 ( 16.5%)	9 ( 8.1%)	
Progressive Disease (PD)	25 ( 22.9%)	29 ( 26.1%)	
Not Evaluable	8 ( 7.3%)	21 ( 18.9%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method.

The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR  
Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Stratification factor of visceral metastasis			
ORR Relative Risk Cochran's Q p-value			0.8265
CBR Relative Risk Cochran's Q p-value			0.7358
Stratification factor of visceral metastasis: Yes	196	205	
Objective Response (CR or PR)			
n (%)	41 ( 20.9%)	31 ( 15.1%)	
95% CI (Exact)	(15.4, 27.3)	(10.5, 20.8)	
Odds Ratio			1.485
95% CI (Exact)			(0.888, 2.483)
P-value			0.1311
Relative Risk			1.383
95% CI (Exact)			(0.906, 2.113)
P-value			0.1311
Risk Difference			0.058
95% CI (Wald)			(-0.017, 0.133)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Stratification factor of visceral metastasis: Yes	196	205	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	65 ( 33.2%)	49 ( 23.9%)	
95% CI (Exact)	(26.6, 40.2)	(18.2, 30.3)	
Odds Ratio			1.580
95% CI (Exact)			(1.020, 2.447)
P-value			0.0401
Relative Risk			1.387
95% CI (Exact)			(1.013, 1.901)
P-value			0.0401
Risk Difference			0.093
95% CI (Wald)			(0.005, 0.181)
Best Overall Response, n (%)			
Complete Response (CR)	2 ( 1.0%)	0	
Partial Response (PR)	39 ( 19.9%)	31 ( 15.1%)	
Stable Disease (SD)	98 ( 50.0%)	81 ( 39.5%)	
SD >= 6 months	24 ( 12.2%)	18 ( 8.8%)	
Progressive Disease (PD)	44 ( 22.4%)	53 ( 25.9%)	
Not Evaluable	13 ( 6.6%)	40 ( 19.5%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method.

The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR

Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months

The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Stratification factor of visceral metastasis: No	9	8	
Objective Response (CR or PR)			
n (%)	2 ( 22.2%)	1 ( 12.5%)	
95% CI (Exact)	(2.8, 60.0)	(0.3, 52.7)	
Odds Ratio			2.000
95% CI (Exact)			(0.146, 27.447)
P-value			0.6106
Relative Risk			1.778
95% CI (Exact)			(0.196, 16.100)
P-value			0.6106
Risk Difference			0.097
95% CI (Wald)			(-0.258, 0.453)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Stratification factor of visceral metastasis: No	9	8	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	4 ( 44.4%)	2 ( 25.0%)	
95% CI (Exact)	(13.7, 78.8)	(3.2, 65.1)	
Odds Ratio			2.400
95% CI (Exact)			(0.303, 19.041)
P-value			0.4166
Relative Risk			1.778
95% CI (Exact)			(0.436, 7.246)
P-value			0.4166
Risk Difference			0.194
95% CI (Wald)			(-0.248, 0.637)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	2 ( 22.2%)	1 ( 12.5%)	
Stable Disease (SD)	3 ( 33.3%)	2 ( 25.0%)	
SD >= 6 months	2 ( 22.2%)	1 ( 12.5%)	
Progressive Disease (PD)	4 ( 44.4%)	5 ( 62.5%)	
Not Evaluable	0	0	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Stratification factor of endocrine therapy in the metastatic setting for >=6 months			
ORR Relative Risk Cochran's Q p-value			0.5064
CBR Relative Risk Cochran's Q p-value			0.8994
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes	183	185	
Objective Response (CR or PR)			
n (%)	38 ( 20.8%)	29 ( 15.7%)	
95% CI (Exact)	(15.1, 27.4)	(10.8, 21.7)	
Odds Ratio			1.410
95% CI (Exact)			(0.827, 2.404)
P-value			0.2065
Relative Risk			1.325
95% CI (Exact)			(0.855, 2.053)
P-value			0.2065
Risk Difference			0.051
95% CI (Wald)			(-0.028, 0.130)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes	183	185	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	62 ( 33.9%)	45 ( 24.3%)	
95% CI (Exact)	(27.1, 41.2)	(18.3, 31.2)	
Odds Ratio			1.594
95% CI (Exact)			(1.012, 2.511)
P-value			0.0439
Relative Risk			1.393
95% CI (Exact)			(1.006, 1.928)
P-value			0.0439
Risk Difference			0.096
95% CI (Wald)			(0.003, 0.188)
Best Overall Response, n (%)			
Complete Response (CR)	2 ( 1.1%)	0	
Partial Response (PR)	36 ( 19.7%)	29 ( 15.7%)	
Stable Disease (SD)	93 ( 50.8%)	74 ( 40.0%)	
SD >= 6 months	24 ( 13.1%)	16 ( 8.6%)	
Progressive Disease (PD)	44 ( 24.0%)	51 ( 27.6%)	
Not Evaluable	8 ( 4.4%)	31 ( 16.8%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No	22	28	
Objective Response (CR or PR)			
n (%)	5 ( 22.7%)	3 ( 10.7%)	
95% CI (Exact)	(7.8, 45.4)	(2.3, 28.2)	
Odds Ratio			2.451
95% CI (Exact)			(0.516, 11.644)
P-value			0.2549
Relative Risk			2.121
95% CI (Exact)			(0.568, 7.924)
P-value			0.2549
Risk Difference			0.120
95% CI (Wald)			(-0.089, 0.329)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No	22	28	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	7 ( 31.8%)	6 ( 21.4%)	
95% CI (Exact)	(13.9, 54.9)	(8.3, 41.0)	
Odds Ratio			1.711
95% CI (Exact)			(0.479, 6.109)
P-value			0.4105
Relative Risk			1.485
95% CI (Exact)			(0.582, 3.788)
P-value			0.4105
Risk Difference			0.104
95% CI (Wald)			(-0.143, 0.351)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	5 ( 22.7%)	3 ( 10.7%)	
Stable Disease (SD)	8 ( 36.4%)	9 ( 32.1%)	
SD >= 6 months	2 ( 9.1%)	3 ( 10.7%)	
Progressive Disease (PD)	4 ( 18.2%)	7 ( 25.0%)	
Not Evaluable	5 ( 22.7%)	9 ( 32.1%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Age group			
ORR Relative Risk Cochran's Q p-value			0.1416
CBR Relative Risk Cochran's Q p-value			0.9576
Age group: < 65 years	158	161	
Objective Response (CR or PR)			
n (%)	37 ( 23.4%)	23 ( 14.3%)	
95% CI (Exact)	(17.1, 30.8)	(9.3, 20.7)	
Odds Ratio			1.835
95% CI (Exact)			(1.033, 3.260)
P-value			0.0372
Relative Risk			1.639
95% CI (Exact)			(1.023, 2.628)
P-value			0.0372
Risk Difference			0.091
95% CI (Wald)			(0.006, 0.177)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Age group: < 65 years	158	161	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	54 ( 34.2%)	39 ( 24.2%)	
95% CI (Exact)	(26.8, 42.1)	(17.8, 31.6)	
Odds Ratio			1.624
95% CI (Exact)			(0.997, 2.646)
P-value			0.0509
Relative Risk			1.411
95% CI (Exact)			(0.996, 1.999)
P-value			0.0509
Risk Difference			0.100
95% CI (Wald)			(0.000, 0.199)
Best Overall Response, n (%)			
Complete Response (CR)	2 ( 1.3%)	0	
Partial Response (PR)	35 ( 22.2%)	23 ( 14.3%)	
Stable Disease (SD)	73 ( 46.2%)	62 ( 38.5%)	
SD >= 6 months	17 ( 10.8%)	16 ( 9.9%)	
Progressive Disease (PD)	41 ( 25.9%)	46 ( 28.6%)	
Not Evaluable	7 ( 4.4%)	30 ( 18.6%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Age group: >= 65 years	47	52	
Objective Response (CR or PR)			
n (%)	6 ( 12.8%)	9 ( 17.3%)	
95% CI (Exact)	(4.8, 25.7)	(8.2, 30.3)	
Odds Ratio			0.699
95% CI (Exact)			(0.229, 2.139)
P-value			0.5312
Relative Risk			0.738
95% CI (Exact)			(0.284, 1.916)
P-value			0.5312
Risk Difference			-0.045
95% CI (Wald)			(-0.186, 0.095)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Age group: >= 65 years	47	52	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	15 ( 31.9%)	12 ( 23.1%)	
95% CI (Exact)	(19.1, 47.1)	(12.5, 36.8)	
Odds Ratio			1.563
95% CI (Exact)			(0.642, 3.805)
P-value			0.3266
Relative Risk			1.383
95% CI (Exact)			(0.723, 2.645)
P-value			0.3266
Risk Difference			0.088
95% CI (Wald)			(-0.087, 0.264)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	6 ( 12.8%)	9 ( 17.3%)	
Stable Disease (SD)	28 ( 59.6%)	21 ( 40.4%)	
SD >= 6 months	9 ( 19.1%)	3 ( 5.8%)	
Progressive Disease (PD)	7 ( 14.9%)	12 ( 23.1%)	
Not Evaluable	6 ( 12.8%)	10 ( 19.2%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Race			
ORR Relative Risk Cochran's Q p-value			0.9246
CBR Relative Risk Cochran's Q p-value			0.5285
Race: White			
	143	143	
Objective Response (CR or PR)			
n (%)	31 ( 21.7%)	22 ( 15.4%)	
95% CI (Exact)	(15.2, 29.3)	(9.9, 22.4)	
Odds Ratio			1.522
95% CI (Exact)			(0.832, 2.784)
P-value			0.1715
Relative Risk			1.409
95% CI (Exact)			(0.859, 2.311)
P-value			0.1715
Risk Difference			0.063
95% CI (Wald)			(-0.027, 0.153)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Race: White	143	143	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	51 ( 35.7%)	34 ( 23.8%)	
95% CI (Exact)	(27.8, 44.1)	(17.1, 31.6)	
Odds Ratio			1.777
95% CI (Exact)			(1.062, 2.975)
P-value			0.0281
Relative Risk			1.500
95% CI (Exact)			(1.039, 2.165)
P-value			0.0281
Risk Difference			0.119
95% CI (Wald)			(0.014, 0.224)
Best Overall Response, n (%)			
Complete Response (CR)	1 ( 0.7%)	0	
Partial Response (PR)	30 ( 21.0%)	22 ( 15.4%)	
Stable Disease (SD)	69 ( 48.3%)	58 ( 40.6%)	
SD >= 6 months	20 ( 14.0%)	12 ( 8.4%)	
Progressive Disease (PD)	34 ( 23.8%)	36 ( 25.2%)	
Not Evaluable	9 ( 6.3%)	27 ( 18.9%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Race: Non-white	14	18	
Objective Response (CR or PR)			
n (%)	2 ( 14.3%)	2 ( 11.1%)	
95% CI (Exact)	(1.8, 42.8)	(1.4, 34.7)	
Odds Ratio			1.333
95% CI (Exact)			(0.164, 10.867)
P-value			0.7909
Relative Risk			1.286
95% CI (Exact)			(0.206, 8.025)
P-value			0.7909
Risk Difference			0.032
95% CI (Wald)			(-0.202, 0.266)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Race: Non-white	14	18	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	3 ( 21.4%)	4 ( 22.2%)	
95% CI (Exact)	(4.7, 50.8)	(6.4, 47.6)	
Odds Ratio			0.955
95% CI (Exact)			(0.176, 5.186)
P-value			0.9577
Relative Risk			0.964
95% CI (Exact)			(0.257, 3.624)
P-value			0.9577
Risk Difference			-0.008
95% CI (Wald)			(-0.296, 0.280)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	2 ( 14.3%)	2 ( 11.1%)	
Stable Disease (SD)	6 ( 42.9%)	5 ( 27.8%)	
SD >= 6 months	1 ( 7.1%)	2 ( 11.1%)	
Progressive Disease (PD)	5 ( 35.7%)	8 ( 44.4%)	
Not Evaluable	1 ( 7.1%)	3 ( 16.7%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Screening ECOG Status			
ORR Relative Risk Cochran's Q p-value			0.5156
CBR Relative Risk Cochran's Q p-value			0.2934
Screening ECOG Status: 0	90	99	
Objective Response (CR or PR)			
n (%)	22 ( 24.4%)	15 ( 15.2%)	
95% CI (Exact)	(16.0, 34.6)	(8.7, 23.8)	
Odds Ratio			1.812
95% CI (Exact)			(0.873, 3.760)
P-value			0.1088
Relative Risk			1.613
95% CI (Exact)			(0.893, 2.913)
P-value			0.1088
Risk Difference			0.093
95% CI (Wald)			(-0.021, 0.206)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Screening ECOG Status: 0	90	99	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	35 ( 38.9%)	23 ( 23.2%)	
95% CI (Exact)	(28.8, 49.7)	(15.3, 32.8)	
Odds Ratio			2.103
95% CI (Exact)			(1.120, 3.949)
P-value			0.0201
Relative Risk			1.674
95% CI (Exact)			(1.076, 2.604)
P-value			0.0201
Risk Difference			0.157
95% CI (Wald)			(0.026, 0.287)
Best Overall Response, n (%)			
Complete Response (CR)	2 ( 2.2%)	0	
Partial Response (PR)	20 ( 22.2%)	15 ( 15.2%)	
Stable Disease (SD)	44 ( 48.9%)	36 ( 36.4%)	
SD >= 6 months	13 ( 14.4%)	8 ( 8.1%)	
Progressive Disease (PD)	19 ( 21.1%)	31 ( 31.3%)	
Not Evaluable	5 ( 5.6%)	17 ( 17.2%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method.

The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR

Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months

The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Screening ECOG Status: 1	115	114	
Objective Response (CR or PR)			
n (%)	21 ( 18.3%)	17 ( 14.9%)	
95% CI (Exact)	(11.7, 26.5)	(8.9, 22.8)	
Odds Ratio			1.275
95% CI (Exact)			(0.633, 2.566)
P-value			0.4968
Relative Risk			1.225
95% CI (Exact)			(0.682, 2.197)
P-value			0.4968
Risk Difference			0.033
95% CI (Wald)			(-0.063, 0.130)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Screening ECOG Status: 1	115	114	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	34 ( 29.6%)	28 ( 24.6%)	
95% CI (Exact)	(21.4, 38.8)	(17.0, 33.5)	
Odds Ratio			1.289
95% CI (Exact)			(0.718, 2.314)
P-value			0.3952
Relative Risk			1.204
95% CI (Exact)			(0.785, 1.847)
P-value			0.3952
Risk Difference			0.050
95% CI (Wald)			(-0.065, 0.165)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	21 ( 18.3%)	17 ( 14.9%)	
Stable Disease (SD)	57 ( 49.6%)	47 ( 41.2%)	
SD >= 6 months	13 ( 11.3%)	11 ( 9.6%)	
Progressive Disease (PD)	29 ( 25.2%)	27 ( 23.7%)	
Not Evaluable	8 ( 7.0%)	23 ( 20.2%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Geographic Region			
ORR Relative Risk Cochran's Q p-value			0.7861
CBR Relative Risk Cochran's Q p-value			0.4086
Geographic Region: Europe			
	125	130	
Objective Response (CR or PR)			
n (%)	32 ( 25.6%)	23 ( 17.7%)	
95% CI (Exact)	(18.2, 34.2)	(11.6, 25.4)	
Odds Ratio			1.601
95% CI (Exact)			(0.875, 2.927)
P-value			0.1256
Relative Risk			1.447
95% CI (Exact)			(0.899, 2.330)
P-value			0.1256
Risk Difference			0.079
95% CI (Wald)			(-0.022, 0.180)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Geographic Region: Europe	125	130	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	43 ( 34.4%)	35 ( 26.9%)	
95% CI (Exact)	(26.1, 43.4)	(19.5, 35.4)	
Odds Ratio			1.423
95% CI (Exact)			(0.833, 2.431)
P-value			0.1961
Relative Risk			1.278
95% CI (Exact)			(0.880, 1.855)
P-value			0.1961
Risk Difference			0.075
95% CI (Wald)			(-0.038, 0.188)
Best Overall Response, n (%)			
Complete Response (CR)	2 ( 1.6%)	0	
Partial Response (PR)	30 ( 24.0%)	23 ( 17.7%)	
Stable Disease (SD)	54 ( 43.2%)	52 ( 40.0%)	
SD >= 6 months	11 ( 8.8%)	12 ( 9.2%)	
Progressive Disease (PD)	32 ( 25.6%)	38 ( 29.2%)	
Not Evaluable	7 ( 5.6%)	17 ( 13.1%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Geographic Region: North America	80	83	
Objective Response (CR or PR)			
n (%)	11 ( 13.8%)	9 ( 10.8%)	
95% CI (Exact)	(7.1, 23.3)	(5.1, 19.6)	
Odds Ratio			1.311
95% CI (Exact)			(0.512, 3.356)
P-value			0.5730
Relative Risk			1.268
95% CI (Exact)			(0.555, 2.896)
P-value			0.5730
Risk Difference			0.029
95% CI (Wald)			(-0.072, 0.130)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Geographic Region: North America	80	83	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	26 ( 32.5%)	16 ( 19.3%)	
95% CI (Exact)	(22.4, 43.9)	(11.4, 29.4)	
Odds Ratio			2.016
95% CI (Exact)			(0.983, 4.136)
P-value			0.0544
Relative Risk			1.686
95% CI (Exact)			(0.981, 2.898)
P-value			0.0544
Risk Difference			0.132
95% CI (Wald)			(-0.001, 0.265)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	11 ( 13.8%)	9 ( 10.8%)	
Stable Disease (SD)	47 ( 58.8%)	31 ( 37.3%)	
SD >= 6 months	15 ( 18.8%)	7 ( 8.4%)	
Progressive Disease (PD)	16 ( 20.0%)	20 ( 24.1%)	
Not Evaluable	6 ( 7.5%)	23 ( 27.7%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Prior CDK treatment duration			
ORR Relative Risk Cochran's Q p-value			0.2029
CBR Relative Risk Cochran's Q p-value			0.0728
Prior CDK treatment duration: <= 12 months	118	128	
Objective Response (CR or PR)			
n (%)	29 ( 24.6%)	18 ( 14.1%)	
95% CI (Exact)	(17.1, 33.4)	(8.6, 21.3)	
Odds Ratio			1.991
95% CI (Exact)			(1.038, 3.819)
P-value			0.0365
Relative Risk			1.748
95% CI (Exact)			(1.026, 2.976)
P-value			0.0365
Risk Difference			0.105
95% CI (Wald)			(0.007, 0.203)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Prior CDK treatment duration: <= 12 months	118	128	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	46 ( 39.0%)	28 ( 21.9%)	
95% CI (Exact)	(30.1, 48.4)	(15.1, 30.0)	
Odds Ratio			2.282
95% CI (Exact)			(1.305, 3.991)
P-value			0.0035
Relative Risk			1.782
95% CI (Exact)			(1.197, 2.652)
P-value			0.0035
Risk Difference			0.171
95% CI (Wald)			(0.058, 0.285)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	29 ( 24.6%)	18 ( 14.1%)	
Stable Disease (SD)	54 ( 45.8%)	49 ( 38.3%)	
SD >= 6 months	17 ( 14.4%)	10 ( 7.8%)	
Progressive Disease (PD)	26 ( 22.0%)	39 ( 30.5%)	
Not Evaluable	9 ( 7.6%)	22 ( 17.2%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Prior CDK treatment duration: > 12 months	82	82	
Objective Response (CR or PR)			
n (%)	14 ( 17.1%)	14 ( 17.1%)	
95% CI (Exact)	(9.7, 27.0)	(9.7, 27.0)	
Odds Ratio			1.000
95% CI (Exact)			(0.443, 2.256)
P-value			1.0000
Relative Risk			1.000
95% CI (Exact)			(0.509, 1.963)
P-value			1.0000
Risk Difference			0.000
95% CI (Wald)			(-0.115, 0.115)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Prior CDK treatment duration: > 12 months	82	82	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	23 ( 28.0%)	23 ( 28.0%)	
95% CI (Exact)	(18.7, 39.1)	(18.7, 39.1)	
Odds Ratio			1.000
95% CI (Exact)			(0.506, 1.977)
P-value			1.0000
Relative Risk			1.000
95% CI (Exact)			(0.612, 1.633)
P-value			1.0000
Risk Difference			0.000
95% CI (Wald)			(-0.138, 0.138)
Best Overall Response, n (%)			
Complete Response (CR)	2 ( 2.4%)	0	
Partial Response (PR)	12 ( 14.6%)	14 ( 17.1%)	
Stable Disease (SD)	45 ( 54.9%)	33 ( 40.2%)	
SD >= 6 months	9 ( 11.0%)	9 ( 11.0%)	
Progressive Disease (PD)	20 ( 24.4%)	18 ( 22.0%)	
Not Evaluable	3 ( 3.7%)	17 ( 20.7%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Early relapse			
ORR Relative Risk Cochran's Q p-value			0.0635
CBR Relative Risk Cochran's Q p-value			0.0502
Early relapse: Yes	13	17	
Objective Response (CR or PR)			
n (%)	6 ( 46.2%)	1 ( 5.9%)	
95% CI (Exact)	(19.2, 74.9)	(0.1, 28.7)	
Odds Ratio			13.714
95% CI (Exact)			(1.381, 136.212)
P-value			0.0111
Relative Risk			7.846
95% CI (Exact)			(1.072, 57.401)
P-value			0.0111
Risk Difference			0.403
95% CI (Wald)			(0.110, 0.696)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Early relapse: Yes	13	17	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	7 ( 53.8%)	1 ( 5.9%)	
95% CI (Exact)	(25.1, 80.8)	(0.1, 28.7)	
Odds Ratio			18.667
95% CI (Exact)			(1.879, 185.399)
P-value			0.0038
Relative Risk			9.154
95% CI (Exact)			(1.281, 65.437)
P-value			0.0038
Risk Difference			0.480
95% CI (Wald)			(0.186, 0.773)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	6 ( 46.2%)	1 ( 5.9%)	
Stable Disease (SD)	6 ( 46.2%)	1 ( 5.9%)	
SD >= 6 months	1 ( 7.7%)	0	
Progressive Disease (PD)	1 ( 7.7%)	10 ( 58.8%)	
Not Evaluable	0	5 ( 29.4%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Early relapse: No	185	192	
Objective Response (CR or PR)			
n (%)	34 ( 18.4%)	31 ( 16.1%)	
95% CI (Exact)	(13.1, 24.7)	(11.2, 22.1)	
Odds Ratio			1.169
95% CI (Exact)			(0.685, 1.997)
P-value			0.5667
Relative Risk			1.138
95% CI (Exact)			(0.731, 1.772)
P-value			0.5667
Risk Difference			0.022
95% CI (Wald)			(-0.054, 0.099)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Early relapse: No	185	192	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	59 ( 31.9%)	49 ( 25.5%)	
95% CI (Exact)	(25.2, 39.1)	(19.5, 32.3)	
Odds Ratio			1.367
95% CI (Exact)			(0.873, 2.139)
P-value			0.1719
Relative Risk			1.250
95% CI (Exact)			(0.907, 1.722)
P-value			0.1719
Risk Difference			0.064
95% CI (Wald)			(-0.027, 0.155)
Best Overall Response, n (%)			
Complete Response (CR)	2 ( 1.1%)	0	
Partial Response (PR)	32 ( 17.3%)	31 ( 16.1%)	
Stable Disease (SD)	92 ( 49.7%)	79 ( 41.1%)	
SD >= 6 months	25 ( 13.5%)	18 ( 9.4%)	
Progressive Disease (PD)	46 ( 24.9%)	47 ( 24.5%)	
Not Evaluable	13 ( 7.0%)	35 ( 18.2%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR)			
ORR Relative Risk Cochran's Q p-value			0.3104
CBR Relative Risk Cochran's Q p-value			0.3014
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes	181	187	
Objective Response (CR or PR)			
n (%)	36 ( 19.9%)	29 ( 15.5%)	
95% CI (Exact)	(14.3, 26.5)	(10.6, 21.5)	
Odds Ratio			1.353
95% CI (Exact)			(0.789, 2.318)
P-value			0.2712
Relative Risk			1.283
95% CI (Exact)			(0.822, 2.000)
P-value			0.2712
Risk Difference			0.044
95% CI (Wald)			(-0.034, 0.122)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes	181	187	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	56 ( 30.9%)	44 ( 23.5%)	
95% CI (Exact)	(24.3, 38.2)	(17.6, 30.3)	
Odds Ratio			1.456
95% CI (Exact)			(0.917, 2.311)
P-value			0.1107
Relative Risk			1.315
95% CI (Exact)			(0.938, 1.843)
P-value			0.1107
Risk Difference			0.074
95% CI (Wald)			(-0.017, 0.165)
Best Overall Response, n (%)			
Complete Response (CR)	2 ( 1.1%)	0	
Partial Response (PR)	34 ( 18.8%)	29 ( 15.5%)	
Stable Disease (SD)	87 ( 48.1%)	74 ( 39.6%)	
SD >= 6 months	20 ( 11.0%)	15 ( 8.0%)	
Progressive Disease (PD)	45 ( 24.9%)	49 ( 26.2%)	
Not Evaluable	13 ( 7.2%)	35 ( 18.7%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No	24	26	
Objective Response (CR or PR)			
n (%)	7 ( 29.2%)	3 ( 11.5%)	
95% CI (Exact)	(12.6, 51.1)	(2.4, 30.2)	
Odds Ratio			3.157
95% CI (Exact)			(0.711, 14.017)
P-value			0.1233
Relative Risk			2.528
95% CI (Exact)			(0.736, 8.678)
P-value			0.1233
Risk Difference			0.176
95% CI (Wald)			(-0.043, 0.396)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No	24	26	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	13 ( 54.2%)	7 ( 26.9%)	
95% CI (Exact)	(32.8, 74.4)	(11.6, 47.8)	
Odds Ratio			3.208
95% CI (Exact)			(0.984, 10.454)
P-value			0.0518
Relative Risk			2.012
95% CI (Exact)			(0.967, 4.185)
P-value			0.0518
Risk Difference			0.272
95% CI (Wald)			(0.010, 0.535)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	7 ( 29.2%)	3 ( 11.5%)	
Stable Disease (SD)	14 ( 58.3%)	9 ( 34.6%)	
SD >= 6 months	6 ( 25.0%)	4 ( 15.4%)	
Progressive Disease (PD)	3 ( 12.5%)	9 ( 34.6%)	
Not Evaluable	0	5 ( 19.2%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method.

The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR

Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months

The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Chemotherapy in neo/adjuvant setting			
ORR Relative Risk Cochran's Q p-value			0.0243
CBR Relative Risk Cochran's Q p-value			0.0756
Chemotherapy in neo/adjuvant setting: Yes	125	145	
Objective Response (CR or PR)			
n (%)	31 ( 24.8%)	18 ( 12.4%)	
95% CI (Exact)	(17.5, 33.3)	(7.5, 18.9)	
Odds Ratio			2.327
95% CI (Exact)			(1.228, 4.409)
P-value			0.0086
Relative Risk			1.998
95% CI (Exact)			(1.177, 3.392)
P-value			0.0086
Risk Difference			0.124
95% CI (Wald)			(0.031, 0.217)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Chemotherapy in neo/adjuvant setting: Yes	125	145	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	42 ( 33.6%)	28 ( 19.3%)	
95% CI (Exact)	(25.4, 42.6)	(13.2, 26.7)	
Odds Ratio			2.114
95% CI (Exact)			(1.214, 3.682)
P-value			0.0077
Relative Risk			1.740
95% CI (Exact)			(1.150, 2.632)
P-value			0.0077
Risk Difference			0.143
95% CI (Wald)			(0.038, 0.248)
Best Overall Response, n (%)			
Complete Response (CR)	2 ( 1.6%)	0	
Partial Response (PR)	29 ( 23.2%)	18 ( 12.4%)	
Stable Disease (SD)	62 ( 49.6%)	52 ( 35.9%)	
SD >= 6 months	11 ( 8.8%)	10 ( 6.9%)	
Progressive Disease (PD)	25 ( 20.0%)	42 ( 29.0%)	
Not Evaluable	7 ( 5.6%)	33 ( 22.8%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Chemotherapy in neo/adjuvant setting: No	80	68	
Objective Response (CR or PR)			
n (%)	12 ( 15.0%)	14 ( 20.6%)	
95% CI (Exact)	(8.0, 24.7)	(11.7, 32.1)	
Odds Ratio			0.681
95% CI (Exact)			(0.291, 1.592)
P-value			0.3749
Relative Risk			0.729
95% CI (Exact)			(0.362, 1.467)
P-value			0.3749
Risk Difference			-0.056
95% CI (Wald)			(-0.180, 0.068)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Chemotherapy in neo/adjuvant setting: No	80	68	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	27 ( 33.8%)	23 ( 33.8%)	
95% CI (Exact)	(23.6, 45.2)	(22.8, 46.3)	
Odds Ratio			0.997
95% CI (Exact)			(0.503, 1.974)
P-value			0.9925
Relative Risk			0.998
95% CI (Exact)			(0.635, 1.569)
P-value			0.9925
Risk Difference			-0.001
95% CI (Wald)			(-0.154, 0.152)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	12 ( 15.0%)	14 ( 20.6%)	
Stable Disease (SD)	39 ( 48.8%)	31 ( 45.6%)	
SD >= 6 months	15 ( 18.8%)	9 ( 13.2%)	
Progressive Disease (PD)	23 ( 28.8%)	16 ( 23.5%)	
Not Evaluable	6 ( 7.5%)	7 ( 10.3%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Trop2			
ORR Relative Risk Cochran's Q p-value			0.2529
CBR Relative Risk Cochran's Q p-value			0.0912
Trop2: H-Score < 100	68	73	
Objective Response (CR or PR)			
n (%)	14 ( 20.6%)	16 ( 21.9%)	
95% CI (Exact)	(11.7, 32.1)	(13.1, 33.1)	
Odds Ratio			0.924
95% CI (Exact)			(0.412, 2.072)
P-value			0.8477
Relative Risk			0.939
95% CI (Exact)			(0.497, 1.776)
P-value			0.8477
Risk Difference			-0.013
95% CI (Wald)			(-0.148, 0.122)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Trop2: H-Score < 100	68	73	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	19 ( 27.9%)	22 ( 30.1%)	
95% CI (Exact)	(17.7, 40.1)	(19.9, 42.0)	
Odds Ratio			0.899
95% CI (Exact)			(0.434, 1.862)
P-value			0.7750
Relative Risk			0.927
95% CI (Exact)			(0.553, 1.555)
P-value			0.7750
Risk Difference			-0.022
95% CI (Wald)			(-0.172, 0.128)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	14 ( 20.6%)	16 ( 21.9%)	
Stable Disease (SD)	34 ( 50.0%)	27 ( 37.0%)	
SD >= 6 months	5 ( 7.4%)	6 ( 8.2%)	
Progressive Disease (PD)	15 ( 22.1%)	21 ( 28.8%)	
Not Evaluable	5 ( 7.4%)	9 ( 12.3%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Trop2: H-Score >= 100 and <= 200	71	78	
Objective Response (CR or PR)			
n (%)	17 ( 23.9%)	9 ( 11.5%)	
95% CI (Exact)	(14.6, 35.5)	(5.4, 20.8)	
Odds Ratio			2.414
95% CI (Exact)			(0.998, 5.836)
P-value			0.0470
Relative Risk			2.075
95% CI (Exact)			(0.989, 4.355)
P-value			0.0470
Risk Difference			0.124
95% CI (Wald)			(0.002, 0.246)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Trop2: H-Score >= 100 and <= 200	71	78	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	27 ( 38.0%)	15 ( 19.2%)	
95% CI (Exact)	(26.8, 50.3)	(11.2, 29.7)	
Odds Ratio			2.577
95% CI (Exact)			(1.230, 5.398)
P-value			0.0111
Relative Risk			1.977
95% CI (Exact)			(1.149, 3.404)
P-value			0.0111
Risk Difference			0.188
95% CI (Wald)			(0.045, 0.331)
Best Overall Response, n (%)			
Complete Response (CR)	1 ( 1.4%)	0	
Partial Response (PR)	16 ( 22.5%)	9 ( 11.5%)	
Stable Disease (SD)	35 ( 49.3%)	25 ( 32.1%)	
SD >= 6 months	10 ( 14.1%)	6 ( 7.7%)	
Progressive Disease (PD)	17 ( 23.9%)	30 ( 38.5%)	
Not Evaluable	2 ( 2.8%)	14 ( 17.9%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method.

The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR

Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months

The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Trop2: H-Score > 200	42	26	
Objective Response (CR or PR)			
n (%)	10 ( 23.8%)	6 ( 23.1%)	
95% CI (Exact)	(12.1, 39.5)	(9.0, 43.6)	
Odds Ratio			1.042
95% CI (Exact)			(0.328, 3.310)
P-value			0.9452
Relative Risk			1.032
95% CI (Exact)			(0.425, 2.503)
P-value			0.9452
Risk Difference			0.007
95% CI (Wald)			(-0.200, 0.214)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Trop2: H-Score > 200	42	26	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	17 ( 40.5%)	11 ( 42.3%)	
95% CI (Exact)	(25.6, 56.7)	(23.4, 63.1)	
Odds Ratio			0.927
95% CI (Exact)			(0.344, 2.502)
P-value			0.8823
Relative Risk			0.957
95% CI (Exact)			(0.536, 1.708)
P-value			0.8823
Risk Difference			-0.018
95% CI (Wald)			(-0.259, 0.223)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	10 ( 23.8%)	6 ( 23.1%)	
Stable Disease (SD)	14 ( 33.3%)	16 ( 61.5%)	
SD >= 6 months	7 ( 16.7%)	5 ( 19.2%)	
Progressive Disease (PD)	14 ( 33.3%)	3 ( 11.5%)	
Not Evaluable	4 ( 9.5%)	1 ( 3.8%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Subgroup: Investigators' Choice of Chemotherapy			
ORR Relative Risk Cochran's Q p-value			0.0173
CBR Relative Risk Cochran's Q p-value			0.0024
Investigators' Choice of Chemotherapy: Capecitabine	21	23	
Objective Response (CR or PR)			
n (%)	2 ( 9.5%)	6 ( 26.1%)	
95% CI (Exact)	(1.2, 30.4)	(10.2, 48.4)	
Odds Ratio			0.298
95% CI (Exact)			(0.053, 1.680)
P-value			0.1596
Relative Risk			0.365
95% CI (Exact)			(0.083, 1.615)
P-value			0.1596
Risk Difference			-0.166
95% CI (Wald)			(-0.385, 0.053)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Investigators' Choice of Chemotherapy: Capecitabine	21	23	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	3 ( 14.3%)	8 ( 34.8%)	
95% CI (Exact)	(3.0, 36.3)	(16.4, 57.3)	
Odds Ratio			0.313
95% CI (Exact)			(0.070, 1.391)
P-value			0.1210
Relative Risk			0.411
95% CI (Exact)			(0.125, 1.347)
P-value			0.1210
Risk Difference			-0.205
95% CI (Wald)			(-0.451, 0.041)
Best Overall Response, n (%)			
Complete Response (CR)	0	0	
Partial Response (PR)	2 ( 9.5%)	6 ( 26.1%)	
Stable Disease (SD)	11 ( 52.4%)	9 ( 39.1%)	
SD >= 6 months	1 ( 4.8%)	2 ( 8.7%)	
Progressive Disease (PD)	8 ( 38.1%)	6 ( 26.1%)	
Not Evaluable	0	2 ( 8.7%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method.

The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR  
Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Investigators' Choice of Chemotherapy: Eribulin	128	130	
Objective Response (CR or PR)			
n (%)	28 ( 21.9%)	24 ( 18.5%)	
95% CI (Exact)	(15.1, 30.0)	(12.2, 26.2)	
Odds Ratio			1.237
95% CI (Exact)			(0.672, 2.276)
P-value			0.4952
Relative Risk			1.185
95% CI (Exact)			(0.728, 1.929)
P-value			0.4952
Risk Difference			0.034
95% CI (Wald)			(-0.064, 0.132)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Investigators' Choice of Chemotherapy: Eribulin	128	130	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	45 ( 35.2%)	39 ( 30.0%)	
95% CI (Exact)	(26.9, 44.1)	(22.3, 38.7)	
Odds Ratio			1.265
95% CI (Exact)			(0.751, 2.132)
P-value			0.3778
Relative Risk			1.172
95% CI (Exact)			(0.824, 1.667)
P-value			0.3778
Risk Difference			0.052
95% CI (Wald)			(-0.063, 0.166)
Best Overall Response, n (%)			
Complete Response (CR)	1 ( 0.8%)	0	
Partial Response (PR)	27 ( 21.1%)	24 ( 18.5%)	
Stable Disease (SD)	64 ( 50.0%)	58 ( 44.6%)	
SD >= 6 months	17 ( 13.3%)	15 ( 11.5%)	
Progressive Disease (PD)	27 ( 21.1%)	28 ( 21.5%)	
Not Evaluable	9 ( 7.0%)	20 ( 15.4%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method.

The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR

Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months

The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Investigators' Choice of Chemotherapy: Vinorelbine	56	60	
Objective Response (CR or PR)			
n (%)	13 ( 23.2%)	2 ( 3.3%)	
95% CI (Exact)	(13.0, 36.4)	(0.4, 11.5)	
Odds Ratio			8.767
95% CI (Exact)			(1.879, 40.899)
P-value			0.0015
Relative Risk			6.964
95% CI (Exact)			(1.644, 29.496)
P-value			0.0015
Risk Difference			0.199
95% CI (Wald)			(0.079, 0.318)

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.2.3.2: Objective Response Rate (ORR), Clinical Benefit Rate (CBR) per BICR by Selected Subgroup  
ITT Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=205)	TPC (N=213)	Treatment Comparison
Investigators' Choice of Chemotherapy: Vinorelbine	56	60	
Clinical Benefit Rate (CR, PR, or SD >= 6 months)			
n (%)	21 ( 37.5%)	4 ( 6.7%)	
95% CI (Exact)	(24.9, 51.5)	(1.8, 16.2)	
Odds Ratio			8.400
95% CI (Exact)			(2.661, 26.519)
P-value			<0.0001
Relative Risk			5.625
95% CI (Exact)			(2.058, 15.372)
P-value			<0.0001
Risk Difference			0.308
95% CI (Wald)			(0.167, 0.450)
Best Overall Response, n (%)			
Complete Response (CR)	1 ( 1.8%)	0	
Partial Response (PR)	12 ( 21.4%)	2 ( 3.3%)	
Stable Disease (SD)	26 ( 46.4%)	16 ( 26.7%)	
SD >= 6 months	8 ( 14.3%)	2 ( 3.3%)	
Progressive Disease (PD)	13 ( 23.2%)	24 ( 40.0%)	
Not Evaluable	4 ( 7.1%)	18 ( 30.0%)	

The denominator is the number of patients in the ITT excluding those pre-assigned to Gemcitabine for each treatment arm per category in each subgroup. Odds ratio and relative risk CIs and p-values are from unstratified CMH method, risk difference CI is from Wald method. The best overall response is derived based on the tumor response per BICR at each tumor assessment according to RECIST 1.1. Response of CR Clinical benefit rate (CBR) is the proportion of participants who have best confirmed response as CR/PR or durable SD with duration >= 6 months The analysis is based on Interim 2 data cut at 7/1/2022.

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**Anhang 4-G 6: Patientenberichtete Endpunkte**

**Anhang 4-G 6.1: Rücklauf**

## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

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Table 15.15.2.1  
 Completion Rate for EORTC QLQ-C30  
 Intent-to-Treat Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Visit	SG (N=205)	TPC (N=213)	Overall (N=418)
Baseline	187/205 (91.2%)	184/213 (86.4%)	371/418 (88.8%)
C2D1	162/186 (87.1%)	152/176 (86.4%)	314/362 (86.7%)
C3D1	134/146 (91.8%)	107/121 (88.4%)	241/267 (90.3%)
C4D1	120/134 (89.6%)	99/109 (90.8%)	219/243 (90.1%)
C5D1	107/121 (88.4%)	85/94 (90.4%)	192/215 (89.3%)
C6D1	103/112 (92.0%)	73/84 (86.9%)	176/196 (89.8%)
C7D1	86/94 (91.5%)	55/59 (93.2%)	141/153 (92.2%)
C8D1	81/89 (91.0%)	51/53 (96.2%)	132/142 (93.0%)
C9D1	65/71 (91.5%)	43/44 (97.7%)	108/115 (93.9%)
C10D1	58/62 (93.5%)	31/37 (83.8%)	89/99 (89.9%)
C11D1	49/52 (94.2%)	24/28 (85.7%)	73/80 (91.3%)
C12D1	44/48 (91.7%)	20/23 (87.0%)	64/71 (90.1%)
C13D1	36/39 (92.3%)	16/17 (94.1%)	52/56 (92.9%)
C14D1	35/36 (97.2%)	13/16 (81.3%)	48/52 (92.3%)
C15D1	30/33 (90.9%)	14/16 (87.5%)	44/49 (89.8%)
C16D1	30/31 (96.8%)	11/13 (84.6%)	41/44 (93.2%)
C17D1	28/29 (96.6%)	7/10 (70.0%)	35/39 (89.7%)
C18D1	23/25 (92.0%)	7/7 (100.0%)	30/32 (93.8%)
C19D1	21/23 (91.3%)	6/6 (100.0%)	27/29 (93.1%)
C20D1	20/20 (100.0%)	4/4 (100.0%)	24/24 (100.0%)

Note: "Intent-to-Treat Population" is defined as all randomized subjects. A subject is considered having an evaluable assessment of EORTC QLQ-C30 if at least one of the 15 domains/scales were completed at a given assessment. The denominator for Cycle 1 Day 1 (C1D1) visit is estimated based on the number of ITT population. The denominator for C2D1, C3D1, etc. visits is estimated based on the number of ITT population having at least one dose at or after Cycle 2, 3, etc., respectively, or having a valid assessment at that visit. The denominator for EOT visit is estimated based on the number of ITT population with treatment discontinuation and still being followed after the date of last dose plus 30 days or having an HRQoL evaluable assessment at the EOT visit. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.2.1  
 Completion Rate for EORTC QLQ-C30  
 Intent-to-Treat Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Visit	SG (N=205)	TPC (N=213)	Overall (N=418)
C21D1	18/19 (94.7%)	4/4 (100.0%)	22/23 (95.7%)
C22D1	15/16 (93.8%)	3/3 (100.0%)	18/19 (94.7%)
C23D1	11/12 (91.7%)	3/3 (100.0%)	14/15 (93.3%)
C24D1	10/10 (100.0%)	2/2 (100.0%)	12/12 (100.0%)
C25D1	9/10 (90.0%)	0/1 (0.0%)	9/11 (81.8%)
C26D1	8/8 (100.0%)	1/1 (100.0%)	9/9 (100.0%)
C27D1	8/8 (100.0%)	1/1 (100.0%)	9/9 (100.0%)
C28D1	7/7 (100.0%)	1/1 (100.0%)	8/8 (100.0%)
C29D1	4/5 (80.0%)	1/1 (100.0%)	5/6 (83.3%)
C30D1	4/4 (100.0%)	1/1 (100.0%)	5/5 (100.0%)
C31D1	2/3 (66.7%)	1/1 (100.0%)	3/4 (75.0%)
C32D1	2/3 (66.7%)	1/1 (100.0%)	3/4 (75.0%)
C33D1	3/3 (100.0%)	1/1 (100.0%)	4/4 (100.0%)
C34D1	3/3 (100.0%)	0/0 (NE)	3/3 (100.0%)
C35D1	2/3 (66.7%)	0/0 (NE)	2/3 (66.7%)
C36D1	3/3 (100.0%)	0/0 (NE)	3/3 (100.0%)
C37D1	3/3 (100.0%)	0/0 (NE)	3/3 (100.0%)
C38D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)
C39D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)
C40D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)

Note: "Intent-to-Treat Population" is defined as all randomized subjects. A subject is considered having an evaluable assessment of EORTC QLQ-C30 if at least one of the 15 domains/scales were completed at a given assessment. The denominator for Cycle 1 Day 1 (C1D1) visit is estimated based on the number of ITT population. The denominator for C2D1, C3D1, etc. visits is estimated based on the number of ITT population having at least one dose at or after Cycle 2, 3, etc., respectively, or having a valid assessment at that visit. The denominator for EOT visit is estimated based on the number of ITT population with treatment discontinuation and still being followed after the date of last dose plus 30 days or having an HRQoL evaluable assessment at the EOT visit. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.2.1  
 Completion Rate for EORTC QLQ-C30  
 Intent-to-Treat Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Visit	SG (N=205)	TPC (N=213)	Overall (N=418)
C41D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)
C42D1	1/1 (100.0%)	0/0 (NE)	1/1 (100.0%)
C43D1	1/1 (100.0%)	0/0 (NE)	1/1 (100.0%)
End of Treatment	138/169 (81.7%)	132/166 (79.5%)	270/335 (80.6%)

Note: "Intent-to-Treat Population" is defined as all randomized subjects. A subject is considered having an evaluable assessment of EORTC QLQ-C30 if at least one of the 15 domains/scales were completed at a given assessment. The denominator for Cycle 1 Day 1 (C1D1) visit is estimated based on the number of ITT population. The denominator for C2D1, C3D1, etc. visits is estimated based on the number of ITT population having at least one dose at or after Cycle 2, 3, etc., respectively, or having a valid assessment at that visit. The denominator for EOT visit is estimated based on the number of ITT population with treatment discontinuation and still being followed after the date of last dose plus 30 days or having an HRQoL evaluable assessment at the EOT visit. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.2.2  
 Completion Rate for EQ-5D VAS  
 Intent-to-Treat Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Visit	SG (N=205)	TPC (N=213)	Overall (N=418)
Baseline	182/205 (88.8%)	182/213 (85.4%)	364/418 (87.1%)
C2D1	161/186 (86.6%)	150/176 (85.2%)	311/362 (85.9%)
C3D1	135/146 (92.5%)	108/121 (89.3%)	243/267 (91.0%)
C4D1	119/134 (88.8%)	98/109 (89.9%)	217/243 (89.3%)
C5D1	107/121 (88.4%)	84/94 (89.4%)	191/215 (88.8%)
C6D1	103/112 (92.0%)	73/84 (86.9%)	176/196 (89.8%)
C7D1	85/94 (90.4%)	55/59 (93.2%)	140/153 (91.5%)
C8D1	81/89 (91.0%)	50/53 (94.3%)	131/142 (92.3%)
C9D1	65/71 (91.5%)	42/44 (95.5%)	107/115 (93.0%)
C10D1	59/62 (95.2%)	30/37 (81.1%)	89/99 (89.9%)
C11D1	49/52 (94.2%)	24/28 (85.7%)	73/80 (91.3%)
C12D1	43/48 (89.6%)	20/23 (87.0%)	63/71 (88.7%)
C13D1	37/39 (94.9%)	16/17 (94.1%)	53/56 (94.6%)
C14D1	34/36 (94.4%)	13/16 (81.3%)	47/52 (90.4%)
C15D1	30/33 (90.9%)	14/16 (87.5%)	44/49 (89.8%)
C16D1	30/31 (96.8%)	11/13 (84.6%)	41/44 (93.2%)
C17D1	28/29 (96.6%)	7/10 (70.0%)	35/39 (89.7%)
C18D1	23/25 (92.0%)	7/7 (100.0%)	30/32 (93.8%)
C19D1	21/23 (91.3%)	6/6 (100.0%)	27/29 (93.1%)
C20D1	19/20 (95.0%)	4/4 (100.0%)	23/24 (95.8%)
C21D1	18/19 (94.7%)	4/4 (100.0%)	22/23 (95.7%)

Note: "Intent-to-Treat Population" is defined as all randomized subjects. A subject is considered having an evaluable assessment of EQ-VAS if no missing EQ-VAS value at a given assessment. The denominator for Cycle 1 Day 1 (C1D1) visit is estimated based on the number of ITT population. The denominator for C2D1, C3D1, etc. visits is estimated based on the number of ITT population having at least one dose at or after Cycle 2, 3, etc., respectively, or having an valid assessment at that visit. The denominator for EOT visit is estimated based on the number of ITT population with treatment discontinuation and still being followed after the date of last dose plus 30 days or having an HRQoL evaluable assessment at the EOT visit. SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

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Table 15.15.2.2  
Completion Rate for EQ-5D VAS  
Intent-to-Treat Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Visit	SG (N=205)	TPC (N=213)	Overall (N=418)
C22D1	15/16 (93.8%)	3/3 (100.0%)	18/19 (94.7%)
C23D1	11/12 (91.7%)	3/3 (100.0%)	14/15 (93.3%)
C24D1	10/10 (100.0%)	2/2 (100.0%)	12/12 (100.0%)
C25D1	9/10 (90.0%)	0/1 (0.0%)	9/11 (81.8%)
C26D1	8/8 (100.0%)	1/1 (100.0%)	9/9 (100.0%)
C27D1	8/8 (100.0%)	1/1 (100.0%)	9/9 (100.0%)
C28D1	6/7 (85.7%)	1/1 (100.0%)	7/8 (87.5%)
C29D1	4/5 (80.0%)	1/1 (100.0%)	5/6 (83.3%)
C30D1	4/4 (100.0%)	1/1 (100.0%)	5/5 (100.0%)
C31D1	2/3 (66.7%)	1/1 (100.0%)	3/4 (75.0%)
C32D1	2/3 (66.7%)	1/1 (100.0%)	3/4 (75.0%)
C33D1	2/3 (66.7%)	1/1 (100.0%)	3/4 (75.0%)
C34D1	2/3 (66.7%)	0/0 (NE)	2/3 (66.7%)
C35D1	2/3 (66.7%)	0/0 (NE)	2/3 (66.7%)
C36D1	3/3 (100.0%)	0/0 (NE)	3/3 (100.0%)
C37D1	3/3 (100.0%)	0/0 (NE)	3/3 (100.0%)
C38D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)
C39D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)
C40D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)
C41D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)

Note: "Intent-to-Treat Population" is defined as all randomized subjects. A subject is considered having an evaluable assessment of EQ-VAS if no missing EQ-VAS value at a given assessment. The denominator for Cycle 1 Day 1 (C1D1) visit is estimated based on the number of ITT population. The denominator for C2D1, C3D1, etc. visits is estimated based on the number of ITT population having at least one dose at or after Cycle 2, 3, etc., respectively, or having a valid assessment at that visit. The denominator for EOT visit is estimated based on the number of ITT population with treatment discontinuation and still being followed after the date of last dose plus 30 days or having an HRQoL evaluable assessment at the EOT visit. SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

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Table 15.15.2.2  
 Completion Rate for EQ-5D VAS  
 Intent-to-Treat Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Visit	SG (N=205)	TPC (N=213)	Overall (N=418)
C42D1	1/1 (100.0%)	0/0 (NE)	1/1 (100.0%)
C43D1	1/1 (100.0%)	0/0 (NE)	1/1 (100.0%)
End of Treatment	135/168 (80.4%)	131/166 (78.9%)	266/334 (79.6%)

Note: "Intent-to-Treat Population" is defined as all randomized subjects. A subject is considered having an evaluable assessment of EQ-VAS if no missing EQ-VAS value at a given assessment. The denominator for Cycle 1 Day 1 (C1D1) visit is estimated based on the number of ITT population. The denominator for C2D1, C3D1, etc. visits is estimated based on the number of ITT population having at least one dose at or after Cycle 2, 3, etc., respectively, or having a valid assessment at that visit. The denominator for EOT visit is estimated based on the number of ITT population with treatment discontinuation and still being followed after the date of last dose plus 30 days or having an HRQoL evaluable assessment at the EOT visit. SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

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Table 15.15.2.3  
Completion Rate for PRO-CTCAE  
Safety Population

Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Visit	SG (N=201)	TPC (N=194)	Overall (N=395)
Baseline	177/201 (88.1%)	180/194 (92.8%)	357/395 (90.4%)
C2D1	163/186 (87.6%)	151/176 (85.8%)	314/362 (86.7%)
C3D1	133/146 (91.1%)	106/121 (87.6%)	239/267 (89.5%)
C4D1	119/134 (88.8%)	97/109 (89.0%)	216/243 (88.9%)
C5D1	106/121 (87.6%)	83/94 (88.3%)	189/215 (87.9%)
C6D1	102/112 (91.1%)	74/84 (88.1%)	176/196 (89.8%)
C7D1	85/94 (90.4%)	56/59 (94.9%)	141/153 (92.2%)
C8D1	80/89 (89.9%)	51/53 (96.2%)	131/142 (92.3%)
C9D1	64/71 (90.1%)	42/44 (95.5%)	106/115 (92.2%)
C10D1	57/62 (91.9%)	31/37 (83.8%)	88/99 (88.9%)
C11D1	49/52 (94.2%)	24/28 (85.7%)	73/80 (91.3%)
C12D1	43/48 (89.6%)	20/23 (87.0%)	63/71 (88.7%)
C13D1	36/39 (92.3%)	15/17 (88.2%)	51/56 (91.1%)
C14D1	35/36 (97.2%)	13/16 (81.3%)	48/52 (92.3%)
C15D1	30/33 (90.9%)	14/16 (87.5%)	44/49 (89.8%)
C16D1	30/31 (96.8%)	11/13 (84.6%)	41/44 (93.2%)
C17D1	28/29 (96.6%)	7/10 (70.0%)	35/39 (89.7%)
C18D1	23/25 (92.0%)	7/7 (100.0%)	30/32 (93.8%)
C19D1	21/23 (91.3%)	6/6 (100.0%)	27/29 (93.1%)
C20D1	20/20 (100.0%)	4/4 (100.0%)	24/24 (100.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. A subject is considered having an evaluable assessment of PRO-CTCAE if at least one of the 16 PRO-CTCAE assessment items were completed at a given assessment. The denominator for Cycle 1 Day 1 (C1D1) visit is estimated based on the number of safety population. The denominator for C2D1, C3D1, etc. visits is estimated based on the number of safety population having at least one dose at or after Cycle 2, 3, etc., respectively, or having an valid assessment at that visit. The denominator for EOT visit is estimated based on the number of safety population with treatment discontinuation and still being followed after the date of last dose plus 30 days or having an HRQoL evaluable assessment at the EOT visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.2.3  
Completion Rate for PRO-CTCAE  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Visit	SG (N=201)	TPC (N=194)	Overall (N=395)
C21D1	18/19 (94.7%)	4/4 (100.0%)	22/23 (95.7%)
C22D1	15/16 (93.8%)	3/3 (100.0%)	18/19 (94.7%)
C23D1	10/11 (90.9%)	3/3 (100.0%)	13/14 (92.9%)
C24D1	10/10 (100.0%)	2/2 (100.0%)	12/12 (100.0%)
C25D1	9/10 (90.0%)	0/1 (0.0%)	9/11 (81.8%)
C26D1	8/8 (100.0%)	1/1 (100.0%)	9/9 (100.0%)
C27D1	8/8 (100.0%)	1/1 (100.0%)	9/9 (100.0%)
C28D1	7/7 (100.0%)	1/1 (100.0%)	8/8 (100.0%)
C29D1	4/5 (80.0%)	1/1 (100.0%)	5/6 (83.3%)
C30D1	4/4 (100.0%)	1/1 (100.0%)	5/5 (100.0%)
C31D1	2/3 (66.7%)	1/1 (100.0%)	3/4 (75.0%)
C32D1	2/3 (66.7%)	1/1 (100.0%)	3/4 (75.0%)
C33D1	3/3 (100.0%)	1/1 (100.0%)	4/4 (100.0%)
C34D1	3/3 (100.0%)	0/0 (NE)	3/3 (100.0%)
C35D1	2/3 (66.7%)	0/0 (NE)	2/3 (66.7%)
C36D1	3/3 (100.0%)	0/0 (NE)	3/3 (100.0%)
C37D1	3/3 (100.0%)	0/0 (NE)	3/3 (100.0%)
C38D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)
C39D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)
C40D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. A subject is considered having an evaluable assessment of PRO-CTCAE if at least one of the 16 PRO-CTCAE assessment items were completed at a given assessment. The denominator for Cycle 1 Day 1 (C1D1) visit is estimated based on the number of safety population. The denominator for C2D1, C3D1, etc. visits is estimated based on the number of safety population having at least one dose at or after Cycle 2, 3, etc., respectively, or having an valid assessment at that visit. The denominator for EOT visit is estimated based on the number of safety population with treatment discontinuation and still being followed after the date of last dose plus 30 days or having an HRQoL evaluable assessment at the EOT visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.2.3  
Completion Rate for PRO-CTCAE  
Safety Population

Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Visit	SG (N=201)	TPC (N=194)	Overall (N=395)
C41D1	2/2 (100.0%)	0/0 (NE)	2/2 (100.0%)
C42D1	1/1 (100.0%)	0/0 (NE)	1/1 (100.0%)
C43D1	1/1 (100.0%)	0/0 (NE)	1/1 (100.0%)
End of Treatment	137/168 (81.5%)	132/166 (79.5%)	269/334 (80.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. A subject is considered having an evaluable assessment of PRO-CTCAE if at least one of the 16 PRO-CTCAE assessment items were completed at a given assessment. The denominator for Cycle 1 Day 1 (C1D1) visit is estimated based on the number of safety population. The denominator for C2D1, C3D1, etc. visits is estimated based on the number of safety population having at least one dose at or after Cycle 2, 3, etc., respectively, or having a valid assessment at that visit. The denominator for EOT visit is estimated based on the number of safety population with treatment discontinuation and still being followed after the date of last dose plus 30 days or having an HRQoL evaluable assessment at the EOT visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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**Anhang 4-G 6.2: Veränderung zu Baseline**



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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
Global Health Status / QoL	Baseline	N	174			165			
		Mean	63.9			63.8			
		SD	20.87			19.75			
		Median	66.7			66.7			
		95% CI	60.8, 67.0			60.8, 66.9			
		Q1, Q3	50.0, 83.3			50.0, 75.0			
		Min, Max	8.3, 100.0			8.3, 100.0			
	C2D1		N	152	152	152	144	144	144
			Mean	64.9	63.3	-1.6	64.3	60.9	-3.4
			SD	20.85	21.47	18.79	19.95	20.94	19.25
		Median	66.7	66.7	0.0	66.7	66.7	0.0	
		95% CI	61.6, 68.3	59.8, 66.7	-4.7, 1.4	61.0, 67.6	57.4, 64.3	-6.6, -0.2	
		Q1, Q3	50.0, 83.3	50.0, 83.3	-8.3, 8.3	50.0, 75.0	50.0, 79.2	-16.7, 8.3	
		Min, Max	8.3, 100.0	0.0, 100.0	-83.3, 33.3	8.3, 100.0	0.0, 100.0	-100.0, 58.3	
		Mean Diff (95% CI) [a]			-1.6 (-4.7, 1.4)			-3.4 (-6.6, -0.2)	
		P-value [a]			0.282			0.035	
		Mean Diff (95% CI) [b]			1.8 (-2.6, 6.1)				
	P-value [b]			0.424					
	Effect Size (95% CI) [c]			0.09 (-0.13, 0.30)					
C3D1		N	123	123	123	100	100	100	
		Mean	65.4	65.7	0.2	65.9	64.8	-1.1	
		SD	19.87	20.23	18.71	18.43	19.01	16.99	
		Median	66.7	66.7	0.0	66.7	66.7	0.0	
		95% CI	61.9, 69.0	62.0, 69.3	-3.1, 3.5	62.3, 69.6	61.1, 68.6	-4.5, 2.3	
		Q1, Q3	50.0, 83.3	50.0, 83.3	-8.3, 16.7	50.0, 83.3	50.0, 83.3	-16.7, 8.3	
		Min, Max	16.7, 100.0	16.7, 100.0	-66.7, 50.0	8.3, 100.0	16.7, 100.0	-33.3, 41.7	
		Mean Diff (95% CI) [a]			0.2 (-3.1, 3.5)			-1.1 (-4.5, 2.3)	
		P-value [a]			0.904			0.525	
		Mean Diff (95% CI) [b]			1.3 (-3.5, 6.1)				
	P-value [b]			0.595					
	Effect Size (95% CI) [c]			0.06 (-0.15, 0.28)					

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		65.0	68.5	3.5	66.1	66.8	0.6
	SD		19.14	21.42	19.30	18.04	20.28	19.64
	Median		66.7	70.8	0.0	66.7	66.7	0.0
	95% CI		61.4, 68.6	64.5, 72.5	-0.1, 7.1	62.4, 69.8	62.6, 70.9	-3.4, 4.6
	Q1, Q3		50.0, 83.3	50.0, 83.3	-4.2, 16.7	50.0, 83.3	50.0, 83.3	-8.3, 8.3
	Min, Max		16.7, 100.0	0.0, 100.0	-75.0, 50.0	8.3, 100.0	16.7, 100.0	-50.0, 66.7
	Mean Diff (95% CI) [a]				3.5 (-0.1, 7.1)			0.6 (-3.4, 4.6)
	P-value [a]				0.058			0.760
	Mean Diff (95% CI) [b]				2.9 (-2.5, 8.2)			
	P-value [b]				0.292			
	Effect Size (95% CI) [c]				0.14 (-0.07, 0.35)			
	C5D1	N		98	98	98	80	80
Mean			65.8	67.9	2.0	65.5	64.3	-1.2
SD			19.42	19.37	21.07	17.92	19.27	17.50
Median			66.7	66.7	0.0	66.7	66.7	0.0
95% CI			61.9, 69.7	64.0, 71.7	-2.2, 6.3	61.5, 69.5	60.0, 68.6	-5.1, 2.6
Q1, Q3			50.0, 83.3	50.0, 83.3	-8.3, 16.7	50.0, 83.3	50.0, 83.3	-8.3, 8.3
Min, Max			16.7, 100.0	16.7, 100.0	-66.7, 50.0	8.3, 100.0	16.7, 100.0	-41.7, 58.3
Mean Diff (95% CI) [a]					2.0 (-2.2, 6.3)			-1.2 (-5.1, 2.6)
P-value [a]					0.340			0.525
Mean Diff (95% CI) [b]					3.3 (-2.5, 9.1)			
P-value [b]					0.265			
Effect Size (95% CI) [c]					0.16 (-0.05, 0.37)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C6D1	N		96	96	96	68	68	68
	Mean		67.0	70.7	3.6	65.3	65.9	0.6
	SD		19.38	20.05	18.65	18.30	21.96	18.90
	Median		66.7	70.8	0.0	66.7	66.7	0.0
	95% CI		63.1, 70.9	66.6, 74.7	-0.1, 7.4	60.9, 69.7	60.6, 71.2	-4.0, 5.2
	Q1, Q3		50.0, 83.3	58.3, 83.3	0.0, 16.7	50.0, 83.3	50.0, 83.3	-8.3, 16.7
	Min, Max		16.7, 100.0	0.0, 100.0	-66.7, 50.0	8.3, 100.0	0.0, 100.0	-50.0, 41.7
	Mean Diff (95% CI) [a]				3.6 (-0.1, 7.4)			0.6 (-4.0, 5.2)
	P-value [a]				0.058			0.790
	Mean Diff (95% CI) [b]				3.0 (-2.8, 8.9)			
	P-value [b]				0.309			
	Effect Size (95% CI) [c]				0.15 (-0.06, 0.36)			
	C7D1	N		79	79	79	52	52
Mean			65.4	68.6	3.2	67.9	71.2	3.2
SD			19.25	19.52	17.62	17.73	17.03	18.54
Median			66.7	66.7	0.0	75.0	66.7	0.0
95% CI			61.1, 69.7	64.2, 72.9	-0.8, 7.1	63.0, 72.9	66.4, 75.9	-2.0, 8.4
Q1, Q3			50.0, 83.3	50.0, 83.3	0.0, 16.7	50.0, 83.3	62.5, 83.3	-8.3, 16.7
Min, Max			16.7, 100.0	8.3, 100.0	-58.3, 50.0	16.7, 100.0	33.3, 100.0	-50.0, 58.3
Mean Diff (95% CI) [a]					3.2 (-0.8, 7.1)			3.2 (-2.0, 8.4)
P-value [a]					0.114			0.218
Mean Diff (95% CI) [b]					0.0 (-6.4, 6.3)			
P-value [b]					0.990			
Effect Size (95% CI) [c]					0.00 (-0.21, 0.21)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		75	75	75	50	50	50
	Mean		64.9	68.6	3.7	68.5	71.0	2.5
	SD		19.15	19.59	18.34	17.76	16.34	17.44
	Median		66.7	66.7	0.0	75.0	66.7	0.0
	95% CI		60.5, 69.3	64.0, 73.1	-0.6, 7.9	63.5, 73.5	66.4, 75.6	-2.5, 7.5
	Q1, Q3		50.0, 83.3	58.3, 83.3	0.0, 16.7	58.3, 83.3	66.7, 83.3	-8.3, 8.3
	Min, Max		16.7, 100.0	8.3, 100.0	-75.0, 41.7	16.7, 100.0	0.0, 100.0	-50.0, 50.0
	Mean Diff (95% CI) [a]				3.7 (-0.6, 7.9)			2.5 (-2.5, 7.5)
	P-value [a]				0.088			0.316
	Mean Diff (95% CI) [b]				1.2 (-5.3, 7.7)			
	P-value [b]				0.723			
	Effect Size (95% CI) [c]				0.06 (-0.16, 0.27)			
	C9D1	N		60	60	60	42	42
Mean			66.0	71.9	6.0	69.0	68.3	-0.8
SD			20.54	19.04	16.39	18.89	17.48	19.72
Median			66.7	75.0	0.0	75.0	66.7	0.0
95% CI			60.7, 71.3	67.0, 76.9	1.7, 10.2	63.2, 74.9	62.8, 73.7	-6.9, 5.4
Q1, Q3			50.0, 83.3	58.3, 83.3	0.0, 16.7	58.3, 83.3	58.3, 83.3	-16.7, 16.7
Min, Max			16.7, 100.0	25.0, 100.0	-33.3, 41.7	16.7, 100.0	16.7, 100.0	-33.3, 50.0
Mean Diff (95% CI) [a]					6.0 (1.7, 10.2)			-0.8 (-6.9, 5.4)
P-value [a]					0.006			0.796
Mean Diff (95% CI) [b]					6.8 (-0.4, 13.9)			
P-value [b]					0.062			
Effect Size (95% CI) [c]					0.33 (0.12, 0.55)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C10D1	N		54	54	54	30	30	30	
	Mean		64.2	71.1	6.9	67.5	68.6	1.1	
	SD		21.39	18.93	21.03	19.62	19.66	21.63	
	Median		66.7	75.0	8.3	75.0	70.8	0.0	
	95% CI		58.4, 70.0	66.0, 76.3	1.2, 12.7	60.2, 74.8	61.3, 76.0	-7.0, 9.2	
	Q1, Q3		50.0, 83.3	66.7, 83.3	0.0, 16.7	50.0, 83.3	50.0, 83.3	-8.3, 16.7	
	Min, Max		16.7, 100.0	16.7, 100.0	-83.3, 41.7	16.7, 100.0	16.7, 100.0	-41.7, 50.0	
	Mean Diff (95% CI) [a]				6.9 (1.2, 12.7)			1.1 (-7.0, 9.2)	
	P-value [a]				0.019			0.780	
	Mean Diff (95% CI) [b]				5.8 (-3.8, 15.5)				
	P-value [b]				0.231				
	Effect Size (95% CI) [c]				0.29 (0.07, 0.50)				
	C11D1	N		45	45	45	23	23	23
		Mean		65.2	72.6	7.4	72.5	71.0	-1.4
SD			21.34	17.01	19.64	17.84	14.84	17.34	
Median			66.7	75.0	8.3	83.3	66.7	0.0	
95% CI			58.8, 71.6	67.5, 77.7	1.5, 13.3	64.7, 80.2	64.6, 77.4	-8.9, 6.1	
Q1, Q3			50.0, 83.3	66.7, 83.3	0.0, 16.7	50.0, 83.3	58.3, 83.3	-16.7, 0.0	
Min, Max			16.7, 100.0	25.0, 100.0	-41.7, 50.0	41.7, 100.0	50.0, 100.0	-33.3, 33.3	
Mean Diff (95% CI) [a]					7.4 (1.5, 13.3)			-1.4 (-8.9, 6.1)	
P-value [a]					0.015			0.692	
Mean Diff (95% CI) [b]					8.9 (-0.8, 18.5)				
P-value [b]					0.072				
Effect Size (95% CI) [c]					0.43 (0.22, 0.65)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		41	41	41	19	19	19	
	Mean		66.5	71.1	4.7	71.1	71.9	0.9	
	SD		21.93	18.36	17.58	16.52	17.39	18.61	
	Median		66.7	66.7	0.0	75.0	66.7	0.0	
	95% CI		59.5, 73.4	65.3, 76.9	-0.9, 10.2	63.1, 79.0	63.5, 80.3	-8.1, 9.8	
	Q1, Q3		50.0, 83.3	66.7, 83.3	0.0, 16.7	58.3, 83.3	58.3, 83.3	-8.3, 16.7	
	Min, Max		16.7, 100.0	33.3, 100.0	-25.0, 50.0	41.7, 100.0	41.7, 100.0	-33.3, 33.3	
	Mean Diff (95% CI) [a]				4.7 (-0.9, 10.2)			0.9 (-8.1, 9.8)	
	P-value [a]				0.096			0.840	
	Mean Diff (95% CI) [b]				3.8 (-6.2, 13.7)				
	P-value [b]				0.448				
	Effect Size (95% CI) [c]				0.19 (-0.03, 0.40)				
	C13D1	N		33	33	33	15	15	15
		Mean		67.4	71.0	3.5	72.8	68.9	-3.9
SD			21.08	16.15	17.93	17.67	15.26	14.73	
Median			66.7	66.7	0.0	75.0	66.7	0.0	
95% CI			60.0, 74.9	65.2, 76.7	-2.8, 9.9	63.0, 82.6	60.4, 77.3	-12.0, 4.3	
Q1, Q3			50.0, 83.3	58.3, 83.3	-8.3, 16.7	58.3, 83.3	58.3, 83.3	-16.7, 8.3	
Min, Max			16.7, 100.0	33.3, 100.0	-33.3, 41.7	41.7, 100.0	50.0, 100.0	-25.0, 16.7	
Mean Diff (95% CI) [a]					3.5 (-2.8, 9.9)			-3.9 (-12.0, 4.3)	
P-value [a]					0.266			0.324	
Mean Diff (95% CI) [b]					7.4 (-3.2, 18.1)				
P-value [b]					0.168				
Effect Size (95% CI) [c]					0.36 (0.15, 0.58)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C14D1	N	33	33	33	12	12	12
		Mean	66.9	71.7	4.8	70.8	69.4	-1.4
		SD	20.46	19.43	14.13	17.94	22.00	25.08
		Median	66.7	75.0	8.3	75.0	70.8	0.0
		95% CI	59.7, 74.2	64.8, 78.6	-0.2, 9.8	59.4, 82.2	55.5, 83.4	-17.3, 14.5
		Q1, Q3	50.0, 83.3	66.7, 83.3	-8.3, 16.7	54.2, 83.3	50.0, 83.3	-12.5, 16.7
		Min, Max	16.7, 100.0	16.7, 100.0	-16.7, 41.7	41.7, 100.0	33.3, 100.0	-50.0, 33.3
		Mean Diff (95% CI) [a]			4.8 (-0.2, 9.8)			-1.4 (-17.3, 14.5)
		P-value [a]			0.060			0.851
		Mean Diff (95% CI) [b]			6.2 (-5.8, 18.1)			
		P-value [b]			0.303			
		Effect Size (95% CI) [c]			0.30 (0.09, 0.52)			
	C15D1	N	28	28	28	13	13	13
		Mean	64.9	67.0	2.1	70.5	67.3	-3.2
		SD	20.71	18.91	16.76	17.22	16.12	21.66
		Median	66.7	66.7	0.0	66.7	66.7	0.0
		95% CI	56.9, 72.9	59.6, 74.3	-4.4, 8.6	60.1, 80.9	57.6, 77.1	-16.3, 9.9
		Q1, Q3	50.0, 83.3	50.0, 83.3	-4.2, 8.3	58.3, 83.3	58.3, 75.0	-8.3, 8.3
		Min, Max	16.7, 100.0	16.7, 100.0	-33.3, 41.7	41.7, 100.0	41.7, 100.0	-41.7, 33.3
		Mean Diff (95% CI) [a]			2.1 (-4.4, 8.6)			-3.2 (-16.3, 9.9)
		P-value [a]			0.516			0.603
		Mean Diff (95% CI) [b]			5.3 (-7.2, 17.8)			
		P-value [b]			0.397			
		Effect Size (95% CI) [c]			0.26 (0.05, 0.47)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C16D1	N		28	28	28	10	10	10
	Mean		66.7	69.0	2.4	68.3	63.3	-5.0
	SD		20.54	19.36	18.82	18.76	21.59	24.91
	Median		70.8	66.7	4.2	66.7	66.7	0.0
	95% CI		58.7, 74.6	61.5, 76.6	-4.9, 9.7	54.9, 81.8	47.9, 78.8	-22.8, 12.8
	Q1, Q3		50.0, 83.3	50.0, 83.3	-12.5, 16.7	50.0, 83.3	58.3, 66.7	-16.7, 8.3
	Min, Max		16.7, 100.0	33.3, 100.0	-50.0, 41.7	41.7, 100.0	25.0, 100.0	-58.3, 25.0
	Mean Diff (95% CI) [a]				2.4 (-4.9, 9.7)			-5.0 (-22.8, 12.8)
	P-value [a]				0.509			0.541
	Mean Diff (95% CI) [b]				7.4 (-7.9, 22.7)			
	P-value [b]				0.335			
	Effect Size (95% CI) [c]				0.36 (0.15, 0.58)			
	C17D1	N		26	26	26	7	7
Mean			65.7	68.3	2.6	61.9	63.1	1.2
SD			20.73	20.95	16.46	16.57	13.49	21.21
Median			70.8	70.8	0.0	58.3	66.7	0.0
95% CI			57.3, 74.1	59.8, 76.7	-4.1, 9.2	46.6, 77.2	50.6, 75.6	-18.4, 20.8
Q1, Q3			50.0, 83.3	58.3, 83.3	-8.3, 16.7	50.0, 83.3	50.0, 66.7	0.0, 16.7
Min, Max			16.7, 100.0	16.7, 100.0	-33.3, 41.7	41.7, 83.3	41.7, 83.3	-41.7, 25.0
Mean Diff (95% CI) [a]					2.6 (-4.1, 9.2)			1.2 (-18.4, 20.8)
P-value [a]					0.434			0.887
Mean Diff (95% CI) [b]					1.4 (-13.8, 16.6)			
P-value [b]					0.855			
Effect Size (95% CI) [c]					0.07 (-0.15, 0.28)			

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C18D1	N		22	22	22	7	7	7	
	Mean		63.6	70.1	6.4	69.0	67.9	-1.2	
	SD		21.75	19.19	18.35	20.81	18.28	16.27	
	Median		66.7	66.7	0.0	66.7	66.7	0.0	
	95% CI		54.0, 73.3	61.6, 78.6	-1.7, 14.6	49.8, 88.3	51.0, 84.8	-16.2, 13.9	
	Q1, Q3		50.0, 83.3	66.7, 83.3	0.0, 16.7	50.0, 83.3	50.0, 83.3	-16.7, 8.3	
	Min, Max		16.7, 100.0	16.7, 100.0	-33.3, 41.7	41.7, 100.0	50.0, 100.0	-25.0, 25.0	
	Mean Diff (95% CI) [a]				6.4 (-1.7, 14.6)			-1.2 (-16.2, 13.9)	
	P-value [a]				0.115			0.853	
	Mean Diff (95% CI) [b]				7.6 (-8.3, 23.6)				
	P-value [b]				0.335				
	Effect Size (95% CI) [c]				0.37 (0.16, 0.59)				
	C19D1	N		20	20	20	6	6	6
		Mean		64.6	68.8	4.2	66.7	63.9	-2.8
SD			22.27	20.75	14.93	21.73	12.55	17.21	
Median			70.8	66.7	0.0	62.5	66.7	-8.3	
95% CI			54.2, 75.0	59.0, 78.5	-2.8, 11.2	43.9, 89.5	50.7, 77.1	-20.8, 15.3	
Q1, Q3			50.0, 83.3	66.7, 83.3	0.0, 8.3	50.0, 83.3	50.0, 66.7	-16.7, 8.3	
Min, Max			16.7, 100.0	16.7, 100.0	-33.3, 33.3	41.7, 100.0	50.0, 83.3	-16.7, 25.0	
Mean Diff (95% CI) [a]					4.2 (-2.8, 11.2)			-2.8 (-20.8, 15.3)	
P-value [a]					0.227			0.709	
Mean Diff (95% CI) [b]					6.9 (-7.9, 21.8)				
P-value [b]					0.343				
Effect Size (95% CI) [c]					0.34 (0.13, 0.55)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C20D1	N		19	19	19	4	4	4	
	Mean		68.0	69.7	1.8	64.6	66.7	2.1	
	SD		21.56	17.83	13.20	14.23	13.61	4.17	
	Median		75.0	66.7	0.0	62.5	66.7	0.0	
	95% CI		57.6, 78.4	61.1, 78.3	-4.6, 8.1	41.9, 87.2	45.0, 88.3	-4.5, 8.7	
	Q1, Q3		50.0, 83.3	66.7, 83.3	-8.3, 8.3	54.2, 75.0	58.3, 75.0	0.0, 4.2	
	Min, Max		16.7, 100.0	16.7, 100.0	-16.7, 33.3	50.0, 83.3	50.0, 83.3	0.0, 8.3	
	Mean Diff (95% CI) [a]				1.8 (-4.6, 8.1)			2.1 (-4.5, 8.7)	
	P-value [a]				0.570			0.391	
	Mean Diff (95% CI) [b]				-0.3 (-14.4, 13.8)				
	P-value [b]				0.962				
	Effect Size (95% CI) [c]				-0.02 (-0.23, 0.20)				
	C21D1	N		18	18	18	4	4	4
		Mean		67.1	71.8	4.6	64.6	62.5	-2.1
SD			21.86	16.20	15.71	14.23	15.96	10.49	
Median			75.0	66.7	8.3	62.5	58.3	0.0	
95% CI			56.3, 78.0	63.7, 79.8	-3.2, 12.4	41.9, 87.2	37.1, 87.9	-18.8, 14.6	
Q1, Q3			50.0, 83.3	66.7, 83.3	-8.3, 16.7	54.2, 75.0	50.0, 75.0	-8.3, 4.2	
Min, Max			16.7, 100.0	33.3, 100.0	-16.7, 33.3	50.0, 83.3	50.0, 83.3	-16.7, 8.3	
Mean Diff (95% CI) [a]					4.6 (-3.2, 12.4)			-2.1 (-18.8, 14.6)	
P-value [a]					0.228			0.718	
Mean Diff (95% CI) [b]					6.7 (-10.6, 24.1)				
P-value [b]					0.429				
Effect Size (95% CI) [c]					0.33 (0.12, 0.54)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		15	15	15	3	3	3	
	Mean		69.4	71.7	2.2	63.9	72.2	8.3	
	SD		21.28	16.00	13.90	17.35	25.46	8.33	
	Median		75.0	66.7	0.0	58.3	66.7	8.3	
	95% CI		57.7, 81.2	62.8, 80.5	-5.5, 9.9	20.8, 107.0	9.0, 135.5	-12.4, 29.0	
	Q1, Q3		58.3, 83.3	66.7, 83.3	-8.3, 8.3	50.0, 83.3	50.0, 100.0	0.0, 16.7	
	Min, Max		16.7, 100.0	41.7, 91.7	-33.3, 25.0	50.0, 83.3	50.0, 100.0	0.0, 16.7	
	Mean Diff (95% CI) [a]				2.2 (-5.5, 9.9)			8.3 (-12.4, 29.0)	
	P-value [a]				0.546			0.225	
	Mean Diff (95% CI) [b]				-6.1 (-24.0, 11.8)				
	P-value [b]				0.479				
	Effect Size (95% CI) [c]				-0.30 (-0.51, -0.09)				
	C23D1	N		11	11	11	3	3	3
		Mean		66.7	68.9	2.3	63.9	69.4	5.6
SD			23.57	19.40	11.24	17.35	12.73	4.81	
Median			75.0	75.0	0.0	58.3	66.7	8.3	
95% CI			50.8, 82.5	55.9, 82.0	-5.3, 9.8	20.8, 107.0	37.8, 101.1	-6.4, 17.5	
Q1, Q3			50.0, 83.3	50.0, 83.3	0.0, 8.3	50.0, 83.3	58.3, 83.3	0.0, 8.3	
Min, Max			16.7, 100.0	33.3, 100.0	-16.7, 16.7	50.0, 83.3	58.3, 83.3	0.0, 8.3	
Mean Diff (95% CI) [a]					2.3 (-5.3, 9.8)			5.6 (-6.4, 17.5)	
P-value [a]					0.518			0.184	
Mean Diff (95% CI) [b]					-3.3 (-18.1, 11.5)				
P-value [b]					0.638				
Effect Size (95% CI) [c]					-0.16 (-0.37, 0.05)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C24D1	N	10	10	10	2	2	2
		Mean	67.5	70.0	2.5	66.7	66.7	0.0
		SD	21.32	20.11	11.82	23.57	23.57	0.00
		Median	75.0	75.0	4.2	66.7	66.7	0.0
		95% CI	52.2, 82.8	55.6, 84.4	-6.0, 11.0	-145.1, 278.4	-145.1, 278.4	0.0, 0.0
		Q1, Q3	58.3, 83.3	58.3, 83.3	0.0, 8.3	50.0, 83.3	50.0, 83.3	0.0, 0.0
		Min, Max	16.7, 83.3	33.3, 100.0	-16.7, 16.7	50.0, 83.3	50.0, 83.3	0.0, 0.0
		Mean Diff (95% CI) [a]			2.5 (-6.0, 11.0)			0.0 (0.0, 0.0)
		P-value [a]			0.520			NE
		Mean Diff (95% CI) [b]			2.5 (-16.8, 21.8)			
		P-value [b]			0.779			
		Effect Size (95% CI) [c]			0.12 (-0.09, 0.34)			
	C25D1	N	9	9	9	0	0	0
		Mean	65.7	68.5	2.8	NE	NE	NE
		SD	21.83	23.85	9.32	NE	NE	NE
		Median	75.0	66.7	0.0	NE	NE	NE
		95% CI	49.0, 82.5	50.2, 86.9	-4.4, 9.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	58.3, 83.3	58.3, 83.3	0.0, 8.3	NE, NE	NE, NE	NE, NE
		Min, Max	16.7, 83.3	16.7, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			2.8 (-4.4, 9.9)			NE (NE, NE)
		P-value [a]			0.397			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	75.0	70.8	-4.2	83.3	100.0	16.7
		SD	11.79	22.71	20.89	NE	NE	NE
		Median	79.2	83.3	0.0	83.3	100.0	16.7
		95% CI	65.1, 84.9	51.8, 89.8	-21.6, 13.3	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.8, 83.3	58.3, 83.3	-8.3, 8.3	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Min, Max	50.0, 83.3	25.0, 91.7	-50.0, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Mean Diff (95% CI) [a]			-4.2 (-21.6, 13.3)			16.7 (NE, NE)
		P-value [a]			0.590			NE
		Mean Diff (95% CI) [b]			-20.8 (-73.2, 31.6)			
		P-value [b]			0.378			
		Effect Size (95% CI) [c]			-1.02 (-1.25, -0.80)			
	C27D1	N	8	8	8	1	1	1
		Mean	75.0	80.2	5.2	83.3	100.0	16.7
		SD	11.79	14.73	10.85	NE	NE	NE
		Median	79.2	83.3	8.3	83.3	100.0	16.7
		95% CI	65.1, 84.9	67.9, 92.5	-3.9, 14.3	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.8, 83.3	70.8, 87.5	0.0, 12.5	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Min, Max	50.0, 83.3	58.3, 100.0	-16.7, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Mean Diff (95% CI) [a]			5.2 (-3.9, 14.3)			16.7 (NE, NE)
		P-value [a]			0.217			NE
		Mean Diff (95% CI) [b]			-11.5 (-38.7, 15.8)			
		P-value [b]			0.353			
		Effect Size (95% CI) [c]			-0.56 (-0.78, -0.35)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C28D1	N		7	7	7	1	1	1	
	Mean		73.8	72.6	-1.2	83.3	100.0	16.7	
	SD		12.20	11.50	8.91	NE	NE	NE	
	Median		75.0	75.0	0.0	83.3	100.0	16.7	
	95% CI		62.5, 85.1	62.0, 83.3	-9.4, 7.0	NE, NE	NE, NE	NE, NE	
	Q1, Q3		66.7, 83.3	58.3, 83.3	-8.3, 8.3	83.3, 83.3	100.0, 100.0	16.7, 16.7	
	Min, Max		50.0, 83.3	58.3, 83.3	-16.7, 8.3	83.3, 83.3	100.0, 100.0	16.7, 16.7	
	Mean Diff (95% CI) [a]				-1.2 (-9.4, 7.0)			16.7 (NE, NE)	
	P-value [a]				0.736			NE	
	Mean Diff (95% CI) [b]				-17.9 (-41.2, 5.4)				
	P-value [b]				0.110				
	Effect Size (95% CI) [c]				-0.88 (-1.10, -0.65)				
	C29D1	N		4	4	4	1	1	1
		Mean		68.8	64.6	-4.2	83.3	50.0	-33.3
SD			14.23	14.23	14.43	NE	NE	NE	
Median			70.8	62.5	0.0	83.3	50.0	-33.3	
95% CI			46.1, 91.4	41.9, 87.2	-27.1, 18.8	NE, NE	NE, NE	NE, NE	
Q1, Q3			58.3, 79.2	54.2, 75.0	-12.5, 4.2	83.3, 83.3	50.0, 50.0	-33.3, -33.3	
Min, Max			50.0, 83.3	50.0, 83.3	-25.0, 8.3	83.3, 83.3	50.0, 50.0	-33.3, -33.3	
Mean Diff (95% CI) [a]					-4.2 (-27.1, 18.8)			-33.3 (NE, NE)	
P-value [a]					0.604			NE	
Mean Diff (95% CI) [b]					29.2 (-22.2, 80.5)				
P-value [b]					0.168				
Effect Size (95% CI) [c]					1.43 (1.19, 1.67)				

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C30D1	N		4	4	4	1	1	1	
	Mean		72.9	72.9	0.0	83.3	33.3	-50.0	
	SD		15.77	12.50	6.80	NE	NE	NE	
	Median		79.2	75.0	0.0	83.3	33.3	-50.0	
	95% CI		47.8, 98.0	53.0, 92.8	-10.8, 10.8	NE, NE	NE, NE	NE, NE	
	Q1, Q3		62.5, 83.3	62.5, 83.3	-4.2, 4.2	83.3, 83.3	33.3, 33.3	-50.0, -50.0	
	Min, Max		50.0, 83.3	58.3, 83.3	-8.3, 8.3	83.3, 83.3	33.3, 33.3	-50.0, -50.0	
	Mean Diff (95% CI) [a]				0.0 (-10.8, 10.8)			-50.0 (NE, NE)	
	P-value [a]				1.000			NE	
	Mean Diff (95% CI) [b]				50.0 (25.8, 74.2)				
	P-value [b]				0.007				
	Effect Size (95% CI) [c]				2.45 (2.17, 2.74)				
	C31D1	N		2	2	2	1	1	1
		Mean		66.7	70.8	4.2	83.3	66.7	-16.7
SD			23.57	29.46	5.89	NE	NE	NE	
Median			66.7	70.8	4.2	83.3	66.7	-16.7	
95% CI			-145.1, 278.4	-193.9, 335.5	-48.8, 57.1	NE, NE	NE, NE	NE, NE	
Q1, Q3			50.0, 83.3	50.0, 91.7	0.0, 8.3	83.3, 83.3	66.7, 66.7	-16.7, -16.7	
Min, Max			50.0, 83.3	50.0, 91.7	0.0, 8.3	83.3, 83.3	66.7, 66.7	-16.7, -16.7	
Mean Diff (95% CI) [a]					4.2 (-48.8, 57.1)			-16.7 (NE, NE)	
P-value [a]					0.500			NE	
Mean Diff (95% CI) [b]					20.8 (-70.9, 112.5)				
P-value [b]					0.212				
Effect Size (95% CI) [c]					1.02 (0.80, 1.25)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C32D1	N		2	2	2	1	1	1
	Mean		66.7	75.0	8.3	83.3	83.3	0.0
	SD		23.57	11.79	11.79	NE	NE	NE
	Median		66.7	75.0	8.3	83.3	83.3	0.0
	95% CI		-145.1, 278.4	-30.9, 180.9	-97.6, 114.2	NE, NE	NE, NE	NE, NE
	Q1, Q3		50.0, 83.3	66.7, 83.3	0.0, 16.7	83.3, 83.3	83.3, 83.3	0.0, 0.0
	Min, Max		50.0, 83.3	66.7, 83.3	0.0, 16.7	83.3, 83.3	83.3, 83.3	0.0, 0.0
	Mean Diff (95% CI) [a]				8.3 (-97.6, 114.2)			0.0 (NE, NE)
	P-value [a]				0.500			NE
	Mean Diff (95% CI) [b]				8.3 (-175.1, 191.7)			
	P-value [b]				0.667			
	Effect Size (95% CI) [c]				0.41 (0.19, 0.62)			
	C33D1	N		3	3	3	1	1
Mean			72.2	69.4	-2.8	83.3	66.7	-16.7
SD			19.25	17.35	4.81	NE	NE	NE
Median			83.3	75.0	0.0	83.3	66.7	-16.7
95% CI			24.4, 120.0	26.4, 112.5	-14.7, 9.2	NE, NE	NE, NE	NE, NE
Q1, Q3			50.0, 83.3	50.0, 83.3	-8.3, 0.0	83.3, 83.3	66.7, 66.7	-16.7, -16.7
Min, Max			50.0, 83.3	50.0, 83.3	-8.3, 0.0	83.3, 83.3	66.7, 66.7	-16.7, -16.7
Mean Diff (95% CI) [a]					-2.8 (-14.7, 9.2)			-16.7 (NE, NE)
P-value [a]					0.423			NE
Mean Diff (95% CI) [b]					13.9 (-10.0, 37.8)			
P-value [b]					0.130			
Effect Size (95% CI) [c]					0.68 (0.46, 0.90)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	72.2	80.6	8.3	NE	NE	NE
		SD	19.25	26.79	8.33	NE	NE	NE
		Median	83.3	91.7	8.3	NE	NE	NE
		95% CI	24.4, 120.0	14.0, 147.1	-12.4, 29.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	50.0, 83.3	50.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	50.0, 83.3	50.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-12.4, 29.0)			NE (NE, NE)
		P-value [a]			0.225			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	66.7	66.7	0.0	NE	NE	NE
		SD	23.57	35.36	11.79	NE	NE	NE
		Median	66.7	66.7	0.0	NE	NE	NE
		95% CI	-145.1, 278.4	-251.0, 384.3	-105.9, 105.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	50.0, 83.3	41.7, 91.7	-8.3, 8.3	NE, NE	NE, NE	NE, NE
		Min, Max	50.0, 83.3	41.7, 91.7	-8.3, 8.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (-105.9, 105.9)			NE (NE, NE)
		P-value [a]			1.000			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C36D1	N	3	3	3	0	0	0
		Mean	72.2	75.0	2.8	NE	NE	NE
		SD	19.25	30.05	12.73	NE	NE	NE
		Median	83.3	83.3	0.0	NE	NE	NE
		95% CI	24.4, 120.0	0.4, 149.6	-28.8, 34.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	50.0, 83.3	41.7, 100.0	-8.3, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	50.0, 83.3	41.7, 100.0	-8.3, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			2.8 (-28.8, 34.4)			NE (NE, NE)
		P-value [a]			0.742			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C37D1	N	3	3	3	0	0	0
		Mean	72.2	75.0	2.8	NE	NE	NE
		SD	19.25	22.05	4.81	NE	NE	NE
		Median	83.3	83.3	0.0	NE	NE	NE
		95% CI	24.4, 120.0	20.2, 129.8	-9.2, 14.7	NE, NE	NE, NE	NE, NE
		Q1, Q3	50.0, 83.3	50.0, 91.7	0.0, 8.3	NE, NE	NE, NE	NE, NE
		Min, Max	50.0, 83.3	50.0, 91.7	0.0, 8.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			2.8 (-9.2, 14.7)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	83.3	83.3	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	83.3	83.3	0.0	NE	NE	NE
		95% CI	83.3, 83.3	83.3, 83.3	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	83.3, 83.3	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	83.3, 83.3	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	83.3	91.7	8.3	NE	NE	NE
		SD	0.00	11.79	11.79	NE	NE	NE
		Median	83.3	91.7	8.3	NE	NE	NE
		95% CI	83.3, 83.3	-14.2, 197.6	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	83.3, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	83.3, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	83.3	87.5	4.2	NE	NE	NE
		SD	0.00	5.89	5.89	NE	NE	NE
		Median	83.3	87.5	4.2	NE	NE	NE
		95% CI	83.3, 83.3	34.6, 140.4	-48.8, 57.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	83.3, 91.7	0.0, 8.3	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	83.3, 91.7	0.0, 8.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			4.2 (-48.8, 57.1)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	83.3	79.2	-4.2	NE	NE	NE
		SD	0.00	5.89	5.89	NE	NE	NE
		Median	83.3	79.2	-4.2	NE	NE	NE
		95% CI	83.3, 83.3	26.2, 132.1	-57.1, 48.8	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	75.0, 83.3	-8.3, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	75.0, 83.3	-8.3, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-4.2 (-57.1, 48.8)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	83.3	83.3	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	83.3	83.3	0.0	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	83.3, 83.3	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	83.3, 83.3	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	83.3	91.7	8.3	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	83.3	91.7	8.3	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	91.7, 91.7	8.3, 8.3	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	91.7, 91.7	8.3, 8.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		130	130	130	125	125	125	
	Mean		64.1	57.9	-6.2	64.3	56.0	-8.3	
	SD		21.13	25.57	24.10	19.82	21.39	24.05	
	Median		66.7	66.7	0.0	66.7	58.3	-8.3	
	95% CI		60.4, 67.8	53.4, 62.3	-10.4, -2.0	60.8, 67.8	52.2, 59.8	-12.5, -4.0	
	Q1, Q3		50.0, 83.3	41.7, 83.3	-16.7, 8.3	50.0, 83.3	41.7, 66.7	-25.0, 8.3	
	Min, Max		8.3, 100.0	0.0, 100.0	-83.3, 50.0	8.3, 100.0	0.0, 100.0	-83.3, 50.0	
	Mean Diff (95% CI) [a]				-6.2 (-10.4, -2.0)			-8.3 (-12.5, -4.0)	
	P-value [a]				0.004			<.001	
	Mean Diff (95% CI) [b]				2.0 (-3.9, 8.0)				
	P-value [b]				0.498				
	Effect Size (95% CI) [c]				0.10 (-0.11, 0.31)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			69.6	69.6	0.0	63.0	43.5	-19.4
SD			15.54	15.54	11.79	20.03	29.10	42.29	
Median			66.7	70.8	0.0	66.7	41.7	-8.3	
95% CI			60.7, 78.6	60.7, 78.6	-6.8, 6.8	47.6, 78.4	21.1, 65.9	-51.9, 13.1	
Q1, Q3			58.3, 83.3	58.3, 83.3	-8.3, 8.3	50.0, 75.0	33.3, 66.7	-16.7, -8.3	
Min, Max			50.0, 100.0	41.7, 91.7	-25.0, 16.7	33.3, 100.0	0.0, 83.3	-100.0, 50.0	
Mean Diff (95% CI) [a]					0.0 (-6.8, 6.8)			-19.4 (-51.9, 13.1)	
P-value [a]					1.000			0.205	
Mean Diff (95% CI) [b]					19.4 (-5.2, 44.1)				
P-value [b]					0.115				
Effect Size (95% CI) [c]					0.95 (0.73, 1.18)				
Physical Functioning	Baseline	N	174			165			
	Mean		78.4			78.2			
	SD		19.90			19.73			
	Median		86.7			86.7			
	95% CI		75.4, 81.4			75.1, 81.2			
	Q1, Q3		66.7, 93.3			66.7, 93.3			
	Min, Max		20.0, 100.0			6.7, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C2D1	N		152	152	152	144	144	144	
	Mean		78.7	76.6	-2.2	79.4	75.3	-4.1	
	SD		20.12	21.87	14.77	19.42	21.20	12.26	
	95% CI		75.5, 81.9	73.1, 80.1	-4.5, 0.2	76.2, 82.6	71.8, 78.8	-6.1, -2.0	
	Median		86.7	86.7	0.0	86.7	80.0	0.0	
	Q1, Q3		66.7, 93.3	60.0, 93.3	-6.7, 6.7	66.7, 93.3	60.0, 93.3	-6.7, 0.0	
	Min, Max		20.0, 100.0	6.7, 100.0	-60.0, 31.7	6.7, 100.0	13.3, 100.0	-46.7, 33.3	
	Mean Diff (95% CI) [a]				-2.2 (-4.5, 0.2)			-4.1 (-6.1, -2.0)	
	P-value [a]				0.073			<.001	
	Mean Diff (95% CI) [b]				1.9 (-1.2, 5.0)				
	P-value [b]				0.235				
	Effect Size (95% CI) [c]				0.09 (-0.12, 0.31)				
	C3D1	N		124	124	124	102	102	102
		Mean		80.3	79.3	-1.1	80.3	78.4	-1.9
SD			17.83	20.56	14.39	17.21	18.54	12.96	
95% CI			77.2, 83.5	75.6, 82.9	-3.6, 1.5	76.9, 83.7	74.7, 82.0	-4.5, 0.6	
Median			86.7	86.7	0.0	86.7	80.0	0.0	
Q1, Q3			70.0, 93.3	66.7, 100.0	-6.7, 6.7	66.7, 93.3	66.7, 93.3	-6.7, 0.0	
Min, Max			26.7, 100.0	20.0, 100.0	-46.7, 41.7	33.3, 100.0	33.3, 100.0	-46.7, 40.0	
Mean Diff (95% CI) [a]					-1.1 (-3.6, 1.5)			-1.9 (-4.5, 0.6)	
P-value [a]					0.403			0.139	
Mean Diff (95% CI) [b]					0.8 (-2.8, 4.5)				
P-value [b]					0.653				
Effect Size (95% CI) [c]					0.04 (-0.17, 0.25)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		79.0	79.5	0.5	80.6	77.0	-3.6
	SD		19.12	21.47	14.97	17.06	19.16	14.77
	95% CI		75.4, 82.6	75.5, 83.5	-2.3, 3.3	77.1, 84.1	73.0, 80.9	-6.6, -0.6
	Median		86.7	86.7	0.0	86.7	80.0	0.0
	Q1, Q3		66.7, 93.3	70.0, 93.3	-6.7, 6.7	66.7, 93.3	60.0, 93.3	-13.3, 0.0
	Min, Max		26.7, 100.0	6.7, 100.0	-46.7, 33.3	33.3, 100.0	33.3, 100.0	-40.0, 40.0
	Mean Diff (95% CI) [a]				0.5 (-2.3, 3.3)			-3.6 (-6.6, -0.6)
	P-value [a]				0.719			0.020
	Mean Diff (95% CI) [b]				4.1 (0.0, 8.2)			
	P-value [b]				0.049			
	Effect Size (95% CI) [c]				0.21 (-0.01, 0.42)			
	C5D1	N		97	97	97	80	80
Mean			79.7	79.0	-0.7	80.9	77.3	-3.7
SD			18.77	20.28	13.72	17.05	19.31	13.53
95% CI			75.9, 83.5	75.0, 83.1	-3.4, 2.1	77.1, 84.7	73.0, 81.6	-6.7, -0.7
Median			86.7	86.7	0.0	86.7	80.0	0.0
Q1, Q3			66.7, 93.3	73.3, 93.3	-6.7, 6.7	70.0, 93.3	60.0, 93.3	-13.3, 0.0
Min, Max			26.7, 100.0	13.3, 100.0	-40.0, 40.0	33.3, 100.0	20.0, 100.0	-40.0, 33.3
Mean Diff (95% CI) [a]					-0.7 (-3.4, 2.1)			-3.7 (-6.7, -0.7)
P-value [a]					0.634			0.018
Mean Diff (95% CI) [b]					3.0 (-1.1, 7.1)			
P-value [b]					0.147			
Effect Size (95% CI) [c]					0.15 (-0.06, 0.36)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C6D1	N		96	96	96	69	69	69
	Mean		80.8	83.6	2.9	81.0	77.6	-3.4
	SD		18.75	18.38	11.84	15.93	18.79	13.33
	95% CI		77.0, 84.6	79.9, 87.4	0.5, 5.3	77.2, 84.8	73.1, 82.1	-6.6, -0.2
	Median		86.7	86.7	0.0	86.7	80.0	0.0
	Q1, Q3		73.3, 93.3	74.2, 100.0	0.0, 6.7	66.7, 93.3	60.0, 93.3	-6.7, 6.7
	Min, Max		26.7, 100.0	13.3, 100.0	-33.3, 33.3	33.3, 100.0	26.7, 100.0	-46.7, 20.0
	Mean Diff (95% CI) [a]				2.9 (0.5, 5.3)			-3.4 (-6.6, -0.2)
	P-value [a]				0.020			0.038
	Mean Diff (95% CI) [b]				6.3 (2.4, 10.2)			
	P-value [b]				0.002			
	Effect Size (95% CI) [c]				0.32 (0.10, 0.53)			
	C7D1	N		78	78	78	53	53
Mean			80.5	83.2	2.6	80.9	78.7	-2.2
SD			18.29	18.85	12.47	16.99	17.20	13.43
95% CI			76.4, 84.7	78.9, 87.4	-0.2, 5.4	76.2, 85.6	74.0, 83.5	-5.9, 1.5
Median			86.7	86.7	0.0	86.7	80.0	0.0
Q1, Q3			73.3, 93.3	80.0, 93.3	-6.7, 6.7	66.7, 93.3	66.7, 93.3	-13.3, 6.7
Min, Max			26.7, 100.0	20.0, 100.0	-40.0, 40.0	33.3, 100.0	33.3, 100.0	-26.7, 33.3
Mean Diff (95% CI) [a]					2.6 (-0.2, 5.4)			-2.2 (-5.9, 1.5)
P-value [a]					0.068			0.245
Mean Diff (95% CI) [b]					4.8 (0.3, 9.3)			
P-value [b]					0.039			
Effect Size (95% CI) [c]					0.24 (0.03, 0.45)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	50	50	50
	Mean		80.2	81.4	1.2	81.3	78.8	-2.5
	SD		18.60	20.32	13.68	17.14	17.39	12.98
	95% CI		76.0, 84.5	76.8, 86.0	-1.9, 4.3	76.5, 86.2	73.9, 83.7	-6.2, 1.2
	Median		86.7	86.7	0.0	86.7	80.0	0.0
	Q1, Q3		66.7, 93.3	73.3, 100.0	-6.7, 6.7	66.7, 93.3	66.7, 93.3	-6.7, 6.7
	Min, Max		26.7, 100.0	13.3, 100.0	-46.7, 35.6	33.3, 100.0	33.3, 100.0	-33.3, 26.7
	Mean Diff (95% CI) [a]				1.2 (-1.9, 4.3)			-2.5 (-6.2, 1.2)
	P-value [a]				0.450			0.174
	Mean Diff (95% CI) [b]				3.7 (-1.1, 8.6)			
	P-value [b]				0.130			
	Effect Size (95% CI) [c]				0.19 (-0.03, 0.40)			
	C9D1	N		60	60	60	42	42
Mean			80.4	81.9	1.5	80.8	77.9	-2.9
SD			18.79	19.18	15.09	17.60	17.14	12.41
95% CI			75.5, 85.2	76.9, 86.8	-2.4, 5.4	75.3, 86.3	72.6, 83.3	-6.8, 1.0
Median			86.7	86.7	0.0	86.7	80.0	0.0
Q1, Q3			66.7, 96.7	66.7, 100.0	-6.7, 6.7	66.7, 93.3	66.7, 93.3	-13.3, 6.7
Min, Max			33.3, 100.0	26.7, 100.0	-40.0, 42.2	33.3, 100.0	40.0, 100.0	-26.7, 26.7
Mean Diff (95% CI) [a]					1.5 (-2.4, 5.4)			-2.9 (-6.8, 1.0)
P-value [a]					0.441			0.138
Mean Diff (95% CI) [b]					4.4 (-1.2, 10.0)			
P-value [b]					0.122			
Effect Size (95% CI) [c]					0.22 (0.01, 0.43)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)				
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline		
C10D1	N	N	54	54	54	30	30	30		
		Mean	80.1	80.9	0.8	78.9	77.3	-1.6		
		SD	19.55	20.19	16.26	17.95	17.21	11.44		
		95% CI	74.7, 85.4	75.4, 86.4	-3.6, 5.3	72.2, 85.6	70.9, 83.8	-5.8, 2.7		
		Median	86.7	86.7	0.0	86.7	80.0	0.0		
		Q1, Q3	66.7, 100.0	73.3, 100.0	-6.7, 6.7	66.7, 93.3	60.0, 93.3	-13.3, 6.7		
		Min, Max	33.3, 100.0	20.0, 100.0	-60.0, 42.2	33.3, 100.0	40.0, 100.0	-20.0, 26.7		
		Mean Diff (95% CI) [a]			0.8 (-3.6, 5.3)			-1.6 (-5.8, 2.7)		
		P-value [a]			0.715			0.462		
		Mean Diff (95% CI) [b]			2.4 (-4.3, 9.0)					
		P-value [b]			0.482					
		Effect Size (95% CI) [c]			0.12 (-0.09, 0.33)					
		C11D1	N	N	46	46	46	23	23	23
				Mean	80.3	81.4	1.2	85.8	82.3	-3.5
SD	18.74			21.77	19.69	13.97	12.97	12.85		
95% CI	74.7, 85.8			75.0, 87.9	-4.7, 7.0	79.8, 91.8	76.7, 87.9	-9.0, 2.1		
Median	86.7			86.7	0.0	93.3	86.7	-6.7		
Q1, Q3	66.7, 100.0			66.7, 100.0	0.0, 13.3	80.0, 93.3	73.3, 93.3	-13.3, 6.7		
Min, Max	40.0, 100.0			26.7, 100.0	-66.7, 60.0	46.7, 100.0	60.0, 100.0	-26.7, 26.7		
Mean Diff (95% CI) [a]					1.2 (-4.7, 7.0)			-3.5 (-9.0, 2.1)		
P-value [a]					0.682			0.208		
Mean Diff (95% CI) [b]					4.7 (-4.4, 13.7)					
P-value [b]					0.306					
Effect Size (95% CI) [c]					0.24 (0.02, 0.45)					

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		41	41	41	19	19	19	
	Mean		80.3	82.0	1.7	84.2	82.5	-1.8	
	SD		19.42	21.20	16.36	13.74	14.44	14.03	
	95% CI		74.2, 86.4	75.3, 88.6	-3.5, 6.8	77.6, 90.8	75.5, 89.4	-8.5, 5.0	
	Median		86.7	86.7	0.0	86.7	86.7	0.0	
	Q1, Q3		66.7, 100.0	73.3, 100.0	-6.7, 6.7	80.0, 93.3	73.3, 93.3	-6.7, 6.7	
	Min, Max		40.0, 100.0	13.3, 100.0	-53.3, 60.0	46.7, 100.0	53.3, 100.0	-33.3, 33.3	
	Mean Diff (95% CI) [a]				1.7 (-3.5, 6.8)			-1.8 (-8.5, 5.0)	
	P-value [a]				0.518			0.592	
	Mean Diff (95% CI) [b]				3.4 (-5.3, 12.1)				
	P-value [b]				0.435				
	Effect Size (95% CI) [c]				0.17 (-0.04, 0.39)				
	C13D1	N		32	32	32	15	15	15
		Mean		79.5	84.0	4.4	81.3	80.0	-1.3
SD			19.80	17.50	16.11	15.57	16.33	17.85	
95% CI			72.4, 86.7	77.6, 90.3	-1.4, 10.2	72.7, 90.0	71.0, 89.0	-11.2, 8.6	
Median			86.7	86.7	0.0	80.0	80.0	0.0	
Q1, Q3			66.7, 100.0	80.0, 100.0	-6.7, 13.3	66.7, 93.3	73.3, 93.3	-6.7, 6.7	
Min, Max			40.0, 100.0	33.3, 100.0	-20.0, 60.0	46.7, 100.0	33.3, 100.0	-46.7, 33.3	
Mean Diff (95% CI) [a]					4.4 (-1.4, 10.2)			-1.3 (-11.2, 8.6)	
P-value [a]					0.130			0.777	
Mean Diff (95% CI) [b]					5.8 (-4.7, 16.3)				
P-value [b]					0.275				
Effect Size (95% CI) [c]					0.29 (0.08, 0.50)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C14D1	N	33	33	33	12	12	12
		Mean	79.3	81.8	2.5	80.0	80.0	0.0
		SD	19.30	19.10	11.96	16.58	16.58	15.04
		95% CI	72.5, 86.2	75.0, 88.6	-1.8, 6.7	69.5, 90.5	69.5, 90.5	-9.6, 9.6
		Median	86.7	86.7	0.0	83.3	80.0	0.0
		Q1, Q3	66.7, 93.3	66.7, 100.0	0.0, 6.7	66.7, 93.3	66.7, 93.3	0.0, 3.3
		Min, Max	40.0, 100.0	33.3, 100.0	-26.7, 33.3	46.7, 100.0	46.7, 100.0	-33.3, 33.3
		Mean Diff (95% CI) [a]			2.5 (-1.8, 6.7)			0.0 (-9.6, 9.6)
		P-value [a]			0.243			1.000
		Mean Diff (95% CI) [b]			2.5 (-6.2, 11.2)			
		P-value [b]			0.570			
		Effect Size (95% CI) [c]			0.12 (-0.09, 0.34)			
	C15D1	N	28	28	28	13	13	13
		Mean	79.7	81.0	1.2	80.0	79.5	-0.5
		SD	18.61	17.94	15.90	15.87	12.01	15.02
		95% CI	72.5, 86.9	74.0, 87.9	-4.9, 7.4	70.4, 89.6	72.2, 86.7	-9.6, 8.6
		Median	86.7	86.7	0.0	80.0	80.0	0.0
		Q1, Q3	66.7, 93.3	66.7, 100.0	-6.7, 13.3	66.7, 93.3	73.3, 86.7	-6.7, 0.0
		Min, Max	40.0, 100.0	33.3, 100.0	-40.0, 33.3	46.7, 100.0	60.0, 100.0	-20.0, 40.0
		Mean Diff (95% CI) [a]			1.2 (-4.9, 7.4)			-0.5 (-9.6, 8.6)
		P-value [a]			0.681			0.904
		Mean Diff (95% CI) [b]			1.8 (-8.9, 12.4)			
		P-value [b]			0.739			
		Effect Size (95% CI) [c]			0.09 (-0.12, 0.30)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C16D1	N		28	28	28	10	10	10
	Mean		78.8	79.8	1.0	76.7	80.7	4.0
	SD		19.63	23.06	16.70	16.70	11.09	9.00
	95% CI		71.2, 86.4	70.8, 88.7	-5.5, 7.4	64.7, 88.6	72.7, 88.6	-2.4, 10.4
	Median		86.7	86.7	0.0	80.0	76.7	0.0
	Q1, Q3		66.7, 93.3	63.3, 100.0	-3.3, 10.0	66.7, 93.3	73.3, 93.3	0.0, 6.7
	Min, Max		40.0, 100.0	20.0, 100.0	-46.7, 33.3	46.7, 100.0	66.7, 100.0	-6.7, 26.7
	Mean Diff (95% CI) [a]				1.0 (-5.5, 7.4)			4.0 (-2.4, 10.4)
	P-value [a]				0.765			0.193
	Mean Diff (95% CI) [b]				-3.0 (-14.4, 8.3)			
	P-value [b]				0.588			
	Effect Size (95% CI) [c]				-0.15 (-0.37, 0.06)			
	C17D1	N		26	26	26	7	7
Mean			79.7	81.5	1.8	70.5	78.1	7.6
SD			18.62	20.25	12.59	15.33	12.00	13.57
95% CI			72.2, 87.3	73.4, 89.7	-3.3, 6.9	56.3, 84.7	67.0, 89.2	-4.9, 20.2
Median			86.7	86.7	0.0	66.7	73.3	6.7
Q1, Q3			66.7, 93.3	66.7, 100.0	-6.7, 6.7	60.0, 80.0	66.7, 86.7	6.7, 6.7
Min, Max			40.0, 100.0	20.0, 100.0	-20.0, 33.3	46.7, 93.3	66.7, 100.0	-13.3, 33.3
Mean Diff (95% CI) [a]					1.8 (-3.3, 6.9)			7.6 (-4.9, 20.2)
P-value [a]					0.474			0.188
Mean Diff (95% CI) [b]					-5.8 (-16.9, 5.3)			
P-value [b]					0.293			
Effect Size (95% CI) [c]					-0.29 (-0.51, -0.08)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C18D1	N		22	22	22	7	7	7
	Mean		77.6	78.2	0.6	77.1	79.0	1.9
	SD		19.36	25.13	14.68	13.25	14.62	9.97
	95% CI		69.0, 86.2	67.0, 89.3	-5.9, 7.1	64.9, 89.4	65.5, 92.6	-7.3, 11.1
	Median		80.0	80.0	0.0	80.0	73.3	6.7
	Q1, Q3		66.7, 93.3	73.3, 100.0	-6.7, 13.3	66.7, 93.3	66.7, 93.3	0.0, 6.7
	Min, Max		40.0, 100.0	20.0, 100.0	-26.7, 33.3	60.0, 93.3	60.0, 100.0	-20.0, 6.7
	Mean Diff (95% CI) [a]				0.6 (-5.9, 7.1)			1.9 (-7.3, 11.1)
	P-value [a]				0.848			0.631
	Mean Diff (95% CI) [b]				-1.3 (-13.6, 11.0)			
	P-value [b]				0.830			
	Effect Size (95% CI) [c]				-0.07 (-0.28, 0.15)			
	C19D1	N		20	20	20	6	6
Mean			78.3	78.0	-0.3	78.9	71.1	-7.8
SD			20.16	23.60	10.70	13.61	14.40	17.60
95% CI			68.9, 87.8	67.0, 89.0	-5.3, 4.7	64.6, 93.2	56.0, 86.2	-26.2, 10.7
Median			83.3	86.7	0.0	80.0	70.0	0.0
Q1, Q3			63.3, 96.7	66.7, 96.7	-3.3, 3.3	66.7, 93.3	60.0, 80.0	-26.7, 6.7
Min, Max			40.0, 100.0	20.0, 100.0	-20.0, 20.0	60.0, 93.3	53.3, 93.3	-33.3, 6.7
Mean Diff (95% CI) [a]					-0.3 (-5.3, 4.7)			-7.8 (-26.2, 10.7)
P-value [a]					0.891			0.328
Mean Diff (95% CI) [b]					7.4 (-4.5, 19.4)			
P-value [b]					0.211			
Effect Size (95% CI) [c]					0.37 (0.16, 0.59)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		20	20	20	4	4	4
	Mean		82.3	80.3	-2.0	75.0	76.7	1.7
	SD		19.01	22.53	12.63	14.78	15.87	11.39
	95% CI		73.4, 91.2	69.8, 90.9	-7.9, 3.9	51.5, 98.5	51.4, 101.9	-16.5, 19.8
	Median		86.7	86.7	0.0	73.3	70.0	3.3
	Q1, Q3		66.7, 100.0	73.3, 100.0	-6.7, 3.3	63.3, 86.7	66.7, 86.7	-6.7, 10.0
	Min, Max		46.7, 100.0	20.0, 100.0	-26.7, 20.0	60.0, 93.3	66.7, 100.0	-13.3, 13.3
	Mean Diff (95% CI) [a]				-2.0 (-7.9, 3.9)			1.7 (-16.5, 19.8)
	P-value [a]				0.487			0.789
	Mean Diff (95% CI) [b]				-3.7 (-17.8, 10.5)			
	P-value [b]				0.597			
	Effect Size (95% CI) [c]				-0.18 (-0.40, 0.03)			
	C21D1	N		18	18	18	4	4
Mean			80.4	82.6	2.2	75.0	75.0	0.0
SD			19.06	20.34	12.10	14.78	14.78	14.40
95% CI			70.9, 89.8	72.5, 92.7	-3.8, 8.2	51.5, 98.5	51.5, 98.5	-22.9, 22.9
Median			86.7	86.7	0.0	73.3	73.3	3.3
Q1, Q3			66.7, 100.0	73.3, 100.0	0.0, 13.3	63.3, 86.7	63.3, 86.7	-10.0, 10.0
Min, Max			46.7, 100.0	40.0, 100.0	-33.3, 20.0	60.0, 93.3	60.0, 93.3	-20.0, 13.3
Mean Diff (95% CI) [a]					2.2 (-3.8, 8.2)			0.0 (-22.9, 22.9)
P-value [a]					0.447			1.000
Mean Diff (95% CI) [b]					2.2 (-12.2, 16.6)			
P-value [b]					0.751			
Effect Size (95% CI) [c]					0.11 (-0.10, 0.32)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C22D1	N		14	14	14	3	3	3
	Mean		77.6	79.0	1.4	73.3	80.0	6.7
	SD		19.50	23.51	16.78	17.64	17.64	0.00
	95% CI		66.4, 88.9	65.5, 92.6	-8.3, 11.1	29.5, 117.1	36.2, 123.8	6.7, 6.7
	Median		83.3	86.7	0.0	66.7	73.3	6.7
	Q1, Q3		60.0, 93.3	66.7, 100.0	0.0, 13.3	60.0, 93.3	66.7, 100.0	6.7, 6.7
	Min, Max		46.7, 100.0	33.3, 100.0	-46.7, 20.0	60.0, 93.3	66.7, 100.0	6.7, 6.7
	Mean Diff (95% CI) [a]				1.4 (-8.3, 11.1)			6.7 (6.7, 6.7)
	P-value [a]				0.755			<.001
	Mean Diff (95% CI) [b]				-5.2 (-26.4, 15.9)			
	P-value [b]				0.606			
	Effect Size (95% CI) [c]				-0.26 (-0.48, -0.05)			
	C23D1	N		11	11	11	3	3
Mean			74.5	78.8	4.2	73.3	82.2	8.9
SD			20.62	21.04	11.65	17.64	16.78	3.85
95% CI			60.7, 88.4	64.7, 92.9	-3.6, 12.1	29.5, 117.1	40.5, 123.9	-0.7, 18.5
Median			80.0	86.7	0.0	66.7	80.0	6.7
Q1, Q3			53.3, 93.3	66.7, 100.0	-6.7, 20.0	60.0, 93.3	66.7, 100.0	6.7, 13.3
Min, Max			46.7, 100.0	33.3, 100.0	-13.3, 20.0	60.0, 93.3	66.7, 100.0	6.7, 13.3
Mean Diff (95% CI) [a]					4.2 (-3.6, 12.1)			8.9 (-0.7, 18.5)
P-value [a]					0.255			0.057
Mean Diff (95% CI) [b]					-4.6 (-19.9, 10.6)			
P-value [b]					0.520			
Effect Size (95% CI) [c]					-0.23 (-0.45, -0.02)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C24D1	N	10	10	10	2	2	2
		Mean	76.7	78.0	1.3	80.0	83.3	3.3
		SD	20.43	24.95	11.67	18.86	14.14	4.71
		95% CI	62.1, 91.3	60.1, 95.9	-7.0, 9.7	-89.4, 249.4	-43.7, 210.4	-39.0, 45.7
		Median	83.3	86.7	0.0	80.0	83.3	3.3
		Q1, Q3	60.0, 93.3	60.0, 93.3	0.0, 0.0	66.7, 93.3	73.3, 93.3	0.0, 6.7
		Min, Max	46.7, 100.0	26.7, 100.0	-20.0, 20.0	66.7, 93.3	73.3, 93.3	0.0, 6.7
		Mean Diff (95% CI) [a]			1.3 (-7.0, 9.7)			3.3 (-39.0, 45.7)
		P-value [a]			0.726			0.500
		Mean Diff (95% CI) [b]			-2.0 (-21.3, 17.3)			
		P-value [b]			0.822			
		Effect Size (95% CI) [c]			-0.10 (-0.31, 0.11)			
	C25D1	N	9	9	9	0	0	0
		Mean	74.1	77.0	3.0	NE	NE	NE
		SD	19.85	20.03	9.49	NE	NE	NE
		95% CI	58.8, 89.3	61.6, 92.4	-4.3, 10.3	NE, NE	NE, NE	NE, NE
		Median	80.0	80.0	0.0	NE	NE	NE
		Q1, Q3	60.0, 86.7	66.7, 86.7	0.0, 6.7	NE, NE	NE, NE	NE, NE
		Min, Max	46.7, 100.0	46.7, 100.0	-13.3, 20.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			3.0 (-4.3, 10.3)			NE (NE, NE)
		P-value [a]			0.377			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	84.2	88.1	4.0	93.3	100.0	6.7
		SD	14.67	13.26	8.82	NE	NE	NE
		95% CI	71.9, 96.4	77.0, 99.2	-3.4, 11.3	NE, NE	NE, NE	NE, NE
		Median	86.7	90.0	0.0	93.3	100.0	6.7
		Q1, Q3	73.3, 96.7	86.7, 96.7	-0.8, 10.0	93.3, 93.3	100.0, 100.0	6.7, 6.7
		Min, Max	60.0, 100.0	58.3, 100.0	-6.7, 20.0	93.3, 93.3	100.0, 100.0	6.7, 6.7
		Mean Diff (95% CI) [a]			4.0 (-3.4, 11.3)			6.7 (NE, NE)
		P-value [a]			0.245			NE
		Mean Diff (95% CI) [b]			-2.7 (-24.8, 19.4)			
		P-value [b]			0.780			
		Effect Size (95% CI) [c]			-0.14 (-0.35, 0.08)			
	C27D1	N	8	8	8	1	1	1
		Mean	84.2	88.3	4.2	93.3	100.0	6.7
		SD	14.67	9.26	12.31	NE	NE	NE
		95% CI	71.9, 96.4	80.6, 96.1	-6.1, 14.5	NE, NE	NE, NE	NE, NE
		Median	86.7	86.7	0.0	93.3	100.0	6.7
		Q1, Q3	73.3, 96.7	83.3, 96.7	-3.3, 16.7	93.3, 93.3	100.0, 100.0	6.7, 6.7
		Min, Max	60.0, 100.0	73.3, 100.0	-13.3, 20.0	93.3, 93.3	100.0, 100.0	6.7, 6.7
		Mean Diff (95% CI) [a]			4.2 (-6.1, 14.5)			6.7 (NE, NE)
		P-value [a]			0.370			NE
		Mean Diff (95% CI) [b]			-2.5 (-33.4, 28.4)			
		P-value [b]			0.854			
		Effect Size (95% CI) [c]			-0.13 (-0.34, 0.09)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	83.8	87.6	3.8	93.3	93.3	0.0
		SD	15.80	8.97	9.32	NE	NE	NE
		95% CI	69.2, 98.4	79.3, 95.9	-4.8, 12.4	NE, NE	NE, NE	NE, NE
		Median	86.7	86.7	0.0	93.3	93.3	0.0
		Q1, Q3	66.7, 100.0	80.0, 93.3	-6.7, 13.3	93.3, 93.3	93.3, 93.3	0.0, 0.0
		Min, Max	60.0, 100.0	73.3, 100.0	-6.7, 13.3	93.3, 93.3	93.3, 93.3	0.0, 0.0
		Mean Diff (95% CI) [a]			3.8 (-4.8, 12.4)			0.0 (NE, NE)
		P-value [a]			0.321			NE
		Mean Diff (95% CI) [b]			3.8 (-20.6, 28.2)			
		P-value [b]			0.715			
		Effect Size (95% CI) [c]			0.19 (-0.02, 0.40)			
	C29D1	N	4	4	4	1	1	1
		Mean	75.0	81.7	6.7	93.3	60.0	-33.3
		SD	14.78	8.39	13.33	NE	NE	NE
		95% CI	51.5, 98.5	68.3, 95.0	-14.5, 27.9	NE, NE	NE, NE	NE, NE
		Median	73.3	80.0	13.3	93.3	60.0	-33.3
		Q1, Q3	63.3, 86.7	76.7, 86.7	0.0, 13.3	93.3, 93.3	60.0, 60.0	-33.3, -33.3
		Min, Max	60.0, 93.3	73.3, 93.3	-13.3, 13.3	93.3, 93.3	60.0, 60.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			6.7 (-14.5, 27.9)			-33.3 (NE, NE)
		P-value [a]			0.391			NE
		Mean Diff (95% CI) [b]			40.0 (-7.4, 87.4)			
		P-value [b]			0.075			
		Effect Size (95% CI) [c]			2.01 (1.75, 2.27)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C30D1	N		4	4	4	1	1	1
	Mean		85.0	93.3	8.3	93.3	53.3	-40.0
	SD		14.78	7.70	13.74	NE	NE	NE
	95% CI		61.5, 108.5	81.1, 105.6	-13.5, 30.2	NE, NE	NE, NE	NE, NE
	Median		86.7	93.3	10.0	93.3	53.3	-40.0
	Q1, Q3		73.3, 96.7	86.7, 100.0	-3.3, 20.0	93.3, 93.3	53.3, 53.3	-40.0, -40.0
	Min, Max		66.7, 100.0	86.7, 100.0	-6.7, 20.0	93.3, 93.3	53.3, 53.3	-40.0, -40.0
	Mean Diff (95% CI) [a]				8.3 (-13.5, 30.2)			-40.0 (NE, NE)
	P-value [a]				0.312			NE
	Mean Diff (95% CI) [b]				48.3 (-0.6, 97.2)			
	P-value [b]				0.051			
	Effect Size (95% CI) [c]				2.43 (2.15, 2.71)			
	C31D1	N		2	2	2	1	1
Mean			73.3	86.7	13.3	93.3	80.0	-13.3
SD			9.43	9.43	0.00	NE	NE	NE
95% CI			-11.4, 158.0	2.0, 171.4	13.3, 13.3	NE, NE	NE, NE	NE, NE
Median			73.3	86.7	13.3	93.3	80.0	-13.3
Q1, Q3			66.7, 80.0	80.0, 93.3	13.3, 13.3	93.3, 93.3	80.0, 80.0	-13.3, -13.3
Min, Max			66.7, 80.0	80.0, 93.3	13.3, 13.3	93.3, 93.3	80.0, 80.0	-13.3, -13.3
Mean Diff (95% CI) [a]					13.3 (13.3, 13.3)			-13.3 (NE, NE)
P-value [a]					<.001			NE
Mean Diff (95% CI) [b]					26.7 (26.7, 26.7)			
P-value [b]					<.001			
Effect Size (95% CI) [c]					1.34 (1.11, 1.58)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	73.3	90.0	16.7	93.3	86.7	-6.7
		SD	9.43	4.71	4.71	NE	NE	NE
		95% CI	-11.4, 158.0	47.6, 132.4	-25.7, 59.0	NE, NE	NE, NE	NE, NE
		Median	73.3	90.0	16.7	93.3	86.7	-6.7
		Q1, Q3	66.7, 80.0	86.7, 93.3	13.3, 20.0	93.3, 93.3	86.7, 86.7	-6.7, -6.7
		Min, Max	66.7, 80.0	86.7, 93.3	13.3, 20.0	93.3, 93.3	86.7, 86.7	-6.7, -6.7
		Mean Diff (95% CI) [a]			16.7 (-25.7, 59.0)			-6.7 (NE, NE)
		P-value [a]			0.126			NE
		Mean Diff (95% CI) [b]			23.3 (-50.0, 96.7)			
		P-value [b]			0.154			
		Effect Size (95% CI) [c]			1.17 (0.94, 1.40)			
	C33D1	N	3	3	3	1	1	1
		Mean	82.2	91.1	8.9	93.3	86.7	-6.7
		SD	16.78	7.70	10.18	NE	NE	NE
		95% CI	40.5, 123.9	72.0, 110.2	-16.4, 34.2	NE, NE	NE, NE	NE, NE
		Median	80.0	86.7	6.7	93.3	86.7	-6.7
		Q1, Q3	66.7, 100.0	86.7, 100.0	0.0, 20.0	93.3, 93.3	86.7, 86.7	-6.7, -6.7
		Min, Max	66.7, 100.0	86.7, 100.0	0.0, 20.0	93.3, 93.3	86.7, 86.7	-6.7, -6.7
		Mean Diff (95% CI) [a]			8.9 (-16.4, 34.2)			-6.7 (NE, NE)
		P-value [a]			0.270			NE
		Mean Diff (95% CI) [b]			15.6 (-35.0, 66.1)			
		P-value [b]			0.317			
		Effect Size (95% CI) [c]			0.78 (0.56, 1.00)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C34D1	N		3	3	3	0	0	0	
	Mean		82.2	93.3	11.1	NE	NE	NE	
	SD		16.78	11.55	10.18	NE	NE	NE	
	95% CI		40.5, 123.9	64.6, 122.0	-14.2, 36.4	NE, NE	NE, NE	NE, NE	
	Median		80.0	100.0	13.3	NE	NE	NE	
	Q1, Q3		66.7, 100.0	80.0, 100.0	0.0, 20.0	NE, NE	NE, NE	NE, NE	
	Min, Max		66.7, 100.0	80.0, 100.0	0.0, 20.0	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				11.1 (-14.2, 36.4)			NE (NE, NE)	
	P-value [a]				0.199			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C35D1	N		2	2	2	0	0	0
		Mean		73.3	80.0	6.7	NE	NE	NE
SD			9.43	18.86	9.43	NE	NE	NE	
95% CI			-11.4, 158.0	-89.4, 249.4	-78.0, 91.4	NE, NE	NE, NE	NE, NE	
Median			73.3	80.0	6.7	NE	NE	NE	
Q1, Q3			66.7, 80.0	66.7, 93.3	0.0, 13.3	NE, NE	NE, NE	NE, NE	
Min, Max			66.7, 80.0	66.7, 93.3	0.0, 13.3	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					6.7 (-78.0, 91.4)			NE (NE, NE)	
P-value [a]					0.500			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C36D1	N		3	3	3	0	0	0	
	Mean		82.2	88.9	6.7	NE	NE	NE	
	SD		16.78	13.88	6.67	NE	NE	NE	
	95% CI		40.5, 123.9	54.4, 123.4	-9.9, 23.2	NE, NE	NE, NE	NE, NE	
	Median		80.0	93.3	6.7	NE	NE	NE	
	Q1, Q3		66.7, 100.0	73.3, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE	
	Min, Max		66.7, 100.0	73.3, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				6.7 (-9.9, 23.2)			NE (NE, NE)	
	P-value [a]				0.225			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C37D1	N		3	3	3	0	0	0
		Mean		82.2	91.1	8.9	NE	NE	NE
SD			16.78	10.18	7.70	NE	NE	NE	
95% CI			40.5, 123.9	65.8, 116.4	-10.2, 28.0	NE, NE	NE, NE	NE, NE	
Median			80.0	93.3	13.3	NE	NE	NE	
Q1, Q3			66.7, 100.0	80.0, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE	
Min, Max			66.7, 100.0	80.0, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					8.9 (-10.2, 28.0)			NE (NE, NE)	
P-value [a]					0.184			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C38D1	N		2	2	2	0	0	0
	Mean		90.0	96.7	6.7	NE	NE	NE
	SD		14.14	4.71	9.43	NE	NE	NE
	95% CI		-37.1, 217.1	54.3, 139.0	-78.0, 91.4	NE, NE	NE, NE	NE, NE
	Median		90.0	96.7	6.7	NE	NE	NE
	Q1, Q3		80.0, 100.0	93.3, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE
	Min, Max		80.0, 100.0	93.3, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE
	Mean Diff (95% CI) [a]				6.7 (-78.0, 91.4)			NE (NE, NE)
	P-value [a]				0.500			NE
	Mean Diff (95% CI) [b]				NE (NE, NE)			
	P-value [b]				NE			
	Effect Size (95% CI) [c]				NE (NE, NE)			
	C39D1	N		2	2	2	0	0
Mean			90.0	100.0	10.0	NE	NE	NE
SD			14.14	0.00	14.14	NE	NE	NE
95% CI			-37.1, 217.1	100.0, 100.0	-117.1, 137.1	NE, NE	NE, NE	NE, NE
Median			90.0	100.0	10.0	NE	NE	NE
Q1, Q3			80.0, 100.0	100.0, 100.0	0.0, 20.0	NE, NE	NE, NE	NE, NE
Min, Max			80.0, 100.0	100.0, 100.0	0.0, 20.0	NE, NE	NE, NE	NE, NE
Mean Diff (95% CI) [a]					10.0 (-117.1, 137.1)			NE (NE, NE)
P-value [a]					0.500			NE
Mean Diff (95% CI) [b]					NE (NE, NE)			
P-value [b]					NE			
Effect Size (95% CI) [c]					NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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IMMU-132-09

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	90.0	96.7	6.7	NE	NE	NE
		SD	14.14	4.71	9.43	NE	NE	NE
		95% CI	-37.1, 217.1	54.3, 139.0	-78.0, 91.4	NE, NE	NE, NE	NE, NE
		Median	90.0	96.7	6.7	NE	NE	NE
		Q1, Q3	80.0, 100.0	93.3, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE
		Min, Max	80.0, 100.0	93.3, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			6.7 (-78.0, 91.4)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	90.0	96.7	6.7	NE	NE	NE
		SD	14.14	4.71	9.43	NE	NE	NE
		95% CI	-37.1, 217.1	54.3, 139.0	-78.0, 91.4	NE, NE	NE, NE	NE, NE
		Median	90.0	96.7	6.7	NE	NE	NE
		Q1, Q3	80.0, 100.0	93.3, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE
		Min, Max	80.0, 100.0	93.3, 100.0	0.0, 13.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			6.7 (-78.0, 91.4)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	80.0	80.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	80.0	80.0	0.0	NE	NE	NE
		Q1, Q3	80.0, 80.0	80.0, 80.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	80.0, 80.0	80.0, 80.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	80.0	86.7	6.7	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	80.0	86.7	6.7	NE	NE	NE
		Q1, Q3	80.0, 80.0	86.7, 86.7	6.7, 6.7	NE, NE	NE, NE	NE, NE
		Min, Max	80.0, 80.0	86.7, 86.7	6.7, 6.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			6.7 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		131	131	131	125	125	125	
	Mean		79.2	73.3	-5.9	79.0	72.6	-6.4	
	SD		20.19	25.58	17.69	19.60	23.61	18.93	
	95% CI		75.7, 82.7	68.9, 77.7	-9.0, -2.8	75.5, 82.5	68.4, 76.8	-9.8, -3.1	
	Median		86.7	80.0	0.0	86.7	80.0	-6.7	
	Q1, Q3		66.7, 93.3	60.0, 93.3	-20.0, 6.7	66.7, 93.3	60.0, 86.7	-13.3, 0.0	
	Min, Max		20.0, 100.0	0.0, 100.0	-73.3, 33.3	6.7, 100.0	0.0, 100.0	-80.0, 46.7	
	Mean Diff (95% CI) [a]				-5.9 (-9.0, -2.8)			-6.4 (-9.8, -3.1)	
	P-value [a]				<.001			<.001	
	Mean Diff (95% CI) [b]				0.5 (-4.0, 5.0)				
	P-value [b]				0.825				
	Effect Size (95% CI) [c]				0.03 (-0.19, 0.24)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			86.7	77.6	-9.0	80.7	63.0	-17.8
SD			10.78	17.85	15.60	12.67	30.57	24.27	
95% CI			80.4, 92.9	67.3, 87.9	-18.1, 0.0	71.0, 90.5	39.5, 86.5	-36.4, 0.9	
Median			86.7	80.0	-6.7	80.0	73.3	-13.3	
Q1, Q3			80.0, 93.3	80.0, 86.7	-20.0, 0.0	80.0, 86.7	60.0, 80.0	-20.0, 0.0	
Min, Max			66.7, 100.0	33.3, 100.0	-40.0, 20.0	53.3, 100.0	6.7, 100.0	-73.3, 6.7	
Mean Diff (95% CI) [a]					-9.0 (-18.1, 0.0)			-17.8 (-36.4, 0.9)	
P-value [a]					0.049			0.059	
Mean Diff (95% CI) [b]					8.7 (-8.5, 25.9)				
P-value [b]					0.303				
Effect Size (95% CI) [c]					0.44 (0.22, 0.65)				
Role Functioning	Baseline	N	174			164			
		Mean	76.1			76.3			
		SD	25.99			25.78			
		95% CI	72.2, 79.9			72.3, 80.3			
		Median	83.3			83.3			
		Q1, Q3	66.7, 100.0			66.7, 100.0			
		Min, Max	0.0, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C2D1	N		152	152	152	143	144	143	
	Mean		77.2	71.6	-5.6	77.3	72.2	-5.0	
	SD		25.50	29.52	26.30	25.45	27.52	23.57	
	Median		83.3	66.7	0.0	83.3	66.7	0.0	
	95% CI		73.1, 81.3	66.9, 76.3	-9.8, -1.4	73.1, 81.5	67.7, 76.8	-8.9, -1.1	
	Q1, Q3		66.7, 100.0	66.7, 100.0	-16.7, 0.0	66.7, 100.0	50.0, 100.0	-16.7, 0.0	
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 66.7	
	Mean Diff (95% CI) [a]				-5.6 (-9.8, -1.4)			-5.0 (-8.9, -1.1)	
	P-value [a]				0.010			0.012	
	Mean Diff (95% CI) [b]				-0.6 (-6.3, 5.2)				
	P-value [b]				0.842				
	Effect Size (95% CI) [c]				-0.02 (-0.24, 0.19)				
	C3D1	N		124	124	124	101	101	101
		Mean		78.6	73.9	-4.7	78.4	72.8	-5.6
SD			23.81	26.22	25.29	21.28	23.18	20.85	
Median			83.3	75.0	0.0	83.3	66.7	0.0	
95% CI			74.4, 82.9	69.3, 78.6	-9.2, -0.2	74.2, 82.6	68.2, 77.3	-9.7, -1.5	
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 0.0	66.7, 100.0	66.7, 100.0	-16.7, 0.0	
Min, Max			16.7, 100.0	0.0, 100.0	-100.0, 66.7	16.7, 100.0	0.0, 100.0	-66.7, 33.3	
Mean Diff (95% CI) [a]					-4.7 (-9.2, -0.2)			-5.6 (-9.7, -1.5)	
P-value [a]					0.040			0.008	
Mean Diff (95% CI) [b]					0.9 (-5.3, 7.1)				
P-value [b]					0.773				
Effect Size (95% CI) [c]					0.03 (-0.18, 0.25)				

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	93	94	93
	Mean		77.8	76.9	-0.9	77.4	73.4	-3.4
	SD		24.44	27.60	24.49	21.65	25.20	22.33
	Median		83.3	83.3	0.0	66.7	66.7	0.0
	95% CI		73.3, 82.4	71.8, 82.1	-5.5, 3.7	73.0, 81.9	68.2, 78.6	-8.0, 1.2
	Q1, Q3		66.7, 100.0	66.7, 100.0	-8.3, 8.3	66.7, 100.0	66.7, 100.0	-16.7, 0.0
	Min, Max		16.7, 100.0	0.0, 100.0	-100.0, 66.7	16.7, 100.0	16.7, 100.0	-50.0, 50.0
	Mean Diff (95% CI) [a]				-0.9 (-5.5, 3.7)			-3.4 (-8.0, 1.2)
	P-value [a]				0.700			0.145
	Mean Diff (95% CI) [b]				2.5 (-4.0, 9.0)			
	P-value [b]				0.448			
	Effect Size (95% CI) [c]				0.10 (-0.12, 0.31)			
	C5D1	N		97	97	97	79	79
Mean			79.0	75.6	-3.4	78.1	73.0	-5.1
SD			23.85	25.69	22.04	21.44	22.85	19.68
Median			83.3	83.3	0.0	83.3	66.7	0.0
95% CI			74.2, 83.8	70.4, 80.8	-7.9, 1.0	73.3, 82.9	67.9, 78.1	-9.5, -0.7
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 0.0	66.7, 100.0	66.7, 100.0	-16.7, 0.0
Min, Max			16.7, 100.0	0.0, 100.0	-50.0, 66.7	16.7, 100.0	33.3, 100.0	-33.3, 33.3
Mean Diff (95% CI) [a]					-3.4 (-7.9, 1.0)			-5.1 (-9.5, -0.7)
P-value [a]					0.128			0.025
Mean Diff (95% CI) [b]					1.6 (-4.7, 7.9)			
P-value [b]					0.610			
Effect Size (95% CI) [c]					0.06 (-0.15, 0.28)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C6D1	N		96	96	96	68	69	68
	Mean		80.4	81.1	0.7	80.1	70.3	-9.3
	SD		22.68	24.97	23.68	20.00	27.25	23.11
	Median		83.3	100.0	0.0	83.3	66.7	0.0
	95% CI		75.8, 85.0	76.0, 86.1	-4.1, 5.5	75.3, 85.0	63.7, 76.8	-14.9, -3.7
	Q1, Q3		66.7, 100.0	66.7, 100.0	-8.3, 16.7	66.7, 100.0	50.0, 100.0	-16.7, 0.0
	Min, Max		16.7, 100.0	0.0, 100.0	-100.0, 66.7	16.7, 100.0	0.0, 100.0	-66.7, 33.3
	Mean Diff (95% CI) [a]				0.7 (-4.1, 5.5)			-9.3 (-14.9, -3.7)
	P-value [a]				0.775			0.001
	Mean Diff (95% CI) [b]				10.0 (2.7, 17.3)			
	P-value [b]				0.008			
	Effect Size (95% CI) [c]				0.39 (0.17, 0.60)			
	C7D1	N		79	79	79	52	53
Mean			78.3	78.1	-0.2	79.2	75.2	-3.2
SD			24.80	24.25	22.88	21.61	22.56	22.88
Median			83.3	83.3	0.0	83.3	66.7	0.0
95% CI			72.7, 83.8	72.6, 83.5	-5.3, 4.9	73.2, 85.2	68.9, 81.4	-9.6, 3.2
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 0.0
Min, Max			16.7, 100.0	0.0, 100.0	-50.0, 66.7	16.7, 100.0	33.3, 100.0	-66.7, 66.7
Mean Diff (95% CI) [a]					-0.2 (-5.3, 4.9)			-3.2 (-9.6, 3.2)
P-value [a]					0.935			0.317
Mean Diff (95% CI) [b]					3.0 (-5.1, 11.1)			
P-value [b]					0.465			
Effect Size (95% CI) [c]					0.12 (-0.10, 0.33)			

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	49	50	49
	Mean		78.3	78.1	-0.2	80.3	74.0	-5.4
	SD		24.50	27.11	22.69	21.96	24.78	24.39
	Median		83.3	83.3	0.0	83.3	66.7	0.0
	95% CI		72.7, 83.9	71.9, 84.3	-5.4, 5.0	74.0, 86.6	67.0, 81.0	-12.4, 1.6
	Q1, Q3		66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 0.0
	Min, Max		16.7, 100.0	0.0, 100.0	-66.7, 50.0	16.7, 100.0	0.0, 100.0	-66.7, 50.0
	Mean Diff (95% CI) [a]				-0.2 (-5.4, 5.0)			-5.4 (-12.4, 1.6)
	P-value [a]				0.933			0.125
	Mean Diff (95% CI) [b]				5.2 (-3.3, 13.7)			
	P-value [b]				0.225			
	Effect Size (95% CI) [c]				0.20 (-0.01, 0.41)			
	C9D1	N		60	60	60	41	42
Mean			80.3	76.9	-3.3	79.7	74.6	-4.1
SD			23.06	26.59	24.12	22.83	23.64	20.68
Median			83.3	83.3	0.0	83.3	75.0	0.0
95% CI			74.3, 86.2	70.1, 83.8	-9.6, 2.9	72.5, 86.9	67.2, 82.0	-10.6, 2.5
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 0.0	66.7, 100.0	66.7, 100.0	-16.7, 0.0
Min, Max			16.7, 100.0	0.0, 100.0	-100.0, 50.0	16.7, 100.0	33.3, 100.0	-66.7, 50.0
Mean Diff (95% CI) [a]					-3.3 (-9.6, 2.9)			-4.1 (-10.6, 2.5)
P-value [a]					0.289			0.215
Mean Diff (95% CI) [b]					0.7 (-8.4, 9.9)			
P-value [b]					0.874			
Effect Size (95% CI) [c]					0.03 (-0.18, 0.24)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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IMMU-132-09

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C10D1	N		54	54	54	29	30	29	
	Mean		79.0	79.3	0.3	77.6	70.6	-6.9	
	SD		22.94	23.78	22.31	21.02	23.85	22.06	
	Median		83.3	91.7	0.0	83.3	66.7	0.0	
	95% CI		72.8, 85.3	72.8, 85.8	-5.8, 6.4	69.6, 85.6	61.7, 79.5	-15.3, 1.5	
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 83.3	-16.7, 0.0	
	Min, Max		16.7, 100.0	16.7, 100.0	-66.7, 50.0	33.3, 100.0	0.0, 100.0	-66.7, 33.3	
	Mean Diff (95% CI) [a]				0.3 (-5.8, 6.4)			-6.9 (-15.3, 1.5)	
	P-value [a]				0.919			0.103	
	Mean Diff (95% CI) [b]				7.2 (-3.0, 17.4)				
	P-value [b]				0.163				
	Effect Size (95% CI) [c]				0.28 (0.06, 0.49)				
	C11D1	N		46	46	46	23	23	23
		Mean		77.9	77.5	-0.4	81.9	73.9	-8.0
SD			23.58	24.65	23.44	20.67	24.53	28.37	
Median			83.3	83.3	0.0	83.3	66.7	0.0	
95% CI			70.9, 84.9	70.2, 84.9	-7.3, 6.6	72.9, 90.8	63.3, 84.5	-20.2, 4.3	
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 0.0	
Min, Max			16.7, 100.0	33.3, 100.0	-66.7, 50.0	33.3, 100.0	0.0, 100.0	-100.0, 33.3	
Mean Diff (95% CI) [a]					-0.4 (-7.3, 6.6)			-8.0 (-20.2, 4.3)	
P-value [a]					0.917			0.192	
Mean Diff (95% CI) [b]					7.6 (-5.2, 20.4)				
P-value [b]					0.241				
Effect Size (95% CI) [c]					0.29 (0.08, 0.51)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		41	41	41	19	19	19	
	Mean		78.9	77.6	-1.2	85.1	78.9	-6.1	
	SD		24.16	25.44	23.39	18.34	24.12	23.71	
	Median		83.3	83.3	0.0	83.3	83.3	0.0	
	95% CI		71.2, 86.5	69.6, 85.7	-8.6, 6.2	76.2, 93.9	67.3, 90.6	-17.6, 5.3	
	Q1, Q3		66.7, 100.0	66.7, 100.0	-16.7, 0.0	66.7, 100.0	66.7, 100.0	-16.7, 0.0	
	Min, Max		16.7, 100.0	0.0, 100.0	-50.0, 50.0	33.3, 100.0	33.3, 100.0	-66.7, 33.3	
	Mean Diff (95% CI) [a]				-1.2 (-8.6, 6.2)			-6.1 (-17.6, 5.3)	
	P-value [a]				0.740			0.274	
	Mean Diff (95% CI) [b]				4.9 (-8.1, 18.0)				
	P-value [b]				0.453				
	Effect Size (95% CI) [c]				0.19 (-0.02, 0.40)				
	C13D1	N		32	32	32	15	15	15
		Mean		79.7	79.2	-0.5	81.1	73.3	-7.8
SD			24.59	22.00	23.75	19.79	21.64	19.79	
Median			83.3	83.3	0.0	83.3	66.7	0.0	
95% CI			70.8, 88.6	71.2, 87.1	-9.1, 8.0	70.2, 92.1	61.3, 85.3	-18.7, 3.2	
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	-33.3, 0.0	
Min, Max			16.7, 100.0	33.3, 100.0	-50.0, 50.0	33.3, 100.0	33.3, 100.0	-33.3, 33.3	
Mean Diff (95% CI) [a]					-0.5 (-9.1, 8.0)			-7.8 (-18.7, 3.2)	
P-value [a]					0.902			0.150	
Mean Diff (95% CI) [b]					7.3 (-7.0, 21.5)				
P-value [b]					0.310				
Effect Size (95% CI) [c]					0.28 (0.07, 0.49)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C14D1	N	33	33	33	12	12	12
		Mean	78.8	80.8	2.0	77.8	73.6	-4.2
		SD	24.03	23.61	20.31	20.52	24.06	25.75
		Median	83.3	83.3	0.0	75.0	66.7	0.0
		95% CI	70.3, 87.3	72.4, 89.2	-5.2, 9.2	64.7, 90.8	58.3, 88.9	-20.5, 12.2
		Q1, Q3	66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	-8.3, 8.3
		Min, Max	16.7, 100.0	0.0, 100.0	-50.0, 50.0	33.3, 100.0	33.3, 100.0	-66.7, 33.3
		Mean Diff (95% CI) [a]			2.0 (-5.2, 9.2)			-4.2 (-20.5, 12.2)
		P-value [a]			0.572			0.586
		Mean Diff (95% CI) [b]			6.2 (-8.7, 21.0)			
		P-value [b]			0.405			
		Effect Size (95% CI) [c]			0.24 (0.02, 0.45)			
	C15D1	N	28	28	28	13	13	13
		Mean	78.0	73.2	-4.8	79.5	70.5	-9.0
		SD	24.87	25.80	27.91	20.59	22.72	26.01
		Median	83.3	66.7	0.0	83.3	66.7	0.0
		95% CI	68.3, 87.6	63.2, 83.2	-15.6, 6.1	67.0, 91.9	56.8, 84.2	-24.7, 6.7
		Q1, Q3	66.7, 100.0	66.7, 100.0	-16.7, 8.3	66.7, 100.0	66.7, 83.3	-16.7, 0.0
		Min, Max	16.7, 100.0	0.0, 100.0	-66.7, 50.0	33.3, 100.0	33.3, 100.0	-66.7, 33.3
		Mean Diff (95% CI) [a]			-4.8 (-15.6, 6.1)			-9.0 (-24.7, 6.7)
		P-value [a]			0.375			0.237
		Mean Diff (95% CI) [b]			4.2 (-14.3, 22.8)			
		P-value [b]			0.649			
		Effect Size (95% CI) [c]			0.16 (-0.05, 0.38)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)				
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline		
C16D1	N	N	28	28	28	10	10	10		
		Mean	78.0	74.4	-3.6	80.0	76.7	-3.3		
		SD	25.28	27.02	25.40	23.31	21.08	20.49		
		Median	83.3	75.0	0.0	83.3	75.0	0.0		
		95% CI	68.2, 87.8	63.9, 84.9	-13.4, 6.3	63.3, 96.7	61.6, 91.7	-18.0, 11.3		
		Q1, Q3	66.7, 100.0	66.7, 100.0	-16.7, 8.3	66.7, 100.0	66.7, 100.0	-16.7, 0.0		
		Min, Max	16.7, 100.0	0.0, 100.0	-50.0, 50.0	33.3, 100.0	33.3, 100.0	-33.3, 33.3		
		Mean Diff (95% CI) [a]			-3.6 (-13.4, 6.3)			-3.3 (-18.0, 11.3)		
		P-value [a]			0.463			0.619		
		Mean Diff (95% CI) [b]			-0.2 (-18.4, 17.9)					
		P-value [b]			0.979					
		Effect Size (95% CI) [c]			-0.01 (-0.22, 0.20)					
		C17D1	N	N	26	26	26	7	7	7
				Mean	78.2	74.4	-3.8	71.4	71.4	0.0
SD	25.28			29.15	28.01	23.00	23.00	27.22		
Median	83.3			83.3	0.0	66.7	66.7	0.0		
95% CI	68.0, 88.4			62.6, 86.1	-15.2, 7.5	50.2, 92.7	50.2, 92.7	-25.2, 25.2		
Q1, Q3	66.7, 100.0			66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	-33.3, 33.3		
Min, Max	16.7, 100.0			0.0, 100.0	-66.7, 50.0	33.3, 100.0	33.3, 100.0	-33.3, 33.3		
Mean Diff (95% CI) [a]					-3.8 (-15.2, 7.5)			0.0 (-25.2, 25.2)		
P-value [a]					0.490			1.000		
Mean Diff (95% CI) [b]					-3.8 (-28.0, 20.3)					
P-value [b]					0.748					
Effect Size (95% CI) [c]					-0.15 (-0.36, 0.06)					

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C18D1	N	22	22	22	7	7	7
		Mean	75.8	72.7	-3.0	81.0	76.2	-4.8
		SD	26.09	31.09	29.83	17.82	18.90	15.85
		Median	83.3	83.3	0.0	66.7	66.7	0.0
		95% CI	64.2, 87.3	58.9, 86.5	-16.3, 10.2	64.5, 97.4	58.7, 93.7	-19.4, 9.9
		Q1, Q3	66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 0.0
		Min, Max	16.7, 100.0	0.0, 100.0	-66.7, 50.0	66.7, 100.0	50.0, 100.0	-33.3, 16.7
		Mean Diff (95% CI) [a]			-3.0 (-16.3, 10.2)			-4.8 (-19.4, 9.9)
		P-value [a]			0.639			0.457
		Mean Diff (95% CI) [b]			1.7 (-22.6, 26.1)			
		P-value [b]			0.885			
		Effect Size (95% CI) [c]			0.07 (-0.15, 0.28)			
	C19D1	N	20	20	20	6	6	6
		Mean	75.8	75.0	-0.8	83.3	69.4	-13.9
		SD	26.20	26.77	23.86	18.26	30.58	34.02
		Median	83.3	66.7	0.0	83.3	75.0	-8.3
		95% CI	63.6, 88.1	62.5, 87.5	-12.0, 10.3	64.2, 102.5	37.4, 101.5	-49.6, 21.8
		Q1, Q3	66.7, 100.0	66.7, 100.0	-25.0, 16.7	66.7, 100.0	33.3, 100.0	-33.3, 0.0
		Min, Max	16.7, 100.0	16.7, 100.0	-33.3, 50.0	66.7, 100.0	33.3, 100.0	-66.7, 33.3
		Mean Diff (95% CI) [a]			-0.8 (-12.0, 10.3)			-13.9 (-49.6, 21.8)
		P-value [a]			0.878			0.363
		Mean Diff (95% CI) [b]			13.1 (-12.2, 38.3)			
		P-value [b]			0.297			
		Effect Size (95% CI) [c]			0.50 (0.29, 0.72)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		20	20	20	4	4	4
	Mean		78.3	69.2	-9.2	83.3	79.2	-4.2
	SD		27.09	30.72	23.86	19.25	15.96	20.97
	Median		83.3	75.0	-8.3	83.3	75.0	0.0
	95% CI		65.7, 91.0	54.8, 83.5	-20.3, 2.0	52.7, 114.0	53.8, 104.6	-37.5, 29.2
	Q1, Q3		66.7, 100.0	66.7, 91.7	-16.7, 0.0	66.7, 100.0	66.7, 91.7	-16.7, 8.3
	Min, Max		16.7, 100.0	0.0, 100.0	-66.7, 50.0	66.7, 100.0	66.7, 100.0	-33.3, 16.7
	Mean Diff (95% CI) [a]				-9.2 (-20.3, 2.0)			-4.2 (-37.5, 29.2)
	P-value [a]				0.102			0.718
	Mean Diff (95% CI) [b]				-5.0 (-31.7, 21.7)			
	P-value [b]				0.701			
	Effect Size (95% CI) [c]				-0.19 (-0.41, 0.02)			
	C21D1	N		18	18	18	4	4
Mean			75.9	75.0	-0.9	83.3	75.0	-8.3
SD			27.55	29.84	26.49	19.25	16.67	16.67
Median			83.3	83.3	0.0	83.3	66.7	0.0
95% CI			62.2, 89.6	60.2, 89.8	-14.1, 12.2	52.7, 114.0	48.5, 101.5	-34.9, 18.2
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 83.3	-16.7, 0.0
Min, Max			16.7, 100.0	0.0, 100.0	-66.7, 50.0	66.7, 100.0	66.7, 100.0	-33.3, 0.0
Mean Diff (95% CI) [a]					-0.9 (-14.1, 12.2)			-8.3 (-34.9, 18.2)
P-value [a]					0.884			0.391
Mean Diff (95% CI) [b]					7.4 (-21.7, 36.5)			
P-value [b]					0.602			
Effect Size (95% CI) [c]					0.29 (0.07, 0.50)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		14	14	14	3	3	3	
	Mean		76.2	77.4	1.2	77.8	77.8	0.0	
	SD		30.46	24.11	23.99	19.25	19.25	0.00	
	Median		83.3	75.0	0.0	66.7	66.7	0.0	
	95% CI		58.6, 93.8	63.5, 91.3	-12.7, 15.0	30.0, 125.6	30.0, 125.6	0.0, 0.0	
	Q1, Q3		83.3, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	0.0, 0.0	
	Min, Max		16.7, 100.0	33.3, 100.0	-33.3, 50.0	66.7, 100.0	66.7, 100.0	0.0, 0.0	
	Mean Diff (95% CI) [a]				1.2 (-12.7, 15.0)			0.0 (0.0, 0.0)	
	P-value [a]				0.856			NE	
	Mean Diff (95% CI) [b]				1.2 (-29.1, 31.5)				
	P-value [b]				0.934				
	Effect Size (95% CI) [c]				0.05 (-0.17, 0.26)				
	C23D1	N		11	11	11	3	3	3
		Mean		72.7	74.2	1.5	77.8	77.8	0.0
SD			33.56	32.80	21.67	19.25	19.25	0.00	
Median			83.3	83.3	0.0	66.7	66.7	0.0	
95% CI			50.2, 95.3	52.2, 96.3	-13.0, 16.1	30.0, 125.6	30.0, 125.6	0.0, 0.0	
Q1, Q3			33.3, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	0.0, 0.0	
Min, Max			16.7, 100.0	0.0, 100.0	-33.3, 50.0	66.7, 100.0	66.7, 100.0	0.0, 0.0	
Mean Diff (95% CI) [a]					1.5 (-13.0, 16.1)			0.0 (0.0, 0.0)	
P-value [a]					0.821			NE	
Mean Diff (95% CI) [b]					1.5 (-26.6, 29.6)				
P-value [b]					0.908				
Effect Size (95% CI) [c]					0.06 (-0.15, 0.27)				

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C24D1	N		10	10	10	2	2	2
	Mean		78.3	73.3	-5.0	83.3	83.3	0.0
	SD		29.45	33.52	13.72	23.57	23.57	0.00
	Median		83.3	83.3	-8.3	83.3	83.3	0.0
	95% CI		57.3, 99.4	49.4, 97.3	-14.8, 4.8	-128.4, 295.1	-128.4, 295.1	0.0, 0.0
	Q1, Q3		83.3, 100.0	66.7, 100.0	-16.7, 0.0	66.7, 100.0	66.7, 100.0	0.0, 0.0
	Min, Max		16.7, 100.0	0.0, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	0.0, 0.0
	Mean Diff (95% CI) [a]				-5.0 (-14.8, 4.8)			0.0 (0.0, 0.0)
	P-value [a]				0.279			NE
	Mean Diff (95% CI) [b]				-5.0 (-27.5, 17.5)			
	P-value [b]				0.631			
	Effect Size (95% CI) [c]				-0.19 (-0.41, 0.02)			
	C25D1	N		9	9	9	0	0
Mean			75.9	66.7	-9.3	NE	NE	NE
SD			30.17	32.27	14.70	NE	NE	NE
Median			83.3	66.7	-16.7	NE	NE	NE
95% CI			52.7, 99.1	41.9, 91.5	-20.6, 2.0	NE, NE	NE, NE	NE, NE
Q1, Q3			83.3, 100.0	66.7, 83.3	-16.7, 0.0	NE, NE	NE, NE	NE, NE
Min, Max			16.7, 100.0	0.0, 100.0	-33.3, 16.7	NE, NE	NE, NE	NE, NE
Mean Diff (95% CI) [a]					-9.3 (-20.6, 2.0)			NE (NE, NE)
P-value [a]					0.095			NE
Mean Diff (95% CI) [b]					NE (NE, NE)			
P-value [b]					NE			
Effect Size (95% CI) [c]					NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	91.7	70.8	-20.8	100.0	100.0	0.0
		SD	8.91	31.81	33.03	NE	NE	NE
		Median	91.7	75.0	-8.3	100.0	100.0	0.0
		95% CI	84.2, 99.1	44.2, 97.4	-48.5, 6.8	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	50.0, 100.0	-41.7, 0.0	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Min, Max	83.3, 100.0	16.7, 100.0	-83.3, 16.7	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Mean Diff (95% CI) [a]			-20.8 (-48.5, 6.8)			0.0 (NE, NE)
		P-value [a]			0.118			NE
		Mean Diff (95% CI) [b]			-20.8 (-103.7, 62.0)			
		P-value [b]			0.571			
		Effect Size (95% CI) [c]			-0.80 (-1.02, -0.58)			
	C27D1	N	8	8	8	1	1	1
		Mean	91.7	91.7	0.0	100.0	100.0	0.0
		SD	8.91	12.60	17.82	NE	NE	NE
		Median	91.7	100.0	0.0	100.0	100.0	0.0
		95% CI	84.2, 99.1	81.1, 102.2	-14.9, 14.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	83.3, 100.0	-8.3, 16.7	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Min, Max	83.3, 100.0	66.7, 100.0	-33.3, 16.7	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (-14.9, 14.9)			0.0 (NE, NE)
		P-value [a]			1.000			NE
		Mean Diff (95% CI) [b]			0.0 (-44.7, 44.7)			
		P-value [b]			1.000			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	92.9	85.7	-7.1	100.0	100.0	0.0
		SD	8.91	15.00	16.27	NE	NE	NE
		Median	100.0	83.3	0.0	100.0	100.0	0.0
		95% CI	84.6, 101.1	71.8, 99.6	-22.2, 7.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	66.7, 100.0	-16.7, 0.0	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Min, Max	83.3, 100.0	66.7, 100.0	-33.3, 16.7	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Mean Diff (95% CI) [a]			-7.1 (-22.2, 7.9)			0.0 (NE, NE)
		P-value [a]			0.289			NE
		Mean Diff (95% CI) [b]			-7.1 (-49.7, 35.4)			
		P-value [b]			0.695			
		Effect Size (95% CI) [c]			-0.28 (-0.49, -0.06)			
	C29D1	N	4	4	4	1	1	1
		Mean	87.5	75.0	-12.5	100.0	50.0	-50.0
		SD	8.33	16.67	20.97	NE	NE	NE
		Median	83.3	66.7	-16.7	100.0	50.0	-50.0
		95% CI	74.2, 100.8	48.5, 101.5	-45.9, 20.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 91.7	66.7, 83.3	-25.0, 0.0	100.0, 100.0	50.0, 50.0	-50.0, -50.0
		Min, Max	83.3, 100.0	66.7, 100.0	-33.3, 16.7	100.0, 100.0	50.0, 50.0	-50.0, -50.0
		Mean Diff (95% CI) [a]			-12.5 (-45.9, 20.9)			-50.0 (NE, NE)
		P-value [a]			0.319			NE
		Mean Diff (95% CI) [b]			37.5 (-37.1, 112.1)			
		P-value [b]			0.208			
		Effect Size (95% CI) [c]			1.45 (1.21, 1.68)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C30D1	N		4	4	4	1	1	1	
	Mean		91.7	91.7	0.0	100.0	33.3	-66.7	
	SD		9.62	16.67	23.57	NE	NE	NE	
	Median		91.7	100.0	8.3	100.0	33.3	-66.7	
	95% CI		76.4, 107.0	65.1, 118.2	-37.5, 37.5	NE, NE	NE, NE	NE, NE	
	Q1, Q3		83.3, 100.0	83.3, 100.0	-16.7, 16.7	100.0, 100.0	33.3, 33.3	-66.7, -66.7	
	Min, Max		83.3, 100.0	66.7, 100.0	-33.3, 16.7	100.0, 100.0	33.3, 33.3	-66.7, -66.7	
	Mean Diff (95% CI) [a]				0.0 (-37.5, 37.5)			-66.7 (NE, NE)	
	P-value [a]				1.000			NE	
	Mean Diff (95% CI) [b]				66.7 (-17.2, 150.5)				
	P-value [b]				0.085				
	Effect Size (95% CI) [c]				2.57 (2.28, 2.86)				
	C31D1	N		2	2	2	1	1	1
		Mean		83.3	83.3	0.0	100.0	66.7	-33.3
SD			0.00	23.57	23.57	NE	NE	NE	
Median			83.3	83.3	0.0	100.0	66.7	-33.3	
95% CI			83.3, 83.3	-128.4, 295.1	-211.8, 211.8	NE, NE	NE, NE	NE, NE	
Q1, Q3			83.3, 83.3	66.7, 100.0	-16.7, 16.7	100.0, 100.0	66.7, 66.7	-33.3, -33.3	
Min, Max			83.3, 83.3	66.7, 100.0	-16.7, 16.7	100.0, 100.0	66.7, 66.7	-33.3, -33.3	
Mean Diff (95% CI) [a]					0.0 (-211.8, 211.8)			-33.3 (NE, NE)	
P-value [a]					1.000			NE	
Mean Diff (95% CI) [b]					33.3 (-333.5, 400.1)				
P-value [b]					0.454				
Effect Size (95% CI) [c]					1.28 (1.05, 1.52)				

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	83.3	91.7	8.3	100.0	100.0	0.0
		SD	0.00	11.79	11.79	NE	NE	NE
		Median	83.3	91.7	8.3	100.0	100.0	0.0
		95% CI	83.3, 83.3	-14.2, 197.6	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	83.3, 100.0	0.0, 16.7	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Min, Max	83.3, 83.3	83.3, 100.0	0.0, 16.7	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			0.0 (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			8.3 (-175.1, 191.7)			
		P-value [b]			0.667			
		Effect Size (95% CI) [c]			0.32 (0.11, 0.54)			
	C33D1	N	3	3	3	1	1	1
		Mean	88.9	88.9	0.0	100.0	83.3	-16.7
		SD	9.62	19.25	16.67	NE	NE	NE
		Median	83.3	100.0	0.0	100.0	83.3	-16.7
		95% CI	65.0, 112.8	41.1, 136.7	-41.4, 41.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	66.7, 100.0	-16.7, 16.7	100.0, 100.0	83.3, 83.3	-16.7, -16.7
		Min, Max	83.3, 100.0	66.7, 100.0	-16.7, 16.7	100.0, 100.0	83.3, 83.3	-16.7, -16.7
		Mean Diff (95% CI) [a]			0.0 (-41.4, 41.4)			-16.7 (NE, NE)
		P-value [a]			1.000			NE
		Mean Diff (95% CI) [b]			16.7 (-66.1, 99.5)			
		P-value [b]			0.478			
		Effect Size (95% CI) [c]			0.64 (0.42, 0.86)			

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C34D1	N		3	3	3	0	0	0	
	Mean		88.9	88.9	0.0	NE	NE	NE	
	SD		9.62	19.25	16.67	NE	NE	NE	
	Median		83.3	100.0	0.0	NE	NE	NE	
	95% CI		65.0, 112.8	41.1, 136.7	-41.4, 41.4	NE, NE	NE, NE	NE, NE	
	Q1, Q3		83.3, 100.0	66.7, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE	
	Min, Max		83.3, 100.0	66.7, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				0.0 (-41.4, 41.4)			NE (NE, NE)	
	P-value [a]				1.000			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C35D1	N		2	2	2	0	0	0
		Mean		83.3	83.3	0.0	NE	NE	NE
SD			0.00	23.57	23.57	NE	NE	NE	
Median			83.3	83.3	0.0	NE	NE	NE	
95% CI			83.3, 83.3	-128.4, 295.1	-211.8, 211.8	NE, NE	NE, NE	NE, NE	
Q1, Q3			83.3, 83.3	66.7, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE	
Min, Max			83.3, 83.3	66.7, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					0.0 (-211.8, 211.8)			NE (NE, NE)	
P-value [a]					1.000			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)				
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline		
C36D1	N	N	3	3	3	0	0	0		
		Mean	88.9	88.9	0.0	NE	NE	NE		
		SD	9.62	19.25	16.67	NE	NE	NE		
		Median	83.3	100.0	0.0	NE	NE	NE		
		95% CI	65.0, 112.8	41.1, 136.7	-41.4, 41.4	NE, NE	NE, NE	NE, NE		
		Q1, Q3	83.3, 100.0	66.7, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE		
		Min, Max	83.3, 100.0	66.7, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE		
		Mean Diff (95% CI) [a]			0.0 (-41.4, 41.4)			NE (NE, NE)		
		P-value [a]			1.000			NE		
		Mean Diff (95% CI) [b]			NE (NE, NE)					
		P-value [b]			NE					
		Effect Size (95% CI) [c]			NE (NE, NE)					
		C37D1	N	N	3	3	3	0	0	0
				Mean	88.9	88.9	0.0	NE	NE	NE
SD	9.62			19.25	16.67	NE	NE	NE		
Median	83.3			100.0	0.0	NE	NE	NE		
95% CI	65.0, 112.8			41.1, 136.7	-41.4, 41.4	NE, NE	NE, NE	NE, NE		
Q1, Q3	83.3, 100.0			66.7, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE		
Min, Max	83.3, 100.0			66.7, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE		
Mean Diff (95% CI) [a]					0.0 (-41.4, 41.4)			NE (NE, NE)		
P-value [a]					1.000			NE		
Mean Diff (95% CI) [b]					NE (NE, NE)					
P-value [b]					NE					
Effect Size (95% CI) [c]					NE (NE, NE)					

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C38D1	N		2	2	2	0	0	0	
	Mean		91.7	100.0	8.3	NE	NE	NE	
	SD		11.79	0.00	11.79	NE	NE	NE	
	Median		91.7	100.0	8.3	NE	NE	NE	
	95% CI		-14.2, 197.6	100.0, 100.0	-97.6, 114.2	NE, NE	NE, NE	NE, NE	
	Q1, Q3		83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE	
	Min, Max		83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				8.3 (-97.6, 114.2)			NE (NE, NE)	
	P-value [a]				0.500			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C39D1	N		2	2	2	0	0	0
		Mean		91.7	100.0	8.3	NE	NE	NE
SD			11.79	0.00	11.79	NE	NE	NE	
Median			91.7	100.0	8.3	NE	NE	NE	
95% CI			-14.2, 197.6	100.0, 100.0	-97.6, 114.2	NE, NE	NE, NE	NE, NE	
Q1, Q3			83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE	
Min, Max			83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					8.3 (-97.6, 114.2)			NE (NE, NE)	
P-value [a]					0.500			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	91.7	100.0	8.3	NE	NE	NE
		SD	11.79	0.00	11.79	NE	NE	NE
		Median	91.7	100.0	8.3	NE	NE	NE
		95% CI	-14.2, 197.6	100.0, 100.0	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	91.7	83.3	-8.3	NE	NE	NE
		SD	11.79	23.57	11.79	NE	NE	NE
		Median	91.7	83.3	-8.3	NE	NE	NE
		95% CI	-14.2, 197.6	-128.4, 295.1	-114.2, 97.6	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	66.7, 100.0	-16.7, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 100.0	66.7, 100.0	-16.7, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-8.3 (-114.2, 97.6)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	83.3	100.0	16.7	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	83.3	100.0	16.7	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	83.3	100.0	16.7	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	83.3	100.0	16.7	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		131	131	131	124	125	124	
	Mean		74.9	66.4	-8.5	78.0	65.1	-12.6	
	SD		27.22	33.59	29.70	25.02	31.07	28.54	
	Median		83.3	66.7	0.0	83.3	66.7	0.0	
	95% CI		70.2, 79.6	60.6, 72.2	-13.7, -3.4	73.5, 82.4	59.6, 70.6	-17.7, -7.6	
	Q1, Q3		66.7, 100.0	33.3, 100.0	-33.3, 16.7	66.7, 100.0	50.0, 100.0	-33.3, 0.0	
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-100.0, 66.7	
	Mean Diff (95% CI) [a]				-8.5 (-13.7, -3.4)			-12.6 (-17.7, -7.6)	
	P-value [a]				0.001			<.001	
	Mean Diff (95% CI) [b]				4.1 (-3.1, 11.3)				
	P-value [b]				0.261				
	Effect Size (95% CI) [c]				0.16 (-0.05, 0.37)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			82.1	73.8	-8.3	87.0	59.3	-27.8
	SD			22.13	24.21	19.34	13.89	37.37	36.32
Median			91.7	66.7	0.0	83.3	66.7	-16.7	
95% CI			69.4, 94.9	59.8, 87.8	-19.5, 2.8	76.4, 97.7	30.5, 88.0	-55.7, 0.1	
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 0.0	83.3, 100.0	50.0, 83.3	-33.3, 0.0	
Min, Max			33.3, 100.0	33.3, 100.0	-50.0, 16.7	66.7, 100.0	0.0, 100.0	-100.0, 16.7	
Mean Diff (95% CI) [a]					-8.3 (-19.5, 2.8)			-27.8 (-55.7, 0.1)	
P-value [a]					0.131			0.051	
Mean Diff (95% CI) [b]					19.4 (-4.6, 43.5)				
P-value [b]					0.108				
Effect Size (95% CI) [c]					0.75 (0.53, 0.97)				
Emotional Functioning	Baseline	N	174			165			
	Mean		71.5			74.4			
	SD		25.43			21.39			
	Median		75.0			83.3			
	95% CI		67.7, 75.3			71.2, 77.7			
	Q1, Q3		58.3, 91.7			66.7, 91.7			
	Min, Max		0.0, 100.0			8.3, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C2D1	N		152	152	152	144	144	144	
	Mean		72.5	78.6	6.1	74.8	76.7	1.9	
	SD		25.78	22.89	20.66	21.56	23.04	17.70	
	95% CI		68.4, 76.6	74.9, 82.3	2.8, 9.4	71.3, 78.4	72.9, 80.5	-1.1, 4.8	
	Median		83.3	83.3	0.0	83.3	83.3	0.0	
	Q1, Q3		58.3, 91.7	66.7, 100.0	0.0, 16.7	66.7, 91.7	66.7, 100.0	-8.3, 8.3	
	Min, Max		0.0, 100.0	0.0, 100.0	-58.3, 75.0	8.3, 100.0	0.0, 100.0	-66.7, 50.0	
	Mean Diff (95% CI) [a]				6.1 (2.8, 9.4)			1.9 (-1.1, 4.8)	
	P-value [a]				<.001			0.211	
	Mean Diff (95% CI) [b]				4.2 (-0.2, 8.6)				
	P-value [b]				0.060				
	Effect Size (95% CI) [c]				0.18 (-0.03, 0.39)				
	C3D1	N		123	123	123	101	101	101
		Mean		73.3	81.4	8.1	73.4	78.0	4.5
SD			24.65	20.61	21.43	22.10	22.32	19.20	
95% CI			68.9, 77.7	77.7, 85.1	4.2, 11.9	69.1, 77.8	73.6, 82.4	0.7, 8.3	
Median			83.3	83.3	8.3	83.3	83.3	0.0	
Q1, Q3			58.3, 91.7	66.7, 100.0	0.0, 16.7	66.7, 91.7	66.7, 100.0	-8.3, 16.7	
Min, Max			0.0, 100.0	8.3, 100.0	-41.7, 100.0	8.3, 100.0	8.3, 100.0	-41.7, 75.0	
Mean Diff (95% CI) [a]					8.1 (4.2, 11.9)			4.5 (0.7, 8.3)	
P-value [a]					<.001			0.019	
Mean Diff (95% CI) [b]					3.5 (-1.9, 8.9)				
P-value [b]					0.201				
Effect Size (95% CI) [c]					0.15 (-0.06, 0.36)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		73.0	80.6	7.5	73.2	78.7	5.4
	SD		23.91	21.98	21.49	22.09	23.93	21.86
	95% CI		68.5, 77.5	76.4, 84.7	3.5, 11.6	68.7, 77.8	73.8, 83.6	1.0, 9.9
	Median		75.0	83.3	8.3	83.3	83.3	8.3
	Q1, Q3		58.3, 91.7	66.7, 100.0	-1.4, 16.7	66.7, 91.7	66.7, 100.0	-8.3, 16.7
	Min, Max		0.0, 100.0	0.0, 100.0	-58.3, 91.7	8.3, 100.0	0.0, 100.0	-66.7, 66.7
	Mean Diff (95% CI) [a]				7.5 (3.5, 11.6)			5.4 (1.0, 9.9)
	P-value [a]				<.001			0.018
	Mean Diff (95% CI) [b]				2.1 (-3.9, 8.1)			
	P-value [b]				0.488			
	Effect Size (95% CI) [c]				0.09 (-0.12, 0.30)			
	C5D1	N		98	98	98	80	80
Mean			72.0	79.8	7.8	72.3	79.2	6.9
SD			25.05	24.40	20.72	22.57	19.98	20.19
95% CI			66.9, 77.0	74.9, 84.7	3.7, 12.0	67.3, 77.3	74.7, 83.6	2.4, 11.4
Median			75.0	91.7	8.3	79.2	83.3	0.0
Q1, Q3			58.3, 91.7	66.7, 100.0	0.0, 16.7	66.7, 91.7	66.7, 100.0	0.0, 8.3
Min, Max			0.0, 100.0	0.0, 100.0	-50.0, 91.7	8.3, 100.0	16.7, 100.0	-33.3, 66.7
Mean Diff (95% CI) [a]					7.8 (3.7, 12.0)			6.9 (2.4, 11.4)
P-value [a]					<.001			0.003
Mean Diff (95% CI) [b]					0.9 (-5.1, 7.0)			
P-value [b]					0.759			
Effect Size (95% CI) [c]					0.04 (-0.17, 0.25)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C6D1	N		96	96	96	68	68	68
	Mean		73.4	81.8	8.4	74.0	82.2	8.2
	SD		23.64	22.70	21.16	21.43	18.38	19.24
	95% CI		68.6, 78.2	77.2, 86.4	4.1, 12.7	68.8, 79.2	77.8, 86.7	3.6, 12.9
	Median		79.2	91.7	8.3	79.2	83.3	4.2
	Q1, Q3		58.3, 91.7	66.7, 100.0	0.0, 20.8	66.7, 91.7	75.0, 100.0	0.0, 16.7
	Min, Max		0.0, 100.0	0.0, 100.0	-50.0, 58.3	8.3, 100.0	25.0, 100.0	-25.0, 83.3
	Mean Diff (95% CI) [a]				8.4 (4.1, 12.7)			8.2 (3.6, 12.9)
	P-value [a]				<.001			0.001
	Mean Diff (95% CI) [b]				0.2 (-6.2, 6.6)			
	P-value [b]				0.956			
	Effect Size (95% CI) [c]				0.01 (-0.20, 0.22)			
	C7D1	N		79	79	79	52	52
Mean			72.8	82.4	9.6	73.6	84.1	10.6
SD			25.72	22.50	20.50	23.09	19.26	19.18
95% CI			67.1, 78.6	77.4, 87.5	5.0, 14.2	67.1, 80.0	78.8, 89.5	5.2, 15.9
Median			83.3	91.7	8.3	83.3	91.7	8.3
Q1, Q3			58.3, 91.7	75.0, 100.0	0.0, 25.0	66.7, 91.7	75.0, 100.0	0.0, 16.7
Min, Max			0.0, 100.0	0.0, 100.0	-75.0, 58.3	8.3, 100.0	16.7, 100.0	-16.7, 75.0
Mean Diff (95% CI) [a]					9.6 (5.0, 14.2)			10.6 (5.2, 15.9)
P-value [a]					<.001			<.001
Mean Diff (95% CI) [b]					-1.0 (-8.0, 6.1)			
P-value [b]					0.785			
Effect Size (95% CI) [c]					-0.04 (-0.25, 0.17)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		75	75	75	50	50	50
	Mean		73.6	81.9	8.3	73.5	82.7	9.2
	SD		25.01	22.94	23.97	23.55	24.27	22.29
	95% CI		67.8, 79.3	76.6, 87.2	2.8, 13.8	66.8, 80.2	75.8, 89.6	2.8, 15.5
	Median		83.3	91.7	0.0	83.3	91.7	8.3
	Q1, Q3		58.3, 91.7	75.0, 100.0	0.0, 25.0	66.7, 91.7	75.0, 100.0	0.0, 16.7
	Min, Max		0.0, 100.0	0.0, 100.0	-83.3, 75.0	8.3, 100.0	0.0, 100.0	-41.7, 75.0
	Mean Diff (95% CI) [a]				8.3 (2.8, 13.8)			9.2 (2.8, 15.5)
	P-value [a]				0.004			0.005
	Mean Diff (95% CI) [b]				-0.8 (-9.3, 7.6)			
	P-value [b]				0.845			
	Effect Size (95% CI) [c]				-0.04 (-0.25, 0.18)			
	C9D1	N		60	60	60	42	42
Mean			72.5	84.2	11.7	72.8	83.9	11.1
SD			23.38	19.75	22.87	24.28	20.19	21.44
95% CI			66.5, 78.5	79.1, 89.3	5.8, 17.6	65.3, 80.4	77.6, 90.2	4.4, 17.8
Median			75.0	91.7	8.3	83.3	91.7	8.3
Q1, Q3			58.3, 91.7	75.0, 100.0	0.0, 25.0	66.7, 91.7	75.0, 100.0	0.0, 16.7
Min, Max			16.7, 100.0	8.3, 100.0	-75.0, 58.3	8.3, 100.0	33.3, 100.0	-16.7, 91.7
Mean Diff (95% CI) [a]					11.7 (5.8, 17.6)			11.1 (4.4, 17.8)
P-value [a]					<.001			0.002
Mean Diff (95% CI) [b]					0.6 (-8.3, 9.5)			
P-value [b]					0.902			
Effect Size (95% CI) [c]					0.02 (-0.19, 0.24)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C10D1	N		54	54	54	30	30	30
	Mean		72.5	82.4	9.9	73.3	83.3	10.0
	SD		24.32	19.67	21.54	22.57	20.29	20.58
	95% CI		65.9, 79.2	77.0, 87.8	4.0, 15.8	64.9, 81.8	75.8, 90.9	2.3, 17.7
	Median		75.0	91.7	8.3	79.2	91.7	8.3
	Q1, Q3		58.3, 91.7	66.7, 100.0	0.0, 25.0	66.7, 91.7	66.7, 100.0	0.0, 16.7
	Min, Max		16.7, 100.0	8.3, 100.0	-75.0, 58.3	8.3, 100.0	33.3, 100.0	-50.0, 75.0
	Mean Diff (95% CI) [a]				9.9 (4.0, 15.8)			10.0 (2.3, 17.7)
	P-value [a]				0.001			0.013
	Mean Diff (95% CI) [b]				-0.1 (-9.7, 9.5)			
	P-value [b]				0.980			
	Effect Size (95% CI) [c]				-0.01 (-0.22, 0.21)			
	C11D1	N		46	46	46	23	23
Mean			70.1	77.7	7.6	73.2	87.3	14.1
SD			24.06	21.73	23.56	23.56	17.20	22.25
95% CI			63.0, 77.3	71.3, 84.2	0.6, 14.6	63.0, 83.4	79.9, 94.8	4.5, 23.8
Median			66.7	79.2	8.3	75.0	100.0	8.3
Q1, Q3			58.3, 91.7	66.7, 100.0	0.0, 16.7	66.7, 91.7	75.0, 100.0	0.0, 25.0
Min, Max			16.7, 100.0	25.0, 100.0	-58.3, 58.3	8.3, 100.0	33.3, 100.0	-16.7, 83.3
Mean Diff (95% CI) [a]					7.6 (0.6, 14.6)			14.1 (4.5, 23.8)
P-value [a]					0.034			0.006
Mean Diff (95% CI) [b]					-6.5 (-18.3, 5.3)			
P-value [b]					0.274			
Effect Size (95% CI) [c]					-0.28 (-0.49, -0.06)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		41	41	41	19	19	19	
	Mean		72.0	80.1	8.1	71.5	83.8	12.3	
	SD		22.42	22.20	25.79	22.96	21.60	24.75	
	95% CI		64.9, 79.0	73.1, 87.1	0.0, 16.3	60.4, 82.6	73.4, 94.2	0.4, 24.2	
	Median		66.7	83.3	8.3	75.0	83.3	8.3	
	Q1, Q3		58.3, 91.7	66.7, 100.0	0.0, 16.7	66.7, 83.3	75.0, 100.0	0.0, 16.7	
	Min, Max		16.7, 100.0	8.3, 100.0	-75.0, 75.0	8.3, 91.7	8.3, 100.0	-33.3, 91.7	
	Mean Diff (95% CI) [a]				8.1 (0.0, 16.3)			12.3 (0.4, 24.2)	
	P-value [a]				0.050			0.044	
	Mean Diff (95% CI) [b]				-4.2 (-18.3, 10.0)				
	P-value [b]				0.559				
	Effect Size (95% CI) [c]				-0.18 (-0.39, 0.04)				
	C13D1	N		33	33	33	15	15	15
		Mean		71.0	81.1	10.1	76.7	88.9	12.2
SD			23.95	19.24	21.42	21.64	13.61	23.12	
95% CI			62.5, 79.5	74.2, 87.9	2.5, 17.7	64.7, 88.7	81.4, 96.4	-0.6, 25.0	
Median			66.7	83.3	8.3	83.3	100.0	8.3	
Q1, Q3			58.3, 91.7	66.7, 100.0	0.0, 16.7	66.7, 91.7	75.0, 100.0	0.0, 25.0	
Min, Max			16.7, 100.0	25.0, 100.0	-33.3, 75.0	8.3, 100.0	66.7, 100.0	-25.0, 75.0	
Mean Diff (95% CI) [a]					10.1 (2.5, 17.7)			12.2 (-0.6, 25.0)	
P-value [a]					0.011			0.060	
Mean Diff (95% CI) [b]					-2.1 (-15.9, 11.6)				
P-value [b]					0.758				
Effect Size (95% CI) [c]					-0.09 (-0.30, 0.12)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C14D1	N		33	33	33	12	12	12
	Mean		73.0	83.8	10.9	75.0	88.2	13.2
	SD		22.73	19.43	19.93	23.03	13.04	22.04
	95% CI		64.9, 81.0	77.0, 90.7	3.8, 17.9	60.4, 89.6	79.9, 96.5	-0.8, 27.2
	Median		66.7	91.7	8.3	79.2	91.7	8.3
	Q1, Q3		58.3, 91.7	66.7, 100.0	0.0, 25.0	70.8, 91.7	75.0, 100.0	4.2, 16.7
	Min, Max		16.7, 100.0	33.3, 100.0	-33.3, 50.0	8.3, 91.7	66.7, 100.0	-16.7, 75.0
	Mean Diff (95% CI) [a]				10.9 (3.8, 17.9)			13.2 (-0.8, 27.2)
	P-value [a]				0.004			0.062
	Mean Diff (95% CI) [b]				-2.3 (-16.3, 11.6)			
	P-value [b]				0.737			
	Effect Size (95% CI) [c]				-0.10 (-0.31, 0.11)			
	C15D1	N		28	28	28	13	13
Mean			70.8	79.2	8.3	74.4	85.3	10.9
SD			23.30	23.73	21.64	22.17	14.50	27.51
95% CI			61.8, 79.9	70.0, 88.4	-0.1, 16.7	61.0, 87.8	76.5, 94.0	-5.7, 27.5
Median			66.7	83.3	8.3	75.0	83.3	8.3
Q1, Q3			58.3, 91.7	66.7, 100.0	0.0, 25.0	66.7, 91.7	75.0, 100.0	0.0, 8.3
Min, Max			16.7, 100.0	0.0, 100.0	-33.3, 50.0	8.3, 91.7	58.3, 100.0	-16.7, 91.7
Mean Diff (95% CI) [a]					8.3 (-0.1, 16.7)			10.9 (-5.7, 27.5)
P-value [a]					0.051			0.179
Mean Diff (95% CI) [b]					-2.6 (-18.6, 13.5)			
P-value [b]					0.748			
Effect Size (95% CI) [c]					-0.11 (-0.32, 0.10)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C16D1	N		28	28	28	10	10	10
	Mean		73.8	82.1	8.3	74.2	83.3	9.2
	SD		21.84	20.63	21.52	25.29	14.70	25.29
	95% CI		65.3, 82.3	74.1, 90.1	0.0, 16.7	56.1, 92.3	72.8, 93.8	-8.9, 27.3
	Median		70.8	91.7	8.3	79.2	83.3	8.3
	Q1, Q3		62.5, 91.7	66.7, 100.0	0.0, 20.8	66.7, 91.7	75.0, 100.0	0.0, 8.3
	Min, Max		16.7, 100.0	33.3, 100.0	-41.7, 41.7	8.3, 91.7	58.3, 100.0	-16.7, 75.0
	Mean Diff (95% CI) [a]				8.3 (0.0, 16.7)			9.2 (-8.9, 27.3)
	P-value [a]				0.050			0.281
	Mean Diff (95% CI) [b]				-0.8 (-17.7, 16.0)			
	P-value [b]				0.921			
	Effect Size (95% CI) [c]				-0.04 (-0.25, 0.18)			
	C17D1	N		26	26	26	7	7
Mean			72.1	80.8	8.7	71.4	92.9	21.4
SD			21.72	22.46	19.36	29.60	8.91	33.28
95% CI			63.3, 80.9	71.7, 89.8	0.8, 16.5	44.1, 98.8	84.6, 101.1	-9.4, 52.2
Median			66.7	91.7	8.3	75.0	100.0	8.3
Q1, Q3			58.3, 91.7	66.7, 100.0	0.0, 16.7	66.7, 91.7	83.3, 100.0	8.3, 33.3
Min, Max			16.7, 100.0	33.3, 100.0	-33.3, 41.7	8.3, 91.7	83.3, 100.0	-8.3, 91.7
Mean Diff (95% CI) [a]					8.7 (0.8, 16.5)			21.4 (-9.4, 52.2)
P-value [a]					0.031			0.139
Mean Diff (95% CI) [b]					-12.8 (-32.5, 7.0)			
P-value [b]					0.197			
Effect Size (95% CI) [c]					-0.54 (-0.76, -0.32)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C18D1	N		22	22	22	7	7	7	
	Mean		69.3	82.6	13.3	71.4	91.7	20.2	
	SD		21.73	19.40	19.36	29.60	14.43	33.97	
	95% CI		59.7, 79.0	74.0, 91.2	4.7, 21.8	44.1, 98.8	78.3, 105.0	-11.2, 51.7	
	Median		66.7	87.5	16.7	75.0	100.0	8.3	
	Q1, Q3		58.3, 83.3	66.7, 100.0	0.0, 25.0	66.7, 91.7	75.0, 100.0	0.0, 33.3	
	Min, Max		16.7, 100.0	33.3, 100.0	-33.3, 50.0	8.3, 91.7	66.7, 100.0	-8.3, 91.7	
	Mean Diff (95% CI) [a]				13.3 (4.7, 21.8)			20.2 (-11.2, 51.7)	
	P-value [a]				0.004			0.166	
	Mean Diff (95% CI) [b]				-7.0 (-27.8, 13.9)				
	P-value [b]				0.498				
	Effect Size (95% CI) [c]				-0.30 (-0.51, -0.08)				
	C19D1	N		20	20	20	6	6	6
		Mean		70.0	82.1	12.1	68.1	81.9	13.9
SD			22.36	18.39	20.85	30.92	17.81	29.66	
95% CI			59.5, 80.5	73.5, 90.7	2.3, 21.8	35.6, 100.5	63.3, 100.6	-17.2, 45.0	
Median			66.7	87.5	16.7	75.0	83.3	8.3	
Q1, Q3			58.3, 87.5	66.7, 100.0	0.0, 29.2	66.7, 91.7	66.7, 100.0	-8.3, 25.0	
Min, Max			16.7, 100.0	50.0, 100.0	-33.3, 41.7	8.3, 91.7	58.3, 100.0	-16.7, 66.7	
Mean Diff (95% CI) [a]					12.1 (2.3, 21.8)			13.9 (-17.2, 45.0)	
P-value [a]					0.018			0.303	
Mean Diff (95% CI) [b]					-1.8 (-23.9, 20.3)				
P-value [b]					0.867				
Effect Size (95% CI) [c]					-0.08 (-0.29, 0.14)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C20D1	N		19	19	19	4	4	4	
	Mean		71.1	82.0	11.0	77.1	91.7	14.6	
	SD		23.14	23.78	21.53	10.49	11.79	14.23	
	95% CI		59.9, 82.2	70.6, 93.5	0.6, 21.3	60.4, 93.8	72.9, 110.4	-8.1, 37.2	
	Median		66.7	91.7	16.7	75.0	95.8	12.5	
	Q1, Q3		58.3, 91.7	66.7, 100.0	0.0, 25.0	70.8, 83.3	83.3, 100.0	4.2, 25.0	
	Min, Max		16.7, 100.0	16.7, 100.0	-33.3, 41.7	66.7, 91.7	75.0, 100.0	0.0, 33.3	
	Mean Diff (95% CI) [a]				11.0 (0.6, 21.3)			14.6 (-8.1, 37.2)	
	P-value [a]				0.039			0.133	
	Mean Diff (95% CI) [b]				-3.6 (-27.2, 20.0)				
	P-value [b]				0.753				
	Effect Size (95% CI) [c]				-0.15 (-0.37, 0.06)				
	C21D1	N		18	18	18	4	4	4
		Mean		69.0	81.0	12.0	77.1	85.4	8.3
SD			22.29	17.57	20.05	10.49	17.18	11.79	
95% CI			57.9, 80.1	72.3, 89.8	2.1, 22.0	60.4, 93.8	58.1, 112.8	-10.4, 27.1	
Median			66.7	83.3	16.7	75.0	87.5	4.2	
Q1, Q3			58.3, 83.3	66.7, 100.0	0.0, 25.0	70.8, 83.3	70.8, 100.0	0.0, 16.7	
Min, Max			16.7, 100.0	33.3, 100.0	-33.3, 41.7	66.7, 91.7	66.7, 100.0	0.0, 25.0	
Mean Diff (95% CI) [a]					12.0 (2.1, 22.0)			8.3 (-10.4, 27.1)	
P-value [a]					0.021			0.252	
Mean Diff (95% CI) [b]					3.7 (-18.3, 25.7)				
P-value [b]					0.729				
Effect Size (95% CI) [c]					0.16 (-0.06, 0.37)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		15	15	15	3	3	3	
	Mean		72.8	80.0	7.2	77.8	88.9	11.1	
	SD		24.29	17.76	18.86	12.73	19.25	12.73	
	95% CI		59.3, 86.2	70.2, 89.8	-3.2, 17.7	46.2, 109.4	41.1, 136.7	-20.5, 42.7	
	Median		83.3	83.3	8.3	75.0	100.0	8.3	
	Q1, Q3		66.7, 91.7	66.7, 91.7	0.0, 16.7	66.7, 91.7	66.7, 100.0	0.0, 25.0	
	Min, Max		16.7, 100.0	33.3, 100.0	-33.3, 41.7	66.7, 91.7	66.7, 100.0	0.0, 25.0	
	Mean Diff (95% CI) [a]				7.2 (-3.2, 17.7)			11.1 (-20.5, 42.7)	
	P-value [a]				0.160			0.270	
	Mean Diff (95% CI) [b]				-3.9 (-28.3, 20.5)				
	P-value [b]				0.740				
	Effect Size (95% CI) [c]				-0.16 (-0.38, 0.05)				
	C23D1	N		11	11	11	3	3	3
		Mean		74.2	78.8	4.5	77.8	91.7	13.9
SD			24.85	17.23	22.47	12.73	14.43	9.62	
95% CI			57.5, 90.9	67.2, 90.4	-10.6, 19.6	46.2, 109.4	55.8, 127.5	-10.0, 37.8	
Median			83.3	83.3	16.7	75.0	100.0	8.3	
Q1, Q3			66.7, 91.7	66.7, 91.7	-8.3, 16.7	66.7, 91.7	75.0, 100.0	8.3, 25.0	
Min, Max			16.7, 100.0	41.7, 100.0	-33.3, 33.3	66.7, 91.7	75.0, 100.0	8.3, 25.0	
Mean Diff (95% CI) [a]					4.5 (-10.6, 19.6)			13.9 (-10.0, 37.8)	
P-value [a]					0.518			0.130	
Mean Diff (95% CI) [b]					-9.3 (-39.0, 20.3)				
P-value [b]					0.505				
Effect Size (95% CI) [c]					-0.40 (-0.61, -0.18)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C24D1	N	10	10	10	2	2	2
		Mean	76.7	84.2	7.5	70.8	70.8	0.0
		SD	24.78	23.39	17.32	5.89	5.89	0.00
		95% CI	58.9, 94.4	67.4, 100.9	-4.9, 19.9	17.9, 123.8	17.9, 123.8	0.0, 0.0
		Median	83.3	91.7	8.3	70.8	70.8	0.0
		Q1, Q3	66.7, 91.7	83.3, 100.0	0.0, 16.7	66.7, 75.0	66.7, 75.0	0.0, 0.0
		Min, Max	16.7, 100.0	25.0, 100.0	-33.3, 33.3	66.7, 75.0	66.7, 75.0	0.0, 0.0
		Mean Diff (95% CI) [a]			7.5 (-4.9, 19.9)			0.0 (0.0, 0.0)
		P-value [a]			0.204			NE
		Mean Diff (95% CI) [b]			7.5 (-20.9, 35.9)			
		P-value [b]			0.569			
		Effect Size (95% CI) [c]			0.32 (0.10, 0.53)			
	C25D1	N	9	9	9	0	0	0
		Mean	75.0	78.7	3.7	NE	NE	NE
		SD	25.69	26.39	22.09	NE	NE	NE
		95% CI	55.3, 94.7	58.4, 99.0	-13.3, 20.7	NE, NE	NE, NE	NE, NE
		Median	83.3	83.3	8.3	NE	NE	NE
		Q1, Q3	66.7, 91.7	75.0, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	16.7, 100.0	16.7, 100.0	-33.3, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			3.7 (-13.3, 20.7)			NE (NE, NE)
		P-value [a]			0.629			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C26D1	N		8	8	8	1	1	1	
	Mean		83.3	84.4	1.0	75.0	100.0	25.0	
	SD		14.77	23.33	32.56	NE	NE	NE	
	95% CI		71.0, 95.7	64.9, 103.9	-26.2, 28.3	NE, NE	NE, NE	NE, NE	
	Median		87.5	95.8	8.3	75.0	100.0	25.0	
	Q1, Q3		66.7, 95.8	75.0, 100.0	-12.5, 25.0	75.0, 75.0	100.0, 100.0	25.0, 25.0	
	Min, Max		66.7, 100.0	33.3, 100.0	-66.7, 33.3	75.0, 75.0	100.0, 100.0	25.0, 25.0	
	Mean Diff (95% CI) [a]				1.0 (-26.2, 28.3)			25.0 (NE, NE)	
	P-value [a]				0.930			NE	
	Mean Diff (95% CI) [b]				-24.0 (-105.6, 57.7)				
	P-value [b]				0.510				
	Effect Size (95% CI) [c]				-1.02 (-1.24, -0.79)				
	C27D1	N		8	8	8	1	1	1
		Mean		83.3	83.3	0.0	75.0	91.7	16.7
SD			14.77	12.60	19.92	NE	NE	NE	
95% CI			71.0, 95.7	72.8, 93.9	-16.7, 16.7	NE, NE	NE, NE	NE, NE	
Median			87.5	79.2	8.3	75.0	91.7	16.7	
Q1, Q3			66.7, 95.8	75.0, 95.8	-16.7, 12.5	75.0, 75.0	91.7, 91.7	16.7, 16.7	
Min, Max			66.7, 100.0	66.7, 100.0	-33.3, 25.0	75.0, 75.0	91.7, 91.7	16.7, 16.7	
Mean Diff (95% CI) [a]					0.0 (-16.7, 16.7)			16.7 (NE, NE)	
P-value [a]					1.000			NE	
Mean Diff (95% CI) [b]					-16.7 (-66.6, 33.3)				
P-value [b]					0.456				
Effect Size (95% CI) [c]					-0.71 (-0.93, -0.49)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	85.7	84.5	-1.2	75.0	100.0	25.0
		SD	14.20	12.20	20.65	NE	NE	NE
		95% CI	72.6, 98.8	73.2, 95.8	-20.3, 17.9	NE, NE	NE, NE	NE, NE
		Median	91.7	83.3	8.3	75.0	100.0	25.0
		Q1, Q3	66.7, 100.0	75.0, 100.0	-16.7, 16.7	75.0, 75.0	100.0, 100.0	25.0, 25.0
		Min, Max	66.7, 100.0	66.7, 100.0	-33.3, 16.7	75.0, 75.0	100.0, 100.0	25.0, 25.0
		Mean Diff (95% CI) [a]			-1.2 (-20.3, 17.9)			25.0 (NE, NE)
		P-value [a]			0.884			NE
		Mean Diff (95% CI) [b]			-26.2 (-80.2, 27.8)			
		P-value [b]			0.280			
		Effect Size (95% CI) [c]			-1.11 (-1.34, -0.88)			
	C29D1	N	4	4	4	1	1	1
		Mean	85.4	75.0	-10.4	75.0	66.7	-8.3
		SD	14.23	18.00	26.68	NE	NE	NE
		95% CI	62.8, 108.1	46.4, 103.6	-52.9, 32.0	NE, NE	NE, NE	NE, NE
		Median	87.5	70.8	-12.5	75.0	66.7	-8.3
		Q1, Q3	75.0, 95.8	62.5, 87.5	-33.3, 12.5	75.0, 75.0	66.7, 66.7	-8.3, -8.3
		Min, Max	66.7, 100.0	58.3, 100.0	-33.3, 16.7	75.0, 75.0	66.7, 66.7	-8.3, -8.3
		Mean Diff (95% CI) [a]			-10.4 (-52.9, 32.0)			-8.3 (NE, NE)
		P-value [a]			0.492			NE
		Mean Diff (95% CI) [b]			-2.1 (-97.0, 92.8)			
		P-value [b]			0.949			
		Effect Size (95% CI) [c]			-0.09 (-0.30, 0.12)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C30D1	N		4	4	4	1	1	1
	Mean		83.3	85.4	2.1	75.0	33.3	-41.7
	SD		11.79	17.18	18.48	NE	NE	NE
	95% CI		64.6, 102.1	58.1, 112.8	-27.3, 31.5	NE, NE	NE, NE	NE, NE
	Median		87.5	87.5	8.3	75.0	33.3	-41.7
	Q1, Q3		75.0, 91.7	70.8, 100.0	-8.3, 12.5	75.0, 75.0	33.3, 33.3	-41.7, -41.7
	Min, Max		66.7, 91.7	66.7, 100.0	-25.0, 16.7	75.0, 75.0	33.3, 33.3	-41.7, -41.7
	Mean Diff (95% CI) [a]				2.1 (-27.3, 31.5)			-41.7 (NE, NE)
	P-value [a]				0.836			NE
	Mean Diff (95% CI) [b]				43.8 (-22.0, 109.5)			
	P-value [b]				0.124			
	Effect Size (95% CI) [c]				1.85 (1.60, 2.11)			
	C31D1	N		2	2	2	1	1
Mean			75.0	87.5	12.5	75.0	66.7	-8.3
SD			11.79	17.68	5.89	NE	NE	NE
95% CI			-30.9, 180.9	-71.3, 246.3	-40.4, 65.4	NE, NE	NE, NE	NE, NE
Median			75.0	87.5	12.5	75.0	66.7	-8.3
Q1, Q3			66.7, 83.3	75.0, 100.0	8.3, 16.7	75.0, 75.0	66.7, 66.7	-8.3, -8.3
Min, Max			66.7, 83.3	75.0, 100.0	8.3, 16.7	75.0, 75.0	66.7, 66.7	-8.3, -8.3
Mean Diff (95% CI) [a]					12.5 (-40.4, 65.4)			-8.3 (NE, NE)
P-value [a]					0.205			NE
Mean Diff (95% CI) [b]					20.8 (-70.9, 112.5)			
P-value [b]					0.212			
Effect Size (95% CI) [c]					0.88 (0.66, 1.11)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	75.0	87.5	12.5	75.0	75.0	0.0
		SD	11.79	17.68	5.89	NE	NE	NE
		95% CI	-30.9, 180.9	-71.3, 246.3	-40.4, 65.4	NE, NE	NE, NE	NE, NE
		Median	75.0	87.5	12.5	75.0	75.0	0.0
		Q1, Q3	66.7, 83.3	75.0, 100.0	8.3, 16.7	75.0, 75.0	75.0, 75.0	0.0, 0.0
		Min, Max	66.7, 83.3	75.0, 100.0	8.3, 16.7	75.0, 75.0	75.0, 75.0	0.0, 0.0
		Mean Diff (95% CI) [a]			12.5 (-40.4, 65.4)			0.0 (NE, NE)
		P-value [a]			0.205			NE
		Mean Diff (95% CI) [b]			12.5 (-79.2, 104.2)			
		P-value [b]			0.333			
		Effect Size (95% CI) [c]			0.53 (0.31, 0.75)			
	C33D1	N	3	3	3	1	1	1
		Mean	80.6	91.7	11.1	75.0	75.0	0.0
		SD	12.73	14.43	4.81	NE	NE	NE
		95% CI	48.9, 112.2	55.8, 127.5	-0.8, 23.1	NE, NE	NE, NE	NE, NE
		Median	83.3	100.0	8.3	75.0	75.0	0.0
		Q1, Q3	66.7, 91.7	75.0, 100.0	8.3, 16.7	75.0, 75.0	75.0, 75.0	0.0, 0.0
		Min, Max	66.7, 91.7	75.0, 100.0	8.3, 16.7	75.0, 75.0	75.0, 75.0	0.0, 0.0
		Mean Diff (95% CI) [a]			11.1 (-0.8, 23.1)			0.0 (NE, NE)
		P-value [a]			0.057			NE
		Mean Diff (95% CI) [b]			11.1 (-12.8, 35.0)			
		P-value [b]			0.184			
		Effect Size (95% CI) [c]			0.47 (0.26, 0.69)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C34D1	N		3	3	3	0	0	0
	Mean		80.6	88.9	8.3	NE	NE	NE
	SD		12.73	19.25	8.33	NE	NE	NE
	95% CI		48.9, 112.2	41.1, 136.7	-12.4, 29.0	NE, NE	NE, NE	NE, NE
	Median		83.3	100.0	8.3	NE	NE	NE
	Q1, Q3		66.7, 91.7	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
	Min, Max		66.7, 91.7	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
	Mean Diff (95% CI) [a]				8.3 (-12.4, 29.0)			NE (NE, NE)
	P-value [a]				0.225			NE
	Mean Diff (95% CI) [b]				NE (NE, NE)			
	P-value [b]				NE			
	Effect Size (95% CI) [c]				NE (NE, NE)			
	C35D1	N		2	2	2	0	0
Mean			75.0	83.3	8.3	NE	NE	NE
SD			11.79	23.57	11.79	NE	NE	NE
95% CI			-30.9, 180.9	-128.4, 295.1	-97.6, 114.2	NE, NE	NE, NE	NE, NE
Median			75.0	83.3	8.3	NE	NE	NE
Q1, Q3			66.7, 83.3	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
Min, Max			66.7, 83.3	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
Mean Diff (95% CI) [a]					8.3 (-97.6, 114.2)			NE (NE, NE)
P-value [a]					0.500			NE
Mean Diff (95% CI) [b]					NE (NE, NE)			
P-value [b]					NE			
Effect Size (95% CI) [c]					NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C36D1	N		3	3	3	0	0	0	
	Mean		80.6	88.9	8.3	NE	NE	NE	
	SD		12.73	19.25	8.33	NE	NE	NE	
	95% CI		48.9, 112.2	41.1, 136.7	-12.4, 29.0	NE, NE	NE, NE	NE, NE	
	Median		83.3	100.0	8.3	NE	NE	NE	
	Q1, Q3		66.7, 91.7	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE	
	Min, Max		66.7, 91.7	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				8.3 (-12.4, 29.0)			NE (NE, NE)	
	P-value [a]				0.225			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C37D1	N		3	3	3	0	0	0
		Mean		80.6	88.9	8.3	NE	NE	NE
		SD		12.73	19.25	8.33	NE	NE	NE
95% CI			48.9, 112.2	41.1, 136.7	-12.4, 29.0	NE, NE	NE, NE	NE, NE	
Median			83.3	100.0	8.3	NE	NE	NE	
Q1, Q3			66.7, 91.7	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE	
Min, Max			66.7, 91.7	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					8.3 (-12.4, 29.0)			NE (NE, NE)	
P-value [a]					0.225			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	87.5	100.0	12.5	NE	NE	NE
		SD	5.89	0.00	5.89	NE	NE	NE
		Median	87.5	100.0	12.5	NE	NE	NE
		95% CI	34.6, 140.4	100.0, 100.0	-40.4, 65.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 91.7	100.0, 100.0	8.3, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 91.7	100.0, 100.0	8.3, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			12.5 (-40.4, 65.4)			NE (NE, NE)
		P-value [a]			0.205			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	87.5	100.0	12.5	NE	NE	NE
		SD	5.89	0.00	5.89	NE	NE	NE
		95% CI	34.6, 140.4	100.0, 100.0	-40.4, 65.4	NE, NE	NE, NE	NE, NE
		Median	87.5	100.0	12.5	NE	NE	NE
		Q1, Q3	83.3, 91.7	100.0, 100.0	8.3, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 91.7	100.0, 100.0	8.3, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			12.5 (-40.4, 65.4)			NE (NE, NE)
		P-value [a]			0.205			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	87.5	100.0	12.5	NE	NE	NE
		SD	5.89	0.00	5.89	NE	NE	NE
		95% CI	34.6, 140.4	100.0, 100.0	-40.4, 65.4	NE, NE	NE, NE	NE, NE
		Median	87.5	100.0	12.5	NE	NE	NE
		Q1, Q3	83.3, 91.7	100.0, 100.0	8.3, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 91.7	100.0, 100.0	8.3, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			12.5 (-40.4, 65.4)			NE (NE, NE)
		P-value [a]			0.205			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	87.5	100.0	12.5	NE	NE	NE
		SD	5.89	0.00	5.89	NE	NE	NE
		95% CI	34.6, 140.4	100.0, 100.0	-40.4, 65.4	NE, NE	NE, NE	NE, NE
		Median	87.5	100.0	12.5	NE	NE	NE
		Q1, Q3	83.3, 91.7	100.0, 100.0	8.3, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 91.7	100.0, 100.0	8.3, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			12.5 (-40.4, 65.4)			NE (NE, NE)
		P-value [a]			0.205			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	83.3	100.0	16.7	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	83.3	100.0	16.7	NE	NE	NE
		Q1, Q3	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	83.3	100.0	16.7	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	83.3	100.0	16.7	NE	NE	NE
		Q1, Q3	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		130	130	130	125	125	125	
	Mean		70.0	72.4	2.4	74.5	73.1	-1.3	
	SD		26.63	25.59	24.23	21.50	21.11	20.29	
	95% CI		65.4, 74.6	68.0, 76.8	-1.8, 6.6	70.7, 78.3	69.4, 76.9	-4.9, 2.3	
	Median		75.0	75.0	0.0	83.3	75.0	0.0	
	Q1, Q3		58.3, 91.7	58.3, 91.7	-8.3, 8.3	66.7, 91.7	58.3, 91.7	-16.7, 8.3	
	Min, Max		0.0, 100.0	0.0, 100.0	-50.0, 91.7	8.3, 100.0	0.0, 100.0	-58.3, 75.0	
	Mean Diff (95% CI) [a]				2.4 (-1.8, 6.6)			-1.3 (-4.9, 2.3)	
	P-value [a]				0.262			0.464	
	Mean Diff (95% CI) [b]				3.7 (-1.8, 9.2)				
	P-value [b]				0.185				
	Effect Size (95% CI) [c]				0.16 (-0.05, 0.37)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			85.7	78.0	-7.7	75.9	60.2	-15.7
SD			15.48	18.08	18.04	15.28	36.51	34.97	
95% CI			76.8, 94.7	67.5, 88.4	-18.2, 2.7	64.2, 87.7	32.1, 88.2	-42.6, 11.1	
Median			91.7	75.0	-4.2	66.7	66.7	0.0	
Q1, Q3			66.7, 100.0	66.7, 100.0	-25.0, 0.0	66.7, 83.3	41.7, 83.3	-33.3, 0.0	
Min, Max			66.7, 100.0	41.7, 100.0	-33.3, 33.3	58.3, 100.0	0.0, 100.0	-83.3, 33.3	
Mean Diff (95% CI) [a]					-7.7 (-18.2, 2.7)			-15.7 (-42.6, 11.1)	
P-value [a]					0.133			0.214	
Mean Diff (95% CI) [b]					8.0 (-15.0, 31.0)				
P-value [b]					0.476				
Effect Size (95% CI) [c]					0.34 (0.13, 0.55)				
Cognitive Functioning	Baseline	N	174			165			
	Mean		85.5			83.9			
	SD		19.79			20.81			
	95% CI		82.6, 88.5			80.7, 87.1			
	Median		100.0			83.3			
	Q1, Q3		83.3, 100.0			66.7, 100.0			
	Min, Max		16.7, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C2D1	N		152	152	152	144	144	144	
	Mean		85.2	84.3	-0.9	83.7	83.1	-0.6	
	SD		20.26	21.81	13.80	21.09	20.39	18.22	
	Median		100.0	100.0	0.0	83.3	83.3	0.0	
	95% CI		82.0, 88.4	80.8, 87.8	-3.1, 1.3	80.2, 87.2	79.7, 86.5	-3.6, 2.4	
	Q1, Q3		83.3, 100.0	83.3, 100.0	0.0, 0.0	66.7, 100.0	66.7, 100.0	0.0, 0.0	
	Min, Max		16.7, 100.0	0.0, 100.0	-50.0, 50.0	0.0, 100.0	16.7, 100.0	-83.3, 66.7	
	Mean Diff (95% CI) [a]				-0.9 (-3.1, 1.3)			-0.6 (-3.6, 2.4)	
	P-value [a]				0.435			0.704	
	Mean Diff (95% CI) [b]				-0.3 (-4.0, 3.4)				
	P-value [b]				0.873				
	Effect Size (95% CI) [c]				-0.01 (-0.23, 0.20)				
	C3D1	N		123	123	123	101	101	101
		Mean		86.0	87.5	1.5	84.0	83.8	-0.2
SD			17.90	18.06	13.33	20.94	20.88	16.24	
Median			83.3	100.0	0.0	83.3	83.3	0.0	
95% CI			82.8, 89.2	84.3, 90.8	-0.9, 3.9	79.9, 88.1	79.7, 87.9	-3.4, 3.0	
Q1, Q3			83.3, 100.0	83.3, 100.0	0.0, 0.0	83.3, 100.0	66.7, 100.0	0.0, 0.0	
Min, Max			16.7, 100.0	0.0, 100.0	-33.3, 50.0	0.0, 100.0	0.0, 100.0	-33.3, 83.3	
Mean Diff (95% CI) [a]					1.5 (-0.9, 3.9)			-0.2 (-3.4, 3.0)	
P-value [a]					0.217			0.919	
Mean Diff (95% CI) [b]					1.7 (-2.2, 5.5)				
P-value [b]					0.403				
Effect Size (95% CI) [c]					0.08 (-0.13, 0.29)				

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		85.4	85.6	0.1	84.2	84.6	0.4
	SD		18.47	21.98	15.74	21.50	20.48	17.45
	Median		83.3	100.0	0.0	91.7	83.3	0.0
	95% CI		82.0, 88.9	81.5, 89.7	-2.8, 3.1	79.8, 88.6	80.4, 88.8	-3.2, 3.9
	Q1, Q3		83.3, 100.0	83.3, 100.0	0.0, 0.0	83.3, 100.0	83.3, 100.0	0.0, 0.0
	Min, Max		16.7, 100.0	0.0, 100.0	-66.7, 66.7	0.0, 100.0	16.7, 100.0	-33.3, 83.3
	Mean Diff (95% CI) [a]				0.1 (-2.8, 3.1)			0.4 (-3.2, 3.9)
	P-value [a]				0.920			0.844
	Mean Diff (95% CI) [b]				-0.2 (-4.8, 4.4)			
	P-value [b]				0.929			
	Effect Size (95% CI) [c]				-0.01 (-0.22, 0.20)			
	C5D1	N		98	98	98	80	80
Mean			87.1	86.1	-1.0	83.5	84.0	0.4
SD			16.50	20.26	15.29	21.95	21.12	16.56
Median			83.3	100.0	0.0	83.3	83.3	0.0
95% CI			83.8, 90.4	82.0, 90.1	-4.1, 2.0	78.7, 88.4	79.3, 88.7	-3.3, 4.1
Q1, Q3			83.3, 100.0	83.3, 100.0	0.0, 0.0	75.0, 100.0	83.3, 100.0	0.0, 0.0
Min, Max			16.7, 100.0	0.0, 100.0	-66.7, 33.3	0.0, 100.0	16.7, 100.0	-50.0, 83.3
Mean Diff (95% CI) [a]					-1.0 (-4.1, 2.0)			0.4 (-3.3, 4.1)
P-value [a]					0.510			0.822
Mean Diff (95% CI) [b]					-1.4 (-6.2, 3.3)			
P-value [b]					0.549			
Effect Size (95% CI) [c]					-0.07 (-0.28, 0.14)			

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C6D1	N		96	96	96	68	68	68
	Mean		85.9	88.7	2.8	83.3	82.8	-0.5
	SD		17.49	15.58	14.03	21.16	21.15	12.54
	Median		83.3	100.0	0.0	91.7	83.3	0.0
	95% CI		82.4, 89.5	85.6, 91.9	-0.1, 5.6	78.2, 88.5	77.7, 88.0	-3.5, 2.5
	Q1, Q3		83.3, 100.0	83.3, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	0.0, 0.0
	Min, Max		16.7, 100.0	33.3, 100.0	-33.3, 66.7	33.3, 100.0	33.3, 100.0	-50.0, 33.3
	Mean Diff (95% CI) [a]				2.8 (-0.1, 5.6)			-0.5 (-3.5, 2.5)
	P-value [a]				0.055			0.748
	Mean Diff (95% CI) [b]				3.3 (-0.9, 7.5)			
	P-value [b]				0.127			
	Effect Size (95% CI) [c]				0.16 (-0.05, 0.37)			
	C7D1	N		79	79	79	52	52
Mean			85.7	86.3	0.6	83.7	84.0	0.3
SD			18.82	22.13	16.33	21.00	20.86	14.57
Median			83.3	100.0	0.0	83.3	100.0	0.0
95% CI			81.4, 89.9	81.3, 91.2	-3.0, 4.3	77.8, 89.5	78.2, 89.8	-3.7, 4.4
Q1, Q3			83.3, 100.0	83.3, 100.0	0.0, 16.7	75.0, 100.0	66.7, 100.0	0.0, 0.0
Min, Max			16.7, 100.0	16.7, 100.0	-50.0, 33.3	33.3, 100.0	33.3, 100.0	-50.0, 33.3
Mean Diff (95% CI) [a]					0.6 (-3.0, 4.3)			0.3 (-3.7, 4.4)
P-value [a]					0.731			0.875
Mean Diff (95% CI) [b]					0.3 (-5.2, 5.8)			
P-value [b]					0.911			
Effect Size (95% CI) [c]					0.02 (-0.20, 0.23)			

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		75	75	75	50	50	50
	Mean		85.6	86.0	0.4	81.7	85.0	3.3
	SD		19.25	20.33	16.43	20.82	21.63	15.06
	Median		83.3	100.0	0.0	83.3	100.0	0.0
	95% CI		81.1, 90.0	81.3, 90.7	-3.3, 4.2	75.7, 87.6	78.9, 91.1	-0.9, 7.6
	Q1, Q3		83.3, 100.0	83.3, 100.0	0.0, 0.0	66.7, 100.0	66.7, 100.0	0.0, 16.7
	Min, Max		16.7, 100.0	16.7, 100.0	-50.0, 66.7	33.3, 100.0	0.0, 100.0	-33.3, 33.3
	Mean Diff (95% CI) [a]				0.4 (-3.3, 4.2)			3.3 (-0.9, 7.6)
	P-value [a]				0.815			0.124
	Mean Diff (95% CI) [b]				-2.9 (-8.6, 2.9)			
	P-value [b]				0.322			
	Effect Size (95% CI) [c]				-0.14 (-0.35, 0.07)			
	C9D1	N		60	60	60	42	42
Mean			87.5	86.9	-0.6	82.5	84.1	1.6
SD			16.70	18.94	18.15	20.81	19.11	15.53
Median			91.7	100.0	0.0	83.3	83.3	0.0
95% CI			83.2, 91.8	82.1, 91.8	-5.2, 4.1	76.1, 89.0	78.2, 90.1	-3.3, 6.4
Q1, Q3			83.3, 100.0	75.0, 100.0	0.0, 0.0	66.7, 100.0	66.7, 100.0	0.0, 0.0
Min, Max			16.7, 100.0	33.3, 100.0	-50.0, 66.7	33.3, 100.0	33.3, 100.0	-50.0, 33.3
Mean Diff (95% CI) [a]					-0.6 (-5.2, 4.1)			1.6 (-3.3, 6.4)
P-value [a]					0.813			0.512
Mean Diff (95% CI) [b]					-2.1 (-9.0, 4.7)			
P-value [b]					0.535			
Effect Size (95% CI) [c]					-0.11 (-0.32, 0.11)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)				
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline		
C10D1	N	N	54	54	54	30	30	30		
		Mean	86.4	85.5	-0.9	81.1	83.3	2.2		
		SD	18.34	22.21	21.09	22.63	22.74	14.99		
		Median	91.7	100.0	0.0	83.3	100.0	0.0		
		95% CI	81.4, 91.4	79.4, 91.6	-6.7, 4.8	72.7, 89.6	74.8, 91.8	-3.4, 7.8		
		Q1, Q3	83.3, 100.0	83.3, 100.0	0.0, 0.0	66.7, 100.0	66.7, 100.0	0.0, 16.7		
		Min, Max	16.7, 100.0	0.0, 100.0	-83.3, 50.0	33.3, 100.0	33.3, 100.0	-50.0, 33.3		
		Mean Diff (95% CI) [a]			-0.9 (-6.7, 4.8)			2.2 (-3.4, 7.8)		
		P-value [a]			0.748			0.423		
		Mean Diff (95% CI) [b]			-3.1 (-11.8, 5.5)					
		P-value [b]			0.472					
		Effect Size (95% CI) [c]			-0.15 (-0.37, 0.06)					
		C11D1	N	N	46	46	46	23	23	23
				Mean	85.1	85.5	0.4	83.3	86.2	2.9
SD	19.00			21.26	19.72	19.46	17.87	13.90		
Median	83.3			100.0	0.0	83.3	100.0	0.0		
95% CI	79.5, 90.8			79.2, 91.8	-5.5, 6.2	74.9, 91.7	78.5, 94.0	-3.1, 8.9		
Q1, Q3	83.3, 100.0			66.7, 100.0	0.0, 0.0	83.3, 100.0	66.7, 100.0	0.0, 16.7		
Min, Max	16.7, 100.0			0.0, 100.0	-83.3, 50.0	33.3, 100.0	33.3, 100.0	-33.3, 33.3		
Mean Diff (95% CI) [a]					0.4 (-5.5, 6.2)			2.9 (-3.1, 8.9)		
P-value [a]					0.901			0.328		
Mean Diff (95% CI) [b]					-2.5 (-11.7, 6.6)					
P-value [b]					0.583					
Effect Size (95% CI) [c]					-0.12 (-0.34, 0.09)					

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		41	41	41	19	19	19	
	Mean		88.2	85.8	-2.4	83.3	86.8	3.5	
	SD		14.55	21.59	15.17	17.57	22.62	16.27	
	Median		83.3	100.0	0.0	83.3	100.0	0.0	
	95% CI		83.6, 92.8	79.0, 92.6	-7.2, 2.3	74.9, 91.8	75.9, 97.7	-4.3, 11.4	
	Q1, Q3		83.3, 100.0	83.3, 100.0	0.0, 0.0	66.7, 100.0	83.3, 100.0	0.0, 16.7	
	Min, Max		33.3, 100.0	16.7, 100.0	-50.0, 16.7	33.3, 100.0	16.7, 100.0	-33.3, 33.3	
	Mean Diff (95% CI) [a]				-2.4 (-7.2, 2.3)			3.5 (-4.3, 11.4)	
	P-value [a]				0.309			0.360	
	Mean Diff (95% CI) [b]				-5.9 (-14.6, 2.7)				
	P-value [b]				0.173				
	Effect Size (95% CI) [c]				-0.29 (-0.51, -0.08)				
	C13D1	N		33	33	33	15	15	15
		Mean		89.4	88.9	-0.5	81.1	84.4	3.3
SD			14.92	18.00	11.40	17.67	21.33	15.69	
Median			100.0	100.0	0.0	83.3	100.0	0.0	
95% CI			84.1, 94.7	82.5, 95.3	-4.5, 3.5	71.3, 90.9	72.6, 96.3	-5.4, 12.0	
Q1, Q3			83.3, 100.0	83.3, 100.0	0.0, 0.0	66.7, 100.0	66.7, 100.0	0.0, 16.7	
Min, Max			33.3, 100.0	33.3, 100.0	-33.3, 16.7	33.3, 100.0	33.3, 100.0	-33.3, 33.3	
Mean Diff (95% CI) [a]					-0.5 (-4.5, 3.5)			3.3 (-5.4, 12.0)	
P-value [a]					0.801			0.424	
Mean Diff (95% CI) [b]					-3.8 (-11.9, 4.2)				
P-value [b]					0.343				
Effect Size (95% CI) [c]					-0.19 (-0.40, 0.02)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C14D1	N		33	33	33	12	12	12
	Mean		88.4	90.4	2.0	80.6	83.3	2.8
	SD		15.30	16.68	9.09	18.58	26.59	18.58
	Median		100.0	100.0	0.0	83.3	100.0	0.0
	95% CI		83.0, 93.8	84.5, 96.3	-1.2, 5.2	68.8, 92.4	66.4, 100.2	-9.0, 14.6
	Q1, Q3		83.3, 100.0	83.3, 100.0	0.0, 0.0	75.0, 91.7	66.7, 100.0	0.0, 16.7
	Min, Max		33.3, 100.0	33.3, 100.0	-16.7, 16.7	33.3, 100.0	33.3, 100.0	-50.0, 16.7
	Mean Diff (95% CI) [a]				2.0 (-1.2, 5.2)			2.8 (-9.0, 14.6)
	P-value [a]				0.211			0.615
	Mean Diff (95% CI) [b]				-0.8 (-9.1, 7.6)			
	P-value [b]				0.855			
	Effect Size (95% CI) [c]				-0.04 (-0.25, 0.18)			
	C15D1	N		28	28	28	13	13
Mean			88.1	85.7	-2.4	79.5	80.8	1.3
SD			16.27	20.14	17.40	18.20	23.42	14.37
Median			100.0	100.0	0.0	83.3	83.3	0.0
95% CI			81.8, 94.4	77.9, 93.5	-9.1, 4.4	68.5, 90.5	66.6, 94.9	-7.4, 10.0
Q1, Q3			83.3, 100.0	75.0, 100.0	0.0, 0.0	66.7, 83.3	66.7, 100.0	0.0, 16.7
Min, Max			33.3, 100.0	16.7, 100.0	-50.0, 33.3	33.3, 100.0	33.3, 100.0	-33.3, 16.7
Mean Diff (95% CI) [a]					-2.4 (-9.1, 4.4)			1.3 (-7.4, 10.0)
P-value [a]					0.475			0.753
Mean Diff (95% CI) [b]					-3.7 (-14.9, 7.6)			
P-value [b]					0.513			
Effect Size (95% CI) [c]					-0.18 (-0.39, 0.03)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C16D1	N	28	28	28	10	10	10
		Mean	88.7	91.1	2.4	76.7	75.0	-1.7
		SD	15.75	17.26	10.84	19.56	25.15	16.57
		Median	100.0	100.0	0.0	83.3	75.0	0.0
		95% CI	82.6, 94.8	84.4, 97.8	-1.8, 6.6	62.7, 90.7	57.0, 93.0	-13.5, 10.2
		Q1, Q3	83.3, 100.0	83.3, 100.0	0.0, 8.3	66.7, 83.3	50.0, 100.0	-16.7, 16.7
		Min, Max	33.3, 100.0	33.3, 100.0	-33.3, 16.7	33.3, 100.0	33.3, 100.0	-33.3, 16.7
		Mean Diff (95% CI) [a]			2.4 (-1.8, 6.6)			-1.7 (-13.5, 10.2)
		P-value [a]			0.255			0.758
		Mean Diff (95% CI) [b]			4.0 (-5.3, 13.4)			
		P-value [b]			0.386			
		Effect Size (95% CI) [c]			0.20 (-0.01, 0.41)			
	C17D1	N	26	26	26	7	7	7
		Mean	88.5	90.4	1.9	71.4	69.0	-2.4
		SD	16.17	14.28	8.60	18.54	26.23	17.82
		Median	100.0	100.0	0.0	83.3	66.7	0.0
		95% CI	81.9, 95.0	84.6, 96.2	-1.5, 5.4	54.3, 88.6	44.8, 93.3	-18.9, 14.1
		Q1, Q3	83.3, 100.0	83.3, 100.0	0.0, 0.0	66.7, 83.3	50.0, 100.0	-16.7, 16.7
		Min, Max	33.3, 100.0	50.0, 100.0	-16.7, 16.7	33.3, 83.3	33.3, 100.0	-33.3, 16.7
		Mean Diff (95% CI) [a]			1.9 (-1.5, 5.4)			-2.4 (-18.9, 14.1)
		P-value [a]			0.265			0.736
		Mean Diff (95% CI) [b]			4.3 (-5.3, 13.9)			
		P-value [b]			0.365			
		Effect Size (95% CI) [c]			0.21 (0.00, 0.42)			

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C18D1	N	22	22	22	7	7	7
		Mean	88.6	88.6	0.0	73.8	66.7	-7.1
		SD	16.58	13.98	12.60	21.21	31.91	21.21
		Median	100.0	100.0	0.0	83.3	66.7	0.0
		95% CI	81.3, 96.0	82.4, 94.8	-5.6, 5.6	54.2, 93.4	37.2, 96.2	-26.8, 12.5
		Q1, Q3	83.3, 100.0	83.3, 100.0	0.0, 0.0	66.7, 83.3	33.3, 100.0	-16.7, 0.0
		Min, Max	33.3, 100.0	66.7, 100.0	-33.3, 33.3	33.3, 100.0	16.7, 100.0	-50.0, 16.7
		Mean Diff (95% CI) [a]			0.0 (-5.6, 5.6)			-7.1 (-26.8, 12.5)
		P-value [a]			1.000			0.407
		Mean Diff (95% CI) [b]			7.1 (-6.2, 20.5)			
		P-value [b]			0.281			
		Effect Size (95% CI) [c]			0.35 (0.14, 0.57)			
	C19D1	N	20	20	20	6	6	6
		Mean	88.3	89.2	0.8	75.0	66.7	-8.3
		SD	17.18	13.55	12.65	22.97	27.89	20.41
		Median	100.0	100.0	0.0	83.3	58.3	0.0
		95% CI	80.3, 96.4	82.8, 95.5	-5.1, 6.8	50.9, 99.1	37.4, 95.9	-29.8, 13.1
		Q1, Q3	83.3, 100.0	83.3, 100.0	0.0, 0.0	66.7, 83.3	50.0, 100.0	-33.3, 0.0
		Min, Max	33.3, 100.0	66.7, 100.0	-33.3, 33.3	33.3, 100.0	33.3, 100.0	-33.3, 16.7
		Mean Diff (95% CI) [a]			0.8 (-5.1, 6.8)			-8.3 (-29.8, 13.1)
		P-value [a]			0.772			0.363
		Mean Diff (95% CI) [b]			9.2 (-4.9, 23.2)			
		P-value [b]			0.190			
		Effect Size (95% CI) [c]			0.45 (0.24, 0.67)			

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		19	19	19	4	4	4
	Mean		89.5	90.4	0.9	70.8	66.7	-4.2
	SD		17.75	16.02	6.74	25.00	30.43	20.97
	Median		100.0	100.0	0.0	83.3	66.7	0.0
	95% CI		80.9, 98.0	82.6, 98.1	-2.4, 4.1	31.1, 110.6	18.2, 115.1	-37.5, 29.2
	Q1, Q3		83.3, 100.0	83.3, 100.0	0.0, 0.0	58.3, 83.3	41.7, 91.7	-16.7, 8.3
	Min, Max		33.3, 100.0	50.0, 100.0	-16.7, 16.7	33.3, 83.3	33.3, 100.0	-33.3, 16.7
	Mean Diff (95% CI) [a]				0.9 (-2.4, 4.1)			-4.2 (-37.5, 29.2)
	P-value [a]				0.578			0.718
	Mean Diff (95% CI) [b]				5.0 (-6.5, 16.6)			
	P-value [b]				0.374			
	Effect Size (95% CI) [c]				0.25 (0.03, 0.46)			
	C21D1	N		18	18	18	4	4
Mean			88.0	90.7	2.8	70.8	75.0	4.2
SD			17.90	13.06	13.10	25.00	31.91	15.96
Median			100.0	100.0	0.0	83.3	83.3	8.3
95% CI			79.1, 96.9	84.2, 97.2	-3.7, 9.3	31.1, 110.6	24.2, 125.8	-21.2, 29.6
Q1, Q3			83.3, 100.0	83.3, 100.0	0.0, 16.7	58.3, 83.3	50.0, 100.0	-8.3, 16.7
Min, Max			33.3, 100.0	66.7, 100.0	-16.7, 33.3	33.3, 83.3	33.3, 100.0	-16.7, 16.7
Mean Diff (95% CI) [a]					2.8 (-3.7, 9.3)			4.2 (-21.2, 29.6)
P-value [a]					0.381			0.638
Mean Diff (95% CI) [b]					-1.4 (-17.0, 14.3)			
P-value [b]					0.855			
Effect Size (95% CI) [c]					-0.07 (-0.28, 0.14)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		15	15	15	3	3	3	
	Mean		85.6	87.8	2.2	66.7	88.9	22.2	
	SD		18.76	20.38	12.39	28.87	19.25	9.62	
	Median		83.3	100.0	0.0	83.3	100.0	16.7	
	95% CI		75.2, 95.9	76.5, 99.1	-4.6, 9.1	-5.0, 138.4	41.1, 136.7	-1.7, 46.1	
	Q1, Q3		83.3, 100.0	66.7, 100.0	0.0, 0.0	33.3, 83.3	66.7, 100.0	16.7, 33.3	
	Min, Max		33.3, 100.0	33.3, 100.0	-16.7, 33.3	33.3, 83.3	66.7, 100.0	16.7, 33.3	
	Mean Diff (95% CI) [a]				2.2 (-4.6, 9.1)			22.2 (-1.7, 46.1)	
	P-value [a]				0.499			0.057	
	Mean Diff (95% CI) [b]				-20.0 (-36.2, -3.8)				
	P-value [b]				0.019				
	Effect Size (95% CI) [c]				-0.98 (-1.21, -0.76)				
	C23D1	N		11	11	11	3	3	3
		Mean		83.3	87.9	4.5	66.7	77.8	11.1
SD			21.08	16.82	10.78	28.87	25.46	9.62	
Median			83.3	100.0	0.0	83.3	83.3	16.7	
95% CI			69.2, 97.5	76.6, 99.2	-2.7, 11.8	-5.0, 138.4	14.5, 141.0	-12.8, 35.0	
Q1, Q3			66.7, 100.0	83.3, 100.0	0.0, 16.7	33.3, 83.3	50.0, 100.0	0.0, 16.7	
Min, Max			33.3, 100.0	50.0, 100.0	-16.7, 16.7	33.3, 83.3	50.0, 100.0	0.0, 16.7	
Mean Diff (95% CI) [a]					4.5 (-2.7, 11.8)			11.1 (-12.8, 35.0)	
P-value [a]					0.192			0.184	
Mean Diff (95% CI) [b]					-6.6 (-21.6, 8.5)				
P-value [b]					0.360				
Effect Size (95% CI) [c]					-0.32 (-0.54, -0.11)				

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C24D1	N	10	10	10	2	2	2
		Mean	85.0	90.0	5.0	58.3	66.7	8.3
		SD	21.44	21.08	8.05	35.36	47.14	11.79
		Median	91.7	100.0	0.0	58.3	66.7	8.3
		95% CI	69.7, 100.3	74.9, 105.1	-0.8, 10.8	-259.3, 376.0	-356.9, 490.2	-97.6, 114.2
		Q1, Q3	83.3, 100.0	83.3, 100.0	0.0, 16.7	33.3, 83.3	33.3, 100.0	0.0, 16.7
		Min, Max	33.3, 100.0	33.3, 100.0	0.0, 16.7	33.3, 83.3	33.3, 100.0	0.0, 16.7
		Mean Diff (95% CI) [a]			5.0 (-0.8, 10.8)			8.3 (-97.6, 114.2)
		P-value [a]			0.081			0.500
		Mean Diff (95% CI) [b]			-3.3 (-18.0, 11.3)			
		P-value [b]			0.624			
		Effect Size (95% CI) [c]			-0.16 (-0.38, 0.05)			
	C25D1	N	9	9	9	0	0	0
		Mean	83.3	87.0	3.7	NE	NE	NE
		SD	22.05	21.70	11.11	NE	NE	NE
		Median	83.3	100.0	0.0	NE	NE	NE
		95% CI	66.4, 100.3	70.4, 103.7	-4.8, 12.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	83.3, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 100.0	33.3, 100.0	-16.7, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			3.7 (-4.8, 12.2)			NE (NE, NE)
		P-value [a]			0.347			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	89.6	87.5	-2.1	83.3	100.0	16.7
		SD	12.40	14.77	16.52	NE	NE	NE
		Median	91.7	91.7	0.0	83.3	100.0	16.7
		95% CI	79.2, 100.0	75.1, 99.9	-15.9, 11.7	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	75.0, 100.0	-8.3, 8.3	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Min, Max	66.7, 100.0	66.7, 100.0	-33.3, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Mean Diff (95% CI) [a]			-2.1 (-15.9, 11.7)			16.7 (NE, NE)
		P-value [a]			0.732			NE
		Mean Diff (95% CI) [b]			-18.8 (-60.2, 22.7)			
		P-value [b]			0.320			
		Effect Size (95% CI) [c]			-0.92 (-1.15, -0.70)			
	C27D1	N	8	8	8	1	1	1
		Mean	89.6	91.7	2.1	83.3	100.0	16.7
		SD	12.40	12.60	10.68	NE	NE	NE
		Median	91.7	100.0	0.0	83.3	100.0	16.7
		95% CI	79.2, 100.0	81.1, 102.2	-6.8, 11.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	83.3, 100.0	0.0, 8.3	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Min, Max	66.7, 100.0	66.7, 100.0	-16.7, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Mean Diff (95% CI) [a]			2.1 (-6.8, 11.0)			16.7 (NE, NE)
		P-value [a]			0.598			NE
		Mean Diff (95% CI) [b]			-14.6 (-41.4, 12.2)			
		P-value [b]			0.239			
		Effect Size (95% CI) [c]			-0.72 (-0.94, -0.50)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	90.5	92.9	2.4	83.3	100.0	16.7
		SD	13.11	8.91	11.50	NE	NE	NE
		Median	100.0	100.0	0.0	83.3	100.0	16.7
		95% CI	78.3, 102.6	84.6, 101.1	-8.3, 13.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	83.3, 100.0	0.0, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Min, Max	66.7, 100.0	83.3, 100.0	-16.7, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Mean Diff (95% CI) [a]			2.4 (-8.3, 13.0)			16.7 (NE, NE)
		P-value [a]			0.604			NE
		Mean Diff (95% CI) [b]			-14.3 (-44.4, 15.8)			
		P-value [b]			0.289			
		Effect Size (95% CI) [c]			-0.70 (-0.92, -0.48)			
	C29D1	N	4	4	4	1	1	1
		Mean	83.3	79.2	-4.2	83.3	66.7	-16.7
		SD	13.61	8.33	8.33	NE	NE	NE
		Median	83.3	83.3	0.0	83.3	66.7	-16.7
		95% CI	61.7, 105.0	65.9, 92.4	-17.4, 9.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	75.0, 91.7	75.0, 83.3	-8.3, 0.0	83.3, 83.3	66.7, 66.7	-16.7, -16.7
		Min, Max	66.7, 100.0	66.7, 83.3	-16.7, 0.0	83.3, 83.3	66.7, 66.7	-16.7, -16.7
		Mean Diff (95% CI) [a]			-4.2 (-17.4, 9.1)			-16.7 (NE, NE)
		P-value [a]			0.391			NE
		Mean Diff (95% CI) [b]			12.5 (-17.2, 42.2)			
		P-value [b]			0.272			
		Effect Size (95% CI) [c]			0.61 (0.40, 0.83)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C30D1	N		4	4	4	1	1	1	
	Mean		87.5	83.3	-4.2	83.3	100.0	16.7	
	SD		15.96	19.25	20.97	NE	NE	NE	
	Median		91.7	83.3	0.0	83.3	100.0	16.7	
	95% CI		62.1, 112.9	52.7, 114.0	-37.5, 29.2	NE, NE	NE, NE	NE, NE	
	Q1, Q3		75.0, 100.0	66.7, 100.0	-16.7, 8.3	83.3, 83.3	100.0, 100.0	16.7, 16.7	
	Min, Max		66.7, 100.0	66.7, 100.0	-33.3, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7	
	Mean Diff (95% CI) [a]				-4.2 (-37.5, 29.2)			16.7 (NE, NE)	
	P-value [a]				0.718			NE	
	Mean Diff (95% CI) [b]				-20.8 (-95.5, 53.8)				
	P-value [b]				0.440				
	Effect Size (95% CI) [c]				-1.02 (-1.25, -0.80)				
	C31D1	N		2	2	2	1	1	1
		Mean		75.0	83.3	8.3	83.3	100.0	16.7
SD			11.79	23.57	11.79	NE	NE	NE	
Median			75.0	83.3	8.3	83.3	100.0	16.7	
95% CI			-30.9, 180.9	-128.4, 295.1	-97.6, 114.2	NE, NE	NE, NE	NE, NE	
Q1, Q3			66.7, 83.3	66.7, 100.0	0.0, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7	
Min, Max			66.7, 83.3	66.7, 100.0	0.0, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7	
Mean Diff (95% CI) [a]					8.3 (-97.6, 114.2)			16.7 (NE, NE)	
P-value [a]					0.500			NE	
Mean Diff (95% CI) [b]					-8.3 (-191.7, 175.1)				
P-value [b]					0.667				
Effect Size (95% CI) [c]					-0.41 (-0.62, -0.19)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	75.0	83.3	8.3	83.3	100.0	16.7
		SD	11.79	23.57	11.79	NE	NE	NE
		Median	75.0	83.3	8.3	83.3	100.0	16.7
		95% CI	-30.9, 180.9	-128.4, 295.1	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	66.7, 83.3	66.7, 100.0	0.0, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Min, Max	66.7, 83.3	66.7, 100.0	0.0, 16.7	83.3, 83.3	100.0, 100.0	16.7, 16.7
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			16.7 (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			-8.3 (-191.7, 175.1)			
		P-value [b]			0.667			
		Effect Size (95% CI) [c]			-0.41 (-0.62, -0.19)			
	C33D1	N	3	3	3	1	1	1
		Mean	83.3	88.9	5.6	83.3	83.3	0.0
		SD	16.67	19.25	9.62	NE	NE	NE
		Median	83.3	100.0	0.0	83.3	83.3	0.0
		95% CI	41.9, 124.7	41.1, 136.7	-18.3, 29.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	66.7, 100.0	66.7, 100.0	0.0, 16.7	83.3, 83.3	83.3, 83.3	0.0, 0.0
		Min, Max	66.7, 100.0	66.7, 100.0	0.0, 16.7	83.3, 83.3	83.3, 83.3	0.0, 0.0
		Mean Diff (95% CI) [a]			5.6 (-18.3, 29.5)			0.0 (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			5.6 (-42.3, 53.4)			
		P-value [b]			0.667			
		Effect Size (95% CI) [c]			0.27 (0.06, 0.49)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	83.3	88.9	5.6	NE	NE	NE
		SD	16.67	19.25	9.62	NE	NE	NE
		Median	83.3	100.0	0.0	NE	NE	NE
		95% CI	41.9, 124.7	41.1, 136.7	-18.3, 29.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	66.7, 100.0	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	66.7, 100.0	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			5.6 (-18.3, 29.5)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	75.0	83.3	8.3	NE	NE	NE
		SD	11.79	23.57	11.79	NE	NE	NE
		Median	75.0	83.3	8.3	NE	NE	NE
		95% CI	-30.9, 180.9	-128.4, 295.1	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	66.7, 83.3	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	66.7, 83.3	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C36D1	N	3	3	3	0	0	0
		Mean	83.3	88.9	5.6	NE	NE	NE
		SD	16.67	19.25	9.62	NE	NE	NE
		Median	83.3	100.0	0.0	NE	NE	NE
		95% CI	41.9, 124.7	41.1, 136.7	-18.3, 29.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	66.7, 100.0	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	66.7, 100.0	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			5.6 (-18.3, 29.5)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C37D1	N	3	3	3	0	0	0
		Mean	83.3	88.9	5.6	NE	NE	NE
		SD	16.67	19.25	9.62	NE	NE	NE
		Median	83.3	100.0	0.0	NE	NE	NE
		95% CI	41.9, 124.7	41.1, 136.7	-18.3, 29.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	66.7, 100.0	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	66.7, 100.0	66.7, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			5.6 (-18.3, 29.5)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	91.7	100.0	8.3	NE	NE	NE
		SD	11.79	0.00	11.79	NE	NE	NE
		Median	91.7	100.0	8.3	NE	NE	NE
		95% CI	-14.2, 197.6	100.0, 100.0	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	91.7	100.0	8.3	NE	NE	NE
		SD	11.79	0.00	11.79	NE	NE	NE
		Median	91.7	100.0	8.3	NE	NE	NE
		95% CI	-14.2, 197.6	100.0, 100.0	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	91.7	100.0	8.3	NE	NE	NE
		SD	11.79	0.00	11.79	NE	NE	NE
		Median	91.7	100.0	8.3	NE	NE	NE
		95% CI	-14.2, 197.6	100.0, 100.0	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	91.7	100.0	8.3	NE	NE	NE
		SD	11.79	0.00	11.79	NE	NE	NE
		Median	91.7	100.0	8.3	NE	NE	NE
		95% CI	-14.2, 197.6	100.0, 100.0	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 100.0	100.0, 100.0	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	83.3	100.0	16.7	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	83.3	100.0	16.7	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	83.3	100.0	16.7	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	83.3	100.0	16.7	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 83.3	100.0, 100.0	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		130	130	130	125	125	125	
	Mean		84.1	80.4	-3.7	84.5	80.9	-3.6	
	SD		21.25	24.60	21.19	20.21	22.67	15.92	
	Median		83.3	83.3	0.0	100.0	83.3	0.0	
	95% CI		80.4, 87.8	76.1, 84.7	-7.4, 0.0	81.0, 88.1	76.9, 84.9	-6.4, -0.8	
	Q1, Q3		83.3, 100.0	66.7, 100.0	-16.7, 0.0	66.7, 100.0	66.7, 100.0	-16.7, 0.0	
	Min, Max		16.7, 100.0	0.0, 100.0	-66.7, 50.0	16.7, 100.0	0.0, 100.0	-66.7, 33.3	
	Mean Diff (95% CI) [a]				-3.7 (-7.4, 0.0)			-3.6 (-6.4, -0.8)	
	P-value [a]				0.048			0.013	
	Mean Diff (95% CI) [b]				-0.1 (-4.8, 4.5)				
	P-value [b]				0.960				
	Effect Size (95% CI) [c]				-0.01 (-0.22, 0.21)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			92.9	85.7	-7.1	85.2	66.7	-18.5
	SD			12.60	17.12	15.63	22.74	30.05	31.67
Median			100.0	91.7	0.0	100.0	66.7	-16.7	
95% CI			85.6, 100.1	75.8, 95.6	-16.2, 1.9	67.7, 102.7	43.6, 89.8	-42.9, 5.8	
Q1, Q3			83.3, 100.0	66.7, 100.0	-16.7, 0.0	83.3, 100.0	66.7, 83.3	-33.3, 0.0	
Min, Max			66.7, 100.0	50.0, 100.0	-50.0, 16.7	33.3, 100.0	0.0, 100.0	-83.3, 16.7	
Mean Diff (95% CI) [a]					-7.1 (-16.2, 1.9)			-18.5 (-42.9, 5.8)	
P-value [a]					0.111			0.117	
Mean Diff (95% CI) [b]					11.4 (-9.1, 31.9)				
P-value [b]					0.262				
Effect Size (95% CI) [c]					0.56 (0.34, 0.78)				
Social Functioning	Baseline	N	174			164			
	Mean		75.8			74.0			
	SD		24.93			26.45			
	Median		83.3			75.0			
	95% CI		72.0, 79.5			69.9, 78.1			
	Q1, Q3		66.7, 100.0			66.7, 100.0			
	Min, Max		0.0, 100.0			0.0, 100.0			

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C2D1	N		152	152	152	144	144	144
	Mean		76.4	73.8	-2.6	75.1	74.9	-0.2
	SD		25.12	27.64	25.16	26.66	27.59	25.47
	95% CI		72.4, 80.5	69.4, 78.2	-6.7, 1.4	70.7, 79.5	70.3, 79.4	-4.4, 4.0
	Median		83.3	83.3	0.0	83.3	83.3	0.0
	Q1, Q3		66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 16.7
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-83.3, 66.7
	Mean Diff (95% CI) [a]				-2.6 (-6.7, 1.4)			-0.2 (-4.4, 4.0)
	P-value [a]				0.199			0.913
	Mean Diff (95% CI) [b]				-2.4 (-8.2, 3.4)			
	P-value [b]				0.416			
	Effect Size (95% CI) [c]				-0.09 (-0.31, 0.12)			
	C3D1	N		123	123	123	100	101
Mean			77.9	77.6	-0.3	74.8	78.1	3.3
SD			22.33	27.40	25.87	26.22	25.16	22.72
95% CI			73.9, 81.9	72.8, 82.5	-4.9, 4.3	69.6, 80.0	73.1, 83.0	-1.2, 7.8
Median			83.3	83.3	0.0	83.3	83.3	0.0
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	0.0, 16.7
Min, Max			0.0, 100.0	0.0, 100.0	-83.3, 50.0	0.0, 100.0	0.0, 100.0	-66.7, 66.7
Mean Diff (95% CI) [a]					-0.3 (-4.9, 4.3)			3.3 (-1.2, 7.8)
P-value [a]					0.908			0.146
Mean Diff (95% CI) [b]					-3.6 (-10.1, 2.9)			
P-value [b]					0.276			
Effect Size (95% CI) [c]					-0.14 (-0.35, 0.07)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	93	94	93
	Mean		77.1	79.3	2.2	74.0	76.8	2.9
	SD		23.48	24.22	21.75	26.63	24.95	26.31
	95% CI		72.7, 81.5	74.8, 83.9	-1.8, 6.3	68.5, 79.5	71.7, 81.9	-2.6, 8.3
	Median		83.3	83.3	0.0	83.3	83.3	0.0
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 16.7
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 50.0	0.0, 100.0	0.0, 100.0	-50.0, 100.0
	Mean Diff (95% CI) [a]				2.2 (-1.8, 6.3)			2.9 (-2.6, 8.3)
	P-value [a]				0.280			0.296
	Mean Diff (95% CI) [b]				-0.6 (-7.3, 6.0)			
	P-value [b]				0.850			
	Effect Size (95% CI) [c]				-0.02 (-0.24, 0.19)			
	C5D1	N		98	98	98	80	80
Mean			78.9	81.3	2.4	73.8	77.3	3.5
SD			22.39	23.72	22.32	28.04	23.76	25.94
95% CI			74.4, 83.4	76.5, 86.0	-2.1, 6.9	67.5, 80.0	72.0, 82.6	-2.2, 9.3
Median			83.3	100.0	0.0	83.3	83.3	0.0
Q1, Q3			66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	-8.3, 16.7
Min, Max			0.0, 100.0	0.0, 100.0	-100.0, 50.0	0.0, 100.0	16.7, 100.0	-50.0, 100.0
Mean Diff (95% CI) [a]					2.4 (-2.1, 6.9)			3.5 (-2.2, 9.3)
P-value [a]					0.294			0.226
Mean Diff (95% CI) [b]					-1.2 (-8.3, 6.0)			
P-value [b]					0.749			
Effect Size (95% CI) [c]					-0.05 (-0.26, 0.17)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C6D1	N		96	96	96	68	68	68
	Mean		78.1	80.9	2.8	76.0	76.2	0.2
	SD		22.20	24.18	22.90	26.14	24.66	24.52
	95% CI		73.6, 82.6	76.0, 85.8	-1.9, 7.4	69.7, 82.3	70.3, 82.2	-5.7, 6.2
	Median		83.3	91.7	0.0	83.3	83.3	0.0
	Q1, Q3		66.7, 100.0	66.7, 100.0	-8.3, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 16.7
	Min, Max		0.0, 100.0	0.0, 100.0	-50.0, 50.0	0.0, 100.0	0.0, 100.0	-50.0, 100.0
	Mean Diff (95% CI) [a]				2.8 (-1.9, 7.4)			0.2 (-5.7, 6.2)
	P-value [a]				0.238			0.935
	Mean Diff (95% CI) [b]				2.5 (-4.8, 9.9)			
	P-value [b]				0.499			
	Effect Size (95% CI) [c]				0.10 (-0.11, 0.31)			
	C7D1	N		79	79	79	52	52
Mean			77.0	79.7	2.7	75.6	78.8	3.2
SD			23.00	25.83	20.22	26.50	25.16	24.49
95% CI			71.9, 82.2	74.0, 85.5	-1.8, 7.3	68.3, 83.0	71.8, 85.9	-3.6, 10.0
Median			83.3	83.3	0.0	83.3	83.3	0.0
Q1, Q3			66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	0.0, 8.3
Min, Max			0.0, 100.0	0.0, 100.0	-50.0, 50.0	0.0, 100.0	16.7, 100.0	-50.0, 100.0
Mean Diff (95% CI) [a]					2.7 (-1.8, 7.3)			3.2 (-3.6, 10.0)
P-value [a]					0.232			0.350
Mean Diff (95% CI) [b]					-0.5 (-8.2, 7.3)			
P-value [b]					0.907			
Effect Size (95% CI) [c]					-0.02 (-0.23, 0.19)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		75	75	75	50	50	50
	Mean		75.3	80.4	5.1	75.0	78.3	3.3
	SD		23.79	26.05	21.74	26.78	27.61	29.35
	95% CI		69.9, 80.8	74.5, 86.4	0.1, 10.1	67.4, 82.6	70.5, 86.2	-5.0, 11.7
	Median		66.7	100.0	0.0	83.3	83.3	0.0
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 16.7
	Min, Max		0.0, 100.0	0.0, 100.0	-33.3, 50.0	0.0, 100.0	0.0, 100.0	-66.7, 100.0
	Mean Diff (95% CI) [a]				5.1 (0.1, 10.1)			3.3 (-5.0, 11.7)
	P-value [a]				0.045			0.426
	Mean Diff (95% CI) [b]				1.8 (-7.3, 10.8)			
	P-value [b]				0.698			
	Effect Size (95% CI) [c]				0.07 (-0.14, 0.28)			
	C9D1	N		60	60	60	42	42
Mean			77.5	80.6	3.1	74.6	80.2	5.6
SD			22.09	25.89	21.37	26.86	23.92	28.91
95% CI			71.8, 83.2	73.9, 87.2	-2.5, 8.6	66.2, 83.0	72.7, 87.6	-3.5, 14.6
Median			83.3	100.0	0.0	75.0	83.3	0.0
Q1, Q3			66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 16.7
Min, Max			33.3, 100.0	0.0, 100.0	-66.7, 50.0	0.0, 100.0	0.0, 100.0	-66.7, 100.0
Mean Diff (95% CI) [a]					3.1 (-2.5, 8.6)			5.6 (-3.5, 14.6)
P-value [a]					0.273			0.220
Mean Diff (95% CI) [b]					-2.5 (-12.4, 7.4)			
P-value [b]					0.617			
Effect Size (95% CI) [c]					-0.10 (-0.31, 0.12)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C10D1	N		54	54	54	30	30	30
	Mean		76.2	85.8	9.6	72.8	66.7	-6.1
	SD		22.34	19.54	16.38	24.56	30.95	28.53
	95% CI		70.1, 82.3	80.5, 91.1	5.1, 14.0	63.6, 81.9	55.1, 78.2	-16.8, 4.5
	Median		75.0	100.0	0.0	66.7	66.7	0.0
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	50.0, 100.0	-33.3, 16.7
	Min, Max		33.3, 100.0	33.3, 100.0	-16.7, 33.3	0.0, 100.0	0.0, 100.0	-66.7, 50.0
	Mean Diff (95% CI) [a]				9.6 (5.1, 14.0)			-6.1 (-16.8, 4.5)
	P-value [a]				<.001			0.250
	Mean Diff (95% CI) [b]				15.7 (5.9, 25.4)			
	P-value [b]				0.002			
	Effect Size (95% CI) [c]				0.61 (0.39, 0.83)			
	C11D1	N		46	46	46	23	23
Mean			75.4	78.6	3.3	79.0	79.0	0.0
SD			21.87	24.00	26.44	18.95	24.21	26.11
95% CI			68.9, 81.9	71.5, 85.8	-4.6, 11.1	70.8, 87.2	68.5, 89.5	-11.3, 11.3
Median			66.7	83.3	0.0	83.3	83.3	0.0
Q1, Q3			66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 16.7
Min, Max			33.3, 100.0	0.0, 100.0	-66.7, 66.7	33.3, 100.0	0.0, 100.0	-66.7, 33.3
Mean Diff (95% CI) [a]					3.3 (-4.6, 11.1)			0.0 (-11.3, 11.3)
P-value [a]					0.407			1.000
Mean Diff (95% CI) [b]					3.3 (-10.2, 16.7)			
P-value [b]					0.629			
Effect Size (95% CI) [c]					0.13 (-0.09, 0.34)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		40	40	40	19	19	19	
	Mean		75.8	80.8	5.0	82.5	87.7	5.3	
	SD		21.33	25.47	25.09	15.19	19.12	21.55	
	95% CI		69.0, 82.7	72.7, 89.0	-3.0, 13.0	75.1, 89.8	78.5, 96.9	-5.1, 15.7	
	Median		66.7	100.0	0.0	83.3	100.0	0.0	
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	0.0, 33.3	
	Min, Max		33.3, 100.0	0.0, 100.0	-50.0, 66.7	66.7, 100.0	33.3, 100.0	-33.3, 33.3	
	Mean Diff (95% CI) [a]				5.0 (-3.0, 13.0)			5.3 (-5.1, 15.7)	
	P-value [a]				0.215			0.301	
	Mean Diff (95% CI) [b]				-0.3 (-13.7, 13.1)				
	P-value [b]				0.969				
	Effect Size (95% CI) [c]				-0.01 (-0.22, 0.20)				
	C13D1	N		33	33	33	15	15	15
		Mean		76.8	84.3	7.6	81.1	83.3	2.2
SD			22.02	19.07	25.72	16.51	17.82	25.09	
95% CI			69.0, 84.6	77.6, 91.1	-1.5, 16.7	72.0, 90.3	73.5, 93.2	-11.7, 16.1	
Median			83.3	100.0	0.0	83.3	83.3	0.0	
Q1, Q3			66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 33.3	
Min, Max			33.3, 100.0	33.3, 100.0	-33.3, 66.7	50.0, 100.0	50.0, 100.0	-33.3, 33.3	
Mean Diff (95% CI) [a]					7.6 (-1.5, 16.7)			2.2 (-11.7, 16.1)	
P-value [a]					0.100			0.737	
Mean Diff (95% CI) [b]					5.4 (-10.6, 21.4)				
P-value [b]					0.504				
Effect Size (95% CI) [c]					0.21 (-0.01, 0.42)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C14D1	N	33	33	33	12	12	12
		Mean	76.8	80.3	3.5	80.6	84.7	4.2
		SD	22.02	19.30	19.44	17.16	21.86	26.71
		95% CI	69.0, 84.6	73.5, 87.1	-3.4, 10.4	69.6, 91.5	70.8, 98.6	-12.8, 21.1
		Median	83.3	66.7	0.0	83.3	100.0	8.3
		Q1, Q3	66.7, 100.0	66.7, 100.0	0.0, 16.7	66.7, 100.0	66.7, 100.0	-8.3, 25.0
		Min, Max	33.3, 100.0	50.0, 100.0	-33.3, 50.0	50.0, 100.0	33.3, 100.0	-50.0, 33.3
		Mean Diff (95% CI) [a]			3.5 (-3.4, 10.4)			4.2 (-12.8, 21.1)
		P-value [a]			0.304			0.600
		Mean Diff (95% CI) [b]			-0.6 (-15.3, 14.0)			
		P-value [b]			0.931			
		Effect Size (95% CI) [c]			-0.02 (-0.24, 0.19)			
	C15D1	N	28	28	28	13	13	13
		Mean	75.6	74.4	-1.2	80.8	82.1	1.3
		SD	21.98	21.98	25.23	16.45	20.93	20.93
		95% CI	67.1, 84.1	65.9, 82.9	-11.0, 8.6	70.8, 90.7	69.4, 94.7	-11.4, 13.9
		Median	75.0	66.7	0.0	83.3	100.0	0.0
		Q1, Q3	66.7, 100.0	66.7, 100.0	-8.3, 8.3	66.7, 100.0	66.7, 100.0	0.0, 16.7
		Min, Max	33.3, 100.0	0.0, 100.0	-83.3, 33.3	50.0, 100.0	50.0, 100.0	-33.3, 33.3
		Mean Diff (95% CI) [a]			-1.2 (-11.0, 8.6)			1.3 (-11.4, 13.9)
		P-value [a]			0.805			0.829
		Mean Diff (95% CI) [b]			-2.5 (-18.8, 13.8)			
		P-value [b]			0.760			
		Effect Size (95% CI) [c]			-0.10 (-0.31, 0.12)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C16D1	N		28	28	28	10	10	10	
	Mean		76.2	78.0	1.8	78.3	86.7	8.3	
	SD		22.42	22.70	22.38	15.81	15.32	18.00	
	95% CI		67.5, 84.9	69.2, 86.8	-6.9, 10.5	67.0, 89.6	75.7, 97.6	-4.5, 21.2	
	Median		75.0	83.3	0.0	83.3	91.7	8.3	
	Q1, Q3		66.7, 100.0	66.7, 100.0	-8.3, 16.7	66.7, 83.3	66.7, 100.0	0.0, 16.7	
	Min, Max		33.3, 100.0	33.3, 100.0	-50.0, 50.0	50.0, 100.0	66.7, 100.0	-16.7, 33.3	
	Mean Diff (95% CI) [a]				1.8 (-6.9, 10.5)			8.3 (-4.5, 21.2)	
	P-value [a]				0.676			0.177	
	Mean Diff (95% CI) [b]				-6.5 (-22.5, 9.4)				
	P-value [b]				0.411				
	Effect Size (95% CI) [c]				-0.25 (-0.47, -0.04)				
	C17D1	N		26	26	26	7	7	7
		Mean		74.4	76.3	1.9	73.8	81.0	7.1
SD			22.23	27.56	21.25	16.27	27.94	25.20	
95% CI			65.4, 83.3	65.2, 87.4	-6.7, 10.5	58.8, 88.9	55.1, 106.8	-16.2, 30.4	
Median			66.7	83.3	0.0	66.7	100.0	16.7	
Q1, Q3			66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 83.3	50.0, 100.0	-16.7, 33.3	
Min, Max			33.3, 100.0	0.0, 100.0	-33.3, 50.0	50.0, 100.0	33.3, 100.0	-33.3, 33.3	
Mean Diff (95% CI) [a]					1.9 (-6.7, 10.5)			7.1 (-16.2, 30.4)	
P-value [a]					0.649			0.482	
Mean Diff (95% CI) [b]					-5.2 (-24.4, 13.9)				
P-value [b]					0.583				
Effect Size (95% CI) [c]					-0.20 (-0.42, 0.01)				

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C18D1	N		22	22	22	7	7	7
	Mean		72.0	78.8	6.8	76.2	83.3	7.1
	SD		22.65	24.76	21.61	16.27	21.52	21.21
	95% CI		61.9, 82.0	67.8, 89.8	-2.8, 16.4	61.1, 91.2	63.4, 103.2	-12.5, 26.8
	Median		66.7	83.3	0.0	83.3	100.0	16.7
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 33.3	66.7, 83.3	66.7, 100.0	0.0, 16.7
	Min, Max		33.3, 100.0	0.0, 100.0	-33.3, 50.0	50.0, 100.0	50.0, 100.0	-33.3, 33.3
	Mean Diff (95% CI) [a]				6.8 (-2.8, 16.4)			7.1 (-12.5, 26.8)
	P-value [a]				0.154			0.407
	Mean Diff (95% CI) [b]				-0.3 (-19.5, 18.8)			
	P-value [b]				0.973			
	Effect Size (95% CI) [c]				-0.01 (-0.23, 0.20)			
	C19D1	N		20	20	20	6	6
Mean			72.5	76.7	4.2	75.0	86.1	11.1
SD			23.74	20.52	22.21	17.48	22.15	25.09
95% CI			61.4, 83.6	67.1, 86.3	-6.2, 14.6	56.7, 93.3	62.9, 109.4	-15.2, 37.4
Median			66.7	66.7	0.0	75.0	100.0	16.7
Q1, Q3			58.3, 100.0	66.7, 100.0	-8.3, 8.3	66.7, 83.3	66.7, 100.0	0.0, 33.3
Min, Max			33.3, 100.0	33.3, 100.0	-33.3, 50.0	50.0, 100.0	50.0, 100.0	-33.3, 33.3
Mean Diff (95% CI) [a]					4.2 (-6.2, 14.6)			11.1 (-15.2, 37.4)
P-value [a]					0.412			0.328
Mean Diff (95% CI) [b]					-6.9 (-28.9, 15.0)			
P-value [b]					0.520			
Effect Size (95% CI) [c]					-0.27 (-0.48, -0.06)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		19	19	19	4	4	4
	Mean		76.3	78.1	1.8	75.0	70.8	-4.2
	SD		23.12	24.25	20.71	21.52	20.97	20.97
	95% CI		65.2, 87.5	66.4, 89.8	-8.2, 11.7	40.8, 109.2	37.5, 104.2	-37.5, 29.2
	Median		83.3	83.3	0.0	75.0	66.7	0.0
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 0.0	58.3, 91.7	58.3, 83.3	-16.7, 8.3
	Min, Max		33.3, 100.0	16.7, 100.0	-33.3, 50.0	50.0, 100.0	50.0, 100.0	-33.3, 16.7
	Mean Diff (95% CI) [a]				1.8 (-8.2, 11.7)			-4.2 (-37.5, 29.2)
	P-value [a]				0.716			0.718
	Mean Diff (95% CI) [b]				5.9 (-17.8, 29.7)			
	P-value [b]				0.609			
	Effect Size (95% CI) [c]				0.23 (0.02, 0.44)			
	C21D1	N		18	18	18	4	4
Mean			73.1	81.5	8.3	75.0	75.0	0.0
SD			22.24	19.71	21.58	21.52	16.67	13.61
95% CI			62.1, 84.2	71.7, 91.3	-2.4, 19.1	40.8, 109.2	48.5, 101.5	-21.7, 21.7
Median			66.7	83.3	0.0	75.0	66.7	0.0
Q1, Q3			66.7, 100.0	66.7, 100.0	0.0, 33.3	58.3, 91.7	66.7, 83.3	-8.3, 8.3
Min, Max			33.3, 100.0	50.0, 100.0	-33.3, 50.0	50.0, 100.0	66.7, 100.0	-16.7, 16.7
Mean Diff (95% CI) [a]					8.3 (-2.4, 19.1)			0.0 (-21.7, 21.7)
P-value [a]					0.120			1.000
Mean Diff (95% CI) [b]					8.3 (-15.4, 32.1)			
P-value [b]					0.472			
Effect Size (95% CI) [c]					0.32 (0.11, 0.54)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		15	15	15	3	3	3	
	Mean		77.8	76.7	-1.1	72.2	77.8	5.6	
	SD		20.57	21.64	18.33	25.46	19.25	9.62	
	95% CI		66.4, 89.2	64.7, 88.7	-11.3, 9.0	9.0, 135.5	30.0, 125.6	-18.3, 29.5	
	Median		83.3	83.3	0.0	66.7	66.7	0.0	
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 0.0	50.0, 100.0	66.7, 100.0	0.0, 16.7	
	Min, Max		33.3, 100.0	33.3, 100.0	-50.0, 33.3	50.0, 100.0	66.7, 100.0	0.0, 16.7	
	Mean Diff (95% CI) [a]				-1.1 (-11.3, 9.0)			5.6 (-18.3, 29.5)	
	P-value [a]				0.818			0.423	
	Mean Diff (95% CI) [b]				-6.7 (-30.1, 16.8)				
	P-value [b]				0.555				
	Effect Size (95% CI) [c]				-0.26 (-0.47, -0.05)				
	C23D1	N		11	11	11	3	3	3
		Mean		74.2	83.3	9.1	72.2	77.8	5.6
SD			21.56	18.26	18.80	25.46	19.25	9.62	
95% CI			59.8, 88.7	71.1, 95.6	-3.5, 21.7	9.0, 135.5	30.0, 125.6	-18.3, 29.5	
Median			66.7	83.3	16.7	66.7	66.7	0.0	
Q1, Q3			66.7, 100.0	66.7, 100.0	0.0, 16.7	50.0, 100.0	66.7, 100.0	0.0, 16.7	
Min, Max			33.3, 100.0	50.0, 100.0	-33.3, 33.3	50.0, 100.0	66.7, 100.0	0.0, 16.7	
Mean Diff (95% CI) [a]					9.1 (-3.5, 21.7)			5.6 (-18.3, 29.5)	
P-value [a]					0.140			0.423	
Mean Diff (95% CI) [b]					3.5 (-21.5, 28.5)				
P-value [b]					0.763				
Effect Size (95% CI) [c]					0.14 (-0.08, 0.35)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C24D1	N	10	10	10	2	2	2
		Mean	75.0	78.3	3.3	75.0	83.3	8.3
		SD	22.57	22.29	15.32	35.36	23.57	11.79
		95% CI	58.9, 91.1	62.4, 94.3	-7.6, 14.3	-242.7, 392.7	-128.4, 295.1	-97.6, 114.2
		Median	75.0	75.0	0.0	75.0	83.3	8.3
		Q1, Q3	66.7, 100.0	66.7, 100.0	0.0, 16.7	50.0, 100.0	66.7, 100.0	0.0, 16.7
		Min, Max	33.3, 100.0	33.3, 100.0	-16.7, 33.3	50.0, 100.0	66.7, 100.0	0.0, 16.7
		Mean Diff (95% CI) [a]			3.3 (-7.6, 14.3)			8.3 (-97.6, 114.2)
		P-value [a]			0.509			0.500
		Mean Diff (95% CI) [b]			-5.0 (-30.9, 20.9)			
		P-value [b]			0.676			
		Effect Size (95% CI) [c]			-0.19 (-0.41, 0.02)			
	C25D1	N	9	9	9	0	0	0
		Mean	72.2	74.1	1.9	NE	NE	NE
		SD	22.05	23.73	13.03	NE	NE	NE
		95% CI	55.3, 89.2	55.8, 92.3	-8.2, 11.9	NE, NE	NE, NE	NE, NE
		Median	66.7	66.7	0.0	NE	NE	NE
		Q1, Q3	66.7, 83.3	66.7, 100.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 100.0	33.3, 100.0	-16.7, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			1.9 (-8.2, 11.9)			NE (NE, NE)
		P-value [a]			0.681			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	83.3	81.3	-2.1	100.0	100.0	0.0
		SD	15.43	30.13	31.42	NE	NE	NE
		95% CI	70.4, 96.2	56.1, 106.4	-28.3, 24.2	NE, NE	NE, NE	NE, NE
		Median	83.3	100.0	0.0	100.0	100.0	0.0
		Q1, Q3	66.7, 100.0	66.7, 100.0	-8.3, 16.7	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Min, Max	66.7, 100.0	16.7, 100.0	-66.7, 33.3	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Mean Diff (95% CI) [a]			-2.1 (-28.3, 24.2)			0.0 (NE, NE)
		P-value [a]			0.857			NE
		Mean Diff (95% CI) [b]			-2.1 (-80.9, 76.7)			
		P-value [b]			0.952			
		Effect Size (95% CI) [c]			-0.08 (-0.29, 0.13)			
	C27D1	N	8	8	8	1	1	1
		Mean	83.3	85.4	2.1	100.0	100.0	0.0
		SD	15.43	16.52	16.52	NE	NE	NE
		95% CI	70.4, 96.2	71.6, 99.2	-11.7, 15.9	NE, NE	NE, NE	NE, NE
		Median	83.3	91.7	0.0	100.0	100.0	0.0
		Q1, Q3	66.7, 100.0	66.7, 100.0	-8.3, 8.3	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Min, Max	66.7, 100.0	66.7, 100.0	-16.7, 33.3	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Mean Diff (95% CI) [a]			2.1 (-11.7, 15.9)			0.0 (NE, NE)
		P-value [a]			0.732			NE
		Mean Diff (95% CI) [b]			2.1 (-39.3, 43.5)			
		P-value [b]			0.909			
		Effect Size (95% CI) [c]			0.08 (-0.13, 0.29)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C28D1	N		7	7	7	1	1	1	
	Mean		83.3	85.7	2.4	100.0	100.0	0.0	
	SD		16.67	17.82	15.00	NE	NE	NE	
	95% CI		67.9, 98.7	69.2, 102.2	-11.5, 16.2	NE, NE	NE, NE	NE, NE	
	Median		83.3	100.0	0.0	100.0	100.0	0.0	
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 0.0	100.0, 100.0	100.0, 100.0	0.0, 0.0	
	Min, Max		66.7, 100.0	66.7, 100.0	-16.7, 33.3	100.0, 100.0	100.0, 100.0	0.0, 0.0	
	Mean Diff (95% CI) [a]				2.4 (-11.5, 16.2)			0.0 (NE, NE)	
	P-value [a]				0.689			NE	
	Mean Diff (95% CI) [b]				2.4 (-36.8, 41.6)				
	P-value [b]				0.887				
	Effect Size (95% CI) [c]				0.09 (-0.12, 0.31)				
	C29D1	N		4	4	4	1	1	1
		Mean		70.8	70.8	0.0	100.0	66.7	-33.3
SD			8.33	25.00	30.43	NE	NE	NE	
95% CI			57.6, 84.1	31.1, 110.6	-48.4, 48.4	NE, NE	NE, NE	NE, NE	
Median			66.7	66.7	0.0	100.0	66.7	-33.3	
Q1, Q3			66.7, 75.0	50.0, 91.7	-25.0, 25.0	100.0, 100.0	66.7, 66.7	-33.3, -33.3	
Min, Max			66.7, 83.3	50.0, 100.0	-33.3, 33.3	100.0, 100.0	66.7, 66.7	-33.3, -33.3	
Mean Diff (95% CI) [a]					0.0 (-48.4, 48.4)			-33.3 (NE, NE)	
P-value [a]					1.000			NE	
Mean Diff (95% CI) [b]					33.3 (-74.9, 141.6)				
P-value [b]					0.399				
Effect Size (95% CI) [c]					1.30 (1.06, 1.53)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C30D1	N	4	4	4	1	1	1
		Mean	79.2	87.5	8.3	100.0	50.0	-50.0
		SD	15.96	15.96	21.52	NE	NE	NE
		95% CI	53.8, 104.6	62.1, 112.9	-25.9, 42.6	NE, NE	NE, NE	NE, NE
		Median	75.0	91.7	8.3	100.0	50.0	-50.0
		Q1, Q3	66.7, 91.7	75.0, 100.0	-8.3, 25.0	100.0, 100.0	50.0, 50.0	-50.0, -50.0
		Min, Max	66.7, 100.0	66.7, 100.0	-16.7, 33.3	100.0, 100.0	50.0, 50.0	-50.0, -50.0
		Mean Diff (95% CI) [a]			8.3 (-25.9, 42.6)			-50.0 (NE, NE)
		P-value [a]			0.495			NE
		Mean Diff (95% CI) [b]			58.3 (-18.2, 134.9)			
		P-value [b]			0.094			
		Effect Size (95% CI) [c]			2.27 (1.99, 2.54)			
	C31D1	N	2	2	2	1	1	1
		Mean	66.7	91.7	25.0	100.0	83.3	-16.7
		SD	0.00	11.79	11.79	NE	NE	NE
		95% CI	66.7, 66.7	-14.2, 197.6	-80.9, 130.9	NE, NE	NE, NE	NE, NE
		Median	66.7	91.7	25.0	100.0	83.3	-16.7
		Q1, Q3	66.7, 66.7	83.3, 100.0	16.7, 33.3	100.0, 100.0	83.3, 83.3	-16.7, -16.7
		Min, Max	66.7, 66.7	83.3, 100.0	16.7, 33.3	100.0, 100.0	83.3, 83.3	-16.7, -16.7
		Mean Diff (95% CI) [a]			25.0 (-80.9, 130.9)			-16.7 (NE, NE)
		P-value [a]			0.205			NE
		Mean Diff (95% CI) [b]			41.7 (-141.7, 225.1)			
		P-value [b]			0.212			
		Effect Size (95% CI) [c]			1.62 (1.37, 1.86)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	66.7	83.3	16.7	100.0	83.3	-16.7
		SD	0.00	23.57	23.57	NE	NE	NE
		95% CI	66.7, 66.7	-128.4, 295.1	-195.1, 228.4	NE, NE	NE, NE	NE, NE
		Median	66.7	83.3	16.7	100.0	83.3	-16.7
		Q1, Q3	66.7, 66.7	66.7, 100.0	0.0, 33.3	100.0, 100.0	83.3, 83.3	-16.7, -16.7
		Min, Max	66.7, 66.7	66.7, 100.0	0.0, 33.3	100.0, 100.0	83.3, 83.3	-16.7, -16.7
		Mean Diff (95% CI) [a]			16.7 (-195.1, 228.4)			-16.7 (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			33.3 (-333.5, 400.1)			
		P-value [b]			0.454			
		Effect Size (95% CI) [c]			1.30 (1.06, 1.53)			
	C33D1	N	3	3	3	1	1	1
		Mean	77.8	88.9	11.1	100.0	100.0	0.0
		SD	19.25	19.25	19.25	NE	NE	NE
		95% CI	30.0, 125.6	41.1, 136.7	-36.7, 58.9	NE, NE	NE, NE	NE, NE
		Median	66.7	100.0	0.0	100.0	100.0	0.0
		Q1, Q3	66.7, 100.0	66.7, 100.0	0.0, 33.3	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Min, Max	66.7, 100.0	66.7, 100.0	0.0, 33.3	100.0, 100.0	100.0, 100.0	0.0, 0.0
		Mean Diff (95% CI) [a]			11.1 (-36.7, 58.9)			0.0 (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			11.1 (-84.5, 106.7)			
		P-value [b]			0.667			
		Effect Size (95% CI) [c]			0.43 (0.22, 0.65)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C34D1	N		3	3	3	0	0	0	
	Mean		77.8	88.9	11.1	NE	NE	NE	
	SD		19.25	19.25	19.25	NE	NE	NE	
	95% CI		30.0, 125.6	41.1, 136.7	-36.7, 58.9	NE, NE	NE, NE	NE, NE	
	Median		66.7	100.0	0.0	NE	NE	NE	
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Min, Max		66.7, 100.0	66.7, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				11.1 (-36.7, 58.9)			NE (NE, NE)	
	P-value [a]				0.423			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C35D1	N		2	2	2	0	0	0
		Mean		66.7	83.3	16.7	NE	NE	NE
SD			0.00	23.57	23.57	NE	NE	NE	
95% CI			66.7, 66.7	-128.4, 295.1	-195.1, 228.4	NE, NE	NE, NE	NE, NE	
Median			66.7	83.3	16.7	NE	NE	NE	
Q1, Q3			66.7, 66.7	66.7, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
Min, Max			66.7, 66.7	66.7, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					16.7 (-195.1, 228.4)			NE (NE, NE)	
P-value [a]					0.500			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C36D1	N		3	3	3	0	0	0	
	Mean		77.8	88.9	11.1	NE	NE	NE	
	SD		19.25	19.25	19.25	NE	NE	NE	
	95% CI		30.0, 125.6	41.1, 136.7	-36.7, 58.9	NE, NE	NE, NE	NE, NE	
	Median		66.7	100.0	0.0	NE	NE	NE	
	Q1, Q3		66.7, 100.0	66.7, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Min, Max		66.7, 100.0	66.7, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				11.1 (-36.7, 58.9)			NE (NE, NE)	
	P-value [a]				0.423			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C37D1	N		3	3	3	0	0	0
		Mean		77.8	88.9	11.1	NE	NE	NE
SD			19.25	19.25	19.25	NE	NE	NE	
95% CI			30.0, 125.6	41.1, 136.7	-36.7, 58.9	NE, NE	NE, NE	NE, NE	
Median			66.7	100.0	0.0	NE	NE	NE	
Q1, Q3			66.7, 100.0	66.7, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
Min, Max			66.7, 100.0	66.7, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					11.1 (-36.7, 58.9)			NE (NE, NE)	
P-value [a]					0.423			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C38D1	N		2	2	2	0	0	0	
	Mean		83.3	100.0	16.7	NE	NE	NE	
	SD		23.57	0.00	23.57	NE	NE	NE	
	95% CI		-128.4, 295.1	100.0, 100.0	-195.1, 228.4	NE, NE	NE, NE	NE, NE	
	Median		83.3	100.0	16.7	NE	NE	NE	
	Q1, Q3		66.7, 100.0	100.0, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Min, Max		66.7, 100.0	100.0, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				16.7 (-195.1, 228.4)			NE (NE, NE)	
	P-value [a]				0.500			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C39D1	N		2	2	2	0	0	0
		Mean		83.3	100.0	16.7	NE	NE	NE
SD			23.57	0.00	23.57	NE	NE	NE	
95% CI			-128.4, 295.1	100.0, 100.0	-195.1, 228.4	NE, NE	NE, NE	NE, NE	
Median			83.3	100.0	16.7	NE	NE	NE	
Q1, Q3			66.7, 100.0	100.0, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
Min, Max			66.7, 100.0	100.0, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					16.7 (-195.1, 228.4)			NE (NE, NE)	
P-value [a]					0.500			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	83.3	100.0	16.7	NE	NE	NE
		SD	23.57	0.00	23.57	NE	NE	NE
		95% CI	-128.4, 295.1	100.0, 100.0	-195.1, 228.4	NE, NE	NE, NE	NE, NE
		Median	83.3	100.0	16.7	NE	NE	NE
		Q1, Q3	66.7, 100.0	100.0, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	66.7, 100.0	100.0, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (-195.1, 228.4)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	83.3	100.0	16.7	NE	NE	NE
		SD	23.57	0.00	23.57	NE	NE	NE
		95% CI	-128.4, 295.1	100.0, 100.0	-195.1, 228.4	NE, NE	NE, NE	NE, NE
		Median	83.3	100.0	16.7	NE	NE	NE
		Q1, Q3	66.7, 100.0	100.0, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	66.7, 100.0	100.0, 100.0	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (-195.1, 228.4)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	66.7	100.0	33.3	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	66.7	100.0	33.3	NE	NE	NE
		Q1, Q3	66.7, 66.7	100.0, 100.0	33.3, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	66.7, 66.7	100.0, 100.0	33.3, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			33.3 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	66.7	100.0	33.3	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	66.7	100.0	33.3	NE	NE	NE
		Q1, Q3	66.7, 66.7	100.0, 100.0	33.3, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	66.7, 66.7	100.0, 100.0	33.3, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			33.3 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		130	130	130	124	124	124	
	Mean		76.8	70.8	-6.0	76.3	73.5	-2.8	
	SD		26.45	32.35	31.13	25.33	28.83	26.35	
	95% CI		72.2, 81.4	65.2, 76.4	-11.4, -0.6	71.8, 80.8	68.4, 78.6	-7.5, 1.9	
	Median		83.3	83.3	0.0	83.3	75.0	0.0	
	Q1, Q3		66.7, 100.0	66.7, 100.0	-16.7, 16.7	66.7, 100.0	66.7, 100.0	-16.7, 16.7	
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 83.3	
	Mean Diff (95% CI) [a]				-6.0 (-11.4, -0.6)			-2.8 (-7.5, 1.9)	
	P-value [a]				0.029			0.235	
	Mean Diff (95% CI) [b]				-3.2 (-10.3, 3.9)				
	P-value [b]				0.378				
	Effect Size (95% CI) [c]				-0.12 (-0.34, 0.09)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			84.5	75.0	-9.5	70.4	61.1	-9.3
	SD			13.81	20.41	21.40	21.70	33.33	26.50
95% CI			76.5, 92.5	63.2, 86.8	-21.9, 2.8	53.7, 87.0	35.5, 86.7	-29.6, 11.1	
Median			83.3	66.7	-8.3	66.7	66.7	0.0	
Q1, Q3			66.7, 100.0	66.7, 100.0	-33.3, 16.7	66.7, 83.3	66.7, 66.7	-16.7, 0.0	
Min, Max			66.7, 100.0	33.3, 100.0	-33.3, 16.7	33.3, 100.0	0.0, 100.0	-66.7, 16.7	
Mean Diff (95% CI) [a]					-9.5 (-21.9, 2.8)			-9.3 (-29.6, 11.1)	
P-value [a]					0.120			0.325	
Mean Diff (95% CI) [b]					-0.3 (-21.1, 20.6)				
P-value [b]					0.979				
Effect Size (95% CI) [c]					-0.01 (-0.22, 0.20)				
Fatigue	Baseline	N	174			165			
	Mean		34.9			35.0			
	SD		24.20			23.81			
	95% CI		31.2, 38.5			31.4, 38.7			
	Median		33.3			33.3			
	Q1, Q3		22.2, 44.4			22.2, 44.4			
	Min, Max		0.0, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C2D1	N		152	152	152	144	144	144
	Mean		33.6	39.0	5.4	35.0	42.6	7.6
	SD		23.61	25.63	21.64	24.62	25.17	19.91
	Median		33.3	33.3	0.0	33.3	33.3	11.1
	95% CI		29.8, 37.4	34.9, 43.1	1.9, 8.8	30.9, 39.0	38.4, 46.7	4.4, 10.9
	Q1, Q3		22.2, 44.4	22.2, 55.6	0.0, 16.7	11.1, 44.4	22.2, 55.6	0.0, 22.2
	Min, Max		0.0, 100.0	0.0, 100.0	-55.6, 100.0	0.0, 100.0	0.0, 100.0	-55.6, 88.9
	Mean Diff (95% CI) [a]				5.4 (1.9, 8.8)			7.6 (4.4, 10.9)
	P-value [a]				0.003			<.001
	Mean Diff (95% CI) [b]				-2.3 (-7.0, 2.5)			
	P-value [b]				0.350			
	Effect Size (95% CI) [c]				-0.09 (-0.31, 0.12)			
	C3D1	N		124	124	124	102	102
Mean			33.4	35.0	1.6	34.3	36.7	2.4
SD			23.00	25.57	22.77	21.95	23.07	17.17
Median			33.3	33.3	0.0	33.3	33.3	0.0
95% CI			29.3, 37.5	30.4, 39.5	-2.5, 5.6	30.0, 38.6	32.2, 41.2	-1.0, 5.8
Q1, Q3			22.2, 44.4	22.2, 50.0	-11.1, 11.1	22.2, 44.4	22.2, 44.4	0.0, 11.1
Min, Max			0.0, 100.0	0.0, 100.0	-77.8, 66.7	0.0, 88.9	0.0, 88.9	-44.4, 55.6
Mean Diff (95% CI) [a]					1.6 (-2.5, 5.6)			2.4 (-1.0, 5.8)
P-value [a]					0.445			0.162
Mean Diff (95% CI) [b]					-0.8 (-6.2, 4.6)			
P-value [b]					0.762			
Effect Size (95% CI) [c]					-0.03 (-0.25, 0.18)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		34.6	32.0	-2.6	34.0	33.9	-0.1
	SD		23.76	24.54	20.06	22.39	24.52	22.55
	Median		33.3	33.3	0.0	33.3	33.3	0.0
	95% CI		30.2, 39.1	27.4, 36.6	-6.3, 1.2	29.5, 38.6	28.9, 38.9	-4.7, 4.5
	Q1, Q3		22.2, 44.4	11.1, 44.4	-11.1, 11.1	11.1, 44.4	11.1, 44.4	-11.1, 11.1
	Min, Max		0.0, 100.0	0.0, 100.0	-77.8, 33.3	0.0, 88.9	0.0, 100.0	-66.7, 66.7
	Mean Diff (95% CI) [a]				-2.6 (-6.3, 1.2)			-0.1 (-4.7, 4.5)
	P-value [a]				0.176			0.960
	Mean Diff (95% CI) [b]				-2.5 (-8.3, 3.4)			
	P-value [b]				0.408			
	Effect Size (95% CI) [c]				-0.10 (-0.31, 0.11)			
	C5D1	N		97	97	97	80	80
Mean			34.0	33.0	-1.0	34.2	34.3	0.1
SD			24.21	24.95	22.41	22.62	23.53	19.41
Median			33.3	33.3	0.0	33.3	33.3	0.0
95% CI			29.1, 38.9	28.0, 38.1	-5.5, 3.5	29.1, 39.2	29.1, 39.5	-4.2, 4.5
Q1, Q3			22.2, 44.4	11.1, 44.4	-11.1, 11.1	11.1, 44.4	22.2, 44.4	-11.1, 11.1
Min, Max			0.0, 100.0	0.0, 100.0	-77.8, 55.6	0.0, 88.9	0.0, 100.0	-55.6, 44.4
Mean Diff (95% CI) [a]					-1.0 (-5.5, 3.5)			0.1 (-4.2, 4.5)
P-value [a]					0.670			0.949
Mean Diff (95% CI) [b]					-1.1 (-7.4, 5.2)			
P-value [b]					0.728			
Effect Size (95% CI) [c]					-0.05 (-0.26, 0.17)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C6D1	N		96	96	96	69	69	69
	Mean		32.3	29.2	-3.1	33.8	35.5	1.7
	SD		23.20	22.76	22.32	22.01	26.01	20.64
	Median		33.3	22.2	0.0	33.3	33.3	0.0
	95% CI		27.6, 37.0	24.6, 33.8	-7.6, 1.4	28.5, 39.1	29.3, 41.8	-3.3, 6.6
	Q1, Q3		22.2, 44.4	11.1, 38.9	-11.1, 11.1	11.1, 44.4	16.7, 55.6	-11.1, 11.1
	Min, Max		0.0, 100.0	0.0, 100.0	-77.8, 55.6	0.0, 88.9	0.0, 100.0	-66.7, 55.6
	Mean Diff (95% CI) [a]				-3.1 (-7.6, 1.4)			1.7 (-3.3, 6.6)
	P-value [a]				0.173			0.499
	Mean Diff (95% CI) [b]				-4.8 (-11.6, 1.9)			
	P-value [b]				0.160			
	Effect Size (95% CI) [c]				-0.20 (-0.41, 0.01)			
	C7D1	N		79	79	79	53	53
Mean			33.1	30.1	-3.0	34.6	28.5	-6.1
SD			23.53	25.23	19.39	23.54	21.41	20.51
Median			33.3	22.2	0.0	33.3	33.3	0.0
95% CI			27.8, 38.3	24.4, 35.8	-7.3, 1.4	28.1, 41.1	22.6, 34.4	-11.7, -0.4
Q1, Q3			22.2, 44.4	11.1, 44.4	-11.1, 11.1	11.1, 44.4	11.1, 44.4	-22.2, 11.1
Min, Max			0.0, 88.9	0.0, 88.9	-77.8, 44.4	0.0, 88.9	0.0, 66.7	-55.6, 33.3
Mean Diff (95% CI) [a]					-3.0 (-7.3, 1.4)			-6.1 (-11.7, -0.4)
P-value [a]					0.180			0.036
Mean Diff (95% CI) [b]					3.1 (-3.8, 10.1)			
P-value [b]					0.377			
Effect Size (95% CI) [c]					0.13 (-0.08, 0.34)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	50	50	50
	Mean		32.6	28.7	-3.9	34.7	33.1	-1.6
	SD		23.40	24.63	19.93	24.14	21.70	20.33
	Median		33.3	22.2	0.0	33.3	33.3	0.0
	95% CI		27.3, 37.9	23.0, 34.3	-8.5, 0.6	27.8, 41.5	26.9, 39.3	-7.3, 4.2
	Q1, Q3		22.2, 44.4	11.1, 33.3	-11.1, 0.0	11.1, 44.4	11.1, 44.4	-11.1, 11.1
	Min, Max		0.0, 88.9	0.0, 100.0	-55.6, 66.7	0.0, 88.9	0.0, 100.0	-55.6, 44.4
	Mean Diff (95% CI) [a]				-3.9 (-8.5, 0.6)			-1.6 (-7.3, 4.2)
	P-value [a]				0.088			0.591
	Mean Diff (95% CI) [b]				-2.4 (-9.6, 4.8)			
	P-value [b]				0.514			
	Effect Size (95% CI) [c]				-0.10 (-0.31, 0.11)			
	C9D1	N		60	60	60	42	42
Mean			30.9	28.9	-2.0	36.2	33.1	-3.2
SD			22.88	24.74	20.91	25.03	23.34	19.52
Median			33.3	22.2	0.0	33.3	33.3	0.0
95% CI			25.0, 36.8	22.5, 35.3	-7.4, 3.4	28.4, 44.0	25.8, 40.3	-9.3, 2.9
Q1, Q3			16.7, 44.4	11.1, 44.4	-16.7, 11.1	11.1, 55.6	11.1, 55.6	-11.1, 0.0
Min, Max			0.0, 88.9	0.0, 100.0	-44.4, 66.7	0.0, 88.9	0.0, 88.9	-55.6, 44.4
Mean Diff (95% CI) [a]					-2.0 (-7.4, 3.4)			-3.2 (-9.3, 2.9)
P-value [a]					0.454			0.298
Mean Diff (95% CI) [b]					1.1 (-7.0, 9.3)			
P-value [b]					0.782			
Effect Size (95% CI) [c]					0.05 (-0.17, 0.26)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C10D1		N	54	54	54	30	30	30
		Mean	31.7	26.7	-4.9	39.6	40.0	0.4
		SD	24.27	21.64	18.90	24.53	23.99	19.68
		Median	33.3	22.2	0.0	33.3	33.3	0.0
		95% CI	25.1, 38.3	20.8, 32.7	-10.1, 0.2	30.5, 48.8	31.0, 49.0	-7.0, 7.7
		Q1, Q3	11.1, 44.4	11.1, 33.3	-22.2, 11.1	22.2, 66.7	33.3, 66.7	-11.1, 0.0
		Min, Max	0.0, 88.9	0.0, 100.0	-44.4, 33.3	0.0, 88.9	0.0, 88.9	-33.3, 55.6
		Mean Diff (95% CI) [a]			-4.9 (-10.1, 0.2)			0.4 (-7.0, 7.7)
		P-value [a]			0.060			0.919
		Mean Diff (95% CI) [b]			-5.3 (-14.0, 3.4)			
		P-value [b]			0.228			
		Effect Size (95% CI) [c]			-0.22 (-0.43, -0.01)			
		C11D1		N	45	45	45	23
Mean	32.3			28.1	-4.2	33.3	28.5	-4.8
SD	24.37			21.53	21.49	21.97	16.69	24.12
Median	33.3			22.2	0.0	33.3	33.3	0.0
95% CI	25.0, 39.7			21.7, 34.6	-10.7, 2.3	23.8, 42.8	21.3, 35.7	-15.3, 5.6
Q1, Q3	11.1, 44.4			11.1, 44.4	-11.1, 0.0	11.1, 44.4	22.2, 33.3	-11.1, 11.1
Min, Max	0.0, 88.9			0.0, 77.8	-55.6, 44.4	0.0, 77.8	0.0, 66.7	-77.8, 22.2
Mean Diff (95% CI) [a]					-4.2 (-10.7, 2.3)			-4.8 (-15.3, 5.6)
P-value [a]					0.197			0.347
Mean Diff (95% CI) [b]					0.6 (-10.8, 12.1)			
P-value [b]					0.912			
Effect Size (95% CI) [c]					0.03 (-0.19, 0.24)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C12D1	N		41	41	41	19	19	19
	Mean		30.1	24.1	-6.0	32.2	28.7	-3.5
	SD		23.47	21.21	21.96	19.91	21.70	22.54
	Median		33.3	22.2	0.0	33.3	33.3	0.0
	95% CI		22.7, 37.5	17.4, 30.8	-12.9, 1.0	22.6, 41.8	18.2, 39.1	-14.4, 7.4
	Q1, Q3		11.1, 44.4	0.0, 33.3	-22.2, 0.0	11.1, 44.4	11.1, 33.3	-11.1, 11.1
	Min, Max		0.0, 88.9	0.0, 77.8	-55.6, 44.4	0.0, 77.8	0.0, 66.7	-66.7, 33.3
	Mean Diff (95% CI) [a]				-6.0 (-12.9, 1.0)			-3.5 (-14.4, 7.4)
	P-value [a]				0.090			0.506
	Mean Diff (95% CI) [b]				-2.5 (-14.8, 9.8)			
	P-value [b]				0.691			
	Effect Size (95% CI) [c]				-0.10 (-0.31, 0.11)			
	C13D1	N		32	32	32	15	15
Mean			30.6	26.0	-4.5	35.6	33.3	-2.2
SD			23.44	22.15	23.42	23.83	23.38	29.46
Median			33.3	22.2	-11.1	33.3	33.3	0.0
95% CI			22.1, 39.0	18.1, 34.0	-13.0, 3.9	22.4, 48.8	20.4, 46.3	-18.5, 14.1
Q1, Q3			11.1, 50.0	0.0, 38.9	-22.2, 5.6	11.1, 55.6	22.2, 33.3	-33.3, 22.2
Min, Max			0.0, 77.8	0.0, 77.8	-55.6, 55.6	0.0, 77.8	0.0, 88.9	-55.6, 55.6
Mean Diff (95% CI) [a]					-4.5 (-13.0, 3.9)			-2.2 (-18.5, 14.1)
P-value [a]					0.284			0.774
Mean Diff (95% CI) [b]					-2.3 (-18.3, 13.7)			
P-value [b]					0.775			
Effect Size (95% CI) [c]					-0.10 (-0.31, 0.12)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C14D1	N		33	33	33	12	12	12
	Mean		30.0	29.0	-1.0	38.9	31.5	-7.4
	SD		23.15	21.14	21.22	24.39	30.27	32.60
	Median		33.3	33.3	0.0	33.3	27.8	-11.1
	95% CI		21.8, 38.2	21.5, 36.5	-8.5, 6.5	23.4, 54.4	12.2, 50.7	-28.1, 13.3
	Q1, Q3		11.1, 44.4	11.1, 44.4	-11.1, 11.1	22.2, 61.1	5.6, 44.4	-22.2, 11.1
	Min, Max		0.0, 77.8	0.0, 77.8	-44.4, 33.3	0.0, 77.8	0.0, 100.0	-77.8, 44.4
	Mean Diff (95% CI) [a]				-1.0 (-8.5, 6.5)			-7.4 (-28.1, 13.3)
	P-value [a]				0.786			0.448
	Mean Diff (95% CI) [b]				6.4 (-10.4, 23.1)			
	P-value [b]				0.445			
	Effect Size (95% CI) [c]				0.27 (0.05, 0.48)			
	C15D1	N		28	28	28	13	13
Mean			33.3	31.7	-1.6	38.5	39.3	0.9
SD			22.83	25.07	22.97	23.40	22.51	21.97
Median			33.3	27.8	0.0	33.3	33.3	0.0
95% CI			24.5, 42.2	22.0, 41.5	-10.5, 7.3	24.3, 52.6	25.7, 52.9	-12.4, 14.1
Q1, Q3			16.7, 55.6	22.2, 44.4	-16.7, 11.1	33.3, 55.6	22.2, 55.6	-11.1, 22.2
Min, Max			0.0, 77.8	0.0, 100.0	-44.4, 44.4	0.0, 77.8	11.1, 77.8	-33.3, 33.3
Mean Diff (95% CI) [a]					-1.6 (-10.5, 7.3)			0.9 (-12.4, 14.1)
P-value [a]					0.718			0.891
Mean Diff (95% CI) [b]					-2.4 (-17.8, 12.9)			
P-value [b]					0.750			
Effect Size (95% CI) [c]					-0.10 (-0.31, 0.11)			

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[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C16D1	N	28	28	28	10	10	10
		Mean	30.2	27.8	-2.4	37.8	32.2	-5.6
		SD	22.80	22.53	24.82	21.72	21.24	20.45
		Median	27.8	33.3	0.0	33.3	33.3	-5.6
		95% CI	21.3, 39.0	19.0, 36.5	-12.0, 7.2	22.2, 53.3	17.0, 47.4	-20.2, 9.1
		Q1, Q3	11.1, 44.4	0.0, 38.9	-16.7, 5.6	33.3, 55.6	22.2, 44.4	-22.2, 11.1
		Min, Max	0.0, 77.8	0.0, 66.7	-55.6, 44.4	0.0, 66.7	0.0, 77.8	-33.3, 22.2
		Mean Diff (95% CI) [a]			-2.4 (-12.0, 7.2)			-5.6 (-20.2, 9.1)
		P-value [a]			0.616			0.413
		Mean Diff (95% CI) [b]			3.2 (-14.6, 21.0)			
		P-value [b]			0.719			
		Effect Size (95% CI) [c]			0.13 (-0.08, 0.34)			
	C17D1	N	26	26	26	7	7	7
		Mean	32.1	25.6	-6.4	42.9	38.1	-4.8
		SD	22.52	21.95	22.92	23.51	26.34	16.80
		Median	33.3	22.2	-5.6	44.4	33.3	0.0
		95% CI	23.0, 41.1	16.8, 34.5	-15.7, 2.8	21.1, 64.6	13.7, 62.5	-20.3, 10.8
		Q1, Q3	22.2, 44.4	11.1, 33.3	-22.2, 0.0	33.3, 66.7	22.2, 66.7	-11.1, 0.0
		Min, Max	0.0, 77.8	0.0, 66.7	-55.6, 44.4	0.0, 66.7	0.0, 77.8	-33.3, 22.2
		Mean Diff (95% CI) [a]			-6.4 (-15.7, 2.8)			-4.8 (-20.3, 10.8)
		P-value [a]			0.166			0.482
		Mean Diff (95% CI) [b]			-1.6 (-20.6, 17.3)			
		P-value [b]			0.861			
		Effect Size (95% CI) [c]			-0.07 (-0.28, 0.14)			

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Table 15.15.3.1  
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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C18D1	N		22	22	22	7	7	7
	Mean		34.3	26.3	-8.1	34.9	31.7	-3.2
	SD		23.23	24.38	25.01	23.51	28.28	19.99
	Median		33.3	22.2	-11.1	33.3	33.3	-11.1
	95% CI		24.0, 44.6	15.5, 37.1	-19.2, 3.0	13.2, 56.7	5.6, 57.9	-21.7, 15.3
	Q1, Q3		22.2, 55.6	0.0, 44.4	-22.2, 0.0	11.1, 55.6	0.0, 55.6	-11.1, 22.2
	Min, Max		0.0, 77.8	0.0, 88.9	-55.6, 66.7	0.0, 66.7	0.0, 77.8	-33.3, 22.2
	Mean Diff (95% CI) [a]				-8.1 (-19.2, 3.0)			-3.2 (-21.7, 15.3)
	P-value [a]				0.144			0.689
	Mean Diff (95% CI) [b]				-4.9 (-26.3, 16.4)			
	P-value [b]				0.641			
	Effect Size (95% CI) [c]				-0.20 (-0.42, 0.01)			
	C19D1	N		20	20	20	6	6
Mean			33.9	25.0	-8.9	31.5	38.9	7.4
SD			24.31	20.67	22.40	23.74	13.61	20.69
Median			33.3	27.8	0.0	33.3	33.3	5.6
95% CI			22.5, 45.3	15.3, 34.7	-19.4, 1.6	6.6, 56.4	24.6, 53.2	-14.3, 29.1
Q1, Q3			16.7, 55.6	11.1, 33.3	-22.2, 5.6	11.1, 44.4	33.3, 55.6	-11.1, 22.2
Min, Max			0.0, 77.8	0.0, 77.8	-55.6, 22.2	0.0, 66.7	22.2, 55.6	-11.1, 33.3
Mean Diff (95% CI) [a]					-8.9 (-19.4, 1.6)			7.4 (-14.3, 29.1)
P-value [a]					0.092			0.421
Mean Diff (95% CI) [b]					-16.3 (-37.5, 4.9)			
P-value [b]					0.125			
Effect Size (95% CI) [c]					-0.68 (-0.90, -0.46)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		20	20	20	4	4	4
	Mean		30.6	26.7	-3.9	36.1	36.1	0.0
	SD		26.21	18.52	18.12	27.78	13.98	15.71
	Median		27.8	27.8	0.0	38.9	33.3	-5.6
	95% CI		18.3, 42.8	18.0, 35.3	-12.4, 4.6	-8.1, 80.3	13.9, 58.4	-25.0, 25.0
	Q1, Q3		5.6, 55.6	22.2, 33.3	-11.1, 0.0	16.7, 55.6	27.8, 44.4	-11.1, 11.1
	Min, Max		0.0, 77.8	0.0, 77.8	-33.3, 33.3	0.0, 66.7	22.2, 55.6	-11.1, 22.2
	Mean Diff (95% CI) [a]				-3.9 (-12.4, 4.6)			0.0 (-25.0, 25.0)
	P-value [a]				0.349			1.000
	Mean Diff (95% CI) [b]				-3.9 (-24.1, 16.3)			
	P-value [b]				0.694			
	Effect Size (95% CI) [c]				-0.16 (-0.37, 0.05)			
	C21D1	N		18	18	18	4	4
Mean			34.0	24.7	-9.3	36.1	30.6	-5.6
SD			25.42	22.08	25.64	27.78	13.98	21.28
Median			33.3	22.2	-5.6	38.9	33.3	0.0
95% CI			21.3, 46.6	13.7, 35.7	-22.0, 3.5	-8.1, 80.3	8.3, 52.8	-39.4, 28.3
Q1, Q3			11.1, 55.6	0.0, 33.3	-22.2, 0.0	16.7, 55.6	22.2, 38.9	-22.2, 11.1
Min, Max			0.0, 77.8	0.0, 77.8	-55.6, 44.4	0.0, 66.7	11.1, 44.4	-33.3, 11.1
Mean Diff (95% CI) [a]					-9.3 (-22.0, 3.5)			-5.6 (-39.4, 28.3)
P-value [a]					0.144			0.638
Mean Diff (95% CI) [b]					-3.7 (-32.6, 25.2)			
P-value [b]					0.792			
Effect Size (95% CI) [c]					-0.15 (-0.37, 0.06)			

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		15	15	15	3	3	3	
	Mean		32.6	28.1	-4.4	37.0	22.2	-14.8	
	SD		24.29	19.64	19.61	33.95	19.25	16.97	
	Median		33.3	22.2	0.0	44.4	33.3	-11.1	
	95% CI		19.1, 46.0	17.3, 39.0	-15.3, 6.4	-47.3, 121.4	-25.6, 70.0	-57.0, 27.3	
	Q1, Q3		11.1, 55.6	22.2, 33.3	-22.2, 0.0	0.0, 66.7	0.0, 33.3	-33.3, 0.0	
	Min, Max		0.0, 77.8	0.0, 77.8	-33.3, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 0.0	
	Mean Diff (95% CI) [a]				-4.4 (-15.3, 6.4)			-14.8 (-57.0, 27.3)	
	P-value [a]				0.395			0.270	
	Mean Diff (95% CI) [b]				10.4 (-15.5, 36.2)				
	P-value [b]				0.408				
	Effect Size (95% CI) [c]				0.43 (0.22, 0.65)				
	C23D1	N		11	11	11	3	3	3
		Mean		35.4	32.3	-3.0	37.0	25.9	-11.1
SD			27.59	18.23	22.27	33.95	23.13	11.11	
Median			33.3	33.3	-11.1	44.4	33.3	-11.1	
95% CI			16.8, 53.9	20.1, 44.6	-18.0, 11.9	-47.3, 121.4	-31.5, 83.4	-38.7, 16.5	
Q1, Q3			11.1, 66.7	22.2, 44.4	-22.2, 11.1	0.0, 66.7	0.0, 44.4	-22.2, 0.0	
Min, Max			0.0, 77.8	0.0, 66.7	-33.3, 44.4	0.0, 66.7	0.0, 44.4	-22.2, 0.0	
Mean Diff (95% CI) [a]					-3.0 (-18.0, 11.9)			-11.1 (-38.7, 16.5)	
P-value [a]					0.661			0.225	
Mean Diff (95% CI) [b]					8.1 (-21.5, 37.6)				
P-value [b]					0.563				
Effect Size (95% CI) [c]					0.34 (0.12, 0.55)				

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C24D1	N		10	10	10	2	2	2
	Mean		33.3	31.1	-2.2	33.3	27.8	-5.6
	SD		28.21	17.21	20.82	47.14	39.28	7.86
	Median		27.8	33.3	0.0	33.3	27.8	-5.6
	95% CI		13.2, 53.5	18.8, 43.4	-17.1, 12.7	-390.2, 456.9	-325.2, 380.7	-76.1, 65.0
	Q1, Q3		11.1, 66.7	22.2, 33.3	-11.1, 0.0	0.0, 66.7	0.0, 55.6	-11.1, 0.0
	Min, Max		0.0, 77.8	0.0, 66.7	-33.3, 33.3	0.0, 66.7	0.0, 55.6	-11.1, 0.0
	Mean Diff (95% CI) [a]				-2.2 (-17.1, 12.7)			-5.6 (-76.1, 65.0)
	P-value [a]				0.743			0.500
	Mean Diff (95% CI) [b]				3.3 (-31.0, 37.7)			
	P-value [b]				0.833			
	Effect Size (95% CI) [c]				0.14 (-0.07, 0.35)			
	C25D1	N		9	9	9	0	0
Mean			37.0	33.3	-3.7	NE	NE	NE
SD			27.22	26.06	26.64	NE	NE	NE
Median			33.3	33.3	0.0	NE	NE	NE
95% CI			16.1, 58.0	13.3, 53.4	-24.2, 16.8	NE, NE	NE, NE	NE, NE
Q1, Q3			22.2, 66.7	22.2, 33.3	-22.2, 0.0	NE, NE	NE, NE	NE, NE
Min, Max			0.0, 77.8	0.0, 77.8	-33.3, 55.6	NE, NE	NE, NE	NE, NE
Mean Diff (95% CI) [a]					-3.7 (-24.2, 16.8)			NE (NE, NE)
P-value [a]					0.688			NE
Mean Diff (95% CI) [b]					NE (NE, NE)			
P-value [b]					NE			
Effect Size (95% CI) [c]					NE (NE, NE)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	23.6	27.8	4.2	0.0	0.0	0.0
		SD	21.77	24.49	27.18	NE	NE	NE
		Median	22.2	22.2	0.0	0.0	0.0	0.0
		95% CI	5.4, 41.8	7.3, 48.3	-18.6, 26.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	5.6, 33.3	11.1, 38.9	-11.1, 5.6	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 77.8	-22.2, 66.7	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			4.2 (-18.6, 26.9)			0.0 (NE, NE)
		P-value [a]			0.678			NE
		Mean Diff (95% CI) [b]			4.2 (-64.0, 72.3)			
		P-value [b]			0.889			
		Effect Size (95% CI) [c]			0.17 (-0.04, 0.39)			
	C27D1	N	8	8	8	1	1	1
		Mean	23.6	22.2	-1.4	0.0	0.0	0.0
		SD	21.77	21.41	26.85	NE	NE	NE
		Median	22.2	22.2	-5.6	0.0	0.0	0.0
		95% CI	5.4, 41.8	4.3, 40.1	-23.8, 21.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	5.6, 33.3	5.6, 27.8	-16.7, 5.6	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 66.7	-33.3, 55.6	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			-1.4 (-23.8, 21.1)			0.0 (NE, NE)
		P-value [a]			0.888			NE
		Mean Diff (95% CI) [b]			-1.4 (-68.7, 66.0)			
		P-value [b]			0.962			
		Effect Size (95% CI) [c]			-0.06 (-0.27, 0.15)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	22.2	22.2	0.0	0.0	0.0	0.0
		SD	23.13	20.29	24.85	NE	NE	NE
		Median	22.2	22.2	0.0	0.0	0.0	0.0
		95% CI	0.8, 43.6	3.5, 41.0	-23.0, 23.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 33.3	0.0, 33.3	-22.2, 11.1	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 55.6	-33.3, 44.4	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (-23.0, 23.0)			0.0 (NE, NE)
		P-value [a]			1.000			NE
		Mean Diff (95% CI) [b]			0.0 (-65.0, 65.0)			
		P-value [b]			1.000			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			
	C29D1	N	4	4	4	1	1	1
		Mean	33.3	38.9	5.6	0.0	55.6	55.6
		SD	24.00	36.85	50.10	NE	NE	NE
		Median	27.8	33.3	-11.1	0.0	55.6	55.6
		95% CI	-4.9, 71.5	-19.7, 97.5	-74.2, 85.3	NE, NE	NE, NE	NE, NE
		Q1, Q3	16.7, 50.0	16.7, 61.1	-27.8, 38.9	0.0, 0.0	55.6, 55.6	55.6, 55.6
		Min, Max	11.1, 66.7	0.0, 88.9	-33.3, 77.8	0.0, 0.0	55.6, 55.6	55.6, 55.6
		Mean Diff (95% CI) [a]			5.6 (-74.2, 85.3)			55.6 (NE, NE)
		P-value [a]			0.839			NE
		Mean Diff (95% CI) [b]			-50.0 (-228.3, 128.3)			
		P-value [b]			0.438			
		Effect Size (95% CI) [c]			-2.08 (-2.34, -1.81)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C30D1	N		4	4	4	1	1	1	
	Mean		16.7	25.0	8.3	0.0	44.4	44.4	
	SD		14.34	31.91	33.18	NE	NE	NE	
	Median		16.7	16.7	0.0	0.0	44.4	44.4	
	95% CI		-6.2, 39.5	-25.8, 75.8	-44.5, 61.1	NE, NE	NE, NE	NE, NE	
	Q1, Q3		5.6, 27.8	0.0, 50.0	-11.1, 27.8	0.0, 0.0	44.4, 44.4	44.4, 44.4	
	Min, Max		0.0, 33.3	0.0, 66.7	-22.2, 55.6	0.0, 0.0	44.4, 44.4	44.4, 44.4	
	Mean Diff (95% CI) [a]				8.3 (-44.5, 61.1)			44.4 (NE, NE)	
	P-value [a]				0.650			NE	
	Mean Diff (95% CI) [b]				-36.1 (-154.2, 81.9)				
	P-value [b]				0.402				
	Effect Size (95% CI) [c]				-1.50 (-1.74, -1.26)				
	C31D1	N		2	2	2	1	1	1
		Mean		27.8	11.1	-16.7	0.0	33.3	33.3
SD			7.86	15.71	7.86	NE	NE	NE	
Median			27.8	11.1	-16.7	0.0	33.3	33.3	
95% CI			-42.8, 98.4	-130.1, 152.3	-87.3, 53.9	NE, NE	NE, NE	NE, NE	
Q1, Q3			22.2, 33.3	0.0, 22.2	-22.2, -11.1	0.0, 0.0	33.3, 33.3	33.3, 33.3	
Min, Max			22.2, 33.3	0.0, 22.2	-22.2, -11.1	0.0, 0.0	33.3, 33.3	33.3, 33.3	
Mean Diff (95% CI) [a]					-16.7 (-87.3, 53.9)			33.3 (NE, NE)	
P-value [a]					0.205			NE	
Mean Diff (95% CI) [b]					-50.0 (-172.3, 72.3)				
P-value [b]					0.121				
Effect Size (95% CI) [c]					-2.08 (-2.34, -1.81)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C32D1	N		2	2	2	1	1	1	
	Mean		27.8	11.1	-16.7	0.0	33.3	33.3	
	SD		7.86	15.71	7.86	NE	NE	NE	
	Median		27.8	11.1	-16.7	0.0	33.3	33.3	
	95% CI		-42.8, 98.4	-130.1, 152.3	-87.3, 53.9	NE, NE	NE, NE	NE, NE	
	Q1, Q3		22.2, 33.3	0.0, 22.2	-22.2, -11.1	0.0, 0.0	33.3, 33.3	33.3, 33.3	
	Min, Max		22.2, 33.3	0.0, 22.2	-22.2, -11.1	0.0, 0.0	33.3, 33.3	33.3, 33.3	
	Mean Diff (95% CI) [a]				-16.7 (-87.3, 53.9)			33.3 (NE, NE)	
	P-value [a]				0.205			NE	
	Mean Diff (95% CI) [b]				-50.0 (-172.3, 72.3)				
	P-value [b]				0.121				
	Effect Size (95% CI) [c]				-2.08 (-2.34, -1.81)				
	C33D1	N		3	3	3	1	1	1
		Mean		18.5	18.5	0.0	0.0	33.3	33.3
SD			16.97	12.83	11.11	NE	NE	NE	
Median			22.2	11.1	0.0	0.0	33.3	33.3	
95% CI			-23.6, 60.7	-13.4, 50.4	-27.6, 27.6	NE, NE	NE, NE	NE, NE	
Q1, Q3			0.0, 33.3	11.1, 33.3	-11.1, 11.1	0.0, 0.0	33.3, 33.3	33.3, 33.3	
Min, Max			0.0, 33.3	11.1, 33.3	-11.1, 11.1	0.0, 0.0	33.3, 33.3	33.3, 33.3	
Mean Diff (95% CI) [a]					0.0 (-27.6, 27.6)			33.3 (NE, NE)	
P-value [a]					1.000			NE	
Mean Diff (95% CI) [b]					-33.3 (-88.5, 21.9)				
P-value [b]					0.122				
Effect Size (95% CI) [c]					-1.39 (-1.62, -1.15)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	18.5	14.8	-3.7	NE	NE	NE
		SD	16.97	25.66	16.97	NE	NE	NE
		Median	22.2	0.0	0.0	NE	NE	NE
		95% CI	-23.6, 60.7	-48.9, 78.6	-45.9, 38.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 33.3	0.0, 44.4	-22.2, 11.1	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 33.3	0.0, 44.4	-22.2, 11.1	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-3.7 (-45.9, 38.5)			NE (NE, NE)
		P-value [a]			0.742			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	27.8	16.7	-11.1	NE	NE	NE
		SD	7.86	23.57	15.71	NE	NE	NE
		Median	27.8	16.7	-11.1	NE	NE	NE
		95% CI	-42.8, 98.4	-195.1, 228.4	-152.3, 130.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	22.2, 33.3	0.0, 33.3	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	22.2, 33.3	0.0, 33.3	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-11.1 (-152.3, 130.1)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C36D1	N	3	3	3	0	0	0
		Mean	18.5	11.1	-7.4	NE	NE	NE
		SD	16.97	19.25	12.83	NE	NE	NE
		Median	22.2	0.0	0.0	NE	NE	NE
		95% CI	-23.6, 60.7	-36.7, 58.9	-39.3, 24.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 33.3	0.0, 33.3	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 33.3	0.0, 33.3	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-7.4 (-39.3, 24.5)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C37D1	N	3	3	3	0	0	0
		Mean	18.5	11.1	-7.4	NE	NE	NE
		SD	16.97	19.25	12.83	NE	NE	NE
		Median	22.2	0.0	0.0	NE	NE	NE
		95% CI	-23.6, 60.7	-36.7, 58.9	-39.3, 24.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 33.3	0.0, 33.3	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 33.3	0.0, 33.3	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-7.4 (-39.3, 24.5)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	11.1	0.0	-11.1	NE	NE	NE
		SD	15.71	0.00	15.71	NE	NE	NE
		Median	11.1	0.0	-11.1	NE	NE	NE
		95% CI	-130.1, 152.3	0.0, 0.0	-152.3, 130.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 22.2	0.0, 0.0	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 22.2	0.0, 0.0	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-11.1 (-152.3, 130.1)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	11.1	0.0	-11.1	NE	NE	NE
		SD	15.71	0.00	15.71	NE	NE	NE
		Median	11.1	0.0	-11.1	NE	NE	NE
		95% CI	-130.1, 152.3	0.0, 0.0	-152.3, 130.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 22.2	0.0, 0.0	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 22.2	0.0, 0.0	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-11.1 (-152.3, 130.1)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	11.1	0.0	-11.1	NE	NE	NE
		SD	15.71	0.00	15.71	NE	NE	NE
		Median	11.1	0.0	-11.1	NE	NE	NE
		95% CI	-130.1, 152.3	0.0, 0.0	-152.3, 130.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 22.2	0.0, 0.0	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 22.2	0.0, 0.0	-22.2, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-11.1 (-152.3, 130.1)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	11.1	11.1	0.0	NE	NE	NE
		SD	15.71	15.71	0.00	NE	NE	NE
		Median	11.1	11.1	0.0	NE	NE	NE
		95% CI	-130.1, 152.3	-130.1, 152.3	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 22.2	0.0, 22.2	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 22.2	0.0, 22.2	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	22.2	22.2	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	22.2	22.2	0.0	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	22.2, 22.2	22.2, 22.2	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	22.2, 22.2	22.2, 22.2	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	22.2	33.3	11.1	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	22.2	33.3	11.1	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	22.2, 22.2	33.3, 33.3	11.1, 11.1	NE, NE	NE, NE	NE, NE
		Min, Max	22.2, 22.2	33.3, 33.3	11.1, 11.1	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			11.1 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		131	131	131	126	126	126	
	Mean		34.2	42.0	7.8	33.3	40.5	7.2	
	SD		24.25	31.80	27.38	23.85	28.21	23.30	
	Median		33.3	33.3	0.0	33.3	33.3	11.1	
	95% CI		30.0, 38.4	36.5, 47.5	3.1, 12.5	29.1, 37.5	35.5, 45.5	3.1, 11.3	
	Q1, Q3		22.2, 44.4	11.1, 66.7	-11.1, 22.2	11.1, 44.4	22.2, 55.6	0.0, 22.2	
	Min, Max		0.0, 100.0	0.0, 100.0	-77.8, 77.8	0.0, 100.0	0.0, 100.0	-66.7, 77.8	
	Mean Diff (95% CI) [a]				7.8 (3.1, 12.5)			7.2 (3.1, 11.3)	
	P-value [a]				0.001			0.001	
	Mean Diff (95% CI) [b]				0.6 (-5.6, 6.9)				
	P-value [b]				0.846				
	Effect Size (95% CI) [c]				0.03 (-0.19, 0.24)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			26.2	34.9	8.7	25.9	51.9	25.9
SD			17.76	21.73	21.87	19.25	31.91	26.64	
Median			22.2	33.3	11.1	22.2	44.4	11.1	
95% CI			15.9, 36.4	22.4, 47.5	-3.9, 21.4	11.1, 40.7	27.3, 76.4	5.4, 46.4	
Q1, Q3			11.1, 33.3	22.2, 44.4	-11.1, 22.2	11.1, 33.3	33.3, 66.7	11.1, 33.3	
Min, Max			0.0, 55.6	0.0, 77.8	-22.2, 44.4	0.0, 66.7	11.1, 100.0	0.0, 88.9	
Mean Diff (95% CI) [a]					8.7 (-3.9, 21.4)			25.9 (5.4, 46.4)	
P-value [a]					0.159			0.019	
Mean Diff (95% CI) [b]					-17.2 (-38.3, 4.0)				
P-value [b]					0.106				
Effect Size (95% CI) [c]					-0.71 (-0.93, -0.50)				
Nausea and Vomiting	Baseline	N	174			165			
	Mean		8.4			8.7			
	SD		16.59			16.73			
	Median		0.0			0.0			
	95% CI		5.9, 10.9			6.1, 11.3			
	Q1, Q3		0.0, 16.7			0.0, 16.7			
	Min, Max		0.0, 100.0			0.0, 83.3			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C2D1	N		152	152	152	144	144	144
	Mean		8.6	13.0	4.5	8.7	10.4	1.7
	SD		16.94	16.15	14.85	16.95	16.12	17.38
	95% CI		5.8, 11.3	10.5, 15.6	2.1, 6.9	5.9, 11.5	7.8, 13.1	-1.1, 4.6
	Median		0.0	16.7	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 8.3
	Min, Max		0.0, 100.0	0.0, 100.0	-50.0, 50.0	0.0, 83.3	0.0, 83.3	-66.7, 50.0
	Mean Diff (95% CI) [a]				4.5 (2.1, 6.9)			1.7 (-1.1, 4.6)
	P-value [a]				<.001			0.233
	Mean Diff (95% CI) [b]				2.8 (-0.9, 6.5)			
	P-value [b]				0.142			
	Effect Size (95% CI) [c]				0.17 (-0.05, 0.38)			
	C3D1	N		124	124	124	101	101
Mean			7.8	10.9	3.1	7.3	8.4	1.2
SD			16.66	16.87	21.08	14.80	16.60	16.20
95% CI			4.8, 10.8	7.9, 13.9	-0.7, 6.8	4.3, 10.2	5.1, 11.7	-2.0, 4.4
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 0.0
Min, Max			0.0, 100.0	0.0, 83.3	-100.0, 66.7	0.0, 66.7	0.0, 83.3	-66.7, 66.7
Mean Diff (95% CI) [a]					3.1 (-0.7, 6.8)			1.2 (-2.0, 4.4)
P-value [a]					0.105			0.475
Mean Diff (95% CI) [b]					1.9 (-3.1, 7.0)			
P-value [b]					0.449			
Effect Size (95% CI) [c]					0.12 (-0.10, 0.33)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		8.6	10.3	1.6	8.2	6.7	-1.4
	SD		17.47	13.84	16.74	17.06	13.68	18.23
	95% CI		5.4, 11.9	7.7, 12.9	-1.5, 4.8	4.7, 11.7	3.9, 9.5	-5.2, 2.3
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 0.0
	Min, Max		0.0, 100.0	0.0, 66.7	-83.3, 50.0	0.0, 83.3	0.0, 83.3	-66.7, 50.0
	Mean Diff (95% CI) [a]				1.6 (-1.5, 4.8)			-1.4 (-5.2, 2.3)
	P-value [a]				0.303			0.453
	Mean Diff (95% CI) [b]				3.1 (-1.8, 7.9)			
	P-value [b]				0.212			
	Effect Size (95% CI) [c]				0.18 (-0.03, 0.40)			
	C5D1	N		96	96	96	80	80
Mean			7.3	8.5	1.2	7.7	6.3	-1.5
SD			15.07	15.29	18.14	16.76	12.26	17.63
95% CI			4.2, 10.3	5.4, 11.6	-2.5, 4.9	4.0, 11.4	3.5, 9.0	-5.4, 2.5
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 16.7	0.0, 16.7	0.0, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 83.3	0.0, 66.7	-66.7, 66.7
Mean Diff (95% CI) [a]					1.2 (-2.5, 4.9)			-1.5 (-5.4, 2.5)
P-value [a]					0.513			0.462
Mean Diff (95% CI) [b]					2.7 (-2.7, 8.0)			
P-value [b]					0.325			
Effect Size (95% CI) [c]					0.16 (-0.05, 0.37)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C6D1	N	96	96	96	69	69	69
		Mean	6.9	7.6	0.7	7.5	6.3	-1.2
		SD	14.84	10.79	13.66	16.30	14.03	14.66
		95% CI	3.9, 10.0	5.5, 9.8	-2.1, 3.5	3.6, 11.4	2.9, 9.7	-4.7, 2.3
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 33.3	-66.7, 33.3	0.0, 83.3	0.0, 83.3	-66.7, 33.3
		Mean Diff (95% CI) [a]			0.7 (-2.1, 3.5)			-1.2 (-4.7, 2.3)
		P-value [a]			0.620			0.496
		Mean Diff (95% CI) [b]			1.9 (-2.5, 6.3)			
		P-value [b]			0.394			
		Effect Size (95% CI) [c]			0.11 (-0.10, 0.33)			
	C7D1	N	79	79	79	53	53	53
		Mean	7.8	5.9	-1.9	6.9	5.0	-1.9
		SD	16.84	10.35	18.49	14.41	11.60	13.34
		95% CI	4.0, 11.6	3.6, 8.2	-6.0, 2.2	2.9, 10.9	1.8, 8.2	-5.6, 1.8
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 50.0	-100.0, 33.3	0.0, 66.7	0.0, 50.0	-50.0, 33.3
		Mean Diff (95% CI) [a]			-1.9 (-6.0, 2.2)			-1.9 (-5.6, 1.8)
		P-value [a]			0.364			0.308
		Mean Diff (95% CI) [b]			0.0 (-5.9, 5.8)			
		P-value [b]			0.997			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	50	50	50
	Mean		8.3	7.0	-1.3	7.3	4.0	-3.3
	SD		17.32	10.98	16.05	14.74	10.41	13.04
	95% CI		4.4, 12.3	4.5, 9.5	-5.0, 2.4	3.1, 11.5	1.0, 7.0	-7.0, 0.4
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0
	Min, Max		0.0, 100.0	0.0, 33.3	-66.7, 33.3	0.0, 66.7	0.0, 50.0	-50.0, 33.3
	Mean Diff (95% CI) [a]				-1.3 (-5.0, 2.4)			-3.3 (-7.0, 0.4)
	P-value [a]				0.477			0.077
	Mean Diff (95% CI) [b]				2.0 (-3.4, 7.4)			
	P-value [b]				0.459			
	Effect Size (95% CI) [c]				0.12 (-0.09, 0.33)			
	C9D1	N		60	60	60	42	42
Mean			9.2	7.5	-1.7	6.7	4.0	-2.8
SD			18.52	16.07	20.29	15.64	9.61	14.22
95% CI			4.4, 14.0	3.3, 11.7	-6.9, 3.6	1.9, 11.6	1.0, 7.0	-7.2, 1.7
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 83.3	0.0, 66.7	0.0, 50.0	-50.0, 16.7
Mean Diff (95% CI) [a]					-1.7 (-6.9, 3.6)			-2.8 (-7.2, 1.7)
P-value [a]					0.527			0.213
Mean Diff (95% CI) [b]					1.1 (-6.1, 8.3)			
P-value [b]					0.760			
Effect Size (95% CI) [c]					0.07 (-0.15, 0.28)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C10D1	N	N	54	54	54	30	30	30
		Mean	7.7	6.2	-1.5	8.3	5.0	-3.3
		SD	17.65	11.35	14.93	17.37	13.94	11.91
		95% CI	2.9, 12.5	3.1, 9.3	-5.6, 2.5	1.8, 14.8	-0.2, 10.2	-7.8, 1.1
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 33.3	-66.7, 33.3	0.0, 66.7	0.0, 66.7	-50.0, 16.7
		Mean Diff (95% CI) [a]			-1.5 (-5.6, 2.5)			-3.3 (-7.8, 1.1)
		P-value [a]			0.451			0.136
		Mean Diff (95% CI) [b]			1.8 (-4.5, 8.1)			
		P-value [b]			0.574			
		Effect Size (95% CI) [c]			0.11 (-0.11, 0.32)			
		C11D1	N	N	45	45	45	23
Mean	7.8			9.6	1.9	6.5	1.4	-5.1
SD	18.67			18.63	20.48	14.86	4.80	15.44
95% CI	2.2, 13.4			4.0, 15.2	-4.3, 8.0	0.1, 12.9	-0.6, 3.5	-11.7, 1.6
Median	0.0			0.0	0.0	0.0	0.0	0.0
Q1, Q3	0.0, 0.0			0.0, 16.7	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0
Min, Max	0.0, 100.0			0.0, 100.0	-66.7, 100.0	0.0, 66.7	0.0, 16.7	-66.7, 16.7
Mean Diff (95% CI) [a]					1.9 (-4.3, 8.0)			-5.1 (-11.7, 1.6)
P-value [a]					0.547			0.129
Mean Diff (95% CI) [b]					6.9 (-2.8, 16.6)			
P-value [b]					0.159			
Effect Size (95% CI) [c]					0.41 (0.20, 0.63)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C12D1	N		41	41	41	19	19	19
	Mean		8.5	9.8	1.2	5.3	1.8	-3.5
	SD		19.41	16.23	18.41	9.71	5.26	10.51
	95% CI		2.4, 14.7	4.6, 14.9	-4.6, 7.0	0.6, 9.9	-0.8, 4.3	-8.6, 1.6
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0
	Min, Max		0.0, 100.0	0.0, 66.7	-66.7, 66.7	0.0, 33.3	0.0, 16.7	-33.3, 16.7
	Mean Diff (95% CI) [a]				1.2 (-4.6, 7.0)			-3.5 (-8.6, 1.6)
	P-value [a]				0.674			0.163
	Mean Diff (95% CI) [b]				4.7 (-4.4, 13.8)			
	P-value [b]				0.302			
	Effect Size (95% CI) [c]				0.28 (0.07, 0.50)			
	C13D1	N		32	32	32	15	15
Mean			7.3	10.4	3.1	4.4	2.2	-2.2
SD			14.00	21.48	21.77	9.89	5.86	10.67
95% CI			2.2, 12.3	2.7, 18.2	-4.7, 11.0	-1.0, 9.9	-1.0, 5.5	-8.1, 3.7
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 8.3	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
Min, Max			0.0, 50.0	0.0, 100.0	-33.3, 100.0	0.0, 33.3	0.0, 16.7	-33.3, 16.7
Mean Diff (95% CI) [a]					3.1 (-4.7, 11.0)			-2.2 (-8.1, 3.7)
P-value [a]					0.423			0.433
Mean Diff (95% CI) [b]					5.3 (-6.6, 17.3)			
P-value [b]					0.374			
Effect Size (95% CI) [c]					0.32 (0.11, 0.53)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C14D1	N	33	33	33	12	12	12
		Mean	7.1	6.6	-0.5	2.8	5.6	2.8
		SD	13.84	14.40	11.40	6.49	8.21	9.62
		95% CI	2.2, 12.0	1.5, 11.7	-4.5, 3.5	-1.3, 6.9	0.3, 10.8	-3.3, 8.9
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 16.7	0.0, 8.3
		Min, Max	0.0, 50.0	0.0, 66.7	-33.3, 33.3	0.0, 16.7	0.0, 16.7	-16.7, 16.7
		Mean Diff (95% CI) [a]			-0.5 (-4.5, 3.5)			2.8 (-3.3, 8.9)
		P-value [a]			0.801			0.339
		Mean Diff (95% CI) [b]			-3.3 (-10.7, 4.2)			
		P-value [b]			0.380			
		Effect Size (95% CI) [c]			-0.20 (-0.41, 0.02)			
	C15D1	N	28	28	28	13	13	13
		Mean	8.3	6.5	-1.8	5.1	1.3	-3.8
		SD	14.70	17.18	11.42	10.51	4.62	9.99
		95% CI	2.6, 14.0	-0.1, 13.2	-6.2, 2.6	-1.2, 11.5	-1.5, 4.1	-9.9, 2.2
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 50.0	0.0, 83.3	-33.3, 33.3	0.0, 33.3	0.0, 16.7	-33.3, 0.0
		Mean Diff (95% CI) [a]			-1.8 (-6.2, 2.6)			-3.8 (-9.9, 2.2)
		P-value [a]			0.415			0.190
		Mean Diff (95% CI) [b]			2.1 (-5.4, 9.5)			
		P-value [b]			0.580			
		Effect Size (95% CI) [c]			0.12 (-0.09, 0.34)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C16D1	N		28	28	28	10	10	10
	Mean		7.7	10.1	2.4	5.0	8.3	3.3
	SD		14.69	14.59	14.14	11.25	14.16	17.21
	95% CI		2.0, 13.4	4.5, 15.8	-3.1, 7.9	-3.0, 13.0	-1.8, 18.5	-9.0, 15.6
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 8.3	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 16.7	0.0, 16.7
	Min, Max		0.0, 50.0	0.0, 50.0	-16.7, 50.0	0.0, 33.3	0.0, 33.3	-33.3, 33.3
	Mean Diff (95% CI) [a]				2.4 (-3.1, 7.9)			3.3 (-9.0, 15.6)
	P-value [a]				0.381			0.555
	Mean Diff (95% CI) [b]				-1.0 (-12.1, 10.2)			
	P-value [b]				0.864			
	Effect Size (95% CI) [c]				-0.06 (-0.27, 0.16)			
	C17D1	N		26	26	26	7	7
Mean			8.3	9.0	0.6	2.4	0.0	-2.4
SD			15.09	15.80	13.73	6.30	0.00	6.30
95% CI			2.2, 14.4	2.6, 15.4	-4.9, 6.2	-3.4, 8.2	0.0, 0.0	-8.2, 3.4
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
Min, Max			0.0, 50.0	0.0, 50.0	-33.3, 50.0	0.0, 16.7	0.0, 0.0	-16.7, 0.0
Mean Diff (95% CI) [a]					0.6 (-4.9, 6.2)			-2.4 (-8.2, 3.4)
P-value [a]					0.814			0.356
Mean Diff (95% CI) [b]					3.0 (-8.0, 14.0)			
P-value [b]					0.578			
Effect Size (95% CI) [c]					0.18 (-0.03, 0.39)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C18D1	N		22	22	22	7	7	7
	Mean		7.6	5.3	-2.3	2.4	2.4	0.0
	SD		13.34	9.47	12.91	6.30	6.30	9.62
	95% CI		1.7, 13.5	1.1, 9.5	-8.0, 3.4	-3.4, 8.2	-3.4, 8.2	-8.9, 8.9
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
	Min, Max		0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 16.7	0.0, 16.7	-16.7, 16.7
	Mean Diff (95% CI) [a]				-2.3 (-8.0, 3.4)			0.0 (-8.9, 8.9)
	P-value [a]				0.418			1.000
	Mean Diff (95% CI) [b]				-2.3 (-13.2, 8.6)			
	P-value [b]				0.672			
	Effect Size (95% CI) [c]				-0.14 (-0.35, 0.08)			
	C19D1	N		20	20	20	6	6
Mean			8.3	4.2	-4.2	2.8	5.6	2.8
SD			13.79	10.64	15.17	6.80	8.61	6.80
95% CI			1.9, 14.8	-0.8, 9.1	-11.3, 2.9	-4.4, 9.9	-3.5, 14.6	-4.4, 9.9
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 16.7	0.0, 0.0
Min, Max			0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 16.7	0.0, 16.7	0.0, 16.7
Mean Diff (95% CI) [a]					-4.2 (-11.3, 2.9)			2.8 (-4.4, 9.9)
P-value [a]					0.234			0.363
Mean Diff (95% CI) [b]					-6.9 (-20.3, 6.4)			
P-value [b]					0.292			
Effect Size (95% CI) [c]					-0.42 (-0.63, -0.20)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C20D1	N		20	20	20	4	4	4	
	Mean		6.7	5.8	-0.8	4.2	4.2	0.0	
	SD		12.57	11.18	11.44	8.33	8.33	0.00	
	95% CI		0.8, 12.5	0.6, 11.1	-6.2, 4.5	-9.1, 17.4	-9.1, 17.4	0.0, 0.0	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	Q1, Q3		0.0, 8.3	0.0, 8.3	0.0, 0.0	0.0, 8.3	0.0, 8.3	0.0, 0.0	
	Min, Max		0.0, 33.3	0.0, 33.3	-16.7, 33.3	0.0, 16.7	0.0, 16.7	0.0, 0.0	
	Mean Diff (95% CI) [a]				-0.8 (-6.2, 4.5)			0.0 (0.0, 0.0)	
	P-value [a]				0.748			NE	
	Mean Diff (95% CI) [b]				-0.8 (-12.9, 11.2)				
	P-value [b]				0.887				
	Effect Size (95% CI) [c]				-0.05 (-0.26, 0.16)				
	C21D1	N		18	18	18	4	4	4
		Mean		7.4	2.8	-4.6	4.2	8.3	4.2
SD			13.06	6.39	9.58	8.33	9.62	8.33	
95% CI			0.9, 13.9	-0.4, 6.0	-9.4, 0.1	-9.1, 17.4	-7.0, 23.6	-9.1, 17.4	
Median			0.0	0.0	0.0	0.0	8.3	0.0	
Q1, Q3			0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 8.3	0.0, 16.7	0.0, 8.3	
Min, Max			0.0, 33.3	0.0, 16.7	-33.3, 0.0	0.0, 16.7	0.0, 16.7	0.0, 16.7	
Mean Diff (95% CI) [a]					-4.6 (-9.4, 0.1)			4.2 (-9.1, 17.4)	
P-value [a]					0.056			0.391	
Mean Diff (95% CI) [b]					-8.8 (-19.6, 2.0)				
P-value [b]					0.106				
Effect Size (95% CI) [c]					-0.53 (-0.74, -0.31)				

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		15	15	15	3	3	3	
	Mean		6.7	4.4	-2.2	5.6	5.6	0.0	
	SD		12.28	7.63	8.61	9.62	9.62	0.00	
	95% CI		-0.1, 13.5	0.2, 8.7	-7.0, 2.5	-18.3, 29.5	-18.3, 29.5	0.0, 0.0	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	Q1, Q3		0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 16.7	0.0, 16.7	0.0, 0.0	
	Min, Max		0.0, 33.3	0.0, 16.7	-16.7, 16.7	0.0, 16.7	0.0, 16.7	0.0, 0.0	
	Mean Diff (95% CI) [a]				-2.2 (-7.0, 2.5)			0.0 (0.0, 0.0)	
	P-value [a]				0.334			NE	
	Mean Diff (95% CI) [b]				-2.2 (-13.0, 8.6)				
	P-value [b]				0.668				
	Effect Size (95% CI) [c]				-0.13 (-0.35, 0.08)				
	C23D1	N		11	11	11	3	3	3
		Mean		6.1	9.1	3.0	5.6	5.6	0.0
SD			11.24	20.23	16.36	9.62	9.62	0.00	
95% CI			-1.5, 13.6	-4.5, 22.7	-8.0, 14.0	-18.3, 29.5	-18.3, 29.5	0.0, 0.0	
Median			0.0	0.0	0.0	0.0	0.0	0.0	
Q1, Q3			0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 16.7	0.0, 16.7	0.0, 0.0	
Min, Max			0.0, 33.3	0.0, 66.7	-16.7, 50.0	0.0, 16.7	0.0, 16.7	0.0, 0.0	
Mean Diff (95% CI) [a]					3.0 (-8.0, 14.0)			0.0 (0.0, 0.0)	
P-value [a]					0.553			NE	
Mean Diff (95% CI) [b]					3.0 (-18.2, 24.2)				
P-value [b]					0.761				
Effect Size (95% CI) [c]					0.18 (-0.03, 0.39)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C24D1	N		10	10	10	2	2	2	
	Mean		3.3	15.0	11.7	8.3	8.3	0.0	
	SD		7.03	26.59	23.64	11.79	11.79	0.00	
	95% CI		-1.7, 8.4	-4.0, 34.0	-5.2, 28.6	-97.6, 114.2	-97.6, 114.2	0.0, 0.0	
	Median		0.0	0.0	0.0	8.3	8.3	0.0	
	Q1, Q3		0.0, 0.0	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 0.0	
	Min, Max		0.0, 16.7	0.0, 83.3	-16.7, 66.7	0.0, 16.7	0.0, 16.7	0.0, 0.0	
	Mean Diff (95% CI) [a]				11.7 (-5.2, 28.6)			0.0 (0.0, 0.0)	
	P-value [a]				0.153			NE	
	Mean Diff (95% CI) [b]				11.7 (-27.0, 50.4)				
	P-value [b]				0.517				
	Effect Size (95% CI) [c]				0.70 (0.48, 0.92)				
	C25D1	N		9	9	9	0	0	0
		Mean		3.7	3.7	0.0	NE	NE	NE
SD			7.35	7.35	8.33	NE	NE	NE	
95% CI			-1.9, 9.4	-1.9, 9.4	-6.4, 6.4	NE, NE	NE, NE	NE, NE	
Median			0.0	0.0	0.0	NE	NE	NE	
Q1, Q3			0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE	
Min, Max			0.0, 16.7	0.0, 16.7	-16.7, 16.7	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					0.0 (-6.4, 6.4)			NE (NE, NE)	
P-value [a]					1.000			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	2.1	6.3	4.2	0.0	0.0	0.0
		SD	5.89	17.68	19.42	NE	NE	NE
		95% CI	-2.8, 7.0	-8.5, 21.0	-12.1, 20.4	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 16.7	0.0, 50.0	-16.7, 50.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			4.2 (-12.1, 20.4)			0.0 (NE, NE)
		P-value [a]			0.563			NE
		Mean Diff (95% CI) [b]			4.2 (-44.5, 52.9)			
		P-value [b]			0.845			
		Effect Size (95% CI) [c]			0.25 (0.04, 0.46)			
	C27D1	N	8	8	8	1	1	1
		Mean	2.1	0.0	-2.1	0.0	0.0	0.0
		SD	5.89	0.00	5.89	NE	NE	NE
		95% CI	-2.8, 7.0	0.0, 0.0	-7.0, 2.8	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 16.7	0.0, 0.0	-16.7, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			-2.1 (-7.0, 2.8)			0.0 (NE, NE)
		P-value [a]			0.351			NE
		Mean Diff (95% CI) [b]			-2.1 (-16.9, 12.7)			
		P-value [b]			0.749			
		Effect Size (95% CI) [c]			-0.12 (-0.34, 0.09)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	2.4	0.0	-2.4	0.0	0.0	0.0
		SD	6.30	0.00	6.30	NE	NE	NE
		95% CI	-3.4, 8.2	0.0, 0.0	-8.2, 3.4	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 16.7	0.0, 0.0	-16.7, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			-2.4 (-8.2, 3.4)			0.0 (NE, NE)
		P-value [a]			0.356			NE
		Mean Diff (95% CI) [b]			-2.4 (-18.9, 14.1)			
		P-value [b]			0.736			
		Effect Size (95% CI) [c]			-0.14 (-0.36, 0.07)			
	C29D1	N	4	4	4	1	1	1
		Mean	0.0	0.0	0.0	0.0	0.0	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C30D1	N	4	4	4	1	1	1
		Mean	0.0	0.0	0.0	0.0	0.0	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			
	C31D1	N	2	2	2	1	1	1
		Mean	0.0	0.0	0.0	0.0	0.0	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	0.0	0.0	0.0	0.0	0.0	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			
	C33D1	N	3	3	3	1	1	1
		Mean	0.0	0.0	0.0	0.0	0.0	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C36D1	N	3	3	3	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C37D1	N	3	3	3	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		130	130	130	126	126	126	
	Mean		8.7	13.2	4.5	7.5	10.6	3.0	
	SD		16.37	19.87	19.55	16.28	20.40	20.37	
	95% CI		5.9, 11.6	9.8, 16.7	1.1, 7.9	4.7, 10.4	7.0, 14.2	-0.5, 6.6	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	Q1, Q3		0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	0.0, 16.7	
	Min, Max		0.0, 83.3	0.0, 100.0	-50.0, 83.3	0.0, 83.3	0.0, 100.0	-66.7, 83.3	
	Mean Diff (95% CI) [a]				4.5 (1.1, 7.9)			3.0 (-0.5, 6.6)	
	P-value [a]				0.010			0.096	
	Mean Diff (95% CI) [b]				1.4 (-3.5, 6.4)				
	P-value [b]				0.563				
	Effect Size (95% CI) [c]				0.09 (-0.13, 0.30)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			6.0	1.2	-4.8	3.7	24.1	20.4
SD			15.48	4.45	16.57	7.35	33.45	36.11	
95% CI			-3.0, 14.9	-1.4, 3.8	-14.3, 4.8	-1.9, 9.4	-1.6, 49.8	-7.4, 48.1	
Median			0.0	0.0	0.0	0.0	16.7	0.0	
Q1, Q3			0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 33.3	
Min, Max			0.0, 50.0	0.0, 16.7	-50.0, 16.7	0.0, 16.7	0.0, 100.0	-16.7, 100.0	
Mean Diff (95% CI) [a]					-4.8 (-14.3, 4.8)			20.4 (-7.4, 48.1)	
P-value [a]					0.302			0.129	
Mean Diff (95% CI) [b]					-25.1 (-48.1, -2.2)				
P-value [b]					0.033				
Effect Size (95% CI) [c]					-1.51 (-1.75, -1.26)				
Pain	Baseline	N	174			165			
	Mean		28.6			30.9			
	SD		27.62			27.00			
	95% CI		24.5, 32.8			26.8, 35.1			
	Median		25.0			33.3			
	Q1, Q3		0.0, 50.0			16.7, 50.0			
	Min, Max		0.0, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C2D1	N		152	152	152	145	145	145	
	Mean		27.1	25.8	-1.3	29.4	29.1	-0.3	
	SD		27.52	24.70	24.97	26.72	27.27	24.49	
	Median		16.7	16.7	0.0	16.7	16.7	0.0	
	95% CI		22.7, 31.5	21.8, 29.7	-5.3, 2.7	25.0, 33.8	24.6, 33.6	-4.4, 3.7	
	Q1, Q3		0.0, 50.0	0.0, 33.3	-16.7, 16.7	0.0, 33.3	16.7, 33.3	-16.7, 16.7	
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 83.3	0.0, 100.0	0.0, 100.0	-66.7, 83.3	
	Mean Diff (95% CI) [a]				-1.3 (-5.3, 2.7)			-0.3 (-4.4, 3.7)	
	P-value [a]				0.517			0.866	
	Mean Diff (95% CI) [b]				-1.0 (-6.6, 4.7)				
	P-value [b]				0.736				
	Effect Size (95% CI) [c]				-0.04 (-0.25, 0.18)				
	C3D1	N		124	124	124	102	102	102
		Mean		27.8	22.3	-5.5	27.6	25.5	-2.1
SD			27.19	22.98	23.73	26.27	25.23	25.01	
Median			16.7	16.7	0.0	16.7	16.7	0.0	
95% CI			23.0, 32.7	18.2, 26.4	-9.7, -1.3	22.5, 32.8	20.5, 30.4	-7.0, 2.8	
Q1, Q3			0.0, 50.0	0.0, 33.3	-16.7, 0.0	0.0, 50.0	0.0, 33.3	-16.7, 16.7	
Min, Max			0.0, 100.0	0.0, 100.0	-100.0, 50.0	0.0, 100.0	0.0, 100.0	-83.3, 66.7	
Mean Diff (95% CI) [a]					-5.5 (-9.7, -1.3)			-2.1 (-7.0, 2.8)	
P-value [a]					0.011			0.393	
Mean Diff (95% CI) [b]					-3.4 (-9.8, 3.0)				
P-value [b]					0.299				
Effect Size (95% CI) [c]					-0.12 (-0.34, 0.09)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		31.0	22.8	-8.2	29.6	25.5	-4.1
	SD		28.02	24.20	28.56	26.11	27.18	24.52
	Median		33.3	16.7	0.0	33.3	16.7	0.0
	95% CI		25.7, 36.2	18.2, 27.3	-13.5, -2.8	24.3, 35.0	20.0, 31.1	-9.1, 0.9
	Q1, Q3		0.0, 50.0	0.0, 33.3	-16.7, 0.0	0.0, 50.0	0.0, 33.3	-16.7, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 100.0	-66.7, 83.3
	Mean Diff (95% CI) [a]				-8.2 (-13.5, -2.8)			-4.1 (-9.1, 0.9)
	P-value [a]				0.003			0.110
	Mean Diff (95% CI) [b]				-4.1 (-11.5, 3.3)			
	P-value [b]				0.275			
	Effect Size (95% CI) [c]				-0.15 (-0.36, 0.06)			
	C5D1	N		98	98	98	80	80
Mean			28.9	20.9	-8.0	30.0	26.5	-3.5
SD			27.45	21.71	24.43	26.97	27.77	26.48
Median			16.7	16.7	0.0	33.3	16.7	0.0
95% CI			23.4, 34.4	16.6, 25.3	-12.9, -3.1	24.0, 36.0	20.3, 32.6	-9.4, 2.4
Q1, Q3			0.0, 50.0	0.0, 33.3	-16.7, 0.0	0.0, 50.0	0.0, 50.0	-16.7, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 66.7
Mean Diff (95% CI) [a]					-8.0 (-12.9, -3.1)			-3.5 (-9.4, 2.4)
P-value [a]					0.002			0.235
Mean Diff (95% CI) [b]					-4.5 (-12.0, 3.1)			
P-value [b]					0.246			
Effect Size (95% CI) [c]					-0.16 (-0.38, 0.05)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C6D1	N		96	96	96	69	69	69
	Mean		28.6	20.0	-8.7	30.2	27.8	-2.4
	SD		27.22	22.11	25.59	27.61	28.68	26.39
	Median		16.7	16.7	0.0	16.7	16.7	0.0
	95% CI		23.1, 34.2	15.5, 24.4	-13.9, -3.5	23.6, 36.8	20.9, 34.7	-8.8, 3.9
	Q1, Q3		0.0, 50.0	0.0, 33.3	-16.7, 0.0	0.0, 50.0	0.0, 50.0	-16.7, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 100.0	-66.7, 66.7
	Mean Diff (95% CI) [a]				-8.7 (-13.9, -3.5)			-2.4 (-8.8, 3.9)
	P-value [a]				0.001			0.450
	Mean Diff (95% CI) [b]				-6.3 (-14.3, 1.8)			
	P-value [b]				0.128			
	Effect Size (95% CI) [c]				-0.23 (-0.44, -0.02)			
	C7D1	N		79	79	79	53	53
Mean			29.3	20.5	-8.9	28.3	20.1	-8.2
SD			28.14	21.84	23.09	28.23	26.02	24.60
Median			16.7	16.7	0.0	16.7	16.7	0.0
95% CI			23.0, 35.6	15.6, 25.4	-14.0, -3.7	20.5, 36.1	13.0, 27.3	-15.0, -1.4
Q1, Q3			0.0, 50.0	0.0, 33.3	-16.7, 0.0	0.0, 50.0	0.0, 33.3	-33.3, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-83.3, 33.3	0.0, 100.0	0.0, 100.0	-66.7, 50.0
Mean Diff (95% CI) [a]					-8.9 (-14.0, -3.7)			-8.2 (-15.0, -1.4)
P-value [a]					0.001			0.019
Mean Diff (95% CI) [b]					-0.7 (-9.0, 7.6)			
P-value [b]					0.871			
Effect Size (95% CI) [c]					-0.03 (-0.24, 0.19)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	50	50	50
	Mean		29.8	20.4	-9.4	28.7	19.3	-9.3
	SD		27.40	22.21	23.31	28.58	25.28	23.37
	Median		16.7	16.7	0.0	16.7	8.3	0.0
	95% CI		23.6, 36.1	15.3, 25.5	-14.8, -4.1	20.5, 36.8	12.1, 26.5	-16.0, -2.7
	Q1, Q3		0.0, 50.0	0.0, 33.3	-16.7, 0.0	0.0, 50.0	0.0, 33.3	-16.7, 0.0
	Min, Max		0.0, 100.0	0.0, 66.7	-83.3, 33.3	0.0, 100.0	0.0, 100.0	-66.7, 50.0
	Mean Diff (95% CI) [a]				-9.4 (-14.8, -4.1)			-9.3 (-16.0, -2.7)
	P-value [a]				0.001			0.007
	Mean Diff (95% CI) [b]				-0.1 (-8.5, 8.3)			
	P-value [b]				0.982			
	Effect Size (95% CI) [c]				0.00 (-0.22, 0.21)			
	C9D1	N		60	60	60	42	42
Mean			25.8	21.7	-4.2	30.2	25.0	-5.2
SD			25.93	24.61	22.89	29.50	28.57	27.67
Median			16.7	16.7	0.0	16.7	16.7	0.0
95% CI			19.1, 32.5	15.3, 28.0	-10.1, 1.7	21.0, 39.4	16.1, 33.9	-13.8, 3.5
Q1, Q3			0.0, 50.0	0.0, 33.3	-16.7, 0.0	0.0, 66.7	0.0, 33.3	-16.7, 0.0
Min, Max			0.0, 100.0	0.0, 83.3	-66.7, 50.0	0.0, 100.0	0.0, 100.0	-66.7, 66.7
Mean Diff (95% CI) [a]					-4.2 (-10.1, 1.7)			-5.2 (-13.8, 3.5)
P-value [a]					0.164			0.234
Mean Diff (95% CI) [b]					1.0 (-9.0, 11.0)			
P-value [b]					0.844			
Effect Size (95% CI) [c]					0.04 (-0.18, 0.25)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C10D1	N	54	54	54	30	30	30
		Mean	26.9	23.5	-3.4	36.1	26.7	-9.4
		SD	26.78	24.98	23.43	30.03	26.84	23.03
		Median	16.7	16.7	0.0	33.3	25.0	0.0
		95% CI	19.5, 34.2	16.6, 30.3	-9.8, 3.0	24.9, 47.3	16.6, 36.7	-18.0, -0.8
		Q1, Q3	0.0, 50.0	0.0, 33.3	-16.7, 0.0	16.7, 66.7	0.0, 50.0	-16.7, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-50.0, 66.7	0.0, 100.0	0.0, 100.0	-50.0, 50.0
		Mean Diff (95% CI) [a]			-3.4 (-9.8, 3.0)			-9.4 (-18.0, -0.8)
		P-value [a]			0.292			0.032
		Mean Diff (95% CI) [b]			6.0 (-4.5, 16.6)			
		P-value [b]			0.257			
		Effect Size (95% CI) [c]			0.22 (0.01, 0.43)			
	C11D1	N	46	46	46	23	23	23
		Mean	28.6	23.6	-5.1	25.4	22.5	-2.9
		SD	27.14	26.66	25.79	25.56	19.85	27.82
		Median	16.7	16.7	0.0	16.7	16.7	0.0
		95% CI	20.6, 36.7	15.6, 31.5	-12.7, 2.6	14.3, 36.4	13.9, 31.0	-14.9, 9.1
		Q1, Q3	0.0, 50.0	0.0, 33.3	-16.7, 16.7	0.0, 33.3	0.0, 33.3	-33.3, 16.7
		Min, Max	0.0, 100.0	0.0, 100.0	-50.0, 50.0	0.0, 83.3	0.0, 50.0	-50.0, 50.0
		Mean Diff (95% CI) [a]			-5.1 (-12.7, 2.6)			-2.9 (-14.9, 9.1)
		P-value [a]			0.189			0.622
		Mean Diff (95% CI) [b]			-2.2 (-15.7, 11.3)			
		P-value [b]			0.749			
		Effect Size (95% CI) [c]			-0.08 (-0.29, 0.13)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		41	41	41	19	19	19	
	Mean		28.5	22.4	-6.1	27.2	21.9	-5.3	
	SD		25.89	26.77	22.90	23.71	27.25	37.29	
	Median		16.7	16.7	0.0	16.7	16.7	0.0	
	95% CI		20.3, 36.6	13.9, 30.8	-13.3, 1.1	15.8, 38.6	8.8, 35.1	-23.2, 12.7	
	Q1, Q3		0.0, 50.0	0.0, 33.3	-16.7, 0.0	0.0, 50.0	0.0, 33.3	-33.3, 33.3	
	Min, Max		0.0, 100.0	0.0, 83.3	-50.0, 50.0	0.0, 66.7	0.0, 83.3	-66.7, 66.7	
	Mean Diff (95% CI) [a]				-6.1 (-13.3, 1.1)			-5.3 (-23.2, 12.7)	
	P-value [a]				0.096			0.546	
	Mean Diff (95% CI) [b]				-0.8 (-16.5, 14.8)				
	P-value [b]				0.915				
	Effect Size (95% CI) [c]				-0.03 (-0.24, 0.18)				
	C13D1	N		33	33	33	15	15	15
		Mean		25.3	18.2	-7.1	28.9	20.0	-8.9
SD			23.98	22.19	23.95	28.50	25.35	35.56	
Median			16.7	0.0	0.0	16.7	0.0	-16.7	
95% CI			16.7, 33.8	10.3, 26.1	-15.6, 1.4	13.1, 44.7	6.0, 34.0	-28.6, 10.8	
Q1, Q3			0.0, 50.0	0.0, 33.3	-33.3, 0.0	0.0, 50.0	0.0, 33.3	-33.3, 16.7	
Min, Max			0.0, 66.7	0.0, 66.7	-50.0, 33.3	0.0, 83.3	0.0, 66.7	-50.0, 66.7	
Mean Diff (95% CI) [a]					-7.1 (-15.6, 1.4)			-8.9 (-28.6, 10.8)	
P-value [a]					0.100			0.349	
Mean Diff (95% CI) [b]					1.8 (-15.7, 19.4)				
P-value [b]					0.836				
Effect Size (95% CI) [c]					0.07 (-0.15, 0.28)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C14D1	N	33	33	33	12	12	12
		Mean	25.8	20.7	-5.1	30.6	23.6	-6.9
		SD	24.33	24.66	23.75	30.01	33.68	31.35
		Median	16.7	16.7	0.0	25.0	0.0	-16.7
		95% CI	17.1, 34.4	12.0, 29.5	-13.5, 3.4	11.5, 49.6	2.2, 45.0	-26.9, 13.0
		Q1, Q3	0.0, 50.0	0.0, 33.3	-16.7, 16.7	0.0, 58.3	0.0, 41.7	-33.3, 16.7
		Min, Max	0.0, 66.7	0.0, 83.3	-50.0, 33.3	0.0, 83.3	0.0, 100.0	-50.0, 50.0
		Mean Diff (95% CI) [a]			-5.1 (-13.5, 3.4)			-6.9 (-26.9, 13.0)
		P-value [a]			0.231			0.459
		Mean Diff (95% CI) [b]			1.9 (-15.7, 19.5)			
		P-value [b]			0.829			
		Effect Size (95% CI) [c]			0.07 (-0.14, 0.28)			
	C15D1	N	28	28	28	13	13	13
		Mean	26.8	18.5	-8.3	32.1	29.5	-2.6
		SD	24.99	21.91	23.79	29.24	26.49	27.93
		Median	16.7	8.3	0.0	33.3	33.3	0.0
		95% CI	17.1, 36.5	10.0, 26.9	-17.6, 0.9	14.4, 49.7	13.5, 45.5	-19.4, 14.3
		Q1, Q3	0.0, 50.0	0.0, 33.3	-25.0, 8.3	0.0, 50.0	0.0, 33.3	-16.7, 16.7
		Min, Max	0.0, 66.7	0.0, 66.7	-50.0, 33.3	0.0, 83.3	0.0, 83.3	-50.0, 33.3
		Mean Diff (95% CI) [a]			-8.3 (-17.6, 0.9)			-2.6 (-19.4, 14.3)
		P-value [a]			0.075			0.746
		Mean Diff (95% CI) [b]			-5.8 (-22.8, 11.3)			
		P-value [b]			0.498			
		Effect Size (95% CI) [c]			-0.21 (-0.42, 0.00)			

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C16D1	N	28	28	28	10	10	10
		Mean	27.4	20.2	-7.1	35.0	28.3	-6.7
		SD	24.52	22.39	21.96	31.87	28.38	25.09
		Median	16.7	16.7	0.0	33.3	25.0	-8.3
		95% CI	17.9, 36.9	11.6, 28.9	-15.7, 1.4	12.2, 57.8	8.0, 48.6	-24.6, 11.3
		Q1, Q3	0.0, 50.0	0.0, 33.3	-16.7, 0.0	0.0, 66.7	0.0, 33.3	-16.7, 16.7
		Min, Max	0.0, 66.7	0.0, 66.7	-50.0, 33.3	0.0, 83.3	0.0, 83.3	-50.0, 33.3
		Mean Diff (95% CI) [a]			-7.1 (-15.7, 1.4)			-6.7 (-24.6, 11.3)
		P-value [a]			0.097			0.423
		Mean Diff (95% CI) [b]			-0.5 (-17.5, 16.5)			
		P-value [b]			0.955			
		Effect Size (95% CI) [c]			-0.02 (-0.23, 0.20)			
	C17D1	N	26	26	26	7	7	7
		Mean	26.9	20.5	-6.4	42.9	26.2	-16.7
		SD	24.98	25.52	23.61	31.71	30.21	21.52
		Median	16.7	16.7	0.0	50.0	16.7	-16.7
		95% CI	16.8, 37.0	10.2, 30.8	-15.9, 3.1	13.5, 72.2	-1.7, 54.1	-36.6, 3.2
		Q1, Q3	0.0, 50.0	0.0, 33.3	-16.7, 0.0	16.7, 66.7	0.0, 66.7	-33.3, 0.0
		Min, Max	0.0, 66.7	0.0, 100.0	-50.0, 50.0	0.0, 83.3	0.0, 66.7	-50.0, 16.7
		Mean Diff (95% CI) [a]			-6.4 (-15.9, 3.1)			-16.7 (-36.6, 3.2)
		P-value [a]			0.178			0.086
		Mean Diff (95% CI) [b]			10.3 (-9.9, 30.4)			
		P-value [b]			0.308			
		Effect Size (95% CI) [c]			0.37 (0.16, 0.59)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C18D1	N		22	22	22	7	7	7
	Mean		28.8	21.2	-7.6	33.3	16.7	-16.7
	SD		25.29	28.26	25.58	33.33	21.52	28.87
	Median		16.7	0.0	0.0	16.7	0.0	-16.7
	95% CI		17.6, 40.0	8.7, 33.7	-18.9, 3.8	2.5, 64.2	-3.2, 36.6	-43.4, 10.0
	Q1, Q3		0.0, 50.0	0.0, 33.3	-33.3, 0.0	0.0, 66.7	0.0, 33.3	-50.0, 0.0
	Min, Max		0.0, 66.7	0.0, 100.0	-50.0, 50.0	0.0, 83.3	0.0, 50.0	-50.0, 33.3
	Mean Diff (95% CI) [a]				-7.6 (-18.9, 3.8)			-16.7 (-43.4, 10.0)
	P-value [a]				0.179			0.177
	Mean Diff (95% CI) [b]				9.1 (-14.4, 32.5)			
	P-value [b]				0.433			
	Effect Size (95% CI) [c]				0.33 (0.12, 0.55)			
	C19D1	N		20	20	20	6	6
Mean			29.2	25.0	-4.2	27.8	30.6	2.8
SD			25.29	27.84	26.42	32.77	19.48	22.15
Median			16.7	16.7	0.0	16.7	25.0	16.7
95% CI			17.3, 41.0	12.0, 38.0	-16.5, 8.2	-6.6, 62.2	10.1, 51.0	-20.5, 26.0
Q1, Q3			8.3, 50.0	0.0, 33.3	-25.0, 16.7	0.0, 50.0	16.7, 33.3	-16.7, 16.7
Min, Max			0.0, 66.7	0.0, 83.3	-50.0, 50.0	0.0, 83.3	16.7, 66.7	-33.3, 16.7
Mean Diff (95% CI) [a]					-4.2 (-16.5, 8.2)			2.8 (-20.5, 26.0)
P-value [a]					0.489			0.771
Mean Diff (95% CI) [b]					-6.9 (-31.5, 17.6)			
P-value [b]					0.565			
Effect Size (95% CI) [c]					-0.25 (-0.47, -0.04)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C20D1	N	20	20	20	4	4	4
		Mean	23.3	27.5	4.2	41.7	25.0	-16.7
		SD	24.42	26.64	20.86	31.91	28.87	13.61
		Median	16.7	25.0	0.0	33.3	16.7	-16.7
		95% CI	11.9, 34.8	15.0, 40.0	-5.6, 13.9	-9.1, 92.4	-20.9, 70.9	-38.3, 5.0
		Q1, Q3	0.0, 41.7	0.0, 41.7	0.0, 16.7	16.7, 66.7	8.3, 41.7	-25.0, -8.3
		Min, Max	0.0, 66.7	0.0, 100.0	-33.3, 50.0	16.7, 83.3	0.0, 66.7	-33.3, 0.0
		Mean Diff (95% CI) [a]			4.2 (-5.6, 13.9)			-16.7 (-38.3, 5.0)
		P-value [a]			0.383			0.092
		Mean Diff (95% CI) [b]			20.8 (-1.9, 43.6)			
		P-value [b]			0.071			
		Effect Size (95% CI) [c]			0.76 (0.54, 0.98)			
	C21D1	N	18	18	18	4	4	4
		Mean	25.9	19.4	-6.5	41.7	25.0	-16.7
		SD	24.40	18.30	18.20	31.91	28.87	13.61
		Median	16.7	16.7	0.0	33.3	16.7	-16.7
		95% CI	13.8, 38.1	10.3, 28.5	-15.5, 2.6	-9.1, 92.4	-20.9, 70.9	-38.3, 5.0
		Q1, Q3	0.0, 50.0	0.0, 33.3	-16.7, 0.0	16.7, 66.7	8.3, 41.7	-25.0, -8.3
		Min, Max	0.0, 66.7	0.0, 66.7	-50.0, 16.7	16.7, 83.3	0.0, 66.7	-33.3, 0.0
		Mean Diff (95% CI) [a]			-6.5 (-15.5, 2.6)			-16.7 (-38.3, 5.0)
		P-value [a]			0.149			0.092
		Mean Diff (95% CI) [b]			10.2 (-10.1, 30.5)			
		P-value [b]			0.307			
		Effect Size (95% CI) [c]			0.37 (0.16, 0.59)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C22D1	N	15	15	15	3	3	3
		Mean	21.1	24.4	3.3	50.0	22.2	-27.8
		SD	23.12	26.63	26.13	33.33	19.25	19.25
		Median	16.7	16.7	0.0	50.0	33.3	-16.7
		95% CI	8.3, 33.9	9.7, 39.2	-11.1, 17.8	-32.8, 132.8	-25.6, 70.0	-75.6, 20.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 16.7	16.7, 83.3	0.0, 33.3	-50.0, -16.7
		Min, Max	0.0, 66.7	0.0, 83.3	-50.0, 66.7	16.7, 83.3	0.0, 33.3	-50.0, -16.7
		Mean Diff (95% CI) [a]			3.3 (-11.1, 17.8)			-27.8 (-75.6, 20.0)
		P-value [a]			0.629			0.130
		Mean Diff (95% CI) [b]			31.1 (-2.9, 65.1)			
		P-value [b]			0.070			
		Effect Size (95% CI) [c]			1.14 (0.91, 1.37)			
	C23D1	N	11	11	11	3	3	3
		Mean	22.7	19.7	-3.0	50.0	27.8	-22.2
		SD	23.89	22.13	19.46	33.33	34.69	9.62
		Median	16.7	16.7	0.0	50.0	16.7	-16.7
		95% CI	6.7, 38.8	4.8, 34.6	-16.1, 10.0	-32.8, 132.8	-58.4, 114.0	-46.1, 1.7
		Q1, Q3	0.0, 33.3	0.0, 33.3	-16.7, 16.7	16.7, 83.3	0.0, 66.7	-33.3, -16.7
		Min, Max	0.0, 66.7	0.0, 66.7	-33.3, 16.7	16.7, 83.3	0.0, 66.7	-33.3, -16.7
		Mean Diff (95% CI) [a]			-3.0 (-16.1, 10.0)			-22.2 (-46.1, 1.7)
		P-value [a]			0.617			0.057
		Mean Diff (95% CI) [b]			19.2 (-6.6, 45.0)			
		P-value [b]			0.131			
		Effect Size (95% CI) [c]			0.70 (0.48, 0.92)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C24D1	N		10	10	10	2	2	2	
	Mean		18.3	25.0	6.7	50.0	33.3	-16.7	
	SD		19.95	29.66	25.09	47.14	47.14	0.00	
	Median		16.7	16.7	8.3	50.0	33.3	-16.7	
	95% CI		4.1, 32.6	3.8, 46.2	-11.3, 24.6	-373.5, 473.5	-390.2, 456.9	-16.7, -16.7	
	Q1, Q3		0.0, 16.7	0.0, 50.0	-16.7, 16.7	16.7, 83.3	0.0, 66.7	-16.7, -16.7	
	Min, Max		0.0, 66.7	0.0, 83.3	-33.3, 50.0	16.7, 83.3	0.0, 66.7	-16.7, -16.7	
	Mean Diff (95% CI) [a]				6.7 (-11.3, 24.6)			-16.7 (-16.7, -16.7)	
	P-value [a]				0.423			<.001	
	Mean Diff (95% CI) [b]				23.3 (-17.8, 64.4)				
	P-value [b]				0.234				
	Effect Size (95% CI) [c]				0.85 (0.63, 1.07)				
	C25D1	N		9	9	9	0	0	0
		Mean		20.4	24.1	3.7	NE	NE	NE
SD			20.03	32.39	24.69	NE	NE	NE	
Median			16.7	0.0	0.0	NE	NE	NE	
95% CI			5.0, 35.8	-0.8, 49.0	-15.3, 22.7	NE, NE	NE, NE	NE, NE	
Q1, Q3			16.7, 16.7	0.0, 33.3	-16.7, 16.7	NE, NE	NE, NE	NE, NE	
Min, Max			0.0, 66.7	0.0, 83.3	-33.3, 50.0	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					3.7 (-15.3, 22.7)			NE (NE, NE)	
P-value [a]					0.665			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	14.6	18.8	4.2	16.7	16.7	0.0
		SD	10.68	27.37	27.82	NE	NE	NE
		Median	16.7	0.0	0.0	16.7	16.7	0.0
		95% CI	5.7, 23.5	-4.1, 41.6	-19.1, 27.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	8.3, 16.7	0.0, 41.7	-16.7, 25.0	16.7, 16.7	16.7, 16.7	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 66.7	-33.3, 50.0	16.7, 16.7	16.7, 16.7	0.0, 0.0
		Mean Diff (95% CI) [a]			4.2 (-19.1, 27.4)			0.0 (NE, NE)
		P-value [a]			0.685			NE
		Mean Diff (95% CI) [b]			4.2 (-65.6, 73.9)			
		P-value [b]			0.892			
		Effect Size (95% CI) [c]			0.15 (-0.06, 0.36)			
	C27D1	N	8	8	8	1	1	1
		Mean	14.6	8.3	-6.3	16.7	0.0	-16.7
		SD	10.68	15.43	17.68	NE	NE	NE
		Median	16.7	0.0	-8.3	16.7	0.0	-16.7
		95% CI	5.7, 23.5	-4.6, 21.2	-21.0, 8.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	8.3, 16.7	0.0, 16.7	-16.7, 8.3	16.7, 16.7	0.0, 0.0	-16.7, -16.7
		Min, Max	0.0, 33.3	0.0, 33.3	-33.3, 16.7	16.7, 16.7	0.0, 0.0	-16.7, -16.7
		Mean Diff (95% CI) [a]			-6.3 (-21.0, 8.5)			-16.7 (NE, NE)
		P-value [a]			0.351			NE
		Mean Diff (95% CI) [b]			10.4 (-33.9, 54.8)			
		P-value [b]			0.596			
		Effect Size (95% CI) [c]			0.38 (0.17, 0.59)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	14.3	21.4	7.1	16.7	0.0	-16.7
		SD	11.50	18.54	21.21	NE	NE	NE
		Median	16.7	16.7	16.7	16.7	0.0	-16.7
		95% CI	3.6, 24.9	4.3, 38.6	-12.5, 26.8	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 16.7	0.0, 33.3	0.0, 16.7	16.7, 16.7	0.0, 0.0	-16.7, -16.7
		Min, Max	0.0, 33.3	0.0, 50.0	-33.3, 33.3	16.7, 16.7	0.0, 0.0	-16.7, -16.7
		Mean Diff (95% CI) [a]			7.1 (-12.5, 26.8)			-16.7 (NE, NE)
		P-value [a]			0.407			NE
		Mean Diff (95% CI) [b]			23.8 (-31.7, 79.3)			
		P-value [b]			0.334			
		Effect Size (95% CI) [c]			0.87 (0.65, 1.09)			
	C29D1	N	4	4	4	1	1	1
		Mean	12.5	16.7	4.2	16.7	100.0	83.3
		SD	8.33	19.25	15.96	NE	NE	NE
		Median	16.7	16.7	8.3	16.7	100.0	83.3
		95% CI	-0.8, 25.8	-14.0, 47.3	-21.2, 29.6	NE, NE	NE, NE	NE, NE
		Q1, Q3	8.3, 16.7	0.0, 33.3	-8.3, 16.7	16.7, 16.7	100.0, 100.0	83.3, 83.3
		Min, Max	0.0, 16.7	0.0, 33.3	-16.7, 16.7	16.7, 16.7	100.0, 100.0	83.3, 83.3
		Mean Diff (95% CI) [a]			4.2 (-21.2, 29.6)			83.3 (NE, NE)
		P-value [a]			0.638			NE
		Mean Diff (95% CI) [b]			-79.2 (-135.9, -22.4)			
		P-value [b]			0.021			
		Effect Size (95% CI) [c]			-2.89 (-3.20, -2.59)			

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C30D1	N		4	4	4	1	1	1	
	Mean		8.3	8.3	0.0	16.7	100.0	83.3	
	SD		9.62	16.67	13.61	NE	NE	NE	
	Median		8.3	0.0	0.0	16.7	100.0	83.3	
	95% CI		-7.0, 23.6	-18.2, 34.9	-21.7, 21.7	NE, NE	NE, NE	NE, NE	
	Q1, Q3		0.0, 16.7	0.0, 16.7	-8.3, 8.3	16.7, 16.7	100.0, 100.0	83.3, 83.3	
	Min, Max		0.0, 16.7	0.0, 33.3	-16.7, 16.7	16.7, 16.7	100.0, 100.0	83.3, 83.3	
	Mean Diff (95% CI) [a]				0.0 (-21.7, 21.7)			83.3 (NE, NE)	
	P-value [a]				1.000			NE	
	Mean Diff (95% CI) [b]				-83.3 (-131.8, -34.9)				
	P-value [b]				0.012				
	Effect Size (95% CI) [c]				-3.04 (-3.36, -2.73)				
	C31D1	N		2	2	2	1	1	1
		Mean		8.3	8.3	0.0	16.7	33.3	16.7
SD			11.79	11.79	0.00	NE	NE	NE	
Median			8.3	8.3	0.0	16.7	33.3	16.7	
95% CI			-97.6, 114.2	-97.6, 114.2	0.0, 0.0	NE, NE	NE, NE	NE, NE	
Q1, Q3			0.0, 16.7	0.0, 16.7	0.0, 0.0	16.7, 16.7	33.3, 33.3	16.7, 16.7	
Min, Max			0.0, 16.7	0.0, 16.7	0.0, 0.0	16.7, 16.7	33.3, 33.3	16.7, 16.7	
Mean Diff (95% CI) [a]					0.0 (0.0, 0.0)			16.7 (NE, NE)	
P-value [a]					NE			NE	
Mean Diff (95% CI) [b]					-16.7 (-16.7, -16.7)				
P-value [b]					<.001				
Effect Size (95% CI) [c]					-0.61 (-0.83, -0.39)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C32D1	N		2	2	2	1	1	1	
	Mean		8.3	0.0	-8.3	16.7	33.3	16.7	
	SD		11.79	0.00	11.79	NE	NE	NE	
	Median		8.3	0.0	-8.3	16.7	33.3	16.7	
	95% CI		-97.6, 114.2	0.0, 0.0	-114.2, 97.6	NE, NE	NE, NE	NE, NE	
	Q1, Q3		0.0, 16.7	0.0, 0.0	-16.7, 0.0	16.7, 16.7	33.3, 33.3	16.7, 16.7	
	Min, Max		0.0, 16.7	0.0, 0.0	-16.7, 0.0	16.7, 16.7	33.3, 33.3	16.7, 16.7	
	Mean Diff (95% CI) [a]				-8.3 (-114.2, 97.6)			16.7 (NE, NE)	
	P-value [a]				0.500			NE	
	Mean Diff (95% CI) [b]				-25.0 (-208.4, 158.4)				
	P-value [b]				0.333				
	Effect Size (95% CI) [c]				-0.91 (-1.14, -0.69)				
	C33D1	N		3	3	3	1	1	1
		Mean		5.6	22.2	16.7	16.7	33.3	16.7
SD			9.62	19.25	16.67	NE	NE	NE	
Median			0.0	33.3	16.7	16.7	33.3	16.7	
95% CI			-18.3, 29.5	-25.6, 70.0	-24.7, 58.1	NE, NE	NE, NE	NE, NE	
Q1, Q3			0.0, 16.7	0.0, 33.3	0.0, 33.3	16.7, 16.7	33.3, 33.3	16.7, 16.7	
Min, Max			0.0, 16.7	0.0, 33.3	0.0, 33.3	16.7, 16.7	33.3, 33.3	16.7, 16.7	
Mean Diff (95% CI) [a]					16.7 (-24.7, 58.1)			16.7 (NE, NE)	
P-value [a]					0.225			NE	
Mean Diff (95% CI) [b]					0.0 (-82.8, 82.8)				
P-value [b]					1.000				
Effect Size (95% CI) [c]					0.00 (-0.21, 0.21)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	5.6	16.7	11.1	NE	NE	NE
		SD	9.62	16.67	19.25	NE	NE	NE
		Median	0.0	16.7	0.0	NE	NE	NE
		95% CI	-18.3, 29.5	-24.7, 58.1	-36.7, 58.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 16.7	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 16.7	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			11.1 (-36.7, 58.9)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	8.3	16.7	8.3	NE	NE	NE
		SD	11.79	23.57	35.36	NE	NE	NE
		Median	8.3	16.7	8.3	NE	NE	NE
		95% CI	-97.6, 114.2	-195.1, 228.4	-309.3, 326.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 16.7	0.0, 33.3	-16.7, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 16.7	0.0, 33.3	-16.7, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-309.3, 326.0)			NE (NE, NE)
		P-value [a]			0.795			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C36D1	N		3	3	3	0	0	0	
	Mean		5.6	11.1	5.6	NE	NE	NE	
	SD		9.62	19.25	25.46	NE	NE	NE	
	Median		0.0	0.0	0.0	NE	NE	NE	
	95% CI		-18.3, 29.5	-36.7, 58.9	-57.7, 68.8	NE, NE	NE, NE	NE, NE	
	Q1, Q3		0.0, 16.7	0.0, 33.3	-16.7, 33.3	NE, NE	NE, NE	NE, NE	
	Min, Max		0.0, 16.7	0.0, 33.3	-16.7, 33.3	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				5.6 (-57.7, 68.8)			NE (NE, NE)	
	P-value [a]				0.742			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C37D1	N		3	3	3	0	0	0
		Mean		5.6	11.1	5.6	NE	NE	NE
SD			9.62	19.25	25.46	NE	NE	NE	
Median			0.0	0.0	0.0	NE	NE	NE	
95% CI			-18.3, 29.5	-36.7, 58.9	-57.7, 68.8	NE, NE	NE, NE	NE, NE	
Q1, Q3			0.0, 16.7	0.0, 33.3	-16.7, 33.3	NE, NE	NE, NE	NE, NE	
Min, Max			0.0, 16.7	0.0, 33.3	-16.7, 33.3	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					5.6 (-57.7, 68.8)			NE (NE, NE)	
P-value [a]					0.742			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C38D1	N		2	2	2	0	0	0	
	Mean		8.3	16.7	8.3	NE	NE	NE	
	SD		11.79	23.57	11.79	NE	NE	NE	
	Median		8.3	16.7	8.3	NE	NE	NE	
	95% CI		-97.6, 114.2	-195.1, 228.4	-97.6, 114.2	NE, NE	NE, NE	NE, NE	
	Q1, Q3		0.0, 16.7	0.0, 33.3	0.0, 16.7	NE, NE	NE, NE	NE, NE	
	Min, Max		0.0, 16.7	0.0, 33.3	0.0, 16.7	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				8.3 (-97.6, 114.2)			NE (NE, NE)	
	P-value [a]				0.500			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C39D1	N		2	2	2	0	0	0
		Mean		8.3	0.0	-8.3	NE	NE	NE
SD			11.79	0.00	11.79	NE	NE	NE	
Median			8.3	0.0	-8.3	NE	NE	NE	
95% CI			-97.6, 114.2	0.0, 0.0	-114.2, 97.6	NE, NE	NE, NE	NE, NE	
Q1, Q3			0.0, 16.7	0.0, 0.0	-16.7, 0.0	NE, NE	NE, NE	NE, NE	
Min, Max			0.0, 16.7	0.0, 0.0	-16.7, 0.0	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					-8.3 (-114.2, 97.6)			NE (NE, NE)	
P-value [a]					0.500			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	8.3	8.3	0.0	NE	NE	NE
		SD	11.79	11.79	0.00	NE	NE	NE
		Median	8.3	8.3	0.0	NE	NE	NE
		95% CI	-97.6, 114.2	-97.6, 114.2	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 16.7	0.0, 16.7	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 16.7	0.0, 16.7	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	8.3	16.7	8.3	NE	NE	NE
		SD	11.79	23.57	11.79	NE	NE	NE
		Median	8.3	16.7	8.3	NE	NE	NE
		95% CI	-97.6, 114.2	-195.1, 228.4	-97.6, 114.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 16.7	0.0, 33.3	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 16.7	0.0, 33.3	0.0, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.3 (-97.6, 114.2)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	16.7	33.3	16.7	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	16.7	33.3	16.7	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	16.7, 16.7	33.3, 33.3	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Min, Max	16.7, 16.7	33.3, 33.3	16.7, 16.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	16.7	16.7	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	16.7	16.7	0.0	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	16.7, 16.7	16.7, 16.7	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	16.7, 16.7	16.7, 16.7	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		131	131	131	126	126	126	
	Mean		28.8	29.3	0.5	32.4	32.9	0.5	
	SD		27.12	31.22	27.03	27.59	30.15	27.32	
	Median		33.3	16.7	0.0	33.3	33.3	0.0	
	95% CI		24.1, 33.4	23.9, 34.7	-4.2, 5.2	27.5, 37.3	27.6, 38.3	-4.3, 5.3	
	Q1, Q3		0.0, 50.0	0.0, 50.0	-16.7, 16.7	16.7, 50.0	0.0, 50.0	-16.7, 16.7	
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 83.3	0.0, 100.0	0.0, 100.0	-66.7, 83.3	
	Mean Diff (95% CI) [a]				0.5 (-4.2, 5.2)			0.5 (-4.3, 5.3)	
	P-value [a]				0.830			0.828	
	Mean Diff (95% CI) [b]				0.0 (-6.7, 6.7)				
	P-value [b]				0.995				
	Effect Size (95% CI) [c]				0.00 (-0.21, 0.21)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			19.0	21.4	2.4	29.6	44.4	14.8
SD			26.03	29.55	21.54	20.03	40.82	33.79	
Median			0.0	8.3	0.0	33.3	33.3	0.0	
95% CI			4.0, 34.1	4.4, 38.5	-10.1, 14.8	14.2, 45.0	13.1, 75.8	-11.2, 40.8	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 16.7	16.7, 33.3	16.7, 83.3	-16.7, 33.3	
Min, Max			0.0, 66.7	0.0, 100.0	-50.0, 50.0	0.0, 66.7	0.0, 100.0	-16.7, 83.3	
Mean Diff (95% CI) [a]					2.4 (-10.1, 14.8)			14.8 (-11.2, 40.8)	
P-value [a]					0.686			0.225	
Mean Diff (95% CI) [b]					-12.4 (-36.3, 11.4)				
P-value [b]					0.291				
Effect Size (95% CI) [c]					-0.45 (-0.67, -0.24)				
Dyspnea	Baseline	N	173			165			
	Mean		18.5			21.8			
	SD		23.94			27.71			
	Median		0.0			0.0			
	95% CI		14.9, 22.1			17.6, 26.1			
	Q1, Q3		0.0, 33.3			0.0, 33.3			
	Min, Max		0.0, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C2D1	N		151	152	151	144	144	144	
	Mean		16.8	21.3	4.6	21.5	26.9	5.3	
	SD		23.05	26.73	21.44	27.73	30.86	22.18	
	95% CI		13.1, 20.5	17.0, 25.6	1.2, 8.1	17.0, 26.1	21.8, 31.9	1.7, 9.0	
	Median		0.0	0.0	0.0	0.0	33.3	0.0	
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
	Min, Max		0.0, 100.0	0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 100.0	-66.7, 66.7	
	Mean Diff (95% CI) [a]				4.6 (1.2, 8.1)			5.3 (1.7, 9.0)	
	P-value [a]				0.009			0.005	
	Mean Diff (95% CI) [b]				-0.7 (-5.7, 4.3)				
	P-value [b]				0.787				
	Effect Size (95% CI) [c]				-0.03 (-0.24, 0.19)				
	C3D1	N		121	122	121	102	102	102
		Mean		16.0	16.7	0.8	21.2	25.2	3.9
SD			21.13	23.96	22.55	26.86	28.31	25.82	
95% CI			12.2, 19.8	12.4, 21.0	-3.2, 4.9	16.0, 26.5	19.6, 30.7	-1.1, 9.0	
Median			0.0	0.0	0.0	0.0	33.3	0.0	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
Min, Max			0.0, 66.7	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 100.0	
Mean Diff (95% CI) [a]					0.8 (-3.2, 4.9)			3.9 (-1.1, 9.0)	
P-value [a]					0.688			0.128	
Mean Diff (95% CI) [b]					-3.1 (-9.5, 3.3)				
P-value [b]					0.340				
Effect Size (95% CI) [c]					-0.12 (-0.33, 0.09)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		16.7	17.3	0.6	20.9	27.0	6.0
	SD		21.92	24.50	23.24	26.32	28.62	28.06
	95% CI		12.6, 20.8	12.7, 21.8	-3.8, 4.9	15.5, 26.3	21.1, 32.8	0.3, 11.8
	Median		0.0	0.0	0.0	0.0	33.3	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3
	Min, Max		0.0, 66.7	0.0, 100.0	-33.3, 66.7	0.0, 100.0	0.0, 100.0	-33.3, 100.0
	Mean Diff (95% CI) [a]				0.6 (-3.8, 4.9)			6.0 (0.3, 11.8)
	P-value [a]				0.787			0.040
	Mean Diff (95% CI) [b]				-5.4 (-12.5, 1.6)			
	P-value [b]				0.130			
	Effect Size (95% CI) [c]				-0.21 (-0.42, 0.00)			
	C5D1	N		96	97	96	80	80
Mean			17.0	17.2	0.3	18.3	23.3	5.0
SD			21.63	22.11	23.94	25.38	27.76	22.56
95% CI			12.6, 21.4	12.7, 21.6	-4.5, 5.2	12.7, 24.0	17.2, 29.5	0.0, 10.0
Median			0.0	0.0	0.0	0.0	16.7	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
Min, Max			0.0, 66.7	0.0, 66.7	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-33.3, 66.7
Mean Diff (95% CI) [a]					0.3 (-4.5, 5.2)			5.0 (0.0, 10.0)
P-value [a]					0.887			0.051
Mean Diff (95% CI) [b]					-4.7 (-11.6, 2.3)			
P-value [b]					0.189			
Effect Size (95% CI) [c]					-0.18 (-0.39, 0.03)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C6D1	N	95	96	95	69	69	69
		Mean	15.4	13.9	-1.4	20.3	21.7	1.4
		SD	21.09	20.33	20.58	26.33	26.09	23.18
		95% CI	11.1, 19.7	9.8, 18.0	-5.6, 2.8	14.0, 26.6	15.5, 28.0	-4.1, 7.0
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 66.7	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 66.7
		Mean Diff (95% CI) [a]			-1.4 (-5.6, 2.8)			1.4 (-4.1, 7.0)
		P-value [a]			0.508			0.605
		Mean Diff (95% CI) [b]			-2.9 (-9.6, 3.9)			
		P-value [b]			0.407			
		Effect Size (95% CI) [c]			-0.11 (-0.32, 0.10)			
	C7D1	N	78	78	78	53	53	53
		Mean	15.8	15.4	-0.4	19.5	20.1	0.6
		SD	21.97	23.23	21.15	24.84	27.22	23.10
		95% CI	10.9, 20.8	10.1, 20.6	-5.2, 4.3	12.7, 26.3	12.6, 27.6	-5.7, 7.0
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 100.0	-33.3, 66.7	0.0, 66.7	0.0, 100.0	-33.3, 100.0
		Mean Diff (95% CI) [a]			-0.4 (-5.2, 4.3)			0.6 (-5.7, 7.0)
		P-value [a]			0.859			0.844
		Mean Diff (95% CI) [b]			-1.1 (-8.8, 6.7)			
		P-value [b]			0.787			
		Effect Size (95% CI) [c]			-0.04 (-0.25, 0.17)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	50	50	50
	Mean		15.8	14.5	-1.3	18.7	20.0	1.3
	SD		22.09	23.31	20.69	24.43	24.28	20.16
	95% CI		10.7, 20.8	9.1, 19.8	-6.0, 3.4	11.7, 25.6	13.1, 26.9	-4.4, 7.1
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
	Min, Max		0.0, 66.7	0.0, 100.0	-66.7, 33.3	0.0, 66.7	0.0, 66.7	-33.3, 66.7
	Mean Diff (95% CI) [a]				-1.3 (-6.0, 3.4)			1.3 (-4.4, 7.1)
	P-value [a]				0.581			0.642
	Mean Diff (95% CI) [b]				-2.6 (-10.0, 4.7)			
	P-value [b]				0.479			
	Effect Size (95% CI) [c]				-0.10 (-0.32, 0.11)			
	C9D1	N		60	60	60	42	42
Mean			14.4	13.9	-0.6	16.7	15.9	-0.8
SD			21.58	23.20	21.69	24.69	24.68	22.68
95% CI			8.9, 20.0	7.9, 19.9	-6.2, 5.0	9.0, 24.4	8.2, 23.6	-7.9, 6.3
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
Min, Max			0.0, 66.7	0.0, 100.0	-66.7, 33.3	0.0, 66.7	0.0, 66.7	-66.7, 66.7
Mean Diff (95% CI) [a]					-0.6 (-6.2, 5.0)			-0.8 (-7.9, 6.3)
P-value [a]					0.843			0.822
Mean Diff (95% CI) [b]					0.2 (-8.6, 9.1)			
P-value [b]					0.957			
Effect Size (95% CI) [c]					0.01 (-0.20, 0.22)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C10D1	N		54	54	54	30	30	30
	Mean		13.6	13.0	-0.6	15.6	20.0	4.4
	SD		19.98	18.79	21.95	22.71	24.13	22.71
	95% CI		8.1, 19.0	7.8, 18.1	-6.6, 5.4	7.1, 24.0	11.0, 29.0	-4.0, 12.9
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
	Min, Max		0.0, 66.7	0.0, 66.7	-66.7, 33.3	0.0, 66.7	0.0, 66.7	-33.3, 66.7
	Mean Diff (95% CI) [a]				-0.6 (-6.6, 5.4)			4.4 (-4.0, 12.9)
	P-value [a]				0.837			0.293
	Mean Diff (95% CI) [b]				-5.1 (-15.1, 5.0)			
	P-value [b]				0.320			
	Effect Size (95% CI) [c]				-0.20 (-0.41, 0.02)			
	C11D1	N		45	45	45	23	23
Mean			16.3	14.1	-2.2	13.0	20.3	7.2
SD			22.04	21.89	26.01	19.43	21.88	24.53
95% CI			9.7, 22.9	7.5, 20.7	-10.0, 5.6	4.6, 21.4	10.8, 29.8	-3.4, 17.9
Median			0.0	0.0	0.0	0.0	33.3	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3
Min, Max			0.0, 66.7	0.0, 66.7	-66.7, 66.7	0.0, 66.7	0.0, 66.7	-33.3, 66.7
Mean Diff (95% CI) [a]					-2.2 (-10.0, 5.6)			7.2 (-3.4, 17.9)
P-value [a]					0.570			0.171
Mean Diff (95% CI) [b]					-9.5 (-22.5, 3.6)			
P-value [b]					0.153			
Effect Size (95% CI) [c]					-0.37 (-0.58, -0.15)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		41	41	41	19	19	19	
	Mean		13.8	16.3	2.4	12.3	17.5	5.3	
	SD		21.05	22.51	22.84	19.91	17.10	20.07	
	95% CI		7.2, 20.5	9.2, 23.4	-4.8, 9.6	2.7, 21.9	9.3, 25.8	-4.4, 14.9	
	Median		0.0	0.0	0.0	0.0	33.3	0.0	
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	
	Min, Max		0.0, 66.7	0.0, 66.7	-66.7, 66.7	0.0, 66.7	0.0, 33.3	-33.3, 33.3	
	Mean Diff (95% CI) [a]				2.4 (-4.8, 9.6)			5.3 (-4.4, 14.9)	
	P-value [a]				0.498			0.268	
	Mean Diff (95% CI) [b]				-2.8 (-15.1, 9.4)				
	P-value [b]				0.646				
	Effect Size (95% CI) [c]				-0.11 (-0.32, 0.10)				
	C13D1	N		32	32	32	15	15	15
		Mean		16.7	16.7	0.0	17.8	20.0	2.2
SD			22.40	22.40	23.95	24.77	16.90	23.46	
95% CI			8.6, 24.7	8.6, 24.7	-8.6, 8.6	4.1, 31.5	10.6, 29.4	-10.8, 15.2	
Median			0.0	0.0	0.0	0.0	33.3	0.0	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	
Min, Max			0.0, 66.7	0.0, 66.7	-66.7, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 33.3	
Mean Diff (95% CI) [a]					0.0 (-8.6, 8.6)			2.2 (-10.8, 15.2)	
P-value [a]					1.000			0.719	
Mean Diff (95% CI) [b]					-2.2 (-17.2, 12.8)				
P-value [b]					0.767				
Effect Size (95% CI) [c]					-0.09 (-0.30, 0.13)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C14D1	N		33	33	33	12	12	12
	Mean		16.2	19.2	3.0	11.1	16.7	5.6
	SD		22.24	22.10	22.61	21.71	22.47	12.97
	95% CI		8.3, 24.0	11.4, 27.0	-5.0, 11.0	-2.7, 24.9	2.4, 30.9	-2.7, 13.8
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 16.7	0.0, 33.3	0.0, 0.0
	Min, Max		0.0, 66.7	0.0, 66.7	-66.7, 33.3	0.0, 66.7	0.0, 66.7	0.0, 33.3
	Mean Diff (95% CI) [a]				3.0 (-5.0, 11.0)			5.6 (-2.7, 13.8)
	P-value [a]				0.447			0.166
	Mean Diff (95% CI) [b]				-2.5 (-16.5, 11.5)			
	P-value [b]				0.718			
	Effect Size (95% CI) [c]				-0.10 (-0.31, 0.12)			
	C15D1	N		28	28	28	13	13
Mean			17.9	19.0	1.2	15.4	33.3	17.9
SD			23.10	26.34	27.94	25.88	30.43	35.00
95% CI			8.9, 26.8	8.8, 29.3	-9.6, 12.0	-0.3, 31.0	14.9, 51.7	-3.2, 39.1
Median			0.0	0.0	0.0	0.0	33.3	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 16.7	0.0, 33.3	0.0, 33.3	0.0, 33.3
Min, Max			0.0, 66.7	0.0, 100.0	-66.7, 66.7	0.0, 66.7	0.0, 100.0	-33.3, 100.0
Mean Diff (95% CI) [a]					1.2 (-9.6, 12.0)			17.9 (-3.2, 39.1)
P-value [a]					0.823			0.089
Mean Diff (95% CI) [b]					-16.8 (-37.3, 3.8)			
P-value [b]					0.107			
Effect Size (95% CI) [c]					-0.65 (-0.87, -0.43)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C16D1	N		28	28	28	10	10	10
	Mean		16.7	16.7	0.0	20.0	26.7	6.7
	SD		23.13	21.28	22.22	28.11	21.08	21.08
	95% CI		7.7, 25.6	8.4, 24.9	-8.6, 8.6	-0.1, 40.1	11.6, 41.7	-8.4, 21.7
	Median		0.0	0.0	0.0	0.0	33.3	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3
	Min, Max		0.0, 66.7	0.0, 66.7	-66.7, 33.3	0.0, 66.7	0.0, 66.7	-33.3, 33.3
	Mean Diff (95% CI) [a]				0.0 (-8.6, 8.6)			6.7 (-8.4, 21.7)
	P-value [a]				1.000			0.343
	Mean Diff (95% CI) [b]				-6.7 (-23.1, 9.7)			
	P-value [b]				0.415			
	Effect Size (95% CI) [c]				-0.26 (-0.47, -0.04)			
	C17D1	N		26	26	26	7	7
Mean			17.9	15.4	-2.6	19.0	23.8	4.8
SD			23.53	21.56	22.95	26.23	25.20	12.60
95% CI			8.4, 27.5	6.7, 24.1	-11.8, 6.7	-5.2, 43.3	0.5, 47.1	-6.9, 16.4
Median			0.0	0.0	0.0	0.0	33.3	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
Min, Max			0.0, 66.7	0.0, 66.7	-66.7, 33.3	0.0, 66.7	0.0, 66.7	0.0, 33.3
Mean Diff (95% CI) [a]					-2.6 (-11.8, 6.7)			4.8 (-6.9, 16.4)
P-value [a]					0.574			0.356
Mean Diff (95% CI) [b]					-7.3 (-25.9, 11.2)			
P-value [b]					0.426			
Effect Size (95% CI) [c]					-0.28 (-0.50, -0.07)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C18D1	N		22	22	22	7	7	7
	Mean		19.7	21.2	1.5	14.3	19.0	4.8
	SD		24.47	21.93	24.07	26.23	17.82	23.00
	95% CI		8.8, 30.5	11.5, 30.9	-9.2, 12.2	-10.0, 38.5	2.6, 35.5	-16.5, 26.0
	Median		0.0	33.3	0.0	0.0	33.3	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3
	Min, Max		0.0, 66.7	0.0, 66.7	-66.7, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 33.3
	Mean Diff (95% CI) [a]				1.5 (-9.2, 12.2)			4.8 (-16.5, 26.0)
	P-value [a]				0.771			0.604
	Mean Diff (95% CI) [b]				-3.2 (-24.5, 18.0)			
	P-value [b]				0.756			
	Effect Size (95% CI) [c]				-0.13 (-0.34, 0.09)			
	C19D1	N		20	20	20	6	6
Mean			15.0	18.3	3.3	16.7	22.2	5.6
SD			20.16	25.31	26.27	27.89	17.21	25.09
95% CI			5.6, 24.4	6.5, 30.2	-9.0, 15.6	-12.6, 45.9	4.2, 40.3	-20.8, 31.9
Median			0.0	0.0	0.0	0.0	33.3	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 16.7	0.0, 33.3	0.0, 33.3	0.0, 33.3
Min, Max			0.0, 66.7	0.0, 100.0	-33.3, 66.7	0.0, 66.7	0.0, 33.3	-33.3, 33.3
Mean Diff (95% CI) [a]					3.3 (-9.0, 15.6)			5.6 (-20.8, 31.9)
P-value [a]					0.577			0.611
Mean Diff (95% CI) [b]					-2.2 (-27.2, 22.8)			
P-value [b]					0.856			
Effect Size (95% CI) [c]					-0.09 (-0.30, 0.13)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		20	20	20	4	4	4
	Mean		11.7	18.3	6.7	25.0	16.7	-8.3
	SD		19.57	17.01	23.20	31.91	19.25	16.67
	95% CI		2.5, 20.8	10.4, 26.3	-4.2, 17.5	-25.8, 75.8	-14.0, 47.3	-34.9, 18.2
	Median		0.0	33.3	0.0	16.7	16.7	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 50.0	0.0, 33.3	-16.7, 0.0
	Min, Max		0.0, 66.7	0.0, 33.3	-33.3, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 0.0
	Mean Diff (95% CI) [a]				6.7 (-4.2, 17.5)			-8.3 (-34.9, 18.2)
	P-value [a]				0.214			0.391
	Mean Diff (95% CI) [b]				15.0 (-10.5, 40.5)			
	P-value [b]				0.235			
	Effect Size (95% CI) [c]				0.58 (0.36, 0.80)			
	C21D1	N		18	18	18	4	4
Mean			13.0	18.5	5.6	25.0	16.7	-8.3
SD			20.26	17.04	20.61	31.91	19.25	16.67
95% CI			2.9, 23.0	10.0, 27.0	-4.7, 15.8	-25.8, 75.8	-14.0, 47.3	-34.9, 18.2
Median			0.0	33.3	0.0	16.7	16.7	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 50.0	0.0, 33.3	-16.7, 0.0
Min, Max			0.0, 66.7	0.0, 33.3	-33.3, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 0.0
Mean Diff (95% CI) [a]					5.6 (-4.7, 15.8)			-8.3 (-34.9, 18.2)
P-value [a]					0.269			0.391
Mean Diff (95% CI) [b]					13.9 (-9.3, 37.0)			
P-value [b]					0.225			
Effect Size (95% CI) [c]					0.54 (0.32, 0.75)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C22D1	N	15	15	15	3	3	3
		Mean	13.3	15.6	2.2	33.3	22.2	-11.1
		SD	21.08	17.21	19.79	33.33	19.25	19.25
		95% CI	1.7, 25.0	6.0, 25.1	-8.7, 13.2	-49.5, 116.1	-25.6, 70.0	-58.9, 36.7
		Median	0.0	0.0	0.0	33.3	33.3	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 66.7	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 66.7	0.0, 33.3	-33.3, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			2.2 (-8.7, 13.2)			-11.1 (-58.9, 36.7)
		P-value [a]			0.670			0.423
		Mean Diff (95% CI) [b]			13.3 (-13.1, 39.8)			
		P-value [b]			0.301			
		Effect Size (95% CI) [c]			0.51 (0.30, 0.73)			
	C23D1	N	11	11	11	3	3	3
		Mean	15.2	21.2	6.1	33.3	33.3	0.0
		SD	22.92	22.47	20.10	33.33	33.33	0.00
		95% CI	-0.2, 30.5	6.1, 36.3	-7.4, 19.6	-49.5, 116.1	-49.5, 116.1	0.0, 0.0
		Median	0.0	33.3	0.0	33.3	33.3	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 66.7	0.0, 66.7	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 66.7	-33.3, 33.3	0.0, 66.7	0.0, 66.7	0.0, 0.0
		Mean Diff (95% CI) [a]			6.1 (-7.4, 19.6)			0.0 (0.0, 0.0)
		P-value [a]			0.341			NE
		Mean Diff (95% CI) [b]			6.1 (-20.0, 32.1)			
		P-value [b]			0.621			
		Effect Size (95% CI) [c]			0.23 (0.02, 0.45)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C24D1	N		10	10	10	2	2	2
	Mean		13.3	20.0	6.7	33.3	16.7	-16.7
	SD		23.31	17.21	21.08	47.14	23.57	23.57
	95% CI		-3.3, 30.0	7.7, 32.3	-8.4, 21.7	-390.2, 456.9	-195.1, 228.4	-228.4, 195.1
	Median		0.0	33.3	0.0	33.3	16.7	-16.7
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 0.0
	Min, Max		0.0, 66.7	0.0, 33.3	-33.3, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 0.0
	Mean Diff (95% CI) [a]				6.7 (-8.4, 21.7)			-16.7 (-228.4, 195.1)
	P-value [a]				0.343			0.500
	Mean Diff (95% CI) [b]				23.3 (-13.5, 60.2)			
	P-value [b]				0.188			
	Effect Size (95% CI) [c]				0.90 (0.68, 1.12)			
	C25D1	N		9	9	9	0	0
Mean			14.8	18.5	3.7	NE	NE	NE
SD			24.22	17.57	30.93	NE	NE	NE
95% CI			-3.8, 33.4	5.0, 32.0	-20.1, 27.5	NE, NE	NE, NE	NE, NE
Median			0.0	33.3	0.0	NE	NE	NE
Q1, Q3			0.0, 33.3	0.0, 33.3	-33.3, 33.3	NE, NE	NE, NE	NE, NE
Min, Max			0.0, 66.7	0.0, 33.3	-33.3, 33.3	NE, NE	NE, NE	NE, NE
Mean Diff (95% CI) [a]					3.7 (-20.1, 27.5)			NE (NE, NE)
P-value [a]					0.729			NE
Mean Diff (95% CI) [b]					NE (NE, NE)			
P-value [b]					NE			
Effect Size (95% CI) [c]					NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	4.2	16.7	12.5	0.0	0.0	0.0
		SD	11.79	17.82	17.25	NE	NE	NE
		95% CI	-5.7, 14.0	1.8, 31.6	-1.9, 26.9	NE, NE	NE, NE	NE, NE
		Median	0.0	16.7	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			12.5 (-1.9, 26.9)			0.0 (NE, NE)
		P-value [a]			0.080			NE
		Mean Diff (95% CI) [b]			12.5 (-30.8, 55.8)			
		P-value [b]			0.516			
		Effect Size (95% CI) [c]			0.48 (0.27, 0.70)			
	C27D1	N	8	8	8	1	1	1
		Mean	4.2	16.7	12.5	0.0	0.0	0.0
		SD	11.79	17.82	17.25	NE	NE	NE
		95% CI	-5.7, 14.0	1.8, 31.6	-1.9, 26.9	NE, NE	NE, NE	NE, NE
		Median	0.0	16.7	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			12.5 (-1.9, 26.9)			0.0 (NE, NE)
		P-value [a]			0.080			NE
		Mean Diff (95% CI) [b]			12.5 (-30.8, 55.8)			
		P-value [b]			0.516			
		Effect Size (95% CI) [c]			0.48 (0.27, 0.70)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	4.8	14.3	9.5	0.0	0.0	0.0
		SD	12.60	17.82	16.27	NE	NE	NE
		95% CI	-6.9, 16.4	-2.2, 30.8	-5.5, 24.6	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			9.5 (-5.5, 24.6)			0.0 (NE, NE)
		P-value [a]			0.172			NE
		Mean Diff (95% CI) [b]			9.5 (-33.0, 52.1)			
		P-value [b]			0.604			
		Effect Size (95% CI) [c]			0.37 (0.15, 0.58)			
	C29D1	N	4	4	4	1	1	1
		Mean	8.3	8.3	0.0	0.0	0.0	0.0
		SD	16.67	16.67	0.00	NE	NE	NE
		95% CI	-18.2, 34.9	-18.2, 34.9	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C30D1	N	4	4	4	1	1	1
		Mean	0.0	8.3	8.3	0.0	33.3	33.3
		SD	0.00	16.67	16.67	NE	NE	NE
		95% CI	0.0, 0.0	-18.2, 34.9	-18.2, 34.9	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	33.3	33.3
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 16.7	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Mean Diff (95% CI) [a]			8.3 (-18.2, 34.9)			33.3 (NE, NE)
		P-value [a]			0.391			NE
		Mean Diff (95% CI) [b]			-25.0 (-84.3, 34.3)			
		P-value [b]			0.272			
		Effect Size (95% CI) [c]			-0.97 (-1.19, -0.74)			
	C31D1	N	2	2	2	1	1	1
		Mean	0.0	0.0	0.0	0.0	33.3	33.3
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	33.3	33.3
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			33.3 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			-33.3 (-33.3, -33.3)			
		P-value [b]			<.001			
		Effect Size (95% CI) [c]			-1.29 (-1.52, -1.05)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	0.0	0.0	0.0	0.0	33.3	33.3
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	33.3	33.3
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			33.3 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			-33.3 (-33.3, -33.3)			
		P-value [b]			<.001			
		Effect Size (95% CI) [c]			-1.29 (-1.52, -1.05)			
	C33D1	N	3	3	3	1	1	1
		Mean	0.0	0.0	0.0	0.0	33.3	33.3
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	33.3	33.3
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			33.3 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			-33.3 (-33.3, -33.3)			
		P-value [b]			<.001			
		Effect Size (95% CI) [c]			-1.29 (-1.52, -1.05)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	0.0	11.1	11.1	NE	NE	NE
		SD	0.00	19.25	19.25	NE	NE	NE
		95% CI	0.0, 0.0	-36.7, 58.9	-36.7, 58.9	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			11.1 (-36.7, 58.9)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	0.0	16.7	16.7	NE	NE	NE
		SD	0.00	23.57	23.57	NE	NE	NE
		95% CI	0.0, 0.0	-195.1, 228.4	-195.1, 228.4	NE, NE	NE, NE	NE, NE
		Median	0.0	16.7	16.7	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (-195.1, 228.4)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)				
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline		
C36D1	N	N	3	3	3	0	0	0		
		Mean	0.0	11.1	11.1	NE	NE	NE		
		SD	0.00	19.25	19.25	NE	NE	NE		
		95% CI	0.0, 0.0	-36.7, 58.9	-36.7, 58.9	NE, NE	NE, NE	NE, NE		
		Median	0.0	0.0	0.0	NE	NE	NE		
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE		
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE		
		Mean Diff (95% CI) [a]			11.1 (-36.7, 58.9)			NE (NE, NE)		
		P-value [a]			0.423			NE		
		Mean Diff (95% CI) [b]				NE (NE, NE)				
		P-value [b]				NE				
		Effect Size (95% CI) [c]				NE (NE, NE)				
		C37D1	N	N	3	3	3	0	0	0
				Mean	0.0	11.1	11.1	NE	NE	NE
				SD	0.00	19.25	19.25	NE	NE	NE
95% CI	0.0, 0.0			-36.7, 58.9	-36.7, 58.9	NE, NE	NE, NE	NE, NE		
Median	0.0			0.0	0.0	NE	NE	NE		
Q1, Q3	0.0, 0.0			0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE		
Min, Max	0.0, 0.0			0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE		
Mean Diff (95% CI) [a]					11.1 (-36.7, 58.9)			NE (NE, NE)		
P-value [a]					0.423			NE		
Mean Diff (95% CI) [b]						NE (NE, NE)				
P-value [b]						NE				
Effect Size (95% CI) [c]						NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

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Table 15.15.3.1  
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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		131	131	131	126	126	126	
	Mean		18.8	26.5	7.6	19.3	26.7	7.4	
	SD		24.84	30.02	26.01	26.45	30.70	29.78	
	95% CI		14.5, 23.1	21.3, 31.7	3.1, 12.1	14.6, 24.0	21.3, 32.1	2.2, 12.7	
	Median		0.0	33.3	0.0	0.0	33.3	0.0	
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 100.0	
	Mean Diff (95% CI) [a]				7.6 (3.1, 12.1)			7.4 (2.2, 12.7)	
	P-value [a]				0.001			0.006	
	Mean Diff (95% CI) [b]				0.2 (-6.6, 7.1)				
	P-value [b]				0.948				
	Effect Size (95% CI) [c]				0.01 (-0.20, 0.22)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			11.9	21.4	9.5	22.2	29.6	7.4
	SD			16.57	28.06	24.21	23.57	30.93	32.39
95% CI			2.3, 21.5	5.2, 37.6	-4.5, 23.5	4.1, 40.3	5.9, 53.4	-17.5, 32.3	
Median			0.0	0.0	0.0	33.3	33.3	0.0	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	
Min, Max			0.0, 33.3	0.0, 66.7	-33.3, 66.7	0.0, 66.7	0.0, 100.0	-33.3, 66.7	
Mean Diff (95% CI) [a]					9.5 (-4.5, 23.5)			7.4 (-17.5, 32.3)	
P-value [a]					0.165			0.512	
Mean Diff (95% CI) [b]					2.1 (-22.4, 26.7)				
P-value [b]					0.859				
Effect Size (95% CI) [c]					0.08 (-0.13, 0.29)				
Insomnia	Baseline	N	174			164			
	Mean		31.2			35.0			
	SD		31.07			30.18			
	95% CI		26.6, 35.9			30.3, 39.6			
	Median		33.3			33.3			
	Q1, Q3		0.0, 33.3			0.0, 66.7			
	Min, Max		0.0, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C2D1	N		152	152	152	143	144	143	
	Mean		31.1	25.0	-6.1	35.4	33.8	-1.6	
	SD		31.09	27.99	25.85	29.66	30.28	31.97	
	Median		33.3	33.3	0.0	33.3	33.3	0.0	
	95% CI		26.2, 36.1	20.5, 29.5	-10.3, -2.0	30.5, 40.3	28.8, 38.8	-6.9, 3.7	
	Q1, Q3		0.0, 33.3	0.0, 33.3	-33.3, 0.0	0.0, 66.7	0.0, 33.3	-33.3, 33.3	
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 100.0	
	Mean Diff (95% CI) [a]				-6.1 (-10.3, -2.0)			-1.6 (-6.9, 3.7)	
	P-value [a]				0.004			0.543	
	Mean Diff (95% CI) [b]				-4.5 (-11.2, 2.1)				
	P-value [b]				0.183				
	Effect Size (95% CI) [c]				-0.15 (-0.36, 0.07)				
	C3D1	N		124	124	124	101	102	101
		Mean		32.8	24.2	-8.6	34.7	32.0	-2.6
SD			30.94	28.93	26.84	28.64	31.79	29.32	
Median			33.3	33.3	0.0	33.3	33.3	0.0	
95% CI			27.3, 38.3	19.1, 29.3	-13.4, -3.8	29.0, 40.3	25.8, 38.3	-8.4, 3.1	
Q1, Q3			0.0, 66.7	0.0, 33.3	-33.3, 0.0	0.0, 33.3	0.0, 66.7	-33.3, 0.0	
Min, Max			0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 100.0	
Mean Diff (95% CI) [a]					-8.6 (-13.4, -3.8)			-2.6 (-8.4, 3.1)	
P-value [a]					0.001			0.368	
Mean Diff (95% CI) [b]					-6.0 (-13.4, 1.4)				
P-value [b]					0.113				
Effect Size (95% CI) [c]					-0.19 (-0.41, 0.02)				

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C4D1	N	112	112	112	94	94	94
		Mean	33.0	24.7	-8.3	35.1	28.7	-6.4
		SD	30.51	29.25	28.47	28.24	27.04	28.62
		Median	33.3	33.3	0.0	33.3	33.3	0.0
		95% CI	27.3, 38.7	19.2, 30.2	-13.7, -3.0	29.3, 40.9	23.2, 34.3	-12.2, -0.5
		Q1, Q3	0.0, 66.7	0.0, 33.3	-33.3, 0.0	0.0, 66.7	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 66.7
		Mean Diff (95% CI) [a]			-8.3 (-13.7, -3.0)			-6.4 (-12.2, -0.5)
		P-value [a]			0.002			0.033
		Mean Diff (95% CI) [b]			-2.0 (-9.8, 5.9)			
		P-value [b]			0.626			
		Effect Size (95% CI) [c]			-0.06 (-0.28, 0.15)			
	C5D1	N	97	97	97	79	79	79
		Mean	34.4	26.1	-8.2	35.9	35.4	-0.4
		SD	30.60	30.13	26.37	28.63	26.33	33.54
		Median	33.3	33.3	0.0	33.3	33.3	0.0
		95% CI	28.2, 40.5	20.0, 32.2	-13.6, -2.9	29.5, 42.3	29.5, 41.3	-7.9, 7.1
		Q1, Q3	0.0, 66.7	0.0, 33.3	-33.3, 0.0	0.0, 66.7	33.3, 66.7	-33.3, 33.3
		Min, Max	0.0, 100.0	0.0, 100.0	-100.0, 33.3	0.0, 100.0	0.0, 100.0	-66.7, 66.7
		Mean Diff (95% CI) [a]			-8.2 (-13.6, -2.9)			-0.4 (-7.9, 7.1)
		P-value [a]			0.003			0.911
		Mean Diff (95% CI) [b]			-7.8 (-16.7, 1.1)			
		P-value [b]			0.085			
		Effect Size (95% CI) [c]			-0.25 (-0.47, -0.04)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C6D1	N	95	95	95	69	69	69
		Mean	33.3	21.4	-11.9	36.2	33.3	-2.9
		SD	29.97	27.90	24.27	29.56	28.01	34.65
		Median	33.3	0.0	0.0	33.3	33.3	0.0
		95% CI	27.2, 39.4	15.7, 27.1	-16.9, -7.0	29.1, 43.3	26.6, 40.1	-11.2, 5.4
		Q1, Q3	0.0, 66.7	0.0, 33.3	-33.3, 0.0	0.0, 66.7	0.0, 33.3	-33.3, 33.3
		Min, Max	0.0, 100.0	0.0, 100.0	-100.0, 33.3	0.0, 100.0	0.0, 100.0	-66.7, 100.0
		Mean Diff (95% CI) [a]			-11.9 (-16.9, -7.0)			-2.9 (-11.2, 5.4)
		P-value [a]			<.001			0.490
		Mean Diff (95% CI) [b]			-9.0 (-18.1, 0.1)			
		P-value [b]			0.051			
		Effect Size (95% CI) [c]			-0.29 (-0.51, -0.08)			
	C7D1	N	79	79	79	53	53	53
		Mean	32.9	22.4	-10.5	36.5	27.7	-8.8
		SD	30.43	29.10	25.90	28.69	27.53	32.78
		Median	33.3	0.0	0.0	33.3	33.3	0.0
		95% CI	26.1, 39.7	15.8, 28.9	-16.3, -4.7	28.6, 44.4	20.1, 35.3	-17.8, 0.2
		Q1, Q3	0.0, 66.7	0.0, 33.3	-33.3, 0.0	33.3, 66.7	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-100.0, 66.7
		Mean Diff (95% CI) [a]			-10.5 (-16.3, -4.7)			-8.8 (-17.8, 0.2)
		P-value [a]			0.001			0.056
		Mean Diff (95% CI) [b]			-1.7 (-11.9, 8.4)			
		P-value [b]			0.734			
		Effect Size (95% CI) [c]			-0.06 (-0.27, 0.16)			

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	50	50	50
	Mean		32.0	21.9	-10.1	38.7	30.7	-8.0
	SD		27.99	30.58	23.74	28.06	29.23	30.54
	Median		33.3	0.0	0.0	33.3	33.3	0.0
	95% CI		25.6, 38.4	14.9, 28.9	-15.5, -4.7	30.7, 46.6	22.4, 39.0	-16.7, 0.7
	Q1, Q3		0.0, 50.0	0.0, 33.3	-33.3, 0.0	33.3, 66.7	0.0, 33.3	-33.3, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 66.7
	Mean Diff (95% CI) [a]				-10.1 (-15.5, -4.7)			-8.0 (-16.7, 0.7)
	P-value [a]				<.001			0.070
	Mean Diff (95% CI) [b]				-2.1 (-11.7, 7.5)			
	P-value [b]				0.668			
	Effect Size (95% CI) [c]				-0.07 (-0.28, 0.14)			
	C9D1	N		60	60	60	42	42
Mean			32.2	26.7	-5.6	39.7	29.4	-10.3
SD			29.41	27.99	26.87	29.67	28.71	31.66
Median			33.3	33.3	0.0	33.3	33.3	0.0
95% CI			24.6, 39.8	19.4, 33.9	-12.5, 1.4	30.4, 48.9	20.4, 38.3	-20.2, -0.5
Q1, Q3			0.0, 66.7	0.0, 33.3	-33.3, 0.0	33.3, 66.7	0.0, 33.3	-33.3, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-100.0, 33.3
Mean Diff (95% CI) [a]					-5.6 (-12.5, 1.4)			-10.3 (-20.2, -0.5)
P-value [a]					0.115			0.041
Mean Diff (95% CI) [b]					4.8 (-6.8, 16.3)			
P-value [b]					0.415			
Effect Size (95% CI) [c]					0.16 (-0.06, 0.37)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)				
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline		
C10D1		N	53	53	53	30	30	30		
		Mean	32.7	27.0	-5.7	42.2	32.2	-10.0		
		SD	28.86	31.39	24.23	30.24	32.14	26.48		
		Median	33.3	33.3	0.0	33.3	33.3	0.0		
		95% CI	24.7, 40.7	18.4, 35.7	-12.3, 1.0	30.9, 53.5	20.2, 44.2	-19.9, -0.1		
		Q1, Q3	0.0, 66.7	0.0, 33.3	-33.3, 0.0	33.3, 66.7	0.0, 33.3	-33.3, 0.0		
		Min, Max	0.0, 100.0	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 33.3		
		Mean Diff (95% CI) [a]			-5.7 (-12.3, 1.0)			-10.0 (-19.9, -0.1)		
		P-value [a]			0.095			0.048		
		Mean Diff (95% CI) [b]			4.3 (-7.1, 15.7)					
		P-value [b]			0.451					
		Effect Size (95% CI) [c]			0.14 (-0.07, 0.35)					
		C11D1		N	45	45	45	23	23	23
				Mean	34.1	27.4	-6.7	34.8	24.6	-10.1
SD	29.72			27.79	23.14	25.58	27.00	29.19		
Median	33.3			33.3	0.0	33.3	33.3	0.0		
95% CI	25.1, 43.0			19.1, 35.8	-13.6, 0.3	23.7, 45.8	13.0, 36.3	-22.8, 2.5		
Q1, Q3	0.0, 66.7			0.0, 33.3	0.0, 0.0	33.3, 33.3	0.0, 33.3	-33.3, 0.0		
Min, Max	0.0, 100.0			0.0, 100.0	-66.7, 33.3	0.0, 100.0	0.0, 100.0	-66.7, 33.3		
Mean Diff (95% CI) [a]					-6.7 (-13.6, 0.3)			-10.1 (-22.8, 2.5)		
P-value [a]					0.060			0.110		
Mean Diff (95% CI) [b]					3.5 (-9.5, 16.4)					
P-value [b]					0.594					
Effect Size (95% CI) [c]					0.11 (-0.10, 0.33)					

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Table 15.15.3.1  
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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C12D1	N	41	41	41	19	19	19
		Mean	29.3	22.0	-7.3	31.6	19.3	-12.3
		SD	27.08	29.45	22.99	23.50	23.08	27.69
		Median	33.3	0.0	0.0	33.3	0.0	0.0
		95% CI	20.7, 37.8	12.7, 31.2	-14.6, -0.1	20.3, 42.9	8.2, 30.4	-25.6, 1.1
		Q1, Q3	0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 66.7	-66.7, 33.3
		Mean Diff (95% CI) [a]			-7.3 (-14.6, -0.1)			-12.3 (-25.6, 1.1)
		P-value [a]			0.048			0.069
		Mean Diff (95% CI) [b]			5.0 (-8.7, 18.6)			
		P-value [b]			0.469			
		Effect Size (95% CI) [c]			0.16 (-0.05, 0.37)			
	C13D1	N	32	32	32	15	15	15
		Mean	28.1	21.9	-6.2	35.6	15.6	-20.0
		SD	29.46	28.85	21.48	26.63	27.79	27.60
		Median	33.3	0.0	0.0	33.3	0.0	-33.3
		95% CI	17.5, 38.7	11.5, 32.3	-14.0, 1.5	20.8, 50.3	0.2, 30.9	-35.3, -4.7
		Q1, Q3	0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 33.3	0.0, 100.0	0.0, 100.0	-66.7, 33.3
		Mean Diff (95% CI) [a]			-6.2 (-14.0, 1.5)			-20.0 (-35.3, -4.7)
		P-value [a]			0.110			0.014
		Mean Diff (95% CI) [b]			13.7 (-1.1, 28.6)			
		P-value [b]			0.069			
		Effect Size (95% CI) [c]			0.45 (0.23, 0.66)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C14D1	N		33	33	33	12	12	12
	Mean		28.3	18.2	-10.1	38.9	11.1	-27.8
	SD		27.79	28.98	25.66	27.83	29.59	23.92
	Median		33.3	0.0	0.0	33.3	0.0	-33.3
	95% CI		18.4, 38.1	7.9, 28.5	-19.2, -1.0	21.2, 56.6	-7.7, 29.9	-43.0, -12.6
	Q1, Q3		0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 50.0	0.0, 0.0	-33.3, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 0.0
	Mean Diff (95% CI) [a]				-10.1 (-19.2, -1.0)			-27.8 (-43.0, -12.6)
	P-value [a]				0.031			0.002
	Mean Diff (95% CI) [b]				17.7 (0.5, 34.8)			
	P-value [b]				0.044			
	Effect Size (95% CI) [c]				0.58 (0.36, 0.79)			
	C15D1	N		28	28	28	13	13
Mean			28.6	19.0	-9.5	38.5	33.3	-5.1
SD			29.70	26.34	28.48	26.69	27.22	22.96
Median			33.3	0.0	0.0	33.3	33.3	0.0
95% CI			17.1, 40.1	8.8, 29.3	-20.6, 1.5	22.3, 54.6	16.9, 49.8	-19.0, 8.7
Q1, Q3			0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	33.3, 33.3	-33.3, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-100.0, 33.3	0.0, 100.0	0.0, 100.0	-33.3, 33.3
Mean Diff (95% CI) [a]					-9.5 (-20.6, 1.5)			-5.1 (-19.0, 8.7)
P-value [a]					0.088			0.436
Mean Diff (95% CI) [b]					-4.4 (-22.7, 13.9)			
P-value [b]					0.629			
Effect Size (95% CI) [c]					-0.14 (-0.36, 0.07)			

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C16D1	N		28	28	28	10	10	10
	Mean		27.4	15.5	-11.9	43.3	23.3	-20.0
	SD		25.75	23.10	18.62	27.44	22.50	23.31
	Median		33.3	0.0	0.0	33.3	33.3	-16.7
	95% CI		17.4, 37.4	6.5, 24.4	-19.1, -4.7	23.7, 63.0	7.2, 39.4	-36.7, -3.3
	Q1, Q3		0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 66.7	0.0, 33.3	-33.3, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-33.3, 33.3	0.0, 100.0	0.0, 66.7	-66.7, 0.0
	Mean Diff (95% CI) [a]				-11.9 (-19.1, -4.7)			-20.0 (-36.7, -3.3)
	P-value [a]				0.002			0.024
	Mean Diff (95% CI) [b]				8.1 (-6.8, 23.0)			
	P-value [b]				0.277			
	Effect Size (95% CI) [c]				0.26 (0.05, 0.48)			
	C17D1	N		26	26	26	7	7
Mean			25.6	20.5	-5.1	52.4	19.0	-33.3
SD			27.17	28.40	22.49	26.23	26.23	19.25
Median			33.3	0.0	0.0	33.3	0.0	-33.3
95% CI			14.7, 36.6	9.0, 32.0	-14.2, 4.0	28.1, 76.6	-5.2, 43.3	-51.1, -15.5
Q1, Q3			0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 66.7	0.0, 33.3	-33.3, -33.3
Min, Max			0.0, 100.0	0.0, 100.0	-33.3, 33.3	33.3, 100.0	0.0, 66.7	-66.7, 0.0
Mean Diff (95% CI) [a]					-5.1 (-14.2, 4.0)			-33.3 (-51.1, -15.5)
P-value [a]					0.256			0.004
Mean Diff (95% CI) [b]					28.2 (9.2, 47.2)			
P-value [b]					0.005			
Effect Size (95% CI) [c]					0.92 (0.69, 1.14)			

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C18D1	N	22	22	22	7	7	7
		Mean	27.3	22.7	-4.5	42.9	23.8	-19.0
		SD	28.43	33.15	23.67	31.71	37.09	26.23
		Median	33.3	0.0	0.0	33.3	0.0	0.0
		95% CI	14.7, 39.9	8.0, 37.4	-15.0, 6.0	13.5, 72.2	-10.5, 58.1	-43.3, 5.2
		Q1, Q3	0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 66.7	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 0.0
		Mean Diff (95% CI) [a]			-4.5 (-15.0, 6.0)			-19.0 (-43.3, 5.2)
		P-value [a]			0.378			0.103
		Mean Diff (95% CI) [b]			14.5 (-7.1, 36.1)			
		P-value [b]			0.180			
		Effect Size (95% CI) [c]			0.47 (0.26, 0.69)			
	C19D1	N	20	20	20	6	6	6
		Mean	28.3	21.7	-6.7	33.3	27.8	-5.6
		SD	29.17	31.11	17.44	21.08	13.61	25.09
		Median	33.3	0.0	0.0	33.3	33.3	0.0
		95% CI	14.7, 42.0	7.1, 36.2	-14.8, 1.5	11.2, 55.5	13.5, 42.1	-31.9, 20.8
		Q1, Q3	0.0, 33.3	0.0, 33.3	-16.7, 0.0	33.3, 33.3	33.3, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 33.3
		Mean Diff (95% CI) [a]			-6.7 (-14.8, 1.5)			-5.6 (-31.9, 20.8)
		P-value [a]			0.104			0.611
		Mean Diff (95% CI) [b]			-1.1 (-19.6, 17.4)			
		P-value [b]			0.903			
		Effect Size (95% CI) [c]			-0.04 (-0.25, 0.18)			

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C20D1	N		20	20	20	4	4	4	
	Mean		23.3	18.3	-5.0	41.7	16.7	-25.0	
	SD		24.42	22.88	19.57	16.67	19.25	16.67	
	Median		33.3	0.0	0.0	33.3	16.7	-33.3	
	95% CI		11.9, 34.8	7.6, 29.0	-14.2, 4.2	15.1, 68.2	-14.0, 47.3	-51.5, 1.5	
	Q1, Q3		0.0, 33.3	0.0, 33.3	-16.7, 0.0	33.3, 50.0	0.0, 33.3	-33.3, -16.7	
	Min, Max		0.0, 66.7	0.0, 66.7	-33.3, 33.3	33.3, 66.7	0.0, 33.3	-33.3, 0.0	
	Mean Diff (95% CI) [a]				-5.0 (-14.2, 4.2)			-25.0 (-51.5, 1.5)	
	P-value [a]				0.267			0.058	
	Mean Diff (95% CI) [b]				20.0 (-1.8, 41.8)				
	P-value [b]				0.070				
	Effect Size (95% CI) [c]				0.65 (0.43, 0.87)				
	C21D1	N		18	18	18	4	4	4
		Mean		24.1	22.2	-1.9	41.7	25.0	-16.7
SD			25.06	25.57	24.18	16.67	16.67	19.25	
Median			33.3	16.7	0.0	33.3	33.3	-16.7	
95% CI			11.6, 36.5	9.5, 34.9	-13.9, 10.2	15.1, 68.2	-1.5, 51.5	-47.3, 14.0	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	33.3, 50.0	16.7, 33.3	-33.3, 0.0	
Min, Max			0.0, 66.7	0.0, 66.7	-33.3, 66.7	33.3, 66.7	0.0, 33.3	-33.3, 0.0	
Mean Diff (95% CI) [a]					-1.9 (-13.9, 10.2)			-16.7 (-47.3, 14.0)	
P-value [a]					0.749			0.182	
Mean Diff (95% CI) [b]					14.8 (-12.3, 41.9)				
P-value [b]					0.268				
Effect Size (95% CI) [c]					0.48 (0.27, 0.70)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		15	15	15	3	3	3	
	Mean		26.7	24.4	-2.2	44.4	11.1	-33.3	
	SD		25.82	26.63	29.46	19.25	19.25	0.00	
	Median		33.3	33.3	0.0	33.3	0.0	-33.3	
	95% CI		12.4, 41.0	9.7, 39.2	-18.5, 14.1	-3.4, 92.3	-36.7, 58.9	-33.3, -33.3	
	Q1, Q3		0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 66.7	0.0, 33.3	-33.3, -33.3	
	Min, Max		0.0, 66.7	0.0, 66.7	-33.3, 66.7	33.3, 66.7	0.0, 33.3	-33.3, -33.3	
	Mean Diff (95% CI) [a]				-2.2 (-18.5, 14.1)			-2.2 (-18.5, 14.1)	
	P-value [a]				0.774			0.774	
	Mean Diff (95% CI) [b]				31.1 (-5.8, 68.1)			31.1 (-5.8, 68.1)	
	P-value [b]				0.093			0.093	
	Effect Size (95% CI) [c]				1.01 (0.79, 1.24)			1.01 (0.79, 1.24)	
	C23D1	N		11	11	11	3	3	3
		Mean		24.2	21.2	-3.0	44.4	22.2	-22.2
SD			26.21	26.97	17.98	19.25	19.25	19.25	
Median			33.3	0.0	0.0	33.3	33.3	-33.3	
95% CI			6.6, 41.8	3.1, 39.3	-15.1, 9.0	-3.4, 92.3	-25.6, 70.0	-70.0, 25.6	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	33.3, 66.7	0.0, 33.3	-33.3, 0.0	
Min, Max			0.0, 66.7	0.0, 66.7	-33.3, 33.3	33.3, 66.7	0.0, 33.3	-33.3, 0.0	
Mean Diff (95% CI) [a]					-3.0 (-15.1, 9.0)			-3.0 (-15.1, 9.0)	
P-value [a]					0.588			0.588	
Mean Diff (95% CI) [b]					19.2 (-6.6, 45.0)			19.2 (-6.6, 45.0)	
P-value [b]					0.131			0.131	
Effect Size (95% CI) [c]					0.62 (0.41, 0.84)			0.62 (0.41, 0.84)	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C24D1	N	10	10	10	2	2	2
		Mean	26.7	20.0	-6.7	50.0	33.3	-16.7
		SD	26.29	28.11	21.08	23.57	0.00	23.57
		Median	33.3	0.0	0.0	50.0	33.3	-16.7
		95% CI	7.9, 45.5	-0.1, 40.1	-21.7, 8.4	-161.8, 261.8	33.3, 33.3	-228.4, 195.1
		Q1, Q3	0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 66.7	33.3, 33.3	-33.3, 0.0
		Min, Max	0.0, 66.7	0.0, 66.7	-33.3, 33.3	33.3, 66.7	33.3, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			-6.7 (-21.7, 8.4)			-16.7 (-228.4, 195.1)
		P-value [a]			0.343			0.500
		Mean Diff (95% CI) [b]			10.0 (-26.8, 46.8)			
		P-value [b]			0.559			
		Effect Size (95% CI) [c]			0.33 (0.11, 0.54)			
	C25D1	N	9	9	9	0	0	0
		Mean	25.9	29.6	3.7	NE	NE	NE
		SD	27.78	35.14	26.06	NE	NE	NE
		Median	33.3	33.3	0.0	NE	NE	NE
		95% CI	4.6, 47.3	2.6, 56.6	-16.3, 23.7	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 66.7	0.0, 100.0	-33.3, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			3.7 (-16.3, 23.7)			NE (NE, NE)
		P-value [a]			0.681			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	16.7	8.3	-8.3	33.3	0.0	-33.3
		SD	17.82	15.43	23.57	NE	NE	NE
		Median	16.7	0.0	0.0	33.3	0.0	-33.3
		95% CI	1.8, 31.6	-4.6, 21.2	-28.0, 11.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 33.3	0.0, 16.7	-33.3, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 33.3	0.0, 33.3	-33.3, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			-8.3 (-28.0, 11.4)			-33.3 (NE, NE)
		P-value [a]			0.351			NE
		Mean Diff (95% CI) [b]			25.0 (-34.1, 84.1)			
		P-value [b]			0.351			
		Effect Size (95% CI) [c]			0.81 (0.59, 1.04)			
	C27D1	N	8	8	8	1	1	1
		Mean	16.7	16.7	0.0	33.3	33.3	0.0
		SD	17.82	17.82	30.86	NE	NE	NE
		Median	16.7	16.7	0.0	33.3	33.3	0.0
		95% CI	1.8, 31.6	1.8, 31.6	-25.8, 25.8	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 33.3	0.0, 33.3	-33.3, 33.3	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	-33.3, 33.3	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (-25.8, 25.8)			0.0 (NE, NE)
		P-value [a]			1.000			NE
		Mean Diff (95% CI) [b]			0.0 (-77.4, 77.4)			
		P-value [b]			1.000			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	19.0	9.5	-9.5	33.3	33.3	0.0
		SD	17.82	16.27	25.20	NE	NE	NE
		Median	33.3	0.0	0.0	33.3	33.3	0.0
		95% CI	2.6, 35.5	-5.5, 24.6	-32.8, 13.8	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	-33.3, 33.3	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Mean Diff (95% CI) [a]			-9.5 (-32.8, 13.8)			0.0 (NE, NE)
		P-value [a]			0.356			NE
		Mean Diff (95% CI) [b]			-9.5 (-75.4, 56.4)			
		P-value [b]			0.736			
		Effect Size (95% CI) [c]			-0.31 (-0.52, -0.10)			
	C29D1	N	4	4	4	1	1	1
		Mean	16.7	25.0	8.3	33.3	33.3	0.0
		SD	19.25	16.67	31.91	NE	NE	NE
		Median	16.7	33.3	16.7	33.3	33.3	0.0
		95% CI	-14.0, 47.3	-1.5, 51.5	-42.4, 59.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 33.3	16.7, 33.3	-16.7, 33.3	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	-33.3, 33.3	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Mean Diff (95% CI) [a]			8.3 (-42.4, 59.1)			0.0 (NE, NE)
		P-value [a]			0.638			NE
		Mean Diff (95% CI) [b]			8.3 (-105.2, 121.9)			
		P-value [b]			0.830			
		Effect Size (95% CI) [c]			0.27 (0.06, 0.49)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C30D1	N		4	4	4	1	1	1	
	Mean		25.0	8.3	-16.7	33.3	33.3	0.0	
	SD		16.67	16.67	19.25	NE	NE	NE	
	Median		33.3	0.0	-16.7	33.3	33.3	0.0	
	95% CI		-1.5, 51.5	-18.2, 34.9	-47.3, 14.0	NE, NE	NE, NE	NE, NE	
	Q1, Q3		16.7, 33.3	0.0, 16.7	-33.3, 0.0	33.3, 33.3	33.3, 33.3	0.0, 0.0	
	Min, Max		0.0, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	33.3, 33.3	0.0, 0.0	
	Mean Diff (95% CI) [a]				-16.7 (-47.3, 14.0)			0.0 (NE, NE)	
	P-value [a]				0.182			NE	
	Mean Diff (95% CI) [b]				-16.7 (-85.1, 51.8)				
	P-value [b]				0.495				
	Effect Size (95% CI) [c]				-0.54 (-0.76, -0.33)				
	C31D1	N		2	2	2	1	1	1
		Mean		33.3	16.7	-16.7	33.3	0.0	-33.3
SD			0.00	23.57	23.57	NE	NE	NE	
Median			33.3	16.7	-16.7	33.3	0.0	-33.3	
95% CI			33.3, 33.3	-195.1, 228.4	-228.4, 195.1	NE, NE	NE, NE	NE, NE	
Q1, Q3			33.3, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3	
Min, Max			33.3, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3	
Mean Diff (95% CI) [a]					-16.7 (-228.4, 195.1)			-33.3 (NE, NE)	
P-value [a]					0.500			NE	
Mean Diff (95% CI) [b]					16.7 (-350.1, 383.5)				
P-value [b]					0.667				
Effect Size (95% CI) [c]					0.54 (0.33, 0.76)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	33.3	16.7	-16.7	33.3	33.3	0.0
		SD	0.00	23.57	23.57	NE	NE	NE
		Median	33.3	16.7	-16.7	33.3	33.3	0.0
		95% CI	33.3, 33.3	-195.1, 228.4	-228.4, 195.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Min, Max	33.3, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Mean Diff (95% CI) [a]			-16.7 (-228.4, 195.1)			0.0 (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			-16.7 (-383.5, 350.1)			
		P-value [b]			0.667			
		Effect Size (95% CI) [c]			-0.54 (-0.76, -0.33)			
	C33D1	N	3	3	3	1	1	1
		Mean	33.3	11.1	-22.2	33.3	33.3	0.0
		SD	0.00	19.25	19.25	NE	NE	NE
		Median	33.3	0.0	-33.3	33.3	33.3	0.0
		95% CI	33.3, 33.3	-36.7, 58.9	-70.0, 25.6	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Min, Max	33.3, 33.3	0.0, 33.3	-33.3, 0.0	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Mean Diff (95% CI) [a]			-22.2 (-70.0, 25.6)			0.0 (NE, NE)
		P-value [a]			0.184			NE
		Mean Diff (95% CI) [b]			-22.2 (-117.8, 73.4)			
		P-value [b]			0.423			
		Effect Size (95% CI) [c]			-0.72 (-0.94, -0.50)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	33.3	22.2	-11.1	NE	NE	NE
		SD	0.00	38.49	38.49	NE	NE	NE
		Median	33.3	0.0	-33.3	NE	NE	NE
		95% CI	33.3, 33.3	-73.4, 117.8	-106.7, 84.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 66.7	-33.3, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 33.3	0.0, 66.7	-33.3, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-11.1 (-106.7, 84.5)			NE (NE, NE)
		P-value [a]			0.667			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	33.3	16.7	-16.7	NE	NE	NE
		SD	0.00	23.57	23.57	NE	NE	NE
		Median	33.3	16.7	-16.7	NE	NE	NE
		95% CI	33.3, 33.3	-195.1, 228.4	-228.4, 195.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 33.3	-33.3, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 33.3	0.0, 33.3	-33.3, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-16.7 (-228.4, 195.1)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C36D1	N		3	3	3	0	0	0	
	Mean		33.3	11.1	-22.2	NE	NE	NE	
	SD		0.00	19.25	19.25	NE	NE	NE	
	Median		33.3	0.0	-33.3	NE	NE	NE	
	95% CI		33.3, 33.3	-36.7, 58.9	-70.0, 25.6	NE, NE	NE, NE	NE, NE	
	Q1, Q3		33.3, 33.3	0.0, 33.3	-33.3, 0.0	NE, NE	NE, NE	NE, NE	
	Min, Max		33.3, 33.3	0.0, 33.3	-33.3, 0.0	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				-22.2 (-70.0, 25.6)			NE (NE, NE)	
	P-value [a]				0.184			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C37D1	N		3	3	3	0	0	0
		Mean		33.3	11.1	-22.2	NE	NE	NE
		SD		0.00	19.25	19.25	NE	NE	NE
Median			33.3	0.0	-33.3	NE	NE	NE	
95% CI			33.3, 33.3	-36.7, 58.9	-70.0, 25.6	NE, NE	NE, NE	NE, NE	
Q1, Q3			33.3, 33.3	0.0, 33.3	-33.3, 0.0	NE, NE	NE, NE	NE, NE	
Min, Max			33.3, 33.3	0.0, 33.3	-33.3, 0.0	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					-22.2 (-70.0, 25.6)			NE (NE, NE)	
P-value [a]					0.184			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	33.3	0.0	-33.3	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	33.3	0.0	-33.3	NE	NE	NE
		95% CI	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-33.3 (-33.3, -33.3)			NE (NE, NE)
		P-value [a]			<.001			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	33.3	0.0	-33.3	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	33.3	0.0	-33.3	NE	NE	NE
		95% CI	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-33.3 (-33.3, -33.3)			NE (NE, NE)
		P-value [a]			<.001			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	33.3	16.7	-16.7	NE	NE	NE
		SD	0.00	23.57	23.57	NE	NE	NE
		Median	33.3	16.7	-16.7	NE	NE	NE
		95% CI	33.3, 33.3	-195.1, 228.4	-228.4, 195.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 33.3	-33.3, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 33.3	0.0, 33.3	-33.3, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-16.7 (-228.4, 195.1)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	33.3	0.0	-33.3	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	33.3	0.0	-33.3	NE	NE	NE
		95% CI	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-33.3 (-33.3, -33.3)			NE (NE, NE)
		P-value [a]			<.001			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	33.3	0.0	-33.3	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	33.3	0.0	-33.3	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-33.3 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	33.3	0.0	-33.3	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	33.3	0.0	-33.3	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Min, Max	33.3, 33.3	0.0, 0.0	-33.3, -33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-33.3 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		131	131	131	126	126	126	
	Mean		30.8	29.5	-1.3	34.4	32.8	-1.6	
	SD		31.38	33.50	31.05	30.97	27.32	31.79	
	Median		33.3	33.3	0.0	33.3	33.3	0.0	
	95% CI		25.4, 36.2	23.7, 35.3	-6.6, 4.1	28.9, 39.9	28.0, 37.6	-7.2, 4.0	
	Q1, Q3		0.0, 33.3	0.0, 66.7	-33.3, 0.0	0.0, 66.7	0.0, 33.3	-33.3, 33.3	
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 100.0	
	Mean Diff (95% CI) [a]				-1.3 (-6.6, 4.1)			-1.6 (-7.2, 4.0)	
	P-value [a]				0.640			0.576	
	Mean Diff (95% CI) [b]				0.3 (-7.4, 8.0)				
	P-value [b]				0.936				
	Effect Size (95% CI) [c]				0.01 (-0.20, 0.22)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			21.4	21.4	0.0	40.7	40.7	0.0
SD			28.06	24.83	32.03	43.39	36.43	52.70	
Median			16.7	16.7	0.0	33.3	33.3	0.0	
95% CI			5.2, 37.6	7.1, 35.8	-18.5, 18.5	7.4, 74.1	12.7, 68.7	-40.5, 40.5	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 66.7	0.0, 66.7	-33.3, 33.3	
Min, Max			0.0, 100.0	0.0, 66.7	-100.0, 33.3	0.0, 100.0	0.0, 100.0	-100.0, 66.7	
Mean Diff (95% CI) [a]					0.0 (-18.5, 18.5)			0.0 (-40.5, 40.5)	
P-value [a]					1.000			1.000	
Mean Diff (95% CI) [b]					0.0 (-36.6, 36.6)				
P-value [b]					1.000				
Effect Size (95% CI) [c]					0.00 (-0.21, 0.21)				
Appetite Loss	Baseline	N	174			165			
	Mean		18.4			23.0			
	SD		27.18			29.59			
	Median		0.0			0.0			
	95% CI		14.3, 22.5			18.5, 27.6			
	Q1, Q3		0.0, 33.3			0.0, 33.3			
	Min, Max		0.0, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C2D1	N		152	152	152	144	144	144
	Mean		17.1	23.5	6.4	23.4	25.9	2.5
	SD		26.85	28.41	25.94	30.30	31.65	33.70
	95% CI		12.8, 21.4	18.9, 28.0	2.2, 10.5	18.4, 28.4	20.7, 31.1	-3.0, 8.1
	Median		0.0	0.0	0.0	0.0	16.7	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 100.0
	Mean Diff (95% CI) [a]				6.4 (2.2, 10.5)			2.5 (-3.0, 8.1)
	P-value [a]				0.003			0.366
	Mean Diff (95% CI) [b]				3.8 (-3.0, 10.7)			
	P-value [b]				0.275			
	Effect Size (95% CI) [c]				0.13 (-0.08, 0.35)			
	C3D1	N		123	123	123	102	102
Mean			15.2	20.1	4.9	23.5	21.6	-2.0
SD			25.34	28.86	30.98	29.51	28.01	33.44
95% CI			10.7, 19.7	14.9, 25.2	-0.7, 10.4	17.7, 29.3	16.1, 27.1	-8.5, 4.6
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-66.7, 100.0
Mean Diff (95% CI) [a]					4.9 (-0.7, 10.4)			-2.0 (-8.5, 4.6)
P-value [a]					0.083			0.555
Mean Diff (95% CI) [b]					6.8 (-1.6, 15.3)			
P-value [b]					0.113			
Effect Size (95% CI) [c]					0.24 (0.03, 0.45)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		14.6	17.0	2.4	25.2	22.3	-2.8
	SD		25.62	26.09	27.11	29.61	26.95	36.80
	95% CI		9.8, 19.4	12.1, 21.8	-2.7, 7.5	19.1, 31.2	16.8, 27.9	-10.4, 4.7
	Median		0.0	0.0	0.0	33.3	0.0	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 16.7	0.0, 33.3	0.0, 33.3	-33.3, 33.3
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-100.0, 100.0
	Mean Diff (95% CI) [a]				2.4 (-2.7, 7.5)			-2.8 (-10.4, 4.7)
	P-value [a]				0.355			0.457
	Mean Diff (95% CI) [b]				5.2 (-3.6, 14.0)			
	P-value [b]				0.244			
	Effect Size (95% CI) [c]				0.18 (-0.03, 0.40)			
	C5D1	N		96	96	96	80	80
Mean			14.9	13.9	-1.0	24.6	19.6	-5.0
SD			24.60	24.02	28.39	30.35	28.41	34.41
95% CI			9.9, 19.9	9.0, 18.8	-6.8, 4.7	17.8, 31.3	13.3, 25.9	-12.7, 2.7
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 66.7
Mean Diff (95% CI) [a]					-1.0 (-6.8, 4.7)			-5.0 (-12.7, 2.7)
P-value [a]					0.720			0.198
Mean Diff (95% CI) [b]					4.0 (-5.4, 13.3)			
P-value [b]					0.404			
Effect Size (95% CI) [c]					0.14 (-0.07, 0.35)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C6D1	N	95	95	95	69	69	69
		Mean	13.0	12.6	-0.4	24.6	22.2	-2.4
		SD	23.47	22.38	25.03	30.06	27.81	34.45
		95% CI	8.2, 17.8	8.1, 17.2	-5.4, 4.7	17.4, 31.9	15.5, 28.9	-10.7, 5.9
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 33.3
		Min, Max	0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 100.0
		Mean Diff (95% CI) [a]			-0.4 (-5.4, 4.7)			-2.4 (-10.7, 5.9)
		P-value [a]			0.892			0.562
		Mean Diff (95% CI) [b]			2.1 (-7.1, 11.2)			
		P-value [b]			0.657			
		Effect Size (95% CI) [c]			0.07 (-0.14, 0.29)			
	C7D1	N	79	79	79	53	53	53
		Mean	14.3	10.5	-3.8	25.2	13.2	-11.9
		SD	24.85	18.90	23.86	28.42	21.02	29.30
		95% CI	8.8, 19.9	6.3, 14.8	-9.1, 1.5	17.3, 33.0	7.4, 19.0	-20.0, -3.9
		Median	0.0	0.0	0.0	33.3	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 66.7	-100.0, 66.7	0.0, 100.0	0.0, 66.7	-100.0, 33.3
		Mean Diff (95% CI) [a]			-3.8 (-9.1, 1.5)			-11.9 (-20.0, -3.9)
		P-value [a]			0.161			0.005
		Mean Diff (95% CI) [b]			8.2 (-1.0, 17.3)			
		P-value [b]			0.082			
		Effect Size (95% CI) [c]			0.29 (0.07, 0.50)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	50	50	50
	Mean		15.8	12.7	-3.1	26.0	15.3	-10.7
	SD		26.37	21.06	25.05	28.80	25.39	33.29
	95% CI		9.8, 21.8	7.9, 17.5	-8.8, 2.7	17.8, 34.2	8.1, 22.5	-20.1, -1.2
	Median		0.0	0.0	0.0	33.3	0.0	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-100.0, 66.7
	Mean Diff (95% CI) [a]				-3.1 (-8.8, 2.7)			-10.7 (-20.1, -1.2)
	P-value [a]				0.289			0.028
	Mean Diff (95% CI) [b]				7.6 (-2.7, 17.9)			
	P-value [b]				0.147			
	Effect Size (95% CI) [c]				0.27 (0.05, 0.48)			
	C9D1	N		60	60	60	42	42
Mean			15.0	13.3	-1.7	26.2	14.3	-11.9
SD			24.87	22.30	31.55	29.94	23.45	35.17
95% CI			8.6, 21.4	7.6, 19.1	-9.8, 6.5	16.9, 35.5	7.0, 21.6	-22.9, -0.9
Median			0.0	0.0	0.0	33.3	0.0	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 66.7
Mean Diff (95% CI) [a]					-1.7 (-9.8, 6.5)			-11.9 (-22.9, -0.9)
P-value [a]					0.684			0.034
Mean Diff (95% CI) [b]					10.2 (-3.0, 23.4)			
P-value [b]					0.127			
Effect Size (95% CI) [c]					0.36 (0.15, 0.57)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C10D1		N	54	54	54	30	30	30
		Mean	15.4	6.2	-9.3	27.8	20.0	-7.8
		SD	25.67	15.96	27.79	29.14	24.13	28.61
		95% CI	8.4, 22.4	1.8, 10.5	-16.8, -1.7	16.9, 38.7	11.0, 29.0	-18.5, 2.9
		Median	0.0	0.0	0.0	33.3	16.7	0.0
		Q1, Q3	0.0, 33.3	0.0, 0.0	-33.3, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 66.7	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 33.3
		Mean Diff (95% CI) [a]			-9.3 (-16.8, -1.7)			-7.8 (-18.5, 2.9)
		P-value [a]			0.018			0.147
		Mean Diff (95% CI) [b]			-1.5 (-14.2, 11.2)			
		P-value [b]			0.817			
		Effect Size (95% CI) [c]			-0.05 (-0.26, 0.16)			
		C11D1		N	45	45	45	23
Mean	15.6			10.4	-5.2	23.2	13.0	-10.1
SD	26.21			17.15	30.11	23.43	19.43	30.87
95% CI	7.7, 23.4			5.2, 15.5	-14.2, 3.9	13.1, 33.3	4.6, 21.4	-23.5, 3.2
Median	0.0			0.0	0.0	33.3	0.0	0.0
Q1, Q3	0.0, 33.3			0.0, 33.3	-33.3, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
Min, Max	0.0, 100.0			0.0, 66.7	-100.0, 33.3	0.0, 66.7	0.0, 66.7	-66.7, 33.3
Mean Diff (95% CI) [a]					-5.2 (-14.2, 3.9)			-10.1 (-23.5, 3.2)
P-value [a]					0.254			0.129
Mean Diff (95% CI) [b]					5.0 (-10.6, 20.5)			
P-value [b]					0.526			
Effect Size (95% CI) [c]					0.17 (-0.04, 0.39)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C12D1	N	41	41	41	19	19	19
		Mean	15.4	9.8	-5.7	22.8	8.8	-14.0
		SD	26.97	18.62	28.77	22.37	18.73	25.62
		95% CI	6.9, 24.0	3.9, 15.6	-14.8, 3.4	12.0, 33.6	-0.3, 17.8	-26.4, -1.7
		Median	0.0	0.0	0.0	33.3	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 0.0	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 66.7	-100.0, 33.3	0.0, 66.7	0.0, 66.7	-66.7, 33.3
		Mean Diff (95% CI) [a]			-5.7 (-14.8, 3.4)			-14.0 (-26.4, -1.7)
		P-value [a]			0.213			0.028
		Mean Diff (95% CI) [b]			8.3 (-7.1, 23.8)			
		P-value [b]			0.285			
		Effect Size (95% CI) [c]			0.29 (0.08, 0.51)			
	C13D1	N	32	32	32	15	15	15
		Mean	14.6	8.3	-6.3	24.4	4.4	-20.0
		SD	28.00	14.66	32.17	26.63	11.73	24.56
		95% CI	4.5, 24.7	3.0, 13.6	-17.8, 5.3	9.7, 39.2	-2.1, 10.9	-33.6, -6.4
		Median	0.0	0.0	0.0	33.3	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 16.7	0.0, 0.0	0.0, 33.3	0.0, 0.0	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 33.3	-100.0, 33.3	0.0, 66.7	0.0, 33.3	-66.7, 0.0
		Mean Diff (95% CI) [a]			-6.3 (-17.8, 5.3)			-20.0 (-33.6, -6.4)
		P-value [a]			0.280			0.007
		Mean Diff (95% CI) [b]			13.7 (-5.2, 32.7)			
		P-value [b]			0.150			
		Effect Size (95% CI) [c]			0.48 (0.27, 0.70)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C14D1	N		33	33	33	12	12	12
	Mean		14.1	9.1	-5.1	25.0	13.9	-11.1
	SD		27.68	17.23	33.46	25.13	17.16	21.71
	95% CI		4.3, 24.0	3.0, 15.2	-16.9, 6.8	9.0, 41.0	3.0, 24.8	-24.9, 2.7
	Median		0.0	0.0	0.0	33.3	0.0	0.0
	Q1, Q3		0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 33.3	-16.7, 0.0
	Min, Max		0.0, 100.0	0.0, 66.7	-100.0, 66.7	0.0, 66.7	0.0, 33.3	-66.7, 0.0
	Mean Diff (95% CI) [a]				-5.1 (-16.9, 6.8)			-11.1 (-24.9, 2.7)
	P-value [a]				0.392			0.104
	Mean Diff (95% CI) [b]				6.1 (-14.9, 27.1)			
	P-value [b]				0.563			
	Effect Size (95% CI) [c]				0.21 (0.00, 0.43)			
	C15D1	N		28	28	28	13	13
Mean			15.5	13.1	-2.4	28.2	15.4	-12.8
SD			29.37	20.96	36.21	26.69	17.30	28.99
95% CI			4.1, 26.9	5.0, 21.2	-16.4, 11.7	12.1, 44.3	4.9, 25.8	-30.3, 4.7
Median			0.0	0.0	0.0	33.3	0.0	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 16.7	0.0, 33.3	0.0, 33.3	-33.3, 0.0
Min, Max			0.0, 100.0	0.0, 66.7	-100.0, 66.7	0.0, 66.7	0.0, 33.3	-66.7, 33.3
Mean Diff (95% CI) [a]					-2.4 (-16.4, 11.7)			-12.8 (-30.3, 4.7)
P-value [a]					0.731			0.137
Mean Diff (95% CI) [b]					10.4 (-12.7, 33.6)			
P-value [b]					0.368			
Effect Size (95% CI) [c]					0.37 (0.15, 0.58)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C16D1	N	28	28	28	10	10	10
		Mean	15.5	10.7	-4.8	26.7	20.0	-6.7
		SD	29.37	22.32	33.60	26.29	17.21	26.29
		95% CI	4.1, 26.9	2.1, 19.4	-17.8, 8.3	7.9, 45.5	7.7, 32.3	-25.5, 12.1
		Median	0.0	0.0	0.0	33.3	33.3	0.0
		Q1, Q3	0.0, 33.3	0.0, 16.7	0.0, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 66.7	0.0, 33.3	-33.3, 33.3
		Mean Diff (95% CI) [a]			-4.8 (-17.8, 8.3)			-6.7 (-25.5, 12.1)
		P-value [a]			0.460			0.443
		Mean Diff (95% CI) [b]			1.9 (-21.9, 25.8)			
		P-value [b]			0.872			
		Effect Size (95% CI) [c]			0.07 (-0.15, 0.28)			
	C17D1	N	26	26	26	7	7	7
		Mean	16.7	9.0	-7.7	28.6	14.3	-14.3
		SD	30.18	20.13	30.27	23.00	17.82	17.82
		95% CI	4.5, 28.9	0.8, 17.1	-19.9, 4.5	7.3, 49.8	-2.2, 30.8	-30.8, 2.2
		Median	0.0	0.0	0.0	33.3	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 66.7	-100.0, 66.7	0.0, 66.7	0.0, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			-7.7 (-19.9, 4.5)			-14.3 (-30.8, 2.2)
		P-value [a]			0.207			0.078
		Mean Diff (95% CI) [b]			6.6 (-18.0, 31.2)			
		P-value [b]			0.588			
		Effect Size (95% CI) [c]			0.23 (0.02, 0.45)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C18D1	N		22	22	22	7	7	7
	Mean		16.7	10.6	-6.1	23.8	14.3	-9.5
	SD		32.12	21.54	37.99	25.20	17.82	31.71
	95% CI		2.4, 30.9	1.1, 20.2	-22.9, 10.8	0.5, 47.1	-2.2, 30.8	-38.8, 19.8
	Median		0.0	0.0	0.0	33.3	0.0	0.0
	Q1, Q3		0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
	Min, Max		0.0, 100.0	0.0, 66.7	-100.0, 66.7	0.0, 66.7	0.0, 33.3	-66.7, 33.3
	Mean Diff (95% CI) [a]				-6.1 (-22.9, 10.8)			-9.5 (-38.8, 19.8)
	P-value [a]				0.463			0.457
	Mean Diff (95% CI) [b]				3.5 (-29.2, 36.1)			
	P-value [b]				0.829			
	Effect Size (95% CI) [c]				0.12 (-0.09, 0.33)			
	C19D1	N		20	20	20	6	6
Mean			18.3	3.3	-15.0	22.2	16.7	-5.6
SD			33.29	10.26	35.00	27.22	18.26	38.97
95% CI			2.8, 33.9	-1.5, 8.1	-31.4, 1.4	-6.3, 50.8	-2.5, 35.8	-46.5, 35.3
Median			0.0	0.0	0.0	16.7	16.7	0.0
Q1, Q3			0.0, 33.3	0.0, 0.0	-16.7, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 33.3
Min, Max			0.0, 100.0	0.0, 33.3	-100.0, 33.3	0.0, 66.7	0.0, 33.3	-66.7, 33.3
Mean Diff (95% CI) [a]					-15.0 (-31.4, 1.4)			-5.6 (-46.5, 35.3)
P-value [a]					0.070			0.741
Mean Diff (95% CI) [b]					-9.4 (-43.9, 25.0)			
P-value [b]					0.577			
Effect Size (95% CI) [c]					-0.33 (-0.55, -0.12)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		20	20	20	4	4	4
	Mean		18.3	6.7	-11.7	25.0	0.0	-25.0
	SD		33.29	13.68	29.17	31.91	0.00	31.91
	95% CI		2.8, 33.9	0.3, 13.1	-25.3, 2.0	-25.8, 75.8	0.0, 0.0	-75.8, 25.8
	Median		0.0	0.0	0.0	16.7	0.0	-16.7
	Q1, Q3		0.0, 33.3	0.0, 0.0	-16.7, 0.0	0.0, 50.0	0.0, 0.0	-50.0, 0.0
	Min, Max		0.0, 100.0	0.0, 33.3	-100.0, 33.3	0.0, 66.7	0.0, 0.0	-66.7, 0.0
	Mean Diff (95% CI) [a]				-11.7 (-25.3, 2.0)			-25.0 (-75.8, 25.8)
	P-value [a]				0.090			0.215
	Mean Diff (95% CI) [b]				13.3 (-20.2, 46.9)			
	P-value [b]				0.419			
	Effect Size (95% CI) [c]				0.47 (0.25, 0.68)			
	C21D1	N		18	18	18	4	4
Mean			20.4	9.3	-11.1	25.0	25.0	0.0
SD			34.56	19.15	39.61	31.91	16.67	27.22
95% CI			3.2, 37.6	-0.3, 18.8	-30.8, 8.6	-25.8, 75.8	-1.5, 51.5	-43.3, 43.3
Median			0.0	0.0	0.0	16.7	33.3	0.0
Q1, Q3			0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 50.0	16.7, 33.3	-16.7, 16.7
Min, Max			0.0, 100.0	0.0, 66.7	-100.0, 33.3	0.0, 66.7	0.0, 33.3	-33.3, 33.3
Mean Diff (95% CI) [a]					-11.1 (-30.8, 8.6)			0.0 (-43.3, 43.3)
P-value [a]					0.250			1.000
Mean Diff (95% CI) [b]					-11.1 (-54.9, 32.7)			
P-value [b]					0.603			
Effect Size (95% CI) [c]					-0.39 (-0.61, -0.18)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		15	15	15	3	3	3	
	Mean		11.1	11.1	0.0	33.3	0.0	-33.3	
	SD		20.57	24.12	25.20	33.33	0.00	33.33	
	95% CI		-0.3, 22.5	-2.2, 24.5	-14.0, 14.0	-49.5, 116.1	0.0, 0.0	-116.1, 49.5	
	Median		0.0	0.0	0.0	33.3	0.0	-33.3	
	Q1, Q3		0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 66.7	0.0, 0.0	-66.7, 0.0	
	Min, Max		0.0, 66.7	0.0, 66.7	-66.7, 33.3	0.0, 66.7	0.0, 0.0	-66.7, 0.0	
	Mean Diff (95% CI) [a]				0.0 (-14.0, 14.0)			-33.3 (-116.1, 49.5)	
	P-value [a]				1.000			0.225	
	Mean Diff (95% CI) [b]				33.3 (-2.0, 68.7)				
	P-value [b]				0.063				
	Effect Size (95% CI) [c]				1.17 (0.94, 1.40)				
	C23D1	N		11	11	11	3	3	3
		Mean		9.1	15.2	6.1	33.3	0.0	-33.3
SD			21.56	22.92	20.10	33.33	0.00	33.33	
95% CI			-5.4, 23.6	-0.2, 30.5	-7.4, 19.6	-49.5, 116.1	0.0, 0.0	-116.1, 49.5	
Median			0.0	0.0	0.0	33.3	0.0	-33.3	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 66.7	0.0, 0.0	-66.7, 0.0	
Min, Max			0.0, 66.7	0.0, 66.7	-33.3, 33.3	0.0, 66.7	0.0, 0.0	-66.7, 0.0	
Mean Diff (95% CI) [a]					6.1 (-7.4, 19.6)			-33.3 (-116.1, 49.5)	
P-value [a]					0.341			0.225	
Mean Diff (95% CI) [b]					39.4 (7.0, 71.8)				
P-value [b]					0.021				
Effect Size (95% CI) [c]					1.39 (1.15, 1.62)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C24D1	N		10	10	10	2	2	2
	Mean		10.0	13.3	3.3	33.3	0.0	-33.3
	SD		22.50	23.31	18.92	47.14	0.00	47.14
	95% CI		-6.1, 26.1	-3.3, 30.0	-10.2, 16.9	-390.2, 456.9	0.0, 0.0	-456.9, 390.2
	Median		0.0	0.0	0.0	33.3	0.0	-33.3
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 66.7	0.0, 0.0	-66.7, 0.0
	Min, Max		0.0, 66.7	0.0, 66.7	-33.3, 33.3	0.0, 66.7	0.0, 0.0	-66.7, 0.0
	Mean Diff (95% CI) [a]				3.3 (-10.2, 16.9)			-33.3 (-456.9, 390.2)
	P-value [a]				0.591			0.500
	Mean Diff (95% CI) [b]				36.7 (-3.6, 76.9)			
	P-value [b]				0.070			
	Effect Size (95% CI) [c]				1.29 (1.06, 1.52)			
	C25D1	N		9	9	9	0	0
Mean			11.1	11.1	0.0	NE	NE	NE
SD			23.57	23.57	28.87	NE	NE	NE
95% CI			-7.0, 29.2	-7.0, 29.2	-22.2, 22.2	NE, NE	NE, NE	NE, NE
Median			0.0	0.0	0.0	NE	NE	NE
Q1, Q3			0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
Min, Max			0.0, 66.7	0.0, 66.7	-66.7, 33.3	NE, NE	NE, NE	NE, NE
Mean Diff (95% CI) [a]					0.0 (-22.2, 22.2)			NE (NE, NE)
P-value [a]					1.000			NE
Mean Diff (95% CI) [b]					NE (NE, NE)			
P-value [b]					NE			
Effect Size (95% CI) [c]					NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	8.3	16.7	8.3	0.0	0.0	0.0
		SD	23.57	35.63	38.83	NE	NE	NE
		95% CI	-11.4, 28.0	-13.1, 46.5	-24.1, 40.8	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 100.0	-33.3, 100.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			8.3 (-24.1, 40.8)			0.0 (NE, NE)
		P-value [a]			0.563			NE
		Mean Diff (95% CI) [b]			8.3 (-89.1, 105.7)			
		P-value [b]			0.845			
		Effect Size (95% CI) [c]			0.29 (0.08, 0.51)			
	C27D1	N	8	8	8	1	1	1
		Mean	8.3	4.2	-4.2	0.0	0.0	0.0
		SD	23.57	11.79	11.79	NE	NE	NE
		95% CI	-11.4, 28.0	-5.7, 14.0	-14.0, 5.7	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 33.3	-33.3, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			-4.2 (-14.0, 5.7)			0.0 (NE, NE)
		P-value [a]			0.351			NE
		Mean Diff (95% CI) [b]			-4.2 (-33.7, 25.4)			
		P-value [b]			0.749			
		Effect Size (95% CI) [c]			-0.15 (-0.36, 0.07)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	9.5	0.0	-9.5	0.0	0.0	0.0
		SD	25.20	0.00	25.20	NE	NE	NE
		95% CI	-13.8, 32.8	0.0, 0.0	-32.8, 13.8	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 0.0	-66.7, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			-9.5 (-32.8, 13.8)			0.0 (NE, NE)
		P-value [a]			0.356			NE
		Mean Diff (95% CI) [b]			-9.5 (-75.4, 56.4)			
		P-value [b]			0.736			
		Effect Size (95% CI) [c]			-0.33 (-0.55, -0.12)			
	C29D1	N	4	4	4	1	1	1
		Mean	16.7	8.3	-8.3	0.0	0.0	0.0
		SD	33.33	16.67	41.94	NE	NE	NE
		95% CI	-36.4, 69.7	-18.2, 34.9	-75.1, 58.4	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 16.7	-33.3, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 33.3	-66.7, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			-8.3 (-75.1, 58.4)			0.0 (NE, NE)
		P-value [a]			0.718			NE
		Mean Diff (95% CI) [b]			-8.3 (-157.6, 140.9)			
		P-value [b]			0.870			
		Effect Size (95% CI) [c]			-0.29 (-0.51, -0.08)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C30D1	N		4	4	4	1	1	1	
	Mean		0.0	0.0	0.0	0.0	33.3	33.3	
	SD		0.00	0.00	0.00	NE	NE	NE	
	95% CI		0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE	
	Median		0.0	0.0	0.0	0.0	33.3	33.3	
	Q1, Q3		0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3	
	Min, Max		0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3	
	Mean Diff (95% CI) [a]				0.0 (0.0, 0.0)			33.3 (NE, NE)	
	P-value [a]				NE			NE	
	Mean Diff (95% CI) [b]				-33.3 (-33.3, -33.3)				
	P-value [b]				<.001				
	Effect Size (95% CI) [c]				-1.17 (-1.40, -0.94)				
	C31D1	N		2	2	2	1	1	1
		Mean		0.0	0.0	0.0	0.0	33.3	33.3
SD			0.00	0.00	0.00	NE	NE	NE	
95% CI			0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE	
Median			0.0	0.0	0.0	0.0	33.3	33.3	
Q1, Q3			0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3	
Min, Max			0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3	
Mean Diff (95% CI) [a]					0.0 (0.0, 0.0)			33.3 (NE, NE)	
P-value [a]					NE			NE	
Mean Diff (95% CI) [b]					-33.3 (-33.3, -33.3)				
P-value [b]					<.001				
Effect Size (95% CI) [c]					-1.17 (-1.40, -0.94)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	0.0	0.0	0.0	0.0	33.3	33.3
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	33.3	33.3
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			33.3 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			-33.3 (-33.3, -33.3)			
		P-value [b]			<.001			
		Effect Size (95% CI) [c]			-1.17 (-1.40, -0.94)			
	C33D1	N	3	3	3	1	1	1
		Mean	0.0	0.0	0.0	0.0	33.3	33.3
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	0.0	33.3	33.3
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			33.3 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			-33.3 (-33.3, -33.3)			
		P-value [b]			<.001			
		Effect Size (95% CI) [c]			-1.17 (-1.40, -0.94)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C36D1	N	3	3	3	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C37D1	N	3	3	3	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		131	131	131	126	126	126	
	Mean		18.3	24.2	5.9	20.4	25.9	5.6	
	SD		27.49	28.96	31.62	27.64	30.08	35.21	
	95% CI		13.6, 23.1	19.2, 29.2	0.4, 11.3	15.5, 25.2	20.6, 31.2	-0.7, 11.8	
	Median		0.0	33.3	0.0	0.0	33.3	0.0	
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 100.0	
	Mean Diff (95% CI) [a]				5.9 (0.4, 11.3)			5.6 (-0.7, 11.8)	
	P-value [a]				0.036			0.079	
	Mean Diff (95% CI) [b]				0.3 (-7.9, 8.5)				
	P-value [b]				0.943				
	Effect Size (95% CI) [c]				0.01 (-0.20, 0.22)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			19.0	16.7	-2.4	14.8	33.3	18.5
SD			31.25	25.32	35.72	24.22	44.10	47.47	
95% CI			1.0, 37.1	2.0, 31.3	-23.0, 18.2	-3.8, 33.4	-0.6, 67.2	-18.0, 55.0	
Median			0.0	0.0	0.0	0.0	0.0	0.0	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 66.7	0.0, 66.7	
Min, Max			0.0, 100.0	0.0, 66.7	-66.7, 66.7	0.0, 66.7	0.0, 100.0	-33.3, 100.0	
Mean Diff (95% CI) [a]					-2.4 (-23.0, 18.2)			18.5 (-18.0, 55.0)	
P-value [a]					0.807			0.276	
Mean Diff (95% CI) [b]					-20.9 (-57.0, 15.2)				
P-value [b]					0.242				
Effect Size (95% CI) [c]					-0.73 (-0.95, -0.52)				
Constipation	Baseline	N	174			165			
	Mean		17.6			17.2			
	SD		25.51			26.70			
	95% CI		13.8, 21.4			13.1, 21.3			
	Median		0.0			0.0			
	Q1, Q3		0.0, 33.3			0.0, 33.3			
	Min, Max		0.0, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C2D1	N		152	152	152	144	144	144	
	Mean		17.3	18.9	1.5	17.1	20.1	3.0	
	SD		25.44	24.76	26.39	26.44	27.37	26.71	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	95% CI		13.2, 21.4	14.9, 22.8	-2.7, 5.8	12.8, 21.5	15.6, 24.6	-1.4, 7.4	
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-100.0, 100.0	
	Mean Diff (95% CI) [a]				1.5 (-2.7, 5.8)			3.0 (-1.4, 7.4)	
	P-value [a]				0.474			0.179	
	Mean Diff (95% CI) [b]				-1.5 (-7.6, 4.6)				
	P-value [b]				0.633				
	Effect Size (95% CI) [c]				-0.06 (-0.27, 0.16)				
	C3D1	N		124	124	124	101	101	101
		Mean		17.2	14.8	-2.4	15.5	16.5	1.0
SD			23.85	23.40	28.88	24.75	25.22	27.27	
Median			0.0	0.0	0.0	0.0	0.0	0.0	
95% CI			13.0, 21.4	10.6, 18.9	-7.6, 2.7	10.6, 20.4	11.5, 21.5	-4.4, 6.4	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 66.7	
Mean Diff (95% CI) [a]					-2.4 (-7.6, 2.7)			1.0 (-4.4, 6.4)	
P-value [a]					0.353			0.716	
Mean Diff (95% CI) [b]					-3.4 (-10.9, 4.0)				
P-value [b]					0.367				
Effect Size (95% CI) [c]					-0.13 (-0.34, 0.08)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C4D1	N		112	112	112	94	94	94	
	Mean		18.5	17.0	-1.5	16.0	15.6	-0.4	
	SD		25.64	24.91	29.13	24.31	23.29	22.13	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	95% CI		13.7, 23.3	12.3, 21.6	-6.9, 4.0	11.0, 20.9	10.8, 20.4	-4.9, 4.2	
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 66.7	
	Mean Diff (95% CI) [a]				-1.5 (-6.9, 4.0)			-0.4 (-4.9, 4.2)	
	P-value [a]				0.590			0.877	
	Mean Diff (95% CI) [b]				-1.1 (-8.4, 6.1)				
	P-value [b]				0.757				
	Effect Size (95% CI) [c]				-0.04 (-0.26, 0.17)				
	C5D1	N		96	96	96	79	79	79
		Mean		18.4	16.3	-2.1	15.6	17.3	1.7
SD			25.99	25.13	30.90	24.36	26.07	26.09	
Median			0.0	0.0	0.0	0.0	0.0	0.0	
95% CI			13.1, 23.7	11.2, 21.4	-8.3, 4.2	10.2, 21.1	11.5, 23.1	-4.2, 7.5	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
Min, Max			0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 100.0	
Mean Diff (95% CI) [a]					-2.1 (-8.3, 4.2)			1.7 (-4.2, 7.5)	
P-value [a]					0.510			0.567	
Mean Diff (95% CI) [b]					-3.8 (-12.4, 4.9)				
P-value [b]					0.390				
Effect Size (95% CI) [c]					-0.14 (-0.36, 0.07)				

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C6D1	N	95	95	95	69	69	69
		Mean	14.7	13.7	-1.1	15.5	15.0	-0.5
		SD	22.13	22.01	28.12	23.28	23.25	26.50
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	10.2, 19.2	9.2, 18.2	-6.8, 4.7	9.9, 21.1	9.4, 20.6	-6.8, 5.9
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-66.7, 66.7
		Mean Diff (95% CI) [a]			-1.1 (-6.8, 4.7)			-0.5 (-6.8, 5.9)
		P-value [a]			0.716			0.880
		Mean Diff (95% CI) [b]			-0.6 (-9.1, 8.0)			
		P-value [b]			0.896			
		Effect Size (95% CI) [c]			-0.02 (-0.23, 0.19)			
	C7D1	N	79	79	79	53	53	53
		Mean	16.9	11.8	-5.1	13.2	13.8	0.6
		SD	26.08	23.89	33.80	22.01	26.50	27.34
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	11.0, 22.7	6.5, 17.2	-12.6, 2.5	7.1, 19.3	6.5, 21.1	-6.9, 8.2
		Q1, Q3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 66.7	0.0, 100.0	-66.7, 66.7
		Mean Diff (95% CI) [a]			-5.1 (-12.6, 2.5)			0.6 (-6.9, 8.2)
		P-value [a]			0.187			0.868
		Mean Diff (95% CI) [b]			-5.7 (-16.7, 5.3)			
		P-value [b]			0.309			
		Effect Size (95% CI) [c]			-0.22 (-0.43, 0.00)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	50	50	50
	Mean		16.2	15.4	-0.9	14.0	16.0	2.0
	SD		25.24	26.35	33.98	25.28	23.56	28.89
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	95% CI		10.5, 22.0	9.3, 21.4	-8.6, 6.9	6.8, 21.2	9.3, 22.7	-6.2, 10.2
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 100.0	-66.7, 66.7
	Mean Diff (95% CI) [a]				-0.9 (-8.6, 6.9)			2.0 (-6.2, 10.2)
	P-value [a]				0.823			0.627
	Mean Diff (95% CI) [b]				-2.9 (-14.4, 8.7)			
	P-value [b]				0.623			
	Effect Size (95% CI) [c]				-0.11 (-0.32, 0.10)			
	C9D1	N		60	60	60	42	42
Mean			15.6	15.0	-0.6	17.5	17.5	0.0
SD			22.52	24.87	27.10	26.79	25.75	27.55
Median			0.0	0.0	0.0	0.0	0.0	0.0
95% CI			9.7, 21.4	8.6, 21.4	-7.6, 6.4	9.1, 25.8	9.4, 25.5	-8.6, 8.6
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
Min, Max			0.0, 66.7	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 66.7
Mean Diff (95% CI) [a]					-0.6 (-7.6, 6.4)			0.0 (-8.6, 8.6)
P-value [a]					0.874			1.000
Mean Diff (95% CI) [b]					-0.6 (-11.4, 10.3)			
P-value [b]					0.920			
Effect Size (95% CI) [c]					-0.02 (-0.23, 0.19)			

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)				
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline		
C10D1	N	N	54	54	54	30	30	30		
		Mean	13.6	19.8	6.2	17.8	17.8	0.0		
		SD	19.98	30.04	26.76	27.31	27.31	33.90		
		Median	0.0	0.0	0.0	0.0	0.0	0.0		
		95% CI	8.1, 19.0	11.6, 28.0	-1.1, 13.5	7.6, 28.0	7.6, 28.0	-12.7, 12.7		
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3		
		Min, Max	0.0, 66.7	0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 100.0	-66.7, 66.7		
		Mean Diff (95% CI) [a]			6.2 (-1.1, 13.5)			0.0 (-12.7, 12.7)		
		P-value [a]			0.096			1.000		
		Mean Diff (95% CI) [b]			6.2 (-7.2, 19.5)					
		P-value [b]			0.361					
		Effect Size (95% CI) [c]			0.24 (0.02, 0.45)					
		C11D1	N	N	45	45	45	23	23	23
				Mean	11.1	16.3	5.2	18.8	17.4	-1.4
SD	18.80			30.67	30.11	29.86	24.35	30.94		
Median	0.0			0.0	0.0	0.0	0.0	0.0		
95% CI	5.5, 16.8			7.1, 25.5	-3.9, 14.2	5.9, 31.8	6.9, 27.9	-14.8, 11.9		
Q1, Q3	0.0, 33.3			0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3		
Min, Max	0.0, 66.7			0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-66.7, 33.3		
Mean Diff (95% CI) [a]					5.2 (-3.9, 14.2)			-1.4 (-14.8, 11.9)		
P-value [a]					0.254			0.824		
Mean Diff (95% CI) [b]					6.6 (-8.9, 22.2)					
P-value [b]					0.397					
Effect Size (95% CI) [c]					0.25 (0.04, 0.47)					

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C12D1	N		41	41	41	19	19	19
	Mean		10.6	17.1	6.5	17.5	14.0	-3.5
	SD		17.38	24.86	26.05	30.16	23.08	33.14
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	95% CI		5.1, 16.1	9.2, 24.9	-1.7, 14.7	3.0, 32.1	2.9, 25.2	-19.5, 12.5
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
	Min, Max		0.0, 66.7	0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 66.7	-66.7, 66.7
	Mean Diff (95% CI) [a]				6.5 (-1.7, 14.7)			-3.5 (-19.5, 12.5)
	P-value [a]				0.118			0.650
	Mean Diff (95% CI) [b]				10.0 (-5.8, 25.8)			
	P-value [b]				0.210			
	Effect Size (95% CI) [c]				0.38 (0.17, 0.60)			
	C13D1	N		32	32	32	15	15
Mean			9.4	20.8	11.5	22.2	15.6	-6.7
SD			15.23	27.76	28.85	32.53	17.21	33.81
Median			0.0	0.0	0.0	0.0	0.0	0.0
95% CI			3.9, 14.9	10.8, 30.8	1.1, 21.9	4.2, 40.2	6.0, 25.1	-25.4, 12.1
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 33.3
Min, Max			0.0, 33.3	0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 33.3	-66.7, 33.3
Mean Diff (95% CI) [a]					11.5 (1.1, 21.9)			-6.7 (-25.4, 12.1)
P-value [a]					0.032			0.458
Mean Diff (95% CI) [b]					18.1 (-1.1, 37.3)			
P-value [b]					0.064			
Effect Size (95% CI) [c]					0.69 (0.47, 0.91)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C14D1	N	33	33	33	12	12	12
		Mean	8.1	22.2	14.1	22.2	16.7	-5.6
		SD	14.51	28.46	27.68	32.82	22.47	31.25
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	2.9, 13.2	12.1, 32.3	4.3, 24.0	1.4, 43.1	2.4, 30.9	-25.4, 14.3
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 16.7
		Min, Max	0.0, 33.3	0.0, 100.0	-33.3, 66.7	0.0, 100.0	0.0, 66.7	-66.7, 33.3
		Mean Diff (95% CI) [a]			14.1 (4.3, 24.0)			-5.6 (-25.4, 14.3)
		P-value [a]			0.006			0.551
		Mean Diff (95% CI) [b]			19.7 (0.2, 39.2)			
		P-value [b]			0.047			
		Effect Size (95% CI) [c]			0.75 (0.53, 0.97)			
	C15D1	N	28	28	28	13	13	13
		Mean	7.1	20.2	13.1	25.6	15.4	-10.3
		SD	13.93	27.72	29.17	33.76	22.01	25.04
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	1.7, 12.5	9.5, 31.0	1.8, 24.4	5.2, 46.0	2.1, 28.7	-25.4, 4.9
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 33.3	0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 66.7	-66.7, 33.3
		Mean Diff (95% CI) [a]			13.1 (1.8, 24.4)			-10.3 (-25.4, 4.9)
		P-value [a]			0.025			0.165
		Mean Diff (95% CI) [b]			23.4 (4.4, 42.3)			
		P-value [b]			0.017			
		Effect Size (95% CI) [c]			0.89 (0.67, 1.12)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C16D1	N		28	28	28	10	10	10	
	Mean		6.0	15.5	9.5	26.7	26.7	0.0	
	SD		13.00	19.21	19.99	34.43	30.63	22.22	
	Median		0.0	0.0	0.0	16.7	33.3	0.0	
	95% CI		0.9, 11.0	8.0, 22.9	1.8, 17.3	2.0, 51.3	4.8, 48.6	-15.9, 15.9	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	
	Min, Max		0.0, 33.3	0.0, 66.7	-33.3, 66.7	0.0, 100.0	0.0, 100.0	-33.3, 33.3	
	Mean Diff (95% CI) [a]				9.5 (1.8, 17.3)			0.0 (-15.9, 15.9)	
	P-value [a]				0.018			1.000	
	Mean Diff (95% CI) [b]				9.5 (-5.8, 24.9)				
	P-value [b]				0.217				
	Effect Size (95% CI) [c]				0.36 (0.15, 0.58)				
	C17D1	N		26	26	26	7	7	7
		Mean		5.1	15.4	10.3	28.6	23.8	-4.8
SD			12.26	19.39	20.59	35.63	25.20	23.00	
Median			0.0	0.0	0.0	33.3	33.3	0.0	
95% CI			0.2, 10.1	7.6, 23.2	1.9, 18.6	-4.4, 61.5	0.5, 47.1	-26.0, 16.5	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0	
Min, Max			0.0, 33.3	0.0, 66.7	-33.3, 66.7	0.0, 100.0	0.0, 66.7	-33.3, 33.3	
Mean Diff (95% CI) [a]					10.3 (1.9, 18.6)			-4.8 (-26.0, 16.5)	
P-value [a]					0.018			0.604	
Mean Diff (95% CI) [b]					15.0 (-3.3, 33.3)				
P-value [b]					0.104				
Effect Size (95% CI) [c]					0.57 (0.36, 0.79)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C18D1	N		22	22	22	7	7	7	
	Mean		4.5	22.7	18.2	28.6	19.0	-9.5	
	SD		11.71	27.96	26.68	35.63	26.23	25.20	
	Median		0.0	16.7	0.0	33.3	0.0	0.0	
	95% CI		-0.6, 9.7	10.3, 35.1	6.4, 30.0	-4.4, 61.5	-5.2, 43.3	-32.8, 13.8	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0	
	Min, Max		0.0, 33.3	0.0, 100.0	0.0, 100.0	0.0, 100.0	0.0, 66.7	-33.3, 33.3	
	Mean Diff (95% CI) [a]				18.2 (6.4, 30.0)			-9.5 (-32.8, 13.8)	
	P-value [a]				0.004			0.356	
	Mean Diff (95% CI) [b]				27.7 (4.2, 51.2)				
	P-value [b]				0.022				
	Effect Size (95% CI) [c]				1.06 (0.83, 1.29)				
	C19D1	N		20	20	20	6	6	6
		Mean		5.0	26.7	21.7	33.3	33.3	0.0
SD			12.21	29.81	31.11	36.51	21.08	29.81	
Median			0.0	33.3	16.7	33.3	33.3	0.0	
95% CI			-0.7, 10.7	12.7, 40.6	7.1, 36.2	-5.0, 71.7	11.2, 55.5	-31.3, 31.3	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	33.3, 33.3	-33.3, 33.3	
Min, Max			0.0, 33.3	0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 66.7	-33.3, 33.3	
Mean Diff (95% CI) [a]					21.7 (7.1, 36.2)			0.0 (-31.3, 31.3)	
P-value [a]					0.006			1.000	
Mean Diff (95% CI) [b]					21.7 (-8.0, 51.3)				
P-value [b]					0.144				
Effect Size (95% CI) [c]					0.83 (0.61, 1.05)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C20D1	N		20	20	20	4	4	4	
	Mean		5.0	20.0	15.0	50.0	33.3	-16.7	
	SD		12.21	19.94	20.16	33.33	27.22	19.25	
	Median		0.0	33.3	0.0	33.3	33.3	-16.7	
	95% CI		-0.7, 10.7	10.7, 29.3	5.6, 24.4	-3.0, 103.0	-10.0, 76.6	-47.3, 14.0	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 66.7	16.7, 50.0	-33.3, 0.0	
	Min, Max		0.0, 33.3	0.0, 66.7	0.0, 66.7	33.3, 100.0	0.0, 66.7	-33.3, 0.0	
	Mean Diff (95% CI) [a]				15.0 (5.6, 24.4)			-16.7 (-47.3, 14.0)	
	P-value [a]				0.004			0.182	
	Mean Diff (95% CI) [b]				31.7 (8.9, 54.4)				
	P-value [b]				0.009				
	Effect Size (95% CI) [c]				1.21 (0.98, 1.44)				
	C21D1	N		18	18	18	4	4	4
		Mean		5.6	22.2	16.7	50.0	33.3	-16.7
SD			12.78	30.25	26.20	33.33	27.22	19.25	
Median			0.0	0.0	0.0	33.3	33.3	-16.7	
95% CI			-0.8, 11.9	7.2, 37.3	3.6, 29.7	-3.0, 103.0	-10.0, 76.6	-47.3, 14.0	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 66.7	16.7, 50.0	-33.3, 0.0	
Min, Max			0.0, 33.3	0.0, 100.0	0.0, 100.0	33.3, 100.0	0.0, 66.7	-33.3, 0.0	
Mean Diff (95% CI) [a]					16.7 (3.6, 29.7)			-16.7 (-47.3, 14.0)	
P-value [a]					0.015			0.182	
Mean Diff (95% CI) [b]					33.3 (4.2, 62.5)				
P-value [b]					0.027				
Effect Size (95% CI) [c]					1.27 (1.04, 1.51)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C22D1	N		15	15	15	3	3	3	
	Mean		4.4	20.0	15.6	33.3	22.2	-11.1	
	SD		11.73	24.56	24.77	0.00	19.25	19.25	
	Median		0.0	0.0	0.0	33.3	33.3	0.0	
	95% CI		-2.1, 10.9	6.4, 33.6	1.8, 29.3	33.3, 33.3	-25.6, 70.0	-58.9, 36.7	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 33.3	-33.3, 0.0	
	Min, Max		0.0, 33.3	0.0, 66.7	0.0, 66.7	33.3, 33.3	0.0, 33.3	-33.3, 0.0	
	Mean Diff (95% CI) [a]				15.6 (1.8, 29.3)			-11.1 (-58.9, 36.7)	
	P-value [a]				0.029			0.423	
	Mean Diff (95% CI) [b]				26.7 (-5.7, 59.0)				
	P-value [b]				0.100				
	Effect Size (95% CI) [c]				1.02 (0.79, 1.25)				
	C23D1	N		11	11	11	3	3	3
		Mean		3.0	18.2	15.2	33.3	22.2	-11.1
SD			10.05	31.14	31.14	0.00	19.25	19.25	
Median			0.0	0.0	0.0	33.3	33.3	0.0	
95% CI			-3.7, 9.8	-2.7, 39.1	-5.8, 36.1	33.3, 33.3	-25.6, 70.0	-58.9, 36.7	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 33.3	-33.3, 0.0	
Min, Max			0.0, 33.3	0.0, 100.0	0.0, 100.0	33.3, 33.3	0.0, 33.3	-33.3, 0.0	
Mean Diff (95% CI) [a]					15.2 (-5.8, 36.1)			-11.1 (-58.9, 36.7)	
P-value [a]					0.138			0.423	
Mean Diff (95% CI) [b]					26.3 (-15.6, 68.1)				
P-value [b]					0.197				
Effect Size (95% CI) [c]					1.00 (0.78, 1.23)				

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[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C24D1	N	10	10	10	2	2	2
		Mean	0.0	13.3	13.3	33.3	16.7	-16.7
		SD	0.00	17.21	17.21	0.00	23.57	23.57
		Median	0.0	0.0	0.0	33.3	16.7	-16.7
		95% CI	0.0, 0.0	1.0, 25.6	1.0, 25.6	33.3, 33.3	-195.1, 228.4	-228.4, 195.1
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			13.3 (1.0, 25.6)			-16.7 (-228.4, 195.1)
		P-value [a]			0.037			0.500
		Mean Diff (95% CI) [b]			30.0 (-1.0, 61.0)			
		P-value [b]			0.056			
		Effect Size (95% CI) [c]			1.15 (0.92, 1.38)			
	C25D1	N	9	9	9	0	0	0
		Mean	0.0	25.9	25.9	NE	NE	NE
		SD	0.00	32.39	32.39	NE	NE	NE
		Median	0.0	33.3	33.3	NE	NE	NE
		95% CI	0.0, 0.0	1.0, 50.8	1.0, 50.8	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 100.0	0.0, 100.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			25.9 (1.0, 50.8)			NE (NE, NE)
		P-value [a]			0.043			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

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[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	0.0	12.5	12.5	33.3	0.0	-33.3
		SD	0.00	17.25	17.25	NE	NE	NE
		Median	0.0	0.0	0.0	33.3	0.0	-33.3
		95% CI	0.0, 0.0	-1.9, 26.9	-1.9, 26.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			12.5 (-1.9, 26.9)			-33.3 (NE, NE)
		P-value [a]			0.080			NE
		Mean Diff (95% CI) [b]			45.8 (2.6, 89.1)			
		P-value [b]			0.041			
		Effect Size (95% CI) [c]			1.75 (1.50, 2.00)			
	C27D1	N	8	8	8	1	1	1
		Mean	0.0	8.3	8.3	33.3	0.0	-33.3
		SD	0.00	15.43	15.43	NE	NE	NE
		Median	0.0	0.0	0.0	33.3	0.0	-33.3
		95% CI	0.0, 0.0	-4.6, 21.2	-4.6, 21.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 16.7	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			8.3 (-4.6, 21.2)			-33.3 (NE, NE)
		P-value [a]			0.170			NE
		Mean Diff (95% CI) [b]			41.7 (3.0, 80.4)			
		P-value [b]			0.038			
		Effect Size (95% CI) [c]			1.59 (1.35, 1.84)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	0.0	4.8	4.8	33.3	0.0	-33.3
		SD	0.00	12.60	12.60	NE	NE	NE
		Median	0.0	0.0	0.0	33.3	0.0	-33.3
		95% CI	0.0, 0.0	-6.9, 16.4	-6.9, 16.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			4.8 (-6.9, 16.4)			-33.3 (NE, NE)
		P-value [a]			0.356			NE
		Mean Diff (95% CI) [b]			38.1 (5.1, 71.1)			
		P-value [b]			0.030			
		Effect Size (95% CI) [c]			1.46 (1.22, 1.70)			
	C29D1	N	4	4	4	1	1	1
		Mean	0.0	0.0	0.0	33.3	0.0	-33.3
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	33.3	0.0	-33.3
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			-33.3 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			33.3 (33.3, 33.3)			
		P-value [b]			<.001			
		Effect Size (95% CI) [c]			1.27 (1.04, 1.51)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C30D1	N	4	4	4	1	1	1
		Mean	0.0	0.0	0.0	33.3	33.3	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	33.3	33.3	0.0
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	33.3, 33.3	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			
	C31D1	N	2	2	2	1	1	1
		Mean	0.0	16.7	16.7	33.3	0.0	-33.3
		SD	0.00	23.57	23.57	NE	NE	NE
		Median	0.0	16.7	16.7	33.3	0.0	-33.3
		95% CI	0.0, 0.0	-195.1, 228.4	-195.1, 228.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			16.7 (-195.1, 228.4)			-33.3 (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			50.0 (-316.8, 416.8)			
		P-value [b]			0.333			
		Effect Size (95% CI) [c]			1.91 (1.65, 2.17)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	0.0	0.0	0.0	33.3	0.0	-33.3
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	33.3	0.0	-33.3
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			-33.3 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			33.3 (33.3, 33.3)			
		P-value [b]			<.001			
		Effect Size (95% CI) [c]			1.27 (1.04, 1.51)			
	C33D1	N	3	3	3	1	1	1
		Mean	0.0	0.0	0.0	33.3	0.0	-33.3
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	33.3	0.0	-33.3
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			-33.3 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			33.3 (33.3, 33.3)			
		P-value [b]			<.001			
		Effect Size (95% CI) [c]			1.27 (1.04, 1.51)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	0.0	11.1	11.1	NE	NE	NE
		SD	0.00	19.25	19.25	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	-36.7, 58.9	-36.7, 58.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			11.1 (-36.7, 58.9)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	0.0	16.7	16.7	NE	NE	NE
		SD	0.00	23.57	23.57	NE	NE	NE
		Median	0.0	16.7	16.7	NE	NE	NE
		95% CI	0.0, 0.0	-195.1, 228.4	-195.1, 228.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (-195.1, 228.4)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C36D1	N	3	3	3	0	0	0
		Mean	0.0	11.1	11.1	NE	NE	NE
		SD	0.00	19.25	19.25	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	-36.7, 58.9	-36.7, 58.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			11.1 (-36.7, 58.9)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C37D1	N	3	3	3	0	0	0
		Mean	0.0	11.1	11.1	NE	NE	NE
		SD	0.00	19.25	19.25	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	-36.7, 58.9	-36.7, 58.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			11.1 (-36.7, 58.9)			NE (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		129	129	129	125	125	125	
	Mean		17.3	17.6	0.3	18.4	18.4	0.0	
	SD		25.72	28.28	30.48	27.58	28.85	28.40	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	95% CI		12.8, 21.8	12.6, 22.5	-5.1, 5.6	13.5, 23.3	13.3, 23.5	-5.0, 5.0	
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 100.0	
	Mean Diff (95% CI) [a]				0.3 (-5.1, 5.6)			0.0 (-5.0, 5.0)	
	P-value [a]				0.923			1.000	
	Mean Diff (95% CI) [b]				0.3 (-7.0, 7.5)				
	P-value [b]				0.944				
	Effect Size (95% CI) [c]				0.01 (-0.20, 0.22)				
	Long Term	N		14	14	14	9	9	9
	Follow-up	Mean		14.3	28.6	14.3	14.8	37.0	22.2
		SD		21.54	31.64	25.20	17.57	35.14	47.14
		Median		0.0	16.7	0.0	0.0	33.3	0.0
		95% CI		1.8, 26.7	10.3, 46.8	-0.3, 28.8	1.3, 28.3	10.0, 64.0	-14.0, 58.5
	Q1, Q3		0.0, 33.3	0.0, 66.7	0.0, 33.3	0.0, 33.3	0.0, 66.7	0.0, 66.7	
	Min, Max		0.0, 66.7	0.0, 66.7	-33.3, 66.7	0.0, 33.3	0.0, 100.0	-33.3, 100.0	
	Mean Diff (95% CI) [a]				14.3 (-0.3, 28.8)			22.2 (-14.0, 58.5)	
	P-value [a]				0.054			0.195	
	Mean Diff (95% CI) [b]				-7.9 (-39.2, 23.3)				
	P-value [b]				0.603				
	Effect Size (95% CI) [c]				-0.30 (-0.52, -0.09)				
Diarrhea	Baseline	N	174			165			
		Mean	8.4			9.3			
		SD	18.77			18.98			
		Median	0.0			0.0			
		95% CI	5.6, 11.2			6.4, 12.2			
		Q1, Q3	0.0, 0.0			0.0, 0.0			
		Min, Max	0.0, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C2D1	N		152	152	152	144	144	144	
	Mean		7.9	21.5	13.6	10.2	9.0	-1.2	
	SD		18.69	30.31	31.95	19.82	19.00	23.79	
	95% CI		4.9, 10.9	16.6, 26.3	8.5, 18.7	6.9, 13.4	5.9, 12.2	-5.1, 2.8	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0	
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 100.0	
	Mean Diff (95% CI) [a]				13.6 (8.5, 18.7)			-1.2 (-5.1, 2.8)	
	P-value [a]				<.001			0.560	
	Mean Diff (95% CI) [b]				14.8 (8.3, 21.2)				
	P-value [b]				<.001				
	Effect Size (95% CI) [c]				0.78 (0.56, 1.00)				
	C3D1	N		123	123	123	101	101	101
		Mean		7.9	23.8	16.0	11.2	8.9	-2.3
SD			19.13	31.51	33.43	21.23	16.93	22.24	
95% CI			4.4, 11.3	18.2, 29.5	10.0, 22.0	7.0, 15.4	5.6, 12.3	-6.7, 2.1	
Median			0.0	0.0	0.0	0.0	0.0	0.0	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 66.7	-100.0, 33.3	
Mean Diff (95% CI) [a]					16.0 (10.0, 22.0)			-2.3 (-6.7, 2.1)	
P-value [a]					<.001			0.299	
Mean Diff (95% CI) [b]					18.3 (10.6, 26.0)				
P-value [b]					<.001				
Effect Size (95% CI) [c]					0.97 (0.74, 1.19)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		9.2	23.2	14.0	12.1	9.2	-2.8
	SD		20.11	28.59	33.07	21.22	17.22	20.54
	95% CI		5.5, 13.0	17.9, 28.6	7.8, 20.2	7.7, 16.4	5.7, 12.7	-7.0, 1.4
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 66.7	-100.0, 66.7
	Mean Diff (95% CI) [a]				14.0 (7.8, 20.2)			-2.8 (-7.0, 1.4)
	P-value [a]				<.001			0.184
	Mean Diff (95% CI) [b]				16.8 (9.1, 24.6)			
	P-value [b]				<.001			
	Effect Size (95% CI) [c]				0.89 (0.67, 1.11)			
	C5D1	N		98	98	98	80	80
Mean			7.8	22.8	15.0	12.9	10.4	-2.5
SD			17.78	28.96	32.86	21.54	18.82	21.07
95% CI			4.3, 11.4	17.0, 28.6	8.4, 21.6	8.1, 17.7	6.2, 14.6	-7.2, 2.2
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 66.7	-66.7, 66.7
Mean Diff (95% CI) [a]					15.0 (8.4, 21.6)			-2.5 (-7.2, 2.2)
P-value [a]					<.001			0.292
Mean Diff (95% CI) [b]					17.5 (9.1, 25.8)			
P-value [b]					<.001			
Effect Size (95% CI) [c]					0.92 (0.70, 1.15)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C6D1	N		96	96	96	68	68	68	
	Mean		7.6	18.7	11.1	13.2	9.3	-3.9	
	SD		18.40	26.85	31.22	21.66	16.13	20.39	
	95% CI		3.9, 11.4	13.3, 24.2	4.8, 17.4	8.0, 18.5	5.4, 13.2	-8.9, 1.0	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 66.7	-100.0, 33.3	
	Mean Diff (95% CI) [a]				11.1 (4.8, 17.4)			-3.9 (-8.9, 1.0)	
	P-value [a]				0.001			0.117	
	Mean Diff (95% CI) [b]				15.0 (6.5, 23.6)				
	P-value [b]				0.001				
	Effect Size (95% CI) [c]				0.79 (0.57, 1.02)				
	C7D1	N		79	79	79	52	52	52
		Mean		11.0	18.6	7.6	15.4	8.3	-7.1
SD			22.47	23.72	28.22	24.22	18.52	21.22	
95% CI			5.9, 16.0	13.3, 23.9	1.3, 13.9	8.6, 22.1	3.2, 13.5	-13.0, -1.1	
Median			0.0	0.0	0.0	0.0	0.0	0.0	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	
Min, Max			0.0, 100.0	0.0, 100.0	-100.0, 66.7	0.0, 100.0	0.0, 66.7	-100.0, 66.7	
Mean Diff (95% CI) [a]					7.6 (1.3, 13.9)			-7.1 (-13.0, -1.1)	
P-value [a]					0.019			0.020	
Mean Diff (95% CI) [b]					14.6 (5.6, 23.7)				
P-value [b]					0.002				
Effect Size (95% CI) [c]					0.77 (0.55, 0.99)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		75	75	75	50	50	50
	Mean		11.1	18.7	7.6	16.0	8.0	-8.0
	SD		22.81	26.42	34.47	24.50	17.25	23.87
	95% CI		5.9, 16.4	12.6, 24.7	-0.4, 15.5	9.0, 23.0	3.1, 12.9	-14.8, -1.2
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	-33.3, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 100.0	0.0, 66.7	-66.7, 66.7
	Mean Diff (95% CI) [a]				7.6 (-0.4, 15.5)			-8.0 (-14.8, -1.2)
	P-value [a]				0.062			0.022
	Mean Diff (95% CI) [b]				15.6 (4.5, 26.6)			
	P-value [b]				0.006			
	Effect Size (95% CI) [c]				0.82 (0.60, 1.04)			
	C9D1	N		59	59	59	42	42
Mean			12.4	18.6	6.2	15.9	13.5	-2.4
SD			23.89	24.97	30.62	24.68	27.60	30.70
95% CI			6.2, 18.7	12.1, 25.2	-1.8, 14.2	8.2, 23.6	4.9, 22.1	-11.9, 7.2
Median			0.0	0.0	0.0	0.0	0.0	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 100.0
Mean Diff (95% CI) [a]					6.2 (-1.8, 14.2)			-2.4 (-11.9, 7.2)
P-value [a]					0.124			0.618
Mean Diff (95% CI) [b]					8.6 (-3.7, 20.9)			
P-value [b]					0.168			
Effect Size (95% CI) [c]					0.45 (0.24, 0.67)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C10D1	N	54	54	54	30	30	30
		Mean	11.7	22.2	10.5	17.8	12.2	-5.6
		SD	23.49	28.22	34.76	22.71	23.95	27.80
		95% CI	5.3, 18.1	14.5, 29.9	1.0, 20.0	9.3, 26.3	3.3, 21.2	-15.9, 4.8
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 66.7	0.0, 100.0	-66.7, 100.0
		Mean Diff (95% CI) [a]			10.5 (1.0, 20.0)			-5.6 (-15.9, 4.8)
		P-value [a]			0.031			0.283
		Mean Diff (95% CI) [b]			16.0 (1.3, 30.8)			
		P-value [b]			0.033			
		Effect Size (95% CI) [c]			0.85 (0.63, 1.07)			
	C11D1	N	45	45	45	23	23	23
		Mean	11.9	17.0	5.2	17.4	8.7	-8.7
		SD	24.78	26.23	33.30	22.18	18.03	18.03
		95% CI	4.4, 19.3	9.2, 24.9	-4.8, 15.2	7.8, 27.0	0.9, 16.5	-16.5, -0.9
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 66.7	0.0, 66.7	-66.7, 0.0
		Mean Diff (95% CI) [a]			5.2 (-4.8, 15.2)			-8.7 (-16.5, -0.9)
		P-value [a]			0.302			0.030
		Mean Diff (95% CI) [b]			13.9 (-1.0, 28.8)			
		P-value [b]			0.067			
		Effect Size (95% CI) [c]			0.73 (0.51, 0.95)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C12D1	N	41	41	41	19	19	19
		Mean	12.2	16.3	4.1	17.5	8.8	-8.8
		SD	25.56	24.86	34.31	23.22	18.73	24.45
		95% CI	4.1, 20.3	8.4, 24.1	-6.8, 14.9	6.4, 28.7	-0.3, 17.8	-20.6, 3.0
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-100.0, 100.0	0.0, 66.7	0.0, 66.7	-66.7, 33.3
		Mean Diff (95% CI) [a]			4.1 (-6.8, 14.9)			-8.8 (-20.6, 3.0)
		P-value [a]			0.453			0.135
		Mean Diff (95% CI) [b]			12.8 (-4.7, 30.4)			
		P-value [b]			0.148			
		Effect Size (95% CI) [c]			0.68 (0.46, 0.90)			
	C13D1	N	33	33	33	15	15	15
		Mean	9.1	24.2	15.2	15.6	6.7	-8.9
		SD	20.87	27.98	30.15	21.33	13.80	23.46
		95% CI	1.7, 16.5	14.3, 34.2	4.5, 25.8	3.7, 27.4	-1.0, 14.3	-21.9, 4.1
		Median	0.0	33.3	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 100.0	0.0, 66.7	0.0, 33.3	-66.7, 33.3
		Mean Diff (95% CI) [a]			15.2 (4.5, 25.8)			-8.9 (-21.9, 4.1)
		P-value [a]			0.007			0.164
		Mean Diff (95% CI) [b]			24.0 (6.3, 41.8)			
		P-value [b]			0.009			
		Effect Size (95% CI) [c]			1.27 (1.04, 1.50)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C14D1	N	33	33	33	12	12	12
		Mean	9.1	20.2	11.1	16.7	11.1	-5.6
		SD	20.87	24.92	23.07	22.47	16.41	23.92
		95% CI	1.7, 16.5	11.4, 29.0	2.9, 19.3	2.4, 30.9	0.7, 21.5	-20.8, 9.6
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 66.7	0.0, 66.7	0.0, 33.3	-66.7, 33.3
		Mean Diff (95% CI) [a]			11.1 (2.9, 19.3)			-5.6 (-20.8, 9.6)
		P-value [a]			0.009			0.438
		Mean Diff (95% CI) [b]			16.7 (0.8, 32.5)			
		P-value [b]			0.040			
		Effect Size (95% CI) [c]			0.88 (0.66, 1.10)			
	C15D1	N	28	28	28	13	13	13
		Mean	10.7	25.0	14.3	15.4	12.8	-2.6
		SD	22.32	29.57	33.25	22.01	21.68	28.74
		95% CI	2.1, 19.4	13.5, 36.5	1.4, 27.2	2.1, 28.7	-0.3, 25.9	-19.9, 14.8
		Median	0.0	16.7	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 16.7	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 100.0	0.0, 66.7	0.0, 66.7	-66.7, 33.3
		Mean Diff (95% CI) [a]			14.3 (1.4, 27.2)			-2.6 (-19.9, 14.8)
		P-value [a]			0.031			0.753
		Mean Diff (95% CI) [b]			16.8 (-4.8, 38.5)			
		P-value [b]			0.124			
		Effect Size (95% CI) [c]			0.89 (0.67, 1.11)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C16D1	N	28	28	28	10	10	10
		Mean	9.5	28.6	19.0	13.3	10.0	-3.3
		SD	21.96	31.05	35.63	17.21	22.50	18.92
		95% CI	1.0, 18.0	16.5, 40.6	5.2, 32.9	1.0, 25.6	-6.1, 26.1	-16.9, 10.2
		Median	0.0	33.3	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 100.0	0.0, 33.3	0.0, 66.7	-33.3, 33.3
		Mean Diff (95% CI) [a]			19.0 (5.2, 32.9)			-3.3 (-16.9, 10.2)
		P-value [a]			0.009			0.591
		Mean Diff (95% CI) [b]			22.4 (-1.7, 46.5)			
		P-value [b]			0.068			
		Effect Size (95% CI) [c]			1.18 (0.95, 1.41)			
	C17D1	N	26	26	26	7	7	7
		Mean	10.3	17.9	7.7	14.3	4.8	-9.5
		SD	22.65	25.35	27.17	17.82	12.60	16.27
		95% CI	1.1, 19.4	7.7, 28.2	-3.3, 18.7	-2.2, 30.8	-6.9, 16.4	-24.6, 5.5
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	-33.3, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 100.0	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			7.7 (-3.3, 18.7)			-9.5 (-24.6, 5.5)
		P-value [a]			0.161			0.172
		Mean Diff (95% CI) [b]			17.2 (-4.9, 39.3)			
		P-value [b]			0.122			
		Effect Size (95% CI) [c]			0.91 (0.69, 1.13)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C18D1	N	22	22	22	7	7	7
		Mean	12.1	15.2	3.0	9.5	4.8	-4.8
		SD	24.22	22.37	22.79	16.27	12.60	12.60
		95% CI	1.4, 22.9	5.2, 25.1	-7.1, 13.1	-5.5, 24.6	-6.9, 16.4	-16.4, 6.9
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 66.7	-33.3, 66.7	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			3.0 (-7.1, 13.1)			-4.8 (-16.4, 6.9)
		P-value [a]			0.540			0.356
		Mean Diff (95% CI) [b]			7.8 (-10.9, 26.5)			
		P-value [b]			0.399			
		Effect Size (95% CI) [c]			0.41 (0.20, 0.63)			
	C19D1	N	20	20	20	6	6	6
		Mean	13.3	16.7	3.3	11.1	5.6	-5.6
		SD	25.13	20.23	21.36	17.21	13.61	13.61
		95% CI	1.6, 25.1	7.2, 26.1	-6.7, 13.3	-7.0, 29.2	-8.7, 19.8	-19.8, 8.7
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 16.7	0.0, 33.3	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 66.7	-33.3, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			3.3 (-6.7, 13.3)			-5.6 (-19.8, 8.7)
		P-value [a]			0.494			0.363
		Mean Diff (95% CI) [b]			8.9 (-10.3, 28.1)			
		P-value [b]			0.349			
		Effect Size (95% CI) [c]			0.47 (0.25, 0.69)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		19	19	19	4	4	4
	Mean		14.0	17.5	3.5	16.7	16.7	0.0
	SD		25.62	25.74	18.90	19.25	19.25	0.00
	95% CI		1.7, 26.4	5.1, 30.0	-5.6, 12.6	-14.0, 47.3	-14.0, 47.3	0.0, 0.0
	Median		0.0	0.0	0.0	16.7	16.7	0.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-33.3, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0
	Mean Diff (95% CI) [a]				3.5 (-5.6, 12.6)			0.0 (0.0, 0.0)
	P-value [a]				0.429			NE
	Mean Diff (95% CI) [b]				3.5 (-16.5, 23.5)			
	P-value [b]				0.719			
	Effect Size (95% CI) [c]				0.19 (-0.03, 0.40)			
	C21D1	N		18	18	18	4	4
Mean			14.8	16.7	1.9	16.7	8.3	-8.3
SD			26.13	26.20	17.98	19.25	16.67	16.67
95% CI			1.8, 27.8	3.6, 29.7	-7.1, 10.8	-14.0, 47.3	-18.2, 34.9	-34.9, 18.2
Median			0.0	0.0	0.0	16.7	0.0	0.0
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 16.7	-16.7, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-33.3, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0
Mean Diff (95% CI) [a]					1.9 (-7.1, 10.8)			-8.3 (-34.9, 18.2)
P-value [a]					0.668			0.391
Mean Diff (95% CI) [b]					10.2 (-10.3, 30.7)			
P-value [b]					0.313			
Effect Size (95% CI) [c]					0.54 (0.32, 0.75)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C22D1	N	15	15	15	3	3	3
		Mean	11.1	17.8	6.7	22.2	11.1	-11.1
		SD	16.27	21.33	25.82	19.25	19.25	19.25
		95% CI	2.1, 20.1	6.0, 29.6	-7.6, 21.0	-25.6, 70.0	-36.7, 58.9	-58.9, 36.7
		Median	0.0	0.0	0.0	33.3	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 33.3	0.0, 66.7	-33.3, 66.7	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			6.7 (-7.6, 21.0)			-11.1 (-58.9, 36.7)
		P-value [a]			0.334			0.423
		Mean Diff (95% CI) [b]			17.8 (-15.9, 51.4)			
		P-value [b]			0.279			
		Effect Size (95% CI) [c]			0.94 (0.72, 1.16)			
	C23D1	N	11	11	11	3	3	3
		Mean	15.2	15.2	0.0	22.2	11.1	-11.1
		SD	17.41	17.41	25.82	19.25	19.25	19.25
		95% CI	3.5, 26.8	3.5, 26.8	-17.3, 17.3	-25.6, 70.0	-36.7, 58.9	-58.9, 36.7
		Median	0.0	0.0	0.0	33.3	0.0	0.0
		Q1, Q3	0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 33.3	0.0, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			0.0 (-17.3, 17.3)			-11.1 (-58.9, 36.7)
		P-value [a]			1.000			0.423
		Mean Diff (95% CI) [b]			11.1 (-24.1, 46.4)			
		P-value [b]			0.505			
		Effect Size (95% CI) [c]			0.59 (0.37, 0.80)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C24D1	N	10	10	10	2	2	2
		Mean	10.0	20.0	10.0	33.3	16.7	-16.7
		SD	16.10	28.11	16.10	0.00	23.57	23.57
		95% CI	-1.5, 21.5	-0.1, 40.1	-1.5, 21.5	33.3, 33.3	-195.1, 228.4	-228.4, 195.1
		Median	0.0	0.0	0.0	33.3	16.7	-16.7
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 33.3	-33.3, 0.0
		Min, Max	0.0, 33.3	0.0, 66.7	0.0, 33.3	33.3, 33.3	0.0, 33.3	-33.3, 0.0
		Mean Diff (95% CI) [a]			10.0 (-1.5, 21.5)			-16.7 (-228.4, 195.1)
		P-value [a]			0.081			0.500
		Mean Diff (95% CI) [b]			26.7 (-2.7, 56.0)			
		P-value [b]			0.070			
		Effect Size (95% CI) [c]			1.41 (1.17, 1.65)			
	C25D1	N	9	9	9	0	0	0
		Mean	11.1	18.5	7.4	NE	NE	NE
		SD	16.67	17.57	22.22	NE	NE	NE
		95% CI	-1.7, 23.9	5.0, 32.0	-9.7, 24.5	NE, NE	NE, NE	NE, NE
		Median	0.0	33.3	0.0	NE	NE	NE
		Q1, Q3	0.0, 33.3	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 33.3	0.0, 33.3	-33.3, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			7.4 (-9.7, 24.5)			NE (NE, NE)
		P-value [a]			0.347			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	8.3	29.2	20.8	33.3	0.0	-33.3
		SD	15.43	33.03	35.36	NE	NE	NE
		95% CI	-4.6, 21.2	1.5, 56.8	-8.7, 50.4	NE, NE	NE, NE	NE, NE
		Median	0.0	33.3	0.0	33.3	0.0	-33.3
		Q1, Q3	0.0, 16.7	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 33.3	0.0, 100.0	0.0, 100.0	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			20.8 (-8.7, 50.4)			-33.3 (NE, NE)
		P-value [a]			0.140			NE
		Mean Diff (95% CI) [b]			54.2 (-34.5, 142.8)			
		P-value [b]			0.192			
		Effect Size (95% CI) [c]			2.86 (2.56, 3.17)			
	C27D1	N	8	8	8	1	1	1
		Mean	8.3	20.8	12.5	33.3	0.0	-33.3
		SD	15.43	24.80	24.80	NE	NE	NE
		95% CI	-4.6, 21.2	0.1, 41.6	-8.2, 33.2	NE, NE	NE, NE	NE, NE
		Median	0.0	16.7	0.0	33.3	0.0	-33.3
		Q1, Q3	0.0, 16.7	0.0, 33.3	0.0, 16.7	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 33.3	0.0, 66.7	0.0, 66.7	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			12.5 (-8.2, 33.2)			-33.3 (NE, NE)
		P-value [a]			0.197			NE
		Mean Diff (95% CI) [b]			45.8 (-16.4, 108.0)			
		P-value [b]			0.125			
		Effect Size (95% CI) [c]			2.42 (2.14, 2.70)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	4.8	19.0	14.3	33.3	0.0	-33.3
		SD	12.60	17.82	17.82	NE	NE	NE
		95% CI	-6.9, 16.4	2.6, 35.5	-2.2, 30.8	NE, NE	NE, NE	NE, NE
		Median	0.0	33.3	0.0	33.3	0.0	-33.3
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 33.3	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			14.3 (-2.2, 30.8)			-33.3 (NE, NE)
		P-value [a]			0.078			NE
		Mean Diff (95% CI) [b]			47.6 (1.0, 94.2)			
		P-value [b]			0.047			
		Effect Size (95% CI) [c]			2.52 (2.23, 2.80)			
	C29D1	N	4	4	4	1	1	1
		Mean	8.3	25.0	16.7	33.3	0.0	-33.3
		SD	16.67	31.91	33.33	NE	NE	NE
		95% CI	-18.2, 34.9	-25.8, 75.8	-36.4, 69.7	NE, NE	NE, NE	NE, NE
		Median	0.0	16.7	0.0	33.3	0.0	-33.3
		Q1, Q3	0.0, 16.7	0.0, 50.0	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 33.3	0.0, 66.7	0.0, 66.7	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			16.7 (-36.4, 69.7)			-33.3 (NE, NE)
		P-value [a]			0.391			NE
		Mean Diff (95% CI) [b]			50.0 (-68.6, 168.6)			
		P-value [b]			0.272			
		Effect Size (95% CI) [c]			2.64 (2.35, 2.93)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C30D1	N	4	4	4	1	1	1
		Mean	0.0	8.3	8.3	33.3	0.0	-33.3
		SD	0.00	16.67	16.67	NE	NE	NE
		95% CI	0.0, 0.0	-18.2, 34.9	-18.2, 34.9	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	33.3	0.0	-33.3
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 16.7	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			8.3 (-18.2, 34.9)			-33.3 (NE, NE)
		P-value [a]			0.391			NE
		Mean Diff (95% CI) [b]			41.7 (-17.6, 101.0)			
		P-value [b]			0.111			
		Effect Size (95% CI) [c]			2.20 (1.93, 2.47)			
	C31D1	N	2	2	2	1	1	1
		Mean	0.0	16.7	16.7	33.3	0.0	-33.3
		SD	0.00	23.57	23.57	NE	NE	NE
		95% CI	0.0, 0.0	-195.1, 228.4	-195.1, 228.4	NE, NE	NE, NE	NE, NE
		Median	0.0	16.7	16.7	33.3	0.0	-33.3
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			16.7 (-195.1, 228.4)			-33.3 (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			50.0 (-316.8, 416.8)			
		P-value [b]			0.333			
		Effect Size (95% CI) [c]			2.64 (2.35, 2.93)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	0.0	16.7	16.7	33.3	0.0	-33.3
		SD	0.00	23.57	23.57	NE	NE	NE
		95% CI	0.0, 0.0	-195.1, 228.4	-195.1, 228.4	NE, NE	NE, NE	NE, NE
		Median	0.0	16.7	16.7	33.3	0.0	-33.3
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			16.7 (-195.1, 228.4)			-33.3 (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			50.0 (-316.8, 416.8)			
		P-value [b]			0.333			
		Effect Size (95% CI) [c]			2.64 (2.35, 2.93)			
	C33D1	N	3	3	3	1	1	1
		Mean	0.0	11.1	11.1	33.3	0.0	-33.3
		SD	0.00	19.25	19.25	NE	NE	NE
		95% CI	0.0, 0.0	-36.7, 58.9	-36.7, 58.9	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	33.3	0.0	-33.3
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	33.3, 33.3	0.0, 0.0	-33.3, -33.3
		Mean Diff (95% CI) [a]			11.1 (-36.7, 58.9)			-33.3 (NE, NE)
		P-value [a]			0.423			NE
		Mean Diff (95% CI) [b]			44.4 (-51.2, 140.1)			
		P-value [b]			0.184			
		Effect Size (95% CI) [c]			2.35 (2.07, 2.63)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	0.0	22.2	22.2	NE	NE	NE
		SD	0.00	19.25	19.25	NE	NE	NE
		95% CI	0.0, 0.0	-25.6, 70.0	-25.6, 70.0	NE, NE	NE, NE	NE, NE
		Median	0.0	33.3	33.3	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			22.2 (-25.6, 70.0)			NE (NE, NE)
		P-value [a]			0.184			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	0.0	16.7	16.7	NE	NE	NE
		SD	0.00	23.57	23.57	NE	NE	NE
		95% CI	0.0, 0.0	-195.1, 228.4	-195.1, 228.4	NE, NE	NE, NE	NE, NE
		Median	0.0	16.7	16.7	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			16.7 (-195.1, 228.4)			NE (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C36D1	N		3	3	3	0	0	0	
	Mean		0.0	11.1	11.1	NE	NE	NE	
	SD		0.00	19.25	19.25	NE	NE	NE	
	95% CI		0.0, 0.0	-36.7, 58.9	-36.7, 58.9	NE, NE	NE, NE	NE, NE	
	Median		0.0	0.0	0.0	NE	NE	NE	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Min, Max		0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				11.1 (-36.7, 58.9)			NE (NE, NE)	
	P-value [a]				0.423			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C37D1	N		3	3	3	0	0	0
		Mean		0.0	11.1	11.1	NE	NE	NE
SD			0.00	19.25	19.25	NE	NE	NE	
95% CI			0.0, 0.0	-36.7, 58.9	-36.7, 58.9	NE, NE	NE, NE	NE, NE	
Median			0.0	0.0	0.0	NE	NE	NE	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE	
Min, Max			0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					11.1 (-36.7, 58.9)			NE (NE, NE)	
P-value [a]					0.423			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C38D1	N		2	2	2	0	0	0	
	Mean		0.0	16.7	16.7	NE	NE	NE	
	SD		0.00	23.57	23.57	NE	NE	NE	
	95% CI		0.0, 0.0	-195.1, 228.4	-195.1, 228.4	NE, NE	NE, NE	NE, NE	
	Median		0.0	16.7	16.7	NE	NE	NE	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Min, Max		0.0, 0.0	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				16.7 (-195.1, 228.4)			NE (NE, NE)	
	P-value [a]				0.500			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C39D1	N		2	2	2	0	0	0
		Mean		0.0	0.0	0.0	NE	NE	NE
SD			0.00	0.00	0.00	NE	NE	NE	
95% CI			0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE	
Median			0.0	0.0	0.0	NE	NE	NE	
Q1, Q3			0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE	
Min, Max			0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					0.0 (0.0, 0.0)			NE (NE, NE)	
P-value [a]					NE			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Median	0.0	0.0	0.0	NE	NE	NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		130	130	130	125	125	125	
	Mean		7.9	16.4	8.5	8.5	7.7	-0.8	
	SD		17.01	26.33	29.73	18.41	15.34	19.61	
	95% CI		5.0, 10.9	11.8, 21.0	3.3, 13.6	5.3, 11.8	5.0, 10.4	-4.3, 2.7	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0	
	Min, Max		0.0, 66.7	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 66.7	-66.7, 66.7	
	Mean Diff (95% CI) [a]				8.5 (3.3, 13.6)			-0.8 (-4.3, 2.7)	
	P-value [a]				0.001			0.649	
	Mean Diff (95% CI) [b]				9.3 (3.0, 15.5)				
	P-value [b]				0.004				
	Effect Size (95% CI) [c]				0.49 (0.27, 0.71)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			4.8	7.1	2.4	22.2	37.0	14.8
SD			12.10	19.30	24.33	23.57	30.93	29.40	
95% CI			-2.2, 11.8	-4.0, 18.3	-11.7, 16.4	4.1, 40.3	13.3, 60.8	-7.8, 37.4	
Median			0.0	0.0	0.0	33.3	33.3	0.0	
Q1, Q3			0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 33.3	33.3, 33.3	0.0, 33.3	
Min, Max			0.0, 33.3	0.0, 66.7	-33.3, 66.7	0.0, 66.7	0.0, 100.0	-33.3, 66.7	
Mean Diff (95% CI) [a]					2.4 (-11.7, 16.4)			14.8 (-7.8, 37.4)	
P-value [a]					0.720			0.169	
Mean Diff (95% CI) [b]					-12.4 (-35.9, 11.0)				
P-value [b]					0.282				
Effect Size (95% CI) [c]					-0.66 (-0.88, -0.44)				
Financial Difficulties	Baseline	N	173			164			
	Mean		13.7			17.5			
	SD		23.55			28.23			
	95% CI		10.1, 17.2			13.1, 21.8			
	Median		0.0			0.0			
	Q1, Q3		0.0, 33.3			0.0, 33.3			
	Min, Max		0.0, 100.0			0.0, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C2D1	N		151	152	151	144	144	144
	Mean		13.5	11.6	-1.8	16.7	12.7	-3.9
	SD		23.47	22.12	19.55	27.03	22.30	22.12
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	95% CI		9.7, 17.2	8.1, 15.2	-4.9, 1.4	12.2, 21.1	9.1, 16.4	-7.6, -0.3
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 66.7
	Mean Diff (95% CI) [a]				-1.8 (-4.9, 1.4)			-3.9 (-7.6, -0.3)
	P-value [a]				0.269			0.035
	Mean Diff (95% CI) [b]				2.2 (-2.6, 6.9)			
	P-value [b]				0.372			
	Effect Size (95% CI) [c]				0.08 (-0.13, 0.30)			
	C3D1	N		121	122	121	99	100
Mean			11.8	12.8	1.1	16.5	10.7	-5.7
SD			21.88	25.15	21.91	28.72	22.66	23.35
Median			0.0	0.0	0.0	0.0	0.0	0.0
95% CI			7.9, 15.8	8.3, 17.3	-2.8, 5.0	10.8, 22.2	6.2, 15.2	-10.4, -1.1
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 66.7
Mean Diff (95% CI) [a]					1.1 (-2.8, 5.0)			-5.7 (-10.4, -1.1)
P-value [a]					0.581			0.017
Mean Diff (95% CI) [b]					6.8 (0.8, 12.9)			
P-value [b]					0.027			
Effect Size (95% CI) [c]					0.26 (0.05, 0.48)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		110	111	110	93	94	93
	Mean		13.6	10.2	-3.3	15.8	11.0	-4.7
	SD		23.59	20.98	21.63	28.48	22.61	20.61
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	95% CI		9.2, 18.1	6.3, 14.2	-7.4, 0.8	9.9, 21.6	6.4, 15.6	-8.9, -0.4
	Q1, Q3		0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 33.3
	Mean Diff (95% CI) [a]				-3.3 (-7.4, 0.8)			-4.7 (-8.9, -0.4)
	P-value [a]				0.109			0.032
	Mean Diff (95% CI) [b]				1.3 (-4.6, 7.2)			
	P-value [b]				0.657			
	Effect Size (95% CI) [c]				0.05 (-0.16, 0.26)			
	C5D1	N		97	98	97	80	80
Mean			13.7	13.6	0.0	17.5	11.7	-5.8
SD			23.94	25.25	20.41	29.52	21.93	22.98
Median			0.0	0.0	0.0	0.0	0.0	0.0
95% CI			8.9, 18.6	8.5, 18.7	-4.1, 4.1	10.9, 24.1	6.8, 16.5	-10.9, -0.7
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 33.3
Mean Diff (95% CI) [a]					0.0 (-4.1, 4.1)			-5.8 (-10.9, -0.7)
P-value [a]					1.000			0.026
Mean Diff (95% CI) [b]					5.8 (-0.6, 12.3)			
P-value [b]					0.076			
Effect Size (95% CI) [c]					0.22 (0.01, 0.44)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C6D1	N	95	96	95	68	68	68
		Mean	12.6	11.5	-1.1	15.7	10.8	-4.9
		SD	22.38	23.61	20.31	28.49	21.89	22.50
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	8.1, 17.2	6.7, 16.2	-5.2, 3.1	8.8, 22.6	5.5, 16.1	-10.3, 0.5
		Q1, Q3	0.0, 33.3	0.0, 16.7	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 33.3
		Mean Diff (95% CI) [a]			-1.1 (-5.2, 3.1)			-4.9 (-10.3, 0.5)
		P-value [a]			0.615			0.077
		Mean Diff (95% CI) [b]			3.8 (-2.8, 10.5)			
		P-value [b]			0.256			
		Effect Size (95% CI) [c]			0.15 (-0.07, 0.36)			
	C7D1	N	78	79	78	52	52	52
		Mean	12.0	11.8	0.0	17.3	13.5	-3.8
		SD	22.13	25.06	18.61	31.99	27.42	18.26
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	7.0, 17.0	6.2, 17.4	-4.2, 4.2	8.4, 26.2	5.8, 21.1	-8.9, 1.2
		Q1, Q3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 33.3
		Mean Diff (95% CI) [a]			0.0 (-4.2, 4.2)			-3.8 (-8.9, 1.2)
		P-value [a]			1.000			0.135
		Mean Diff (95% CI) [b]			3.8 (-2.7, 10.4)			
		P-value [b]			0.247			
		Effect Size (95% CI) [c]			0.15 (-0.07, 0.36)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		74	75	74	50	50	50
	Mean		13.1	14.7	1.8	18.7	14.0	-4.7
	SD		23.29	27.53	21.99	32.41	28.64	26.95
	Median		0.0	0.0	0.0	0.0	0.0	0.0
	95% CI		7.7, 18.5	8.3, 21.0	-3.3, 6.9	9.5, 27.9	5.9, 22.1	-12.3, 3.0
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 33.3
	Mean Diff (95% CI) [a]				1.8 (-3.3, 6.9)			-4.7 (-12.3, 3.0)
	P-value [a]				0.483			0.227
	Mean Diff (95% CI) [b]				6.5 (-2.3, 15.2)			
	P-value [b]				0.145			
	Effect Size (95% CI) [c]				0.25 (0.03, 0.46)			
	C9D1	N		59	60	59	42	42
Mean			13.0	13.3	0.6	19.0	11.9	-7.1
SD			23.99	27.58	22.74	32.21	21.87	25.00
Median			0.0	0.0	0.0	0.0	0.0	0.0
95% CI			6.7, 19.2	6.2, 20.5	-5.4, 6.5	9.0, 29.1	5.1, 18.7	-14.9, 0.6
Q1, Q3			0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
Min, Max			0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 66.7	-100.0, 33.3
Mean Diff (95% CI) [a]					0.6 (-5.4, 6.5)			-7.1 (-14.9, 0.6)
P-value [a]					0.849			0.071
Mean Diff (95% CI) [b]					7.7 (-1.8, 17.2)			
P-value [b]					0.110			
Effect Size (95% CI) [c]					0.30 (0.08, 0.51)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)				
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline		
C10D1	N	N	53	54	53	30	30	30		
		Mean	12.6	12.3	0.0	21.1	16.7	-4.4		
		SD	23.77	26.14	20.67	32.14	25.89	16.91		
		Median	0.0	0.0	0.0	0.0	0.0	0.0		
		95% CI	6.0, 19.1	5.2, 19.5	-5.7, 5.7	9.1, 33.1	7.0, 26.3	-10.8, 1.9		
		Q1, Q3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0		
		Min, Max	0.0, 100.0	0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 66.7	-66.7, 33.3		
		Mean Diff (95% CI) [a]			0.0 (-5.7, 5.7)			-4.4 (-10.8, 1.9)		
		P-value [a]			1.000			0.161		
		Mean Diff (95% CI) [b]			4.4 (-4.4, 13.3)					
		P-value [b]			0.319					
		Effect Size (95% CI) [c]			0.17 (-0.04, 0.38)					
		C11D1	N	N	46	46	46	23	23	23
				Mean	10.9	10.9	0.0	15.9	10.1	-5.8
SD	21.15			23.36	22.22	28.19	21.17	21.68		
Median	0.0			0.0	0.0	0.0	0.0	0.0		
95% CI	4.6, 17.1			3.9, 17.8	-6.6, 6.6	3.7, 28.1	1.0, 19.3	-15.2, 3.6		
Q1, Q3	0.0, 0.0			0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0		
Min, Max	0.0, 66.7			0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 66.7	-100.0, 0.0		
Mean Diff (95% CI) [a]					0.0 (-6.6, 6.6)			-5.8 (-15.2, 3.6)		
P-value [a]					1.000			0.213		
Mean Diff (95% CI) [b]					5.8 (-5.4, 17.0)					
P-value [b]					0.307					
Effect Size (95% CI) [c]					0.22 (0.01, 0.44)					

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C12D1	N	40	40	40	19	19	19
		Mean	10.0	11.7	1.7	14.0	8.8	-5.3
		SD	20.25	24.52	22.58	27.92	18.73	22.94
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	3.5, 16.5	3.8, 19.5	-5.6, 8.9	0.6, 27.5	-0.3, 17.8	-16.3, 5.8
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 100.0	-33.3, 100.0	0.0, 100.0	0.0, 66.7	-100.0, 0.0
		Mean Diff (95% CI) [a]			1.7 (-5.6, 8.9)			-5.3 (-16.3, 5.8)
		P-value [a]			0.643			0.331
		Mean Diff (95% CI) [b]			6.9 (-5.7, 19.6)			
		P-value [b]			0.278			
		Effect Size (95% CI) [c]			0.27 (0.05, 0.48)			
	C13D1	N	32	32	32	15	15	15
		Mean	6.2	5.2	-1.0	11.1	6.7	-4.4
		SD	15.70	12.30	15.80	27.22	18.69	27.79
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	0.6, 11.9	0.8, 9.6	-6.7, 4.7	-4.0, 26.2	-3.7, 17.0	-19.8, 10.9
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 33.3	-33.3, 33.3	0.0, 100.0	0.0, 66.7	-100.0, 33.3
		Mean Diff (95% CI) [a]			-1.0 (-6.7, 4.7)			-4.4 (-19.8, 10.9)
		P-value [a]			0.712			0.546
		Mean Diff (95% CI) [b]			3.4 (-9.4, 16.2)			
		P-value [b]			0.595			
		Effect Size (95% CI) [c]			0.13 (-0.08, 0.34)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C14D1	N	33	33	33	12	12	12
		Mean	8.1	8.1	0.0	13.9	8.3	-5.6
		SD	16.73	14.51	14.43	30.01	20.72	31.25
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	2.1, 14.0	2.9, 13.2	-5.1, 5.1	-5.2, 33.0	-4.8, 21.5	-25.4, 14.3
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 66.7	0.0, 33.3	-33.3, 33.3	0.0, 100.0	0.0, 66.7	-100.0, 33.3
		Mean Diff (95% CI) [a]			0.0 (-5.1, 5.1)			-5.6 (-25.4, 14.3)
		P-value [a]			1.000			0.551
		Mean Diff (95% CI) [b]			5.6 (-8.1, 19.2)			
		P-value [b]			0.417			
		Effect Size (95% CI) [c]			0.21 (0.00, 0.43)			
	C15D1	N	28	28	28	13	13	13
		Mean	7.1	8.3	1.2	12.8	10.3	-2.6
		SD	13.93	14.70	14.29	28.99	21.01	21.35
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	1.7, 12.5	2.6, 14.0	-4.4, 6.7	-4.7, 30.3	-2.4, 23.0	-15.5, 10.3
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 100.0	0.0, 66.7	-66.7, 33.3
		Mean Diff (95% CI) [a]			1.2 (-4.4, 6.7)			-2.6 (-15.5, 10.3)
		P-value [a]			0.663			0.673
		Mean Diff (95% CI) [b]			3.8 (-7.6, 15.1)			
		P-value [b]			0.509			
		Effect Size (95% CI) [c]			0.14 (-0.07, 0.36)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C16D1	N		28	28	28	10	10	10	
	Mean		6.0	8.3	2.4	6.7	6.7	0.0	
	SD		13.00	14.70	12.60	14.05	14.05	0.00	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	95% CI		0.9, 11.0	2.6, 14.0	-2.5, 7.3	-3.4, 16.7	-3.4, 16.7	0.0, 0.0	
	Q1, Q3		0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	
	Min, Max		0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	
	Mean Diff (95% CI) [a]				2.4 (-2.5, 7.3)			0.0 (0.0, 0.0)	
	P-value [a]				0.326			NE	
	Mean Diff (95% CI) [b]				2.4 (-5.8, 10.5)				
	P-value [b]				0.557				
	Effect Size (95% CI) [c]				0.09 (-0.12, 0.30)				
	C17D1	N		26	26	26	7	7	7
		Mean		6.4	6.4	0.0	9.5	14.3	4.8
SD			13.40	13.40	16.33	16.27	26.23	12.60	
Median			0.0	0.0	0.0	0.0	0.0	0.0	
95% CI			1.0, 11.8	1.0, 11.8	-6.6, 6.6	-5.5, 24.6	-10.0, 38.5	-6.9, 16.4	
Q1, Q3			0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
Min, Max			0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 33.3	0.0, 66.7	0.0, 33.3	
Mean Diff (95% CI) [a]					0.0 (-6.6, 6.6)			4.8 (-6.9, 16.4)	
P-value [a]					1.000			0.356	
Mean Diff (95% CI) [b]					-4.8 (-18.4, 8.9)				
P-value [b]					0.481				
Effect Size (95% CI) [c]					-0.18 (-0.40, 0.03)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C18D1	N		22	22	22	7	7	7	
	Mean		6.1	9.1	3.0	9.5	14.3	4.8	
	SD		13.16	15.19	14.21	16.27	26.23	12.60	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	95% CI		0.2, 11.9	2.4, 15.8	-3.3, 9.3	-5.5, 24.6	-10.0, 38.5	-6.9, 16.4	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
	Min, Max		0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 33.3	0.0, 66.7	0.0, 33.3	
	Mean Diff (95% CI) [a]				3.0 (-3.3, 9.3)			4.8 (-6.9, 16.4)	
	P-value [a]				0.329			0.356	
	Mean Diff (95% CI) [b]				-1.7 (-14.1, 10.6)				
	P-value [b]				0.776				
	Effect Size (95% CI) [c]				-0.07 (-0.28, 0.15)				
	C19D1	N		20	20	20	6	6	6
		Mean		6.7	11.7	5.0	11.1	16.7	5.6
SD			13.68	16.31	16.31	17.21	27.89	13.61	
Median			0.0	0.0	0.0	0.0	0.0	0.0	
95% CI			0.3, 13.1	4.0, 19.3	-2.6, 12.6	-7.0, 29.2	-12.6, 45.9	-8.7, 19.8	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
Min, Max			0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 33.3	0.0, 66.7	0.0, 33.3	
Mean Diff (95% CI) [a]					5.0 (-2.6, 12.6)			5.6 (-8.7, 19.8)	
P-value [a]					0.186			0.363	
Mean Diff (95% CI) [b]					-0.6 (-15.7, 14.6)				
P-value [b]					0.940				
Effect Size (95% CI) [c]					-0.02 (-0.23, 0.19)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		19	19	19	4	4	4
	Mean		3.5	8.8	5.3	16.7	25.0	8.3
	SD		10.51	15.08	16.72	19.25	31.91	16.67
	Median		0.0	0.0	0.0	16.7	16.7	0.0
	95% CI		-1.6, 8.6	1.5, 16.0	-2.8, 13.3	-14.0, 47.3	-25.8, 75.8	-18.2, 34.9
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 50.0	0.0, 16.7
	Min, Max		0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 33.3	0.0, 66.7	0.0, 33.3
	Mean Diff (95% CI) [a]				5.3 (-2.8, 13.3)			8.3 (-18.2, 34.9)
	P-value [a]				0.187			0.391
	Mean Diff (95% CI) [b]				-3.1 (-22.2, 16.0)			
	P-value [b]				0.742			
	Effect Size (95% CI) [c]				-0.12 (-0.33, 0.10)			
	C21D1	N		18	18	18	4	4
Mean			3.7	7.4	3.7	16.7	25.0	8.3
SD			10.78	14.26	15.71	19.25	31.91	16.67
Median			0.0	0.0	0.0	16.7	16.7	0.0
95% CI			-1.7, 9.1	0.3, 14.5	-4.1, 11.5	-14.0, 47.3	-25.8, 75.8	-18.2, 34.9
Q1, Q3			0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 50.0	0.0, 16.7
Min, Max			0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 33.3	0.0, 66.7	0.0, 33.3
Mean Diff (95% CI) [a]					3.7 (-4.1, 11.5)			8.3 (-18.2, 34.9)
P-value [a]					0.331			0.391
Mean Diff (95% CI) [b]					-4.6 (-22.9, 13.7)			
P-value [b]					0.603			
Effect Size (95% CI) [c]					-0.18 (-0.39, 0.04)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C22D1	N	15	15	15	3	3	3
		Mean	2.2	11.1	8.9	11.1	11.1	0.0
		SD	8.61	20.57	19.79	19.25	19.25	0.00
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	-2.5, 7.0	-0.3, 22.5	-2.1, 19.8	-36.7, 58.9	-36.7, 58.9	0.0, 0.0
		Q1, Q3	0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 66.7	0.0, 66.7	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Mean Diff (95% CI) [a]			8.9 (-2.1, 19.8)			0.0 (0.0, 0.0)
		P-value [a]			0.104			NE
		Mean Diff (95% CI) [b]			8.9 (-15.9, 33.7)			
		P-value [b]			0.459			
		Effect Size (95% CI) [c]			0.34 (0.13, 0.56)			
	C23D1	N	11	11	11	3	3	3
		Mean	3.0	6.1	3.0	11.1	11.1	0.0
		SD	10.05	13.48	17.98	19.25	19.25	0.00
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	-3.7, 9.8	-3.0, 15.1	-9.0, 15.1	-36.7, 58.9	-36.7, 58.9	0.0, 0.0
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	-33.3, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0
		Mean Diff (95% CI) [a]			3.0 (-9.0, 15.1)			0.0 (0.0, 0.0)
		P-value [a]			0.588			NE
		Mean Diff (95% CI) [b]			3.0 (-20.3, 26.3)			
		P-value [b]			0.782			
		Effect Size (95% CI) [c]			0.12 (-0.10, 0.33)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C24D1	N		10	10	10	2	2	2	
	Mean		3.3	10.0	6.7	0.0	0.0	0.0	
	SD		10.54	16.10	14.05	0.00	0.00	0.00	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	95% CI		-4.2, 10.9	-1.5, 21.5	-3.4, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	
	Q1, Q3		0.0, 0.0	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	
	Min, Max		0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0	
	Mean Diff (95% CI) [a]				6.7 (-3.4, 16.7)			0.0 (0.0, 0.0)	
	P-value [a]				0.168			NE	
	Mean Diff (95% CI) [b]				6.7 (-16.3, 29.7)				
	P-value [b]				0.533				
	Effect Size (95% CI) [c]				0.26 (0.04, 0.47)				
	C25D1	N		9	9	9	0	0	0
		Mean		3.7	11.1	7.4	NE	NE	NE
SD			11.11	16.67	14.70	NE	NE	NE	
Median			0.0	0.0	0.0	NE	NE	NE	
95% CI			-4.8, 12.2	-1.7, 23.9	-3.9, 18.7	NE, NE	NE, NE	NE, NE	
Q1, Q3			0.0, 0.0	0.0, 33.3	0.0, 0.0	NE, NE	NE, NE	NE, NE	
Min, Max			0.0, 33.3	0.0, 33.3	0.0, 33.3	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					7.4 (-3.9, 18.7)			NE (NE, NE)	
P-value [a]					0.169			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	8	8	8	1	1	1
		Mean	4.2	8.3	4.2	0.0	0.0	0.0
		SD	11.79	15.43	11.79	NE	NE	NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	-5.7, 14.0	-4.6, 21.2	-5.7, 14.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			4.2 (-5.7, 14.0)			0.0 (NE, NE)
		P-value [a]			0.351			NE
		Mean Diff (95% CI) [b]			4.2 (-25.4, 33.7)			
		P-value [b]			0.749			
		Effect Size (95% CI) [c]			0.16 (-0.05, 0.37)			
	C27D1	N	8	8	8	1	1	1
		Mean	4.2	8.3	4.2	0.0	0.0	0.0
		SD	11.79	15.43	11.79	NE	NE	NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	-5.7, 14.0	-4.6, 21.2	-5.7, 14.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			4.2 (-5.7, 14.0)			0.0 (NE, NE)
		P-value [a]			0.351			NE
		Mean Diff (95% CI) [b]			4.2 (-25.4, 33.7)			
		P-value [b]			0.749			
		Effect Size (95% CI) [c]			0.16 (-0.05, 0.37)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	7	7	7	1	1	1
		Mean	0.0	4.8	4.8	0.0	0.0	0.0
		SD	0.00	12.60	12.60	NE	NE	NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	0.0, 0.0	-6.9, 16.4	-6.9, 16.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			4.8 (-6.9, 16.4)			0.0 (NE, NE)
		P-value [a]			0.356			NE
		Mean Diff (95% CI) [b]			4.8 (-28.2, 37.7)			
		P-value [b]			0.736			
		Effect Size (95% CI) [c]			0.18 (-0.03, 0.40)			
	C29D1	N	4	4	4	1	1	1
		Mean	0.0	8.3	8.3	0.0	0.0	0.0
		SD	0.00	16.67	16.67	NE	NE	NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	0.0, 0.0	-18.2, 34.9	-18.2, 34.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 16.7	0.0, 16.7	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			8.3 (-18.2, 34.9)			0.0 (NE, NE)
		P-value [a]			0.391			NE
		Mean Diff (95% CI) [b]			8.3 (-51.0, 67.6)			
		P-value [b]			0.685			
		Effect Size (95% CI) [c]			0.32 (0.11, 0.54)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C30D1	N	4	4	4	1	1	1
		Mean	0.0	0.0	0.0	0.0	0.0	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			
	C31D1	N	2	2	2	1	1	1
		Mean	0.0	0.0	0.0	0.0	0.0	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	0.0	0.0	0.0	0.0	0.0	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			
	C33D1	N	3	3	3	1	1	1
		Mean	0.0	0.0	0.0	0.0	0.0	0.0
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	0.0	0.0	0.0
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0	0.0, 0.0
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			0.0 (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			0.0 (0.0, 0.0)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			0.00 (-0.21, 0.21)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	3	3	3	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C36D1	N	3	3	3	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C37D1	N	3	3	3	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C38D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C39D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	0.00	0.00	0.00	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (0.0, 0.0)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	0.0	0.0	0.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	0.0	0.0	0.0	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Min, Max	0.0, 0.0	0.0, 0.0	0.0, 0.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			0.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		127	128	127	124	124	124	
	Mean		12.6	13.8	1.3	16.1	13.7	-2.4	
	SD		22.98	24.93	26.02	27.38	25.86	24.48	
	Median		0.0	0.0	0.0	0.0	0.0	0.0	
	95% CI		8.6, 16.6	9.4, 18.2	-3.3, 5.9	11.3, 21.0	9.1, 18.3	-6.8, 1.9	
	Q1, Q3		0.0, 33.3	0.0, 33.3	0.0, 0.0	0.0, 33.3	0.0, 33.3	0.0, 0.0	
	Min, Max		0.0, 100.0	0.0, 100.0	-66.7, 100.0	0.0, 100.0	0.0, 100.0	-100.0, 100.0	
	Mean Diff (95% CI) [a]				1.3 (-3.3, 5.9)			-2.4 (-6.8, 1.9)	
	P-value [a]				0.571			0.273	
	Mean Diff (95% CI) [b]				3.7 (-2.6, 10.0)				
	P-value [b]				0.243				
	Effect Size (95% CI) [c]				0.14 (-0.07, 0.36)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			9.5	16.7	7.1	33.3	37.0	3.7
SD			15.63	21.68	26.73	40.82	45.47	35.14	
Median			0.0	0.0	0.0	0.0	0.0	0.0	
95% CI			0.5, 18.5	4.1, 29.2	-8.3, 22.6	2.0, 64.7	2.1, 72.0	-23.3, 30.7	
Q1, Q3			0.0, 33.3	0.0, 33.3	0.0, 33.3	0.0, 66.7	0.0, 66.7	0.0, 0.0	
Min, Max			0.0, 33.3	0.0, 66.7	-33.3, 66.7	0.0, 100.0	0.0, 100.0	-66.7, 66.7	
Mean Diff (95% CI) [a]					7.1 (-8.3, 22.6)			3.7 (-23.3, 30.7)	
P-value [a]					0.336			0.760	
Mean Diff (95% CI) [b]					3.4 (-23.4, 30.3)				
P-value [b]					0.792				
Effect Size (95% CI) [c]					0.13 (-0.08, 0.35)				
Summary Score	Baseline	N	174			165			
	Mean		78.5			77.3			
	SD		15.21			14.99			
	Median		81.2			79.9			
	95% CI		76.2, 80.8			75.0, 79.6			
	Q1, Q3		70.3, 90.4			70.0, 88.0			
	Min, Max		29.7, 100.0			22.1, 100.0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C2D1	N		152	152	152	145	145	145
	Mean		79.2	76.7	-2.5	77.6	75.2	-2.4
	SD		14.96	15.87	10.87	15.43	16.81	12.52
	95% CI		76.8, 81.6	74.1, 79.2	-4.3, -0.8	75.1, 80.2	72.5, 78.0	-4.5, -0.3
	Median		82.4	81.1	-1.4	80.9	78.5	-1.2
	Q1, Q3		70.7, 90.7	65.2, 89.7	-7.3, 3.7	70.6, 89.0	67.7, 87.4	-7.0, 4.5
	Min, Max		29.8, 100.0	22.2, 100.0	-47.8, 32.4	22.1, 100.0	19.6, 100.0	-55.5, 29.4
	Mean Diff (95% CI) [a]				-2.5 (-4.3, -0.8)			-2.4 (-4.5, -0.3)
	P-value [a]				0.005			0.023
	Mean Diff (95% CI) [b]				-0.1 (-2.8, 2.5)			
	P-value [b]				0.917			
	Effect Size (95% CI) [c]				-0.01 (-0.22, 0.20)			
	C3D1	N		124	124	124	102	102
Mean			79.8	79.0	-0.8	77.9	77.7	-0.2
SD			13.88	15.04	12.62	13.46	14.39	10.92
95% CI			77.3, 82.3	76.4, 81.7	-3.0, 1.5	75.3, 80.6	74.9, 80.6	-2.3, 2.0
Median			82.1	81.8	-0.9	79.7	79.8	0.0
Q1, Q3			72.1, 90.2	69.3, 91.9	-6.3, 5.8	70.7, 87.0	71.3, 87.7	-7.1, 7.2
Min, Max			29.7, 100.0	28.3, 100.0	-40.9, 38.2	38.9, 100.0	38.0, 100.0	-27.3, 28.6
Mean Diff (95% CI) [a]					-0.8 (-3.0, 1.5)			-0.2 (-2.3, 2.0)
P-value [a]					0.497			0.863
Mean Diff (95% CI) [b]					-0.6 (-3.7, 2.5)			
P-value [b]					0.713			
Effect Size (95% CI) [c]					-0.04 (-0.25, 0.17)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		112	112	112	94	94	94
	Mean		78.9	79.8	0.9	77.4	78.6	1.1
	SD		14.59	15.60	11.40	13.72	14.99	12.77
	95% CI		76.2, 81.7	76.9, 82.7	-1.2, 3.0	74.6, 80.3	75.5, 81.6	-1.5, 3.7
	Median		81.2	83.7	1.6	79.3	80.0	1.3
	Q1, Q3		71.6, 89.9	72.1, 91.5	-6.4, 7.7	69.9, 87.0	70.2, 89.2	-6.5, 8.9
	Min, Max		29.7, 100.0	23.6, 99.5	-33.8, 40.6	38.9, 100.0	30.3, 100.0	-32.0, 39.2
	Mean Diff (95% CI) [a]				0.9 (-1.2, 3.0)			1.1 (-1.5, 3.7)
	P-value [a]				0.412			0.398
	Mean Diff (95% CI) [b]				-0.2 (-3.6, 3.1)			
	P-value [b]				0.891			
	Effect Size (95% CI) [c]				-0.02 (-0.23, 0.20)			
	C5D1	N		98	98	98	80	80
Mean			79.4	79.5	0.1	77.5	78.1	0.6
SD			14.33	16.33	12.39	14.07	15.05	11.37
95% CI			76.5, 82.3	76.2, 82.8	-2.3, 2.6	74.4, 80.6	74.7, 81.4	-2.0, 3.1
Median			81.5	84.6	0.7	81.4	79.6	0.0
Q1, Q3			71.9, 89.6	69.7, 92.7	-5.9, 7.9	69.7, 88.5	71.8, 88.0	-7.6, 7.0
Min, Max			29.7, 100.0	31.0, 100.0	-50.3, 40.1	38.9, 100.0	34.9, 100.0	-25.7, 34.9
Mean Diff (95% CI) [a]					0.1 (-2.3, 2.6)			0.6 (-2.0, 3.1)
P-value [a]					0.913			0.654
Mean Diff (95% CI) [b]					-0.4 (-4.0, 3.1)			
P-value [b]					0.809			
Effect Size (95% CI) [c]					-0.03 (-0.24, 0.18)			

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C6D1	N		96	96	96	69	69	69
	Mean		80.4	82.8	2.4	77.7	77.9	0.2
	SD		13.45	14.43	10.81	13.93	16.46	12.84
	95% CI		77.7, 83.1	79.9, 85.7	0.2, 4.6	74.4, 81.1	74.0, 81.9	-2.9, 3.3
	Median		82.1	86.1	2.6	81.8	80.4	0.7
	Q1, Q3		72.4, 90.3	74.6, 94.6	-4.4, 9.2	70.7, 88.0	71.4, 89.6	-4.4, 6.8
	Min, Max		29.8, 100.0	37.6, 100.0	-34.8, 40.1	38.9, 100.0	30.0, 100.0	-31.5, 37.4
	Mean Diff (95% CI) [a]				2.4 (0.2, 4.6)			0.2 (-2.9, 3.3)
	P-value [a]				0.033			0.882
	Mean Diff (95% CI) [b]				2.2 (-1.5, 5.8)			
	P-value [b]				0.244			
	Effect Size (95% CI) [c]				0.14 (-0.07, 0.36)			
	C7D1	N		79	79	79	53	53
Mean			79.5	82.5	3.0	77.9	81.4	3.5
SD			14.84	13.97	10.05	14.78	14.31	11.54
95% CI			76.2, 82.8	79.4, 85.6	0.7, 5.2	73.8, 81.9	77.4, 85.3	0.3, 6.7
Median			82.1	84.4	3.2	81.8	83.9	1.4
Q1, Q3			71.7, 90.6	77.3, 93.1	-4.3, 8.3	71.8, 89.0	74.0, 90.6	-2.4, 9.1
Min, Max			29.7, 100.0	33.2, 100.0	-20.0, 42.4	38.9, 100.0	43.1, 100.0	-30.9, 37.0
Mean Diff (95% CI) [a]					3.0 (0.7, 5.2)			3.5 (0.3, 6.7)
P-value [a]					0.010			0.032
Mean Diff (95% CI) [b]					-0.5 (-4.2, 3.2)			
P-value [b]					0.793			
Effect Size (95% CI) [c]					-0.03 (-0.25, 0.18)			

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		76	76	76	50	50	50
	Mean		79.3	81.9	2.5	77.4	81.0	3.6
	SD		14.73	16.62	11.81	15.11	15.65	12.49
	95% CI		76.0, 82.7	78.1, 85.7	-0.2, 5.2	73.1, 81.7	76.5, 85.4	0.0, 7.1
	Median		81.5	86.8	3.3	80.0	83.8	2.4
	Q1, Q3		72.3, 89.9	75.0, 93.4	-2.1, 8.5	70.7, 89.0	77.4, 90.5	-1.8, 7.7
	Min, Max		29.7, 100.0	28.8, 100.0	-40.6, 27.1	38.9, 100.0	25.0, 100.0	-34.7, 32.0
	Mean Diff (95% CI) [a]				2.5 (-0.2, 5.2)			3.6 (0.0, 7.1)
	P-value [a]				0.067			0.050
	Mean Diff (95% CI) [b]				-1.0 (-5.4, 3.3)			
	P-value [b]				0.640			
	Effect Size (95% CI) [c]				-0.07 (-0.28, 0.14)			
	C9D1	N		60	60	60	42	42
Mean			80.2	81.8	1.6	76.9	80.6	3.7
SD			13.10	15.19	10.94	15.56	14.52	11.06
95% CI			76.8, 83.6	77.9, 85.7	-1.2, 4.5	72.0, 81.7	76.1, 85.2	0.3, 7.2
Median			80.6	87.0	2.3	80.0	82.9	1.8
Q1, Q3			71.6, 90.3	73.3, 93.9	-5.7, 7.1	67.4, 89.0	75.0, 91.6	-2.1, 8.4
Min, Max			43.2, 100.0	43.7, 100.0	-36.0, 27.1	38.9, 100.0	36.9, 100.0	-16.2, 33.5
Mean Diff (95% CI) [a]					1.6 (-1.2, 4.5)			3.7 (0.3, 7.2)
P-value [a]					0.250			0.034
Mean Diff (95% CI) [b]					-2.1 (-6.5, 2.3)			
P-value [b]					0.343			
Effect Size (95% CI) [c]					-0.14 (-0.35, 0.07)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)				
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline		
C10D1	N	N	54	54	54	30	30	30		
		Mean	80.0	82.2	2.2	75.1	77.5	2.4		
		SD	13.28	13.62	10.10	15.77	16.00	10.63		
		95% CI	76.4, 83.6	78.4, 85.9	-0.6, 4.9	69.2, 81.0	71.5, 83.5	-1.6, 6.4		
		Median	80.6	85.5	0.9	78.3	83.9	2.0		
		Q1, Q3	71.4, 90.6	75.8, 91.5	-4.4, 8.8	65.4, 87.3	69.0, 88.8	-3.7, 4.6		
		Min, Max	43.2, 100.0	47.3, 100.0	-18.5, 27.1	38.9, 96.7	41.5, 96.2	-20.7, 25.8		
		Mean Diff (95% CI) [a]			2.2 (-0.6, 4.9)			2.4 (-1.6, 6.4)		
		P-value [a]			0.120			0.223		
		Mean Diff (95% CI) [b]			-0.2 (-4.9, 4.4)					
		P-value [b]			0.919					
		Effect Size (95% CI) [c]			-0.02 (-0.23, 0.20)					
		C11D1	N	N	46	46	46	23	23	23
				Mean	79.3	80.1	0.8	79.3	82.5	3.2
SD	13.52			15.64	13.92	13.34	9.21	12.87		
95% CI	75.3, 83.4			75.5, 84.8	-3.3, 4.9	73.5, 85.1	78.5, 86.5	-2.4, 8.8		
Median	80.6			83.9	3.3	81.8	82.1	2.4		
Q1, Q3	71.4, 89.1			71.7, 91.9	-6.3, 9.1	70.7, 90.6	78.0, 90.2	-6.5, 7.2		
Min, Max	43.2, 100.0			41.3, 100.0	-45.4, 27.1	50.0, 96.7	57.2, 97.4	-15.5, 32.1		
Mean Diff (95% CI) [a]					0.8 (-3.3, 4.9)			3.2 (-2.4, 8.8)		
P-value [a]					0.699			0.246		
Mean Diff (95% CI) [b]					-2.4 (-9.3, 4.5)					
P-value [b]					0.492					
Effect Size (95% CI) [c]					-0.16 (-0.37, 0.05)					

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		41	41	41	19	19	19	
	Mean		80.6	82.1	1.5	80.0	84.5	4.5	
	SD		13.61	16.05	11.13	10.67	12.15	13.06	
	Median		82.1	86.8	0.6	81.8	87.9	3.9	
	95% CI		76.3, 84.9	77.0, 87.1	-2.0, 5.0	74.9, 85.2	78.7, 90.4	-1.8, 10.8	
	Q1, Q3		72.2, 92.1	75.8, 93.8	-4.5, 5.8	70.7, 90.4	80.6, 91.3	-5.4, 10.1	
	Min, Max		43.2, 100.0	41.2, 100.0	-27.9, 24.1	63.2, 96.7	44.5, 97.4	-20.9, 30.8	
	Mean Diff (95% CI) [a]				1.5 (-2.0, 5.0)			4.5 (-1.8, 10.8)	
	P-value [a]				0.395			0.149	
	Mean Diff (95% CI) [b]				-3.0 (-9.6, 3.5)				
	P-value [b]				0.358				
	Effect Size (95% CI) [c]				-0.20 (-0.41, 0.01)				
	C13D1	N		33	33	33	15	15	15
		Mean		81.3	80.8	-0.5	78.2	84.0	5.8
SD			13.10	15.90	14.51	13.66	9.85	13.96	
Median			83.3	82.6	-0.6	79.9	86.3	5.1	
95% CI			76.7, 86.0	75.2, 86.5	-5.6, 4.7	70.7, 85.8	78.6, 89.5	-1.9, 13.5	
Q1, Q3			72.4, 92.3	73.3, 90.7	-8.0, 7.4	65.3, 90.4	73.6, 89.4	-7.3, 17.0	
Min, Max			46.3, 100.0	32.7, 100.0	-53.8, 26.5	50.0, 96.7	66.1, 100.0	-16.8, 29.4	
Mean Diff (95% CI) [a]					-0.5 (-5.6, 4.7)			5.8 (-1.9, 13.5)	
P-value [a]					0.851			0.130	
Mean Diff (95% CI) [b]					-6.3 (-15.3, 2.7)				
P-value [b]					0.167				
Effect Size (95% CI) [c]					-0.41 (-0.63, -0.20)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C14D1	N		33	33	33	12	12	12
	Mean		81.4	82.5	1.1	77.5	83.1	5.5
	SD		13.19	13.19	10.80	13.82	14.24	14.59
	Median		83.3	82.6	0.6	77.9	85.4	6.5
	95% CI		76.7, 86.0	77.8, 87.1	-2.7, 4.9	68.7, 86.3	74.0, 92.1	-3.7, 14.8
	Q1, Q3		72.4, 92.3	73.1, 92.6	-4.9, 7.7	68.0, 88.9	72.9, 96.1	-5.7, 12.0
	Min, Max		46.3, 100.0	52.3, 100.0	-19.5, 25.9	50.0, 96.7	58.3, 99.5	-14.1, 34.2
	Mean Diff (95% CI) [a]				1.1 (-2.7, 4.9)			5.5 (-3.7, 14.8)
	P-value [a]				0.562			0.215
	Mean Diff (95% CI) [b]				-4.4 (-12.5, 3.6)			
	P-value [b]				0.275			
	Effect Size (95% CI) [c]				-0.29 (-0.51, -0.08)			
	C15D1	N		28	28	28	13	13
Mean			80.3	80.0	-0.3	76.6	78.3	1.7
SD			13.42	14.81	12.85	13.67	11.70	12.27
Median			82.2	83.0	2.7	76.0	80.6	3.6
95% CI			75.1, 85.5	74.3, 85.8	-5.3, 4.7	68.3, 84.8	71.2, 85.4	-5.7, 9.1
Q1, Q3			71.9, 92.2	71.0, 90.3	-8.8, 7.9	65.3, 87.3	72.3, 86.8	-9.4, 10.6
Min, Max			46.3, 100.0	39.5, 100.0	-27.7, 25.9	50.0, 96.7	59.1, 93.5	-18.8, 22.9
Mean Diff (95% CI) [a]					-0.3 (-5.3, 4.7)			1.7 (-5.7, 9.1)
P-value [a]					0.907			0.622
Mean Diff (95% CI) [b]					-2.0 (-10.6, 6.6)			
P-value [b]					0.640			
Effect Size (95% CI) [c]					-0.13 (-0.35, 0.08)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C16D1	N	28	28	28	10	10	10
		Mean	81.2	81.6	0.4	75.2	79.0	3.7
		SD	12.95	13.25	10.60	14.11	11.97	11.29
		Median	83.9	82.6	1.0	74.2	83.2	4.0
		95% CI	76.1, 86.2	76.4, 86.7	-3.7, 4.5	65.1, 85.3	70.4, 87.5	-4.3, 11.8
		Q1, Q3	73.4, 92.2	70.5, 92.6	-6.5, 5.0	65.1, 87.3	66.3, 86.5	-4.5, 9.7
		Min, Max	46.3, 96.8	55.4, 100.0	-19.8, 27.1	50.0, 96.7	58.6, 96.1	-13.5, 24.5
		Mean Diff (95% CI) [a]			0.4 (-3.7, 4.5)			3.7 (-4.3, 11.8)
		P-value [a]			0.846			0.321
		Mean Diff (95% CI) [b]			-3.4 (-11.4, 4.7)			
		P-value [b]			0.404			
		Effect Size (95% CI) [c]			-0.22 (-0.43, -0.01)			
	C17D1	N	26	26	26	7	7	7
		Mean	80.8	82.3	1.5	71.4	80.2	8.8
		SD	13.34	14.83	11.68	12.06	13.70	10.41
		Median	83.9	85.9	3.1	72.4	83.3	10.1
		95% CI	75.4, 86.2	76.3, 88.3	-3.2, 6.3	60.2, 82.5	67.5, 92.9	-0.8, 18.5
		Q1, Q3	72.2, 92.1	72.6, 95.3	-3.8, 7.7	63.2, 79.9	66.3, 90.9	-4.2, 14.8
		Min, Max	46.3, 100.0	50.3, 100.0	-24.2, 27.1	50.0, 87.3	59.5, 97.4	-4.4, 25.0
		Mean Diff (95% CI) [a]			1.5 (-3.2, 6.3)			8.8 (-0.8, 18.5)
		P-value [a]			0.507			0.066
		Mean Diff (95% CI) [b]			-7.3 (-17.2, 2.7)			
		P-value [b]			0.145			
		Effect Size (95% CI) [c]			-0.48 (-0.70, -0.27)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C18D1	N		22	22	22	7	7	7
	Mean		79.4	81.2	1.8	76.1	81.9	5.8
	SD		13.76	16.57	12.75	14.66	12.75	11.68
	Median		81.6	84.0	2.9	76.0	84.6	6.4
	95% CI		73.3, 85.5	73.9, 88.6	-3.8, 7.5	62.6, 89.7	70.1, 93.7	-5.0, 16.6
	Q1, Q3		71.5, 92.1	69.4, 97.4	-3.1, 9.7	70.7, 87.3	69.6, 93.7	-5.7, 12.3
	Min, Max		46.3, 96.8	45.1, 100.0	-29.7, 26.5	50.0, 96.7	65.0, 100.0	-10.3, 24.9
	Mean Diff (95% CI) [a]				1.8 (-3.8, 7.5)			5.8 (-5.0, 16.6)
	P-value [a]				0.514			0.237
	Mean Diff (95% CI) [b]				-4.0 (-15.1, 7.2)			
	P-value [b]				0.469			
	Effect Size (95% CI) [c]				-0.26 (-0.48, -0.05)			
	C19D1	N		20	20	20	6	6
Mean			79.5	81.5	2.0	77.0	76.5	-0.5
SD			14.33	14.88	11.41	15.84	11.13	12.74
Median			81.6	84.3	1.6	77.9	78.9	0.5
95% CI			72.8, 86.2	74.6, 88.5	-3.3, 7.4	60.4, 93.7	64.8, 88.2	-13.9, 12.8
Q1, Q3			71.4, 92.2	72.0, 91.6	-3.9, 8.2	72.4, 87.3	63.9, 83.3	-12.8, 11.0
Min, Max			46.3, 96.8	49.4, 100.0	-22.0, 26.3	50.0, 96.7	63.5, 90.5	-15.9, 13.5
Mean Diff (95% CI) [a]					2.0 (-3.3, 7.4)			-0.5 (-13.9, 12.8)
P-value [a]					0.435			0.923
Mean Diff (95% CI) [b]					2.6 (-8.7, 13.8)			
P-value [b]					0.642			
Effect Size (95% CI) [c]					0.17 (-0.04, 0.38)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		20	20	20	4	4	4
	Mean		81.9	80.2	-1.7	72.4	79.7	7.3
	SD		15.27	15.71	11.49	16.12	11.51	9.35
	Median		86.3	83.0	-1.2	76.1	80.1	9.0
	95% CI		74.8, 89.1	72.8, 87.5	-7.1, 3.6	46.7, 98.0	61.4, 98.0	-7.5, 22.2
	Q1, Q3		73.1, 95.1	72.4, 89.2	-5.7, 4.0	61.2, 83.6	70.6, 88.8	0.2, 14.5
	Min, Max		46.3, 100.0	40.4, 100.0	-36.0, 23.5	50.0, 87.3	66.2, 92.5	-4.9, 16.2
	Mean Diff (95% CI) [a]				-1.7 (-7.1, 3.6)			7.3 (-7.5, 22.2)
	P-value [a]				0.505			0.215
	Mean Diff (95% CI) [b]				-9.1 (-21.8, 3.7)			
	P-value [b]				0.153			
	Effect Size (95% CI) [c]				-0.60 (-0.82, -0.38)			
	C21D1	N		18	18	18	4	4
Mean			80.1	82.7	2.6	72.4	77.9	5.6
SD			14.99	13.12	9.99	16.12	11.83	7.91
Median			84.7	83.1	2.2	76.1	77.8	6.7
95% CI			72.6, 87.6	76.2, 89.2	-2.4, 7.6	46.7, 98.0	59.1, 96.8	-7.0, 18.1
Q1, Q3			71.5, 92.3	76.6, 89.7	-4.5, 7.7	61.2, 83.6	69.4, 86.5	0.0, 11.1
Min, Max			46.3, 96.8	48.9, 100.0	-16.5, 23.5	50.0, 87.3	63.8, 92.2	-5.0, 13.8
Mean Diff (95% CI) [a]					2.6 (-2.4, 7.6)			5.6 (-7.0, 18.1)
P-value [a]					0.286			0.255
Mean Diff (95% CI) [b]					-3.0 (-14.2, 8.2)			
P-value [b]					0.587			
Effect Size (95% CI) [c]					-0.20 (-0.41, 0.02)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C22D1	N		15	15	15	3	3	3
	Mean		81.8	80.3	-1.4	69.9	84.4	14.5
	SD		14.69	16.15	12.09	18.78	14.62	5.87
	Median		86.2	83.8	2.6	72.4	82.1	12.7
	95% CI		73.7, 89.9	71.4, 89.3	-8.1, 5.3	23.2, 116.5	48.0, 120.7	-0.1, 29.1
	Q1, Q3		74.6, 95.4	70.1, 91.8	-5.0, 3.3	50.0, 87.3	71.0, 100.0	9.7, 21.0
	Min, Max		46.3, 96.8	48.9, 100.0	-36.1, 12.9	50.0, 87.3	71.0, 100.0	9.7, 21.0
	Mean Diff (95% CI) [a]				-1.4 (-8.1, 5.3)			14.5 (-0.1, 29.1)
	P-value [a]				0.651			0.051
	Mean Diff (95% CI) [b]				-15.9 (-31.3, -0.5)			
	P-value [b]				0.044			
	Effect Size (95% CI) [c]				-1.05 (-1.28, -0.82)			
	C23D1	N		11	11	11	3	3
Mean			80.6	80.8	0.2	69.9	81.5	11.6
SD			16.29	15.87	8.71	18.78	16.27	2.89
Median			86.2	87.0	-0.6	72.4	82.1	10.1
95% CI			69.7, 91.6	70.2, 91.5	-5.6, 6.1	23.2, 116.5	41.1, 121.9	4.4, 18.8
Q1, Q3			71.5, 94.9	70.9, 93.4	-4.6, 7.3	50.0, 87.3	64.9, 97.4	9.7, 14.9
Min, Max			46.3, 96.8	45.8, 98.7	-19.3, 13.5	50.0, 87.3	64.9, 97.4	9.7, 14.9
Mean Diff (95% CI) [a]					0.2 (-5.6, 6.1)			11.6 (4.4, 18.8)
P-value [a]					0.938			0.020
Mean Diff (95% CI) [b]					-11.4 (-22.8, 0.0)			
P-value [b]					0.051			
Effect Size (95% CI) [c]					-0.75 (-0.97, -0.53)			

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EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C24D1	N		10	10	10	2	2	2	
	Mean		82.8	80.5	-2.4	68.7	79.6	10.9	
	SD		15.38	19.14	6.40	26.38	21.79	4.59	
	Median		86.3	85.7	-1.2	68.7	79.6	10.9	
	95% CI		71.8, 93.8	66.8, 94.2	-6.9, 2.2	-168.4, 305.7	-116.2, 275.3	-30.3, 52.2	
	Q1, Q3		75.1, 94.9	68.7, 95.7	-6.7, 0.0	50.0, 87.3	64.2, 95.0	7.7, 14.2	
	Min, Max		46.3, 96.8	36.3, 97.6	-10.3, 11.2	50.0, 87.3	64.2, 95.0	7.7, 14.2	
	Mean Diff (95% CI) [a]				-2.4 (-6.9, 2.2)			10.9 (-30.3, 52.2)	
	P-value [a]				0.275			0.184	
	Mean Diff (95% CI) [b]				-13.3 (-24.1, -2.5)				
	P-value [b]				0.020				
	Effect Size (95% CI) [c]				-0.88 (-1.10, -0.66)				
	C25D1	N		9	9	9	0	0	0
		Mean		81.3	78.4	-2.9	NE	NE	NE
SD			15.46	17.60	8.33	NE	NE	NE	
Median			86.2	81.2	-2.6	NE	NE	NE	
95% CI			69.4, 93.2	64.8, 91.9	-9.3, 3.5	NE, NE	NE, NE	NE, NE	
Q1, Q3			75.1, 92.1	75.6, 87.0	-6.4, 0.5	NE, NE	NE, NE	NE, NE	
Min, Max			46.3, 95.4	39.9, 100.0	-18.1, 13.5	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					-2.9 (-9.3, 3.5)			NE (NE, NE)	
P-value [a]					0.326			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

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[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C26D1	N		8	8	8	1	1	1	
	Mean		88.8	82.8	-6.0	87.3	98.7	11.4	
	SD		7.42	16.77	16.33	NE	NE	NE	
	Median		89.3	86.6	-0.4	87.3	98.7	11.4	
	95% CI		82.6, 95.0	68.7, 96.8	-19.7, 7.6	NE, NE	NE, NE	NE, NE	
	Q1, Q3		84.7, 95.1	73.7, 95.0	-9.5, 2.5	87.3, 87.3	98.7, 98.7	11.4, 11.4	
	Min, Max		75.1, 96.8	52.6, 98.7	-42.8, 9.6	87.3, 87.3	98.7, 98.7	11.4, 11.4	
	Mean Diff (95% CI) [a]				-6.0 (-19.7, 7.6)			11.4 (NE, NE)	
	P-value [a]				0.331			NE	
	Mean Diff (95% CI) [b]				-17.4 (-58.4, 23.5)				
	P-value [b]				0.348				
	Effect Size (95% CI) [c]				-1.15 (-1.38, -0.92)				
	C27D1	N		8	8	8	1	1	1
		Mean		88.8	87.9	-0.9	87.3	96.8	9.5
SD			7.42	9.68	9.48	NE	NE	NE	
Median			89.3	90.3	0.3	87.3	96.8	9.5	
95% CI			82.6, 95.0	79.8, 96.0	-8.8, 7.1	NE, NE	NE, NE	NE, NE	
Q1, Q3			84.7, 95.1	79.9, 94.8	-2.4, 2.3	87.3, 87.3	96.8, 96.8	9.5, 9.5	
Min, Max			75.1, 96.8	73.6, 100.0	-20.7, 13.5	87.3, 87.3	96.8, 96.8	9.5, 9.5	
Mean Diff (95% CI) [a]					-0.9 (-8.8, 7.1)			9.5 (NE, NE)	
P-value [a]					0.806			NE	
Mean Diff (95% CI) [b]					-10.3 (-34.1, 13.4)				
P-value [b]					0.338				
Effect Size (95% CI) [c]					-0.68 (-0.90, -0.46)				

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C28D1	N		7	7	7	1	1	1	
	Mean		89.2	88.1	-1.1	87.3	96.9	9.6	
	SD		7.93	8.45	8.06	NE	NE	NE	
	Median		92.1	89.6	-1.5	87.3	96.9	9.6	
	95% CI		81.8, 96.5	80.3, 95.9	-8.5, 6.4	NE, NE	NE, NE	NE, NE	
	Q1, Q3		83.3, 95.4	80.0, 97.4	-2.6, 2.3	87.3, 87.3	96.9, 96.9	9.6, 9.6	
	Min, Max		75.1, 96.8	77.4, 98.2	-15.5, 11.7	87.3, 87.3	96.9, 96.9	9.6, 9.6	
	Mean Diff (95% CI) [a]				-1.1 (-8.5, 6.4)			9.6 (NE, NE)	
	P-value [a]				0.735			NE	
	Mean Diff (95% CI) [b]				-10.7 (-31.8, 10.4)				
	P-value [b]				0.261				
	Effect Size (95% CI) [c]				-0.71 (-0.93, -0.49)				
	C29D1	N		4	4	4	1	1	1
		Mean		85.1	81.5	-3.6	87.3	70.9	-16.5
SD			8.39	13.17	16.79	NE	NE	NE	
Median			84.9	79.9	0.7	87.3	70.9	-16.5	
95% CI			71.7, 98.4	60.5, 102.4	-30.3, 23.1	NE, NE	NE, NE	NE, NE	
Q1, Q3			79.2, 91.0	71.4, 91.6	-13.9, 6.7	87.3, 87.3	70.9, 70.9	-16.5, -16.5	
Min, Max			75.1, 95.4	67.9, 98.2	-27.5, 11.7	87.3, 87.3	70.9, 70.9	-16.5, -16.5	
Mean Diff (95% CI) [a]					-3.6 (-30.3, 23.1)			-16.5 (NE, NE)	
P-value [a]					0.697			NE	
Mean Diff (95% CI) [b]					12.9 (-46.9, 72.6)				
P-value [b]					0.543				
Effect Size (95% CI) [c]					0.85 (0.63, 1.07)				

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Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C30D1	N		4	4	4	1	1	1	
	Mean		90.5	91.0	0.5	87.3	60.9	-26.4	
	SD		6.62	9.17	11.46	NE	NE	NE	
	Median		91.0	91.5	1.4	87.3	60.9	-26.4	
	95% CI		80.0, 101.0	76.4, 105.6	-17.8, 18.7	NE, NE	NE, NE	NE, NE	
	Q1, Q3		84.9, 96.1	83.3, 98.7	-6.9, 7.8	87.3, 87.3	60.9, 60.9	-26.4, -26.4	
	Min, Max		83.3, 96.8	81.0, 100.0	-14.4, 13.5	87.3, 87.3	60.9, 60.9	-26.4, -26.4	
	Mean Diff (95% CI) [a]				0.5 (-17.8, 18.7)			-26.4 (NE, NE)	
	P-value [a]				0.938			NE	
	Mean Diff (95% CI) [b]				26.8 (-13.9, 67.6)				
	P-value [b]				0.127				
	Effect Size (95% CI) [c]				1.77 (1.52, 2.02)				
	C31D1	N		2	2	2	1	1	1
		Mean		84.9	89.5	4.6	87.3	81.8	-5.5
SD			2.24	12.36	10.12	NE	NE	NE	
Median			84.9	89.5	4.6	87.3	81.8	-5.5	
95% CI			64.8, 105.0	-21.6, 200.5	-86.4, 95.5	NE, NE	NE, NE	NE, NE	
Q1, Q3			83.3, 86.5	80.7, 98.2	-2.6, 11.7	87.3, 87.3	81.8, 81.8	-5.5, -5.5	
Min, Max			83.3, 86.5	80.7, 98.2	-2.6, 11.7	87.3, 87.3	81.8, 81.8	-5.5, -5.5	
Mean Diff (95% CI) [a]					4.6 (-86.4, 95.5)			-5.5 (NE, NE)	
P-value [a]					0.639			NE	
Mean Diff (95% CI) [b]					10.1 (-147.5, 167.6)				
P-value [b]					0.566				
Effect Size (95% CI) [c]					0.66 (0.45, 0.88)				

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C32D1	N		2	2	2	1	1	1	
	Mean		84.9	91.6	6.7	87.3	82.9	-4.4	
	SD		2.24	11.09	8.85	NE	NE	NE	
	Median		84.9	91.6	6.7	87.3	82.9	-4.4	
	95% CI		64.8, 105.0	-8.0, 191.3	-72.8, 86.3	NE, NE	NE, NE	NE, NE	
	Q1, Q3		83.3, 86.5	83.8, 99.5	0.5, 13.0	87.3, 87.3	82.9, 82.9	-4.4, -4.4	
	Min, Max		83.3, 86.5	83.8, 99.5	0.5, 13.0	87.3, 87.3	82.9, 82.9	-4.4, -4.4	
	Mean Diff (95% CI) [a]				6.7 (-72.8, 86.3)			-4.4 (NE, NE)	
	P-value [a]				0.477			NE	
	Mean Diff (95% CI) [b]				11.1 (-126.7, 148.9)				
	P-value [b]				0.493				
	Effect Size (95% CI) [c]				0.73 (0.51, 0.95)				
	C33D1	N		3	3	3	1	1	1
		Mean		88.9	91.3	2.4	87.3	81.7	-5.6
SD			7.04	8.33	5.82	NE	NE	NE	
Median			86.5	95.6	-0.2	87.3	81.7	-5.6	
95% CI			71.4, 106.4	70.6, 112.0	-12.1, 16.8	NE, NE	NE, NE	NE, NE	
Q1, Q3			83.3, 96.8	81.7, 96.6	-1.7, 9.1	87.3, 87.3	81.7, 81.7	-5.6, -5.6	
Min, Max			83.3, 96.8	81.7, 96.6	-1.7, 9.1	87.3, 87.3	81.7, 81.7	-5.6, -5.6	
Mean Diff (95% CI) [a]					2.4 (-12.1, 16.8)			-5.6 (NE, NE)	
P-value [a]					0.550			NE	
Mean Diff (95% CI) [b]					8.0 (-20.9, 36.9)				
P-value [b]					0.354				
Effect Size (95% CI) [c]					0.53 (0.31, 0.75)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C34D1	N		3	3	3	0	0	0	
	Mean		88.9	88.5	-0.4	NE	NE	NE	
	SD		7.04	16.57	13.11	NE	NE	NE	
	Median		86.5	97.4	0.6	NE	NE	NE	
	95% CI		71.4, 106.4	47.4, 129.7	-32.9, 32.2	NE, NE	NE, NE	NE, NE	
	Q1, Q3		83.3, 96.8	69.4, 98.7	-13.9, 12.2	NE, NE	NE, NE	NE, NE	
	Min, Max		83.3, 96.8	69.4, 98.7	-13.9, 12.2	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				-0.4 (-32.9, 32.2)			NE (NE, NE)	
	P-value [a]				0.967			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C35D1	N		2	2	2	0	0	0
		Mean		84.9	85.6	0.7	NE	NE	NE
SD			2.24	15.96	13.72	NE	NE	NE	
Median			84.9	85.6	0.7	NE	NE	NE	
95% CI			64.8, 105.0	-57.7, 229.0	-122.5, 124.0	NE, NE	NE, NE	NE, NE	
Q1, Q3			83.3, 86.5	74.4, 96.9	-9.0, 10.4	NE, NE	NE, NE	NE, NE	
Min, Max			83.3, 86.5	74.4, 96.9	-9.0, 10.4	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					0.7 (-122.5, 124.0)			NE (NE, NE)	
P-value [a]					0.952			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C36D1	N	3	3	3	0	0	0
		Mean	88.9	90.6	1.7	NE	NE	NE
		SD	7.04	13.66	10.77	NE	NE	NE
		Median	86.5	97.4	0.6	NE	NE	NE
		95% CI	71.4, 106.4	56.7, 124.5	-25.0, 28.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 96.8	74.9, 99.5	-8.5, 13.0	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 96.8	74.9, 99.5	-8.5, 13.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			1.7 (-25.0, 28.5)			NE (NE, NE)
		P-value [a]			0.808			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C37D1	N	3	3	3	0	0	0
		Mean	88.9	90.8	1.9	NE	NE	NE
		SD	7.04	13.36	10.53	NE	NE	NE
		Median	86.5	97.4	0.6	NE	NE	NE
		95% CI	71.4, 106.4	57.6, 124.0	-24.3, 28.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	83.3, 96.8	75.4, 99.5	-7.9, 13.0	NE, NE	NE, NE	NE, NE
		Min, Max	83.3, 96.8	75.4, 99.5	-7.9, 13.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			1.9 (-24.3, 28.0)			NE (NE, NE)
		P-value [a]			0.785			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C38D1	N		2	2	2	0	0	0	
	Mean		91.6	97.2	5.5	NE	NE	NE	
	SD		7.28	0.36	6.92	NE	NE	NE	
	Median		91.6	97.2	5.5	NE	NE	NE	
	95% CI		26.2, 157.1	93.9, 100.4	-56.6, 67.7	NE, NE	NE, NE	NE, NE	
	Q1, Q3		86.5, 96.8	96.9, 97.4	0.6, 10.4	NE, NE	NE, NE	NE, NE	
	Min, Max		86.5, 96.8	96.9, 97.4	0.6, 10.4	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				5.5 (-56.6, 67.7)			NE (NE, NE)	
	P-value [a]				0.461			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C39D1	N		2	2	2	0	0	0
		Mean		91.6	100.0	8.4	NE	NE	NE
SD			7.28	0.00	7.28	NE	NE	NE	
Median			91.6	100.0	8.4	NE	NE	NE	
95% CI			26.2, 157.1	100.0, 100.0	-57.1, 73.8	NE, NE	NE, NE	NE, NE	
Q1, Q3			86.5, 96.8	100.0, 100.0	3.2, 13.5	NE, NE	NE, NE	NE, NE	
Min, Max			86.5, 96.8	100.0, 100.0	3.2, 13.5	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					8.4 (-57.1, 73.8)			NE (NE, NE)	
P-value [a]					0.352			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	91.6	97.8	6.2	NE	NE	NE
		SD	7.28	3.08	4.20	NE	NE	NE
		Median	91.6	97.8	6.2	NE	NE	NE
		95% CI	26.2, 157.1	70.1, 125.5	-31.6, 43.9	NE, NE	NE, NE	NE, NE
		Q1, Q3	86.5, 96.8	95.6, 100.0	3.2, 9.1	NE, NE	NE, NE	NE, NE
		Min, Max	86.5, 96.8	95.6, 100.0	3.2, 9.1	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			6.2 (-31.6, 43.9)			NE (NE, NE)
		P-value [a]			0.285			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	91.6	96.3	4.7	NE	NE	NE
		SD	7.28	5.20	2.09	NE	NE	NE
		Median	91.6	96.3	4.7	NE	NE	NE
		95% CI	26.2, 157.1	49.6, 143.0	-14.1, 23.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	86.5, 96.8	92.6, 100.0	3.2, 6.2	NE, NE	NE, NE	NE, NE
		Min, Max	86.5, 96.8	92.6, 100.0	3.2, 6.2	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			4.7 (-14.1, 23.4)			NE (NE, NE)
		P-value [a]			0.194			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
 EORTC QLQ-C30 Scores and Change from Baseline by Visit  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	86.5	94.2	7.7	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	86.5	94.2	7.7	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	86.5, 86.5	94.2, 94.2	7.7, 7.7	NE, NE	NE, NE	NE, NE
		Min, Max	86.5, 86.5	94.2, 94.2	7.7, 7.7	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			7.7 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	86.5	95.1	8.6	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	86.5	95.1	8.6	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	86.5, 86.5	95.1, 95.1	8.6, 8.6	NE, NE	NE, NE	NE, NE
		Min, Max	86.5, 86.5	95.1, 95.1	8.6, 8.6	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.6 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.1  
EORTC QLQ-C30 Scores and Change from Baseline by Visit  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=174)			TPC (N=165)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
EOT	N		131	131	131	126	126	126	
	Mean		78.5	73.9	-4.6	78.2	74.2	-4.0	
	SD		15.88	21.31	16.09	14.95	18.28	14.69	
	Median		81.1	78.9	-1.3	83.0	77.1	-2.6	
	95% CI		75.7, 81.2	70.2, 77.6	-7.4, -1.8	75.6, 80.9	71.0, 77.4	-6.6, -1.4	
	Q1, Q3		71.2, 90.8	61.2, 90.3	-13.0, 5.8	70.3, 89.0	62.8, 87.8	-12.5, 5.1	
	Min, Max		29.7, 100.0	7.7, 100.0	-52.9, 41.4	22.1, 100.0	16.9, 100.0	-58.3, 36.3	
	Mean Diff (95% CI) [a]				-4.6 (-7.4, -1.8)			-4.0 (-6.6, -1.4)	
	P-value [a]				0.001			0.003	
	Mean Diff (95% CI) [b]				-0.6 (-4.3, 3.2)				
	P-value [b]				0.772				
	Effect Size (95% CI) [c]				-0.04 (-0.25, 0.18)				
	Long Term Follow-up	N		14	14	14	9	9	9
	Mean			85.3	79.8	-5.5	78.9	62.5	-16.4
	SD			9.08	13.76	8.97	13.86	27.41	25.08
Median			86.0	79.1	-3.5	83.5	70.3	-9.2	
95% CI			80.1, 90.6	71.9, 87.7	-10.7, -0.4	68.2, 89.5	41.4, 83.5	-35.7, 2.9	
Q1, Q3			78.7, 93.2	70.3, 94.0	-14.4, 1.9	73.5, 85.7	57.3, 78.9	-21.8, -3.4	
Min, Max			70.1, 97.8	58.1, 97.7	-20.6, 6.9	52.2, 100.0	8.2, 96.6	-75.3, 10.2	
Mean Diff (95% CI) [a]					-5.5 (-10.7, -0.4)			-16.4 (-35.7, 2.9)	
P-value [a]					0.038			0.085	
Mean Diff (95% CI) [b]					10.9 (-4.3, 26.0)				
P-value [b]					0.150				
Effect Size (95% CI) [c]					0.72 (0.50, 0.94)				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. CI = Confidence Interval; Diff = Difference; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; NE = Not Estimable; QoL = quality of life; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
EQ-5D VAS	Baseline	N	171			163		
		Mean	69.4			68.5		
		SD	19.34			20.29		
		Median	75.0			70.0		
		95% CI	66.5, 72.4			65.4, 71.6		
		Q1, Q3	60.0, 80.0			50.0, 85.0		
		Min, Max	6.0, 100.0			7.0, 100.0		
	C2D1	N	147	151	147	143	143	143
		Mean	70.5	69.9	-0.6	70.0	68.0	-2.0
		SD	18.98	19.84	16.08	19.42	19.43	14.15
		Median	75.0	70.0	0.0	70.0	70.0	0.0
		95% CI	67.4, 73.6	66.7, 73.1	-3.2, 2.0	66.8, 73.2	64.7, 71.2	-4.4, 0.3
		Q1, Q3	60.0, 80.0	60.0, 85.0	-5.0, 5.0	51.0, 85.0	50.0, 85.0	-10.0, 5.0
		Min, Max	6.0, 100.0	7.0, 100.0	-63.0, 50.0	7.0, 100.0	6.0, 100.0	-59.0, 63.0
		Mean Diff (95% CI) [a]			-0.6 (-3.2, 2.0)			-2.0 (-4.4, 0.3)
P-value [a]				0.652			0.091	
Mean Diff (95% CI) [b]			1.4 (-2.1, 4.9)					
P-value [b]			0.427					
Effect Size (95% CI) [c]			0.07 (-0.14, 0.29)					
C3D1	N	121	124	121	103	103	103	
	Mean	70.6	72.3	1.5	70.7	72.4	1.7	
	SD	18.58	17.92	14.33	18.17	16.09	12.02	
	Median	75.0	75.0	0.0	70.0	75.0	0.0	
	95% CI	67.3, 74.0	69.1, 75.5	-1.0, 4.1	67.2, 74.3	69.2, 75.5	-0.7, 4.0	
	Q1, Q3	60.0, 85.0	60.0, 85.0	-5.0, 10.0	51.0, 85.0	60.0, 85.0	-5.0, 10.0	
	Min, Max	10.0, 100.0	30.0, 100.0	-35.0, 60.0	30.0, 100.0	40.0, 100.0	-30.0, 45.0	
	Mean Diff (95% CI) [a]			1.5 (-1.0, 4.1)			1.7 (-0.7, 4.0)	
	P-value [a]			0.240			0.162	
	Mean Diff (95% CI) [b]			-0.1 (-3.7, 3.4)				
	P-value [b]			0.941				
Effect Size (95% CI) [c]			-0.01 (-0.22, 0.21)					

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C4D1	N		108	110	108	93	93	93
	Mean		70.5	73.1	2.4	70.2	72.0	1.7
	SD		18.96	19.14	16.84	18.99	17.88	14.98
	Median		75.0	80.0	0.0	70.0	70.0	0.0
	95% CI		66.9, 74.1	69.5, 76.7	-0.9, 5.6	66.3, 74.2	68.3, 75.7	-1.4, 4.8
	Q1, Q3		60.0, 85.0	60.0, 85.0	-5.0, 10.0	50.0, 85.0	60.0, 90.0	-5.0, 9.0
	Min, Max		10.0, 100.0	5.0, 100.0	-50.0, 50.0	30.0, 100.0	25.0, 100.0	-40.0, 40.0
	Mean Diff (95% CI) [a]				2.4 (-0.9, 5.6)			1.7 (-1.4, 4.8)
	P-value [a]				0.149			0.271
	Mean Diff (95% CI) [b]				0.6 (-3.8, 5.1)			
	P-value [b]				0.781			
	Effect Size (95% CI) [c]				0.03 (-0.18, 0.25)			
	C5D1	N		94	97	94	79	79
Mean			70.5	72.6	1.9	70.3	73.0	2.7
SD			19.50	18.35	16.29	18.65	17.43	14.70
Median			75.0	75.0	0.0	70.0	75.0	0.0
95% CI			66.5, 74.5	68.9, 76.3	-1.4, 5.3	66.1, 74.5	69.1, 76.9	-0.6, 6.0
Q1, Q3			60.0, 85.0	60.0, 90.0	-5.0, 10.0	51.0, 85.0	65.0, 85.0	-5.0, 10.0
Min, Max			10.0, 100.0	25.0, 100.0	-55.0, 50.0	30.0, 100.0	20.0, 100.0	-30.0, 40.0
Mean Diff (95% CI) [a]					1.9 (-1.4, 5.3)			2.7 (-0.6, 6.0)
P-value [a]					0.255			0.110
Mean Diff (95% CI) [b]					-0.7 (-5.4, 4.0)			
P-value [b]					0.754			
Effect Size (95% CI) [c]					-0.04 (-0.25, 0.18)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C6D1	N	91	94	91	69	69	69
		Mean	71.8	74.8	3.0	70.9	71.1	0.2
		SD	19.54	16.84	15.80	18.94	18.33	15.82
		Median	75.0	80.0	3.0	70.0	75.0	0.0
		95% CI	67.7, 75.9	71.4, 78.3	-0.3, 6.3	66.3, 75.4	66.7, 75.5	-3.6, 4.0
		Q1, Q3	60.0, 85.0	65.0, 88.0	-5.0, 10.0	51.0, 85.0	60.0, 85.0	-5.0, 10.0
		Min, Max	10.0, 100.0	30.0, 100.0	-50.0, 60.0	30.0, 100.0	25.0, 97.0	-40.0, 30.0
		Mean Diff (95% CI) [a]			3.0 (-0.3, 6.3)			0.2 (-3.6, 4.0)
		P-value [a]			0.071			0.897
		Mean Diff (95% CI) [b]			2.8 (-2.2, 7.8)			
		P-value [b]			0.273			
		Effect Size (95% CI) [c]			0.14 (-0.07, 0.35)			
	C7D1	N	76	78	76	53	53	53
		Mean	69.9	74.0	3.7	72.6	74.9	2.3
		SD	19.53	17.93	16.30	18.86	17.33	14.47
		Median	75.0	75.5	5.0	75.0	75.0	0.0
		95% CI	65.4, 74.3	69.9, 78.0	0.0, 7.4	67.4, 77.8	70.1, 79.7	-1.7, 6.3
		Q1, Q3	60.0, 82.5	60.0, 90.0	-5.0, 10.0	60.0, 90.0	60.0, 90.0	-5.0, 10.0
		Min, Max	10.0, 100.0	20.0, 100.0	-60.0, 50.0	30.0, 100.0	40.0, 100.0	-40.0, 45.0
		Mean Diff (95% CI) [a]			3.7 (0.0, 7.4)			2.3 (-1.7, 6.3)
		P-value [a]			0.052			0.248
		Mean Diff (95% CI) [b]			1.4 (-4.2, 6.9)			
		P-value [b]			0.626			
		Effect Size (95% CI) [c]			0.07 (-0.15, 0.28)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C8D1	N		73	75	73	49	49	49
	Mean		70.7	73.6	2.4	72.6	74.6	2.0
	SD		18.85	17.84	15.71	19.03	17.39	14.55
	Median		75.0	80.0	5.0	75.0	80.0	0.0
	95% CI		66.3, 75.1	69.5, 77.7	-1.2, 6.1	67.1, 78.1	69.6, 79.6	-2.2, 6.2
	Q1, Q3		60.0, 85.0	65.0, 86.0	-5.0, 10.0	60.0, 85.0	65.0, 90.0	-5.0, 10.0
	Min, Max		10.0, 100.0	15.0, 100.0	-65.0, 35.0	30.0, 100.0	40.0, 100.0	-40.0, 45.0
	Mean Diff (95% CI) [a]				2.4 (-1.2, 6.1)			2.0 (-2.2, 6.2)
	P-value [a]				0.191			0.346
	Mean Diff (95% CI) [b]				0.4 (-5.1, 6.0)			
	P-value [b]				0.875			
	Effect Size (95% CI) [c]				0.02 (-0.19, 0.24)			
	C9D1	N		57	59	57	41	41
Mean			71.8	73.8	1.4	73.0	72.8	-0.2
SD			18.35	16.21	13.88	19.44	16.65	14.78
Median			75.0	75.0	0.0	75.0	74.0	0.0
95% CI			67.0, 76.7	69.5, 78.0	-2.3, 5.0	66.9, 79.1	67.5, 78.0	-4.9, 4.4
Q1, Q3			60.0, 85.0	60.0, 88.0	-5.0, 10.0	60.0, 85.0	60.0, 85.0	-5.0, 10.0
Min, Max			25.0, 100.0	40.0, 100.0	-40.0, 30.0	30.0, 100.0	40.0, 100.0	-35.0, 30.0
Mean Diff (95% CI) [a]					1.4 (-2.3, 5.0)			-0.2 (-4.9, 4.4)
P-value [a]					0.465			0.916
Mean Diff (95% CI) [b]					1.6 (-4.2, 7.4)			
P-value [b]					0.586			
Effect Size (95% CI) [c]					0.08 (-0.13, 0.29)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C10D1	N	N	52	54	52	29	29	29
		Mean	70.7	72.1	0.7	71.1	69.5	-1.6
		SD	18.37	16.81	15.66	19.31	16.80	15.97
		Median	72.5	75.0	0.0	75.0	70.0	-3.0
		95% CI	65.6, 75.8	67.5, 76.7	-3.6, 5.1	63.7, 78.4	63.1, 75.9	-7.6, 4.5
		Q1, Q3	60.0, 85.0	60.0, 85.0	-5.0, 10.0	65.0, 85.0	55.0, 80.0	-9.0, 10.0
		Min, Max	25.0, 100.0	40.0, 100.0	-40.0, 35.0	30.0, 100.0	40.0, 100.0	-35.0, 30.0
		Mean Diff (95% CI) [a]			0.7 (-3.6, 5.1)			-1.6 (-7.6, 4.5)
		P-value [a]			0.738			0.605
		Mean Diff (95% CI) [b]			2.3 (-5.0, 9.6)			
		P-value [b]			0.534			
		Effect Size (95% CI) [c]			0.11 (-0.10, 0.33)			
		C11D1	N	N	44	45	44	23
Mean	70.8			73.6	2.2	78.7	77.6	-1.1
SD	18.89			16.74	16.13	16.47	14.13	15.12
Median	75.0			74.0	0.0	80.0	78.0	-3.0
95% CI	65.1, 76.6			68.6, 78.6	-2.7, 7.1	71.6, 85.9	71.5, 83.7	-7.7, 5.4
Q1, Q3	60.0, 85.0			65.0, 85.0	-5.0, 10.0	70.0, 95.0	65.0, 90.0	-5.0, 8.0
Min, Max	25.0, 100.0			40.0, 100.0	-40.0, 55.0	40.0, 100.0	55.0, 100.0	-35.0, 32.0
Mean Diff (95% CI) [a]					2.2 (-2.7, 7.1)			-1.1 (-7.7, 5.4)
P-value [a]					0.379			0.723
Mean Diff (95% CI) [b]					3.3 (-4.8, 11.4)			
P-value [b]					0.421			
Effect Size (95% CI) [c]					0.17 (-0.05, 0.38)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

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EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C12D1	N		39	40	39	19	19	19	
	Mean		70.8	73.5	2.0	79.5	76.5	-3.1	
	SD		19.98	17.54	15.76	13.12	13.11	12.71	
	Median		75.0	72.5	0.0	80.0	75.0	-3.0	
	95% CI		64.4, 77.3	67.9, 79.1	-3.1, 7.1	73.2, 85.9	70.2, 82.8	-9.2, 3.1	
	Q1, Q3		60.0, 85.0	62.5, 88.5	-5.0, 10.0	70.0, 85.0	70.0, 85.0	-15.0, 10.0	
	Min, Max		25.0, 100.0	40.0, 100.0	-40.0, 52.0	53.0, 100.0	50.0, 95.0	-30.0, 25.0	
	Mean Diff (95% CI) [a]				2.0 (-3.1, 7.1)			-3.1 (-9.2, 3.1)	
	P-value [a]				0.439			0.309	
	Mean Diff (95% CI) [b]				5.0 (-3.3, 13.3)				
	P-value [b]				0.231				
	Effect Size (95% CI) [c]				0.25 (0.04, 0.47)				
	C13D1	N		32	33	32	15	15	15
		Mean		70.7	74.8	3.3	74.9	77.3	2.5
SD			19.66	15.27	13.77	16.22	12.94	12.92	
Median			75.0	75.0	0.0	75.0	80.0	0.0	
95% CI			63.6, 77.8	69.3, 80.2	-1.7, 8.2	65.9, 83.8	70.2, 84.5	-4.7, 9.6	
Q1, Q3			60.0, 85.0	65.0, 85.0	-5.0, 5.0	65.0, 85.0	70.0, 85.0	-5.0, 10.0	
Min, Max			25.0, 100.0	40.0, 100.0	-15.0, 50.0	40.0, 100.0	55.0, 100.0	-20.0, 30.0	
Mean Diff (95% CI) [a]					3.3 (-1.7, 8.2)			2.5 (-4.7, 9.6)	
P-value [a]					0.192			0.472	
Mean Diff (95% CI) [b]					0.8 (-7.7, 9.3)				
P-value [b]					0.854				
Effect Size (95% CI) [c]					0.04 (-0.17, 0.25)				

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C14D1	N		30	31	30	12	12	12
	Mean		70.3	72.8	1.7	74.0	68.8	-5.2
	SD		19.76	20.00	19.52	16.02	18.17	18.40
	Median		75.0	75.0	0.0	77.5	69.0	-2.5
	95% CI		62.9, 77.6	65.5, 80.2	-5.6, 9.0	63.8, 84.2	57.3, 80.4	-16.9, 6.5
	Q1, Q3		60.0, 85.0	65.0, 85.0	-5.0, 10.0	67.5, 85.0	55.0, 79.0	-17.5, 5.0
	Min, Max		25.0, 100.0	8.0, 100.0	-77.0, 40.0	40.0, 100.0	40.0, 100.0	-35.0, 25.0
	Mean Diff (95% CI) [a]				1.7 (-5.6, 9.0)			-5.2 (-16.9, 6.5)
	P-value [a]				0.643			0.352
	Mean Diff (95% CI) [b]				6.8 (-6.4, 20.1)			
	P-value [b]				0.304			
	Effect Size (95% CI) [c]				0.34 (0.13, 0.56)			
	C15D1	N		26	27	26	13	13
Mean			69.4	73.1	2.7	72.9	68.6	-4.3
SD			20.31	15.45	12.27	15.82	16.56	20.13
Median			75.0	70.0	0.0	75.0	70.0	-5.0
95% CI			61.2, 77.6	67.0, 79.3	-2.3, 7.6	63.4, 82.5	58.6, 78.6	-16.5, 7.9
Q1, Q3			60.0, 85.0	65.0, 85.0	-5.0, 10.0	65.0, 85.0	60.0, 75.0	-15.0, 5.0
Min, Max			25.0, 100.0	45.0, 100.0	-10.0, 35.0	40.0, 100.0	40.0, 95.0	-40.0, 34.0
Mean Diff (95% CI) [a]					2.7 (-2.3, 7.6)			-4.3 (-16.5, 7.9)
P-value [a]					0.274			0.455
Mean Diff (95% CI) [b]					7.0 (-3.5, 17.5)			
P-value [b]					0.185			
Effect Size (95% CI) [c]					0.35 (0.14, 0.57)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C16D1	N		26	27	26	10	10	10
	Mean		69.3	74.4	4.1	72.3	71.0	-1.3
	SD		20.24	17.49	12.99	18.06	14.49	15.78
	Median		75.0	70.0	0.5	75.0	72.5	0.0
	95% CI		61.2, 77.5	67.5, 81.4	-1.1, 9.4	59.4, 85.2	60.6, 81.4	-12.6, 10.0
	Q1, Q3		60.0, 85.0	65.0, 90.0	-3.0, 10.0	60.0, 85.0	60.0, 75.0	-5.0, 0.0
	Min, Max		25.0, 100.0	40.0, 100.0	-20.0, 35.0	40.0, 100.0	50.0, 100.0	-35.0, 22.0
	Mean Diff (95% CI) [a]				4.1 (-1.1, 9.4)			-1.3 (-12.6, 10.0)
	P-value [a]				0.119			0.800
	Mean Diff (95% CI) [b]				5.4 (-5.0, 15.8)			
	P-value [b]				0.298			
	Effect Size (95% CI) [c]				0.27 (0.06, 0.49)			
	C17D1	N		24	25	24	7	7
Mean			68.8	71.4	1.4	69.0	67.9	-1.1
SD			20.60	20.81	12.49	17.71	9.06	16.10
Median			75.0	75.0	0.0	70.0	70.0	0.0
95% CI			60.1, 77.4	62.8, 79.9	-3.9, 6.7	52.6, 85.4	59.5, 76.2	-16.0, 13.7
Q1, Q3			55.0, 82.5	60.0, 90.0	-5.0, 10.0	53.0, 85.0	60.0, 70.0	-15.0, 17.0
Min, Max			25.0, 100.0	30.0, 100.0	-25.0, 35.0	40.0, 85.0	60.0, 85.0	-25.0, 20.0
Mean Diff (95% CI) [a]					1.4 (-3.9, 6.7)			-1.1 (-16.0, 13.7)
P-value [a]					0.584			0.857
Mean Diff (95% CI) [b]					2.6 (-9.1, 14.3)			
P-value [b]					0.658			
Effect Size (95% CI) [c]					0.13 (-0.09, 0.34)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C18D1	N		20	21	20	7	7	7
	Mean		68.8	71.5	1.4	75.7	76.0	0.3
	SD		19.99	20.45	10.86	19.46	14.15	9.60
	Median		75.0	75.0	0.0	85.0	75.0	0.0
	95% CI		59.4, 78.1	62.2, 80.8	-3.7, 6.4	57.7, 93.7	62.9, 89.1	-8.6, 9.2
	Q1, Q3		57.5, 80.0	60.0, 90.0	-7.5, 12.5	65.0, 85.0	60.0, 85.0	-5.0, 2.0
	Min, Max		25.0, 100.0	30.0, 100.0	-15.0, 20.0	40.0, 100.0	60.0, 100.0	-10.0, 20.0
	Mean Diff (95% CI) [a]				1.4 (-3.7, 6.4)			0.3 (-8.6, 9.2)
	P-value [a]				0.585			0.940
	Mean Diff (95% CI) [b]				1.1 (-8.5, 10.6)			
	P-value [b]				0.821			
	Effect Size (95% CI) [c]				0.05 (-0.16, 0.27)			
	C19D1	N		19	20	19	6	6
Mean			68.4	71.6	1.7	74.2	67.5	-6.7
SD			20.48	19.14	11.49	20.84	18.64	12.52
Median			75.0	72.5	0.0	77.5	70.0	-2.5
95% CI			58.5, 78.3	62.6, 80.6	-3.9, 7.2	52.3, 96.0	47.9, 87.1	-19.8, 6.5
Q1, Q3			50.0, 80.0	65.0, 86.0	-9.0, 5.0	65.0, 85.0	55.0, 75.0	-10.0, 0.0
Min, Max			25.0, 100.0	30.0, 100.0	-10.0, 30.0	40.0, 100.0	40.0, 95.0	-30.0, 5.0
Mean Diff (95% CI) [a]					1.7 (-3.9, 7.2)			-6.7 (-19.8, 6.5)
P-value [a]					0.531			0.249
Mean Diff (95% CI) [b]					8.4 (-3.0, 19.7)			
P-value [b]					0.142			
Effect Size (95% CI) [c]					0.42 (0.20, 0.64)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C20D1	N		18	19	18	4	4	4
	Mean		72.5	75.4	1.5	68.8	76.3	7.5
	SD		19.72	17.98	9.51	21.36	13.15	17.08
	Median		75.0	80.0	0.0	75.0	72.5	5.0
	95% CI		62.7, 82.3	66.7, 84.0	-3.2, 6.2	34.8, 102.7	55.3, 97.2	-19.7, 34.7
	Q1, Q3		70.0, 85.0	65.0, 87.0	-5.0, 5.0	52.5, 85.0	67.5, 85.0	-5.0, 20.0
	Min, Max		25.0, 100.0	25.0, 100.0	-10.0, 30.0	40.0, 85.0	65.0, 95.0	-10.0, 30.0
	Mean Diff (95% CI) [a]				1.5 (-3.2, 6.2)			7.5 (-19.7, 34.7)
	P-value [a]				0.513			0.444
	Mean Diff (95% CI) [b]				-6.0 (-18.7, 6.7)			
	P-value [b]				0.335			
	Effect Size (95% CI) [c]				-0.30 (-0.52, -0.09)			
	C21D1	N		17	18	17	4	4
Mean			71.2	73.2	0.4	68.8	72.5	3.8
SD			19.81	18.24	10.24	21.36	16.58	13.77
Median			75.0	75.0	0.0	75.0	67.5	2.5
95% CI			61.0, 81.4	64.1, 82.2	-4.9, 5.7	34.8, 102.7	46.1, 98.9	-18.2, 25.7
Q1, Q3			70.0, 80.0	65.0, 87.0	-5.0, 5.0	52.5, 85.0	60.0, 85.0	-7.5, 15.0
Min, Max			25.0, 100.0	25.0, 100.0	-15.0, 20.0	40.0, 85.0	60.0, 95.0	-10.0, 20.0
Mean Diff (95% CI) [a]					0.4 (-4.9, 5.7)			3.8 (-18.2, 25.7)
P-value [a]					0.870			0.624
Mean Diff (95% CI) [b]					-3.3 (-16.0, 9.3)			
P-value [b]					0.587			
Effect Size (95% CI) [c]					-0.17 (-0.38, 0.05)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C22D1	N		14	15	14	3	3	3
	Mean		72.1	73.4	-0.6	70.0	75.7	5.7
	SD		19.68	19.43	15.17	25.98	17.79	16.92
	Median		75.0	75.0	1.0	85.0	72.0	10.0
	95% CI		60.8, 83.5	62.6, 84.2	-9.4, 8.1	5.5, 134.5	31.5, 119.8	-36.4, 47.7
	Q1, Q3		70.0, 85.0	65.0, 92.0	-10.0, 5.0	40.0, 85.0	60.0, 95.0	-13.0, 20.0
	Min, Max		25.0, 100.0	40.0, 100.0	-40.0, 22.0	40.0, 85.0	60.0, 95.0	-13.0, 20.0
	Mean Diff (95% CI) [a]				-0.6 (-9.4, 8.1)			5.7 (-36.4, 47.7)
	P-value [a]				0.876			0.621
	Mean Diff (95% CI) [b]				-6.3 (-27.2, 14.6)			
	P-value [b]				0.530			
	Effect Size (95% CI) [c]				-0.32 (-0.53, -0.10)			
	C23D1	N		10	11	10	3	3
Mean			69.0	72.0	0.2	70.0	76.7	6.7
SD			21.83	19.72	10.45	25.98	17.56	15.28
Median			72.5	70.0	-2.5	85.0	75.0	10.0
95% CI			53.4, 84.6	58.7, 85.3	-7.3, 7.7	5.5, 134.5	33.0, 120.3	-31.3, 44.6
Q1, Q3			70.0, 75.0	65.0, 90.0	-10.0, 5.0	40.0, 85.0	60.0, 95.0	-10.0, 20.0
Min, Max			25.0, 100.0	35.0, 100.0	-10.0, 22.0	40.0, 85.0	60.0, 95.0	-10.0, 20.0
Mean Diff (95% CI) [a]					0.2 (-7.3, 7.7)			6.7 (-31.3, 44.6)
P-value [a]					0.953			0.529
Mean Diff (95% CI) [b]					-6.5 (-23.1, 10.2)			
P-value [b]					0.410			
Effect Size (95% CI) [c]					-0.33 (-0.54, -0.11)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C24D1	N	9	10	9	2	2	2
		Mean	70.6	74.0	0.6	62.5	77.5	15.0
		SD	18.45	18.53	11.58	31.82	24.75	7.07
		Median	75.0	72.5	0.0	62.5	77.5	15.0
		95% CI	56.4, 84.7	60.7, 87.3	-8.3, 9.5	-223.4, 348.4	-144.9, 299.9	-48.5, 78.5
		Q1, Q3	70.0, 75.0	60.0, 90.0	-10.0, 5.0	40.0, 85.0	60.0, 95.0	10.0, 20.0
		Min, Max	25.0, 90.0	40.0, 100.0	-15.0, 20.0	40.0, 85.0	60.0, 95.0	10.0, 20.0
		Mean Diff (95% CI) [a]			0.6 (-8.3, 9.5)			15.0 (-48.5, 78.5)
		P-value [a]			0.889			0.205
		Mean Diff (95% CI) [b]			-14.4 (-34.2, 5.3)			
		P-value [b]			0.132			
		Effect Size (95% CI) [c]			-0.73 (-0.95, -0.51)			
	C25D1	N	8	9	8	0	0	0
		Mean	68.8	71.3	-1.0	NE	NE	NE
		SD	18.85	20.30	9.68	NE	NE	NE
		Median	72.5	70.0	0.0	NE	NE	NE
		95% CI	53.0, 84.5	55.7, 86.9	-9.1, 7.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 75.0	65.0, 87.0	-7.5, 2.5	NE, NE	NE, NE	NE, NE
		Min, Max	25.0, 90.0	30.0, 100.0	-15.0, 17.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			-1.0 (-9.1, 7.1)			NE (NE, NE)
		P-value [a]			0.779			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C26D1	N	7	8	7	1	1	1
		Mean	76.4	79.6	0.3	85.0	95.0	10.0
		SD	8.02	17.39	13.74	NE	NE	NE
		Median	75.0	82.5	0.0	85.0	95.0	10.0
		95% CI	69.0, 83.8	65.1, 94.2	-12.4, 13.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 85.0	67.5, 93.5	-10.0, 10.0	85.0, 85.0	95.0, 95.0	10.0, 10.0
		Min, Max	70.0, 90.0	50.0, 100.0	-20.0, 22.0	85.0, 85.0	95.0, 95.0	10.0, 10.0
		Mean Diff (95% CI) [a]			0.3 (-12.4, 13.0)			10.0 (NE, NE)
		P-value [a]			0.958			NE
		Mean Diff (95% CI) [b]			-9.7 (-45.7, 26.2)			
		P-value [b]			0.533			
		Effect Size (95% CI) [c]			-0.49 (-0.71, -0.27)			
	C27D1	N	7	8	7	1	1	1
		Mean	76.4	81.9	2.9	85.0	95.0	10.0
		SD	8.02	14.87	11.13	NE	NE	NE
		Median	75.0	82.5	5.0	85.0	95.0	10.0
		95% CI	69.0, 83.8	69.4, 94.3	-7.4, 13.1	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 85.0	70.0, 95.0	-5.0, 10.0	85.0, 85.0	95.0, 95.0	10.0, 10.0
		Min, Max	70.0, 90.0	60.0, 100.0	-15.0, 20.0	85.0, 85.0	95.0, 95.0	10.0, 10.0
		Mean Diff (95% CI) [a]			2.9 (-7.4, 13.1)			10.0 (NE, NE)
		P-value [a]			0.522			NE
		Mean Diff (95% CI) [b]			-7.1 (-36.2, 22.0)			
		P-value [b]			0.570			
		Effect Size (95% CI) [c]			-0.36 (-0.58, -0.14)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C28D1	N	6	6	6	1	1	1
		Mean	75.0	74.5	-0.5	85.0	95.0	10.0
		SD	7.75	11.55	10.37	NE	NE	NE
		Median	72.5	70.0	0.0	85.0	95.0	10.0
		95% CI	66.9, 83.1	62.4, 86.6	-11.4, 10.4	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 75.0	70.0, 87.0	-5.0, 0.0	85.0, 85.0	95.0, 95.0	10.0, 10.0
		Min, Max	70.0, 90.0	60.0, 90.0	-15.0, 17.0	85.0, 85.0	95.0, 95.0	10.0, 10.0
		Mean Diff (95% CI) [a]			-0.5 (-11.4, 10.4)			10.0 (NE, NE)
		P-value [a]			0.911			NE
		Mean Diff (95% CI) [b]			-10.5 (-39.3, 18.3)			
		P-value [b]			0.392			
		Effect Size (95% CI) [c]			-0.53 (-0.75, -0.31)			
	C29D1	N	4	4	4	1	1	1
		Mean	71.3	71.3	0.0	85.0	65.0	-20.0
		SD	2.50	16.52	18.71	NE	NE	NE
		Median	70.0	72.5	2.5	85.0	65.0	-20.0
		95% CI	67.3, 75.2	45.0, 97.5	-29.8, 29.8	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 72.5	60.0, 82.5	-12.5, 12.5	85.0, 85.0	65.0, 65.0	-20.0, -20.0
		Min, Max	70.0, 75.0	50.0, 90.0	-25.0, 20.0	85.0, 85.0	65.0, 65.0	-20.0, -20.0
		Mean Diff (95% CI) [a]			0.0 (-29.8, 29.8)			-20.0 (NE, NE)
		P-value [a]			1.000			NE
		Mean Diff (95% CI) [b]			20.0 (-46.6, 86.6)			
		P-value [b]			0.410			
		Effect Size (95% CI) [c]			1.01 (0.78, 1.23)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C30D1	N		4	4	4	1	1	1	
	Mean		75.0	76.3	1.3	85.0	40.0	-45.0	
	SD		7.07	12.50	11.09	NE	NE	NE	
	Median		72.5	77.5	5.0	85.0	40.0	-45.0	
	95% CI		63.7, 86.3	56.4, 96.1	-16.4, 18.9	NE, NE	NE, NE	NE, NE	
	Q1, Q3		70.0, 80.0	67.5, 85.0	-5.0, 7.5	85.0, 85.0	40.0, 40.0	-45.0, -45.0	
	Min, Max		70.0, 85.0	60.0, 90.0	-15.0, 10.0	85.0, 85.0	40.0, 40.0	-45.0, -45.0	
	Mean Diff (95% CI) [a]				1.3 (-16.4, 18.9)			-45.0 (NE, NE)	
	P-value [a]				0.836			NE	
	Mean Diff (95% CI) [b]				46.3 (6.8, 85.7)				
	P-value [b]				0.034				
	Effect Size (95% CI) [c]				2.33 (2.05, 2.61)				
	C31D1	N		2	2	2	1	1	1
		Mean		70.0	76.0	6.0	85.0	65.0	-20.0
SD			0.00	8.49	8.49	NE	NE	NE	
Median			70.0	76.0	6.0	85.0	65.0	-20.0	
95% CI			70.0, 70.0	-0.2, 152.2	-70.2, 82.2	NE, NE	NE, NE	NE, NE	
Q1, Q3			70.0, 70.0	70.0, 82.0	0.0, 12.0	85.0, 85.0	65.0, 65.0	-20.0, -20.0	
Min, Max			70.0, 70.0	70.0, 82.0	0.0, 12.0	85.0, 85.0	65.0, 65.0	-20.0, -20.0	
Mean Diff (95% CI) [a]					6.0 (-70.2, 82.2)			-20.0 (NE, NE)	
P-value [a]					0.500			NE	
Mean Diff (95% CI) [b]					26.0 (-106.0, 158.0)				
P-value [b]					0.242				
Effect Size (95% CI) [c]					1.31 (1.07, 1.55)				

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C32D1	N	2	2	2	1	1	1
		Mean	70.0	83.5	13.5	85.0	75.0	-10.0
		SD	0.00	12.02	12.02	NE	NE	NE
		Median	70.0	83.5	13.5	85.0	75.0	-10.0
		95% CI	70.0, 70.0	-24.5, 191.5	-94.5, 121.5	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 70.0	75.0, 92.0	5.0, 22.0	85.0, 85.0	75.0, 75.0	-10.0, -10.0
		Min, Max	70.0, 70.0	75.0, 92.0	5.0, 22.0	85.0, 85.0	75.0, 75.0	-10.0, -10.0
		Mean Diff (95% CI) [a]			13.5 (-94.5, 121.5)			-10.0 (NE, NE)
		P-value [a]			0.358			NE
		Mean Diff (95% CI) [b]			23.5 (-163.6, 210.6)			
		P-value [b]			0.356			
		Effect Size (95% CI) [c]			1.18 (0.95, 1.42)			
	C33D1	N	2	2	2	1	1	1
		Mean	70.0	77.5	7.5	85.0	70.0	-15.0
		SD	0.00	10.61	10.61	NE	NE	NE
		Median	70.0	77.5	7.5	85.0	70.0	-15.0
		95% CI	70.0, 70.0	-17.8, 172.8	-87.8, 102.8	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 70.0	70.0, 85.0	0.0, 15.0	85.0, 85.0	70.0, 70.0	-15.0, -15.0
		Min, Max	70.0, 70.0	70.0, 85.0	0.0, 15.0	85.0, 85.0	70.0, 70.0	-15.0, -15.0
		Mean Diff (95% CI) [a]			7.5 (-87.8, 102.8)			-15.0 (NE, NE)
		P-value [a]			0.500			NE
		Mean Diff (95% CI) [b]			22.5 (-142.6, 187.6)			
		P-value [b]			0.333			
		Effect Size (95% CI) [c]			1.13 (0.90, 1.36)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C34D1	N	2	2	2	0	0	0
		Mean	70.0	77.5	7.5	NE	NE	NE
		SD	0.00	17.68	17.68	NE	NE	NE
		Median	70.0	77.5	7.5	NE	NE	NE
		95% CI	70.0, 70.0	-81.3, 236.3	-151.3, 166.3	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 70.0	65.0, 90.0	-5.0, 20.0	NE, NE	NE, NE	NE, NE
		Min, Max	70.0, 70.0	65.0, 90.0	-5.0, 20.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			7.5 (-151.3, 166.3)			NE (NE, NE)
		P-value [a]			0.656			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C35D1	N	2	2	2	0	0	0
		Mean	70.0	78.0	8.0	NE	NE	NE
		SD	0.00	18.38	18.38	NE	NE	NE
		Median	70.0	78.0	8.0	NE	NE	NE
		95% CI	70.0, 70.0	-87.2, 243.2	-157.2, 173.2	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 70.0	65.0, 91.0	-5.0, 21.0	NE, NE	NE, NE	NE, NE
		Min, Max	70.0, 70.0	65.0, 91.0	-5.0, 21.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			8.0 (-157.2, 173.2)			NE (NE, NE)
		P-value [a]			0.649			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
C36D1	N		3	3	3	0	0	0
	Mean		75.0	84.3	9.3	NE	NE	NE
	SD		8.66	21.36	17.21	NE	NE	NE
	Median		70.0	93.0	15.0	NE	NE	NE
	95% CI		53.5, 96.5	31.3, 137.4	-33.4, 52.1	NE, NE	NE, NE	NE, NE
	Q1, Q3		70.0, 85.0	60.0, 100.0	-10.0, 23.0	NE, NE	NE, NE	NE, NE
	Min, Max		70.0, 85.0	60.0, 100.0	-10.0, 23.0	NE, NE	NE, NE	NE, NE
	Mean Diff (95% CI) [a]				9.3 (-33.4, 52.1)			NE (NE, NE)
	P-value [a]				0.447			NE
	Mean Diff (95% CI) [b]				NE (NE, NE)			
	P-value [b]				NE			
	Effect Size (95% CI) [c]				NE (NE, NE)			
	C37D1	N		3	3	3	0	0
Mean			75.0	86.0	11.0	NE	NE	NE
SD			8.66	13.89	11.53	NE	NE	NE
Median			70.0	93.0	10.0	NE	NE	NE
95% CI			53.5, 96.5	51.5, 120.5	-17.6, 39.6	NE, NE	NE, NE	NE, NE
Q1, Q3			70.0, 85.0	70.0, 95.0	0.0, 23.0	NE, NE	NE, NE	NE, NE
Min, Max			70.0, 85.0	70.0, 95.0	0.0, 23.0	NE, NE	NE, NE	NE, NE
Mean Diff (95% CI) [a]					11.0 (-17.6, 39.6)			NE (NE, NE)
P-value [a]					0.240			NE
Mean Diff (95% CI) [b]					NE (NE, NE)			
P-value [b]					NE			
Effect Size (95% CI) [c]					NE (NE, NE)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)			
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline	
C38D1	N		2	2	2	0	0	0	
	Mean		77.5	91.0	13.5	NE	NE	NE	
	SD		10.61	5.66	4.95	NE	NE	NE	
	Median		77.5	91.0	13.5	NE	NE	NE	
	95% CI		-17.8, 172.8	40.2, 141.8	-31.0, 58.0	NE, NE	NE, NE	NE, NE	
	Q1, Q3		70.0, 85.0	87.0, 95.0	10.0, 17.0	NE, NE	NE, NE	NE, NE	
	Min, Max		70.0, 85.0	87.0, 95.0	10.0, 17.0	NE, NE	NE, NE	NE, NE	
	Mean Diff (95% CI) [a]				13.5 (-31.0, 58.0)			NE (NE, NE)	
	P-value [a]				0.161			NE	
	Mean Diff (95% CI) [b]				NE (NE, NE)				
	P-value [b]				NE				
	Effect Size (95% CI) [c]				NE (NE, NE)				
	C39D1	N		2	2	2	0	0	0
		Mean		77.5	95.0	17.5	NE	NE	NE
SD			10.61	0.00	10.61	NE	NE	NE	
Median			77.5	95.0	17.5	NE	NE	NE	
95% CI			-17.8, 172.8	95.0, 95.0	-77.8, 112.8	NE, NE	NE, NE	NE, NE	
Q1, Q3			70.0, 85.0	95.0, 95.0	10.0, 25.0	NE, NE	NE, NE	NE, NE	
Min, Max			70.0, 85.0	95.0, 95.0	10.0, 25.0	NE, NE	NE, NE	NE, NE	
Mean Diff (95% CI) [a]					17.5 (-77.8, 112.8)			NE (NE, NE)	
P-value [a]					0.258			NE	
Mean Diff (95% CI) [b]					NE (NE, NE)				
P-value [b]					NE				
Effect Size (95% CI) [c]					NE (NE, NE)				

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

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[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C40D1	N	2	2	2	0	0	0
		Mean	77.5	91.0	13.5	NE	NE	NE
		SD	10.61	5.66	4.95	NE	NE	NE
		Median	77.5	91.0	13.5	NE	NE	NE
		95% CI	-17.8, 172.8	40.2, 141.8	-31.0, 58.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 85.0	87.0, 95.0	10.0, 17.0	NE, NE	NE, NE	NE, NE
		Min, Max	70.0, 85.0	87.0, 95.0	10.0, 17.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			13.5 (-31.0, 58.0)			NE (NE, NE)
		P-value [a]			0.161			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C41D1	N	2	2	2	0	0	0
		Mean	77.5	87.5	10.0	NE	NE	NE
		SD	10.61	10.61	0.00	NE	NE	NE
		Median	77.5	87.5	10.0	NE	NE	NE
		95% CI	-17.8, 172.8	-7.8, 182.8	10.0, 10.0	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 85.0	80.0, 95.0	10.0, 10.0	NE, NE	NE, NE	NE, NE
		Min, Max	70.0, 85.0	80.0, 95.0	10.0, 10.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			10.0 (10.0, 10.0)			NE (NE, NE)
		P-value [a]			<.001			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	C42D1	N	1	1	1	0	0	0
		Mean	70.0	88.0	18.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	70.0	88.0	18.0	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 70.0	88.0, 88.0	18.0, 18.0	NE, NE	NE, NE	NE, NE
		Min, Max	70.0, 70.0	88.0, 88.0	18.0, 18.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			18.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			
	C43D1	N	1	1	1	0	0	0
		Mean	70.0	92.0	22.0	NE	NE	NE
		SD	NE	NE	NE	NE	NE	NE
		Median	70.0	92.0	22.0	NE	NE	NE
		95% CI	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE	NE, NE
		Q1, Q3	70.0, 70.0	92.0, 92.0	22.0, 22.0	NE, NE	NE, NE	NE, NE
		Min, Max	70.0, 70.0	92.0, 92.0	22.0, 22.0	NE, NE	NE, NE	NE, NE
		Mean Diff (95% CI) [a]			22.0 (NE, NE)			NE (NE, NE)
		P-value [a]			NE			NE
		Mean Diff (95% CI) [b]			NE (NE, NE)			
		P-value [b]			NE			
		Effect Size (95% CI) [c]			NE (NE, NE)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.3.2  
EQ-5D VAS and Change from Baseline by Visit  
EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Domain	Visit	Statistics	SG (N=175)			TPC (N=164)		
			Baseline	Post-Baseline	Change from Baseline	Baseline	Post-Baseline	Change from Baseline
	EOT	N	123	126	123	125	125	125
		Mean	70.6	64.9	-5.4	70.0	63.3	-6.7
		SD	19.14	22.34	20.15	19.37	21.99	21.17
		Median	75.0	70.0	-5.0	75.0	65.0	-5.0
		95% CI	67.1, 74.0	60.9, 68.8	-9.0, -1.8	66.6, 73.4	59.4, 67.2	-10.4, -2.9
		Q1, Q3	60.0, 80.0	50.0, 85.0	-15.0, 5.0	60.0, 85.0	50.0, 80.0	-15.0, 5.0
		Min, Max	6.0, 100.0	2.0, 100.0	-70.0, 50.0	20.0, 100.0	0.0, 98.0	-80.0, 50.0
		Mean Diff (95% CI) [a]			-5.4 (-9.0, -1.8)			-6.7 (-10.4, -2.9)
		P-value [a]			0.003			0.001
		Mean Diff (95% CI) [b]			1.2 (-3.9, 6.4)			
		P-value [b]			0.635			
		Effect Size (95% CI) [c]			0.06 (-0.15, 0.28)			
	Long Term Follow-up	N	14	14	14	9	9	9
		Mean	76.8	73.1	-3.7	76.7	68.7	-8.0
		SD	15.27	21.29	10.77	15.61	26.24	13.27
		Median	75.0	78.5	-2.5	80.0	80.0	-5.0
		95% CI	68.0, 85.6	60.8, 85.4	-9.9, 2.5	64.7, 88.7	48.5, 88.8	-18.2, 2.2
		Q1, Q3	70.0, 85.0	55.0, 90.0	-10.0, 5.0	70.0, 85.0	60.0, 85.0	-10.0, 0.0
		Min, Max	45.0, 100.0	30.0, 100.0	-20.0, 11.0	50.0, 100.0	15.0, 95.0	-35.0, 10.0
		Mean Diff (95% CI) [a]			-3.7 (-9.9, 2.5)			-8.0 (-18.2, 2.2)
		P-value [a]			0.219			0.108
		Mean Diff (95% CI) [b]			4.3 (-6.2, 14.8)			
		P-value [b]			0.404			
		Effect Size (95% CI) [c]			0.22 (0.00, 0.43)			

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. CI = Confidence Interval; Diff = Difference; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; NE = Not Estimable; SD = standard deviation; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] The mean difference, 95% CI and p-value are calculated based on a paired, 2-sided t-test for the within-group change from baseline.

[b] The mean difference, 95% CI and p-value are calculated based on a pooled 2-sample, 2-sided t-test for the difference in mean change from baseline between SG and TPC.

[c] Effect sizes and CIs of difference in mean change between SG and TPC are estimated using the Hedges' g.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Decreased Appetite Severity	Baseline		N=177	N=179	N=356
		None	96 (54.2%)	95 (53.1%)	191 (53.7%)
		Mild	42 (23.7%)	45 (25.1%)	87 (24.4%)
		Moderate	23 (13.0%)	25 (14.0%)	48 (13.5%)
		Severe	12 (6.8%)	13 (7.3%)	25 (7.0%)
		Very Severe	4 (2.3%)	1 (0.6%)	5 (1.4%)
	C2D1		N=163	N=150	N=313
		None	72 (44.2%)	65 (43.3%)	137 (43.8%)
		Mild	43 (26.4%)	32 (21.3%)	75 (24.0%)
		Moderate	30 (18.4%)	39 (26.0%)	69 (22.0%)
		Severe	14 (8.6%)	13 (8.7%)	27 (8.6%)
		Very Severe	4 (2.5%)	1 (0.7%)	5 (1.6%)
	C3D1		N=132	N=106	N=238
		None	77 (58.3%)	55 (51.9%)	132 (55.5%)
		Mild	25 (18.9%)	25 (23.6%)	50 (21.0%)
		Moderate	21 (15.9%)	17 (16.0%)	38 (16.0%)
		Severe	7 (5.3%)	6 (5.7%)	13 (5.5%)
		Very Severe	2 (1.5%)	3 (2.8%)	5 (2.1%)
	C4D1		N=118	N=97	N=215
		None	71 (60.2%)	50 (51.5%)	121 (56.3%)
		Mild	27 (22.9%)	23 (23.7%)	50 (23.3%)
		Moderate	16 (13.6%)	20 (20.6%)	36 (16.7%)
		Severe	2 (1.7%)	4 (4.1%)	6 (2.8%)
		Very Severe	2 (1.7%)	0 (0.0%)	2 (0.9%)
	C5D1		N=106	N=83	N=189
		None	65 (61.3%)	50 (60.2%)	115 (60.8%)
		Mild	29 (27.4%)	13 (15.7%)	42 (22.2%)
Moderate		10 (9.4%)	15 (18.1%)	25 (13.2%)	
Severe		1 (0.9%)	5 (6.0%)	6 (3.2%)	
Very Severe		1 (0.9%)	0 (0.0%)	1 (0.5%)	
C6D1		N=102	N=74	N=176	
	None	65 (63.7%)	40 (54.1%)	105 (59.7%)	
	Mild	17 (16.7%)	19 (25.7%)	36 (20.5%)	
	Moderate	17 (16.7%)	10 (13.5%)	27 (15.3%)	
	Severe	2 (2.0%)	4 (5.4%)	6 (3.4%)	
	Very Severe	1 (1.0%)	1 (1.4%)	2 (1.1%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C7D1			N=85	N=56	N=141
		None	55 (64.7%)	37 (66.1%)	92 (65.2%)
		Mild	20 (23.5%)	16 (28.6%)	36 (25.5%)
		Moderate	9 (10.6%)	3 (5.4%)	12 (8.5%)
		Severe	1 (1.2%)	0 (0.0%)	1 (0.7%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C8D1			N=80	N=50	N=130
		None	53 (66.3%)	35 (70.0%)	88 (67.7%)
		Mild	19 (23.8%)	10 (20.0%)	29 (22.3%)
		Moderate	6 (7.5%)	4 (8.0%)	10 (7.7%)
		Severe	2 (2.5%)	0 (0.0%)	2 (1.5%)
		Very Severe	0 (0.0%)	1 (2.0%)	1 (0.8%)
C9D1			N=64	N=42	N=106
		None	42 (65.6%)	29 (69.0%)	71 (67.0%)
		Mild	14 (21.9%)	8 (19.0%)	22 (20.8%)
		Moderate	4 (6.3%)	4 (9.5%)	8 (7.5%)
		Severe	3 (4.7%)	1 (2.4%)	4 (3.8%)
		Very Severe	1 (1.6%)	0 (0.0%)	1 (0.9%)
C10D1			N=57	N=31	N=88
		None	41 (71.9%)	17 (54.8%)	58 (65.9%)
		Mild	11 (19.3%)	7 (22.6%)	18 (20.5%)
		Moderate	4 (7.0%)	6 (19.4%)	10 (11.4%)
		Severe	1 (1.8%)	1 (3.2%)	2 (2.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C11D1			N=49	N=24	N=73
		None	34 (69.4%)	18 (75.0%)	52 (71.2%)
		Mild	12 (24.5%)	4 (16.7%)	16 (21.9%)
		Moderate	2 (4.1%)	1 (4.2%)	3 (4.1%)
		Severe	1 (2.0%)	1 (4.2%)	2 (2.7%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C12D1			N=43	N=20	N=63
		None	33 (76.7%)	15 (75.0%)	48 (76.2%)
		Mild	5 (11.6%)	3 (15.0%)	8 (12.7%)
		Moderate	4 (9.3%)	2 (10.0%)	6 (9.5%)
		Severe	1 (2.3%)	0 (0.0%)	1 (1.6%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C13D1		N=36	N=15	N=51
		None	24 (66.7%)	9 (60.0%)	33 (64.7%)
		Mild	7 (19.4%)	6 (40.0%)	13 (25.5%)
		Moderate	4 (11.1%)	0 (0.0%)	4 (7.8%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (2.8%)	0 (0.0%)	1 (2.0%)
	C14D1		N=35	N=13	N=48
		None	25 (71.4%)	7 (53.8%)	32 (66.7%)
		Mild	9 (25.7%)	4 (30.8%)	13 (27.1%)
		Moderate	1 (2.9%)	2 (15.4%)	3 (6.3%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=30	N=14	N=44
		None	22 (73.3%)	8 (57.1%)	30 (68.2%)
		Mild	5 (16.7%)	6 (42.9%)	11 (25.0%)
		Moderate	3 (10.0%)	0 (0.0%)	3 (6.8%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C16D1		N=30	N=11	N=41
		None	21 (70.0%)	6 (54.5%)	27 (65.9%)
		Mild	6 (20.0%)	5 (45.5%)	11 (26.8%)
		Moderate	2 (6.7%)	0 (0.0%)	2 (4.9%)
		Severe	1 (3.3%)	0 (0.0%)	1 (2.4%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=28	N=7	N=35
		None	21 (75.0%)	3 (42.9%)	24 (68.6%)
		Mild	3 (10.7%)	4 (57.1%)	7 (20.0%)
		Moderate	4 (14.3%)	0 (0.0%)	4 (11.4%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		None	18 (78.3%)	3 (42.9%)	21 (70.0%)
		Mild	2 (8.7%)	4 (57.1%)	6 (20.0%)
		Moderate	3 (13.0%)	0 (0.0%)	3 (10.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C19D1		N=21	N=6	N=27
		None	17 (81.0%)	3 (50.0%)	20 (74.1%)
		Mild	4 (19.0%)	3 (50.0%)	7 (25.9%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=20	N=4	N=24
		None	16 (80.0%)	4 (100.0%)	20 (83.3%)
		Mild	3 (15.0%)	0 (0.0%)	3 (12.5%)
		Moderate	1 (5.0%)	0 (0.0%)	1 (4.2%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		None	14 (77.8%)	3 (75.0%)	17 (77.3%)
		Mild	3 (16.7%)	1 (25.0%)	4 (18.2%)
		Moderate	1 (5.6%)	0 (0.0%)	1 (4.5%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C22D1		N=15	N=3	N=18
		None	13 (86.7%)	2 (66.7%)	15 (83.3%)
		Mild	1 (6.7%)	1 (33.3%)	2 (11.1%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	1 (6.7%)	0 (0.0%)	1 (5.6%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		None	7 (70.0%)	3 (100.0%)	10 (76.9%)
		Mild	2 (20.0%)	0 (0.0%)	2 (15.4%)
		Moderate	1 (10.0%)	0 (0.0%)	1 (7.7%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		None	8 (80.0%)	1 (50.0%)	9 (75.0%)
		Mild	1 (10.0%)	1 (50.0%)	2 (16.7%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (10.0%)	0 (0.0%)	1 (8.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C25D1		N=9	N=0	N=9
		None	7 (77.8%)	0 (NE)	7 (77.8%)
		Mild	1 (11.1%)	0 (NE)	1 (11.1%)
		Moderate	1 (11.1%)	0 (NE)	1 (11.1%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		None	6 (75.0%)	1 (100.0%)	7 (77.8%)
		Mild	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		None	7 (87.5%)	1 (100.0%)	8 (88.9%)
		Mild	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C28D1		N=7	N=1	N=8
		None	7 (100.0%)	1 (100.0%)	8 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		None	2 (50.0%)	1 (100.0%)	3 (60.0%)
		Mild	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Moderate	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		None	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C31D1		N=2	N=1	N=3
		None	2 (100.0%)	0 (0.0%)	2 (66.7%)
		Mild	0 (0.0%)	1 (100.0%)	1 (33.3%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		None	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Mild	1 (50.0%)	1 (100.0%)	2 (66.7%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		None	3 (100.0%)	0 (0.0%)	3 (75.0%)
		Mild	0 (0.0%)	1 (100.0%)	1 (25.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C34D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=3	N=0	N=3
		None	3 (100.0%)	0 (NE)	3 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
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 Safety Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C37D1			N=3	N=0	N=3
		None	3 (100.0%)	0 (NE)	3 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Decreased Appetite Interference	C43D1		N=1	N=0	N=1	
		None	1 (100.0%)	0 (NE)	1 (100.0%)	
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)	
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)	
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)	
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)	
	EOT			N=137	N=131	N=268
		None	67 (48.9%)	60 (45.8%)	127 (47.4%)	
		Mild	32 (23.4%)	27 (20.6%)	59 (22.0%)	
		Moderate	23 (16.8%)	34 (26.0%)	57 (21.3%)	
		Severe	11 (8.0%)	6 (4.6%)	17 (6.3%)	
		Very Severe	4 (2.9%)	4 (3.1%)	8 (3.0%)	
	Long Term Follow-up			N=15	N=9	N=24
		None	8 (53.3%)	4 (44.4%)	12 (50.0%)	
		Mild	2 (13.3%)	2 (22.2%)	4 (16.7%)	
		Moderate	4 (26.7%)	0 (0.0%)	4 (16.7%)	
		Severe	1 (6.7%)	3 (33.3%)	4 (16.7%)	
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)	
	Baseline			N=175	N=176	N=351
Not At All		124 (70.9%)	127 (72.2%)	251 (71.5%)		
A Little Bit		28 (16.0%)	29 (16.5%)	57 (16.2%)		
Somewhat		12 (6.9%)	13 (7.4%)	25 (7.1%)		
Quite A Bit		10 (5.7%)	6 (3.4%)	16 (4.6%)		
Very Much		1 (0.6%)	1 (0.6%)	2 (0.6%)		
C2D1			N=162	N=144	N=306	
	Not At All	108 (66.7%)	90 (62.5%)	198 (64.7%)		
	A Little Bit	21 (13.0%)	34 (23.6%)	55 (18.0%)		
	Somewhat	21 (13.0%)	15 (10.4%)	36 (11.8%)		
	Quite A Bit	10 (6.2%)	4 (2.8%)	14 (4.6%)		
	Very Much	2 (1.2%)	1 (0.7%)	3 (1.0%)		
C3D1			N=130	N=103	N=233	
	Not At All	97 (74.6%)	76 (73.8%)	173 (74.2%)		
	A Little Bit	18 (13.8%)	15 (14.6%)	33 (14.2%)		
	Somewhat	12 (9.2%)	9 (8.7%)	21 (9.0%)		
	Quite A Bit	3 (2.3%)	2 (1.9%)	5 (2.1%)		
	Very Much	0 (0.0%)	1 (1.0%)	1 (0.4%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C4D1		N=115	N=93	N=208
		Not At All	89 (77.4%)	63 (67.7%)	152 (73.1%)
		A Little Bit	17 (14.8%)	17 (18.3%)	34 (16.3%)
		Somewhat	5 (4.3%)	11 (11.8%)	16 (7.7%)
		Quite A Bit	3 (2.6%)	2 (2.2%)	5 (2.4%)
		Very Much	1 (0.9%)	0 (0.0%)	1 (0.5%)
	C5D1		N=103	N=78	N=181
		Not At All	79 (76.7%)	57 (73.1%)	136 (75.1%)
		A Little Bit	15 (14.6%)	13 (16.7%)	28 (15.5%)
		Somewhat	7 (6.8%)	7 (9.0%)	14 (7.7%)
		Quite A Bit	2 (1.9%)	1 (1.3%)	3 (1.7%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C6D1		N=97	N=69	N=166
		Not At All	69 (71.1%)	47 (68.1%)	116 (69.9%)
		A Little Bit	21 (21.6%)	11 (15.9%)	32 (19.3%)
		Somewhat	4 (4.1%)	9 (13.0%)	13 (7.8%)
		Quite A Bit	2 (2.1%)	2 (2.9%)	4 (2.4%)
		Very Much	1 (1.0%)	0 (0.0%)	1 (0.6%)
	C7D1		N=84	N=52	N=136
		Not At All	73 (86.9%)	42 (80.8%)	115 (84.6%)
		A Little Bit	6 (7.1%)	7 (13.5%)	13 (9.6%)
		Somewhat	5 (6.0%)	3 (5.8%)	8 (5.9%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C8D1		N=76	N=44	N=120
		Not At All	61 (80.3%)	37 (84.1%)	98 (81.7%)
		A Little Bit	9 (11.8%)	4 (9.1%)	13 (10.8%)
		Somewhat	3 (3.9%)	2 (4.5%)	5 (4.2%)
		Quite A Bit	3 (3.9%)	1 (2.3%)	4 (3.3%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C9D1		N=60	N=41	N=101
		Not At All	49 (81.7%)	33 (80.5%)	82 (81.2%)
		A Little Bit	7 (11.7%)	5 (12.2%)	12 (11.9%)
		Somewhat	1 (1.7%)	3 (7.3%)	4 (4.0%)
		Quite A Bit	1 (1.7%)	0 (0.0%)	1 (1.0%)
		Very Much	2 (3.3%)	0 (0.0%)	2 (2.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C10D1		N=54	N=29	N=83
		Not At All	45 (83.3%)	23 (79.3%)	68 (81.9%)
		A Little Bit	6 (11.1%)	1 (3.4%)	7 (8.4%)
		Somewhat	2 (3.7%)	5 (17.2%)	7 (8.4%)
		Quite A Bit	1 (1.9%)	0 (0.0%)	1 (1.2%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C11D1		N=47	N=24	N=71
		Not At All	39 (83.0%)	21 (87.5%)	60 (84.5%)
		A Little Bit	5 (10.6%)	1 (4.2%)	6 (8.5%)
		Somewhat	2 (4.3%)	1 (4.2%)	3 (4.2%)
		Quite A Bit	1 (2.1%)	1 (4.2%)	2 (2.8%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C12D1		N=41	N=20	N=61
		Not At All	34 (82.9%)	17 (85.0%)	51 (83.6%)
		A Little Bit	4 (9.8%)	2 (10.0%)	6 (9.8%)
		Somewhat	2 (4.9%)	1 (5.0%)	3 (4.9%)
		Quite A Bit	1 (2.4%)	0 (0.0%)	1 (1.6%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C13D1		N=31	N=15	N=46
		Not At All	23 (74.2%)	13 (86.7%)	36 (78.3%)
		A Little Bit	6 (19.4%)	2 (13.3%)	8 (17.4%)
		Somewhat	1 (3.2%)	0 (0.0%)	1 (2.2%)
		Quite A Bit	1 (3.2%)	0 (0.0%)	1 (2.2%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C14D1		N=34	N=13	N=47
		Not At All	28 (82.4%)	12 (92.3%)	40 (85.1%)
		A Little Bit	6 (17.6%)	1 (7.7%)	7 (14.9%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=29	N=13	N=42
		Not At All	24 (82.8%)	10 (76.9%)	34 (81.0%)
		A Little Bit	4 (13.8%)	3 (23.1%)	7 (16.7%)
		Somewhat	1 (3.4%)	0 (0.0%)	1 (2.4%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C16D1		N=28	N=11	N=39
		Not At All	24 (85.7%)	7 (63.6%)	31 (79.5%)
		A Little Bit	3 (10.7%)	4 (36.4%)	7 (17.9%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	1 (3.6%)	0 (0.0%)	1 (2.6%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=27	N=7	N=34
		Not At All	23 (85.2%)	5 (71.4%)	28 (82.4%)
		A Little Bit	2 (7.4%)	2 (28.6%)	4 (11.8%)
		Somewhat	1 (3.7%)	0 (0.0%)	1 (2.9%)
		Quite A Bit	1 (3.7%)	0 (0.0%)	1 (2.9%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		Not At All	20 (87.0%)	6 (85.7%)	26 (86.7%)
		A Little Bit	1 (4.3%)	0 (0.0%)	1 (3.3%)
		Somewhat	2 (8.7%)	1 (14.3%)	3 (10.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C19D1		N=19	N=5	N=24
		Not At All	17 (89.5%)	3 (60.0%)	20 (83.3%)
		A Little Bit	2 (10.5%)	2 (40.0%)	4 (16.7%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=19	N=4	N=23
		Not At All	16 (84.2%)	4 (100.0%)	20 (87.0%)
		A Little Bit	2 (10.5%)	0 (0.0%)	2 (8.7%)
		Somewhat	1 (5.3%)	0 (0.0%)	1 (4.3%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		Not At All	17 (94.4%)	3 (75.0%)	20 (90.9%)
		A Little Bit	0 (0.0%)	1 (25.0%)	1 (4.5%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	1 (5.6%)	0 (0.0%)	1 (4.5%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C22D1		N=14	N=3	N=17
		Not At All	13 (92.9%)	3 (100.0%)	16 (94.1%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	1 (7.1%)	0 (0.0%)	1 (5.9%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		Not At All	8 (80.0%)	3 (100.0%)	11 (84.6%)
		A Little Bit	1 (10.0%)	0 (0.0%)	1 (7.7%)
		Somewhat	1 (10.0%)	0 (0.0%)	1 (7.7%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		Not At All	7 (70.0%)	2 (100.0%)	9 (75.0%)
		A Little Bit	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	2 (20.0%)	0 (0.0%)	2 (16.7%)
	C25D1		N=8	N=0	N=8
		Not At All	7 (87.5%)	0 (NE)	7 (87.5%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	1 (12.5%)	0 (NE)	1 (12.5%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		Not At All	7 (87.5%)	1 (100.0%)	8 (88.9%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		Not At All	8 (100.0%)	1 (100.0%)	9 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C28D1		N=6	N=1	N=7
		Not At All	6 (100.0%)	1 (100.0%)	7 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=3	N=1	N=4
		Not At All	3 (100.0%)	1 (100.0%)	4 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		Not At All	4 (100.0%)	1 (100.0%)	5 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C31D1		N=1	N=1	N=2
		Not At All	1 (100.0%)	0 (0.0%)	1 (50.0%)
		A Little Bit	0 (0.0%)	1 (100.0%)	1 (50.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		Not At All	1 (50.0%)	0 (0.0%)	1 (33.3%)
		A Little Bit	1 (50.0%)	1 (100.0%)	2 (66.7%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		Not At All	3 (100.0%)	1 (100.0%)	4 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
 Distribution of Responses to PRO-CTCAE Items by Visit  
 Safety Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C34D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	1 (50.0%)	0 (NE)	1 (50.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C37D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C40D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C43D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	EOT		N=130	N=124	N=254
		Not At All	85 (65.4%)	78 (62.9%)	163 (64.2%)
		A Little Bit	22 (16.9%)	21 (16.9%)	43 (16.9%)
		Somewhat	11 (8.5%)	15 (12.1%)	26 (10.2%)
		Quite A Bit	11 (8.5%)	8 (6.5%)	19 (7.5%)
		Very Much	1 (0.8%)	2 (1.6%)	3 (1.2%)
	Long Term Follow-up		N=15	N=9	N=24
		Not At All	8 (53.3%)	6 (66.7%)	14 (58.3%)
		A Little Bit	7 (46.7%)	0 (0.0%)	7 (29.2%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	3 (33.3%)	3 (12.5%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Nausea Frequency	Baseline		N=177	N=180	N=357	
		Never	119 (67.2%)	114 (63.3%)	233 (65.3%)	
		Rarely	28 (15.8%)	34 (18.9%)	62 (17.4%)	
		Occasionally	20 (11.3%)	20 (11.1%)	40 (11.2%)	
		Frequently	10 (5.6%)	10 (5.6%)	20 (5.6%)	
	Almost Constantly	0 (0.0%)	2 (1.1%)	2 (0.6%)		
	C2D1			N=163	N=150	N=313
		Never	78 (47.9%)	84 (56.0%)	162 (51.8%)	
		Rarely	40 (24.5%)	29 (19.3%)	69 (22.0%)	
		Occasionally	35 (21.5%)	24 (16.0%)	59 (18.8%)	
		Frequently	10 (6.1%)	11 (7.3%)	21 (6.7%)	
	Almost Constantly	0 (0.0%)	2 (1.3%)	2 (0.6%)		
	C3D1			N=131	N=105	N=236
		Never	74 (56.5%)	69 (65.7%)	143 (60.6%)	
		Rarely	30 (22.9%)	15 (14.3%)	45 (19.1%)	
		Occasionally	20 (15.3%)	15 (14.3%)	35 (14.8%)	
		Frequently	6 (4.6%)	5 (4.8%)	11 (4.7%)	
	Almost Constantly	1 (0.8%)	1 (1.0%)	2 (0.8%)		
	C4D1			N=119	N=97	N=216
		Never	69 (58.0%)	71 (73.2%)	140 (64.8%)	
Rarely		29 (24.4%)	15 (15.5%)	44 (20.4%)		
Occasionally		17 (14.3%)	9 (9.3%)	26 (12.0%)		
Frequently		3 (2.5%)	1 (1.0%)	4 (1.9%)		
Almost Constantly	1 (0.8%)	1 (1.0%)	2 (0.9%)			
C5D1			N=105	N=83	N=188	
	Never	66 (62.9%)	58 (69.9%)	124 (66.0%)		
	Rarely	21 (20.0%)	12 (14.5%)	33 (17.6%)		
	Occasionally	17 (16.2%)	13 (15.7%)	30 (16.0%)		
	Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)		
Almost Constantly	1 (1.0%)	0 (0.0%)	1 (0.5%)			
C6D1			N=102	N=74	N=176	
	Never	64 (62.7%)	51 (68.9%)	115 (65.3%)		
	Rarely	22 (21.6%)	11 (14.9%)	33 (18.8%)		
	Occasionally	14 (13.7%)	8 (10.8%)	22 (12.5%)		
	Frequently	2 (2.0%)	4 (5.4%)	6 (3.4%)		
Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)			

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C7D1			N=85	N=56	N=141
		Never	52 (61.2%)	44 (78.6%)	96 (68.1%)
		Rarely	24 (28.2%)	7 (12.5%)	31 (22.0%)
		Occasionally	8 (9.4%)	4 (7.1%)	12 (8.5%)
		Frequently	0 (0.0%)	1 (1.8%)	1 (0.7%)
		Almost Constantly	1 (1.2%)	0 (0.0%)	1 (0.7%)
C8D1			N=80	N=51	N=131
		Never	51 (63.8%)	40 (78.4%)	91 (69.5%)
		Rarely	22 (27.5%)	7 (13.7%)	29 (22.1%)
		Occasionally	5 (6.3%)	3 (5.9%)	8 (6.1%)
		Frequently	2 (2.5%)	1 (2.0%)	3 (2.3%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C9D1			N=64	N=42	N=106
		Never	42 (65.6%)	36 (85.7%)	78 (73.6%)
		Rarely	15 (23.4%)	4 (9.5%)	19 (17.9%)
		Occasionally	5 (7.8%)	1 (2.4%)	6 (5.7%)
		Frequently	1 (1.6%)	1 (2.4%)	2 (1.9%)
		Almost Constantly	1 (1.6%)	0 (0.0%)	1 (0.9%)
C10D1			N=57	N=31	N=88
		Never	39 (68.4%)	24 (77.4%)	63 (71.6%)
		Rarely	13 (22.8%)	4 (12.9%)	17 (19.3%)
		Occasionally	2 (3.5%)	3 (9.7%)	5 (5.7%)
		Frequently	3 (5.3%)	0 (0.0%)	3 (3.4%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C11D1			N=49	N=24	N=73
		Never	33 (67.3%)	18 (75.0%)	51 (69.9%)
		Rarely	10 (20.4%)	5 (20.8%)	15 (20.5%)
		Occasionally	4 (8.2%)	1 (4.2%)	5 (6.8%)
		Frequently	2 (4.1%)	0 (0.0%)	2 (2.7%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C12D1			N=43	N=20	N=63
		Never	26 (60.5%)	17 (85.0%)	43 (68.3%)
		Rarely	9 (20.9%)	2 (10.0%)	11 (17.5%)
		Occasionally	7 (16.3%)	1 (5.0%)	8 (12.7%)
		Frequently	1 (2.3%)	0 (0.0%)	1 (1.6%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C13D1		N=36	N=15	N=51
		Never	22 (61.1%)	12 (80.0%)	34 (66.7%)
		Rarely	6 (16.7%)	1 (6.7%)	7 (13.7%)
		Occasionally	7 (19.4%)	2 (13.3%)	9 (17.6%)
		Frequently	1 (2.8%)	0 (0.0%)	1 (2.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C14D1		N=35	N=13	N=48
		Never	23 (65.7%)	9 (69.2%)	32 (66.7%)
		Rarely	6 (17.1%)	1 (7.7%)	7 (14.6%)
		Occasionally	6 (17.1%)	3 (23.1%)	9 (18.8%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=30	N=14	N=44
		Never	24 (80.0%)	11 (78.6%)	35 (79.5%)
		Rarely	2 (6.7%)	3 (21.4%)	5 (11.4%)
		Occasionally	3 (10.0%)	0 (0.0%)	3 (6.8%)
		Frequently	1 (3.3%)	0 (0.0%)	1 (2.3%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C16D1		N=30	N=11	N=41
		Never	18 (60.0%)	8 (72.7%)	26 (63.4%)
		Rarely	9 (30.0%)	1 (9.1%)	10 (24.4%)
		Occasionally	3 (10.0%)	2 (18.2%)	5 (12.2%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=28	N=7	N=35
		Never	19 (67.9%)	6 (85.7%)	25 (71.4%)
		Rarely	5 (17.9%)	1 (14.3%)	6 (17.1%)
		Occasionally	2 (7.1%)	0 (0.0%)	2 (5.7%)
		Frequently	2 (7.1%)	0 (0.0%)	2 (5.7%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		Never	16 (69.6%)	6 (85.7%)	22 (73.3%)
		Rarely	3 (13.0%)	0 (0.0%)	3 (10.0%)
		Occasionally	4 (17.4%)	1 (14.3%)	5 (16.7%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C19D1		N=20	N=6	N=26
		Never	14 (70.0%)	4 (66.7%)	18 (69.2%)
		Rarely	5 (25.0%)	2 (33.3%)	7 (26.9%)
		Occasionally	1 (5.0%)	0 (0.0%)	1 (3.8%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=20	N=4	N=24
		Never	15 (75.0%)	3 (75.0%)	18 (75.0%)
		Rarely	3 (15.0%)	1 (25.0%)	4 (16.7%)
		Occasionally	2 (10.0%)	0 (0.0%)	2 (8.3%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		Never	15 (83.3%)	2 (50.0%)	17 (77.3%)
		Rarely	2 (11.1%)	1 (25.0%)	3 (13.6%)
		Occasionally	1 (5.6%)	1 (25.0%)	2 (9.1%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C22D1		N=15	N=3	N=18
		Never	11 (73.3%)	2 (66.7%)	13 (72.2%)
		Rarely	3 (20.0%)	0 (0.0%)	3 (16.7%)
		Occasionally	1 (6.7%)	1 (33.3%)	2 (11.1%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		Never	8 (80.0%)	2 (66.7%)	10 (76.9%)
		Rarely	0 (0.0%)	1 (33.3%)	1 (7.7%)
		Occasionally	2 (20.0%)	0 (0.0%)	2 (15.4%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		Never	7 (70.0%)	1 (50.0%)	8 (66.7%)
		Rarely	2 (20.0%)	0 (0.0%)	2 (16.7%)
		Occasionally	0 (0.0%)	1 (50.0%)	1 (8.3%)
		Frequently	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C25D1		N=9	N=0	N=9
		Never	7 (77.8%)	0 (NE)	7 (77.8%)
		Rarely	1 (11.1%)	0 (NE)	1 (11.1%)
		Occasionally	1 (11.1%)	0 (NE)	1 (11.1%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		Never	7 (87.5%)	1 (100.0%)	8 (88.9%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		Never	8 (100.0%)	1 (100.0%)	9 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C28D1		N=7	N=1	N=8
		Never	7 (100.0%)	1 (100.0%)	8 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		Never	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		Never	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C31D1		N=2	N=1	N=3
		Never	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		Never	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		Never	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C34D1		N=3	N=0	N=3
		Never	2 (66.7%)	0 (NE)	2 (66.7%)
		Rarely	1 (33.3%)	0 (NE)	1 (33.3%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=3	N=0	N=3
		Never	3 (100.0%)	0 (NE)	3 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
 Distribution of Responses to PRO-CTCAE Items by Visit  
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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C37D1		N=3	N=0	N=3
		Never	3 (100.0%)	0 (NE)	3 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C40D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		Never	1 (100.0%)	0 (NE)	1 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Nausea Severity	C43D1		N=1	N=0	N=1	
		Never	1 (100.0%)	0 (NE)	1 (100.0%)	
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)	
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)	
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)	
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)	
	EOT			N=137	N=131	N=268
		Never	80 (58.4%)	83 (63.4%)	163 (60.8%)	
		Rarely	34 (24.8%)	30 (22.9%)	64 (23.9%)	
		Occasionally	15 (10.9%)	9 (6.9%)	24 (9.0%)	
		Frequently	8 (5.8%)	7 (5.3%)	15 (5.6%)	
		Almost Constantly	0 (0.0%)	2 (1.5%)	2 (0.7%)	
	Long Term Follow-up			N=15	N=9	N=24
		Never	11 (73.3%)	4 (44.4%)	15 (62.5%)	
		Rarely	1 (6.7%)	1 (11.1%)	2 (8.3%)	
		Occasionally	3 (20.0%)	3 (33.3%)	6 (25.0%)	
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)	
		Almost Constantly	0 (0.0%)	1 (11.1%)	1 (4.2%)	
Baseline			N=171	N=174	N=345	
	None	124 (72.5%)	116 (66.7%)	240 (69.6%)		
	Mild	27 (15.8%)	38 (21.8%)	65 (18.8%)		
	Moderate	14 (8.2%)	17 (9.8%)	31 (9.0%)		
	Severe	6 (3.5%)	3 (1.7%)	9 (2.6%)		
	Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)		
	C2D1			N=160	N=139	N=299
		None	83 (51.9%)	83 (59.7%)	166 (55.5%)	
		Mild	50 (31.3%)	30 (21.6%)	80 (26.8%)	
		Moderate	22 (13.8%)	24 (17.3%)	46 (15.4%)	
		Severe	5 (3.1%)	2 (1.4%)	7 (2.3%)	
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)	
C3D1			N=131	N=101	N=232	
	None	83 (63.4%)	65 (64.4%)	148 (63.8%)		
	Mild	33 (25.2%)	23 (22.8%)	56 (24.1%)		
	Moderate	11 (8.4%)	10 (9.9%)	21 (9.1%)		
	Severe	3 (2.3%)	3 (3.0%)	6 (2.6%)		
	Very Severe	1 (0.8%)	0 (0.0%)	1 (0.4%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C4D1			N=114	N=95	N=209
		None	69 (60.5%)	71 (74.7%)	140 (67.0%)
		Mild	34 (29.8%)	12 (12.6%)	46 (22.0%)
		Moderate	7 (6.1%)	9 (9.5%)	16 (7.7%)
		Severe	2 (1.8%)	3 (3.2%)	5 (2.4%)
		Very Severe	2 (1.8%)	0 (0.0%)	2 (1.0%)
C5D1			N=103	N=78	N=181
		None	65 (63.1%)	56 (71.8%)	121 (66.9%)
		Mild	27 (26.2%)	18 (23.1%)	45 (24.9%)
		Moderate	10 (9.7%)	4 (5.1%)	14 (7.7%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (1.0%)	0 (0.0%)	1 (0.6%)
C6D1			N=95	N=70	N=165
		None	58 (61.1%)	53 (75.7%)	111 (67.3%)
		Mild	29 (30.5%)	12 (17.1%)	41 (24.8%)
		Moderate	7 (7.4%)	3 (4.3%)	10 (6.1%)
		Severe	1 (1.1%)	2 (2.9%)	3 (1.8%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C7D1			N=81	N=50	N=131
		None	54 (66.7%)	43 (86.0%)	97 (74.0%)
		Mild	20 (24.7%)	4 (8.0%)	24 (18.3%)
		Moderate	7 (8.6%)	2 (4.0%)	9 (6.9%)
		Severe	0 (0.0%)	1 (2.0%)	1 (0.8%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C8D1			N=76	N=44	N=120
		None	51 (67.1%)	34 (77.3%)	85 (70.8%)
		Mild	20 (26.3%)	8 (18.2%)	28 (23.3%)
		Moderate	4 (5.3%)	1 (2.3%)	5 (4.2%)
		Severe	0 (0.0%)	1 (2.3%)	1 (0.8%)
		Very Severe	1 (1.3%)	0 (0.0%)	1 (0.8%)
C9D1			N=60	N=40	N=100
		None	43 (71.7%)	34 (85.0%)	77 (77.0%)
		Mild	13 (21.7%)	4 (10.0%)	17 (17.0%)
		Moderate	3 (5.0%)	2 (5.0%)	5 (5.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (1.7%)	0 (0.0%)	1 (1.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C10D1		N=55	N=29	N=84
		None	38 (69.1%)	23 (79.3%)	61 (72.6%)
		Mild	13 (23.6%)	5 (17.2%)	18 (21.4%)
		Moderate	4 (7.3%)	1 (3.4%)	5 (6.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C11D1		N=48	N=24	N=72
		None	34 (70.8%)	20 (83.3%)	54 (75.0%)
		Mild	9 (18.8%)	4 (16.7%)	13 (18.1%)
		Moderate	4 (8.3%)	0 (0.0%)	4 (5.6%)
		Severe	1 (2.1%)	0 (0.0%)	1 (1.4%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C12D1		N=40	N=19	N=59
		None	28 (70.0%)	17 (89.5%)	45 (76.3%)
		Mild	9 (22.5%)	1 (5.3%)	10 (16.9%)
		Moderate	2 (5.0%)	1 (5.3%)	3 (5.1%)
		Severe	1 (2.5%)	0 (0.0%)	1 (1.7%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C13D1		N=31	N=14	N=45
		None	19 (61.3%)	12 (85.7%)	31 (68.9%)
		Mild	6 (19.4%)	2 (14.3%)	8 (17.8%)
		Moderate	5 (16.1%)	0 (0.0%)	5 (11.1%)
		Severe	1 (3.2%)	0 (0.0%)	1 (2.2%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C14D1		N=34	N=13	N=47
		None	26 (76.5%)	10 (76.9%)	36 (76.6%)
		Mild	6 (17.6%)	3 (23.1%)	9 (19.1%)
		Moderate	2 (5.9%)	0 (0.0%)	2 (4.3%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=29	N=13	N=42
		None	23 (79.3%)	12 (92.3%)	35 (83.3%)
		Mild	2 (6.9%)	1 (7.7%)	3 (7.1%)
		Moderate	4 (13.8%)	0 (0.0%)	4 (9.5%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C16D1		N=29	N=11	N=40
		None	19 (65.5%)	8 (72.7%)	27 (67.5%)
		Mild	10 (34.5%)	1 (9.1%)	11 (27.5%)
		Moderate	0 (0.0%)	2 (18.2%)	2 (5.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=27	N=7	N=34
		None	18 (66.7%)	7 (100.0%)	25 (73.5%)
		Mild	7 (25.9%)	0 (0.0%)	7 (20.6%)
		Moderate	2 (7.4%)	0 (0.0%)	2 (5.9%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=22	N=7	N=29
		None	18 (81.8%)	6 (85.7%)	24 (82.8%)
		Mild	2 (9.1%)	1 (14.3%)	3 (10.3%)
		Moderate	1 (4.5%)	0 (0.0%)	1 (3.4%)
		Severe	1 (4.5%)	0 (0.0%)	1 (3.4%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C19D1		N=21	N=5	N=26
		None	16 (76.2%)	4 (80.0%)	20 (76.9%)
		Mild	4 (19.0%)	1 (20.0%)	5 (19.2%)
		Moderate	1 (4.8%)	0 (0.0%)	1 (3.8%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=18	N=4	N=22
		None	14 (77.8%)	4 (100.0%)	18 (81.8%)
		Mild	4 (22.2%)	0 (0.0%)	4 (18.2%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=17	N=4	N=21
		None	15 (88.2%)	2 (50.0%)	17 (81.0%)
		Mild	2 (11.8%)	1 (25.0%)	3 (14.3%)
		Moderate	0 (0.0%)	1 (25.0%)	1 (4.8%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

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Table 15.15.4  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C22D1		N=14	N=3	N=17
		None	12 (85.7%)	2 (66.7%)	14 (82.4%)
		Mild	2 (14.3%)	1 (33.3%)	3 (17.6%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		None	8 (80.0%)	2 (66.7%)	10 (76.9%)
		Mild	1 (10.0%)	1 (33.3%)	2 (15.4%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	1 (10.0%)	0 (0.0%)	1 (7.7%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		None	8 (80.0%)	1 (50.0%)	9 (75.0%)
		Mild	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Moderate	0 (0.0%)	1 (50.0%)	1 (8.3%)
		Severe	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C25D1		N=8	N=0	N=8
		None	6 (75.0%)	0 (NE)	6 (75.0%)
		Mild	2 (25.0%)	0 (NE)	2 (25.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		None	7 (87.5%)	1 (100.0%)	8 (88.9%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		None	8 (100.0%)	1 (100.0%)	9 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C28D1		N=6	N=1	N=7
		None	6 (100.0%)	1 (100.0%)	7 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=2	N=1	N=3
		None	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		None	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C31D1		N=1	N=1	N=2
		None	1 (100.0%)	1 (100.0%)	2 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		None	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		None	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C34D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C40D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=125	N=123	N=248
		None	75 (60.0%)	80 (65.0%)	155 (62.5%)
		Mild	32 (25.6%)	27 (22.0%)	59 (23.8%)
		Moderate	8 (6.4%)	11 (8.9%)	19 (7.7%)
		Severe	7 (5.6%)	3 (2.4%)	10 (4.0%)
		Very Severe	3 (2.4%)	2 (1.6%)	5 (2.0%)
Long Term Follow-up			N=13	N=9	N=22
		None	11 (84.6%)	5 (55.6%)	16 (72.7%)
		Mild	1 (7.7%)	2 (22.2%)	3 (13.6%)
		Moderate	1 (7.7%)	1 (11.1%)	2 (9.1%)
		Severe	0 (0.0%)	1 (11.1%)	1 (4.5%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Vomiting Frequency	Baseline		N=177	N=180	N=357	
		Never	155 (87.6%)	162 (90.0%)	317 (88.8%)	
		Rarely	11 (6.2%)	6 (3.3%)	17 (4.8%)	
		Occasionally	10 (5.6%)	8 (4.4%)	18 (5.0%)	
		Frequently	1 (0.6%)	4 (2.2%)	5 (1.4%)	
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)	
	C2D1			N=163	N=150	N=313
		Never	141 (86.5%)	131 (87.3%)	272 (86.9%)	
		Rarely	11 (6.7%)	10 (6.7%)	21 (6.7%)	
		Occasionally	10 (6.1%)	8 (5.3%)	18 (5.8%)	
		Frequently	1 (0.6%)	1 (0.7%)	2 (0.6%)	
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)	
	C3D1			N=132	N=106	N=238
		Never	116 (87.9%)	97 (91.5%)	213 (89.5%)	
		Rarely	9 (6.8%)	5 (4.7%)	14 (5.9%)	
		Occasionally	6 (4.5%)	4 (3.8%)	10 (4.2%)	
		Frequently	1 (0.8%)	0 (0.0%)	1 (0.4%)	
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)	
	C4D1			N=119	N=97	N=216
		Never	106 (89.1%)	88 (90.7%)	194 (89.8%)	
Rarely		8 (6.7%)	6 (6.2%)	14 (6.5%)		
Occasionally		5 (4.2%)	2 (2.1%)	7 (3.2%)		
Frequently		0 (0.0%)	1 (1.0%)	1 (0.5%)		
	Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)		
C5D1			N=106	N=83	N=189	
	Never	94 (88.7%)	77 (92.8%)	171 (90.5%)		
	Rarely	10 (9.4%)	4 (4.8%)	14 (7.4%)		
	Occasionally	1 (0.9%)	2 (2.4%)	3 (1.6%)		
	Frequently	1 (0.9%)	0 (0.0%)	1 (0.5%)		
	Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)		
C6D1			N=102	N=74	N=176	
	Never	90 (88.2%)	70 (94.6%)	160 (90.9%)		
	Rarely	7 (6.9%)	1 (1.4%)	8 (4.5%)		
	Occasionally	4 (3.9%)	2 (2.7%)	6 (3.4%)		
	Frequently	1 (1.0%)	0 (0.0%)	1 (0.6%)		
	Almost Constantly	0 (0.0%)	1 (1.4%)	1 (0.6%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C7D1			N=85	N=55	N=140
		Never	81 (95.3%)	53 (96.4%)	134 (95.7%)
		Rarely	3 (3.5%)	2 (3.6%)	5 (3.6%)
		Occasionally	1 (1.2%)	0 (0.0%)	1 (0.7%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C8D1			N=80	N=51	N=131
		Never	74 (92.5%)	50 (98.0%)	124 (94.7%)
		Rarely	3 (3.8%)	1 (2.0%)	4 (3.1%)
		Occasionally	2 (2.5%)	0 (0.0%)	2 (1.5%)
		Frequently	1 (1.3%)	0 (0.0%)	1 (0.8%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C9D1			N=64	N=42	N=106
		Never	57 (89.1%)	42 (100.0%)	99 (93.4%)
		Rarely	4 (6.3%)	0 (0.0%)	4 (3.8%)
		Occasionally	2 (3.1%)	0 (0.0%)	2 (1.9%)
		Frequently	1 (1.6%)	0 (0.0%)	1 (0.9%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C10D1			N=57	N=31	N=88
		Never	51 (89.5%)	28 (90.3%)	79 (89.8%)
		Rarely	6 (10.5%)	2 (6.5%)	8 (9.1%)
		Occasionally	0 (0.0%)	1 (3.2%)	1 (1.1%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C11D1			N=49	N=24	N=73
		Never	44 (89.8%)	24 (100.0%)	68 (93.2%)
		Rarely	3 (6.1%)	0 (0.0%)	3 (4.1%)
		Occasionally	1 (2.0%)	0 (0.0%)	1 (1.4%)
		Frequently	1 (2.0%)	0 (0.0%)	1 (1.4%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C12D1			N=43	N=20	N=63
		Never	37 (86.0%)	19 (95.0%)	56 (88.9%)
		Rarely	3 (7.0%)	0 (0.0%)	3 (4.8%)
		Occasionally	1 (2.3%)	1 (5.0%)	2 (3.2%)
		Frequently	2 (4.7%)	0 (0.0%)	2 (3.2%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C13D1		N=36	N=15	N=51
		Never	33 (91.7%)	15 (100.0%)	48 (94.1%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	1 (2.8%)	0 (0.0%)	1 (2.0%)
		Frequently	2 (5.6%)	0 (0.0%)	2 (3.9%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C14D1		N=35	N=13	N=48
		Never	32 (91.4%)	13 (100.0%)	45 (93.8%)
		Rarely	2 (5.7%)	0 (0.0%)	2 (4.2%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	1 (2.9%)	0 (0.0%)	1 (2.1%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=30	N=14	N=44
		Never	28 (93.3%)	14 (100.0%)	42 (95.5%)
		Rarely	1 (3.3%)	0 (0.0%)	1 (2.3%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	1 (3.3%)	0 (0.0%)	1 (2.3%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C16D1		N=30	N=11	N=41
		Never	25 (83.3%)	11 (100.0%)	36 (87.8%)
		Rarely	4 (13.3%)	0 (0.0%)	4 (9.8%)
		Occasionally	1 (3.3%)	0 (0.0%)	1 (2.4%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=28	N=7	N=35
		Never	25 (89.3%)	7 (100.0%)	32 (91.4%)
		Rarely	2 (7.1%)	0 (0.0%)	2 (5.7%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	1 (3.6%)	0 (0.0%)	1 (2.9%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		Never	22 (95.7%)	7 (100.0%)	29 (96.7%)
		Rarely	1 (4.3%)	0 (0.0%)	1 (3.3%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C19D1		N=20	N=6	N=26
		Never	18 (90.0%)	6 (100.0%)	24 (92.3%)
		Rarely	2 (10.0%)	0 (0.0%)	2 (7.7%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=20	N=4	N=24
		Never	19 (95.0%)	4 (100.0%)	23 (95.8%)
		Rarely	1 (5.0%)	0 (0.0%)	1 (4.2%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		Never	18 (100.0%)	4 (100.0%)	22 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C22D1		N=15	N=3	N=18
		Never	15 (100.0%)	3 (100.0%)	18 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		Never	9 (90.0%)	3 (100.0%)	12 (92.3%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	1 (10.0%)	0 (0.0%)	1 (7.7%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		Never	9 (90.0%)	2 (100.0%)	11 (91.7%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C25D1		N=9	N=0	N=9
		Never	9 (100.0%)	0 (NE)	9 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		Never	7 (87.5%)	1 (100.0%)	8 (88.9%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		Never	8 (100.0%)	1 (100.0%)	9 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C28D1		N=7	N=1	N=8
		Never	7 (100.0%)	1 (100.0%)	8 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		Never	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		Never	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C31D1		N=2	N=1	N=3
		Never	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		Never	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		Never	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C34D1		N=3	N=0	N=3
		Never	2 (66.7%)	0 (NE)	2 (66.7%)
		Rarely	1 (33.3%)	0 (NE)	1 (33.3%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=3	N=0	N=3
		Never	3 (100.0%)	0 (NE)	3 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C37D1		N=3	N=0	N=3
		Never	3 (100.0%)	0 (NE)	3 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C40D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		Never	1 (100.0%)	0 (NE)	1 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Vomiting Severity	C43D1		N=1	N=0	N=1	
		Never	1 (100.0%)	0 (NE)	1 (100.0%)	
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)	
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)	
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)	
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)	
	EOT			N=137	N=132	N=269
		Never	111 (81.0%)	113 (85.6%)	224 (83.3%)	
		Rarely	13 (9.5%)	9 (6.8%)	22 (8.2%)	
		Occasionally	9 (6.6%)	7 (5.3%)	16 (5.9%)	
		Frequently	3 (2.2%)	3 (2.3%)	6 (2.2%)	
		Almost Constantly	1 (0.7%)	0 (0.0%)	1 (0.4%)	
	Long Term Follow-up			N=15	N=9	N=24
		Never	13 (86.7%)	7 (77.8%)	20 (83.3%)	
		Rarely	0 (0.0%)	1 (11.1%)	1 (4.2%)	
		Occasionally	2 (13.3%)	0 (0.0%)	2 (8.3%)	
		Frequently	0 (0.0%)	1 (11.1%)	1 (4.2%)	
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)	
Baseline			N=173	N=173	N=346	
	None	152 (87.9%)	157 (90.8%)	309 (89.3%)		
	Mild	10 (5.8%)	8 (4.6%)	18 (5.2%)		
	Moderate	9 (5.2%)	6 (3.5%)	15 (4.3%)		
	Severe	2 (1.2%)	2 (1.2%)	4 (1.2%)		
	Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)		
	C2D1			N=159	N=140	N=299
		None	136 (85.5%)	123 (87.9%)	259 (86.6%)	
		Mild	13 (8.2%)	11 (7.9%)	24 (8.0%)	
		Moderate	6 (3.8%)	5 (3.6%)	11 (3.7%)	
		Severe	4 (2.5%)	1 (0.7%)	5 (1.7%)	
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)	
C3D1			N=130	N=100	N=230	
	None	114 (87.7%)	92 (92.0%)	206 (89.6%)		
	Mild	6 (4.6%)	5 (5.0%)	11 (4.8%)		
	Moderate	5 (3.8%)	2 (2.0%)	7 (3.0%)		
	Severe	5 (3.8%)	1 (1.0%)	6 (2.6%)		
	Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C4D1			N=113	N=94	N=207
		None	102 (90.3%)	85 (90.4%)	187 (90.3%)
		Mild	8 (7.1%)	6 (6.4%)	14 (6.8%)
		Moderate	1 (0.9%)	3 (3.2%)	4 (1.9%)
		Severe	2 (1.8%)	0 (0.0%)	2 (1.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C5D1			N=101	N=78	N=179
		None	89 (88.1%)	72 (92.3%)	161 (89.9%)
		Mild	9 (8.9%)	4 (5.1%)	13 (7.3%)
		Moderate	2 (2.0%)	2 (2.6%)	4 (2.2%)
		Severe	1 (1.0%)	0 (0.0%)	1 (0.6%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C6D1			N=93	N=69	N=162
		None	82 (88.2%)	65 (94.2%)	147 (90.7%)
		Mild	8 (8.6%)	3 (4.3%)	11 (6.8%)
		Moderate	3 (3.2%)	0 (0.0%)	3 (1.9%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	1 (1.4%)	1 (0.6%)
C7D1			N=79	N=49	N=128
		None	77 (97.5%)	47 (95.9%)	124 (96.9%)
		Mild	1 (1.3%)	2 (4.1%)	3 (2.3%)
		Moderate	1 (1.3%)	0 (0.0%)	1 (0.8%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C8D1			N=74	N=44	N=118
		None	68 (91.9%)	43 (97.7%)	111 (94.1%)
		Mild	4 (5.4%)	0 (0.0%)	4 (3.4%)
		Moderate	2 (2.7%)	0 (0.0%)	2 (1.7%)
		Severe	0 (0.0%)	1 (2.3%)	1 (0.8%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C9D1			N=58	N=40	N=98
		None	51 (87.9%)	40 (100.0%)	91 (92.9%)
		Mild	5 (8.6%)	0 (0.0%)	5 (5.1%)
		Moderate	1 (1.7%)	0 (0.0%)	1 (1.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (1.7%)	0 (0.0%)	1 (1.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C10D1			N=52	N=29	N=81
		None	46 (88.5%)	26 (89.7%)	72 (88.9%)
		Mild	5 (9.6%)	2 (6.9%)	7 (8.6%)
		Moderate	1 (1.9%)	1 (3.4%)	2 (2.5%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C11D1			N=47	N=23	N=70
		None	43 (91.5%)	23 (100.0%)	66 (94.3%)
		Mild	1 (2.1%)	0 (0.0%)	1 (1.4%)
		Moderate	2 (4.3%)	0 (0.0%)	2 (2.9%)
		Severe	1 (2.1%)	0 (0.0%)	1 (1.4%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C12D1			N=38	N=19	N=57
		None	33 (86.8%)	18 (94.7%)	51 (89.5%)
		Mild	2 (5.3%)	0 (0.0%)	2 (3.5%)
		Moderate	3 (7.9%)	1 (5.3%)	4 (7.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C13D1			N=32	N=14	N=46
		None	29 (90.6%)	14 (100.0%)	43 (93.5%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	1 (3.1%)	0 (0.0%)	1 (2.2%)
		Severe	2 (6.3%)	0 (0.0%)	2 (4.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C14D1			N=33	N=13	N=46
		None	30 (90.9%)	13 (100.0%)	43 (93.5%)
		Mild	2 (6.1%)	0 (0.0%)	2 (4.3%)
		Moderate	1 (3.0%)	0 (0.0%)	1 (2.2%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C15D1			N=28	N=12	N=40
		None	26 (92.9%)	12 (100.0%)	38 (95.0%)
		Mild	1 (3.6%)	0 (0.0%)	1 (2.5%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	1 (3.6%)	0 (0.0%)	1 (2.5%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

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Data Cutoff Date: 01JUL2022

Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C16D1		N=28	N=11	N=39
		None	23 (82.1%)	11 (100.0%)	34 (87.2%)
		Mild	3 (10.7%)	0 (0.0%)	3 (7.7%)
		Moderate	2 (7.1%)	0 (0.0%)	2 (5.1%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=27	N=7	N=34
		None	24 (88.9%)	7 (100.0%)	31 (91.2%)
		Mild	2 (7.4%)	0 (0.0%)	2 (5.9%)
		Moderate	1 (3.7%)	0 (0.0%)	1 (2.9%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		None	21 (91.3%)	7 (100.0%)	28 (93.3%)
		Mild	2 (8.7%)	0 (0.0%)	2 (6.7%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C19D1		N=21	N=5	N=26
		None	19 (90.5%)	5 (100.0%)	24 (92.3%)
		Mild	2 (9.5%)	0 (0.0%)	2 (7.7%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=19	N=4	N=23
		None	18 (94.7%)	4 (100.0%)	22 (95.7%)
		Mild	1 (5.3%)	0 (0.0%)	1 (4.3%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=17	N=4	N=21
		None	17 (100.0%)	4 (100.0%)	21 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C22D1		N=14	N=3	N=17
		None	14 (100.0%)	3 (100.0%)	17 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		None	9 (90.0%)	3 (100.0%)	12 (92.3%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	1 (10.0%)	0 (0.0%)	1 (7.7%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		None	8 (80.0%)	2 (100.0%)	10 (83.3%)
		Mild	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C25D1		N=8	N=0	N=8
		None	8 (100.0%)	0 (NE)	8 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		None	7 (87.5%)	1 (100.0%)	8 (88.9%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		None	8 (100.0%)	1 (100.0%)	9 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C28D1		N=6	N=1	N=7
		None	6 (100.0%)	1 (100.0%)	7 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=3	N=1	N=4
		None	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		None	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C31D1		N=1	N=1	N=2
		None	1 (100.0%)	1 (100.0%)	2 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		None	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		None	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C34D1		N=2	N=0	N=2
		None	1 (50.0%)	0 (NE)	1 (50.0%)
		Mild	1 (50.0%)	0 (NE)	1 (50.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=3	N=0	N=3
		None	3 (100.0%)	0 (NE)	3 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C37D1		N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C40D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=122	N=120	N=242
		None	97 (79.5%)	103 (85.8%)	200 (82.6%)
		Mild	12 (9.8%)	10 (8.3%)	22 (9.1%)
		Moderate	9 (7.4%)	4 (3.3%)	13 (5.4%)
		Severe	2 (1.6%)	1 (0.8%)	3 (1.2%)
		Very Severe	2 (1.6%)	2 (1.7%)	4 (1.7%)
Long Term Follow-up			N=13	N=9	N=22
		None	12 (92.3%)	7 (77.8%)	19 (86.4%)
		Mild	1 (7.7%)	1 (11.1%)	2 (9.1%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	1 (11.1%)	1 (4.5%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Constipation Severity	Baseline		N=177	N=180	N=357
		None	100 (56.5%)	111 (61.7%)	211 (59.1%)
		Mild	45 (25.4%)	38 (21.1%)	83 (23.2%)
		Moderate	22 (12.4%)	19 (10.6%)	41 (11.5%)
		Severe	8 (4.5%)	11 (6.1%)	19 (5.3%)
		Very Severe	2 (1.1%)	1 (0.6%)	3 (0.8%)
	C2D1		N=163	N=150	N=313
		None	87 (53.4%)	78 (52.0%)	165 (52.7%)
		Mild	40 (24.5%)	39 (26.0%)	79 (25.2%)
		Moderate	25 (15.3%)	23 (15.3%)	48 (15.3%)
		Severe	9 (5.5%)	5 (3.3%)	14 (4.5%)
		Very Severe	2 (1.2%)	5 (3.3%)	7 (2.2%)
	C3D1		N=132	N=106	N=238
		None	79 (59.8%)	69 (65.1%)	148 (62.2%)
		Mild	31 (23.5%)	21 (19.8%)	52 (21.8%)
		Moderate	20 (15.2%)	12 (11.3%)	32 (13.4%)
		Severe	2 (1.5%)	3 (2.8%)	5 (2.1%)
		Very Severe	0 (0.0%)	1 (0.9%)	1 (0.4%)
	C4D1		N=119	N=97	N=216
		None	74 (62.2%)	63 (64.9%)	137 (63.4%)
		Mild	21 (17.6%)	19 (19.6%)	40 (18.5%)
Moderate		20 (16.8%)	10 (10.3%)	30 (13.9%)	
Severe		3 (2.5%)	5 (5.2%)	8 (3.7%)	
Very Severe		1 (0.8%)	0 (0.0%)	1 (0.5%)	
C5D1		N=106	N=82	N=188	
	None	71 (67.0%)	48 (58.5%)	119 (63.3%)	
	Mild	23 (21.7%)	26 (31.7%)	49 (26.1%)	
	Moderate	8 (7.5%)	4 (4.9%)	12 (6.4%)	
	Severe	4 (3.8%)	2 (2.4%)	6 (3.2%)	
	Very Severe	0 (0.0%)	2 (2.4%)	2 (1.1%)	
C6D1		N=102	N=74	N=176	
	None	67 (65.7%)	44 (59.5%)	111 (63.1%)	
	Mild	21 (20.6%)	20 (27.0%)	41 (23.3%)	
	Moderate	12 (11.8%)	6 (8.1%)	18 (10.2%)	
	Severe	2 (2.0%)	4 (5.4%)	6 (3.4%)	
	Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C7D1			N=84	N=55	N=139
		None	60 (71.4%)	37 (67.3%)	97 (69.8%)
		Mild	12 (14.3%)	10 (18.2%)	22 (15.8%)
		Moderate	11 (13.1%)	6 (10.9%)	17 (12.2%)
		Severe	1 (1.2%)	1 (1.8%)	2 (1.4%)
		Very Severe	0 (0.0%)	1 (1.8%)	1 (0.7%)
C8D1			N=79	N=51	N=130
		None	49 (62.0%)	32 (62.7%)	81 (62.3%)
		Mild	15 (19.0%)	9 (17.6%)	24 (18.5%)
		Moderate	13 (16.5%)	8 (15.7%)	21 (16.2%)
		Severe	2 (2.5%)	2 (3.9%)	4 (3.1%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C9D1			N=64	N=42	N=106
		None	41 (64.1%)	28 (66.7%)	69 (65.1%)
		Mild	10 (15.6%)	7 (16.7%)	17 (16.0%)
		Moderate	10 (15.6%)	3 (7.1%)	13 (12.3%)
		Severe	3 (4.7%)	3 (7.1%)	6 (5.7%)
		Very Severe	0 (0.0%)	1 (2.4%)	1 (0.9%)
C10D1			N=57	N=31	N=88
		None	32 (56.1%)	19 (61.3%)	51 (58.0%)
		Mild	9 (15.8%)	5 (16.1%)	14 (15.9%)
		Moderate	10 (17.5%)	5 (16.1%)	15 (17.0%)
		Severe	6 (10.5%)	2 (6.5%)	8 (9.1%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C11D1			N=49	N=24	N=73
		None	31 (63.3%)	14 (58.3%)	45 (61.6%)
		Mild	12 (24.5%)	4 (16.7%)	16 (21.9%)
		Moderate	3 (6.1%)	5 (20.8%)	8 (11.0%)
		Severe	1 (2.0%)	1 (4.2%)	2 (2.7%)
		Very Severe	2 (4.1%)	0 (0.0%)	2 (2.7%)
C12D1			N=43	N=20	N=63
		None	26 (60.5%)	14 (70.0%)	40 (63.5%)
		Mild	8 (18.6%)	4 (20.0%)	12 (19.0%)
		Moderate	7 (16.3%)	2 (10.0%)	9 (14.3%)
		Severe	1 (2.3%)	0 (0.0%)	1 (1.6%)
		Very Severe	1 (2.3%)	0 (0.0%)	1 (1.6%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C13D1			N=36	N=15	N=51
		None	18 (50.0%)	9 (60.0%)	27 (52.9%)
		Mild	11 (30.6%)	4 (26.7%)	15 (29.4%)
		Moderate	4 (11.1%)	2 (13.3%)	6 (11.8%)
		Severe	3 (8.3%)	0 (0.0%)	3 (5.9%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C14D1			N=35	N=13	N=48
		None	19 (54.3%)	8 (61.5%)	27 (56.3%)
		Mild	7 (20.0%)	3 (23.1%)	10 (20.8%)
		Moderate	4 (11.4%)	1 (7.7%)	5 (10.4%)
		Severe	4 (11.4%)	1 (7.7%)	5 (10.4%)
		Very Severe	1 (2.9%)	0 (0.0%)	1 (2.1%)
C15D1			N=30	N=14	N=44
		None	18 (60.0%)	8 (57.1%)	26 (59.1%)
		Mild	6 (20.0%)	4 (28.6%)	10 (22.7%)
		Moderate	4 (13.3%)	2 (14.3%)	6 (13.6%)
		Severe	1 (3.3%)	0 (0.0%)	1 (2.3%)
		Very Severe	1 (3.3%)	0 (0.0%)	1 (2.3%)
C16D1			N=30	N=11	N=41
		None	19 (63.3%)	5 (45.5%)	24 (58.5%)
		Mild	6 (20.0%)	4 (36.4%)	10 (24.4%)
		Moderate	3 (10.0%)	1 (9.1%)	4 (9.8%)
		Severe	2 (6.7%)	0 (0.0%)	2 (4.9%)
		Very Severe	0 (0.0%)	1 (9.1%)	1 (2.4%)
C17D1			N=28	N=7	N=35
		None	17 (60.7%)	3 (42.9%)	20 (57.1%)
		Mild	8 (28.6%)	3 (42.9%)	11 (31.4%)
		Moderate	2 (7.1%)	0 (0.0%)	2 (5.7%)
		Severe	1 (3.6%)	1 (14.3%)	2 (5.7%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C18D1			N=23	N=7	N=30
		None	12 (52.2%)	4 (57.1%)	16 (53.3%)
		Mild	7 (30.4%)	2 (28.6%)	9 (30.0%)
		Moderate	1 (4.3%)	1 (14.3%)	2 (6.7%)
		Severe	2 (8.7%)	0 (0.0%)	2 (6.7%)
		Very Severe	1 (4.3%)	0 (0.0%)	1 (3.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C19D1		N=21	N=6	N=27
		None	9 (42.9%)	1 (16.7%)	10 (37.0%)
		Mild	8 (38.1%)	4 (66.7%)	12 (44.4%)
		Moderate	2 (9.5%)	0 (0.0%)	2 (7.4%)
		Severe	2 (9.5%)	1 (16.7%)	3 (11.1%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=20	N=4	N=24
		None	11 (55.0%)	1 (25.0%)	12 (50.0%)
		Mild	8 (40.0%)	2 (50.0%)	10 (41.7%)
		Moderate	1 (5.0%)	1 (25.0%)	2 (8.3%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		None	12 (66.7%)	1 (25.0%)	13 (59.1%)
		Mild	4 (22.2%)	2 (50.0%)	6 (27.3%)
		Moderate	1 (5.6%)	0 (0.0%)	1 (4.5%)
		Severe	1 (5.6%)	1 (25.0%)	2 (9.1%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C22D1		N=15	N=3	N=18
		None	9 (60.0%)	1 (33.3%)	10 (55.6%)
		Mild	4 (26.7%)	1 (33.3%)	5 (27.8%)
		Moderate	1 (6.7%)	1 (33.3%)	2 (11.1%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (6.7%)	0 (0.0%)	1 (5.6%)
	C23D1		N=10	N=3	N=13
		None	8 (80.0%)	1 (33.3%)	9 (69.2%)
		Mild	0 (0.0%)	1 (33.3%)	1 (7.7%)
		Moderate	1 (10.0%)	1 (33.3%)	2 (15.4%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (10.0%)	0 (0.0%)	1 (7.7%)
	C24D1		N=10	N=2	N=12
		None	5 (50.0%)	1 (50.0%)	6 (50.0%)
		Mild	2 (20.0%)	1 (50.0%)	3 (25.0%)
		Moderate	3 (30.0%)	0 (0.0%)	3 (25.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C25D1		N=9	N=0	N=9
		None	5 (55.6%)	0 (NE)	5 (55.6%)
		Mild	3 (33.3%)	0 (NE)	3 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	1 (11.1%)	0 (NE)	1 (11.1%)
	C26D1		N=8	N=1	N=9
		None	6 (75.0%)	1 (100.0%)	7 (77.8%)
		Mild	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		None	5 (62.5%)	1 (100.0%)	6 (66.7%)
		Mild	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Moderate	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C28D1		N=7	N=1	N=8
		None	5 (71.4%)	1 (100.0%)	6 (75.0%)
		Mild	2 (28.6%)	0 (0.0%)	2 (25.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		None	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		None	3 (75.0%)	0 (0.0%)	3 (60.0%)
		Mild	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C31D1		N=2	N=1	N=3
		None	1 (50.0%)	1 (100.0%)	2 (66.7%)
		Mild	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		None	2 (100.0%)	0 (0.0%)	2 (66.7%)
		Mild	0 (0.0%)	1 (100.0%)	1 (33.3%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		None	3 (100.0%)	0 (0.0%)	3 (75.0%)
		Mild	0 (0.0%)	1 (100.0%)	1 (25.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C34D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		None	1 (50.0%)	0 (NE)	1 (50.0%)
		Mild	1 (50.0%)	0 (NE)	1 (50.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C37D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C40D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Diarrhea Frequency	C43D1		N=1	N=0	N=1	
		None	1 (100.0%)	0 (NE)	1 (100.0%)	
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)	
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)	
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)	
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)	
	EOT			N=137	N=131	N=268
		None	84 (61.3%)	83 (63.4%)	167 (62.3%)	
		Mild	25 (18.2%)	26 (19.8%)	51 (19.0%)	
		Moderate	12 (8.8%)	11 (8.4%)	23 (8.6%)	
		Severe	14 (10.2%)	5 (3.8%)	19 (7.1%)	
		Very Severe	2 (1.5%)	6 (4.6%)	8 (3.0%)	
	Long Term Follow-up			N=15	N=9	N=24
		None	8 (53.3%)	4 (44.4%)	12 (50.0%)	
		Mild	2 (13.3%)	1 (11.1%)	3 (12.5%)	
		Moderate	4 (26.7%)	2 (22.2%)	6 (25.0%)	
		Severe	1 (6.7%)	2 (22.2%)	3 (12.5%)	
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)	
	Baseline			N=176	N=179	N=355
		Never	133 (75.6%)	125 (69.8%)	258 (72.7%)	
Rarely		22 (12.5%)	26 (14.5%)	48 (13.5%)		
Occasionally		17 (9.7%)	16 (8.9%)	33 (9.3%)		
Frequently		2 (1.1%)	8 (4.5%)	10 (2.8%)		
Almost Constantly		2 (1.1%)	4 (2.2%)	6 (1.7%)		
C2D1			N=163	N=150	N=313	
	Never	73 (44.8%)	104 (69.3%)	177 (56.5%)		
	Rarely	24 (14.7%)	27 (18.0%)	51 (16.3%)		
	Occasionally	39 (23.9%)	17 (11.3%)	56 (17.9%)		
	Frequently	19 (11.7%)	1 (0.7%)	20 (6.4%)		
	Almost Constantly	8 (4.9%)	1 (0.7%)	9 (2.9%)		
C3D1			N=132	N=105	N=237	
	Never	66 (50.0%)	68 (64.8%)	134 (56.5%)		
	Rarely	21 (15.9%)	20 (19.0%)	41 (17.3%)		
	Occasionally	21 (15.9%)	11 (10.5%)	32 (13.5%)		
	Frequently	19 (14.4%)	6 (5.7%)	25 (10.5%)		
	Almost Constantly	5 (3.8%)	0 (0.0%)	5 (2.1%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C4D1		N=118	N=97	N=215
		Never	48 (40.7%)	69 (71.1%)	117 (54.4%)
		Rarely	23 (19.5%)	14 (14.4%)	37 (17.2%)
		Occasionally	29 (24.6%)	12 (12.4%)	41 (19.1%)
		Frequently	14 (11.9%)	2 (2.1%)	16 (7.4%)
		Almost Constantly	4 (3.4%)	0 (0.0%)	4 (1.9%)
	C5D1		N=105	N=80	N=185
		Never	55 (52.4%)	53 (66.3%)	108 (58.4%)
		Rarely	11 (10.5%)	16 (20.0%)	27 (14.6%)
		Occasionally	22 (21.0%)	8 (10.0%)	30 (16.2%)
		Frequently	14 (13.3%)	3 (3.8%)	17 (9.2%)
		Almost Constantly	3 (2.9%)	0 (0.0%)	3 (1.6%)
	C6D1		N=102	N=74	N=176
		Never	48 (47.1%)	49 (66.2%)	97 (55.1%)
		Rarely	20 (19.6%)	12 (16.2%)	32 (18.2%)
		Occasionally	20 (19.6%)	10 (13.5%)	30 (17.0%)
		Frequently	8 (7.8%)	3 (4.1%)	11 (6.3%)
		Almost Constantly	6 (5.9%)	0 (0.0%)	6 (3.4%)
	C7D1		N=84	N=54	N=138
		Never	39 (46.4%)	39 (72.2%)	78 (56.5%)
		Rarely	24 (28.6%)	6 (11.1%)	30 (21.7%)
		Occasionally	16 (19.0%)	4 (7.4%)	20 (14.5%)
		Frequently	5 (6.0%)	5 (9.3%)	10 (7.2%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C8D1		N=80	N=50	N=130
		Never	38 (47.5%)	36 (72.0%)	74 (56.9%)
		Rarely	23 (28.8%)	7 (14.0%)	30 (23.1%)
		Occasionally	14 (17.5%)	5 (10.0%)	19 (14.6%)
		Frequently	3 (3.8%)	2 (4.0%)	5 (3.8%)
		Almost Constantly	2 (2.5%)	0 (0.0%)	2 (1.5%)
	C9D1		N=64	N=42	N=106
		Never	34 (53.1%)	30 (71.4%)	64 (60.4%)
		Rarely	14 (21.9%)	5 (11.9%)	19 (17.9%)
		Occasionally	9 (14.1%)	2 (4.8%)	11 (10.4%)
		Frequently	7 (10.9%)	4 (9.5%)	11 (10.4%)
		Almost Constantly	0 (0.0%)	1 (2.4%)	1 (0.9%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C10D1			N=57	N=31	N=88
		Never	31 (54.4%)	19 (61.3%)	50 (56.8%)
		Rarely	13 (22.8%)	5 (16.1%)	18 (20.5%)
		Occasionally	7 (12.3%)	3 (9.7%)	10 (11.4%)
		Frequently	5 (8.8%)	4 (12.9%)	9 (10.2%)
		Almost Constantly	1 (1.8%)	0 (0.0%)	1 (1.1%)
C11D1			N=49	N=24	N=73
		Never	29 (59.2%)	16 (66.7%)	45 (61.6%)
		Rarely	11 (22.4%)	4 (16.7%)	15 (20.5%)
		Occasionally	5 (10.2%)	2 (8.3%)	7 (9.6%)
		Frequently	3 (6.1%)	2 (8.3%)	5 (6.8%)
		Almost Constantly	1 (2.0%)	0 (0.0%)	1 (1.4%)
C12D1			N=43	N=20	N=63
		Never	23 (53.5%)	16 (80.0%)	39 (61.9%)
		Rarely	11 (25.6%)	1 (5.0%)	12 (19.0%)
		Occasionally	2 (4.7%)	1 (5.0%)	3 (4.8%)
		Frequently	6 (14.0%)	2 (10.0%)	8 (12.7%)
		Almost Constantly	1 (2.3%)	0 (0.0%)	1 (1.6%)
C13D1			N=36	N=14	N=50
		Never	16 (44.4%)	11 (78.6%)	27 (54.0%)
		Rarely	8 (22.2%)	1 (7.1%)	9 (18.0%)
		Occasionally	8 (22.2%)	2 (14.3%)	10 (20.0%)
		Frequently	4 (11.1%)	0 (0.0%)	4 (8.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C14D1			N=35	N=13	N=48
		Never	13 (37.1%)	9 (69.2%)	22 (45.8%)
		Rarely	10 (28.6%)	2 (15.4%)	12 (25.0%)
		Occasionally	9 (25.7%)	2 (15.4%)	11 (22.9%)
		Frequently	2 (5.7%)	0 (0.0%)	2 (4.2%)
		Almost Constantly	1 (2.9%)	0 (0.0%)	1 (2.1%)
C15D1			N=30	N=13	N=43
		Never	14 (46.7%)	9 (69.2%)	23 (53.5%)
		Rarely	6 (20.0%)	2 (15.4%)	8 (18.6%)
		Occasionally	5 (16.7%)	1 (7.7%)	6 (14.0%)
		Frequently	5 (16.7%)	1 (7.7%)	6 (14.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C16D1		N=30	N=11	N=41
		Never	15 (50.0%)	6 (54.5%)	21 (51.2%)
		Rarely	6 (20.0%)	3 (27.3%)	9 (22.0%)
		Occasionally	3 (10.0%)	1 (9.1%)	4 (9.8%)
		Frequently	6 (20.0%)	1 (9.1%)	7 (17.1%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=28	N=7	N=35
		Never	14 (50.0%)	6 (85.7%)	20 (57.1%)
		Rarely	3 (10.7%)	0 (0.0%)	3 (8.6%)
		Occasionally	7 (25.0%)	1 (14.3%)	8 (22.9%)
		Frequently	4 (14.3%)	0 (0.0%)	4 (11.4%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		Never	11 (47.8%)	5 (71.4%)	16 (53.3%)
		Rarely	7 (30.4%)	0 (0.0%)	7 (23.3%)
		Occasionally	3 (13.0%)	2 (28.6%)	5 (16.7%)
		Frequently	2 (8.7%)	0 (0.0%)	2 (6.7%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C19D1		N=21	N=6	N=27
		Never	11 (52.4%)	5 (83.3%)	16 (59.3%)
		Rarely	5 (23.8%)	0 (0.0%)	5 (18.5%)
		Occasionally	4 (19.0%)	1 (16.7%)	5 (18.5%)
		Frequently	1 (4.8%)	0 (0.0%)	1 (3.7%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=20	N=4	N=24
		Never	12 (60.0%)	2 (50.0%)	14 (58.3%)
		Rarely	2 (10.0%)	2 (50.0%)	4 (16.7%)
		Occasionally	3 (15.0%)	0 (0.0%)	3 (12.5%)
		Frequently	2 (10.0%)	0 (0.0%)	2 (8.3%)
		Almost Constantly	1 (5.0%)	0 (0.0%)	1 (4.2%)
	C21D1		N=18	N=4	N=22
		Never	10 (55.6%)	3 (75.0%)	13 (59.1%)
		Rarely	2 (11.1%)	1 (25.0%)	3 (13.6%)
		Occasionally	4 (22.2%)	0 (0.0%)	4 (18.2%)
		Frequently	1 (5.6%)	0 (0.0%)	1 (4.5%)
		Almost Constantly	1 (5.6%)	0 (0.0%)	1 (4.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C22D1		N=15	N=3	N=18
		Never	7 (46.7%)	1 (33.3%)	8 (44.4%)
		Rarely	3 (20.0%)	1 (33.3%)	4 (22.2%)
		Occasionally	5 (33.3%)	1 (33.3%)	6 (33.3%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		Never	4 (40.0%)	1 (33.3%)	5 (38.5%)
		Rarely	3 (30.0%)	1 (33.3%)	4 (30.8%)
		Occasionally	3 (30.0%)	1 (33.3%)	4 (30.8%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		Never	6 (60.0%)	0 (0.0%)	6 (50.0%)
		Rarely	1 (10.0%)	1 (50.0%)	2 (16.7%)
		Occasionally	3 (30.0%)	1 (50.0%)	4 (33.3%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C25D1		N=9	N=0	N=9
		Never	5 (55.6%)	0 (NE)	5 (55.6%)
		Rarely	1 (11.1%)	0 (NE)	1 (11.1%)
		Occasionally	3 (33.3%)	0 (NE)	3 (33.3%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		Never	3 (37.5%)	1 (100.0%)	4 (44.4%)
		Rarely	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Occasionally	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	1 (12.5%)	0 (0.0%)	1 (11.1%)
	C27D1		N=8	N=1	N=9
		Never	4 (50.0%)	1 (100.0%)	5 (55.6%)
		Rarely	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Occasionally	3 (37.5%)	0 (0.0%)	3 (33.3%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C28D1		N=7	N=1	N=8
		Never	3 (42.9%)	1 (100.0%)	4 (50.0%)
		Rarely	2 (28.6%)	0 (0.0%)	2 (25.0%)
		Occasionally	2 (28.6%)	0 (0.0%)	2 (25.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		Never	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Rarely	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Almost Constantly	1 (25.0%)	0 (0.0%)	1 (20.0%)
	C30D1		N=4	N=1	N=5
		Never	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Rarely	3 (75.0%)	1 (100.0%)	4 (80.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C31D1		N=2	N=1	N=3
		Never	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Rarely	1 (50.0%)	1 (100.0%)	2 (66.7%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		Never	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Rarely	1 (50.0%)	1 (100.0%)	2 (66.7%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		Never	2 (66.7%)	0 (0.0%)	2 (50.0%)
		Rarely	1 (33.3%)	1 (100.0%)	2 (50.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C34D1		N=3	N=0	N=3
		Never	1 (33.3%)	0 (NE)	1 (33.3%)
		Rarely	2 (66.7%)	0 (NE)	2 (66.7%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=3	N=0	N=3
		Never	2 (66.7%)	0 (NE)	2 (66.7%)
		Rarely	1 (33.3%)	0 (NE)	1 (33.3%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C37D1		N=3	N=0	N=3
		Never	2 (66.7%)	0 (NE)	2 (66.7%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	1 (33.3%)	0 (NE)	1 (33.3%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=2	N=0	N=2
		Never	1 (50.0%)	0 (NE)	1 (50.0%)
		Rarely	1 (50.0%)	0 (NE)	1 (50.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=2	N=0	N=2
		Never	1 (50.0%)	0 (NE)	1 (50.0%)
		Rarely	1 (50.0%)	0 (NE)	1 (50.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C40D1			N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Never	1 (100.0%)	0 (NE)	1 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Never	1 (100.0%)	0 (NE)	1 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=137	N=130	N=267
		Never	81 (59.1%)	87 (66.9%)	168 (62.9%)
		Rarely	18 (13.1%)	24 (18.5%)	42 (15.7%)
		Occasionally	20 (14.6%)	15 (11.5%)	35 (13.1%)
		Frequently	13 (9.5%)	4 (3.1%)	17 (6.4%)
		Almost Constantly	5 (3.6%)	0 (0.0%)	5 (1.9%)
Long Term Follow-up			N=15	N=9	N=24
		Never	9 (60.0%)	2 (22.2%)	11 (45.8%)
		Rarely	2 (13.3%)	4 (44.4%)	6 (25.0%)
		Occasionally	3 (20.0%)	1 (11.1%)	4 (16.7%)
		Frequently	1 (6.7%)	0 (0.0%)	1 (4.2%)
		Almost Constantly	0 (0.0%)	2 (22.2%)	2 (8.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Abdominal Pain Frequency	Baseline		N=177	N=180	N=357
		Never	95 (53.7%)	94 (52.2%)	189 (52.9%)
		Rarely	38 (21.5%)	33 (18.3%)	71 (19.9%)
		Occasionally	26 (14.7%)	38 (21.1%)	64 (17.9%)
		Frequently	13 (7.3%)	10 (5.6%)	23 (6.4%)
		Almost Constantly	5 (2.8%)	5 (2.8%)	10 (2.8%)
	C2D1		N=162	N=151	N=313
		Never	74 (45.7%)	70 (46.4%)	144 (46.0%)
		Rarely	35 (21.6%)	32 (21.2%)	67 (21.4%)
		Occasionally	35 (21.6%)	36 (23.8%)	71 (22.7%)
		Frequently	16 (9.9%)	12 (7.9%)	28 (8.9%)
		Almost Constantly	2 (1.2%)	1 (0.7%)	3 (1.0%)
	C3D1		N=132	N=106	N=238
		Never	70 (53.0%)	49 (46.2%)	119 (50.0%)
		Rarely	29 (22.0%)	26 (24.5%)	55 (23.1%)
		Occasionally	25 (18.9%)	21 (19.8%)	46 (19.3%)
		Frequently	8 (6.1%)	9 (8.5%)	17 (7.1%)
		Almost Constantly	0 (0.0%)	1 (0.9%)	1 (0.4%)
	C4D1		N=118	N=97	N=215
		Never	63 (53.4%)	53 (54.6%)	116 (54.0%)
		Rarely	29 (24.6%)	22 (22.7%)	51 (23.7%)
Occasionally		22 (18.6%)	15 (15.5%)	37 (17.2%)	
Frequently		4 (3.4%)	5 (5.2%)	9 (4.2%)	
Almost Constantly		0 (0.0%)	2 (2.1%)	2 (0.9%)	
C5D1		N=105	N=82	N=187	
	Never	49 (46.7%)	38 (46.3%)	87 (46.5%)	
	Rarely	30 (28.6%)	20 (24.4%)	50 (26.7%)	
	Occasionally	18 (17.1%)	19 (23.2%)	37 (19.8%)	
	Frequently	8 (7.6%)	4 (4.9%)	12 (6.4%)	
	Almost Constantly	0 (0.0%)	1 (1.2%)	1 (0.5%)	
C6D1		N=102	N=73	N=175	
	Never	54 (52.9%)	39 (53.4%)	93 (53.1%)	
	Rarely	30 (29.4%)	18 (24.7%)	48 (27.4%)	
	Occasionally	13 (12.7%)	11 (15.1%)	24 (13.7%)	
	Frequently	4 (3.9%)	5 (6.8%)	9 (5.1%)	
	Almost Constantly	1 (1.0%)	0 (0.0%)	1 (0.6%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C7D1			N=85	N=56	N=141
		Never	52 (61.2%)	37 (66.1%)	89 (63.1%)
		Rarely	17 (20.0%)	9 (16.1%)	26 (18.4%)
		Occasionally	11 (12.9%)	5 (8.9%)	16 (11.3%)
		Frequently	5 (5.9%)	4 (7.1%)	9 (6.4%)
		Almost Constantly	0 (0.0%)	1 (1.8%)	1 (0.7%)
C8D1			N=79	N=51	N=130
		Never	43 (54.4%)	33 (64.7%)	76 (58.5%)
		Rarely	18 (22.8%)	8 (15.7%)	26 (20.0%)
		Occasionally	15 (19.0%)	8 (15.7%)	23 (17.7%)
		Frequently	2 (2.5%)	2 (3.9%)	4 (3.1%)
		Almost Constantly	1 (1.3%)	0 (0.0%)	1 (0.8%)
C9D1			N=64	N=42	N=106
		Never	33 (51.6%)	27 (64.3%)	60 (56.6%)
		Rarely	20 (31.3%)	8 (19.0%)	28 (26.4%)
		Occasionally	9 (14.1%)	5 (11.9%)	14 (13.2%)
		Frequently	2 (3.1%)	2 (4.8%)	4 (3.8%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C10D1			N=56	N=31	N=87
		Never	34 (60.7%)	17 (54.8%)	51 (58.6%)
		Rarely	10 (17.9%)	6 (19.4%)	16 (18.4%)
		Occasionally	8 (14.3%)	6 (19.4%)	14 (16.1%)
		Frequently	3 (5.4%)	2 (6.5%)	5 (5.7%)
		Almost Constantly	1 (1.8%)	0 (0.0%)	1 (1.1%)
C11D1			N=48	N=24	N=72
		Never	29 (60.4%)	13 (54.2%)	42 (58.3%)
		Rarely	12 (25.0%)	5 (20.8%)	17 (23.6%)
		Occasionally	5 (10.4%)	6 (25.0%)	11 (15.3%)
		Frequently	2 (4.2%)	0 (0.0%)	2 (2.8%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
C12D1			N=43	N=20	N=63
		Never	28 (65.1%)	12 (60.0%)	40 (63.5%)
		Rarely	6 (14.0%)	6 (30.0%)	12 (19.0%)
		Occasionally	7 (16.3%)	1 (5.0%)	8 (12.7%)
		Frequently	2 (4.7%)	1 (5.0%)	3 (4.8%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C13D1		N=36	N=15	N=51
		Never	21 (58.3%)	9 (60.0%)	30 (58.8%)
		Rarely	8 (22.2%)	2 (13.3%)	10 (19.6%)
		Occasionally	7 (19.4%)	3 (20.0%)	10 (19.6%)
		Frequently	0 (0.0%)	1 (6.7%)	1 (2.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C14D1		N=35	N=13	N=48
		Never	22 (62.9%)	4 (30.8%)	26 (54.2%)
		Rarely	5 (14.3%)	4 (30.8%)	9 (18.8%)
		Occasionally	6 (17.1%)	3 (23.1%)	9 (18.8%)
		Frequently	2 (5.7%)	2 (15.4%)	4 (8.3%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=30	N=14	N=44
		Never	21 (70.0%)	7 (50.0%)	28 (63.6%)
		Rarely	5 (16.7%)	2 (14.3%)	7 (15.9%)
		Occasionally	4 (13.3%)	3 (21.4%)	7 (15.9%)
		Frequently	0 (0.0%)	2 (14.3%)	2 (4.5%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C16D1		N=30	N=11	N=41
		Never	20 (66.7%)	5 (45.5%)	25 (61.0%)
		Rarely	7 (23.3%)	2 (18.2%)	9 (22.0%)
		Occasionally	2 (6.7%)	3 (27.3%)	5 (12.2%)
		Frequently	1 (3.3%)	1 (9.1%)	2 (4.9%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=28	N=7	N=35
		Never	21 (75.0%)	2 (28.6%)	23 (65.7%)
		Rarely	2 (7.1%)	2 (28.6%)	4 (11.4%)
		Occasionally	3 (10.7%)	2 (28.6%)	5 (14.3%)
		Frequently	2 (7.1%)	1 (14.3%)	3 (8.6%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		Never	16 (69.6%)	2 (28.6%)	18 (60.0%)
		Rarely	3 (13.0%)	1 (14.3%)	4 (13.3%)
		Occasionally	3 (13.0%)	2 (28.6%)	5 (16.7%)
		Frequently	1 (4.3%)	2 (28.6%)	3 (10.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C19D1		N=21	N=6	N=27
		Never	13 (61.9%)	2 (33.3%)	15 (55.6%)
		Rarely	4 (19.0%)	1 (16.7%)	5 (18.5%)
		Occasionally	2 (9.5%)	3 (50.0%)	5 (18.5%)
		Frequently	2 (9.5%)	0 (0.0%)	2 (7.4%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=20	N=4	N=24
		Never	15 (75.0%)	1 (25.0%)	16 (66.7%)
		Rarely	3 (15.0%)	3 (75.0%)	6 (25.0%)
		Occasionally	1 (5.0%)	0 (0.0%)	1 (4.2%)
		Frequently	1 (5.0%)	0 (0.0%)	1 (4.2%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		Never	14 (77.8%)	1 (25.0%)	15 (68.2%)
		Rarely	4 (22.2%)	2 (50.0%)	6 (27.3%)
		Occasionally	0 (0.0%)	1 (25.0%)	1 (4.5%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C22D1		N=15	N=3	N=18
		Never	9 (60.0%)	1 (33.3%)	10 (55.6%)
		Rarely	4 (26.7%)	1 (33.3%)	5 (27.8%)
		Occasionally	2 (13.3%)	1 (33.3%)	3 (16.7%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		Never	6 (60.0%)	1 (33.3%)	7 (53.8%)
		Rarely	3 (30.0%)	1 (33.3%)	4 (30.8%)
		Occasionally	1 (10.0%)	1 (33.3%)	2 (15.4%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		Never	7 (70.0%)	1 (50.0%)	8 (66.7%)
		Rarely	2 (20.0%)	0 (0.0%)	2 (16.7%)
		Occasionally	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Frequently	0 (0.0%)	1 (50.0%)	1 (8.3%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C25D1		N=9	N=0	N=9
		Never	5 (55.6%)	0 (NE)	5 (55.6%)
		Rarely	3 (33.3%)	0 (NE)	3 (33.3%)
		Occasionally	1 (11.1%)	0 (NE)	1 (11.1%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		Never	4 (50.0%)	1 (100.0%)	5 (55.6%)
		Rarely	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Occasionally	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		Never	5 (62.5%)	1 (100.0%)	6 (66.7%)
		Rarely	3 (37.5%)	0 (0.0%)	3 (33.3%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C28D1		N=7	N=1	N=8
		Never	5 (71.4%)	1 (100.0%)	6 (75.0%)
		Rarely	2 (28.6%)	0 (0.0%)	2 (25.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		Never	3 (75.0%)	0 (0.0%)	3 (60.0%)
		Rarely	0 (0.0%)	1 (100.0%)	1 (20.0%)
		Occasionally	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		Never	2 (50.0%)	1 (100.0%)	3 (60.0%)
		Rarely	2 (50.0%)	0 (0.0%)	2 (40.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C31D1		N=2	N=1	N=3
		Never	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		Never	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		Never	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Rarely	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Frequently	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C34D1		N=3	N=0	N=3
		Never	3 (100.0%)	0 (NE)	3 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		Never	1 (50.0%)	0 (NE)	1 (50.0%)
		Rarely	1 (50.0%)	0 (NE)	1 (50.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=3	N=0	N=3
		Never	3 (100.0%)	0 (NE)	3 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C37D1		N=3	N=0	N=3
		Never	3 (100.0%)	0 (NE)	3 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C40D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=2	N=0	N=2
		Never	2 (100.0%)	0 (NE)	2 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		Never	1 (100.0%)	0 (NE)	1 (100.0%)
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Abdominal Pain Severity	C43D1		N=1	N=0	N=1	
		Never	1 (100.0%)	0 (NE)	1 (100.0%)	
		Rarely	0 (0.0%)	0 (NE)	0 (0.0%)	
		Occasionally	0 (0.0%)	0 (NE)	0 (0.0%)	
		Frequently	0 (0.0%)	0 (NE)	0 (0.0%)	
		Almost Constantly	0 (0.0%)	0 (NE)	0 (0.0%)	
	EOT			N=134	N=132	N=266
		Never	67 (50.0%)	64 (48.5%)	131 (49.2%)	
		Rarely	29 (21.6%)	32 (24.2%)	61 (22.9%)	
		Occasionally	24 (17.9%)	19 (14.4%)	43 (16.2%)	
		Frequently	11 (8.2%)	15 (11.4%)	26 (9.8%)	
		Almost Constantly	3 (2.2%)	2 (1.5%)	5 (1.9%)	
	Long Term Follow-up			N=15	N=9	N=24
		Never	6 (40.0%)	4 (44.4%)	10 (41.7%)	
		Rarely	6 (40.0%)	2 (22.2%)	8 (33.3%)	
		Occasionally	3 (20.0%)	2 (22.2%)	5 (20.8%)	
		Frequently	0 (0.0%)	1 (11.1%)	1 (4.2%)	
		Almost Constantly	0 (0.0%)	0 (0.0%)	0 (0.0%)	
Abdominal Pain Severity	Baseline		N=174	N=177	N=351	
		None	98 (56.3%)	96 (54.2%)	194 (55.3%)	
		Mild	44 (25.3%)	49 (27.7%)	93 (26.5%)	
		Moderate	22 (12.6%)	22 (12.4%)	44 (12.5%)	
		Severe	8 (4.6%)	9 (5.1%)	17 (4.8%)	
		Very Severe	2 (1.1%)	1 (0.6%)	3 (0.9%)	
	C2D1			N=159	N=149	N=308
		None	72 (45.3%)	77 (51.7%)	149 (48.4%)	
		Mild	47 (29.6%)	39 (26.2%)	86 (27.9%)	
		Moderate	32 (20.1%)	27 (18.1%)	59 (19.2%)	
		Severe	7 (4.4%)	6 (4.0%)	13 (4.2%)	
		Very Severe	1 (0.6%)	0 (0.0%)	1 (0.3%)	
	C3D1			N=130	N=103	N=233
		None	70 (53.8%)	49 (47.6%)	119 (51.1%)	
		Mild	36 (27.7%)	31 (30.1%)	67 (28.8%)	
		Moderate	24 (18.5%)	19 (18.4%)	43 (18.5%)	
		Severe	0 (0.0%)	4 (3.9%)	4 (1.7%)	
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C4D1			N=118	N=96	N=214
		None	66 (55.9%)	53 (55.2%)	119 (55.6%)
		Mild	30 (25.4%)	22 (22.9%)	52 (24.3%)
		Moderate	20 (16.9%)	18 (18.8%)	38 (17.8%)
		Severe	2 (1.7%)	3 (3.1%)	5 (2.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C5D1			N=101	N=79	N=180
		None	50 (49.5%)	37 (46.8%)	87 (48.3%)
		Mild	28 (27.7%)	30 (38.0%)	58 (32.2%)
		Moderate	21 (20.8%)	8 (10.1%)	29 (16.1%)
		Severe	2 (2.0%)	4 (5.1%)	6 (3.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C6D1			N=98	N=72	N=170
		None	55 (56.1%)	41 (56.9%)	96 (56.5%)
		Mild	28 (28.6%)	21 (29.2%)	49 (28.8%)
		Moderate	11 (11.2%)	9 (12.5%)	20 (11.8%)
		Severe	3 (3.1%)	1 (1.4%)	4 (2.4%)
		Very Severe	1 (1.0%)	0 (0.0%)	1 (0.6%)
C7D1			N=81	N=52	N=133
		None	52 (64.2%)	35 (67.3%)	87 (65.4%)
		Mild	13 (16.0%)	7 (13.5%)	20 (15.0%)
		Moderate	15 (18.5%)	8 (15.4%)	23 (17.3%)
		Severe	1 (1.2%)	1 (1.9%)	2 (1.5%)
		Very Severe	0 (0.0%)	1 (1.9%)	1 (0.8%)
C8D1			N=77	N=49	N=126
		None	43 (55.8%)	31 (63.3%)	74 (58.7%)
		Mild	19 (24.7%)	12 (24.5%)	31 (24.6%)
		Moderate	12 (15.6%)	5 (10.2%)	17 (13.5%)
		Severe	1 (1.3%)	1 (2.0%)	2 (1.6%)
		Very Severe	2 (2.6%)	0 (0.0%)	2 (1.6%)
C9D1			N=61	N=41	N=102
		None	33 (54.1%)	27 (65.9%)	60 (58.8%)
		Mild	20 (32.8%)	8 (19.5%)	28 (27.5%)
		Moderate	8 (13.1%)	3 (7.3%)	11 (10.8%)
		Severe	0 (0.0%)	3 (7.3%)	3 (2.9%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C10D1		N=54	N=29	N=83
		None	34 (63.0%)	15 (51.7%)	49 (59.0%)
		Mild	11 (20.4%)	8 (27.6%)	19 (22.9%)
		Moderate	8 (14.8%)	4 (13.8%)	12 (14.5%)
		Severe	1 (1.9%)	2 (6.9%)	3 (3.6%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C11D1		N=48	N=23	N=71
		None	31 (64.6%)	12 (52.2%)	43 (60.6%)
		Mild	11 (22.9%)	8 (34.8%)	19 (26.8%)
		Moderate	6 (12.5%)	3 (13.0%)	9 (12.7%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C12D1		N=42	N=19	N=61
		None	29 (69.0%)	13 (68.4%)	42 (68.9%)
		Mild	6 (14.3%)	4 (21.1%)	10 (16.4%)
		Moderate	5 (11.9%)	2 (10.5%)	7 (11.5%)
		Severe	2 (4.8%)	0 (0.0%)	2 (3.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C13D1		N=32	N=14	N=46
		None	18 (56.3%)	9 (64.3%)	27 (58.7%)
		Mild	8 (25.0%)	2 (14.3%)	10 (21.7%)
		Moderate	5 (15.6%)	3 (21.4%)	8 (17.4%)
		Severe	1 (3.1%)	0 (0.0%)	1 (2.2%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C14D1		N=34	N=13	N=47
		None	22 (64.7%)	4 (30.8%)	26 (55.3%)
		Mild	5 (14.7%)	6 (46.2%)	11 (23.4%)
		Moderate	6 (17.6%)	2 (15.4%)	8 (17.0%)
		Severe	1 (2.9%)	1 (7.7%)	2 (4.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=29	N=13	N=42
		None	20 (69.0%)	6 (46.2%)	26 (61.9%)
		Mild	7 (24.1%)	3 (23.1%)	10 (23.8%)
		Moderate	1 (3.4%)	2 (15.4%)	3 (7.1%)
		Severe	1 (3.4%)	2 (15.4%)	3 (7.1%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C16D1		N=28	N=11	N=39
		None	19 (67.9%)	5 (45.5%)	24 (61.5%)
		Mild	7 (25.0%)	2 (18.2%)	9 (23.1%)
		Moderate	2 (7.1%)	3 (27.3%)	5 (12.8%)
		Severe	0 (0.0%)	1 (9.1%)	1 (2.6%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=27	N=7	N=34
		None	20 (74.1%)	2 (28.6%)	22 (64.7%)
		Mild	3 (11.1%)	1 (14.3%)	4 (11.8%)
		Moderate	4 (14.8%)	4 (57.1%)	8 (23.5%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		None	16 (69.6%)	2 (28.6%)	18 (60.0%)
		Mild	3 (13.0%)	1 (14.3%)	4 (13.3%)
		Moderate	3 (13.0%)	4 (57.1%)	7 (23.3%)
		Severe	1 (4.3%)	0 (0.0%)	1 (3.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C19D1		N=21	N=5	N=26
		None	13 (61.9%)	1 (20.0%)	14 (53.8%)
		Mild	5 (23.8%)	3 (60.0%)	8 (30.8%)
		Moderate	2 (9.5%)	1 (20.0%)	3 (11.5%)
		Severe	1 (4.8%)	0 (0.0%)	1 (3.8%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=19	N=4	N=23
		None	15 (78.9%)	1 (25.0%)	16 (69.6%)
		Mild	2 (10.5%)	2 (50.0%)	4 (17.4%)
		Moderate	2 (10.5%)	1 (25.0%)	3 (13.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		None	15 (83.3%)	1 (25.0%)	16 (72.7%)
		Mild	3 (16.7%)	2 (50.0%)	5 (22.7%)
		Moderate	0 (0.0%)	1 (25.0%)	1 (4.5%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C22D1		N=14	N=3	N=17
		None	9 (64.3%)	1 (33.3%)	10 (58.8%)
		Mild	2 (14.3%)	1 (33.3%)	3 (17.6%)
		Moderate	3 (21.4%)	1 (33.3%)	4 (23.5%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		None	6 (60.0%)	1 (33.3%)	7 (53.8%)
		Mild	3 (30.0%)	1 (33.3%)	4 (30.8%)
		Moderate	1 (10.0%)	1 (33.3%)	2 (15.4%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		None	7 (70.0%)	1 (50.0%)	8 (66.7%)
		Mild	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Moderate	2 (20.0%)	1 (50.0%)	3 (25.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C25D1		N=8	N=0	N=8
		None	4 (50.0%)	0 (NE)	4 (50.0%)
		Mild	3 (37.5%)	0 (NE)	3 (37.5%)
		Moderate	1 (12.5%)	0 (NE)	1 (12.5%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		None	4 (50.0%)	1 (100.0%)	5 (55.6%)
		Mild	3 (37.5%)	0 (0.0%)	3 (33.3%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		None	5 (62.5%)	1 (100.0%)	6 (66.7%)
		Mild	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Moderate	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C28D1		N=7	N=1	N=8
		None	5 (71.4%)	1 (100.0%)	6 (75.0%)
		Mild	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Moderate	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		None	3 (75.0%)	0 (0.0%)	3 (60.0%)
		Mild	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		None	2 (50.0%)	1 (100.0%)	3 (60.0%)
		Mild	2 (50.0%)	0 (0.0%)	2 (40.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C31D1		N=2	N=1	N=3
		None	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		None	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		None	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C34D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		None	1 (50.0%)	0 (NE)	1 (50.0%)
		Mild	1 (50.0%)	0 (NE)	1 (50.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C40D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=128	N=127	N=255
		None	64 (50.0%)	66 (52.0%)	130 (51.0%)
		Mild	32 (25.0%)	33 (26.0%)	65 (25.5%)
		Moderate	21 (16.4%)	21 (16.5%)	42 (16.5%)
		Severe	10 (7.8%)	6 (4.7%)	16 (6.3%)
		Very Severe	1 (0.8%)	1 (0.8%)	2 (0.8%)
Long Term Follow-up			N=15	N=9	N=24
		None	8 (53.3%)	4 (44.4%)	12 (50.0%)
		Mild	5 (33.3%)	3 (33.3%)	8 (33.3%)
		Moderate	2 (13.3%)	0 (0.0%)	2 (8.3%)
		Severe	0 (0.0%)	1 (11.1%)	1 (4.2%)
		Very Severe	0 (0.0%)	1 (11.1%)	1 (4.2%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Abdominal Pain Interference	Baseline		N=173	N=176	N=349
		Not At All	126 (72.8%)	127 (72.2%)	253 (72.5%)
		A Little Bit	24 (13.9%)	36 (20.5%)	60 (17.2%)
		Somewhat	13 (7.5%)	8 (4.5%)	21 (6.0%)
		Quite A Bit	7 (4.0%)	3 (1.7%)	10 (2.9%)
		Very Much	3 (1.7%)	2 (1.1%)	5 (1.4%)
	C2D1		N=157	N=144	N=301
		Not At All	102 (65.0%)	104 (72.2%)	206 (68.4%)
		A Little Bit	35 (22.3%)	24 (16.7%)	59 (19.6%)
		Somewhat	12 (7.6%)	11 (7.6%)	23 (7.6%)
		Quite A Bit	7 (4.5%)	5 (3.5%)	12 (4.0%)
		Very Much	1 (0.6%)	0 (0.0%)	1 (0.3%)
	C3D1		N=131	N=104	N=235
		Not At All	98 (74.8%)	74 (71.2%)	172 (73.2%)
		A Little Bit	26 (19.8%)	20 (19.2%)	46 (19.6%)
		Somewhat	6 (4.6%)	9 (8.7%)	15 (6.4%)
		Quite A Bit	1 (0.8%)	1 (1.0%)	2 (0.9%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C4D1		N=115	N=95	N=210
		Not At All	88 (76.5%)	68 (71.6%)	156 (74.3%)
		A Little Bit	18 (15.7%)	19 (20.0%)	37 (17.6%)
		Somewhat	7 (6.1%)	6 (6.3%)	13 (6.2%)
		Quite A Bit	1 (0.9%)	2 (2.1%)	3 (1.4%)
		Very Much	1 (0.9%)	0 (0.0%)	1 (0.5%)
	C5D1		N=102	N=79	N=181
Not At All		74 (72.5%)	56 (70.9%)	130 (71.8%)	
A Little Bit		16 (15.7%)	14 (17.7%)	30 (16.6%)	
Somewhat		8 (7.8%)	7 (8.9%)	15 (8.3%)	
Quite A Bit		3 (2.9%)	2 (2.5%)	5 (2.8%)	
Very Much		1 (1.0%)	0 (0.0%)	1 (0.6%)	
C6D1		N=97	N=72	N=169	
	Not At All	72 (74.2%)	55 (76.4%)	127 (75.1%)	
	A Little Bit	16 (16.5%)	12 (16.7%)	28 (16.6%)	
	Somewhat	6 (6.2%)	4 (5.6%)	10 (5.9%)	
	Quite A Bit	2 (2.1%)	1 (1.4%)	3 (1.8%)	
	Very Much	1 (1.0%)	0 (0.0%)	1 (0.6%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C7D1		N=81	N=52	N=133
		Not At All	63 (77.8%)	40 (76.9%)	103 (77.4%)
		A Little Bit	10 (12.3%)	6 (11.5%)	16 (12.0%)
		Somewhat	6 (7.4%)	5 (9.6%)	11 (8.3%)
		Quite A Bit	1 (1.2%)	0 (0.0%)	1 (0.8%)
		Very Much	1 (1.2%)	1 (1.9%)	2 (1.5%)
	C8D1		N=78	N=48	N=126
		Not At All	57 (73.1%)	40 (83.3%)	97 (77.0%)
		A Little Bit	13 (16.7%)	6 (12.5%)	19 (15.1%)
		Somewhat	3 (3.8%)	1 (2.1%)	4 (3.2%)
		Quite A Bit	3 (3.8%)	1 (2.1%)	4 (3.2%)
		Very Much	2 (2.6%)	0 (0.0%)	2 (1.6%)
	C9D1		N=58	N=41	N=99
		Not At All	43 (74.1%)	32 (78.0%)	75 (75.8%)
		A Little Bit	13 (22.4%)	5 (12.2%)	18 (18.2%)
		Somewhat	2 (3.4%)	2 (4.9%)	4 (4.0%)
		Quite A Bit	0 (0.0%)	2 (4.9%)	2 (2.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C10D1		N=53	N=29	N=82
		Not At All	41 (77.4%)	22 (75.9%)	63 (76.8%)
		A Little Bit	7 (13.2%)	3 (10.3%)	10 (12.2%)
		Somewhat	3 (5.7%)	2 (6.9%)	5 (6.1%)
		Quite A Bit	2 (3.8%)	2 (6.9%)	4 (4.9%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C11D1		N=48	N=23	N=71
		Not At All	39 (81.3%)	18 (78.3%)	57 (80.3%)
		A Little Bit	6 (12.5%)	3 (13.0%)	9 (12.7%)
		Somewhat	3 (6.3%)	2 (8.7%)	5 (7.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C12D1		N=41	N=19	N=60
		Not At All	32 (78.0%)	17 (89.5%)	49 (81.7%)
		A Little Bit	5 (12.2%)	1 (5.3%)	6 (10.0%)
		Somewhat	3 (7.3%)	1 (5.3%)	4 (6.7%)
		Quite A Bit	1 (2.4%)	0 (0.0%)	1 (1.7%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C13D1		N=32	N=14	N=46
		Not At All	22 (68.8%)	10 (71.4%)	32 (69.6%)
		A Little Bit	9 (28.1%)	3 (21.4%)	12 (26.1%)
		Somewhat	1 (3.1%)	1 (7.1%)	2 (4.3%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C14D1		N=33	N=13	N=46
		Not At All	26 (78.8%)	8 (61.5%)	34 (73.9%)
		A Little Bit	4 (12.1%)	3 (23.1%)	7 (15.2%)
		Somewhat	2 (6.1%)	2 (15.4%)	4 (8.7%)
		Quite A Bit	1 (3.0%)	0 (0.0%)	1 (2.2%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=28	N=12	N=40
		Not At All	22 (78.6%)	6 (50.0%)	28 (70.0%)
		A Little Bit	4 (14.3%)	4 (33.3%)	8 (20.0%)
		Somewhat	1 (3.6%)	2 (16.7%)	3 (7.5%)
		Quite A Bit	1 (3.6%)	0 (0.0%)	1 (2.5%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C16D1		N=28	N=11	N=39
		Not At All	25 (89.3%)	5 (45.5%)	30 (76.9%)
		A Little Bit	2 (7.1%)	4 (36.4%)	6 (15.4%)
		Somewhat	1 (3.6%)	2 (18.2%)	3 (7.7%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=27	N=6	N=33
		Not At All	20 (74.1%)	3 (50.0%)	23 (69.7%)
		A Little Bit	4 (14.8%)	1 (16.7%)	5 (15.2%)
		Somewhat	3 (11.1%)	2 (33.3%)	5 (15.2%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		Not At All	17 (73.9%)	3 (42.9%)	20 (66.7%)
		A Little Bit	4 (17.4%)	0 (0.0%)	4 (13.3%)
		Somewhat	1 (4.3%)	4 (57.1%)	5 (16.7%)
		Quite A Bit	1 (4.3%)	0 (0.0%)	1 (3.3%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C19D1		N=20	N=5	N=25
		Not At All	16 (80.0%)	2 (40.0%)	18 (72.0%)
		A Little Bit	1 (5.0%)	3 (60.0%)	4 (16.0%)
		Somewhat	2 (10.0%)	0 (0.0%)	2 (8.0%)
		Quite A Bit	1 (5.0%)	0 (0.0%)	1 (4.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=19	N=4	N=23
		Not At All	17 (89.5%)	3 (75.0%)	20 (87.0%)
		A Little Bit	1 (5.3%)	1 (25.0%)	2 (8.7%)
		Somewhat	1 (5.3%)	0 (0.0%)	1 (4.3%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		Not At All	17 (94.4%)	2 (50.0%)	19 (86.4%)
		A Little Bit	1 (5.6%)	2 (50.0%)	3 (13.6%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C22D1		N=14	N=3	N=17
		Not At All	10 (71.4%)	1 (33.3%)	11 (64.7%)
		A Little Bit	2 (14.3%)	2 (66.7%)	4 (23.5%)
		Somewhat	2 (14.3%)	0 (0.0%)	2 (11.8%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		Not At All	9 (90.0%)	2 (66.7%)	11 (84.6%)
		A Little Bit	1 (10.0%)	1 (33.3%)	2 (15.4%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		Not At All	8 (80.0%)	1 (50.0%)	9 (75.0%)
		A Little Bit	2 (20.0%)	0 (0.0%)	2 (16.7%)
		Somewhat	0 (0.0%)	1 (50.0%)	1 (8.3%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C25D1		N=8	N=0	N=8
		Not At All	5 (62.5%)	0 (NE)	5 (62.5%)
		A Little Bit	2 (25.0%)	0 (NE)	2 (25.0%)
		Somewhat	1 (12.5%)	0 (NE)	1 (12.5%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		Not At All	5 (62.5%)	1 (100.0%)	6 (66.7%)
		A Little Bit	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Somewhat	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Quite A Bit	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		Not At All	6 (75.0%)	1 (100.0%)	7 (77.8%)
		A Little Bit	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C28D1		N=7	N=1	N=8
		Not At All	6 (85.7%)	1 (100.0%)	7 (87.5%)
		A Little Bit	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		Not At All	3 (75.0%)	0 (0.0%)	3 (60.0%)
		A Little Bit	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		Not At All	3 (75.0%)	1 (100.0%)	4 (80.0%)
		A Little Bit	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C31D1		N=2	N=1	N=3
		Not At All	2 (100.0%)	1 (100.0%)	3 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		Not At All	2 (100.0%)	1 (100.0%)	3 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		Not At All	3 (100.0%)	1 (100.0%)	4 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C34D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	1 (50.0%)	0 (NE)	1 (50.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C37D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C40D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Shortness of Breath Severity	C43D1		N=1	N=0	N=1	
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)	
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)	
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)	
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)	
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)	
	EOT			N=125	N=122	N=247
		Not At All	83 (66.4%)	79 (64.8%)	162 (65.6%)	
		A Little Bit	18 (14.4%)	26 (21.3%)	44 (17.8%)	
		Somewhat	15 (12.0%)	8 (6.6%)	23 (9.3%)	
		Quite A Bit	6 (4.8%)	7 (5.7%)	13 (5.3%)	
		Very Much	3 (2.4%)	2 (1.6%)	5 (2.0%)	
	Long Term Follow-up			N=15	N=9	N=24
		Not At All	12 (80.0%)	5 (55.6%)	17 (70.8%)	
		A Little Bit	1 (6.7%)	2 (22.2%)	3 (12.5%)	
		Somewhat	1 (6.7%)	0 (0.0%)	1 (4.2%)	
		Quite A Bit	1 (6.7%)	2 (22.2%)	3 (12.5%)	
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)	
Baseline			N=177	N=179	N=356	
	None	92 (52.0%)	90 (50.3%)	182 (51.1%)		
	Mild	54 (30.5%)	51 (28.5%)	105 (29.5%)		
	Moderate	20 (11.3%)	21 (11.7%)	41 (11.5%)		
	Severe	8 (4.5%)	13 (7.3%)	21 (5.9%)		
	Very Severe	3 (1.7%)	4 (2.2%)	7 (2.0%)		
C2D1			N=161	N=151	N=312	
	None	89 (55.3%)	70 (46.4%)	159 (51.0%)		
	Mild	44 (27.3%)	40 (26.5%)	84 (26.9%)		
	Moderate	18 (11.2%)	28 (18.5%)	46 (14.7%)		
	Severe	10 (6.2%)	10 (6.6%)	20 (6.4%)		
	Very Severe	0 (0.0%)	3 (2.0%)	3 (1.0%)		
C3D1			N=132	N=106	N=238	
	None	78 (59.1%)	49 (46.2%)	127 (53.4%)		
	Mild	33 (25.0%)	30 (28.3%)	63 (26.5%)		
	Moderate	16 (12.1%)	20 (18.9%)	36 (15.1%)		
	Severe	5 (3.8%)	6 (5.7%)	11 (4.6%)		
	Very Severe	0 (0.0%)	1 (0.9%)	1 (0.4%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C4D1			N=116	N=97	N=213
		None	67 (57.8%)	40 (41.2%)	107 (50.2%)
		Mild	29 (25.0%)	33 (34.0%)	62 (29.1%)
		Moderate	14 (12.1%)	20 (20.6%)	34 (16.0%)
		Severe	4 (3.4%)	4 (4.1%)	8 (3.8%)
		Very Severe	2 (1.7%)	0 (0.0%)	2 (0.9%)
C5D1			N=105	N=82	N=187
		None	60 (57.1%)	42 (51.2%)	102 (54.5%)
		Mild	24 (22.9%)	19 (23.2%)	43 (23.0%)
		Moderate	18 (17.1%)	17 (20.7%)	35 (18.7%)
		Severe	3 (2.9%)	4 (4.9%)	7 (3.7%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C6D1			N=100	N=73	N=173
		None	65 (65.0%)	38 (52.1%)	103 (59.5%)
		Mild	23 (23.0%)	21 (28.8%)	44 (25.4%)
		Moderate	11 (11.0%)	11 (15.1%)	22 (12.7%)
		Severe	1 (1.0%)	2 (2.7%)	3 (1.7%)
		Very Severe	0 (0.0%)	1 (1.4%)	1 (0.6%)
C7D1			N=85	N=56	N=141
		None	53 (62.4%)	31 (55.4%)	84 (59.6%)
		Mild	20 (23.5%)	16 (28.6%)	36 (25.5%)
		Moderate	9 (10.6%)	8 (14.3%)	17 (12.1%)
		Severe	3 (3.5%)	1 (1.8%)	4 (2.8%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C8D1			N=80	N=51	N=131
		None	52 (65.0%)	28 (54.9%)	80 (61.1%)
		Mild	13 (16.3%)	14 (27.5%)	27 (20.6%)
		Moderate	13 (16.3%)	5 (9.8%)	18 (13.7%)
		Severe	1 (1.3%)	4 (7.8%)	5 (3.8%)
		Very Severe	1 (1.3%)	0 (0.0%)	1 (0.8%)
C9D1			N=64	N=42	N=106
		None	40 (62.5%)	25 (59.5%)	65 (61.3%)
		Mild	19 (29.7%)	10 (23.8%)	29 (27.4%)
		Moderate	3 (4.7%)	5 (11.9%)	8 (7.5%)
		Severe	2 (3.1%)	2 (4.8%)	4 (3.8%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C10D1		N=56	N=31	N=87
		None	37 (66.1%)	16 (51.6%)	53 (60.9%)
		Mild	14 (25.0%)	11 (35.5%)	25 (28.7%)
		Moderate	3 (5.4%)	2 (6.5%)	5 (5.7%)
		Severe	1 (1.8%)	2 (6.5%)	3 (3.4%)
		Very Severe	1 (1.8%)	0 (0.0%)	1 (1.1%)
	C11D1		N=49	N=24	N=73
		None	26 (53.1%)	12 (50.0%)	38 (52.1%)
		Mild	18 (36.7%)	9 (37.5%)	27 (37.0%)
		Moderate	5 (10.2%)	3 (12.5%)	8 (11.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C12D1		N=43	N=20	N=63
		None	26 (60.5%)	9 (45.0%)	35 (55.6%)
		Mild	12 (27.9%)	10 (50.0%)	22 (34.9%)
		Moderate	4 (9.3%)	1 (5.0%)	5 (7.9%)
		Severe	1 (2.3%)	0 (0.0%)	1 (1.6%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C13D1		N=36	N=15	N=51
		None	20 (55.6%)	6 (40.0%)	26 (51.0%)
		Mild	10 (27.8%)	8 (53.3%)	18 (35.3%)
		Moderate	5 (13.9%)	1 (6.7%)	6 (11.8%)
		Severe	1 (2.8%)	0 (0.0%)	1 (2.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C14D1		N=35	N=13	N=48
		None	20 (57.1%)	8 (61.5%)	28 (58.3%)
		Mild	11 (31.4%)	4 (30.8%)	15 (31.3%)
		Moderate	4 (11.4%)	1 (7.7%)	5 (10.4%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=30	N=14	N=44
		None	17 (56.7%)	4 (28.6%)	21 (47.7%)
		Mild	8 (26.7%)	7 (50.0%)	15 (34.1%)
		Moderate	4 (13.3%)	2 (14.3%)	6 (13.6%)
		Severe	1 (3.3%)	1 (7.1%)	2 (4.5%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C16D1		N=30	N=11	N=41
		None	17 (56.7%)	4 (36.4%)	21 (51.2%)
		Mild	9 (30.0%)	5 (45.5%)	14 (34.1%)
		Moderate	4 (13.3%)	2 (18.2%)	6 (14.6%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=28	N=7	N=35
		None	16 (57.1%)	4 (57.1%)	20 (57.1%)
		Mild	8 (28.6%)	1 (14.3%)	9 (25.7%)
		Moderate	4 (14.3%)	2 (28.6%)	6 (17.1%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		None	13 (56.5%)	3 (42.9%)	16 (53.3%)
		Mild	8 (34.8%)	2 (28.6%)	10 (33.3%)
		Moderate	2 (8.7%)	2 (28.6%)	4 (13.3%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C19D1		N=21	N=6	N=27
		None	10 (47.6%)	1 (16.7%)	11 (40.7%)
		Mild	10 (47.6%)	4 (66.7%)	14 (51.9%)
		Moderate	1 (4.8%)	1 (16.7%)	2 (7.4%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=20	N=4	N=24
		None	10 (50.0%)	2 (50.0%)	12 (50.0%)
		Mild	9 (45.0%)	0 (0.0%)	9 (37.5%)
		Moderate	1 (5.0%)	2 (50.0%)	3 (12.5%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		None	9 (50.0%)	2 (50.0%)	11 (50.0%)
		Mild	8 (44.4%)	0 (0.0%)	8 (36.4%)
		Moderate	1 (5.6%)	2 (50.0%)	3 (13.6%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C22D1		N=15	N=3	N=18
		None	7 (46.7%)	1 (33.3%)	8 (44.4%)
		Mild	7 (46.7%)	0 (0.0%)	7 (38.9%)
		Moderate	1 (6.7%)	2 (66.7%)	3 (16.7%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		None	5 (50.0%)	1 (33.3%)	6 (46.2%)
		Mild	5 (50.0%)	1 (33.3%)	6 (46.2%)
		Moderate	0 (0.0%)	1 (33.3%)	1 (7.7%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		None	5 (50.0%)	1 (50.0%)	6 (50.0%)
		Mild	5 (50.0%)	0 (0.0%)	5 (41.7%)
		Moderate	0 (0.0%)	1 (50.0%)	1 (8.3%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C25D1		N=9	N=0	N=9
		None	5 (55.6%)	0 (NE)	5 (55.6%)
		Mild	4 (44.4%)	0 (NE)	4 (44.4%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		None	4 (50.0%)	1 (100.0%)	5 (55.6%)
		Mild	4 (50.0%)	0 (0.0%)	4 (44.4%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		None	4 (50.0%)	1 (100.0%)	5 (55.6%)
		Mild	3 (37.5%)	0 (0.0%)	3 (33.3%)
		Moderate	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C28D1		N=7	N=1	N=8
		None	3 (42.9%)	1 (100.0%)	4 (50.0%)
		Mild	4 (57.1%)	0 (0.0%)	4 (50.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		None	3 (75.0%)	1 (100.0%)	4 (80.0%)
		Mild	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Moderate	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		None	3 (75.0%)	0 (0.0%)	3 (60.0%)
		Mild	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C31D1		N=2	N=1	N=3
		None	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Mild	1 (50.0%)	1 (100.0%)	2 (66.7%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		None	2 (100.0%)	0 (0.0%)	2 (66.7%)
		Mild	0 (0.0%)	1 (100.0%)	1 (33.3%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		None	3 (100.0%)	0 (0.0%)	3 (75.0%)
		Mild	0 (0.0%)	1 (100.0%)	1 (25.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C34D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		None	1 (50.0%)	0 (NE)	1 (50.0%)
		Mild	1 (50.0%)	0 (NE)	1 (50.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C37D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C40D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=135	N=131	N=266
		None	64 (47.4%)	63 (48.1%)	127 (47.7%)
		Mild	43 (31.9%)	40 (30.5%)	83 (31.2%)
		Moderate	15 (11.1%)	14 (10.7%)	29 (10.9%)
		Severe	9 (6.7%)	11 (8.4%)	20 (7.5%)
		Very Severe	4 (3.0%)	3 (2.3%)	7 (2.6%)
Long Term Follow-up			N=15	N=9	N=24
		None	8 (53.3%)	3 (33.3%)	11 (45.8%)
		Mild	5 (33.3%)	4 (44.4%)	9 (37.5%)
		Moderate	2 (13.3%)	0 (0.0%)	2 (8.3%)
		Severe	0 (0.0%)	2 (22.2%)	2 (8.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Shortness of Breath Interference	Baseline		N=174	N=178	N=352	
		Not At All	109 (62.6%)	106 (59.6%)	215 (61.1%)	
		A Little Bit	42 (24.1%)	38 (21.3%)	80 (22.7%)	
		Somewhat	13 (7.5%)	17 (9.6%)	30 (8.5%)	
		Quite A Bit	5 (2.9%)	13 (7.3%)	18 (5.1%)	
	Very Much	5 (2.9%)	4 (2.2%)	9 (2.6%)		
	C2D1			N=159	N=147	N=306
		Not At All	102 (64.2%)	83 (56.5%)	185 (60.5%)	
		A Little Bit	31 (19.5%)	37 (25.2%)	68 (22.2%)	
		Somewhat	11 (6.9%)	11 (7.5%)	22 (7.2%)	
		Quite A Bit	11 (6.9%)	11 (7.5%)	22 (7.2%)	
	Very Much	4 (2.5%)	5 (3.4%)	9 (2.9%)		
	C3D1			N=130	N=103	N=233
		Not At All	85 (65.4%)	55 (53.4%)	140 (60.1%)	
		A Little Bit	30 (23.1%)	30 (29.1%)	60 (25.8%)	
		Somewhat	12 (9.2%)	10 (9.7%)	22 (9.4%)	
		Quite A Bit	3 (2.3%)	6 (5.8%)	9 (3.9%)	
	Very Much	0 (0.0%)	2 (1.9%)	2 (0.9%)		
	C4D1			N=113	N=94	N=207
		Not At All	73 (64.6%)	48 (51.1%)	121 (58.5%)	
A Little Bit		25 (22.1%)	24 (25.5%)	49 (23.7%)		
Somewhat		9 (8.0%)	18 (19.1%)	27 (13.0%)		
Quite A Bit		5 (4.4%)	4 (4.3%)	9 (4.3%)		
Very Much	1 (0.9%)	0 (0.0%)	1 (0.5%)			
C5D1			N=101	N=78	N=179	
	Not At All	68 (67.3%)	45 (57.7%)	113 (63.1%)		
	A Little Bit	22 (21.8%)	16 (20.5%)	38 (21.2%)		
	Somewhat	9 (8.9%)	14 (17.9%)	23 (12.8%)		
	Quite A Bit	2 (2.0%)	2 (2.6%)	4 (2.2%)		
Very Much	0 (0.0%)	1 (1.3%)	1 (0.6%)			
C6D1			N=96	N=70	N=166	
	Not At All	68 (70.8%)	38 (54.3%)	106 (63.9%)		
	A Little Bit	21 (21.9%)	22 (31.4%)	43 (25.9%)		
	Somewhat	5 (5.2%)	7 (10.0%)	12 (7.2%)		
	Quite A Bit	2 (2.1%)	2 (2.9%)	4 (2.4%)		
Very Much	0 (0.0%)	1 (1.4%)	1 (0.6%)			

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C7D1		N=82	N=50	N=132
		Not At All	59 (72.0%)	31 (62.0%)	90 (68.2%)
		A Little Bit	15 (18.3%)	13 (26.0%)	28 (21.2%)
		Somewhat	4 (4.9%)	5 (10.0%)	9 (6.8%)
		Quite A Bit	4 (4.9%)	1 (2.0%)	5 (3.8%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C8D1		N=78	N=46	N=124
		Not At All	55 (70.5%)	27 (58.7%)	82 (66.1%)
		A Little Bit	11 (14.1%)	12 (26.1%)	23 (18.5%)
		Somewhat	10 (12.8%)	4 (8.7%)	14 (11.3%)
		Quite A Bit	1 (1.3%)	3 (6.5%)	4 (3.2%)
		Very Much	1 (1.3%)	0 (0.0%)	1 (0.8%)
	C9D1		N=60	N=40	N=100
		Not At All	44 (73.3%)	26 (65.0%)	70 (70.0%)
		A Little Bit	11 (18.3%)	9 (22.5%)	20 (20.0%)
		Somewhat	2 (3.3%)	3 (7.5%)	5 (5.0%)
		Quite A Bit	1 (1.7%)	2 (5.0%)	3 (3.0%)
		Very Much	2 (3.3%)	0 (0.0%)	2 (2.0%)
	C10D1		N=51	N=29	N=80
		Not At All	37 (72.5%)	16 (55.2%)	53 (66.3%)
		A Little Bit	9 (17.6%)	10 (34.5%)	19 (23.8%)
		Somewhat	3 (5.9%)	2 (6.9%)	5 (6.3%)
		Quite A Bit	1 (2.0%)	1 (3.4%)	2 (2.5%)
		Very Much	1 (2.0%)	0 (0.0%)	1 (1.3%)
	C11D1		N=46	N=23	N=69
		Not At All	30 (65.2%)	13 (56.5%)	43 (62.3%)
		A Little Bit	13 (28.3%)	8 (34.8%)	21 (30.4%)
		Somewhat	2 (4.3%)	2 (8.7%)	4 (5.8%)
		Quite A Bit	1 (2.2%)	0 (0.0%)	1 (1.4%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C12D1		N=41	N=19	N=60
		Not At All	29 (70.7%)	11 (57.9%)	40 (66.7%)
		A Little Bit	7 (17.1%)	8 (42.1%)	15 (25.0%)
		Somewhat	4 (9.8%)	0 (0.0%)	4 (6.7%)
		Quite A Bit	1 (2.4%)	0 (0.0%)	1 (1.7%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C13D1		N=34	N=14	N=48
		Not At All	21 (61.8%)	5 (35.7%)	26 (54.2%)
		A Little Bit	10 (29.4%)	8 (57.1%)	18 (37.5%)
		Somewhat	1 (2.9%)	1 (7.1%)	2 (4.2%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	2 (5.9%)	0 (0.0%)	2 (4.2%)
	C14D1		N=34	N=13	N=47
		Not At All	23 (67.6%)	8 (61.5%)	31 (66.0%)
		A Little Bit	8 (23.5%)	4 (30.8%)	12 (25.5%)
		Somewhat	3 (8.8%)	1 (7.7%)	4 (8.5%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C15D1		N=29	N=13	N=42
		Not At All	18 (62.1%)	7 (53.8%)	25 (59.5%)
		A Little Bit	7 (24.1%)	3 (23.1%)	10 (23.8%)
		Somewhat	3 (10.3%)	1 (7.7%)	4 (9.5%)
		Quite A Bit	0 (0.0%)	2 (15.4%)	2 (4.8%)
		Very Much	1 (3.4%)	0 (0.0%)	1 (2.4%)
	C16D1		N=29	N=11	N=40
		Not At All	21 (72.4%)	5 (45.5%)	26 (65.0%)
		A Little Bit	7 (24.1%)	3 (27.3%)	10 (25.0%)
		Somewhat	1 (3.4%)	3 (27.3%)	4 (10.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C17D1		N=27	N=7	N=34
		Not At All	18 (66.7%)	4 (57.1%)	22 (64.7%)
		A Little Bit	6 (22.2%)	2 (28.6%)	8 (23.5%)
		Somewhat	3 (11.1%)	1 (14.3%)	4 (11.8%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		Not At All	14 (60.9%)	5 (71.4%)	19 (63.3%)
		A Little Bit	8 (34.8%)	1 (14.3%)	9 (30.0%)
		Somewhat	1 (4.3%)	1 (14.3%)	2 (6.7%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C19D1		N=20	N=5	N=25
		Not At All	14 (70.0%)	1 (20.0%)	15 (60.0%)
		A Little Bit	6 (30.0%)	3 (60.0%)	9 (36.0%)
		Somewhat	0 (0.0%)	1 (20.0%)	1 (4.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=19	N=4	N=23
		Not At All	12 (63.2%)	2 (50.0%)	14 (60.9%)
		A Little Bit	7 (36.8%)	2 (50.0%)	9 (39.1%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C21D1		N=18	N=4	N=22
		Not At All	10 (55.6%)	2 (50.0%)	12 (54.5%)
		A Little Bit	7 (38.9%)	2 (50.0%)	9 (40.9%)
		Somewhat	1 (5.6%)	0 (0.0%)	1 (4.5%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C22D1		N=14	N=3	N=17
		Not At All	8 (57.1%)	1 (33.3%)	9 (52.9%)
		A Little Bit	5 (35.7%)	2 (66.7%)	7 (41.2%)
		Somewhat	1 (7.1%)	0 (0.0%)	1 (5.9%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		Not At All	7 (70.0%)	1 (33.3%)	8 (61.5%)
		A Little Bit	3 (30.0%)	1 (33.3%)	4 (30.8%)
		Somewhat	0 (0.0%)	1 (33.3%)	1 (7.7%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C24D1		N=10	N=2	N=12
		Not At All	6 (60.0%)	1 (50.0%)	7 (58.3%)
		A Little Bit	3 (30.0%)	1 (50.0%)	4 (33.3%)
		Somewhat	1 (10.0%)	0 (0.0%)	1 (8.3%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C25D1		N=8	N=0	N=8
		Not At All	5 (62.5%)	0 (NE)	5 (62.5%)
		A Little Bit	3 (37.5%)	0 (NE)	3 (37.5%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		Not At All	5 (62.5%)	1 (100.0%)	6 (66.7%)
		A Little Bit	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Somewhat	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		Not At All	6 (75.0%)	1 (100.0%)	7 (77.8%)
		A Little Bit	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Somewhat	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C28D1		N=7	N=1	N=8
		Not At All	4 (57.1%)	1 (100.0%)	5 (62.5%)
		A Little Bit	2 (28.6%)	0 (0.0%)	2 (25.0%)
		Somewhat	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		Not At All	3 (75.0%)	1 (100.0%)	4 (80.0%)
		A Little Bit	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		Not At All	3 (75.0%)	0 (0.0%)	3 (60.0%)
		A Little Bit	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C31D1		N=2	N=1	N=3
		Not At All	2 (100.0%)	0 (0.0%)	2 (66.7%)
		A Little Bit	0 (0.0%)	1 (100.0%)	1 (33.3%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		Not At All	2 (100.0%)	1 (100.0%)	3 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		Not At All	3 (100.0%)	1 (100.0%)	4 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C34D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	1 (50.0%)	0 (NE)	1 (50.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	1 (50.0%)	0 (NE)	1 (50.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	1 (50.0%)	0 (NE)	1 (50.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
 Distribution of Responses to PRO-CTCAE Items by Visit  
 Safety Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C37D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	1 (50.0%)	0 (NE)	1 (50.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C40D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Hair Loss Amount	C43D1		N=1	N=0	N=1	
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)	
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)	
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)	
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)	
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)	
	EOT			N=126	N=127	N=253
		Not At All	71 (56.3%)	68 (53.5%)	139 (54.9%)	
		A Little Bit	30 (23.8%)	35 (27.6%)	65 (25.7%)	
		Somewhat	7 (5.6%)	13 (10.2%)	20 (7.9%)	
		Quite A Bit	14 (11.1%)	7 (5.5%)	21 (8.3%)	
		Very Much	4 (3.2%)	4 (3.1%)	8 (3.2%)	
	Long Term Follow-up			N=15	N=9	N=24
		Not At All	9 (60.0%)	5 (55.6%)	14 (58.3%)	
		A Little Bit	5 (33.3%)	2 (22.2%)	7 (29.2%)	
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)	
		Quite A Bit	1 (6.7%)	2 (22.2%)	3 (12.5%)	
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)	
Baseline			N=175	N=175	N=350	
	Not At All	137 (78.3%)	144 (82.3%)	281 (80.3%)		
	A Little Bit	22 (12.6%)	19 (10.9%)	41 (11.7%)		
	Somewhat	6 (3.4%)	6 (3.4%)	12 (3.4%)		
	Quite A Bit	2 (1.1%)	3 (1.7%)	5 (1.4%)		
	Very Much	8 (4.6%)	3 (1.7%)	11 (3.1%)		
C2D1			N=160	N=149	N=309	
	Not At All	18 (11.3%)	71 (47.7%)	89 (28.8%)		
	A Little Bit	12 (7.5%)	21 (14.1%)	33 (10.7%)		
	Somewhat	10 (6.3%)	16 (10.7%)	26 (8.4%)		
	Quite A Bit	28 (17.5%)	17 (11.4%)	45 (14.6%)		
	Very Much	92 (57.5%)	24 (16.1%)	116 (37.5%)		
C3D1			N=120	N=104	N=224	
	Not At All	54 (45.0%)	41 (39.4%)	95 (42.4%)		
	A Little Bit	15 (12.5%)	24 (23.1%)	39 (17.4%)		
	Somewhat	8 (6.7%)	15 (14.4%)	23 (10.3%)		
	Quite A Bit	10 (8.3%)	14 (13.5%)	24 (10.7%)		
	Very Much	33 (27.5%)	10 (9.6%)	43 (19.2%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C4D1		N=106	N=94	N=200
		Not At All	65 (61.3%)	45 (47.9%)	110 (55.0%)
		A Little Bit	12 (11.3%)	24 (25.5%)	36 (18.0%)
		Somewhat	3 (2.8%)	10 (10.6%)	13 (6.5%)
		Quite A Bit	2 (1.9%)	4 (4.3%)	6 (3.0%)
		Very Much	24 (22.6%)	11 (11.7%)	35 (17.5%)
	C5D1		N=91	N=79	N=170
		Not At All	62 (68.1%)	31 (39.2%)	93 (54.7%)
		A Little Bit	5 (5.5%)	26 (32.9%)	31 (18.2%)
		Somewhat	2 (2.2%)	15 (19.0%)	17 (10.0%)
		Quite A Bit	2 (2.2%)	3 (3.8%)	5 (2.9%)
		Very Much	20 (22.0%)	4 (5.1%)	24 (14.1%)
	C6D1		N=89	N=71	N=160
		Not At All	62 (69.7%)	37 (52.1%)	99 (61.9%)
		A Little Bit	4 (4.5%)	21 (29.6%)	25 (15.6%)
		Somewhat	4 (4.5%)	5 (7.0%)	9 (5.6%)
		Quite A Bit	1 (1.1%)	7 (9.9%)	8 (5.0%)
		Very Much	18 (20.2%)	1 (1.4%)	19 (11.9%)
	C7D1		N=74	N=56	N=130
		Not At All	55 (74.3%)	35 (62.5%)	90 (69.2%)
		A Little Bit	2 (2.7%)	14 (25.0%)	16 (12.3%)
		Somewhat	2 (2.7%)	4 (7.1%)	6 (4.6%)
		Quite A Bit	0 (0.0%)	2 (3.6%)	2 (1.5%)
		Very Much	15 (20.3%)	1 (1.8%)	16 (12.3%)
	C8D1		N=67	N=50	N=117
		Not At All	47 (70.1%)	34 (68.0%)	81 (69.2%)
		A Little Bit	2 (3.0%)	14 (28.0%)	16 (13.7%)
		Somewhat	2 (3.0%)	1 (2.0%)	3 (2.6%)
		Quite A Bit	1 (1.5%)	1 (2.0%)	2 (1.7%)
		Very Much	15 (22.4%)	0 (0.0%)	15 (12.8%)
	C9D1		N=51	N=42	N=93
		Not At All	37 (72.5%)	24 (57.1%)	61 (65.6%)
		A Little Bit	4 (7.8%)	13 (31.0%)	17 (18.3%)
		Somewhat	1 (2.0%)	3 (7.1%)	4 (4.3%)
		Quite A Bit	1 (2.0%)	2 (4.8%)	3 (3.2%)
		Very Much	8 (15.7%)	0 (0.0%)	8 (8.6%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C10D1		N=42	N=31	N=73
		Not At All	33 (78.6%)	17 (54.8%)	50 (68.5%)
		A Little Bit	0 (0.0%)	10 (32.3%)	10 (13.7%)
		Somewhat	2 (4.8%)	2 (6.5%)	4 (5.5%)
		Quite A Bit	0 (0.0%)	1 (3.2%)	1 (1.4%)
		Very Much	7 (16.7%)	1 (3.2%)	8 (11.0%)
	C11D1		N=34	N=24	N=58
		Not At All	25 (73.5%)	17 (70.8%)	42 (72.4%)
		A Little Bit	1 (2.9%)	5 (20.8%)	6 (10.3%)
		Somewhat	1 (2.9%)	0 (0.0%)	1 (1.7%)
		Quite A Bit	1 (2.9%)	2 (8.3%)	3 (5.2%)
		Very Much	6 (17.6%)	0 (0.0%)	6 (10.3%)
	C12D1		N=36	N=19	N=55
		Not At All	26 (72.2%)	11 (57.9%)	37 (67.3%)
		A Little Bit	2 (5.6%)	7 (36.8%)	9 (16.4%)
		Somewhat	1 (2.8%)	1 (5.3%)	2 (3.6%)
		Quite A Bit	1 (2.8%)	0 (0.0%)	1 (1.8%)
		Very Much	6 (16.7%)	0 (0.0%)	6 (10.9%)
	C13D1		N=29	N=14	N=43
		Not At All	21 (72.4%)	9 (64.3%)	30 (69.8%)
		A Little Bit	1 (3.4%)	4 (28.6%)	5 (11.6%)
		Somewhat	1 (3.4%)	1 (7.1%)	2 (4.7%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	6 (20.7%)	0 (0.0%)	6 (14.0%)
	C14D1		N=27	N=12	N=39
		Not At All	18 (66.7%)	9 (75.0%)	27 (69.2%)
		A Little Bit	0 (0.0%)	3 (25.0%)	3 (7.7%)
		Somewhat	2 (7.4%)	0 (0.0%)	2 (5.1%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	7 (25.9%)	0 (0.0%)	7 (17.9%)
	C15D1		N=24	N=12	N=36
		Not At All	18 (75.0%)	8 (66.7%)	26 (72.2%)
		A Little Bit	1 (4.2%)	4 (33.3%)	5 (13.9%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	5 (20.8%)	0 (0.0%)	5 (13.9%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C16D1		N=24	N=9	N=33
		Not At All	18 (75.0%)	6 (66.7%)	24 (72.7%)
		A Little Bit	1 (4.2%)	3 (33.3%)	4 (12.1%)
		Somewhat	1 (4.2%)	0 (0.0%)	1 (3.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	4 (16.7%)	0 (0.0%)	4 (12.1%)
	C17D1		N=24	N=6	N=30
		Not At All	17 (70.8%)	3 (50.0%)	20 (66.7%)
		A Little Bit	1 (4.2%)	2 (33.3%)	3 (10.0%)
		Somewhat	1 (4.2%)	0 (0.0%)	1 (3.3%)
		Quite A Bit	0 (0.0%)	1 (16.7%)	1 (3.3%)
		Very Much	5 (20.8%)	0 (0.0%)	5 (16.7%)
	C18D1		N=18	N=7	N=25
		Not At All	13 (72.2%)	5 (71.4%)	18 (72.0%)
		A Little Bit	0 (0.0%)	2 (28.6%)	2 (8.0%)
		Somewhat	1 (5.6%)	0 (0.0%)	1 (4.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	4 (22.2%)	0 (0.0%)	4 (16.0%)
	C19D1		N=17	N=6	N=23
		Not At All	11 (64.7%)	5 (83.3%)	16 (69.6%)
		A Little Bit	1 (5.9%)	1 (16.7%)	2 (8.7%)
		Somewhat	1 (5.9%)	0 (0.0%)	1 (4.3%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	4 (23.5%)	0 (0.0%)	4 (17.4%)
	C20D1		N=16	N=4	N=20
		Not At All	12 (75.0%)	3 (75.0%)	15 (75.0%)
		A Little Bit	1 (6.3%)	1 (25.0%)	2 (10.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	3 (18.8%)	0 (0.0%)	3 (15.0%)
	C21D1		N=15	N=4	N=19
		Not At All	11 (73.3%)	3 (75.0%)	14 (73.7%)
		A Little Bit	0 (0.0%)	1 (25.0%)	1 (5.3%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	4 (26.7%)	0 (0.0%)	4 (21.1%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C22D1		N=11	N=3	N=14
		Not At All	7 (63.6%)	3 (100.0%)	10 (71.4%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	1 (9.1%)	0 (0.0%)	1 (7.1%)
		Very Much	3 (27.3%)	0 (0.0%)	3 (21.4%)
	C23D1		N=9	N=3	N=12
		Not At All	7 (77.8%)	3 (100.0%)	10 (83.3%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	2 (22.2%)	0 (0.0%)	2 (16.7%)
	C24D1		N=9	N=2	N=11
		Not At All	8 (88.9%)	2 (100.0%)	10 (90.9%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (11.1%)	0 (0.0%)	1 (9.1%)
	C25D1		N=8	N=0	N=8
		Not At All	7 (87.5%)	0 (NE)	7 (87.5%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	1 (12.5%)	0 (NE)	1 (12.5%)
	C26D1		N=8	N=1	N=9
		Not At All	6 (75.0%)	1 (100.0%)	7 (77.8%)
		A Little Bit	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (12.5%)	0 (0.0%)	1 (11.1%)
	C27D1		N=6	N=1	N=7
		Not At All	5 (83.3%)	1 (100.0%)	6 (85.7%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (16.7%)	0 (0.0%)	1 (14.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C28D1		N=5	N=1	N=6
		Not At All	4 (80.0%)	1 (100.0%)	5 (83.3%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (20.0%)	0 (0.0%)	1 (16.7%)
	C29D1		N=4	N=1	N=5
		Not At All	3 (75.0%)	1 (100.0%)	4 (80.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (25.0%)	0 (0.0%)	1 (20.0%)
	C30D1		N=3	N=1	N=4
		Not At All	2 (66.7%)	1 (100.0%)	3 (75.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (33.3%)	0 (0.0%)	1 (25.0%)
	C31D1		N=2	N=1	N=3
		Not At All	2 (100.0%)	1 (100.0%)	3 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		Not At All	2 (100.0%)	1 (100.0%)	3 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		Not At All	3 (100.0%)	1 (100.0%)	4 (100.0%)
		A Little Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
 Distribution of Responses to PRO-CTCAE Items by Visit  
 Safety Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C34D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C37D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.  
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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C40D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C43D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	EOT		N=117	N=128	N=245
		Not At All	70 (59.8%)	77 (60.2%)	147 (60.0%)
		A Little Bit	7 (6.0%)	23 (18.0%)	30 (12.2%)
		Somewhat	6 (5.1%)	16 (12.5%)	22 (9.0%)
		Quite A Bit	6 (5.1%)	2 (1.6%)	8 (3.3%)
		Very Much	28 (23.9%)	10 (7.8%)	38 (15.5%)
	Long Term Follow-up		N=15	N=9	N=24
		Not At All	13 (86.7%)	6 (66.7%)	19 (79.2%)
		A Little Bit	0 (0.0%)	1 (11.1%)	1 (4.2%)
		Somewhat	0 (0.0%)	1 (11.1%)	1 (4.2%)
		Quite A Bit	1 (6.7%)	0 (0.0%)	1 (4.2%)
		Very Much	1 (6.7%)	1 (11.1%)	2 (8.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Fatigue Severity	Baseline		N=177	N=180	N=357
		None	39 (22.0%)	34 (18.9%)	73 (20.4%)
		Mild	67 (37.9%)	67 (37.2%)	134 (37.5%)
		Moderate	46 (26.0%)	56 (31.1%)	102 (28.6%)
		Severe	18 (10.2%)	19 (10.6%)	37 (10.4%)
		Very Severe	7 (4.0%)	4 (2.2%)	11 (3.1%)
	C2D1		N=161	N=150	N=311
		None	16 (9.9%)	13 (8.7%)	29 (9.3%)
		Mild	55 (34.2%)	54 (36.0%)	109 (35.0%)
		Moderate	51 (31.7%)	55 (36.7%)	106 (34.1%)
		Severe	32 (19.9%)	19 (12.7%)	51 (16.4%)
		Very Severe	7 (4.3%)	9 (6.0%)	16 (5.1%)
	C3D1		N=131	N=106	N=237
		None	16 (12.2%)	13 (12.3%)	29 (12.2%)
		Mild	58 (44.3%)	42 (39.6%)	100 (42.2%)
		Moderate	36 (27.5%)	35 (33.0%)	71 (30.0%)
		Severe	15 (11.5%)	14 (13.2%)	29 (12.2%)
		Very Severe	6 (4.6%)	2 (1.9%)	8 (3.4%)
	C4D1		N=118	N=97	N=215
		None	21 (17.8%)	18 (18.6%)	39 (18.1%)
		Mild	48 (40.7%)	35 (36.1%)	83 (38.6%)
Moderate		31 (26.3%)	32 (33.0%)	63 (29.3%)	
Severe		14 (11.9%)	9 (9.3%)	23 (10.7%)	
Very Severe		4 (3.4%)	3 (3.1%)	7 (3.3%)	
C5D1		N=104	N=82	N=186	
	None	24 (23.1%)	16 (19.5%)	40 (21.5%)	
	Mild	36 (34.6%)	31 (37.8%)	67 (36.0%)	
	Moderate	29 (27.9%)	25 (30.5%)	54 (29.0%)	
	Severe	14 (13.5%)	10 (12.2%)	24 (12.9%)	
	Very Severe	1 (1.0%)	0 (0.0%)	1 (0.5%)	
C6D1		N=102	N=73	N=175	
	None	27 (26.5%)	17 (23.3%)	44 (25.1%)	
	Mild	35 (34.3%)	25 (34.2%)	60 (34.3%)	
	Moderate	31 (30.4%)	23 (31.5%)	54 (30.9%)	
	Severe	6 (5.9%)	6 (8.2%)	12 (6.9%)	
	Very Severe	3 (2.9%)	2 (2.7%)	5 (2.9%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C7D1			N=84	N=54	N=138
		None	24 (28.6%)	11 (20.4%)	35 (25.4%)
		Mild	28 (33.3%)	28 (51.9%)	56 (40.6%)
		Moderate	18 (21.4%)	13 (24.1%)	31 (22.5%)
		Severe	11 (13.1%)	2 (3.7%)	13 (9.4%)
		Very Severe	3 (3.6%)	0 (0.0%)	3 (2.2%)
C8D1			N=80	N=51	N=131
		None	23 (28.8%)	8 (15.7%)	31 (23.7%)
		Mild	30 (37.5%)	26 (51.0%)	56 (42.7%)
		Moderate	17 (21.3%)	13 (25.5%)	30 (22.9%)
		Severe	6 (7.5%)	3 (5.9%)	9 (6.9%)
		Very Severe	4 (5.0%)	1 (2.0%)	5 (3.8%)
C9D1			N=64	N=42	N=106
		None	19 (29.7%)	9 (21.4%)	28 (26.4%)
		Mild	23 (35.9%)	14 (33.3%)	37 (34.9%)
		Moderate	14 (21.9%)	14 (33.3%)	28 (26.4%)
		Severe	4 (6.3%)	4 (9.5%)	8 (7.5%)
		Very Severe	4 (6.3%)	1 (2.4%)	5 (4.7%)
C10D1			N=56	N=31	N=87
		None	16 (28.6%)	2 (6.5%)	18 (20.7%)
		Mild	23 (41.1%)	13 (41.9%)	36 (41.4%)
		Moderate	10 (17.9%)	11 (35.5%)	21 (24.1%)
		Severe	6 (10.7%)	3 (9.7%)	9 (10.3%)
		Very Severe	1 (1.8%)	2 (6.5%)	3 (3.4%)
C11D1			N=49	N=24	N=73
		None	15 (30.6%)	5 (20.8%)	20 (27.4%)
		Mild	17 (34.7%)	8 (33.3%)	25 (34.2%)
		Moderate	12 (24.5%)	9 (37.5%)	21 (28.8%)
		Severe	5 (10.2%)	2 (8.3%)	7 (9.6%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
C12D1			N=43	N=20	N=63
		None	15 (34.9%)	3 (15.0%)	18 (28.6%)
		Mild	15 (34.9%)	13 (65.0%)	28 (44.4%)
		Moderate	10 (23.3%)	3 (15.0%)	13 (20.6%)
		Severe	3 (7.0%)	1 (5.0%)	4 (6.3%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C13D1			N=36	N=15	N=51
		None	9 (25.0%)	3 (20.0%)	12 (23.5%)
		Mild	16 (44.4%)	8 (53.3%)	24 (47.1%)
		Moderate	8 (22.2%)	2 (13.3%)	10 (19.6%)
		Severe	3 (8.3%)	0 (0.0%)	3 (5.9%)
		Very Severe	0 (0.0%)	2 (13.3%)	2 (3.9%)
C14D1			N=35	N=13	N=48
		None	8 (22.9%)	2 (15.4%)	10 (20.8%)
		Mild	15 (42.9%)	5 (38.5%)	20 (41.7%)
		Moderate	9 (25.7%)	4 (30.8%)	13 (27.1%)
		Severe	3 (8.6%)	1 (7.7%)	4 (8.3%)
		Very Severe	0 (0.0%)	1 (7.7%)	1 (2.1%)
C15D1			N=30	N=14	N=44
		None	7 (23.3%)	0 (0.0%)	7 (15.9%)
		Mild	11 (36.7%)	7 (50.0%)	18 (40.9%)
		Moderate	9 (30.0%)	5 (35.7%)	14 (31.8%)
		Severe	2 (6.7%)	1 (7.1%)	3 (6.8%)
		Very Severe	1 (3.3%)	1 (7.1%)	2 (4.5%)
C16D1			N=30	N=11	N=41
		None	11 (36.7%)	1 (9.1%)	12 (29.3%)
		Mild	9 (30.0%)	6 (54.5%)	15 (36.6%)
		Moderate	6 (20.0%)	3 (27.3%)	9 (22.0%)
		Severe	3 (10.0%)	0 (0.0%)	3 (7.3%)
		Very Severe	1 (3.3%)	1 (9.1%)	2 (4.9%)
C17D1			N=28	N=7	N=35
		None	8 (28.6%)	0 (0.0%)	8 (22.9%)
		Mild	12 (42.9%)	3 (42.9%)	15 (42.9%)
		Moderate	6 (21.4%)	2 (28.6%)	8 (22.9%)
		Severe	2 (7.1%)	1 (14.3%)	3 (8.6%)
		Very Severe	0 (0.0%)	1 (14.3%)	1 (2.9%)
C18D1			N=23	N=7	N=30
		None	7 (30.4%)	1 (14.3%)	8 (26.7%)
		Mild	10 (43.5%)	3 (42.9%)	13 (43.3%)
		Moderate	5 (21.7%)	2 (28.6%)	7 (23.3%)
		Severe	1 (4.3%)	0 (0.0%)	1 (3.3%)
		Very Severe	0 (0.0%)	1 (14.3%)	1 (3.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C19D1		N=21	N=6	N=27
		None	5 (23.8%)	0 (0.0%)	5 (18.5%)
		Mild	10 (47.6%)	3 (50.0%)	13 (48.1%)
		Moderate	4 (19.0%)	2 (33.3%)	6 (22.2%)
		Severe	2 (9.5%)	1 (16.7%)	3 (11.1%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=20	N=4	N=24
		None	5 (25.0%)	0 (0.0%)	5 (20.8%)
		Mild	11 (55.0%)	2 (50.0%)	13 (54.2%)
		Moderate	3 (15.0%)	2 (50.0%)	5 (20.8%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (5.0%)	0 (0.0%)	1 (4.2%)
	C21D1		N=18	N=4	N=22
		None	6 (33.3%)	0 (0.0%)	6 (27.3%)
		Mild	7 (38.9%)	1 (25.0%)	8 (36.4%)
		Moderate	4 (22.2%)	3 (75.0%)	7 (31.8%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (5.6%)	0 (0.0%)	1 (4.5%)
	C22D1		N=15	N=3	N=18
		None	4 (26.7%)	0 (0.0%)	4 (22.2%)
		Mild	8 (53.3%)	1 (33.3%)	9 (50.0%)
		Moderate	3 (20.0%)	2 (66.7%)	5 (27.8%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		None	2 (20.0%)	0 (0.0%)	2 (15.4%)
		Mild	4 (40.0%)	2 (66.7%)	6 (46.2%)
		Moderate	3 (30.0%)	1 (33.3%)	4 (30.8%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (10.0%)	0 (0.0%)	1 (7.7%)
	C24D1		N=10	N=2	N=12
		None	2 (20.0%)	1 (50.0%)	3 (25.0%)
		Mild	5 (50.0%)	0 (0.0%)	5 (41.7%)
		Moderate	2 (20.0%)	1 (50.0%)	3 (25.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	1 (10.0%)	0 (0.0%)	1 (8.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C25D1		N=9	N=0	N=9
		None	3 (33.3%)	0 (NE)	3 (33.3%)
		Mild	4 (44.4%)	0 (NE)	4 (44.4%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	2 (22.2%)	0 (NE)	2 (22.2%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		None	2 (25.0%)	1 (100.0%)	3 (33.3%)
		Mild	4 (50.0%)	0 (0.0%)	4 (44.4%)
		Moderate	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Severe	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		None	2 (25.0%)	1 (100.0%)	3 (33.3%)
		Mild	4 (50.0%)	0 (0.0%)	4 (44.4%)
		Moderate	2 (25.0%)	0 (0.0%)	2 (22.2%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C28D1		N=7	N=1	N=8
		None	2 (28.6%)	1 (100.0%)	3 (37.5%)
		Mild	3 (42.9%)	0 (0.0%)	3 (37.5%)
		Moderate	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Severe	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		None	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Mild	2 (50.0%)	1 (100.0%)	3 (60.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		None	2 (50.0%)	0 (0.0%)	2 (40.0%)
		Mild	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C31D1		N=2	N=1	N=3
		None	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Mild	1 (50.0%)	1 (100.0%)	2 (66.7%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		None	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Mild	2 (100.0%)	0 (0.0%)	2 (66.7%)
		Moderate	0 (0.0%)	1 (100.0%)	1 (33.3%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		None	2 (66.7%)	0 (0.0%)	2 (50.0%)
		Mild	1 (33.3%)	1 (100.0%)	2 (50.0%)
		Moderate	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C34D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		None	1 (50.0%)	0 (NE)	1 (50.0%)
		Mild	1 (50.0%)	0 (NE)	1 (50.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C37D1		N=3	N=0	N=3
		None	2 (66.7%)	0 (NE)	2 (66.7%)
		Mild	1 (33.3%)	0 (NE)	1 (33.3%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C40D1		N=2	N=0	N=2
		None	2 (100.0%)	0 (NE)	2 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=2	N=0	N=2
		None	0 (0.0%)	0 (NE)	0 (0.0%)
		Mild	1 (50.0%)	0 (NE)	1 (50.0%)
		Moderate	1 (50.0%)	0 (NE)	1 (50.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		None	1 (100.0%)	0 (NE)	1 (100.0%)
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Fatigue Interference	C43D1		N=1	N=0	N=1	
		None	1 (100.0%)	0 (NE)	1 (100.0%)	
		Mild	0 (0.0%)	0 (NE)	0 (0.0%)	
		Moderate	0 (0.0%)	0 (NE)	0 (0.0%)	
		Severe	0 (0.0%)	0 (NE)	0 (0.0%)	
		Very Severe	0 (0.0%)	0 (NE)	0 (0.0%)	
	EOT			N=135	N=132	N=267
		None	23 (17.0%)	22 (16.7%)	45 (16.9%)	
		Mild	38 (28.1%)	37 (28.0%)	75 (28.1%)	
		Moderate	41 (30.4%)	45 (34.1%)	86 (32.2%)	
		Severe	19 (14.1%)	20 (15.2%)	39 (14.6%)	
		Very Severe	14 (10.4%)	8 (6.1%)	22 (8.2%)	
	Long Term Follow-up			N=15	N=9	N=24
		None	2 (13.3%)	0 (0.0%)	2 (8.3%)	
		Mild	6 (40.0%)	4 (44.4%)	10 (41.7%)	
		Moderate	5 (33.3%)	3 (33.3%)	8 (33.3%)	
		Severe	2 (13.3%)	0 (0.0%)	2 (8.3%)	
		Very Severe	0 (0.0%)	2 (22.2%)	2 (8.3%)	
	Baseline			N=176	N=179	N=355
		Not At All	52 (29.5%)	53 (29.6%)	105 (29.6%)	
A Little Bit		65 (36.9%)	61 (34.1%)	126 (35.5%)		
Somewhat		34 (19.3%)	40 (22.3%)	74 (20.8%)		
Quite A Bit		19 (10.8%)	21 (11.7%)	40 (11.3%)		
Very Much		6 (3.4%)	4 (2.2%)	10 (2.8%)		
C2D1			N=159	N=147	N=306	
	Not At All	31 (19.5%)	34 (23.1%)	65 (21.2%)		
	A Little Bit	63 (39.6%)	48 (32.7%)	111 (36.3%)		
	Somewhat	24 (15.1%)	39 (26.5%)	63 (20.6%)		
	Quite A Bit	32 (20.1%)	15 (10.2%)	47 (15.4%)		
	Very Much	9 (5.7%)	11 (7.5%)	20 (6.5%)		
C3D1			N=132	N=106	N=238	
	Not At All	38 (28.8%)	30 (28.3%)	68 (28.6%)		
	A Little Bit	49 (37.1%)	40 (37.7%)	89 (37.4%)		
	Somewhat	23 (17.4%)	22 (20.8%)	45 (18.9%)		
	Quite A Bit	16 (12.1%)	12 (11.3%)	28 (11.8%)		
	Very Much	6 (4.5%)	2 (1.9%)	8 (3.4%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C4D1		N=117	N=96	N=213
		Not At All	38 (32.5%)	31 (32.3%)	69 (32.4%)
		A Little Bit	39 (33.3%)	34 (35.4%)	73 (34.3%)
		Somewhat	22 (18.8%)	18 (18.8%)	40 (18.8%)
		Quite A Bit	13 (11.1%)	10 (10.4%)	23 (10.8%)
		Very Much	5 (4.3%)	3 (3.1%)	8 (3.8%)
	C5D1		N=99	N=80	N=179
		Not At All	31 (31.3%)	25 (31.3%)	56 (31.3%)
		A Little Bit	35 (35.4%)	29 (36.3%)	64 (35.8%)
		Somewhat	17 (17.2%)	18 (22.5%)	35 (19.6%)
		Quite A Bit	12 (12.1%)	8 (10.0%)	20 (11.2%)
		Very Much	4 (4.0%)	0 (0.0%)	4 (2.2%)
	C6D1		N=97	N=73	N=170
		Not At All	35 (36.1%)	24 (32.9%)	59 (34.7%)
		A Little Bit	31 (32.0%)	24 (32.9%)	55 (32.4%)
		Somewhat	18 (18.6%)	12 (16.4%)	30 (17.6%)
		Quite A Bit	9 (9.3%)	12 (16.4%)	21 (12.4%)
		Very Much	4 (4.1%)	1 (1.4%)	5 (2.9%)
	C7D1		N=83	N=51	N=134
		Not At All	34 (41.0%)	19 (37.3%)	53 (39.6%)
		A Little Bit	23 (27.7%)	23 (45.1%)	46 (34.3%)
		Somewhat	15 (18.1%)	6 (11.8%)	21 (15.7%)
		Quite A Bit	9 (10.8%)	2 (3.9%)	11 (8.2%)
		Very Much	2 (2.4%)	1 (2.0%)	3 (2.2%)
	C8D1		N=79	N=50	N=129
		Not At All	31 (39.2%)	17 (34.0%)	48 (37.2%)
		A Little Bit	24 (30.4%)	21 (42.0%)	45 (34.9%)
		Somewhat	16 (20.3%)	5 (10.0%)	21 (16.3%)
		Quite A Bit	4 (5.1%)	6 (12.0%)	10 (7.8%)
		Very Much	4 (5.1%)	1 (2.0%)	5 (3.9%)
	C9D1		N=62	N=41	N=103
		Not At All	23 (37.1%)	13 (31.7%)	36 (35.0%)
		A Little Bit	20 (32.3%)	14 (34.1%)	34 (33.0%)
		Somewhat	12 (19.4%)	8 (19.5%)	20 (19.4%)
		Quite A Bit	3 (4.8%)	5 (12.2%)	8 (7.8%)
		Very Much	4 (6.5%)	1 (2.4%)	5 (4.9%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C10D1		N=54	N=29	N=83
		Not At All	24 (44.4%)	6 (20.7%)	30 (36.1%)
		A Little Bit	16 (29.6%)	15 (51.7%)	31 (37.3%)
		Somewhat	9 (16.7%)	2 (6.9%)	11 (13.3%)
		Quite A Bit	4 (7.4%)	5 (17.2%)	9 (10.8%)
		Very Much	1 (1.9%)	1 (3.4%)	2 (2.4%)
	C11D1		N=46	N=24	N=70
		Not At All	20 (43.5%)	7 (29.2%)	27 (38.6%)
		A Little Bit	14 (30.4%)	13 (54.2%)	27 (38.6%)
		Somewhat	6 (13.0%)	3 (12.5%)	9 (12.9%)
		Quite A Bit	5 (10.9%)	1 (4.2%)	6 (8.6%)
		Very Much	1 (2.2%)	0 (0.0%)	1 (1.4%)
	C12D1		N=39	N=20	N=59
		Not At All	16 (41.0%)	6 (30.0%)	22 (37.3%)
		A Little Bit	16 (41.0%)	11 (55.0%)	27 (45.8%)
		Somewhat	4 (10.3%)	2 (10.0%)	6 (10.2%)
		Quite A Bit	3 (7.7%)	1 (5.0%)	4 (6.8%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C13D1		N=35	N=15	N=50
		Not At All	11 (31.4%)	4 (26.7%)	15 (30.0%)
		A Little Bit	15 (42.9%)	8 (53.3%)	23 (46.0%)
		Somewhat	6 (17.1%)	1 (6.7%)	7 (14.0%)
		Quite A Bit	2 (5.7%)	0 (0.0%)	2 (4.0%)
		Very Much	1 (2.9%)	2 (13.3%)	3 (6.0%)
	C14D1		N=33	N=13	N=46
		Not At All	14 (42.4%)	2 (15.4%)	16 (34.8%)
		A Little Bit	11 (33.3%)	8 (61.5%)	19 (41.3%)
		Somewhat	6 (18.2%)	2 (15.4%)	8 (17.4%)
		Quite A Bit	2 (6.1%)	0 (0.0%)	2 (4.3%)
		Very Much	0 (0.0%)	1 (7.7%)	1 (2.2%)
	C15D1		N=29	N=14	N=43
		Not At All	7 (24.1%)	4 (28.6%)	11 (25.6%)
		A Little Bit	13 (44.8%)	5 (35.7%)	18 (41.9%)
		Somewhat	5 (17.2%)	3 (21.4%)	8 (18.6%)
		Quite A Bit	3 (10.3%)	1 (7.1%)	4 (9.3%)
		Very Much	1 (3.4%)	1 (7.1%)	2 (4.7%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C16D1		N=29	N=11	N=40
		Not At All	14 (48.3%)	2 (18.2%)	16 (40.0%)
		A Little Bit	6 (20.7%)	5 (45.5%)	11 (27.5%)
		Somewhat	7 (24.1%)	3 (27.3%)	10 (25.0%)
		Quite A Bit	1 (3.4%)	0 (0.0%)	1 (2.5%)
		Very Much	1 (3.4%)	1 (9.1%)	2 (5.0%)
	C17D1		N=26	N=7	N=33
		Not At All	7 (26.9%)	2 (28.6%)	9 (27.3%)
		A Little Bit	12 (46.2%)	2 (28.6%)	14 (42.4%)
		Somewhat	6 (23.1%)	2 (28.6%)	8 (24.2%)
		Quite A Bit	1 (3.8%)	1 (14.3%)	2 (6.1%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C18D1		N=23	N=7	N=30
		Not At All	8 (34.8%)	3 (42.9%)	11 (36.7%)
		A Little Bit	9 (39.1%)	2 (28.6%)	11 (36.7%)
		Somewhat	6 (26.1%)	1 (14.3%)	7 (23.3%)
		Quite A Bit	0 (0.0%)	1 (14.3%)	1 (3.3%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C19D1		N=21	N=5	N=26
		Not At All	7 (33.3%)	1 (20.0%)	8 (30.8%)
		A Little Bit	8 (38.1%)	2 (40.0%)	10 (38.5%)
		Somewhat	4 (19.0%)	2 (40.0%)	6 (23.1%)
		Quite A Bit	2 (9.5%)	0 (0.0%)	2 (7.7%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C20D1		N=18	N=4	N=22
		Not At All	6 (33.3%)	1 (25.0%)	7 (31.8%)
		A Little Bit	9 (50.0%)	1 (25.0%)	10 (45.5%)
		Somewhat	2 (11.1%)	2 (50.0%)	4 (18.2%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (5.6%)	0 (0.0%)	1 (4.5%)
	C21D1		N=18	N=4	N=22
		Not At All	8 (44.4%)	0 (0.0%)	8 (36.4%)
		A Little Bit	4 (22.2%)	3 (75.0%)	7 (31.8%)
		Somewhat	5 (27.8%)	1 (25.0%)	6 (27.3%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (5.6%)	0 (0.0%)	1 (4.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C22D1		N=15	N=3	N=18
		Not At All	7 (46.7%)	0 (0.0%)	7 (38.9%)
		A Little Bit	5 (33.3%)	3 (100.0%)	8 (44.4%)
		Somewhat	3 (20.0%)	0 (0.0%)	3 (16.7%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C23D1		N=10	N=3	N=13
		Not At All	5 (50.0%)	0 (0.0%)	5 (38.5%)
		A Little Bit	3 (30.0%)	3 (100.0%)	6 (46.2%)
		Somewhat	1 (10.0%)	0 (0.0%)	1 (7.7%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (10.0%)	0 (0.0%)	1 (7.7%)
	C24D1		N=10	N=2	N=12
		Not At All	3 (30.0%)	1 (50.0%)	4 (33.3%)
		A Little Bit	4 (40.0%)	0 (0.0%)	4 (33.3%)
		Somewhat	2 (20.0%)	1 (50.0%)	3 (25.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	1 (10.0%)	0 (0.0%)	1 (8.3%)
	C25D1		N=8	N=0	N=8
		Not At All	4 (50.0%)	0 (NE)	4 (50.0%)
		A Little Bit	2 (25.0%)	0 (NE)	2 (25.0%)
		Somewhat	1 (12.5%)	0 (NE)	1 (12.5%)
		Quite A Bit	1 (12.5%)	0 (NE)	1 (12.5%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C26D1		N=8	N=1	N=9
		Not At All	3 (37.5%)	1 (100.0%)	4 (44.4%)
		A Little Bit	3 (37.5%)	0 (0.0%)	3 (33.3%)
		Somewhat	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Quite A Bit	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C27D1		N=8	N=1	N=9
		Not At All	3 (37.5%)	1 (100.0%)	4 (44.4%)
		A Little Bit	4 (50.0%)	0 (0.0%)	4 (44.4%)
		Somewhat	1 (12.5%)	0 (0.0%)	1 (11.1%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C28D1		N=7	N=1	N=8
		Not At All	2 (28.6%)	1 (100.0%)	3 (37.5%)
		A Little Bit	4 (57.1%)	0 (0.0%)	4 (50.0%)
		Somewhat	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C29D1		N=4	N=1	N=5
		Not At All	1 (25.0%)	0 (0.0%)	1 (20.0%)
		A Little Bit	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Somewhat	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Quite A Bit	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C30D1		N=4	N=1	N=5
		Not At All	2 (50.0%)	0 (0.0%)	2 (40.0%)
		A Little Bit	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C31D1		N=2	N=1	N=3
		Not At All	1 (50.0%)	0 (0.0%)	1 (33.3%)
		A Little Bit	1 (50.0%)	1 (100.0%)	2 (66.7%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C32D1		N=2	N=1	N=3
		Not At All	0 (0.0%)	0 (0.0%)	0 (0.0%)
		A Little Bit	2 (100.0%)	0 (0.0%)	2 (66.7%)
		Somewhat	0 (0.0%)	1 (100.0%)	1 (33.3%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)
	C33D1		N=3	N=1	N=4
		Not At All	2 (66.7%)	0 (0.0%)	2 (50.0%)
		A Little Bit	1 (33.3%)	1 (100.0%)	2 (50.0%)
		Somewhat	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Very Much	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C34D1		N=1	N=0	N=1
		Not At All	0 (0.0%)	0 (NE)	0 (0.0%)
		A Little Bit	1 (100.0%)	0 (NE)	1 (100.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C35D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	1 (50.0%)	0 (NE)	1 (50.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C36D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	1 (50.0%)	0 (NE)	1 (50.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C37D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	1 (50.0%)	0 (NE)	1 (50.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C38D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C39D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.4  
Distribution of Responses to PRO-CTCAE Items by Visit  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	C40D1		N=2	N=0	N=2
		Not At All	2 (100.0%)	0 (NE)	2 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C41D1		N=2	N=0	N=2
		Not At All	1 (50.0%)	0 (NE)	1 (50.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	1 (50.0%)	0 (NE)	1 (50.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C42D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	C43D1		N=1	N=0	N=1
		Not At All	1 (100.0%)	0 (NE)	1 (100.0%)
		A Little Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Somewhat	0 (0.0%)	0 (NE)	0 (0.0%)
		Quite A Bit	0 (0.0%)	0 (NE)	0 (0.0%)
		Very Much	0 (0.0%)	0 (NE)	0 (0.0%)
	EOT		N=127	N=130	N=257
		Not At All	28 (22.0%)	33 (25.4%)	61 (23.7%)
		A Little Bit	34 (26.8%)	38 (29.2%)	72 (28.0%)
		Somewhat	35 (27.6%)	38 (29.2%)	73 (28.4%)
		Quite A Bit	13 (10.2%)	11 (8.5%)	24 (9.3%)
		Very Much	17 (13.4%)	10 (7.7%)	27 (10.5%)
	Long Term Follow-up		N=14	N=9	N=23
		Not At All	6 (42.9%)	1 (11.1%)	7 (30.4%)
		A Little Bit	4 (28.6%)	4 (44.4%)	8 (34.8%)
		Somewhat	2 (14.3%)	2 (22.2%)	4 (17.4%)
		Quite A Bit	2 (14.3%)	0 (0.0%)	2 (8.7%)
		Very Much	0 (0.0%)	2 (22.2%)	2 (8.7%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given scheduled visit. PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Decreased Appetite Severity	C2D1		N=150	N=142	N=292
		Worsened by ≥3 Categories	4 (2.7%)	2 (1.4%)	6 (2.1%)
		Worsened by 2 Categories	14 (9.3%)	15 (10.6%)	29 (9.9%)
		Worsened by 1 Category	24 (16.0%)	32 (22.5%)	56 (19.2%)
		No Change	83 (55.3%)	71 (50.0%)	154 (52.7%)
	Improved by ≥1 Categories	25 (16.7%)	22 (15.5%)	47 (16.1%)	
	C3D1		N=116	N=101	N=217
		Worsened by ≥3 Categories	3 (2.6%)	2 (2.0%)	5 (2.3%)
		Worsened by 2 Categories	9 (7.8%)	7 (6.9%)	16 (7.4%)
		Worsened by 1 Category	13 (11.2%)	17 (16.8%)	30 (13.8%)
		No Change	62 (53.4%)	48 (47.5%)	110 (50.7%)
	Improved by ≥1 Categories	29 (25.0%)	27 (26.7%)	56 (25.8%)	
	C4D1		N=106	N=92	N=198
		Worsened by ≥3 Categories	1 (0.9%)	1 (1.1%)	2 (1.0%)
		Worsened by 2 Categories	5 (4.7%)	6 (6.5%)	11 (5.6%)
		Worsened by 1 Category	23 (21.7%)	18 (19.6%)	41 (20.7%)
		No Change	50 (47.2%)	39 (42.4%)	89 (44.9%)
	Improved by ≥1 Categories	27 (25.5%)	28 (30.4%)	55 (27.8%)	
	C5D1		N=93	N=79	N=172
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
Worsened by 2 Categories		3 (3.2%)	7 (8.9%)	10 (5.8%)	
Worsened by 1 Category		18 (19.4%)	11 (13.9%)	29 (16.9%)	
No Change		46 (49.5%)	36 (45.6%)	82 (47.7%)	
Improved by ≥1 Categories	26 (28.0%)	25 (31.6%)	51 (29.7%)		
C6D1		N=90	N=70	N=160	
	Worsened by ≥3 Categories	1 (1.1%)	1 (1.4%)	2 (1.3%)	
	Worsened by 2 Categories	6 (6.7%)	4 (5.7%)	10 (6.3%)	
	Worsened by 1 Category	13 (14.4%)	14 (20.0%)	27 (16.9%)	
	No Change	46 (51.1%)	31 (44.3%)	77 (48.1%)	
Improved by ≥1 Categories	24 (26.7%)	20 (28.6%)	44 (27.5%)		
C7D1		N=75	N=53	N=128	
	Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)	
	Worsened by 2 Categories	2 (2.7%)	0 (0.0%)	2 (1.6%)	
	Worsened by 1 Category	8 (10.7%)	10 (18.9%)	18 (14.1%)	
	No Change	41 (54.7%)	20 (37.7%)	61 (47.7%)	
Improved by ≥1 Categories	24 (32.0%)	23 (43.4%)	47 (36.7%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C8D1			N=70	N=48	N=118
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (2.9%)	0 (0.0%)	2 (1.7%)
		Worsened by 1 Category	7 (10.0%)	8 (16.7%)	15 (12.7%)
		No Change	41 (58.6%)	20 (41.7%)	61 (51.7%)
		Improved by ≥1 Categories	20 (28.6%)	20 (41.7%)	40 (33.9%)
C9D1			N=57	N=40	N=97
		Worsened by ≥3 Categories	2 (3.5%)	0 (0.0%)	2 (2.1%)
		Worsened by 2 Categories	3 (5.3%)	2 (5.0%)	5 (5.2%)
		Worsened by 1 Category	6 (10.5%)	5 (12.5%)	11 (11.3%)
		No Change	30 (52.6%)	17 (42.5%)	47 (48.5%)
		Improved by ≥1 Categories	16 (28.1%)	16 (40.0%)	32 (33.0%)
C10D1			N=50	N=29	N=79
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.0%)	2 (6.9%)	3 (3.8%)
		Worsened by 1 Category	4 (8.0%)	4 (13.8%)	8 (10.1%)
		No Change	30 (60.0%)	10 (34.5%)	40 (50.6%)
		Improved by ≥1 Categories	15 (30.0%)	13 (44.8%)	28 (35.4%)
C11D1			N=43	N=23	N=66
		Worsened by ≥3 Categories	1 (2.3%)	0 (0.0%)	1 (1.5%)
		Worsened by 2 Categories	0 (0.0%)	1 (4.3%)	1 (1.5%)
		Worsened by 1 Category	6 (14.0%)	2 (8.7%)	8 (12.1%)
		No Change	21 (48.8%)	8 (34.8%)	29 (43.9%)
		Improved by ≥1 Categories	15 (34.9%)	12 (52.2%)	27 (40.9%)
C12D1			N=39	N=19	N=58
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.6%)	0 (0.0%)	1 (1.7%)
		Worsened by 1 Category	4 (10.3%)	1 (5.3%)	5 (8.6%)
		No Change	22 (56.4%)	10 (52.6%)	32 (55.2%)
		Improved by ≥1 Categories	12 (30.8%)	8 (42.1%)	20 (34.5%)
C13D1			N=31	N=14	N=45
		Worsened by ≥3 Categories	1 (3.2%)	0 (0.0%)	1 (2.2%)
		Worsened by 2 Categories	1 (3.2%)	0 (0.0%)	1 (2.2%)
		Worsened by 1 Category	4 (12.9%)	1 (7.1%)	5 (11.1%)
		No Change	16 (51.6%)	8 (57.1%)	24 (53.3%)
		Improved by ≥1 Categories	9 (29.0%)	5 (35.7%)	14 (31.1%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C14D1			N=31	N=12	N=43
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (3.2%)	0 (0.0%)	1 (2.3%)
		Worsened by 1 Category	4 (12.9%)	0 (0.0%)	4 (9.3%)
		No Change	18 (58.1%)	8 (66.7%)	26 (60.5%)
		Improved by ≥1 Categories	8 (25.8%)	4 (33.3%)	12 (27.9%)
C15D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (7.7%)	0 (0.0%)	2 (5.1%)
		Worsened by 1 Category	3 (11.5%)	1 (7.7%)	4 (10.3%)
		No Change	14 (53.8%)	7 (53.8%)	21 (53.8%)
		Improved by ≥1 Categories	7 (26.9%)	5 (38.5%)	12 (30.8%)
C16D1			N=26	N=10	N=36
		Worsened by ≥3 Categories	1 (3.8%)	0 (0.0%)	1 (2.8%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (11.5%)	1 (10.0%)	4 (11.1%)
		No Change	15 (57.7%)	5 (50.0%)	20 (55.6%)
		Improved by ≥1 Categories	7 (26.9%)	4 (40.0%)	11 (30.6%)
C17D1			N=24	N=7	N=31
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.2%)	0 (0.0%)	1 (3.2%)
		Worsened by 1 Category	1 (4.2%)	0 (0.0%)	1 (3.2%)
		No Change	15 (62.5%)	3 (42.9%)	18 (58.1%)
		Improved by ≥1 Categories	7 (29.2%)	4 (57.1%)	11 (35.5%)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (10.0%)	0 (0.0%)	2 (7.4%)
		Worsened by 1 Category	1 (5.0%)	0 (0.0%)	1 (3.7%)
		No Change	11 (55.0%)	5 (71.4%)	16 (59.3%)
		Improved by ≥1 Categories	6 (30.0%)	2 (28.6%)	8 (29.6%)
C19D1			N=19	N=6	N=25
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (10.5%)	1 (16.7%)	3 (12.0%)
		No Change	11 (57.9%)	3 (50.0%)	14 (56.0%)
		Improved by ≥1 Categories	6 (31.6%)	2 (33.3%)	8 (32.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C20D1			N=19	N=4	N=23
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (10.5%)	0 (0.0%)	2 (8.7%)
		No Change	11 (57.9%)	1 (25.0%)	12 (52.2%)
		Improved by ≥1 Categories	6 (31.6%)	3 (75.0%)	9 (39.1%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	11 (64.7%)	2 (50.0%)	13 (61.9%)
		Improved by ≥1 Categories	6 (35.3%)	2 (50.0%)	8 (38.1%)
C22D1			N=15	N=3	N=18
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (6.7%)	0 (0.0%)	1 (5.6%)
		No Change	11 (73.3%)	1 (33.3%)	12 (66.7%)
		Improved by ≥1 Categories	3 (20.0%)	2 (66.7%)	5 (27.8%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (8.3%)
		No Change	6 (66.7%)	1 (33.3%)	7 (58.3%)
		Improved by ≥1 Categories	2 (22.2%)	2 (66.7%)	4 (33.3%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (9.1%)
		No Change	7 (77.8%)	1 (50.0%)	8 (72.7%)
		Improved by ≥1 Categories	1 (11.1%)	1 (50.0%)	2 (18.2%)
C25D1			N=8	N=0	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (12.5%)	0 (NE)	1 (12.5%)
		No Change	5 (62.5%)	0 (NE)	5 (62.5%)
		Improved by ≥1 Categories	2 (25.0%)	0 (NE)	2 (25.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (71.4%)	1 (100.0%)	6 (75.0%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (85.7%)	1 (100.0%)	7 (87.5%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (83.3%)	1 (100.0%)	6 (85.7%)
		Improved by ≥1 Categories	1 (16.7%)	0 (0.0%)	1 (14.3%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (50.0%)	1 (100.0%)	3 (60.0%)
		Improved by ≥1 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (33.3%)
		No Change	2 (100.0%)	0 (0.0%)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	1 (100.0%)	2 (66.7%)
		No Change	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (25.0%)
		No Change	3 (100.0%)	0 (0.0%)	3 (75.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C34D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (33.3%)	0 (NE)	1 (33.3%)
		No Change	2 (66.7%)	0 (NE)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C38D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
EOT			N=124	N=123	N=247
		Worsened by ≥3 Categories	5 (4.0%)	5 (4.1%)	10 (4.0%)
		Worsened by 2 Categories	9 (7.3%)	17 (13.8%)	26 (10.5%)
		Worsened by 1 Category	23 (18.5%)	17 (13.8%)	40 (16.2%)
		No Change	65 (52.4%)	58 (47.2%)	123 (49.8%)
		Improved by ≥1 Categories	22 (17.7%)	26 (21.1%)	48 (19.4%)
Long Term Follow-up			N=14	N=9	N=23
		Worsened by ≥3 Categories	1 (7.1%)	2 (22.2%)	3 (13.0%)
		Worsened by 2 Categories	1 (7.1%)	1 (11.1%)	2 (8.7%)
		Worsened by 1 Category	1 (7.1%)	0 (0.0%)	1 (4.3%)
		No Change	9 (64.3%)	6 (66.7%)	15 (65.2%)
		Improved by ≥1 Categories	2 (14.3%)	0 (0.0%)	2 (8.7%)
Decreased Appetite Interference	C2D1		N=147	N=136	N=283
		Worsened by ≥3 Categories	2 (1.4%)	2 (1.5%)	4 (1.4%)
		Worsened by 2 Categories	7 (4.8%)	5 (3.7%)	12 (4.2%)
		Worsened by 1 Category	25 (17.0%)	24 (17.6%)	49 (17.3%)
		No Change	98 (66.7%)	88 (64.7%)	186 (65.7%)
		Improved by ≥1 Categories	15 (10.2%)	17 (12.5%)	32 (11.3%)
C3D1			N=112	N=98	N=210
		Worsened by ≥3 Categories	1 (0.9%)	1 (1.0%)	2 (1.0%)
		Worsened by 2 Categories	5 (4.5%)	5 (5.1%)	10 (4.8%)
		Worsened by 1 Category	9 (8.0%)	11 (11.2%)	20 (9.5%)
		No Change	81 (72.3%)	63 (64.3%)	144 (68.6%)
		Improved by ≥1 Categories	16 (14.3%)	18 (18.4%)	34 (16.2%)
C4D1			N=103	N=88	N=191
		Worsened by ≥3 Categories	2 (1.9%)	1 (1.1%)	3 (1.6%)
		Worsened by 2 Categories	1 (1.0%)	4 (4.5%)	5 (2.6%)
		Worsened by 1 Category	13 (12.6%)	14 (15.9%)	27 (14.1%)
		No Change	73 (70.9%)	53 (60.2%)	126 (66.0%)
		Improved by ≥1 Categories	14 (13.6%)	16 (18.2%)	30 (15.7%)
C5D1			N=90	N=73	N=163
		Worsened by ≥3 Categories	1 (1.1%)	0 (0.0%)	1 (0.6%)
		Worsened by 2 Categories	3 (3.3%)	4 (5.5%)	7 (4.3%)
		Worsened by 1 Category	11 (12.2%)	8 (11.0%)	19 (11.7%)
		No Change	58 (64.4%)	45 (61.6%)	103 (63.2%)
		Improved by ≥1 Categories	17 (18.9%)	16 (21.9%)	33 (20.2%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C6D1			N=84	N=64	N=148
		Worsened by ≥3 Categories	1 (1.2%)	2 (3.1%)	3 (2.0%)
		Worsened by 2 Categories	1 (1.2%)	4 (6.3%)	5 (3.4%)
		Worsened by 1 Category	14 (16.7%)	8 (12.5%)	22 (14.9%)
		No Change	55 (65.5%)	39 (60.9%)	94 (63.5%)
		Improved by ≥1 Categories	13 (15.5%)	11 (17.2%)	24 (16.2%)
C7D1			N=74	N=49	N=123
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (1.4%)	1 (2.0%)	2 (1.6%)
		Worsened by 1 Category	4 (5.4%)	5 (10.2%)	9 (7.3%)
		No Change	55 (74.3%)	34 (69.4%)	89 (72.4%)
		Improved by ≥1 Categories	14 (18.9%)	9 (18.4%)	23 (18.7%)
C8D1			N=67	N=43	N=110
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (1.5%)	0 (0.0%)	1 (0.9%)
		Worsened by 1 Category	4 (6.0%)	5 (11.6%)	9 (8.2%)
		No Change	51 (76.1%)	27 (62.8%)	78 (70.9%)
		Improved by ≥1 Categories	11 (16.4%)	11 (25.6%)	22 (20.0%)
C9D1			N=53	N=39	N=92
		Worsened by ≥3 Categories	1 (1.9%)	0 (0.0%)	1 (1.1%)
		Worsened by 2 Categories	1 (1.9%)	1 (2.6%)	2 (2.2%)
		Worsened by 1 Category	6 (11.3%)	5 (12.8%)	11 (12.0%)
		No Change	34 (64.2%)	24 (61.5%)	58 (63.0%)
		Improved by ≥1 Categories	11 (20.8%)	9 (23.1%)	20 (21.7%)
C10D1			N=47	N=28	N=75
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	3 (10.7%)	3 (4.0%)
		Worsened by 1 Category	5 (10.6%)	1 (3.6%)	6 (8.0%)
		No Change	33 (70.2%)	18 (64.3%)	51 (68.0%)
		Improved by ≥1 Categories	9 (19.1%)	6 (21.4%)	15 (20.0%)
C11D1			N=41	N=22	N=63
		Worsened by ≥3 Categories	1 (2.4%)	1 (4.5%)	2 (3.2%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	4 (9.8%)	1 (4.5%)	5 (7.9%)
		No Change	27 (65.9%)	16 (72.7%)	43 (68.3%)
		Improved by ≥1 Categories	9 (22.0%)	4 (18.2%)	13 (20.6%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C12D1			N=37	N=18	N=55
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.7%)	0 (0.0%)	1 (1.8%)
		Worsened by 1 Category	3 (8.1%)	1 (5.6%)	4 (7.3%)
		No Change	27 (73.0%)	13 (72.2%)	40 (72.7%)
		Improved by ≥1 Categories	6 (16.2%)	4 (22.2%)	10 (18.2%)
C13D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	1 (3.8%)	0 (0.0%)	1 (2.6%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (11.5%)	0 (0.0%)	3 (7.7%)
		No Change	18 (69.2%)	10 (76.9%)	28 (71.8%)
		Improved by ≥1 Categories	4 (15.4%)	3 (23.1%)	7 (17.9%)
C14D1			N=30	N=11	N=41
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	5 (16.7%)	1 (9.1%)	6 (14.6%)
		No Change	20 (66.7%)	7 (63.6%)	27 (65.9%)
		Improved by ≥1 Categories	5 (16.7%)	3 (27.3%)	8 (19.5%)
C15D1			N=25	N=11	N=36
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.0%)	0 (0.0%)	1 (2.8%)
		Worsened by 1 Category	2 (8.0%)	1 (9.1%)	3 (8.3%)
		No Change	18 (72.0%)	7 (63.6%)	25 (69.4%)
		Improved by ≥1 Categories	4 (16.0%)	3 (27.3%)	7 (19.4%)
C16D1			N=24	N=10	N=34
		Worsened by ≥3 Categories	1 (4.2%)	0 (0.0%)	1 (2.9%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (8.3%)	2 (20.0%)	4 (11.8%)
		No Change	16 (66.7%)	7 (70.0%)	23 (67.6%)
		Improved by ≥1 Categories	5 (20.8%)	1 (10.0%)	6 (17.6%)
C17D1			N=23	N=7	N=30
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.3%)	0 (0.0%)	1 (3.3%)
		Worsened by 1 Category	2 (8.7%)	1 (14.3%)	3 (10.0%)
		No Change	17 (73.9%)	5 (71.4%)	22 (73.3%)
		Improved by ≥1 Categories	3 (13.0%)	1 (14.3%)	4 (13.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (5.0%)	0 (0.0%)	1 (3.7%)
		Worsened by 1 Category	1 (5.0%)	1 (14.3%)	2 (7.4%)
		No Change	15 (75.0%)	6 (85.7%)	21 (77.8%)
	Improved by ≥1 Categories	3 (15.0%)	0 (0.0%)	3 (11.1%)	
C19D1			N=17	N=5	N=22
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.9%)	1 (20.0%)	2 (9.1%)
		No Change	13 (76.5%)	4 (80.0%)	17 (77.3%)
	Improved by ≥1 Categories	3 (17.6%)	0 (0.0%)	3 (13.6%)	
C20D1			N=18	N=4	N=22
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.6%)	0 (0.0%)	1 (4.5%)
		No Change	14 (77.8%)	3 (75.0%)	17 (77.3%)
	Improved by ≥1 Categories	3 (16.7%)	1 (25.0%)	4 (18.2%)	
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.9%)	1 (25.0%)	2 (9.5%)
		No Change	13 (76.5%)	2 (50.0%)	15 (71.4%)
	Improved by ≥1 Categories	3 (17.6%)	1 (25.0%)	4 (19.0%)	
C22D1			N=14	N=3	N=17
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	14 (100.0%)	3 (100.0%)	17 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)	
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (8.3%)
		No Change	8 (88.9%)	3 (100.0%)	11 (91.7%)
	Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)	

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	1 (11.1%)	0 (0.0%)	1 (9.1%)
		Worsened by 2 Categories	1 (11.1%)	0 (0.0%)	1 (9.1%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (9.1%)
		No Change	6 (66.7%)	2 (100.0%)	8 (72.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C25D1			N=7	N=0	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (14.3%)	0 (NE)	1 (14.3%)
		No Change	6 (85.7%)	0 (NE)	6 (85.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (85.7%)	1 (100.0%)	7 (87.5%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	7 (100.0%)	1 (100.0%)	8 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C28D1			N=5	N=1	N=6
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (100.0%)	1 (100.0%)	6 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=1	N=1	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (50.0%)
		No Change	1 (100.0%)	0 (0.0%)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	1 (100.0%)	2 (66.7%)
		No Change	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C34D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C36D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
C42D1			N=1	N=0	N=1	
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)	
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)	
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)		
C43D1			N=1	N=0	N=1	
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)	
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)	
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)		
EOT			N=115	N=116	N=231	
		Worsened by ≥3 Categories	5 (4.3%)	10 (8.6%)	15 (6.5%)	
		Worsened by 2 Categories	6 (5.2%)	5 (4.3%)	11 (4.8%)	
		Worsened by 1 Category	17 (14.8%)	15 (12.9%)	32 (13.9%)	
		No Change	71 (61.7%)	64 (55.2%)	135 (58.4%)	
	Improved by ≥1 Categories	16 (13.9%)	22 (19.0%)	38 (16.5%)		
Long Term Follow-up			N=13	N=9	N=22	
		Worsened by ≥3 Categories	0 (0.0%)	2 (22.2%)	2 (9.1%)	
		Worsened by 2 Categories	0 (0.0%)	1 (11.1%)	1 (4.5%)	
		Worsened by 1 Category	3 (23.1%)	0 (0.0%)	3 (13.6%)	
		No Change	8 (61.5%)	5 (55.6%)	13 (59.1%)	
	Improved by ≥1 Categories	2 (15.4%)	1 (11.1%)	3 (13.6%)		
Nausea Frequency	C2D1		N=150	N=143	N=293	
		Worsened by ≥3 Categories	0 (0.0%)	3 (2.1%)	3 (1.0%)	
		Worsened by 2 Categories	17 (11.3%)	13 (9.1%)	30 (10.2%)	
		Worsened by 1 Category	37 (24.7%)	26 (18.2%)	63 (21.5%)	
		No Change	80 (53.3%)	81 (56.6%)	161 (54.9%)	
		Improved by ≥1 Categories	16 (10.7%)	20 (14.0%)	36 (12.3%)	
	C3D1			N=115	N=101	N=216
		Worsened by ≥3 Categories	2 (1.7%)	3 (3.0%)	5 (2.3%)	
		Worsened by 2 Categories	11 (9.6%)	8 (7.9%)	19 (8.8%)	
		Worsened by 1 Category	23 (20.0%)	8 (7.9%)	31 (14.4%)	
No Change		65 (56.5%)	63 (62.4%)	128 (59.3%)		
	Improved by ≥1 Categories	14 (12.2%)	19 (18.8%)	33 (15.3%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C4D1			N=107	N=93	N=200
		Worsened by ≥3 Categories	1 (0.9%)	0 (0.0%)	1 (0.5%)
		Worsened by 2 Categories	8 (7.5%)	4 (4.3%)	12 (6.0%)
		Worsened by 1 Category	22 (20.6%)	10 (10.8%)	32 (16.0%)
		No Change	58 (54.2%)	57 (61.3%)	115 (57.5%)
	Improved by ≥1 Categories	18 (16.8%)	22 (23.7%)	40 (20.0%)	
C5D1			N=92	N=80	N=172
		Worsened by ≥3 Categories	1 (1.1%)	0 (0.0%)	1 (0.6%)
		Worsened by 2 Categories	7 (7.6%)	3 (3.8%)	10 (5.8%)
		Worsened by 1 Category	10 (10.9%)	12 (15.0%)	22 (12.8%)
		No Change	57 (62.0%)	52 (65.0%)	109 (63.4%)
	Improved by ≥1 Categories	17 (18.5%)	13 (16.3%)	30 (17.4%)	
C6D1			N=90	N=71	N=161
		Worsened by ≥3 Categories	0 (0.0%)	1 (1.4%)	1 (0.6%)
		Worsened by 2 Categories	8 (8.9%)	3 (4.2%)	11 (6.8%)
		Worsened by 1 Category	10 (11.1%)	10 (14.1%)	20 (12.4%)
		No Change	59 (65.6%)	41 (57.7%)	100 (62.1%)
	Improved by ≥1 Categories	13 (14.4%)	16 (22.5%)	29 (18.0%)	
C7D1			N=75	N=54	N=129
		Worsened by ≥3 Categories	1 (1.3%)	0 (0.0%)	1 (0.8%)
		Worsened by 2 Categories	5 (6.7%)	0 (0.0%)	5 (3.9%)
		Worsened by 1 Category	9 (12.0%)	5 (9.3%)	14 (10.9%)
		No Change	45 (60.0%)	38 (70.4%)	83 (64.3%)
	Improved by ≥1 Categories	15 (20.0%)	11 (20.4%)	26 (20.2%)	
C8D1			N=70	N=50	N=120
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (1.4%)	1 (2.0%)	2 (1.7%)
		Worsened by 1 Category	12 (17.1%)	5 (10.0%)	17 (14.2%)
		No Change	42 (60.0%)	33 (66.0%)	75 (62.5%)
	Improved by ≥1 Categories	15 (21.4%)	11 (22.0%)	26 (21.7%)	
C9D1			N=57	N=41	N=98
		Worsened by ≥3 Categories	1 (1.8%)	0 (0.0%)	1 (1.0%)
		Worsened by 2 Categories	2 (3.5%)	0 (0.0%)	2 (2.0%)
		Worsened by 1 Category	7 (12.3%)	3 (7.3%)	10 (10.2%)
		No Change	36 (63.2%)	32 (78.0%)	68 (69.4%)
	Improved by ≥1 Categories	11 (19.3%)	6 (14.6%)	17 (17.3%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C10D1			N=50	N=30	N=80
		Worsened by ≥3 Categories	1 (2.0%)	0 (0.0%)	1 (1.3%)
		Worsened by 2 Categories	2 (4.0%)	1 (3.3%)	3 (3.8%)
		Worsened by 1 Category	5 (10.0%)	3 (10.0%)	8 (10.0%)
		No Change	33 (66.0%)	19 (63.3%)	52 (65.0%)
		Improved by ≥1 Categories	9 (18.0%)	7 (23.3%)	16 (20.0%)
C11D1			N=43	N=23	N=66
		Worsened by ≥3 Categories	1 (2.3%)	0 (0.0%)	1 (1.5%)
		Worsened by 2 Categories	2 (4.7%)	0 (0.0%)	2 (3.0%)
		Worsened by 1 Category	3 (7.0%)	4 (17.4%)	7 (10.6%)
		No Change	32 (74.4%)	15 (65.2%)	47 (71.2%)
		Improved by ≥1 Categories	5 (11.6%)	4 (17.4%)	9 (13.6%)
C12D1			N=39	N=19	N=58
		Worsened by ≥3 Categories	1 (2.6%)	0 (0.0%)	1 (1.7%)
		Worsened by 2 Categories	2 (5.1%)	1 (5.3%)	3 (5.2%)
		Worsened by 1 Category	7 (17.9%)	0 (0.0%)	7 (12.1%)
		No Change	23 (59.0%)	14 (73.7%)	37 (63.8%)
		Improved by ≥1 Categories	6 (15.4%)	4 (21.1%)	10 (17.2%)
C13D1			N=31	N=14	N=45
		Worsened by ≥3 Categories	1 (3.2%)	0 (0.0%)	1 (2.2%)
		Worsened by 2 Categories	4 (12.9%)	1 (7.1%)	5 (11.1%)
		Worsened by 1 Category	3 (9.7%)	2 (14.3%)	5 (11.1%)
		No Change	19 (61.3%)	10 (71.4%)	29 (64.4%)
		Improved by ≥1 Categories	4 (12.9%)	1 (7.1%)	5 (11.1%)
C14D1			N=31	N=12	N=43
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (9.7%)	2 (16.7%)	5 (11.6%)
		Worsened by 1 Category	4 (12.9%)	2 (16.7%)	6 (14.0%)
		No Change	20 (64.5%)	8 (66.7%)	28 (65.1%)
		Improved by ≥1 Categories	4 (12.9%)	0 (0.0%)	4 (9.3%)
C15D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (7.7%)	0 (0.0%)	2 (5.1%)
		Worsened by 1 Category	1 (3.8%)	2 (15.4%)	3 (7.7%)
		No Change	17 (65.4%)	10 (76.9%)	27 (69.2%)
		Improved by ≥1 Categories	6 (23.1%)	1 (7.7%)	7 (17.9%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C16D1			N=26	N=10	N=36
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (10.0%)	1 (2.8%)
		Worsened by 1 Category	6 (23.1%)	2 (20.0%)	8 (22.2%)
		No Change	17 (65.4%)	6 (60.0%)	23 (63.9%)
		Improved by ≥1 Categories	3 (11.5%)	1 (10.0%)	4 (11.1%)
C17D1			N=24	N=7	N=31
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.2%)	0 (0.0%)	1 (3.2%)
		Worsened by 1 Category	3 (12.5%)	0 (0.0%)	3 (9.7%)
		No Change	18 (75.0%)	7 (100.0%)	25 (80.6%)
		Improved by ≥1 Categories	2 (8.3%)	0 (0.0%)	2 (6.5%)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (14.3%)	1 (3.7%)
		Worsened by 1 Category	4 (20.0%)	0 (0.0%)	4 (14.8%)
		No Change	13 (65.0%)	5 (71.4%)	18 (66.7%)
		Improved by ≥1 Categories	3 (15.0%)	1 (14.3%)	4 (14.8%)
C19D1			N=18	N=6	N=24
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.6%)	1 (16.7%)	2 (8.3%)
		No Change	13 (72.2%)	5 (83.3%)	18 (75.0%)
		Improved by ≥1 Categories	4 (22.2%)	0 (0.0%)	4 (16.7%)
C20D1			N=19	N=4	N=23
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.3%)	0 (0.0%)	1 (4.3%)
		No Change	15 (78.9%)	4 (100.0%)	19 (82.6%)
		Improved by ≥1 Categories	3 (15.8%)	0 (0.0%)	3 (13.0%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (25.0%)	1 (4.8%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	13 (76.5%)	3 (75.0%)	16 (76.2%)
		Improved by ≥1 Categories	4 (23.5%)	0 (0.0%)	4 (19.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C22D1			N=15	N=3	N=18
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (6.7%)	1 (33.3%)	2 (11.1%)
		No Change	11 (73.3%)	2 (66.7%)	13 (72.2%)
		Improved by ≥1 Categories	3 (20.0%)	0 (0.0%)	3 (16.7%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (11.1%)	0 (0.0%)	1 (8.3%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	8 (88.9%)	3 (100.0%)	11 (91.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (33.3%)	1 (50.0%)	4 (36.4%)
		No Change	6 (66.7%)	1 (50.0%)	7 (63.6%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C25D1			N=8	N=0	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	1 (12.5%)	0 (NE)	1 (12.5%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	6 (75.0%)	0 (NE)	6 (75.0%)
		Improved by ≥1 Categories	1 (12.5%)	0 (NE)	1 (12.5%)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (85.7%)	1 (100.0%)	7 (87.5%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	7 (100.0%)	1 (100.0%)	8 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (100.0%)	1 (100.0%)	7 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C34D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (33.3%)	0 (NE)	1 (33.3%)
		No Change	2 (66.7%)	0 (NE)	2 (66.7%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
C36D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
C37D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
C38D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=124	N=124	N=248
		Worsened by ≥3 Categories	0 (0.0%)	3 (2.4%)	3 (1.2%)
		Worsened by 2 Categories	11 (8.9%)	4 (3.2%)	15 (6.0%)
		Worsened by 1 Category	21 (16.9%)	22 (17.7%)	43 (17.3%)
		No Change	68 (54.8%)	74 (59.7%)	142 (57.3%)
		Improved by ≥1 Categories	24 (19.4%)	21 (16.9%)	45 (18.1%)
Long Term Follow-up			N=14	N=9	N=23
		Worsened by ≥3 Categories	0 (0.0%)	1 (11.1%)	1 (4.3%)
		Worsened by 2 Categories	0 (0.0%)	2 (22.2%)	2 (8.7%)
		Worsened by 1 Category	1 (7.1%)	1 (11.1%)	2 (8.7%)
		No Change	12 (85.7%)	2 (22.2%)	14 (60.9%)
		Improved by ≥1 Categories	1 (7.1%)	3 (33.3%)	4 (17.4%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
Nausea Severity	C2D1		N=143	N=129	N=272	
		Worsened by ≥3 Categories	2 (1.4%)	0 (0.0%)	2 (0.7%)	
		Worsened by 2 Categories	8 (5.6%)	10 (7.8%)	18 (6.6%)	
		Worsened by 1 Category	33 (23.1%)	22 (17.1%)	55 (20.2%)	
		No Change	85 (59.4%)	80 (62.0%)	165 (60.7%)	
	Improved by ≥1 Categories	15 (10.5%)	17 (13.2%)	32 (11.8%)		
	C3D1			N=111	N=93	N=204
		Worsened by ≥3 Categories	2 (1.8%)	2 (2.2%)	4 (2.0%)	
		Worsened by 2 Categories	4 (3.6%)	4 (4.3%)	8 (3.9%)	
		Worsened by 1 Category	21 (18.9%)	12 (12.9%)	33 (16.2%)	
		No Change	71 (64.0%)	59 (63.4%)	130 (63.7%)	
	Improved by ≥1 Categories	13 (11.7%)	16 (17.2%)	29 (14.2%)		
	C4D1			N=98	N=89	N=187
		Worsened by ≥3 Categories	2 (2.0%)	2 (2.2%)	4 (2.1%)	
		Worsened by 2 Categories	4 (4.1%)	4 (4.5%)	8 (4.3%)	
		Worsened by 1 Category	21 (21.4%)	4 (4.5%)	25 (13.4%)	
		No Change	56 (57.1%)	63 (70.8%)	119 (63.6%)	
	Improved by ≥1 Categories	15 (15.3%)	16 (18.0%)	31 (16.6%)		
	C5D1			N=87	N=71	N=158
		Worsened by ≥3 Categories	1 (1.1%)	0 (0.0%)	1 (0.6%)	
Worsened by 2 Categories		4 (4.6%)	0 (0.0%)	4 (2.5%)		
Worsened by 1 Category		13 (14.9%)	12 (16.9%)	25 (15.8%)		
No Change		56 (64.4%)	44 (62.0%)	100 (63.3%)		
Improved by ≥1 Categories	13 (14.9%)	15 (21.1%)	28 (17.7%)			
C6D1			N=80	N=64	N=144	
	Worsened by ≥3 Categories	0 (0.0%)	1 (1.6%)	1 (0.7%)		
	Worsened by 2 Categories	2 (2.5%)	0 (0.0%)	2 (1.4%)		
	Worsened by 1 Category	14 (17.5%)	8 (12.5%)	22 (15.3%)		
	No Change	54 (67.5%)	38 (59.4%)	92 (63.9%)		
Improved by ≥1 Categories	10 (12.5%)	17 (26.6%)	27 (18.8%)			
C7D1			N=69	N=47	N=116	
	Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)		
	Worsened by 2 Categories	4 (5.8%)	0 (0.0%)	4 (3.4%)		
	Worsened by 1 Category	10 (14.5%)	2 (4.3%)	12 (10.3%)		
	No Change	41 (59.4%)	36 (76.6%)	77 (66.4%)		
Improved by ≥1 Categories	14 (20.3%)	9 (19.1%)	23 (19.8%)			

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C8D1			N=64	N=43	N=107
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (1.6%)	1 (2.3%)	2 (1.9%)
		Worsened by 1 Category	10 (15.6%)	4 (9.3%)	14 (13.1%)
		No Change	42 (65.6%)	27 (62.8%)	69 (64.5%)
		Improved by ≥1 Categories	11 (17.2%)	11 (25.6%)	22 (20.6%)
C9D1			N=52	N=38	N=90
		Worsened by ≥3 Categories	1 (1.9%)	0 (0.0%)	1 (1.1%)
		Worsened by 2 Categories	1 (1.9%)	1 (2.6%)	2 (2.2%)
		Worsened by 1 Category	6 (11.5%)	2 (5.3%)	8 (8.9%)
		No Change	35 (67.3%)	29 (76.3%)	64 (71.1%)
		Improved by ≥1 Categories	9 (17.3%)	6 (15.8%)	15 (16.7%)
C10D1			N=47	N=28	N=75
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.1%)	0 (0.0%)	1 (1.3%)
		Worsened by 1 Category	6 (12.8%)	3 (10.7%)	9 (12.0%)
		No Change	34 (72.3%)	20 (71.4%)	54 (72.0%)
		Improved by ≥1 Categories	6 (12.8%)	5 (17.9%)	11 (14.7%)
C11D1			N=41	N=23	N=64
		Worsened by ≥3 Categories	1 (2.4%)	0 (0.0%)	1 (1.6%)
		Worsened by 2 Categories	1 (2.4%)	0 (0.0%)	1 (1.6%)
		Worsened by 1 Category	4 (9.8%)	2 (8.7%)	6 (9.4%)
		No Change	31 (75.6%)	17 (73.9%)	48 (75.0%)
		Improved by ≥1 Categories	4 (9.8%)	4 (17.4%)	8 (12.5%)
C12D1			N=36	N=18	N=54
		Worsened by ≥3 Categories	1 (2.8%)	0 (0.0%)	1 (1.9%)
		Worsened by 2 Categories	1 (2.8%)	1 (5.6%)	2 (3.7%)
		Worsened by 1 Category	4 (11.1%)	0 (0.0%)	4 (7.4%)
		No Change	26 (72.2%)	13 (72.2%)	39 (72.2%)
		Improved by ≥1 Categories	4 (11.1%)	4 (22.2%)	8 (14.8%)
C13D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	1 (3.8%)	0 (0.0%)	1 (2.6%)
		Worsened by 2 Categories	2 (7.7%)	0 (0.0%)	2 (5.1%)
		Worsened by 1 Category	3 (11.5%)	1 (7.7%)	4 (10.3%)
		No Change	18 (69.2%)	11 (84.6%)	29 (74.4%)
		Improved by ≥1 Categories	2 (7.7%)	1 (7.7%)	3 (7.7%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C14D1			N=30	N=12	N=42
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (3.3%)	0 (0.0%)	1 (2.4%)
		Worsened by 1 Category	3 (10.0%)	2 (16.7%)	5 (11.9%)
		No Change	23 (76.7%)	10 (83.3%)	33 (78.6%)
		Improved by ≥1 Categories	3 (10.0%)	0 (0.0%)	3 (7.1%)
C15D1			N=25	N=12	N=37
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.0%)	0 (0.0%)	1 (2.7%)
		Worsened by 1 Category	2 (8.0%)	1 (8.3%)	3 (8.1%)
		No Change	19 (76.0%)	9 (75.0%)	28 (75.7%)
		Improved by ≥1 Categories	3 (12.0%)	2 (16.7%)	5 (13.5%)
C16D1			N=25	N=10	N=35
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (10.0%)	1 (2.9%)
		Worsened by 1 Category	5 (20.0%)	2 (20.0%)	7 (20.0%)
		No Change	17 (68.0%)	6 (60.0%)	23 (65.7%)
		Improved by ≥1 Categories	3 (12.0%)	1 (10.0%)	4 (11.4%)
C17D1			N=23	N=7	N=30
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.3%)	0 (0.0%)	1 (3.3%)
		Worsened by 1 Category	3 (13.0%)	0 (0.0%)	3 (10.0%)
		No Change	16 (69.6%)	6 (85.7%)	22 (73.3%)
		Improved by ≥1 Categories	3 (13.0%)	1 (14.3%)	4 (13.3%)
C18D1			N=19	N=7	N=26
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (5.3%)	0 (0.0%)	1 (3.8%)
		Worsened by 1 Category	1 (5.3%)	1 (14.3%)	2 (7.7%)
		No Change	15 (78.9%)	5 (71.4%)	20 (76.9%)
		Improved by ≥1 Categories	2 (10.5%)	1 (14.3%)	3 (11.5%)
C19D1			N=19	N=5	N=24
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.3%)	0 (0.0%)	1 (4.2%)
		No Change	15 (78.9%)	5 (100.0%)	20 (83.3%)
		Improved by ≥1 Categories	3 (15.8%)	0 (0.0%)	3 (12.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C20D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.9%)	0 (0.0%)	1 (4.8%)
		No Change	14 (82.4%)	3 (75.0%)	17 (81.0%)
		Improved by ≥1 Categories	2 (11.8%)	1 (25.0%)	3 (14.3%)
C21D1			N=16	N=4	N=20
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (25.0%)	1 (5.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	13 (81.3%)	3 (75.0%)	16 (80.0%)
		Improved by ≥1 Categories	3 (18.8%)	0 (0.0%)	3 (15.0%)
C22D1			N=14	N=3	N=17
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (7.1%)	0 (0.0%)	1 (5.9%)
		No Change	12 (85.7%)	3 (100.0%)	15 (88.2%)
		Improved by ≥1 Categories	1 (7.1%)	0 (0.0%)	1 (5.9%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	1 (11.1%)	0 (0.0%)	1 (8.3%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	7 (77.8%)	3 (100.0%)	10 (83.3%)
		Improved by ≥1 Categories	1 (11.1%)	0 (0.0%)	1 (8.3%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	1 (50.0%)	2 (18.2%)
		No Change	8 (88.9%)	1 (50.0%)	9 (81.8%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C25D1			N=7	N=0	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (14.3%)	0 (NE)	1 (14.3%)
		No Change	5 (71.4%)	0 (NE)	5 (71.4%)
		Improved by ≥1 Categories	1 (14.3%)	0 (NE)	1 (14.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (85.7%)	1 (100.0%)	7 (87.5%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	7 (100.0%)	1 (100.0%)	8 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C28D1			N=5	N=1	N=6
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (100.0%)	1 (100.0%)	6 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=1	N=1	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	1 (100.0%)	1 (100.0%)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C34D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C38D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	EOT		N=110	N=112	N=222
		Worsened by ≥3 Categories	2 (1.8%)	3 (2.7%)	5 (2.3%)
		Worsened by 2 Categories	4 (3.6%)	4 (3.6%)	8 (3.6%)
		Worsened by 1 Category	27 (24.5%)	20 (17.9%)	47 (21.2%)
		No Change	59 (53.6%)	66 (58.9%)	125 (56.3%)
		Improved by ≥1 Categories	18 (16.4%)	19 (17.0%)	37 (16.7%)
	Long Term Follow-up		N=13	N=8	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (12.5%)	1 (4.8%)
		Worsened by 1 Category	2 (15.4%)	2 (25.0%)	4 (19.0%)
		No Change	9 (69.2%)	2 (25.0%)	11 (52.4%)
		Improved by ≥1 Categories	2 (15.4%)	3 (37.5%)	5 (23.8%)
Vomiting Frequency	C2D1		N=150	N=143	N=293
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	4 (2.7%)	4 (2.8%)	8 (2.7%)
		Worsened by 1 Category	4 (2.7%)	9 (6.3%)	13 (4.4%)
		No Change	133 (88.7%)	120 (83.9%)	253 (86.3%)
		Improved by ≥1 Categories	9 (6.0%)	10 (7.0%)	19 (6.5%)
	C3D1		N=116	N=102	N=218
		Worsened by ≥3 Categories	1 (0.9%)	0 (0.0%)	1 (0.5%)
		Worsened by 2 Categories	1 (0.9%)	2 (2.0%)	3 (1.4%)
		Worsened by 1 Category	9 (7.8%)	3 (2.9%)	12 (5.5%)
		No Change	97 (83.6%)	89 (87.3%)	186 (85.3%)
		Improved by ≥1 Categories	8 (6.9%)	8 (7.8%)	16 (7.3%)
	C4D1		N=107	N=93	N=200
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (2.8%)	2 (2.2%)	5 (2.5%)
		Worsened by 1 Category	3 (2.8%)	4 (4.3%)	7 (3.5%)
		No Change	90 (84.1%)	78 (83.9%)	168 (84.0%)
		Improved by ≥1 Categories	11 (10.3%)	9 (9.7%)	20 (10.0%)
C5D1		N=93	N=80	N=173	
	Worsened by ≥3 Categories	1 (1.1%)	0 (0.0%)	1 (0.6%)	
	Worsened by 2 Categories	1 (1.1%)	0 (0.0%)	1 (0.6%)	
	Worsened by 1 Category	3 (3.2%)	3 (3.8%)	6 (3.5%)	
	No Change	80 (86.0%)	71 (88.8%)	151 (87.3%)	
	Improved by ≥1 Categories	8 (8.6%)	6 (7.5%)	14 (8.1%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C6D1			N=90	N=71	N=161
		Worsened by ≥3 Categories	1 (1.1%)	0 (0.0%)	1 (0.6%)
		Worsened by 2 Categories	2 (2.2%)	2 (2.8%)	4 (2.5%)
		Worsened by 1 Category	3 (3.3%)	2 (2.8%)	5 (3.1%)
		No Change	77 (85.6%)	59 (83.1%)	136 (84.5%)
		Improved by ≥1 Categories	7 (7.8%)	8 (11.3%)	15 (9.3%)
C7D1			N=75	N=53	N=128
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (1.3%)	1 (1.9%)	2 (1.6%)
		No Change	68 (90.7%)	48 (90.6%)	116 (90.6%)
		Improved by ≥1 Categories	6 (8.0%)	4 (7.5%)	10 (7.8%)
C8D1			N=70	N=50	N=120
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (2.0%)	1 (0.8%)
		No Change	65 (92.9%)	44 (88.0%)	109 (90.8%)
		Improved by ≥1 Categories	5 (7.1%)	5 (10.0%)	10 (8.3%)
C9D1			N=57	N=41	N=98
		Worsened by ≥3 Categories	1 (1.8%)	0 (0.0%)	1 (1.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (5.3%)	0 (0.0%)	3 (3.1%)
		No Change	50 (87.7%)	36 (87.8%)	86 (87.8%)
		Improved by ≥1 Categories	3 (5.3%)	5 (12.2%)	8 (8.2%)
C10D1			N=50	N=30	N=80
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (2.0%)	1 (3.3%)	2 (2.5%)
		No Change	45 (90.0%)	26 (86.7%)	71 (88.8%)
		Improved by ≥1 Categories	4 (8.0%)	3 (10.0%)	7 (8.8%)
C11D1			N=43	N=23	N=66
		Worsened by ≥3 Categories	1 (2.3%)	0 (0.0%)	1 (1.5%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	41 (95.3%)	21 (91.3%)	62 (93.9%)
		Improved by ≥1 Categories	1 (2.3%)	2 (8.7%)	3 (4.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C12D1			N=39	N=19	N=58
		Worsened by ≥3 Categories	1 (2.6%)	0 (0.0%)	1 (1.7%)
		Worsened by 2 Categories	1 (2.6%)	1 (5.3%)	2 (3.4%)
		Worsened by 1 Category	2 (5.1%)	0 (0.0%)	2 (3.4%)
		No Change	34 (87.2%)	17 (89.5%)	51 (87.9%)
		Improved by ≥1 Categories	1 (2.6%)	1 (5.3%)	2 (3.4%)
C13D1			N=31	N=14	N=45
		Worsened by ≥3 Categories	1 (3.2%)	0 (0.0%)	1 (2.2%)
		Worsened by 2 Categories	1 (3.2%)	0 (0.0%)	1 (2.2%)
		Worsened by 1 Category	1 (3.2%)	0 (0.0%)	1 (2.2%)
		No Change	27 (87.1%)	12 (85.7%)	39 (86.7%)
		Improved by ≥1 Categories	1 (3.2%)	2 (14.3%)	3 (6.7%)
C14D1			N=31	N=12	N=43
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (6.5%)	0 (0.0%)	2 (4.7%)
		No Change	29 (93.5%)	11 (91.7%)	40 (93.0%)
		Improved by ≥1 Categories	0 (0.0%)	1 (8.3%)	1 (2.3%)
C15D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (3.8%)	0 (0.0%)	1 (2.6%)
		No Change	25 (96.2%)	11 (84.6%)	36 (92.3%)
		Improved by ≥1 Categories	0 (0.0%)	2 (15.4%)	2 (5.1%)
C16D1			N=26	N=10	N=36
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (11.5%)	0 (0.0%)	3 (8.3%)
		No Change	23 (88.5%)	8 (80.0%)	31 (86.1%)
		Improved by ≥1 Categories	0 (0.0%)	2 (20.0%)	2 (5.6%)
C17D1			N=24	N=7	N=31
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (8.3%)	0 (0.0%)	2 (6.5%)
		No Change	22 (91.7%)	6 (85.7%)	28 (90.3%)
		Improved by ≥1 Categories	0 (0.0%)	1 (14.3%)	1 (3.2%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	20 (100.0%)	6 (85.7%)	26 (96.3%)
		Improved by ≥1 Categories	0 (0.0%)	1 (14.3%)	1 (3.7%)
C19D1			N=18	N=6	N=24
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.6%)	0 (0.0%)	1 (4.2%)
		No Change	17 (94.4%)	5 (83.3%)	22 (91.7%)
		Improved by ≥1 Categories	0 (0.0%)	1 (16.7%)	1 (4.2%)
C20D1			N=19	N=4	N=23
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.3%)	0 (0.0%)	1 (4.3%)
		No Change	18 (94.7%)	3 (75.0%)	21 (91.3%)
		Improved by ≥1 Categories	0 (0.0%)	1 (25.0%)	1 (4.3%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	17 (100.0%)	3 (75.0%)	20 (95.2%)
		Improved by ≥1 Categories	0 (0.0%)	1 (25.0%)	1 (4.8%)
C22D1			N=15	N=3	N=18
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	15 (100.0%)	2 (66.7%)	17 (94.4%)
		Improved by ≥1 Categories	0 (0.0%)	1 (33.3%)	1 (5.6%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	1 (11.1%)	0 (0.0%)	1 (8.3%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	8 (88.9%)	2 (66.7%)	10 (83.3%)
		Improved by ≥1 Categories	0 (0.0%)	1 (33.3%)	1 (8.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (11.1%)	0 (0.0%)	1 (9.1%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	8 (88.9%)	1 (50.0%)	9 (81.8%)
		Improved by ≥1 Categories	0 (0.0%)	1 (50.0%)	1 (9.1%)
C25D1			N=8	N=0	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	8 (100.0%)	0 (NE)	8 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (85.7%)	1 (100.0%)	7 (87.5%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	7 (100.0%)	1 (100.0%)	8 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (100.0%)	1 (100.0%)	7 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C34D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (33.3%)	0 (NE)	1 (33.3%)
		No Change	2 (66.7%)	0 (NE)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C36D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
EOT			N=124	N=125	N=249
		Worsened by ≥3 Categories	1 (0.8%)	2 (1.6%)	3 (1.2%)
		Worsened by 2 Categories	9 (7.3%)	3 (2.4%)	12 (4.8%)
		Worsened by 1 Category	5 (4.0%)	9 (7.2%)	14 (5.6%)
		No Change	98 (79.0%)	103 (82.4%)	201 (80.7%)
	Improved by ≥1 Categories	11 (8.9%)	8 (6.4%)	19 (7.6%)	
Long Term Follow-up			N=14	N=9	N=23
		Worsened by ≥3 Categories	0 (0.0%)	1 (11.1%)	1 (4.3%)
		Worsened by 2 Categories	1 (7.1%)	0 (0.0%)	1 (4.3%)
		Worsened by 1 Category	0 (0.0%)	1 (11.1%)	1 (4.3%)
		No Change	11 (78.6%)	7 (77.8%)	18 (78.3%)
	Improved by ≥1 Categories	2 (14.3%)	0 (0.0%)	2 (8.7%)	
Vomiting Severity C2D1			N=143	N=130	N=273
		Worsened by ≥3 Categories	2 (1.4%)	1 (0.8%)	3 (1.1%)
		Worsened by 2 Categories	1 (0.7%)	3 (2.3%)	4 (1.5%)
		Worsened by 1 Category	8 (5.6%)	7 (5.4%)	15 (5.5%)
		No Change	124 (86.7%)	110 (84.6%)	234 (85.7%)
	Improved by ≥1 Categories	8 (5.6%)	9 (6.9%)	17 (6.2%)	
C3D1			N=111	N=93	N=204
		Worsened by ≥3 Categories	3 (2.7%)	1 (1.1%)	4 (2.0%)
		Worsened by 2 Categories	2 (1.8%)	1 (1.1%)	3 (1.5%)
		Worsened by 1 Category	4 (3.6%)	4 (4.3%)	8 (3.9%)
		No Change	95 (85.6%)	78 (83.9%)	173 (84.8%)
	Improved by ≥1 Categories	7 (6.3%)	9 (9.7%)	16 (7.8%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C4D1			N=98	N=89	N=187
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (1.0%)	2 (2.2%)	3 (1.6%)
		Worsened by 1 Category	5 (5.1%)	5 (5.6%)	10 (5.3%)
		No Change	83 (84.7%)	73 (82.0%)	156 (83.4%)
	Improved by ≥1 Categories	9 (9.2%)	9 (10.1%)	18 (9.6%)	
C5D1			N=86	N=72	N=158
		Worsened by ≥3 Categories	1 (1.2%)	0 (0.0%)	1 (0.6%)
		Worsened by 2 Categories	1 (1.2%)	0 (0.0%)	1 (0.6%)
		Worsened by 1 Category	3 (3.5%)	5 (6.9%)	8 (5.1%)
		No Change	74 (86.0%)	61 (84.7%)	135 (85.4%)
	Improved by ≥1 Categories	7 (8.1%)	6 (8.3%)	13 (8.2%)	
C6D1			N=79	N=63	N=142
		Worsened by ≥3 Categories	0 (0.0%)	1 (1.6%)	1 (0.7%)
		Worsened by 2 Categories	2 (2.5%)	0 (0.0%)	2 (1.4%)
		Worsened by 1 Category	3 (3.8%)	2 (3.2%)	5 (3.5%)
		No Change	68 (86.1%)	52 (82.5%)	120 (84.5%)
	Improved by ≥1 Categories	6 (7.6%)	8 (12.7%)	14 (9.9%)	
C7D1			N=67	N=46	N=113
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (2.2%)	1 (0.9%)
		No Change	59 (88.1%)	40 (87.0%)	99 (87.6%)
	Improved by ≥1 Categories	8 (11.9%)	5 (10.9%)	13 (11.5%)	
C8D1			N=63	N=43	N=106
		Worsened by ≥3 Categories	0 (0.0%)	1 (2.3%)	1 (0.9%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	58 (92.1%)	37 (86.0%)	95 (89.6%)
	Improved by ≥1 Categories	5 (7.9%)	5 (11.6%)	10 (9.4%)	
C9D1			N=50	N=38	N=88
		Worsened by ≥3 Categories	1 (2.0%)	0 (0.0%)	1 (1.1%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (6.0%)	0 (0.0%)	3 (3.4%)
		No Change	42 (84.0%)	33 (86.8%)	75 (85.2%)
	Improved by ≥1 Categories	4 (8.0%)	5 (13.2%)	9 (10.2%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C10D1			N=45	N=28	N=73
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (2.2%)	1 (3.6%)	2 (2.7%)
		No Change	42 (93.3%)	25 (89.3%)	67 (91.8%)
	Improved by ≥1 Categories	2 (4.4%)	2 (7.1%)	4 (5.5%)	
C11D1			N=40	N=22	N=62
		Worsened by ≥3 Categories	1 (2.5%)	0 (0.0%)	1 (1.6%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	38 (95.0%)	20 (90.9%)	58 (93.5%)
	Improved by ≥1 Categories	1 (2.5%)	2 (9.1%)	3 (4.8%)	
C12D1			N=35	N=18	N=53
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.9%)	1 (5.6%)	2 (3.8%)
		Worsened by 1 Category	1 (2.9%)	0 (0.0%)	1 (1.9%)
		No Change	32 (91.4%)	16 (88.9%)	48 (90.6%)
	Improved by ≥1 Categories	1 (2.9%)	1 (5.6%)	2 (3.8%)	
C13D1			N=27	N=13	N=40
		Worsened by ≥3 Categories	2 (7.4%)	0 (0.0%)	2 (5.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	23 (85.2%)	11 (84.6%)	34 (85.0%)
	Improved by ≥1 Categories	2 (7.4%)	2 (15.4%)	4 (10.0%)	
C14D1			N=29	N=12	N=41
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (3.4%)	0 (0.0%)	1 (2.4%)
		No Change	27 (93.1%)	11 (91.7%)	38 (92.7%)
	Improved by ≥1 Categories	1 (3.4%)	1 (8.3%)	2 (4.9%)	
C15D1			N=24	N=11	N=35
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	24 (100.0%)	9 (81.8%)	33 (94.3%)
	Improved by ≥1 Categories	0 (0.0%)	2 (18.2%)	2 (5.7%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C16D1			N=24	N=10	N=34
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	4 (16.7%)	0 (0.0%)	4 (11.8%)
		No Change	19 (79.2%)	8 (80.0%)	27 (79.4%)
		Improved by ≥1 Categories	1 (4.2%)	2 (20.0%)	3 (8.8%)
C17D1			N=23	N=7	N=30
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (4.3%)	0 (0.0%)	1 (3.3%)
		No Change	21 (91.3%)	6 (85.7%)	27 (90.0%)
		Improved by ≥1 Categories	1 (4.3%)	1 (14.3%)	2 (6.7%)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.0%)	0 (0.0%)	1 (3.7%)
		No Change	19 (95.0%)	6 (85.7%)	25 (92.6%)
		Improved by ≥1 Categories	0 (0.0%)	1 (14.3%)	1 (3.7%)
C19D1			N=19	N=5	N=24
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.3%)	0 (0.0%)	1 (4.2%)
		No Change	18 (94.7%)	4 (80.0%)	22 (91.7%)
		Improved by ≥1 Categories	0 (0.0%)	1 (20.0%)	1 (4.2%)
C20D1			N=18	N=4	N=22
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.6%)	0 (0.0%)	1 (4.5%)
		No Change	17 (94.4%)	3 (75.0%)	20 (90.9%)
		Improved by ≥1 Categories	0 (0.0%)	1 (25.0%)	1 (4.5%)
C21D1			N=16	N=4	N=20
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	16 (100.0%)	3 (75.0%)	19 (95.0%)
		Improved by ≥1 Categories	0 (0.0%)	1 (25.0%)	1 (5.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C22D1			N=14	N=3	N=17
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	14 (100.0%)	2 (66.7%)	16 (94.1%)
		Improved by ≥1 Categories	0 (0.0%)	1 (33.3%)	1 (5.9%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	1 (11.1%)	0 (0.0%)	1 (8.3%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	8 (88.9%)	2 (66.7%)	10 (83.3%)
		Improved by ≥1 Categories	0 (0.0%)	1 (33.3%)	1 (8.3%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	1 (11.1%)	0 (0.0%)	1 (9.1%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (9.1%)
		No Change	7 (77.8%)	1 (50.0%)	8 (72.7%)
		Improved by ≥1 Categories	0 (0.0%)	1 (50.0%)	1 (9.1%)
C25D1			N=7	N=0	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	7 (100.0%)	0 (NE)	7 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (85.7%)	1 (100.0%)	7 (87.5%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	7 (100.0%)	1 (100.0%)	8 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C28D1			N=5	N=1	N=6
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (100.0%)	1 (100.0%)	6 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=1	N=1	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	1 (100.0%)	1 (100.0%)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C34D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=108	N=110	N=218
		Worsened by ≥3 Categories	2 (1.9%)	2 (1.8%)	4 (1.8%)
		Worsened by 2 Categories	4 (3.7%)	4 (3.6%)	8 (3.7%)
		Worsened by 1 Category	6 (5.6%)	6 (5.5%)	12 (5.5%)
		No Change	87 (80.6%)	92 (83.6%)	179 (82.1%)
		Improved by ≥1 Categories	9 (8.3%)	6 (5.5%)	15 (6.9%)
Long Term Follow-up			N=13	N=8	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (7.7%)	1 (12.5%)	2 (9.5%)
		No Change	10 (76.9%)	7 (87.5%)	17 (81.0%)
		Improved by ≥1 Categories	2 (15.4%)	0 (0.0%)	2 (9.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Constipation Severity	C2D1		N=150	N=143	N=293
		Worsened by ≥3 Categories	4 (2.7%)	3 (2.1%)	7 (2.4%)
		Worsened by 2 Categories	6 (4.0%)	7 (4.9%)	13 (4.4%)
		Worsened by 1 Category	26 (17.3%)	30 (21.0%)	56 (19.1%)
		No Change	88 (58.7%)	84 (58.7%)	172 (58.7%)
	Improved by ≥1 Categories	26 (17.3%)	19 (13.3%)	45 (15.4%)	
	C3D1		N=116	N=102	N=218
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	4 (3.4%)	4 (3.9%)	8 (3.7%)
		Worsened by 1 Category	22 (19.0%)	12 (11.8%)	34 (15.6%)
		No Change	61 (52.6%)	67 (65.7%)	128 (58.7%)
	Improved by ≥1 Categories	29 (25.0%)	19 (18.6%)	48 (22.0%)	
	C4D1		N=107	N=93	N=200
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	6 (5.6%)	5 (5.4%)	11 (5.5%)
		Worsened by 1 Category	12 (11.2%)	9 (9.7%)	21 (10.5%)
		No Change	64 (59.8%)	58 (62.4%)	122 (61.0%)
	Improved by ≥1 Categories	25 (23.4%)	21 (22.6%)	46 (23.0%)	
	C5D1		N=93	N=79	N=172
		Worsened by ≥3 Categories	2 (2.2%)	1 (1.3%)	3 (1.7%)
Worsened by 2 Categories		2 (2.2%)	1 (1.3%)	3 (1.7%)	
Worsened by 1 Category		11 (11.8%)	13 (16.5%)	24 (14.0%)	
No Change		48 (51.6%)	47 (59.5%)	95 (55.2%)	
Improved by ≥1 Categories	30 (32.3%)	17 (21.5%)	47 (27.3%)		
C6D1		N=90	N=71	N=161	
	Worsened by ≥3 Categories	1 (1.1%)	0 (0.0%)	1 (0.6%)	
	Worsened by 2 Categories	3 (3.3%)	2 (2.8%)	5 (3.1%)	
	Worsened by 1 Category	10 (11.1%)	11 (15.5%)	21 (13.0%)	
	No Change	51 (56.7%)	42 (59.2%)	93 (57.8%)	
Improved by ≥1 Categories	25 (27.8%)	16 (22.5%)	41 (25.5%)		
C7D1		N=74	N=53	N=127	
	Worsened by ≥3 Categories	1 (1.4%)	0 (0.0%)	1 (0.8%)	
	Worsened by 2 Categories	3 (4.1%)	4 (7.5%)	7 (5.5%)	
	Worsened by 1 Category	7 (9.5%)	6 (11.3%)	13 (10.2%)	
	No Change	41 (55.4%)	34 (64.2%)	75 (59.1%)	
Improved by ≥1 Categories	22 (29.7%)	9 (17.0%)	31 (24.4%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Gilead German Dossier

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C8D1			N=69	N=50	N=119
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (4.3%)	4 (8.0%)	7 (5.9%)
		Worsened by 1 Category	11 (15.9%)	10 (20.0%)	21 (17.6%)
		No Change	39 (56.5%)	26 (52.0%)	65 (54.6%)
		Improved by ≥1 Categories	16 (23.2%)	10 (20.0%)	26 (21.8%)
C9D1			N=57	N=41	N=98
		Worsened by ≥3 Categories	1 (1.8%)	1 (2.4%)	2 (2.0%)
		Worsened by 2 Categories	1 (1.8%)	2 (4.9%)	3 (3.1%)
		Worsened by 1 Category	8 (14.0%)	4 (9.8%)	12 (12.2%)
		No Change	36 (63.2%)	26 (63.4%)	62 (63.3%)
		Improved by ≥1 Categories	11 (19.3%)	8 (19.5%)	19 (19.4%)
C10D1			N=50	N=30	N=80
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	5 (10.0%)	3 (10.0%)	8 (10.0%)
		Worsened by 1 Category	10 (20.0%)	4 (13.3%)	14 (17.5%)
		No Change	28 (56.0%)	17 (56.7%)	45 (56.3%)
		Improved by ≥1 Categories	7 (14.0%)	6 (20.0%)	13 (16.3%)
C11D1			N=43	N=23	N=66
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	5 (11.6%)	3 (13.0%)	8 (12.1%)
		Worsened by 1 Category	5 (11.6%)	2 (8.7%)	7 (10.6%)
		No Change	26 (60.5%)	14 (60.9%)	40 (60.6%)
		Improved by ≥1 Categories	7 (16.3%)	4 (17.4%)	11 (16.7%)
C12D1			N=39	N=19	N=58
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	4 (10.3%)	1 (5.3%)	5 (8.6%)
		Worsened by 1 Category	9 (23.1%)	3 (15.8%)	12 (20.7%)
		No Change	21 (53.8%)	9 (47.4%)	30 (51.7%)
		Improved by ≥1 Categories	5 (12.8%)	6 (31.6%)	11 (19.0%)
C13D1			N=31	N=14	N=45
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	5 (16.1%)	2 (14.3%)	7 (15.6%)
		Worsened by 1 Category	7 (22.6%)	1 (7.1%)	8 (17.8%)
		No Change	14 (45.2%)	6 (42.9%)	20 (44.4%)
		Improved by ≥1 Categories	5 (16.1%)	5 (35.7%)	10 (22.2%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C14D1			N=31	N=12	N=43
		Worsened by ≥3 Categories	2 (6.5%)	0 (0.0%)	2 (4.7%)
		Worsened by 2 Categories	5 (16.1%)	1 (8.3%)	6 (14.0%)
		Worsened by 1 Category	5 (16.1%)	2 (16.7%)	7 (16.3%)
		No Change	15 (48.4%)	6 (50.0%)	21 (48.8%)
		Improved by ≥1 Categories	4 (12.9%)	3 (25.0%)	7 (16.3%)
C15D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	1 (3.8%)	0 (0.0%)	1 (2.6%)
		Worsened by 2 Categories	3 (11.5%)	0 (0.0%)	3 (7.7%)
		Worsened by 1 Category	5 (19.2%)	3 (23.1%)	8 (20.5%)
		No Change	14 (53.8%)	5 (38.5%)	19 (48.7%)
		Improved by ≥1 Categories	3 (11.5%)	5 (38.5%)	8 (20.5%)
C16D1			N=26	N=10	N=36
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	4 (15.4%)	0 (0.0%)	4 (11.1%)
		Worsened by 1 Category	4 (15.4%)	4 (40.0%)	8 (22.2%)
		No Change	16 (61.5%)	3 (30.0%)	19 (52.8%)
		Improved by ≥1 Categories	2 (7.7%)	3 (30.0%)	5 (13.9%)
C17D1			N=24	N=7	N=31
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (8.3%)	0 (0.0%)	2 (6.5%)
		Worsened by 1 Category	5 (20.8%)	1 (14.3%)	6 (19.4%)
		No Change	15 (62.5%)	4 (57.1%)	19 (61.3%)
		Improved by ≥1 Categories	2 (8.3%)	2 (28.6%)	4 (12.9%)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	1 (5.0%)	0 (0.0%)	1 (3.7%)
		Worsened by 2 Categories	3 (15.0%)	0 (0.0%)	3 (11.1%)
		Worsened by 1 Category	5 (25.0%)	1 (14.3%)	6 (22.2%)
		No Change	10 (50.0%)	3 (42.9%)	13 (48.1%)
		Improved by ≥1 Categories	1 (5.0%)	3 (42.9%)	4 (14.8%)
C19D1			N=19	N=6	N=25
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (10.5%)	0 (0.0%)	2 (8.0%)
		Worsened by 1 Category	8 (42.1%)	2 (33.3%)	10 (40.0%)
		No Change	9 (47.4%)	2 (33.3%)	11 (44.0%)
		Improved by ≥1 Categories	0 (0.0%)	2 (33.3%)	2 (8.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C20D1			N=19	N=4	N=23
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	5 (26.3%)	0 (0.0%)	5 (21.7%)
		No Change	13 (68.4%)	1 (25.0%)	14 (60.9%)
		Improved by ≥1 Categories	1 (5.3%)	3 (75.0%)	4 (17.4%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (17.6%)	0 (0.0%)	3 (14.3%)
		No Change	14 (82.4%)	2 (50.0%)	16 (76.2%)
		Improved by ≥1 Categories	0 (0.0%)	2 (50.0%)	2 (9.5%)
C22D1			N=15	N=3	N=18
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (13.3%)	0 (0.0%)	2 (11.1%)
		Worsened by 1 Category	2 (13.3%)	1 (33.3%)	3 (16.7%)
		No Change	10 (66.7%)	0 (0.0%)	10 (55.6%)
		Improved by ≥1 Categories	1 (6.7%)	2 (66.7%)	3 (16.7%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (22.2%)	0 (0.0%)	2 (16.7%)
		Worsened by 1 Category	0 (0.0%)	1 (33.3%)	1 (8.3%)
		No Change	7 (77.8%)	0 (0.0%)	7 (58.3%)
		Improved by ≥1 Categories	0 (0.0%)	2 (66.7%)	2 (16.7%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (22.2%)	0 (0.0%)	2 (18.2%)
		Worsened by 1 Category	2 (22.2%)	0 (0.0%)	2 (18.2%)
		No Change	5 (55.6%)	1 (50.0%)	6 (54.5%)
		Improved by ≥1 Categories	0 (0.0%)	1 (50.0%)	1 (9.1%)
C25D1			N=8	N=0	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	1 (12.5%)	0 (NE)	1 (12.5%)
		Worsened by 1 Category	3 (37.5%)	0 (NE)	3 (37.5%)
		No Change	4 (50.0%)	0 (NE)	4 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (28.6%)	0 (0.0%)	2 (25.0%)
		No Change	5 (71.4%)	0 (0.0%)	5 (62.5%)
		Improved by ≥1 Categories	0 (0.0%)	1 (100.0%)	1 (12.5%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 1 Category	2 (28.6%)	0 (0.0%)	2 (25.0%)
		No Change	4 (57.1%)	0 (0.0%)	4 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	1 (100.0%)	1 (12.5%)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (33.3%)	0 (0.0%)	2 (28.6%)
		No Change	4 (66.7%)	0 (0.0%)	4 (57.1%)
		Improved by ≥1 Categories	0 (0.0%)	1 (100.0%)	1 (14.3%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	0 (0.0%)	4 (80.0%)
		Improved by ≥1 Categories	0 (0.0%)	1 (100.0%)	1 (20.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (25.0%)	0 (0.0%)	1 (20.0%)
		No Change	3 (75.0%)	1 (100.0%)	4 (80.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (0.0%)	1 (33.3%)
		No Change	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Improved by ≥1 Categories	0 (0.0%)	1 (100.0%)	1 (33.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C34D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (33.3%)	0 (NE)	1 (33.3%)
		No Change	2 (66.7%)	0 (NE)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (33.3%)	0 (NE)	1 (33.3%)
		No Change	2 (66.7%)	0 (NE)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (33.3%)	0 (NE)	1 (33.3%)
		No Change	2 (66.7%)	0 (NE)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C38D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
EOT			N=124	N=124	N=248	
		Worsened by ≥3 Categories	3 (2.4%)	2 (1.6%)	5 (2.0%)	
		Worsened by 2 Categories	9 (7.3%)	7 (5.6%)	16 (6.5%)	
		Worsened by 1 Category	13 (10.5%)	20 (16.1%)	33 (13.3%)	
		No Change	72 (58.1%)	68 (54.8%)	140 (56.5%)	
		Improved by ≥1 Categories	27 (21.8%)	27 (21.8%)	54 (21.8%)	
		Long Term		N=14	N=9	N=23
		Follow-up				
		Worsened by ≥3 Categories	0 (0.0%)	1 (11.1%)	1 (4.3%)	
		Worsened by 2 Categories	2 (14.3%)	2 (22.2%)	4 (17.4%)	
Worsened by 1 Category	2 (14.3%)	1 (11.1%)	3 (13.0%)			
No Change	9 (64.3%)	2 (22.2%)	11 (47.8%)			
Improved by ≥1 Categories	1 (7.1%)	3 (33.3%)	4 (17.4%)			
Diarrhea Frequency	C2D1		N=149	N=142	N=291	
		Worsened by ≥3 Categories	16 (10.7%)	1 (0.7%)	17 (5.8%)	
		Worsened by 2 Categories	29 (19.5%)	8 (5.6%)	37 (12.7%)	
		Worsened by 1 Category	22 (14.8%)	16 (11.3%)	38 (13.1%)	
		No Change	71 (47.7%)	82 (57.7%)	153 (52.6%)	
		Improved by ≥1 Categories	11 (7.4%)	35 (24.6%)	46 (15.8%)	
		C3D1		N=116	N=100	N=216
		Worsened by ≥3 Categories	13 (11.2%)	1 (1.0%)	14 (6.5%)	
		Worsened by 2 Categories	13 (11.2%)	9 (9.0%)	22 (10.2%)	
		Worsened by 1 Category	21 (18.1%)	12 (12.0%)	33 (15.3%)	
	No Change	60 (51.7%)	57 (57.0%)	117 (54.2%)		
	Improved by ≥1 Categories	9 (7.8%)	21 (21.0%)	30 (13.9%)		
	C4D1		N=106	N=93	N=199	
	Worsened by ≥3 Categories	11 (10.4%)	2 (2.2%)	13 (6.5%)		
	Worsened by 2 Categories	18 (17.0%)	2 (2.2%)	20 (10.1%)		
	Worsened by 1 Category	21 (19.8%)	8 (8.6%)	29 (14.6%)		
	No Change	42 (39.6%)	58 (62.4%)	100 (50.3%)		
	Improved by ≥1 Categories	14 (13.2%)	23 (24.7%)	37 (18.6%)		
	C5D1		N=92	N=76	N=168	
	Worsened by ≥3 Categories	9 (9.8%)	1 (1.3%)	10 (6.0%)		
Worsened by 2 Categories	15 (16.3%)	3 (3.9%)	18 (10.7%)			
Worsened by 1 Category	11 (12.0%)	10 (13.2%)	21 (12.5%)			
No Change	45 (48.9%)	48 (63.2%)	93 (55.4%)			
Improved by ≥1 Categories	12 (13.0%)	14 (18.4%)	26 (15.5%)			

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C6D1			N=90	N=70	N=160
		Worsened by ≥3 Categories	11 (12.2%)	0 (0.0%)	11 (6.9%)
		Worsened by 2 Categories	11 (12.2%)	3 (4.3%)	14 (8.8%)
		Worsened by 1 Category	12 (13.3%)	9 (12.9%)	21 (13.1%)
		No Change	42 (46.7%)	45 (64.3%)	87 (54.4%)
	Improved by ≥1 Categories	14 (15.6%)	13 (18.6%)	27 (16.9%)	
C7D1			N=74	N=52	N=126
		Worsened by ≥3 Categories	2 (2.7%)	2 (3.8%)	4 (3.2%)
		Worsened by 2 Categories	11 (14.9%)	0 (0.0%)	11 (8.7%)
		Worsened by 1 Category	18 (24.3%)	5 (9.6%)	23 (18.3%)
		No Change	28 (37.8%)	31 (59.6%)	59 (46.8%)
	Improved by ≥1 Categories	15 (20.3%)	14 (26.9%)	29 (23.0%)	
C8D1			N=70	N=49	N=119
		Worsened by ≥3 Categories	2 (2.9%)	0 (0.0%)	2 (1.7%)
		Worsened by 2 Categories	8 (11.4%)	2 (4.1%)	10 (8.4%)
		Worsened by 1 Category	14 (20.0%)	6 (12.2%)	20 (16.8%)
		No Change	35 (50.0%)	26 (53.1%)	61 (51.3%)
	Improved by ≥1 Categories	11 (15.7%)	15 (30.6%)	26 (21.8%)	
C9D1			N=56	N=41	N=97
		Worsened by ≥3 Categories	5 (8.9%)	3 (7.3%)	8 (8.2%)
		Worsened by 2 Categories	2 (3.6%)	1 (2.4%)	3 (3.1%)
		Worsened by 1 Category	8 (14.3%)	1 (2.4%)	9 (9.3%)
		No Change	32 (57.1%)	24 (58.5%)	56 (57.7%)
	Improved by ≥1 Categories	9 (16.1%)	12 (29.3%)	21 (21.6%)	
C10D1			N=49	N=30	N=79
		Worsened by ≥3 Categories	3 (6.1%)	2 (6.7%)	5 (6.3%)
		Worsened by 2 Categories	5 (10.2%)	2 (6.7%)	7 (8.9%)
		Worsened by 1 Category	8 (16.3%)	1 (3.3%)	9 (11.4%)
		No Change	23 (46.9%)	18 (60.0%)	41 (51.9%)
	Improved by ≥1 Categories	10 (20.4%)	7 (23.3%)	17 (21.5%)	
C11D1			N=42	N=23	N=65
		Worsened by ≥3 Categories	2 (4.8%)	0 (0.0%)	2 (3.1%)
		Worsened by 2 Categories	2 (4.8%)	2 (8.7%)	4 (6.2%)
		Worsened by 1 Category	6 (14.3%)	1 (4.3%)	7 (10.8%)
		No Change	23 (54.8%)	13 (56.5%)	36 (55.4%)
	Improved by ≥1 Categories	9 (21.4%)	7 (30.4%)	16 (24.6%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C12D1			N=38	N=19	N=57
		Worsened by ≥3 Categories	3 (7.9%)	0 (0.0%)	3 (5.3%)
		Worsened by 2 Categories	1 (2.6%)	1 (5.3%)	2 (3.5%)
		Worsened by 1 Category	8 (21.1%)	2 (10.5%)	10 (17.5%)
		No Change	18 (47.4%)	9 (47.4%)	27 (47.4%)
	Improved by ≥1 Categories	8 (21.1%)	7 (36.8%)	15 (26.3%)	
C13D1			N=31	N=13	N=44
		Worsened by ≥3 Categories	1 (3.2%)	0 (0.0%)	1 (2.3%)
		Worsened by 2 Categories	5 (16.1%)	0 (0.0%)	5 (11.4%)
		Worsened by 1 Category	6 (19.4%)	1 (7.7%)	7 (15.9%)
		No Change	12 (38.7%)	5 (38.5%)	17 (38.6%)
	Improved by ≥1 Categories	7 (22.6%)	7 (53.8%)	14 (31.8%)	
C14D1			N=31	N=12	N=43
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	8 (25.8%)	0 (0.0%)	8 (18.6%)
		Worsened by 1 Category	4 (12.9%)	2 (16.7%)	6 (14.0%)
		No Change	15 (48.4%)	5 (41.7%)	20 (46.5%)
	Improved by ≥1 Categories	4 (12.9%)	5 (41.7%)	9 (20.9%)	
C15D1			N=26	N=12	N=38
		Worsened by ≥3 Categories	2 (7.7%)	0 (0.0%)	2 (5.3%)
		Worsened by 2 Categories	3 (11.5%)	0 (0.0%)	3 (7.9%)
		Worsened by 1 Category	6 (23.1%)	2 (16.7%)	8 (21.1%)
		No Change	10 (38.5%)	5 (41.7%)	15 (39.5%)
	Improved by ≥1 Categories	5 (19.2%)	5 (41.7%)	10 (26.3%)	
C16D1			N=26	N=10	N=36
		Worsened by ≥3 Categories	4 (15.4%)	0 (0.0%)	4 (11.1%)
		Worsened by 2 Categories	3 (11.5%)	0 (0.0%)	3 (8.3%)
		Worsened by 1 Category	3 (11.5%)	1 (10.0%)	4 (11.1%)
		No Change	10 (38.5%)	6 (60.0%)	16 (44.4%)
	Improved by ≥1 Categories	6 (23.1%)	3 (30.0%)	9 (25.0%)	
C17D1			N=24	N=7	N=31
		Worsened by ≥3 Categories	2 (8.3%)	0 (0.0%)	2 (6.5%)
		Worsened by 2 Categories	5 (20.8%)	0 (0.0%)	5 (16.1%)
		Worsened by 1 Category	2 (8.3%)	1 (14.3%)	3 (9.7%)
		No Change	9 (37.5%)	3 (42.9%)	12 (38.7%)
	Improved by ≥1 Categories	6 (25.0%)	3 (42.9%)	9 (29.0%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	1 (5.0%)	0 (0.0%)	1 (3.7%)
		Worsened by 2 Categories	2 (10.0%)	1 (14.3%)	3 (11.1%)
		Worsened by 1 Category	3 (15.0%)	1 (14.3%)	4 (14.8%)
		No Change	9 (45.0%)	3 (42.9%)	12 (44.4%)
		Improved by ≥1 Categories	5 (25.0%)	2 (28.6%)	7 (25.9%)
C19D1			N=19	N=6	N=25
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (5.3%)	0 (0.0%)	1 (4.0%)
		Worsened by 1 Category	4 (21.1%)	1 (16.7%)	5 (20.0%)
		No Change	9 (47.4%)	3 (50.0%)	12 (48.0%)
		Improved by ≥1 Categories	5 (26.3%)	2 (33.3%)	7 (28.0%)
C20D1			N=19	N=4	N=23
		Worsened by ≥3 Categories	1 (5.3%)	0 (0.0%)	1 (4.3%)
		Worsened by 2 Categories	1 (5.3%)	0 (0.0%)	1 (4.3%)
		Worsened by 1 Category	2 (10.5%)	0 (0.0%)	2 (8.7%)
		No Change	11 (57.9%)	3 (75.0%)	14 (60.9%)
		Improved by ≥1 Categories	4 (21.1%)	1 (25.0%)	5 (21.7%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (17.6%)	0 (0.0%)	3 (14.3%)
		Worsened by 1 Category	1 (5.9%)	0 (0.0%)	1 (4.8%)
		No Change	8 (47.1%)	3 (75.0%)	11 (52.4%)
		Improved by ≥1 Categories	5 (29.4%)	1 (25.0%)	6 (28.6%)
C22D1			N=15	N=3	N=18
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (20.0%)	0 (0.0%)	3 (16.7%)
		Worsened by 1 Category	2 (13.3%)	1 (33.3%)	3 (16.7%)
		No Change	7 (46.7%)	1 (33.3%)	8 (44.4%)
		Improved by ≥1 Categories	3 (20.0%)	1 (33.3%)	4 (22.2%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (11.1%)	0 (0.0%)	1 (8.3%)
		Worsened by 1 Category	2 (22.2%)	1 (33.3%)	3 (25.0%)
		No Change	2 (22.2%)	1 (33.3%)	3 (25.0%)
		Improved by ≥1 Categories	4 (44.4%)	1 (33.3%)	5 (41.7%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (11.1%)	0 (0.0%)	1 (9.1%)
		Worsened by 1 Category	1 (11.1%)	1 (50.0%)	2 (18.2%)
		No Change	4 (44.4%)	0 (0.0%)	4 (36.4%)
		Improved by ≥1 Categories	3 (33.3%)	1 (50.0%)	4 (36.4%)
C25D1			N=8	N=0	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	1 (12.5%)	0 (NE)	1 (12.5%)
		Worsened by 1 Category	1 (12.5%)	0 (NE)	1 (12.5%)
		No Change	3 (37.5%)	0 (NE)	3 (37.5%)
		Improved by ≥1 Categories	3 (37.5%)	0 (NE)	3 (37.5%)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (14.3%)	0 (0.0%)	1 (12.5%)
		No Change	3 (42.9%)	0 (0.0%)	3 (37.5%)
		Improved by ≥1 Categories	2 (28.6%)	1 (100.0%)	3 (37.5%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (28.6%)	0 (0.0%)	2 (25.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (42.9%)	0 (0.0%)	3 (37.5%)
		Improved by ≥1 Categories	2 (28.6%)	1 (100.0%)	3 (37.5%)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (16.7%)	0 (0.0%)	1 (14.3%)
		Worsened by 1 Category	1 (16.7%)	0 (0.0%)	1 (14.3%)
		No Change	3 (50.0%)	0 (0.0%)	3 (42.9%)
		Improved by ≥1 Categories	1 (16.7%)	1 (100.0%)	2 (28.6%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (25.0%)	0 (0.0%)	1 (20.0%)
		No Change	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Improved by ≥1 Categories	1 (25.0%)	1 (100.0%)	2 (40.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (75.0%)	0 (0.0%)	3 (60.0%)
		No Change	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Improved by ≥1 Categories	0 (0.0%)	1 (100.0%)	1 (20.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (0.0%)	1 (33.3%)
		No Change	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Improved by ≥1 Categories	0 (0.0%)	1 (100.0%)	1 (33.3%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (0.0%)	1 (33.3%)
		No Change	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Improved by ≥1 Categories	0 (0.0%)	1 (100.0%)	1 (33.3%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (33.3%)	0 (0.0%)	1 (25.0%)
		No Change	2 (66.7%)	0 (0.0%)	2 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	1 (100.0%)	1 (25.0%)
C34D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	2 (66.7%)	0 (NE)	2 (66.7%)
		No Change	1 (33.3%)	0 (NE)	1 (33.3%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C36D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (33.3%)	0 (NE)	1 (33.3%)
		No Change	2 (66.7%)	0 (NE)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	1 (33.3%)	0 (NE)	1 (33.3%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (66.7%)	0 (NE)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=124	N=122	N=246
		Worsened by ≥3 Categories	10 (8.1%)	1 (0.8%)	11 (4.5%)
		Worsened by 2 Categories	11 (8.9%)	9 (7.4%)	20 (8.1%)
		Worsened by 1 Category	16 (12.9%)	17 (13.9%)	33 (13.4%)
		No Change	74 (59.7%)	71 (58.2%)	145 (58.9%)
		Improved by ≥1 Categories	13 (10.5%)	24 (19.7%)	37 (15.0%)
Long Term Follow-up			N=14	N=9	N=23
		Worsened by ≥3 Categories	0 (0.0%)	1 (11.1%)	1 (4.3%)
		Worsened by 2 Categories	2 (14.3%)	0 (0.0%)	2 (8.7%)
		Worsened by 1 Category	3 (21.4%)	3 (33.3%)	6 (26.1%)
		No Change	9 (64.3%)	4 (44.4%)	13 (56.5%)
		Improved by ≥1 Categories	0 (0.0%)	1 (11.1%)	1 (4.3%)
Abdominal Pain Frequency	C2D1		N=149	N=144	N=293
		Worsened by ≥3 Categories	8 (5.4%)	1 (0.7%)	9 (3.1%)
		Worsened by 2 Categories	11 (7.4%)	14 (9.7%)	25 (8.5%)
		Worsened by 1 Category	28 (18.8%)	24 (16.7%)	52 (17.7%)
		No Change	75 (50.3%)	78 (54.2%)	153 (52.2%)
	Improved by ≥1 Categories	27 (18.1%)	27 (18.8%)	54 (18.4%)	
	C3D1		N=116	N=102	N=218
		Worsened by ≥3 Categories	0 (0.0%)	2 (2.0%)	2 (0.9%)
		Worsened by 2 Categories	11 (9.5%)	12 (11.8%)	23 (10.6%)
		Worsened by 1 Category	15 (12.9%)	12 (11.8%)	27 (12.4%)
No Change		65 (56.0%)	53 (52.0%)	118 (54.1%)	
Improved by ≥1 Categories	25 (21.6%)	23 (22.5%)	48 (22.0%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

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Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C4D1			N=106	N=93	N=199
		Worsened by ≥3 Categories	2 (1.9%)	0 (0.0%)	2 (1.0%)
		Worsened by 2 Categories	8 (7.5%)	7 (7.5%)	15 (7.5%)
		Worsened by 1 Category	15 (14.2%)	12 (12.9%)	27 (13.6%)
		No Change	53 (50.0%)	51 (54.8%)	104 (52.3%)
	Improved by ≥1 Categories	28 (26.4%)	23 (24.7%)	51 (25.6%)	
C5D1			N=92	N=79	N=171
		Worsened by ≥3 Categories	1 (1.1%)	1 (1.3%)	2 (1.2%)
		Worsened by 2 Categories	9 (9.8%)	5 (6.3%)	14 (8.2%)
		Worsened by 1 Category	15 (16.3%)	13 (16.5%)	28 (16.4%)
		No Change	40 (43.5%)	43 (54.4%)	83 (48.5%)
	Improved by ≥1 Categories	27 (29.3%)	17 (21.5%)	44 (25.7%)	
C6D1			N=90	N=70	N=160
		Worsened by ≥3 Categories	1 (1.1%)	1 (1.4%)	2 (1.3%)
		Worsened by 2 Categories	3 (3.3%)	1 (1.4%)	4 (2.5%)
		Worsened by 1 Category	16 (17.8%)	10 (14.3%)	26 (16.3%)
		No Change	45 (50.0%)	40 (57.1%)	85 (53.1%)
	Improved by ≥1 Categories	25 (27.8%)	18 (25.7%)	43 (26.9%)	
C7D1			N=75	N=54	N=129
		Worsened by ≥3 Categories	0 (0.0%)	2 (3.7%)	2 (1.6%)
		Worsened by 2 Categories	4 (5.3%)	0 (0.0%)	4 (3.1%)
		Worsened by 1 Category	13 (17.3%)	6 (11.1%)	19 (14.7%)
		No Change	42 (56.0%)	31 (57.4%)	73 (56.6%)
	Improved by ≥1 Categories	16 (21.3%)	15 (27.8%)	31 (24.0%)	
C8D1			N=69	N=50	N=119
		Worsened by ≥3 Categories	1 (1.4%)	0 (0.0%)	1 (0.8%)
		Worsened by 2 Categories	4 (5.8%)	1 (2.0%)	5 (4.2%)
		Worsened by 1 Category	14 (20.3%)	3 (6.0%)	17 (14.3%)
		No Change	39 (56.5%)	31 (62.0%)	70 (58.8%)
	Improved by ≥1 Categories	11 (15.9%)	15 (30.0%)	26 (21.8%)	
C9D1			N=57	N=41	N=98
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (5.3%)	3 (7.3%)	6 (6.1%)
		Worsened by 1 Category	10 (17.5%)	2 (4.9%)	12 (12.2%)
		No Change	37 (64.9%)	21 (51.2%)	58 (59.2%)
	Improved by ≥1 Categories	7 (12.3%)	15 (36.6%)	22 (22.4%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C10D1			N=49	N=30	N=79
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	5 (10.2%)	3 (10.0%)	8 (10.1%)
		Worsened by 1 Category	10 (20.4%)	2 (6.7%)	12 (15.2%)
		No Change	25 (51.0%)	16 (53.3%)	41 (51.9%)
		Improved by ≥1 Categories	9 (18.4%)	9 (30.0%)	18 (22.8%)
C11D1			N=42	N=23	N=65
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (7.1%)	1 (4.3%)	4 (6.2%)
		Worsened by 1 Category	7 (16.7%)	4 (17.4%)	11 (16.9%)
		No Change	24 (57.1%)	11 (47.8%)	35 (53.8%)
		Improved by ≥1 Categories	8 (19.0%)	7 (30.4%)	15 (23.1%)
C12D1			N=39	N=19	N=58
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (5.1%)	1 (5.3%)	3 (5.2%)
		Worsened by 1 Category	8 (20.5%)	2 (10.5%)	10 (17.2%)
		No Change	22 (56.4%)	11 (57.9%)	33 (56.9%)
		Improved by ≥1 Categories	7 (17.9%)	5 (26.3%)	12 (20.7%)
C13D1			N=31	N=14	N=45
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (9.7%)	1 (7.1%)	4 (8.9%)
		Worsened by 1 Category	4 (12.9%)	1 (7.1%)	5 (11.1%)
		No Change	20 (64.5%)	9 (64.3%)	29 (64.4%)
		Improved by ≥1 Categories	4 (12.9%)	3 (21.4%)	7 (15.6%)
C14D1			N=31	N=12	N=43
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	4 (12.9%)	2 (16.7%)	6 (14.0%)
		Worsened by 1 Category	4 (12.9%)	2 (16.7%)	6 (14.0%)
		No Change	19 (61.3%)	7 (58.3%)	26 (60.5%)
		Improved by ≥1 Categories	4 (12.9%)	1 (8.3%)	5 (11.6%)
C15D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (7.7%)	1 (2.6%)
		Worsened by 1 Category	6 (23.1%)	3 (23.1%)	9 (23.1%)
		No Change	14 (53.8%)	6 (46.2%)	20 (51.3%)
		Improved by ≥1 Categories	6 (23.1%)	3 (23.1%)	9 (23.1%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C16D1			N=26	N=10	N=36
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (7.7%)	0 (0.0%)	2 (5.6%)
		Worsened by 1 Category	5 (19.2%)	2 (20.0%)	7 (19.4%)
		No Change	16 (61.5%)	8 (80.0%)	24 (66.7%)
	Improved by ≥1 Categories	3 (11.5%)	0 (0.0%)	3 (8.3%)	
C17D1			N=24	N=7	N=31
		Worsened by ≥3 Categories	1 (4.2%)	0 (0.0%)	1 (3.2%)
		Worsened by 2 Categories	2 (8.3%)	0 (0.0%)	2 (6.5%)
		Worsened by 1 Category	2 (8.3%)	1 (14.3%)	3 (9.7%)
		No Change	16 (66.7%)	5 (71.4%)	21 (67.7%)
	Improved by ≥1 Categories	3 (12.5%)	1 (14.3%)	4 (12.9%)	
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (15.0%)	1 (14.3%)	4 (14.8%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	14 (70.0%)	6 (85.7%)	20 (74.1%)
	Improved by ≥1 Categories	3 (15.0%)	0 (0.0%)	3 (11.1%)	
C19D1			N=19	N=6	N=25
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (15.8%)	0 (0.0%)	3 (12.0%)
		Worsened by 1 Category	2 (10.5%)	1 (16.7%)	3 (12.0%)
		No Change	10 (52.6%)	5 (83.3%)	15 (60.0%)
	Improved by ≥1 Categories	4 (21.1%)	0 (0.0%)	4 (16.0%)	
C20D1			N=19	N=4	N=23
		Worsened by ≥3 Categories	1 (5.3%)	0 (0.0%)	1 (4.3%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.3%)	0 (0.0%)	1 (4.3%)
		No Change	14 (73.7%)	2 (50.0%)	16 (69.6%)
	Improved by ≥1 Categories	3 (15.8%)	2 (50.0%)	5 (21.7%)	
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (11.8%)	0 (0.0%)	2 (9.5%)
		No Change	11 (64.7%)	3 (75.0%)	14 (66.7%)
	Improved by ≥1 Categories	4 (23.5%)	1 (25.0%)	5 (23.8%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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C22D1			N=15	N=3	N=18
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (13.3%)	0 (0.0%)	2 (11.1%)
		Worsened by 1 Category	2 (13.3%)	0 (0.0%)	2 (11.1%)
		No Change	9 (60.0%)	3 (100.0%)	12 (66.7%)
		Improved by ≥1 Categories	2 (13.3%)	0 (0.0%)	2 (11.1%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (22.2%)	0 (0.0%)	2 (16.7%)
		No Change	6 (66.7%)	3 (100.0%)	9 (75.0%)
		Improved by ≥1 Categories	1 (11.1%)	0 (0.0%)	1 (8.3%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (22.2%)	1 (50.0%)	3 (27.3%)
		No Change	6 (66.7%)	1 (50.0%)	7 (63.6%)
		Improved by ≥1 Categories	1 (11.1%)	0 (0.0%)	1 (9.1%)
C25D1			N=8	N=0	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	1 (12.5%)	0 (NE)	1 (12.5%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	6 (75.0%)	0 (NE)	6 (75.0%)
		Improved by ≥1 Categories	1 (12.5%)	0 (NE)	1 (12.5%)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 1 Category	2 (28.6%)	0 (0.0%)	2 (25.0%)
		No Change	3 (42.9%)	1 (100.0%)	4 (50.0%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (28.6%)	0 (0.0%)	2 (25.0%)
		No Change	4 (57.1%)	1 (100.0%)	5 (62.5%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (16.7%)	0 (0.0%)	1 (14.3%)
		No Change	5 (83.3%)	1 (100.0%)	6 (85.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (20.0%)
		No Change	2 (50.0%)	0 (0.0%)	2 (40.0%)
		Improved by ≥1 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (50.0%)	0 (0.0%)	2 (40.0%)
		No Change	2 (50.0%)	1 (100.0%)	3 (60.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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C34D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=121	N=125	N=246
		Worsened by ≥3 Categories	3 (2.5%)	4 (3.2%)	7 (2.8%)
		Worsened by 2 Categories	11 (9.1%)	14 (11.2%)	25 (10.2%)
		Worsened by 1 Category	16 (13.2%)	12 (9.6%)	28 (11.4%)
		No Change	63 (52.1%)	67 (53.6%)	130 (52.8%)
		Improved by ≥1 Categories	28 (23.1%)	28 (22.4%)	56 (22.8%)
Long Term Follow-up			N=14	N=9	N=23
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (7.1%)	1 (11.1%)	2 (8.7%)
		Worsened by 1 Category	3 (21.4%)	2 (22.2%)	5 (21.7%)
		No Change	8 (57.1%)	4 (44.4%)	12 (52.2%)
		Improved by ≥1 Categories	2 (14.3%)	2 (22.2%)	4 (17.4%)

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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Abdominal Pain Severity	C2D1		N=143	N=139	N=282
		Worsened by ≥3 Categories	2 (1.4%)	1 (0.7%)	3 (1.1%)
		Worsened by 2 Categories	11 (7.7%)	7 (5.0%)	18 (6.4%)
		Worsened by 1 Category	34 (23.8%)	26 (18.7%)	60 (21.3%)
		No Change	80 (55.9%)	76 (54.7%)	156 (55.3%)
	Improved by ≥1 Categories	16 (11.2%)	29 (20.9%)	45 (16.0%)	
	C3D1		N=113	N=98	N=211
		Worsened by ≥3 Categories	0 (0.0%)	2 (2.0%)	2 (0.9%)
		Worsened by 2 Categories	5 (4.4%)	8 (8.2%)	13 (6.2%)
		Worsened by 1 Category	22 (19.5%)	15 (15.3%)	37 (17.5%)
		No Change	63 (55.8%)	49 (50.0%)	112 (53.1%)
	Improved by ≥1 Categories	23 (20.4%)	24 (24.5%)	47 (22.3%)	
	C4D1		N=105	N=91	N=196
		Worsened by ≥3 Categories	1 (1.0%)	2 (2.2%)	3 (1.5%)
		Worsened by 2 Categories	8 (7.6%)	4 (4.4%)	12 (6.1%)
		Worsened by 1 Category	16 (15.2%)	17 (18.7%)	33 (16.8%)
		No Change	53 (50.5%)	44 (48.4%)	97 (49.5%)
	Improved by ≥1 Categories	27 (25.7%)	24 (26.4%)	51 (26.0%)	
	C5D1		N=86	N=75	N=161
		Worsened by ≥3 Categories	1 (1.2%)	1 (1.3%)	2 (1.2%)
Worsened by 2 Categories		4 (4.7%)	3 (4.0%)	7 (4.3%)	
Worsened by 1 Category		17 (19.8%)	13 (17.3%)	30 (18.6%)	
No Change		48 (55.8%)	42 (56.0%)	90 (55.9%)	
Improved by ≥1 Categories	16 (18.6%)	16 (21.3%)	32 (19.9%)		
C6D1		N=85	N=68	N=153	
	Worsened by ≥3 Categories	2 (2.4%)	0 (0.0%)	2 (1.3%)	
	Worsened by 2 Categories	3 (3.5%)	2 (2.9%)	5 (3.3%)	
	Worsened by 1 Category	12 (14.1%)	9 (13.2%)	21 (13.7%)	
	No Change	46 (54.1%)	37 (54.4%)	83 (54.2%)	
Improved by ≥1 Categories	22 (25.9%)	20 (29.4%)	42 (27.5%)		
C7D1		N=71	N=49	N=120	
	Worsened by ≥3 Categories	0 (0.0%)	1 (2.0%)	1 (0.8%)	
	Worsened by 2 Categories	2 (2.8%)	2 (4.1%)	4 (3.3%)	
	Worsened by 1 Category	13 (18.3%)	5 (10.2%)	18 (15.0%)	
	No Change	41 (57.7%)	30 (61.2%)	71 (59.2%)	
Improved by ≥1 Categories	15 (21.1%)	11 (22.4%)	26 (21.7%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C8D1			N=66	N=48	N=114
		Worsened by ≥3 Categories	2 (3.0%)	0 (0.0%)	2 (1.8%)
		Worsened by 2 Categories	1 (1.5%)	1 (2.1%)	2 (1.8%)
		Worsened by 1 Category	12 (18.2%)	3 (6.3%)	15 (13.2%)
		No Change	41 (62.1%)	32 (66.7%)	73 (64.0%)
		Improved by ≥1 Categories	10 (15.2%)	12 (25.0%)	22 (19.3%)
C9D1			N=53	N=39	N=92
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	3 (7.7%)	3 (3.3%)
		Worsened by 1 Category	11 (20.8%)	3 (7.7%)	14 (15.2%)
		No Change	36 (67.9%)	23 (59.0%)	59 (64.1%)
		Improved by ≥1 Categories	6 (11.3%)	10 (25.6%)	16 (17.4%)
C10D1			N=46	N=28	N=74
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.2%)	1 (3.6%)	2 (2.7%)
		Worsened by 1 Category	10 (21.7%)	6 (21.4%)	16 (21.6%)
		No Change	27 (58.7%)	15 (53.6%)	42 (56.8%)
		Improved by ≥1 Categories	8 (17.4%)	6 (21.4%)	14 (18.9%)
C11D1			N=41	N=22	N=63
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (4.9%)	2 (9.1%)	4 (6.3%)
		Worsened by 1 Category	5 (12.2%)	2 (9.1%)	7 (11.1%)
		No Change	27 (65.9%)	12 (54.5%)	39 (61.9%)
		Improved by ≥1 Categories	7 (17.1%)	6 (27.3%)	13 (20.6%)
C12D1			N=37	N=18	N=55
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (5.4%)	1 (5.6%)	3 (5.5%)
		Worsened by 1 Category	6 (16.2%)	1 (5.6%)	7 (12.7%)
		No Change	22 (59.5%)	12 (66.7%)	34 (61.8%)
		Improved by ≥1 Categories	7 (18.9%)	4 (22.2%)	11 (20.0%)
C13D1			N=27	N=13	N=40
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (7.4%)	1 (7.7%)	3 (7.5%)
		Worsened by 1 Category	7 (25.9%)	0 (0.0%)	7 (17.5%)
		No Change	15 (55.6%)	8 (61.5%)	23 (57.5%)
		Improved by ≥1 Categories	3 (11.1%)	4 (30.8%)	7 (17.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C14D1			N=30	N=12	N=42
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (10.0%)	1 (8.3%)	4 (9.5%)
		Worsened by 1 Category	6 (20.0%)	3 (25.0%)	9 (21.4%)
		No Change	17 (56.7%)	6 (50.0%)	23 (54.8%)
		Improved by ≥1 Categories	4 (13.3%)	2 (16.7%)	6 (14.3%)
C15D1			N=25	N=12	N=37
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.0%)	1 (8.3%)	2 (5.4%)
		Worsened by 1 Category	4 (16.0%)	1 (8.3%)	5 (13.5%)
		No Change	15 (60.0%)	9 (75.0%)	24 (64.9%)
		Improved by ≥1 Categories	5 (20.0%)	1 (8.3%)	6 (16.2%)
C16D1			N=24	N=10	N=34
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.2%)	1 (10.0%)	2 (5.9%)
		Worsened by 1 Category	4 (16.7%)	1 (10.0%)	5 (14.7%)
		No Change	16 (66.7%)	7 (70.0%)	23 (67.6%)
		Improved by ≥1 Categories	3 (12.5%)	1 (10.0%)	4 (11.8%)
C17D1			N=23	N=7	N=30
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (8.7%)	1 (14.3%)	3 (10.0%)
		Worsened by 1 Category	2 (8.7%)	0 (0.0%)	2 (6.7%)
		No Change	16 (69.6%)	4 (57.1%)	20 (66.7%)
		Improved by ≥1 Categories	3 (13.0%)	2 (28.6%)	5 (16.7%)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (10.0%)	1 (14.3%)	3 (11.1%)
		Worsened by 1 Category	2 (10.0%)	0 (0.0%)	2 (7.4%)
		No Change	14 (70.0%)	4 (57.1%)	18 (66.7%)
		Improved by ≥1 Categories	2 (10.0%)	2 (28.6%)	4 (14.8%)
C19D1			N=19	N=5	N=24
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (5.3%)	0 (0.0%)	1 (4.2%)
		Worsened by 1 Category	4 (21.1%)	1 (20.0%)	5 (20.8%)
		No Change	11 (57.9%)	2 (40.0%)	13 (54.2%)
		Improved by ≥1 Categories	3 (15.8%)	2 (40.0%)	5 (20.8%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C20D1			N=18	N=4	N=22
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (11.1%)	0 (0.0%)	2 (9.1%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	12 (66.7%)	2 (50.0%)	14 (63.6%)
		Improved by ≥1 Categories	4 (22.2%)	2 (50.0%)	6 (27.3%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (5.9%)	0 (0.0%)	1 (4.8%)
		No Change	12 (70.6%)	2 (50.0%)	14 (66.7%)
		Improved by ≥1 Categories	4 (23.5%)	2 (50.0%)	6 (28.6%)
C22D1			N=14	N=3	N=17
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (7.1%)	0 (0.0%)	1 (5.9%)
		Worsened by 1 Category	4 (28.6%)	0 (0.0%)	4 (23.5%)
		No Change	8 (57.1%)	2 (66.7%)	10 (58.8%)
		Improved by ≥1 Categories	1 (7.1%)	1 (33.3%)	2 (11.8%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (22.2%)	0 (0.0%)	2 (16.7%)
		No Change	6 (66.7%)	2 (66.7%)	8 (66.7%)
		Improved by ≥1 Categories	1 (11.1%)	1 (33.3%)	2 (16.7%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (11.1%)	0 (0.0%)	1 (9.1%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (9.1%)
		No Change	6 (66.7%)	1 (50.0%)	7 (63.6%)
		Improved by ≥1 Categories	1 (11.1%)	1 (50.0%)	2 (18.2%)
C25D1			N=7	N=0	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	2 (28.6%)	0 (NE)	2 (28.6%)
		No Change	4 (57.1%)	0 (NE)	4 (57.1%)
		Improved by ≥1 Categories	1 (14.3%)	0 (NE)	1 (14.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 1 Category	2 (28.6%)	0 (0.0%)	2 (25.0%)
		No Change	3 (42.9%)	1 (100.0%)	4 (50.0%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (42.9%)	0 (0.0%)	3 (37.5%)
		No Change	3 (42.9%)	1 (100.0%)	4 (50.0%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (16.7%)	0 (0.0%)	1 (14.3%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (83.3%)	1 (100.0%)	6 (85.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (25.0%)	1 (100.0%)	2 (40.0%)
		No Change	2 (50.0%)	0 (0.0%)	2 (40.0%)
		Improved by ≥1 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (50.0%)	0 (0.0%)	2 (40.0%)
		No Change	2 (50.0%)	1 (100.0%)	3 (60.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C34D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C38D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)	
EOT			N=114	N=118	N=232	
		Worsened by ≥3 Categories	2 (1.8%)	4 (3.4%)	6 (2.6%)	
		Worsened by 2 Categories	10 (8.8%)	8 (6.8%)	18 (7.8%)	
		Worsened by 1 Category	16 (14.0%)	17 (14.4%)	33 (14.2%)	
		No Change	67 (58.8%)	62 (52.5%)	129 (55.6%)	
		Improved by ≥1 Categories	19 (16.7%)	27 (22.9%)	46 (19.8%)	
Long Term Follow-up			N=14	N=8	N=22	
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)	
		Worsened by 2 Categories	2 (14.3%)	1 (12.5%)	3 (13.6%)	
		Worsened by 1 Category	2 (14.3%)	1 (12.5%)	3 (13.6%)	
		No Change	8 (57.1%)	3 (37.5%)	11 (50.0%)	
		Improved by ≥1 Categories	2 (14.3%)	3 (37.5%)	5 (22.7%)	
Abdominal Pain Interference	C2D1		N=141	N=134	N=275	
		Worsened by ≥3 Categories	3 (2.1%)	0 (0.0%)	3 (1.1%)	
		Worsened by 2 Categories	3 (2.1%)	8 (6.0%)	11 (4.0%)	
		Worsened by 1 Category	26 (18.4%)	16 (11.9%)	42 (15.3%)	
		No Change	100 (70.9%)	93 (69.4%)	193 (70.2%)	
		Improved by ≥1 Categories	9 (6.4%)	17 (12.7%)	26 (9.5%)	
	C3D1			N=113	N=98	N=211
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)	
		Worsened by 2 Categories	1 (0.9%)	3 (3.1%)	4 (1.9%)	
		Worsened by 1 Category	17 (15.0%)	16 (16.3%)	33 (15.6%)	
		No Change	78 (69.0%)	67 (68.4%)	145 (68.7%)	
		Improved by ≥1 Categories	17 (15.0%)	12 (12.2%)	29 (13.7%)	
	C4D1			N=102	N=89	N=191
		Worsened by ≥3 Categories	2 (2.0%)	0 (0.0%)	2 (1.0%)	
		Worsened by 2 Categories	4 (3.9%)	4 (4.5%)	8 (4.2%)	
		Worsened by 1 Category	9 (8.8%)	11 (12.4%)	20 (10.5%)	
		No Change	67 (65.7%)	61 (68.5%)	128 (67.0%)	
		Improved by ≥1 Categories	20 (19.6%)	13 (14.6%)	33 (17.3%)	
C5D1			N=86	N=74	N=160	
	Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)		
	Worsened by 2 Categories	6 (7.0%)	7 (9.5%)	13 (8.1%)		
	Worsened by 1 Category	8 (9.3%)	7 (9.5%)	15 (9.4%)		
	No Change	58 (67.4%)	50 (67.6%)	108 (67.5%)		
	Improved by ≥1 Categories	14 (16.3%)	10 (13.5%)	24 (15.0%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C6D1			N=83	N=67	N=150
		Worsened by ≥3 Categories	1 (1.2%)	0 (0.0%)	1 (0.7%)
		Worsened by 2 Categories	5 (6.0%)	2 (3.0%)	7 (4.7%)
		Worsened by 1 Category	7 (8.4%)	8 (11.9%)	15 (10.0%)
		No Change	59 (71.1%)	48 (71.6%)	107 (71.3%)
		Improved by ≥1 Categories	11 (13.3%)	9 (13.4%)	20 (13.3%)
C7D1			N=70	N=48	N=118
		Worsened by ≥3 Categories	0 (0.0%)	1 (2.1%)	1 (0.8%)
		Worsened by 2 Categories	2 (2.9%)	3 (6.3%)	5 (4.2%)
		Worsened by 1 Category	6 (8.6%)	3 (6.3%)	9 (7.6%)
		No Change	54 (77.1%)	38 (79.2%)	92 (78.0%)
		Improved by ≥1 Categories	8 (11.4%)	3 (6.3%)	11 (9.3%)
C8D1			N=67	N=46	N=113
		Worsened by ≥3 Categories	2 (3.0%)	0 (0.0%)	2 (1.8%)
		Worsened by 2 Categories	0 (0.0%)	2 (4.3%)	2 (1.8%)
		Worsened by 1 Category	7 (10.4%)	1 (2.2%)	8 (7.1%)
		No Change	52 (77.6%)	37 (80.4%)	89 (78.8%)
		Improved by ≥1 Categories	6 (9.0%)	6 (13.0%)	12 (10.6%)
C9D1			N=50	N=38	N=88
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.0%)	2 (5.3%)	3 (3.4%)
		Worsened by 1 Category	7 (14.0%)	4 (10.5%)	11 (12.5%)
		No Change	33 (66.0%)	28 (73.7%)	61 (69.3%)
		Improved by ≥1 Categories	9 (18.0%)	4 (10.5%)	13 (14.8%)
C10D1			N=45	N=27	N=72
		Worsened by ≥3 Categories	1 (2.2%)	1 (3.7%)	2 (2.8%)
		Worsened by 2 Categories	1 (2.2%)	2 (7.4%)	3 (4.2%)
		Worsened by 1 Category	5 (11.1%)	2 (7.4%)	7 (9.7%)
		No Change	32 (71.1%)	18 (66.7%)	50 (69.4%)
		Improved by ≥1 Categories	6 (13.3%)	4 (14.8%)	10 (13.9%)
C11D1			N=41	N=22	N=63
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (4.5%)	1 (1.6%)
		Worsened by 1 Category	4 (9.8%)	3 (13.6%)	7 (11.1%)
		No Change	33 (80.5%)	15 (68.2%)	48 (76.2%)
		Improved by ≥1 Categories	4 (9.8%)	3 (13.6%)	7 (11.1%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C12D1			N=36	N=18	N=54
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.8%)	0 (0.0%)	1 (1.9%)
		Worsened by 1 Category	3 (8.3%)	1 (5.6%)	4 (7.4%)
		No Change	29 (80.6%)	16 (88.9%)	45 (83.3%)
		Improved by ≥1 Categories	3 (8.3%)	1 (5.6%)	4 (7.4%)
C13D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (3.8%)	0 (0.0%)	1 (2.6%)
		Worsened by 1 Category	6 (23.1%)	1 (7.7%)	7 (17.9%)
		No Change	16 (61.5%)	12 (92.3%)	28 (71.8%)
		Improved by ≥1 Categories	3 (11.5%)	0 (0.0%)	3 (7.7%)
C14D1			N=28	N=12	N=40
		Worsened by ≥3 Categories	1 (3.6%)	0 (0.0%)	1 (2.5%)
		Worsened by 2 Categories	1 (3.6%)	0 (0.0%)	1 (2.5%)
		Worsened by 1 Category	4 (14.3%)	2 (16.7%)	6 (15.0%)
		No Change	19 (67.9%)	10 (83.3%)	29 (72.5%)
		Improved by ≥1 Categories	3 (10.7%)	0 (0.0%)	3 (7.5%)
C15D1			N=23	N=11	N=34
		Worsened by ≥3 Categories	1 (4.3%)	0 (0.0%)	1 (2.9%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (13.0%)	3 (27.3%)	6 (17.6%)
		No Change	17 (73.9%)	8 (72.7%)	25 (73.5%)
		Improved by ≥1 Categories	2 (8.7%)	0 (0.0%)	2 (5.9%)
C16D1			N=23	N=10	N=33
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.3%)	0 (0.0%)	1 (3.0%)
		Worsened by 1 Category	1 (4.3%)	4 (40.0%)	5 (15.2%)
		No Change	18 (78.3%)	6 (60.0%)	24 (72.7%)
		Improved by ≥1 Categories	3 (13.0%)	0 (0.0%)	3 (9.1%)
C17D1			N=22	N=6	N=28
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (9.1%)	0 (0.0%)	2 (7.1%)
		Worsened by 1 Category	2 (9.1%)	1 (16.7%)	3 (10.7%)
		No Change	17 (77.3%)	5 (83.3%)	22 (78.6%)
		Improved by ≥1 Categories	1 (4.5%)	0 (0.0%)	1 (3.6%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C18D1			N=19	N=7	N=26
		Worsened by ≥3 Categories	1 (5.3%)	0 (0.0%)	1 (3.8%)
		Worsened by 2 Categories	0 (0.0%)	1 (14.3%)	1 (3.8%)
		Worsened by 1 Category	2 (10.5%)	2 (28.6%)	4 (15.4%)
		No Change	15 (78.9%)	4 (57.1%)	19 (73.1%)
		Improved by ≥1 Categories	1 (5.3%)	0 (0.0%)	1 (3.8%)
C19D1			N=18	N=5	N=23
		Worsened by ≥3 Categories	1 (5.6%)	0 (0.0%)	1 (4.3%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (11.1%)	2 (40.0%)	4 (17.4%)
		No Change	14 (77.8%)	2 (40.0%)	16 (69.6%)
		Improved by ≥1 Categories	1 (5.6%)	1 (20.0%)	2 (8.7%)
C20D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (5.9%)	0 (0.0%)	1 (4.8%)
		Worsened by 1 Category	1 (5.9%)	0 (0.0%)	1 (4.8%)
		No Change	13 (76.5%)	3 (75.0%)	16 (76.2%)
		Improved by ≥1 Categories	2 (11.8%)	1 (25.0%)	3 (14.3%)
C21D1			N=16	N=4	N=20
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (6.3%)	0 (0.0%)	1 (5.0%)
		No Change	13 (81.3%)	4 (100.0%)	17 (85.0%)
		Improved by ≥1 Categories	2 (12.5%)	0 (0.0%)	2 (10.0%)
C22D1			N=13	N=3	N=16
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (7.7%)	0 (0.0%)	1 (6.3%)
		Worsened by 1 Category	3 (23.1%)	1 (33.3%)	4 (25.0%)
		No Change	9 (69.2%)	2 (66.7%)	11 (68.8%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C23D1			N=8	N=3	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	8 (100.0%)	3 (100.0%)	11 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C24D1			N=8	N=2	N=10
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (50.0%)	1 (10.0%)
		No Change	8 (100.0%)	1 (50.0%)	9 (90.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C25D1			N=6	N=0	N=6
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	2 (33.3%)	0 (NE)	2 (33.3%)
		No Change	4 (66.7%)	0 (NE)	4 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C26D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (16.7%)	0 (0.0%)	1 (14.3%)
		Worsened by 1 Category	1 (16.7%)	0 (0.0%)	1 (14.3%)
		No Change	4 (66.7%)	1 (100.0%)	5 (71.4%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C27D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (16.7%)	0 (0.0%)	1 (14.3%)
		No Change	5 (83.3%)	1 (100.0%)	6 (85.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C28D1			N=5	N=1	N=6
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (20.0%)	0 (0.0%)	1 (16.7%)
		No Change	4 (80.0%)	1 (100.0%)	5 (83.3%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (33.3%)	1 (100.0%)	2 (50.0%)
		No Change	2 (66.7%)	0 (0.0%)	2 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (25.0%)	0 (0.0%)	1 (20.0%)
		No Change	3 (75.0%)	1 (100.0%)	4 (80.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C34D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C36D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=109	N=112	N=221
		Worsened by ≥3 Categories	2 (1.8%)	6 (5.4%)	8 (3.6%)
		Worsened by 2 Categories	10 (9.2%)	6 (5.4%)	16 (7.2%)
		Worsened by 1 Category	11 (10.1%)	19 (17.0%)	30 (13.6%)
		No Change	73 (67.0%)	64 (57.1%)	137 (62.0%)
		Improved by ≥1 Categories	13 (11.9%)	17 (15.2%)	30 (13.6%)
Long Term Follow-up			N=14	N=9	N=23
		Worsened by ≥3 Categories	1 (7.1%)	1 (11.1%)	2 (8.7%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (14.3%)	2 (22.2%)	4 (17.4%)
		No Change	10 (71.4%)	3 (33.3%)	13 (56.5%)
		Improved by ≥1 Categories	1 (7.1%)	3 (33.3%)	4 (17.4%)
Shortness of Breath Severity C2D1			N=148	N=143	N=291
		Worsened by ≥3 Categories	1 (0.7%)	0 (0.0%)	1 (0.3%)
		Worsened by 2 Categories	4 (2.7%)	5 (3.5%)	9 (3.1%)
		Worsened by 1 Category	26 (17.6%)	25 (17.5%)	51 (17.5%)
		No Change	92 (62.2%)	92 (64.3%)	184 (63.2%)
		Improved by ≥1 Categories	25 (16.9%)	21 (14.7%)	46 (15.8%)
C3D1			N=116	N=102	N=218
		Worsened by ≥3 Categories	0 (0.0%)	2 (2.0%)	2 (0.9%)
		Worsened by 2 Categories	2 (1.7%)	2 (2.0%)	4 (1.8%)
		Worsened by 1 Category	19 (16.4%)	20 (19.6%)	39 (17.9%)
		No Change	76 (65.5%)	62 (60.8%)	138 (63.3%)
		Improved by ≥1 Categories	19 (16.4%)	16 (15.7%)	35 (16.1%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C4D1			N=104	N=93	N=197
		Worsened by ≥3 Categories	0 (0.0%)	1 (1.1%)	1 (0.5%)
		Worsened by 2 Categories	5 (4.8%)	4 (4.3%)	9 (4.6%)
		Worsened by 1 Category	19 (18.3%)	16 (17.2%)	35 (17.8%)
		No Change	60 (57.7%)	56 (60.2%)	116 (58.9%)
	Improved by ≥1 Categories	20 (19.2%)	16 (17.2%)	36 (18.3%)	
C5D1			N=92	N=79	N=171
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (2.2%)	2 (2.5%)	4 (2.3%)
		Worsened by 1 Category	20 (21.7%)	17 (21.5%)	37 (21.6%)
		No Change	52 (56.5%)	46 (58.2%)	98 (57.3%)
	Improved by ≥1 Categories	18 (19.6%)	14 (17.7%)	32 (18.7%)	
C6D1			N=88	N=70	N=158
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (1.1%)	3 (4.3%)	4 (2.5%)
		Worsened by 1 Category	13 (14.8%)	11 (15.7%)	24 (15.2%)
		No Change	57 (64.8%)	42 (60.0%)	99 (62.7%)
	Improved by ≥1 Categories	17 (19.3%)	14 (20.0%)	31 (19.6%)	
C7D1			N=75	N=54	N=129
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (1.9%)	1 (0.8%)
		Worsened by 1 Category	12 (16.0%)	8 (14.8%)	20 (15.5%)
		No Change	49 (65.3%)	32 (59.3%)	81 (62.8%)
	Improved by ≥1 Categories	14 (18.7%)	13 (24.1%)	27 (20.9%)	
C8D1			N=70	N=50	N=120
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	2 (4.0%)	2 (1.7%)
		Worsened by 1 Category	13 (18.6%)	8 (16.0%)	21 (17.5%)
		No Change	44 (62.9%)	31 (62.0%)	75 (62.5%)
	Improved by ≥1 Categories	13 (18.6%)	9 (18.0%)	22 (18.3%)	
C9D1			N=57	N=41	N=98
		Worsened by ≥3 Categories	0 (0.0%)	1 (2.4%)	1 (1.0%)
		Worsened by 2 Categories	1 (1.8%)	0 (0.0%)	1 (1.0%)
		Worsened by 1 Category	6 (10.5%)	6 (14.6%)	12 (12.2%)
		No Change	40 (70.2%)	26 (63.4%)	66 (67.3%)
	Improved by ≥1 Categories	10 (17.5%)	8 (19.5%)	18 (18.4%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C10D1			N=49	N=30	N=79
		Worsened by ≥3 Categories	1 (2.0%)	1 (3.3%)	2 (2.5%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	7 (14.3%)	6 (20.0%)	13 (16.5%)
		No Change	29 (59.2%)	18 (60.0%)	47 (59.5%)
		Improved by ≥1 Categories	12 (24.5%)	5 (16.7%)	17 (21.5%)
C11D1			N=43	N=23	N=66
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	7 (16.3%)	7 (30.4%)	14 (21.2%)
		No Change	28 (65.1%)	13 (56.5%)	41 (62.1%)
		Improved by ≥1 Categories	8 (18.6%)	3 (13.0%)	11 (16.7%)
C12D1			N=39	N=19	N=58
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	8 (20.5%)	6 (31.6%)	14 (24.1%)
		No Change	24 (61.5%)	11 (57.9%)	35 (60.3%)
		Improved by ≥1 Categories	7 (17.9%)	2 (10.5%)	9 (15.5%)
C13D1			N=31	N=14	N=45
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	6 (19.4%)	4 (28.6%)	10 (22.2%)
		No Change	20 (64.5%)	8 (57.1%)	28 (62.2%)
		Improved by ≥1 Categories	5 (16.1%)	2 (14.3%)	7 (15.6%)
C14D1			N=31	N=12	N=43
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	4 (12.9%)	2 (16.7%)	6 (14.0%)
		No Change	23 (74.2%)	9 (75.0%)	32 (74.4%)
		Improved by ≥1 Categories	4 (12.9%)	1 (8.3%)	5 (11.6%)
C15D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	0 (0.0%)	1 (7.7%)	1 (2.6%)
		Worsened by 2 Categories	0 (0.0%)	1 (7.7%)	1 (2.6%)
		Worsened by 1 Category	6 (23.1%)	4 (30.8%)	10 (25.6%)
		No Change	16 (61.5%)	5 (38.5%)	21 (53.8%)
		Improved by ≥1 Categories	4 (15.4%)	2 (15.4%)	6 (15.4%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C16D1			N=26	N=10	N=36
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	4 (15.4%)	3 (30.0%)	7 (19.4%)
		No Change	19 (73.1%)	6 (60.0%)	25 (69.4%)
		Improved by ≥1 Categories	3 (11.5%)	1 (10.0%)	4 (11.1%)
C17D1			N=24	N=7	N=31
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (4.2%)	0 (0.0%)	1 (3.2%)
		Worsened by 1 Category	2 (8.3%)	1 (14.3%)	3 (9.7%)
		No Change	19 (79.2%)	5 (71.4%)	24 (77.4%)
		Improved by ≥1 Categories	2 (8.3%)	1 (14.3%)	3 (9.7%)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (14.3%)	1 (3.7%)
		Worsened by 1 Category	3 (15.0%)	1 (14.3%)	4 (14.8%)
		No Change	13 (65.0%)	4 (57.1%)	17 (63.0%)
		Improved by ≥1 Categories	4 (20.0%)	1 (14.3%)	5 (18.5%)
C19D1			N=19	N=6	N=25
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	4 (21.1%)	3 (50.0%)	7 (28.0%)
		No Change	11 (57.9%)	2 (33.3%)	13 (52.0%)
		Improved by ≥1 Categories	4 (21.1%)	1 (16.7%)	5 (20.0%)
C20D1			N=19	N=4	N=23
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (5.3%)	0 (0.0%)	1 (4.3%)
		Worsened by 1 Category	3 (15.8%)	1 (25.0%)	4 (17.4%)
		No Change	11 (57.9%)	2 (50.0%)	13 (56.5%)
		Improved by ≥1 Categories	4 (21.1%)	1 (25.0%)	5 (21.7%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (11.8%)	1 (25.0%)	3 (14.3%)
		No Change	13 (76.5%)	2 (50.0%)	15 (71.4%)
		Improved by ≥1 Categories	2 (11.8%)	1 (25.0%)	3 (14.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C22D1			N=15	N=3	N=18
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (20.0%)	1 (33.3%)	4 (22.2%)
		No Change	10 (66.7%)	1 (33.3%)	11 (61.1%)
		Improved by ≥1 Categories	2 (13.3%)	1 (33.3%)	3 (16.7%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (8.3%)
		No Change	5 (55.6%)	2 (66.7%)	7 (58.3%)
		Improved by ≥1 Categories	3 (33.3%)	1 (33.3%)	4 (33.3%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (9.1%)
		No Change	5 (55.6%)	1 (50.0%)	6 (54.5%)
		Improved by ≥1 Categories	3 (33.3%)	1 (50.0%)	4 (36.4%)
C25D1			N=8	N=0	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (12.5%)	0 (NE)	1 (12.5%)
		No Change	3 (37.5%)	0 (NE)	3 (37.5%)
		Improved by ≥1 Categories	4 (50.0%)	0 (NE)	4 (50.0%)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (28.6%)	0 (0.0%)	2 (25.0%)
		No Change	3 (42.9%)	1 (100.0%)	4 (50.0%)
		Improved by ≥1 Categories	2 (28.6%)	0 (0.0%)	2 (25.0%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (28.6%)	0 (0.0%)	2 (25.0%)
		No Change	4 (57.1%)	1 (100.0%)	5 (62.5%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (16.7%)	0 (0.0%)	1 (14.3%)
		No Change	4 (66.7%)	1 (100.0%)	5 (71.4%)
		Improved by ≥1 Categories	1 (16.7%)	0 (0.0%)	1 (14.3%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (75.0%)	1 (100.0%)	4 (80.0%)
		Improved by ≥1 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (20.0%)
		No Change	4 (100.0%)	0 (0.0%)	4 (80.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (33.3%)
		No Change	2 (100.0%)	0 (0.0%)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (33.3%)
		No Change	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Improved by ≥1 Categories	1 (50.0%)	0 (0.0%)	1 (33.3%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (25.0%)
		No Change	2 (66.7%)	0 (0.0%)	2 (50.0%)
		Improved by ≥1 Categories	1 (33.3%)	0 (0.0%)	1 (25.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C34D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=122	N=123	N=245
		Worsened by ≥3 Categories	2 (1.6%)	5 (4.1%)	7 (2.9%)
		Worsened by 2 Categories	2 (1.6%)	4 (3.3%)	6 (2.4%)
		Worsened by 1 Category	26 (21.3%)	24 (19.5%)	50 (20.4%)
		No Change	73 (59.8%)	70 (56.9%)	143 (58.4%)
		Improved by ≥1 Categories	19 (15.6%)	20 (16.3%)	39 (15.9%)
Long Term Follow-up			N=14	N=8	N=22
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	4 (28.6%)	2 (25.0%)	6 (27.3%)
		No Change	7 (50.0%)	5 (62.5%)	12 (54.5%)
		Improved by ≥1 Categories	3 (21.4%)	1 (12.5%)	4 (18.2%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Shortness of Breath Interference	C2D1		N=143	N=139	N=282
		Worsened by ≥3 Categories	4 (2.8%)	3 (2.2%)	7 (2.5%)
		Worsened by 2 Categories	6 (4.2%)	2 (1.4%)	8 (2.8%)
		Worsened by 1 Category	18 (12.6%)	21 (15.1%)	39 (13.8%)
		No Change	97 (67.8%)	94 (67.6%)	191 (67.7%)
	Improved by ≥1 Categories	18 (12.6%)	19 (13.7%)	37 (13.1%)	
	C3D1		N=112	N=97	N=209
		Worsened by ≥3 Categories	0 (0.0%)	1 (1.0%)	1 (0.5%)
		Worsened by 2 Categories	2 (1.8%)	4 (4.1%)	6 (2.9%)
		Worsened by 1 Category	20 (17.9%)	15 (15.5%)	35 (16.7%)
		No Change	72 (64.3%)	63 (64.9%)	135 (64.6%)
	Improved by ≥1 Categories	18 (16.1%)	14 (14.4%)	32 (15.3%)	
	C4D1		N=100	N=89	N=189
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	4 (4.0%)	6 (6.7%)	10 (5.3%)
		Worsened by 1 Category	19 (19.0%)	14 (15.7%)	33 (17.5%)
		No Change	61 (61.0%)	55 (61.8%)	116 (61.4%)
	Improved by ≥1 Categories	16 (16.0%)	14 (15.7%)	30 (15.9%)	
	C5D1		N=86	N=73	N=159
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
Worsened by 2 Categories		4 (4.7%)	2 (2.7%)	6 (3.8%)	
Worsened by 1 Category		11 (12.8%)	10 (13.7%)	21 (13.2%)	
No Change		57 (66.3%)	50 (68.5%)	107 (67.3%)	
Improved by ≥1 Categories	14 (16.3%)	11 (15.1%)	25 (15.7%)		
C6D1		N=82	N=66	N=148	
	Worsened by ≥3 Categories	0 (0.0%)	1 (1.5%)	1 (0.7%)	
	Worsened by 2 Categories	0 (0.0%)	2 (3.0%)	2 (1.4%)	
	Worsened by 1 Category	13 (15.9%)	9 (13.6%)	22 (14.9%)	
	No Change	55 (67.1%)	41 (62.1%)	96 (64.9%)	
Improved by ≥1 Categories	14 (17.1%)	13 (19.7%)	27 (18.2%)		
C7D1		N=71	N=47	N=118	
	Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)	
	Worsened by 2 Categories	1 (1.4%)	0 (0.0%)	1 (0.8%)	
	Worsened by 1 Category	9 (12.7%)	5 (10.6%)	14 (11.9%)	
	No Change	48 (67.6%)	35 (74.5%)	83 (70.3%)	
Improved by ≥1 Categories	13 (18.3%)	7 (14.9%)	20 (16.9%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C8D1			N=67	N=45	N=112
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	3 (4.5%)	2 (4.4%)	5 (4.5%)
		Worsened by 1 Category	7 (10.4%)	5 (11.1%)	12 (10.7%)
		No Change	46 (68.7%)	33 (73.3%)	79 (70.5%)
		Improved by ≥1 Categories	11 (16.4%)	5 (11.1%)	16 (14.3%)
C9D1			N=52	N=38	N=90
		Worsened by ≥3 Categories	0 (0.0%)	1 (2.6%)	1 (1.1%)
		Worsened by 2 Categories	3 (5.8%)	0 (0.0%)	3 (3.3%)
		Worsened by 1 Category	3 (5.8%)	3 (7.9%)	6 (6.7%)
		No Change	38 (73.1%)	29 (76.3%)	67 (74.4%)
		Improved by ≥1 Categories	8 (15.4%)	5 (13.2%)	13 (14.4%)
C10D1			N=44	N=28	N=72
		Worsened by ≥3 Categories	1 (2.3%)	0 (0.0%)	1 (1.4%)
		Worsened by 2 Categories	0 (0.0%)	2 (7.1%)	2 (2.8%)
		Worsened by 1 Category	5 (11.4%)	3 (10.7%)	8 (11.1%)
		No Change	29 (65.9%)	18 (64.3%)	47 (65.3%)
		Improved by ≥1 Categories	9 (20.5%)	5 (17.9%)	14 (19.4%)
C11D1			N=40	N=22	N=62
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.5%)	0 (0.0%)	1 (1.6%)
		Worsened by 1 Category	5 (12.5%)	6 (27.3%)	11 (17.7%)
		No Change	26 (65.0%)	13 (59.1%)	39 (62.9%)
		Improved by ≥1 Categories	8 (20.0%)	3 (13.6%)	11 (17.7%)
C12D1			N=37	N=18	N=55
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.7%)	0 (0.0%)	1 (1.8%)
		Worsened by 1 Category	6 (16.2%)	3 (16.7%)	9 (16.4%)
		No Change	25 (67.6%)	14 (77.8%)	39 (70.9%)
		Improved by ≥1 Categories	5 (13.5%)	1 (5.6%)	6 (10.9%)
C13D1			N=29	N=13	N=42
		Worsened by ≥3 Categories	1 (3.4%)	0 (0.0%)	1 (2.4%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	5 (17.2%)	4 (30.8%)	9 (21.4%)
		No Change	17 (58.6%)	8 (61.5%)	25 (59.5%)
		Improved by ≥1 Categories	6 (20.7%)	1 (7.7%)	7 (16.7%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C14D1			N=30	N=12	N=42
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	6 (20.0%)	2 (16.7%)	8 (19.0%)
		No Change	19 (63.3%)	9 (75.0%)	28 (66.7%)
	Improved by ≥1 Categories	5 (16.7%)	1 (8.3%)	6 (14.3%)	
C15D1			N=25	N=12	N=37
		Worsened by ≥3 Categories	0 (0.0%)	2 (16.7%)	2 (5.4%)
		Worsened by 2 Categories	1 (4.0%)	0 (0.0%)	1 (2.7%)
		Worsened by 1 Category	7 (28.0%)	0 (0.0%)	7 (18.9%)
		No Change	13 (52.0%)	9 (75.0%)	22 (59.5%)
	Improved by ≥1 Categories	4 (16.0%)	1 (8.3%)	5 (13.5%)	
C16D1			N=25	N=10	N=35
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (10.0%)	1 (2.9%)
		Worsened by 1 Category	2 (8.0%)	2 (20.0%)	4 (11.4%)
		No Change	19 (76.0%)	6 (60.0%)	25 (71.4%)
	Improved by ≥1 Categories	4 (16.0%)	1 (10.0%)	5 (14.3%)	
C17D1			N=23	N=7	N=30
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	5 (21.7%)	0 (0.0%)	5 (16.7%)
		No Change	15 (65.2%)	6 (85.7%)	21 (70.0%)
	Improved by ≥1 Categories	3 (13.0%)	1 (14.3%)	4 (13.3%)	
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (15.0%)	0 (0.0%)	3 (11.1%)
		No Change	14 (70.0%)	6 (85.7%)	20 (74.1%)
	Improved by ≥1 Categories	3 (15.0%)	1 (14.3%)	4 (14.8%)	
C19D1			N=19	N=5	N=24
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (10.5%)	2 (40.0%)	4 (16.7%)
		No Change	12 (63.2%)	2 (40.0%)	14 (58.3%)
	Improved by ≥1 Categories	5 (26.3%)	1 (20.0%)	6 (25.0%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C20D1			N=18	N=4	N=22
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	4 (22.2%)	0 (0.0%)	4 (18.2%)
		No Change	9 (50.0%)	3 (75.0%)	12 (54.5%)
		Improved by ≥1 Categories	5 (27.8%)	1 (25.0%)	6 (27.3%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (17.6%)	0 (0.0%)	3 (14.3%)
		No Change	12 (70.6%)	3 (75.0%)	15 (71.4%)
		Improved by ≥1 Categories	2 (11.8%)	1 (25.0%)	3 (14.3%)
C22D1			N=14	N=3	N=17
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (21.4%)	0 (0.0%)	3 (17.6%)
		No Change	7 (50.0%)	2 (66.7%)	9 (52.9%)
		Improved by ≥1 Categories	4 (28.6%)	1 (33.3%)	5 (29.4%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (8.3%)
		No Change	4 (44.4%)	2 (66.7%)	6 (50.0%)
		Improved by ≥1 Categories	4 (44.4%)	1 (33.3%)	5 (41.7%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (9.1%)
		No Change	6 (66.7%)	1 (50.0%)	7 (63.6%)
		Improved by ≥1 Categories	2 (22.2%)	1 (50.0%)	3 (27.3%)
C25D1			N=7	N=0	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (14.3%)	0 (NE)	1 (14.3%)
		No Change	3 (42.9%)	0 (NE)	3 (42.9%)
		Improved by ≥1 Categories	3 (42.9%)	0 (NE)	3 (42.9%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (28.6%)	0 (0.0%)	2 (25.0%)
		No Change	4 (57.1%)	1 (100.0%)	5 (62.5%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (14.3%)	0 (0.0%)	1 (12.5%)
		No Change	5 (71.4%)	1 (100.0%)	6 (75.0%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (16.7%)	0 (0.0%)	1 (14.3%)
		No Change	5 (83.3%)	1 (100.0%)	6 (85.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (50.0%)	1 (100.0%)	3 (60.0%)
		Improved by ≥1 Categories	2 (50.0%)	0 (0.0%)	2 (40.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (20.0%)
		No Change	4 (100.0%)	0 (0.0%)	4 (80.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (33.3%)
		No Change	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Improved by ≥1 Categories	1 (50.0%)	0 (0.0%)	1 (33.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	1 (50.0%)	1 (100.0%)	2 (66.7%)
		Improved by ≥1 Categories	1 (50.0%)	0 (0.0%)	1 (33.3%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (66.7%)	1 (100.0%)	3 (75.0%)
		Improved by ≥1 Categories	1 (33.3%)	0 (0.0%)	1 (25.0%)
C34D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C38D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
	EOT		N=113	N=118	N=231
		Worsened by ≥3 Categories	3 (2.7%)	5 (4.2%)	8 (3.5%)
		Worsened by 2 Categories	6 (5.3%)	6 (5.1%)	12 (5.2%)
		Worsened by 1 Category	21 (18.6%)	23 (19.5%)	44 (19.0%)
		No Change	69 (61.1%)	67 (56.8%)	136 (58.9%)
	Improved by ≥1 Categories	14 (12.4%)	17 (14.4%)	31 (13.4%)	
	Long Term Follow-up		N=14	N=9	N=23
		Worsened by ≥3 Categories	0 (0.0%)	1 (11.1%)	1 (4.3%)
		Worsened by 2 Categories	1 (7.1%)	0 (0.0%)	1 (4.3%)
		Worsened by 1 Category	2 (14.3%)	1 (11.1%)	3 (13.0%)
		No Change	9 (64.3%)	5 (55.6%)	14 (60.9%)
	Improved by ≥1 Categories	2 (14.3%)	2 (22.2%)	4 (17.4%)	
Hair Loss Amount	C2D1		N=146	N=139	N=285
		Worsened by ≥3 Categories	95 (65.1%)	34 (24.5%)	129 (45.3%)
		Worsened by 2 Categories	11 (7.5%)	15 (10.8%)	26 (9.1%)
		Worsened by 1 Category	17 (11.6%)	13 (9.4%)	30 (10.5%)
		No Change	20 (13.7%)	65 (46.8%)	85 (29.8%)
		Improved by ≥1 Categories	3 (2.1%)	12 (8.6%)	15 (5.3%)
	C3D1		N=105	N=99	N=204
		Worsened by ≥3 Categories	31 (29.5%)	21 (21.2%)	52 (25.5%)
		Worsened by 2 Categories	7 (6.7%)	12 (12.1%)	19 (9.3%)
		Worsened by 1 Category	10 (9.5%)	21 (21.2%)	31 (15.2%)
		No Change	48 (45.7%)	39 (39.4%)	87 (42.6%)
		Improved by ≥1 Categories	9 (8.6%)	6 (6.1%)	15 (7.4%)
	C4D1		N=94	N=88	N=182
		Worsened by ≥3 Categories	21 (22.3%)	11 (12.5%)	32 (17.6%)
		Worsened by 2 Categories	3 (3.2%)	8 (9.1%)	11 (6.0%)
		Worsened by 1 Category	11 (11.7%)	19 (21.6%)	30 (16.5%)
		No Change	46 (48.9%)	45 (51.1%)	91 (50.0%)
	Improved by ≥1 Categories	13 (13.8%)	5 (5.7%)	18 (9.9%)	
C5D1		N=82	N=74	N=156	
	Worsened by ≥3 Categories	17 (20.7%)	4 (5.4%)	21 (13.5%)	
	Worsened by 2 Categories	3 (3.7%)	15 (20.3%)	18 (11.5%)	
	Worsened by 1 Category	5 (6.1%)	20 (27.0%)	25 (16.0%)	
	No Change	44 (53.7%)	31 (41.9%)	75 (48.1%)	
	Improved by ≥1 Categories	13 (15.9%)	4 (5.4%)	17 (10.9%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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C6D1			N=80	N=66	N=146
		Worsened by ≥3 Categories	15 (18.8%)	4 (6.1%)	19 (13.0%)
		Worsened by 2 Categories	5 (6.3%)	6 (9.1%)	11 (7.5%)
		Worsened by 1 Category	5 (6.3%)	18 (27.3%)	23 (15.8%)
		No Change	42 (52.5%)	35 (53.0%)	77 (52.7%)
		Improved by ≥1 Categories	13 (16.3%)	3 (4.5%)	16 (11.0%)
C7D1			N=67	N=53	N=120
		Worsened by ≥3 Categories	11 (16.4%)	1 (1.9%)	12 (10.0%)
		Worsened by 2 Categories	2 (3.0%)	4 (7.5%)	6 (5.0%)
		Worsened by 1 Category	3 (4.5%)	12 (22.6%)	15 (12.5%)
		No Change	40 (59.7%)	34 (64.2%)	74 (61.7%)
		Improved by ≥1 Categories	11 (16.4%)	2 (3.8%)	13 (10.8%)
C8D1			N=60	N=48	N=108
		Worsened by ≥3 Categories	12 (20.0%)	0 (0.0%)	12 (11.1%)
		Worsened by 2 Categories	2 (3.3%)	1 (2.1%)	3 (2.8%)
		Worsened by 1 Category	3 (5.0%)	14 (29.2%)	17 (15.7%)
		No Change	37 (61.7%)	29 (60.4%)	66 (61.1%)
		Improved by ≥1 Categories	6 (10.0%)	4 (8.3%)	10 (9.3%)
C9D1			N=47	N=40	N=87
		Worsened by ≥3 Categories	6 (12.8%)	1 (2.5%)	7 (8.0%)
		Worsened by 2 Categories	1 (2.1%)	3 (7.5%)	4 (4.6%)
		Worsened by 1 Category	4 (8.5%)	11 (27.5%)	15 (17.2%)
		No Change	31 (66.0%)	23 (57.5%)	54 (62.1%)
		Improved by ≥1 Categories	5 (10.6%)	2 (5.0%)	7 (8.0%)
C10D1			N=38	N=29	N=67
		Worsened by ≥3 Categories	5 (13.2%)	0 (0.0%)	5 (7.5%)
		Worsened by 2 Categories	1 (2.6%)	2 (6.9%)	3 (4.5%)
		Worsened by 1 Category	1 (2.6%)	8 (27.6%)	9 (13.4%)
		No Change	27 (71.1%)	18 (62.1%)	45 (67.2%)
		Improved by ≥1 Categories	4 (10.5%)	1 (3.4%)	5 (7.5%)
C11D1			N=32	N=23	N=55
		Worsened by ≥3 Categories	4 (12.5%)	0 (0.0%)	4 (7.3%)
		Worsened by 2 Categories	1 (3.1%)	0 (0.0%)	1 (1.8%)
		Worsened by 1 Category	2 (6.3%)	4 (17.4%)	6 (10.9%)
		No Change	23 (71.9%)	17 (73.9%)	40 (72.7%)
		Improved by ≥1 Categories	2 (6.3%)	2 (8.7%)	4 (7.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C12D1			N=34	N=18	N=52
		Worsened by ≥3 Categories	5 (14.7%)	0 (0.0%)	5 (9.6%)
		Worsened by 2 Categories	1 (2.9%)	0 (0.0%)	1 (1.9%)
		Worsened by 1 Category	2 (5.9%)	7 (38.9%)	9 (17.3%)
		No Change	25 (73.5%)	10 (55.6%)	35 (67.3%)
		Improved by ≥1 Categories	1 (2.9%)	1 (5.6%)	2 (3.8%)
C13D1			N=25	N=13	N=38
		Worsened by ≥3 Categories	4 (16.0%)	0 (0.0%)	4 (10.5%)
		Worsened by 2 Categories	1 (4.0%)	0 (0.0%)	1 (2.6%)
		Worsened by 1 Category	1 (4.0%)	4 (30.8%)	5 (13.2%)
		No Change	17 (68.0%)	8 (61.5%)	25 (65.8%)
		Improved by ≥1 Categories	2 (8.0%)	1 (7.7%)	3 (7.9%)
C14D1			N=24	N=11	N=35
		Worsened by ≥3 Categories	6 (25.0%)	0 (0.0%)	6 (17.1%)
		Worsened by 2 Categories	2 (8.3%)	0 (0.0%)	2 (5.7%)
		Worsened by 1 Category	0 (0.0%)	3 (27.3%)	3 (8.6%)
		No Change	15 (62.5%)	7 (63.6%)	22 (62.9%)
		Improved by ≥1 Categories	1 (4.2%)	1 (9.1%)	2 (5.7%)
C15D1			N=21	N=11	N=32
		Worsened by ≥3 Categories	4 (19.0%)	0 (0.0%)	4 (12.5%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (4.8%)	3 (27.3%)	4 (12.5%)
		No Change	15 (71.4%)	7 (63.6%)	22 (68.8%)
		Improved by ≥1 Categories	1 (4.8%)	1 (9.1%)	2 (6.3%)
C16D1			N=21	N=8	N=29
		Worsened by ≥3 Categories	3 (14.3%)	0 (0.0%)	3 (10.3%)
		Worsened by 2 Categories	1 (4.8%)	0 (0.0%)	1 (3.4%)
		Worsened by 1 Category	1 (4.8%)	3 (37.5%)	4 (13.8%)
		No Change	16 (76.2%)	5 (62.5%)	21 (72.4%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C17D1			N=21	N=6	N=27
		Worsened by ≥3 Categories	3 (14.3%)	1 (16.7%)	4 (14.8%)
		Worsened by 2 Categories	1 (4.8%)	0 (0.0%)	1 (3.7%)
		Worsened by 1 Category	1 (4.8%)	2 (33.3%)	3 (11.1%)
		No Change	15 (71.4%)	3 (50.0%)	18 (66.7%)
		Improved by ≥1 Categories	1 (4.8%)	0 (0.0%)	1 (3.7%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C18D1			N=16	N=7	N=23
		Worsened by ≥3 Categories	4 (25.0%)	0 (0.0%)	4 (17.4%)
		Worsened by 2 Categories	1 (6.3%)	0 (0.0%)	1 (4.3%)
		Worsened by 1 Category	0 (0.0%)	2 (28.6%)	2 (8.7%)
		No Change	10 (62.5%)	5 (71.4%)	15 (65.2%)
		Improved by ≥1 Categories	1 (6.3%)	0 (0.0%)	1 (4.3%)
C19D1			N=16	N=6	N=22
		Worsened by ≥3 Categories	4 (25.0%)	0 (0.0%)	4 (18.2%)
		Worsened by 2 Categories	1 (6.3%)	0 (0.0%)	1 (4.5%)
		Worsened by 1 Category	1 (6.3%)	1 (16.7%)	2 (9.1%)
		No Change	9 (56.3%)	5 (83.3%)	14 (63.6%)
		Improved by ≥1 Categories	1 (6.3%)	0 (0.0%)	1 (4.5%)
C20D1			N=15	N=4	N=19
		Worsened by ≥3 Categories	3 (20.0%)	0 (0.0%)	3 (15.8%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (6.7%)	1 (25.0%)	2 (10.5%)
		No Change	10 (66.7%)	3 (75.0%)	13 (68.4%)
		Improved by ≥1 Categories	1 (6.7%)	0 (0.0%)	1 (5.3%)
C21D1			N=14	N=4	N=18
		Worsened by ≥3 Categories	4 (28.6%)	0 (0.0%)	4 (22.2%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (25.0%)	1 (5.6%)
		No Change	9 (64.3%)	3 (75.0%)	12 (66.7%)
		Improved by ≥1 Categories	1 (7.1%)	0 (0.0%)	1 (5.6%)
C22D1			N=11	N=3	N=14
		Worsened by ≥3 Categories	3 (27.3%)	0 (0.0%)	3 (21.4%)
		Worsened by 2 Categories	1 (9.1%)	0 (0.0%)	1 (7.1%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (54.5%)	3 (100.0%)	9 (64.3%)
		Improved by ≥1 Categories	1 (9.1%)	0 (0.0%)	1 (7.1%)
C23D1			N=8	N=3	N=11
		Worsened by ≥3 Categories	2 (25.0%)	0 (0.0%)	2 (18.2%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (62.5%)	3 (100.0%)	8 (72.7%)
		Improved by ≥1 Categories	1 (12.5%)	0 (0.0%)	1 (9.1%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C24D1			N=8	N=2	N=10
		Worsened by ≥3 Categories	1 (12.5%)	0 (0.0%)	1 (10.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (75.0%)	2 (100.0%)	8 (80.0%)
		Improved by ≥1 Categories	1 (12.5%)	0 (0.0%)	1 (10.0%)
C25D1			N=7	N=0	N=7
		Worsened by ≥3 Categories	1 (14.3%)	0 (NE)	1 (14.3%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	5 (71.4%)	0 (NE)	5 (71.4%)
		Improved by ≥1 Categories	1 (14.3%)	0 (NE)	1 (14.3%)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (14.3%)	0 (0.0%)	1 (12.5%)
		No Change	6 (85.7%)	1 (100.0%)	7 (87.5%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C27D1			N=5	N=1	N=6
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (100.0%)	1 (100.0%)	6 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C28D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	4 (100.0%)	1 (100.0%)	5 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C30D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (100.0%)	1 (100.0%)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	3 (100.0%)	1 (100.0%)	4 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C34D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C36D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
	Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)	
EOT			N=104	N=117	N=221
		Worsened by ≥3 Categories	26 (25.0%)	10 (8.5%)	36 (16.3%)
		Worsened by 2 Categories	5 (4.8%)	8 (6.8%)	13 (5.9%)
		Worsened by 1 Category	5 (4.8%)	23 (19.7%)	28 (12.7%)
		No Change	56 (53.8%)	71 (60.7%)	127 (57.5%)
	Improved by ≥1 Categories	12 (11.5%)	5 (4.3%)	17 (7.7%)	
Long Term Follow-up			N=14	N=9	N=23
		Worsened by ≥3 Categories	1 (7.1%)	1 (11.1%)	2 (8.7%)
		Worsened by 2 Categories	0 (0.0%)	1 (11.1%)	1 (4.3%)
		Worsened by 1 Category	0 (0.0%)	1 (11.1%)	1 (4.3%)
		No Change	11 (78.6%)	6 (66.7%)	17 (73.9%)
	Improved by ≥1 Categories	2 (14.3%)	0 (0.0%)	2 (8.7%)	
Fatigue Severity C2D1			N=148	N=143	N=291
		Worsened by ≥3 Categories	2 (1.4%)	2 (1.4%)	4 (1.4%)
		Worsened by 2 Categories	16 (10.8%)	10 (7.0%)	26 (8.9%)
		Worsened by 1 Category	46 (31.1%)	48 (33.6%)	94 (32.3%)
		No Change	64 (43.2%)	59 (41.3%)	123 (42.3%)
	Improved by ≥1 Categories	20 (13.5%)	24 (16.8%)	44 (15.1%)	
C3D1			N=115	N=102	N=217
		Worsened by ≥3 Categories	1 (0.9%)	1 (1.0%)	2 (0.9%)
		Worsened by 2 Categories	9 (7.8%)	7 (6.9%)	16 (7.4%)
		Worsened by 1 Category	30 (26.1%)	23 (22.5%)	53 (24.4%)
		No Change	57 (49.6%)	51 (50.0%)	108 (49.8%)
	Improved by ≥1 Categories	18 (15.7%)	20 (19.6%)	38 (17.5%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C4D1			N=106	N=93	N=199
		Worsened by ≥3 Categories	1 (0.9%)	0 (0.0%)	1 (0.5%)
		Worsened by 2 Categories	7 (6.6%)	6 (6.5%)	13 (6.5%)
		Worsened by 1 Category	26 (24.5%)	22 (23.7%)	48 (24.1%)
		No Change	45 (42.5%)	40 (43.0%)	85 (42.7%)
	Improved by ≥1 Categories	27 (25.5%)	25 (26.9%)	52 (26.1%)	
C5D1			N=91	N=79	N=170
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	6 (6.6%)	2 (2.5%)	8 (4.7%)
		Worsened by 1 Category	16 (17.6%)	21 (26.6%)	37 (21.8%)
		No Change	47 (51.6%)	35 (44.3%)	82 (48.2%)
	Improved by ≥1 Categories	22 (24.2%)	21 (26.6%)	43 (25.3%)	
C6D1			N=90	N=70	N=160
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (2.2%)	2 (2.9%)	4 (2.5%)
		Worsened by 1 Category	19 (21.1%)	18 (25.7%)	37 (23.1%)
		No Change	51 (56.7%)	30 (42.9%)	81 (50.6%)
	Improved by ≥1 Categories	18 (20.0%)	20 (28.6%)	38 (23.8%)	
C7D1			N=74	N=52	N=126
		Worsened by ≥3 Categories	1 (1.4%)	0 (0.0%)	1 (0.8%)
		Worsened by 2 Categories	2 (2.7%)	1 (1.9%)	3 (2.4%)
		Worsened by 1 Category	8 (10.8%)	7 (13.5%)	15 (11.9%)
		No Change	45 (60.8%)	30 (57.7%)	75 (59.5%)
	Improved by ≥1 Categories	18 (24.3%)	14 (26.9%)	32 (25.4%)	
C8D1			N=70	N=50	N=120
		Worsened by ≥3 Categories	1 (1.4%)	0 (0.0%)	1 (0.8%)
		Worsened by 2 Categories	2 (2.9%)	3 (6.0%)	5 (4.2%)
		Worsened by 1 Category	10 (14.3%)	8 (16.0%)	18 (15.0%)
		No Change	35 (50.0%)	26 (52.0%)	61 (50.8%)
	Improved by ≥1 Categories	22 (31.4%)	13 (26.0%)	35 (29.2%)	
C9D1			N=57	N=41	N=98
		Worsened by ≥3 Categories	1 (1.8%)	2 (4.9%)	3 (3.1%)
		Worsened by 2 Categories	4 (7.0%)	3 (7.3%)	7 (7.1%)
		Worsened by 1 Category	7 (12.3%)	4 (9.8%)	11 (11.2%)
		No Change	28 (49.1%)	20 (48.8%)	48 (49.0%)
	Improved by ≥1 Categories	17 (29.8%)	12 (29.3%)	29 (29.6%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C10D1			N=49	N=30	N=79
		Worsened by ≥3 Categories	0 (0.0%)	1 (3.3%)	1 (1.3%)
		Worsened by 2 Categories	0 (0.0%)	3 (10.0%)	3 (3.8%)
		Worsened by 1 Category	10 (20.4%)	5 (16.7%)	15 (19.0%)
		No Change	24 (49.0%)	14 (46.7%)	38 (48.1%)
		Improved by ≥1 Categories	15 (30.6%)	7 (23.3%)	22 (27.8%)
C11D1			N=43	N=23	N=66
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (4.7%)	2 (8.7%)	4 (6.1%)
		Worsened by 1 Category	8 (18.6%)	3 (13.0%)	11 (16.7%)
		No Change	18 (41.9%)	12 (52.2%)	30 (45.5%)
		Improved by ≥1 Categories	15 (34.9%)	6 (26.1%)	21 (31.8%)
C12D1			N=39	N=19	N=58
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.6%)	1 (5.3%)	2 (3.4%)
		Worsened by 1 Category	7 (17.9%)	2 (10.5%)	9 (15.5%)
		No Change	17 (43.6%)	11 (57.9%)	28 (48.3%)
		Improved by ≥1 Categories	14 (35.9%)	5 (26.3%)	19 (32.8%)
C13D1			N=31	N=14	N=45
		Worsened by ≥3 Categories	1 (3.2%)	1 (7.1%)	2 (4.4%)
		Worsened by 2 Categories	0 (0.0%)	1 (7.1%)	1 (2.2%)
		Worsened by 1 Category	4 (12.9%)	1 (7.1%)	5 (11.1%)
		No Change	17 (54.8%)	4 (28.6%)	21 (46.7%)
		Improved by ≥1 Categories	9 (29.0%)	7 (50.0%)	16 (35.6%)
C14D1			N=31	N=12	N=43
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (6.5%)	2 (16.7%)	4 (9.3%)
		Worsened by 1 Category	6 (19.4%)	2 (16.7%)	8 (18.6%)
		No Change	16 (51.6%)	5 (41.7%)	21 (48.8%)
		Improved by ≥1 Categories	7 (22.6%)	3 (25.0%)	10 (23.3%)
C15D1			N=26	N=13	N=39
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	3 (23.1%)	3 (7.7%)
		Worsened by 1 Category	7 (26.9%)	2 (15.4%)	9 (23.1%)
		No Change	13 (50.0%)	5 (38.5%)	18 (46.2%)
		Improved by ≥1 Categories	6 (23.1%)	3 (23.1%)	9 (23.1%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C16D1			N=26	N=10	N=36
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (3.8%)	2 (20.0%)	3 (8.3%)
		Worsened by 1 Category	7 (26.9%)	1 (10.0%)	8 (22.2%)
		No Change	10 (38.5%)	2 (20.0%)	12 (33.3%)
		Improved by ≥1 Categories	8 (30.8%)	5 (50.0%)	13 (36.1%)
C17D1			N=24	N=7	N=31
		Worsened by ≥3 Categories	0 (0.0%)	1 (14.3%)	1 (3.2%)
		Worsened by 2 Categories	0 (0.0%)	1 (14.3%)	1 (3.2%)
		Worsened by 1 Category	3 (12.5%)	1 (14.3%)	4 (12.9%)
		No Change	17 (70.8%)	1 (14.3%)	18 (58.1%)
		Improved by ≥1 Categories	4 (16.7%)	3 (42.9%)	7 (22.6%)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	2 (28.6%)	2 (7.4%)
		Worsened by 1 Category	1 (5.0%)	0 (0.0%)	1 (3.7%)
		No Change	13 (65.0%)	2 (28.6%)	15 (55.6%)
		Improved by ≥1 Categories	6 (30.0%)	3 (42.9%)	9 (33.3%)
C19D1			N=19	N=6	N=25
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (16.7%)	1 (4.0%)
		Worsened by 1 Category	1 (5.3%)	1 (16.7%)	2 (8.0%)
		No Change	12 (63.2%)	3 (50.0%)	15 (60.0%)
		Improved by ≥1 Categories	6 (31.6%)	1 (16.7%)	7 (28.0%)
C20D1			N=19	N=4	N=23
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (5.3%)	0 (0.0%)	1 (4.3%)
		Worsened by 1 Category	3 (15.8%)	2 (50.0%)	5 (21.7%)
		No Change	10 (52.6%)	1 (25.0%)	11 (47.8%)
		Improved by ≥1 Categories	5 (26.3%)	1 (25.0%)	6 (26.1%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (25.0%)	1 (4.8%)
		Worsened by 1 Category	2 (11.8%)	1 (25.0%)	3 (14.3%)
		No Change	11 (64.7%)	1 (25.0%)	12 (57.1%)
		Improved by ≥1 Categories	4 (23.5%)	1 (25.0%)	5 (23.8%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C22D1			N=15	N=3	N=18
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (6.7%)	1 (33.3%)	2 (11.1%)
		No Change	10 (66.7%)	1 (33.3%)	11 (61.1%)
		Improved by ≥1 Categories	4 (26.7%)	1 (33.3%)	5 (27.8%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (33.3%)	1 (33.3%)	4 (33.3%)
		No Change	4 (44.4%)	0 (0.0%)	4 (33.3%)
		Improved by ≥1 Categories	2 (22.2%)	2 (66.7%)	4 (33.3%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (11.1%)	0 (0.0%)	1 (9.1%)
		No Change	6 (66.7%)	1 (50.0%)	7 (63.6%)
		Improved by ≥1 Categories	2 (22.2%)	1 (50.0%)	3 (27.3%)
C25D1			N=8	N=0	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (12.5%)	0 (NE)	1 (12.5%)
		No Change	4 (50.0%)	0 (NE)	4 (50.0%)
		Improved by ≥1 Categories	3 (37.5%)	0 (NE)	3 (37.5%)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (14.3%)	0 (0.0%)	1 (12.5%)
		No Change	5 (71.4%)	1 (100.0%)	6 (75.0%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	6 (85.7%)	1 (100.0%)	7 (87.5%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (16.7%)	0 (0.0%)	1 (14.3%)
		No Change	4 (66.7%)	1 (100.0%)	5 (71.4%)
		Improved by ≥1 Categories	1 (16.7%)	0 (0.0%)	1 (14.3%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (25.0%)	1 (100.0%)	2 (40.0%)
		No Change	2 (50.0%)	0 (0.0%)	2 (40.0%)
		Improved by ≥1 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (25.0%)	1 (100.0%)	2 (40.0%)
		No Change	3 (75.0%)	0 (0.0%)	3 (60.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (33.3%)
		No Change	2 (100.0%)	0 (0.0%)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (100.0%)	1 (33.3%)
		Worsened by 1 Category	1 (50.0%)	0 (0.0%)	1 (33.3%)
		No Change	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (25.0%)
		No Change	3 (100.0%)	0 (0.0%)	3 (75.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
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Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C34D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=3	N=0	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	3 (100.0%)	0 (NE)	3 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C38D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	1 (50.0%)	0 (NE)	1 (50.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	0 (0.0%)	0 (NE)	0 (0.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
EOT			N=122	N=125	N=247
		Worsened by ≥3 Categories	5 (4.1%)	2 (1.6%)	7 (2.8%)
		Worsened by 2 Categories	14 (11.5%)	16 (12.8%)	30 (12.1%)
		Worsened by 1 Category	28 (23.0%)	35 (28.0%)	63 (25.5%)
		No Change	54 (44.3%)	50 (40.0%)	104 (42.1%)
		Improved by ≥1 Categories	21 (17.2%)	22 (17.6%)	43 (17.4%)
Long Term Follow-up			N=14	N=9	N=23
		Worsened by ≥3 Categories	0 (0.0%)	1 (11.1%)	1 (4.3%)
		Worsened by 2 Categories	2 (14.3%)	1 (11.1%)	3 (13.0%)
		Worsened by 1 Category	4 (28.6%)	4 (44.4%)	8 (34.8%)
		No Change	5 (35.7%)	3 (33.3%)	8 (34.8%)
		Improved by ≥1 Categories	3 (21.4%)	0 (0.0%)	3 (13.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
Fatigue Interference	C2D1		N=145	N=139	N=284
		Worsened by ≥3 Categories	5 (3.4%)	4 (2.9%)	9 (3.2%)
		Worsened by 2 Categories	11 (7.6%)	12 (8.6%)	23 (8.1%)
		Worsened by 1 Category	46 (31.7%)	36 (25.9%)	82 (28.9%)
		No Change	59 (40.7%)	60 (43.2%)	119 (41.9%)
	Improved by ≥1 Categories	24 (16.6%)	27 (19.4%)	51 (18.0%)	
	C3D1		N=115	N=101	N=216
		Worsened by ≥3 Categories	4 (3.5%)	3 (3.0%)	7 (3.2%)
		Worsened by 2 Categories	5 (4.3%)	4 (4.0%)	9 (4.2%)
		Worsened by 1 Category	25 (21.7%)	23 (22.8%)	48 (22.2%)
		No Change	59 (51.3%)	42 (41.6%)	101 (46.8%)
	Improved by ≥1 Categories	22 (19.1%)	29 (28.7%)	51 (23.6%)	
	C4D1		N=105	N=92	N=197
		Worsened by ≥3 Categories	2 (1.9%)	1 (1.1%)	3 (1.5%)
		Worsened by 2 Categories	8 (7.6%)	9 (9.8%)	17 (8.6%)
		Worsened by 1 Category	24 (22.9%)	18 (19.6%)	42 (21.3%)
		No Change	43 (41.0%)	34 (37.0%)	77 (39.1%)
	Improved by ≥1 Categories	28 (26.7%)	30 (32.6%)	58 (29.4%)	
	C5D1		N=85	N=76	N=161
		Worsened by ≥3 Categories	2 (2.4%)	0 (0.0%)	2 (1.2%)
Worsened by 2 Categories		9 (10.6%)	4 (5.3%)	13 (8.1%)	
Worsened by 1 Category		8 (9.4%)	15 (19.7%)	23 (14.3%)	
No Change		44 (51.8%)	39 (51.3%)	83 (51.6%)	
Improved by ≥1 Categories	22 (25.9%)	18 (23.7%)	40 (24.8%)		
C6D1		N=86	N=69	N=155	
	Worsened by ≥3 Categories	1 (1.2%)	1 (1.4%)	2 (1.3%)	
	Worsened by 2 Categories	5 (5.8%)	6 (8.7%)	11 (7.1%)	
	Worsened by 1 Category	18 (20.9%)	10 (14.5%)	28 (18.1%)	
	No Change	39 (45.3%)	38 (55.1%)	77 (49.7%)	
Improved by ≥1 Categories	23 (26.7%)	14 (20.3%)	37 (23.9%)		
C7D1		N=73	N=48	N=121	
	Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)	
	Worsened by 2 Categories	5 (6.8%)	1 (2.1%)	6 (5.0%)	
	Worsened by 1 Category	9 (12.3%)	10 (20.8%)	19 (15.7%)	
	No Change	35 (47.9%)	20 (41.7%)	55 (45.5%)	
Improved by ≥1 Categories	24 (32.9%)	17 (35.4%)	41 (33.9%)		

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C8D1			N=69	N=49	N=118
		Worsened by ≥3 Categories	1 (1.4%)	0 (0.0%)	1 (0.8%)
		Worsened by 2 Categories	2 (2.9%)	5 (10.2%)	7 (5.9%)
		Worsened by 1 Category	13 (18.8%)	6 (12.2%)	19 (16.1%)
		No Change	27 (39.1%)	25 (51.0%)	52 (44.1%)
		Improved by ≥1 Categories	26 (37.7%)	13 (26.5%)	39 (33.1%)
C9D1			N=55	N=39	N=94
		Worsened by ≥3 Categories	1 (1.8%)	0 (0.0%)	1 (1.1%)
		Worsened by 2 Categories	3 (5.5%)	4 (10.3%)	7 (7.4%)
		Worsened by 1 Category	11 (20.0%)	9 (23.1%)	20 (21.3%)
		No Change	22 (40.0%)	16 (41.0%)	38 (40.4%)
		Improved by ≥1 Categories	18 (32.7%)	10 (25.6%)	28 (29.8%)
C10D1			N=47	N=28	N=75
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (4.3%)	6 (21.4%)	8 (10.7%)
		Worsened by 1 Category	8 (17.0%)	2 (7.1%)	10 (13.3%)
		No Change	20 (42.6%)	12 (42.9%)	32 (42.7%)
		Improved by ≥1 Categories	17 (36.2%)	8 (28.6%)	25 (33.3%)
C11D1			N=40	N=23	N=63
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (2.5%)	2 (8.7%)	3 (4.8%)
		Worsened by 1 Category	10 (25.0%)	5 (21.7%)	15 (23.8%)
		No Change	14 (35.0%)	7 (30.4%)	21 (33.3%)
		Improved by ≥1 Categories	15 (37.5%)	9 (39.1%)	24 (38.1%)
C12D1			N=35	N=19	N=54
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (5.7%)	1 (5.3%)	3 (5.6%)
		Worsened by 1 Category	4 (11.4%)	2 (10.5%)	6 (11.1%)
		No Change	16 (45.7%)	11 (57.9%)	27 (50.0%)
		Improved by ≥1 Categories	13 (37.1%)	5 (26.3%)	18 (33.3%)
C13D1			N=30	N=14	N=44
		Worsened by ≥3 Categories	1 (3.3%)	1 (7.1%)	2 (4.5%)
		Worsened by 2 Categories	0 (0.0%)	1 (7.1%)	1 (2.3%)
		Worsened by 1 Category	7 (23.3%)	0 (0.0%)	7 (15.9%)
		No Change	13 (43.3%)	6 (42.9%)	19 (43.2%)
		Improved by ≥1 Categories	9 (30.0%)	6 (42.9%)	15 (34.1%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C14D1			N=29	N=12	N=41
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (6.9%)	2 (16.7%)	4 (9.8%)
		Worsened by 1 Category	4 (13.8%)	0 (0.0%)	4 (9.8%)
		No Change	16 (55.2%)	7 (58.3%)	23 (56.1%)
		Improved by ≥1 Categories	7 (24.1%)	3 (25.0%)	10 (24.4%)
C15D1			N=25	N=13	N=38
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	2 (8.0%)	2 (15.4%)	4 (10.5%)
		Worsened by 1 Category	6 (24.0%)	3 (23.1%)	9 (23.7%)
		No Change	11 (44.0%)	3 (23.1%)	14 (36.8%)
		Improved by ≥1 Categories	6 (24.0%)	5 (38.5%)	11 (28.9%)
C16D1			N=25	N=10	N=35
		Worsened by ≥3 Categories	1 (4.0%)	0 (0.0%)	1 (2.9%)
		Worsened by 2 Categories	0 (0.0%)	2 (20.0%)	2 (5.7%)
		Worsened by 1 Category	6 (24.0%)	1 (10.0%)	7 (20.0%)
		No Change	8 (32.0%)	4 (40.0%)	12 (34.3%)
		Improved by ≥1 Categories	10 (40.0%)	3 (30.0%)	13 (37.1%)
C17D1			N=22	N=7	N=29
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (14.3%)	1 (3.4%)
		Worsened by 1 Category	5 (22.7%)	1 (14.3%)	6 (20.7%)
		No Change	12 (54.5%)	2 (28.6%)	14 (48.3%)
		Improved by ≥1 Categories	5 (22.7%)	3 (42.9%)	8 (27.6%)
C18D1			N=20	N=7	N=27
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (14.3%)	1 (3.7%)
		Worsened by 1 Category	3 (15.0%)	1 (14.3%)	4 (14.8%)
		No Change	10 (50.0%)	2 (28.6%)	12 (44.4%)
		Improved by ≥1 Categories	7 (35.0%)	3 (42.9%)	10 (37.0%)
C19D1			N=19	N=5	N=24
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (20.0%)	1 (4.2%)
		Worsened by 1 Category	3 (15.8%)	1 (20.0%)	4 (16.7%)
		No Change	10 (52.6%)	1 (20.0%)	11 (45.8%)
		Improved by ≥1 Categories	6 (31.6%)	2 (40.0%)	8 (33.3%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C20D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (25.0%)	1 (4.8%)
		Worsened by 1 Category	5 (29.4%)	0 (0.0%)	5 (23.8%)
		No Change	8 (47.1%)	2 (50.0%)	10 (47.6%)
		Improved by ≥1 Categories	4 (23.5%)	1 (25.0%)	5 (23.8%)
C21D1			N=17	N=4	N=21
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (25.0%)	1 (4.8%)
		Worsened by 1 Category	4 (23.5%)	1 (25.0%)	5 (23.8%)
		No Change	7 (41.2%)	1 (25.0%)	8 (38.1%)
		Improved by ≥1 Categories	6 (35.3%)	1 (25.0%)	7 (33.3%)
C22D1			N=15	N=3	N=18
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	3 (20.0%)	1 (33.3%)	4 (22.2%)
		No Change	5 (33.3%)	1 (33.3%)	6 (33.3%)
		Improved by ≥1 Categories	7 (46.7%)	1 (33.3%)	8 (44.4%)
C23D1			N=9	N=3	N=12
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (22.2%)	1 (33.3%)	3 (25.0%)
		No Change	4 (44.4%)	1 (33.3%)	5 (41.7%)
		Improved by ≥1 Categories	3 (33.3%)	1 (33.3%)	4 (33.3%)
C24D1			N=9	N=2	N=11
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	2 (22.2%)	0 (0.0%)	2 (18.2%)
		No Change	6 (66.7%)	1 (50.0%)	7 (63.6%)
		Improved by ≥1 Categories	1 (11.1%)	1 (50.0%)	2 (18.2%)
C25D1			N=7	N=0	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (14.3%)	0 (NE)	1 (14.3%)
		No Change	3 (42.9%)	0 (NE)	3 (42.9%)
		Improved by ≥1 Categories	3 (42.9%)	0 (NE)	3 (42.9%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C26D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (71.4%)	1 (100.0%)	6 (75.0%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C27D1			N=7	N=1	N=8
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	1 (14.3%)	0 (0.0%)	1 (12.5%)
		No Change	5 (71.4%)	1 (100.0%)	6 (75.0%)
		Improved by ≥1 Categories	1 (14.3%)	0 (0.0%)	1 (12.5%)
C28D1			N=6	N=1	N=7
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	5 (83.3%)	1 (100.0%)	6 (85.7%)
		Improved by ≥1 Categories	1 (16.7%)	0 (0.0%)	1 (14.3%)
C29D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (25.0%)	1 (100.0%)	2 (40.0%)
		Worsened by 1 Category	0 (0.0%)	0 (0.0%)	0 (0.0%)
		No Change	2 (50.0%)	0 (0.0%)	2 (40.0%)
		Improved by ≥1 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
C30D1			N=4	N=1	N=5
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	1 (25.0%)	0 (0.0%)	1 (20.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (20.0%)
		No Change	3 (75.0%)	0 (0.0%)	3 (60.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C31D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (33.3%)
		No Change	2 (100.0%)	0 (0.0%)	2 (66.7%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C32D1			N=2	N=1	N=3
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	1 (100.0%)	1 (33.3%)
		Worsened by 1 Category	1 (50.0%)	0 (0.0%)	1 (33.3%)
		No Change	1 (50.0%)	0 (0.0%)	1 (33.3%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C33D1			N=3	N=1	N=4
		Worsened by ≥3 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	1 (100.0%)	1 (25.0%)
		No Change	3 (100.0%)	0 (0.0%)	3 (75.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (0.0%)	0 (0.0%)
C34D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C35D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	1 (50.0%)	0 (NE)	1 (50.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C36D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C37D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
Safety Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
C38D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C39D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C40D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	2 (100.0%)	0 (NE)	2 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C41D1			N=2	N=0	N=2
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	1 (50.0%)	0 (NE)	1 (50.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (50.0%)	0 (NE)	1 (50.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C42D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
C43D1			N=1	N=0	N=1
		Worsened by ≥3 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 2 Categories	0 (0.0%)	0 (NE)	0 (0.0%)
		Worsened by 1 Category	0 (0.0%)	0 (NE)	0 (0.0%)
		No Change	1 (100.0%)	0 (NE)	1 (100.0%)
		Improved by ≥1 Categories	0 (0.0%)	0 (NE)	0 (0.0%)

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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Table 15.15.5  
 Distribution of Change in Response Categories from Baseline for PRO-CTCAE Items  
 Safety Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization

Item	Visit	Response Level	SG (N=201)	TPC (N=194)	Overall (N=395)
EOT			N=114	N=122	N=236
		Worsened by ≥3 Categories	6 (5.3%)	5 (4.1%)	11 (4.7%)
		Worsened by 2 Categories	13 (11.4%)	12 (9.8%)	25 (10.6%)
		Worsened by 1 Category	30 (26.3%)	31 (25.4%)	61 (25.8%)
		No Change	50 (43.9%)	54 (44.3%)	104 (44.1%)
		Improved by ≥1 Categories	15 (13.2%)	20 (16.4%)	35 (14.8%)
Long Term Follow-up			N=14	N=9	N=23
		Worsened by ≥3 Categories	0 (0.0%)	1 (11.1%)	1 (4.3%)
		Worsened by 2 Categories	2 (14.3%)	1 (11.1%)	3 (13.0%)
		Worsened by 1 Category	2 (14.3%)	4 (44.4%)	6 (26.1%)
		No Change	6 (42.9%)	2 (22.2%)	8 (34.8%)
	Improved by ≥1 Categories	4 (28.6%)	1 (11.1%)	5 (21.7%)	

Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of Safety Population subjects with non-missing scores at both baseline and at least one post-baseline visit (including the EOT visit). PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; NE = Not Estimable; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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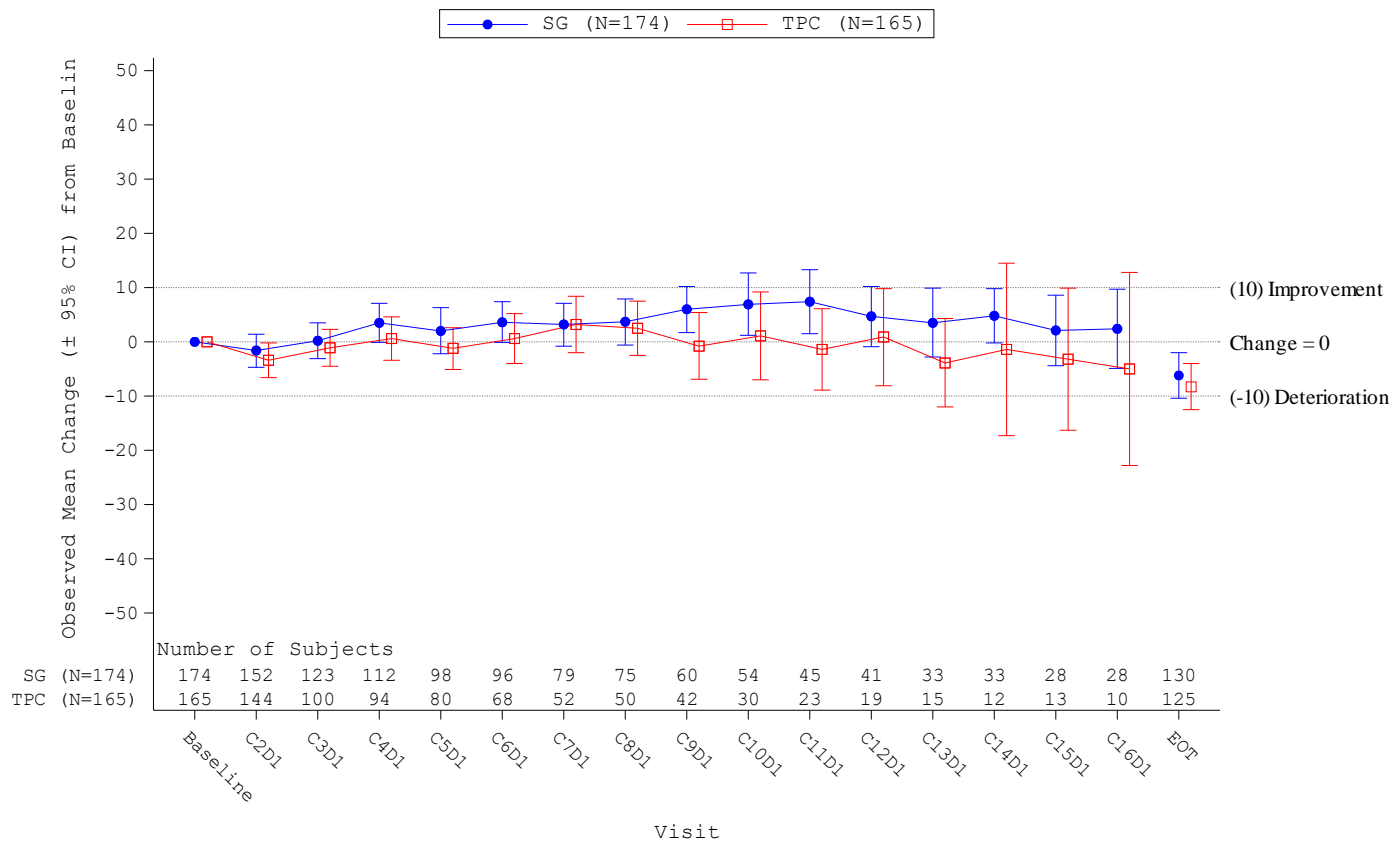
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Figure 15.15.1.1.1  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Global Health Status/QoL by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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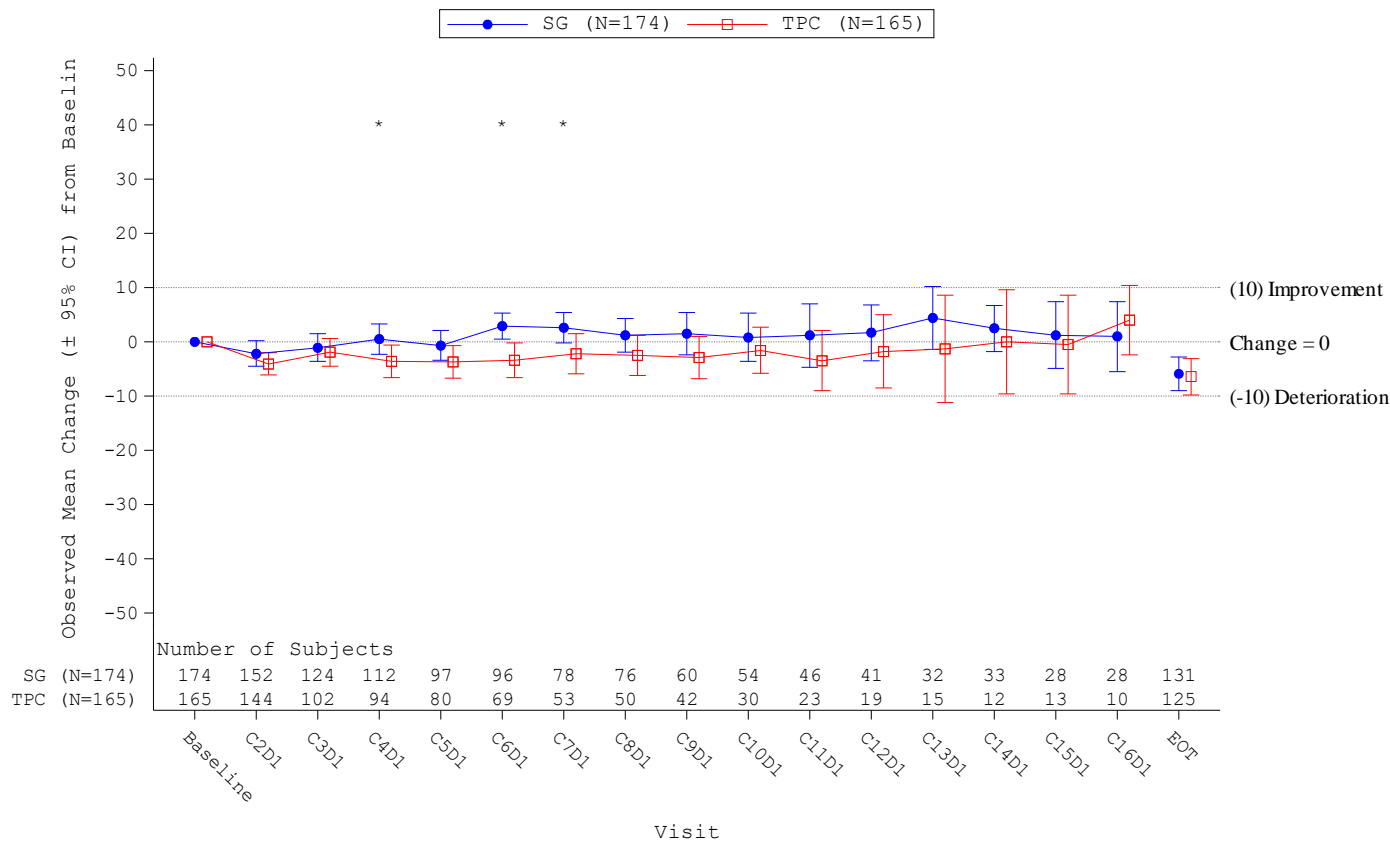
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Figure 15.15.1.1.2  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Physical Functioning by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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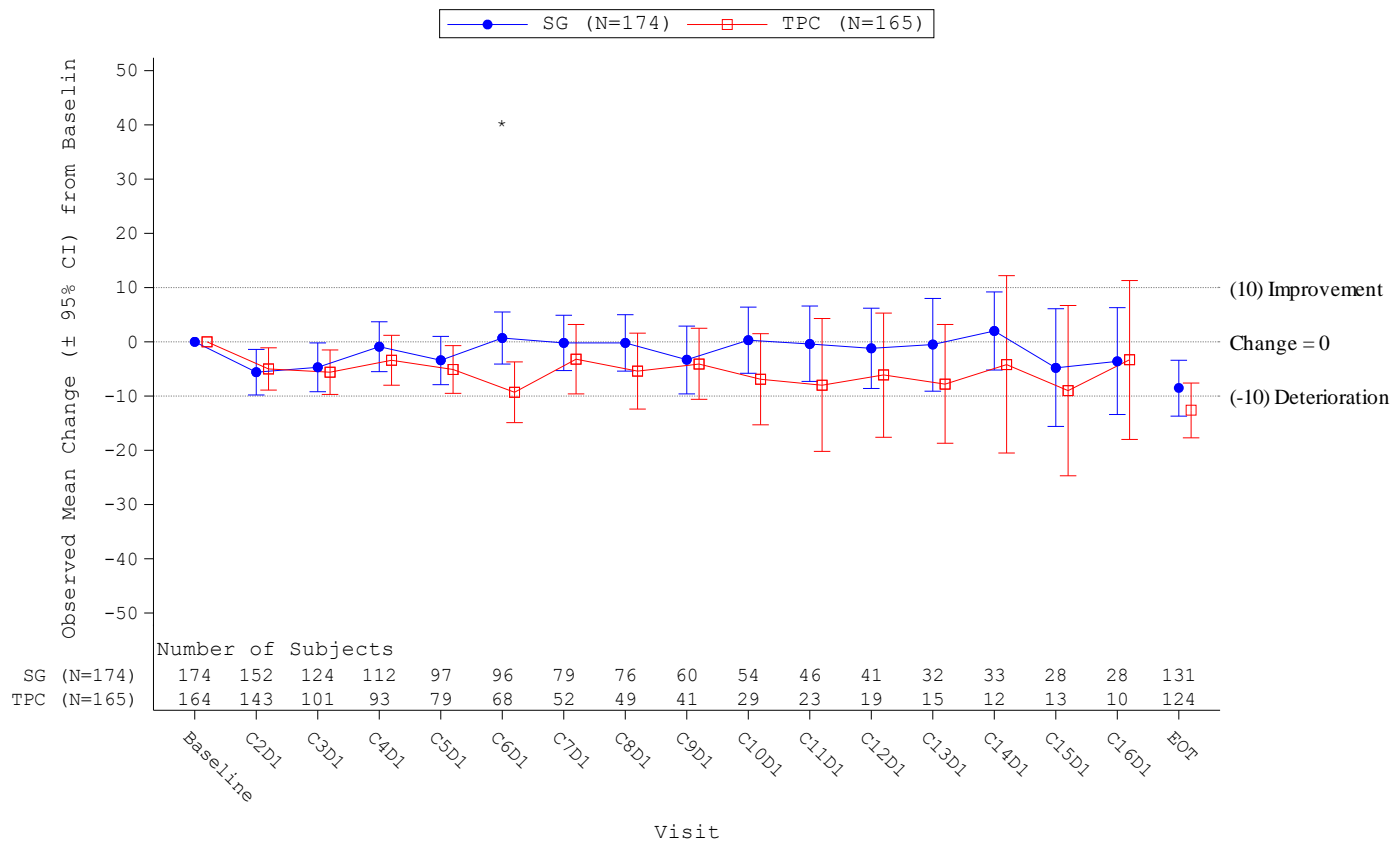
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Figure 15.15.1.1.3  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Role Functioning by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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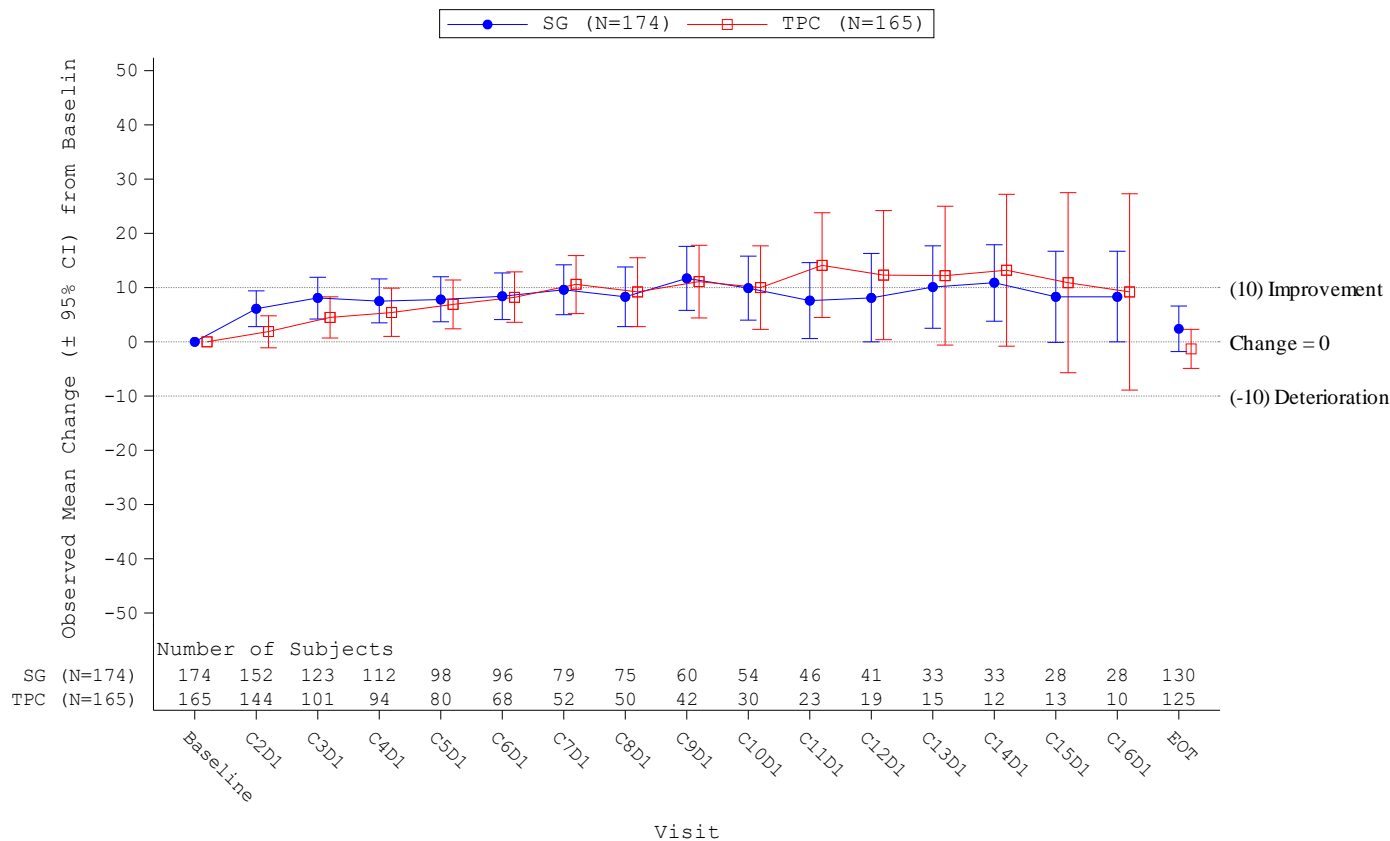
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Figure 15.15.1.1.4  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Emotional Functioning by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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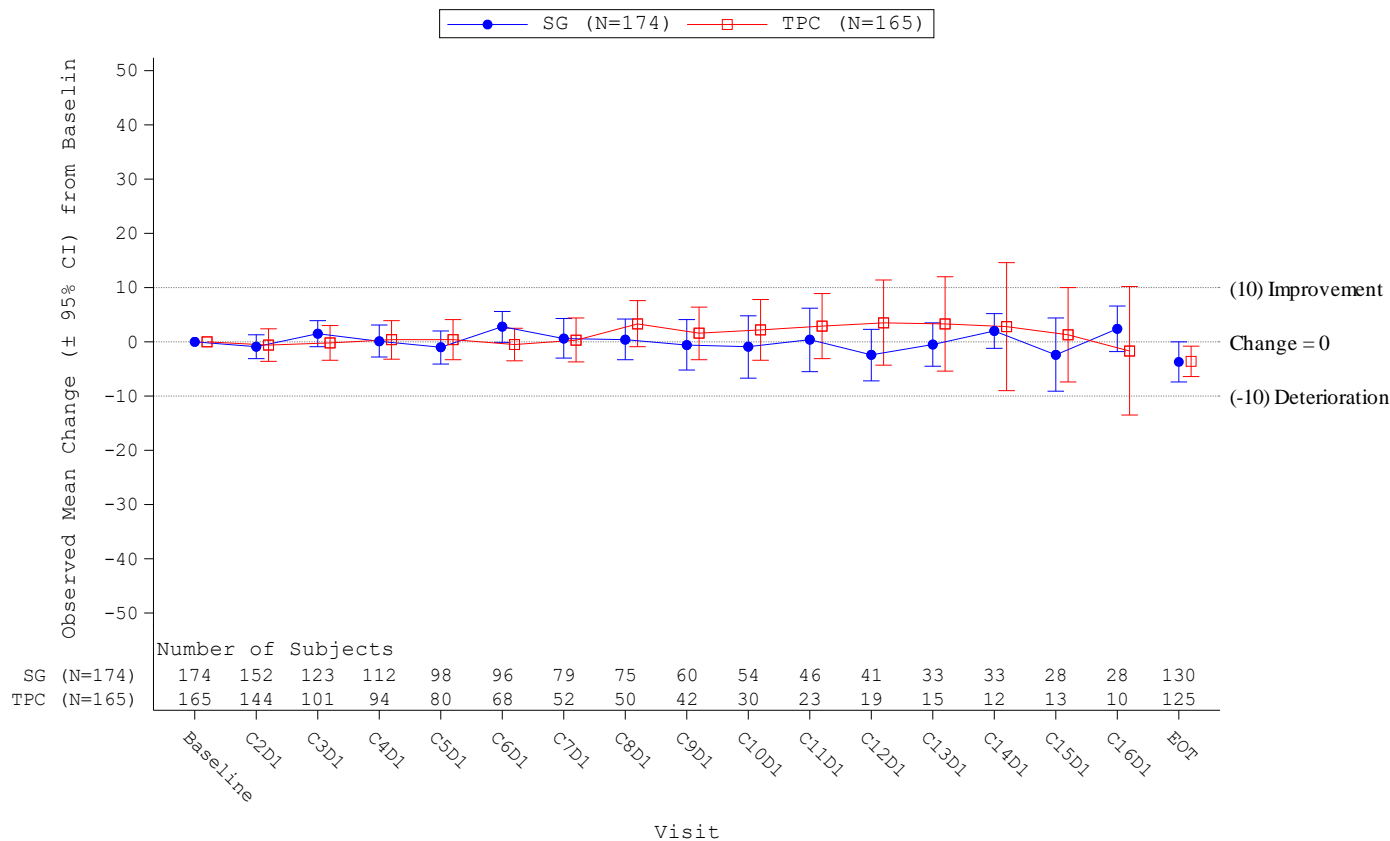
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Figure 15.15.1.1.5  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Cognitive Functioning by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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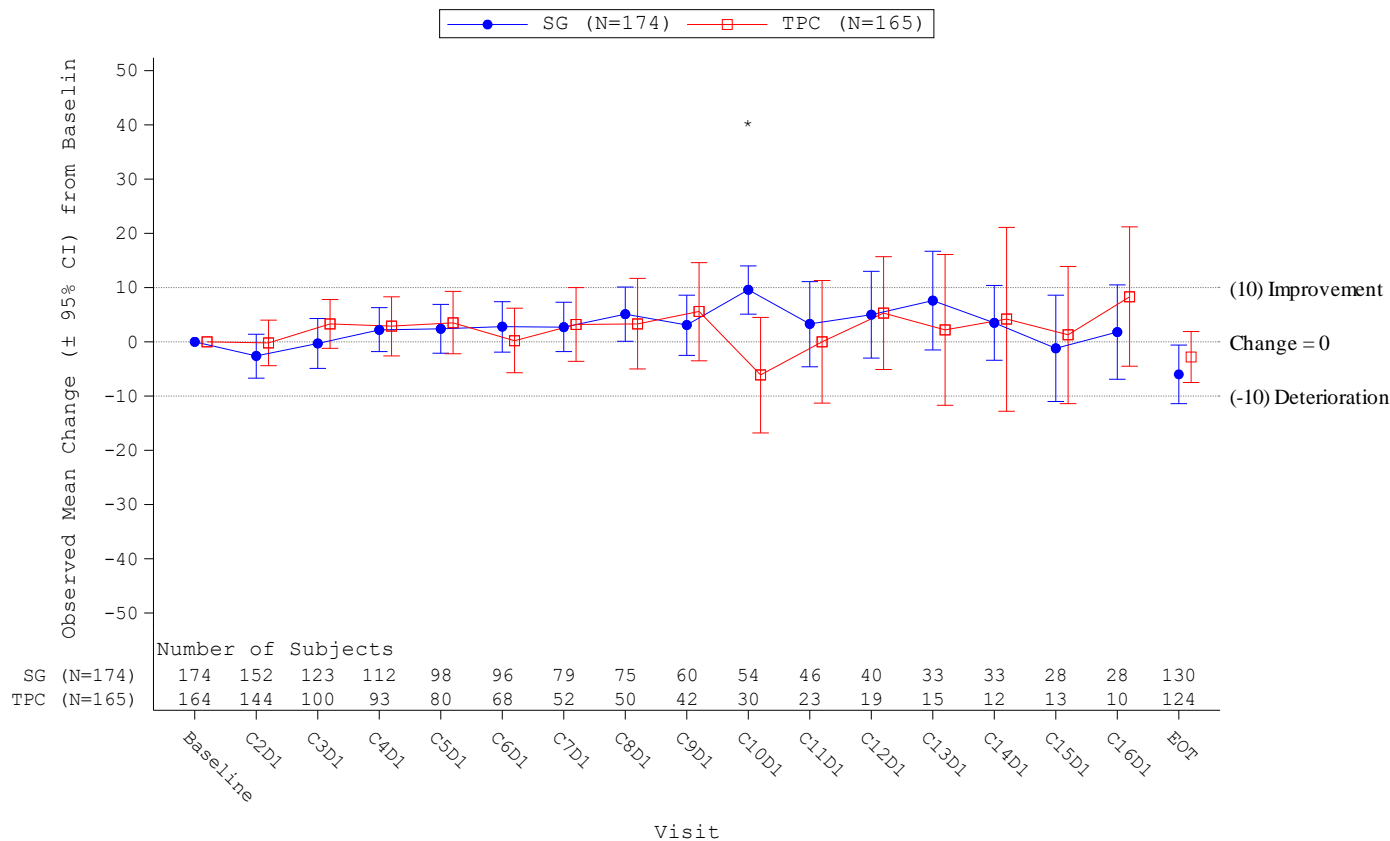
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Figure 15.15.1.1.6  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Social Functioning by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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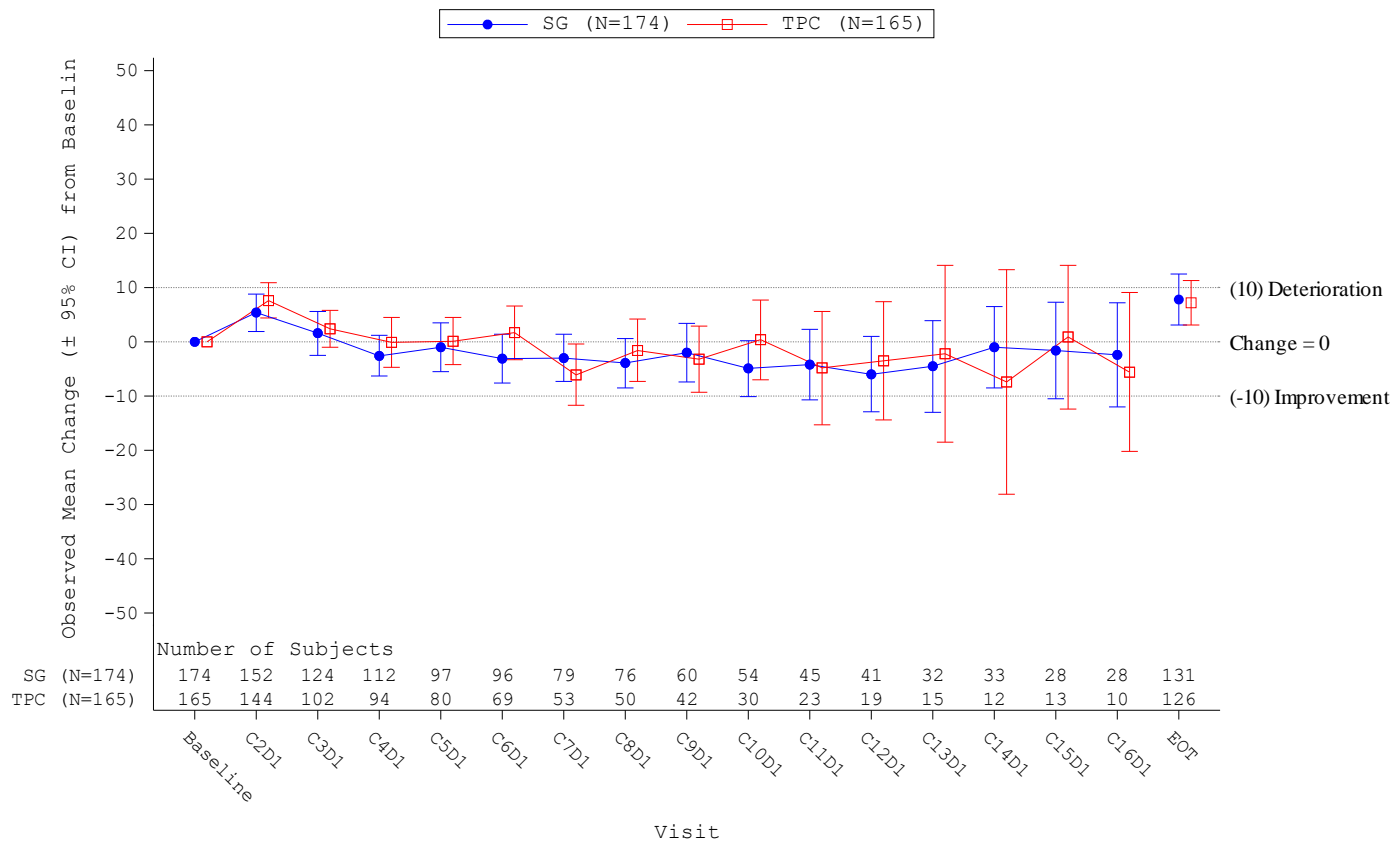
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Figure 15.15.1.1.7  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Fatigue by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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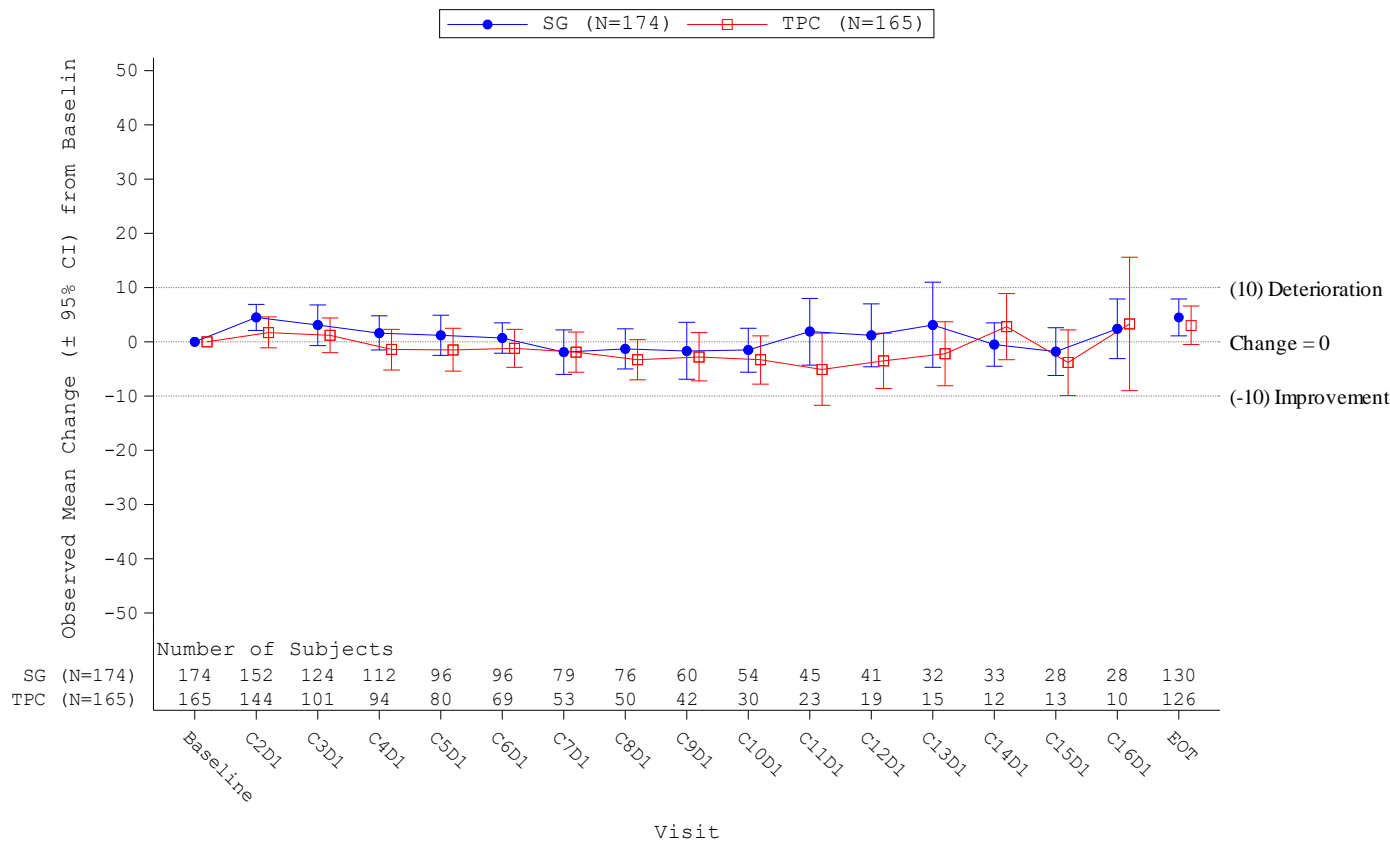
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Figure 15.15.1.1.8  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Nausea and Vomiting by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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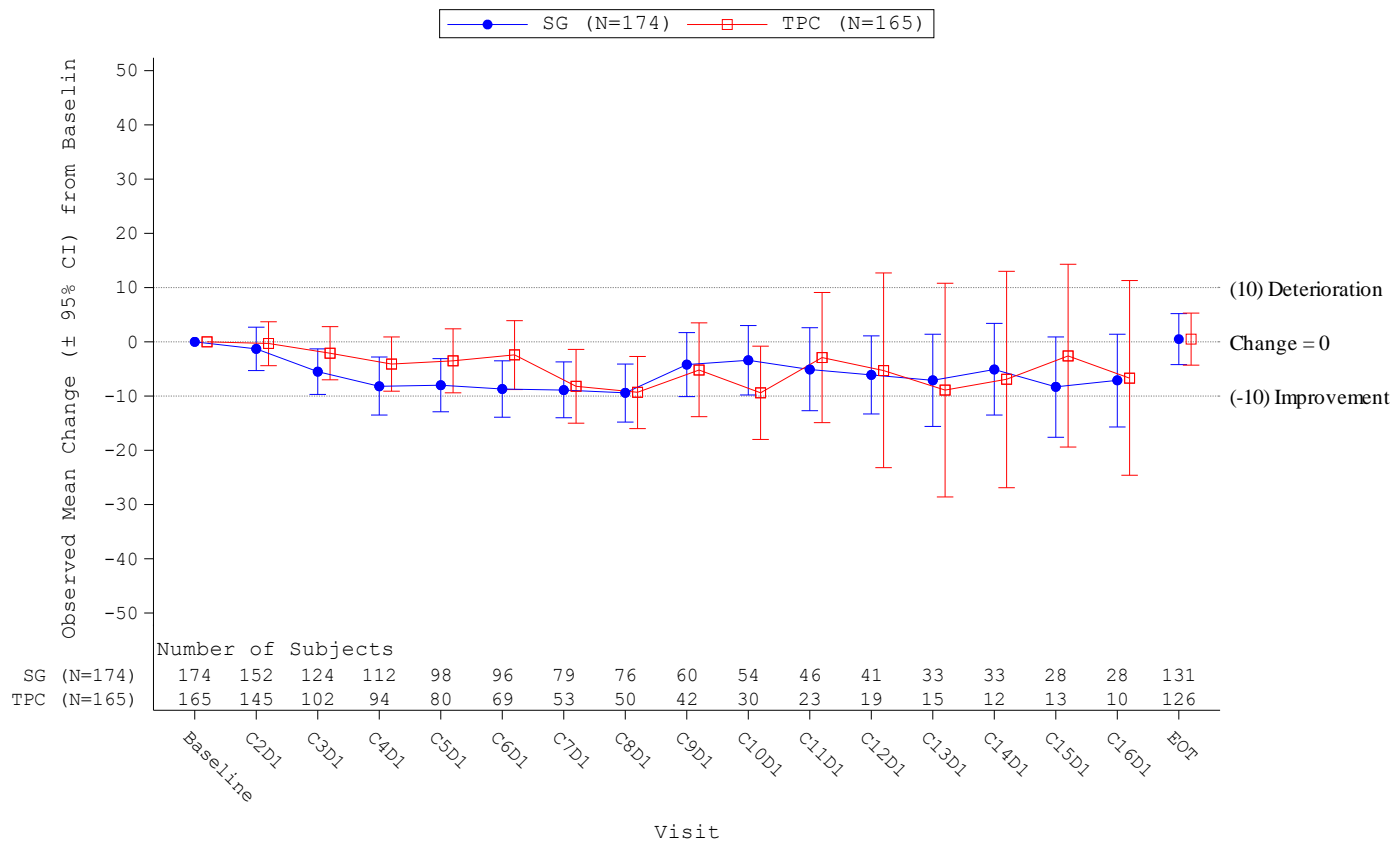
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Figure 15.15.1.1.9  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Pain by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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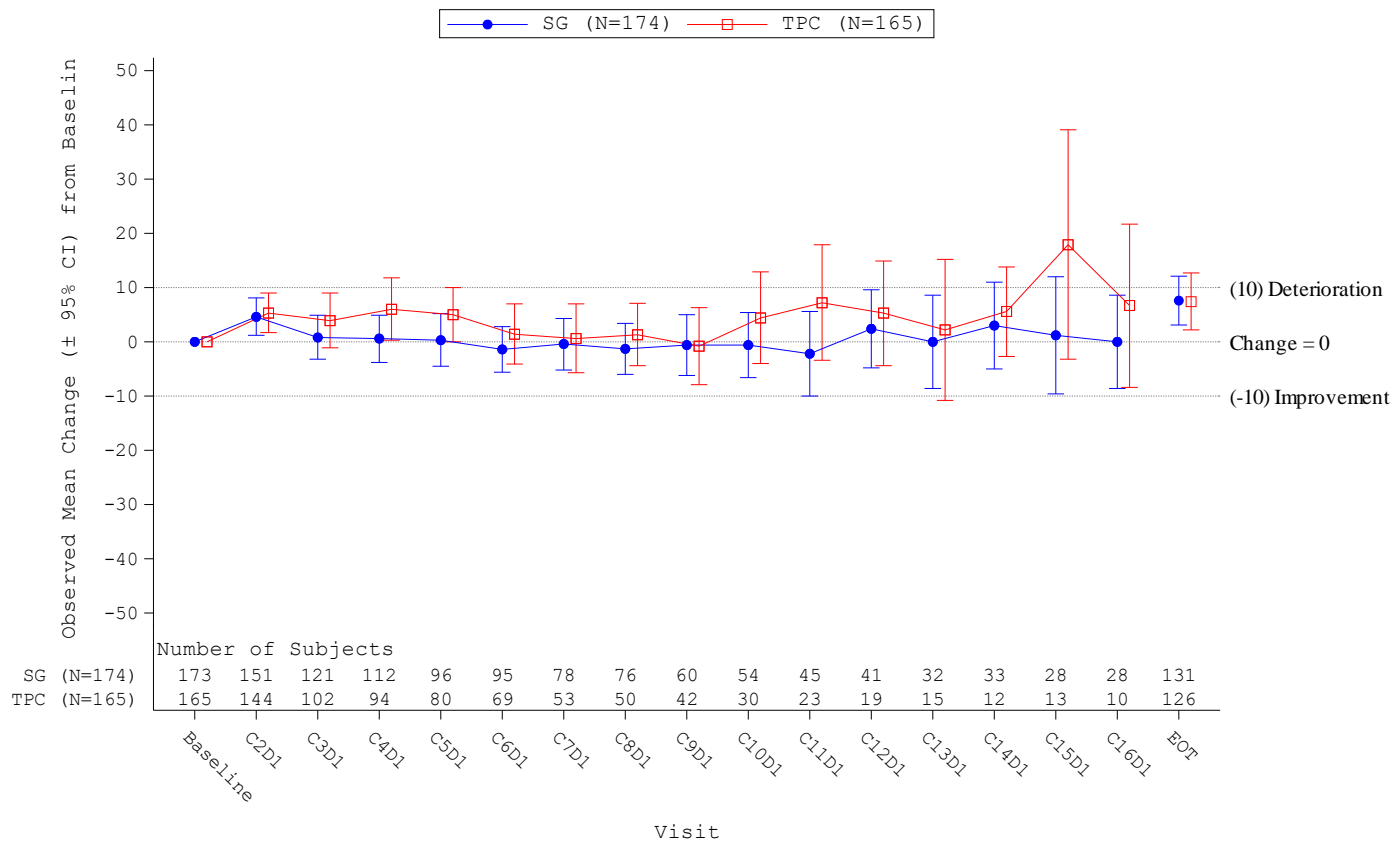
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Figure 15.15.1.1.10  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Dyspnea by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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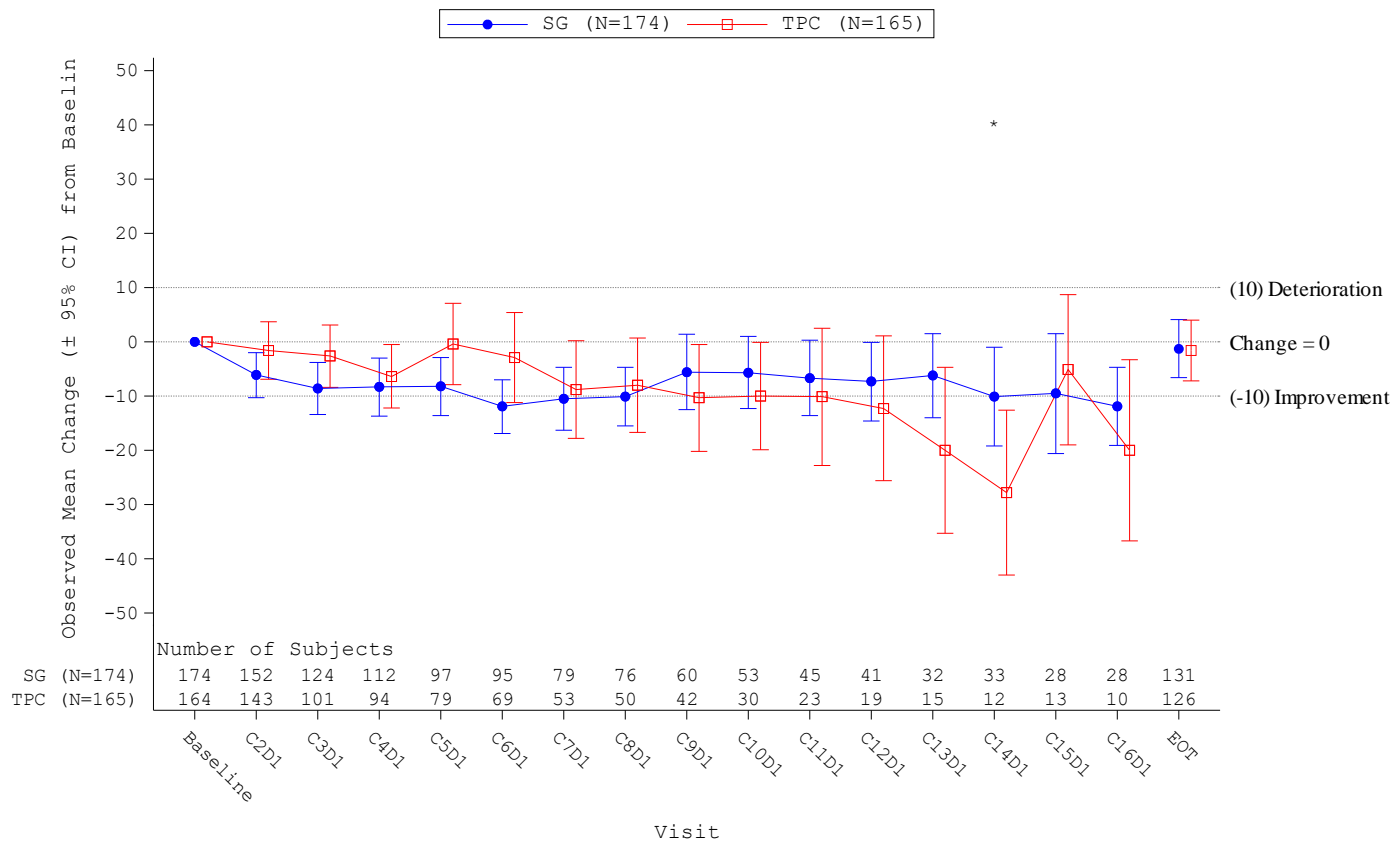
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Figure 15.15.1.1.11  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Insomnia by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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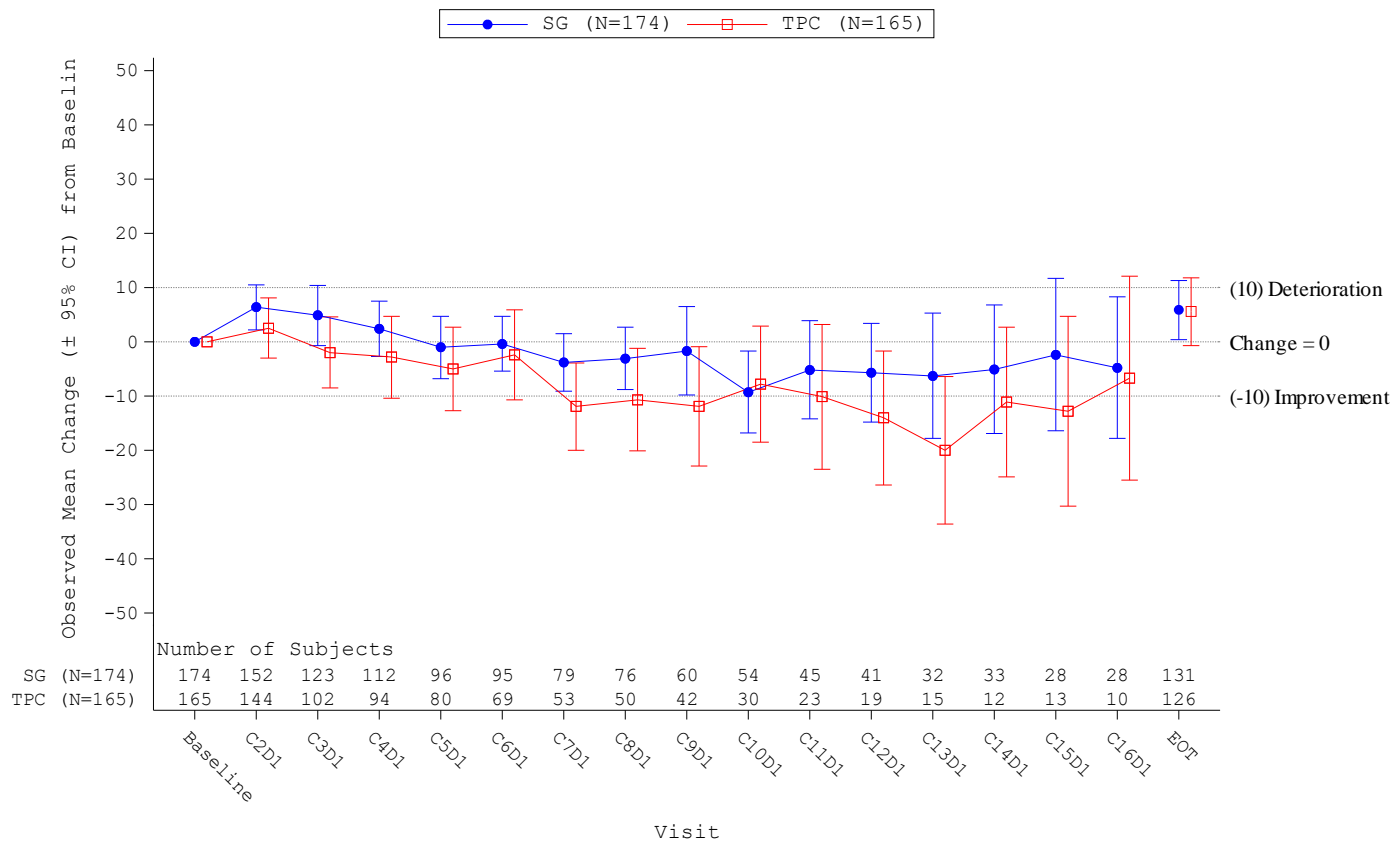
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Figure 15.15.1.1.12  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Appetite Loss by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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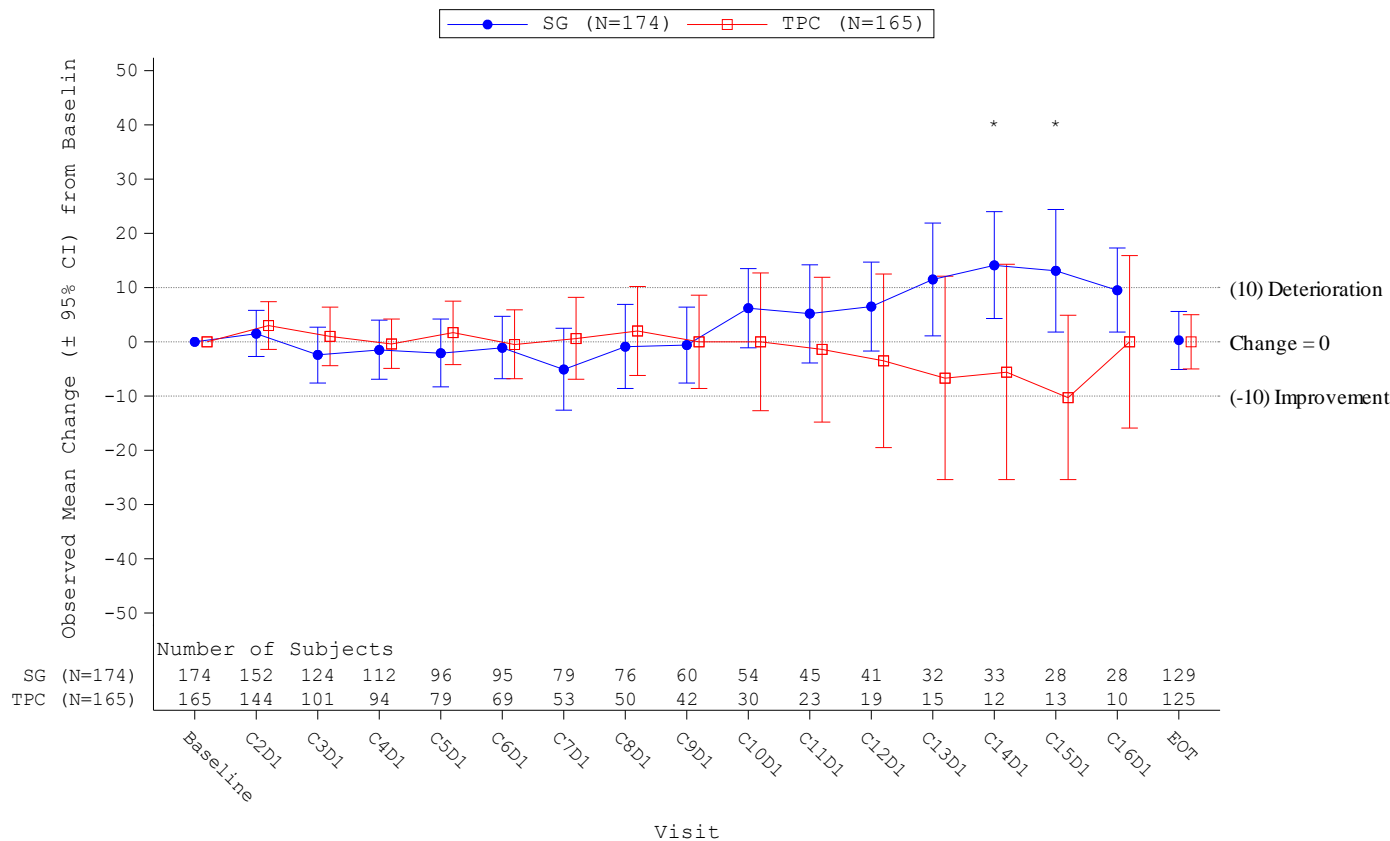
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Figure 15.15.1.1.13  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Constipation by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with  $n \geq 10$  for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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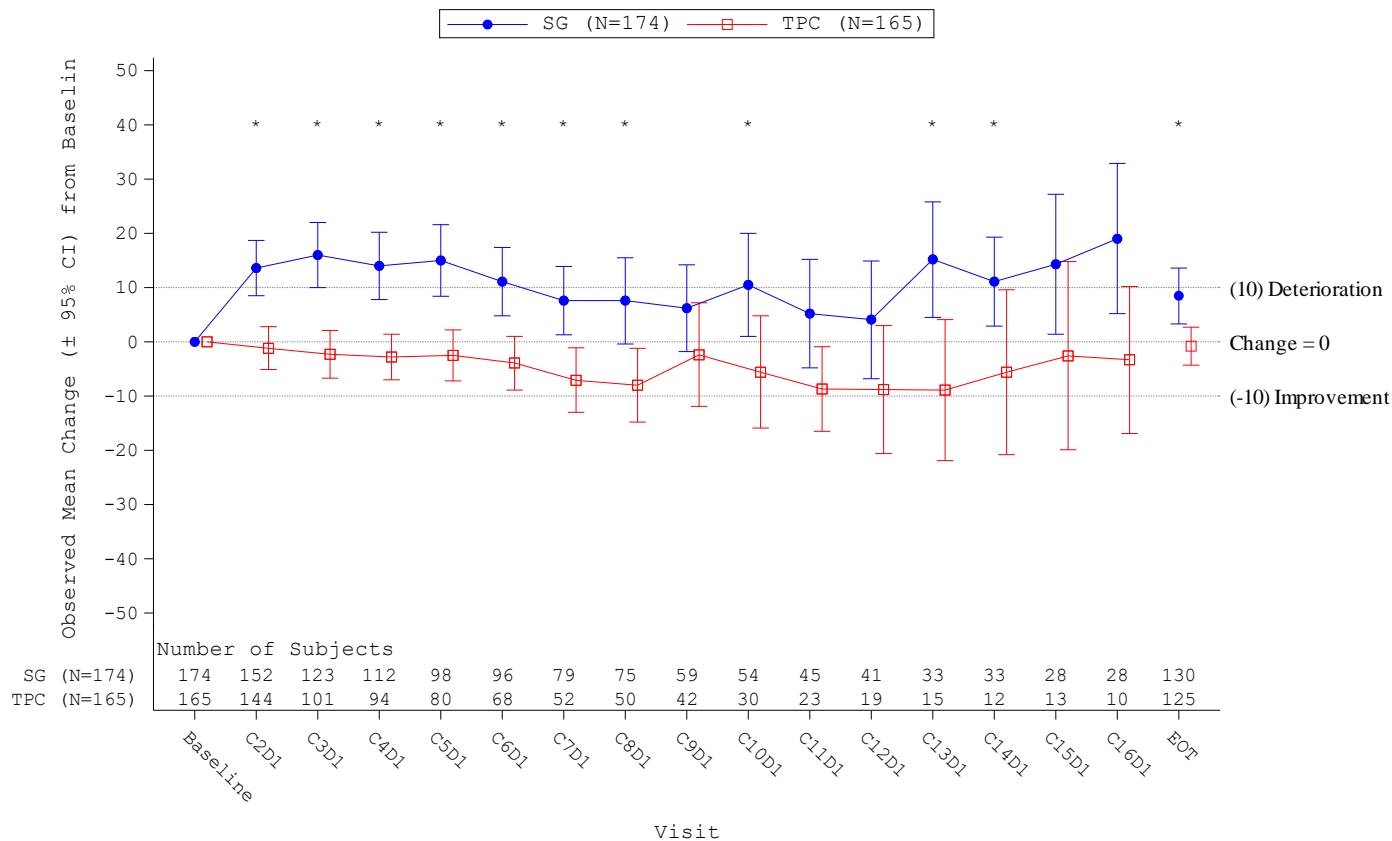
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Figure 15.15.1.1.14  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Diarrhea by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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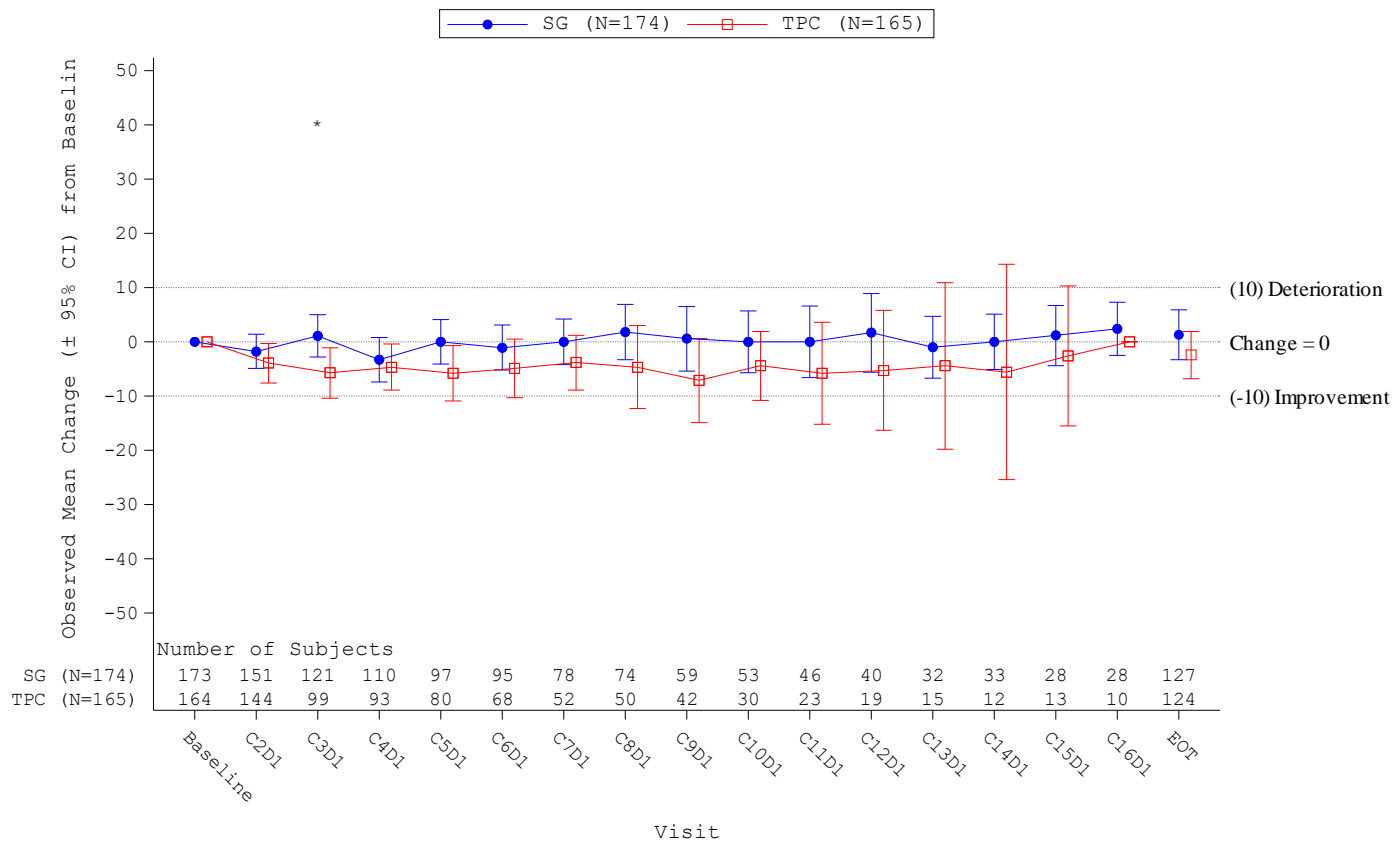
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Figure 15.15.1.1.15  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Financial Difficulties by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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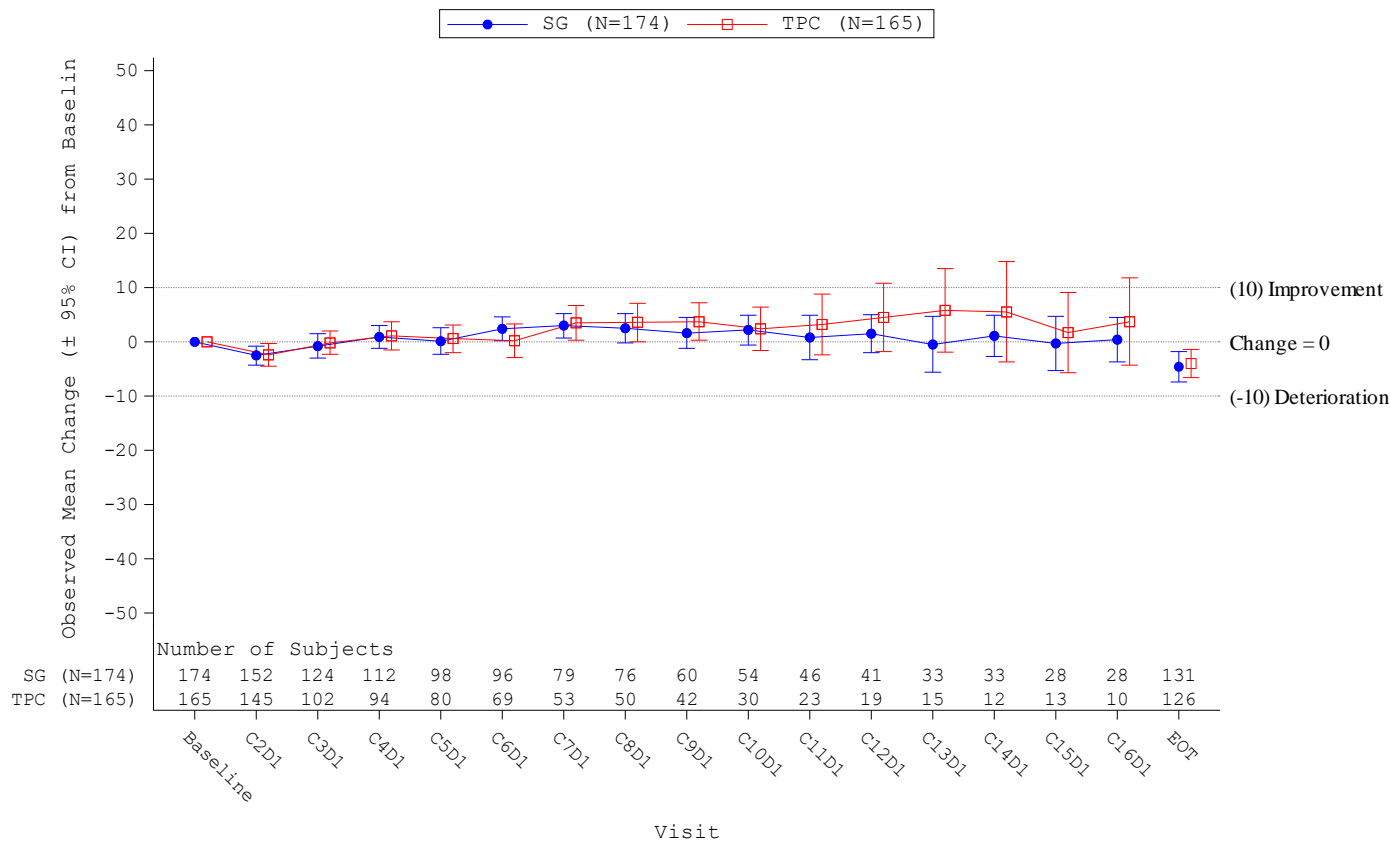
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Figure 15.15.1.1.16  
 Observed Mean Change from Baseline in EORTC QLQ-C30 Summary Score by Visit and Treatment Group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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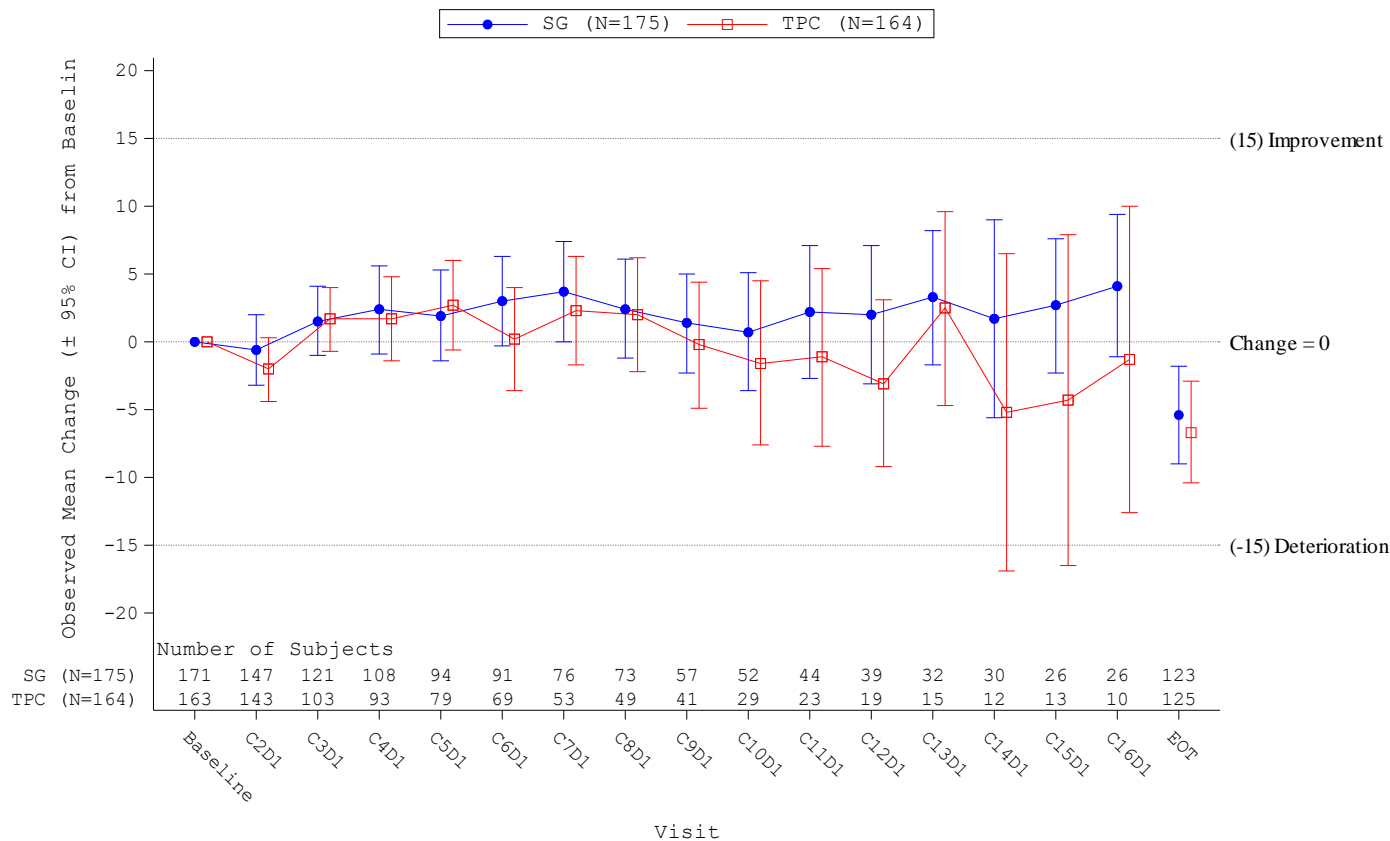
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Figure 15.15.1.2  
 Observed Mean Change from Baseline in EQ-5D VAS by Visit and Treatment Group  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. Changes from baseline are used as the dependent variable. Results are presented up to the visit with n ≥10 for each treatment arm. EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

\* Indicates a statistically significant difference in observed mean change from baseline between treatment arms (SG vs. TPC) at a specific post-baseline assessment visit based on a 2-sample 2-sided t-test.

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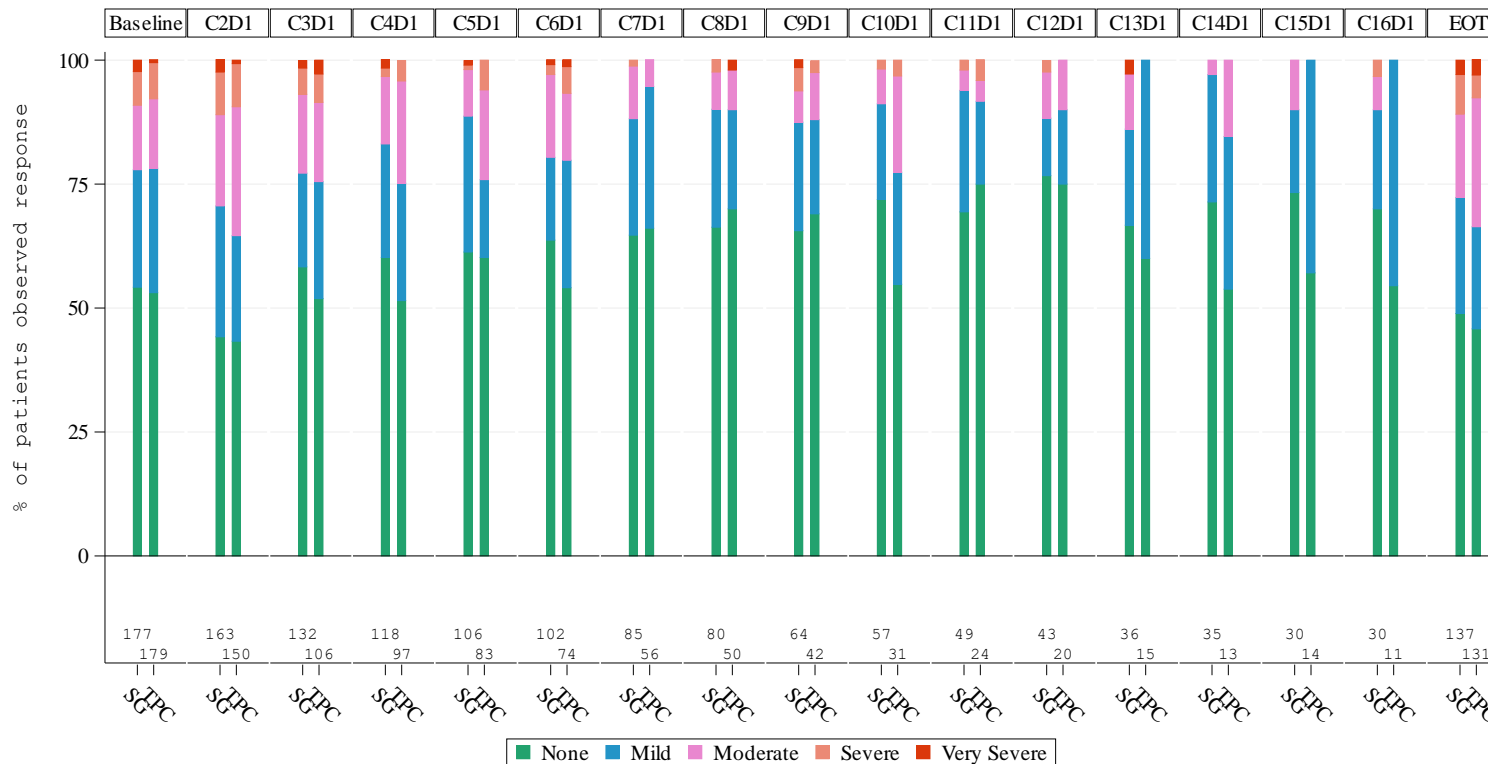
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Figure 15.15.2.1  
 Distribution of Responses to the PRO-CTCAE Decreased Appetite Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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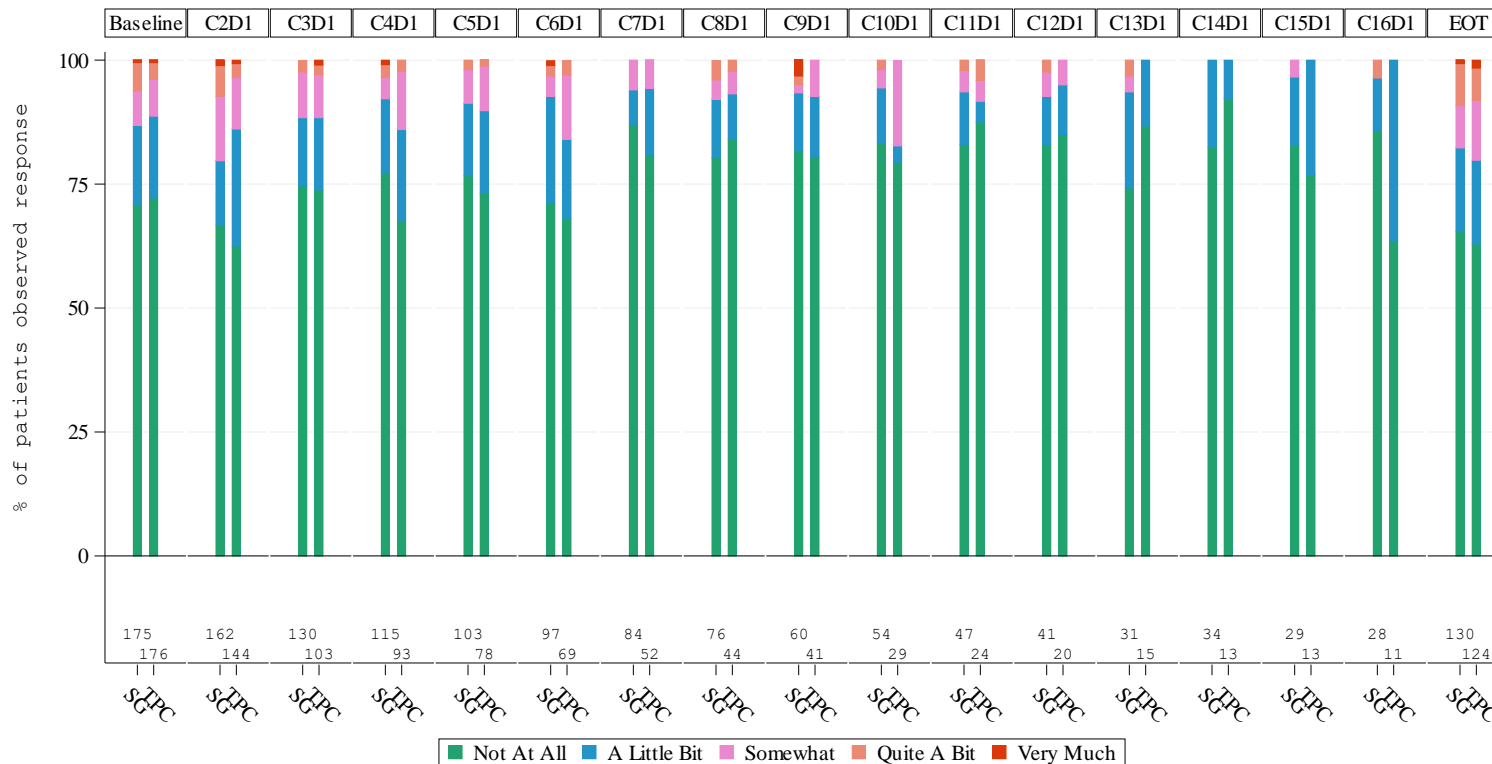
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Figure 15.15.2.2  
 Distribution of Responses to the PRO-CTCAE Decreased Appetite Interference by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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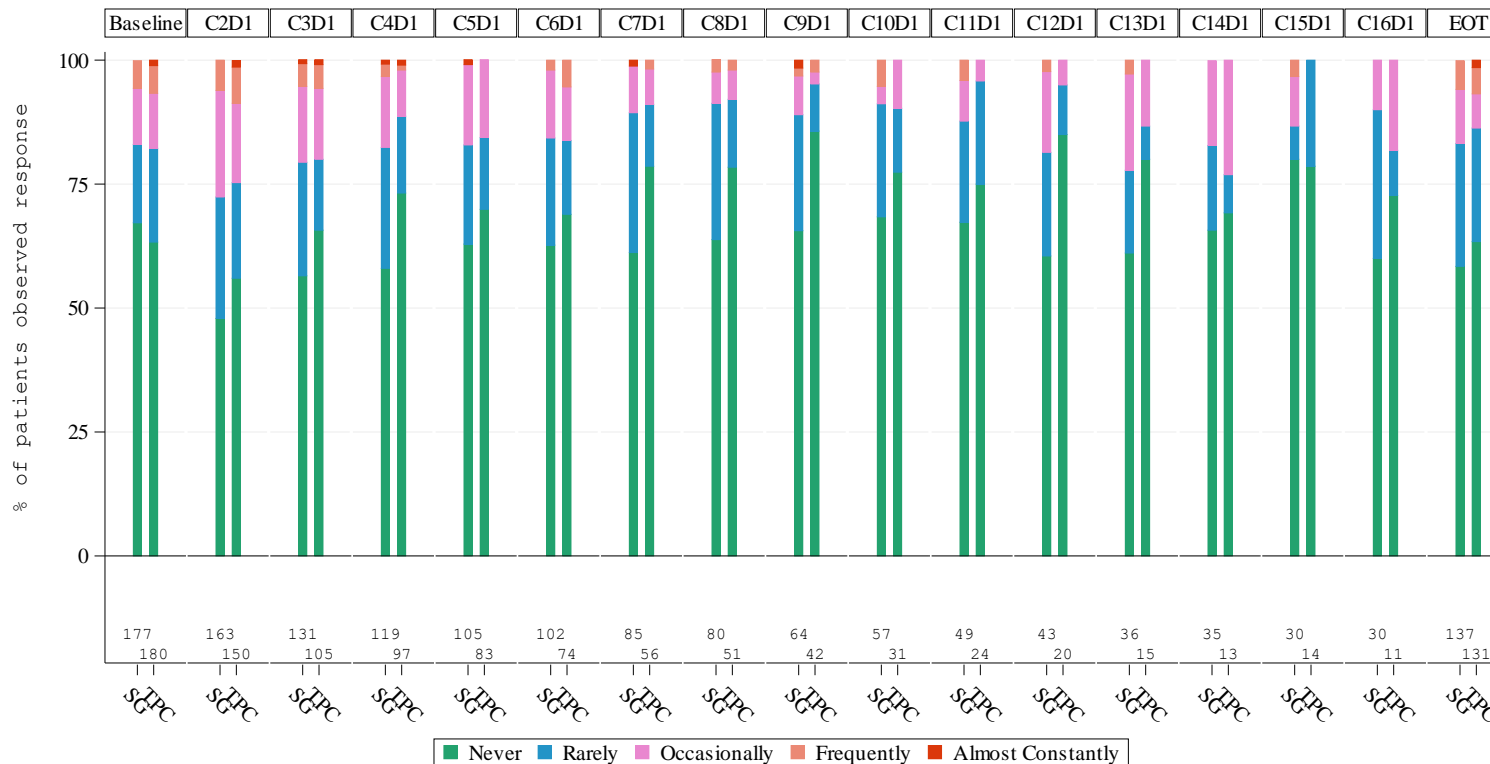
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Figure 15.15.2.3  
 Distribution of Responses to the PRO-CTCAE Nausea Frequency by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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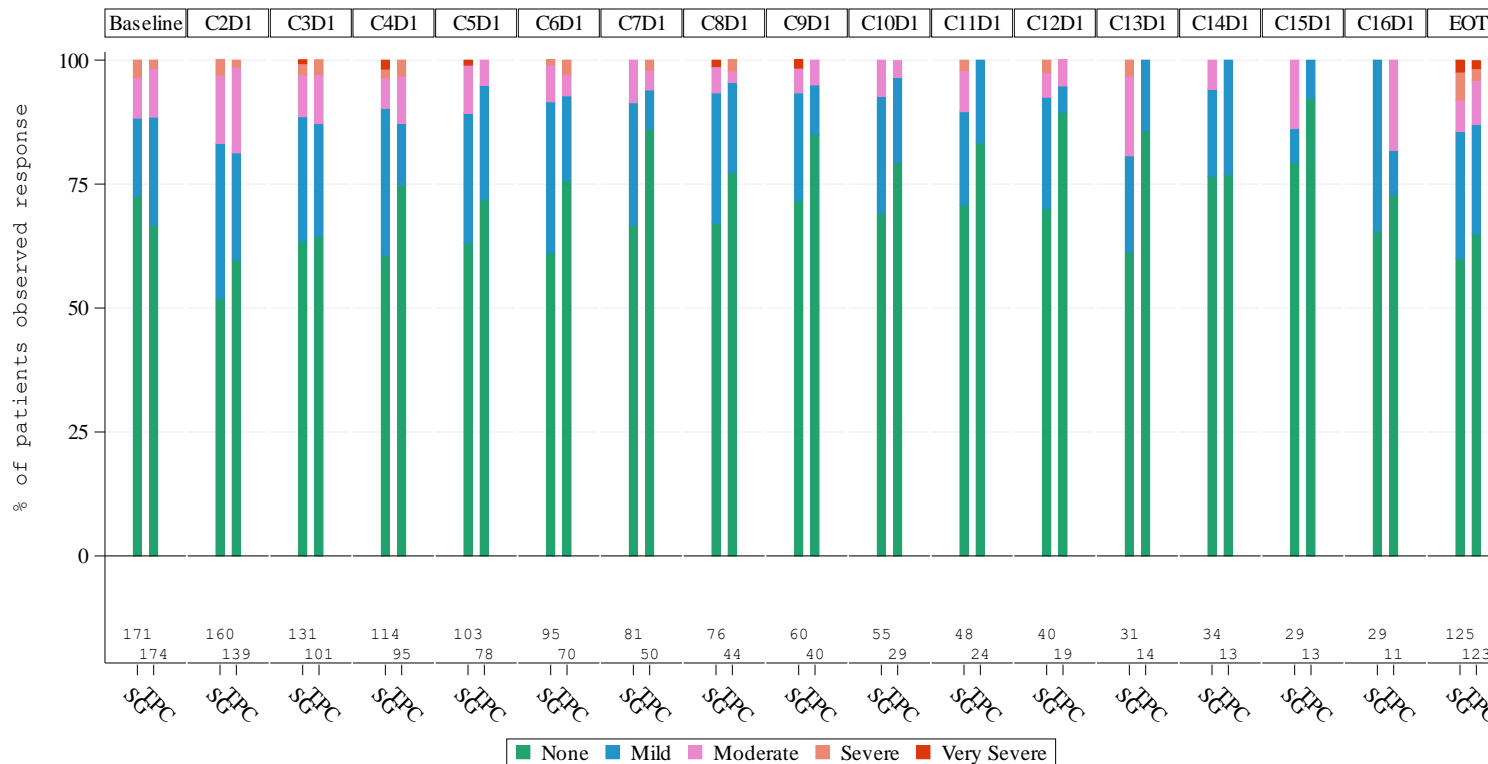
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Figure 15.15.2.4  
 Distribution of Responses to the PRO-CTCAE Nausea Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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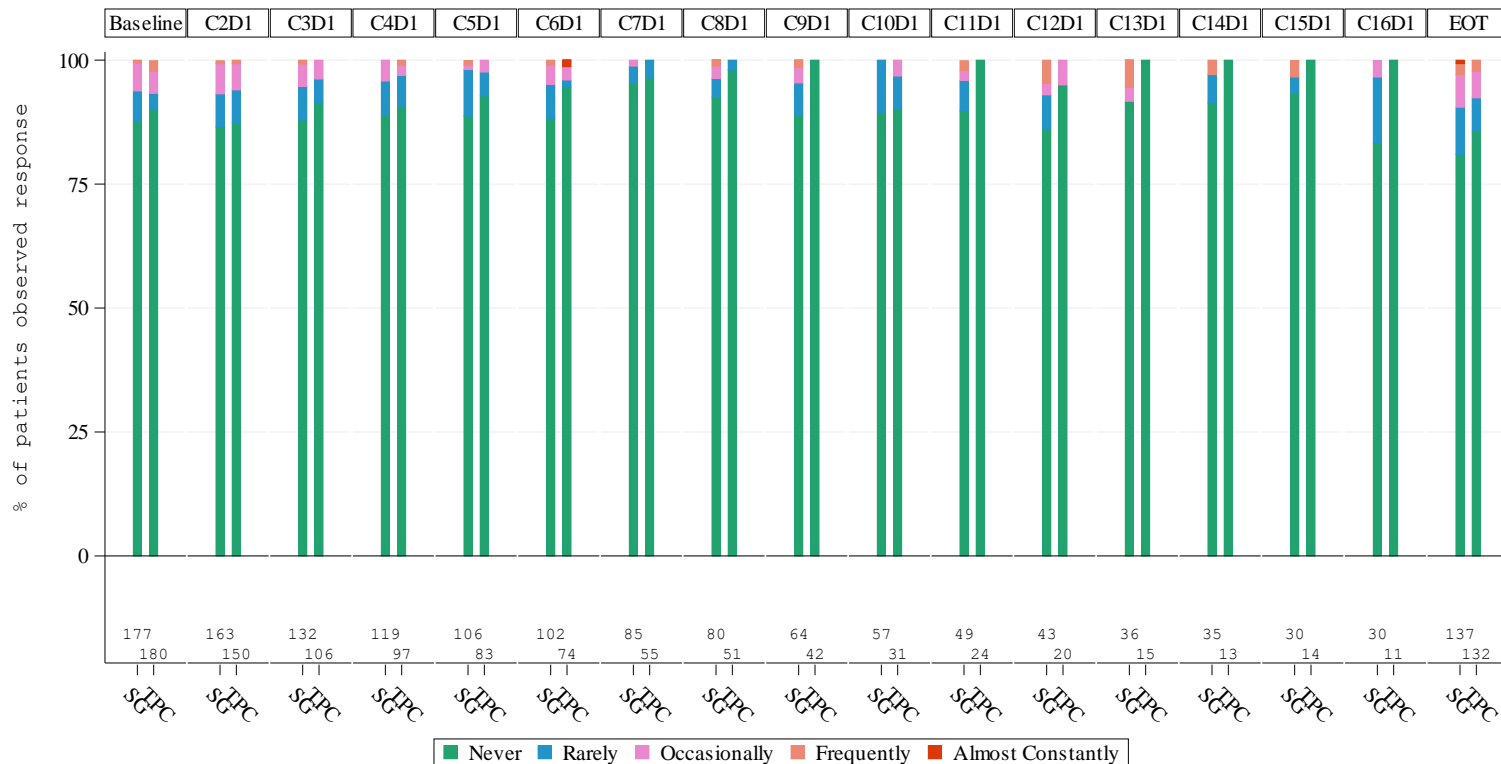
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Figure 15.15.2.5  
 Distribution of Responses to the PRO-CTCAE Vomiting Frequency by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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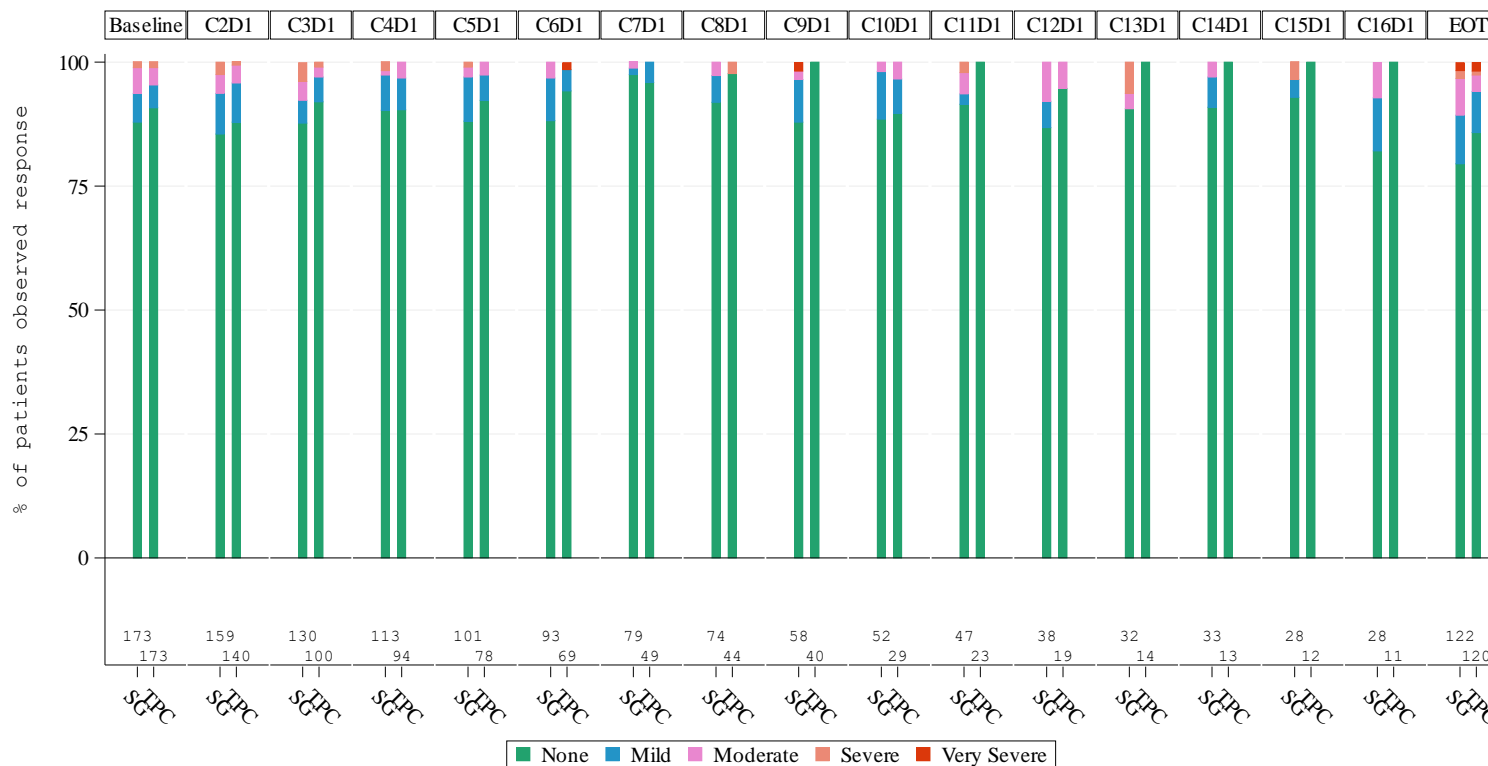
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Figure 15.15.2.6  
 Distribution of Responses to the PRO-CTCAE Vomiting Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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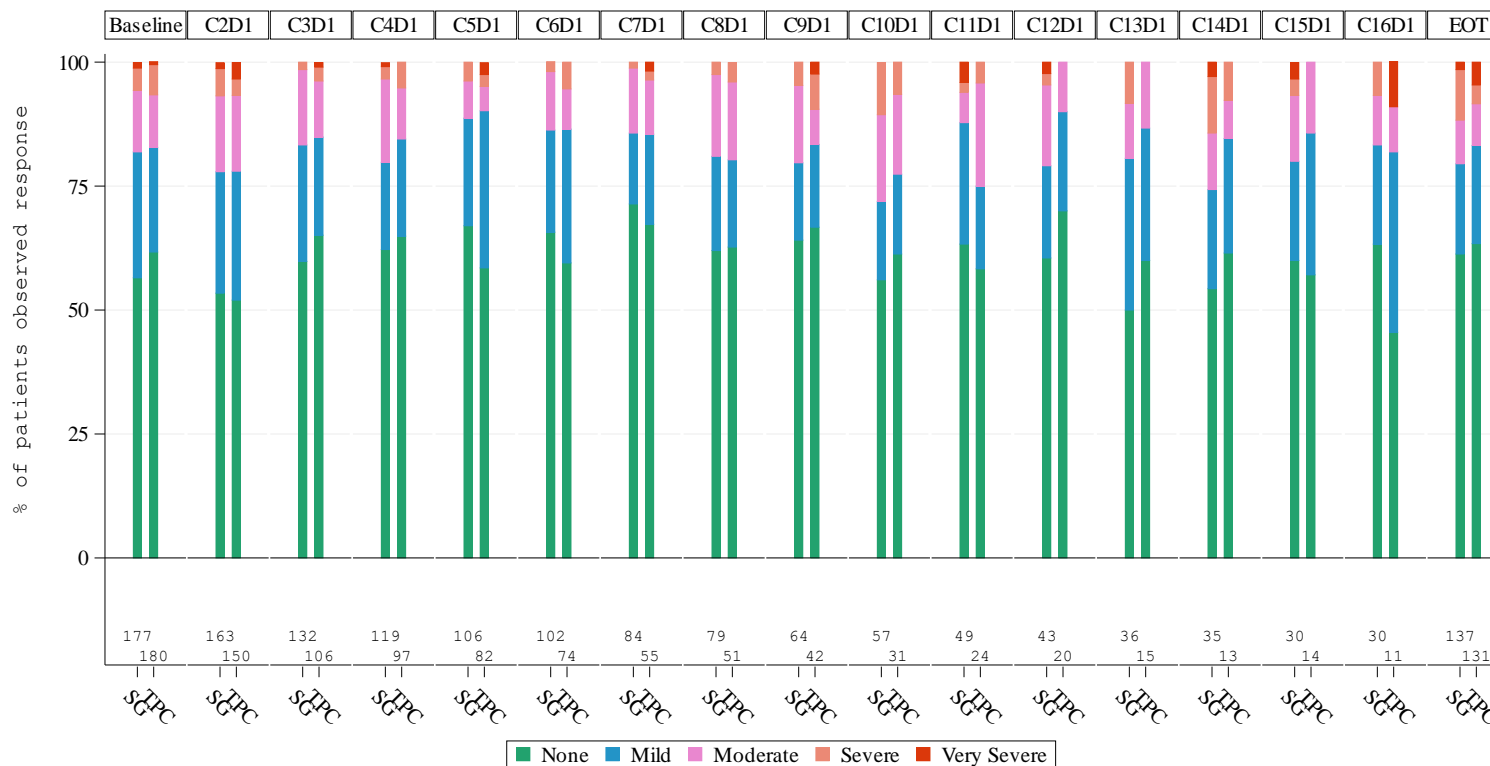
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Figure 15.15.2.7  
 Distribution of Responses to the PRO-CTCAE Constipation Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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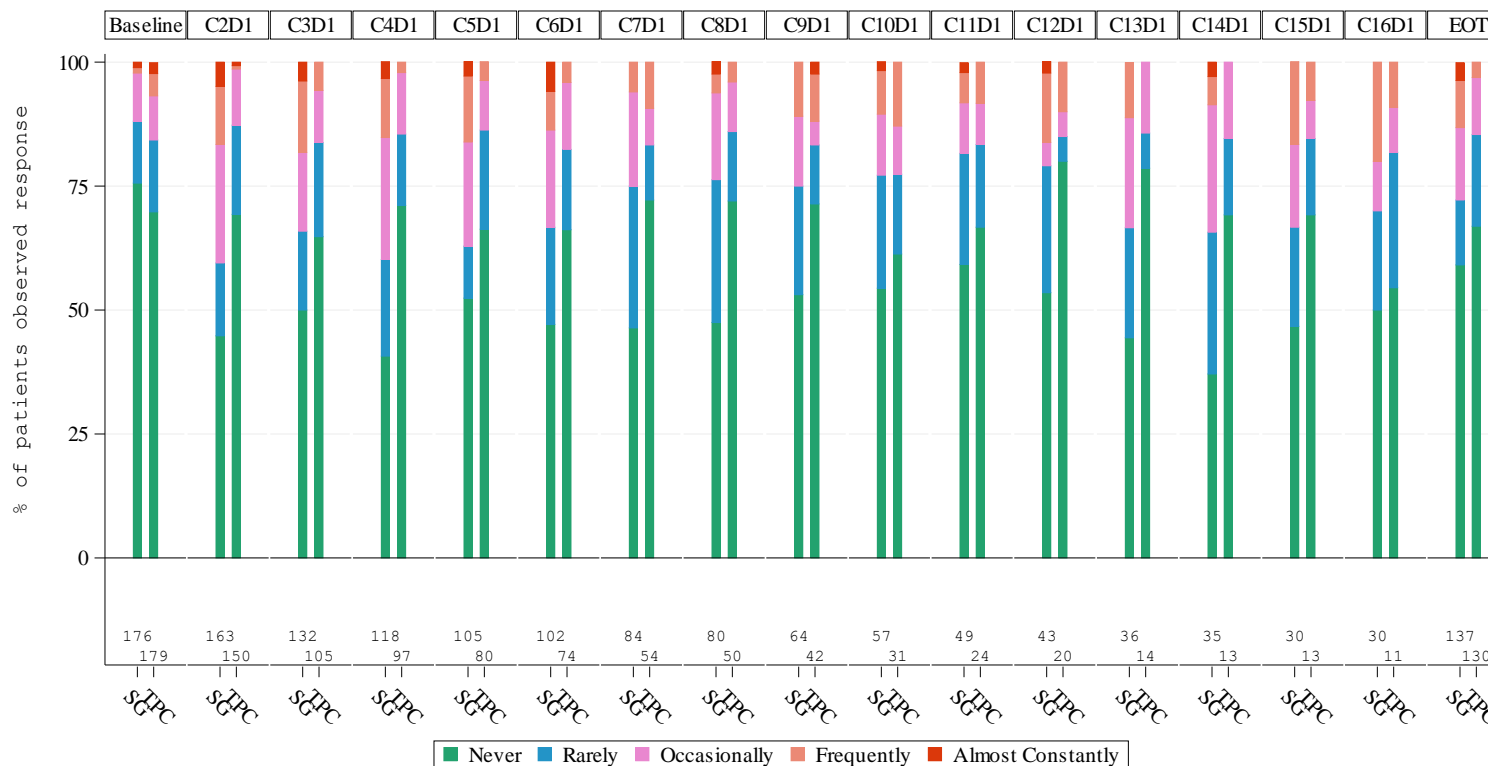
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Figure 15.15.2.8  
 Distribution of Responses to the PRO-CTCAE Diarrhea Frequency by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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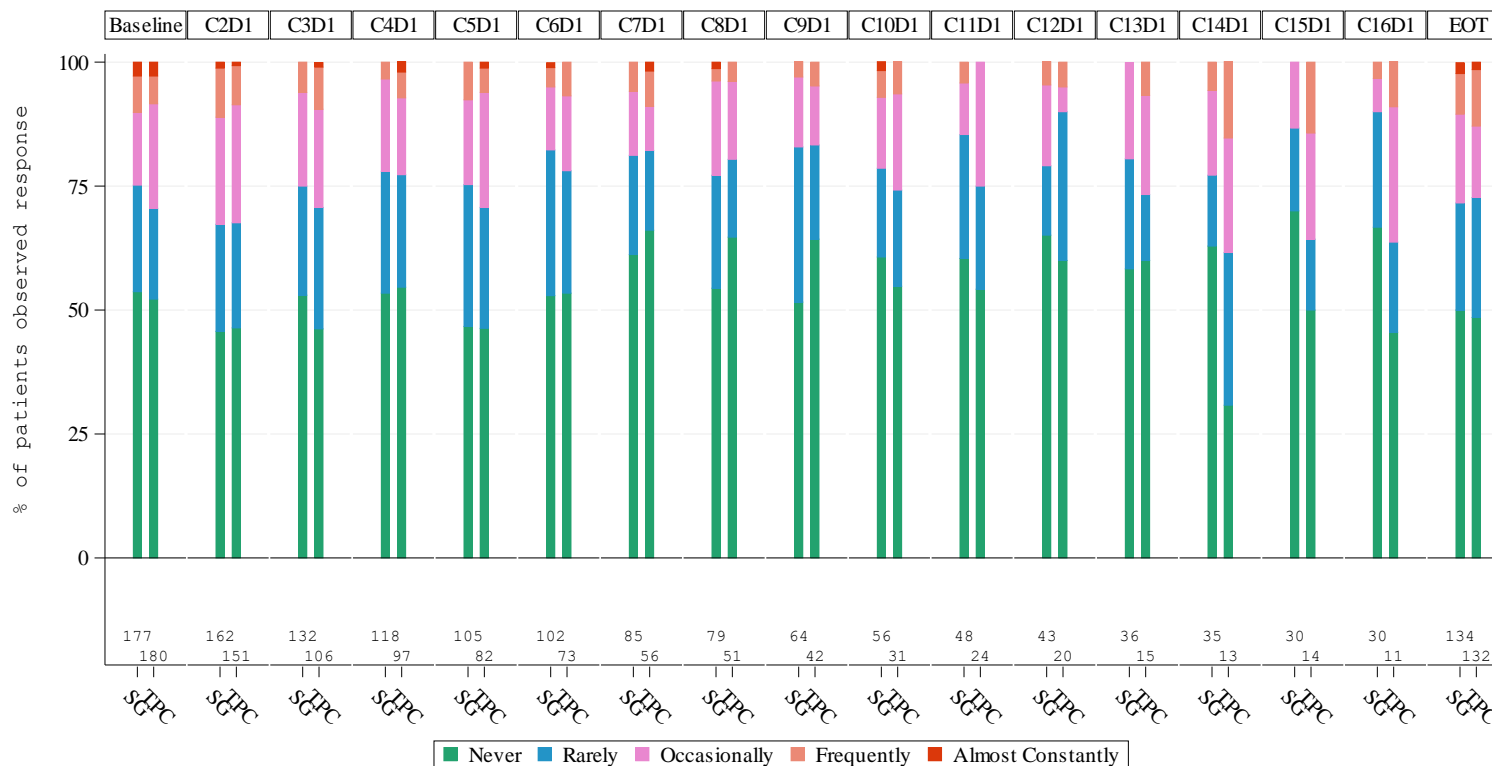
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Figure 15.15.2.9  
 Distribution of Responses to the PRO-CTCAE Abdominal Pain Frequency by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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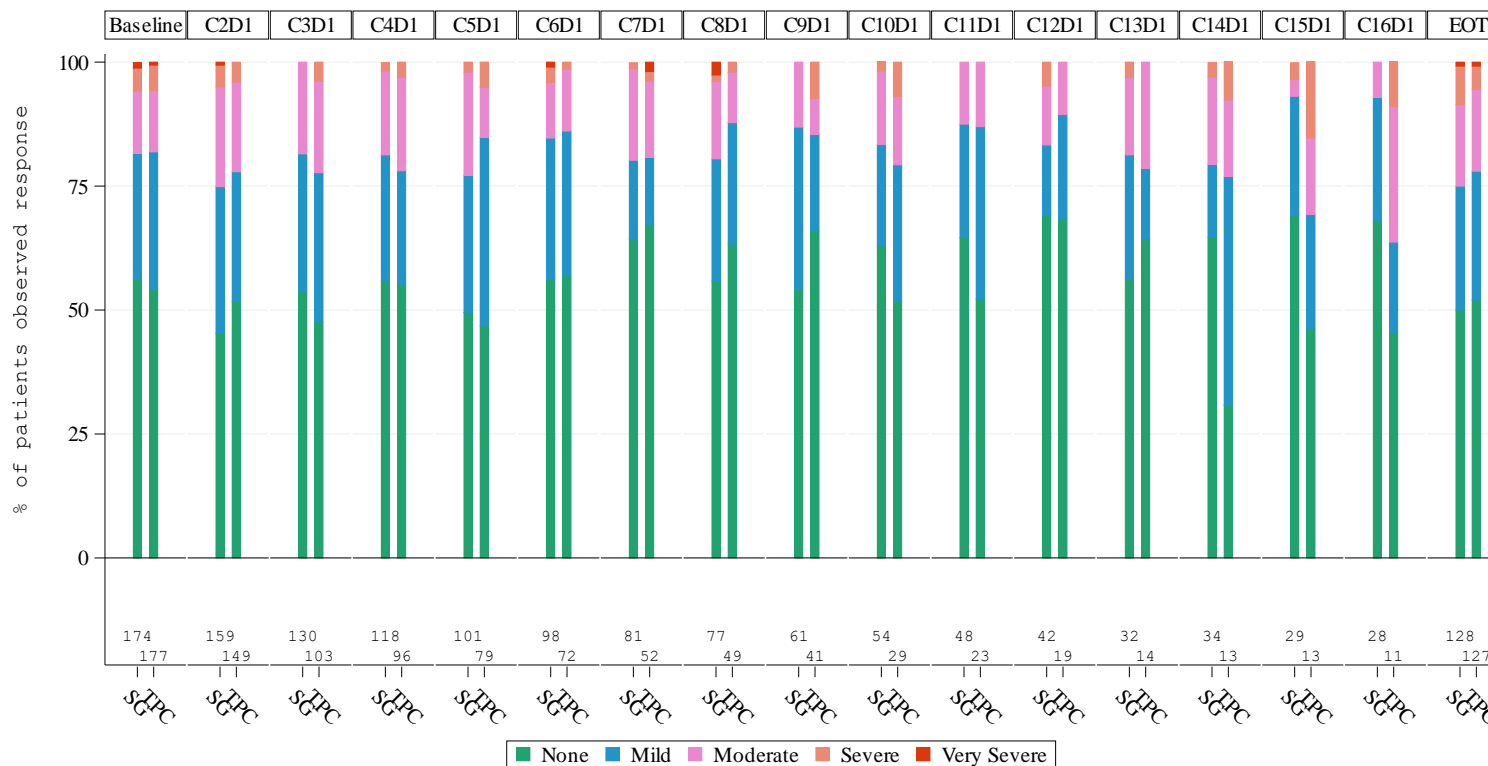
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Figure 15.15.2.10  
Distribution of Responses to the PRO-CTCAE Abdominal Pain Severity by Visit and Treatment Group  
Safety Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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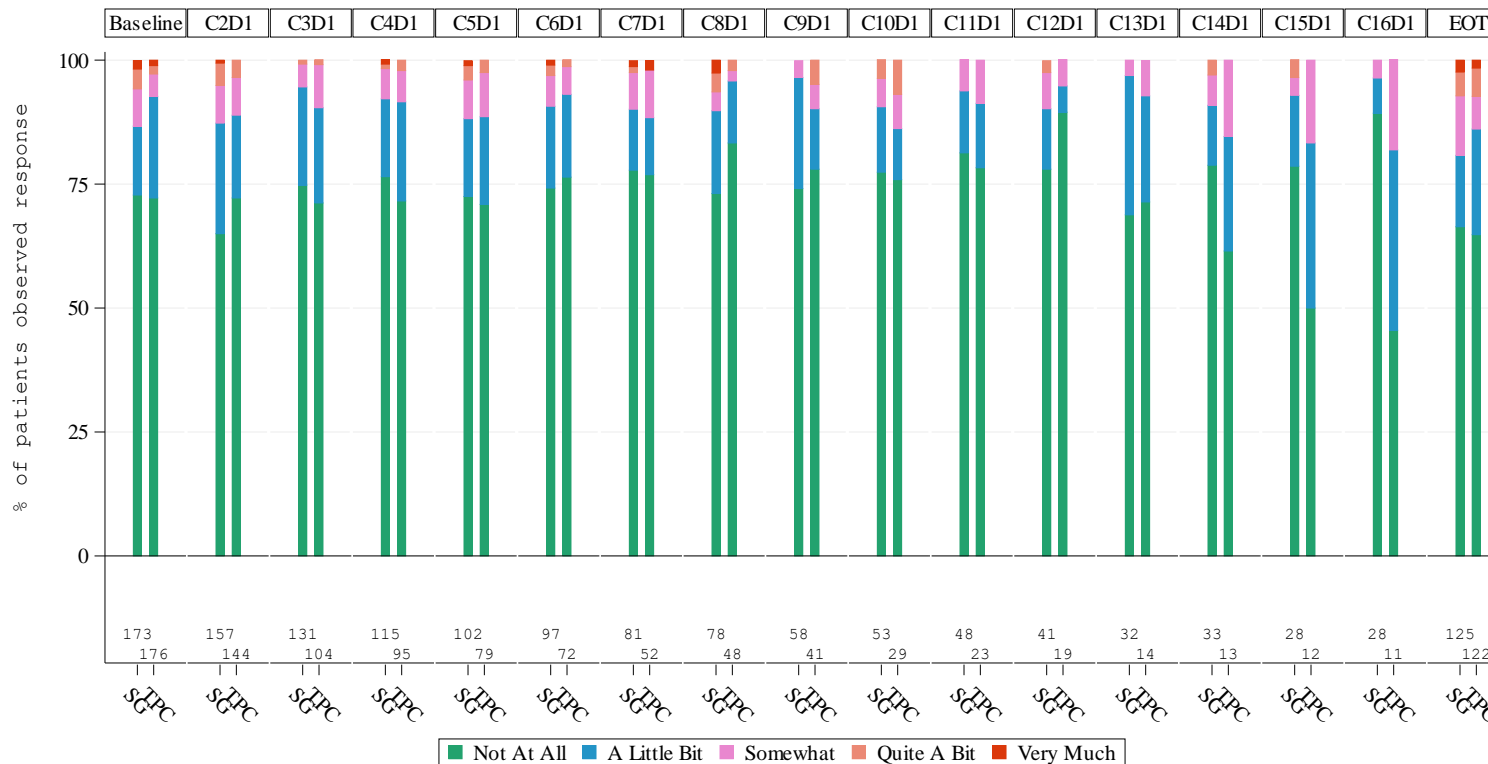
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Figure 15.15.2.11  
 Distribution of Responses to the PRO-CTCAE Abdominal Pain Interference by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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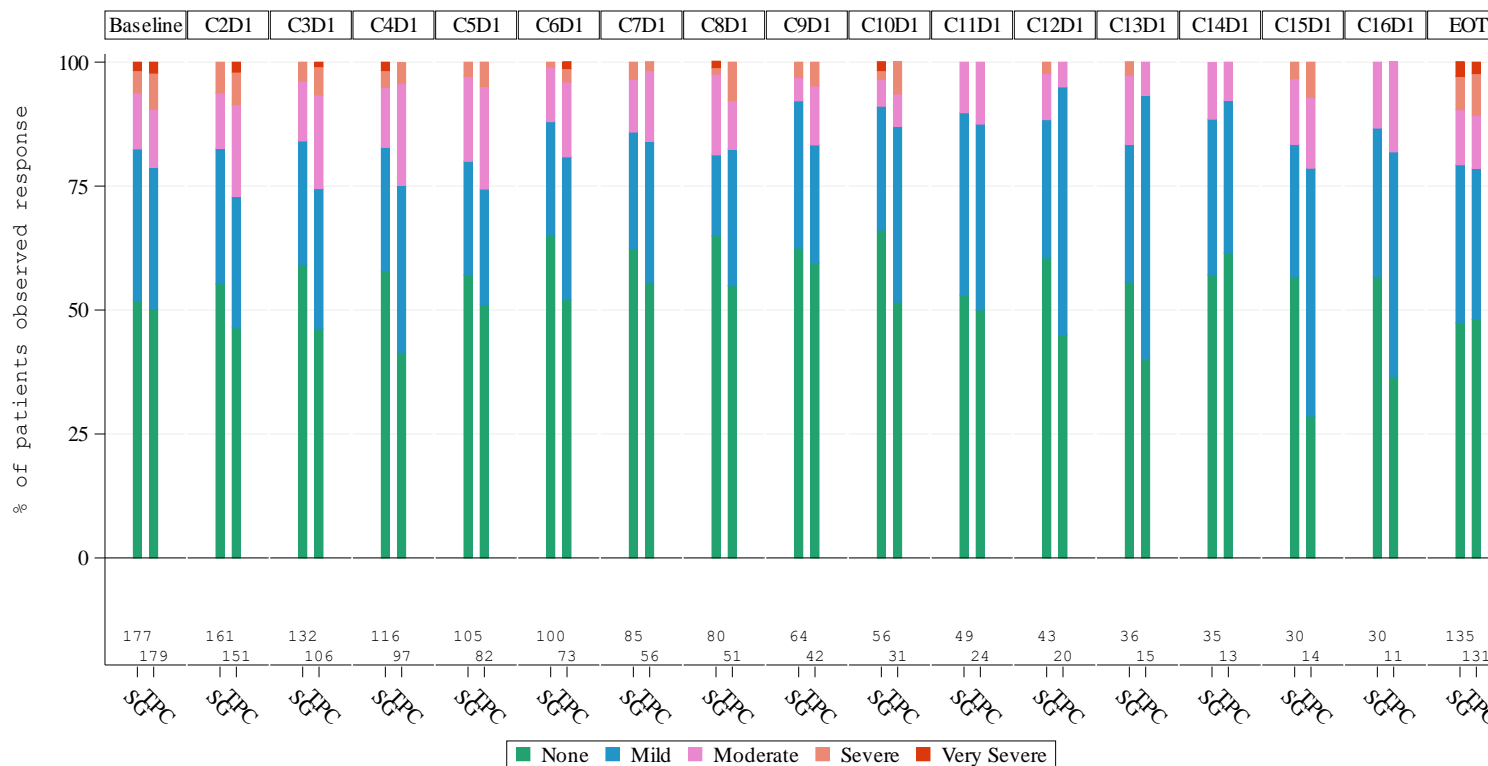
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Figure 15.15.2.12  
 Distribution of Responses to the PRO-CTCAE Shortness of Breath Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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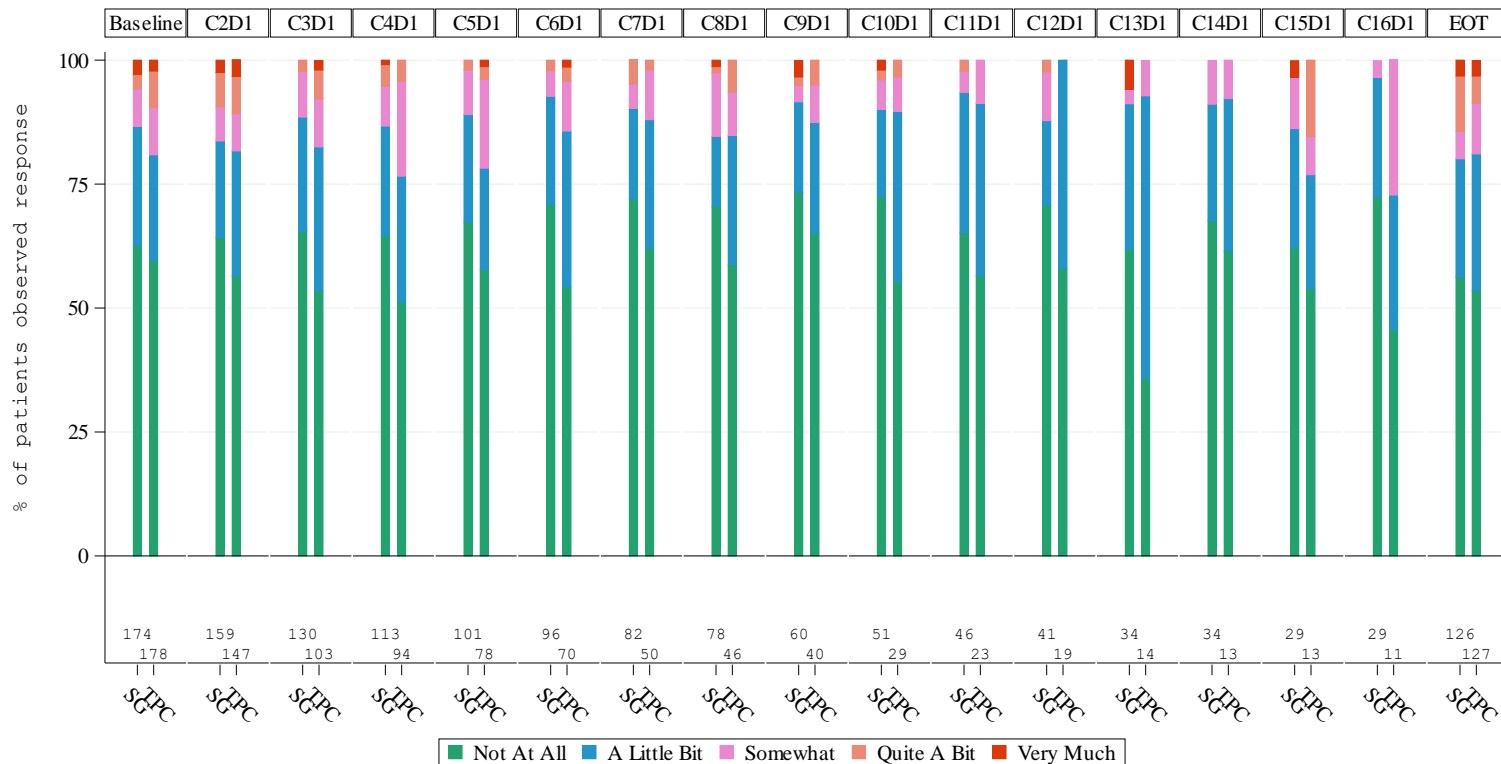
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Figure 15.15.2.13  
 Distribution of Responses to the PRO-CTCAE Shortness of Breath Interference by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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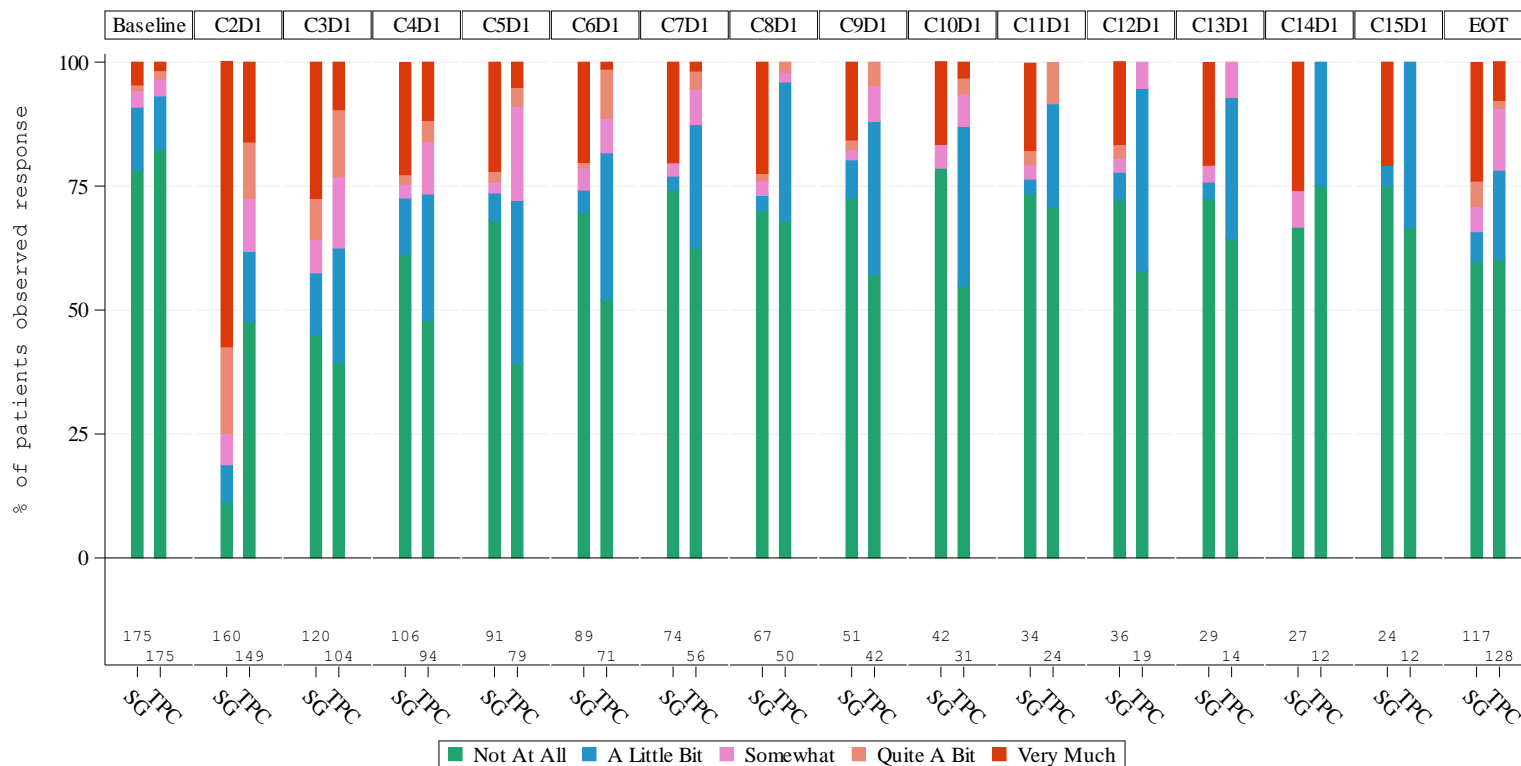
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Figure 15.15.2.14  
 Distribution of Responses to the PRO-CTCAE Hair Loss Amount by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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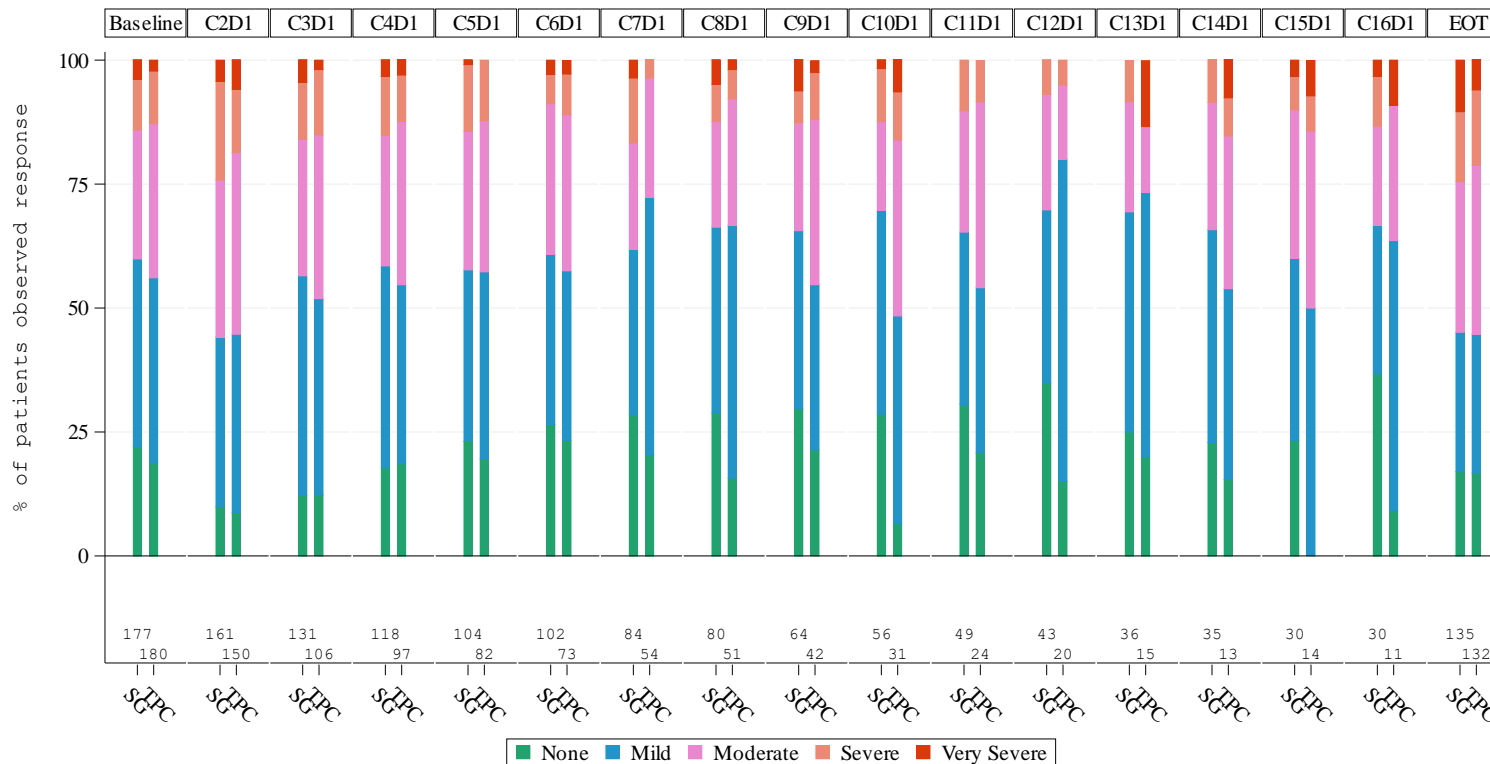
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Figure 15.15.2.15  
 Distribution of Responses to the PRO-CTCAE Fatigue Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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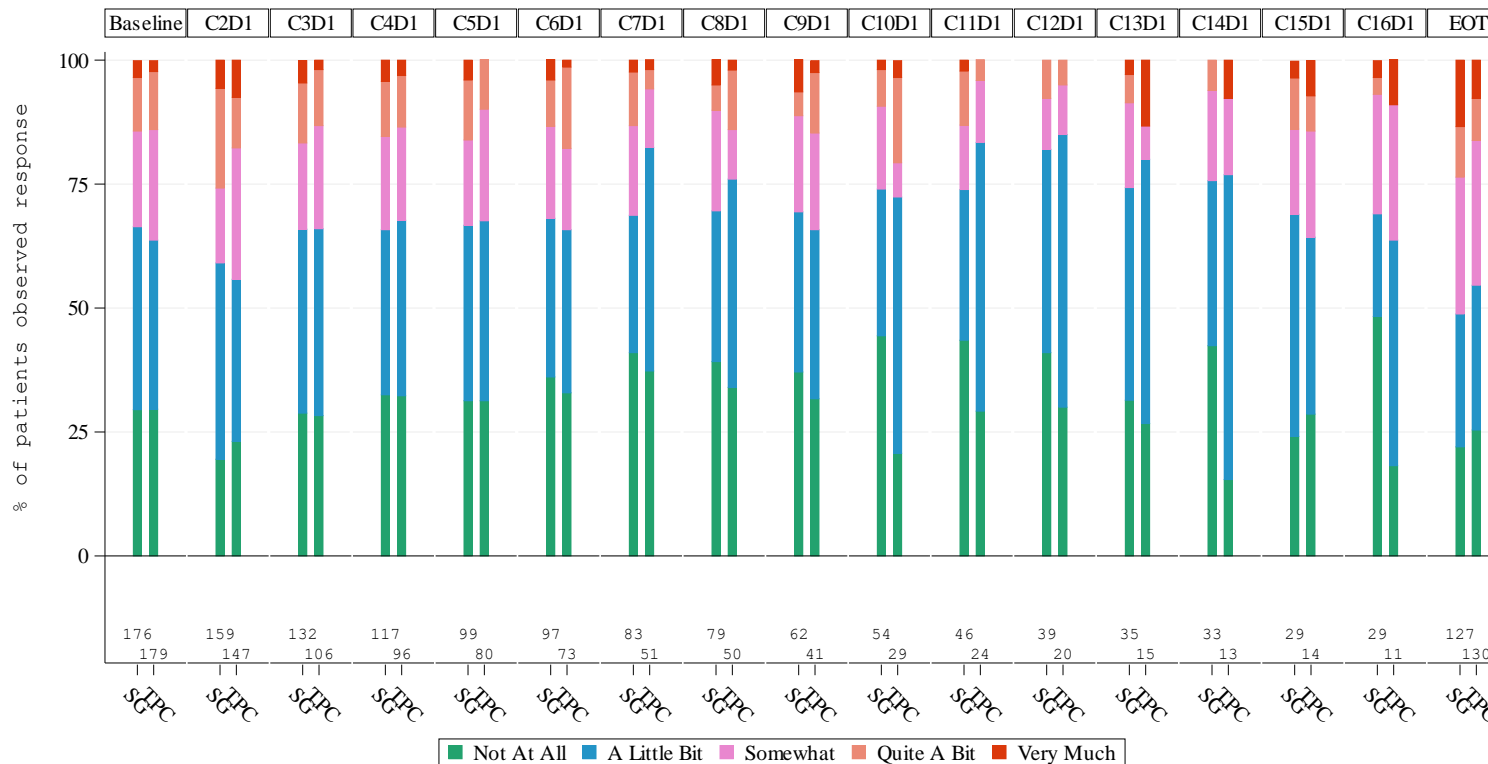
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Figure 15.15.2.16  
 Distribution of Responses to the PRO-CTCAE Fatigue Interference by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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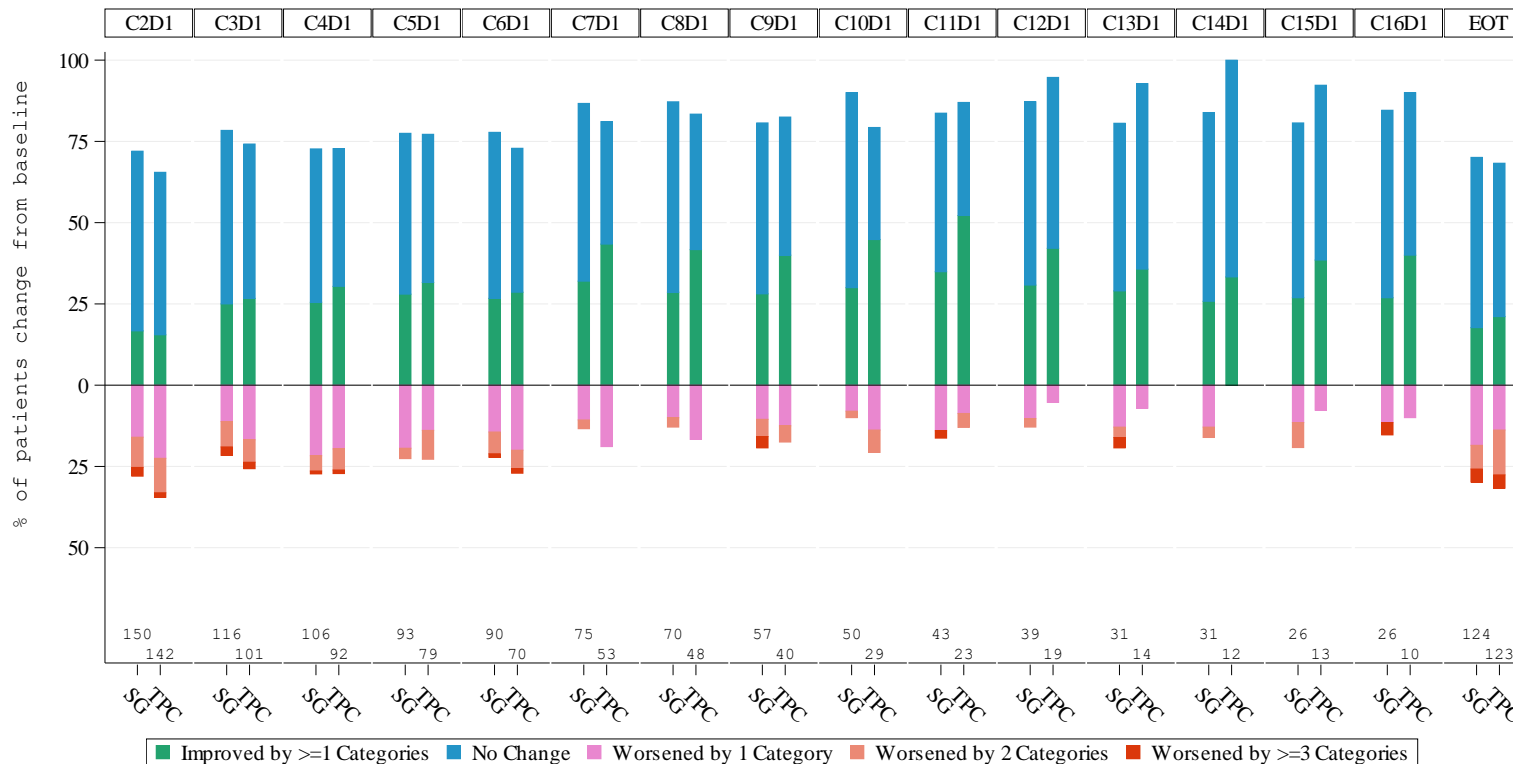
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Figure 15.15.3.1  
Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Decreased Appetite Severity by Visit and Treatment Group  
Safety Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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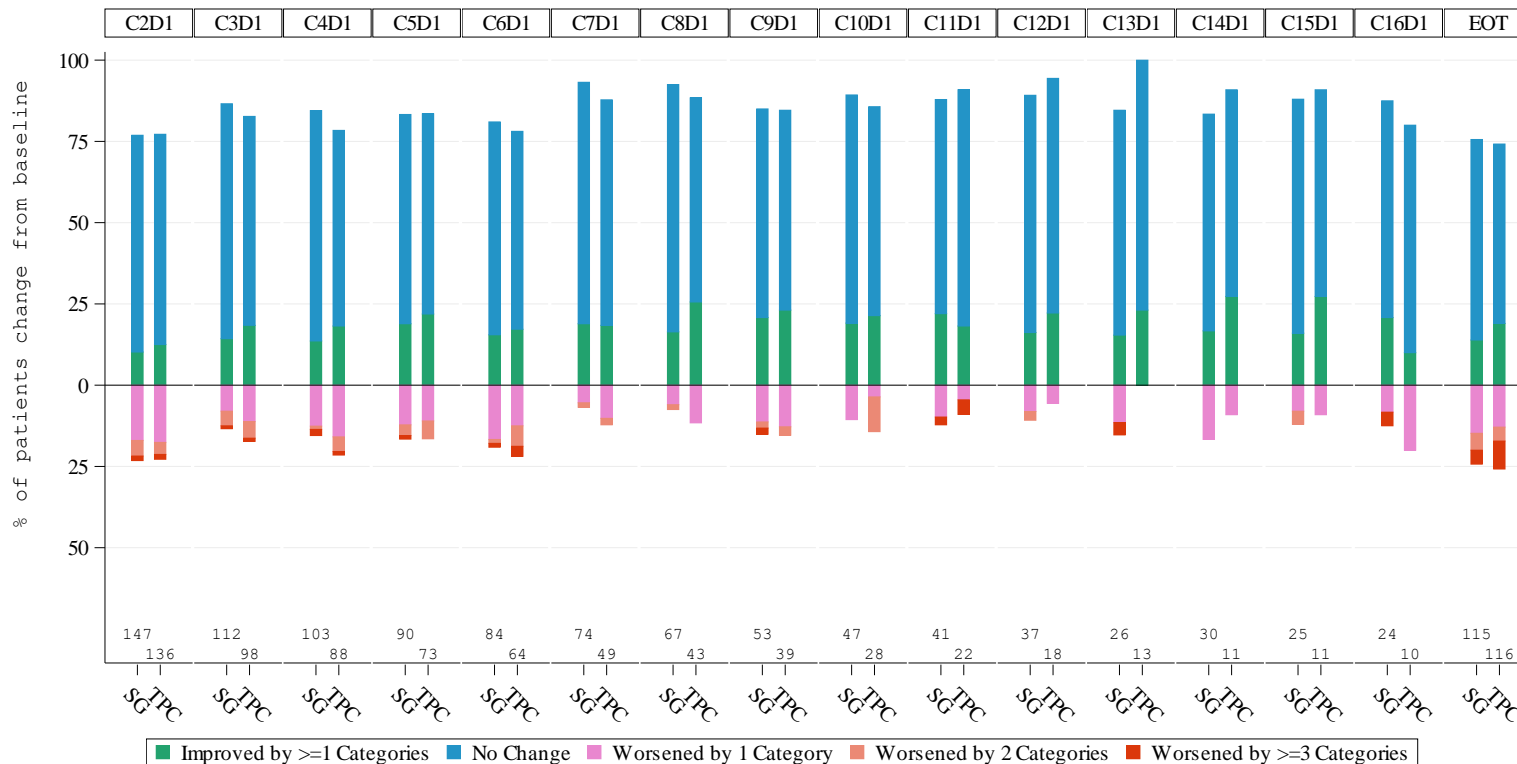
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Figure 15.15.3.2  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Decreased Appetite Interference by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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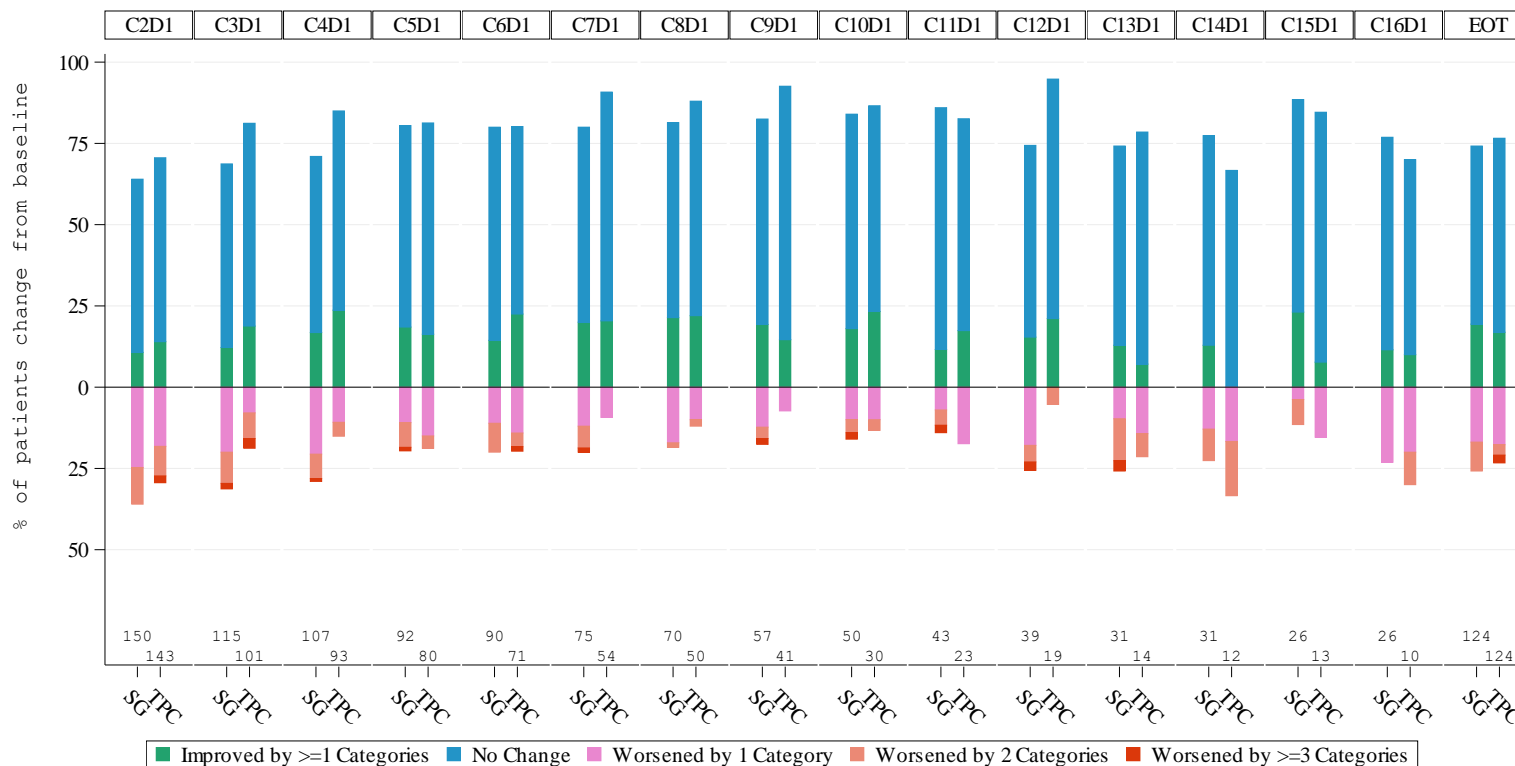
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Figure 15.15.3.3  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Nausea Frequency by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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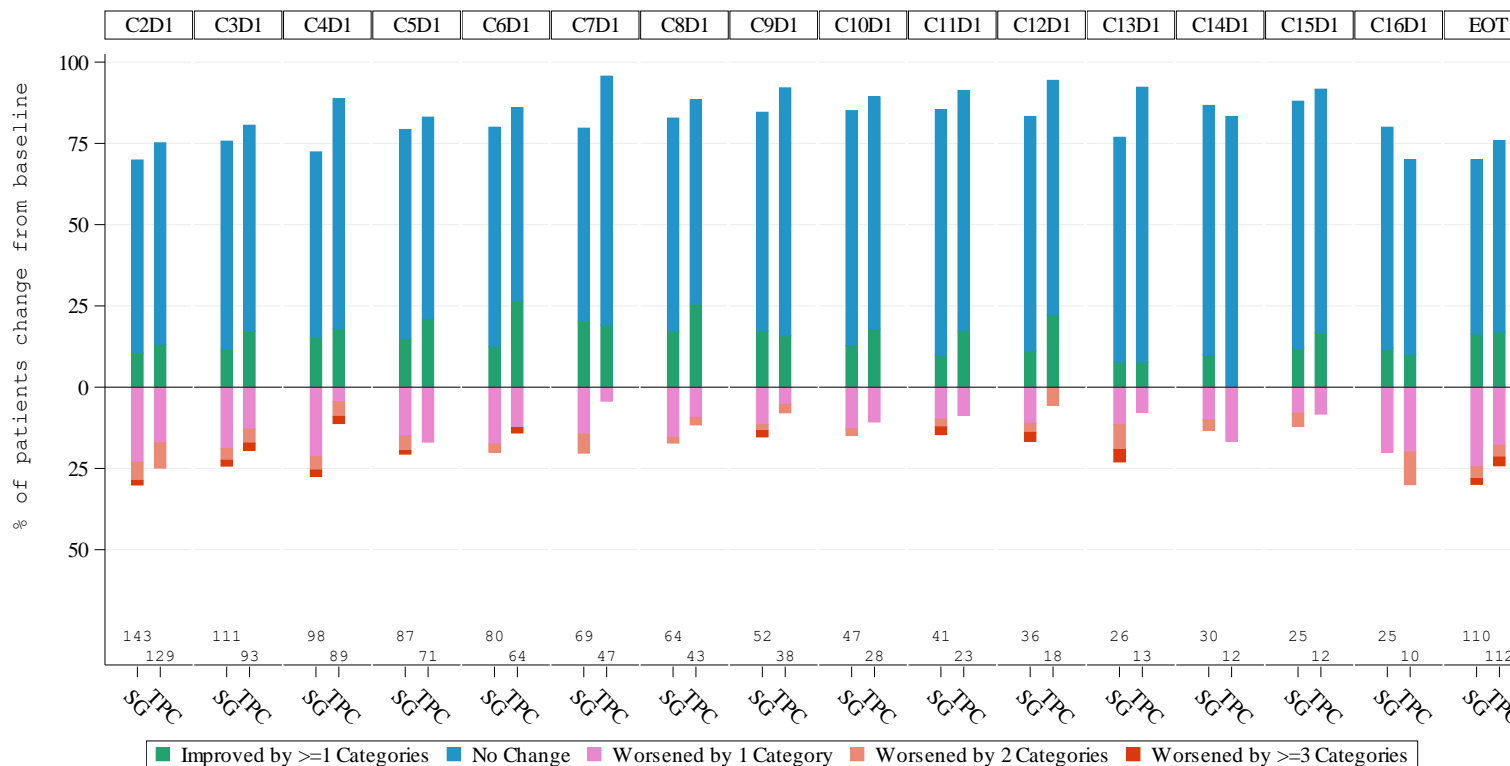
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Figure 15.15.3.4  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Nausea Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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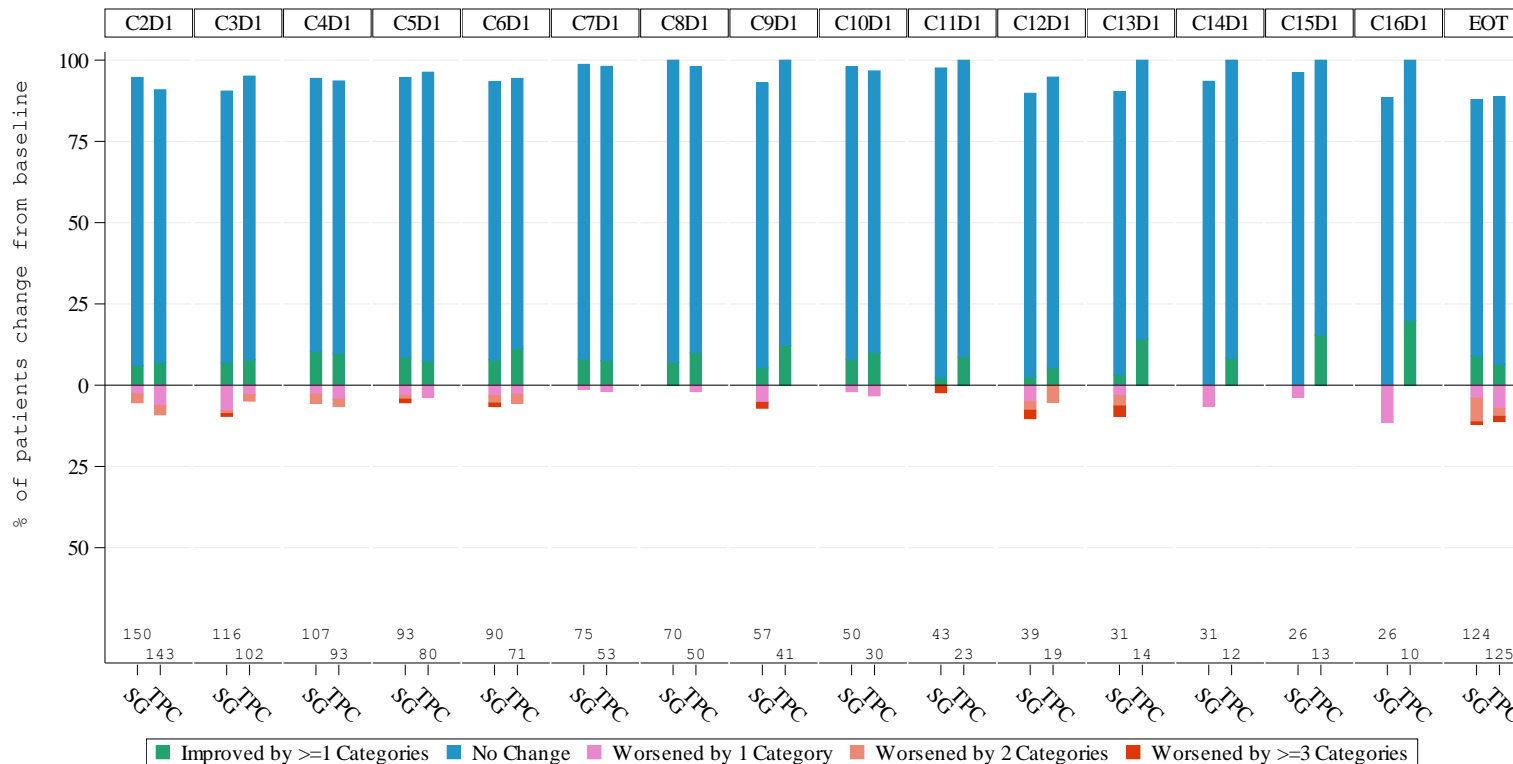
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Figure 15.15.3.5  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Vomiting Frequency by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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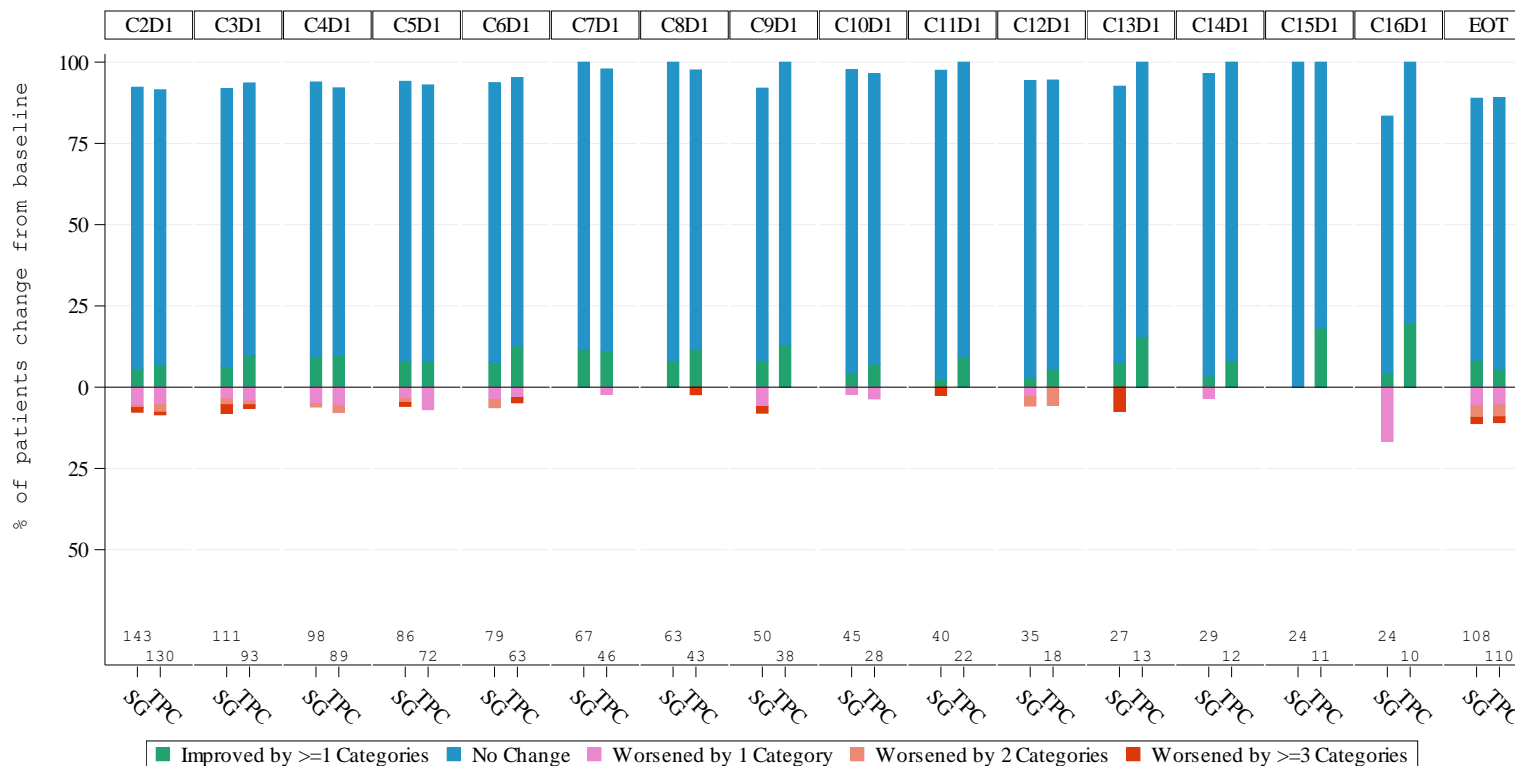
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Figure 15.15.3.6  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Vomiting Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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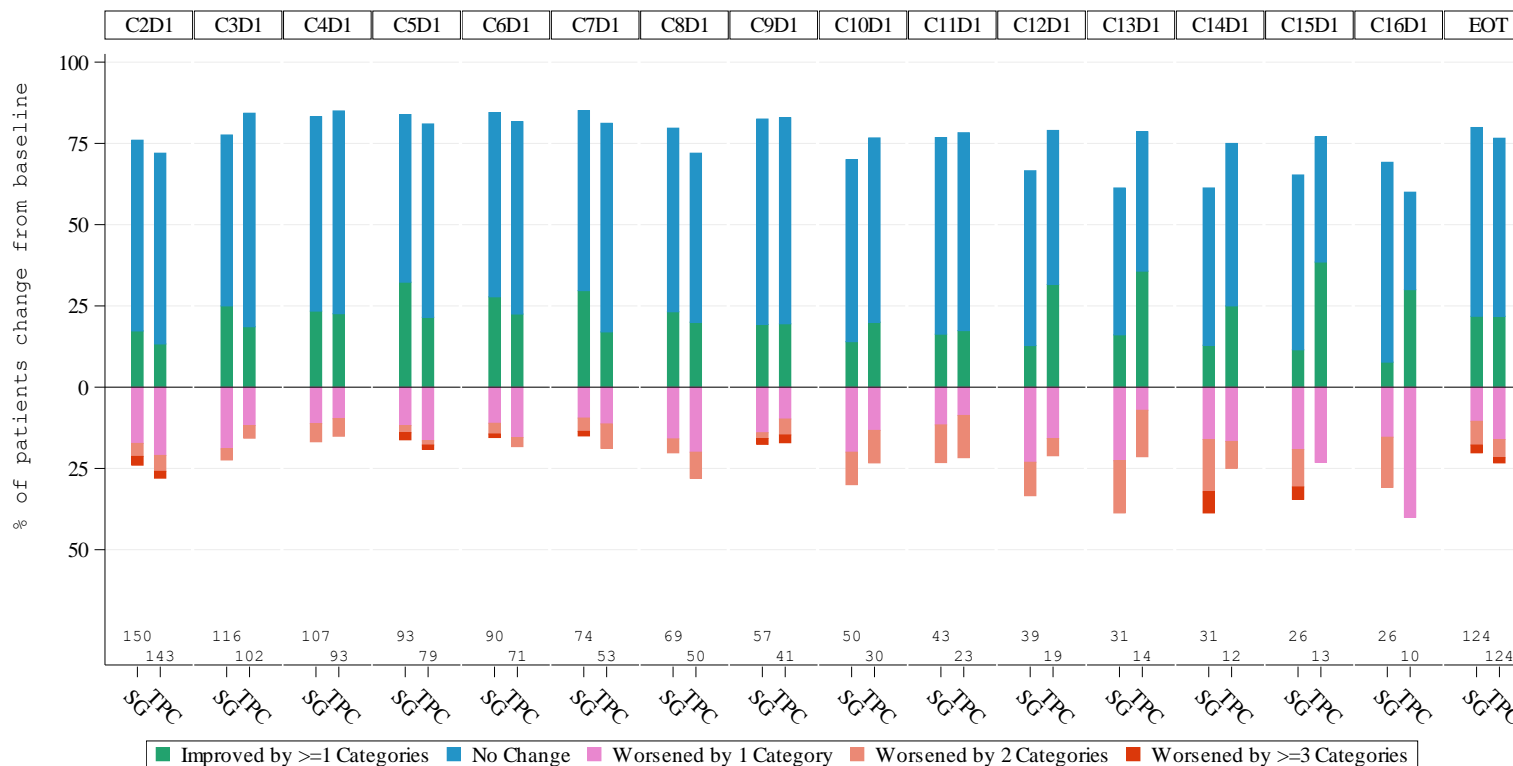
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Figure 15.15.3.7  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Constipation Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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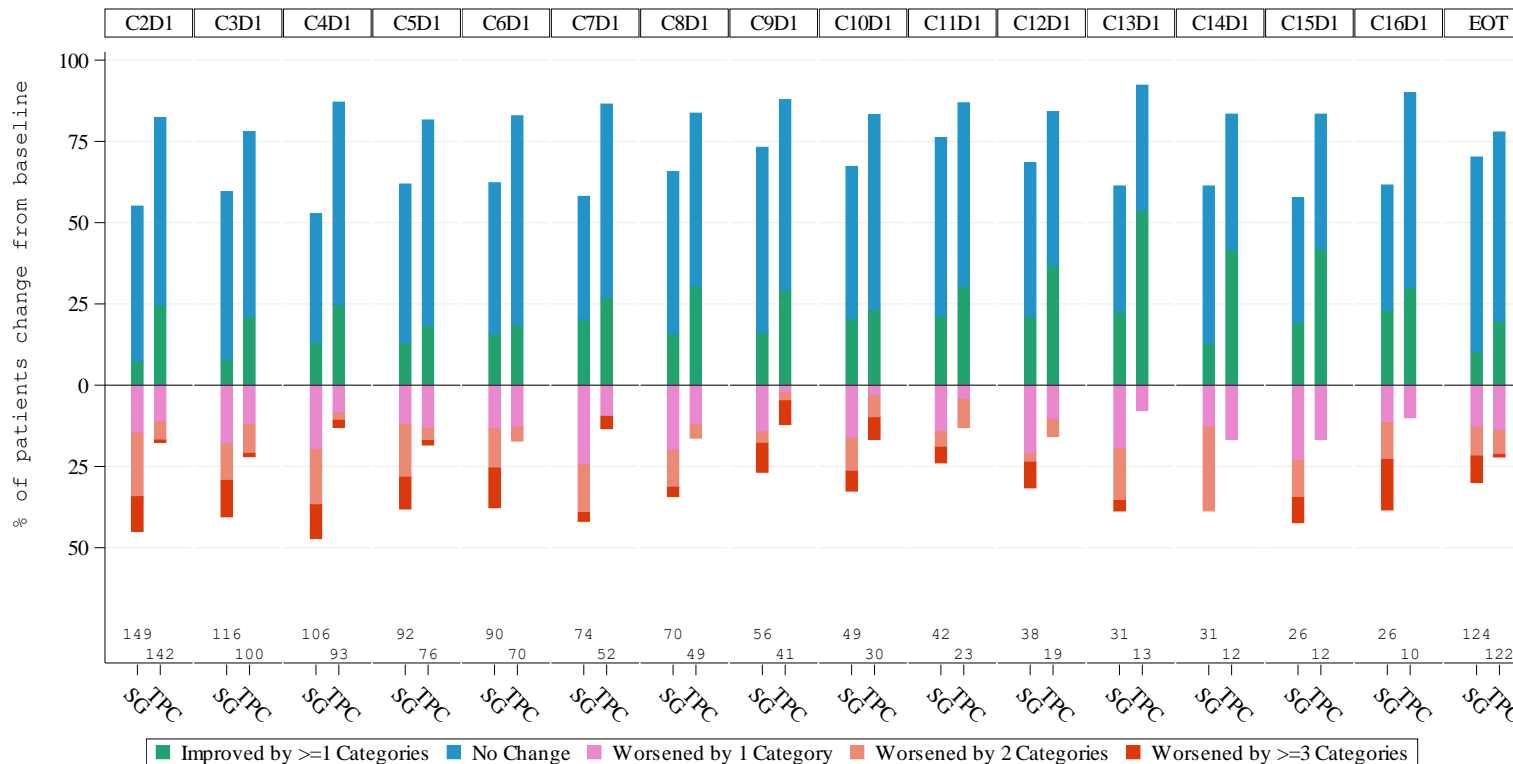
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Figure 15.15.3.8  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Diarrhea Frequency by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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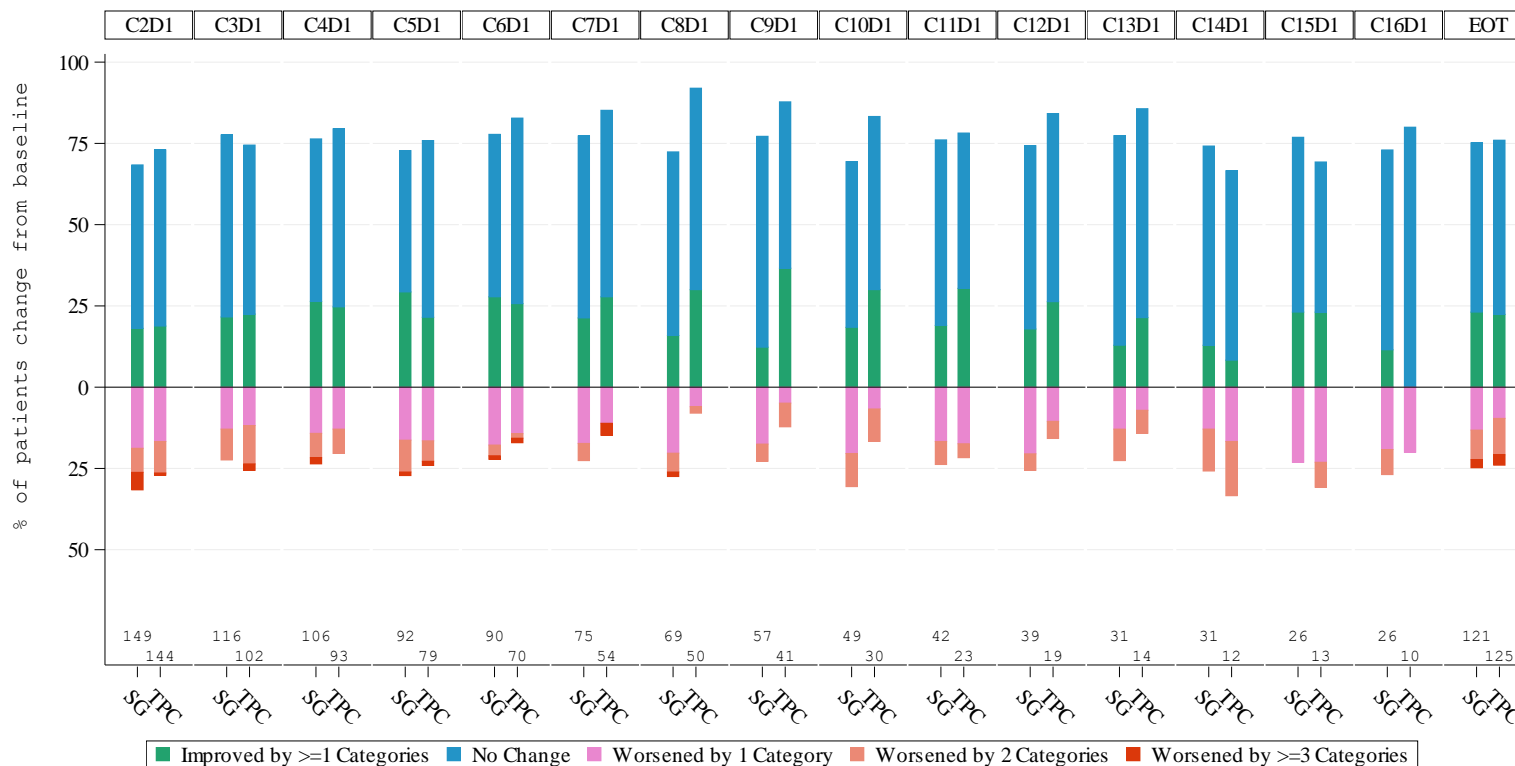
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Figure 15.15.3.9  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Abdominal Pain Frequency by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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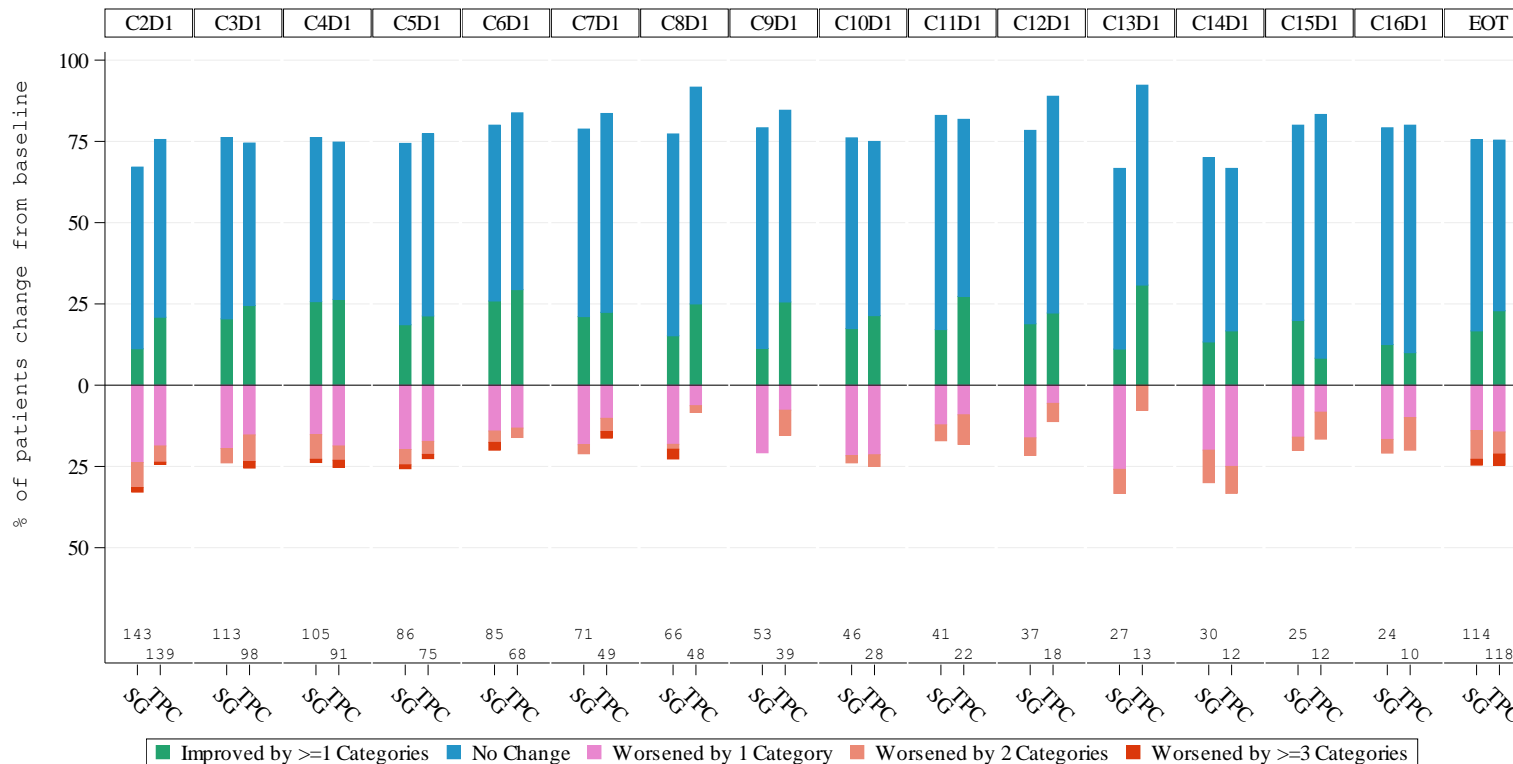
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Figure 15.15.3.10  
Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Abdominal Pain Severity by Visit and Treatment Group  
Safety Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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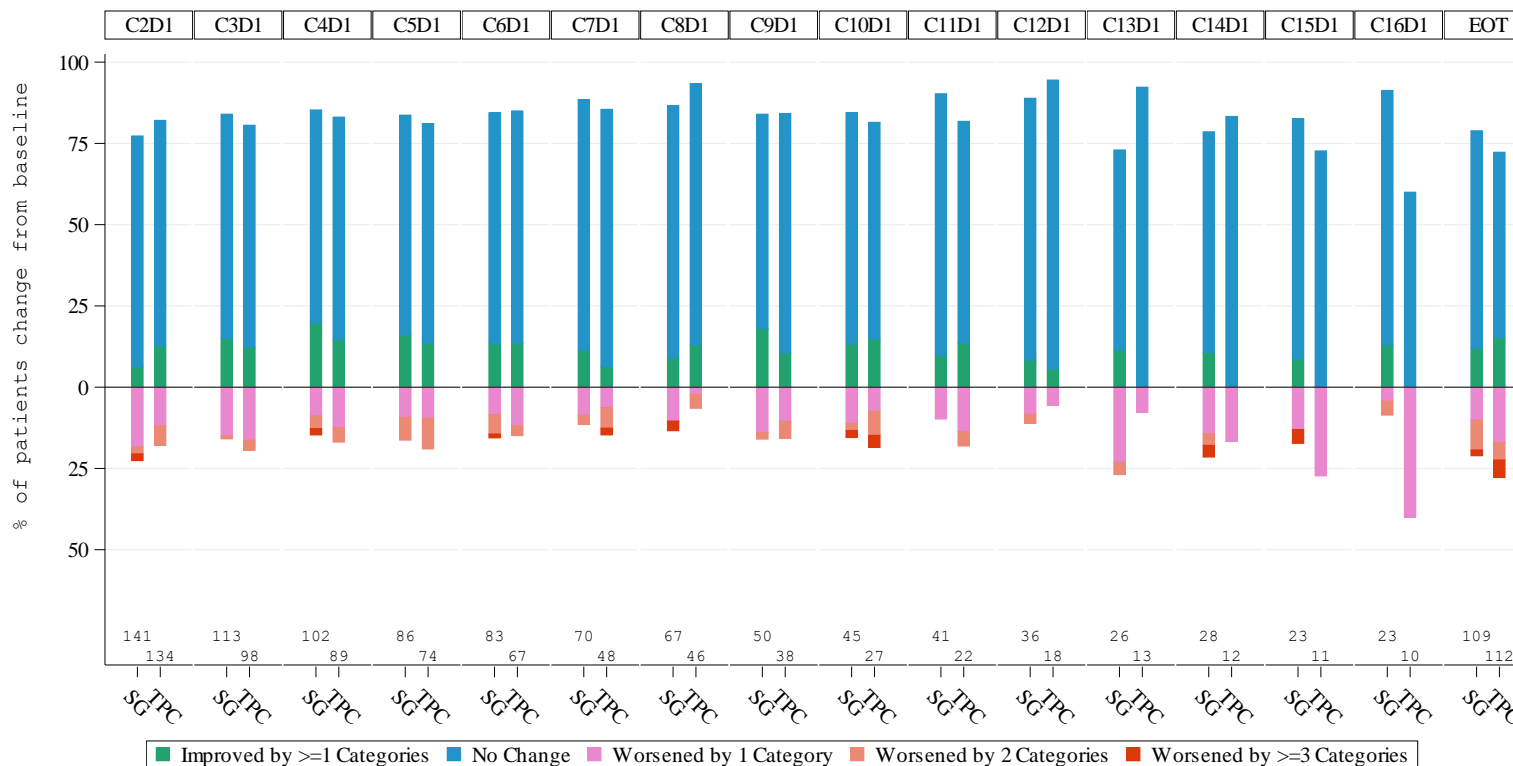
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Figure 15.15.3.11  
Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Abdominal Pain Interference by Visit and Treatment Group  
Safety Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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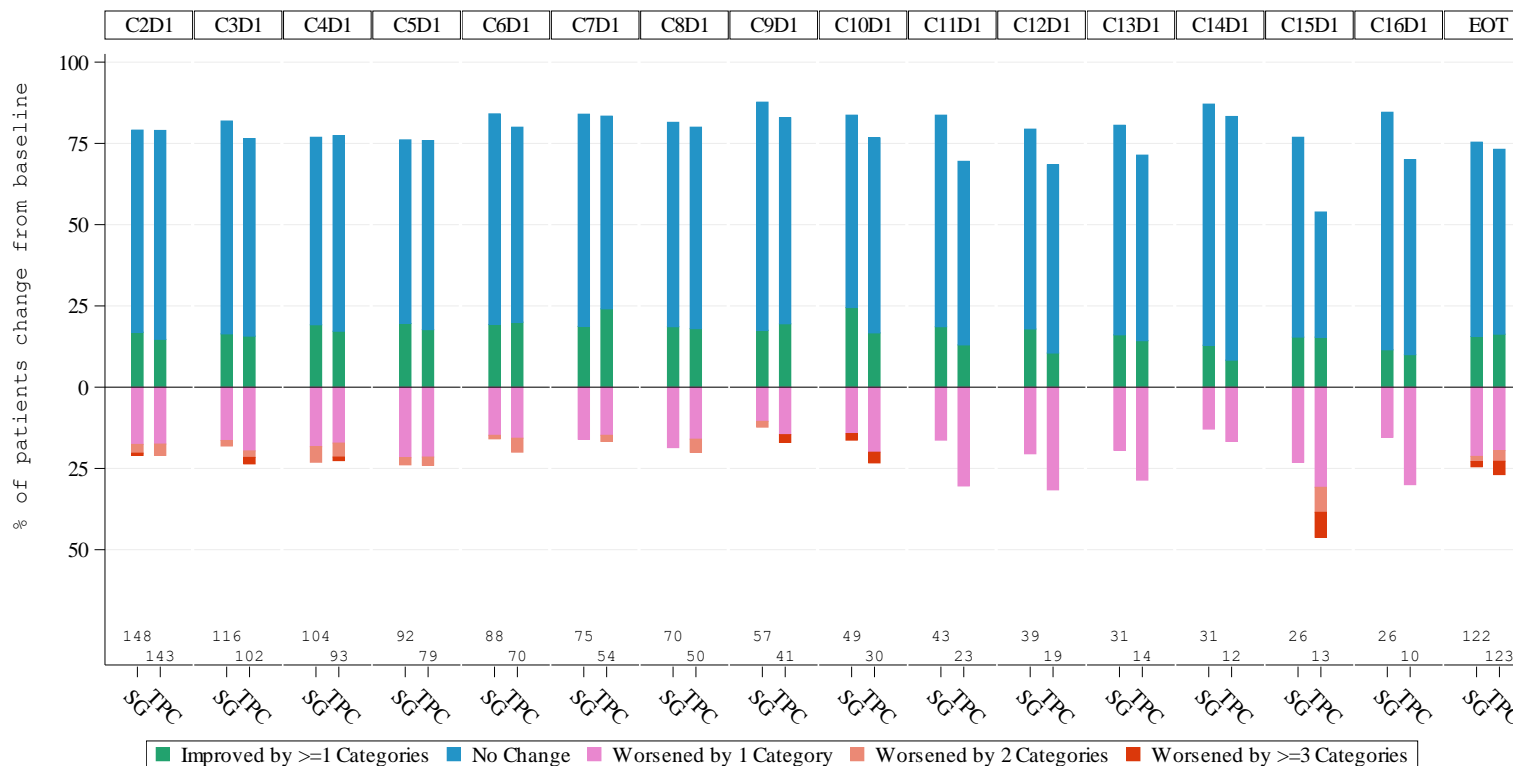
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Figure 15.15.3.12  
Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Shortness of Breath Severity by Visit and Treatment Group  
Safety Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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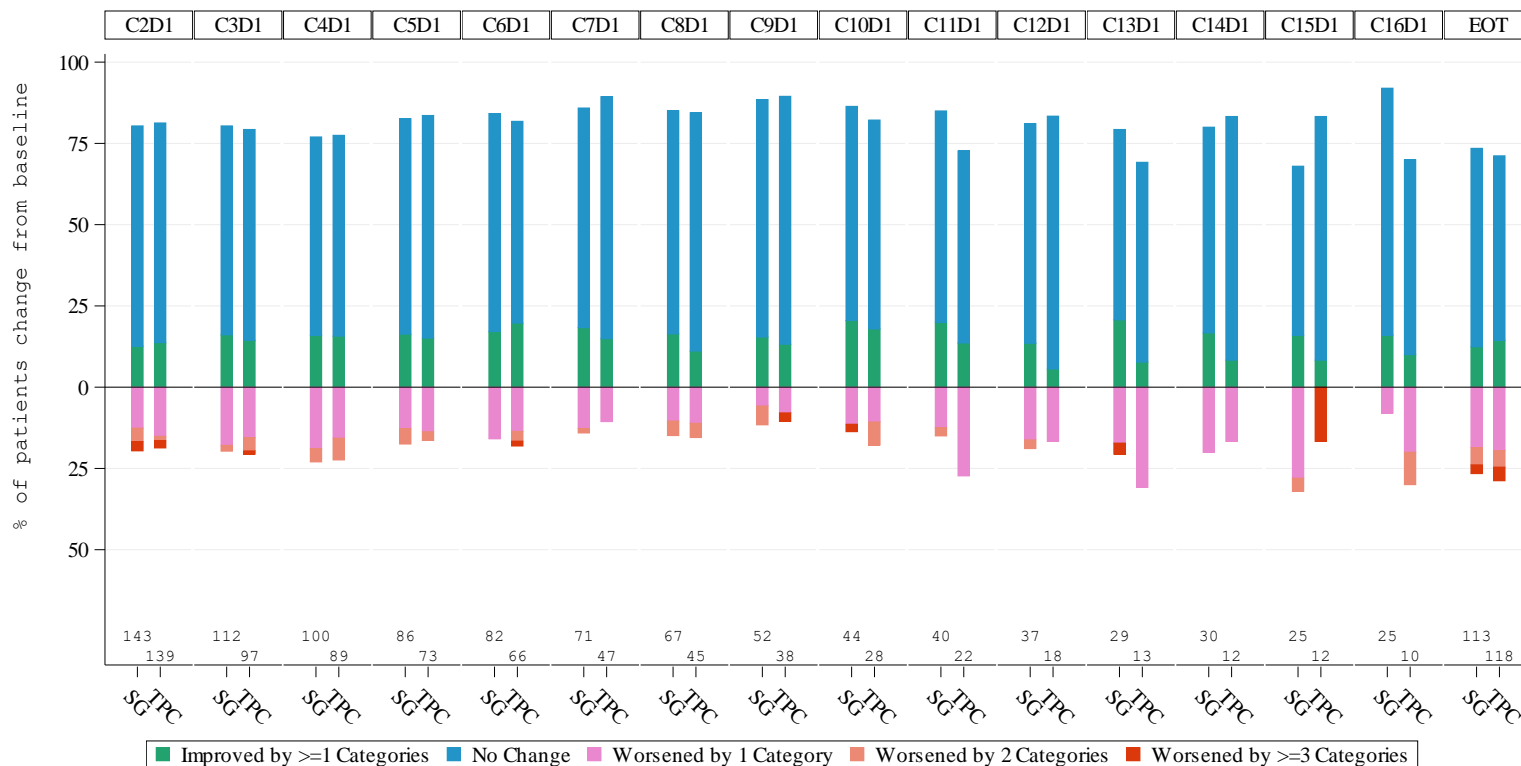
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Figure 15.15.3.13  
Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Shortness of Breath Interference by Visit and Treatment Group  
Safety Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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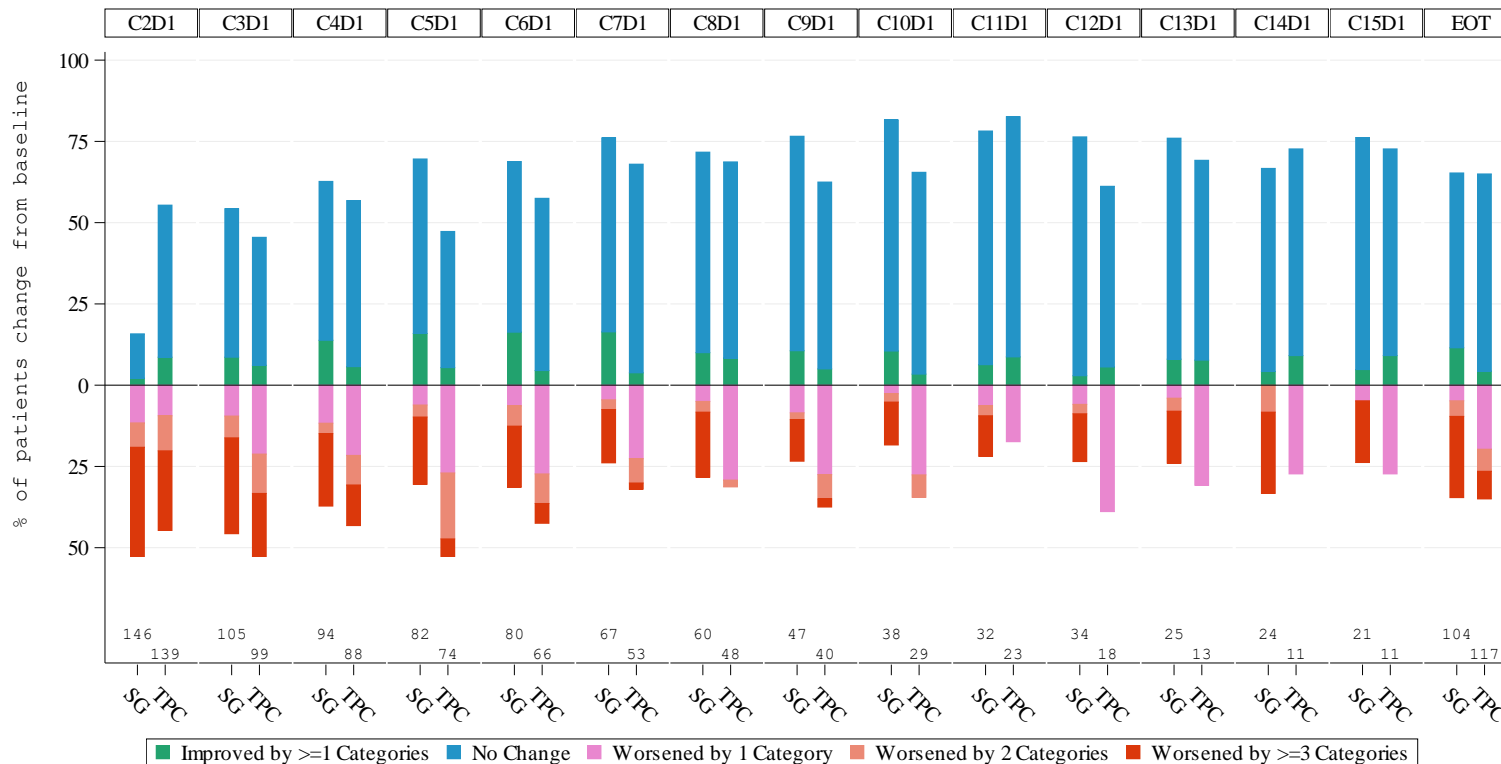
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Figure 15.15.3.14  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Hair Loss Amount by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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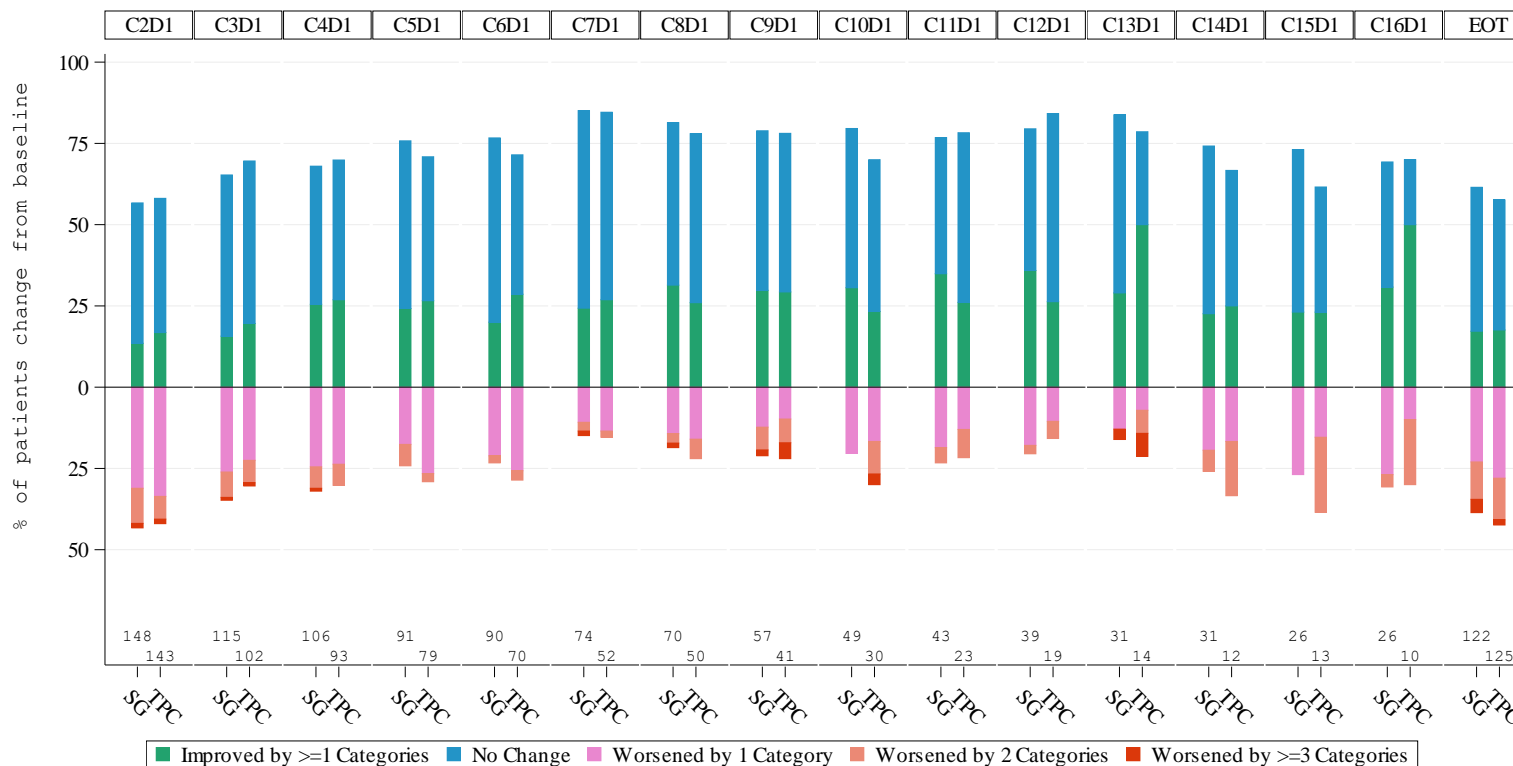
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Figure 15.15.3.15  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Fatigue Severity by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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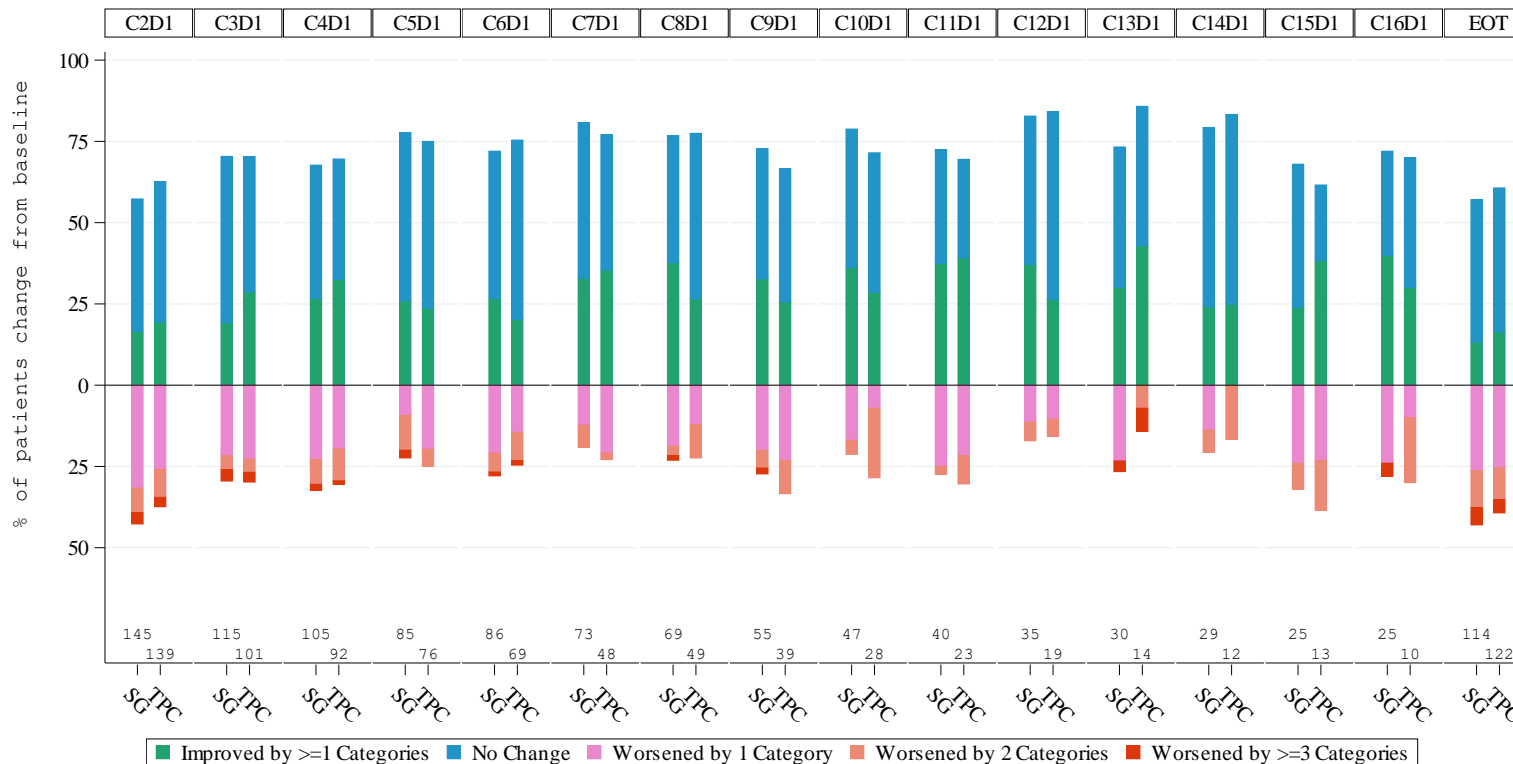
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Figure 15.15.3.16  
 Distribution of Change in Response Categories from Baseline for the PRO-CTCAE Fatigue Interference by Visit and Treatment Group  
 Safety Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization



Note: "Safety population" is defined as all ITT subjects who have received at least one dose of study drug. The denominator for the percentage calculation in each response category is based on the number of subjects with non-missing score at a given post-baseline visit. SG = Sacituzumab Govitecan; PRO-CTCAE = PRO version of the Common Terminology Criteria for Adverse Events; TPC = Treatment Physician Choice.  
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**Anhang 4-G 6.3: Zeit bis zur Verschlechterung EQ-5D VAS**

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Table 15.15.6.2  
 Summary of Time to First HRQoL Worsening for EQ-5D VAS - Death Being Censored  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	Patients With Events (%)	63 ( 37.5)	64 ( 39.5)	
	Patients Without Events (Censored) (%)	105 ( 62.5)	98 ( 60.5)	
	Median Time (months) [a]	11.8	7.0	
	95% CI	(6.9, NE)	(4.6, 12.7)	
	Log-rank p-value (Stratified) [b]			0.0730
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.724
	95% CI for Hazard Ratio			(0.507, 1.033)

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

[c] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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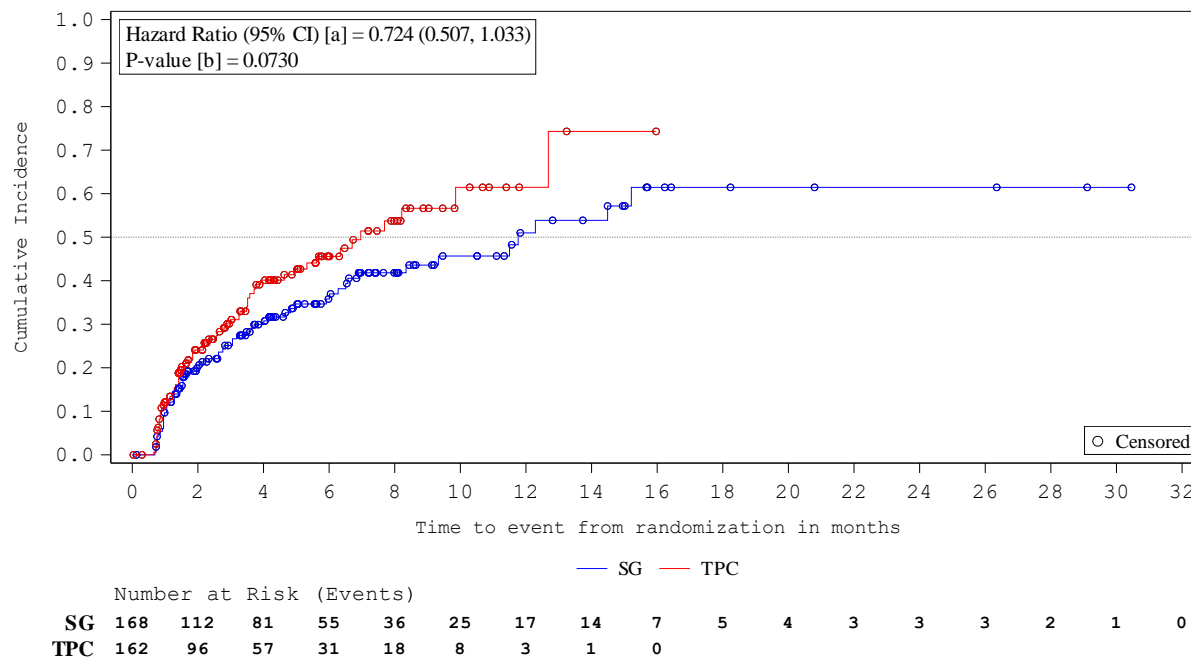
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Figure 15.15.4.2  
Kaplan-Meier Plot of Time to First Worsening in EQ-5D VAS by Treatment Group - Death Being Censored  
EQ-5D-5L Evaluable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline for EQ-5D VAS. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; HR = Hazard Ratio; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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**Anhang 4-G 6.3.1: Subgruppenanalysen**

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.2.1  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison	
EQ-5D VAS	Two Lines	Number of Patients	77	82		
		Patients With Events (%)	30 ( 39.0)	33 ( 40.2)		
		Patients Without Events (Censored) (%)	47 ( 61.0)	49 ( 59.8)		
		Median Time (months) [a]	11.5	8.2		
		95% CI	(6.9, 15.2)	(3.9, NE)		
		Log-rank p-value (Unstratified) [b]			0.1279	
		Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.675		
	95% CI for Hazard Ratio			(0.406, 1.124)		
	Three/Four Lines	Number of Patients		91	80	
			Patients With Events (%)	33 ( 36.3)	31 ( 38.8)	
		Patients Without Events (Censored) (%)	58 ( 63.7)	49 ( 61.3)		
		Median Time (months) [a]	12.3	7.0		
		95% CI	(5.0, NE)	(3.5, NE)		
		Log-rank p-value (Unstratified) [b]			0.3307	
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			0.783	
95% CI for Hazard Ratio				(0.477, 1.286)		
P-value of Subgroup*Treatment Interaction [d]				0.9855		

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Visceral metastasis  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	Yes	Number of Patients	161	155	
		Patients With Events (%)	62 ( 38.5)	62 ( 40.0)	
		Patients Without Events (Censored) (%)	99 ( 61.5)	93 ( 60.0)	
		Median Time (months) [a]	11.8	7.0	
		95% CI	(6.6, NE)	(4.6, 12.7)	
		Log-rank p-value (Unstratified) [b]			0.1156
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.752	
	95% CI for Hazard Ratio			(0.526, 1.075)	
	No	Number of Patients	7	7	
		Patients With Events (%)	1 ( 14.3)	2 ( 28.6)	
		Patients Without Events (Censored) (%)	6 ( 85.7)	5 ( 71.4)	
		Median Time (months) [a]	NE	NE	
		95% CI	(1.6, NE)	(0.8, NE)	
Log-rank p-value (Unstratified) [b]				0.4794	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.429		
95% CI for Hazard Ratio			(0.038, 4.795)		
		P-value of Subgroup*Treatment Interaction [d]		0.5061	

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EQ-5D-5L Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	Yes	Number of Patients	152	143	
		Patients With Events (%)	57 ( 37.5)	59 ( 41.3)	
		Patients Without Events (Censored) (%)	95 ( 62.5)	84 ( 58.7)	
		Median Time (months) [a]	12.3	7.0	
		95% CI	(6.6, NE)	(3.9, 12.7)	
		Log-rank p-value (Unstratified) [b]			0.0623
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.705
		95% CI for Hazard Ratio			(0.486, 1.021)
	No	Number of Patients	16	19	
		Patients With Events (%)	6 ( 37.5)	5 ( 26.3)	
		Patients Without Events (Censored) (%)	10 ( 62.5)	14 ( 73.7)	
		Median Time (months) [a]	11.8	NE	
		95% CI	(1.7, NE)	(3.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.8727
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.102
95% CI for Hazard Ratio			(0.334, 3.635)		
		P-value of Subgroup*Treatment Interaction [d]		0.4297	

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Age group  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	< 65 Years	Number of Patients	133	122	
		Patients With Events (%)	50 ( 37.6)	47 ( 38.5)	
		Patients Without Events (Censored) (%)	83 ( 62.4)	75 ( 61.5)	
		Median Time (months) [a]	11.8	7.0	
		95% CI	(6.9, 15.2)	(4.6, NE)	
		Log-rank p-value (Unstratified) [b]			0.1619
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.749	
	95% CI for Hazard Ratio			(0.499, 1.126)	
	> 65 Years	Number of Patients	35	40	
		Patients With Events (%)	13 ( 37.1)	17 ( 42.5)	
		Patients Without Events (Censored) (%)	22 ( 62.9)	23 ( 57.5)	
		Median Time (months) [a]	NE	4.9	
		95% CI	(3.7, NE)	(3.0, NE)	
Log-rank p-value (Unstratified) [b]				0.2533	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.657		
95% CI for Hazard Ratio			(0.318, 1.359)		
		P-value of Subgroup*Treatment Interaction [d]		0.6837	

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Race  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	White	Number of Patients	120	110	
		Patients With Events (%)	49 ( 40.8)	46 ( 41.8)	
		Patients Without Events (Censored) (%)	71 ( 59.2)	64 ( 58.2)	
		Median Time (months) [a]	11.5	6.3	
		95% CI	(5.9, NE)	(3.5, 9.9)	
		Log-rank p-value (Unstratified) [b]			0.1098
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.716	
	95% CI for Hazard Ratio			(0.474, 1.082)	
	Non-White	Number of Patients	12	15	
		Patients With Events (%)	2 ( 16.7)	6 ( 40.0)	
		Patients Without Events (Censored) (%)	10 ( 83.3)	9 ( 60.0)	
		Median Time (months) [a]	NE	5.6	
		95% CI	(1.0, NE)	(1.1, NE)	
Log-rank p-value (Unstratified) [b]				0.3051	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.445		
95% CI for Hazard Ratio			(0.090, 2.205)		
		P-value of Subgroup*Treatment Interaction [d]		0.4739	

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Baseline ECOG status  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	0	Number of Patients	75	77	
		Patients With Events (%)	27 ( 36.0)	31 ( 40.3)	
		Patients Without Events (Censored) (%)	48 ( 64.0)	46 ( 59.7)	
		Median Time (months) [a]	14.5	7.0	
		95% CI	(6.9, NE)	(3.5, 12.7)	
		Log-rank p-value (Unstratified) [b]			0.0271
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.547	
	95% CI for Hazard Ratio			(0.317, 0.942)	
	1	Number of Patients	93	85	
		Patients With Events (%)	36 ( 38.7)	33 ( 38.8)	
		Patients Without Events (Censored) (%)	57 ( 61.3)	52 ( 61.2)	
		Median Time (months) [a]	9.3	6.3	
		95% CI	(4.7, NE)	(3.6, NE)	
Log-rank p-value (Unstratified) [b]				0.6370	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.893		
95% CI for Hazard Ratio			(0.556, 1.433)		
		P-value of Subgroup*Treatment Interaction [d]		0.3223	

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Geographic region  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	Europe	Number of Patients	101	103	
		Patients With Events (%)	40 ( 39.6)	43 ( 41.7)	
		Patients Without Events (Censored) (%)	61 ( 60.4)	60 ( 58.3)	
		Median Time (months) [a]	11.8	7.7	
		95% CI	(6.0, 15.2)	(3.7, 12.7)	
		Log-rank p-value (Unstratified) [b]			0.2363
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.770
		95% CI for Hazard Ratio			(0.498, 1.190)
	North America	Number of Patients	67	59	
		Patients With Events (%)	23 ( 34.3)	21 ( 35.6)	
		Patients Without Events (Censored) (%)	44 ( 65.7)	38 ( 64.4)	
		Median Time (months) [a]	NE	6.3	
		95% CI	(6.6, NE)	(3.5, NE)	
		Log-rank p-value (Unstratified) [b]			0.2757
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.717
		95% CI for Hazard Ratio			(0.393, 1.310)
				P-value of Subgroup*Treatment Interaction [d]	0.5823

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Prior CDK inhibitor treatment duration  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	< 12 Months	Number of Patients	94	98	
		Patients With Events (%)	35 ( 37.2)	34 ( 34.7)	
		Patients Without Events (Censored) (%)	59 ( 62.8)	64 ( 65.3)	
		Median Time (months) [a]	14.5	8.2	
		95% CI	(6.5, NE)	(5.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.3514
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.795
		95% CI for Hazard Ratio			(0.489, 1.291)
	> 12 Months	Number of Patients	71	62	
		Patients With Events (%)	28 ( 39.4)	29 ( 46.8)	
		Patients Without Events (Censored) (%)	43 ( 60.6)	33 ( 53.2)	
		Median Time (months) [a]	8.3	5.6	
		95% CI	(5.9, NE)	(3.0, NE)	
		Log-rank p-value (Unstratified) [b]			0.1844
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.704
		95% CI for Hazard Ratio			(0.417, 1.187)
		P-value of Subgroup*Treatment Interaction [d]			0.7133

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Early relapse  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	Yes	Number of Patients	11	9	
		Patients With Events (%)	5 ( 45.5)	3 ( 33.3)	
		Patients Without Events (Censored) (%)	6 ( 54.5)	6 ( 66.7)	
		Median Time (months) [a]	6.9	NE	
		95% CI	(1.1, NE)	(0.8, NE)	
		Log-rank p-value (Unstratified) [b]			0.4558
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.541	
	95% CI for Hazard Ratio			(0.105, 2.779)	
	No	Number of Patients	150	150	
		Patients With Events (%)	53 ( 35.3)	59 ( 39.3)	
		Patients Without Events (Censored) (%)	97 ( 64.7)	91 ( 60.7)	
		Median Time (months) [a]	12.3	7.0	
		95% CI	(8.3, NE)	(4.9, 12.7)	
Log-rank p-value (Unstratified) [b]				0.0870	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.721		
95% CI for Hazard Ratio			(0.495, 1.052)		
		P-value of Subgroup*Treatment Interaction [d]		0.9933	

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Chemotherapy in neo/adjuvant setting  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	Yes	Number of Patients	100	106	
		Patients With Events (%)	40 ( 40.0)	39 ( 36.8)	
		Patients Without Events (Censored) (%)	60 ( 60.0)	67 ( 63.2)	
		Median Time (months) [a]	11.5	7.7	
		95% CI	(6.3, 15.2)	(3.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.3577
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.809	
	95% CI for Hazard Ratio			(0.515, 1.273)	
	No	Number of Patients	68	56	
		Patients With Events (%)	23 ( 33.8)	25 ( 44.6)	
		Patients Without Events (Censored) (%)	45 ( 66.2)	31 ( 55.4)	
		Median Time (months) [a]	NE	6.3	
		95% CI	(4.7, NE)	(3.5, 12.7)	
Log-rank p-value (Unstratified) [b]				0.1053	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.629		
95% CI for Hazard Ratio			(0.357, 1.110)		
		P-value of Subgroup*Treatment Interaction [d]		0.4254	

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Trop2 H-Score  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	<100	Number of Patients	55	60	
		Patients With Events (%)	21 ( 38.2)	21 ( 35.0)	
		Patients Without Events (Censored) (%)	34 ( 61.8)	39 ( 65.0)	
		Median Time (months) [a]	9.3	7.7	
		95% CI	(6.3, NE)	(5.6, NE)	
		Log-rank p-value (Unstratified) [b]			0.9648
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.014
		95% CI for Hazard Ratio			(0.551, 1.865)
	>100 to ≤200	Number of Patients	58	57	
		Patients With Events (%)	21 ( 36.2)	24 ( 42.1)	
		Patients Without Events (Censored) (%)	37 ( 63.8)	33 ( 57.9)	
		Median Time (months) [a]	11.8	3.7	
		95% CI	(5.9, NE)	(2.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.0352
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.528
		95% CI for Hazard Ratio			(0.288, 0.968)
	>200	Number of Patients	34	25	
Patients With Events (%)		13 ( 38.2)	11 ( 44.0)		
Patients Without Events (Censored) (%)		21 ( 61.8)	14 ( 56.0)		
Median Time (months) [a]		15.2	9.9		
95% CI		(3.7, NE)	(2.6, NE)		
Log-rank p-value (Unstratified) [b]				0.4513	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)				0.732	
95% CI for Hazard Ratio				(0.323, 1.656)	
				P-value of Subgroup*Treatment Interaction [d]	0.2841

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	Capecitabine	Number of Patients	19	20	
		Patients With Events (%)	4 ( 21.1)	7 ( 35.0)	
		Patients Without Events (Censored) (%)	15 ( 78.9)	13 ( 65.0)	
		Median Time (months) [a]	NE	NE	
		95% CI	(2.0, NE)	(2.6, NE)	
		Log-rank p-value (Unstratified) [b]			0.5380
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.681
		95% CI for Hazard Ratio			(0.199, 2.329)
	Eribulin	Number of Patients	105	107	
		Patients With Events (%)	39 ( 37.1)	51 ( 47.7)	
		Patients Without Events (Censored) (%)	66 ( 62.9)	56 ( 52.3)	
		Median Time (months) [a]	14.5	6.3	
		95% CI	(6.6, NE)	(3.6, 9.9)	
		Log-rank p-value (Unstratified) [b]			0.0230
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.616
		95% CI for Hazard Ratio			(0.403, 0.941)
Vinorelbine	Number of Patients	44	35		
	Patients With Events (%)	20 ( 45.5)	6 ( 17.1)		
	Patients Without Events (Censored) (%)	24 ( 54.5)	29 ( 82.9)		
	Median Time (months) [a]	8.3	6.7		
	95% CI	(3.1, NE)	(2.9, NE)		
	Log-rank p-value (Unstratified) [b]			0.5054	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.371	
	95% CI for Hazard Ratio			(0.537, 3.499)	
	P-value of Subgroup*Treatment Interaction [d]				0.1773

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.2.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EQ-5D VAS by Subgroup - Baseline documented target or non-target liver lesions  
 EQ-5D-5L Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=175)	TPC (N=164)	Treatment Comparison
EQ-5D VAS	Yes	Number of Patients	148	142	
		Patients With Events (%)	57 ( 38.5)	57 ( 40.1)	
		Patients Without Events (Censored) (%)	91 ( 61.5)	85 ( 59.9)	
		Median Time (months) [a]	11.8	6.7	
		95% CI	(6.5, 15.2)	(4.6, 12.7)	
		Log-rank p-value (Unstratified) [b]			0.2009
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.786	
	95% CI for Hazard Ratio			(0.542, 1.139)	
	No	Number of Patients	20	20	
		Patients With Events (%)	6 ( 30.0)	7 ( 35.0)	
		Patients Without Events (Censored) (%)	14 ( 70.0)	13 ( 65.0)	
		Median Time (months) [a]	NE	NE	
		95% CI	(6.3, NE)	(1.9, NE)	
Log-rank p-value (Unstratified) [b]				0.2281	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.512		
95% CI for Hazard Ratio			(0.169, 1.553)		
		P-value of Subgroup*Treatment Interaction [d]		0.2954	

Note: "EQ-5D-5L Evaluable population" is defined as ITT subjects who completed at least one of the 5 dimensions or VAS score at baseline and at least one evaluable assessment at post-baseline visits based on EQ-5D-5L. A clinically meaningful worsening is defined as at least 15 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EQ-5D-5L = EuroQoL Five Dimensions, Five Levels questionnaire; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice; VAS = visual analog scale.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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**Anhang 4-G 6.4: Zeit bis zur Verschlechterung EORTC-QLQ-C30**

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Table 15.15.6.1  
 Summary of Time to First HRQoL Worsening for EORTC QLQ-C30 - Death Being Censored  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Global Health Status / QoL	Patients With Events (%)	95 ( 54.9)	103 ( 62.8)	
	Patients Without Events (Censored) (%)	78 ( 45.1)	61 ( 37.2)	
	Median Time (months) [a]	4.9	2.6	
	95% CI	(3.0, 6.7)	(2.0, 3.5)	
	Log-rank p-value (Stratified) [b]			0.0041
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.663
	95% CI for Hazard Ratio			(0.499, 0.882)
Physical Functioning	Patients With Events (%)	88 ( 50.6)	87 ( 53.0)	
	Patients Without Events (Censored) (%)	86 ( 49.4)	77 ( 47.0)	
	Median Time (months) [a]	5.6	3.4	
	95% CI	(3.1, 8.3)	(2.2, 4.6)	
	Log-rank p-value (Stratified) [b]			0.0289
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.717
	95% CI for Hazard Ratio			(0.531, 0.970)
Role Functioning	Patients With Events (%)	111 ( 64.9)	102 ( 64.2)	
	Patients Without Events (Censored) (%)	60 ( 35.1)	57 ( 35.8)	
	Median Time (months) [a]	2.8	2.2	
	95% CI	(1.7, 4.3)	(1.5, 2.9)	
	Log-rank p-value (Stratified) [b]			0.0546
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.768
	95% CI for Hazard Ratio			(0.584, 1.010)
Emotional Functioning	Patients With Events (%)	61 ( 36.1)	75 ( 45.7)	
	Patients Without Events (Censored) (%)	108 ( 63.9)	89 ( 54.3)	
	Median Time (months) [a]	NE	4.5	
	95% CI	(6.5, NE)	(3.4, 9.5)	
	Log-rank p-value (Stratified) [b]			0.0117
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.647
	95% CI for Hazard Ratio			(0.459, 0.912)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

[c] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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Table 15.15.6.1  
 Summary of Time to First HRQoL Worsening for EORTC QLQ-C30 - Death Being Censored  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Cognitive Functioning	Patients With Events (%)	86 ( 49.4)	67 ( 40.9)	
	Patients Without Events (Censored) (%)	88 ( 50.6)	97 ( 59.1)	
	Median Time (months) [a]	5.2	5.4	
	95% CI	(3.0, 11.1)	(3.3, NE)	
	Log-rank p-value (Stratified) [b]			0.9061
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.020
	95% CI for Hazard Ratio			(0.737, 1.411)
Social Functioning	Patients With Events (%)	101 ( 59.4)	88 ( 56.1)	
	Patients Without Events (Censored) (%)	69 ( 40.6)	69 ( 43.9)	
	Median Time (months) [a]	2.4	3.5	
	95% CI	(1.7, 4.3)	(2.6, 4.3)	
	Log-rank p-value (Stratified) [b]			0.9576
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.992
	95% CI for Hazard Ratio			(0.743, 1.325)
Fatigue	Patients With Events (%)	121 ( 70.3)	124 ( 76.5)	
	Patients Without Events (Censored) (%)	51 ( 29.7)	38 ( 23.5)	
	Median Time (months) [a]	2.1	1.3	
	95% CI	(1.6, 2.8)	(1.0, 1.8)	
	Log-rank p-value (Stratified) [b]			0.0019
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.672
	95% CI for Hazard Ratio			(0.519, 0.869)
Nausea and Vomiting	Patients With Events (%)	106 ( 61.3)	77 ( 46.7)	
	Patients Without Events (Censored) (%)	67 ( 38.7)	88 ( 53.3)	
	Median Time (months) [a]	2.4	4.6	
	95% CI	(1.6, 3.9)	(2.9, 9.5)	
	Log-rank p-value (Stratified) [b]			0.1273
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.256
	95% CI for Hazard Ratio			(0.933, 1.691)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

[c] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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Table 15.15.6.1  
 Summary of Time to First HRQoL Worsening for EORTC QLQ-C30 - Death Being Censored  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Pain	Patients With Events (%)	95 ( 56.2)	90 ( 56.6)	
	Patients Without Events (Censored) (%)	74 ( 43.8)	69 ( 43.4)	
	Median Time (months) [a]	3.8	3.2	
	95% CI	(2.8, 6.1)	(2.2, 4.3)	
	Log-rank p-value (Stratified) [b]			0.2118
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.830
	95% CI for Hazard Ratio			(0.617, 1.116)
Dyspnea	Patients With Events (%)	78 ( 45.9)	84 ( 52.2)	
	Patients Without Events (Censored) (%)	92 ( 54.1)	77 ( 47.8)	
	Median Time (months) [a]	6.7	3.9	
	95% CI	(4.6, 9.5)	(2.4, 7.5)	
	Log-rank p-value (Stratified) [b]			0.0086
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.657
	95% CI for Hazard Ratio			(0.479, 0.903)
Insomnia	Patients With Events (%)	68 ( 42.5)	69 ( 46.0)	
	Patients Without Events (Censored) (%)	92 ( 57.5)	81 ( 54.0)	
	Median Time (months) [a]	8.7	3.6	
	95% CI	(6.0, 18.9)	(2.3, NE)	
	Log-rank p-value (Stratified) [b]			0.0212
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.672
	95% CI for Hazard Ratio			(0.476, 0.947)
Appetite Loss	Patients With Events (%)	97 ( 58.1)	78 ( 50.0)	
	Patients Without Events (Censored) (%)	70 ( 41.9)	78 ( 50.0)	
	Median Time (months) [a]	3.3	3.7	
	95% CI	(1.7, 5.9)	(2.3, 5.4)	
	Log-rank p-value (Stratified) [b]			0.6334
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.076
	95% CI for Hazard Ratio			(0.794, 1.457)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

[c] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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Table 15.15.6.1  
 Summary of Time to First HRQoL Worsening for EORTC QLQ-C30 - Death Being Censored  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	Patients With Events (%)	83 ( 48.8)	70 ( 44.3)	
	Patients Without Events (Censored) (%)	87 ( 51.2)	88 ( 55.7)	
	Median Time (months) [a]	5.4	4.8	
	95% CI	(3.2, 9.1)	(3.2, 8.2)	
	Log-rank p-value (Stratified) [b]			0.9420
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.012
	95% CI for Hazard Ratio			(0.734, 1.396)
Diarrhea	Patients With Events (%)	104 ( 60.5)	55 ( 33.5)	
	Patients Without Events (Censored) (%)	68 ( 39.5)	109 ( 66.5)	
	Median Time (months) [a]	2.0	8.2	
	95% CI	(1.6, 3.4)	(5.8, NE)	
	Log-rank p-value (Stratified) [b]			<.0001
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			2.408
	95% CI for Hazard Ratio			(1.721, 3.367)
Financial Difficulties	Patients With Events (%)	43 ( 25.4)	31 ( 19.5)	
	Patients Without Events (Censored) (%)	126 ( 74.6)	128 ( 80.5)	
	Median Time (months) [a]	NE	NE	
	95% CI	(18.2, NE)	(NE, NE)	
	Log-rank p-value (Stratified) [b]			0.5345
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.159
	95% CI for Hazard Ratio			(0.726, 1.850)
Summary Score	Patients With Events (%)	85 ( 48.9)	79 ( 47.9)	
	Patients Without Events (Censored) (%)	89 ( 51.1)	86 ( 52.1)	
	Median Time (months) [a]	5.6	4.9	
	95% CI	(3.7, 9.2)	(3.1, 8.2)	
	Log-rank p-value (Stratified) [b]			0.2647
	Stratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.838
	95% CI for Hazard Ratio			(0.613, 1.146)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

[c] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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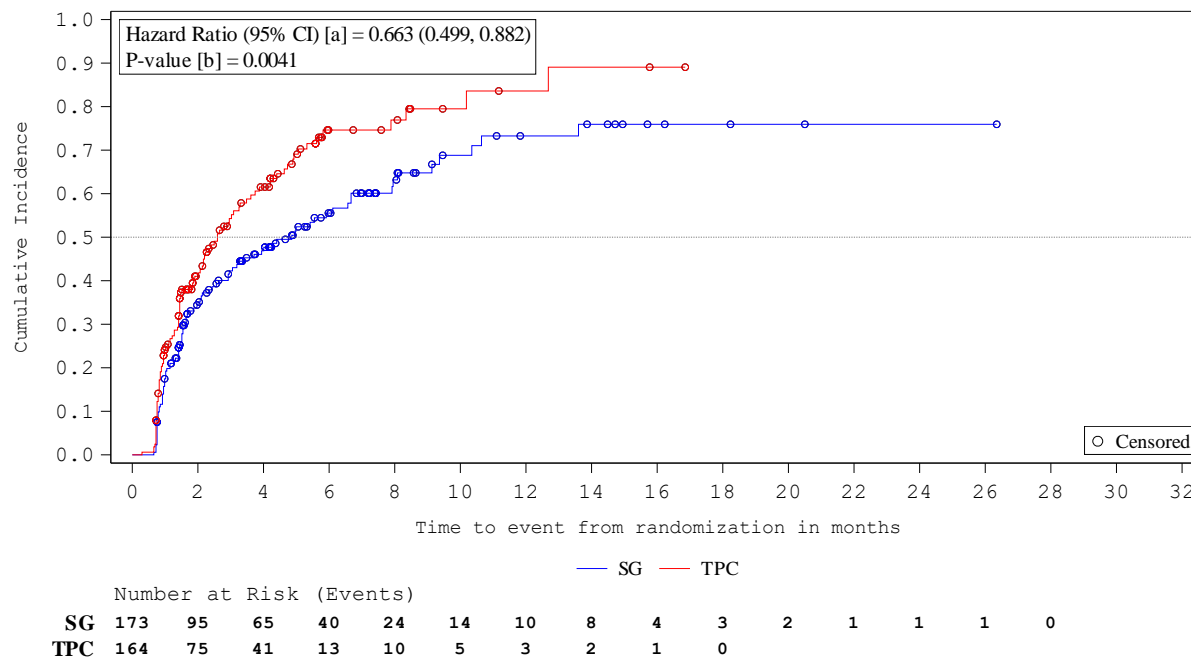
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Figure 15.15.4.1.1  
Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Global Health Status/QoL by Treatment Group - Death Being Censored  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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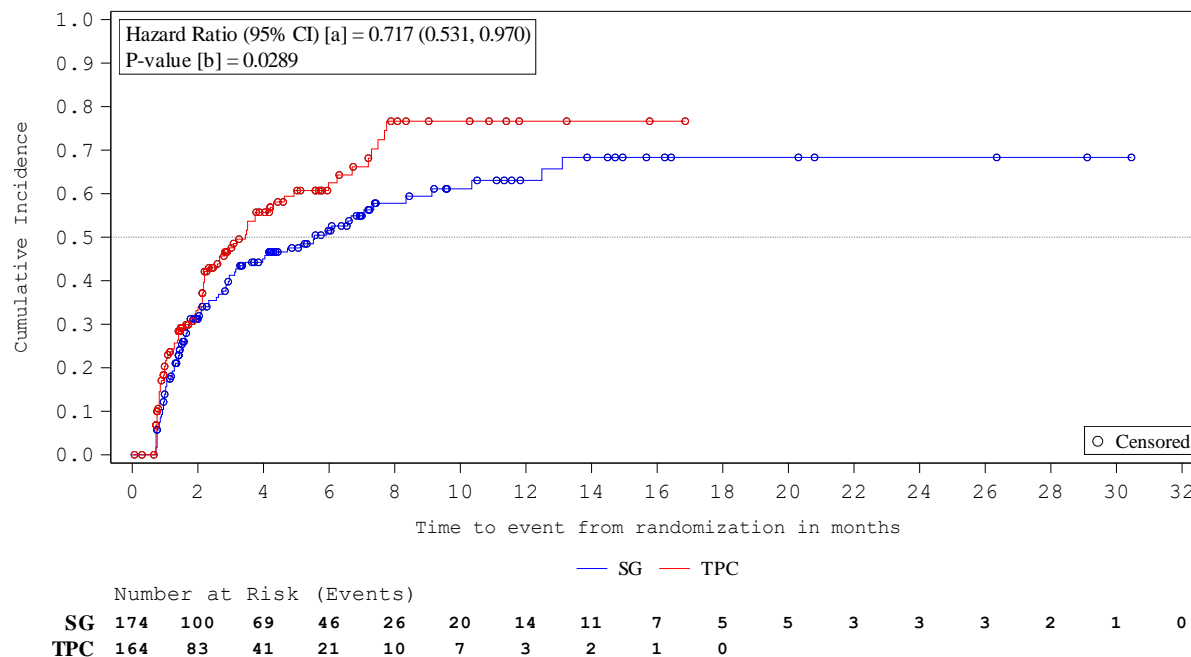
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Figure 15.15.4.1.2  
 Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Physical Functioning by Treatment Group - Death Being Censored  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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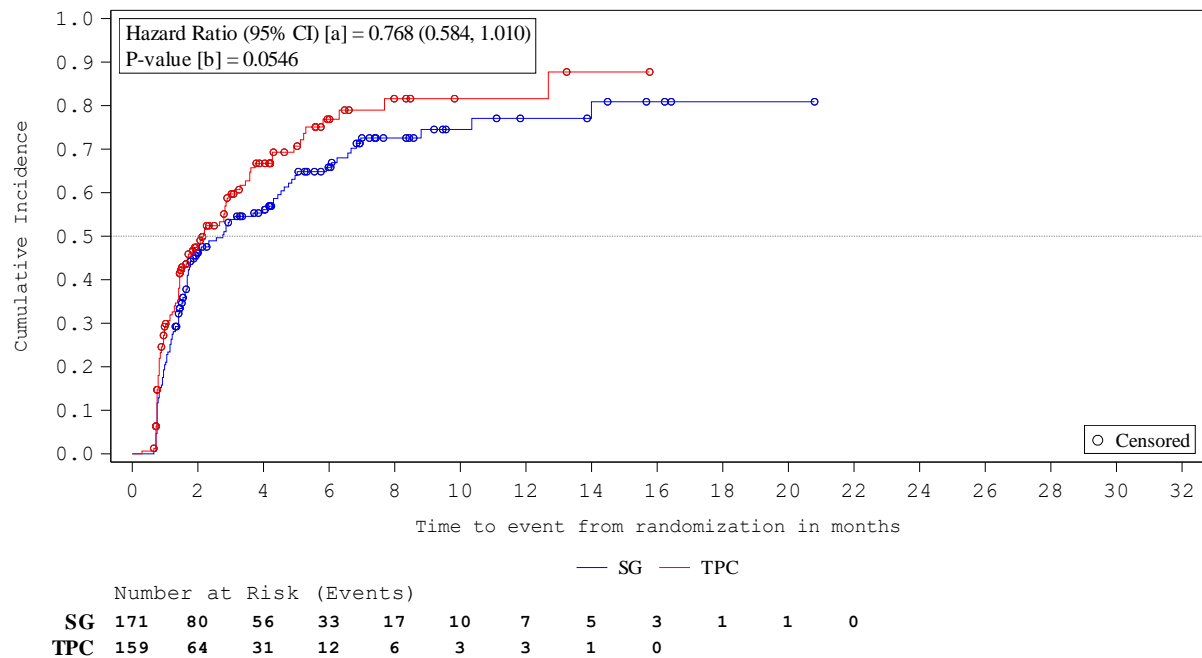
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Figure 15.15.4.1.3  
 Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Role Functioning by Treatment Group - Death Being Censored  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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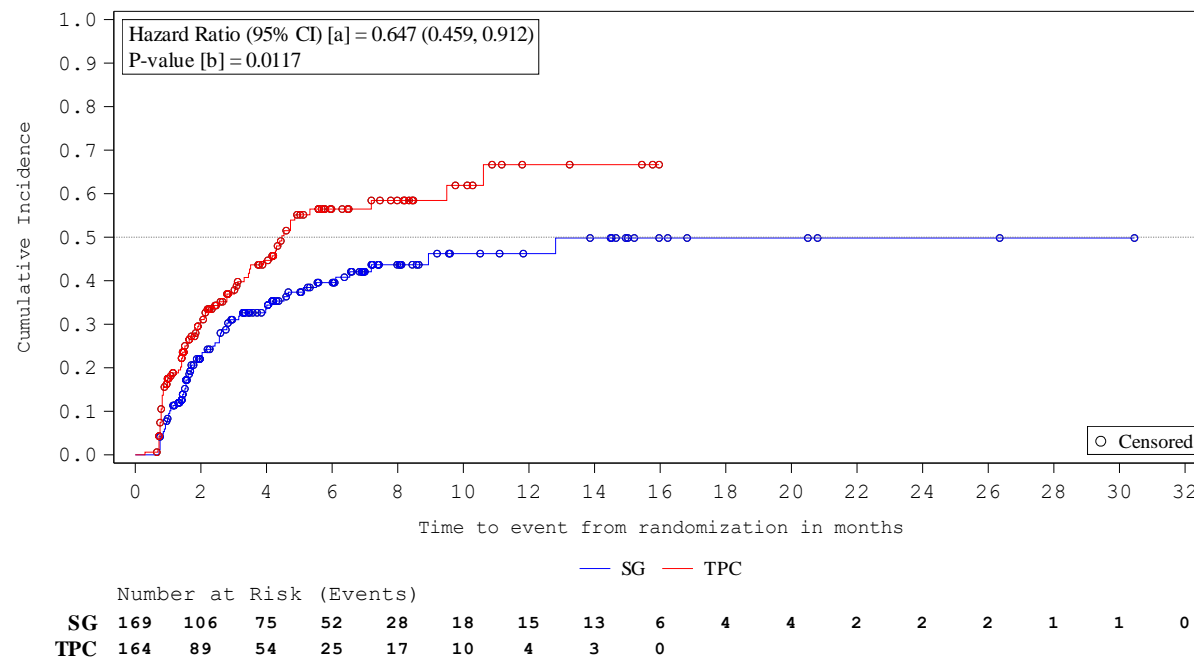
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Figure 15.15.4.1.4  
Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Emotional Functioning by Treatment Group - Death Being Censored  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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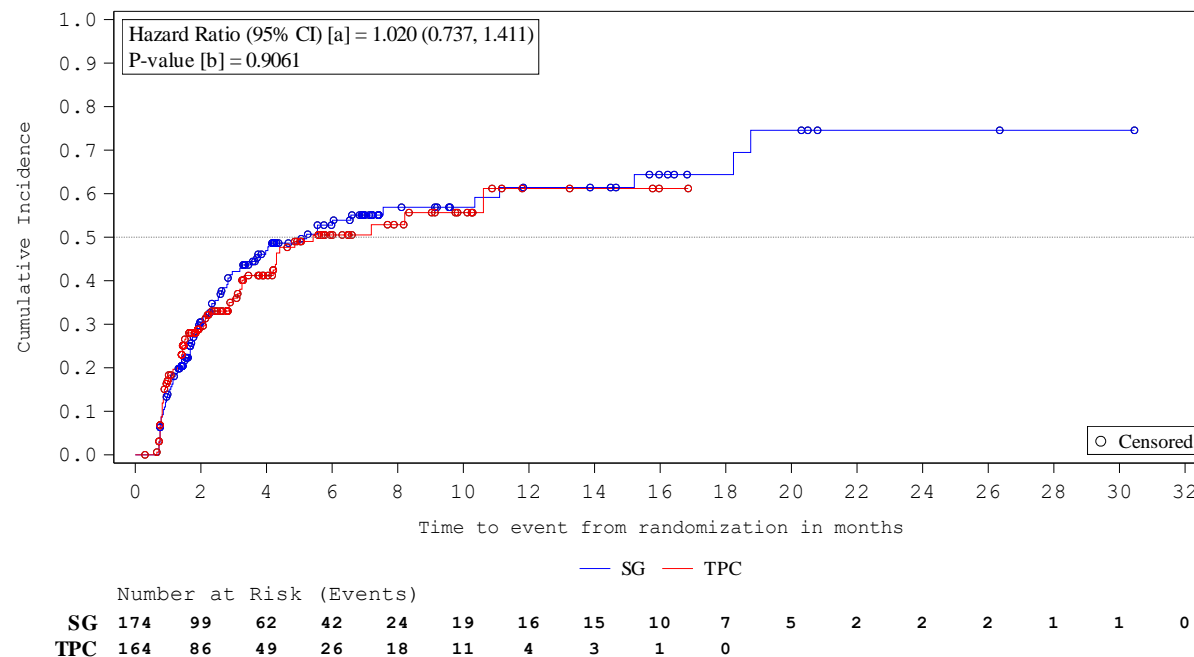
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Figure 15.15.4.1.5  
Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Cognitive Functioning by Treatment Group - Death Being Censored  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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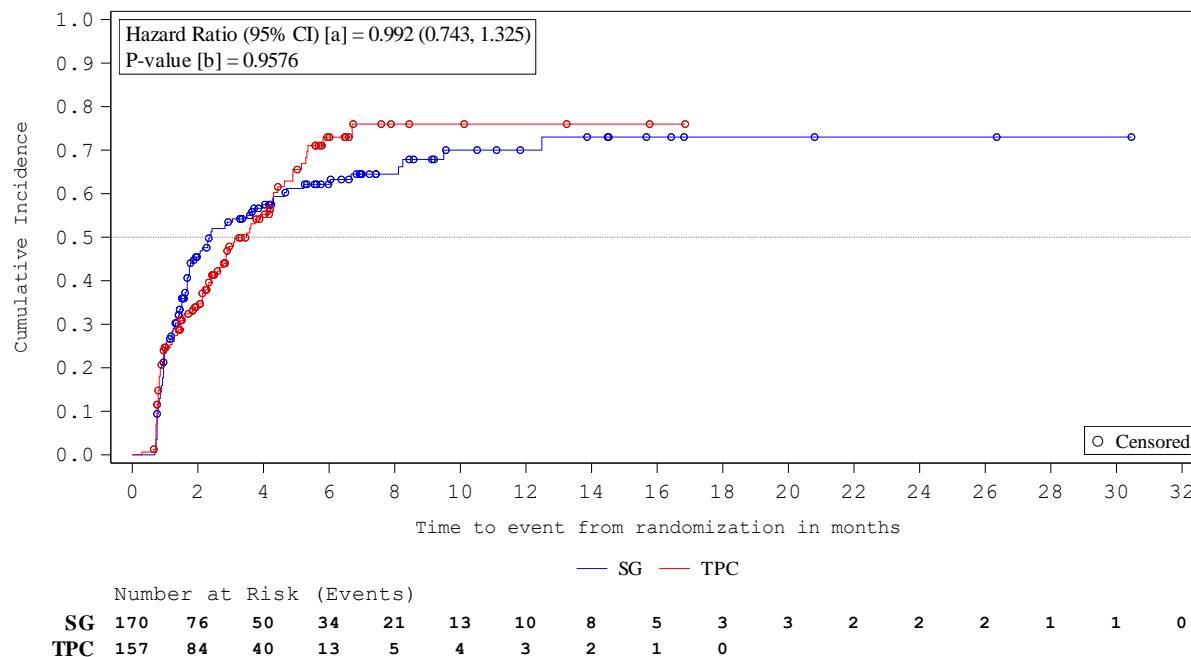
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Figure 15.15.4.1.6  
Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Social Functioning by Treatment Group - Death Being Censored  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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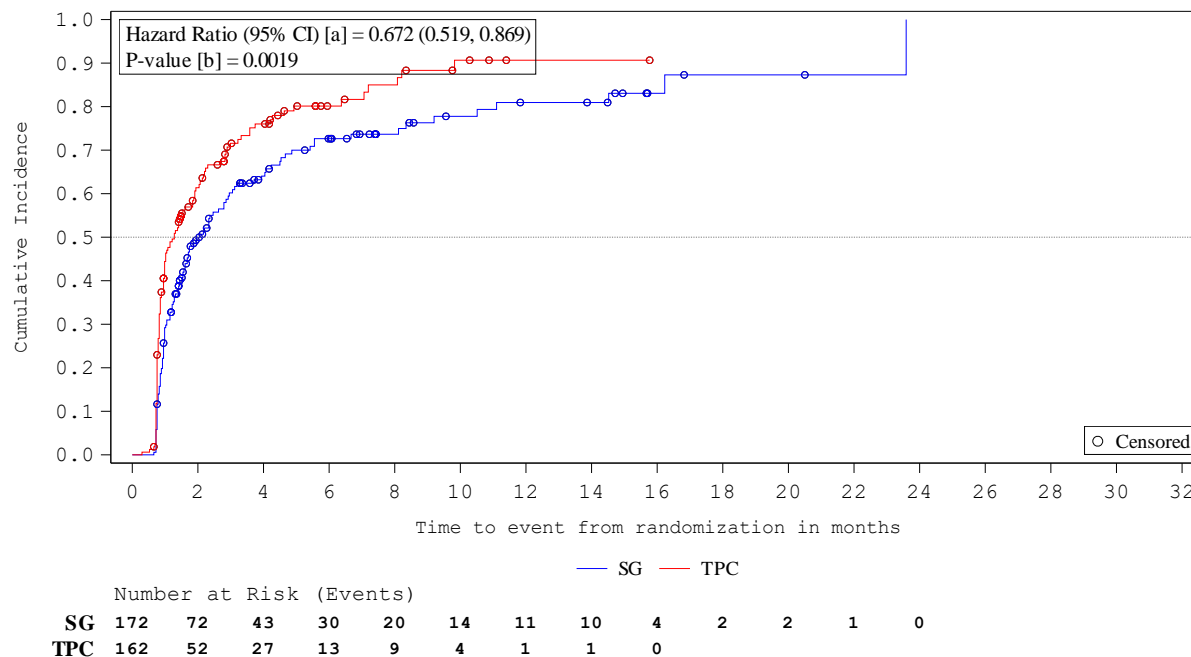
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Figure 15.15.4.1.7  
Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Fatigue by Treatment Group - Death Being Censored  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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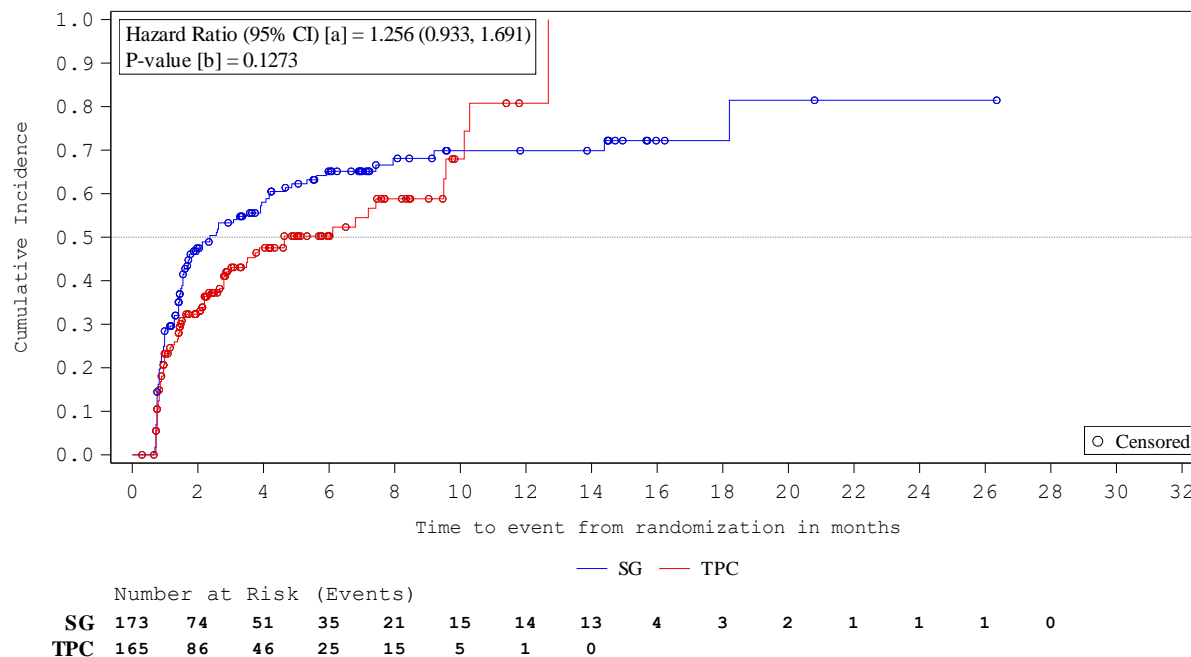
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Figure 15.15.4.1.8  
Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Nausea and Vomiting by Treatment Group - Death Being Censored  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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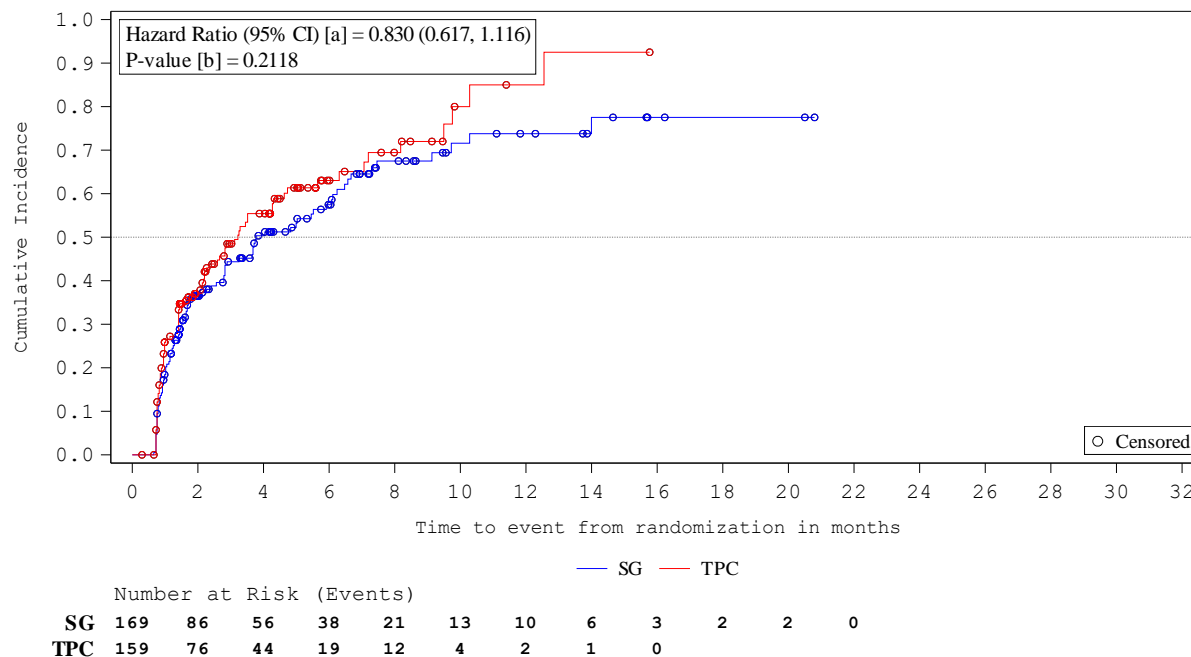
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Figure 15.15.4.1.9  
 Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Pain by Treatment Group - Death Being Censored  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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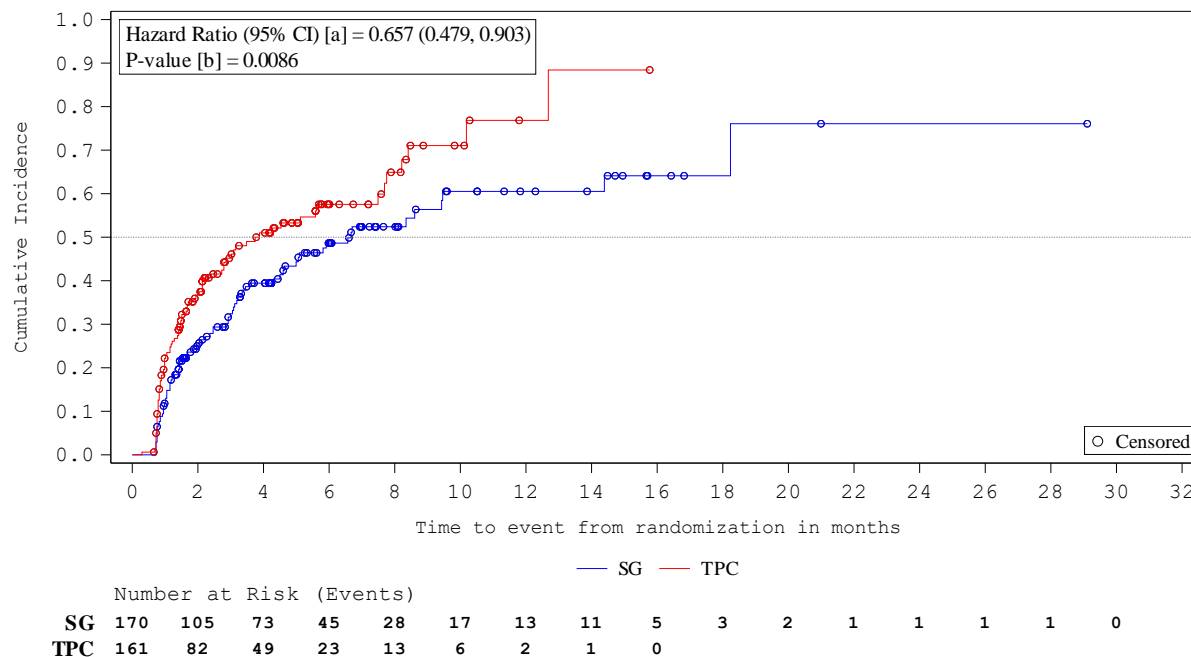
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Figure 15.15.4.1.10  
Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Dyspnea by Treatment Group - Death Being Censored  
EORTC QLQ-C30 Evaluatable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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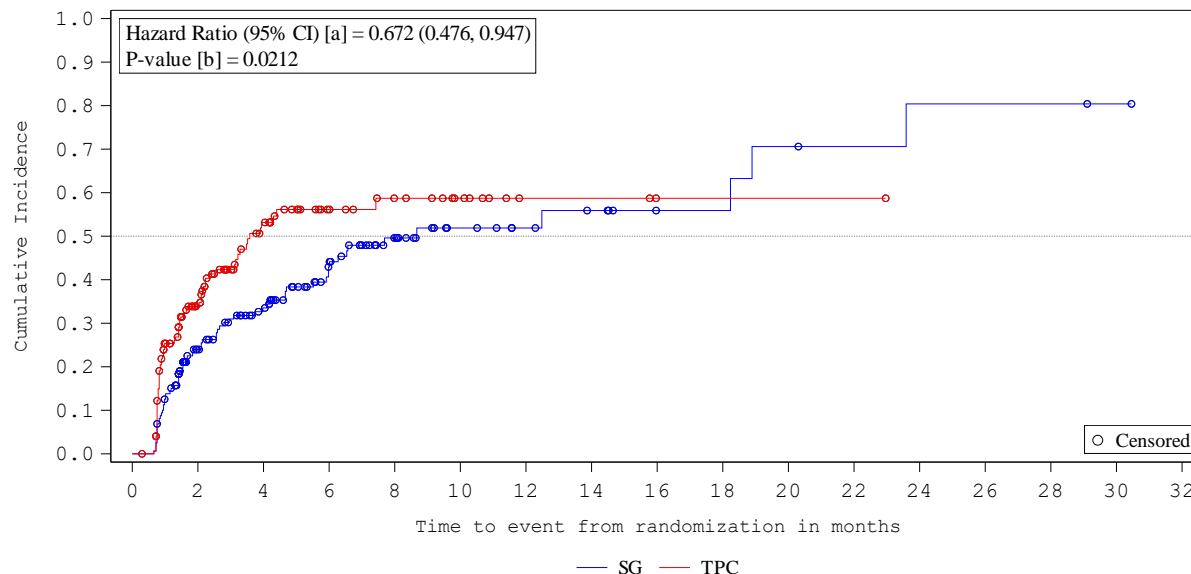
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Figure 15.15.4.1.11  
Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Insomnia by Treatment Group - Death Being Censored  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	160	101	76	48	29	17	13	10	6	6	4	3	2	2	2	1	0
<b>TPC</b>	150	75	37	20	14	9	3	3	1	1	1	1	0				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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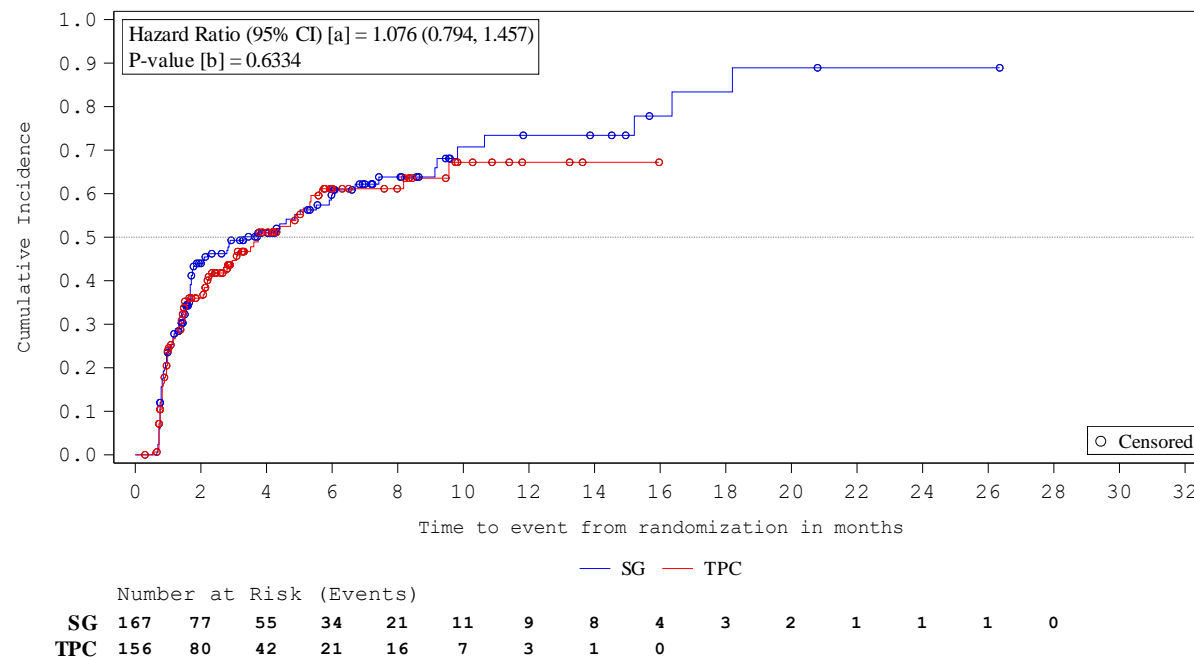
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Figure 15.15.4.1.12  
 Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Appetite Loss by Treatment Group - Death Being Censored  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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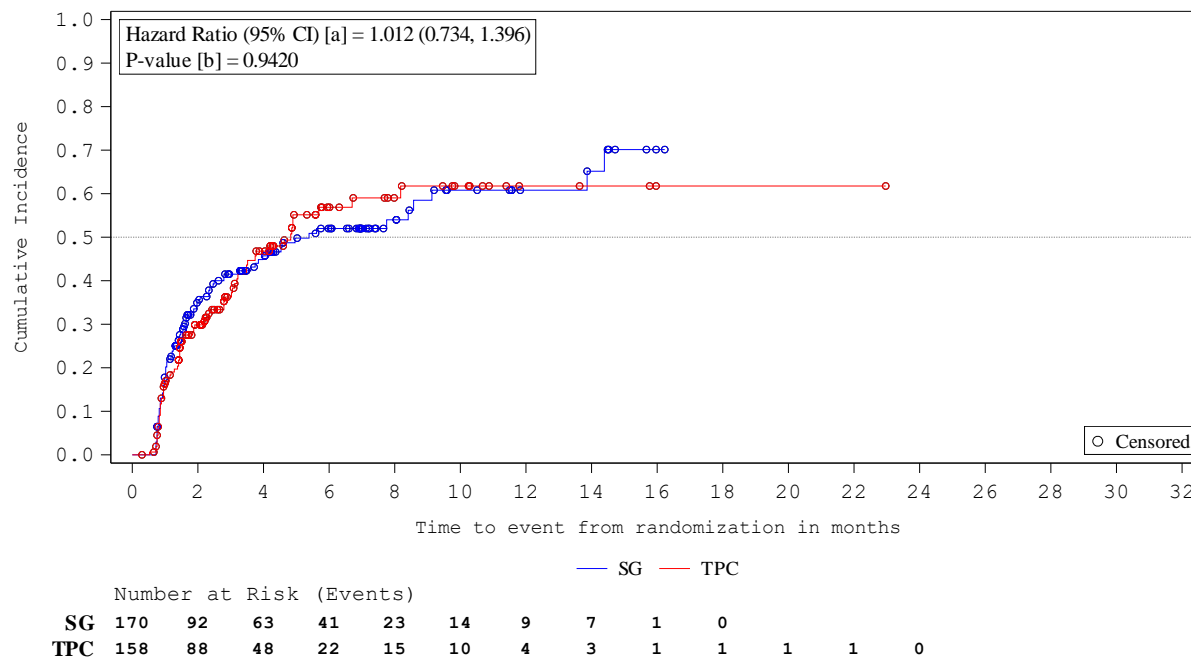
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Figure 15.15.4.1.13  
 Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Constipation by Treatment Group - Death Being Censored  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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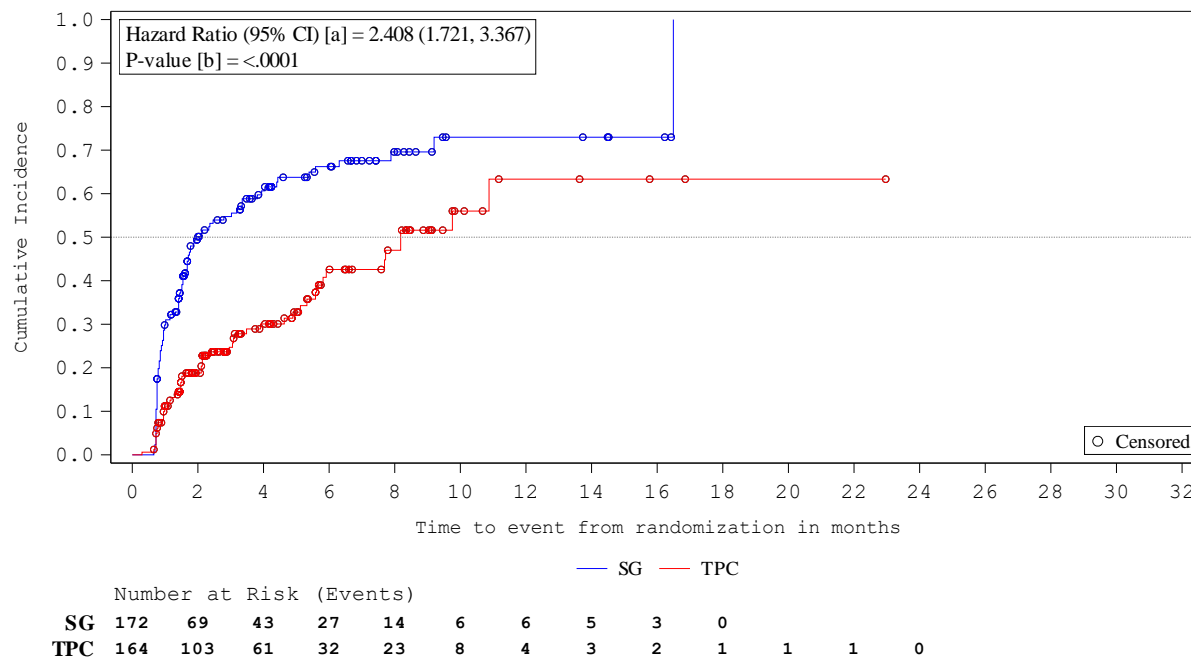
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Figure 15.15.4.1.14  
Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Diarrhea by Treatment Group - Death Being Censored  
EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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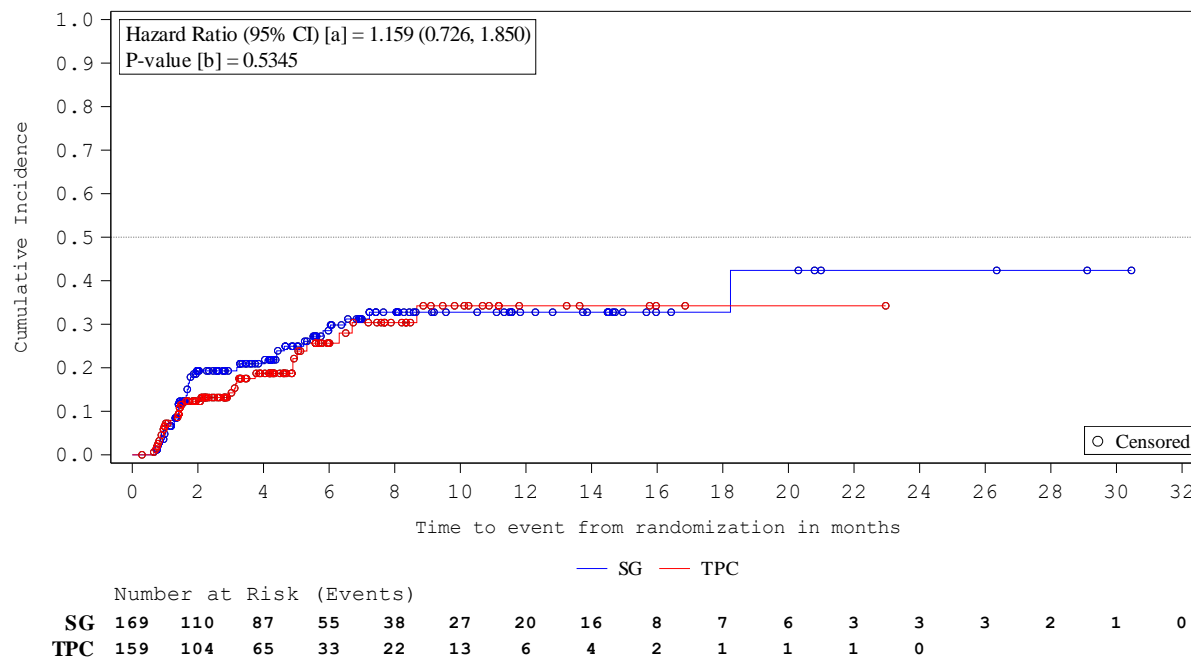
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Figure 15.15.4.1.15  
 Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Financial Difficulties by Treatment Group - Death Being Censored  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

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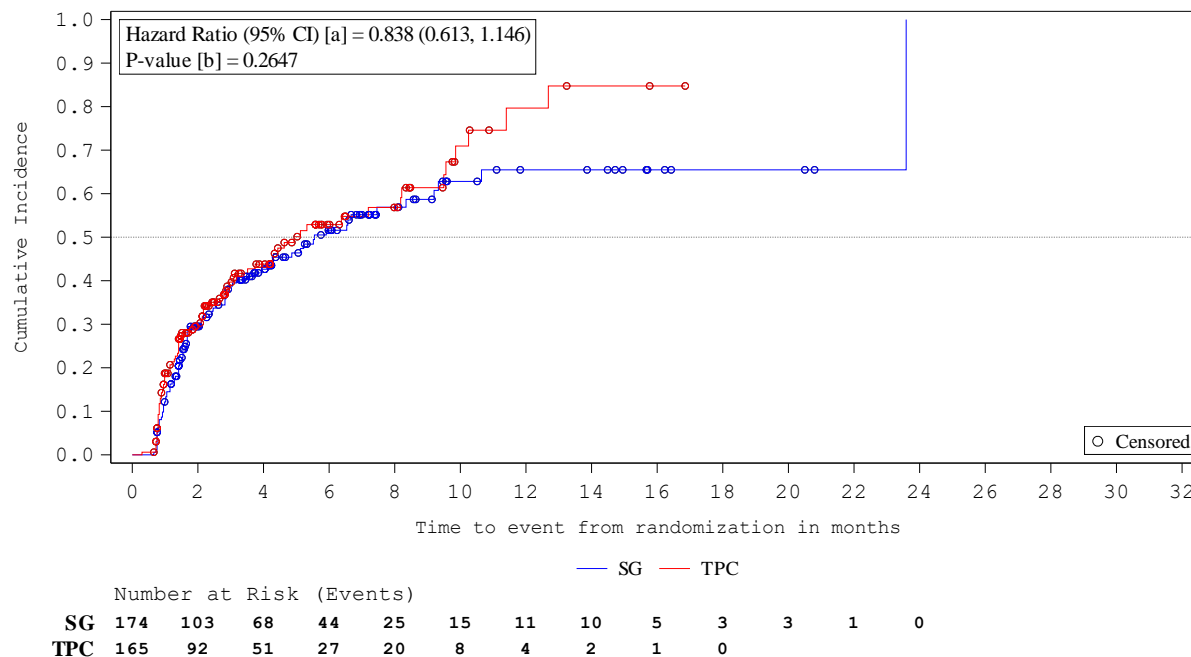
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Figure 15.15.4.1.16  
 Kaplan-Meier Plot of Time to First Worsening in EORTC QLQ-C30 Summary Score by Treatment Group - Death Being Censored  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] HR and 95% CI are estimated using a stratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate and the number of prior chemotherapy regimens for treatment of metastatic disease (two vs. three/four lines), visceral metastasis (Yes/No), and endocrine therapy in the metastatic setting for ≥6 months (Yes/No) as stratification factors in the model.

[b] P-value is estimated from stratified log-rank test stratified with randomization stratification factors.

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**Anhang 4-G 6.4.1: Subgruppenanalysen**

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

		EORTC QLQ-C30 Evaluable Population				
		Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization				
		Subjects with very poor baseline scores were excluded				
Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison	
Global Health Status / Two Lines QoL		Number of Patients	78	82		
		Patients With Events (%)	45 ( 57.7)	49 ( 59.8)		
		Patients Without Events (Censored) (%)	33 ( 42.3)	33 ( 40.2)		
		Median Time (months) [a]	4.4	2.9		
		95% CI	(2.9, 8.0)	(2.0, 4.6)		
		Log-rank p-value (Unstratified) [b]			0.2598	
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			0.793	
		95% CI for Hazard Ratio			(0.528, 1.191)	
		Three/Four Lines	Number of Patients	95	82	
			Patients With Events (%)	50 ( 52.6)	54 ( 65.9)	
			Patients Without Events (Censored) (%)	45 ( 47.4)	28 ( 34.1)	
			Median Time (months) [a]	5.6	2.4	
			95% CI	(2.0, 9.1)	(1.4, 3.7)	
		Log-rank p-value (Unstratified) [b]			0.0054	
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			0.578	
		95% CI for Hazard Ratio			(0.390, 0.857)	
		P-value of Subgroup*Treatment Interaction [d]			0.2648	
Physical Functioning	Two Lines	Number of Patients	78	83		
		Patients With Events (%)	38 ( 48.7)	41 ( 49.4)		
		Patients Without Events (Censored) (%)	40 ( 51.3)	42 ( 50.6)		
		Median Time (months) [a]	7.1	3.5		
		95% CI	(3.1, 13.1)	(2.2, 7.2)		
		Log-rank p-value (Unstratified) [b]			0.3237	
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			0.801	
		95% CI for Hazard Ratio			(0.514, 1.249)	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	Three/Four Lines	Number of Patients	96	81			
		Patients With Events (%)	50 ( 52.1)	46 ( 56.8)			
		Patients Without Events (Censored) (%)	46 ( 47.9)	35 ( 43.2)			
		Median Time (months) [a]	4.2	3.4			
		95% CI	(2.3, 7.4)	(1.9, 4.3)			
		Log-rank p-value (Unstratified) [b]			0.0547		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.676		
		95% CI for Hazard Ratio			(0.451, 1.014)		
		P-value of Subgroup*Treatment Interaction [d]			0.5108		
		Role Functioning	Two Lines	Number of Patients	77	80	
				Patients With Events (%)	48 ( 62.3)	53 ( 66.3)	
				Patients Without Events (Censored) (%)	29 ( 37.7)	27 ( 33.8)	
Median Time (months) [a]	4.2			2.7			
95% CI	(1.7, 6.1)			(1.4, 3.6)			
Log-rank p-value (Unstratified) [b]					0.1494		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)				0.752			
95% CI for Hazard Ratio				(0.507, 1.114)			
Three/Four Lines	Number of Patients		94	79			
	Patients With Events (%)		63 ( 67.0)	49 ( 62.0)			
	Patients Without Events (Censored) (%)		31 ( 33.0)	30 ( 38.0)			
	Median Time (months) [a]		2.1	1.9			
	95% CI	(1.6, 4.0)	(1.4, 3.4)				
	Log-rank p-value (Unstratified) [b]			0.3379			
	Unstratified Cox Regression Analysis [c]						
Hazard Ratio (Relative to TPC)			0.834				
95% CI for Hazard Ratio			(0.571, 1.216)				
P-value of Subgroup*Treatment Interaction [d]			0.7410				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

		EORTC QLQ-C30 Evaluable Population			
		Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization			
		Subjects with very poor baseline scores were excluded			
Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	Two Lines	Number of Patients	75	82	
		Patients With Events (%)	24 ( 32.0)	36 ( 43.9)	
		Patients Without Events (Censored) (%)	51 ( 68.0)	46 ( 56.1)	
		Median Time (months) [a]	NE	7.2	
		95% CI	(8.9, NE)	(3.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.0392
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.583	
	95% CI for Hazard Ratio			(0.346, 0.982)	
	Three/Four Lines	Number of Patients	94	82	
		Patients With Events (%)	37 ( 39.4)	39 ( 47.6)	
		Patients Without Events (Censored) (%)	57 ( 60.6)	43 ( 52.4)	
		Median Time (months) [a]	7.2	4.3	
		95% CI	(3.2, NE)	(3.0, 5.3)	
Log-rank p-value (Unstratified) [b]				0.1007	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.688		
95% CI for Hazard Ratio			(0.438, 1.080)		
		P-value of Subgroup*Treatment Interaction [d]			0.6115
Cognitive Functioning	Two Lines	Number of Patients	78	83	
		Patients With Events (%)	38 ( 48.7)	31 ( 37.3)	
		Patients Without Events (Censored) (%)	40 ( 51.3)	52 ( 62.7)	
		Median Time (months) [a]	5.6	10.6	
		95% CI	(2.8, NE)	(4.4, NE)	
		Log-rank p-value (Unstratified) [b]			0.3834
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.233
95% CI for Hazard Ratio			(0.767, 1.984)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	Three/Four Lines	Number of Patients	96	81			
		Patients With Events (%)	48 ( 50.0)	36 ( 44.4)			
		Patients Without Events (Censored) (%)	48 ( 50.0)	45 ( 55.6)			
		Median Time (months) [a]	4.1	4.3			
		95% CI	(2.6, 11.1)	(2.9, 5.4)			
		Log-rank p-value (Unstratified) [b]			0.5360		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.871		
		95% CI for Hazard Ratio			(0.561, 1.352)		
		P-value of Subgroup*Treatment Interaction [d]			0.3568		
		Social Functioning	Two Lines	Number of Patients	77	81	
				Patients With Events (%)	45 ( 58.4)	46 ( 56.8)	
				Patients Without Events (Censored) (%)	32 ( 41.6)	35 ( 43.2)	
Median Time (months) [a]	3.7			3.0			
95% CI	(1.7, 8.2)			(2.2, 4.2)			
Log-rank p-value (Unstratified) [b]					0.6523		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)				0.910			
95% CI for Hazard Ratio				(0.601, 1.377)			
Three/Four Lines	Number of Patients		93	76			
	Patients With Events (%)		56 ( 60.2)	42 ( 55.3)			
	Patients Without Events (Censored) (%)		37 ( 39.8)	34 ( 44.7)			
	Median Time (months) [a]		2.0	4.3			
	95% CI	(1.7, 3.6)	(2.4, 4.9)				
	Log-rank p-value (Unstratified) [b]			0.7735			
	Unstratified Cox Regression Analysis [c]						
Hazard Ratio (Relative to TPC)			1.060				
95% CI for Hazard Ratio			(0.709, 1.583)				
P-value of Subgroup*Treatment Interaction [d]			0.6738				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

EORTC QLQ-C30 Evaluable Population					
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization					
Subjects with very poor baseline scores were excluded					
Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	Two Lines	Number of Patients	78	83	
		Patients With Events (%)	53 ( 67.9)	62 ( 74.7)	
		Patients Without Events (Censored) (%)	25 ( 32.1)	21 ( 25.3)	
		Median Time (months) [a]	2.9	1.4	
		95% CI	(1.7, 4.1)	(1.0, 2.1)	
		Log-rank p-value (Unstratified) [b]			0.0225
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.654	
	95% CI for Hazard Ratio			(0.451, 0.950)	
	Three/Four Lines	Number of Patients	94	79	
		Patients With Events (%)	68 ( 72.3)	62 ( 78.5)	
		Patients Without Events (Censored) (%)	26 ( 27.7)	17 ( 21.5)	
		Median Time (months) [a]	1.6	1.1	
		95% CI	(1.3, 2.2)	(0.9, 1.9)	
Log-rank p-value (Unstratified) [b]				0.0592	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.720		
95% CI for Hazard Ratio			(0.508, 1.021)		
		P-value of Subgroup*Treatment Interaction [d]			0.7550
Nausea and Vomiting	Two Lines	Number of Patients	77	83	
		Patients With Events (%)	47 ( 61.0)	40 ( 48.2)	
		Patients Without Events (Censored) (%)	30 ( 39.0)	43 ( 51.8)	
		Median Time (months) [a]	3.2	7.2	
		95% CI	(1.5, 5.9)	(2.7, 10.3)	
	Log-rank p-value (Unstratified) [b]			0.4538	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.174	
	95% CI for Hazard Ratio			(0.767, 1.797)	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	Three/Four Lines	Number of Patients	96	82	
		Patients With Events (%)	59 ( 61.5)	37 ( 45.1)	
		Patients Without Events (Censored) (%)	37 ( 38.5)	45 ( 54.9)	
		Median Time (months) [a]	1.9	3.9	
		95% CI	(1.4, 3.9)	(2.8, 9.5)	
		Log-rank p-value (Unstratified) [b]			0.1389
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.360
		95% CI for Hazard Ratio			(0.899, 2.057)
		P-value of Subgroup*Treatment Interaction [d]			0.7490
Pain	Two Lines	Number of Patients	75	83	
		Patients With Events (%)	47 ( 62.7)	51 ( 61.4)	
		Patients Without Events (Censored) (%)	28 ( 37.3)	32 ( 38.6)	
		Median Time (months) [a]	3.7	3.2	
		95% CI	(2.3, 6.2)	(1.9, 4.6)	
		Log-rank p-value (Unstratified) [b]			0.4668
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.864
		95% CI for Hazard Ratio			(0.580, 1.286)
	Three/Four Lines	Number of Patients	94	76	
		Patients With Events (%)	48 ( 51.1)	39 ( 51.3)	
		Patients Without Events (Censored) (%)	46 ( 48.9)	37 ( 48.7)	
		Median Time (months) [a]	3.8	3.3	
		95% CI	(2.6, 6.6)	(2.1, 7.1)	
		Log-rank p-value (Unstratified) [b]			0.3417
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.815
		95% CI for Hazard Ratio			(0.531, 1.249)
		P-value of Subgroup*Treatment Interaction [d]			0.7771

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

EORTC QLQ-C30 Evaluable Population					
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization					
Subjects with very poor baseline scores were excluded					
Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	Two Lines	Number of Patients	75	83	
		Patients With Events (%)	34 ( 45.3)	42 ( 50.6)	
		Patients Without Events (Censored) (%)	41 ( 54.7)	41 ( 49.4)	
		Median Time (months) [a]	8.3	5.6	
		95% CI	(3.1, NE)	(2.2, 10.2)	
		Log-rank p-value (Unstratified) [b]			0.2488
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.768	
	95% CI for Hazard Ratio			(0.488, 1.208)	
	Three/Four Lines	Number of Patients	95	78	
		Patients With Events (%)	44 ( 46.3)	42 ( 53.8)	
		Patients Without Events (Censored) (%)	51 ( 53.7)	36 ( 46.2)	
		Median Time (months) [a]	6.6	3.0	
		95% CI	(4.3, 14.4)	(1.9, 5.1)	
Log-rank p-value (Unstratified) [b]				0.0154	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.588		
95% CI for Hazard Ratio			(0.381, 0.910)		
		P-value of Subgroup*Treatment Interaction [d]			0.4504
Insomnia	Two Lines	Number of Patients	72	77	
		Patients With Events (%)	29 ( 40.3)	38 ( 49.4)	
		Patients Without Events (Censored) (%)	43 ( 59.7)	39 ( 50.6)	
		Median Time (months) [a]	12.5	3.6	
		95% CI	(6.3, 23.6)	(2.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.0399
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.604
95% CI for Hazard Ratio			(0.369, 0.987)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Data Cutoff Date: 01JUL2022

Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	Three/Four Lines	Number of Patients	88	73			
		Patients With Events (%)	39 ( 44.3)	31 ( 42.5)			
		Patients Without Events (Censored) (%)	49 ( 55.7)	42 ( 57.5)			
		Median Time (months) [a]	6.0	3.5			
		95% CI	(3.7, NE)	(2.1, NE)			
		Log-rank p-value (Unstratified) [b]			0.2059		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.736		
		95% CI for Hazard Ratio			(0.455, 1.190)		
		P-value of Subgroup*Treatment Interaction [d]			0.5671		
		Appetite Loss	Two Lines	Number of Patients	77	80	
				Patients With Events (%)	43 ( 55.8)	38 ( 47.5)	
				Patients Without Events (Censored) (%)	34 ( 44.2)	42 ( 52.5)	
Median Time (months) [a]	4.4			4.4			
95% CI	(2.1, 9.8)			(2.8, NE)			
Log-rank p-value (Unstratified) [b]					0.7400		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)				1.077			
95% CI for Hazard Ratio				(0.692, 1.676)			
Three/Four Lines	Number of Patients		90	76			
	Patients With Events (%)		54 ( 60.0)	40 ( 52.6)			
	Patients Without Events (Censored) (%)		36 ( 40.0)	36 ( 47.4)			
	Median Time (months) [a]		2.8	3.7			
	95% CI	(1.7, 5.9)	(1.5, 5.4)				
	Log-rank p-value (Unstratified) [b]			0.8670			
	Unstratified Cox Regression Analysis [c]						
Hazard Ratio (Relative to TPC)			1.035				
95% CI for Hazard Ratio			(0.686, 1.562)				
P-value of Subgroup*Treatment Interaction [d]			0.8766				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

EORTC QLQ-C30 Evaluable Population					
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization					
Subjects with very poor baseline scores were excluded					
Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	Two Lines	Number of Patients	77	82	
		Patients With Events (%)	35 ( 45.5)	36 ( 43.9)	
		Patients Without Events (Censored) (%)	42 ( 54.5)	46 ( 56.1)	
		Median Time (months) [a]	8.4	5.7	
		95% CI	(3.2, NE)	(3.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.9082
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.973	
	95% CI for Hazard Ratio			(0.611, 1.551)	
	Three/Four Lines	Number of Patients	93	76	
		Patients With Events (%)	48 ( 51.6)	34 ( 44.7)	
		Patients Without Events (Censored) (%)	45 ( 48.4)	42 ( 55.3)	
		Median Time (months) [a]	4.5	3.5	
		95% CI	(2.0, 14.4)	(2.8, NE)	
Log-rank p-value (Unstratified) [b]				0.8804	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.034		
95% CI for Hazard Ratio			(0.664, 1.610)		
		P-value of Subgroup*Treatment Interaction [d]			0.8993
Diarrhea	Two Lines	Number of Patients	77	82	
		Patients With Events (%)	42 ( 54.5)	30 ( 36.6)	
		Patients Without Events (Censored) (%)	35 ( 45.5)	52 ( 63.4)	
		Median Time (months) [a]	3.2	7.7	
		95% CI	(1.8, 16.5)	(5.6, NE)	
		Log-rank p-value (Unstratified) [b]			0.0248
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.696		
95% CI for Hazard Ratio			(1.061, 2.711)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	Three/Four Lines	Number of Patients	95	82			
		Patients With Events (%)	62 ( 65.3)	25 ( 30.5)			
		Patients Without Events (Censored) (%)	33 ( 34.7)	57 ( 69.5)			
		Median Time (months) [a]	1.6	9.8			
		95% CI	(1.4, 3.0)	(5.3, NE)			
		Log-rank p-value (Unstratified) [b]			<.0001		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			3.018		
		95% CI for Hazard Ratio			(1.889, 4.823)		
		P-value of Subgroup*Treatment Interaction [d]			0.1036		
		Financial Difficulties Two Lines		Number of Patients	77	81	
				Patients With Events (%)	25 ( 32.5)	17 ( 21.0)	
				Patients Without Events (Censored) (%)	52 ( 67.5)	64 ( 79.0)	
Median Time (months) [a]	NE			NE			
95% CI	(6.0, NE)			(8.7, NE)			
Log-rank p-value (Unstratified) [b]					0.2975		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.385		
95% CI for Hazard Ratio					(0.747, 2.567)		
Three/Four Lines				Number of Patients	92	78	
				Patients With Events (%)	18 ( 19.6)	14 ( 17.9)	
				Patients Without Events (Censored) (%)	74 ( 80.4)	64 ( 82.1)	
				Median Time (months) [a]	NE	NE	
		95% CI	(18.2, NE)	(NE, NE)			
		Log-rank p-value (Unstratified) [b]			0.7399		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.887		
		95% CI for Hazard Ratio			(0.436, 1.805)		
		P-value of Subgroup*Treatment Interaction [d]			0.3495		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.1  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Number of Prior Chemotherapy Regimens in Metastatic Setting

EORTC QLQ-C30 Evaluable Population					
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization					
Subjects with very poor baseline scores were excluded					
Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Summary Score	Two Lines	Number of Patients	78	83	
		Patients With Events (%)	37 ( 47.4)	40 ( 48.2)	
		Patients Without Events (Censored) (%)	41 ( 52.6)	43 ( 51.8)	
		Median Time (months) [a]	6.5	7.2	
		95% CI	(4.2, 23.6)	(3.0, 11.4)	
		Log-rank p-value (Unstratified) [b]			0.5161
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.862	
	95% CI for Hazard Ratio			(0.549, 1.353)	
	Three/Four Lines	Number of Patients	96	82	
		Patients With Events (%)	48 ( 50.0)	39 ( 47.6)	
		Patients Without Events (Censored) (%)	48 ( 50.0)	43 ( 52.4)	
		Median Time (months) [a]	4.9	4.4	
		95% CI	(2.8, 9.3)	(2.8, 8.2)	
Log-rank p-value (Unstratified) [b]				0.4053	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.835		
95% CI for Hazard Ratio			(0.544, 1.281)		
		P-value of Subgroup*Treatment Interaction [d]			0.9004

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Global Health Status / Yes QoL		Number of Patients	165	157			
		Patients With Events (%)	92 ( 55.8)	99 ( 63.1)			
		Patients Without Events (Censored) (%)	73 ( 44.2)	58 ( 36.9)			
		Median Time (months) [a]	4.4	2.6			
		95% CI	(2.9, 6.6)	(1.9, 3.5)			
		Log-rank p-value (Unstratified) [b]			0.0065		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.675		
		95% CI for Hazard Ratio			(0.506, 0.899)		
			No	Number of Patients	8	7	
				Patients With Events (%)	3 ( 37.5)	4 ( 57.1)	
				Patients Without Events (Censored) (%)	5 ( 62.5)	3 ( 42.9)	
				Median Time (months) [a]	NE	2.6	
				95% CI	(0.8, NE)	(0.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.4726		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.584		
		95% CI for Hazard Ratio			(0.130, 2.621)		
		P-value of Subgroup*Treatment Interaction [d]			0.8406		
Physical Functioning	Yes	Number of Patients	166	157			
		Patients With Events (%)	86 ( 51.8)	84 ( 53.5)			
		Patients Without Events (Censored) (%)	80 ( 48.2)	73 ( 46.5)			
		Median Time (months) [a]	5.1	3.4			
		95% CI	(3.0, 8.3)	(2.2, 4.6)			
		Log-rank p-value (Unstratified) [b]			0.0812		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.765		
		95% CI for Hazard Ratio			(0.565, 1.036)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Role Functioning	No	Number of Patients	8	7			
		Patients With Events (%)	2 ( 25.0)	3 ( 42.9)			
		Patients Without Events (Censored) (%)	6 ( 75.0)	4 ( 57.1)			
		Median Time (months) [a]	NE	3.5			
		95% CI	(1.6, NE)	(0.8, NE)			
		Log-rank p-value (Unstratified) [b]			0.1637		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.294		
		95% CI for Hazard Ratio			(0.048, 1.817)		
		P-value of Subgroup*Treatment Interaction [d]			0.4436		
		Role Functioning	Yes	Number of Patients	163	152	
				Patients With Events (%)	106 ( 65.0)	97 ( 63.8)	
				Patients Without Events (Censored) (%)	57 ( 35.0)	55 ( 36.2)	
Median Time (months) [a]	2.6			2.2			
95% CI	(1.7, 4.2)			(1.5, 3.0)			
Log-rank p-value (Unstratified) [b]					0.1218		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.805		
95% CI for Hazard Ratio					(0.610, 1.063)		
Role Functioning	No			Number of Patients	8	7	
				Patients With Events (%)	5 ( 62.5)	5 ( 71.4)	
				Patients Without Events (Censored) (%)	3 ( 37.5)	2 ( 28.6)	
				Median Time (months) [a]	4.9	1.4	
		95% CI	(0.8, 7.0)	(0.7, NE)			
		Log-rank p-value (Unstratified) [b]			0.4977		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.659		
		95% CI for Hazard Ratio			(0.187, 2.319)		
		P-value of Subgroup*Treatment Interaction [d]			0.6409		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	Yes	Number of Patients	161	157	
		Patients With Events (%)	58 ( 36.0)	73 ( 46.5)	
		Patients Without Events (Censored) (%)	103 ( 64.0)	84 ( 53.5)	
		Median Time (months) [a]	NE	4.5	
		95% CI	(6.1, NE)	(3.3, 9.5)	
		Log-rank p-value (Unstratified) [b]			0.0069
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.624	
	95% CI for Hazard Ratio			(0.442, 0.883)	
	No	Number of Patients	8	7	
		Patients With Events (%)	3 ( 37.5)	2 ( 28.6)	
		Patients Without Events (Censored) (%)	5 ( 62.5)	5 ( 71.4)	
		Median Time (months) [a]	NE	NE	
		95% CI	(0.8, NE)	(0.8, NE)	
Log-rank p-value (Unstratified) [b]				0.7731	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.296		
95% CI for Hazard Ratio			(0.216, 7.767)		
		P-value of Subgroup*Treatment Interaction [d]		0.3873	
Cognitive Functioning	Yes	Number of Patients	166	157	
		Patients With Events (%)	82 ( 49.4)	63 ( 40.1)	
		Patients Without Events (Censored) (%)	84 ( 50.6)	94 ( 59.9)	
		Median Time (months) [a]	5.2	5.4	
		95% CI	(3.0, 10.3)	(4.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.7483
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.055		
95% CI for Hazard Ratio			(0.758, 1.470)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	No	Number of Patients	8	7			
		Patients With Events (%)	4 ( 50.0)	4 ( 57.1)			
		Patients Without Events (Censored) (%)	4 ( 50.0)	3 ( 42.9)			
		Median Time (months) [a]	NE	2.3			
		95% CI	(0.8, NE)	(0.7, NE)			
		Log-rank p-value (Unstratified) [b]			0.7322		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.789		
		95% CI for Hazard Ratio			(0.197, 3.162)		
		P-value of Subgroup*Treatment Interaction [d]			0.6968		
		Social Functioning	Yes	Number of Patients	162	150	
Patients With Events (%)	99 ( 61.1)			84 ( 56.0)			
Patients Without Events (Censored) (%)	63 ( 38.9)			66 ( 44.0)			
Median Time (months) [a]	2.3			3.5			
95% CI	(1.7, 3.7)			(2.4, 4.3)			
Log-rank p-value (Unstratified) [b]					0.8521		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.028		
95% CI for Hazard Ratio					(0.767, 1.378)		
	No			Number of Patients	8	7	
				Patients With Events (%)	2 ( 25.0)	4 ( 57.1)	
		Patients Without Events (Censored) (%)	6 ( 75.0)	3 ( 42.9)			
		Median Time (months) [a]	NE	2.6			
		95% CI	(0.8, NE)	(0.7, NE)			
		Log-rank p-value (Unstratified) [b]			0.1731		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.337		
		95% CI for Hazard Ratio			(0.061, 1.862)		
		P-value of Subgroup*Treatment Interaction [d]			0.1356		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	Yes	Number of Patients	164	155	
		Patients With Events (%)	115 ( 70.1)	118 ( 76.1)	
		Patients Without Events (Censored) (%)	49 ( 29.9)	37 ( 23.9)	
		Median Time (months) [a]	2.1	1.3	
		95% CI	(1.6, 2.9)	(1.0, 1.8)	
		Log-rank p-value (Unstratified) [b]			0.0042
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.689	
	95% CI for Hazard Ratio			(0.531, 0.894)	
	No	Number of Patients	8	7	
		Patients With Events (%)	6 ( 75.0)	6 ( 85.7)	
		Patients Without Events (Censored) (%)	2 ( 25.0)	1 ( 14.3)	
		Median Time (months) [a]	1.5	0.8	
		95% CI	(0.7, NE)	(0.7, 2.2)	
Log-rank p-value (Unstratified) [b]				0.3531	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.606		
95% CI for Hazard Ratio			(0.193, 1.903)		
		P-value of Subgroup*Treatment Interaction [d]		0.7655	
Nausea and Vomiting	Yes	Number of Patients	165	158	
		Patients With Events (%)	102 ( 61.8)	73 ( 46.2)	
		Patients Without Events (Censored) (%)	63 ( 38.2)	85 ( 53.8)	
		Median Time (months) [a]	2.4	6.1	
		95% CI	(1.6, 3.9)	(2.9, 9.6)	
		Log-rank p-value (Unstratified) [b]			0.0997
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.285
		95% CI for Hazard Ratio			(0.949, 1.740)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	No	Number of Patients	8	7			
		Patients With Events (%)	4 ( 50.0)	4 ( 57.1)			
		Patients Without Events (Censored) (%)	4 ( 50.0)	3 ( 42.9)			
		Median Time (months) [a]	2.6	3.5			
		95% CI	(0.8, NE)	(0.8, 3.5)			
		Log-rank p-value (Unstratified) [b]			0.6554		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.725		
		95% CI for Hazard Ratio			(0.173, 3.038)		
		P-value of Subgroup*Treatment Interaction [d]			0.4437		
		Pain	Yes	Number of Patients	162	152	
				Patients With Events (%)	90 ( 55.6)	87 ( 57.2)	
				Patients Without Events (Censored) (%)	72 ( 44.4)	65 ( 42.8)	
Median Time (months) [a]	4.0			3.1			
95% CI	(2.8, 6.1)			(2.2, 4.3)			
Log-rank p-value (Unstratified) [b]					0.0998		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)				0.781			
95% CI for Hazard Ratio				(0.580, 1.052)			
No	Number of Patients		7	7			
	Patients With Events (%)		5 ( 71.4)	3 ( 42.9)			
	Patients Without Events (Censored) (%)		2 ( 28.6)	4 ( 57.1)			
	Median Time (months) [a]		1.1	8.2			
	95% CI	(0.7, NE)	(0.8, NE)				
	Log-rank p-value (Unstratified) [b]			0.1165			
	Unstratified Cox Regression Analysis [c]						
Hazard Ratio (Relative to TPC)			3.295				
95% CI for Hazard Ratio			(0.636, 17.061)				
P-value of Subgroup*Treatment Interaction [d]			0.0540				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	Yes	Number of Patients	162	154	
		Patients With Events (%)	75 ( 46.3)	82 ( 53.2)	
		Patients Without Events (Censored) (%)	87 ( 53.7)	72 ( 46.8)	
		Median Time (months) [a]	6.6	3.7	
		95% CI	(4.5, 9.5)	(2.4, 7.5)	
		Log-rank p-value (Unstratified) [b]			0.0081
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.654	
	95% CI for Hazard Ratio			(0.476, 0.899)	
	No	Number of Patients	8	7	
		Patients With Events (%)	3 ( 37.5)	2 ( 28.6)	
		Patients Without Events (Censored) (%)	5 ( 62.5)	5 ( 71.4)	
		Median Time (months) [a]	NE	NE	
		95% CI	(0.8, NE)	(0.7, NE)	
Log-rank p-value (Unstratified) [b]				0.7910	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.257		
95% CI for Hazard Ratio			(0.210, 7.530)		
		P-value of Subgroup*Treatment Interaction [d]		0.4005	
Insomnia	Yes	Number of Patients	153	143	
		Patients With Events (%)	66 ( 43.1)	65 ( 45.5)	
		Patients Without Events (Censored) (%)	87 ( 56.9)	78 ( 54.5)	
		Median Time (months) [a]	7.7	3.9	
		95% CI	(5.9, 18.9)	(2.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.0333
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.689		
95% CI for Hazard Ratio			(0.487, 0.976)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	No	Number of Patients	7	7			
		Patients With Events (%)	2 ( 28.6)	4 ( 57.1)			
		Patients Without Events (Censored) (%)	5 ( 71.4)	3 ( 42.9)			
		Median Time (months) [a]	NE	2.6			
		95% CI	(1.1, NE)	(0.8, NE)			
		Log-rank p-value (Unstratified) [b]			0.2739		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.402		
		95% CI for Hazard Ratio			(0.073, 2.222)		
		P-value of Subgroup*Treatment Interaction [d]			0.4293		
		Appetite Loss	Yes	Number of Patients	159	150	
				Patients With Events (%)	93 ( 58.5)	73 ( 48.7)	
				Patients Without Events (Censored) (%)	66 ( 41.5)	77 ( 51.3)	
Median Time (months) [a]	3.3			4.4			
95% CI	(1.7, 5.9)			(2.2, 5.6)			
Log-rank p-value (Unstratified) [b]					0.5553		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.096		
95% CI for Hazard Ratio					(0.805, 1.493)		
	No			Number of Patients	8	6	
				Patients With Events (%)	4 ( 50.0)	5 ( 83.3)	
				Patients Without Events (Censored) (%)	4 ( 50.0)	1 ( 16.7)	
				Median Time (months) [a]	NE	3.5	
		95% CI	(0.7, NE)	(0.8, 8.2)			
		Log-rank p-value (Unstratified) [b]			0.6937		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.767		
		95% CI for Hazard Ratio			(0.191, 3.083)		
		P-value of Subgroup*Treatment Interaction [d]			0.4487		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	Yes	Number of Patients	162	151	
		Patients With Events (%)	80 ( 49.4)	68 ( 45.0)	
		Patients Without Events (Censored) (%)	82 ( 50.6)	83 ( 55.0)	
		Median Time (months) [a]	5.0	4.8	
		95% CI	(3.2, 9.1)	(3.2, 8.2)	
		Log-rank p-value (Unstratified) [b]			0.8607
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.029	
	95% CI for Hazard Ratio			(0.744, 1.424)	
	No	Number of Patients	8	7	
		Patients With Events (%)	3 ( 37.5)	2 ( 28.6)	
		Patients Without Events (Censored) (%)	5 ( 62.5)	5 ( 71.4)	
		Median Time (months) [a]	NE	NE	
		95% CI	(1.6, NE)	(0.8, NE)	
Log-rank p-value (Unstratified) [b]				0.9870	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.985		
95% CI for Hazard Ratio			(0.162, 6.002)		
		P-value of Subgroup*Treatment Interaction [d]		0.9586	
Diarrhea	Yes	Number of Patients	164	157	
		Patients With Events (%)	99 ( 60.4)	53 ( 33.8)	
		Patients Without Events (Censored) (%)	65 ( 39.6)	104 ( 66.2)	
		Median Time (months) [a]	2.1	8.2	
		95% CI	(1.7, 3.4)	(5.6, NE)	
		Log-rank p-value (Unstratified) [b]			<.0001
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			2.217		
95% CI for Hazard Ratio			(1.586, 3.097)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Financial Difficulties	No	Number of Patients	8	7			
		Patients With Events (%)	5 ( 62.5)	2 ( 28.6)			
		Patients Without Events (Censored) (%)	3 ( 37.5)	5 ( 71.4)			
		Median Time (months) [a]	1.3	8.2			
		95% CI	(0.7, NE)	(1.1, NE)			
		Log-rank p-value (Unstratified) [b]			0.0579		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			5.968		
		95% CI for Hazard Ratio			(0.693, 51.429)		
		P-value of Subgroup*Treatment Interaction [d]			0.4559		
		Financial Difficulties	Yes	Number of Patients	161	152	
				Patients With Events (%)	43 ( 26.7)	29 ( 19.1)	
				Patients Without Events (Censored) (%)	118 ( 73.3)	123 ( 80.9)	
Median Time (months) [a]	NE			NE			
95% CI	(18.2, NE)			(NE, NE)			
Log-rank p-value (Unstratified) [b]					0.4178		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.215		
95% CI for Hazard Ratio					(0.757, 1.950)		
Financial Difficulties	No			Number of Patients	8	7	
				Patients With Events (%)	0 ( 0.0)	2 ( 28.6)	
				Patients Without Events (Censored) (%)	8 ( 100.0)	5 ( 71.4)	
				Median Time (months) [a]	NE	NE	
		95% CI	(NE, NE)	(0.7, NE)			
		Log-rank p-value (Unstratified) [b]			0.1286		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			<0.001		
		95% CI for Hazard Ratio			(<0.001, NE)		
		P-value of Subgroup*Treatment Interaction [d]			0.9847		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.2  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Visceral metastasis  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Summary Score	Yes	Number of Patients	166	158	
		Patients With Events (%)	80 ( 48.2)	76 ( 48.1)	
		Patients Without Events (Censored) (%)	86 ( 51.8)	82 ( 51.9)	
		Median Time (months) [a]	5.9	4.9	
		95% CI	(3.9, 9.2)	(3.1, 9.5)	
		Log-rank p-value (Unstratified) [b]			0.2361
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.827	
	95% CI for Hazard Ratio			(0.603, 1.135)	
	No	Number of Patients	8	7	
		Patients With Events (%)	5 ( 62.5)	3 ( 42.9)	
		Patients Without Events (Censored) (%)	3 ( 37.5)	4 ( 57.1)	
		Median Time (months) [a]	2.1	8.2	
		95% CI	(0.8, NE)	(0.8, NE)	
Log-rank p-value (Unstratified) [b]				0.3190	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			2.214		
95% CI for Hazard Ratio			(0.429, 11.428)		
		P-value of Subgroup*Treatment Interaction [d]		0.2445	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison	
Global Health Status / Yes QoL		Number of Patients	158	145		
		Patients With Events (%)	90 ( 57.0)	88 ( 60.7)		
		Patients Without Events (Censored) (%)	68 ( 43.0)	57 ( 39.3)		
		Median Time (months) [a]	4.4	2.9		
		95% CI	(2.9, 6.6)	(2.1, 3.7)		
		Log-rank p-value (Unstratified) [b]			0.0585	
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			0.754	
		95% CI for Hazard Ratio			(0.561, 1.013)	
		No	Number of Patients	15	19	
			Patients With Events (%)	5 ( 33.3)	15 ( 78.9)	
			Patients Without Events (Censored) (%)	10 ( 66.7)	4 ( 21.1)	
			Median Time (months) [a]	8.1	1.5	
			95% CI	(1.7, NE)	(0.8, 4.2)	
		Log-rank p-value (Unstratified) [b]			0.0016	
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			0.194	
		95% CI for Hazard Ratio			(0.063, 0.599)	
		P-value of Subgroup*Treatment Interaction [d]			0.0287	
Physical Functioning Yes		Number of Patients	159	146		
		Patients With Events (%)	81 ( 50.9)	78 ( 53.4)		
		Patients Without Events (Censored) (%)	78 ( 49.1)	68 ( 46.6)		
		Median Time (months) [a]	5.9	3.4		
		95% CI	(3.0, 9.1)	(2.2, 4.9)		
		Log-rank p-value (Unstratified) [b]			0.0661	
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			0.747	
		95% CI for Hazard Ratio			(0.546, 1.023)	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Role Functioning	No	Number of Patients	15	18			
		Patients With Events (%)	7 ( 46.7)	9 ( 50.0)			
		Patients Without Events (Censored) (%)	8 ( 53.3)	9 ( 50.0)			
		Median Time (months) [a]	5.1	4.6			
		95% CI	(1.7, NE)	(1.4, NE)			
		Log-rank p-value (Unstratified) [b]			0.4177		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.665		
		95% CI for Hazard Ratio			(0.245, 1.801)		
		P-value of Subgroup*Treatment Interaction [d]			0.9292		
		Role Functioning	Yes	Number of Patients	156	141	
				Patients With Events (%)	101 ( 64.7)	89 ( 63.1)	
				Patients Without Events (Censored) (%)	55 ( 35.3)	52 ( 36.9)	
Median Time (months) [a]	2.8			2.2			
95% CI	(1.7, 4.3)			(1.5, 3.3)			
Log-rank p-value (Unstratified) [b]					0.1866		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)				0.826			
95% CI for Hazard Ratio				(0.620, 1.101)			
No	Number of Patients		15	18			
	Patients With Events (%)		10 ( 66.7)	13 ( 72.2)			
	Patients Without Events (Censored) (%)		5 ( 33.3)	5 ( 27.8)			
	Median Time (months) [a]		4.4	1.5			
	95% CI	(1.6, 4.9)	(0.8, 2.7)				
	Log-rank p-value (Unstratified) [b]			0.0692			
	Unstratified Cox Regression Analysis [c]						
Hazard Ratio (Relative to TPC)			0.469				
95% CI for Hazard Ratio			(0.201, 1.094)				
P-value of Subgroup*Treatment Interaction [d]			0.3970				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	Yes	Number of Patients	154	145	
		Patients With Events (%)	55 ( 35.7)	66 ( 45.5)	
		Patients Without Events (Censored) (%)	99 ( 64.3)	79 ( 54.5)	
		Median Time (months) [a]	NE	4.5	
		95% CI	(6.5, NE)	(3.4, 9.5)	
		Log-rank p-value (Unstratified) [b]			0.0196
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.655	
	95% CI for Hazard Ratio			(0.457, 0.938)	
	No	Number of Patients	15	19	
		Patients With Events (%)	6 ( 40.0)	9 ( 47.4)	
		Patients Without Events (Censored) (%)	9 ( 60.0)	10 ( 52.6)	
		Median Time (months) [a]	NE	4.7	
		95% CI	(1.7, NE)	(0.9, NE)	
Log-rank p-value (Unstratified) [b]				0.2384	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.537		
95% CI for Hazard Ratio			(0.187, 1.541)		
		P-value of Subgroup*Treatment Interaction [d]			0.7929
Cognitive Functioning	Yes	Number of Patients	159	145	
		Patients With Events (%)	78 ( 49.1)	61 ( 42.1)	
		Patients Without Events (Censored) (%)	81 ( 50.9)	84 ( 57.9)	
		Median Time (months) [a]	5.2	4.9	
		95% CI	(2.9, 11.1)	(3.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.9344
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.014		
95% CI for Hazard Ratio			(0.723, 1.422)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	No	Number of Patients	15	19	
		Patients With Events (%)	8 ( 53.3)	6 ( 31.6)	
		Patients Without Events (Censored) (%)	7 ( 46.7)	13 ( 68.4)	
		Median Time (months) [a]	5.0	5.4	
		95% CI	(1.7, NE)	(1.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.6914
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.240
		95% CI for Hazard Ratio			(0.425, 3.622)
		P-value of Subgroup*Treatment Interaction [d]			0.5869
Social Functioning	Yes	Number of Patients	155	140	
		Patients With Events (%)	93 ( 60.0)	78 ( 55.7)	
		Patients Without Events (Censored) (%)	62 ( 40.0)	62 ( 44.3)	
		Median Time (months) [a]	2.4	3.6	
		95% CI	(1.7, 4.3)	(2.6, 4.3)	
	Log-rank p-value (Unstratified) [b]			0.9645	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.007	
	95% CI for Hazard Ratio			(0.744, 1.363)	
	No	Number of Patients	15	17	
Patients With Events (%)		8 ( 53.3)	10 ( 58.8)		
Patients Without Events (Censored) (%)		7 ( 46.7)	7 ( 41.2)		
Median Time (months) [a]		2.3	2.7		
95% CI		(1.0, NE)	(1.3, NE)		
Log-rank p-value (Unstratified) [b]			0.5858		
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.773		
95% CI for Hazard Ratio			(0.303, 1.975)		
P-value of Subgroup*Treatment Interaction [d]			0.5636		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population					
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization					
Subjects with very poor baseline scores were excluded					
Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	Yes	Number of Patients	157	145	
		Patients With Events (%)	112 ( 71.3)	108 ( 74.5)	
		Patients Without Events (Censored) (%)	45 ( 28.7)	37 ( 25.5)	
		Median Time (months) [a]	2.1	1.3	
		95% CI	(1.5, 2.9)	(1.0, 1.9)	
		Log-rank p-value (Unstratified) [b]			0.0194
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.732	
	95% CI for Hazard Ratio			(0.560, 0.956)	
	No	Number of Patients	15	17	
		Patients With Events (%)	9 ( 60.0)	16 ( 94.1)	
		Patients Without Events (Censored) (%)	6 ( 40.0)	1 ( 5.9)	
		Median Time (months) [a]	1.7	1.0	
		95% CI	(1.0, NE)	(0.8, 2.7)	
Log-rank p-value (Unstratified) [b]				0.0173	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.375		
95% CI for Hazard Ratio			(0.159, 0.881)		
		P-value of Subgroup*Treatment Interaction [d]			0.1890
Nausea and Vomiting	Yes	Number of Patients	158	146	
		Patients With Events (%)	98 ( 62.0)	67 ( 45.9)	
		Patients Without Events (Censored) (%)	60 ( 38.0)	79 ( 54.1)	
		Median Time (months) [a]	2.1	6.8	
		95% CI	(1.5, 3.9)	(3.5, 9.6)	
		Log-rank p-value (Unstratified) [b]			0.0600
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.344		
95% CI for Hazard Ratio			(0.983, 1.837)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Pain	No	Number of Patients	15	19			
		Patients With Events (%)	8 ( 53.3)	10 ( 52.6)			
		Patients Without Events (Censored) (%)	7 ( 46.7)	9 ( 47.4)			
		Median Time (months) [a]	5.3	2.8			
		95% CI	(0.9, 18.2)	(1.4, 6.1)			
		Log-rank p-value (Unstratified) [b]			0.2905		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.591		
		95% CI for Hazard Ratio			(0.221, 1.585)		
		P-value of Subgroup*Treatment Interaction [d]			0.1850		
		Pain	Yes	Number of Patients	154	142	
				Patients With Events (%)	85 ( 55.2)	79 ( 55.6)	
				Patients Without Events (Censored) (%)	69 ( 44.8)	63 ( 44.4)	
Median Time (months) [a]	4.0			3.3			
95% CI	(2.8, 6.5)			(2.2, 5.7)			
Log-rank p-value (Unstratified) [b]					0.2120		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)				0.823			
95% CI for Hazard Ratio				(0.605, 1.121)			
No	Number of Patients		15	17			
	Patients With Events (%)		10 ( 66.7)	11 ( 64.7)			
	Patients Without Events (Censored) (%)		5 ( 33.3)	6 ( 35.3)			
	Median Time (months) [a]		2.8	2.7			
	95% CI	(1.0, 5.5)	(1.4, 4.7)				
	Log-rank p-value (Unstratified) [b]			0.8724			
	Unstratified Cox Regression Analysis [c]						
Hazard Ratio (Relative to TPC)			0.930				
95% CI for Hazard Ratio			(0.379, 2.278)				
P-value of Subgroup*Treatment Interaction [d]			0.5964				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population					
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization					
Subjects with very poor baseline scores were excluded					
Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	Yes	Number of Patients	156	144	
		Patients With Events (%)	74 ( 47.4)	76 ( 52.8)	
		Patients Without Events (Censored) (%)	82 ( 52.6)	68 ( 47.2)	
		Median Time (months) [a]	6.6	3.7	
		95% CI	(4.3, 9.4)	(2.4, 7.5)	
		Log-rank p-value (Unstratified) [b]			0.0272
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.697	
	95% CI for Hazard Ratio			(0.504, 0.963)	
	No	Number of Patients	14	17	
		Patients With Events (%)	4 ( 28.6)	8 ( 47.1)	
		Patients Without Events (Censored) (%)	10 ( 71.4)	9 ( 52.9)	
		Median Time (months) [a]	NE	8.4	
		95% CI	(1.7, NE)	(0.9, NE)	
Log-rank p-value (Unstratified) [b]				0.2423	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.496		
95% CI for Hazard Ratio			(0.148, 1.662)		
		P-value of Subgroup*Treatment Interaction [d]			0.3598
Insomnia	Yes	Number of Patients	145	132	
		Patients With Events (%)	61 ( 42.1)	60 ( 45.5)	
		Patients Without Events (Censored) (%)	84 ( 57.9)	72 ( 54.5)	
		Median Time (months) [a]	8.7	3.9	
		95% CI	(6.0, 23.6)	(3.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.0419
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.691		
95% CI for Hazard Ratio			(0.482, 0.992)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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IMMU-132-09

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	No	Number of Patients	15	18	
		Patients With Events (%)	7 ( 46.7)	9 ( 50.0)	
		Patients Without Events (Censored) (%)	8 ( 53.3)	9 ( 50.0)	
		Median Time (months) [a]	5.9	2.1	
		95% CI	(1.7, 18.9)	(0.9, NE)	
		Log-rank p-value (Unstratified) [b]			0.2009
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.507
		95% CI for Hazard Ratio			(0.175, 1.471)
		P-value of Subgroup*Treatment Interaction [d]			0.6854
Appetite Loss	Yes	Number of Patients	152	138	
		Patients With Events (%)	92 ( 60.5)	68 ( 49.3)	
		Patients Without Events (Censored) (%)	60 ( 39.5)	70 ( 50.7)	
		Median Time (months) [a]	2.8	4.4	
		95% CI	(1.7, 4.9)	(2.8, 5.6)	
	Log-rank p-value (Unstratified) [b]			0.2926	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.182	
	95% CI for Hazard Ratio			(0.863, 1.620)	
	No	Number of Patients	15	18	
Patients With Events (%)		5 ( 33.3)	10 ( 55.6)		
Patients Without Events (Censored) (%)		10 ( 66.7)	8 ( 44.4)		
Median Time (months) [a]		18.2	1.6		
95% CI		(5.0, 18.2)	(0.8, NE)		
Log-rank p-value (Unstratified) [b]			0.0390		
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.309		
95% CI for Hazard Ratio			(0.094, 1.014)		
P-value of Subgroup*Treatment Interaction [d]			0.0462		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	Yes	Number of Patients	155	140	
		Patients With Events (%)	76 ( 49.0)	62 ( 44.3)	
		Patients Without Events (Censored) (%)	79 ( 51.0)	78 ( 55.7)	
		Median Time (months) [a]	5.4	4.9	
		95% CI	(3.6, 9.1)	(3.2, 8.2)	
		Log-rank p-value (Unstratified) [b]			0.7087
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.066	
	95% CI for Hazard Ratio			(0.761, 1.491)	
	No	Number of Patients	15	18	
		Patients With Events (%)	7 ( 46.7)	8 ( 44.4)	
		Patients Without Events (Censored) (%)	8 ( 53.3)	10 ( 55.6)	
		Median Time (months) [a]	2.8	3.5	
		95% CI	(1.6, NE)	(0.8, NE)	
Log-rank p-value (Unstratified) [b]				0.6766	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.807		
95% CI for Hazard Ratio			(0.291, 2.242)		
		P-value of Subgroup*Treatment Interaction [d]			0.4314
Diarrhea	Yes	Number of Patients	157	145	
		Patients With Events (%)	99 ( 63.1)	50 ( 34.5)	
		Patients Without Events (Censored) (%)	58 ( 36.9)	95 ( 65.5)	
		Median Time (months) [a]	1.9	8.2	
		95% CI	(1.5, 3.2)	(5.8, NE)	
		Log-rank p-value (Unstratified) [b]			<.0001
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			2.383		
95% CI for Hazard Ratio			(1.694, 3.352)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	No	Number of Patients	15	19	
		Patients With Events (%)	5 ( 33.3)	5 ( 26.3)	
		Patients Without Events (Censored) (%)	10 ( 66.7)	14 ( 73.7)	
		Median Time (months) [a]	NE	7.7	
		95% CI	(1.4, NE)	(4.6, NE)	
		Log-rank p-value (Unstratified) [b]			0.7443
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.230
		95% CI for Hazard Ratio			(0.352, 4.292)
		P-value of Subgroup*Treatment Interaction [d]			0.2576
Financial Difficulties Yes		Number of Patients	154	140	
		Patients With Events (%)	39 ( 25.3)	28 ( 20.0)	
		Patients Without Events (Censored) (%)	115 ( 74.7)	112 ( 80.0)	
		Median Time (months) [a]	NE	NE	
		95% CI	(18.2, NE)	(8.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.7487
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.082
		95% CI for Hazard Ratio			(0.664, 1.763)
		P-value of Subgroup*Treatment Interaction [d]			0.6976
	No	Number of Patients	15	19	
		Patients With Events (%)	4 ( 26.7)	3 ( 15.8)	
		Patients Without Events (Censored) (%)	11 ( 73.3)	16 ( 84.2)	
		Median Time (months) [a]	NE	NE	
		95% CI	(1.6, NE)	(NE, NE)	
		Log-rank p-value (Unstratified) [b]			0.4942
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.677
		95% CI for Hazard Ratio			(0.375, 7.497)
		P-value of Subgroup*Treatment Interaction [d]			0.6976

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.3  
Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Endocrine therapy in the metastatic setting for at least 6 months

EORTC QLQ-C30 Evaluable Population  
Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Summary Score	Yes	Number of Patients	159	146	
		Patients With Events (%)	79 ( 49.7)	68 ( 46.6)	
		Patients Without Events (Censored) (%)	80 ( 50.3)	78 ( 53.4)	
		Median Time (months) [a]	5.6	5.3	
		95% CI	(3.7, 9.2)	(3.7, 9.5)	
		Log-rank p-value (Unstratified) [b]			0.6392
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.925	
	95% CI for Hazard Ratio			(0.668, 1.282)	
	No	Number of Patients	15	19	
		Patients With Events (%)	6 ( 40.0)	11 ( 57.9)	
		Patients Without Events (Censored) (%)	9 ( 60.0)	8 ( 42.1)	
		Median Time (months) [a]	5.1	1.5	
		95% CI	(1.7, NE)	(1.3, NE)	
Log-rank p-value (Unstratified) [b]				0.0789	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.419		
95% CI for Hazard Ratio			(0.151, 1.160)		
		P-value of Subgroup*Treatment Interaction [d]			0.1675

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Global Health Status / QoL	< 65 Years	Number of Patients	135	124			
		Patients With Events (%)	74 ( 54.8)	76 ( 61.3)			
		Patients Without Events (Censored) (%)	61 ( 45.2)	48 ( 38.7)			
		Median Time (months) [a]	5.4	2.7			
		95% CI	(3.0, 7.9)	(2.0, 3.7)			
		Log-rank p-value (Unstratified) [b]			0.0171		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.676		
		95% CI for Hazard Ratio			(0.488, 0.936)		
			> 65 Years	Number of Patients	38	40	
				Patients With Events (%)	21 ( 55.3)	27 ( 67.5)	
				Patients Without Events (Censored) (%)	17 ( 44.7)	13 ( 32.5)	
				Median Time (months) [a]	3.2	2.2	
		95% CI	(1.5, NE)	(1.4, 4.2)			
		Log-rank p-value (Unstratified) [b]			0.1284		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.646		
		95% CI for Hazard Ratio			(0.365, 1.144)		
		P-value of Subgroup*Treatment Interaction [d]			0.8062		
Physical Functioning	< 65 Years	Number of Patients	136	124			
		Patients With Events (%)	72 ( 52.9)	70 ( 56.5)			
		Patients Without Events (Censored) (%)	64 ( 47.1)	54 ( 43.5)			
		Median Time (months) [a]	5.1	2.8			
		95% CI	(3.0, 7.4)	(2.1, 3.7)			
		Log-rank p-value (Unstratified) [b]			0.0286		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.692		
		95% CI for Hazard Ratio			(0.496, 0.966)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Role Functioning	≥ 65 Years	Number of Patients	38	40			
		Patients With Events (%)	16 ( 42.1)	17 ( 42.5)			
		Patients Without Events (Censored) (%)	22 ( 57.9)	23 ( 57.5)			
		Median Time (months) [a]	NE	6.0			
		95% CI	(2.1, NE)	(2.2, NE)			
		Log-rank p-value (Unstratified) [b]			0.7530		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.896		
		95% CI for Hazard Ratio			(0.452, 1.776)		
		P-value of Subgroup*Treatment Interaction [d]			0.6138		
		Role Functioning	< 65 Years	Number of Patients	134	122	
				Patients With Events (%)	88 ( 65.7)	76 ( 62.3)	
				Patients Without Events (Censored) (%)	46 ( 34.3)	46 ( 37.7)	
Median Time (months) [a]	2.6			2.0			
95% CI	(1.7, 4.2)			(1.4, 3.1)			
Log-rank p-value (Unstratified) [b]					0.1840		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.812		
95% CI for Hazard Ratio					(0.595, 1.109)		
Role Functioning	≥ 65 Years			Number of Patients	37	37	
				Patients With Events (%)	23 ( 62.2)	26 ( 70.3)	
				Patients Without Events (Censored) (%)	14 ( 37.8)	11 ( 29.7)	
				Median Time (months) [a]	2.8	2.2	
		95% CI	(1.5, 7.0)	(1.5, 4.9)			
		Log-rank p-value (Unstratified) [b]			0.2986		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.744		
		95% CI for Hazard Ratio			(0.423, 1.307)		
		P-value of Subgroup*Treatment Interaction [d]			0.7627		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	< 65 Years	Number of Patients	132	124	
		Patients With Events (%)	46 ( 34.8)	60 ( 48.4)	
		Patients Without Events (Censored) (%)	86 ( 65.2)	64 ( 51.6)	
		Median Time (months) [a]	12.8	4.3	
		95% CI	(6.1, NE)	(3.1, 4.9)	
		Log-rank p-value (Unstratified) [b]			0.0030
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.562	
	95% CI for Hazard Ratio			(0.381, 0.827)	
	> 65 Years	Number of Patients	37	40	
		Patients With Events (%)	15 ( 40.5)	15 ( 37.5)	
		Patients Without Events (Censored) (%)	22 ( 59.5)	25 ( 62.5)	
		Median Time (months) [a]	NE	10.6	
		95% CI	(2.6, NE)	(2.2, NE)	
Log-rank p-value (Unstratified) [b]				0.8652	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.940		
95% CI for Hazard Ratio			(0.459, 1.924)		
		P-value of Subgroup*Treatment Interaction [d]		0.2173	
Cognitive Functioning	< 65 Years	Number of Patients	136	124	
		Patients With Events (%)	69 ( 50.7)	48 ( 38.7)	
		Patients Without Events (Censored) (%)	67 ( 49.3)	76 ( 61.3)	
		Median Time (months) [a]	4.1	7.2	
		95% CI	(2.8, 10.3)	(3.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.3960
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.173		
95% CI for Hazard Ratio			(0.810, 1.700)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	≥ 65 Years	Number of Patients	38	40			
		Patients With Events (%)	17 ( 44.7)	19 ( 47.5)			
		Patients Without Events (Censored) (%)	21 ( 55.3)	21 ( 52.5)			
		Median Time (months) [a]	18.8	4.3			
		95% CI	(2.1, NE)	(1.5, NE)			
		Log-rank p-value (Unstratified) [b]			0.3657		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.737		
		95% CI for Hazard Ratio			(0.378, 1.436)		
		P-value of Subgroup*Treatment Interaction [d]			0.1812		
		Social Functioning	< 65 Years	Number of Patients	133	119	
				Patients With Events (%)	81 ( 60.9)	65 ( 54.6)	
				Patients Without Events (Censored) (%)	52 ( 39.1)	54 ( 45.4)	
Median Time (months) [a]	2.4			3.7			
95% CI	(1.7, 4.3)			(2.4, 4.6)			
Log-rank p-value (Unstratified) [b]					0.7963		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.044		
95% CI for Hazard Ratio					(0.751, 1.451)		
	≥ 65 Years			Number of Patients	37	38	
				Patients With Events (%)	20 ( 54.1)	23 ( 60.5)	
				Patients Without Events (Censored) (%)	17 ( 45.9)	15 ( 39.5)	
				Median Time (months) [a]	2.1	3.0	
		95% CI	(1.4, NE)	(2.1, 4.2)			
		Log-rank p-value (Unstratified) [b]			0.4388		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.789		
		95% CI for Hazard Ratio			(0.431, 1.444)		
		P-value of Subgroup*Treatment Interaction [d]			0.3532		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	< 65 Years	Number of Patients	134	122	
		Patients With Events (%)	94 ( 70.1)	96 ( 78.7)	
		Patients Without Events (Censored) (%)	40 ( 29.9)	26 ( 21.3)	
		Median Time (months) [a]	1.9	1.1	
		95% CI	(1.5, 2.8)	(0.9, 1.5)	
		Log-rank p-value (Unstratified) [b]			0.0031
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.655	
	95% CI for Hazard Ratio			(0.491, 0.873)	
	> 65 Years	Number of Patients	38	40	
		Patients With Events (%)	27 ( 71.1)	28 ( 70.0)	
		Patients Without Events (Censored) (%)	11 ( 28.9)	12 ( 30.0)	
		Median Time (months) [a]	2.2	1.9	
		95% CI	(0.9, 4.7)	(1.0, 2.8)	
Log-rank p-value (Unstratified) [b]				0.3366	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.769		
95% CI for Hazard Ratio			(0.446, 1.325)		
		P-value of Subgroup*Treatment Interaction [d]		0.6389	
Nausea and Vomiting	< 65 Years	Number of Patients	135	125	
		Patients With Events (%)	89 ( 65.9)	61 ( 48.8)	
		Patients Without Events (Censored) (%)	46 ( 34.1)	64 ( 51.2)	
		Median Time (months) [a]	1.9	4.6	
		95% CI	(1.5, 3.2)	(2.8, 7.2)	
		Log-rank p-value (Unstratified) [b]			0.0506
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.379
		95% CI for Hazard Ratio			(0.994, 1.914)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	≥ 65 Years	Number of Patients	38	40			
		Patients With Events (%)	17 ( 44.7)	16 ( 40.0)			
		Patients Without Events (Censored) (%)	21 ( 55.3)	24 ( 60.0)			
		Median Time (months) [a]	14.4	9.5			
		95% CI	(1.5, NE)	(1.6, 12.7)			
		Log-rank p-value (Unstratified) [b]			0.6725		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.862		
		95% CI for Hazard Ratio			(0.429, 1.732)		
		P-value of Subgroup*Treatment Interaction [d]			0.2572		
		Pain	< 65 Years	Number of Patients	132	119	
				Patients With Events (%)	75 ( 56.8)	63 ( 52.9)	
				Patients Without Events (Censored) (%)	57 ( 43.2)	56 ( 47.1)	
Median Time (months) [a]	3.7			3.5			
95% CI	(2.8, 6.2)			(2.7, 6.3)			
Log-rank p-value (Unstratified) [b]					0.5300		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)				0.898			
95% CI for Hazard Ratio				(0.640, 1.259)			
≥ 65 Years	Number of Patients		37	40			
	Patients With Events (%)		20 ( 54.1)	27 ( 67.5)			
	Patients Without Events (Censored) (%)		17 ( 45.9)	13 ( 32.5)			
	Median Time (months) [a]		5.0	2.2			
	95% CI	(1.2, NE)	(1.0, 3.2)				
	Log-rank p-value (Unstratified) [b]			0.1924			
	Unstratified Cox Regression Analysis [c]						
Hazard Ratio (Relative to TPC)			0.684				
95% CI for Hazard Ratio			(0.382, 1.223)				
P-value of Subgroup*Treatment Interaction [d]			0.4210				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	< 65 Years	Number of Patients	134	122	
		Patients With Events (%)	66 ( 49.3)	62 ( 50.8)	
		Patients Without Events (Censored) (%)	68 ( 50.7)	60 ( 49.2)	
		Median Time (months) [a]	5.8	3.7	
		95% CI	(3.4, 8.6)	(2.1, 7.5)	
		Log-rank p-value (Unstratified) [b]			0.1078
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.752	
	95% CI for Hazard Ratio			(0.529, 1.068)	
	> 65 Years	Number of Patients	36	39	
		Patients With Events (%)	12 ( 33.3)	22 ( 56.4)	
		Patients Without Events (Censored) (%)	24 ( 66.7)	17 ( 43.6)	
		Median Time (months) [a]	14.4	5.1	
		95% CI	(4.5, NE)	(1.9, 8.4)	
Log-rank p-value (Unstratified) [b]				0.0320	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.469		
95% CI for Hazard Ratio			(0.231, 0.953)		
		P-value of Subgroup*Treatment Interaction [d]		0.2548	
Insomnia	< 65 Years	Number of Patients	123	115	
		Patients With Events (%)	56 ( 45.5)	53 ( 46.1)	
		Patients Without Events (Censored) (%)	67 ( 54.5)	62 ( 53.9)	
		Median Time (months) [a]	6.6	3.9	
		95% CI	(4.7, 18.9)	(2.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.1115
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.736		
95% CI for Hazard Ratio			(0.502, 1.079)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	≥ 65 Years	Number of Patients	37	35			
		Patients With Events (%)	12 ( 32.4)	16 ( 45.7)			
		Patients Without Events (Censored) (%)	25 ( 67.6)	19 ( 54.3)			
		Median Time (months) [a]	23.6	3.2			
		95% CI	(4.7, NE)	(1.4, NE)			
		Log-rank p-value (Unstratified) [b]			0.0291		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.434		
		95% CI for Hazard Ratio			(0.200, 0.940)		
		P-value of Subgroup*Treatment Interaction [d]			0.1920		
		Appetite Loss	< 65 Years	Number of Patients	129	118	
				Patients With Events (%)	75 ( 58.1)	60 ( 50.8)	
				Patients Without Events (Censored) (%)	54 ( 41.9)	58 ( 49.2)	
Median Time (months) [a]	4.3			3.7			
95% CI	(1.7, 6.0)			(2.2, 5.4)			
Log-rank p-value (Unstratified) [b]					0.9526		
Unstratified Cox Regression Analysis [c]	Hazard Ratio (Relative to TPC)				0.990		
	95% CI for Hazard Ratio				(0.702, 1.395)		
	P-value of Subgroup*Treatment Interaction [d]				0.5420		
≥ 65 Years	Number of Patients		38	38			
	Patients With Events (%)		22 ( 57.9)	18 ( 47.4)			
	Patients Without Events (Censored) (%)		16 ( 42.1)	20 ( 52.6)			
	Median Time (months) [a]		2.1	3.6			
	95% CI	(1.2, NE)	(2.1, NE)				
	Log-rank p-value (Unstratified) [b]			0.4355			
	Unstratified Cox Regression Analysis [c]	Hazard Ratio (Relative to TPC)			1.279		
95% CI for Hazard Ratio				(0.685, 2.387)			
P-value of Subgroup*Treatment Interaction [d]				0.5420			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	< 65 Years	Number of Patients	134	119	
		Patients With Events (%)	66 ( 49.3)	58 ( 48.7)	
		Patients Without Events (Censored) (%)	68 ( 50.7)	61 ( 51.3)	
		Median Time (months) [a]	4.6	4.2	
		95% CI	(2.5, 8.6)	(3.0, 6.7)	
		Log-rank p-value (Unstratified) [b]			0.7487
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.944	
	95% CI for Hazard Ratio			(0.663, 1.345)	
	> 65 Years	Number of Patients	36	39	
		Patients With Events (%)	17 ( 47.2)	12 ( 30.8)	
		Patients Without Events (Censored) (%)	19 ( 52.8)	27 ( 69.2)	
		Median Time (months) [a]	14.4	NE	
		95% CI	(2.1, NE)	(3.2, NE)	
Log-rank p-value (Unstratified) [b]				0.4099	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.362		
95% CI for Hazard Ratio			(0.648, 2.863)		
		P-value of Subgroup*Treatment Interaction [d]		0.3768	
Diarrhea	< 65 Years	Number of Patients	134	124	
		Patients With Events (%)	82 ( 61.2)	44 ( 35.5)	
		Patients Without Events (Censored) (%)	52 ( 38.8)	80 ( 64.5)	
		Median Time (months) [a]	2.1	8.2	
		95% CI	(1.7, 3.4)	(5.6, NE)	
		Log-rank p-value (Unstratified) [b]			<.0001
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			2.115
		95% CI for Hazard Ratio			(1.465, 3.053)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	≥ 65 Years	Number of Patients	38	40			
		Patients With Events (%)	22 ( 57.9)	11 ( 27.5)			
		Patients Without Events (Censored) (%)	16 ( 42.1)	29 ( 72.5)			
		Median Time (months) [a]	1.5	10.9			
		95% CI	(1.0, NE)	(5.1, NE)			
		Log-rank p-value (Unstratified) [b]			0.0026		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			2.904		
		95% CI for Hazard Ratio			(1.400, 6.025)		
		P-value of Subgroup*Treatment Interaction [d]			0.4228		
		Financial Difficulties < 65 Years		Number of Patients	131	120	
				Patients With Events (%)	34 ( 26.0)	27 ( 22.5)	
				Patients Without Events (Censored) (%)	97 ( 74.0)	93 ( 77.5)	
Median Time (months) [a]	18.2			NE			
95% CI	(18.2, NE)			(6.7, NE)			
Log-rank p-value (Unstratified) [b]					0.8593		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.955		
95% CI for Hazard Ratio					(0.573, 1.591)		
	≥ 65 Years			Number of Patients	38	39	
				Patients With Events (%)	9 ( 23.7)	4 ( 10.3)	
				Patients Without Events (Censored) (%)	29 ( 76.3)	35 ( 89.7)	
				Median Time (months) [a]	NE	NE	
		95% CI	(7.2, NE)	(NE, NE)			
		Log-rank p-value (Unstratified) [b]			0.1746		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			2.205		
		95% CI for Hazard Ratio			(0.679, 7.164)		
		P-value of Subgroup*Treatment Interaction [d]			0.2625		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.4  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Age group  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Summary Score	< 65 Years	Number of Patients	136	125	
		Patients With Events (%)	66 ( 48.5)	59 ( 47.2)	
		Patients Without Events (Censored) (%)	70 ( 51.5)	66 ( 52.8)	
		Median Time (months) [a]	5.6	5.3	
		95% CI	(3.7, 8.3)	(3.1, 9.6)	
		Log-rank p-value (Unstratified) [b]			0.3887
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.857	
	95% CI for Hazard Ratio			(0.602, 1.220)	
	> 65 Years	Number of Patients	38	40	
		Patients With Events (%)	19 ( 50.0)	20 ( 50.0)	
		Patients Without Events (Censored) (%)	19 ( 50.0)	20 ( 50.0)	
		Median Time (months) [a]	4.9	4.9	
		95% CI	(2.1, 23.6)	(2.2, 12.7)	
Log-rank p-value (Unstratified) [b]				0.7328	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.895		
95% CI for Hazard Ratio			(0.473, 1.695)		
P-value of Subgroup*Treatment Interaction [d]					0.9723

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Global Health Status / QoL	White	Number of Patients	124	112			
		Patients With Events (%)	66 ( 53.2)	70 ( 62.5)			
		Patients Without Events (Censored) (%)	58 ( 46.8)	42 ( 37.5)			
		Median Time (months) [a]	5.4	2.6			
		95% CI	(3.2, 9.1)	(1.8, 3.9)			
		Log-rank p-value (Unstratified) [b]			0.0066		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.628		
		95% CI for Hazard Ratio			(0.447, 0.883)		
			Non-White	Number of Patients	11	15	
				Patients With Events (%)	5 ( 45.5)	11 ( 73.3)	
				Patients Without Events (Censored) (%)	6 ( 54.5)	4 ( 26.7)	
				Median Time (months) [a]	4.4	2.8	
				95% CI	(0.8, NE)	(1.3, 3.5)	
		Log-rank p-value (Unstratified) [b]			0.6470		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.781		
		95% CI for Hazard Ratio			(0.269, 2.264)		
		P-value of Subgroup*Treatment Interaction [d]			0.7755		
Physical Functioning	White	Number of Patients	125	112			
		Patients With Events (%)	70 ( 56.0)	55 ( 49.1)			
		Patients Without Events (Censored) (%)	55 ( 44.0)	57 ( 50.9)			
		Median Time (months) [a]	4.0	3.5			
		95% CI	(2.9, 6.7)	(2.2, 6.7)			
		Log-rank p-value (Unstratified) [b]			0.5936		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.908		
		95% CI for Hazard Ratio			(0.636, 1.296)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Role Functioning	Non-White	Number of Patients	11	15			
		Patients With Events (%)	3 ( 27.3)	9 ( 60.0)			
		Patients Without Events (Censored) (%)	8 ( 72.7)	6 ( 40.0)			
		Median Time (months) [a]	7.1	2.2			
		95% CI	(4.7, 12.5)	(1.0, NE)			
		Log-rank p-value (Unstratified) [b]			0.0161		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.181		
		95% CI for Hazard Ratio			(0.039, 0.854)		
		P-value of Subgroup*Treatment Interaction [d]			0.0995		
		Role Functioning	White	Number of Patients	122	108	
Patients With Events (%)	83 ( 68.0)			71 ( 65.7)			
Patients Without Events (Censored) (%)	39 ( 32.0)			37 ( 34.3)			
Median Time (months) [a]	2.8			1.7			
95% CI	(1.7, 4.6)			(1.4, 2.8)			
Log-rank p-value (Unstratified) [b]					0.0379		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.715		
95% CI for Hazard Ratio					(0.518, 0.987)		
Role Functioning	Non-White			Number of Patients	11	14	
				Patients With Events (%)	9 ( 81.8)	10 ( 71.4)	
		Patients Without Events (Censored) (%)	2 ( 18.2)	4 ( 28.6)			
		Median Time (months) [a]	1.2	1.5			
		95% CI	(0.8, 4.2)	(0.8, 3.0)			
		Log-rank p-value (Unstratified) [b]			0.8889		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.069		
		95% CI for Hazard Ratio			(0.419, 2.730)		
		P-value of Subgroup*Treatment Interaction [d]			0.3035		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	White	Number of Patients	120	111	
		Patients With Events (%)	42 ( 35.0)	47 ( 42.3)	
		Patients Without Events (Censored) (%)	78 ( 65.0)	64 ( 57.7)	
		Median Time (months) [a]	NE	4.7	
		95% CI	(5.5, NE)	(3.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.0581
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.671	
	95% CI for Hazard Ratio			(0.442, 1.018)	
	Non-White	Number of Patients	11	15	
		Patients With Events (%)	5 ( 45.5)	7 ( 46.7)	
		Patients Without Events (Censored) (%)	6 ( 54.5)	8 ( 53.3)	
		Median Time (months) [a]	6.5	2.8	
		95% CI	(0.9, NE)	(1.0, NE)	
Log-rank p-value (Unstratified) [b]				0.8875	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.921		
95% CI for Hazard Ratio			(0.292, 2.906)		
		P-value of Subgroup*Treatment Interaction [d]		0.6037	
Cognitive Functioning	White	Number of Patients	125	111	
		Patients With Events (%)	63 ( 50.4)	43 ( 38.7)	
		Patients Without Events (Censored) (%)	62 ( 49.6)	68 ( 61.3)	
		Median Time (months) [a]	5.0	5.4	
		95% CI	(2.9, 10.3)	(3.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.7243
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.072		
95% CI for Hazard Ratio			(0.726, 1.584)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Social Functioning	Non-White	Number of Patients	11	15			
		Patients With Events (%)	3 ( 27.3)	6 ( 40.0)			
		Patients Without Events (Censored) (%)	8 ( 72.7)	9 ( 60.0)			
		Median Time (months) [a]	NE	4.9			
		95% CI	(1.0, NE)	(1.0, NE)			
		Log-rank p-value (Unstratified) [b]			0.6104		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.699		
		95% CI for Hazard Ratio			(0.174, 2.805)		
		P-value of Subgroup*Treatment Interaction [d]			0.5738		
		Social Functioning	White	Number of Patients	122	105	
				Patients With Events (%)	74 ( 60.7)	61 ( 58.1)	
				Patients Without Events (Censored) (%)	48 ( 39.3)	44 ( 41.9)	
Median Time (months) [a]	2.3			2.9			
95% CI	(1.7, 4.6)			(2.3, 4.6)			
Log-rank p-value (Unstratified) [b]					0.8769		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.974		
95% CI for Hazard Ratio					(0.692, 1.369)		
Social Functioning	Non-White			Number of Patients	11	15	
				Patients With Events (%)	6 ( 54.5)	6 ( 40.0)	
				Patients Without Events (Censored) (%)	5 ( 45.5)	9 ( 60.0)	
				Median Time (months) [a]	1.9	3.1	
		95% CI	(1.0, 12.5)	(0.8, NE)			
		Log-rank p-value (Unstratified) [b]			0.9244		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.059		
		95% CI for Hazard Ratio			(0.322, 3.479)		
		P-value of Subgroup*Treatment Interaction [d]			0.7261		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	White	Number of Patients	123	110	
		Patients With Events (%)	86 ( 69.9)	85 ( 77.3)	
		Patients Without Events (Censored) (%)	37 ( 30.1)	25 ( 22.7)	
		Median Time (months) [a]	2.6	1.1	
		95% CI	(1.7, 3.7)	(1.0, 1.9)	
		Log-rank p-value (Unstratified) [b]			0.0026
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.634	
	95% CI for Hazard Ratio			(0.468, 0.859)	
	Non-White	Number of Patients	11	15	
		Patients With Events (%)	6 ( 54.5)	11 ( 73.3)	
		Patients Without Events (Censored) (%)	5 ( 45.5)	4 ( 26.7)	
		Median Time (months) [a]	1.9	1.2	
		95% CI	(0.9, NE)	(0.8, 2.2)	
Log-rank p-value (Unstratified) [b]				0.4824	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.702		
95% CI for Hazard Ratio			(0.257, 1.919)		
		P-value of Subgroup*Treatment Interaction [d]		0.9068	
Nausea and Vomiting	White	Number of Patients	124	112	
		Patients With Events (%)	73 ( 58.9)	53 ( 47.3)	
		Patients Without Events (Censored) (%)	51 ( 41.1)	59 ( 52.7)	
		Median Time (months) [a]	3.1	4.6	
		95% CI	(1.7, 4.9)	(2.7, 9.5)	
	Log-rank p-value (Unstratified) [b]			0.4544	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.143	
	95% CI for Hazard Ratio			(0.801, 1.633)	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Pain	Non-White	Number of Patients	11	15			
		Patients With Events (%)	5 ( 45.5)	5 ( 33.3)			
		Patients Without Events (Censored) (%)	6 ( 54.5)	10 ( 66.7)			
		Median Time (months) [a]	4.2	NE			
		95% CI	(0.8, NE)	(1.0, NE)			
		Log-rank p-value (Unstratified) [b]			0.4584		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.587		
		95% CI for Hazard Ratio			(0.458, 5.494)		
		P-value of Subgroup*Treatment Interaction [d]			0.6207		
		Pain	White	Number of Patients	122	107	
				Patients With Events (%)	70 ( 57.4)	58 ( 54.2)	
				Patients Without Events (Censored) (%)	52 ( 42.6)	49 ( 45.8)	
Median Time (months) [a]	4.8			3.3			
95% CI	(2.8, 6.5)			(2.2, 5.7)			
Log-rank p-value (Unstratified) [b]					0.3163		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.837		
95% CI for Hazard Ratio					(0.589, 1.189)		
Pain	Non-White			Number of Patients	10	15	
				Patients With Events (%)	6 ( 60.0)	8 ( 53.3)	
				Patients Without Events (Censored) (%)	4 ( 40.0)	7 ( 46.7)	
				Median Time (months) [a]	2.4	2.2	
		95% CI	(0.8, NE)	(1.0, 9.8)			
		Log-rank p-value (Unstratified) [b]			0.5294		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.418		
		95% CI for Hazard Ratio			(0.475, 4.230)		
		P-value of Subgroup*Treatment Interaction [d]			0.3582		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	White	Number of Patients	121	109	
		Patients With Events (%)	57 ( 47.1)	54 ( 49.5)	
		Patients Without Events (Censored) (%)	64 ( 52.9)	55 ( 50.5)	
		Median Time (months) [a]	6.7	3.7	
		95% CI	(4.5, 14.4)	(2.1, 8.2)	
		Log-rank p-value (Unstratified) [b]			0.0512
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.690	
	95% CI for Hazard Ratio			(0.473, 1.006)	
	Non-White	Number of Patients	11	15	
		Patients With Events (%)	4 ( 36.4)	11 ( 73.3)	
		Patients Without Events (Censored) (%)	7 ( 63.6)	4 ( 26.7)	
		Median Time (months) [a]	5.8	2.2	
		95% CI	(0.9, NE)	(0.8, 5.6)	
Log-rank p-value (Unstratified) [b]				0.1543	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.447		
95% CI for Hazard Ratio			(0.142, 1.407)		
		P-value of Subgroup*Treatment Interaction [d]		0.5249	
Insomnia	White	Number of Patients	116	103	
		Patients With Events (%)	52 ( 44.8)	47 ( 45.6)	
		Patients Without Events (Censored) (%)	64 ( 55.2)	56 ( 54.4)	
		Median Time (months) [a]	7.7	3.5	
		95% CI	(4.7, 23.6)	(2.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.0634
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.687		
95% CI for Hazard Ratio			(0.460, 1.026)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Appetite Loss	Non-White	Number of Patients	10	13			
		Patients With Events (%)	4 ( 40.0)	5 ( 38.5)			
		Patients Without Events (Censored) (%)	6 ( 60.0)	8 ( 61.5)			
		Median Time (months) [a]	12.5	NE			
		95% CI	(1.0, 12.5)	(0.8, NE)			
		Log-rank p-value (Unstratified) [b]			0.6423		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.714		
		95% CI for Hazard Ratio			(0.170, 2.997)		
		P-value of Subgroup*Treatment Interaction [d]			0.6723		
		Appetite Loss	White	Number of Patients	120	106	
				Patients With Events (%)	67 ( 55.8)	51 ( 48.1)	
				Patients Without Events (Censored) (%)	53 ( 44.2)	55 ( 51.9)	
Median Time (months) [a]	4.3			4.9			
95% CI	(1.9, 7.4)			(3.1, 8.2)			
Log-rank p-value (Unstratified) [b]					0.9088		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.022		
95% CI for Hazard Ratio					(0.708, 1.475)		
Appetite Loss	Non-White			Number of Patients	10	13	
				Patients With Events (%)	7 ( 70.0)	8 ( 61.5)	
				Patients Without Events (Censored) (%)	3 ( 30.0)	5 ( 38.5)	
				Median Time (months) [a]	1.2	2.3	
		95% CI	(0.8, 3.3)	(1.0, 3.1)			
		Log-rank p-value (Unstratified) [b]			0.6100		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.305		
		95% CI for Hazard Ratio			(0.465, 3.662)		
		P-value of Subgroup*Treatment Interaction [d]			0.5153		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	White	Number of Patients	121	106	
		Patients With Events (%)	60 ( 49.6)	51 ( 48.1)	
		Patients Without Events (Censored) (%)	61 ( 50.4)	55 ( 51.9)	
		Median Time (months) [a]	4.6	3.7	
		95% CI	(2.8, 14.4)	(2.4, 6.7)	
		Log-rank p-value (Unstratified) [b]			0.6096
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.908	
	95% CI for Hazard Ratio			(0.624, 1.320)	
	Non-White	Number of Patients	11	14	
		Patients With Events (%)	6 ( 54.5)	5 ( 35.7)	
		Patients Without Events (Censored) (%)	5 ( 45.5)	9 ( 64.3)	
		Median Time (months) [a]	9.1	4.2	
		95% CI	(0.8, 13.9)	(2.8, NE)	
Log-rank p-value (Unstratified) [b]				0.6908	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.289		
95% CI for Hazard Ratio			(0.366, 4.538)		
		P-value of Subgroup*Treatment Interaction [d]		0.2838	
Diarrhea	White	Number of Patients	123	111	
		Patients With Events (%)	73 ( 59.3)	36 ( 32.4)	
		Patients Without Events (Censored) (%)	50 ( 40.7)	75 ( 67.6)	
		Median Time (months) [a]	2.1	10.9	
		95% CI	(1.7, 4.0)	(5.6, NE)	
		Log-rank p-value (Unstratified) [b]			0.0001
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			2.211		
95% CI for Hazard Ratio			(1.482, 3.299)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Financial Difficulties	Non-White	Number of Patients	11	15			
		Patients With Events (%)	5 ( 45.5)	4 ( 26.7)			
		Patients Without Events (Censored) (%)	6 ( 54.5)	11 ( 73.3)			
		Median Time (months) [a]	3.4	NE			
		95% CI	(0.8, NE)	(3.0, NE)			
		Log-rank p-value (Unstratified) [b]			0.5129		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.555		
		95% CI for Hazard Ratio			(0.408, 5.935)		
		P-value of Subgroup*Treatment Interaction [d]			0.8456		
		Financial Difficulties	White	Number of Patients	123	109	
				Patients With Events (%)	32 ( 26.0)	27 ( 24.8)	
				Patients Without Events (Censored) (%)	91 ( 74.0)	82 ( 75.2)	
Median Time (months) [a]	NE			NE			
95% CI	(18.2, NE)			(6.7, NE)			
Log-rank p-value (Unstratified) [b]					0.5623		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.859		
95% CI for Hazard Ratio					(0.512, 1.441)		
Financial Difficulties	Non-White			Number of Patients	10	13	
				Patients With Events (%)	3 ( 30.0)	1 ( 7.7)	
				Patients Without Events (Censored) (%)	7 ( 70.0)	12 ( 92.3)	
				Median Time (months) [a]	5.8	NE	
		95% CI	(1.0, NE)	(NE, NE)			
		Log-rank p-value (Unstratified) [b]			0.1673		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			4.344		
		95% CI for Hazard Ratio			(0.448, 42.132)		
		P-value of Subgroup*Treatment Interaction [d]			0.1620		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.5  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Race  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Summary Score	White	Number of Patients	125	112	
		Patients With Events (%)	58 ( 46.4)	50 ( 44.6)	
		Patients Without Events (Censored) (%)	67 ( 53.6)	62 ( 55.4)	
		Median Time (months) [a]	6.6	6.4	
		95% CI	(3.9, 23.6)	(3.7, 9.6)	
		Log-rank p-value (Unstratified) [b]			0.3222
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.826
		95% CI for Hazard Ratio			(0.564, 1.209)
	Non-White	Number of Patients	11	15	
		Patients With Events (%)	5 ( 45.5)	9 ( 60.0)	
		Patients Without Events (Censored) (%)	6 ( 54.5)	6 ( 40.0)	
		Median Time (months) [a]	6.5	2.8	
		95% CI	(0.8, NE)	(1.0, 3.1)	
		Log-rank p-value (Unstratified) [b]			0.5095
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.688		
95% CI for Hazard Ratio			(0.224, 2.109)		
		P-value of Subgroup*Treatment Interaction [d]		0.8665	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Global Health Status / QoL	0	Number of Patients	77	78			
		Patients With Events (%)	48 ( 62.3)	51 ( 65.4)			
		Patients Without Events (Censored) (%)	29 ( 37.7)	27 ( 34.6)			
		Median Time (months) [a]	4.0	3.0			
		95% CI	(1.7, 7.9)	(2.0, 4.2)			
		Log-rank p-value (Unstratified) [b]			0.1684		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.757		
		95% CI for Hazard Ratio			(0.507, 1.129)		
			1	Number of Patients	96	86	
				Patients With Events (%)	47 ( 49.0)	52 ( 60.5)	
				Patients Without Events (Censored) (%)	49 ( 51.0)	34 ( 39.5)	
				Median Time (months) [a]	5.0	2.2	
		95% CI	(3.1, 8.0)	(1.4, 3.3)			
		Log-rank p-value (Unstratified) [b]			0.0132		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.610		
		95% CI for Hazard Ratio			(0.410, 0.908)		
		P-value of Subgroup*Treatment Interaction [d]			0.4222		
Physical Functioning	0	Number of Patients	77	77			
		Patients With Events (%)	40 ( 51.9)	40 ( 51.9)			
		Patients Without Events (Censored) (%)	37 ( 48.1)	37 ( 48.1)			
		Median Time (months) [a]	5.9	3.5			
		95% CI	(3.0, 13.1)	(2.2, 6.0)			
		Log-rank p-value (Unstratified) [b]			0.0933		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.682		
		95% CI for Hazard Ratio			(0.434, 1.071)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	1	Number of Patients	97	87	
		Patients With Events (%)	48 ( 49.5)	47 ( 54.0)	
		Patients Without Events (Censored) (%)	49 ( 50.5)	40 ( 46.0)	
		Median Time (months) [a]	4.7	3.0	
		95% CI	(2.6, 7.4)	(2.1, 6.2)	
		Log-rank p-value (Unstratified) [b]			0.2555
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.793
		95% CI for Hazard Ratio			(0.530, 1.187)
		P-value of Subgroup*Treatment Interaction [d]			0.7073
Role Functioning	0	Number of Patients	77	75	
		Patients With Events (%)	48 ( 62.3)	46 ( 61.3)	
		Patients Without Events (Censored) (%)	29 ( 37.7)	29 ( 38.7)	
		Median Time (months) [a]	2.9	2.8	
		95% CI	(1.7, 5.9)	(1.4, 3.7)	
		Log-rank p-value (Unstratified) [b]			0.2274
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.779
		95% CI for Hazard Ratio			(0.517, 1.174)
		P-value of Subgroup*Treatment Interaction [d]			0.7488
	1	Number of Patients	94	84	
		Patients With Events (%)	63 ( 67.0)	56 ( 66.7)	
		Patients Without Events (Censored) (%)	31 ( 33.0)	28 ( 33.3)	
		Median Time (months) [a]	2.3	2.1	
		95% CI	(1.7, 4.5)	(1.4, 3.0)	
		Log-rank p-value (Unstratified) [b]			0.2423
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.808
		95% CI for Hazard Ratio			(0.562, 1.162)
		P-value of Subgroup*Treatment Interaction [d]			0.7488

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	0	Number of Patients	75	78	
		Patients With Events (%)	21 ( 28.0)	33 ( 42.3)	
		Patients Without Events (Censored) (%)	54 ( 72.0)	45 ( 57.7)	
		Median Time (months) [a]	NE	4.7	
		95% CI	(8.9, NE)	(3.5, NE)	
		Log-rank p-value (Unstratified) [b]			0.0053
	Unstratified Cox Regression Analysis [c]	Hazard Ratio (Relative to TPC)			0.464
		95% CI for Hazard Ratio			(0.267, 0.807)
	1	Number of Patients	94	86	
		Patients With Events (%)	40 ( 42.6)	42 ( 48.8)	
		Patients Without Events (Censored) (%)	54 ( 57.4)	44 ( 51.2)	
		Median Time (months) [a]	6.5	4.2	
95% CI		(2.8, NE)	(2.4, 7.2)		
Log-rank p-value (Unstratified) [b]				0.2837	
Unstratified Cox Regression Analysis [c]	Hazard Ratio (Relative to TPC)			0.790	
	95% CI for Hazard Ratio			(0.512, 1.219)	
	P-value of Subgroup*Treatment Interaction [d]			0.1506	
Cognitive Functioning	0	Number of Patients	77	77	
		Patients With Events (%)	43 ( 55.8)	31 ( 40.3)	
		Patients Without Events (Censored) (%)	34 ( 44.2)	46 ( 59.7)	
		Median Time (months) [a]	4.1	8.2	
	95% CI	(2.7, 11.1)	(4.2, NE)		
	Log-rank p-value (Unstratified) [b]			0.7107	
	Unstratified Cox Regression Analysis [c]	Hazard Ratio (Relative to TPC)			1.092
		95% CI for Hazard Ratio			(0.683, 1.744)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	1	Number of Patients	97	87	
		Patients With Events (%)	43 ( 44.3)	36 ( 41.4)	
		Patients Without Events (Censored) (%)	54 ( 55.7)	51 ( 58.6)	
		Median Time (months) [a]	6.6	4.3	
		95% CI	(2.8, NE)	(3.0, NE)	
		Log-rank p-value (Unstratified) [b]			0.9512
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.986
		95% CI for Hazard Ratio			(0.632, 1.540)
		P-value of Subgroup*Treatment Interaction [d]			0.7696
Social Functioning	0	Number of Patients	76	74	
		Patients With Events (%)	43 ( 56.6)	37 ( 50.0)	
		Patients Without Events (Censored) (%)	33 ( 43.4)	37 ( 50.0)	
		Median Time (months) [a]	4.7	4.2	
		95% CI	(1.8, 9.5)	(2.9, 5.2)	
		Log-rank p-value (Unstratified) [b]			0.6522
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.901
		95% CI for Hazard Ratio			(0.572, 1.418)
	1	Number of Patients	94	83	
		Patients With Events (%)	58 ( 61.7)	51 ( 61.4)	
		Patients Without Events (Censored) (%)	36 ( 38.3)	32 ( 38.6)	
		Median Time (months) [a]	2.0	2.7	
		95% CI	(1.5, 2.9)	(1.5, 4.2)	
		Log-rank p-value (Unstratified) [b]			0.9890
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.997
		95% CI for Hazard Ratio			(0.684, 1.454)
		P-value of Subgroup*Treatment Interaction [d]			0.8440

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	0	Number of Patients	77	77	
		Patients With Events (%)	56 ( 72.7)	58 ( 75.3)	
		Patients Without Events (Censored) (%)	21 ( 27.3)	19 ( 24.7)	
		Median Time (months) [a]	1.7	1.2	
		95% CI	(1.4, 4.0)	(1.0, 2.2)	
		Log-rank p-value (Unstratified) [b]			0.0310
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.669	
	95% CI for Hazard Ratio			(0.460, 0.972)	
	1	Number of Patients	95	85	
		Patients With Events (%)	65 ( 68.4)	66 ( 77.6)	
		Patients Without Events (Censored) (%)	30 ( 31.6)	19 ( 22.4)	
		Median Time (months) [a]	2.2	1.3	
		95% CI	(1.4, 2.8)	(1.0, 1.9)	
Log-rank p-value (Unstratified) [b]				0.0431	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.706		
95% CI for Hazard Ratio			(0.500, 0.996)		
		P-value of Subgroup*Treatment Interaction [d]		0.8641	
Nausea and Vomiting	0	Number of Patients	77	78	
		Patients With Events (%)	46 ( 59.7)	34 ( 43.6)	
		Patients Without Events (Censored) (%)	31 ( 40.3)	44 ( 56.4)	
		Median Time (months) [a]	2.6	6.8	
		95% CI	(1.5, 7.4)	(3.0, 10.3)	
	Log-rank p-value (Unstratified) [b]			0.4020	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.211	
	95% CI for Hazard Ratio			(0.770, 1.902)	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	1	Number of Patients	96	87	
		Patients With Events (%)	60 ( 62.5)	43 ( 49.4)	
		Patients Without Events (Censored) (%)	36 ( 37.5)	44 ( 50.6)	
		Median Time (months) [a]	2.1	4.6	
		95% CI	(1.4, 3.9)	(1.6, 9.6)	
		Log-rank p-value (Unstratified) [b]			0.1880
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.296
		95% CI for Hazard Ratio			(0.876, 1.918)
		P-value of Subgroup*Treatment Interaction [d]			0.8256
Pain	0	Number of Patients	77	76	
		Patients With Events (%)	41 ( 53.2)	42 ( 55.3)	
		Patients Without Events (Censored) (%)	36 ( 46.8)	34 ( 44.7)	
		Median Time (months) [a]	6.1	4.3	
		95% CI	(3.7, 9.7)	(1.7, 8.2)	
		Log-rank p-value (Unstratified) [b]			0.2096
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.760
		95% CI for Hazard Ratio			(0.493, 1.173)
	1	Number of Patients	92	83	
		Patients With Events (%)	54 ( 58.7)	48 ( 57.8)	
		Patients Without Events (Censored) (%)	38 ( 41.3)	35 ( 42.2)	
		Median Time (months) [a]	2.9	3.1	
		95% CI	(1.9, 4.8)	(2.2, 4.3)	
		Log-rank p-value (Unstratified) [b]			0.6378
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.911
		95% CI for Hazard Ratio			(0.615, 1.348)
		P-value of Subgroup*Treatment Interaction [d]			0.4996

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	0	Number of Patients	77	75	
		Patients With Events (%)	32 ( 41.6)	35 ( 46.7)	
		Patients Without Events (Censored) (%)	45 ( 58.4)	40 ( 53.3)	
		Median Time (months) [a]	9.5	4.3	
		95% CI	(5.8, NE)	(2.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.0698
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.640	
	95% CI for Hazard Ratio			(0.393, 1.043)	
	1	Number of Patients	93	86	
		Patients With Events (%)	46 ( 49.5)	49 ( 57.0)	
		Patients Without Events (Censored) (%)	47 ( 50.5)	37 ( 43.0)	
		Median Time (months) [a]	5.0	3.0	
		95% CI	(3.1, 9.4)	(1.7, 7.5)	
Log-rank p-value (Unstratified) [b]				0.1072	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.719		
95% CI for Hazard Ratio			(0.479, 1.078)		
		P-value of Subgroup*Treatment Interaction [d]		0.6701	
Insomnia	0	Number of Patients	72	71	
		Patients With Events (%)	27 ( 37.5)	30 ( 42.3)	
		Patients Without Events (Censored) (%)	45 ( 62.5)	41 ( 57.7)	
		Median Time (months) [a]	18.9	NE	
		95% CI	(6.3, NE)	(2.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.1199
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.661		
95% CI for Hazard Ratio			(0.388, 1.124)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	1	Number of Patients	88	79	
		Patients With Events (%)	41 ( 46.6)	39 ( 49.4)	
		Patients Without Events (Censored) (%)	47 ( 53.4)	40 ( 50.6)	
		Median Time (months) [a]	6.0	3.3	
		95% CI	(4.1, 8.7)	(2.0, 7.4)	
		Log-rank p-value (Unstratified) [b]			0.0744
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.671
		95% CI for Hazard Ratio			(0.431, 1.047)
		P-value of Subgroup*Treatment Interaction [d]			0.7207
Appetite Loss	0	Number of Patients	76	73	
		Patients With Events (%)	44 ( 57.9)	36 ( 49.3)	
		Patients Without Events (Censored) (%)	32 ( 42.1)	37 ( 50.7)	
		Median Time (months) [a]	5.0	4.7	
		95% CI	(1.8, 9.1)	(2.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.9492
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.986
		95% CI for Hazard Ratio			(0.629, 1.544)
	1	Number of Patients	91	83	
		Patients With Events (%)	53 ( 58.2)	42 ( 50.6)	
		Patients Without Events (Censored) (%)	38 ( 41.8)	41 ( 49.4)	
		Median Time (months) [a]	2.8	3.0	
		95% CI	(1.7, 5.9)	(2.1, 5.4)	
		Log-rank p-value (Unstratified) [b]			0.5918
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.116
		95% CI for Hazard Ratio			(0.743, 1.677)
		P-value of Subgroup*Treatment Interaction [d]			0.6317

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	0	Number of Patients	77	73	
		Patients With Events (%)	37 ( 48.1)	26 ( 35.6)	
		Patients Without Events (Censored) (%)	40 ( 51.9)	47 ( 64.4)	
		Median Time (months) [a]	8.6	6.7	
		95% CI	(2.5, NE)	(3.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.3231
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.287	
	95% CI for Hazard Ratio			(0.777, 2.129)	
	1	Number of Patients	93	85	
		Patients With Events (%)	46 ( 49.5)	44 ( 51.8)	
		Patients Without Events (Censored) (%)	47 ( 50.5)	41 ( 48.2)	
		Median Time (months) [a]	4.5	3.2	
		95% CI	(2.4, 9.1)	(1.9, 4.9)	
Log-rank p-value (Unstratified) [b]				0.4499	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.853		
95% CI for Hazard Ratio			(0.564, 1.291)		
		P-value of Subgroup*Treatment Interaction [d]		0.1859	
Diarrhea	0	Number of Patients	77	77	
		Patients With Events (%)	47 ( 61.0)	20 ( 26.0)	
		Patients Without Events (Censored) (%)	30 ( 39.0)	57 ( 74.0)	
		Median Time (months) [a]	2.0	NE	
		95% CI	(1.5, 4.0)	(5.6, NE)	
		Log-rank p-value (Unstratified) [b]			<.0001
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			3.026		
95% CI for Hazard Ratio			(1.790, 5.115)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	1	Number of Patients	95	87	
		Patients With Events (%)	57 ( 60.0)	35 ( 40.2)	
		Patients Without Events (Censored) (%)	38 ( 40.0)	52 ( 59.8)	
		Median Time (months) [a]	2.1	7.7	
		95% CI	(1.5, 3.9)	(5.1, 10.9)	
		Log-rank p-value (Unstratified) [b]			0.0045
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.818
		95% CI for Hazard Ratio			(1.192, 2.773)
		P-value of Subgroup*Treatment Interaction [d]			0.1349
Financial Difficulties	0	Number of Patients	76	77	
		Patients With Events (%)	18 ( 23.7)	13 ( 16.9)	
		Patients Without Events (Censored) (%)	58 ( 76.3)	64 ( 83.1)	
		Median Time (months) [a]	NE	NE	
		95% CI	(NE, NE)	(8.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.6708
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.168
		95% CI for Hazard Ratio			(0.570, 2.390)
	1	Number of Patients	93	82	
		Patients With Events (%)	25 ( 26.9)	18 ( 22.0)	
		Patients Without Events (Censored) (%)	68 ( 73.1)	64 ( 78.0)	
		Median Time (months) [a]	18.2	NE	
		95% CI	(7.2, NE)	(6.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.8381
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.065
		95% CI for Hazard Ratio			(0.578, 1.964)
		P-value of Subgroup*Treatment Interaction [d]			0.9542

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.6  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline ECOG status  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Summary Score	0	Number of Patients	77	78			
		Patients With Events (%)	40 ( 51.9)	33 ( 42.3)			
		Patients Without Events (Censored) (%)	37 ( 48.1)	45 ( 57.7)			
		Median Time (months) [a]	5.9	8.2			
		95% CI	(2.9, 23.6)	(4.3, 9.9)			
		Log-rank p-value (Unstratified) [b]			0.9812		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.994		
		95% CI for Hazard Ratio			(0.623, 1.587)		
			1	Number of Patients	97	87	
				Patients With Events (%)	45 ( 46.4)	46 ( 52.9)	
				Patients Without Events (Censored) (%)	52 ( 53.6)	41 ( 47.1)	
				Median Time (months) [a]	4.9	3.5	
		95% CI	(3.2, 9.2)	(2.2, 7.2)			
		Log-rank p-value (Unstratified) [b]			0.1926		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.762		
		95% CI for Hazard Ratio			(0.505, 1.150)		
		P-value of Subgroup*Treatment Interaction [d]			0.4372		

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Global Health Status / Europe QoL		Number of Patients	105	105			
		Patients With Events (%)	64 ( 61.0)	66 ( 62.9)			
		Patients Without Events (Censored) (%)	41 ( 39.0)	39 ( 37.1)			
		Median Time (months) [a]	3.2	2.7			
		95% CI	(2.1, 5.9)	(1.9, 3.9)			
		Log-rank p-value (Unstratified) [b]			0.1862		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.793		
		95% CI for Hazard Ratio			(0.561, 1.122)		
			North America	Number of Patients	68	59	
				Patients With Events (%)	31 ( 45.6)	37 ( 62.7)	
				Patients Without Events (Censored) (%)	37 ( 54.4)	22 ( 37.3)	
				Median Time (months) [a]	6.6	2.6	
		95% CI	(3.4, NE)	(1.5, 4.2)			
		Log-rank p-value (Unstratified) [b]			0.0078		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.527		
		95% CI for Hazard Ratio			(0.325, 0.853)		
		P-value of Subgroup*Treatment Interaction [d]			0.1297		
Physical Functioning Europe		Number of Patients	106	105			
		Patients With Events (%)	53 ( 50.0)	54 ( 51.4)			
		Patients Without Events (Censored) (%)	53 ( 50.0)	51 ( 48.6)			
		Median Time (months) [a]	5.1	3.5			
		95% CI	(2.8, 13.1)	(2.2, 6.2)			
		Log-rank p-value (Unstratified) [b]			0.2792		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.812		
		95% CI for Hazard Ratio			(0.555, 1.188)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Role Functioning	North America	Number of Patients	68	59			
		Patients With Events (%)	35 ( 51.5)	33 ( 55.9)			
		Patients Without Events (Censored) (%)	33 ( 48.5)	26 ( 44.1)			
		Median Time (months) [a]	6.6	3.0			
		95% CI	(3.1, 9.1)	(1.9, 4.9)			
		Log-rank p-value (Unstratified) [b]			0.0652		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.637		
		95% CI for Hazard Ratio			(0.392, 1.036)		
		P-value of Subgroup*Treatment Interaction [d]			0.5485		
		Role Functioning	Europe	Number of Patients	103	101	
				Patients With Events (%)	66 ( 64.1)	60 ( 59.4)	
				Patients Without Events (Censored) (%)	37 ( 35.9)	41 ( 40.6)	
Median Time (months) [a]	2.8			2.8			
95% CI	(1.7, 4.4)			(1.8, 4.3)			
Log-rank p-value (Unstratified) [b]					0.6263		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.917		
95% CI for Hazard Ratio					(0.645, 1.304)		
Role Functioning	North America			Number of Patients	68	58	
				Patients With Events (%)	45 ( 66.2)	42 ( 72.4)	
				Patients Without Events (Censored) (%)	23 ( 33.8)	16 ( 27.6)	
				Median Time (months) [a]	2.1	1.5	
		95% CI	(1.5, 4.8)	(1.3, 2.8)			
		Log-rank p-value (Unstratified) [b]			0.0167		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.596		
		95% CI for Hazard Ratio			(0.387, 0.918)		
		P-value of Subgroup*Treatment Interaction [d]			0.1617		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	Europe	Number of Patients	101	105	
		Patients With Events (%)	38 ( 37.6)	49 ( 46.7)	
		Patients Without Events (Censored) (%)	63 ( 62.4)	56 ( 53.3)	
		Median Time (months) [a]	8.9	4.4	
		95% CI	(5.1, NE)	(3.3, 10.6)	
		Log-rank p-value (Unstratified) [b]			0.0659
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.674	
	95% CI for Hazard Ratio			(0.440, 1.031)	
	North America	Number of Patients	68	59	
		Patients With Events (%)	23 ( 33.8)	26 ( 44.1)	
		Patients Without Events (Censored) (%)	45 ( 66.2)	33 ( 55.9)	
		Median Time (months) [a]	NE	4.7	
		95% CI	(4.0, NE)	(2.8, NE)	
Log-rank p-value (Unstratified) [b]				0.0809	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.610		
95% CI for Hazard Ratio			(0.347, 1.071)		
		P-value of Subgroup*Treatment Interaction [d]		0.6971	
Cognitive Functioning	Europe	Number of Patients	106	105	
		Patients With Events (%)	52 ( 49.1)	42 ( 40.0)	
		Patients Without Events (Censored) (%)	54 ( 50.9)	63 ( 60.0)	
		Median Time (months) [a]	5.6	8.2	
		95% CI	(2.9, 15.2)	(3.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.7697
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.063		
95% CI for Hazard Ratio			(0.704, 1.604)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	North America	Number of Patients	68	59	
		Patients With Events (%)	34 ( 50.0)	25 ( 42.4)	
		Patients Without Events (Censored) (%)	34 ( 50.0)	34 ( 57.6)	
		Median Time (months) [a]	4.1	4.3	
		95% CI	(2.6, NE)	(3.0, NE)	
		Log-rank p-value (Unstratified) [b]			0.9853
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.005
		95% CI for Hazard Ratio			(0.599, 1.686)
		P-value of Subgroup*Treatment Interaction [d]			0.7051
		Social Functioning	Europe	Number of Patients	102
Patients With Events (%)	61 ( 59.8)			58 ( 59.2)	
Patients Without Events (Censored) (%)	41 ( 40.2)			40 ( 40.8)	
Median Time (months) [a]	2.9			3.6	
95% CI	(1.7, 4.6)			(2.3, 4.3)	
Log-rank p-value (Unstratified) [b]					0.6143
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)					0.911
95% CI for Hazard Ratio					(0.634, 1.311)
P-value of Subgroup*Treatment Interaction [d]					0.6579
	North America			Number of Patients	68
		Patients With Events (%)	40 ( 58.8)	30 ( 50.8)	
		Patients Without Events (Censored) (%)	28 ( 41.2)	29 ( 49.2)	
		Median Time (months) [a]	2.0	3.1	
		95% CI	(1.6, 6.0)	(2.1, 5.8)	
		Log-rank p-value (Unstratified) [b]			0.6893
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.101
		95% CI for Hazard Ratio			(0.684, 1.772)
		P-value of Subgroup*Treatment Interaction [d]			0.6579

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Fatigue	Europe	Number of Patients	105	103			
		Patients With Events (%)	75 ( 71.4)	77 ( 74.8)			
		Patients Without Events (Censored) (%)	30 ( 28.6)	26 ( 25.2)			
		Median Time (months) [a]	2.0	1.6			
		95% CI	(1.4, 2.8)	(1.0, 2.2)			
		Log-rank p-value (Unstratified) [b]			0.1791		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.806		
		95% CI for Hazard Ratio			(0.585, 1.110)		
			North America	Number of Patients	67	59	
				Patients With Events (%)	46 ( 68.7)	47 ( 79.7)	
				Patients Without Events (Censored) (%)	21 ( 31.3)	12 ( 20.3)	
				Median Time (months) [a]	2.1	1.0	
				95% CI	(1.5, 4.2)	(0.9, 1.3)	
		Log-rank p-value (Unstratified) [b]			0.0014		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.517		
		95% CI for Hazard Ratio			(0.340, 0.784)		
		P-value of Subgroup*Treatment Interaction [d]			0.0966		
Nausea and Vomiting	Europe	Number of Patients	106	106			
		Patients With Events (%)	67 ( 63.2)	49 ( 46.2)			
		Patients Without Events (Censored) (%)	39 ( 36.8)	57 ( 53.8)			
		Median Time (months) [a]	2.0	4.6			
		95% CI	(1.5, 3.5)	(2.9, 10.3)			
		Log-rank p-value (Unstratified) [b]			0.0656		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.409		
		95% CI for Hazard Ratio			(0.972, 2.043)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	North America	Number of Patients	67	59			
		Patients With Events (%)	39 ( 58.2)	28 ( 47.5)			
		Patients Without Events (Censored) (%)	28 ( 41.8)	31 ( 52.5)			
		Median Time (months) [a]	4.1	6.1			
		95% CI	(1.4, 8.0)	(1.6, 10.1)			
		Log-rank p-value (Unstratified) [b]			0.7984		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.065		
		95% CI for Hazard Ratio			(0.652, 1.741)		
		P-value of Subgroup*Treatment Interaction [d]			0.4026		
		Pain	Europe	Number of Patients	103	100	
				Patients With Events (%)	56 ( 54.4)	56 ( 56.0)	
				Patients Without Events (Censored) (%)	47 ( 45.6)	44 ( 44.0)	
Median Time (months) [a]	3.8			2.8			
95% CI	(2.8, 6.2)			(2.1, 4.6)			
Log-rank p-value (Unstratified) [b]					0.2984		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.822		
95% CI for Hazard Ratio					(0.566, 1.195)		
	North America			Number of Patients	66	59	
				Patients With Events (%)	39 ( 59.1)	34 ( 57.6)	
				Patients Without Events (Censored) (%)	27 ( 40.9)	25 ( 42.4)	
				Median Time (months) [a]	3.7	3.4	
		95% CI	(1.7, 9.1)	(2.2, 5.7)			
		Log-rank p-value (Unstratified) [b]			0.4767		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.846		
		95% CI for Hazard Ratio			(0.531, 1.346)		
		P-value of Subgroup*Treatment Interaction [d]			0.9030		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	Europe	Number of Patients	103	103	
		Patients With Events (%)	47 ( 45.6)	55 ( 53.4)	
		Patients Without Events (Censored) (%)	56 ( 54.4)	48 ( 46.6)	
		Median Time (months) [a]	6.7	4.3	
		95% CI	(3.5, NE)	(2.4, 7.7)	
		Log-rank p-value (Unstratified) [b]			0.0454
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.672	
	95% CI for Hazard Ratio			(0.452, 0.997)	
	North America	Number of Patients	67	58	
		Patients With Events (%)	31 ( 46.3)	29 ( 50.0)	
		Patients Without Events (Censored) (%)	36 ( 53.7)	29 ( 50.0)	
		Median Time (months) [a]	6.6	3.1	
		95% CI	(3.3, 14.4)	(1.6, NE)	
Log-rank p-value (Unstratified) [b]				0.1722	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.703		
95% CI for Hazard Ratio			(0.422, 1.172)		
		P-value of Subgroup*Treatment Interaction [d]		0.8640	
Insomnia	Europe	Number of Patients	94	97	
		Patients With Events (%)	42 ( 44.7)	45 ( 46.4)	
		Patients Without Events (Censored) (%)	52 ( 55.3)	52 ( 53.6)	
		Median Time (months) [a]	6.0	3.9	
		95% CI	(4.7, 18.9)	(2.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.1671
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.745		
95% CI for Hazard Ratio			(0.487, 1.138)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	North America	Number of Patients	66	53	
		Patients With Events (%)	26 ( 39.4)	24 ( 45.3)	
		Patients Without Events (Censored) (%)	40 ( 60.6)	29 ( 54.7)	
		Median Time (months) [a]	8.7	3.1	
		95% CI	(6.3, NE)	(2.0, NE)	
		Log-rank p-value (Unstratified) [b]			0.0445
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.565
		95% CI for Hazard Ratio			(0.320, 0.997)
		P-value of Subgroup*Treatment Interaction [d]			0.4953
Appetite Loss	Europe	Number of Patients	101	101	
		Patients With Events (%)	60 ( 59.4)	45 ( 44.6)	
		Patients Without Events (Censored) (%)	41 ( 40.6)	56 ( 55.4)	
		Median Time (months) [a]	4.4	5.3	
		95% CI	(1.7, 6.0)	(2.8, NE)	
		Log-rank p-value (Unstratified) [b]			0.2348
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.264
		95% CI for Hazard Ratio			(0.855, 1.868)
		P-value of Subgroup*Treatment Interaction [d]			0.1096
	North America	Number of Patients	66	55	
		Patients With Events (%)	37 ( 56.1)	33 ( 60.0)	
		Patients Without Events (Censored) (%)	29 ( 43.9)	22 ( 40.0)	
		Median Time (months) [a]	3.3	3.1	
		95% CI	(1.7, 7.4)	(1.2, 4.7)	
		Log-rank p-value (Unstratified) [b]			0.3329
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.794
		95% CI for Hazard Ratio			(0.496, 1.271)
		P-value of Subgroup*Treatment Interaction [d]			0.1096

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	Europe	Number of Patients	102	103	
		Patients With Events (%)	46 ( 45.1)	46 ( 44.7)	
		Patients Without Events (Censored) (%)	56 ( 54.9)	57 ( 55.3)	
		Median Time (months) [a]	5.6	4.9	
		95% CI	(3.2, NE)	(3.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.8756
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.968
		95% CI for Hazard Ratio			(0.643, 1.458)
		North America	Number of Patients	68	55
	Patients With Events (%)		37 ( 54.4)	24 ( 43.6)	
	Patients Without Events (Censored) (%)		31 ( 45.6)	31 ( 56.4)	
	Median Time (months) [a]		4.6	4.2	
	95% CI		(1.6, 13.9)	(2.8, NE)	
				Log-rank p-value (Unstratified) [b]	0.7717
			Unstratified Cox Regression Analysis [c]		
			Hazard Ratio (Relative to TPC)	1.079	
			95% CI for Hazard Ratio	(0.644, 1.807)	
			P-value of Subgroup*Treatment Interaction [d]	0.7252	
Diarrhea	Europe	Number of Patients	105	105	
		Patients With Events (%)	70 ( 66.7)	39 ( 37.1)	
		Patients Without Events (Censored) (%)	35 ( 33.3)	66 ( 62.9)	
		Median Time (months) [a]	1.7	7.7	
		95% CI	(1.4, 2.4)	(5.3, 10.9)	
		Log-rank p-value (Unstratified) [b]			<.0001
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			2.595
		95% CI for Hazard Ratio			(1.746, 3.857)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	North America	Number of Patients	67	59	
		Patients With Events (%)	34 ( 50.7)	16 ( 27.1)	
		Patients Without Events (Censored) (%)	33 ( 49.3)	43 ( 72.9)	
		Median Time (months) [a]	4.0	NE	
		95% CI	(1.7, 16.5)	(5.6, NE)	
		Log-rank p-value (Unstratified) [b]			0.0288
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.919
		95% CI for Hazard Ratio			(1.056, 3.489)
		P-value of Subgroup*Treatment Interaction [d]			0.4289
Financial Difficulties Europe		Number of Patients	102	102	
		Patients With Events (%)	25 ( 24.5)	21 ( 20.6)	
		Patients Without Events (Censored) (%)	77 ( 75.5)	81 ( 79.4)	
		Median Time (months) [a]	NE	NE	
		95% CI	(18.2, NE)	(8.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.9351
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.025
		95% CI for Hazard Ratio			(0.571, 1.838)
		P-value of Subgroup*Treatment Interaction [d]			
	North America	Number of Patients	67	57	
		Patients With Events (%)	18 ( 26.9)	10 ( 17.5)	
		Patients Without Events (Censored) (%)	49 ( 73.1)	47 ( 82.5)	
		Median Time (months) [a]	NE	NE	
		95% CI	(7.2, NE)	(NE, NE)	
		Log-rank p-value (Unstratified) [b]			0.5186
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.289
		95% CI for Hazard Ratio			(0.594, 2.797)
		P-value of Subgroup*Treatment Interaction [d]			0.6743

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.7  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Geographic region  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Summary Score	Europe	Number of Patients	106	106	
		Patients With Events (%)	55 ( 51.9)	47 ( 44.3)	
		Patients Without Events (Censored) (%)	51 ( 48.1)	59 ( 55.7)	
		Median Time (months) [a]	5.1	6.4	
		95% CI	(2.9, 7.5)	(3.7, 10.3)	
		Log-rank p-value (Unstratified) [b]			0.6181
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.103	
	95% CI for Hazard Ratio			(0.747, 1.629)	
	North America	Number of Patients	68	59	
		Patients With Events (%)	30 ( 44.1)	32 ( 54.2)	
		Patients Without Events (Censored) (%)	38 ( 55.9)	27 ( 45.8)	
		Median Time (months) [a]	8.3	3.1	
		95% CI	(3.7, 23.6)	(2.1, 9.5)	
Log-rank p-value (Unstratified) [b]				0.0475	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.604		
95% CI for Hazard Ratio			(0.364, 1.002)		
		P-value of Subgroup*Treatment Interaction [d]		0.0455	

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Global Health Status / QoL	≤ 12 Months	Number of Patients	97	99	
		Patients With Events (%)	51 ( 52.6)	60 ( 60.6)	
		Patients Without Events (Censored) (%)	46 ( 47.4)	39 ( 39.4)	
		Median Time (months) [a]	5.6	2.9	
		95% CI	(3.2, 9.4)	(1.8, 3.9)	
		Log-rank p-value (Unstratified) [b]			0.0027
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.560	
	95% CI for Hazard Ratio			(0.381, 0.824)	
	> 12 Months	Number of Patients	73	63	
		Patients With Events (%)	44 ( 60.3)	42 ( 66.7)	
		Patients Without Events (Censored) (%)	29 ( 39.7)	21 ( 33.3)	
		Median Time (months) [a]	3.0	2.6	
		95% CI	(1.5, 6.1)	(1.4, 4.9)	
Log-rank p-value (Unstratified) [b]				0.5256	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.873		
95% CI for Hazard Ratio			(0.572, 1.333)		
P-value of Subgroup*Treatment Interaction [d]					0.1714
Physical Functioning	≤ 12 Months	Number of Patients	98	99	
		Patients With Events (%)	50 ( 51.0)	53 ( 53.5)	
		Patients Without Events (Censored) (%)	48 ( 49.0)	46 ( 46.5)	
		Median Time (months) [a]	6.1	3.5	
		95% CI	(3.3, 10.3)	(2.1, 6.0)	
		Log-rank p-value (Unstratified) [b]			0.0288
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.650		
95% CI for Hazard Ratio			(0.440, 0.961)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Role Functioning	> 12 Months	Number of Patients	73	63			
		Patients With Events (%)	37 ( 50.7)	33 ( 52.4)			
		Patients Without Events (Censored) (%)	36 ( 49.3)	30 ( 47.6)			
		Median Time (months) [a]	4.2	3.4			
		95% CI	(1.7, NE)	(2.2, 7.7)			
		Log-rank p-value (Unstratified) [b]			0.6860		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.908		
		95% CI for Hazard Ratio			(0.567, 1.453)		
		P-value of Subgroup*Treatment Interaction [d]			0.3693		
		Role Functioning	≤ 12 Months	Number of Patients	95	95	
				Patients With Events (%)	65 ( 68.4)	59 ( 62.1)	
				Patients Without Events (Censored) (%)	30 ( 31.6)	36 ( 37.9)	
Median Time (months) [a]	2.9			2.0			
95% CI	(1.7, 4.5)			(1.4, 3.1)			
Log-rank p-value (Unstratified) [b]					0.1824		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.786		
95% CI for Hazard Ratio					(0.549, 1.125)		
Role Functioning	> 12 Months			Number of Patients	73	62	
				Patients With Events (%)	45 ( 61.6)	42 ( 67.7)	
				Patients Without Events (Censored) (%)	28 ( 38.4)	20 ( 32.3)	
				Median Time (months) [a]	2.1	2.7	
		95% CI	(1.7, 4.6)	(1.4, 3.4)			
		Log-rank p-value (Unstratified) [b]			0.3268		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.812		
		95% CI for Hazard Ratio			(0.533, 1.238)		
		P-value of Subgroup*Treatment Interaction [d]			0.9642		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	≤ 12 Months	Number of Patients	96	99	
		Patients With Events (%)	34 ( 35.4)	51 ( 51.5)	
		Patients Without Events (Censored) (%)	62 ( 64.6)	48 ( 48.5)	
		Median Time (months) [a]	12.8	3.5	
		95% CI	(7.2, NE)	(2.1, 4.9)	
		Log-rank p-value (Unstratified) [b]			0.0014
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.498	
	95% CI for Hazard Ratio			(0.322, 0.771)	
	> 12 Months	Number of Patients	70	63	
		Patients With Events (%)	27 ( 38.6)	23 ( 36.5)	
		Patients Without Events (Censored) (%)	43 ( 61.4)	40 ( 63.5)	
		Median Time (months) [a]	NE	9.5	
		95% CI	(3.2, NE)	(4.2, NE)	
Log-rank p-value (Unstratified) [b]				0.8271	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.064		
95% CI for Hazard Ratio			(0.610, 1.856)		
		P-value of Subgroup*Treatment Interaction [d]		0.0331	
Cognitive Functioning	≤ 12 Months	Number of Patients	98	100	
		Patients With Events (%)	47 ( 48.0)	43 ( 43.0)	
		Patients Without Events (Censored) (%)	51 ( 52.0)	57 ( 57.0)	
		Median Time (months) [a]	6.0	4.9	
		95% CI	(3.7, 15.2)	(3.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.3440
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.818		
95% CI for Hazard Ratio			(0.537, 1.244)		

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	> 12 Months	Number of Patients	73	62	
		Patients With Events (%)	37 ( 50.7)	22 ( 35.5)	
		Patients Without Events (Censored) (%)	36 ( 49.3)	40 ( 64.5)	
		Median Time (months) [a]	3.2	10.6	
		95% CI	(2.1, 18.2)	(3.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.1373
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.489
		95% CI for Hazard Ratio			(0.876, 2.532)
		P-value of Subgroup*Treatment Interaction [d]			0.0989
Social Functioning	≤ 12 Months	Number of Patients	98	96	
		Patients With Events (%)	56 ( 57.1)	54 ( 56.3)	
		Patients Without Events (Censored) (%)	42 ( 42.9)	42 ( 43.8)	
		Median Time (months) [a]	4.0	3.6	
		95% CI	(2.3, 6.7)	(2.3, 4.4)	
	Log-rank p-value (Unstratified) [b]			0.2722	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.811	
	95% CI for Hazard Ratio			(0.556, 1.183)	
		> 12 Months	Number of Patients	69	59
Patients With Events (%)	44 ( 63.8)		33 ( 55.9)		
Patients Without Events (Censored) (%)	25 ( 36.2)		26 ( 44.1)		
Median Time (months) [a]	1.7		2.9		
95% CI	(1.2, 2.8)		(2.1, 4.9)		
Log-rank p-value (Unstratified) [b]			0.1871		
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.351		
95% CI for Hazard Ratio			(0.858, 2.125)		
P-value of Subgroup*Treatment Interaction [d]			0.1563		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	≤ 12 Months	Number of Patients	97	97	
		Patients With Events (%)	68 ( 70.1)	77 ( 79.4)	
		Patients Without Events (Censored) (%)	29 ( 29.9)	20 ( 20.6)	
		Median Time (months) [a]	2.0	1.0	
		95% CI	(1.4, 3.9)	(0.9, 1.5)	
		Log-rank p-value (Unstratified) [b]			0.0018
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.595	
	95% CI for Hazard Ratio			(0.425, 0.831)	
	> 12 Months	Number of Patients	72	63	
		Patients With Events (%)	51 ( 70.8)	45 ( 71.4)	
		Patients Without Events (Censored) (%)	21 ( 29.2)	18 ( 28.6)	
		Median Time (months) [a]	2.1	1.6	
		95% CI	(1.4, 3.0)	(1.0, 2.1)	
Log-rank p-value (Unstratified) [b]				0.3212	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.818		
95% CI for Hazard Ratio			(0.546, 1.224)		
		P-value of Subgroup*Treatment Interaction [d]		0.3106	
Nausea and Vomiting	≤ 12 Months	Number of Patients	98	100	
		Patients With Events (%)	61 ( 62.2)	52 ( 52.0)	
		Patients Without Events (Censored) (%)	37 ( 37.8)	48 ( 48.0)	
		Median Time (months) [a]	2.4	3.5	
		95% CI	(1.5, 4.1)	(2.1, 7.2)	
		Log-rank p-value (Unstratified) [b]			0.6995
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.075		
95% CI for Hazard Ratio			(0.740, 1.562)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	> 12 Months	Number of Patients	72	63			
		Patients With Events (%)	42 ( 58.3)	24 ( 38.1)			
		Patients Without Events (Censored) (%)	30 ( 41.7)	39 ( 61.9)			
		Median Time (months) [a]	2.6	9.5			
		95% CI	(1.5, 4.9)	(3.5, 12.7)			
		Log-rank p-value (Unstratified) [b]			0.0898		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.539		
		95% CI for Hazard Ratio			(0.928, 2.552)		
		P-value of Subgroup*Treatment Interaction [d]			0.2545		
		Pain	≤ 12 Months	Number of Patients	96	94	
				Patients With Events (%)	54 ( 56.3)	55 ( 58.5)	
				Patients Without Events (Censored) (%)	42 ( 43.8)	39 ( 41.5)	
Median Time (months) [a]	5.0			3.1			
95% CI	(2.8, 6.7)			(1.4, 4.6)			
Log-rank p-value (Unstratified) [b]					0.1155		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.739		
95% CI for Hazard Ratio					(0.504, 1.082)		
	> 12 Months			Number of Patients	71	63	
				Patients With Events (%)	40 ( 56.3)	35 ( 55.6)	
				Patients Without Events (Censored) (%)	31 ( 43.7)	28 ( 44.4)	
				Median Time (months) [a]	3.7	3.3	
		95% CI	(1.9, 6.1)	(2.2, 8.2)			
		Log-rank p-value (Unstratified) [b]			0.7683		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.934		
		95% CI for Hazard Ratio			(0.593, 1.471)		
		P-value of Subgroup*Treatment Interaction [d]			0.4638		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	≤ 12 Months	Number of Patients	95	96	
		Patients With Events (%)	43 ( 45.3)	52 ( 54.2)	
		Patients Without Events (Censored) (%)	52 ( 54.7)	44 ( 45.8)	
		Median Time (months) [a]	5.8	3.5	
		95% CI	(3.4, NE)	(1.9, 7.5)	
		Log-rank p-value (Unstratified) [b]			0.0277
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.638	
	95% CI for Hazard Ratio			(0.425, 0.958)	
	> 12 Months	Number of Patients	72	63	
		Patients With Events (%)	35 ( 48.6)	30 ( 47.6)	
		Patients Without Events (Censored) (%)	37 ( 51.4)	33 ( 52.4)	
		Median Time (months) [a]	6.7	5.1	
		95% CI	(3.3, 14.4)	(2.2, 12.7)	
Log-rank p-value (Unstratified) [b]				0.5321	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.855		
95% CI for Hazard Ratio			(0.521, 1.402)		
		P-value of Subgroup*Treatment Interaction [d]		0.2119	
Insomnia	≤ 12 Months	Number of Patients	88	89	
		Patients With Events (%)	41 ( 46.6)	43 ( 48.3)	
		Patients Without Events (Censored) (%)	47 ( 53.4)	46 ( 51.7)	
		Median Time (months) [a]	6.0	3.2	
		95% CI	(4.2, 18.9)	(1.5, NE)	
	Log-rank p-value (Unstratified) [b]			0.0404	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.638	
	95% CI for Hazard Ratio			(0.411, 0.989)	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	> 12 Months	Number of Patients	71	59			
		Patients With Events (%)	27 ( 38.0)	25 ( 42.4)			
		Patients Without Events (Censored) (%)	44 ( 62.0)	34 ( 57.6)			
		Median Time (months) [a]	18.2	4.4			
		95% CI	(6.3, NE)	(2.6, NE)			
		Log-rank p-value (Unstratified) [b]			0.2604		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.731		
		95% CI for Hazard Ratio			(0.421, 1.269)		
		P-value of Subgroup*Treatment Interaction [d]			0.6945		
		Appetite Loss	≤ 12 Months	Number of Patients	93	96	
				Patients With Events (%)	53 ( 57.0)	50 ( 52.1)	
				Patients Without Events (Censored) (%)	40 ( 43.0)	46 ( 47.9)	
Median Time (months) [a]	5.5			3.1			
95% CI	(1.7, 9.1)			(2.1, 4.9)			
Log-rank p-value (Unstratified) [b]					0.4680		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.865		
95% CI for Hazard Ratio					(0.583, 1.284)		
	> 12 Months			Number of Patients	71	59	
				Patients With Events (%)	43 ( 60.6)	27 ( 45.8)	
				Patients Without Events (Censored) (%)	28 ( 39.4)	32 ( 54.2)	
				Median Time (months) [a]	2.8	5.6	
		95% CI	(1.5, 4.9)	(2.1, NE)			
		Log-rank p-value (Unstratified) [b]			0.1273		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.448		
		95% CI for Hazard Ratio			(0.894, 2.345)		
		P-value of Subgroup*Treatment Interaction [d]			0.1650		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	≤ 12 Months	Number of Patients	97	95	
		Patients With Events (%)	46 ( 47.4)	44 ( 46.3)	
		Patients Without Events (Censored) (%)	51 ( 52.6)	51 ( 53.7)	
		Median Time (months) [a]	5.0	4.2	
		95% CI	(2.8, NE)	(3.1, 6.7)	
		Log-rank p-value (Unstratified) [b]			0.5157
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.871	
	95% CI for Hazard Ratio			(0.574, 1.323)	
	> 12 Months	Number of Patients	70	61	
		Patients With Events (%)	36 ( 51.4)	25 ( 41.0)	
		Patients Without Events (Censored) (%)	34 ( 48.6)	36 ( 59.0)	
		Median Time (months) [a]	5.4	4.9	
		95% CI	(2.0, 14.4)	(2.8, NE)	
Log-rank p-value (Unstratified) [b]				0.3159	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.296		
95% CI for Hazard Ratio			(0.777, 2.159)		
P-value of Subgroup*Treatment Interaction [d]					0.2495
Diarrhea	≤ 12 Months	Number of Patients	97	99	
		Patients With Events (%)	60 ( 61.9)	31 ( 31.3)	
		Patients Without Events (Censored) (%)	37 ( 38.1)	68 ( 68.7)	
		Median Time (months) [a]	2.0	7.7	
		95% CI	(1.5, 3.4)	(5.3, NE)	
		Log-rank p-value (Unstratified) [b]			<.0001
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			2.406		
95% CI for Hazard Ratio			(1.557, 3.716)		

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	> 12 Months	Number of Patients	72	63			
		Patients With Events (%)	43 ( 59.7)	24 ( 38.1)			
		Patients Without Events (Censored) (%)	29 ( 40.3)	39 ( 61.9)			
		Median Time (months) [a]	1.9	9.8			
		95% CI	(1.5, 5.6)	(5.1, NE)			
		Log-rank p-value (Unstratified) [b]			0.0036		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			2.063		
		95% CI for Hazard Ratio			(1.247, 3.412)		
		P-value of Subgroup*Treatment Interaction [d]			0.6317		
		Financial Difficulties	≤ 12 Months	Number of Patients	95	97	
				Patients With Events (%)	20 ( 21.1)	25 ( 25.8)	
				Patients Without Events (Censored) (%)	75 ( 78.9)	72 ( 74.2)	
Median Time (months) [a]	NE			NE			
95% CI	(NE, NE)			(6.7, NE)			
Log-rank p-value (Unstratified) [b]					0.0990		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.611		
95% CI for Hazard Ratio					(0.338, 1.104)		
	> 12 Months			Number of Patients	71	61	
				Patients With Events (%)	23 ( 32.4)	6 ( 9.8)	
				Patients Without Events (Censored) (%)	48 ( 67.6)	55 ( 90.2)	
				Median Time (months) [a]	18.2	NE	
		95% CI	(5.4, NE)	(NE, NE)			
		Log-rank p-value (Unstratified) [b]			0.0035		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			3.498		
		95% CI for Hazard Ratio			(1.421, 8.610)		
		P-value of Subgroup*Treatment Interaction [d]			0.0013		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.8  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Prior CDK inhibitor treatment duration  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Summary Score	≤ 12 Months	Number of Patients	98	100	
		Patients With Events (%)	45 ( 45.9)	50 ( 50.0)	
Patients Without Events (Censored) (%)		53 ( 54.1)	50 ( 50.0)		
Median Time (months) [a]		6.7	4.4		
95% CI		(3.9, NE)	(3.0, 8.2)		
Log-rank p-value (Unstratified) [b]				0.0954	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)				0.711	
95% CI for Hazard Ratio				(0.474, 1.066)	
		> 12 Months	Number of Patients	73	63
Patients With Events (%)	40 ( 54.8)		28 ( 44.4)		
Patients Without Events (Censored) (%)	33 ( 45.2)		35 ( 55.6)		
Median Time (months) [a]	4.9		8.2		
95% CI	(2.1, 8.3)		(2.9, 12.7)		
Log-rank p-value (Unstratified) [b]				0.4580	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)				1.201	
95% CI for Hazard Ratio				(0.738, 1.953)	
			P-value of Subgroup*Treatment Interaction [d]		0.0966

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Global Health Status / QoL	Yes	Number of Patients	12	9	
		Patients With Events (%)	6 ( 50.0)	3 ( 33.3)	
		Patients Without Events (Censored) (%)	6 ( 50.0)	6 ( 66.7)	
		Median Time (months) [a]	6.1	NE	
		95% CI	(0.7, NE)	(0.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.7605
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.249	
	95% CI for Hazard Ratio			(0.296, 5.276)	
	No	Number of Patients	154	152	
		Patients With Events (%)	84 ( 54.5)	98 ( 64.5)	
		Patients Without Events (Censored) (%)	70 ( 45.5)	54 ( 35.5)	
		Median Time (months) [a]	4.9	2.5	
		95% CI	(2.9, 6.7)	(1.9, 3.3)	
Log-rank p-value (Unstratified) [b]				0.0045	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.657		
95% CI for Hazard Ratio			(0.490, 0.881)		
		P-value of Subgroup*Treatment Interaction [d]		0.4726	
Physical Functioning	Yes	Number of Patients	12	9	
		Patients With Events (%)	5 ( 41.7)	3 ( 33.3)	
		Patients Without Events (Censored) (%)	7 ( 58.3)	6 ( 66.7)	
		Median Time (months) [a]	7.1	NE	
		95% CI	(1.7, NE)	(0.8, NE)	
	Log-rank p-value (Unstratified) [b]			0.5327	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.616	
	95% CI for Hazard Ratio			(0.133, 2.856)	

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Role Functioning	No	Number of Patients	155	152			
		Patients With Events (%)	78 ( 50.3)	81 ( 53.3)			
		Patients Without Events (Censored) (%)	77 ( 49.7)	71 ( 46.7)			
		Median Time (months) [a]	5.6	3.4			
		95% CI	(3.0, 8.3)	(2.2, 4.9)			
		Log-rank p-value (Unstratified) [b]			0.0887		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.764		
		95% CI for Hazard Ratio			(0.559, 1.045)		
		P-value of Subgroup*Treatment Interaction [d]			0.9564		
		Role Functioning	Yes	Number of Patients	12	9	
				Patients With Events (%)	8 ( 66.7)	6 ( 66.7)	
				Patients Without Events (Censored) (%)	4 ( 33.3)	3 ( 33.3)	
Median Time (months) [a]	2.2			1.4			
95% CI	(0.7, NE)			(0.8, 2.8)			
Log-rank p-value (Unstratified) [b]					0.5826		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.732		
95% CI for Hazard Ratio					(0.236, 2.265)		
Role Functioning	No			Number of Patients	152	147	
				Patients With Events (%)	96 ( 63.2)	94 ( 63.9)	
				Patients Without Events (Censored) (%)	56 ( 36.8)	53 ( 36.1)	
				Median Time (months) [a]	2.9	2.2	
		95% CI	(1.7, 4.5)	(1.4, 3.1)			
		Log-rank p-value (Unstratified) [b]			0.0861		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.781		
		95% CI for Hazard Ratio			(0.587, 1.040)		
		P-value of Subgroup*Treatment Interaction [d]			0.7487		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	Yes	Number of Patients	12	9	
		Patients With Events (%)	4 ( 33.3)	4 ( 44.4)	
		Patients Without Events (Censored) (%)	8 ( 66.7)	5 ( 55.6)	
		Median Time (months) [a]	8.9	1.8	
		95% CI	(2.4, NE)	(0.8, NE)	
		Log-rank p-value (Unstratified) [b]			0.1139
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.272	
	95% CI for Hazard Ratio			(0.049, 1.520)	
	No	Number of Patients	150	152	
		Patients With Events (%)	52 ( 34.7)	69 ( 45.4)	
		Patients Without Events (Censored) (%)	98 ( 65.3)	83 ( 54.6)	
		Median Time (months) [a]	NE	4.5	
		95% CI	(6.5, NE)	(3.4, 10.6)	
Log-rank p-value (Unstratified) [b]				0.0133	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.638		
95% CI for Hazard Ratio			(0.444, 0.915)		
		P-value of Subgroup*Treatment Interaction [d]		0.6674	
Cognitive Functioning	Yes	Number of Patients	12	9	
		Patients With Events (%)	6 ( 50.0)	5 ( 55.6)	
		Patients Without Events (Censored) (%)	6 ( 50.0)	4 ( 44.4)	
		Median Time (months) [a]	7.6	1.4	
		95% CI	(1.1, NE)	(0.7, NE)	
	Log-rank p-value (Unstratified) [b]			0.1570	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.405	
	95% CI for Hazard Ratio			(0.112, 1.470)	

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	No	Number of Patients	155	152			
		Patients With Events (%)	73 ( 47.1)	60 ( 39.5)			
		Patients Without Events (Censored) (%)	82 ( 52.9)	92 ( 60.5)			
		Median Time (months) [a]	5.2	7.2			
		95% CI	(3.2, 18.2)	(4.3, NE)			
		Log-rank p-value (Unstratified) [b]			0.7932		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.047		
		95% CI for Hazard Ratio			(0.742, 1.478)		
		P-value of Subgroup*Treatment Interaction [d]			0.1842		
		Social Functioning	Yes	Number of Patients	12	9	
				Patients With Events (%)	5 ( 41.7)	4 ( 44.4)	
				Patients Without Events (Censored) (%)	7 ( 58.3)	5 ( 55.6)	
Median Time (months) [a]	8.2			NE			
95% CI	(1.6, NE)			(0.8, NE)			
Log-rank p-value (Unstratified) [b]					0.3403		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)				0.513			
95% CI for Hazard Ratio				(0.127, 2.072)			
No	Number of Patients		151	145			
	Patients With Events (%)		89 ( 58.9)	82 ( 56.6)			
	Patients Without Events (Censored) (%)		62 ( 41.1)	63 ( 43.4)			
	Median Time (months) [a]		2.3	3.1			
	95% CI	(1.7, 4.3)	(2.4, 4.2)				
	Log-rank p-value (Unstratified) [b]			0.9975			
	Unstratified Cox Regression Analysis [c]						
Hazard Ratio (Relative to TPC)			1.000				
95% CI for Hazard Ratio			(0.740, 1.352)				
P-value of Subgroup*Treatment Interaction [d]			0.4688				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	Yes	Number of Patients	12	9	
		Patients With Events (%)	8 ( 66.7)	8 ( 88.9)	
		Patients Without Events (Censored) (%)	4 ( 33.3)	1 ( 11.1)	
		Median Time (months) [a]	1.7	0.9	
		95% CI	(0.7, NE)	(0.7, 1.8)	
		Log-rank p-value (Unstratified) [b]			0.1783
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.520	
	95% CI for Hazard Ratio			(0.192, 1.411)	
	No	Number of Patients	153	150	
		Patients With Events (%)	108 ( 70.6)	113 ( 75.3)	
		Patients Without Events (Censored) (%)	45 ( 29.4)	37 ( 24.7)	
		Median Time (months) [a]	2.2	1.3	
		95% CI	(1.5, 2.9)	(1.0, 1.9)	
Log-rank p-value (Unstratified) [b]				0.0064	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.695		
95% CI for Hazard Ratio			(0.533, 0.908)		
		P-value of Subgroup*Treatment Interaction [d]		0.4452	
Nausea and Vomiting	Yes	Number of Patients	12	9	
		Patients With Events (%)	6 ( 50.0)	4 ( 44.4)	
		Patients Without Events (Censored) (%)	6 ( 50.0)	5 ( 55.6)	
		Median Time (months) [a]	NE	NE	
		95% CI	(0.7, NE)	(0.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.7041
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.778		
95% CI for Hazard Ratio			(0.211, 2.866)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Pain	No	Number of Patients	154	153			
		Patients With Events (%)	96 ( 62.3)	70 ( 45.8)			
		Patients Without Events (Censored) (%)	58 ( 37.7)	83 ( 54.2)			
		Median Time (months) [a]	2.1	6.1			
		95% CI	(1.5, 3.9)	(2.9, 9.6)			
		Log-rank p-value (Unstratified) [b]			0.0501		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.357		
		95% CI for Hazard Ratio			(0.995, 1.850)		
		P-value of Subgroup*Treatment Interaction [d]			0.3398		
		Pain	Yes	Number of Patients	11	9	
				Patients With Events (%)	5 ( 45.5)	4 ( 44.4)	
				Patients Without Events (Censored) (%)	6 ( 54.5)	5 ( 55.6)	
Median Time (months) [a]	6.1			2.3			
95% CI	(0.7, NE)			(0.9, NE)			
Log-rank p-value (Unstratified) [b]					0.8488		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.873		
95% CI for Hazard Ratio					(0.216, 3.524)		
Pain	No			Number of Patients	151	147	
				Patients With Events (%)	84 ( 55.6)	85 ( 57.8)	
				Patients Without Events (Censored) (%)	67 ( 44.4)	62 ( 42.2)	
				Median Time (months) [a]	4.0	3.1	
		95% CI	(2.8, 6.1)	(2.2, 4.3)			
		Log-rank p-value (Unstratified) [b]			0.1439		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.800		
		95% CI for Hazard Ratio			(0.591, 1.083)		
		P-value of Subgroup*Treatment Interaction [d]			0.9573		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	Yes	Number of Patients	12	8	
		Patients With Events (%)	4 ( 33.3)	2 ( 25.0)	
		Patients Without Events (Censored) (%)	8 ( 66.7)	6 ( 75.0)	
		Median Time (months) [a]	NE	NE	
		95% CI	(0.9, NE)	(0.8, NE)	
		Log-rank p-value (Unstratified) [b]			0.9848
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.983	
	95% CI for Hazard Ratio			(0.174, 5.557)	
	No	Number of Patients	151	150	
		Patients With Events (%)	71 ( 47.0)	80 ( 53.3)	
		Patients Without Events (Censored) (%)	80 ( 53.0)	70 ( 46.7)	
		Median Time (months) [a]	6.6	3.9	
		95% CI	(4.3, 9.5)	(2.4, 7.5)	
Log-rank p-value (Unstratified) [b]				0.0284	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.699		
95% CI for Hazard Ratio			(0.506, 0.966)		
		P-value of Subgroup*Treatment Interaction [d]		0.9230	
Insomnia	Yes	Number of Patients	11	7	
		Patients With Events (%)	7 ( 63.6)	5 ( 71.4)	
		Patients Without Events (Censored) (%)	4 ( 36.4)	2 ( 28.6)	
		Median Time (months) [a]	3.7	1.4	
		95% CI	(0.7, NE)	(0.8, NE)	
		Log-rank p-value (Unstratified) [b]			0.2325
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.458		
95% CI for Hazard Ratio			(0.122, 1.728)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	No	Number of Patients	142	141			
		Patients With Events (%)	57 ( 40.1)	63 ( 44.7)			
		Patients Without Events (Censored) (%)	85 ( 59.9)	78 ( 55.3)			
		Median Time (months) [a]	8.7	3.9			
		95% CI	(6.0, NE)	(2.6, NE)			
		Log-rank p-value (Unstratified) [b]			0.0294		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.672		
		95% CI for Hazard Ratio			(0.468, 0.966)		
		P-value of Subgroup*Treatment Interaction [d]			0.5432		
		Appetite Loss	Yes	Number of Patients	11	9	
				Patients With Events (%)	6 ( 54.5)	4 ( 44.4)	
				Patients Without Events (Censored) (%)	5 ( 45.5)	5 ( 55.6)	
Median Time (months) [a]	0.9			3.7			
95% CI	(0.7, NE)			(0.7, NE)			
Log-rank p-value (Unstratified) [b]					0.5988		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.392		
95% CI for Hazard Ratio					(0.392, 4.948)		
	No			Number of Patients	150	144	
				Patients With Events (%)	85 ( 56.7)	72 ( 50.0)	
				Patients Without Events (Censored) (%)	65 ( 43.3)	72 ( 50.0)	
				Median Time (months) [a]	4.3	3.7	
		95% CI	(1.8, 6.0)	(2.2, 5.6)			
		Log-rank p-value (Unstratified) [b]			0.8773		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.025		
		95% CI for Hazard Ratio			(0.748, 1.405)		
		P-value of Subgroup*Treatment Interaction [d]			0.8329		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	Yes	Number of Patients	12	9	
		Patients With Events (%)	7 ( 58.3)	7 ( 77.8)	
		Patients Without Events (Censored) (%)	5 ( 41.7)	2 ( 22.2)	
		Median Time (months) [a]	5.8	1.5	
		95% CI	(0.8, NE)	(0.7, 3.1)	
		Log-rank p-value (Unstratified) [b]			0.1279
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.435	
	95% CI for Hazard Ratio			(0.144, 1.320)	
	No	Number of Patients	151	146	
		Patients With Events (%)	72 ( 47.7)	62 ( 42.5)	
		Patients Without Events (Censored) (%)	79 ( 52.3)	84 ( 57.5)	
		Median Time (months) [a]	5.4	4.9	
		95% CI	(3.2, 14.4)	(3.5, NE)	
Log-rank p-value (Unstratified) [b]				0.7103	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.066		
95% CI for Hazard Ratio			(0.759, 1.498)		
		P-value of Subgroup*Treatment Interaction [d]		0.1281	
Diarrhea	Yes	Number of Patients	12	9	
		Patients With Events (%)	5 ( 41.7)	3 ( 33.3)	
		Patients Without Events (Censored) (%)	7 ( 58.3)	6 ( 66.7)	
		Median Time (months) [a]	NE	3.5	
		95% CI	(0.7, NE)	(0.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.9855
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.987		
95% CI for Hazard Ratio			(0.228, 4.262)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	No	Number of Patients	154	152			
		Patients With Events (%)	95 ( 61.7)	52 ( 34.2)			
		Patients Without Events (Censored) (%)	59 ( 38.3)	100 ( 65.8)			
		Median Time (months) [a]	1.9	8.2			
		95% CI	(1.5, 3.2)	(5.8, NE)			
		Log-rank p-value (Unstratified) [b]			<.0001		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			2.355		
		95% CI for Hazard Ratio			(1.677, 3.307)		
		P-value of Subgroup*Treatment Interaction [d]			0.1980		
		Financial Difficulties Yes		Number of Patients	12	9	
				Patients With Events (%)	3 ( 25.0)	2 ( 22.2)	
				Patients Without Events (Censored) (%)	9 ( 75.0)	7 ( 77.8)	
Median Time (months) [a]	NE			NE			
95% CI	(1.1, NE)			(0.9, NE)			
Log-rank p-value (Unstratified) [b]					0.8243		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.813		
95% CI for Hazard Ratio					(0.131, 5.064)		
No				Number of Patients	150	148	
				Patients With Events (%)	38 ( 25.3)	29 ( 19.6)	
				Patients Without Events (Censored) (%)	112 ( 74.7)	119 ( 80.4)	
				Median Time (months) [a]	NE	NE	
		95% CI	(18.2, NE)	(NE, NE)			
		Log-rank p-value (Unstratified) [b]			0.5832		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.145		
		95% CI for Hazard Ratio			(0.705, 1.861)		
		P-value of Subgroup*Treatment Interaction [d]			0.5084		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.9  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Early relapse  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison	
Summary Score	Yes	Number of Patients	12	9		
		Patients With Events (%)	6 ( 50.0)	3 ( 33.3)		
		Patients Without Events (Censored) (%)	6 ( 50.0)	6 ( 66.7)		
		Median Time (months) [a]	NE	NE		
		95% CI	(0.7, NE)	(0.8, NE)		
		Log-rank p-value (Unstratified) [b]			0.6830	
		Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.337		
	95% CI for Hazard Ratio			(0.328, 5.454)		
	No		Number of Patients	155	153	
			Patients With Events (%)	74 ( 47.7)	74 ( 48.4)	
			Patients Without Events (Censored) (%)	81 ( 52.3)	79 ( 51.6)	
			Median Time (months) [a]	5.9	4.9	
			95% CI	(4.2, 9.2)	(3.1, 8.2)	
			Log-rank p-value (Unstratified) [b]			0.2419
			Unstratified Cox Regression Analysis [c]			
			Hazard Ratio (Relative to TPC)			0.825
95% CI for Hazard Ratio					(0.597, 1.141)	
P-value of Subgroup*Treatment Interaction [d]					0.6951	

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Global Health Status / Yes QoL		Number of Patients	102	107			
		Patients With Events (%)	56 ( 54.9)	67 ( 62.6)			
		Patients Without Events (Censored) (%)	46 ( 45.1)	40 ( 37.4)			
		Median Time (months) [a]	5.6	2.6			
		95% CI	(3.7, 8.0)	(1.5, 4.2)			
		Log-rank p-value (Unstratified) [b]			0.0071		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.614		
		95% CI for Hazard Ratio			(0.428, 0.881)		
			No	Number of Patients	71	57	
				Patients With Events (%)	39 ( 54.9)	36 ( 63.2)	
				Patients Without Events (Censored) (%)	32 ( 45.1)	21 ( 36.8)	
				Median Time (months) [a]	2.9	2.8	
				95% CI	(1.6, 9.1)	(1.9, 3.9)	
		Log-rank p-value (Unstratified) [b]			0.2749		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.778		
		95% CI for Hazard Ratio			(0.494, 1.225)		
		P-value of Subgroup*Treatment Interaction [d]			0.4932		
Physical Functioning	Yes	Number of Patients	103	106			
		Patients With Events (%)	54 ( 52.4)	56 ( 52.8)			
		Patients Without Events (Censored) (%)	49 ( 47.6)	50 ( 47.2)			
		Median Time (months) [a]	5.5	3.5			
		95% CI	(3.0, 8.3)	(2.7, 6.2)			
		Log-rank p-value (Unstratified) [b]			0.2264		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.794		
		95% CI for Hazard Ratio			(0.545, 1.157)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Role Functioning	No	Number of Patients	71	58			
		Patients With Events (%)	34 ( 47.9)	31 ( 53.4)			
		Patients Without Events (Censored) (%)	37 ( 52.1)	27 ( 46.6)			
		Median Time (months) [a]	5.6	2.2			
		95% CI	(2.3, NE)	(1.9, 7.3)			
		Log-rank p-value (Unstratified) [b]			0.1077		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.672		
		95% CI for Hazard Ratio			(0.411, 1.099)		
		P-value of Subgroup*Treatment Interaction [d]			0.4411		
		Role Functioning	Yes	Number of Patients	102	104	
				Patients With Events (%)	68 ( 66.7)	73 ( 70.2)	
				Patients Without Events (Censored) (%)	34 ( 33.3)	31 ( 29.8)	
Median Time (months) [a]	2.8			1.9			
95% CI	(1.7, 4.5)			(1.4, 2.8)			
Log-rank p-value (Unstratified) [b]					0.0155		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.664		
95% CI for Hazard Ratio					(0.474, 0.930)		
Role Functioning	No			Number of Patients	69	55	
				Patients With Events (%)	43 ( 62.3)	29 ( 52.7)	
				Patients Without Events (Censored) (%)	26 ( 37.7)	26 ( 47.3)	
				Median Time (months) [a]	2.3	4.3	
		95% CI	(1.5, 5.0)	(1.4, 12.7)			
		Log-rank p-value (Unstratified) [b]			0.7532		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.077		
		95% CI for Hazard Ratio			(0.673, 1.726)		
		P-value of Subgroup*Treatment Interaction [d]			0.1432		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	Yes	Number of Patients	100	106	
		Patients With Events (%)	36 ( 36.0)	54 ( 50.9)	
		Patients Without Events (Censored) (%)	64 ( 64.0)	52 ( 49.1)	
		Median Time (months) [a]	NE	4.2	
		95% CI	(5.5, NE)	(3.1, 5.3)	
		Log-rank p-value (Unstratified) [b]			0.0062
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.559	
	95% CI for Hazard Ratio			(0.366, 0.854)	
	No	Number of Patients	69	58	
		Patients With Events (%)	25 ( 36.2)	21 ( 36.2)	
		Patients Without Events (Censored) (%)	44 ( 63.8)	37 ( 63.8)	
		Median Time (months) [a]	12.8	10.6	
		95% CI	(4.2, NE)	(3.0, NE)	
Log-rank p-value (Unstratified) [b]				0.6223	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.865		
95% CI for Hazard Ratio			(0.484, 1.546)		
		P-value of Subgroup*Treatment Interaction [d]		0.2336	
Cognitive Functioning	Yes	Number of Patients	103	107	
		Patients With Events (%)	52 ( 50.5)	49 ( 45.8)	
		Patients Without Events (Censored) (%)	51 ( 49.5)	58 ( 54.2)	
		Median Time (months) [a]	5.2	4.3	
		95% CI	(2.5, 11.1)	(3.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.8091
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.953		
95% CI for Hazard Ratio			(0.644, 1.411)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	No	Number of Patients	71	57	
		Patients With Events (%)	34 ( 47.9)	18 ( 31.6)	
		Patients Without Events (Censored) (%)	37 ( 52.1)	39 ( 68.4)	
		Median Time (months) [a]	5.0	10.6	
		95% CI	(2.8, 18.8)	(4.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.3889
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.287
		95% CI for Hazard Ratio			(0.722, 2.296)
		P-value of Subgroup*Treatment Interaction [d]			0.3219
Social Functioning	Yes	Number of Patients	101	101	
		Patients With Events (%)	61 ( 60.4)	61 ( 60.4)	
		Patients Without Events (Censored) (%)	40 ( 39.6)	40 ( 39.6)	
		Median Time (months) [a]	2.4	3.1	
		95% CI	(1.7, 4.3)	(2.4, 4.3)	
	Log-rank p-value (Unstratified) [b]			0.6731	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.926	
	95% CI for Hazard Ratio			(0.647, 1.326)	
	No	Number of Patients	69	56	
Patients With Events (%)		40 ( 58.0)	27 ( 48.2)		
Patients Without Events (Censored) (%)		29 ( 42.0)	29 ( 51.8)		
Median Time (months) [a]		2.4	3.6		
95% CI		(1.4, 8.1)	(1.8, NE)		
Log-rank p-value (Unstratified) [b]			0.6510		
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.118		
95% CI for Hazard Ratio			(0.685, 1.824)		
P-value of Subgroup*Treatment Interaction [d]			0.6943		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	Yes	Number of Patients	102	105	
		Patients With Events (%)	73 ( 71.6)	83 ( 79.0)	
		Patients Without Events (Censored) (%)	29 ( 28.4)	22 ( 21.0)	
		Median Time (months) [a]	1.9	1.3	
		95% CI	(1.5, 2.6)	(1.0, 1.9)	
		Log-rank p-value (Unstratified) [b]			0.0244
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.698	
	95% CI for Hazard Ratio			(0.508, 0.961)	
	No	Number of Patients	70	57	
		Patients With Events (%)	48 ( 68.6)	41 ( 71.9)	
		Patients Without Events (Censored) (%)	22 ( 31.4)	16 ( 28.1)	
		Median Time (months) [a]	2.4	1.1	
		95% CI	(1.2, 3.9)	(0.9, 2.1)	
Log-rank p-value (Unstratified) [b]				0.0813	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.694		
95% CI for Hazard Ratio			(0.455, 1.058)		
		P-value of Subgroup*Treatment Interaction [d]		0.9586	
Nausea and Vomiting	Yes	Number of Patients	102	107	
		Patients With Events (%)	61 ( 59.8)	53 ( 49.5)	
		Patients Without Events (Censored) (%)	41 ( 40.2)	54 ( 50.5)	
		Median Time (months) [a]	2.6	3.7	
		95% CI	(1.5, 5.6)	(2.8, 7.4)	
	Log-rank p-value (Unstratified) [b]			0.6534	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.088	
	95% CI for Hazard Ratio			(0.749, 1.581)	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	No	Number of Patients	71	58			
		Patients With Events (%)	45 ( 63.4)	24 ( 41.4)			
		Patients Without Events (Censored) (%)	26 ( 36.6)	34 ( 58.6)			
		Median Time (months) [a]	2.0	9.6			
		95% CI	(1.4, 4.1)	(2.3, 12.7)			
		Log-rank p-value (Unstratified) [b]			0.0394		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.664		
		95% CI for Hazard Ratio			(1.011, 2.737)		
		P-value of Subgroup*Treatment Interaction [d]			0.1696		
		Pain	Yes	Number of Patients	98	102	
				Patients With Events (%)	53 ( 54.1)	65 ( 63.7)	
				Patients Without Events (Censored) (%)	45 ( 45.9)	37 ( 36.3)	
Median Time (months) [a]	5.5			2.6			
95% CI	(2.4, 7.3)			(1.7, 3.4)			
Log-rank p-value (Unstratified) [b]					0.0210		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.653		
95% CI for Hazard Ratio					(0.452, 0.943)		
	No			Number of Patients	71	57	
				Patients With Events (%)	42 ( 59.2)	25 ( 43.9)	
				Patients Without Events (Censored) (%)	29 ( 40.8)	32 ( 56.1)	
				Median Time (months) [a]	3.7	6.3	
		95% CI	(2.8, 6.1)	(2.8, 12.6)			
		Log-rank p-value (Unstratified) [b]			0.1677		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.413		
		95% CI for Hazard Ratio			(0.859, 2.324)		
		P-value of Subgroup*Treatment Interaction [d]			0.0161		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	Yes	Number of Patients	101	104	
		Patients With Events (%)	45 ( 44.6)	55 ( 52.9)	
		Patients Without Events (Censored) (%)	56 ( 55.4)	49 ( 47.1)	
		Median Time (months) [a]	6.7	3.1	
		95% CI	(4.6, 9.5)	(2.0, 7.7)	
		Log-rank p-value (Unstratified) [b]			0.0119
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.604	
	95% CI for Hazard Ratio			(0.406, 0.900)	
	No	Number of Patients	69	57	
		Patients With Events (%)	33 ( 47.8)	29 ( 50.9)	
		Patients Without Events (Censored) (%)	36 ( 52.2)	28 ( 49.1)	
		Median Time (months) [a]	5.0	4.5	
		95% CI	(2.9, NE)	(2.1, 8.2)	
Log-rank p-value (Unstratified) [b]				0.4765	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.834		
95% CI for Hazard Ratio			(0.503, 1.381)		
		P-value of Subgroup*Treatment Interaction [d]		0.3671	
Insomnia	Yes	Number of Patients	97	97	
		Patients With Events (%)	49 ( 50.5)	46 ( 47.4)	
		Patients Without Events (Censored) (%)	48 ( 49.5)	51 ( 52.6)	
		Median Time (months) [a]	6.3	3.5	
		95% CI	(4.0, 12.5)	(2.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.2881
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.803		
95% CI for Hazard Ratio			(0.533, 1.209)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	No	Number of Patients	63	53	
		Patients With Events (%)	19 ( 30.2)	23 ( 43.4)	
		Patients Without Events (Censored) (%)	44 ( 69.8)	30 ( 56.6)	
		Median Time (months) [a]	18.2	3.9	
		95% CI	(6.0, NE)	(2.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.0161
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.481
		95% CI for Hazard Ratio			(0.260, 0.889)
		P-value of Subgroup*Treatment Interaction [d]			0.1330
		Appetite Loss	Yes	Number of Patients	98
Patients With Events (%)	58 ( 59.2)			54 ( 52.9)	
Patients Without Events (Censored) (%)	40 ( 40.8)			48 ( 47.1)	
Median Time (months) [a]	2.9			3.5	
95% CI	(1.7, 6.0)			(2.1, 5.3)	
Log-rank p-value (Unstratified) [b]					0.9931
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)					0.998
95% CI for Hazard Ratio					(0.687, 1.451)
P-value of Subgroup*Treatment Interaction [d]					0.1330
	No			Number of Patients	69
		Patients With Events (%)	39 ( 56.5)	24 ( 44.4)	
		Patients Without Events (Censored) (%)	30 ( 43.5)	30 ( 55.6)	
		Median Time (months) [a]	4.4	4.9	
		95% CI	(1.7, 9.1)	(2.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.4289
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.226
		95% CI for Hazard Ratio			(0.735, 2.046)
		P-value of Subgroup*Treatment Interaction [d]			0.4945

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	Yes	Number of Patients	99	104	
		Patients With Events (%)	48 ( 48.5)	50 ( 48.1)	
		Patients Without Events (Censored) (%)	51 ( 51.5)	54 ( 51.9)	
		Median Time (months) [a]	5.6	4.6	
		95% CI	(3.2, 14.4)	(3.1, 6.7)	
		Log-rank p-value (Unstratified) [b]			0.6416
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.910	
	95% CI for Hazard Ratio			(0.611, 1.356)	
	No	Number of Patients	71	54	
		Patients With Events (%)	35 ( 49.3)	20 ( 37.0)	
		Patients Without Events (Censored) (%)	36 ( 50.7)	34 ( 63.0)	
		Median Time (months) [a]	3.8	8.2	
		95% CI	(2.1, NE)	(3.0, NE)	
Log-rank p-value (Unstratified) [b]				0.3645	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			1.287		
95% CI for Hazard Ratio			(0.743, 2.229)		
		P-value of Subgroup*Treatment Interaction [d]		0.3626	
Diarrhea	Yes	Number of Patients	101	106	
		Patients With Events (%)	60 ( 59.4)	40 ( 37.7)	
		Patients Without Events (Censored) (%)	41 ( 40.6)	66 ( 62.3)	
		Median Time (months) [a]	2.1	7.7	
		95% CI	(1.5, 4.4)	(5.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.0008
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.952		
95% CI for Hazard Ratio			(1.307, 2.914)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
	No	Number of Patients	71	58	
		Patients With Events (%)	44 ( 62.0)	15 ( 25.9)	
		Patients Without Events (Censored) (%)	27 ( 38.0)	43 ( 74.1)	
		Median Time (months) [a]	2.0	NE	
		95% CI	(1.4, 3.4)	(5.9, NE)	
		Log-rank p-value (Unstratified) [b]			0.0001
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			3.076
		95% CI for Hazard Ratio			(1.704, 5.553)
		P-value of Subgroup*Treatment Interaction [d]			0.1799
Financial Difficulties Yes		Number of Patients	100	102	
		Patients With Events (%)	28 ( 28.0)	22 ( 21.6)	
		Patients Without Events (Censored) (%)	72 ( 72.0)	80 ( 78.4)	
		Median Time (months) [a]	NE	NE	
		95% CI	(7.2, NE)	(8.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.6483
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.139
		95% CI for Hazard Ratio			(0.650, 1.995)
			No	Number of Patients	69
Patients With Events (%)	15 ( 21.7)			9 ( 15.8)	
Patients Without Events (Censored) (%)	54 ( 78.3)			48 ( 84.2)	
Median Time (months) [a]	NE			NE	
95% CI	(18.2, NE)			(NE, NE)	
Log-rank p-value (Unstratified) [b]					0.7176
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)					1.165
95% CI for Hazard Ratio					(0.508, 2.669)
P-value of Subgroup*Treatment Interaction [d]					0.9712

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.10  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Chemotherapy in neo/adjuvant setting  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison	
Summary Score	Yes	Number of Patients	103	107		
		Patients With Events (%)	48 ( 46.6)	58 ( 54.2)		
		Patients Without Events (Censored) (%)	55 ( 53.4)	49 ( 45.8)		
		Median Time (months) [a]	6.6	3.7		
		95% CI	(4.3, 23.6)	(2.8, 5.3)		
		Log-rank p-value (Unstratified) [b]			0.0310	
		Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.655		
	95% CI for Hazard Ratio			(0.444, 0.966)		
	No	Number of Patients		71	58	
			Patients With Events (%)	37 ( 52.1)	21 ( 36.2)	
		Patients Without Events (Censored) (%)	34 ( 47.9)	37 ( 63.8)		
		Median Time (months) [a]	3.9	9.9		
		95% CI	(2.9, 9.2)	(8.2, 12.7)		
		Log-rank p-value (Unstratified) [b]			0.1950	
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			1.423	
95% CI for Hazard Ratio				(0.830, 2.438)		
P-value of Subgroup*Treatment Interaction [d]				0.0223		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Global Health Status / QoL	<100	Number of Patients	59	61			
		Patients With Events (%)	33 ( 55.9)	41 ( 67.2)			
		Patients Without Events (Censored) (%)	26 ( 44.1)	20 ( 32.8)			
		Median Time (months) [a]	4.3	2.7			
		95% CI	(1.7, 8.0)	(1.8, 4.6)			
		Log-rank p-value (Unstratified) [b]			0.1930		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.739		
		95% CI for Hazard Ratio			(0.466, 1.171)		
			>100 to ≤200	Number of Patients	58	58	
				Patients With Events (%)	31 ( 53.4)	31 ( 53.4)	
				Patients Without Events (Censored) (%)	27 ( 46.6)	27 ( 46.6)	
				Median Time (months) [a]	4.9	3.0	
				95% CI	(2.6, 8.1)	(2.2, 5.1)	
				Log-rank p-value (Unstratified) [b]			0.2348
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.739		
		95% CI for Hazard Ratio			(0.446, 1.224)		
	>200	Number of Patients	34	25			
		Patients With Events (%)	20 ( 58.8)	18 ( 72.0)			
		Patients Without Events (Censored) (%)	14 ( 41.2)	7 ( 28.0)			
		Median Time (months) [a]	6.7	1.7			
		95% CI	(2.0, 10.6)	(1.0, 4.2)			
		Log-rank p-value (Unstratified) [b]			0.0597		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.543		
		95% CI for Hazard Ratio			(0.284, 1.038)		
		P-value of Subgroup*Treatment Interaction [d]			0.6792		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Physical Functioning	<100	Number of Patients	60	61	
		Patients With Events (%)	33 ( 55.0)	33 ( 54.1)	
		Patients Without Events (Censored) (%)	27 ( 45.0)	28 ( 45.9)	
		Median Time (months) [a]	3.1	4.6	
		95% CI	(2.1, 10.3)	(2.2, 7.3)	
		Log-rank p-value (Unstratified) [b]			0.8138
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.944
		95% CI for Hazard Ratio			(0.582, 1.530)
	>100 to ≤200	Number of Patients	58	58	
		Patients With Events (%)	25 ( 43.1)	31 ( 53.4)	
		Patients Without Events (Censored) (%)	33 ( 56.9)	27 ( 46.6)	
		Median Time (months) [a]	6.7	2.7	
		95% CI	(3.0, NE)	(1.9, 3.7)	
		Log-rank p-value (Unstratified) [b]			0.0133
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.509
		95% CI for Hazard Ratio			(0.294, 0.879)
>200	Number of Patients	34	25		
	Patients With Events (%)	21 ( 61.8)	14 ( 56.0)		
	Patients Without Events (Censored) (%)	13 ( 38.2)	11 ( 44.0)		
	Median Time (months) [a]	4.0	3.4		
	95% CI	(1.7, 13.1)	(1.4, NE)		
	Log-rank p-value (Unstratified) [b]			0.7311	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.888	
	95% CI for Hazard Ratio			(0.450, 1.753)	
P-value of Subgroup*Treatment Interaction [d]					0.2255

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Role Functioning	<100	Number of Patients	58	60	
		Patients With Events (%)	36 ( 62.1)	39 ( 65.0)	
		Patients Without Events (Censored) (%)	22 ( 37.9)	21 ( 35.0)	
		Median Time (months) [a]	2.8	2.1	
		95% CI	(1.7, 5.0)	(1.3, 4.9)	
		Log-rank p-value (Unstratified) [b]			0.3803
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.818
		95% CI for Hazard Ratio			(0.519, 1.288)
	>100 to ≤200	Number of Patients	58	55	
		Patients With Events (%)	37 ( 63.8)	33 ( 60.0)	
		Patients Without Events (Censored) (%)	21 ( 36.2)	22 ( 40.0)	
		Median Time (months) [a]	4.2	2.2	
		95% CI	(1.8, 6.1)	(1.4, 3.0)	
		Log-rank p-value (Unstratified) [b]			0.0551
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.623
		95% CI for Hazard Ratio			(0.381, 1.020)
>200	Number of Patients	34	24		
	Patients With Events (%)	26 ( 76.5)	17 ( 70.8)		
	Patients Without Events (Censored) (%)	8 ( 23.5)	7 ( 29.2)		
	Median Time (months) [a]	1.5	2.2		
	95% CI	(1.1, 2.9)	(1.0, 3.4)		
	Log-rank p-value (Unstratified) [b]			0.8193	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.073	
	95% CI for Hazard Ratio			(0.581, 1.982)	
		P-value of Subgroup*Treatment Interaction [d]		0.5602	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	<100	Number of Patients	59	60	
		Patients With Events (%)	20 ( 33.9)	27 ( 45.0)	
		Patients Without Events (Censored) (%)	39 ( 66.1)	33 ( 55.0)	
		Median Time (months) [a]	8.9	4.5	
		95% CI	(4.7, NE)	(3.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.1237
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.637
		95% CI for Hazard Ratio			(0.357, 1.138)
	>100 to ≤200	Number of Patients	56	59	
		Patients With Events (%)	21 ( 37.5)	28 ( 47.5)	
		Patients Without Events (Censored) (%)	35 ( 62.5)	31 ( 52.5)	
		Median Time (months) [a]	7.2	3.9	
		95% CI	(4.5, NE)	(1.8, 7.2)	
		Log-rank p-value (Unstratified) [b]			0.0431
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.561
		95% CI for Hazard Ratio			(0.317, 0.994)
>200	Number of Patients	32	25		
	Patients With Events (%)	13 ( 40.6)	10 ( 40.0)		
	Patients Without Events (Censored) (%)	19 ( 59.4)	15 ( 60.0)		
	Median Time (months) [a]	12.8	NE		
	95% CI	(2.9, NE)	(3.4, NE)		
	Log-rank p-value (Unstratified) [b]			0.8337	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.092	
	95% CI for Hazard Ratio			(0.478, 2.493)	
P-value of Subgroup*Treatment Interaction [d]					0.3885

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Cognitive Functioning	<100	Number of Patients	60	61	
		Patients With Events (%)	33 ( 55.0)	25 ( 41.0)	
		Patients Without Events (Censored) (%)	27 ( 45.0)	36 ( 59.0)	
		Median Time (months) [a]	2.6	8.2	
		95% CI	(1.7, 6.6)	(3.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.1616
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.446
		95% CI for Hazard Ratio			(0.858, 2.435)
	>100 to ≤200	Number of Patients	58	58	
		Patients With Events (%)	29 ( 50.0)	22 ( 37.9)	
		Patients Without Events (Censored) (%)	29 ( 50.0)	36 ( 62.1)	
		Median Time (months) [a]	5.6	4.3	
		95% CI	(2.3, 11.1)	(2.9, NE)	
		Log-rank p-value (Unstratified) [b]			0.7664
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.917
		95% CI for Hazard Ratio			(0.517, 1.627)
>200	Number of Patients	34	25		
	Patients With Events (%)	16 ( 47.1)	12 ( 48.0)		
	Patients Without Events (Censored) (%)	18 ( 52.9)	13 ( 52.0)		
	Median Time (months) [a]	15.2	4.3		
	95% CI	(2.8, NE)	(1.9, NE)		
	Log-rank p-value (Unstratified) [b]			0.5650	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.800	
	95% CI for Hazard Ratio			(0.373, 1.714)	
P-value of Subgroup*Treatment Interaction [d]					0.4008

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluatable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Social Functioning	<100	Number of Patients	58	60	
		Patients With Events (%)	35 ( 60.3)	35 ( 58.3)	
		Patients Without Events (Censored) (%)	23 ( 39.7)	25 ( 41.7)	
		Median Time (months) [a]	2.3	2.9	
		95% CI	(1.7, 6.0)	(1.8, 4.6)	
		Log-rank p-value (Unstratified) [b]			0.7988
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.941
		95% CI for Hazard Ratio			(0.586, 1.510)
	>100 to ≤200	Number of Patients	56	55	
		Patients With Events (%)	30 ( 53.6)	29 ( 52.7)	
		Patients Without Events (Censored) (%)	26 ( 46.4)	26 ( 47.3)	
		Median Time (months) [a]	3.1	3.7	
		95% CI	(1.7, NE)	(2.1, 4.4)	
		Log-rank p-value (Unstratified) [b]			0.5769
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.864
		95% CI for Hazard Ratio			(0.515, 1.450)
>200	Number of Patients	34	23		
	Patients With Events (%)	23 ( 67.6)	15 ( 65.2)		
	Patients Without Events (Censored) (%)	11 ( 32.4)	8 ( 34.8)		
	Median Time (months) [a]	1.7	3.6		
	95% CI	(1.1, 4.6)	(1.4, 5.8)		
	Log-rank p-value (Unstratified) [b]			0.7831	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.095	
	95% CI for Hazard Ratio			(0.570, 2.103)	
P-value of Subgroup*Treatment Interaction [d]					0.9010

Note: "EORTC QLQ-C30 Evaluatable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	<100	Number of Patients	59	61	
		Patients With Events (%)	41 ( 69.5)	48 ( 78.7)	
		Patients Without Events (Censored) (%)	18 ( 30.5)	13 ( 21.3)	
		Median Time (months) [a]	1.9	1.1	
		95% CI	(1.3, 4.2)	(0.9, 1.9)	
		Log-rank p-value (Unstratified) [b]			0.0804
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.692
		95% CI for Hazard Ratio			(0.455, 1.055)
	>100 to ≤200	Number of Patients	57	56	
		Patients With Events (%)	37 ( 64.9)	38 ( 67.9)	
		Patients Without Events (Censored) (%)	20 ( 35.1)	18 ( 32.1)	
		Median Time (months) [a]	2.3	1.1	
		95% CI	(1.3, 4.5)	(0.9, 2.2)	
		Log-rank p-value (Unstratified) [b]			0.0642
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.651
		95% CI for Hazard Ratio			(0.408, 1.037)
>200	Number of Patients	34	25		
	Patients With Events (%)	27 ( 79.4)	22 ( 88.0)		
	Patients Without Events (Censored) (%)	7 ( 20.6)	3 ( 12.0)		
	Median Time (months) [a]	1.7	1.5		
	95% CI	(1.0, 3.1)	(0.9, 2.8)		
	Log-rank p-value (Unstratified) [b]			0.3991	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.788	
	95% CI for Hazard Ratio			(0.447, 1.387)	
		P-value of Subgroup*Treatment Interaction [d]		0.8583	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Nausea and Vomiting	<100	Number of Patients	60	61	
		Patients With Events (%)	36 ( 60.0)	27 ( 44.3)	
		Patients Without Events (Censored) (%)	24 ( 40.0)	34 ( 55.7)	
		Median Time (months) [a]	2.6	7.4	
		95% CI	(1.5, 5.6)	(2.8, 12.7)	
		Log-rank p-value (Unstratified) [b]			0.1045
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.502
		95% CI for Hazard Ratio			(0.911, 2.478)
	>100 to ≤200	Number of Patients	58	59	
		Patients With Events (%)	39 ( 67.2)	24 ( 40.7)	
		Patients Without Events (Censored) (%)	19 ( 32.8)	35 ( 59.3)	
		Median Time (months) [a]	1.5	7.2	
		95% CI	(1.3, 4.7)	(1.6, NE)	
		Log-rank p-value (Unstratified) [b]			0.1247
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.485
		95% CI for Hazard Ratio			(0.887, 2.486)
>200	Number of Patients	34	25		
	Patients With Events (%)	21 ( 61.8)	18 ( 72.0)		
	Patients Without Events (Censored) (%)	13 ( 38.2)	7 ( 28.0)		
	Median Time (months) [a]	2.1	2.2		
	95% CI	(1.4, 14.4)	(1.0, 9.5)		
	Log-rank p-value (Unstratified) [b]			0.4412	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.781	
	95% CI for Hazard Ratio			(0.412, 1.479)	
P-value of Subgroup*Treatment Interaction [d]					0.2086

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead German Dossier

IMMU-132-09

Data Cutoff Date: 01JUL2022

Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Pain	<100	Number of Patients	59	61	
		Patients With Events (%)	25 ( 42.4)	33 ( 54.1)	
		Patients Without Events (Censored) (%)	34 ( 57.6)	28 ( 45.9)	
		Median Time (months) [a]	6.7	3.3	
		95% CI	(3.7, NE)	(2.2, 6.3)	
		Log-rank p-value (Unstratified) [b]			0.0728
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.622
		95% CI for Hazard Ratio			(0.367, 1.053)
	>100 to ≤200	Number of Patients	56	54	
		Patients With Events (%)	33 ( 58.9)	29 ( 53.7)	
		Patients Without Events (Censored) (%)	23 ( 41.1)	25 ( 46.3)	
		Median Time (months) [a]	3.7	2.6	
		95% CI	(1.8, 5.9)	(1.4, 8.2)	
		Log-rank p-value (Unstratified) [b]			0.4538
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.826
		95% CI for Hazard Ratio			(0.498, 1.370)
>200	Number of Patients	33	24		
	Patients With Events (%)	24 ( 72.7)	15 ( 62.5)		
	Patients Without Events (Censored) (%)	9 ( 27.3)	9 ( 37.5)		
	Median Time (months) [a]	3.6	5.7		
	95% CI	(1.4, 6.5)	(1.4, 10.3)		
	Log-rank p-value (Unstratified) [b]			0.4938	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.251	
	95% CI for Hazard Ratio			(0.656, 2.389)	
P-value of Subgroup*Treatment Interaction [d]					0.2238

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	<100	Number of Patients	58	60	
		Patients With Events (%)	26 ( 44.8)	33 ( 55.0)	
		Patients Without Events (Censored) (%)	32 ( 55.2)	27 ( 45.0)	
		Median Time (months) [a]	6.6	5.6	
		95% CI	(4.3, 9.5)	(1.7, 8.2)	
		Log-rank p-value (Unstratified) [b]			0.1019
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.654
		95% CI for Hazard Ratio			(0.390, 1.096)
		>100 to ≤200	Number of Patients	57	57
	Patients With Events (%)	25 ( 43.9)	31 ( 54.4)		
	Patients Without Events (Censored) (%)	32 ( 56.1)	26 ( 45.6)		
	Median Time (months) [a]	5.9	3.0		
	95% CI	(3.1, NE)	(1.5, 3.9)		
	Log-rank p-value (Unstratified) [b]			0.0361	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.571		
95% CI for Hazard Ratio			(0.335, 0.973)		
>200	Number of Patients	34	25		
Patients With Events (%)	16 ( 47.1)	12 ( 48.0)			
Patients Without Events (Censored) (%)	18 ( 52.9)	13 ( 52.0)			
Median Time (months) [a]	14.4	4.5			
95% CI	(1.2, 18.2)	(1.7, NE)			
Log-rank p-value (Unstratified) [b]			0.7774		
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.896		
95% CI for Hazard Ratio			(0.417, 1.925)		
	P-value of Subgroup*Treatment Interaction [d]			0.5841	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Insomnia	<100	Number of Patients	55	59	
		Patients With Events (%)	25 ( 45.5)	26 ( 44.1)	
		Patients Without Events (Censored) (%)	30 ( 54.5)	33 ( 55.9)	
		Median Time (months) [a]	6.6	7.4	
		95% CI	(3.0, NE)	(2.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.3767
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.781
		95% CI for Hazard Ratio			(0.449, 1.357)
	>100 to ≤200	Number of Patients	54	49	
		Patients With Events (%)	19 ( 35.2)	22 ( 44.9)	
		Patients Without Events (Censored) (%)	35 ( 64.8)	27 ( 55.1)	
		Median Time (months) [a]	18.9	3.1	
		95% CI	(6.0, NE)	(1.5, NE)	
		Log-rank p-value (Unstratified) [b]			0.0115
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.446
		95% CI for Hazard Ratio			(0.234, 0.852)
>200	Number of Patients	30	22		
	Patients With Events (%)	13 ( 43.3)	13 ( 59.1)		
	Patients Without Events (Censored) (%)	17 ( 56.7)	9 ( 40.9)		
	Median Time (months) [a]	18.2	3.9		
	95% CI	(2.1, NE)	(1.4, NE)		
	Log-rank p-value (Unstratified) [b]			0.2530	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.639	
	95% CI for Hazard Ratio			(0.291, 1.401)	
P-value of Subgroup*Treatment Interaction [d]					0.4478

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Appetite Loss	<100	Number of Patients	57	56	
		Patients With Events (%)	32 ( 56.1)	32 ( 57.1)	
		Patients Without Events (Censored) (%)	25 ( 43.9)	24 ( 42.9)	
		Median Time (months) [a]	3.3	2.8	
		95% CI	(1.7, 5.5)	(1.5, 4.9)	
		Log-rank p-value (Unstratified) [b]			0.8990
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.969
		95% CI for Hazard Ratio			(0.593, 1.582)
	>100 to ≤200	Number of Patients	56	57	
		Patients With Events (%)	36 ( 64.3)	28 ( 49.1)	
		Patients Without Events (Censored) (%)	20 ( 35.7)	29 ( 50.9)	
		Median Time (months) [a]	2.8	3.1	
		95% CI	(1.5, 6.0)	(1.5, 8.2)	
		Log-rank p-value (Unstratified) [b]			0.8828
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)				1.038	
95% CI for Hazard Ratio				(0.627, 1.718)	
>200	Number of Patients	33	24		
	Patients With Events (%)	21 ( 63.6)	10 ( 41.7)		
	Patients Without Events (Censored) (%)	12 ( 36.4)	14 ( 58.3)		
	Median Time (months) [a]	4.4	9.6		
	95% CI	(1.7, 10.6)	(2.2, NE)		
	Log-rank p-value (Unstratified) [b]			0.3319	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.453	
	95% CI for Hazard Ratio			(0.679, 3.111)	
P-value of Subgroup*Treatment Interaction [d]					0.6295

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	<100	Number of Patients	58	58	
		Patients With Events (%)	31 ( 53.4)	22 ( 37.9)	
		Patients Without Events (Censored) (%)	27 ( 46.6)	36 ( 62.1)	
		Median Time (months) [a]	3.7	5.7	
		95% CI	(1.6, 13.9)	(3.5, NE)	
		Log-rank p-value (Unstratified) [b]			0.0998
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.577
		95% CI for Hazard Ratio			(0.911, 2.730)
	>100 to ≤200	Number of Patients	57	56	
		Patients With Events (%)	21 ( 36.8)	32 ( 57.1)	
		Patients Without Events (Censored) (%)	36 ( 63.2)	24 ( 42.9)	
		Median Time (months) [a]	8.4	2.3	
		95% CI	(4.2, NE)	(1.4, 3.8)	
		Log-rank p-value (Unstratified) [b]			0.0011
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.402
		95% CI for Hazard Ratio			(0.228, 0.709)
>200	Number of Patients	33	24		
	Patients With Events (%)	17 ( 51.5)	8 ( 33.3)		
	Patients Without Events (Censored) (%)	16 ( 48.5)	16 ( 66.7)		
	Median Time (months) [a]	7.8	NE		
	95% CI	(1.6, NE)	(2.8, NE)		
	Log-rank p-value (Unstratified) [b]			0.2133	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.694	
	95% CI for Hazard Ratio			(0.730, 3.929)	
P-value of Subgroup*Treatment Interaction [d]					0.0006

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Diarrhea	<100	Number of Patients	60	61	
		Patients With Events (%)	33 ( 55.0)	16 ( 26.2)	
		Patients Without Events (Censored) (%)	27 ( 45.0)	45 ( 73.8)	
		Median Time (months) [a]	2.4	10.9	
		95% CI	(1.5, 16.5)	(7.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.0007
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			2.699
		95% CI for Hazard Ratio			(1.481, 4.920)
	>100 to ≤200	Number of Patients	57	59	
		Patients With Events (%)	40 ( 70.2)	18 ( 30.5)	
		Patients Without Events (Censored) (%)	17 ( 29.8)	41 ( 69.5)	
		Median Time (months) [a]	1.5	5.8	
		95% CI	(1.0, 2.3)	(3.1, NE)	
		Log-rank p-value (Unstratified) [b]			0.0001
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			2.930
		95% CI for Hazard Ratio			(1.671, 5.136)
>200	Number of Patients	34	24		
	Patients With Events (%)	19 ( 55.9)	12 ( 50.0)		
	Patients Without Events (Censored) (%)	15 ( 44.1)	12 ( 50.0)		
	Median Time (months) [a]	4.4	5.9		
	95% CI	(2.0, 7.9)	(2.3, NE)		
	Log-rank p-value (Unstratified) [b]			0.3688	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.396	
	95% CI for Hazard Ratio			(0.671, 2.905)	
P-value of Subgroup*Treatment Interaction [d]					0.1862

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Financial Difficulties	<100	Number of Patients	56	59	
		Patients With Events (%)	12 ( 21.4)	10 ( 16.9)	
		Patients Without Events (Censored) (%)	44 ( 78.6)	49 ( 83.1)	
		Median Time (months) [a]	NE	NE	
		95% CI	(7.2, NE)	(8.7, NE)	
		Log-rank p-value (Unstratified) [b]			0.6972
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.181	
	95% CI for Hazard Ratio			(0.510, 2.736)	
	>100 to ≤200	Number of Patients	57	58	
		Patients With Events (%)	13 ( 22.8)	15 ( 25.9)	
		Patients Without Events (Censored) (%)	44 ( 77.2)	43 ( 74.1)	
		Median Time (months) [a]	NE	NE	
95% CI		(NE, NE)	(3.7, NE)		
Log-rank p-value (Unstratified) [b]				0.2643	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.656		
95% CI for Hazard Ratio			(0.310, 1.387)		
>200	Number of Patients	34	23		
	Patients With Events (%)	12 ( 35.3)	5 ( 21.7)		
	Patients Without Events (Censored) (%)	22 ( 64.7)	18 ( 78.3)		
	Median Time (months) [a]	18.2	NE		
	95% CI	(4.6, NE)	(4.9, NE)		
	Log-rank p-value (Unstratified) [b]			0.5110	
	Unstratified Cox Regression Analysis [c]				
Hazard Ratio (Relative to TPC)			1.423		
95% CI for Hazard Ratio			(0.494, 4.101)		
P-value of Subgroup*Treatment Interaction [d]					0.3049

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.11  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Trop2 H-Score  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Summary Score	<100	Number of Patients	60	61	
		Patients With Events (%)	29 ( 48.3)	28 ( 45.9)	
		Patients Without Events (Censored) (%)	31 ( 51.7)	33 ( 54.1)	
		Median Time (months) [a]	4.9	6.4	
		95% CI	(1.7, NE)	(2.7, 12.7)	
		Log-rank p-value (Unstratified) [b]			0.7952
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.071
		95% CI for Hazard Ratio			(0.637, 1.801)
		>100 to ≤200	Number of Patients	58	59
	Patients With Events (%)		29 ( 50.0)	28 ( 47.5)	
	Patients Without Events (Censored) (%)		29 ( 50.0)	31 ( 52.5)	
	Median Time (months) [a]		5.6	3.7	
	95% CI		(3.0, 9.2)	(2.2, 7.2)	
	Log-rank p-value (Unstratified) [b]				0.1939
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)				0.706
95% CI for Hazard Ratio				(0.415, 1.200)	
>200	Number of Patients		34	25	
	Patients With Events (%)	17 ( 50.0)	13 ( 52.0)		
	Patients Without Events (Censored) (%)	17 ( 50.0)	12 ( 48.0)		
	Median Time (months) [a]	9.3	9.5		
	95% CI	(2.9, NE)	(2.1, NE)		
	Log-rank p-value (Unstratified) [b]			0.7254	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.878	
	95% CI for Hazard Ratio			(0.425, 1.816)	
	P-value of Subgroup*Treatment Interaction [d]			0.6005	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Global Health Status / QoL	Capecitabine	Number of Patients	20	20			
		Patients With Events (%)	10 ( 50.0)	13 ( 65.0)			
		Patients Without Events (Censored) (%)	10 ( 50.0)	7 ( 35.0)			
		Median Time (months) [a]	5.6	1.9			
		95% CI	(1.3, NE)	(0.8, NE)			
		Log-rank p-value (Unstratified) [b]			0.2269		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.605		
		95% CI for Hazard Ratio			(0.265, 1.384)		
		Eribulin	Eribulin	Number of Patients	107	106	
				Patients With Events (%)	65 ( 60.7)	68 ( 64.2)	
				Patients Without Events (Censored) (%)	42 ( 39.3)	38 ( 35.8)	
				Median Time (months) [a]	3.7	3.0	
				95% CI	(1.9, 6.1)	(2.2, 4.6)	
Log-rank p-value (Unstratified) [b]					0.4853		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.886		
95% CI for Hazard Ratio					(0.630, 1.246)		
Vinorelbine	Vinorelbine			Number of Patients	46	38	
				Patients With Events (%)	20 ( 43.5)	22 ( 57.9)	
				Patients Without Events (Censored) (%)	26 ( 56.5)	16 ( 42.1)	
				Median Time (months) [a]	8.1	1.8	
				95% CI	(4.4, NE)	(1.1, 3.7)	
		Log-rank p-value (Unstratified) [b]			0.0003		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.305		
		95% CI for Hazard Ratio			(0.156, 0.597)		
		P-value of Subgroup*Treatment Interaction [d]			0.0213		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Physical Functioning	Capecitabine	Number of Patients	20	20	
		Patients With Events (%)	9 ( 45.0)	11 ( 55.0)	
		Patients Without Events (Censored) (%)	11 ( 55.0)	9 ( 45.0)	
		Median Time (months) [a]	6.1	3.5	
		95% CI	(1.4, NE)	(1.9, NE)	
		Log-rank p-value (Unstratified) [b]			0.6625
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.822	
	95% CI for Hazard Ratio			(0.340, 1.987)	
	Eribulin	Number of Patients	107	107	
		Patients With Events (%)	59 ( 55.1)	63 ( 58.9)	
		Patients Without Events (Censored) (%)	48 ( 44.9)	44 ( 41.1)	
		Median Time (months) [a]	4.0	2.7	
		95% CI	(2.1, 9.1)	(2.2, 4.6)	
		Log-rank p-value (Unstratified) [b]			0.2160
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.799		
95% CI for Hazard Ratio			(0.559, 1.143)		
Vinorelbine	Number of Patients	47	37		
	Patients With Events (%)	20 ( 42.6)	13 ( 35.1)		
	Patients Without Events (Censored) (%)	27 ( 57.4)	24 ( 64.9)		
	Median Time (months) [a]	7.1	3.7		
	95% CI	(4.2, NE)	(1.9, NE)		
	Log-rank p-value (Unstratified) [b]			0.1900	
	Unstratified Cox Regression Analysis [c]				
Hazard Ratio (Relative to TPC)			0.623		
95% CI for Hazard Ratio			(0.304, 1.274)		
		P-value of Subgroup*Treatment Interaction [d]			0.8893

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Role Functioning	Capecitabine	Number of Patients	20	20	
		Patients With Events (%)	12 ( 60.0)	13 ( 65.0)	
		Patients Without Events (Censored) (%)	8 ( 40.0)	7 ( 35.0)	
		Median Time (months) [a]	2.9	1.9	
		95% CI	(1.3, NE)	(1.0, 5.3)	
		Log-rank p-value (Unstratified) [b]			0.5328
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.781
		95% CI for Hazard Ratio			(0.354, 1.720)
	Eribulin	Number of Patients	106	103	
		Patients With Events (%)	70 ( 66.0)	65 ( 63.1)	
		Patients Without Events (Censored) (%)	36 ( 34.0)	38 ( 36.9)	
		Median Time (months) [a]	1.9	2.8	
		95% CI	(1.6, 4.3)	(1.4, 3.6)	
		Log-rank p-value (Unstratified) [b]			0.7224
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.941
		95% CI for Hazard Ratio			(0.670, 1.322)
Vinorelbine	Number of Patients	45	36		
	Patients With Events (%)	29 ( 64.4)	24 ( 66.7)		
	Patients Without Events (Censored) (%)	16 ( 35.6)	12 ( 33.3)		
	Median Time (months) [a]	3.7	1.8		
	95% CI	(1.9, 6.7)	(1.0, 2.2)		
	Log-rank p-value (Unstratified) [b]			0.0017	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.401	
	95% CI for Hazard Ratio			(0.222, 0.726)	
P-value of Subgroup*Treatment Interaction [d]					0.1242

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	Capecitabine	Number of Patients	18	20	
		Patients With Events (%)	4 ( 22.2)	9 ( 45.0)	
		Patients Without Events (Censored) (%)	14 ( 77.8)	11 ( 55.0)	
		Median Time (months) [a]	NE	9.5	
		95% CI	(2.9, NE)	(1.9, NE)	
		Log-rank p-value (Unstratified) [b]			0.1694
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.446	
	95% CI for Hazard Ratio			(0.137, 1.455)	
	Eribulin	Number of Patients	104	106	
		Patients With Events (%)	41 ( 39.4)	49 ( 46.2)	
		Patients Without Events (Censored) (%)	63 ( 60.6)	57 ( 53.8)	
		Median Time (months) [a]	8.9	4.7	
		95% CI	(4.7, NE)	(3.5, NE)	
		Log-rank p-value (Unstratified) [b]			0.2757
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.795		
95% CI for Hazard Ratio			(0.525, 1.205)		
Vinorelbine	Number of Patients	47	38		
	Patients With Events (%)	16 ( 34.0)	17 ( 44.7)		
	Patients Without Events (Censored) (%)	31 ( 66.0)	21 ( 55.3)		
	Median Time (months) [a]	NE	3.1		
	95% CI	(4.2, NE)	(1.4, NE)		
	Log-rank p-value (Unstratified) [b]			0.0039	
	Unstratified Cox Regression Analysis [c]				
Hazard Ratio (Relative to TPC)			0.359		
95% CI for Hazard Ratio			(0.174, 0.740)		
		P-value of Subgroup*Treatment Interaction [d]			0.1247

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Cognitive Functioning	Capecitabine	Number of Patients	20	20	
		Patients With Events (%)	8 ( 40.0)	11 ( 55.0)	
		Patients Without Events (Censored) (%)	12 ( 60.0)	9 ( 45.0)	
		Median Time (months) [a]	18.2	3.0	
		95% CI	(1.3, 18.2)	(0.9, NE)	
		Log-rank p-value (Unstratified) [b]			0.2669
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.589
		95% CI for Hazard Ratio			(0.228, 1.522)
	Eribulin	Number of Patients	107	106	
		Patients With Events (%)	60 ( 56.1)	44 ( 41.5)	
		Patients Without Events (Censored) (%)	47 ( 43.9)	62 ( 58.5)	
		Median Time (months) [a]	3.7	7.2	
		95% CI	(2.5, 6.6)	(4.3, NE)	
		Log-rank p-value (Unstratified) [b]			0.1708
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.311
		95% CI for Hazard Ratio			(0.887, 1.939)
Vinorelbine	Number of Patients	47	38		
	Patients With Events (%)	18 ( 38.3)	12 ( 31.6)		
	Patients Without Events (Censored) (%)	29 ( 61.7)	26 ( 68.4)		
	Median Time (months) [a]	11.1	4.4		
	95% CI	(2.8, NE)	(2.9, NE)		
	Log-rank p-value (Unstratified) [b]			0.4465	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.747	
	95% CI for Hazard Ratio			(0.350, 1.593)	
P-value of Subgroup*Treatment Interaction [d]					0.1958

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison	
Social Functioning	Capecitabine	Number of Patients	19	20		
		Patients With Events (%)	8 ( 42.1)	10 ( 50.0)		
		Patients Without Events (Censored) (%)	11 ( 57.9)	10 ( 50.0)		
		Median Time (months) [a]	NE	5.4		
		95% CI	(1.0, NE)	(1.4, NE)		
			Log-rank p-value (Unstratified) [b]			0.8405
			Unstratified Cox Regression Analysis [c]			
			Hazard Ratio (Relative to TPC)			0.909
			95% CI for Hazard Ratio			(0.358, 2.314)
		Eribulin	Number of Patients	104	102	
	Patients With Events (%)		67 ( 64.4)	61 ( 59.8)		
	Patients Without Events (Censored) (%)		37 ( 35.6)	41 ( 40.2)		
	Median Time (months) [a]		2.1	3.1		
	95% CI		(1.7, 3.6)	(2.4, 4.3)		
			Log-rank p-value (Unstratified) [b]			0.6041
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			1.096	
		95% CI for Hazard Ratio			(0.773, 1.553)	
	Vinorelbine	Number of Patients	47	35		
Patients With Events (%)		26 ( 55.3)	17 ( 48.6)			
Patients Without Events (Censored) (%)		21 ( 44.7)	18 ( 51.4)			
Median Time (months) [a]		3.5	2.9			
95% CI		(1.2, NE)	(1.1, 6.7)			
		Log-rank p-value (Unstratified) [b]			0.5810	
		Unstratified Cox Regression Analysis [c]				
		Hazard Ratio (Relative to TPC)			0.840	
		95% CI for Hazard Ratio			(0.448, 1.574)	
		P-value of Subgroup*Treatment Interaction [d]			0.6477	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	Capecitabine	Number of Patients	20	20	
		Patients With Events (%)	15 ( 75.0)	16 ( 80.0)	
		Patients Without Events (Censored) (%)	5 ( 25.0)	4 ( 20.0)	
		Median Time (months) [a]	1.3	0.8	
		95% CI	(0.9, 2.4)	(0.8, 1.9)	
		Log-rank p-value (Unstratified) [b]			0.1650
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.617
		95% CI for Hazard Ratio			(0.303, 1.254)
	Eribulin	Number of Patients	106	106	
		Patients With Events (%)	77 ( 72.6)	79 ( 74.5)	
		Patients Without Events (Censored) (%)	29 ( 27.4)	27 ( 25.5)	
		Median Time (months) [a]	1.7	1.4	
		95% CI	(1.4, 2.9)	(1.0, 2.3)	
		Log-rank p-value (Unstratified) [b]			0.3618
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.865
		95% CI for Hazard Ratio			(0.631, 1.186)
Vinorelbine	Number of Patients	46	36		
	Patients With Events (%)	29 ( 63.0)	29 ( 80.6)		
	Patients Without Events (Censored) (%)	17 ( 37.0)	7 ( 19.4)		
	Median Time (months) [a]	2.6	1.1		
	95% CI	(1.7, 6.7)	(0.9, 1.9)		
	Log-rank p-value (Unstratified) [b]			0.0001	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.332	
	95% CI for Hazard Ratio			(0.187, 0.588)	
		P-value of Subgroup*Treatment Interaction [d]		0.0165	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Nausea and Vomiting	Capecitabine	Number of Patients	20	20	
		Patients With Events (%)	11 ( 55.0)	12 ( 60.0)	
		Patients Without Events (Censored) (%)	9 ( 45.0)	8 ( 40.0)	
		Median Time (months) [a]	2.4	4.6	
		95% CI	(0.8, NE)	(0.8, 9.5)	
		Log-rank p-value (Unstratified) [b]			0.9090
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.954
		95% CI for Hazard Ratio			(0.416, 2.188)
	Eribulin	Number of Patients	106	107	
		Patients With Events (%)	68 ( 64.2)	50 ( 46.7)	
		Patients Without Events (Censored) (%)	38 ( 35.8)	57 ( 53.3)	
		Median Time (months) [a]	2.1	7.2	
		95% CI	(1.5, 4.2)	(2.9, 10.3)	
		Log-rank p-value (Unstratified) [b]			0.0712
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.396
		95% CI for Hazard Ratio			(0.967, 2.017)
Vinorelbine	Number of Patients	47	38		
	Patients With Events (%)	27 ( 57.4)	15 ( 39.5)		
	Patients Without Events (Censored) (%)	20 ( 42.6)	23 ( 60.5)		
	Median Time (months) [a]	2.6	3.7		
	95% CI	(1.2, NE)	(1.4, NE)		
	Log-rank p-value (Unstratified) [b]			0.5400	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.219	
	95% CI for Hazard Ratio			(0.640, 2.324)	
		P-value of Subgroup*Treatment Interaction [d]		0.5717	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Pain	Capecitabine	Number of Patients	20	20	
		Patients With Events (%)	10 ( 50.0)	11 ( 55.0)	
		Patients Without Events (Censored) (%)	10 ( 50.0)	9 ( 45.0)	
		Median Time (months) [a]	5.0	3.5	
		95% CI	(1.7, NE)	(1.4, 12.6)	
		Log-rank p-value (Unstratified) [b]			0.8610
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.084
		95% CI for Hazard Ratio			(0.439, 2.675)
	Eribulin	Number of Patients	104	104	
		Patients With Events (%)	62 ( 59.6)	62 ( 59.6)	
		Patients Without Events (Censored) (%)	42 ( 40.4)	42 ( 40.4)	
		Median Time (months) [a]	3.7	3.3	
		95% CI	(1.8, 6.1)	(2.2, 5.7)	
		Log-rank p-value (Unstratified) [b]			0.6372
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.919
		95% CI for Hazard Ratio			(0.646, 1.309)
Vinorelbine	Number of Patients	45	35		
	Patients With Events (%)	23 ( 51.1)	17 ( 48.6)		
	Patients Without Events (Censored) (%)	22 ( 48.9)	18 ( 51.4)		
	Median Time (months) [a]	5.9	2.1		
	95% CI	(2.4, NE)	(1.3, 3.4)		
	Log-rank p-value (Unstratified) [b]			0.0927	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.566	
	95% CI for Hazard Ratio			(0.286, 1.120)	
		P-value of Subgroup*Treatment Interaction [d]		0.4690	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	Capecitabine	Number of Patients	19	20	
		Patients With Events (%)	10 ( 52.6)	7 ( 35.0)	
		Patients Without Events (Censored) (%)	9 ( 47.4)	13 ( 65.0)	
		Median Time (months) [a]	3.1	8.4	
		95% CI	(1.4, 18.2)	(1.9, 8.4)	
		Log-rank p-value (Unstratified) [b]			0.5990
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.301
		95% CI for Hazard Ratio			(0.483, 3.506)
	Eribulin	Number of Patients	106	106	
		Patients With Events (%)	47 ( 44.3)	59 ( 55.7)	
		Patients Without Events (Censored) (%)	59 ( 55.7)	47 ( 44.3)	
		Median Time (months) [a]	6.7	3.9	
		95% CI	(4.5, 14.4)	(2.2, 7.7)	
		Log-rank p-value (Unstratified) [b]			0.0229
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.643
		95% CI for Hazard Ratio			(0.437, 0.945)
Vinorelbine	Number of Patients	45	35		
	Patients With Events (%)	21 ( 46.7)	18 ( 51.4)		
	Patients Without Events (Censored) (%)	24 ( 53.3)	17 ( 48.6)		
	Median Time (months) [a]	5.9	2.0		
	95% CI	(3.3, NE)	(1.1, NE)		
	Log-rank p-value (Unstratified) [b]			0.0781	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.562	
	95% CI for Hazard Ratio			(0.292, 1.081)	
		P-value of Subgroup*Treatment Interaction [d]		0.2171	

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Insomnia	Capecitabine	Number of Patients	19	19	
		Patients With Events (%)	4 ( 21.1)	15 ( 78.9)	
		Patients Without Events (Censored) (%)	15 ( 78.9)	4 ( 21.1)	
		Median Time (months) [a]	18.2	1.7	
		95% CI	(NE, NE)	(0.8, 3.9)	
		Log-rank p-value (Unstratified) [b]			0.0002
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.136
		95% CI for Hazard Ratio			(0.039, 0.471)
	Eribulin	Number of Patients	96	96	
		Patients With Events (%)	40 ( 41.7)	46 ( 47.9)	
		Patients Without Events (Censored) (%)	56 ( 58.3)	50 ( 52.1)	
		Median Time (months) [a]	8.7	3.9	
		95% CI	(4.7, NE)	(2.6, NE)	
		Log-rank p-value (Unstratified) [b]			0.1357
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.727
		95% CI for Hazard Ratio			(0.475, 1.112)
Vinorelbine	Number of Patients	45	35		
	Patients With Events (%)	24 ( 53.3)	8 ( 22.9)		
	Patients Without Events (Censored) (%)	21 ( 46.7)	27 ( 77.1)		
	Median Time (months) [a]	6.3	NE		
	95% CI	(2.8, 23.6)	(2.1, NE)		
	Log-rank p-value (Unstratified) [b]			0.6867	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.188	
	95% CI for Hazard Ratio			(0.510, 2.767)	
P-value of Subgroup*Treatment Interaction [d]					0.0088

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Appetite Loss	Capecitabine	Number of Patients	20	19	
		Patients With Events (%)	8 ( 40.0)	10 ( 52.6)	
		Patients Without Events (Censored) (%)	12 ( 60.0)	9 ( 47.4)	
		Median Time (months) [a]	NE	4.9	
		95% CI	(1.4, NE)	(1.4, NE)	
		Log-rank p-value (Unstratified) [b]			0.8400
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.908
		95% CI for Hazard Ratio			(0.354, 2.328)
	Eribulin	Number of Patients	102	102	
		Patients With Events (%)	63 ( 61.8)	50 ( 49.0)	
		Patients Without Events (Censored) (%)	39 ( 38.2)	52 ( 51.0)	
		Median Time (months) [a]	3.7	5.3	
		95% CI	(1.7, 5.9)	(2.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.2959
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.218
		95% CI for Hazard Ratio			(0.838, 1.769)
Vinorelbine	Number of Patients	45	35		
	Patients With Events (%)	26 ( 57.8)	18 ( 51.4)		
	Patients Without Events (Censored) (%)	19 ( 42.2)	17 ( 48.6)		
	Median Time (months) [a]	2.8	2.3		
	95% CI	(1.2, 18.2)	(1.1, 4.4)		
	Log-rank p-value (Unstratified) [b]			0.5377	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.821	
	95% CI for Hazard Ratio			(0.436, 1.546)	
P-value of Subgroup*Treatment Interaction [d]					0.3955

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	Capecitabine	Number of Patients	19	20	
		Patients With Events (%)	8 ( 42.1)	9 ( 45.0)	
		Patients Without Events (Censored) (%)	11 ( 57.9)	11 ( 55.0)	
		Median Time (months) [a]	8.6	3.2	
		95% CI	(1.6, NE)	(1.5, NE)	
		Log-rank p-value (Unstratified) [b]			0.8972
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.939
		95% CI for Hazard Ratio			(0.360, 2.448)
		Eribulin	Number of Patients	104	105
	Patients With Events (%)		53 ( 51.0)	47 ( 44.8)	
	Patients Without Events (Censored) (%)		51 ( 49.0)	58 ( 55.2)	
	Median Time (months) [a]		5.0	4.9	
	95% CI		(2.5, 13.9)	(3.5, NE)	
	Vinorelbine	Log-rank p-value (Unstratified) [b]			0.6500
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)				1.095	
95% CI for Hazard Ratio				(0.739, 1.622)	
Number of Patients		47	33		
Patients With Events (%)	22 ( 46.8)	14 ( 42.4)			
Patients Without Events (Censored) (%)	25 ( 53.2)	19 ( 57.6)			
Median Time (months) [a]	5.4	4.2			
95% CI	(1.9, NE)	(1.5, NE)			
Log-rank p-value (Unstratified) [b]			0.6899		
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.870		
95% CI for Hazard Ratio			(0.437, 1.732)		
P-value of Subgroup*Treatment Interaction [d]					0.7510

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Diarrhea	Capecitabine	Number of Patients	20	20	
		Patients With Events (%)	13 ( 65.0)	8 ( 40.0)	
		Patients Without Events (Censored) (%)	7 ( 35.0)	12 ( 60.0)	
		Median Time (months) [a]	1.2	7.7	
		95% CI	(0.8, NE)	(3.0, NE)	
		Log-rank p-value (Unstratified) [b]			0.0339
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			2.608
		95% CI for Hazard Ratio			(1.029, 6.610)
	Eribulin	Number of Patients	105	106	
		Patients With Events (%)	63 ( 60.0)	33 ( 31.1)	
		Patients Without Events (Censored) (%)	42 ( 40.0)	73 ( 68.9)	
		Median Time (months) [a]	2.0	9.8	
		95% CI	(1.5, 3.8)	(5.9, NE)	
		Log-rank p-value (Unstratified) [b]			<.0001
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			2.682
		95% CI for Hazard Ratio			(1.756, 4.097)
Vinorelbine	Number of Patients	47	38		
	Patients With Events (%)	28 ( 59.6)	14 ( 36.8)		
	Patients Without Events (Censored) (%)	19 ( 40.4)	24 ( 63.2)		
	Median Time (months) [a]	3.0	5.1		
	95% CI	(1.5, 5.4)	(1.4, NE)		
	Log-rank p-value (Unstratified) [b]			0.5622	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			1.211	
	95% CI for Hazard Ratio			(0.630, 2.326)	
P-value of Subgroup*Treatment Interaction [d]					0.1344

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Financial Difficulties	Capecitabine	Number of Patients	18	18	
		Patients With Events (%)	3 ( 16.7)	4 ( 22.2)	
		Patients Without Events (Censored) (%)	15 ( 83.3)	14 ( 77.8)	
		Median Time (months) [a]	18.2	NE	
		95% CI	(NE, NE)	(3.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.3841
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			0.480
		95% CI for Hazard Ratio			(0.088, 2.625)
		Eribulin	Number of Patients	104	103
	Patients With Events (%)		33 ( 31.7)	20 ( 19.4)	
	Patients Without Events (Censored) (%)		71 ( 68.3)	83 ( 80.6)	
	Median Time (months) [a]		NE	NE	
	95% CI		(6.5, NE)	(8.7, NE)	
				Log-rank p-value (Unstratified) [b]	0.1089
			Unstratified Cox Regression Analysis [c]		
			Hazard Ratio (Relative to TPC)	1.568	
			95% CI for Hazard Ratio	(0.899, 2.733)	
Vinorelbine	Number of Patients	47	38		
	Patients With Events (%)	7 ( 14.9)	7 ( 18.4)		
	Patients Without Events (Censored) (%)	40 ( 85.1)	31 ( 81.6)		
	Median Time (months) [a]	NE	6.7		
	95% CI	(NE, NE)	(3.7, NE)		
	Log-rank p-value (Unstratified) [b]			0.1937	
	Unstratified Cox Regression Analysis [c]				
	Hazard Ratio (Relative to TPC)			0.493	
	95% CI for Hazard Ratio			(0.166, 1.465)	
				P-value of Subgroup*Treatment Interaction [d]	0.1201

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.12  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Investigators choice of chemotherapy prior to randomizaion  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Summary Score	Capecitabine	Number of Patients	20	20			
		Patients With Events (%)	7 ( 35.0)	11 ( 55.0)			
		Patients Without Events (Censored) (%)	13 ( 65.0)	9 ( 45.0)			
		Median Time (months) [a]	NE	3.0			
		95% CI	(2.8, NE)	(1.4, NE)			
		Log-rank p-value (Unstratified) [b]			0.2006		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.542		
		95% CI for Hazard Ratio			(0.209, 1.405)		
		Eribulin	Eribulin	Number of Patients	107	107	
				Patients With Events (%)	55 ( 51.4)	51 ( 47.7)	
				Patients Without Events (Censored) (%)	52 ( 48.6)	56 ( 52.3)	
				Median Time (months) [a]	4.3	7.2	
				95% CI	(2.5, 9.2)	(4.3, 9.9)	
				Log-rank p-value (Unstratified) [b]			0.5965
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.108		
95% CI for Hazard Ratio					(0.756, 1.623)		
Vinorelbine	Vinorelbine			Number of Patients	47	38	
				Patients With Events (%)	23 ( 48.9)	17 ( 44.7)	
				Patients Without Events (Censored) (%)	24 ( 51.1)	21 ( 55.3)	
				Median Time (months) [a]	6.5	3.7	
				95% CI	(3.7, 23.6)	(1.4, 5.1)	
				Log-rank p-value (Unstratified) [b]			0.0035
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.355		
		95% CI for Hazard Ratio			(0.172, 0.732)		
		P-value of Subgroup*Treatment Interaction [d]			0.0606		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Global Health Status / Yes QoL		Number of Patients	151	144			
		Patients With Events (%)	84 ( 55.6)	90 ( 62.5)			
		Patients Without Events (Censored) (%)	67 ( 44.4)	54 ( 37.5)			
		Median Time (months) [a]	4.4	2.8			
		95% CI	(2.9, 6.6)	(2.1, 3.7)			
		Log-rank p-value (Unstratified) [b]			0.0112		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.681		
		95% CI for Hazard Ratio			(0.504, 0.920)		
			No	Number of Patients	22	20	
				Patients With Events (%)	11 ( 50.0)	13 ( 65.0)	
				Patients Without Events (Censored) (%)	11 ( 50.0)	7 ( 35.0)	
				Median Time (months) [a]	13.6	2.0	
				95% CI	(1.0, NE)	(0.9, NE)	
		Log-rank p-value (Unstratified) [b]			0.2819		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.645		
		95% CI for Hazard Ratio			(0.286, 1.453)		
		P-value of Subgroup*Treatment Interaction [d]			0.6731		
Physical Functioning	Yes	Number of Patients	152	144			
		Patients With Events (%)	78 ( 51.3)	77 ( 53.5)			
		Patients Without Events (Censored) (%)	74 ( 48.7)	67 ( 46.5)			
		Median Time (months) [a]	4.7	3.4			
		95% CI	(2.9, 7.1)	(2.2, 4.9)			
		Log-rank p-value (Unstratified) [b]			0.1251		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.782		
		95% CI for Hazard Ratio			(0.570, 1.073)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Role Functioning	No	Number of Patients	22	20			
		Patients With Events (%)	10 ( 45.5)	10 ( 50.0)			
		Patients Without Events (Censored) (%)	12 ( 54.5)	10 ( 50.0)			
		Median Time (months) [a]	12.5	2.6			
		95% CI	(1.4, NE)	(0.9, NE)			
		Log-rank p-value (Unstratified) [b]			0.2514		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.598		
		95% CI for Hazard Ratio			(0.245, 1.461)		
		P-value of Subgroup*Treatment Interaction [d]			0.4378		
		Role Functioning	Yes	Number of Patients	149	139	
				Patients With Events (%)	99 ( 66.4)	86 ( 61.9)	
				Patients Without Events (Censored) (%)	50 ( 33.6)	53 ( 38.1)	
Median Time (months) [a]	2.6			2.8			
95% CI	(1.7, 4.2)			(1.7, 3.4)			
Log-rank p-value (Unstratified) [b]					0.5316		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.912		
95% CI for Hazard Ratio					(0.682, 1.219)		
Role Functioning	No			Number of Patients	22	20	
				Patients With Events (%)	12 ( 54.5)	16 ( 80.0)	
				Patients Without Events (Censored) (%)	10 ( 45.5)	4 ( 20.0)	
				Median Time (months) [a]	4.9	1.1	
		95% CI	(1.4, NE)	(0.8, 2.2)			
		Log-rank p-value (Unstratified) [b]			0.0085		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.373		
		95% CI for Hazard Ratio			(0.170, 0.819)		
		P-value of Subgroup*Treatment Interaction [d]			0.0051		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Emotional Functioning	Yes	Number of Patients	147	145	
		Patients With Events (%)	54 ( 36.7)	66 ( 45.5)	
		Patients Without Events (Censored) (%)	93 ( 63.3)	79 ( 54.5)	
		Median Time (months) [a]	NE	4.5	
		95% CI	(5.1, NE)	(3.3, 9.5)	
		Log-rank p-value (Unstratified) [b]			0.0373
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.685	
	95% CI for Hazard Ratio			(0.477, 0.981)	
	No	Number of Patients	22	19	
		Patients With Events (%)	7 ( 31.8)	9 ( 47.4)	
		Patients Without Events (Censored) (%)	15 ( 68.2)	10 ( 52.6)	
		Median Time (months) [a]	NE	4.5	
		95% CI	(2.8, NE)	(1.0, NE)	
Log-rank p-value (Unstratified) [b]				0.1013	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.431		
95% CI for Hazard Ratio			(0.152, 1.221)		
		P-value of Subgroup*Treatment Interaction [d]		0.4193	
Cognitive Functioning	Yes	Number of Patients	152	144	
		Patients With Events (%)	79 ( 52.0)	56 ( 38.9)	
		Patients Without Events (Censored) (%)	73 ( 48.0)	88 ( 61.1)	
		Median Time (months) [a]	4.0	7.2	
		95% CI	(2.8, 7.6)	(4.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.3197
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			1.190		
95% CI for Hazard Ratio			(0.843, 1.681)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	No	Number of Patients	22	20			
		Patients With Events (%)	7 ( 31.8)	11 ( 55.0)			
		Patients Without Events (Censored) (%)	15 ( 68.2)	9 ( 45.0)			
		Median Time (months) [a]	NE	2.2			
		95% CI	(2.8, NE)	(0.8, NE)			
		Log-rank p-value (Unstratified) [b]			0.0662		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.420		
		95% CI for Hazard Ratio			(0.161, 1.096)		
		P-value of Subgroup*Treatment Interaction [d]			0.0299		
		Social Functioning	Yes	Number of Patients	148	138	
				Patients With Events (%)	89 ( 60.1)	76 ( 55.1)	
				Patients Without Events (Censored) (%)	59 ( 39.9)	62 ( 44.9)	
Median Time (months) [a]	2.3			3.5			
95% CI	(1.7, 4.3)			(2.7, 4.3)			
Log-rank p-value (Unstratified) [b]					0.7765		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)				1.045			
95% CI for Hazard Ratio				(0.768, 1.422)			
No	Number of Patients		22	19			
	Patients With Events (%)		12 ( 54.5)	12 ( 63.2)			
	Patients Without Events (Censored) (%)		10 ( 45.5)	7 ( 36.8)			
	Median Time (months) [a]		3.1	2.6			
	95% CI	(1.7, NE)	(0.8, NE)				
	Log-rank p-value (Unstratified) [b]			0.3020			
	Unstratified Cox Regression Analysis [c]						
Hazard Ratio (Relative to TPC)			0.658				
95% CI for Hazard Ratio			(0.294, 1.473)				
P-value of Subgroup*Treatment Interaction [d]			0.2431				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Fatigue	Yes	Number of Patients	150	142	
		Patients With Events (%)	106 ( 70.7)	108 ( 76.1)	
		Patients Without Events (Censored) (%)	44 ( 29.3)	34 ( 23.9)	
		Median Time (months) [a]	2.0	1.3	
		95% CI	(1.5, 2.8)	(1.0, 1.9)	
		Log-rank p-value (Unstratified) [b]			0.0136
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.716	
	95% CI for Hazard Ratio			(0.547, 0.938)	
	No	Number of Patients	22	20	
		Patients With Events (%)	15 ( 68.2)	16 ( 80.0)	
		Patients Without Events (Censored) (%)	7 ( 31.8)	4 ( 20.0)	
		Median Time (months) [a]	2.3	1.0	
		95% CI	(0.9, 16.2)	(0.8, 2.2)	
Log-rank p-value (Unstratified) [b]				0.0952	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.553		
95% CI for Hazard Ratio			(0.267, 1.145)		
		P-value of Subgroup*Treatment Interaction [d]		0.4132	
Nausea and Vomiting	Yes	Number of Patients	151	145	
		Patients With Events (%)	93 ( 61.6)	68 ( 46.9)	
		Patients Without Events (Censored) (%)	58 ( 38.4)	77 ( 53.1)	
		Median Time (months) [a]	2.1	6.1	
		95% CI	(1.5, 4.1)	(2.8, 9.6)	
		Log-rank p-value (Unstratified) [b]			0.1389
		Unstratified Cox Regression Analysis [c]			
		Hazard Ratio (Relative to TPC)			1.265
		95% CI for Hazard Ratio			(0.923, 1.735)

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Pain	No	Number of Patients	22	20			
		Patients With Events (%)	13 ( 59.1)	9 ( 45.0)			
		Patients Without Events (Censored) (%)	9 ( 40.9)	11 ( 55.0)			
		Median Time (months) [a]	2.6	4.6			
		95% CI	(1.0, NE)	(1.4, NE)			
		Log-rank p-value (Unstratified) [b]			0.6525		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			1.213		
		95% CI for Hazard Ratio			(0.517, 2.847)		
		P-value of Subgroup*Treatment Interaction [d]			0.8184		
		Pain	Yes	Number of Patients	148	139	
				Patients With Events (%)	84 ( 56.8)	81 ( 58.3)	
				Patients Without Events (Censored) (%)	64 ( 43.2)	58 ( 41.7)	
Median Time (months) [a]	3.8			3.1			
95% CI	(2.8, 5.9)			(2.2, 4.3)			
Log-rank p-value (Unstratified) [b]					0.2373		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					0.833		
95% CI for Hazard Ratio					(0.613, 1.132)		
Pain	No			Number of Patients	21	20	
				Patients With Events (%)	11 ( 52.4)	9 ( 45.0)	
				Patients Without Events (Censored) (%)	10 ( 47.6)	11 ( 55.0)	
				Median Time (months) [a]	9.7	8.2	
		95% CI	(1.4, NE)	(1.1, NE)			
		Log-rank p-value (Unstratified) [b]			0.9936		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.996		
		95% CI for Hazard Ratio			(0.407, 2.437)		
		P-value of Subgroup*Treatment Interaction [d]			0.9537		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Dyspnea	Yes	Number of Patients	148	142	
		Patients With Events (%)	69 ( 46.6)	73 ( 51.4)	
		Patients Without Events (Censored) (%)	79 ( 53.4)	69 ( 48.6)	
		Median Time (months) [a]	5.9	3.9	
		95% CI	(4.3, 9.5)	(2.7, 7.7)	
		Log-rank p-value (Unstratified) [b]			0.0598
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.729	
	95% CI for Hazard Ratio			(0.523, 1.016)	
	No	Number of Patients	22	19	
		Patients With Events (%)	9 ( 40.9)	11 ( 57.9)	
		Patients Without Events (Censored) (%)	13 ( 59.1)	8 ( 42.1)	
		Median Time (months) [a]	8.3	3.2	
		95% CI	(3.1, NE)	(1.0, NE)	
Log-rank p-value (Unstratified) [b]				0.0483	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.403		
95% CI for Hazard Ratio			(0.158, 1.026)		
		P-value of Subgroup*Treatment Interaction [d]		0.2233	
Insomnia	Yes	Number of Patients	139	132	
		Patients With Events (%)	56 ( 40.3)	58 ( 43.9)	
		Patients Without Events (Censored) (%)	83 ( 59.7)	74 ( 56.1)	
		Median Time (months) [a]	8.7	4.3	
		95% CI	(6.0, 23.6)	(2.2, NE)	
		Log-rank p-value (Unstratified) [b]			0.0383
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			0.678		
95% CI for Hazard Ratio			(0.467, 0.984)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
	No	Number of Patients	21	18			
		Patients With Events (%)	12 ( 57.1)	11 ( 61.1)			
		Patients Without Events (Censored) (%)	9 ( 42.9)	7 ( 38.9)			
		Median Time (months) [a]	4.7	3.2			
		95% CI	(2.6, NE)	(1.4, 7.4)			
		Log-rank p-value (Unstratified) [b]			0.1958		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.579		
		95% CI for Hazard Ratio			(0.247, 1.356)		
		P-value of Subgroup*Treatment Interaction [d]			0.9804		
		Appetite Loss	Yes	Number of Patients	145	138	
				Patients With Events (%)	85 ( 58.6)	65 ( 47.1)	
				Patients Without Events (Censored) (%)	60 ( 41.4)	73 ( 52.9)	
Median Time (months) [a]	3.3			4.4			
95% CI	(1.7, 5.5)			(2.3, 9.6)			
Log-rank p-value (Unstratified) [b]					0.4266		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.140		
95% CI for Hazard Ratio					(0.823, 1.578)		
	No			Number of Patients	22	18	
				Patients With Events (%)	12 ( 54.5)	13 ( 72.2)	
				Patients Without Events (Censored) (%)	10 ( 45.5)	5 ( 27.8)	
				Median Time (months) [a]	6.7	3.5	
		95% CI	(0.8, NE)	(1.0, 5.6)			
		Log-rank p-value (Unstratified) [b]			0.3862		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.708		
		95% CI for Hazard Ratio			(0.320, 1.567)		
		P-value of Subgroup*Treatment Interaction [d]			0.2818		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Constipation	Yes	Number of Patients	149	139	
		Patients With Events (%)	74 ( 49.7)	58 ( 41.7)	
		Patients Without Events (Censored) (%)	75 ( 50.3)	81 ( 58.3)	
		Median Time (months) [a]	4.6	4.9	
		95% CI	(2.5, 9.1)	(3.5, NE)	
		Log-rank p-value (Unstratified) [b]			0.3073
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			1.195	
	95% CI for Hazard Ratio			(0.847, 1.686)	
	No	Number of Patients	21	19	
		Patients With Events (%)	9 ( 42.9)	12 ( 63.2)	
		Patients Without Events (Censored) (%)	12 ( 57.1)	7 ( 36.8)	
		Median Time (months) [a]	13.9	1.9	
		95% CI	(2.3, NE)	(0.9, NE)	
Log-rank p-value (Unstratified) [b]				0.0215	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.364		
95% CI for Hazard Ratio			(0.146, 0.906)		
		P-value of Subgroup*Treatment Interaction [d]		0.0109	
Diarrhea	Yes	Number of Patients	150	144	
		Patients With Events (%)	89 ( 59.3)	51 ( 35.4)	
		Patients Without Events (Censored) (%)	61 ( 40.7)	93 ( 64.6)	
		Median Time (months) [a]	2.1	7.7	
		95% CI	(1.6, 3.8)	(5.3, NE)	
		Log-rank p-value (Unstratified) [b]			<.0001
		Unstratified Cox Regression Analysis [c]			
Hazard Ratio (Relative to TPC)			2.064		
95% CI for Hazard Ratio			(1.461, 2.915)		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison		
Financial Difficulties	No	Number of Patients	22	20			
		Patients With Events (%)	15 ( 68.2)	4 ( 20.0)			
		Patients Without Events (Censored) (%)	7 ( 31.8)	16 ( 80.0)			
		Median Time (months) [a]	1.7	NE			
		95% CI	(0.8, 4.4)	(5.6, NE)			
		Log-rank p-value (Unstratified) [b]			0.0020		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			4.779		
		95% CI for Hazard Ratio			(1.578, 14.474)		
		P-value of Subgroup*Treatment Interaction [d]			0.1438		
		Financial Difficulties	Yes	Number of Patients	147	141	
				Patients With Events (%)	38 ( 25.9)	24 ( 17.0)	
				Patients Without Events (Censored) (%)	109 ( 74.1)	117 ( 83.0)	
Median Time (months) [a]	NE			NE			
95% CI	(18.2, NE)			(NE, NE)			
Log-rank p-value (Unstratified) [b]					0.2397		
Unstratified Cox Regression Analysis [c]							
Hazard Ratio (Relative to TPC)					1.358		
95% CI for Hazard Ratio					(0.813, 2.270)		
Financial Difficulties	No			Number of Patients	22	18	
				Patients With Events (%)	5 ( 22.7)	7 ( 38.9)	
				Patients Without Events (Censored) (%)	17 ( 77.3)	11 ( 61.1)	
				Median Time (months) [a]	NE	5.0	
		95% CI	(5.8, NE)	(1.4, NE)			
		Log-rank p-value (Unstratified) [b]			0.1006		
		Unstratified Cox Regression Analysis [c]					
		Hazard Ratio (Relative to TPC)			0.394		
		95% CI for Hazard Ratio			(0.124, 1.253)		
		P-value of Subgroup*Treatment Interaction [d]			0.0594		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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Table 15.15.7.1.13  
 Summary of Time to First HRQoL Worsening with Death Being Censored for EORTC QLQ-C30 by Subgroup - Baseline documented target or non-target liver lesions  
 EORTC QLQ-C30 Evaluable Population  
 Excluding Subjects for whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded

Domain	Subgroup	Statistic	SG (N=174)	TPC (N=165)	Treatment Comparison
Summary Score	Yes	Number of Patients	152	145	
		Patients With Events (%)	75 ( 49.3)	67 ( 46.2)	
		Patients Without Events (Censored) (%)	77 ( 50.7)	78 ( 53.8)	
		Median Time (months) [a]	5.5	5.1	
		95% CI	(3.7, 7.5)	(3.1, 9.5)	
		Log-rank p-value (Unstratified) [b]			0.6581
		Unstratified Cox Regression Analysis [c]			
	Hazard Ratio (Relative to TPC)			0.928	
	95% CI for Hazard Ratio			(0.666, 1.292)	
	No	Number of Patients	22	20	
		Patients With Events (%)	10 ( 45.5)	12 ( 60.0)	
		Patients Without Events (Censored) (%)	12 ( 54.5)	8 ( 40.0)	
		Median Time (months) [a]	8.3	3.5	
		95% CI	(1.7, NE)	(1.0, 11.4)	
Log-rank p-value (Unstratified) [b]				0.1919	
Unstratified Cox Regression Analysis [c]					
Hazard Ratio (Relative to TPC)			0.575		
95% CI for Hazard Ratio			(0.246, 1.341)		
		P-value of Subgroup*Treatment Interaction [d]			0.2115

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

[a] Median Time is from Kaplan-Meier estimate.

[b] P-value is estimated from unstratified log-rank test.

[c] HR and 95% CI are estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC) as covariate.

[d] P-value is estimated using an unstratified Cox proportional hazards regression analysis with treatment arm (SG vs. TPC), subgroup, and treatment\*subgroup as covariates.

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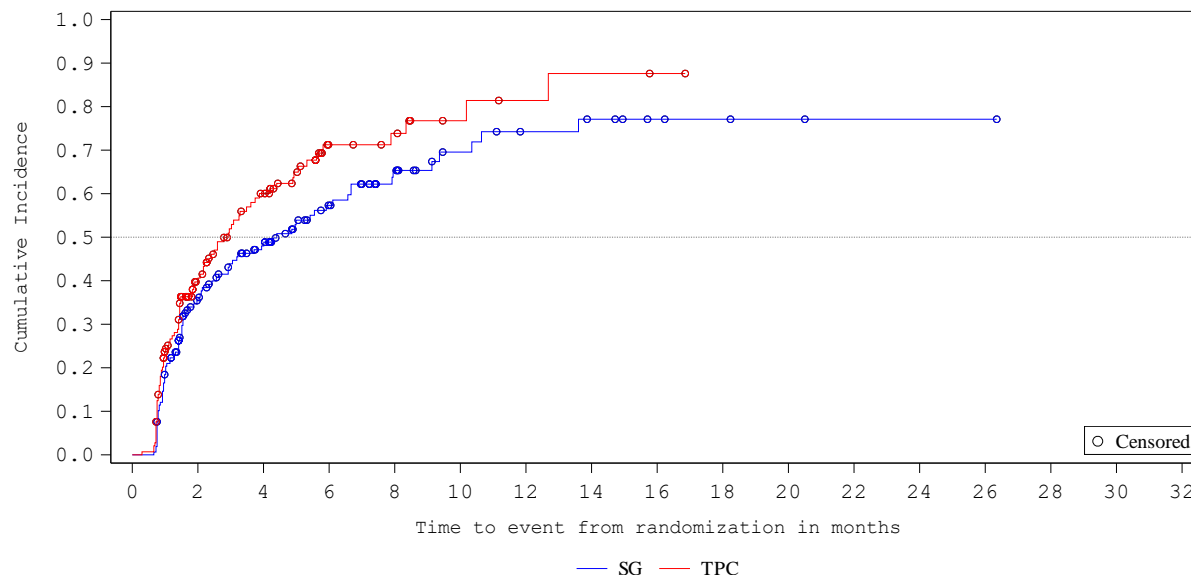
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Figure 15.15.5.1.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Global Health Status/QoL by Treatment Group  
 Endocrine therapy in the metastatic setting for at least 6 months = Yes  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)																
	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	158	87	60	36	22	13	9	7	4	3	2	1	1	1	1	0	
<b>TPC</b>	145	68	38	13	10	5	3	2	1	0							

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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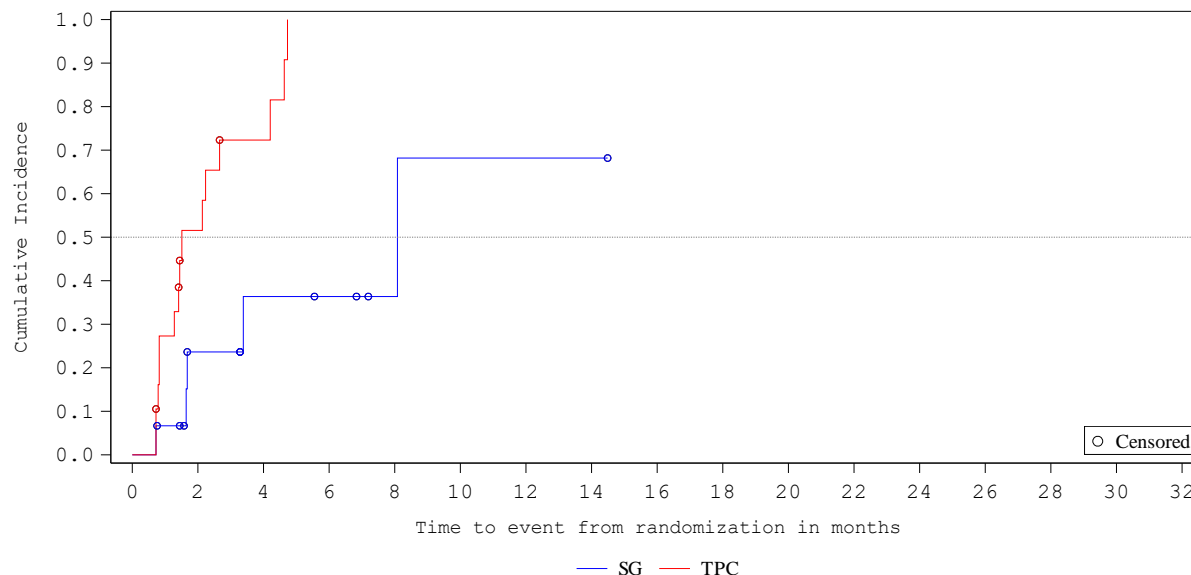
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Figure 15.15.5.1.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Global Health Status/QoL by Treatment Group  
 Endocrine therapy in the metastatic setting for at least 6 months = No  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	0	2	4	6	8	10	12	14	16
<b>SG</b>	15	8	5	4	2	1	1	1	0
<b>TPC</b>	19	7	3	0					

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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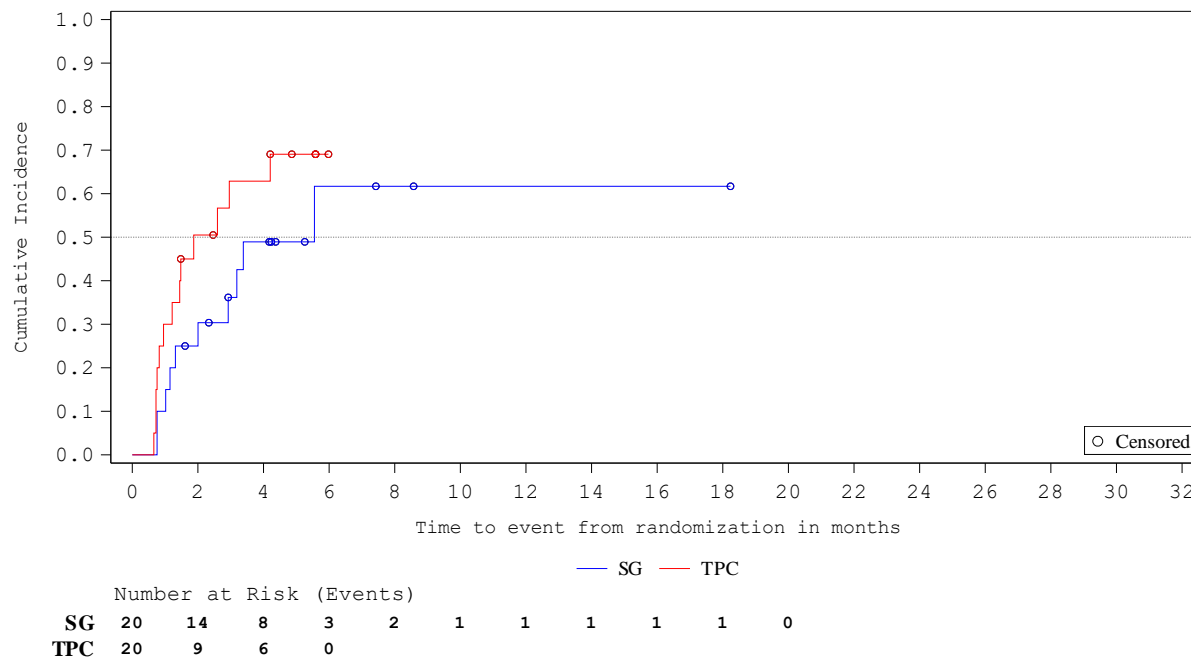
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Figure 15.15.5.1.2.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Global Health Status/QoL by Treatment Group  
 Investigators choice of chemotherapy prior to randomizaion = Capecitabine  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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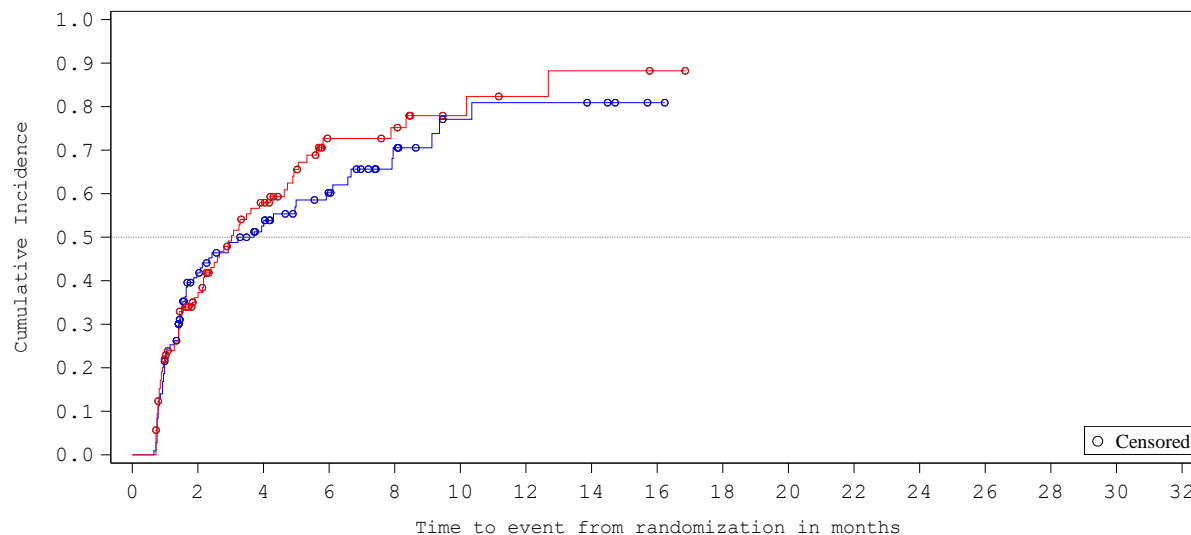
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Figure 15.15.5.1.2.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Global Health Status/QoL by Treatment Group  
 Investigators choice of chemotherapy prior to randomizaion = Eribulin  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	SG	TPC
Number at Risk (Events)		
<b>SG</b>	107	52
<b>TPC</b>	106	57

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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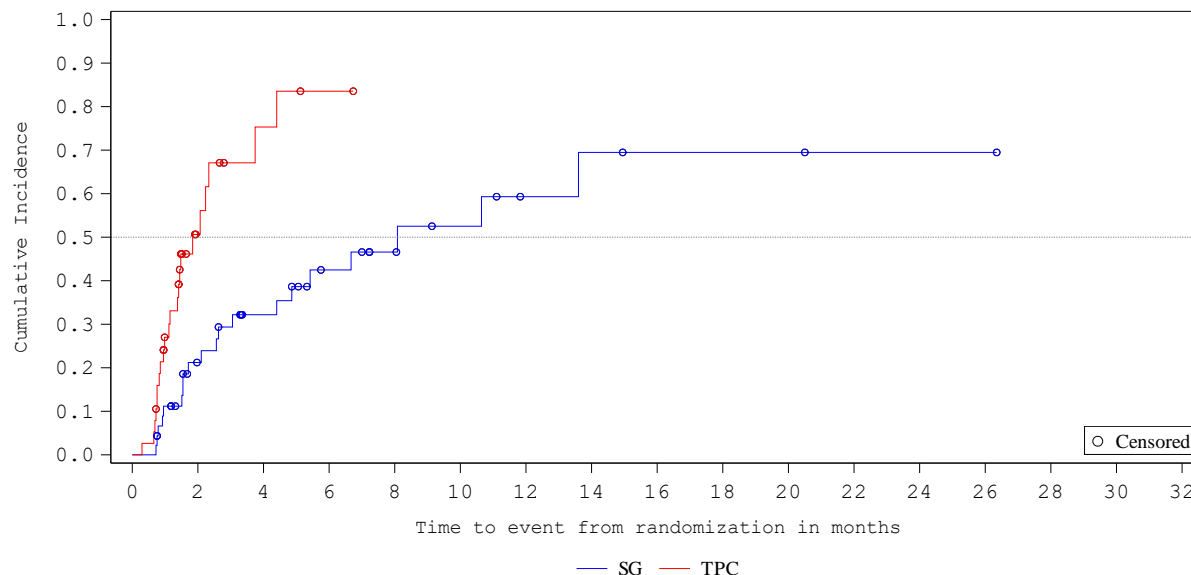
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Figure 15.15.5.1.2.3  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Global Health Status/QoL by Treatment Group  
 Investigators choice of chemotherapy prior to randomizaion = Vinorelbine  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	46	29	21	14	10	7	4	3	2	2	2	1	1	1	0		
<b>TPC</b>	38	9	3	1	0												

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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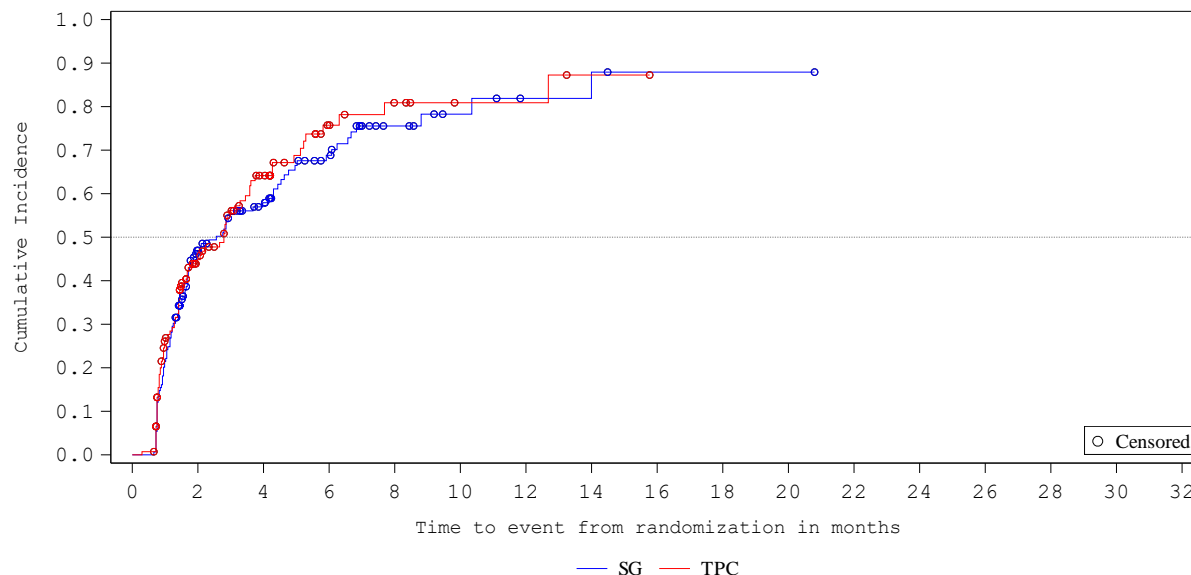
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Figure 15.15.5.2.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Role Functioning by Treatment Group  
 Baseline documented target or non-target liver lesions = Yes  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)	0	2	4	6	8	10	12	14	16	18	20	22
<b>SG</b>	<b>149</b>	<b>67</b>	<b>44</b>	<b>25</b>	<b>11</b>	<b>6</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>0</b>
<b>TPC</b>	<b>139</b>	<b>58</b>	<b>29</b>	<b>11</b>	<b>6</b>	<b>3</b>	<b>3</b>	<b>1</b>	<b>0</b>				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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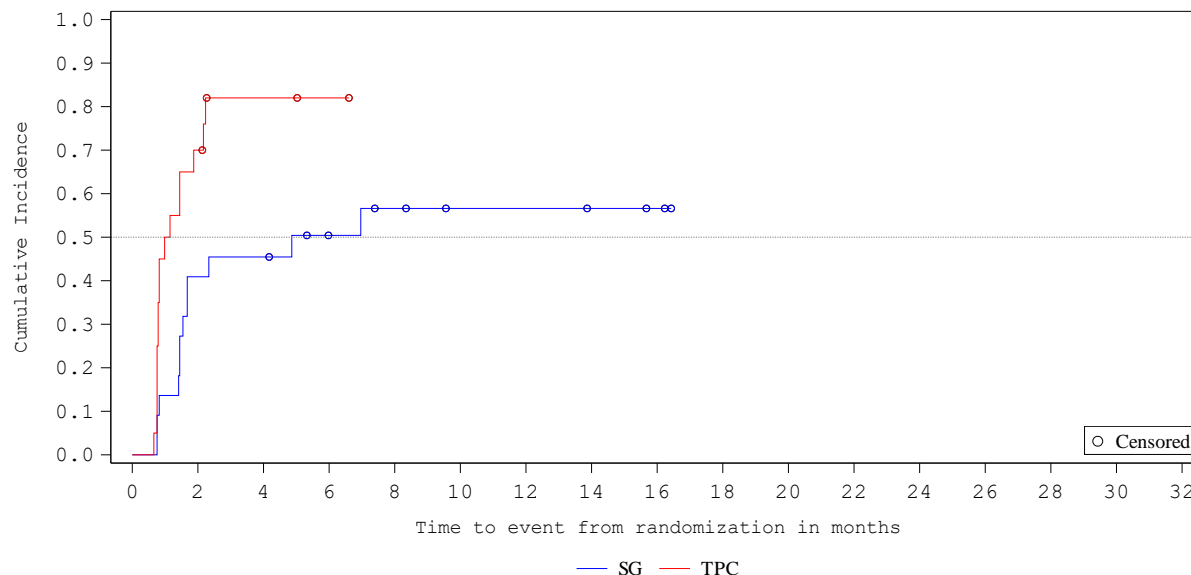
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Figure 15.15.5.2.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Role Functioning by Treatment Group  
 Baseline documented target or non-target liver lesions = No  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	0	2	4	6	8	10	14	16	18
<b>SG</b>	22	13	12	8	6	4	4	3	2
<b>TPC</b>	20	6	2	1	0				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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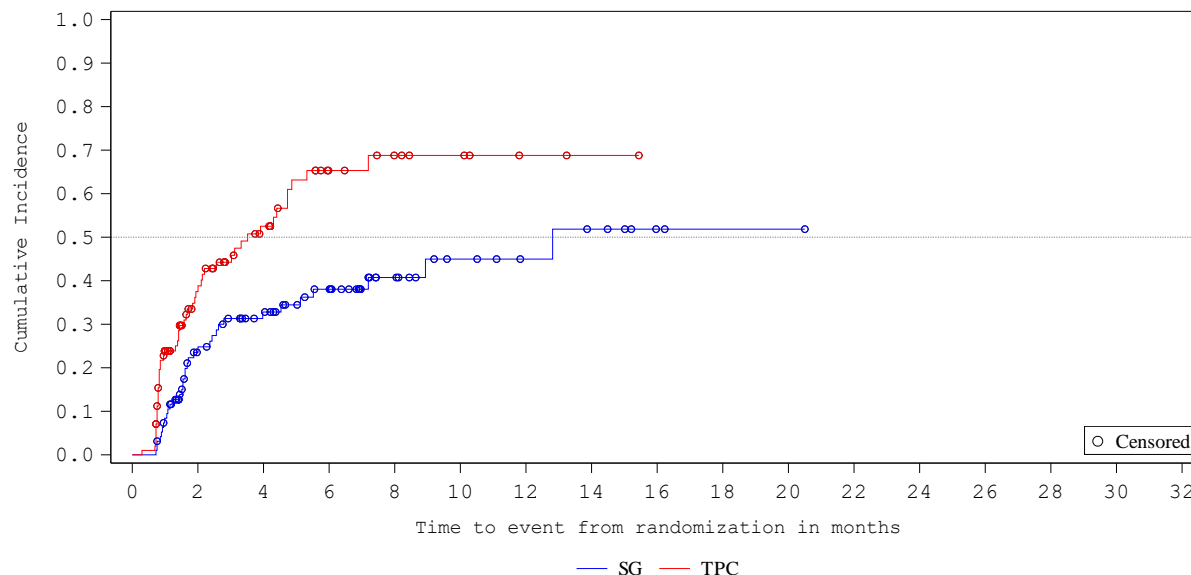
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Figure 15.15.5.3.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Emotional Functioning by Treatment Group  
 Prior CDK inhibitor treatment duration ≤12 Months  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)											
	0	2	4	6	8	10	12	14	16	18	20	22
<b>SG</b>	96	60	45	33	18	11	8	6	2	1	1	0
<b>TPC</b>	99	47	27	11	7	5	2	1	0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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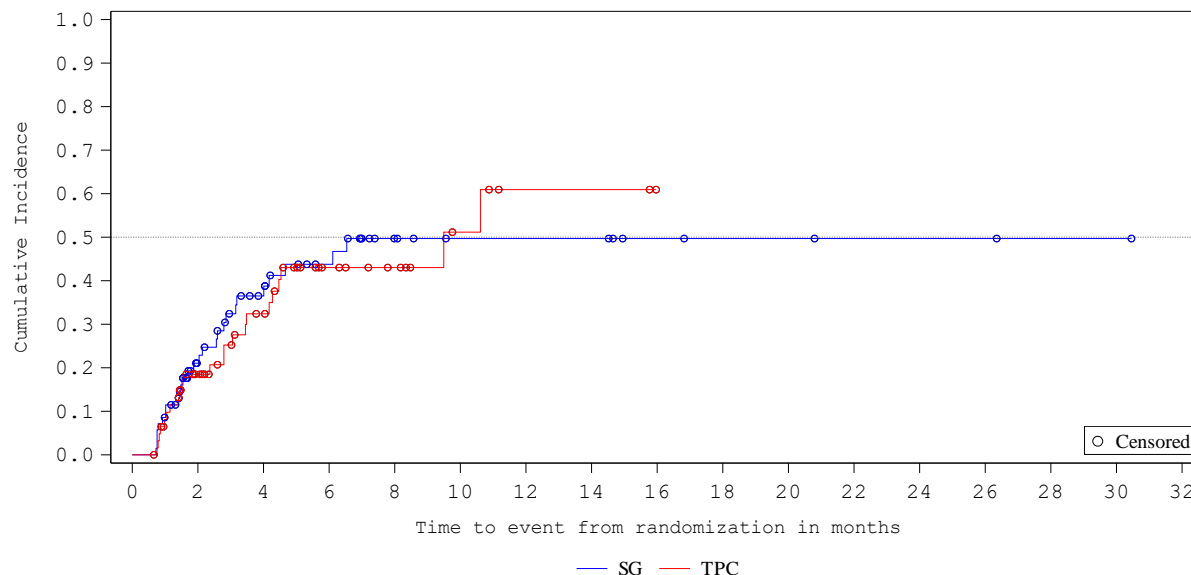
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Figure 15.15.5.3.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Emotional Functioning by Treatment Group  
 Prior CDK inhibitor treatment duration >12 Months  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)																
	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	70	43	28	19	10	7	7	7	4	3	3	2	2	2	1	1	0
<b>TPC</b>	63	41	27	14	10	5	2	2	0								

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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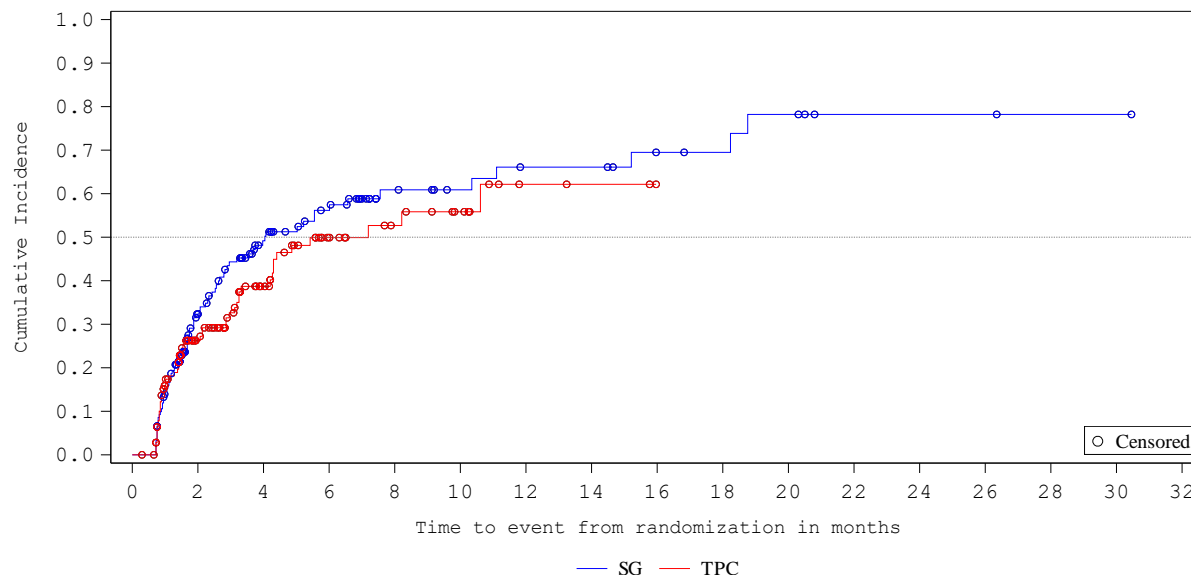
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Figure 15.15.5.4.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Cognitive Functioning by Treatment Group  
 Baseline documented target or non-target liver lesions = Yes  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)																
	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	152	82	49	34	19	15	12	12	8	7	5	2	2	2	1	1	0
<b>TPC</b>	144	76	43	22	15	10	3	2	0								

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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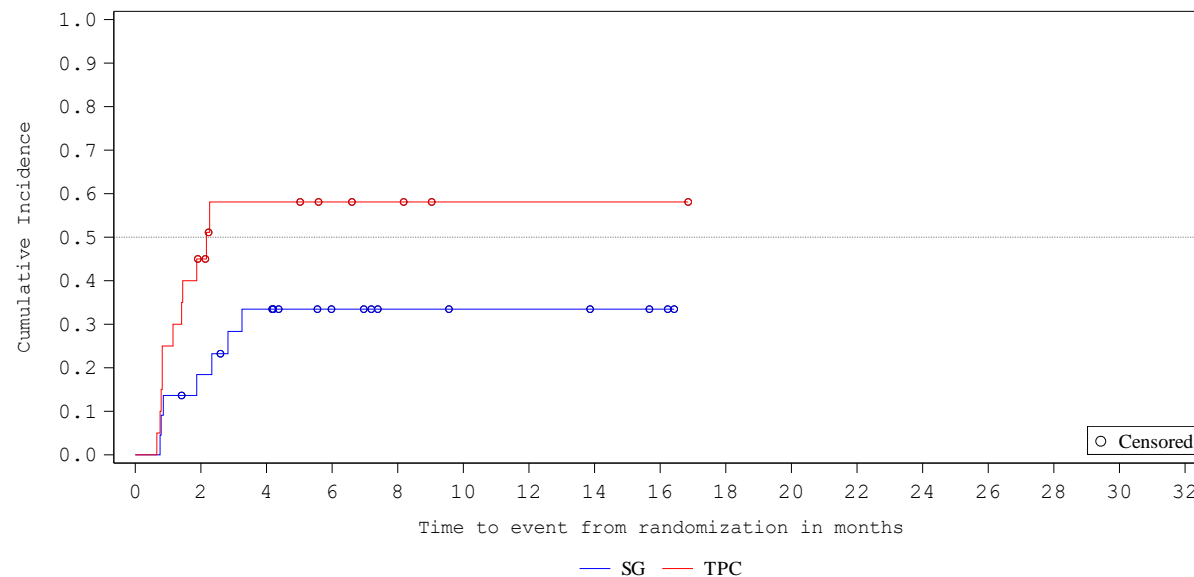
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Figure 15.15.5.4.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Cognitive Functioning by Treatment Group  
 Baseline documented target or non-target liver lesions = No  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)									
	0	2	4	6	8	10	12	14	16	18
<b>SG</b>	22	17	13	8	5	4	4	3	2	0
<b>TPC</b>	20	10	6	4	3	1	1	1	1	0

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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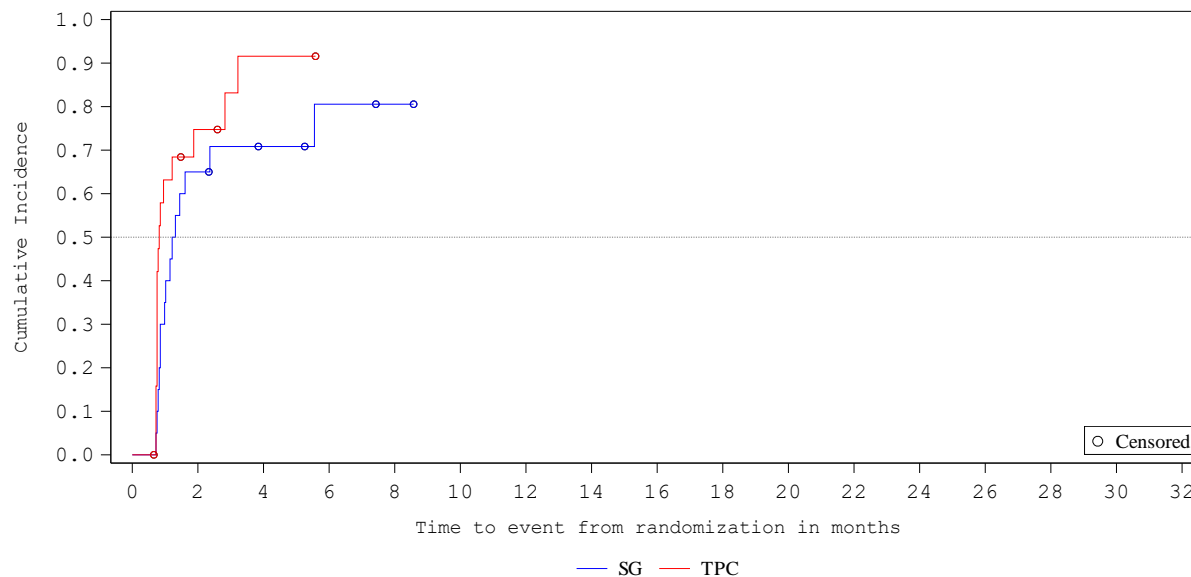
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Figure 15.15.5.5.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Fatigue by Treatment Group  
 Investigators choice of chemotherapy prior to randomizaion = Capecitabine  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)	0	2	4	6	8	10
<b>SG</b>	20	7	4	2	1	0	
<b>TPC</b>	20	4	1	0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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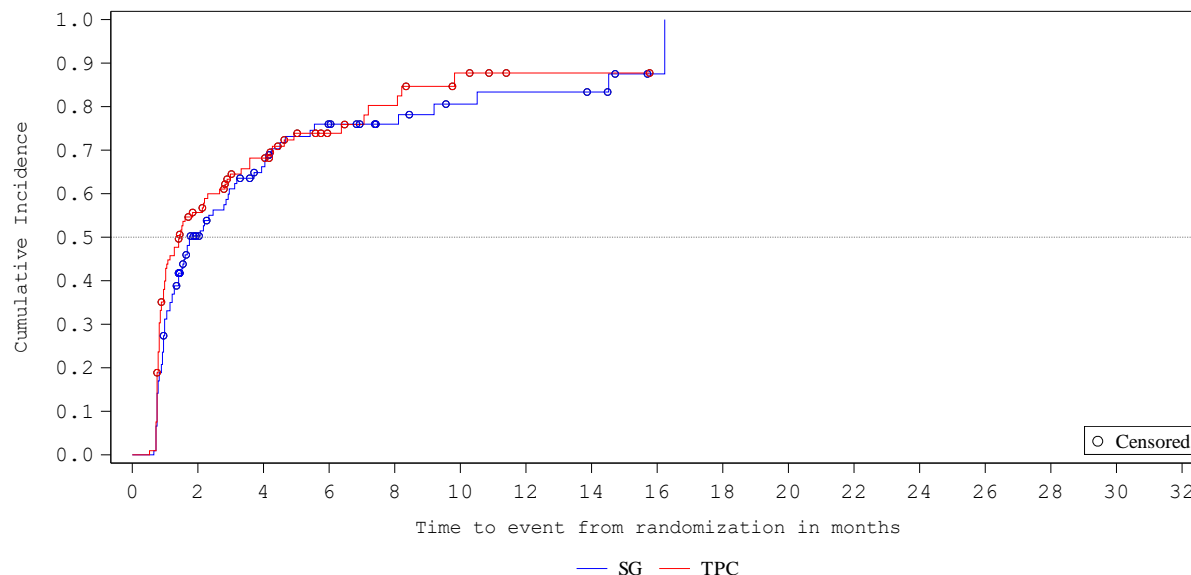
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Figure 15.15.5.5.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Fatigue by Treatment Group  
 Investigators choice of chemotherapy prior to randomizaion = Eribulin  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)	0	2	4	6	8	10	12	14	16
<b>SG</b>	106	43	25	16	11	7	6	5	1	0
<b>TPC</b>	106	42	26	13	9	4	1	1	0	0

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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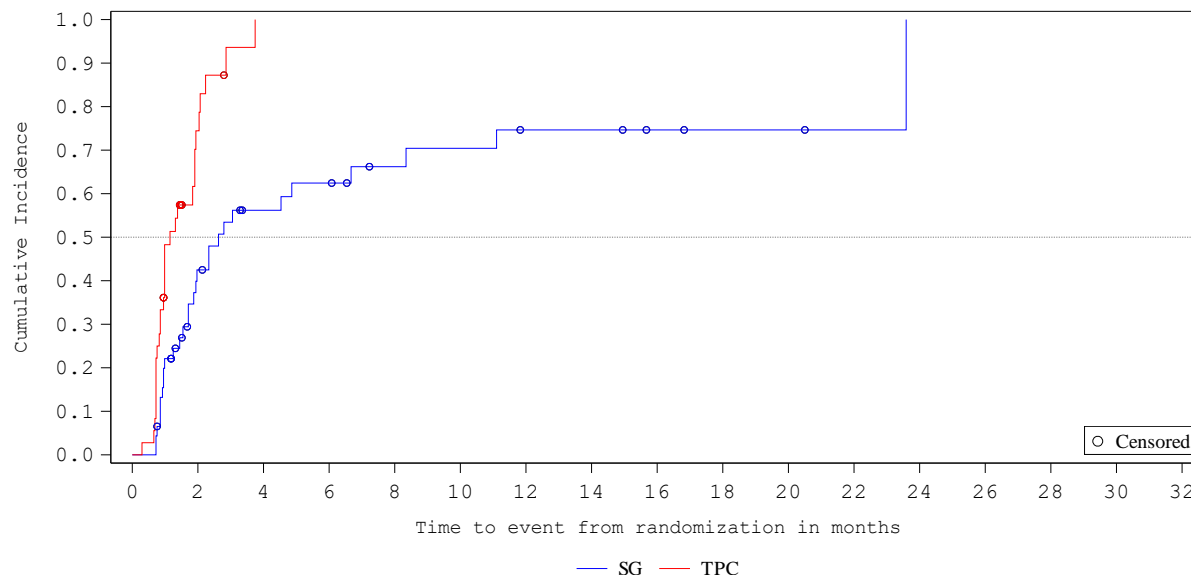
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Figure 15.15.5.5.1.3  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Fatigue by Treatment Group  
 Investigators choice of chemotherapy prior to randomizaion = Vinorelbine  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	0	2	4	6	8	10	12	14	16	18	20	22	24
<b>SG</b>	46	22	14	12	8	7	5	5	3	2	2	1	0
<b>TPC</b>	36	6	0										

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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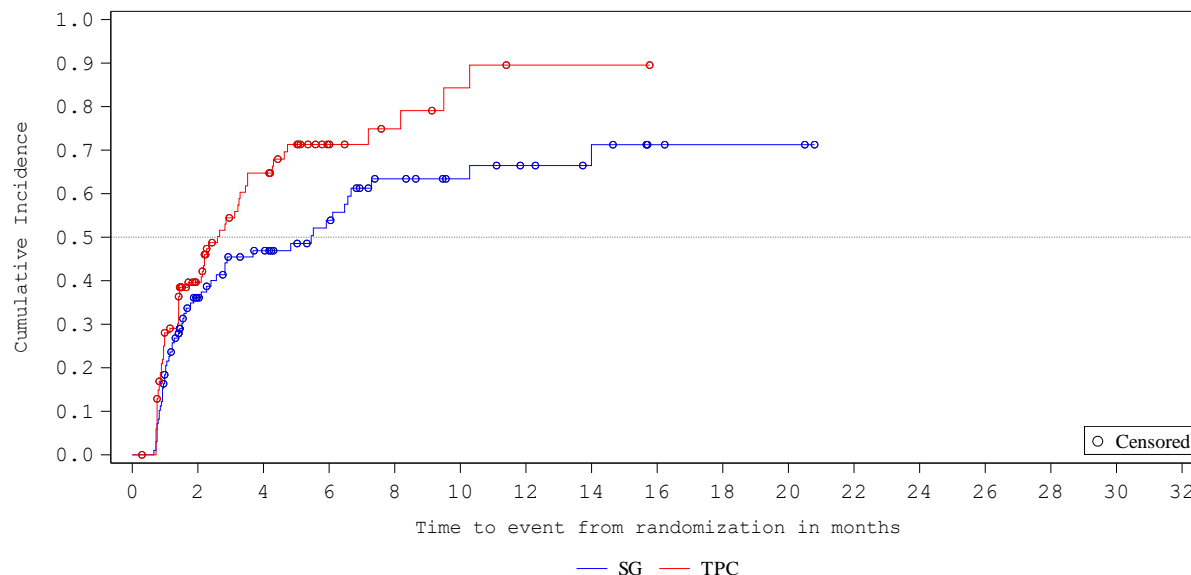
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Figure 15.15.5.6.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Pain by Treatment Group  
 Chemotherapy in neo/adjuvant setting = Yes  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



		0	2	4	6	8	10	12	14	16	18	20	22
<b>SG</b>	<b>98</b>	<b>50</b>	<b>36</b>	<b>26</b>	<b>16</b>	<b>12</b>	<b>9</b>	<b>6</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>0</b>	
<b>TPC</b>	<b>102</b>	<b>48</b>	<b>24</b>	<b>10</b>	<b>6</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>0</b>				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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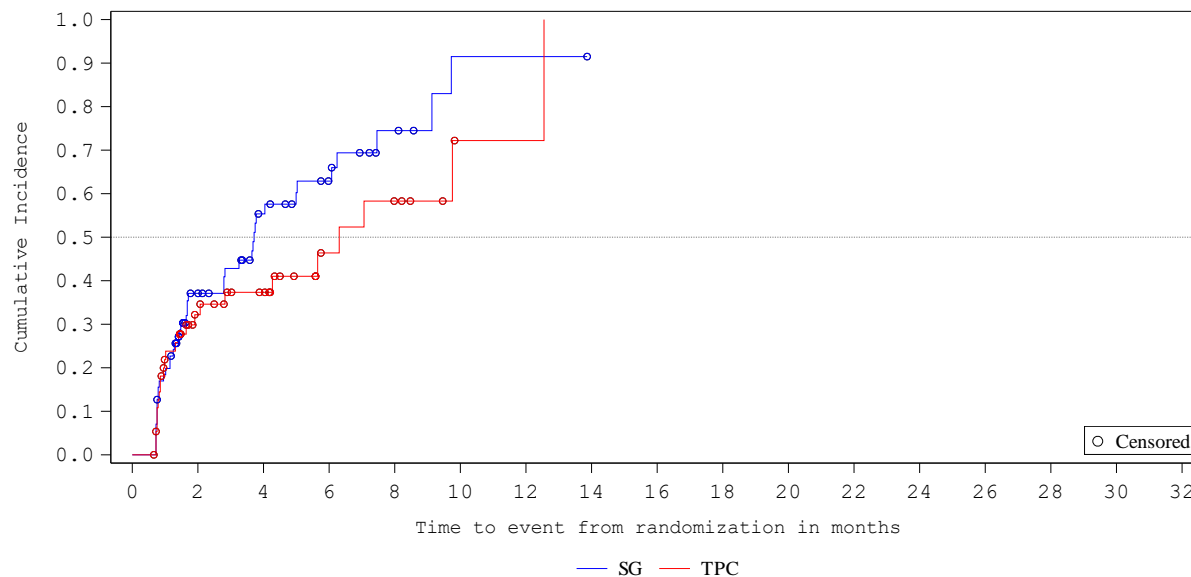
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Figure 15.15.5.6.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Pain by Treatment Group  
 Chemotherapy in neo/adjuvant setting = No  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)	0	2	4	6	8	10	12	14
<b>SG</b>	<b>71</b>	<b>36</b>	<b>20</b>	<b>12</b>	<b>5</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>
<b>TPC</b>	<b>57</b>	<b>28</b>	<b>20</b>	<b>9</b>	<b>6</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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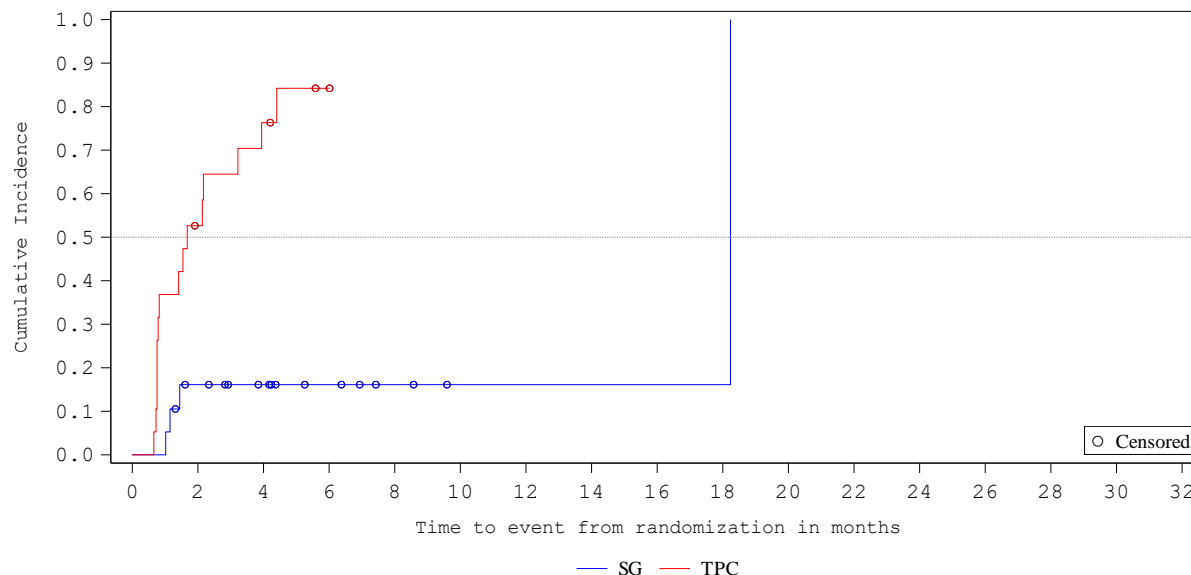
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Figure 15.15.5.7.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Insomnia by Treatment Group  
 Investigators choice of chemotherapy prior to randomizaion = Capecitabine  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	19	14	10	6	3	1	1	1	1	1	1	1	1	1	1	1	0
<b>TPC</b>	19	8	4	1	0												

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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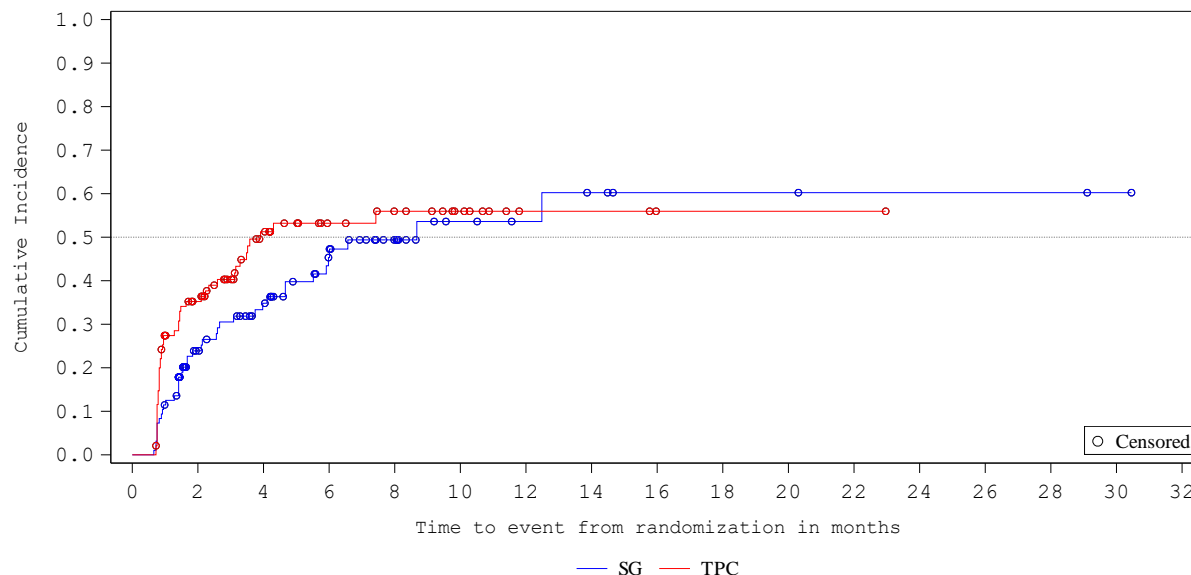
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Figure 15.15.5.7.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Insomnia by Treatment Group  
 Investigators choice of chemotherapy prior to randomizaion = Eribulin  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)																
	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	96	59	44	28	17	9	7	5	3	3	3	2	2	2	2	1	0
<b>TPC</b>	96	55	29	18	14	9	3	3	1	1	1	1	0				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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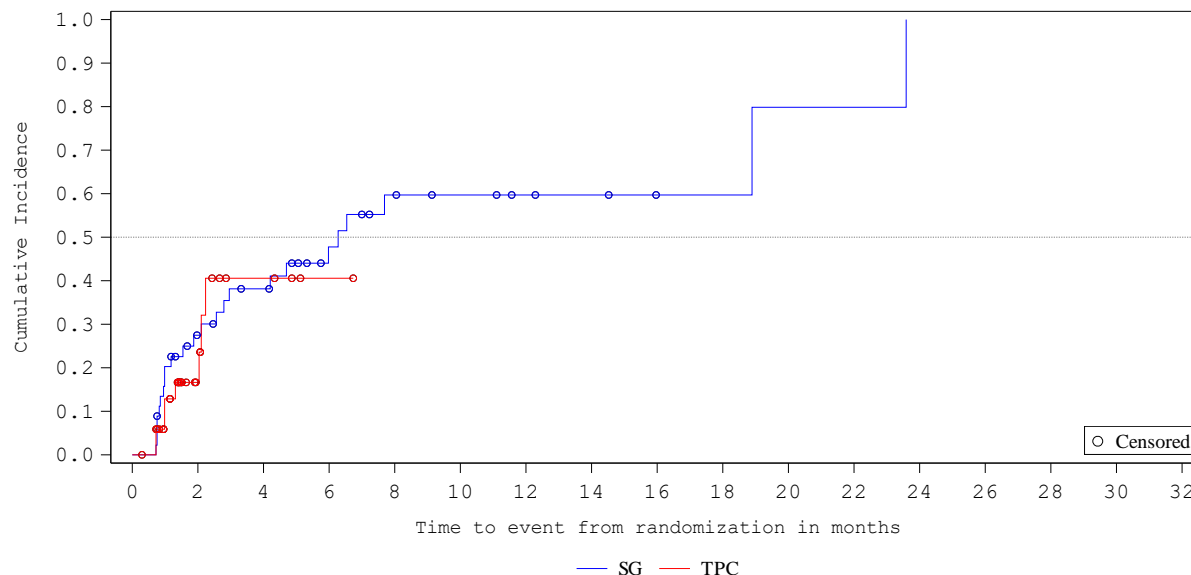
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Figure 15.15.5.7.1.3  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Insomnia by Treatment Group  
 Investigators choice of chemotherapy prior to randomizaion = Vinorelbine  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	0	2	4	6	8	10	12	14	16	18	20	22	24
<b>SG</b>	45	28	22	14	9	7	5	4	2	2	1	1	0
<b>TPC</b>	35	12	4	1	0								

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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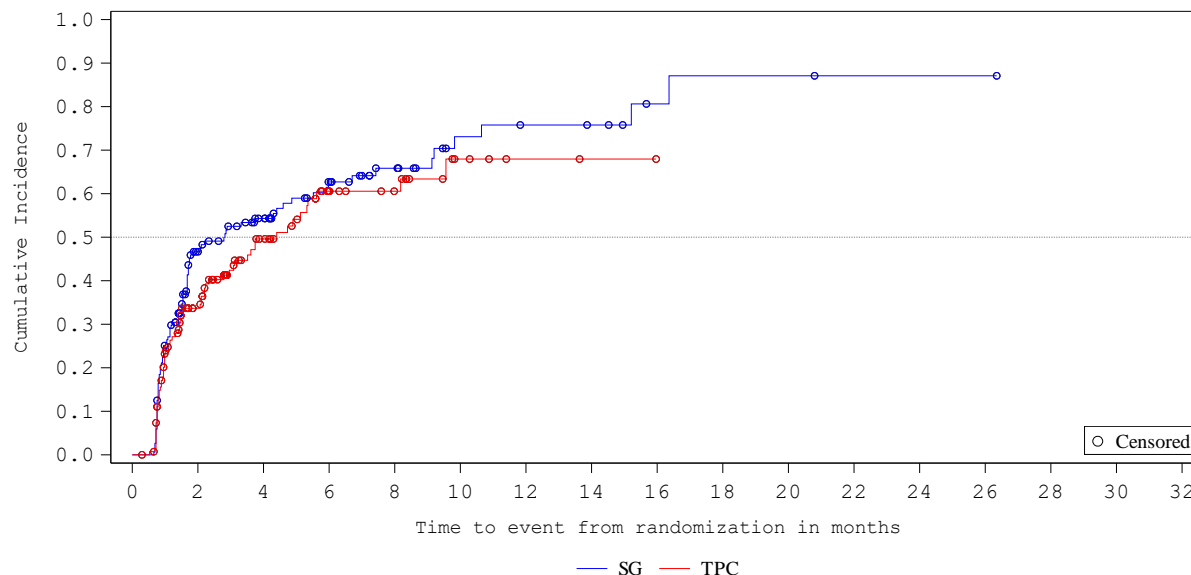
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Figure 15.15.5.8.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Appetite Loss by Treatment Group  
 Endocrine therapy in the metastatic setting for at least 6 months = Yes  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)																
	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	152	67	47	29	19	10	8	7	3	2	2	1	1	1	1	0	
<b>TPC</b>	138	73	39	19	14	5	2	1	0								

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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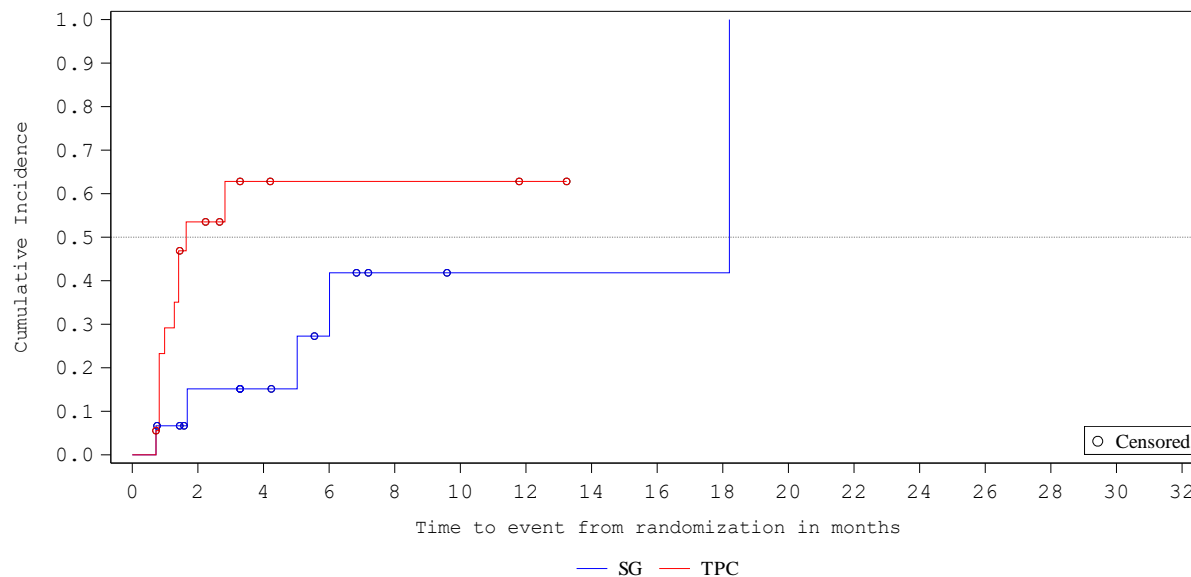
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Figure 15.15.5.8.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Appetite Loss by Treatment Group  
 Endocrine therapy in the metastatic setting for at least 6 months = No  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	0	2	4	6	8	10	12	14	16	18	20
<b>SG</b>	15	10	8	5	2	1	1	1	1	1	0
<b>TPC</b>	18	7	3	2	2	2	1	0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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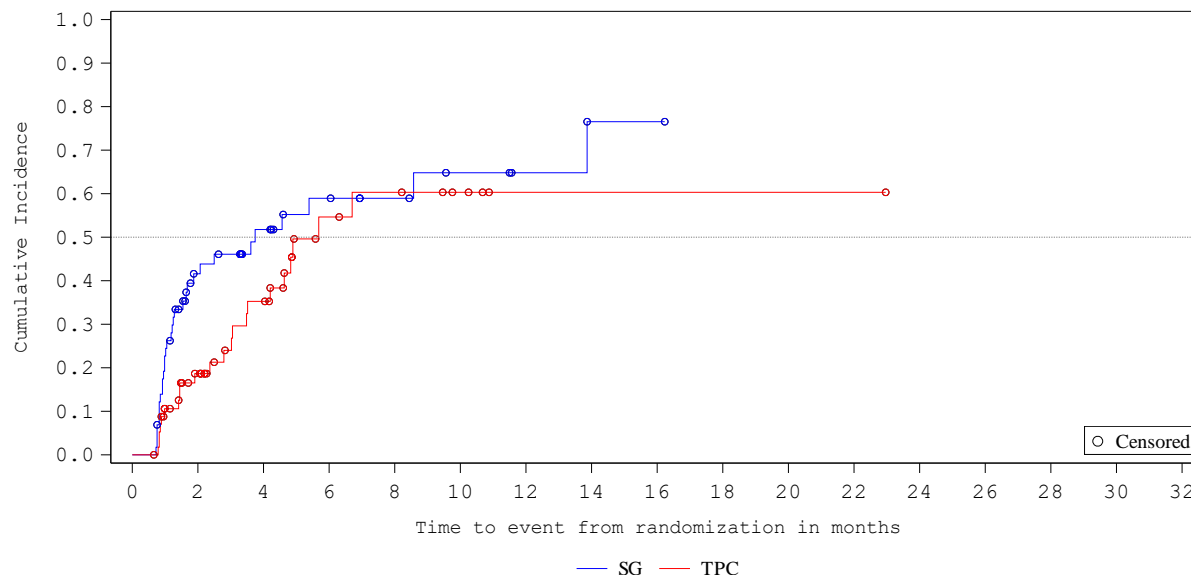
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Figure 15.15.5.9.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Constipation by Treatment Group  
 Trop2 H-Score <100  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	<b>58</b>	<b>26</b>	<b>17</b>	<b>11</b>	<b>8</b>	<b>5</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>0</b>								
<b>TPC</b>	<b>58</b>	<b>37</b>	<b>23</b>	<b>9</b>	<b>7</b>	<b>4</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>0</b>				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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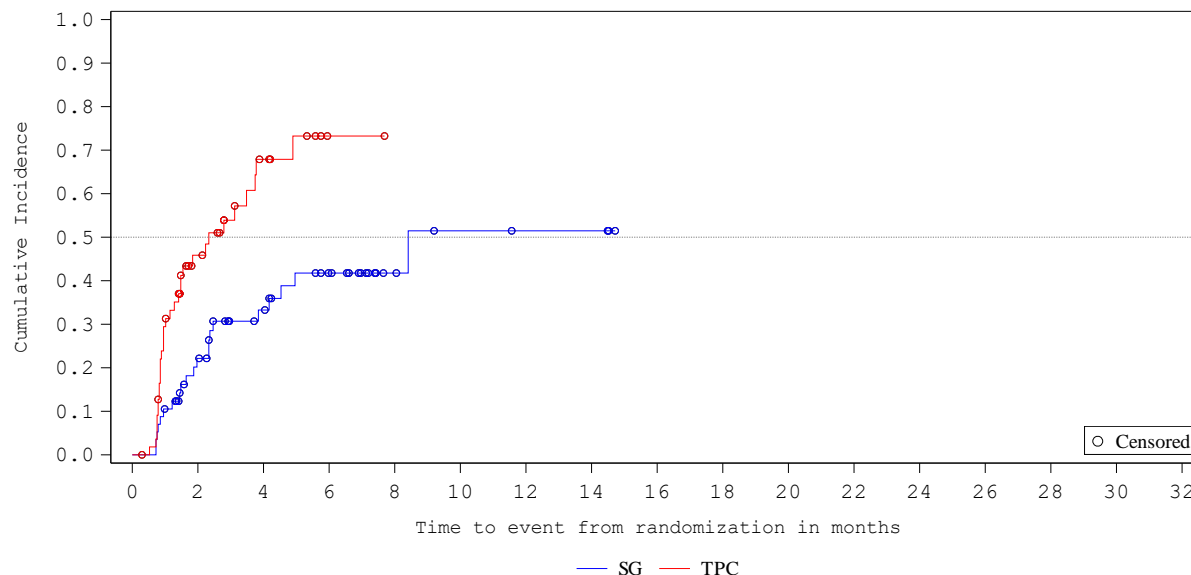
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Figure 15.15.5.9.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Constipation by Treatment Group  
 Trop2 H-Score  $\geq 100$  to  $\leq 200$   
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)									
	0	2	4	6	8	10	12	14	16	18
<b>SG</b>	57	39	26	17	7	4	3	3	0	
<b>TPC</b>	56	22	8	1	0					

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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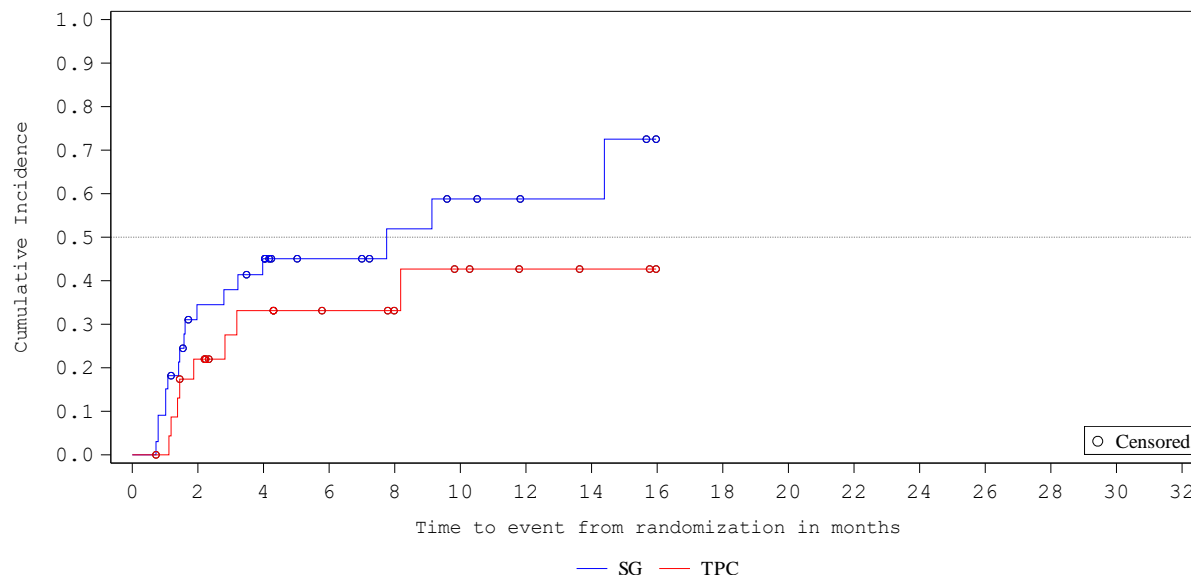
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Figure 15.15.5.9.1.3  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Constipation by Treatment Group  
 Trop2 H-Score >200  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



		0	2	4	6	8	10	12	14	16
<b>SG</b>	<b>33</b>	<b>19</b>	<b>15</b>	<b>10</b>	<b>7</b>	<b>5</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>0</b>
<b>TPC</b>	<b>24</b>	<b>17</b>	<b>12</b>	<b>9</b>	<b>7</b>	<b>5</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>0</b>

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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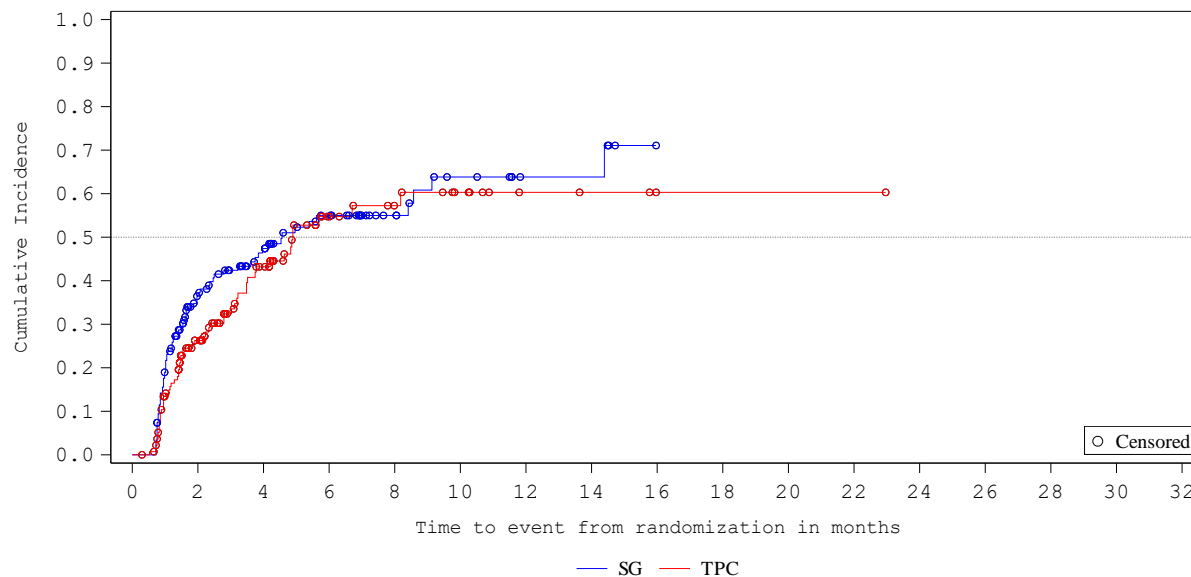
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Figure 15.15.5.9.2.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Constipation by Treatment Group  
 Baseline documented target or non-target liver lesions = Yes  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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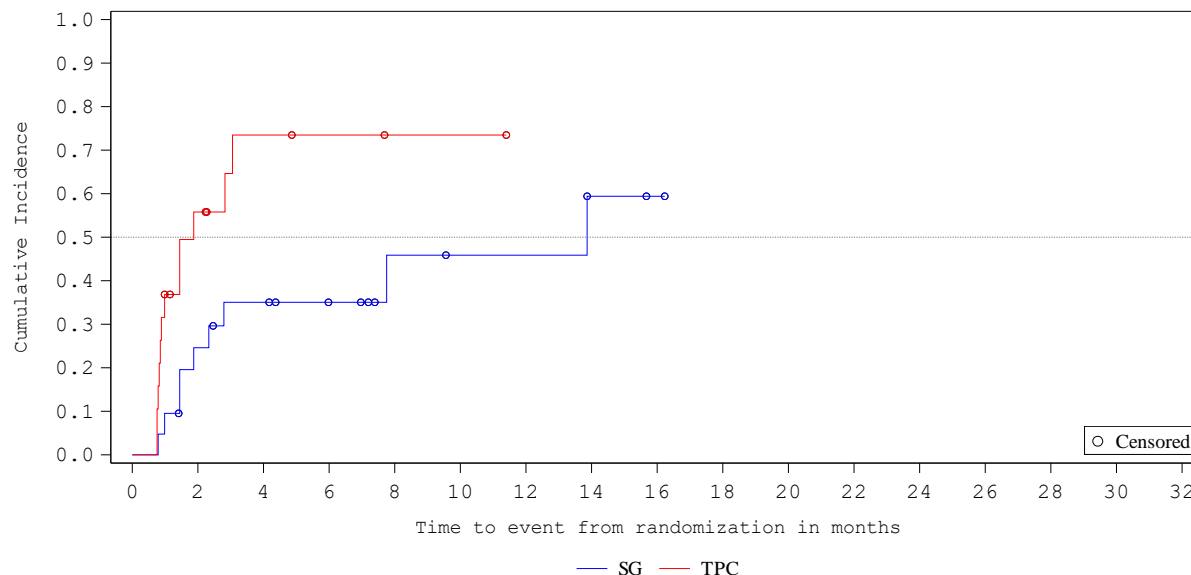
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Figure 15.15.5.9.2.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Constipation by Treatment Group  
 Baseline documented target or non-target liver lesions = No  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	0	2	4	6	8	10	12	14	16	18
<b>SG</b>	21	15	12	9	5	4	4	2	1	0
<b>TPC</b>	19	7	3	2	1	1	0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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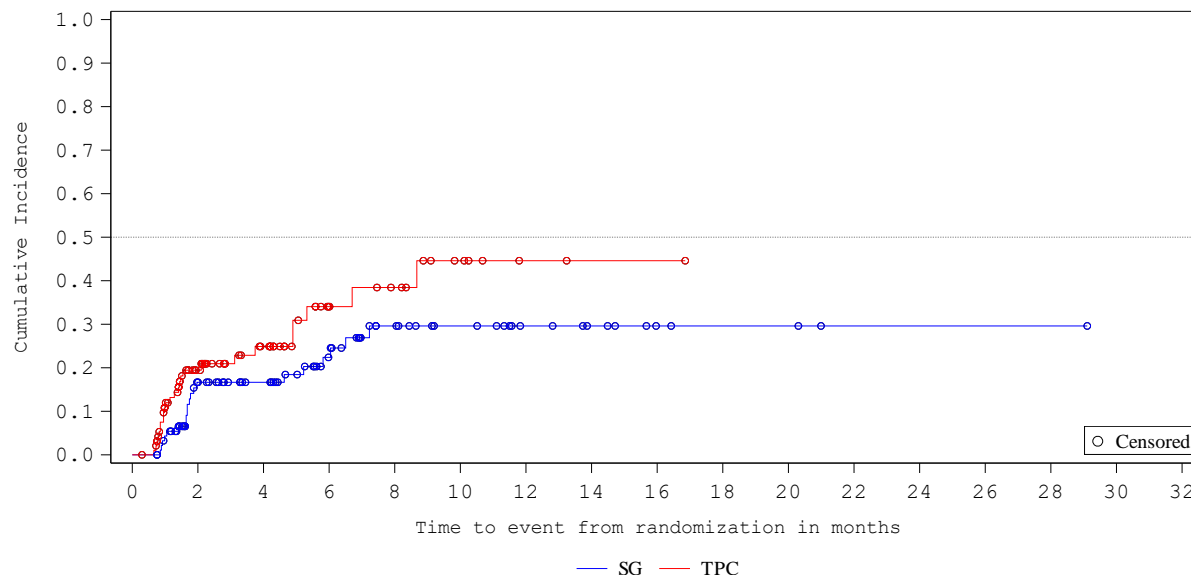
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Figure 15.15.5.10.1.1  
Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Financial Difficulties by Treatment Group  
Prior CDK inhibitor treatment duration ≤12 Months  
Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
Subjects with very poor baseline scores were excluded



	Number at Risk (Events)															
	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30
<b>SG</b>	95	64	52	36	23	17	11	8	4	3	3	1	1	1	1	0
<b>TPC</b>	97	55	35	16	12	6	2	1	1	0						

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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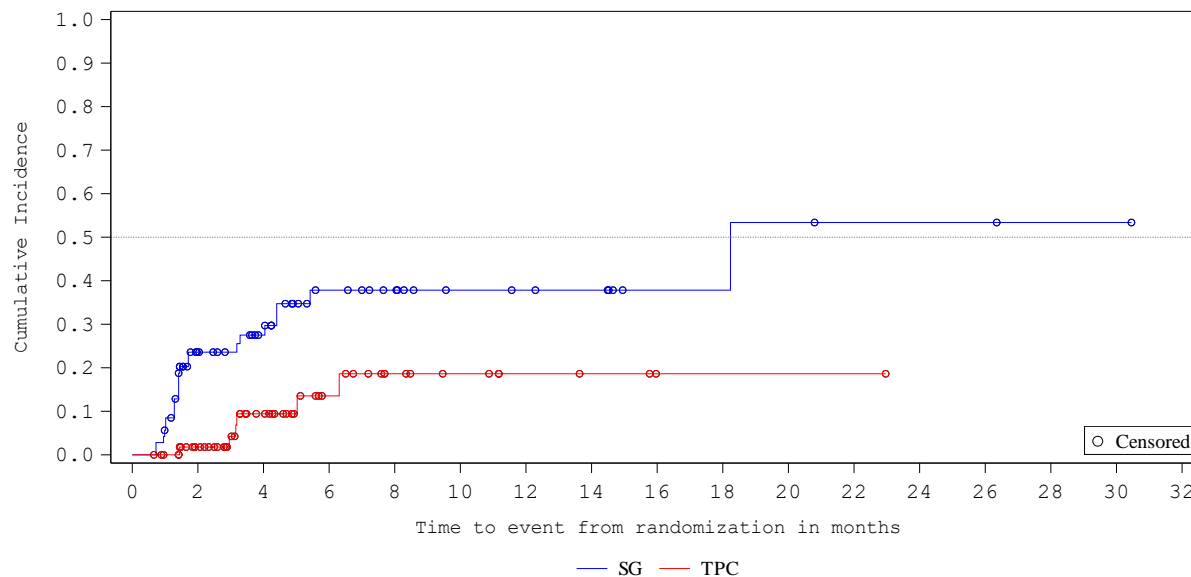
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Figure 15.15.5.10.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Financial Difficulties by Treatment Group  
 Prior CDK inhibitor treatment duration >12 Months  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)																
	0	2	4	6	8	10	12	14	16	18	20	22	24	26	28	30	32
<b>SG</b>	71	43	33	19	15	10	9	8	4	4	3	2	2	2	1	1	0
<b>TPC</b>	61	48	30	17	10	7	4	3	1	1	1	1	0				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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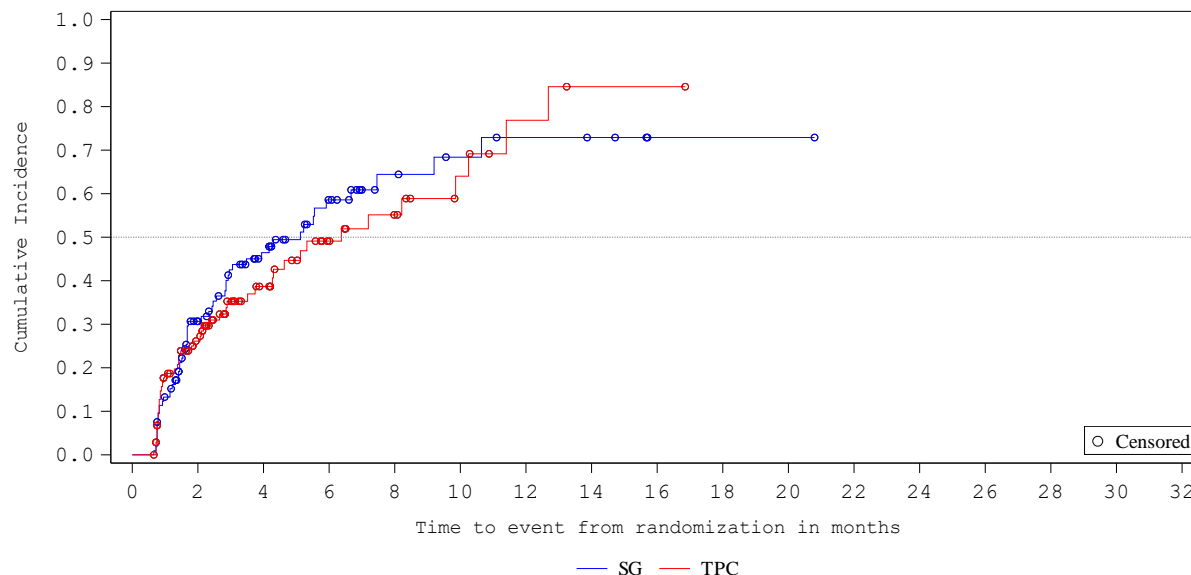
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Figure 15.15.5.11.1.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Summary Score by Treatment Group  
 Geographic region = Europe  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)											
	0	2	4	6	8	10	12	14	16	18	20	22
<b>SG</b>	106	62	38	21	10	7	5	4	1	1	1	0
<b>TPC</b>	106	64	34	19	13	7	3	1	1	0		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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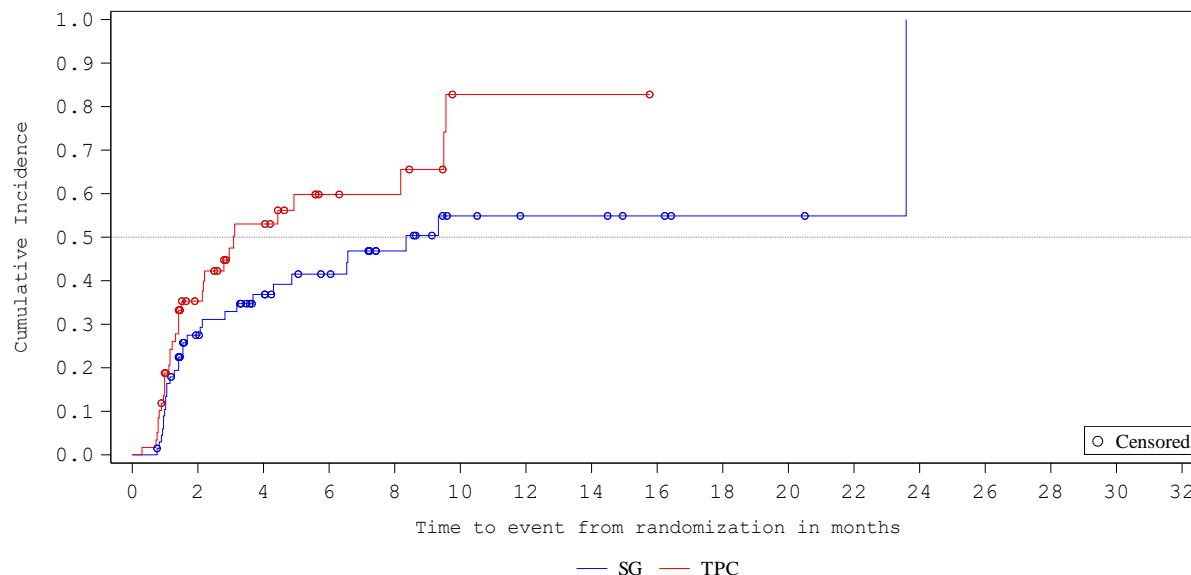
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Figure 15.15.5.11.1.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Summary Score by Treatment Group  
 Geographic region = North America  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)												
	0	2	4	6	8	10	12	14	16	18	20	22	24
<b>SG</b>	68	41	30	23	15	8	6	6	4	2	2	1	0
<b>TPC</b>	59	28	17	8	7	1	1	1	0				

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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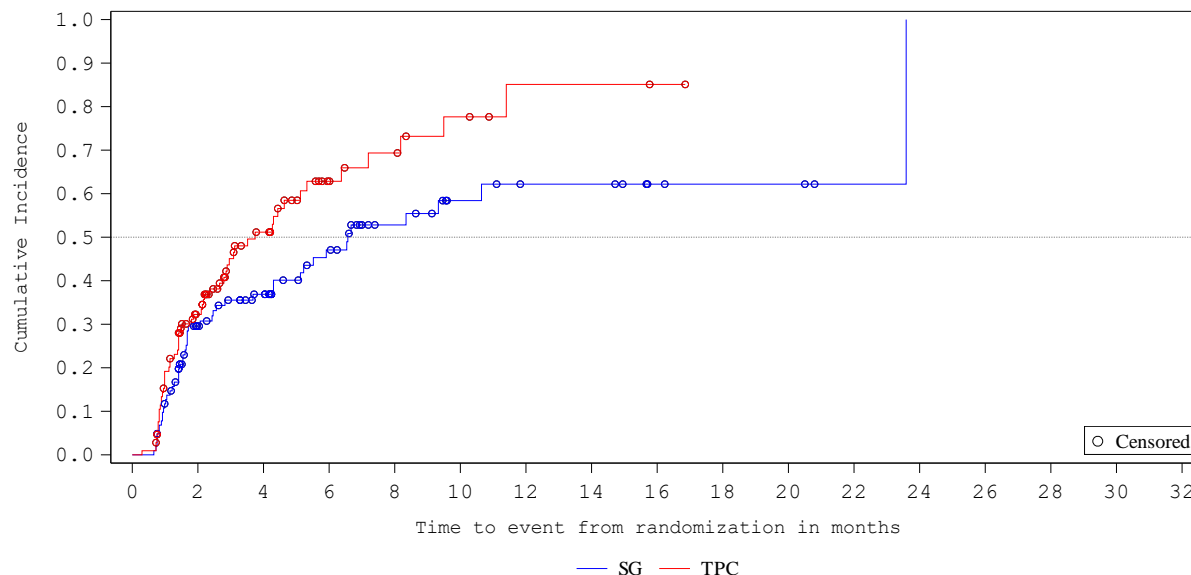
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Figure 15.15.5.11.2.1  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Summary Score by Treatment Group  
 Chemotherapy in neo/adjuvant setting = Yes  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)												
	0	2	4	6	8	10	12	14	16	18	20	22	24
<b>SG</b>	103	61	46	30	18	11	8	8	4	3	3	1	0
<b>TPC</b>	107	60	30	13	9	5	2	2	1	0			

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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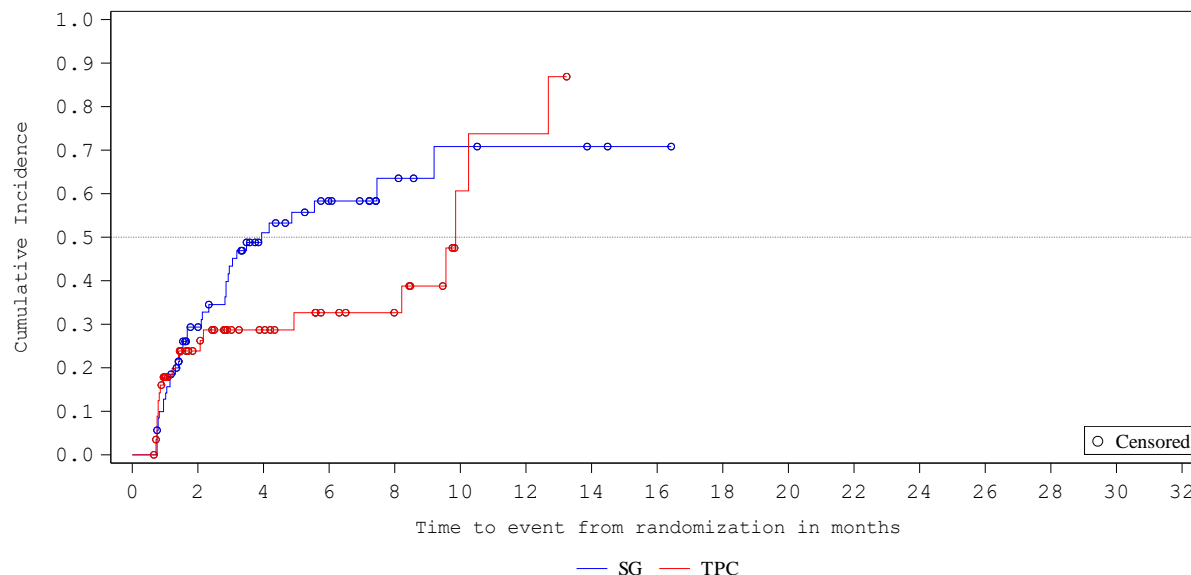
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Figure 15.15.5.11.2.2  
 Kaplan-Meier Plot of Time to First Worsening with Death Being Censored for EORTC QLQ-C30 Summary Score by Treatment Group  
 Chemotherapy in neo/adjuvant setting = No  
 Excluding Subjects for Whom Gemcitabine was selected as TPC Prior to Randomization  
 Subjects with very poor baseline scores were excluded



	Number at Risk (Events)									
	0	2	4	6	8	10	12	14	16	18
<b>SG</b>	71	42	22	14	7	4	3	2	1	0
<b>TPC</b>	58	32	21	14	11	3	2	0		

Note: "EORTC QLQ-C30 Evaluable population" is defined as ITT subjects who completed at least one of the 15 domains/scales at baseline and at least one evaluable assessment at post-baseline visits based on EORTC QLQ-C30. A clinically meaningful deterioration is defined as at least 10 points of worsening from baseline. Death is censored at the time of the last non-missing HRQoL assessment prior to death in the analysis. CI = Confidence Interval; EORTC QLQ-C30 = European Organization for Research and Treatment of Cancer Quality-of-Life Core 30 questionnaire; HR = Hazard Ratio; QoL = Quality of Life; SG = Sacituzumab Govitecan; TPC = Treatment Physician Choice.

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**Anhang 4-G 7: Unerwünschte Ereignisse**

**Anhang 4-G 7.1: Gesamtraten**

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.2.1.1.1: Time to the First Treatment-Emergent Adverse Event (TEAE)  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients With Events (%)	201 (100.0%)	185 ( 95.4%)	
Patients Without Events (Censored) (%)	0	9 ( 4.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.530 (1.243, 1.883)
p-value			<0.0001

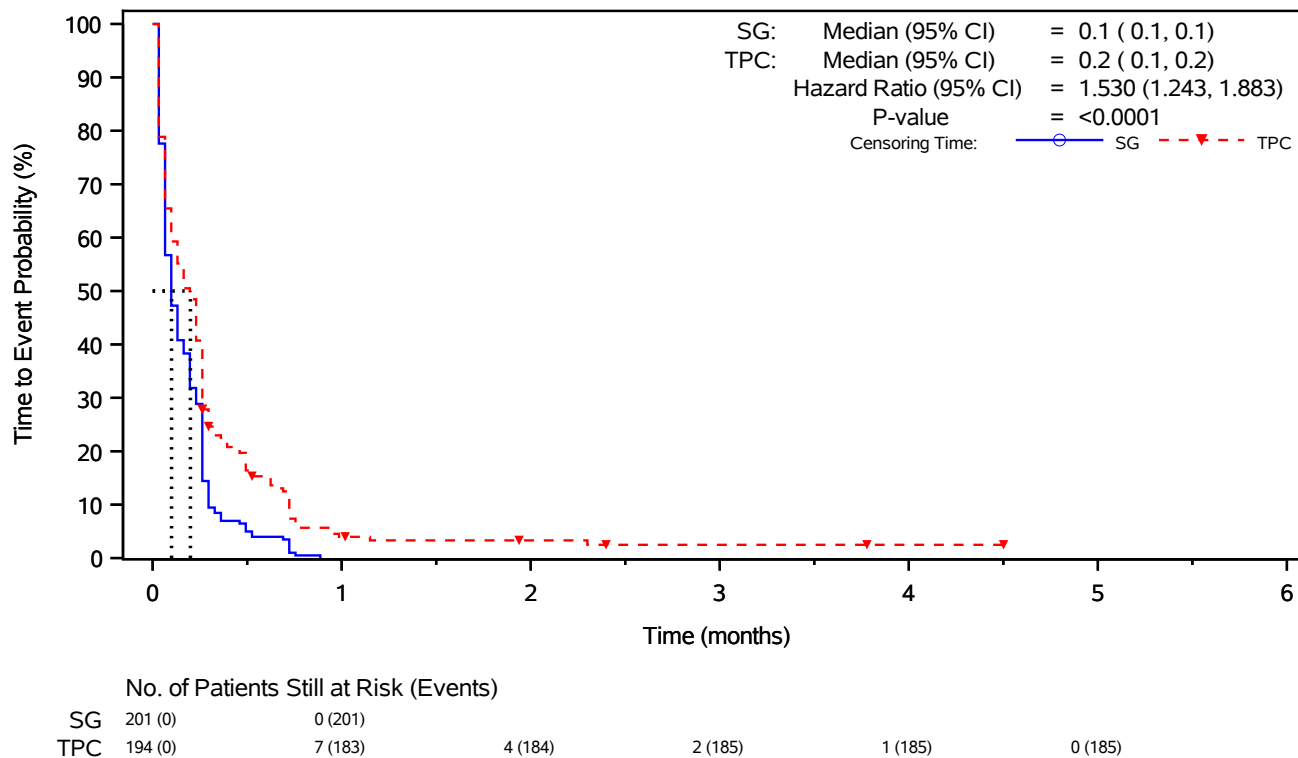
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09

Figure 15.11.2.1.1: KM Plot for Time to the First TEAE  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.2.2.1: Time to the First Serious Treatment-Emergent Adverse Event (SAE)  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients With Events (%)	55 ( 27.4%)	34 ( 17.5%)	
Patients Without Events (Censored) (%)	146 ( 72.6%)	160 ( 82.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.424 (0.925, 2.193)
p-value			0.1068

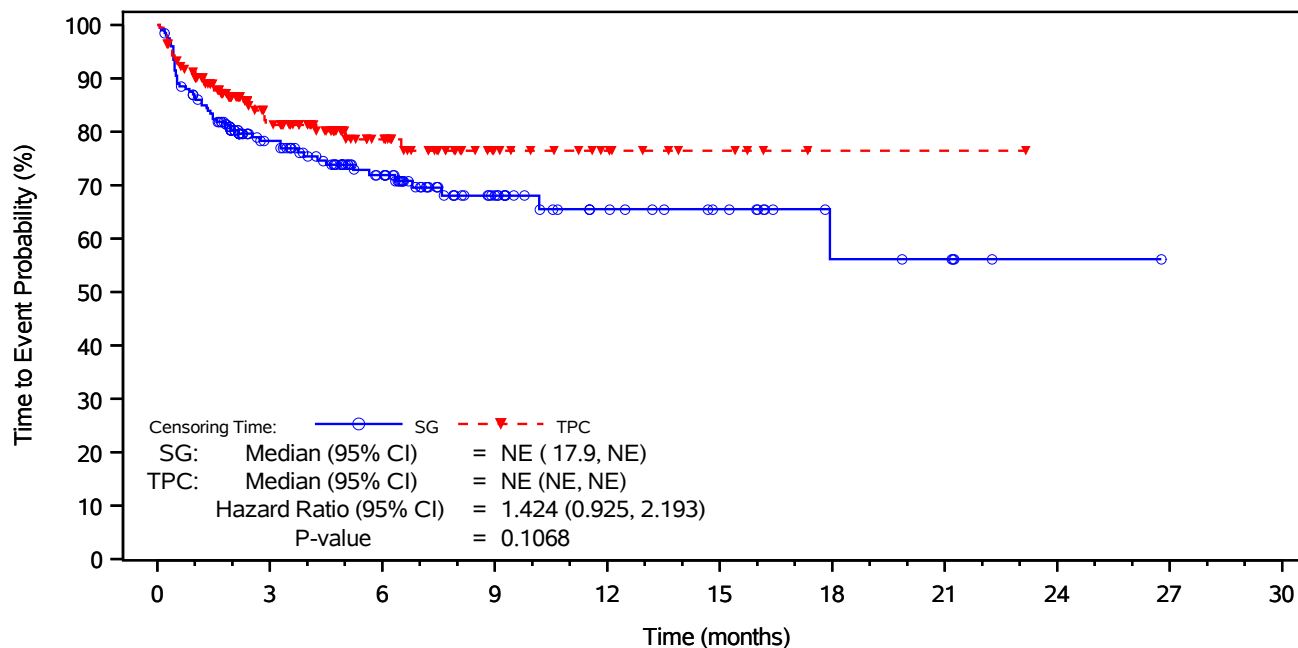
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
The analysis is based on Interim 2 data cut at 7/1/2022.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Figure 15.11.2.2.1: KM Plot for Time to the First Serious TEAE  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)									
SG	201 (0)	112 (42)	72 (50)	36 (53)	20 (54)	14 (54)	6 (55)	5 (55)	1 (55)	0 (55)
TPC	194 (0)	90 (31)	44 (33)	18 (34)	11 (34)	5 (34)	1 (34)	1 (34)	0 (34)	

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Study IMMU-132-09

Table 15.11.2.3.1: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE)  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients With Events (%)	151 ( 75.1%)	110 ( 56.7%)	
Patients Without Events (Censored) (%)	50 ( 24.9%)	84 ( 43.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.7, 1.0)	2.4 (1.1, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.493 (1.165, 1.912)
p-value			0.0015

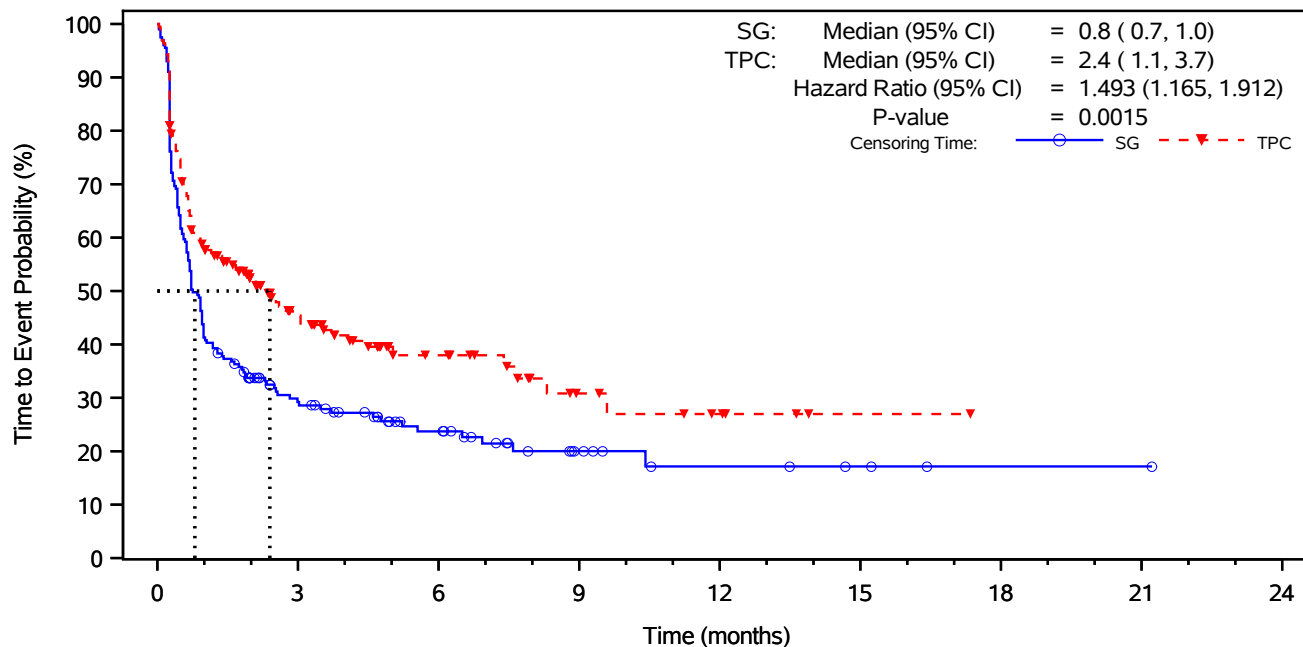
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Figure 15.11.2.3.1: KM Plot for Time to the First Grade 3 or Higher TEAE  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)								
SG	201 (0)	45 (140)	25 (147)	10 (150)	5 (151)	3 (151)	1 (151)	1 (151)	0 (151)
TPC	194 (0)	52 (99)	22 (106)	9 (109)	5 (110)	1 (110)	0 (110)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Study IMMU-132-09

Table 15.11.5.1: Time to the First TEAE Leading to Any Study Drug Discontinuation  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients With Events (%)	14 ( 7.0%)	6 ( 3.1%)	
Patients Without Events (Censored) (%)	187 ( 93.0%)	188 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.701 (0.639, 4.527)
p-value			0.2816

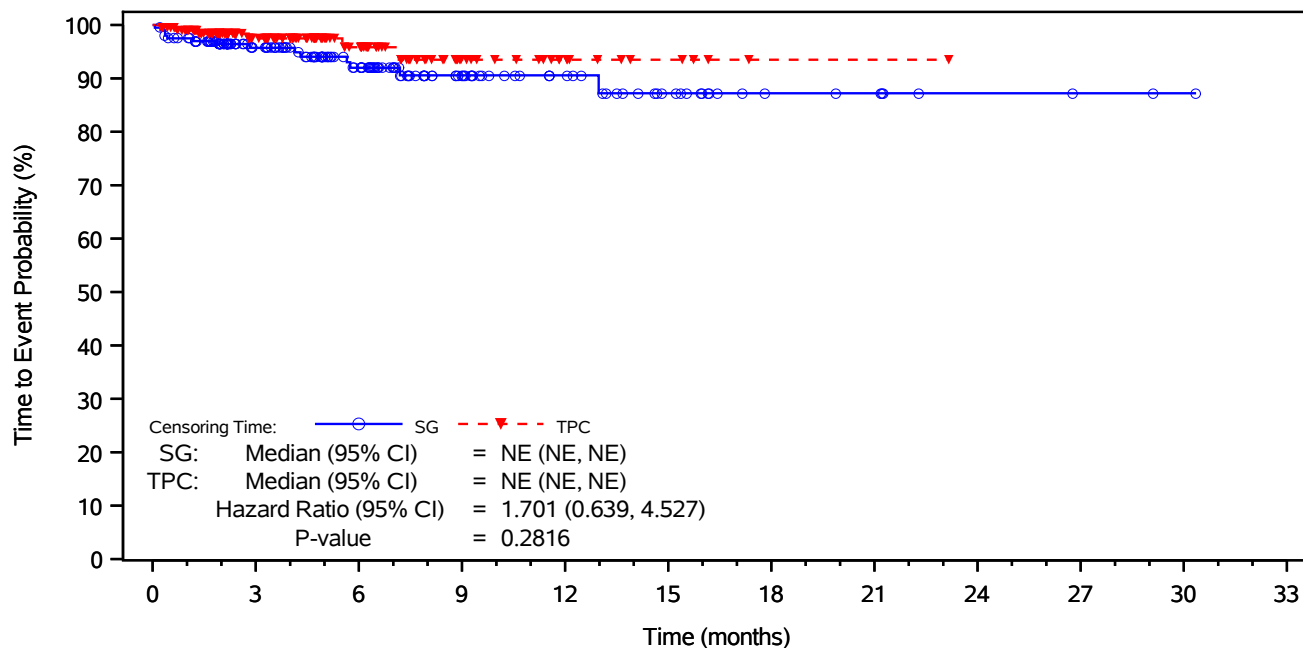
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Figure 15.11.5.1: KM Plot for Time to the First TEAE Leading to Any Study Drug Discontinuation  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	131 (8)	87 (12)	47 (13)	30 (13)	18 (14)	8 (14)	7 (14)	3 (14)	2 (14)	1 (14)	0 (14)
TPC	194 (0)	104 (4)	55 (5)	21 (6)	11 (6)	5 (6)	1 (6)	1 (6)	0 (6)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Study IMMU-132-09

Table 15.11.3.1: Time to the First Treatment-Emergent Adverse Event (TEAE) Leading to Death  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients With Events (%)	4 ( 2.0%)	0	
Patients Without Events (Censored) (%)	197 ( 98.0%)	194 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0925

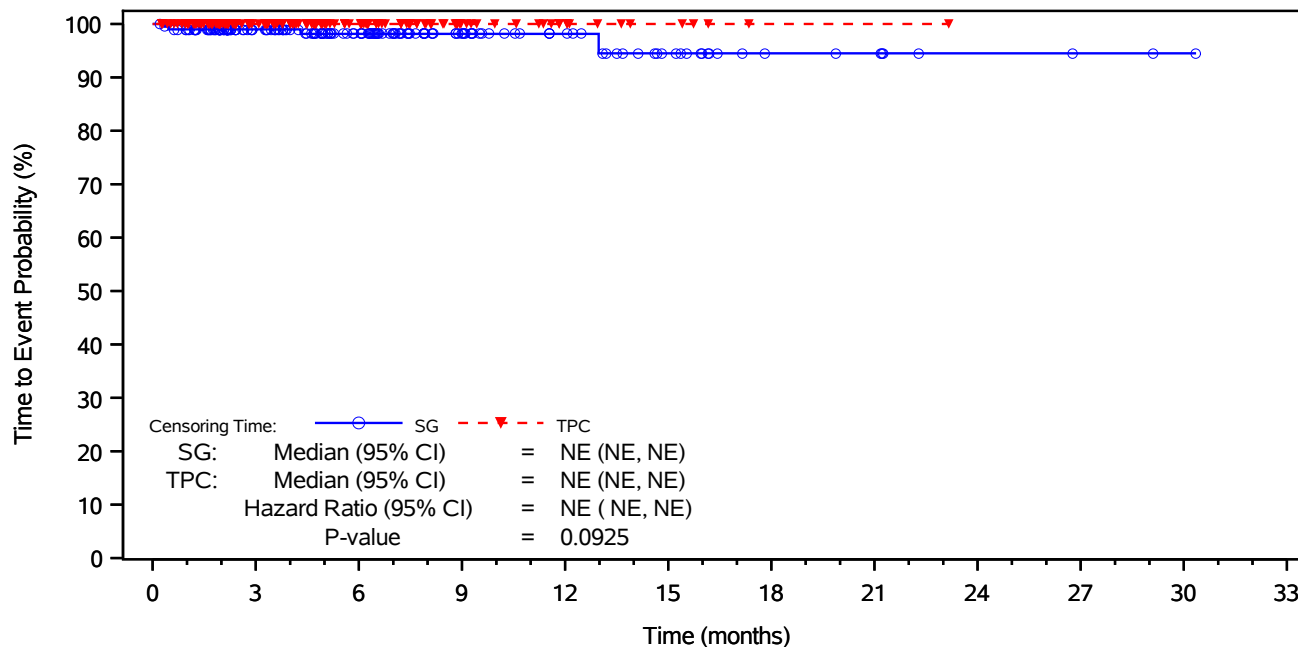
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Figure 15.11.3.1: KM Plot for Time to the First TEAE Leading to Death  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	133 (2)	89 (3)	47 (3)	30 (3)	18 (4)	8 (4)	7 (4)	3 (4)	2 (4)	1 (4)	0 (4)
TPC	194 (0)	106 (0)	55 (0)	21 (0)	11 (0)	5 (0)	1 (0)	1 (0)	0 (0)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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**Anhang 4-G 7.2: Gesamtraten unter Ausschluss erkrankungsbezogener Ereignisse**

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09

Table 15.11.6.1: Time to the First TEAE Excluding Disease-Related Events  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients With Events (%)	201 (100.0%)	185 ( 95.4%)	
Patients Without Events (Censored) (%)	0	9 ( 4.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.530 (1.243, 1.883)
p-value			<0.0001

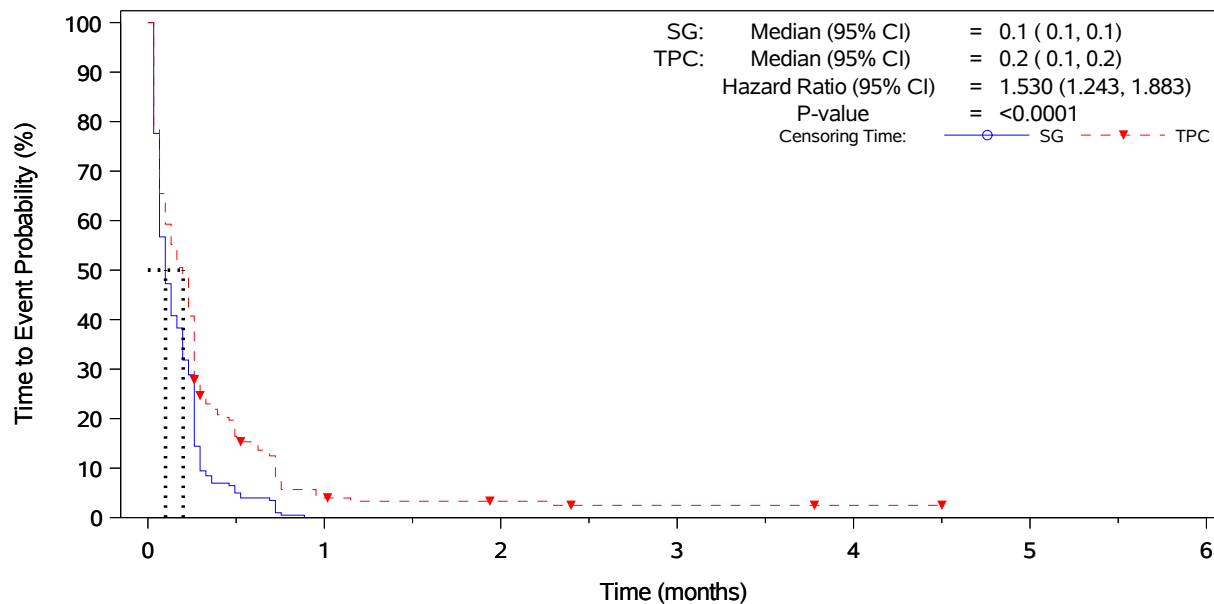
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Disease-related events are Cancer pain, Tumour pain, Malignant pleural effusion and Metastases to skin in SOC Neoplasms benign, malignant and unspecified (incl cysts and polyps).

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Study IMMU-132-09

Figure 15.11.6.1: KM Plot for Time to the First TEAE Excluding Disease-Related Events  
Safety Population  
Excluding participants pre-selected to Gemcitabine



No. of Patients Still at Risk (Events)

	0	0.5	1	2	3	4	5	6
SG	201 (0)	0 (201)						
TPC	194 (0)	7 (183)	4 (184)	2 (185)	1 (185)	0 (185)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Disease-related events are Cancer pain, Tumour pain, Malignant pleural effusion and Metastases to skin in SOC Neoplasms benign, malignant and unspecified (incl cysts and polyps).

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.6.2: Time to the First Serious TEAE Excluding Disease-Related Events  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients With Events (%)	55 ( 27.4%)	34 ( 17.5%)	
Patients Without Events (Censored) (%)	146 ( 72.6%)	160 ( 82.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.424 (0.925, 2.193)
p-value			0.1068

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Disease-related events are Cancer pain, Tumour pain, Malignant pleural effusion and Metastases to skin in SOC Neoplasms benign, malignant and unspecified (incl cysts and polyps).

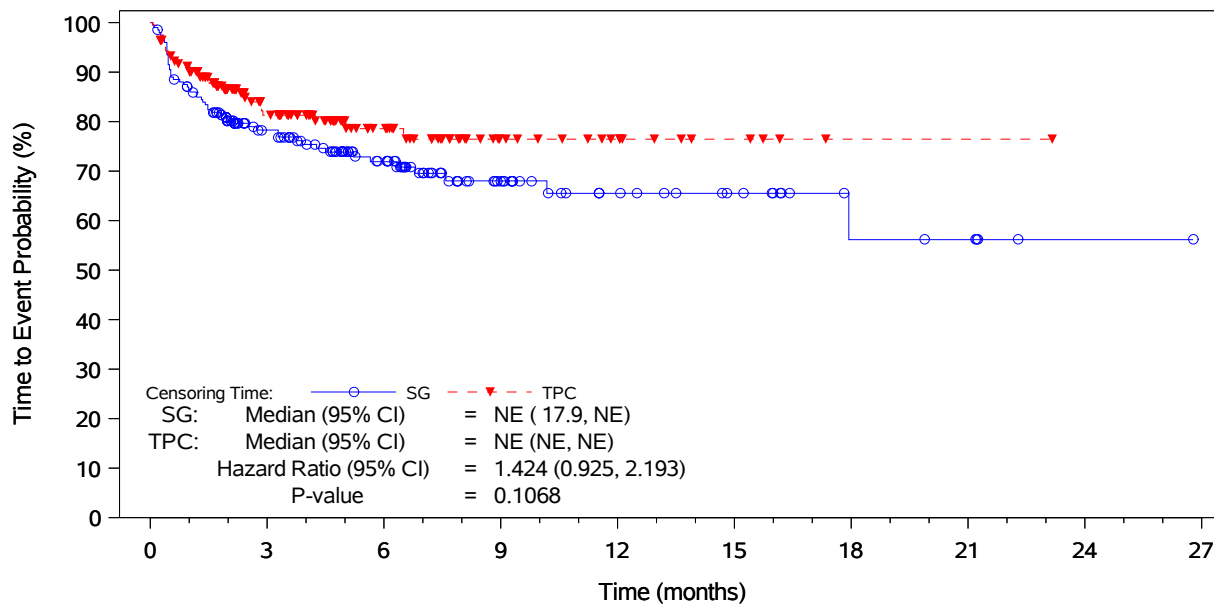
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Study IMMU-132-09

Figure 15.11.6.2: KM Plot for Time to the First Serious TEAE Excluding Disease-Related Events  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)									
	0	3	6	9	12	15	18	21	24	27
SG	201 (0)	112 (42)	72 (50)	36 (53)	20 (54)	14 (54)	6 (55)	5 (55)	1 (55)	0 (55)
TPC	194 (0)	90 (31)	44 (33)	18 (34)	11 (34)	5 (34)	1 (34)	1 (34)	0 (34)	

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Disease-related events are Cancer pain, Tumour pain, Malignant pleural effusion and Metastases to skin in SOC Neoplasms benign, malignant and unspecified (incl cysts and polyps).

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Study IMMU-132-09

Table 15.11.6.3: Time to the First Grade 3 or Higher TEAE Excluding Disease-Related Events  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients With Events (%)	151 ( 75.1%)	110 ( 56.7%)	
Patients Without Events (Censored) (%)	50 ( 24.9%)	84 ( 43.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.7, 1.0)	2.4 (1.1, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.493 (1.165, 1.912)
p-value			0.0015

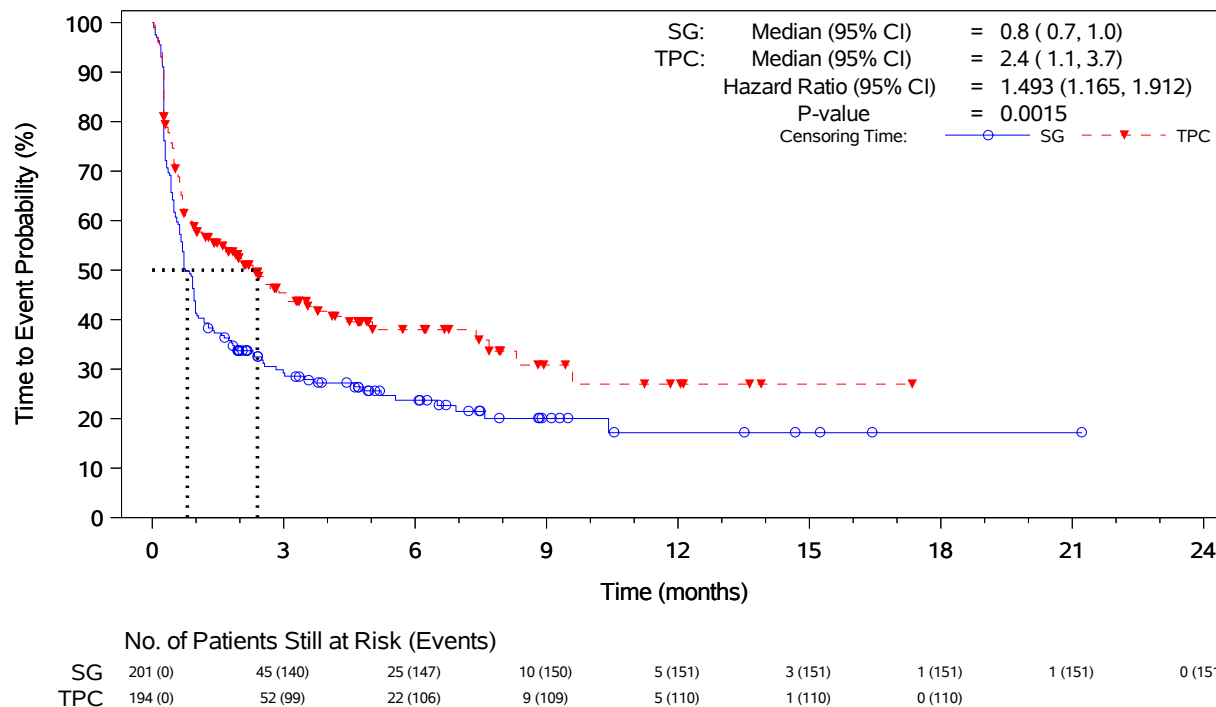
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Disease-related events are Cancer pain, Tumour pain, Malignant pleural effusion and Metastases to skin in SOC Neoplasms benign, malignant and unspecified (incl cysts and polyps).  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.6.3: KM Plot for Time to the First Grade 3 or Higher TEAE Excluding Disease-Related Events  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Disease-related events are Cancer pain, Tumour pain, Malignant pleural effusion and Metastases to skin in SOC Neoplasms benign, malignant and unspecified (incl cysts and polyps).

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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**Anhang 4-G 7.3: UE von besonderem Interesse**



Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09

Table 15.11.4.1: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Overall</b>			
Patients With Events (%)	187 ( 93.0%)	157 ( 80.9%)	
Patients Without Events (Censored) (%)	14 ( 7.0%)	37 ( 19.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.3 (0.3, 0.4)	0.6 (0.5, 0.7)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.572 (1.267, 1.952)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.1: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Patients With Events (%)	120 ( 59.7%)	49 ( 25.3%)	
Patients Without Events (Censored) (%)	81 ( 40.3%)	145 ( 74.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.9 (1.3, 3.3)	NE (7.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.077 (2.196, 4.311)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.1: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Patients With Events (%)	12 ( 6.0%)	11 ( 5.7%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	183 ( 94.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.054 (0.464, 2.393)
p-value			0.9016

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.1: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Patients With Events (%)	56 ( 27.9%)	35 ( 18.0%)	
Patients Without Events (Censored) (%)	145 ( 72.1%)	159 ( 82.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	28.1 (28.1, NE)	NE (11.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.531 (0.995, 2.356)
p-value			0.0503

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.1: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Patients With Events (%)	76 ( 37.8%)	55 ( 28.4%)	
Patients Without Events (Censored) (%)	125 ( 62.2%)	139 ( 71.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	9.4 (6.4, 15.8)	NE (6.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.139 (0.802, 1.619)
p-value			0.4680

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.4.1: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Patients With Events (%)	35 ( 17.4%)	54 ( 27.8%)	
Patients Without Events (Censored) (%)	166 ( 82.6%)	140 ( 72.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (6.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.453 (0.293, 0.700)
p-value			0.0003

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.1: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Patients With Events (%)	147 ( 73.1%)	103 ( 53.1%)	
Patients Without Events (Censored) (%)	54 ( 26.9%)	91 ( 46.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.7, 0.9)	2.5 (1.6, 4.9)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.674 (1.296, 2.162)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.1: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Pulmonary events+</b>			
Patients With Events (%)	0	1 ( 0.5%)	
Patients Without Events (Censored) (%)	201 (100.0%)	193 ( 99.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3083

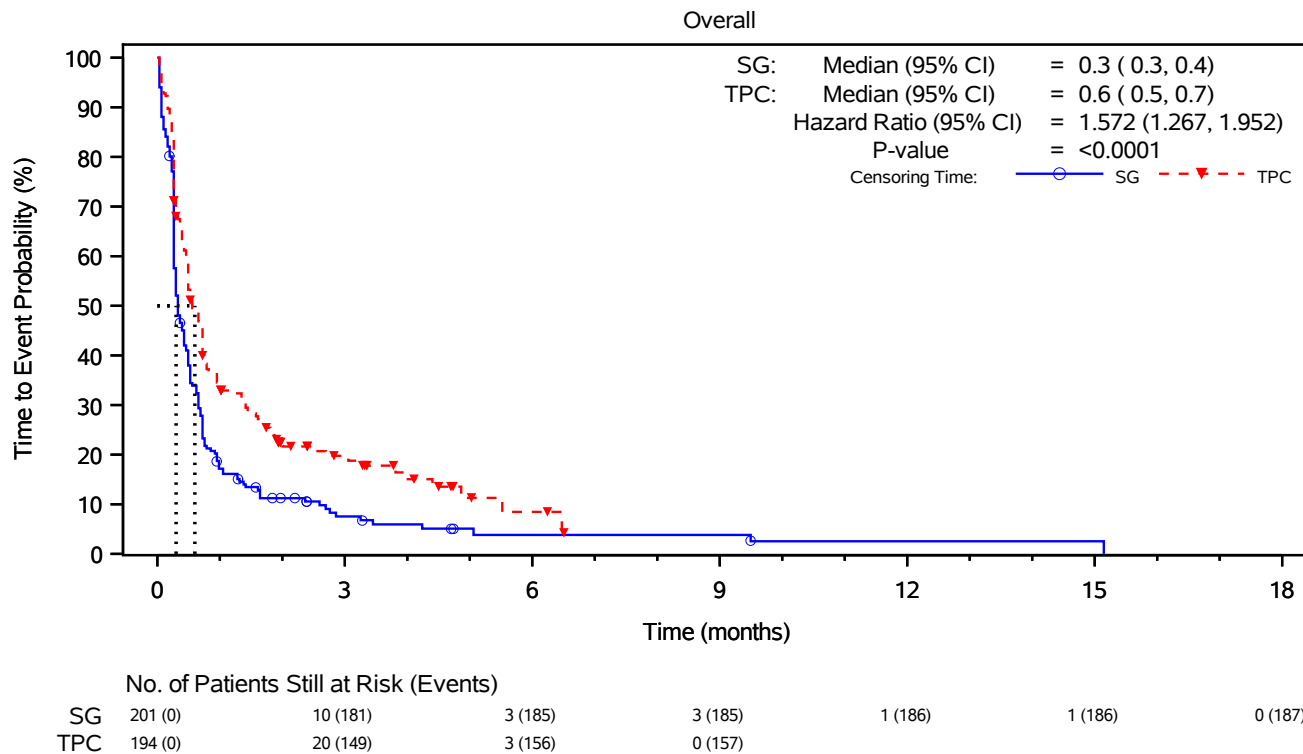
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Figure 15.11.4.1: KM Plot for Time to the First TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

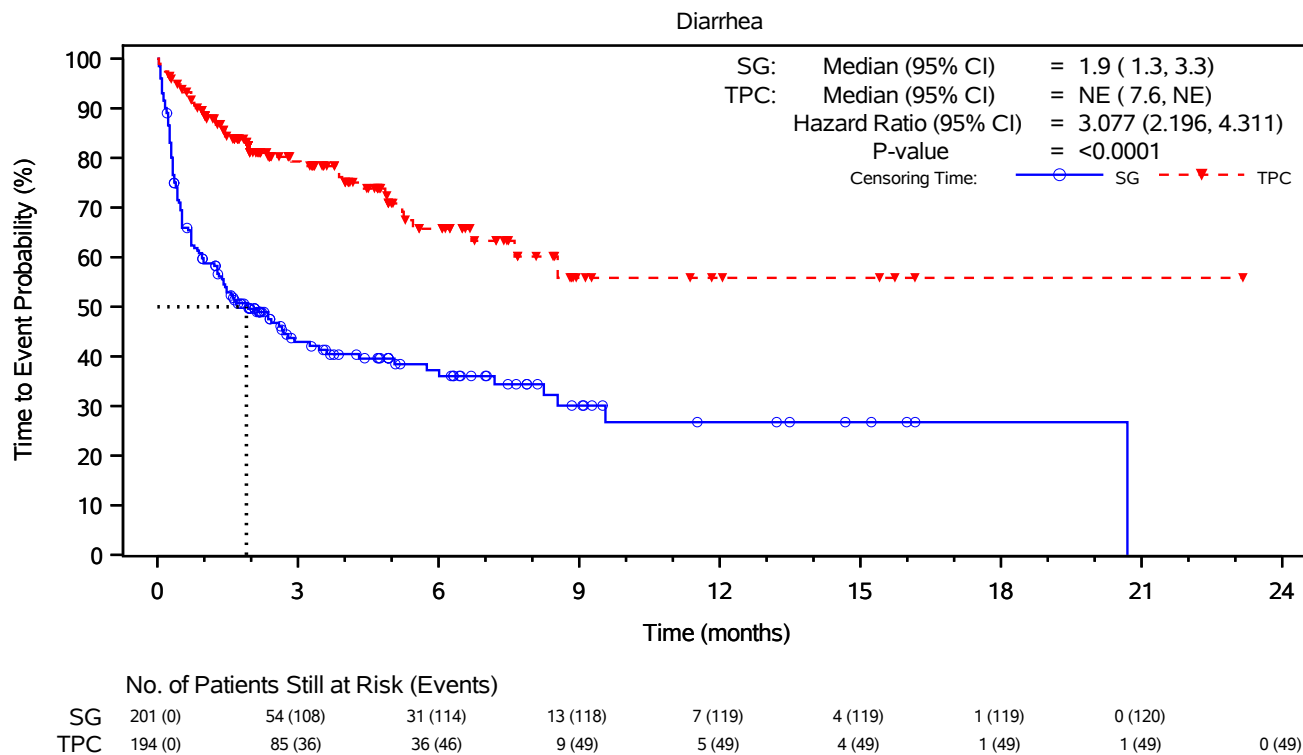
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Figure 15.11.4.1: KM Plot for Time to the First TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

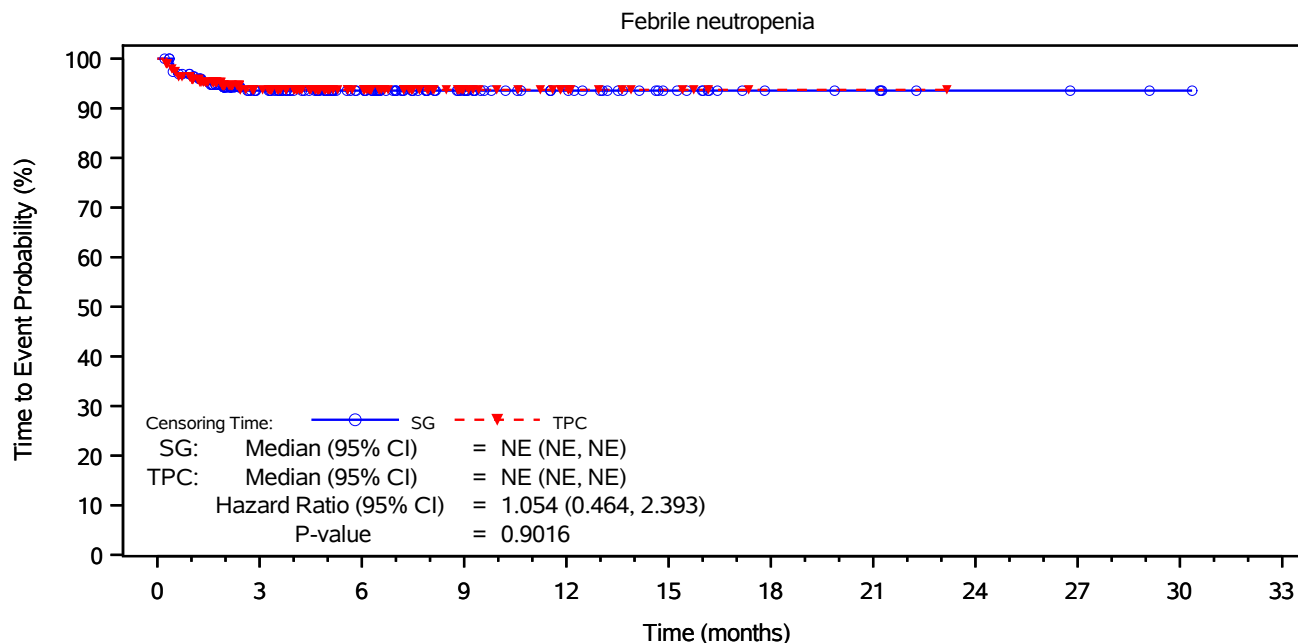
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Figure 15.11.4.1: KM Plot for Time to the First TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	125 (12)	84 (12)	46 (12)	29 (12)	17 (12)	8 (12)	7 (12)	3 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	101 (11)	52 (11)	20 (11)	11 (11)	5 (11)	1 (11)	1 (11)	0 (11)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

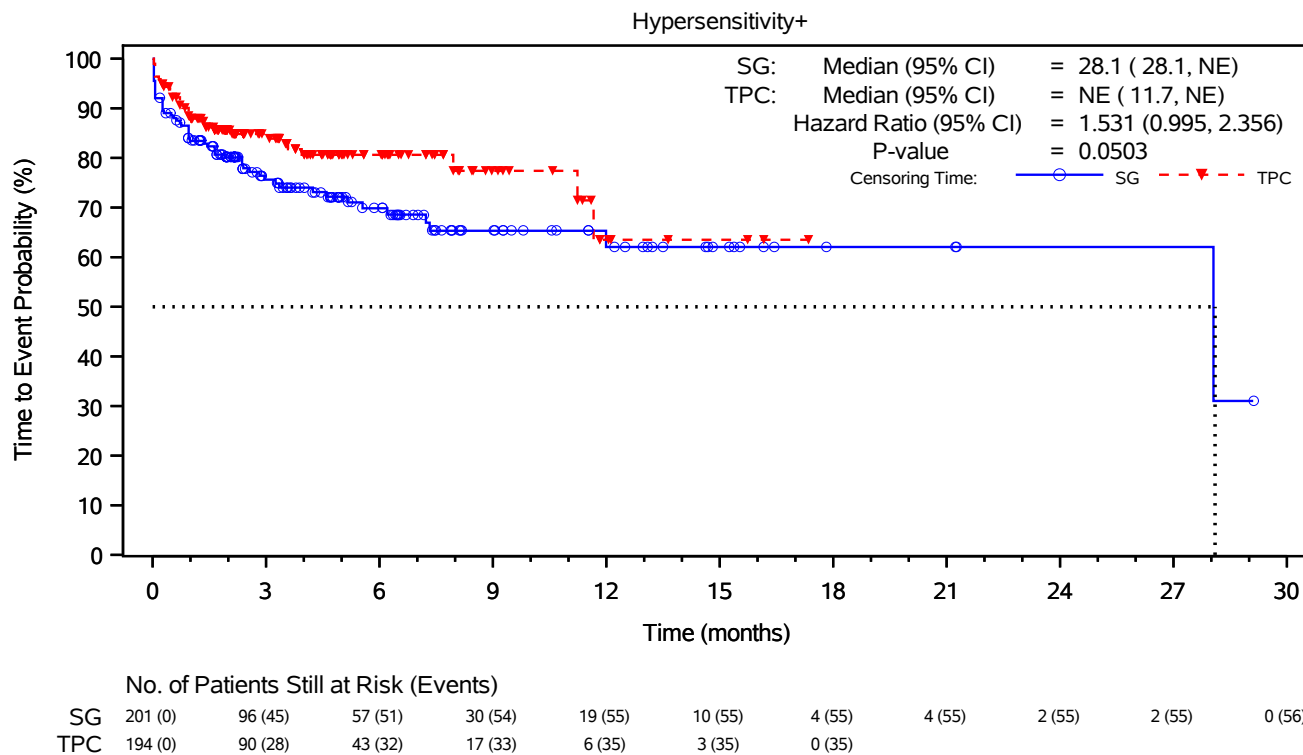
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Figure 15.11.4.1: KM Plot for Time to the First TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

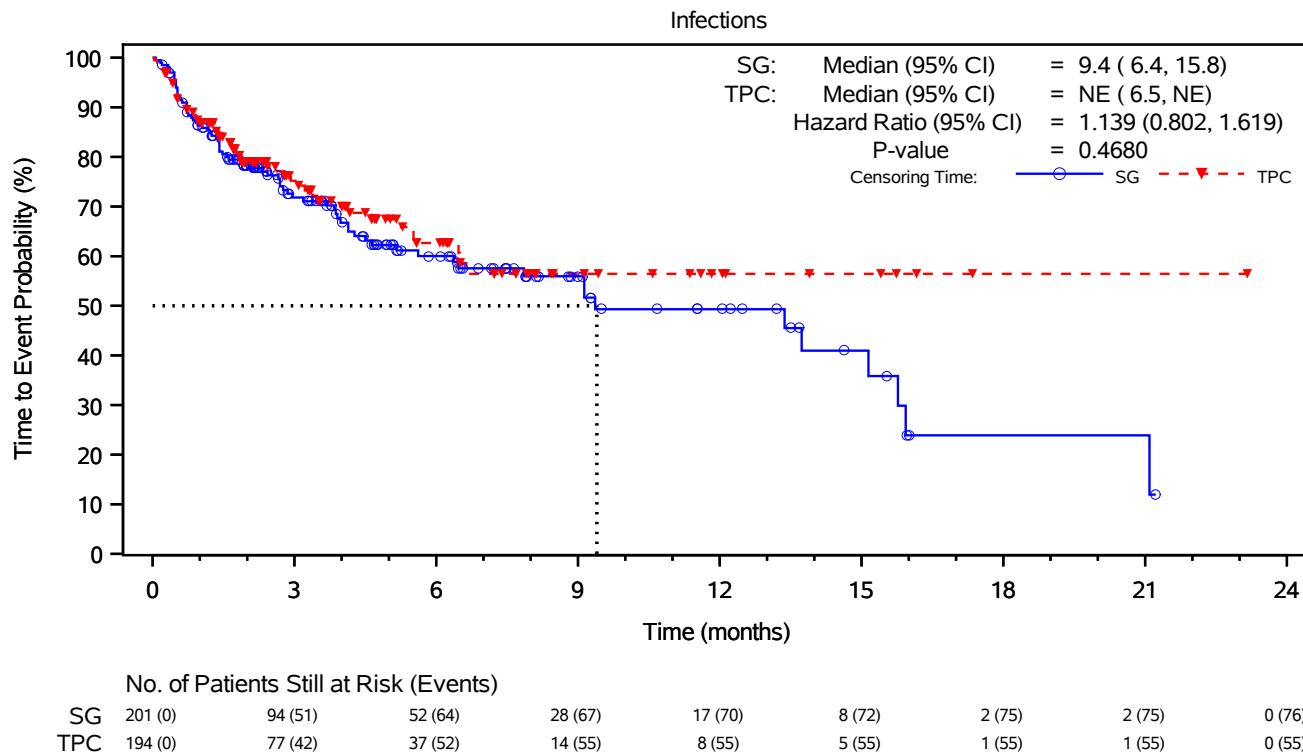
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Figure 15.11.4.1: KM Plot for Time to the First TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



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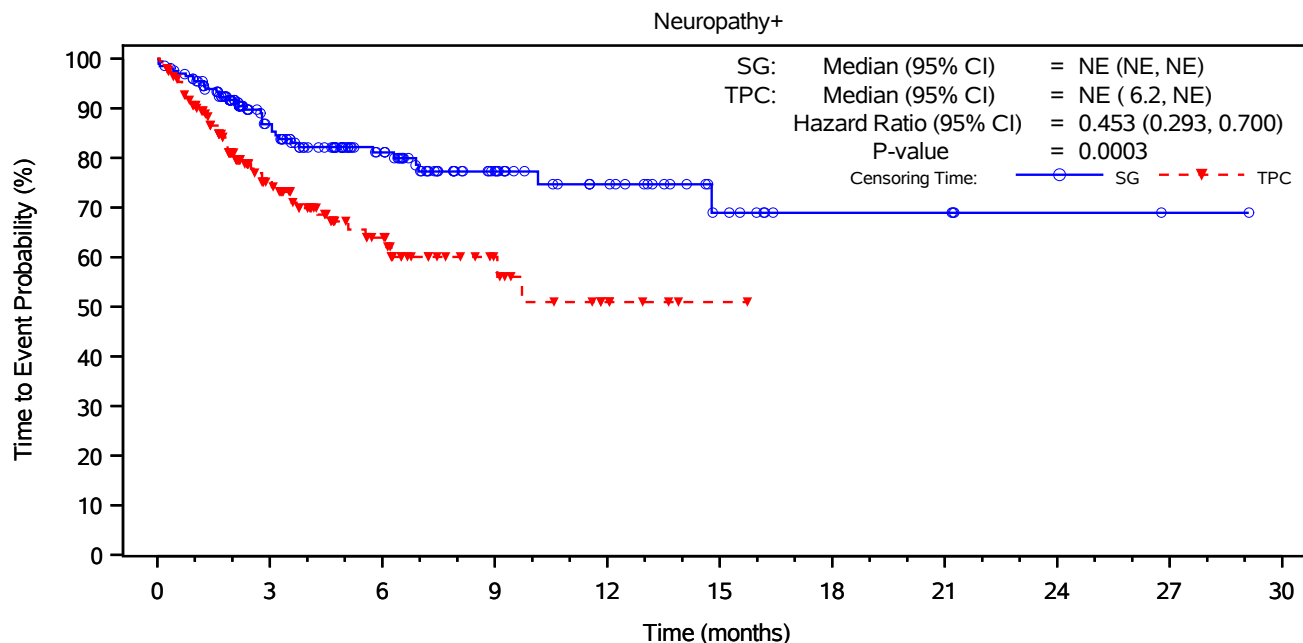
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Figure 15.11.4.1: KM Plot for Time to the First TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	116 (23)	73 (30)	39 (33)	24 (34)	11 (35)	5 (35)	5 (35)	2 (35)	1 (35)	0 (35)
TPC	194 (0)	78 (41)	36 (50)	15 (52)	6 (54)	1 (54)	0 (54)				

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

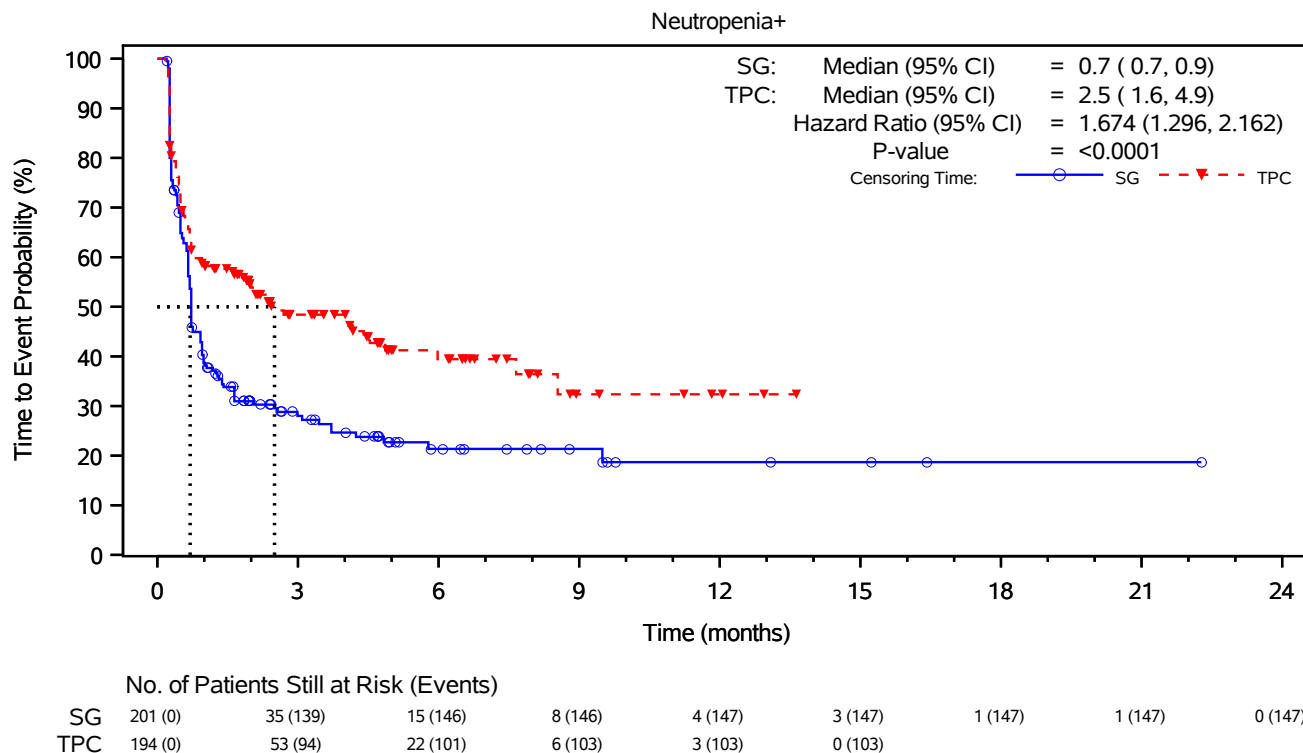
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Figure 15.11.4.1: KM Plot for Time to the First TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



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NE = not estimable.

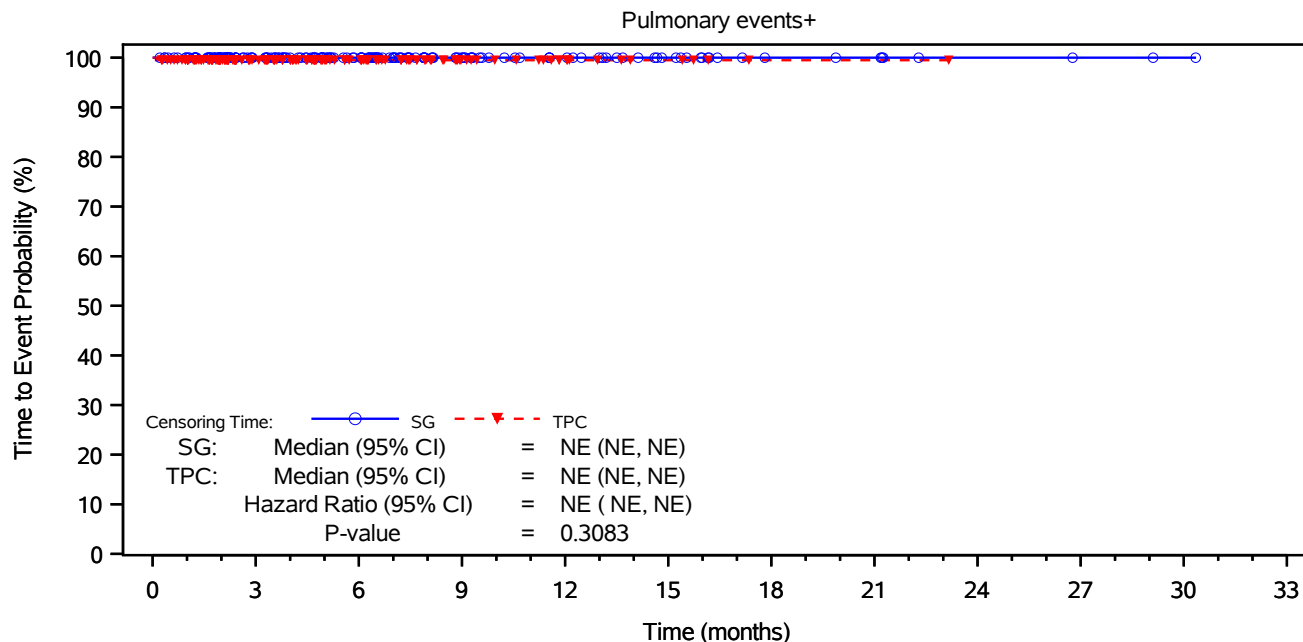
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Figure 15.11.4.1: KM Plot for Time to the First TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	133 (0)	89 (0)	47 (0)	30 (0)	18 (0)	8 (0)	7 (0)	3 (0)	2 (0)	1 (0)	0 (0)
TPC	194 (0)	106 (1)	55 (1)	21 (1)	11 (1)	5 (1)	1 (1)	1 (1)	0 (1)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Table 15.11.4.3: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Overall</b>			
Patients With Events (%)	35 ( 17.4%)	20 ( 10.3%)	
Patients Without Events (Censored) (%)	166 ( 82.6%)	174 ( 89.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.573 (0.903, 2.738)
p-value			0.1073

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.4.3: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Patients With Events (%)	9 ( 4.5%)	1 ( 0.5%)	
Patients Without Events (Censored) (%)	192 ( 95.5%)	193 ( 99.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			8.550 (1.083, 67.502)
p-value			0.0143

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.3: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Patients With Events (%)	8 ( 4.0%)	10 ( 5.2%)	
Patients Without Events (Censored) (%)	193 ( 96.0%)	184 ( 94.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.779 (0.307, 1.978)
p-value			0.5977

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.3: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Patients With Events (%)	0	0	
Patients Without Events (Censored) (%)	201 (100.0%)	194 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09

Table 15.11.4.3: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Patients With Events (%)	19 ( 9.5%)	8 ( 4.1%)	
Patients Without Events (Censored) (%)	182 ( 90.5%)	186 ( 95.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.943 (0.840, 4.494)
p-value			0.1139

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.3: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Patients With Events (%)	1 ( 0.5%)	0	
Patients Without Events (Censored) (%)	200 ( 99.5%)	194 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3596

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.3: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Patients With Events (%)	14 ( 7.0%)	12 ( 6.2%)	
Patients Without Events (Censored) (%)	187 ( 93.0%)	182 ( 93.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.120 (0.517, 2.423)
p-value			0.7746

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.3: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Pulmonary events+</b>			
Patients With Events (%)	0	0	
Patients Without Events (Censored) (%)	201 (100.0%)	194 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

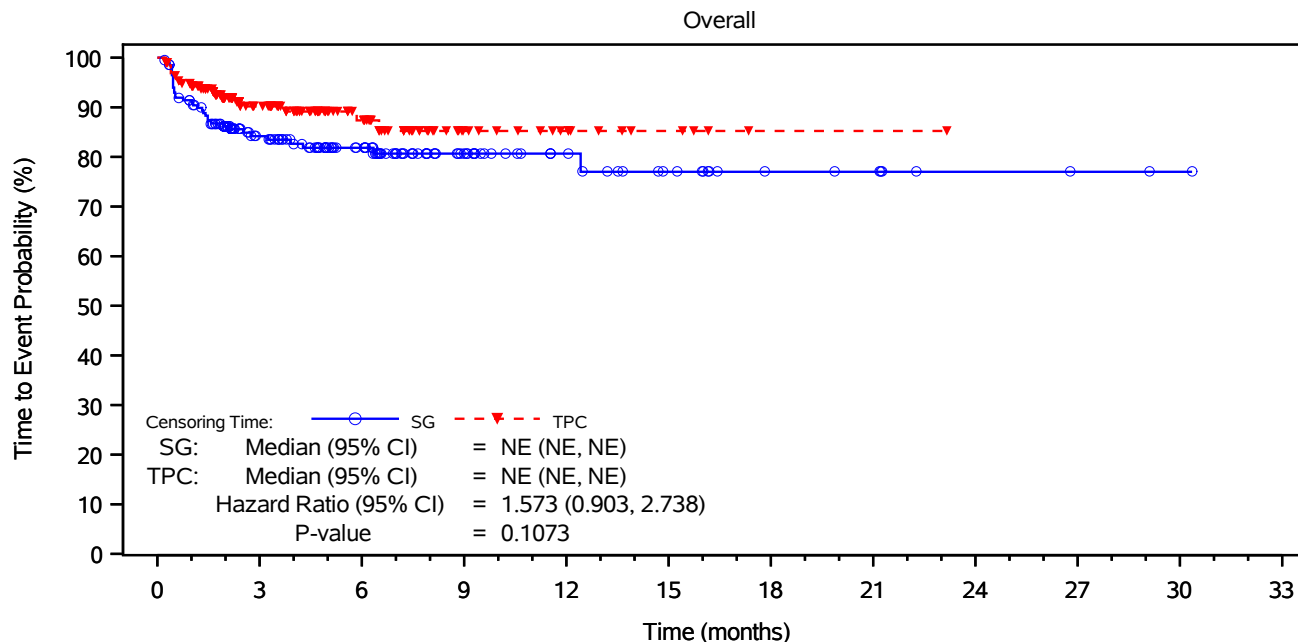
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. The analysis is based on Interim 2 data cut at 7/1/2022.

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Figure 15.11.4.3: KM Plot for Time to the First Serious TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	116 (30)	77 (33)	39 (34)	23 (34)	15 (35)	8 (35)	7 (35)	3 (35)	2 (35)	1 (35)	0 (35)
TPC	194 (0)	100 (17)	49 (19)	18 (20)	11 (20)	5 (20)	1 (20)	1 (20)	0 (20)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

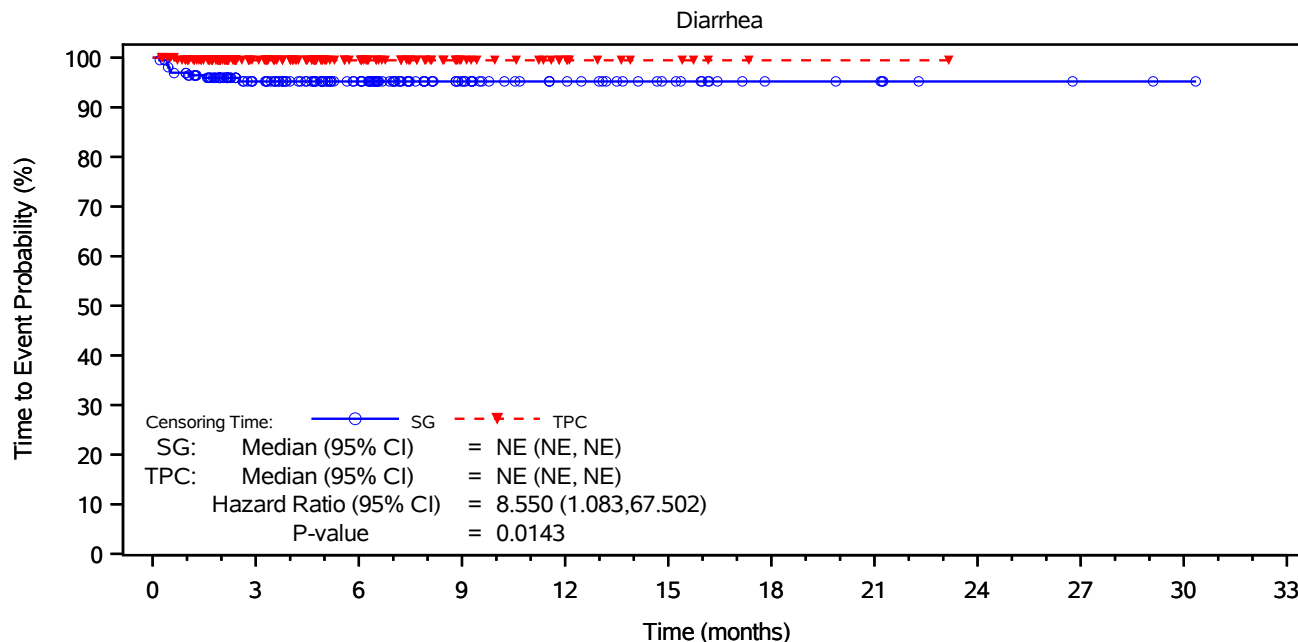
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.3: KM Plot for Time to the First Serious TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	127 (9)	84 (9)	43 (9)	27 (9)	17 (9)	8 (9)	7 (9)	3 (9)	2 (9)	1 (9)	0 (9)
TPC	194 (0)	106 (1)	55 (1)	21 (1)	11 (1)	5 (1)	1 (1)	1 (1)	0 (1)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

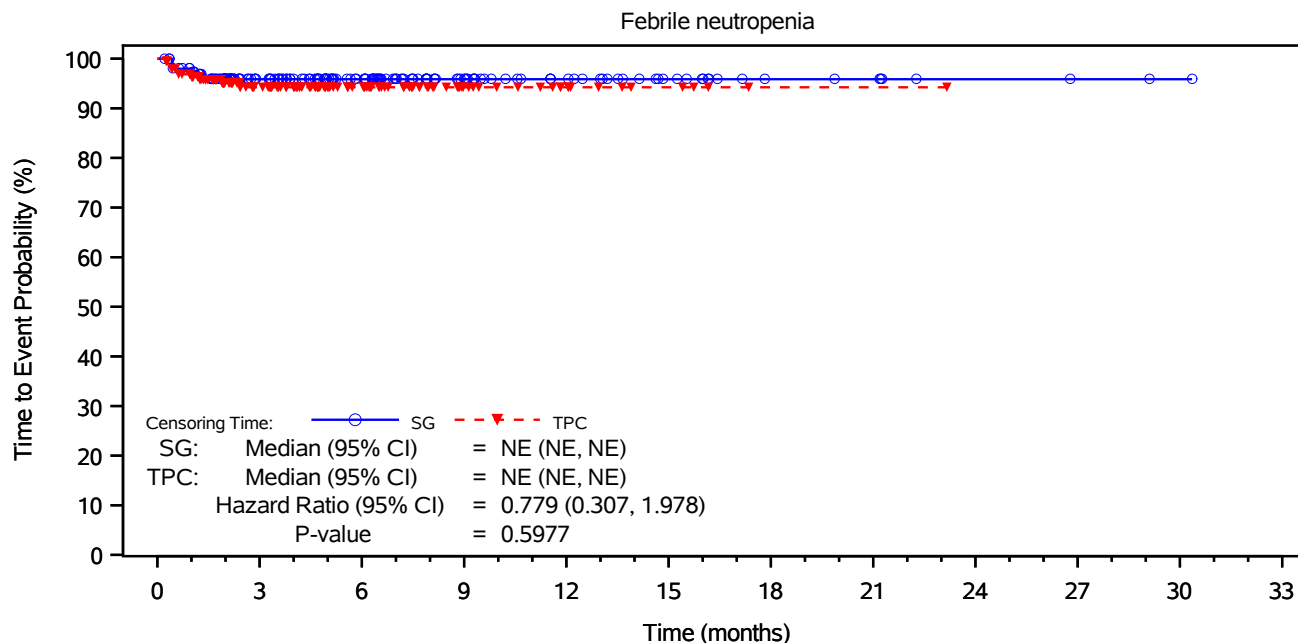
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.3: KM Plot for Time to the First Serious TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	129 (8)	86 (8)	46 (8)	29 (8)	17 (8)	8 (8)	7 (8)	3 (8)	2 (8)	1 (8)	0 (8)
TPC	194 (0)	102 (10)	52 (10)	20 (10)	11 (10)	5 (10)	1 (10)	1 (10)	0 (10)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

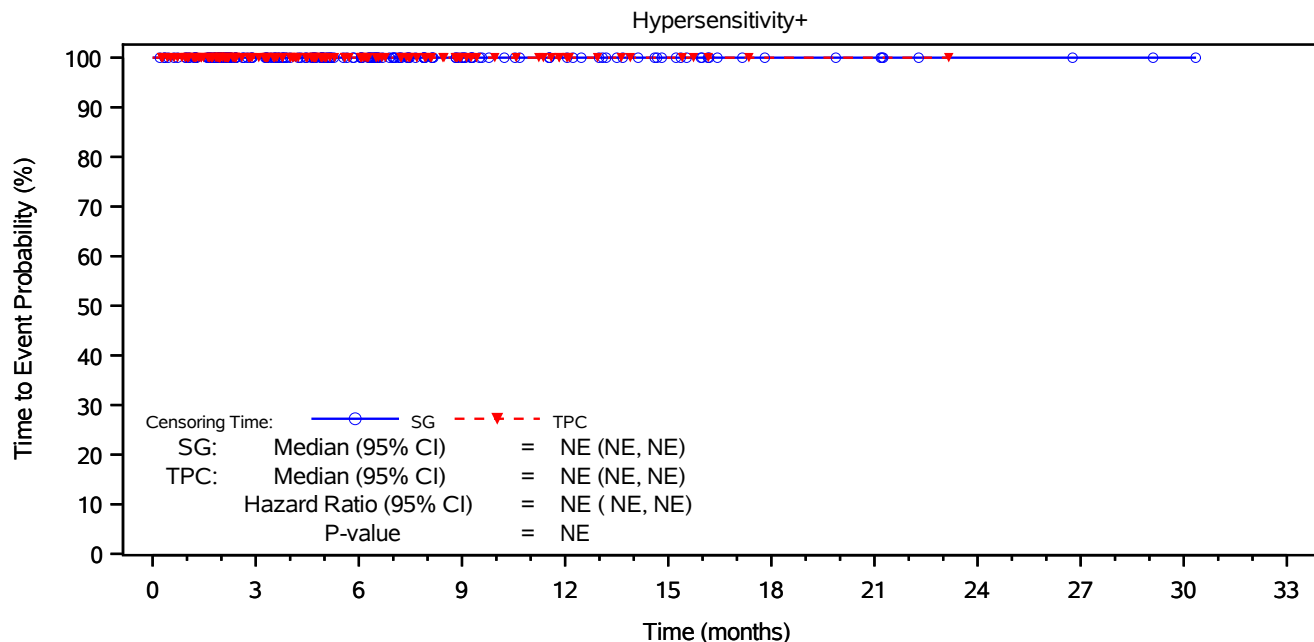
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.3: KM Plot for Time to the First Serious TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	133 (0)	89 (0)	47 (0)	30 (0)	18 (0)	8 (0)	7 (0)	3 (0)	2 (0)	1 (0)	0 (0)
TPC	194 (0)	106 (0)	55 (0)	21 (0)	11 (0)	5 (0)	1 (0)	1 (0)	0 (0)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

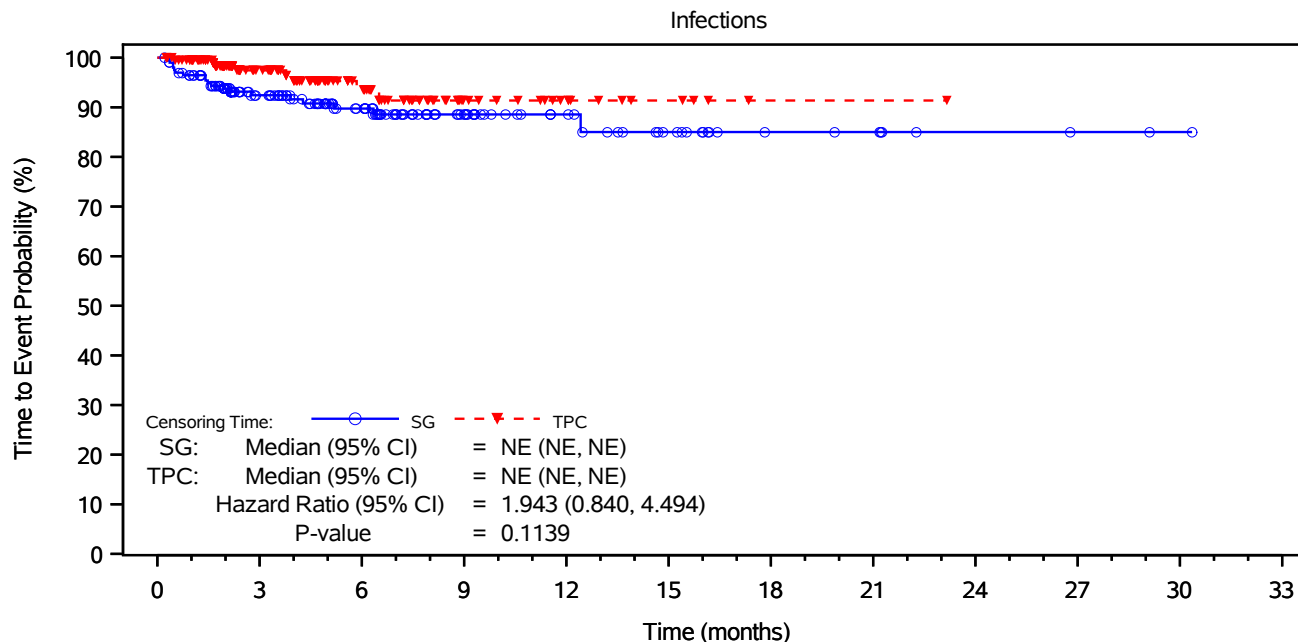
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.3: KM Plot for Time to the First Serious TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	125 (14)	83 (17)	44 (18)	27 (18)	17 (19)	8 (19)	7 (19)	3 (19)	2 (19)	1 (19)	0 (19)
TPC	194 (0)	105 (4)	52 (7)	19 (8)	11 (8)	5 (8)	1 (8)	1 (8)	0 (8)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

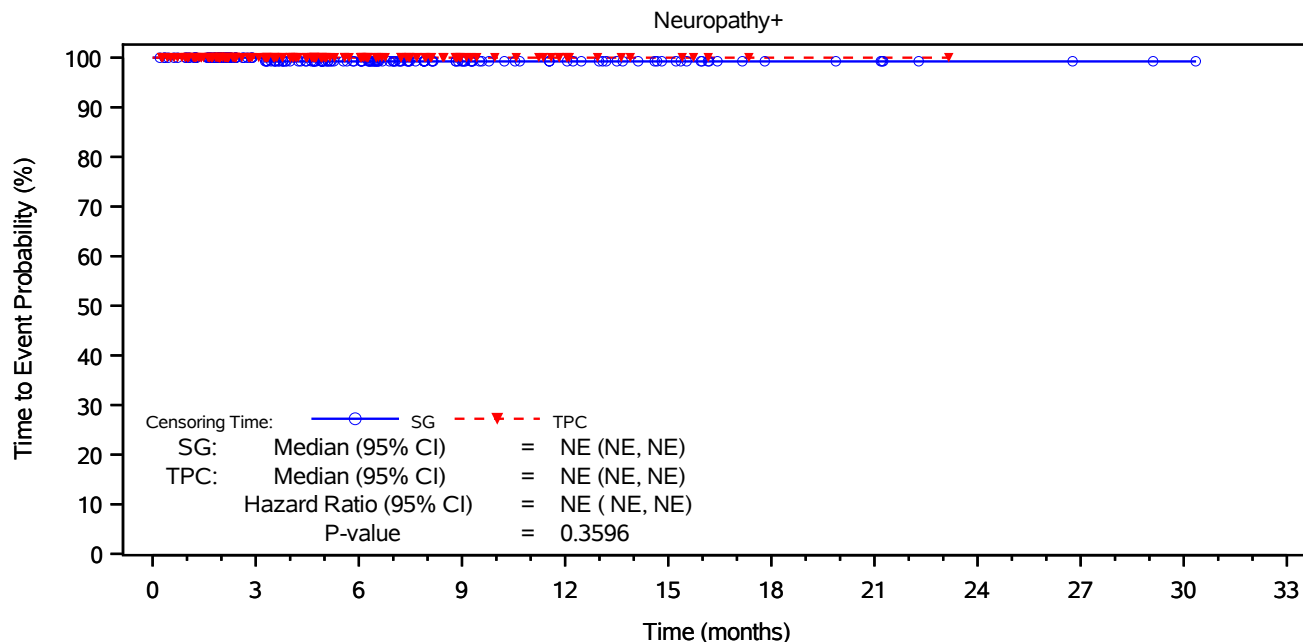
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.3: KM Plot for Time to the First Serious TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	133 (0)	89 (1)	47 (1)	30 (1)	18 (1)	8 (1)	7 (1)	3 (1)	2 (1)	1 (1)	0 (1)
TPC	194 (0)	106 (0)	55 (0)	21 (0)	11 (0)	5 (0)	1 (0)	1 (0)	0 (0)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

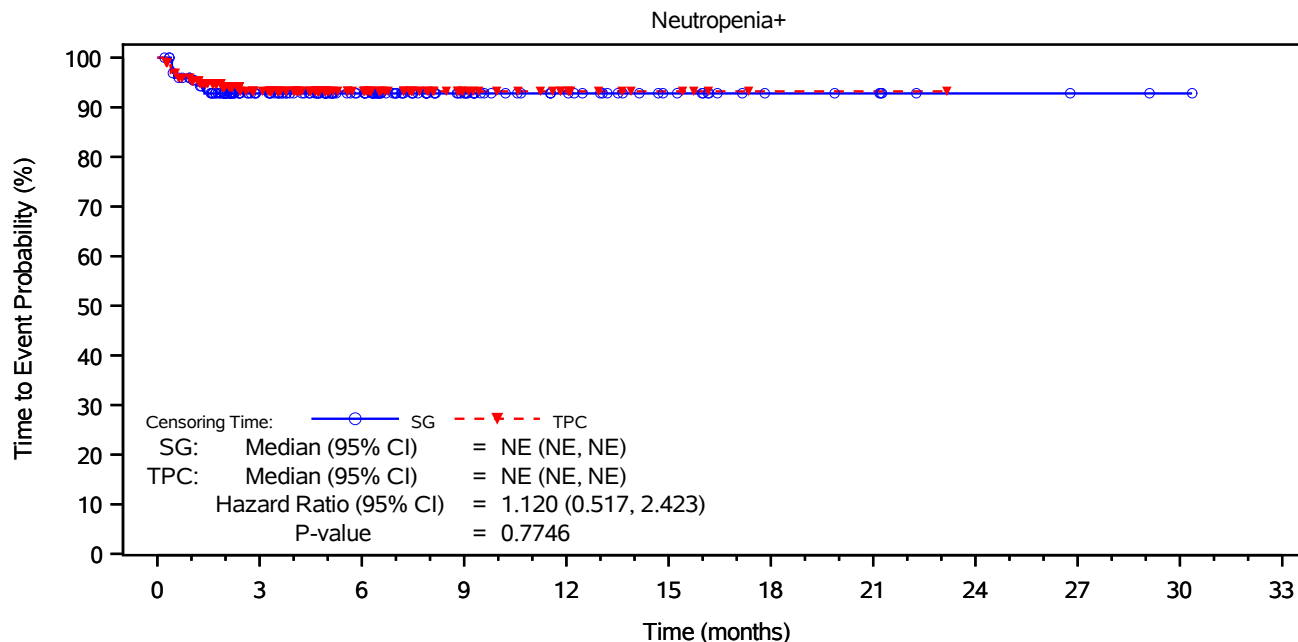
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.3: KM Plot for Time to the First Serious TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	126 (14)	84 (14)	44 (14)	27 (14)	16 (14)	8 (14)	7 (14)	3 (14)	2 (14)	1 (14)	0 (14)
TPC	194 (0)	101 (12)	51 (12)	20 (12)	11 (12)	5 (12)	1 (12)	1 (12)	0 (12)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

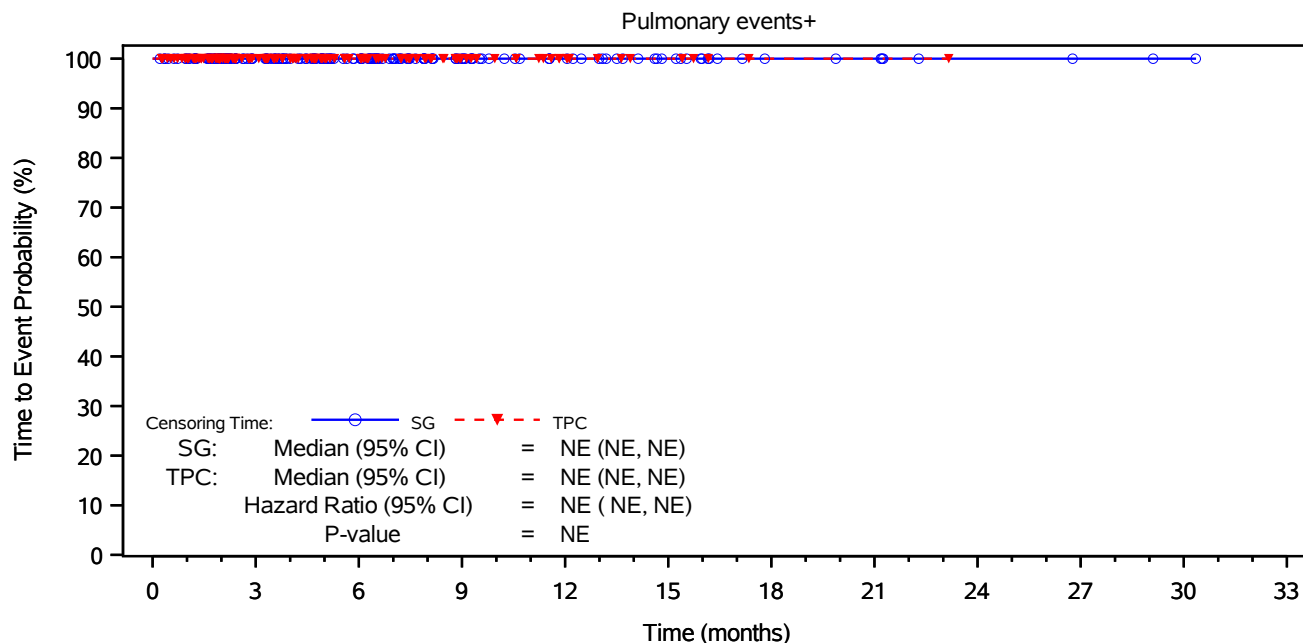
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.3: KM Plot for Time to the First Serious TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	133 (0)	89 (0)	47 (0)	30 (0)	18 (0)	8 (0)	7 (0)	3 (0)	2 (0)	1 (0)	0 (0)
TPC	194 (0)	106 (0)	55 (0)	21 (0)	11 (0)	5 (0)	1 (0)	1 (0)	0 (0)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Table 15.11.4.5: Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Overall</b>			
Patients With Events (%)	125 ( 62.2%)	86 ( 44.3%)	
Patients Without Events (Censored) (%)	76 ( 37.8%)	108 ( 55.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.1 (0.9, 2.3)	5.8 (2.8, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.568 (1.190, 2.066)
p-value			0.0013

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.5: Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Patients With Events (%)	19 ( 9.5%)	3 ( 1.5%)	
Patients Without Events (Censored) (%)	182 ( 90.5%)	191 ( 98.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			5.953 (1.759, 20.141)
p-value			0.0011

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.5: Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Patients With Events (%)	12 ( 6.0%)	11 ( 5.7%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	183 ( 94.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.054 (0.464, 2.393)
p-value			0.9016

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.5: Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Patients With Events (%)	3 ( 1.5%)	1 ( 0.5%)	
Patients Without Events (Censored) (%)	198 ( 98.5%)	193 ( 99.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.435 (0.248, 23.882)
p-value			0.4308

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09

Table 15.11.4.5: Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Patients With Events (%)	21 ( 10.4%)	8 ( 4.1%)	
Patients Without Events (Censored) (%)	180 ( 89.6%)	186 ( 95.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.077 (0.907, 4.756)
p-value			0.0774

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.4.5: Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Patients With Events (%)	6 ( 3.0%)	7 ( 3.6%)	
Patients Without Events (Censored) (%)	195 ( 97.0%)	187 ( 96.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.636 (0.210, 1.925)
p-value			0.4195

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.5: Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Patients With Events (%)	111 ( 55.2%)	77 ( 39.7%)	
Patients Without Events (Censored) (%)	90 ( 44.8%)	117 ( 60.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.6 (1.0, 4.6)	9.6 (4.3, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.548 (1.154, 2.075)
p-value			0.0033

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.4.5: Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Pulmonary events+</b>			
Patients With Events (%)	0	1 ( 0.5%)	
Patients Without Events (Censored) (%)	201 (100.0%)	193 ( 99.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3083

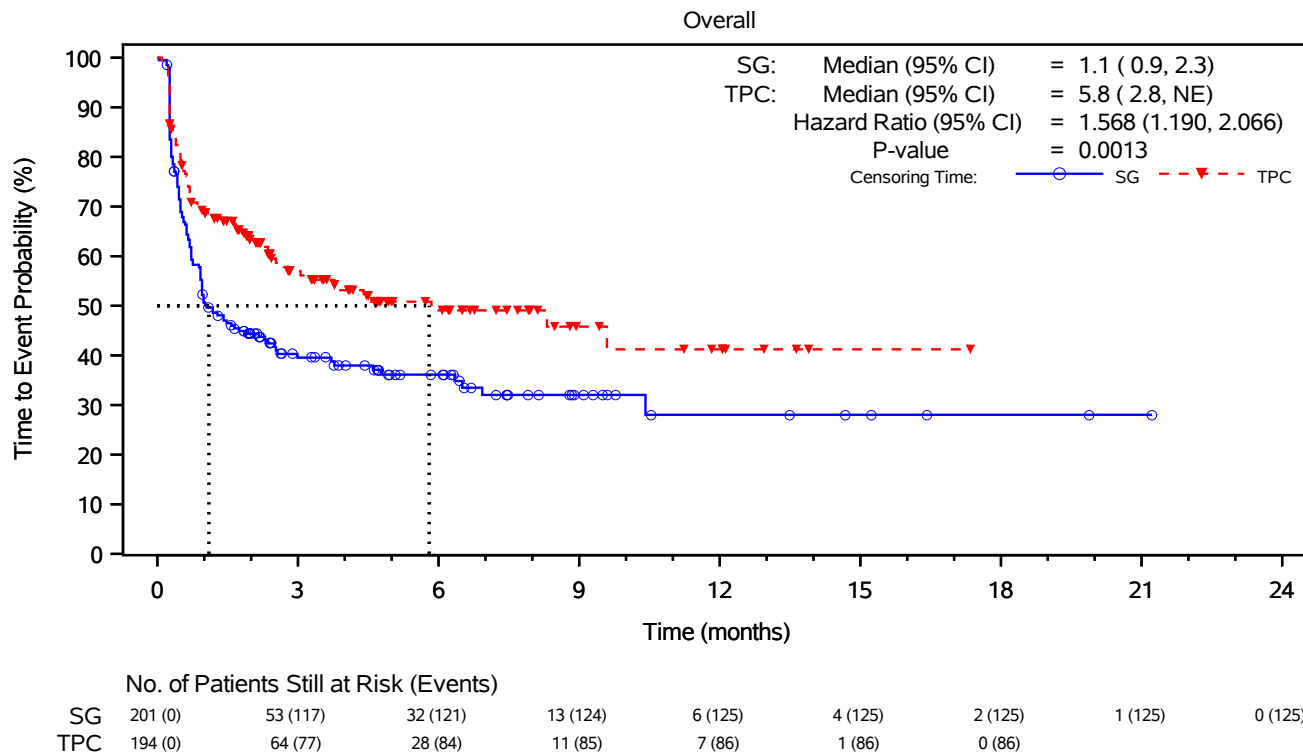
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
Time to event is the time (months) from the 1st dose date to the event date or 30 days after treatment, death date, or last contact, which is earlier  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Figure 15.11.4.5: KM Plot for Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

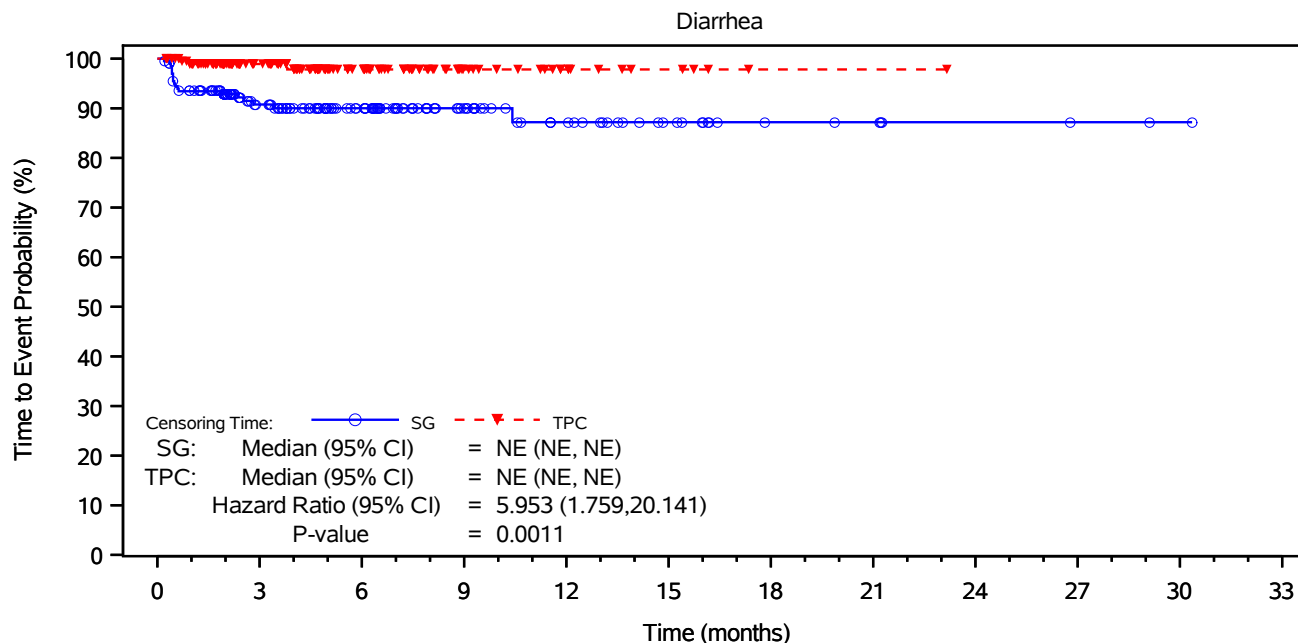
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Figure 15.11.4.5: KM Plot for Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	124 (17)	81 (18)	43 (18)	26 (19)	15 (19)	7 (19)	6 (19)	3 (19)	2 (19)	1 (19)	0 (19)
TPC	194 (0)	106 (2)	54 (3)	21 (3)	11 (3)	5 (3)	1 (3)	1 (3)	0 (3)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

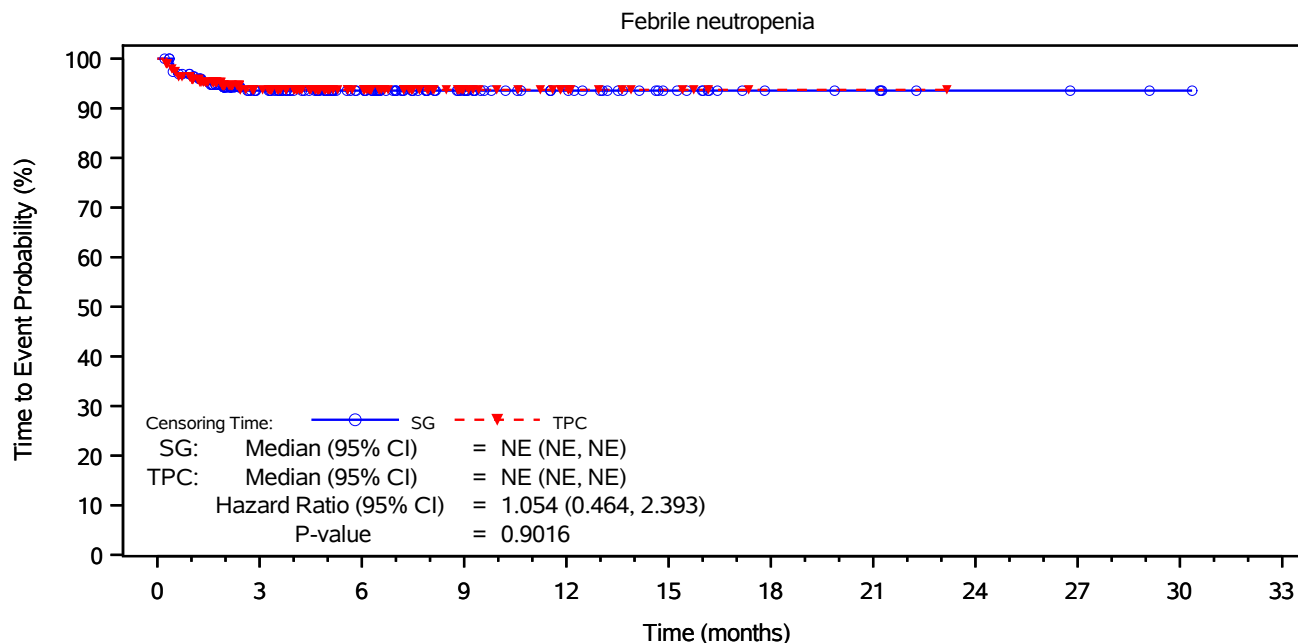
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.5: KM Plot for Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	125 (12)	84 (12)	46 (12)	29 (12)	17 (12)	8 (12)	7 (12)	3 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	101 (11)	52 (11)	20 (11)	11 (11)	5 (11)	1 (11)	1 (11)	0 (11)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

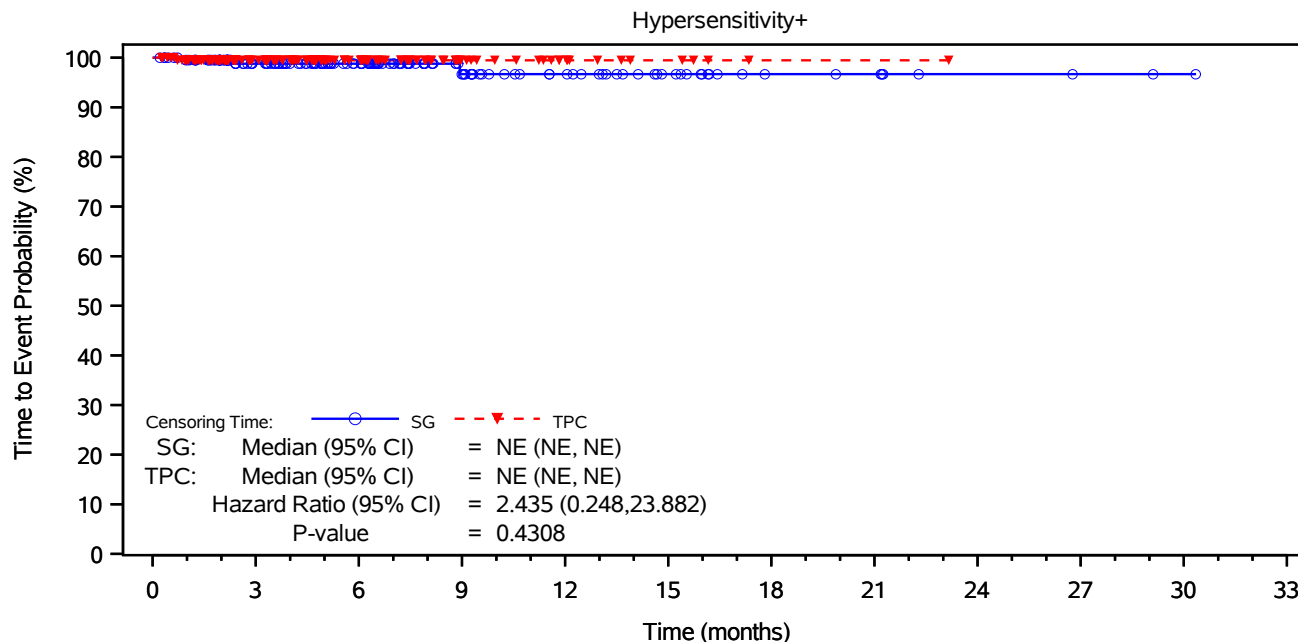
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.5: KM Plot for Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	131 (2)	87 (2)	46 (3)	30 (3)	18 (3)	8 (3)	7 (3)	3 (3)	2 (3)	1 (3)	0 (3)
TPC	194 (0)	106 (1)	55 (1)	21 (1)	11 (1)	5 (1)	1 (1)	1 (1)	0 (1)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

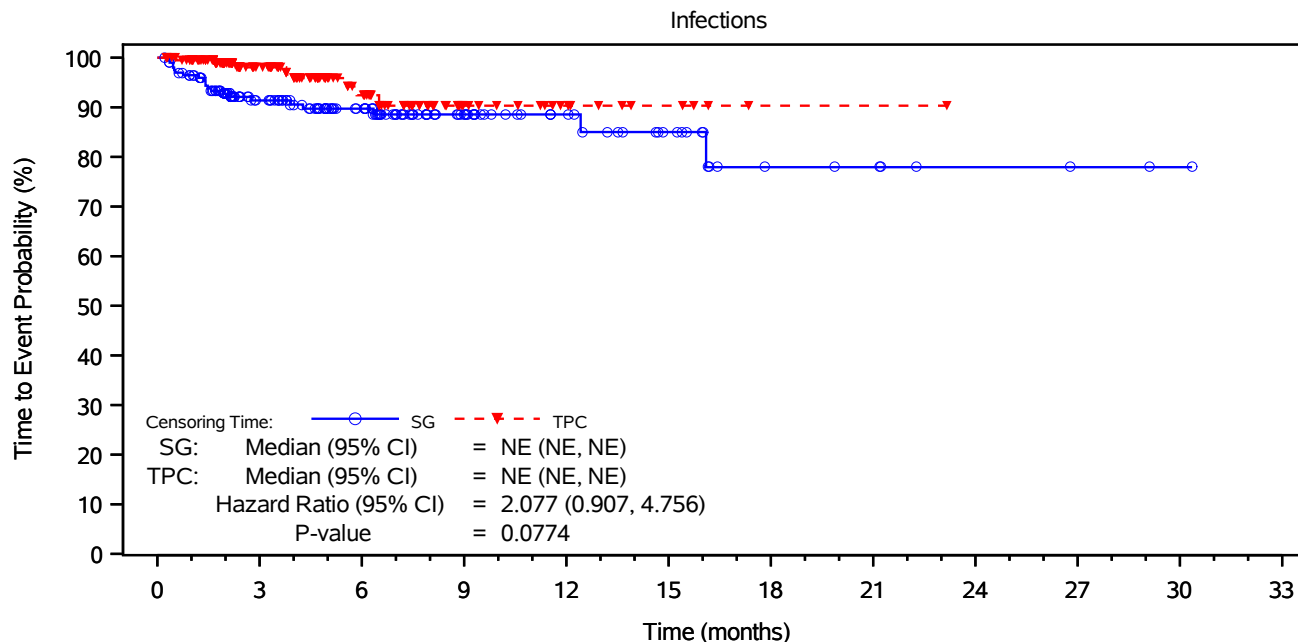
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.5: KM Plot for Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	124 (16)	84 (18)	44 (19)	27 (19)	17 (20)	7 (21)	6 (21)	3 (21)	2 (21)	1 (21)	0 (21)
TPC	194 (0)	105 (3)	52 (7)	19 (8)	11 (8)	5 (8)	1 (8)	1 (8)	0 (8)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

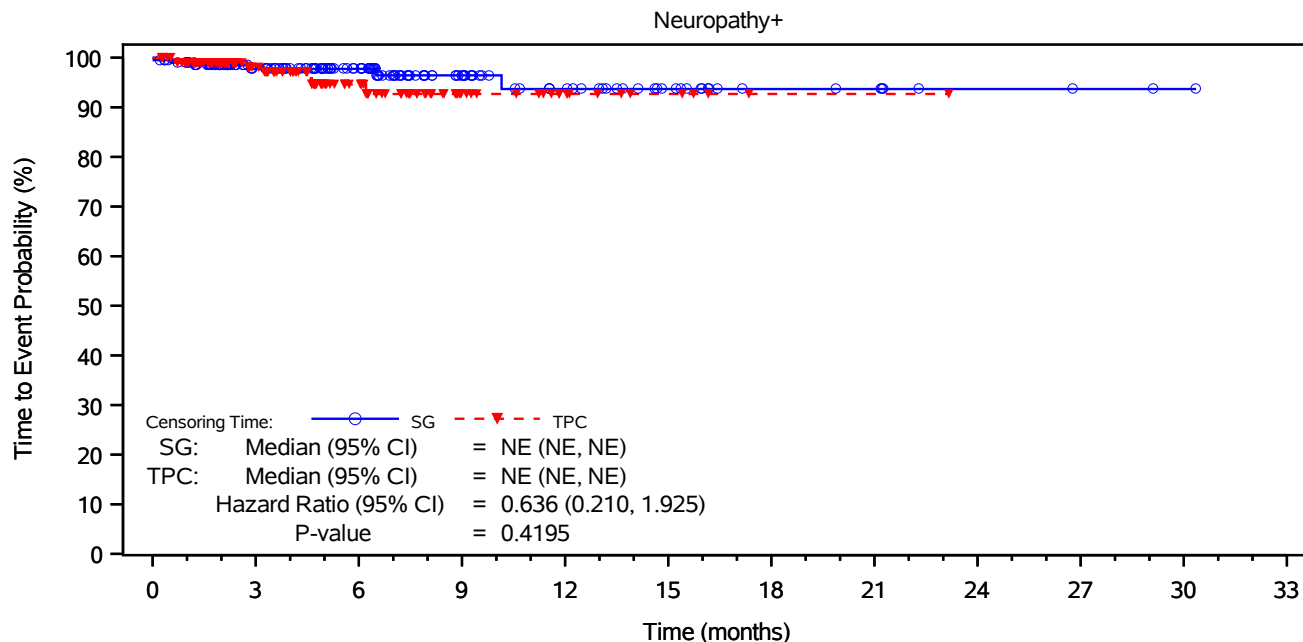
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Figure 15.11.4.5: KM Plot for Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	131 (4)	88 (4)	46 (5)	29 (6)	17 (6)	8 (6)	7 (6)	3 (6)	2 (6)	1 (6)	0 (6)
TPC	194 (0)	105 (3)	53 (6)	20 (7)	11 (7)	5 (7)	1 (7)	1 (7)	0 (7)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

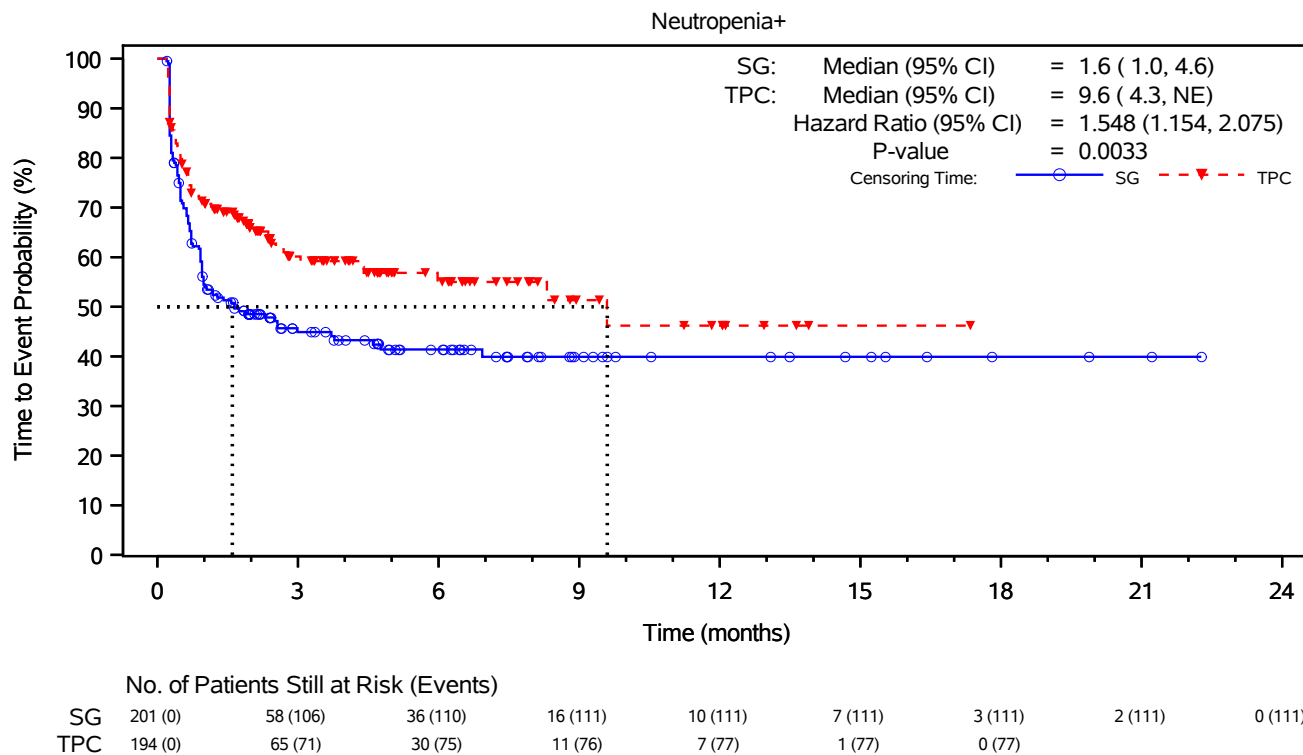
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.5: KM Plot for Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

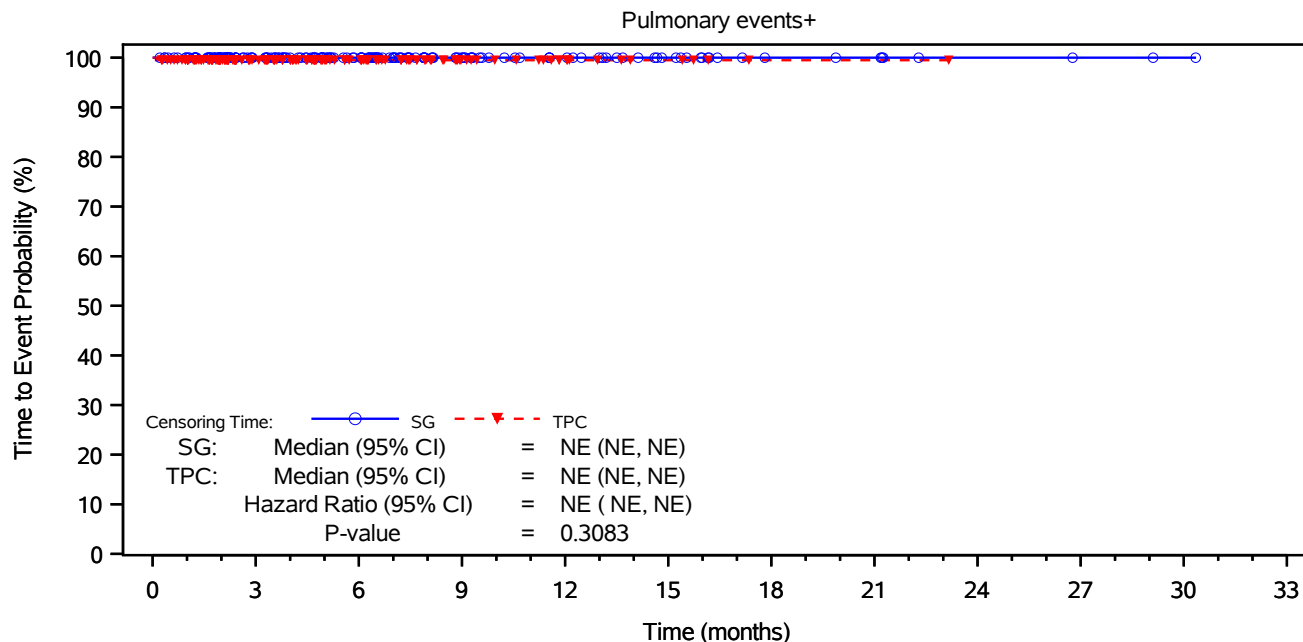
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.4.5: KM Plot for Time to the First Grade 3 or Higher TEAE of Special Interest  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	133 (0)	89 (0)	47 (0)	30 (0)	18 (0)	8 (0)	7 (0)	3 (0)	2 (0)	1 (0)	0 (0)
TPC	194 (0)	106 (1)	55 (1)	21 (1)	11 (1)	5 (1)	1 (1)	1 (1)	0 (1)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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**Anhang 4-G 7.4: UE nach SOC und PT**

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Patients With Events (%)	165 ( 82.1%)	118 ( 60.8%)	
Patients Without Events (Censored) (%)	36 ( 17.9%)	76 ( 39.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 0.7)	1.7 (0.7, 2.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.690 (1.328, 2.152)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Patients With Events (%)	70 ( 34.8%)	45 ( 23.2%)	
Patients Without Events (Censored) (%)	131 ( 65.2%)	149 ( 76.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (6.9, NE)	NE (13.4, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.459 (1.000, 2.129)
p-value			0.0493

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Febrile neutropenia</b>			
Patients With Events (%)	12 ( 6.0%)	11 ( 5.7%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	183 ( 94.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.054 (0.464, 2.393)
p-value			0.9016

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Leukopenia</b>			
Patients With Events (%)	31 ( 15.4%)	18 ( 9.3%)	
Patients Without Events (Censored) (%)	170 ( 84.6%)	176 ( 90.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.626 (0.907, 2.915)
p-value			0.1022

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Lymphopenia</b>			
Patients With Events (%)	25 ( 12.4%)	18 ( 9.3%)	
Patients Without Events (Censored) (%)	176 ( 87.6%)	176 ( 90.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.286 (0.699, 2.365)
p-value			0.4148

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Patients With Events (%)	142 ( 70.6%)	101 ( 52.1%)	
Patients Without Events (Censored) (%)	59 ( 29.4%)	93 ( 47.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.7, 1.0)	2.7 (1.6, 6.0)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.597 (1.233, 2.067)
p-value			0.0003

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Thrombocytopenia</b>			
Patients With Events (%)	12 ( 6.0%)	21 ( 10.8%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	173 ( 89.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.493 (0.242, 1.005)
p-value			0.0472

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Cardiac disorders			
Patients With Events (%)	15 ( 7.5%)	15 ( 7.7%)	
Patients Without Events (Censored) (%)	186 ( 92.5%)	179 ( 92.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.812 (0.394, 1.675)
p-value			0.5726

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia. The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Ear and labyrinth disorders			
Patients With Events (%)	11 ( 5.5%)	11 ( 5.7%)	
Patients Without Events (Censored) (%)	190 ( 94.5%)	183 ( 94.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.853 (0.367, 1.982)
p-value			0.7117

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Eye disorders</b>			
Patients With Events (%)	17 ( 8.5%)	16 ( 8.2%)	
Patients Without Events (Censored) (%)	184 ( 91.5%)	178 ( 91.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (16.4, NE)	20.8 (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.803 (0.397, 1.624)
p-value			0.5426

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Patients With Events (%)	186 ( 92.5%)	138 ( 71.1%)	
Patients Without Events (Censored) (%)	15 ( 7.5%)	56 ( 28.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	0.8 (0.6, 1.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.949 (1.555, 2.444)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia. The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Abdominal distension			
Patients With Events (%)	15 ( 7.5%)	7 ( 3.6%)	
Patients Without Events (Censored) (%)	186 ( 92.5%)	187 ( 96.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.901 (0.771, 4.689)
p-value			0.1563

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Abdominal pain			
Patients With Events (%)	44 ( 21.9%)	30 ( 15.5%)	
Patients Without Events (Censored) (%)	157 ( 78.1%)	164 ( 84.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.408 (0.881, 2.249)
p-value			0.1538

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Abdominal pain upper			
Patients With Events (%)	21 ( 10.4%)	12 ( 6.2%)	
Patients Without Events (Censored) (%)	180 ( 89.6%)	182 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (18.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.405 (0.682, 2.893)
p-value			0.3550

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Constipation</b>			
Patients With Events (%)	67 ( 33.3%)	48 ( 24.7%)	
Patients Without Events (Censored) (%)	134 ( 66.7%)	146 ( 75.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (12.2, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.298 (0.894, 1.884)
p-value			0.1694

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Diarrhoea</b>			
Patients With Events (%)	120 ( 59.7%)	49 ( 25.3%)	
Patients Without Events (Censored) (%)	81 ( 40.3%)	145 ( 74.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.9 (1.3, 3.3)	NE (7.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.077 (2.196, 4.311)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Dry mouth			
Patients With Events (%)	13 ( 6.5%)	5 ( 2.6%)	
Patients Without Events (Censored) (%)	188 ( 93.5%)	189 ( 97.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.019 (0.708, 5.754)
p-value			0.1798

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Dyspepsia</b>			
Patients With Events (%)	14 ( 7.0%)	5 ( 2.6%)	
Patients Without Events (Censored) (%)	187 ( 93.0%)	189 ( 97.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.425 (0.872, 6.742)
p-value			0.0792

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Gastrooesophageal reflux disease			
Patients With Events (%)	10 ( 5.0%)	8 ( 4.1%)	
Patients Without Events (Censored) (%)	191 ( 95.0%)	186 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.014 (0.396, 2.594)
p-value			0.9765

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Nausea</b>			
Patients With Events (%)	120 ( 59.7%)	64 ( 33.0%)	
Patients Without Events (Censored) (%)	81 ( 40.3%)	130 ( 67.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.0 (0.8, 2.6)	NE (7.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.189 (1.611, 2.974)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Stomatitis</b>			
Patients With Events (%)	17 ( 8.5%)	17 ( 8.8%)	
Patients Without Events (Censored) (%)	184 ( 91.5%)	177 ( 91.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.912 (0.465, 1.792)
p-value			0.7919

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia. The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Vomiting</b>			
Patients With Events (%)	50 ( 24.9%)	27 ( 13.9%)	
Patients Without Events (Censored) (%)	151 ( 75.1%)	167 ( 86.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	23.0 (16.1, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.680 (1.048, 2.693)
p-value			0.0292

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - General disorders and administration site conditions			
Patients With Events (%)	150 ( 74.6%)	134 ( 69.1%)	
Patients Without Events (Censored) (%)	51 ( 25.4%)	60 ( 30.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.4, 0.8)	1.1 (0.7, 1.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.185 (0.934, 1.504)
p-value			0.1670

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Asthenia</b>			
Patients With Events (%)	47 ( 23.4%)	39 ( 20.1%)	
Patients Without Events (Censored) (%)	154 ( 76.6%)	155 ( 79.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.145 (0.748, 1.753)
p-value			0.5317

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Fatigue</b>			
Patients With Events (%)	78 ( 38.8%)	66 ( 34.0%)	
Patients Without Events (Censored) (%)	123 ( 61.2%)	128 ( 66.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	20.7 (9.1, NE)	NE (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.095 (0.786, 1.525)
p-value			0.5946

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Mucosal inflammation			
Patients With Events (%)	19 ( 9.5%)	13 ( 6.7%)	
Patients Without Events (Censored) (%)	182 ( 90.5%)	181 ( 93.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.240 (0.609, 2.525)
p-value			0.5515

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Oedema peripheral			
Patients With Events (%)	12 ( 6.0%)	9 ( 4.6%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	185 ( 95.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.973 (0.402, 2.353)
p-value			0.9526

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Pain</b>			
Patients With Events (%)	10 ( 5.0%)	9 ( 4.6%)	
Patients Without Events (Censored) (%)	191 ( 95.0%)	185 ( 95.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (24.7, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.776 (0.298, 2.022)
p-value			0.6027

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Pyrexia</b>			
Patients With Events (%)	36 ( 17.9%)	32 ( 16.5%)	
Patients Without Events (Censored) (%)	165 ( 82.1%)	162 ( 83.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (21.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.884 (0.544, 1.436)
p-value			0.6180

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Hepatobiliary disorders</b>			
Patients With Events (%)	21 ( 10.4%)	17 ( 8.8%)	
Patients Without Events (Censored) (%)	180 ( 89.6%)	177 ( 91.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	22.2 (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.049 (0.552, 1.993)
p-value			0.8869

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Infections and infestations			
Patients With Events (%)	76 ( 37.8%)	55 ( 28.4%)	
Patients Without Events (Censored) (%)	125 ( 62.2%)	139 ( 71.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.4 (6.4, 15.8)	NE (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.139 (0.802, 1.619)
p-value			0.4680

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Urinary tract infection			
Patients With Events (%)	17 ( 8.5%)	18 ( 9.3%)	
Patients Without Events (Censored) (%)	184 ( 91.5%)	176 ( 90.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (21.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.737 (0.373, 1.455)
p-value			0.3775

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Injury, poisoning and procedural complications			
Patients With Events (%)	19 ( 9.5%)	17 ( 8.8%)	
Patients Without Events (Censored) (%)	182 ( 90.5%)	177 ( 91.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (18.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.745 (0.377, 1.475)
p-value			0.3963

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Investigations</b>			
Patients With Events (%)	64 ( 31.8%)	61 ( 31.4%)	
Patients Without Events (Censored) (%)	137 ( 68.2%)	133 ( 68.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (10.6, NE)	10.0 (5.1, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.921 (0.646, 1.314)
p-value			0.6504

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alanine aminotransferase increased			
Patients With Events (%)	23 ( 11.4%)	13 ( 6.7%)	
Patients Without Events (Censored) (%)	178 ( 88.6%)	181 ( 93.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (21.5, NE)	18.7 (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.428 (0.713, 2.860)
p-value			0.3133

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Aspartate aminotransferase increased			
Patients With Events (%)	25 ( 12.4%)	22 ( 11.3%)	
Patients Without Events (Censored) (%)	176 ( 87.6%)	172 ( 88.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.4, NE)	16.7 (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.925 (0.517, 1.657)
p-value			0.7950

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Blood alkaline phosphatase increased			
Patients With Events (%)	17 ( 8.5%)	17 ( 8.8%)	
Patients Without Events (Censored) (%)	184 ( 91.5%)	177 ( 91.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (19.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.744 (0.371, 1.494)
p-value			0.4052

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Blood bilirubin increased</b>			
Patients With Events (%)	7 ( 3.5%)	12 ( 6.2%)	
Patients Without Events (Censored) (%)	194 ( 96.5%)	182 ( 93.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.565 (0.222, 1.439)
p-value			0.2241

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Gamma-glutamyltransferase increased			
Patients With Events (%)	11 ( 5.5%)	6 ( 3.1%)	
Patients Without Events (Censored) (%)	190 ( 94.5%)	188 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (21.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.239 (0.438, 3.505)
p-value			0.6860

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Weight decreased			
Patients With Events (%)	12 ( 6.0%)	11 ( 5.7%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	183 ( 94.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.810 (0.349, 1.881)
p-value			0.6238

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Metabolism and nutrition disorders			
Patients With Events (%)	88 ( 43.8%)	69 ( 35.6%)	
Patients Without Events (Censored) (%)	113 ( 56.2%)	125 ( 64.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	11.6 (4.8, NE)	NE (5.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.197 (0.872, 1.644)
p-value			0.2545

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Decreased appetite			
Patients With Events (%)	47 ( 23.4%)	44 ( 22.7%)	
Patients Without Events (Censored) (%)	154 ( 76.6%)	150 ( 77.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	28.4 (28.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.958 (0.633, 1.450)
p-value			0.8406

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Hyperglycaemia</b>			
Patients With Events (%)	6 ( 3.0%)	13 ( 6.7%)	
Patients Without Events (Censored) (%)	195 ( 97.0%)	181 ( 93.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.369 (0.138, 0.981)
p-value			0.0379

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Hypokalaemia</b>			
Patients With Events (%)	24 ( 11.9%)	8 ( 4.1%)	
Patients Without Events (Censored) (%)	177 ( 88.1%)	186 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.644 (1.182, 5.916)
p-value			0.0139

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypomagnesaemia			
Patients With Events (%)	13 ( 6.5%)	7 ( 3.6%)	
Patients Without Events (Censored) (%)	188 ( 93.5%)	187 ( 96.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.676 (0.666, 4.217)
p-value			0.2671

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Musculoskeletal and connective tissue disorders			
Patients With Events (%)	84 ( 41.8%)	85 ( 43.8%)	
Patients Without Events (Censored) (%)	117 ( 58.2%)	109 ( 56.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.0 (4.5, NE)	4.3 (3.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.752 (0.552, 1.025)
p-value			0.0697

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Arthralgia</b>			
Patients With Events (%)	27 ( 13.4%)	25 ( 12.9%)	
Patients Without Events (Censored) (%)	174 ( 86.6%)	169 ( 87.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (19.4, NE)	19.3 (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.817 (0.468, 1.425)
p-value			0.4744

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Back pain			
Patients With Events (%)	27 ( 13.4%)	24 ( 12.4%)	
Patients Without Events (Censored) (%)	174 ( 86.6%)	170 ( 87.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.913 (0.520, 1.603)
p-value			0.7518

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Bone pain			
Patients With Events (%)	13 ( 6.5%)	16 ( 8.2%)	
Patients Without Events (Censored) (%)	188 ( 93.5%)	178 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.615 (0.292, 1.295)
p-value			0.1961

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Muscle spasms</b>			
Patients With Events (%)	15 ( 7.5%)	10 ( 5.2%)	
Patients Without Events (Censored) (%)	186 ( 92.5%)	184 ( 94.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.216 (0.542, 2.730)
p-value			0.6343

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Muscular weakness</b>			
Patients With Events (%)	10 ( 5.0%)	8 ( 4.1%)	
Patients Without Events (Censored) (%)	191 ( 95.0%)	186 ( 95.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.904 (0.350, 2.332)
p-value			0.8348

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Myalgia</b>			
Patients With Events (%)	11 ( 5.5%)	17 ( 8.8%)	
Patients Without Events (Censored) (%)	190 ( 94.5%)	177 ( 91.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.421 (0.189, 0.940)
p-value			0.0299

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Pain in extremity</b>			
Patients With Events (%)	12 ( 6.0%)	13 ( 6.7%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	181 ( 93.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.712 (0.322, 1.574)
p-value			0.3991

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Patients With Events (%)	74 ( 36.8%)	84 ( 43.3%)	
Patients Without Events (Censored) (%)	127 ( 63.2%)	110 ( 56.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.1, NE)	3.9 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.718 (0.524, 0.984)
p-value			0.0393

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Dizziness</b>			
Patients With Events (%)	18 ( 9.0%)	10 ( 5.2%)	
Patients Without Events (Censored) (%)	183 ( 91.0%)	184 ( 94.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (19.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.538 (0.702, 3.370)
p-value			0.2787

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Dysgeusia</b>			
Patients With Events (%)	10 ( 5.0%)	10 ( 5.2%)	
Patients Without Events (Censored) (%)	191 ( 95.0%)	184 ( 94.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.840 (0.348, 2.030)
p-value			0.6956

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Headache</b>			
Patients With Events (%)	30 ( 14.9%)	27 ( 13.9%)	
Patients Without Events (Censored) (%)	171 ( 85.1%)	167 ( 86.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.982 (0.582, 1.657)
p-value			0.9457

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neuropathy peripheral</b>			
Patients With Events (%)	9 ( 4.5%)	18 ( 9.3%)	
Patients Without Events (Censored) (%)	192 ( 95.5%)	176 ( 90.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.364 (0.161, 0.821)
p-value			0.0114

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Paraesthesia</b>			
Patients With Events (%)	7 ( 3.5%)	14 ( 7.2%)	
Patients Without Events (Censored) (%)	194 ( 96.5%)	180 ( 92.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.358 (0.137, 0.933)
p-value			0.0285

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Peripheral sensory neuropathy			
Patients With Events (%)	9 ( 4.5%)	14 ( 7.2%)	
Patients Without Events (Censored) (%)	192 ( 95.5%)	180 ( 92.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.504 (0.217, 1.173)
p-value			0.1051

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Psychiatric disorders			
Patients With Events (%)	25 ( 12.4%)	27 ( 13.9%)	
Patients Without Events (Censored) (%)	176 ( 87.6%)	167 ( 86.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (11.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.703 (0.402, 1.229)
p-value			0.2136

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Insomnia</b>			
Patients With Events (%)	12 ( 6.0%)	12 ( 6.2%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	182 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.832 (0.369, 1.876)
p-value			0.6568

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia. The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Renal and urinary disorders			
Patients With Events (%)	17 ( 8.5%)	18 ( 9.3%)	
Patients Without Events (Censored) (%)	184 ( 91.5%)	176 ( 90.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.801 (0.406, 1.577)
p-value			0.5191

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Reproductive system and breast disorders			
Patients With Events (%)	10 ( 5.0%)	5 ( 2.6%)	
Patients Without Events (Censored) (%)	191 ( 95.0%)	189 ( 97.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.779 (0.606, 5.224)
p-value			0.2883

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Patients With Events (%)	86 ( 42.8%)	59 ( 30.4%)	
Patients Without Events (Censored) (%)	115 ( 57.2%)	135 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.5 (3.9, NE)	10.1 (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.455 (1.038, 2.039)
p-value			0.0295

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Cough			
Patients With Events (%)	23 ( 11.4%)	13 ( 6.7%)	
Patients Without Events (Censored) (%)	178 ( 88.6%)	181 ( 93.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.489 (0.752, 2.948)
p-value			0.2523

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Dyspnoea</b>			
Patients With Events (%)	40 ( 19.9%)	29 ( 14.9%)	
Patients Without Events (Censored) (%)	161 ( 80.1%)	165 ( 85.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.240 (0.767, 2.004)
p-value			0.3810

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Epistaxis</b>			
Patients With Events (%)	17 ( 8.5%)	4 ( 2.1%)	
Patients Without Events (Censored) (%)	184 ( 91.5%)	190 ( 97.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.737 (1.249, 11.180)
p-value			0.0114

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Rhinorrhoea</b>			
Patients With Events (%)	11 ( 5.5%)	4 ( 2.1%)	
Patients Without Events (Censored) (%)	190 ( 94.5%)	190 ( 97.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.175 (0.684, 6.915)
p-value			0.1770

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Patients With Events (%)	120 ( 59.7%)	79 ( 40.7%)	
Patients Without Events (Censored) (%)	81 ( 40.3%)	115 ( 59.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 2.3)	5.7 (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.806 (1.355, 2.409)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia. The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Alopecia</b>			
Patients With Events (%)	98 ( 48.8%)	45 ( 23.2%)	
Patients Without Events (Censored) (%)	103 ( 51.2%)	149 ( 76.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	2.8 (1.0, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.535 (1.778, 3.615)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Dry skin</b>			
Patients With Events (%)	13 ( 6.5%)	8 ( 4.1%)	
Patients Without Events (Censored) (%)	188 ( 93.5%)	186 ( 95.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.188 (0.487, 2.902)
p-value			0.7047

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Patients With Events (%)	4 ( 2.0%)	14 ( 7.2%)	
Patients Without Events (Censored) (%)	197 ( 98.0%)	180 ( 92.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.185 (0.053, 0.647)
p-value			0.0031

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Pruritus</b>			
Patients With Events (%)	24 ( 11.9%)	4 ( 2.1%)	
Patients Without Events (Censored) (%)	177 ( 88.1%)	190 ( 97.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			5.510 (1.906, 15.927)
p-value			0.0004

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Rash</b>			
Patients With Events (%)	16 ( 8.0%)	9 ( 4.6%)	
Patients Without Events (Censored) (%)	185 ( 92.0%)	185 ( 95.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.586 (0.697, 3.607)
p-value			0.2680

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Vascular disorders</b>			
Patients With Events (%)	31 ( 15.4%)	27 ( 13.9%)	
Patients Without Events (Censored) (%)	170 ( 84.6%)	167 ( 86.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.003 (0.595, 1.692)
p-value			0.9927

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.1: Time to the First Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Hypertension</b>			
Patients With Events (%)	12 ( 6.0%)	9 ( 4.6%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	185 ( 95.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.186 (0.497, 2.832)
p-value			0.7016

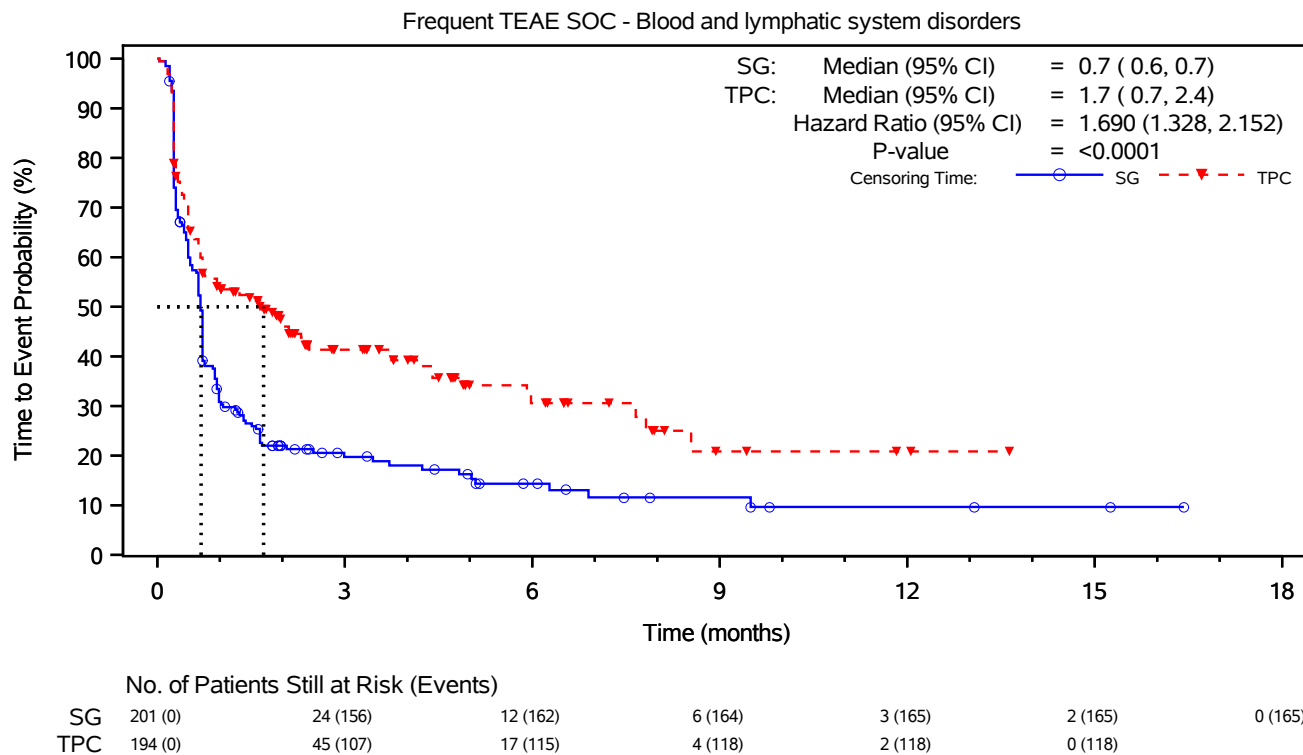
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The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

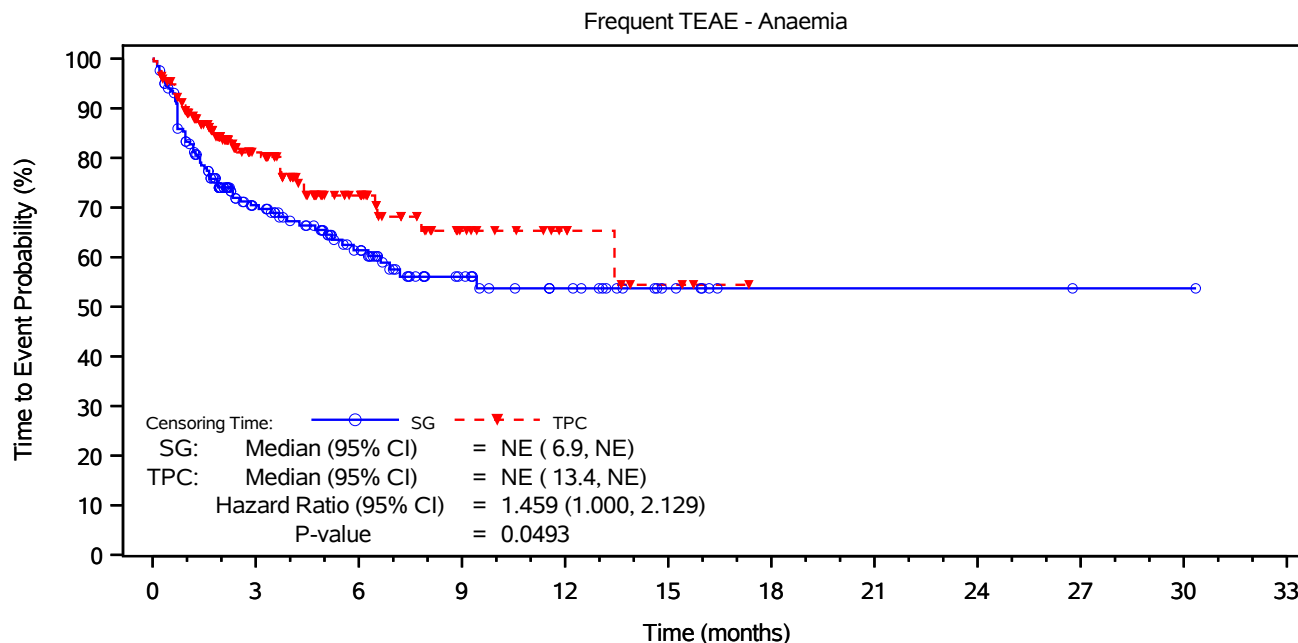
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	92 (55)	56 (65)	28 (69)	17 (70)	7 (70)	2 (70)	2 (70)	2 (70)	1 (70)	1 (70)	0 (70)
TPC	194 (0)	88 (33)	43 (41)	16 (44)	8 (44)	3 (45)	0 (45)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

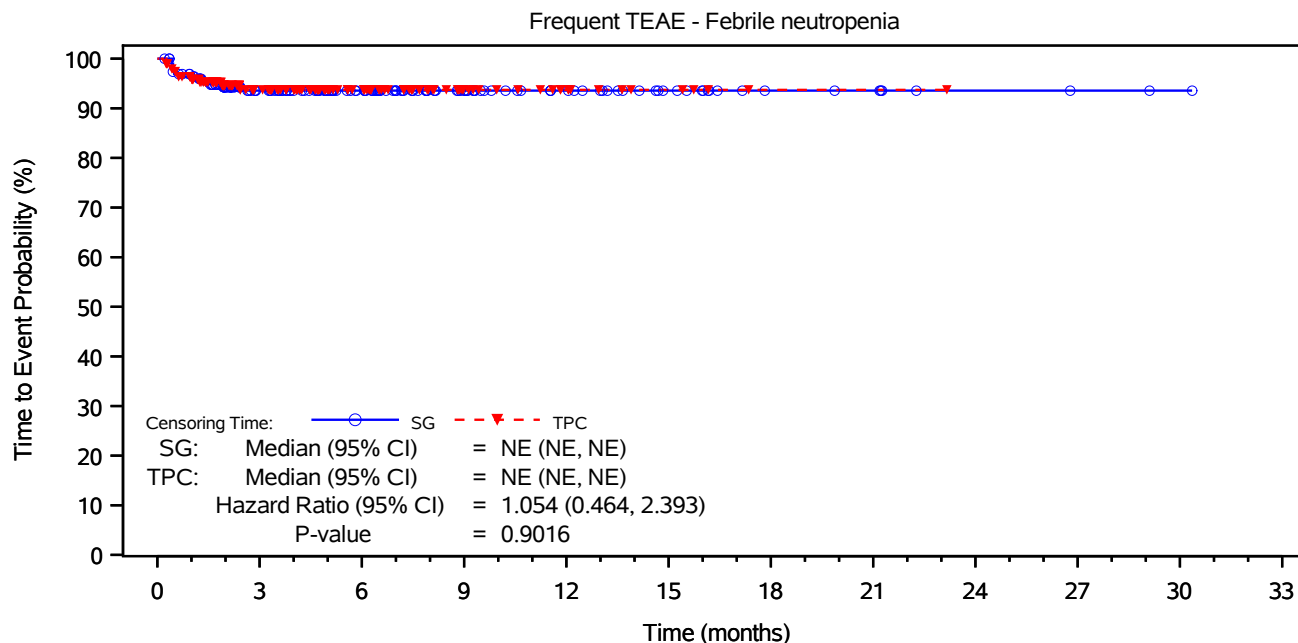
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	125 (12)	84 (12)	46 (12)	29 (12)	17 (12)	8 (12)	7 (12)	3 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	101 (11)	52 (11)	20 (11)	11 (11)	5 (11)	1 (11)	1 (11)	0 (11)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

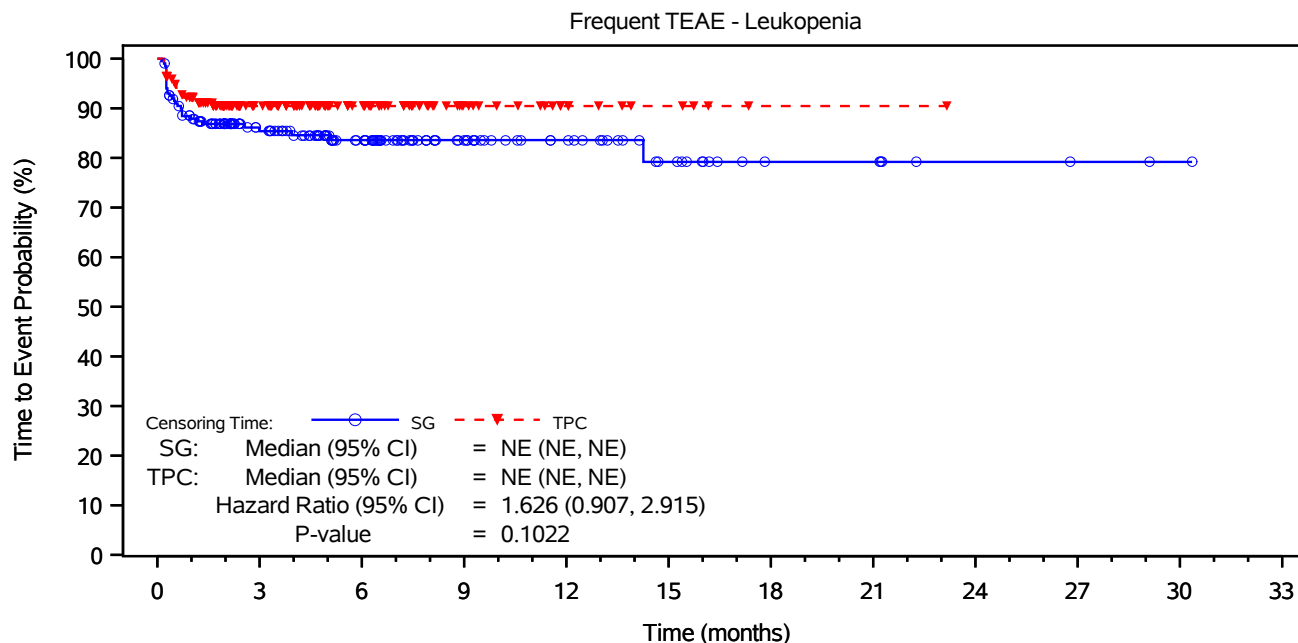
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	116 (28)	77 (30)	42 (30)	28 (30)	16 (31)	7 (31)	7 (31)	3 (31)	2 (31)	1 (31)	0 (31)
TPC	194 (0)	100 (18)	51 (18)	20 (18)	10 (18)	5 (18)	1 (18)	1 (18)	0 (18)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

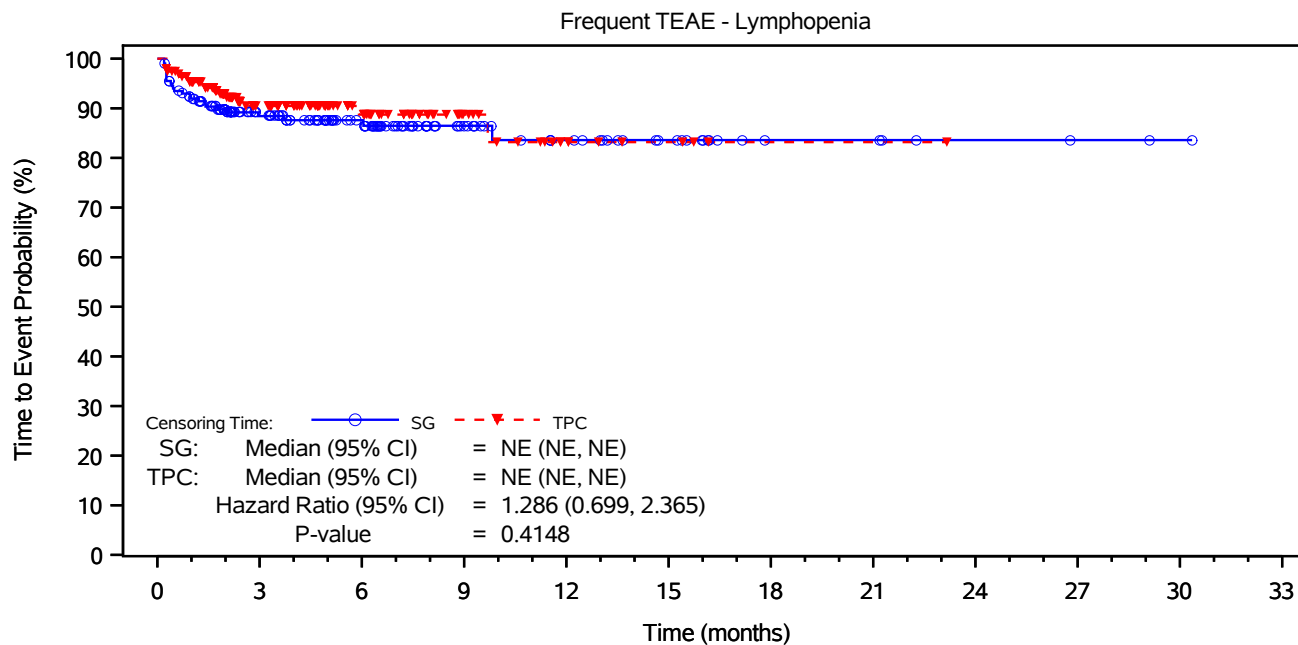
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	117 (22)	78 (23)	38 (24)	25 (25)	16 (25)	6 (25)	6 (25)	3 (25)	2 (25)	1 (25)	0 (25)
TPC	194 (0)	98 (16)	51 (17)	19 (17)	8 (18)	4 (18)	1 (18)	1 (18)	0 (18)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

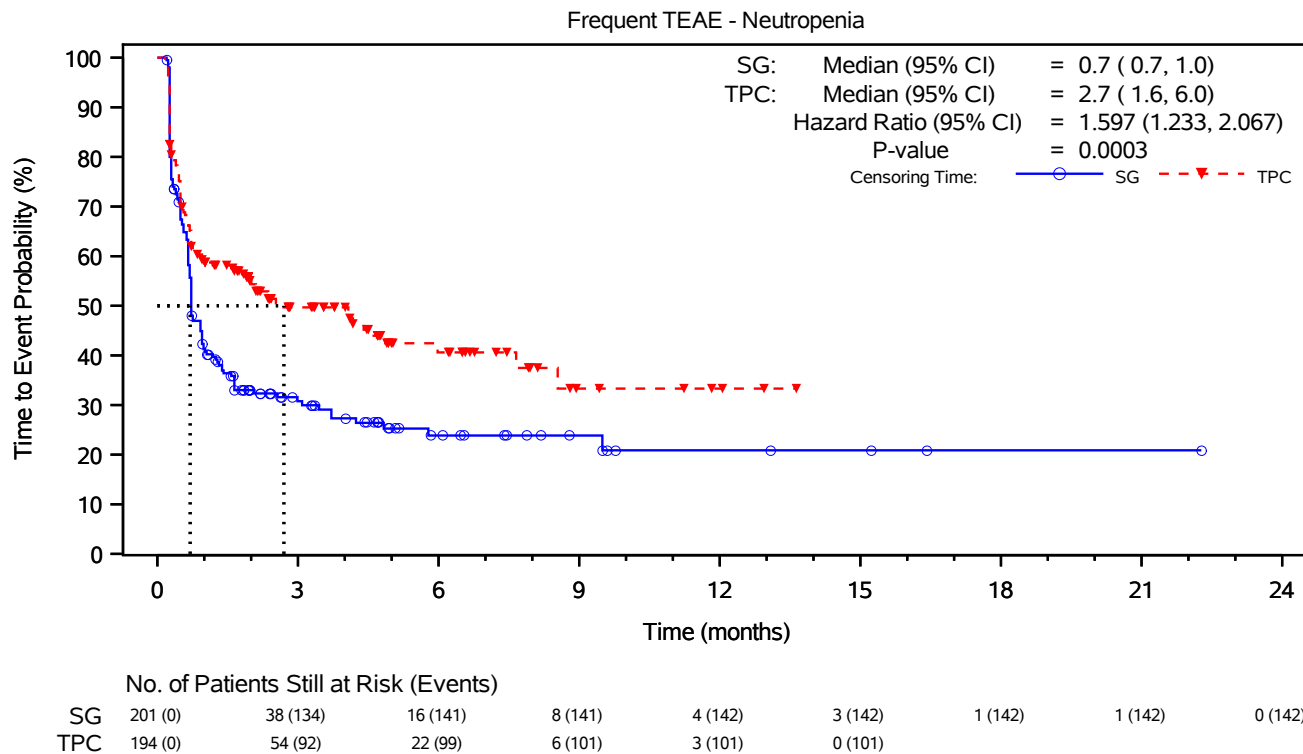
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

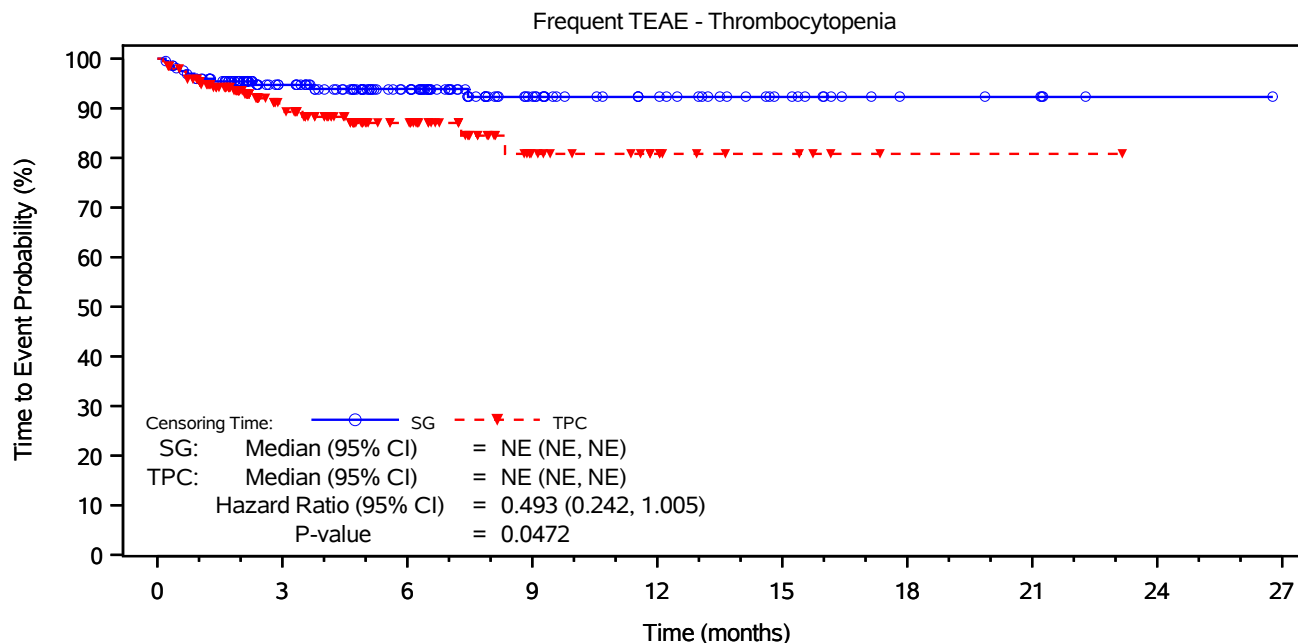
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)									
	0	3	6	9	12	15	18	21	24	27
SG	201 (0)	126 (10)	84 (11)	42 (12)	27 (12)	15 (12)	6 (12)	5 (12)	1 (12)	0 (12)
TPC	194 (0)	97 (16)	51 (19)	18 (21)	10 (21)	5 (21)	1 (21)	1 (21)	0 (21)	

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

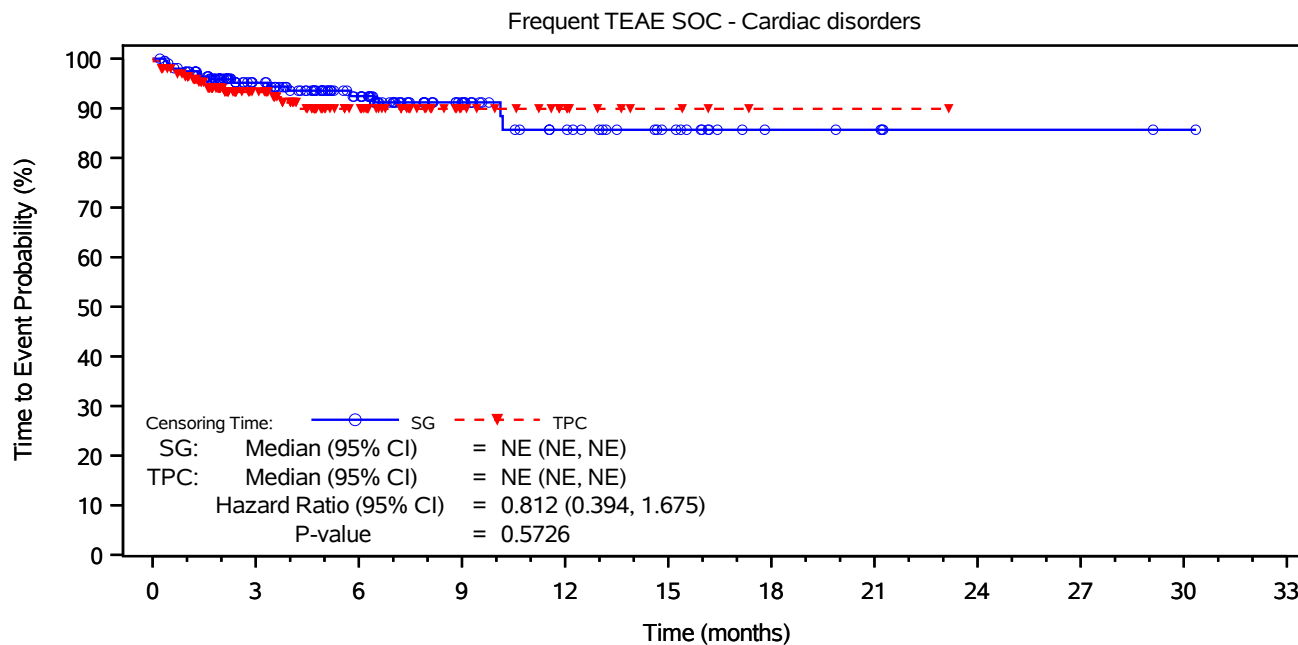
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	126 (9)	83 (12)	43 (13)	26 (15)	16 (15)	6 (15)	5 (15)	2 (15)	2 (15)	1 (15)	0 (15)
TPC	194 (0)	98 (12)	47 (15)	18 (15)	10 (15)	4 (15)	1 (15)	1 (15)	0 (15)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

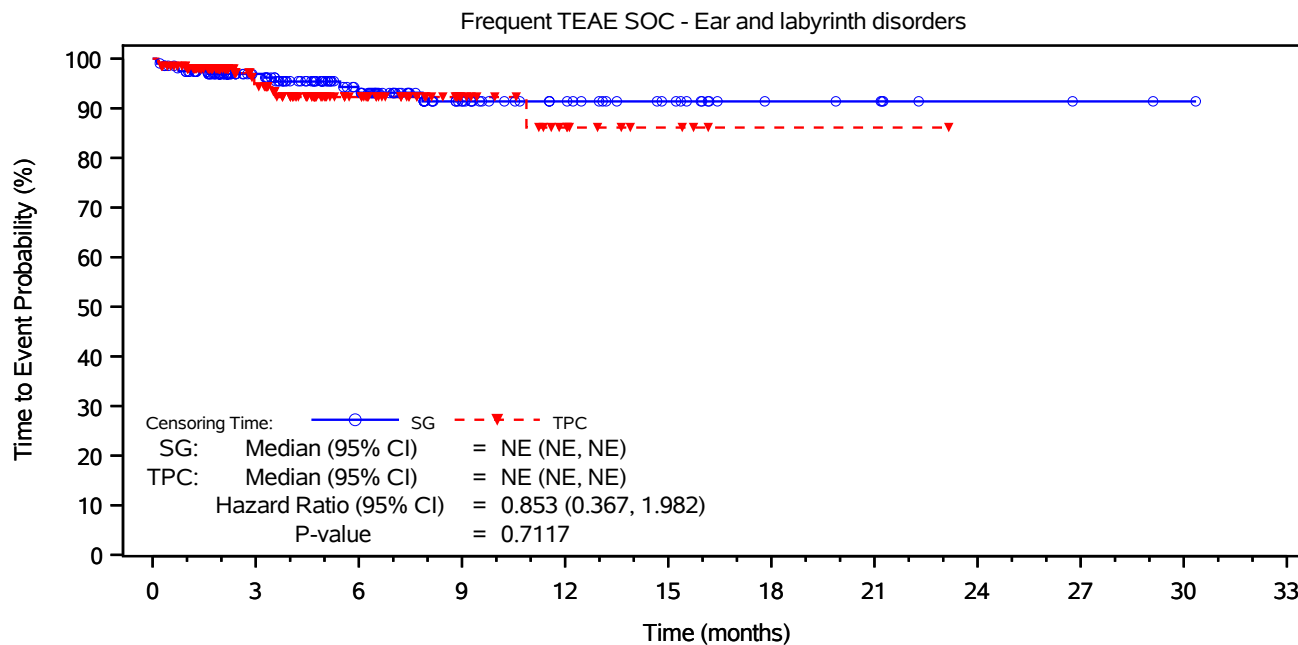
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	129 (6)	81 (10)	41 (11)	26 (11)	17 (11)	8 (11)	7 (11)	3 (11)	2 (11)	1 (11)	0 (11)
TPC	194 (0)	102 (8)	50 (10)	20 (10)	10 (11)	4 (11)	1 (11)	1 (11)	0 (11)			

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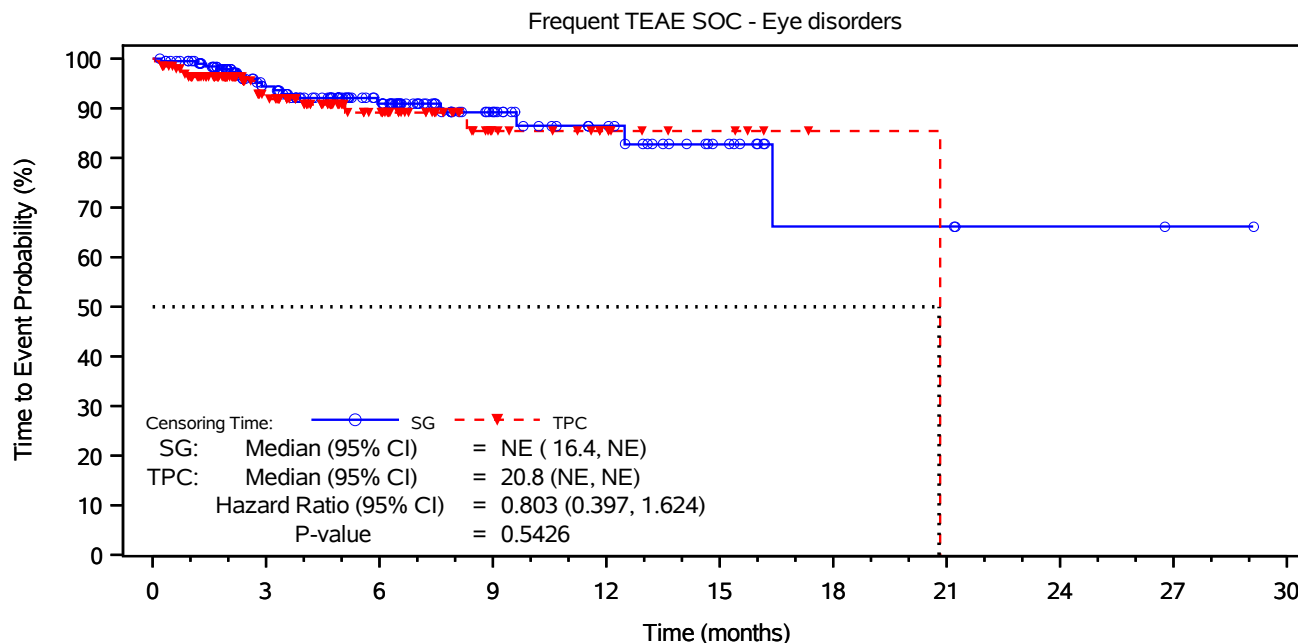
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	126 (9)	80 (13)	41 (14)	25 (15)	12 (16)	4 (17)	4 (17)	2 (17)	1 (17)	0 (17)
TPC	194 (0)	99 (11)	50 (14)	17 (15)	10 (15)	5 (15)	1 (15)	0 (16)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

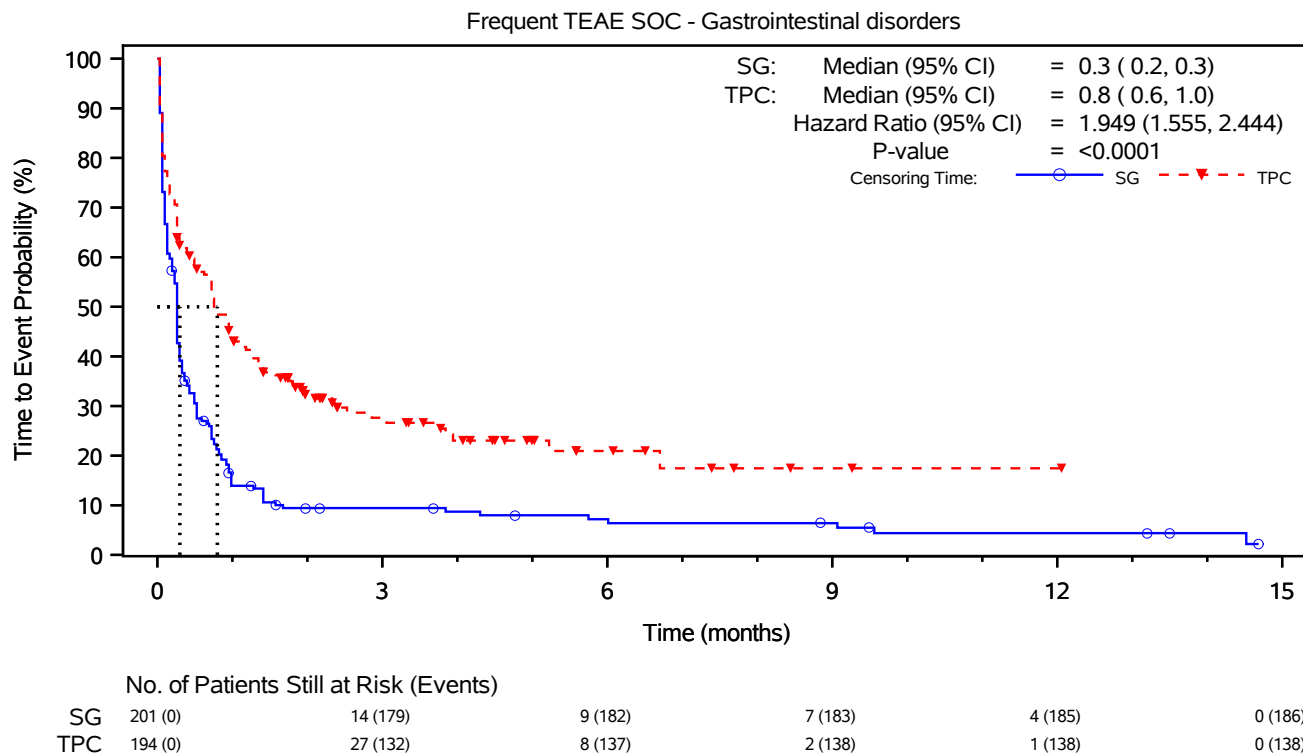
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

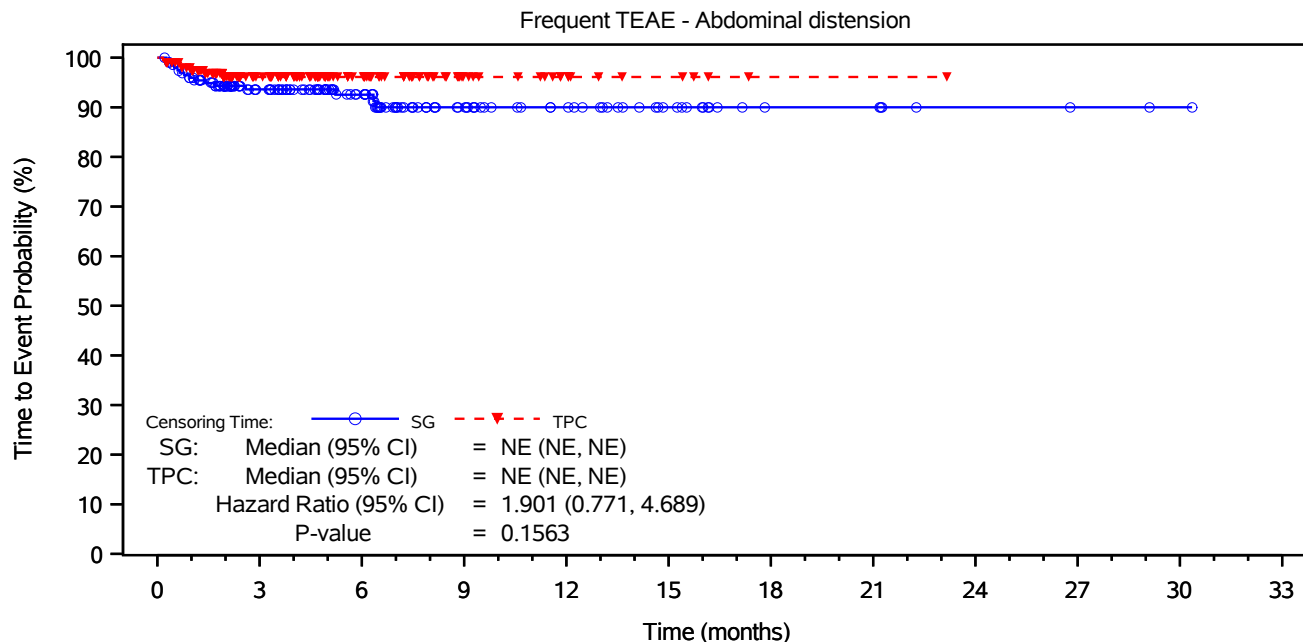
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	126 (12)	81 (13)	42 (15)	29 (15)	17 (15)	7 (15)	7 (15)	3 (15)	2 (15)	1 (15)	0 (15)
TPC	194 (0)	101 (7)	52 (7)	19 (7)	10 (7)	5 (7)	1 (7)	1 (7)	0 (7)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

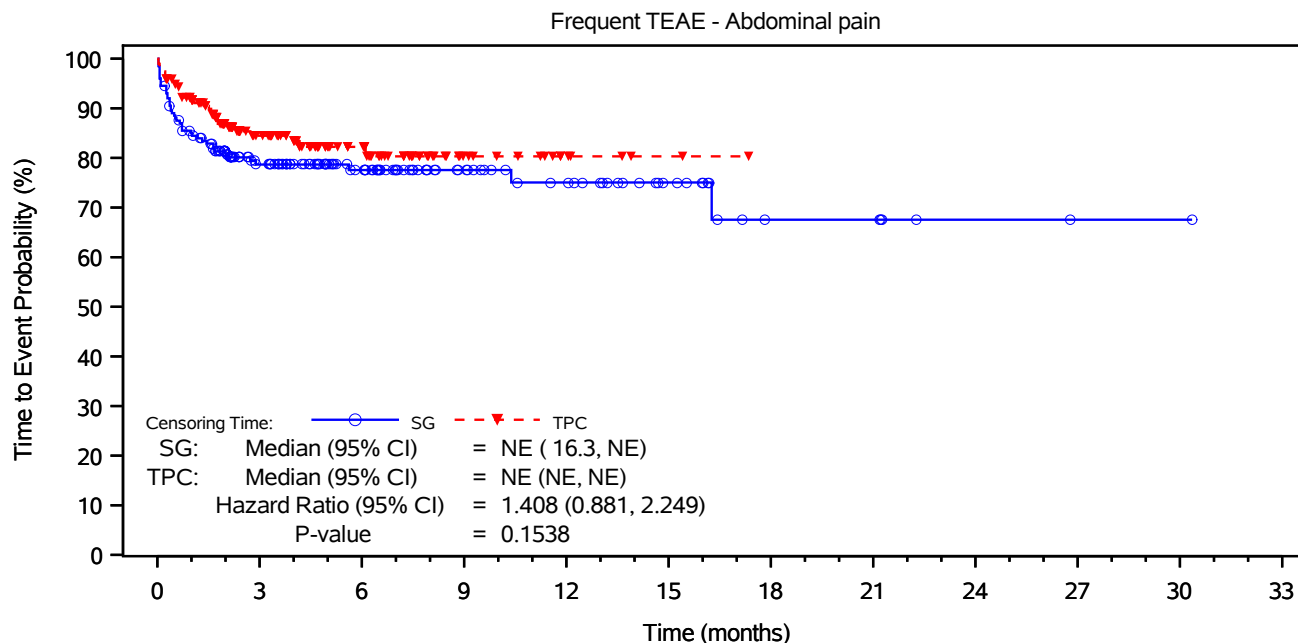
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	107 (41)	68 (42)	38 (42)	28 (43)	16 (43)	6 (44)	6 (44)	2 (44)	1 (44)	1 (44)	0 (44)
TPC	194 (0)	92 (27)	47 (29)	15 (30)	6 (30)	2 (30)	0 (30)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

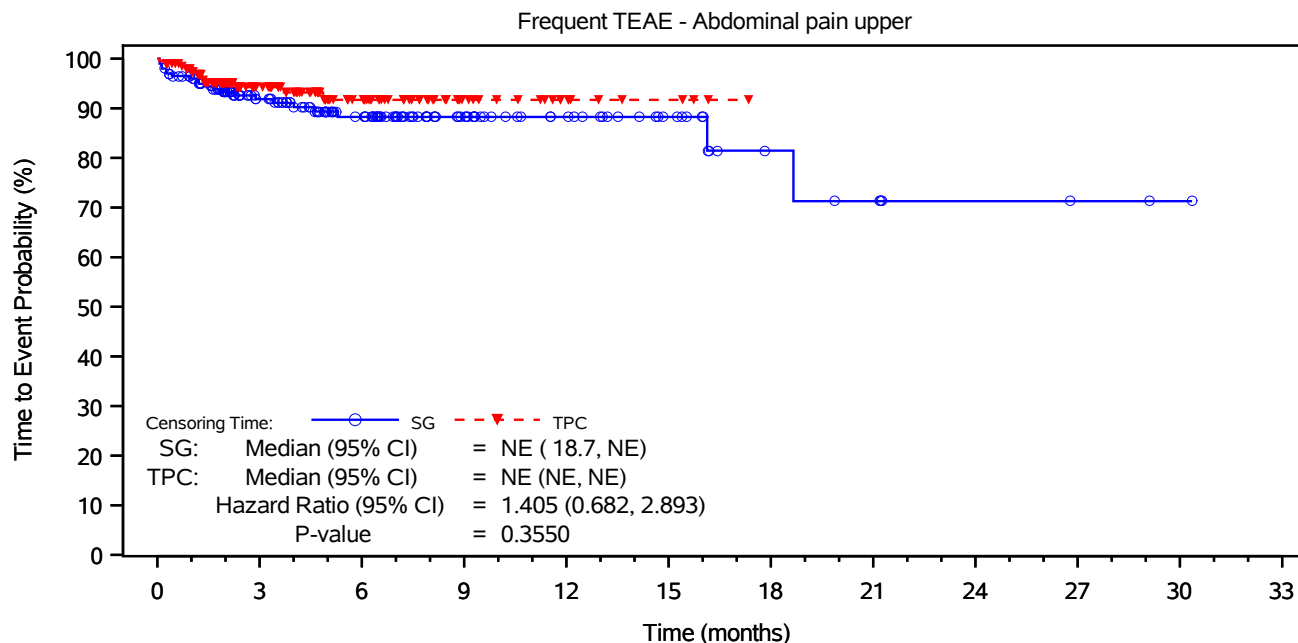
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	122 (15)	80 (19)	44 (19)	29 (19)	18 (19)	8 (20)	6 (21)	3 (21)	2 (21)	1 (21)	0 (21)
TPC	194 (0)	100 (10)	50 (12)	19 (12)	9 (12)	4 (12)	0 (12)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

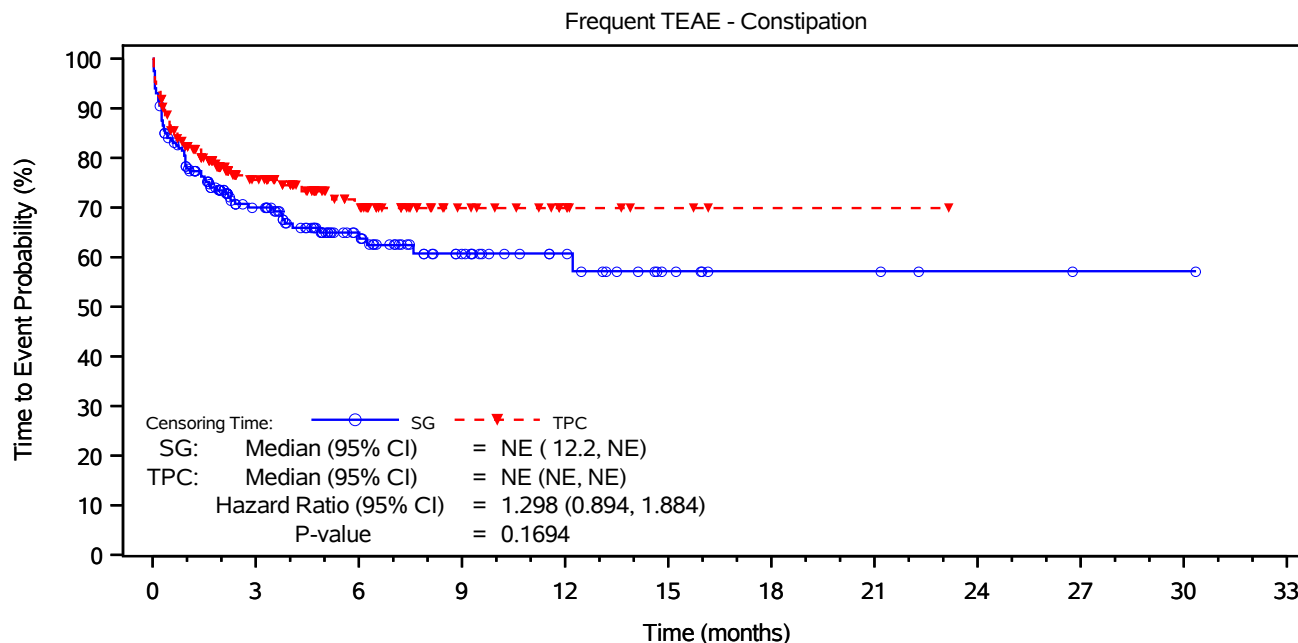
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	95 (57)	53 (63)	30 (66)	18 (66)	8 (67)	4 (67)	4 (67)	2 (67)	1 (67)	1 (67)	0 (67)
TPC	194 (0)	80 (44)	40 (48)	16 (48)	8 (48)	3 (48)	1 (48)	1 (48)	0 (48)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

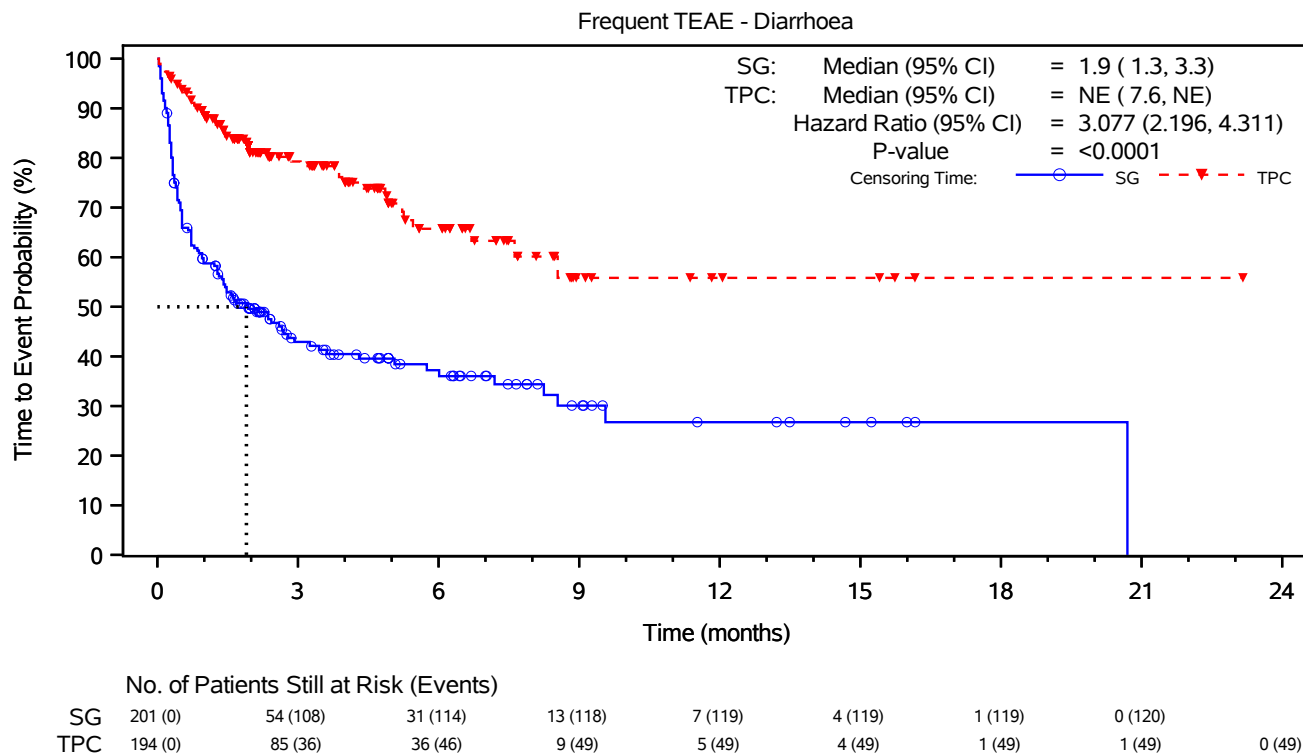
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

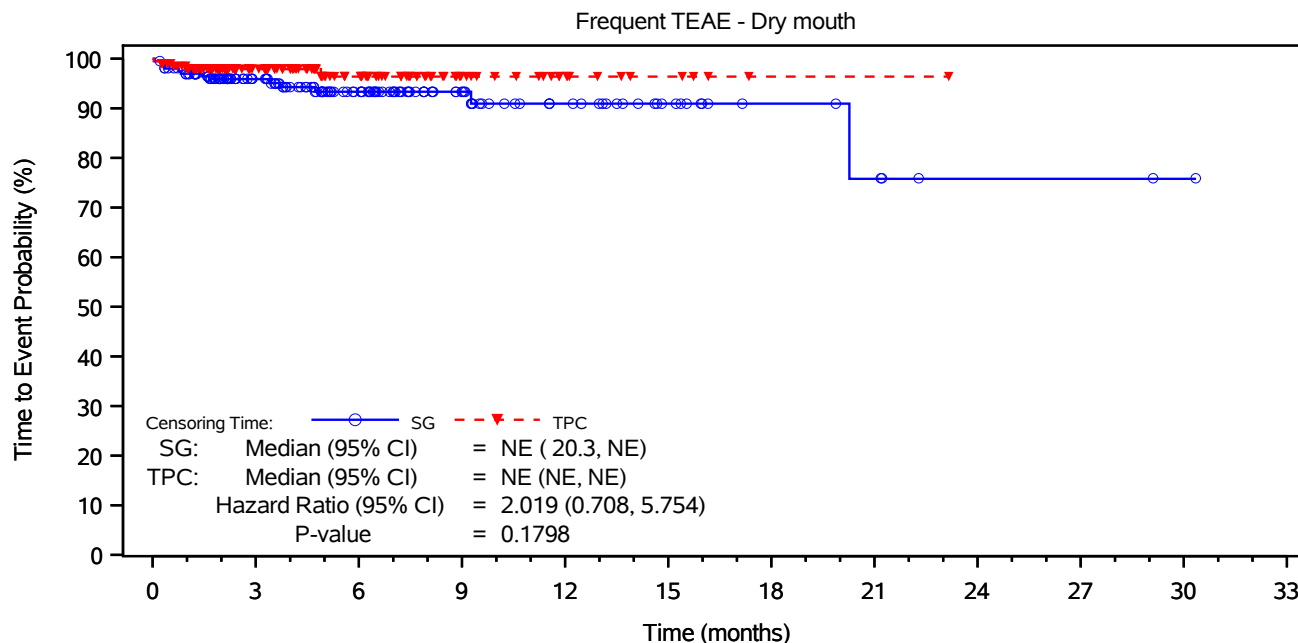
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	126 (8)	80 (11)	43 (11)	25 (12)	14 (12)	7 (12)	5 (13)	2 (13)	2 (13)	1 (13)	0 (13)
TPC	194 (0)	102 (4)	53 (5)	21 (5)	11 (5)	5 (5)	1 (5)	1 (5)	0 (5)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

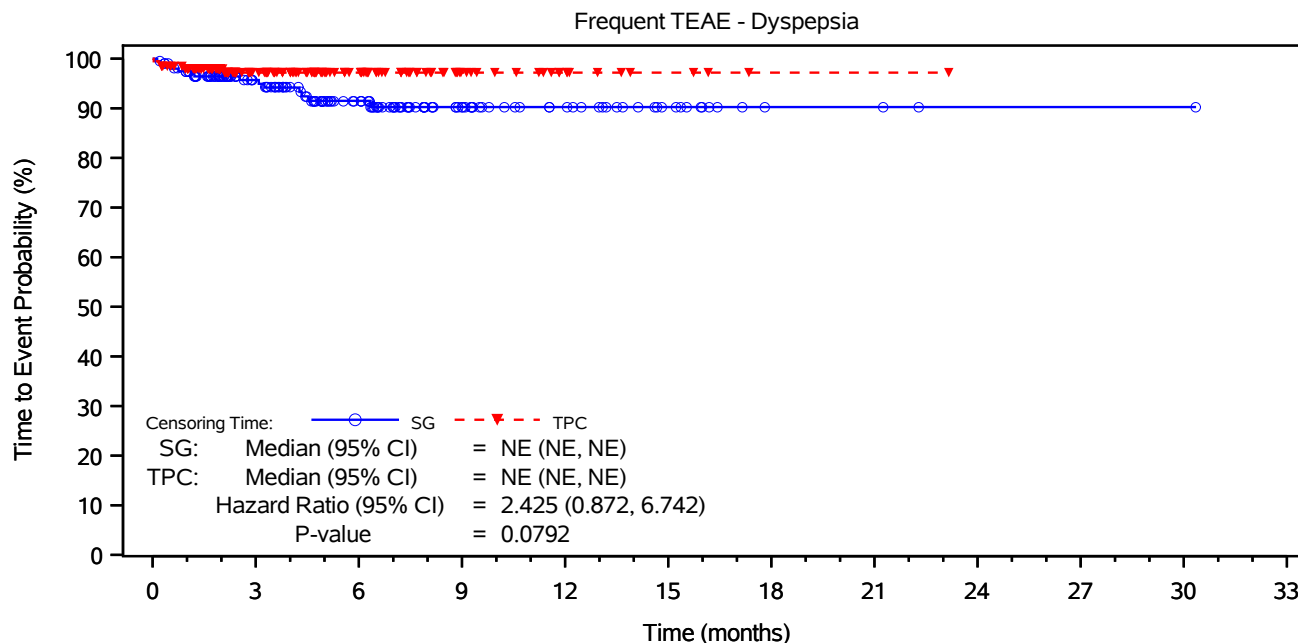
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	126 (8)	79 (13)	39 (14)	24 (14)	12 (14)	3 (14)	3 (14)	1 (14)	1 (14)	1 (14)	0 (14)
TPC	194 (0)	102 (5)	53 (5)	20 (5)	10 (5)	4 (5)	1 (5)	1 (5)	0 (5)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

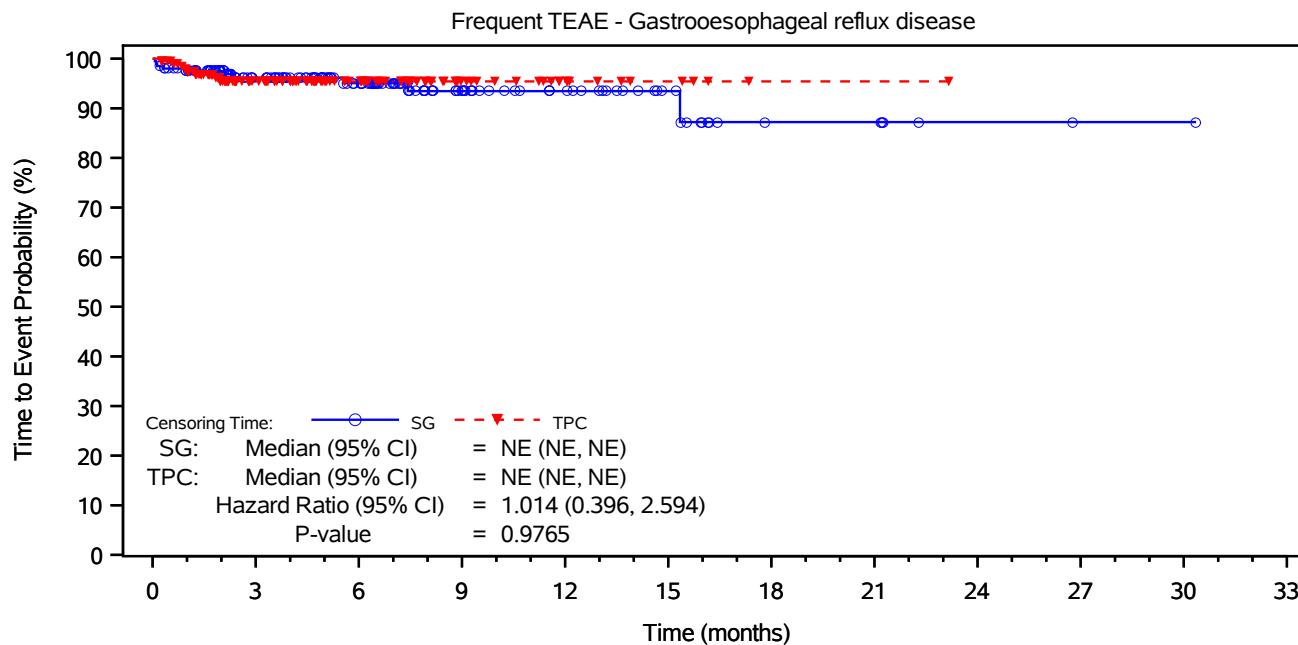
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	126 (7)	83 (8)	43 (9)	28 (9)	16 (9)	6 (10)	6 (10)	2 (10)	1 (10)	1 (10)	0 (10)
TPC	194 (0)	102 (8)	54 (8)	21 (8)	11 (8)	5 (8)	1 (8)	1 (8)	0 (8)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

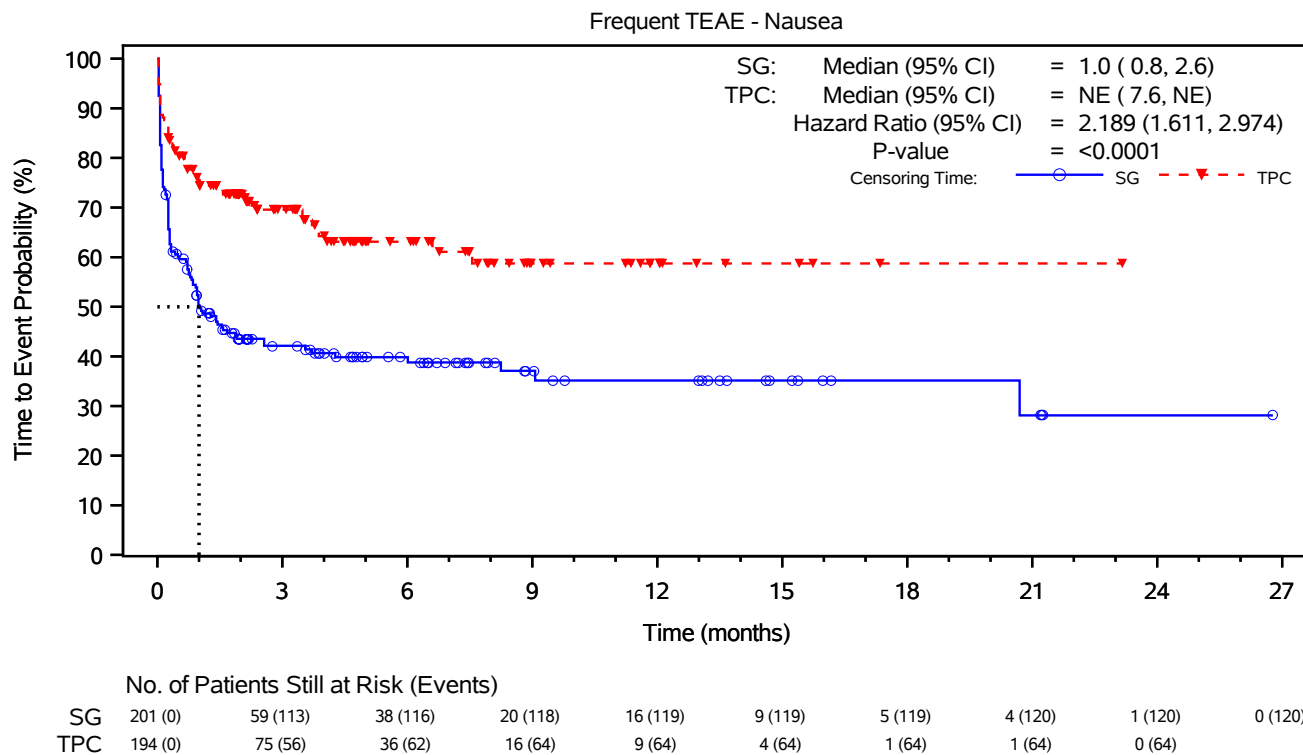
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

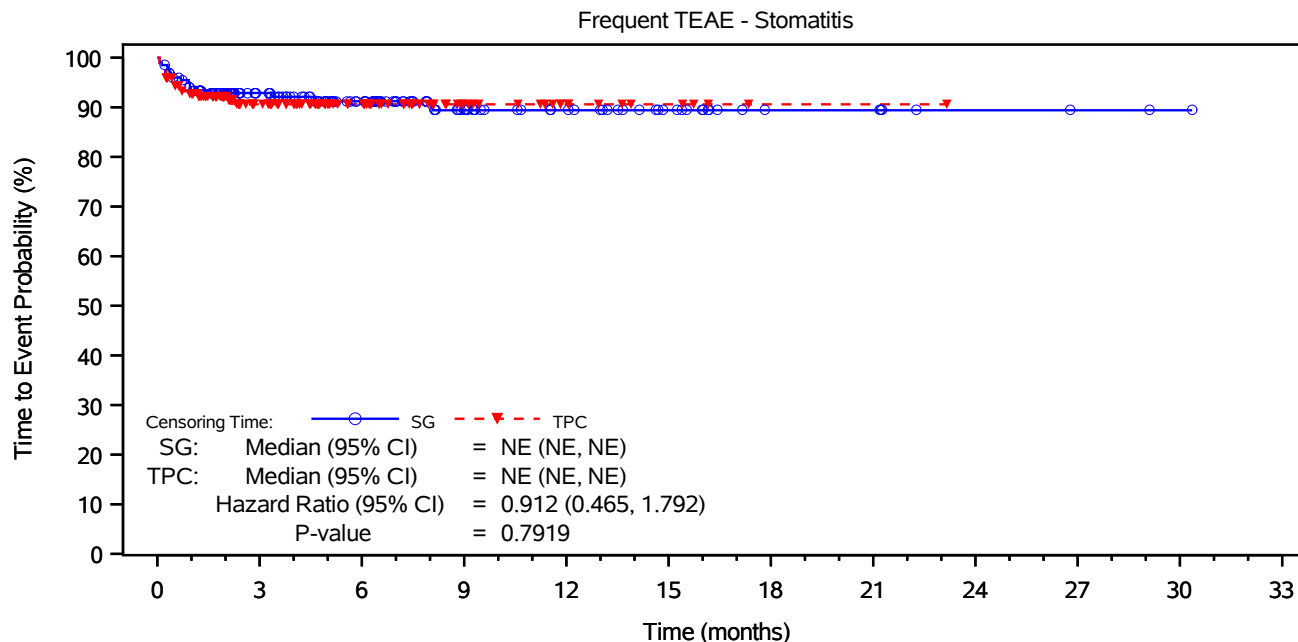
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	122 (14)	82 (16)	43 (17)	28 (17)	17 (17)	7 (17)	7 (17)	3 (17)	2 (17)	1 (17)	0 (17)
TPC	194 (0)	97 (17)	49 (17)	19 (17)	10 (17)	5 (17)	1 (17)	1 (17)	0 (17)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

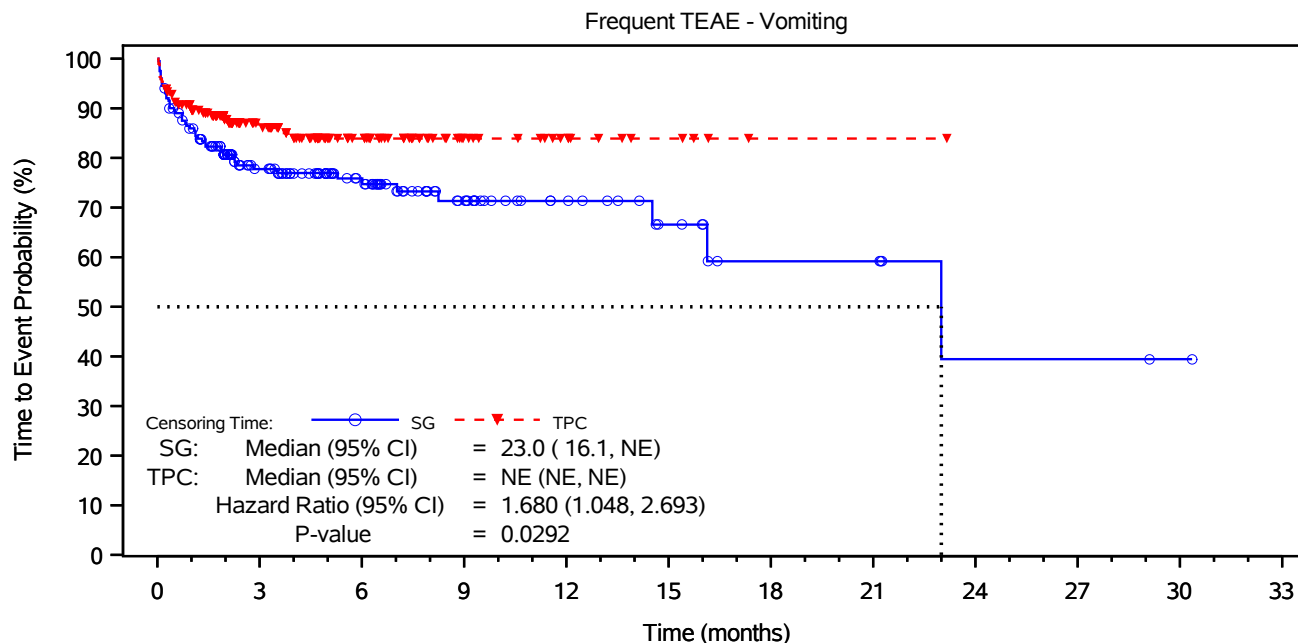
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	103 (42)	66 (44)	35 (47)	20 (47)	12 (48)	6 (49)	6 (49)	2 (50)	2 (50)	1 (50)	0 (50)
TPC	194 (0)	92 (25)	48 (27)	19 (27)	11 (27)	5 (27)	1 (27)	1 (27)	0 (27)			

The analysis is based on Interim 2 data cut at 01Jul2022.

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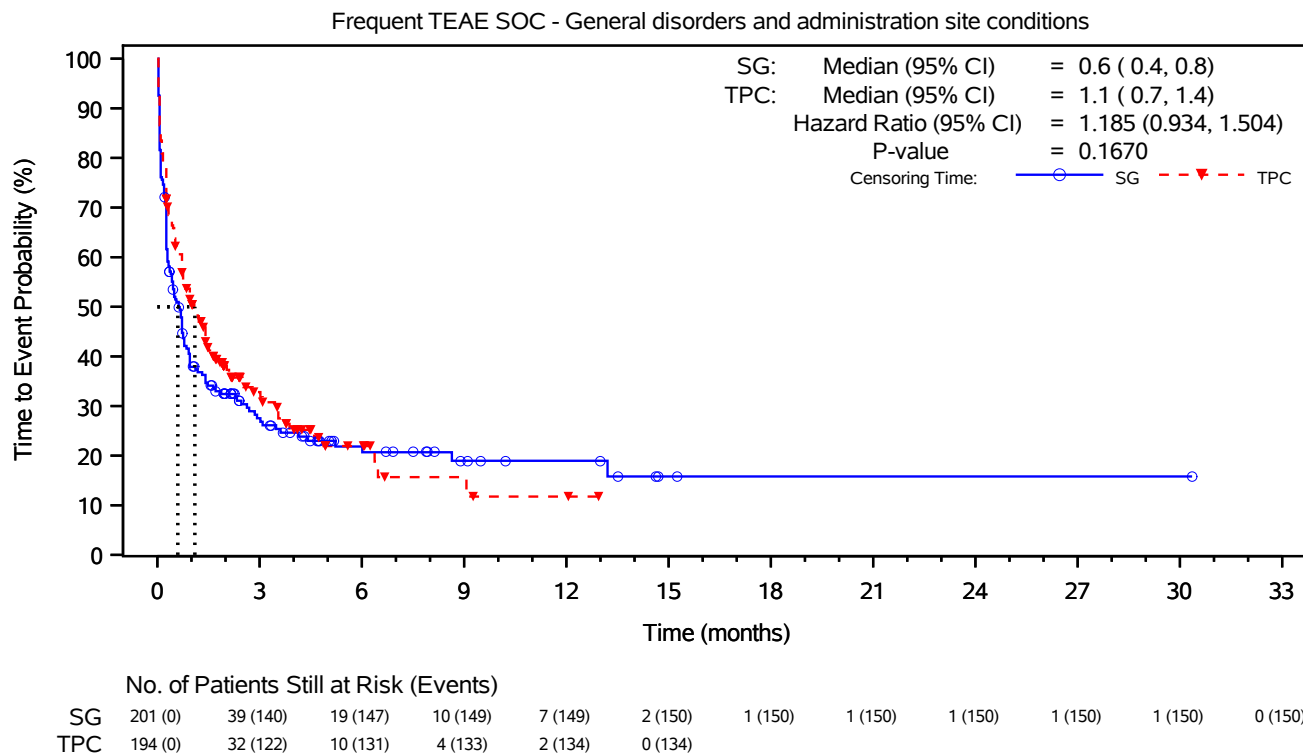
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

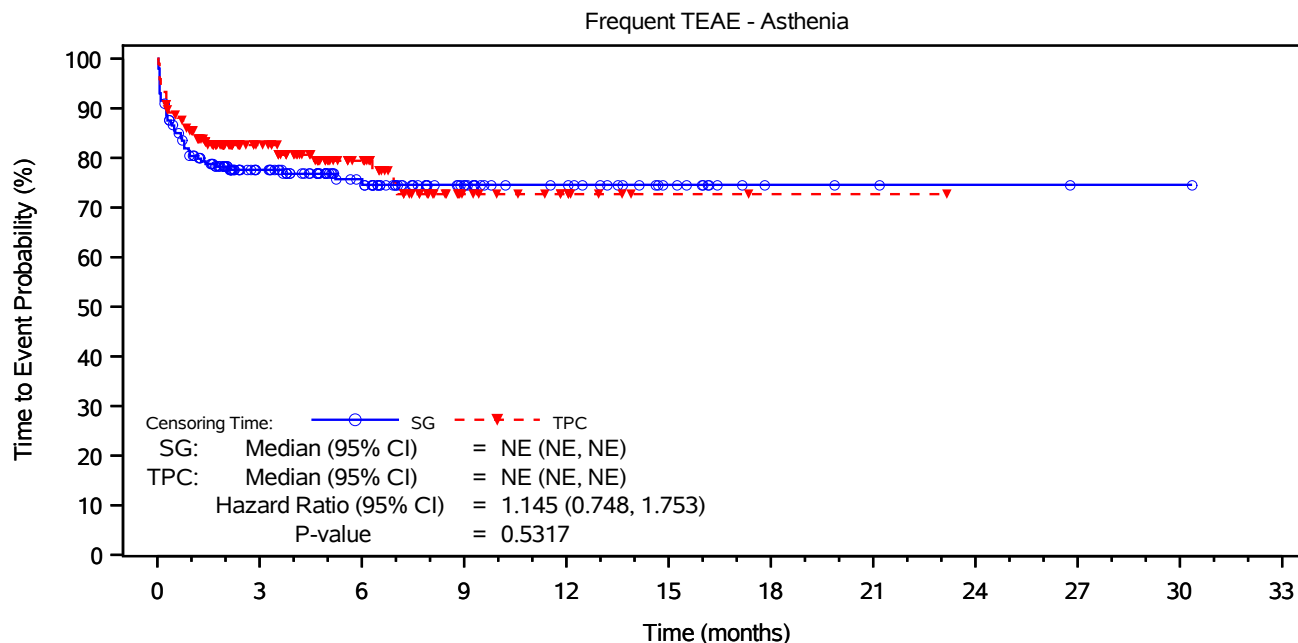
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	104 (44)	67 (46)	36 (47)	24 (47)	13 (47)	4 (47)	3 (47)	2 (47)	1 (47)	1 (47)	0 (47)
TPC	194 (0)	89 (33)	47 (36)	15 (39)	8 (39)	2 (39)	1 (39)	1 (39)	0 (39)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

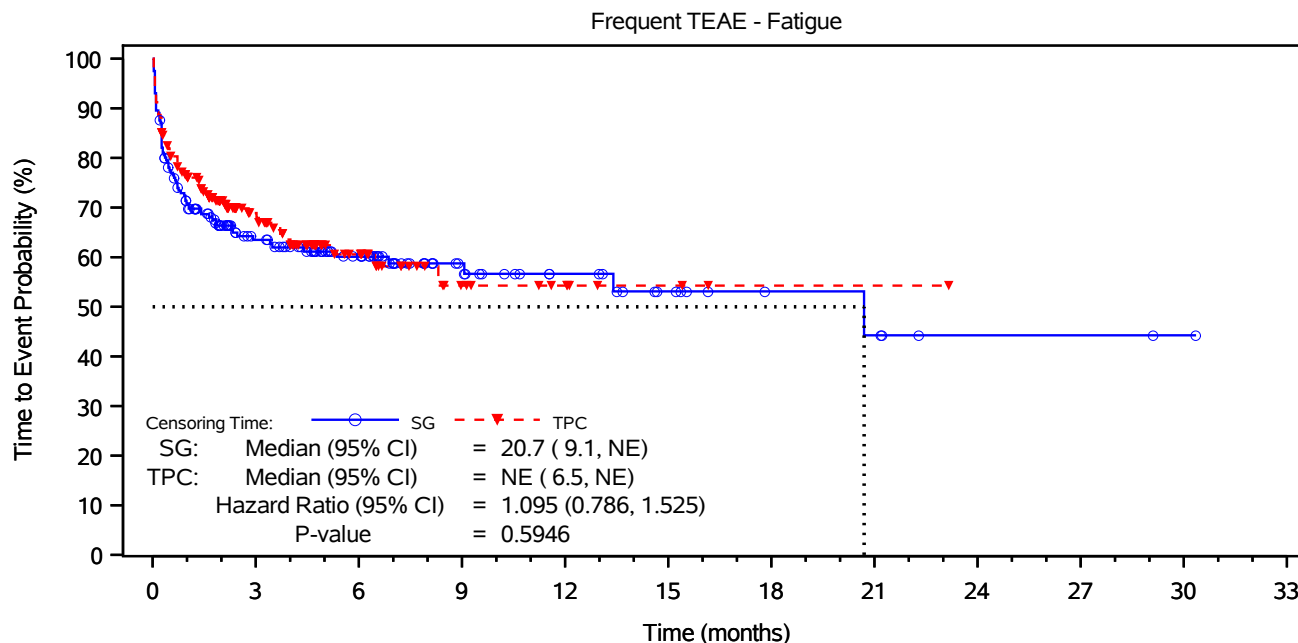
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	85 (70)	56 (74)	28 (75)	18 (76)	11 (77)	6 (77)	5 (78)	2 (78)	2 (78)	1 (78)	0 (78)
TPC	194 (0)	70 (57)	30 (64)	11 (66)	7 (66)	3 (66)	1 (66)	1 (66)	0 (66)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

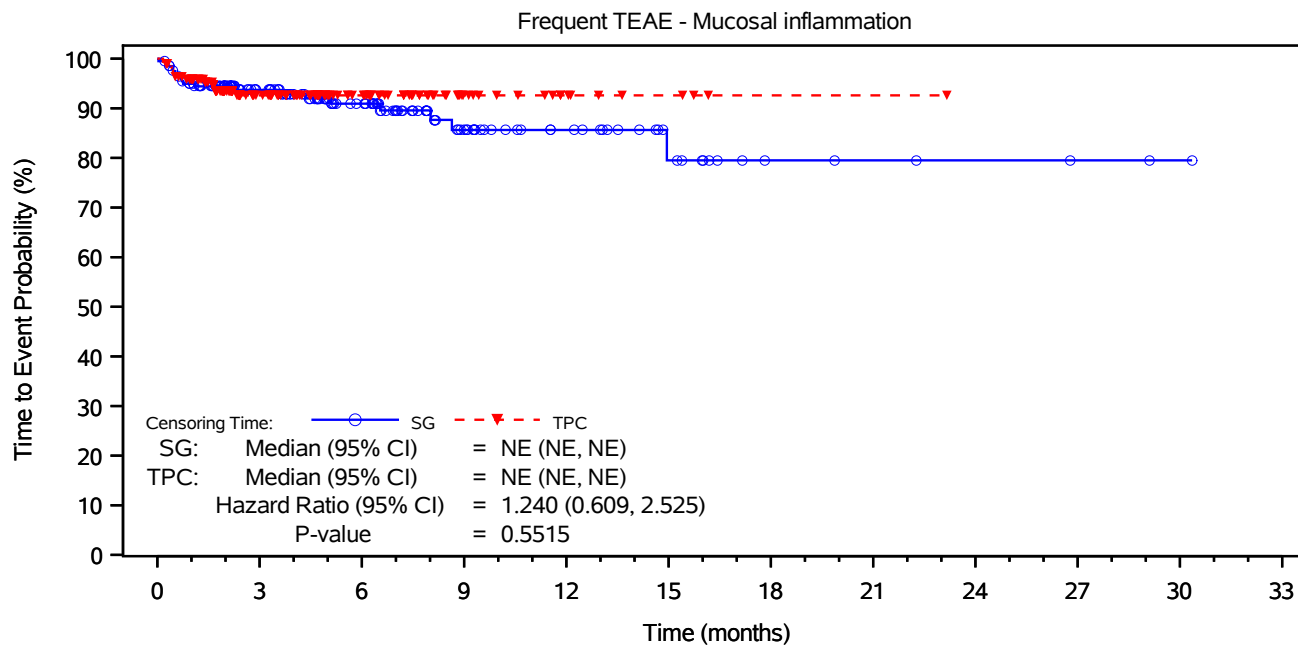
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	122 (12)	79 (15)	39 (18)	24 (18)	13 (19)	5 (19)	4 (19)	3 (19)	2 (19)	1 (19)	0 (19)
TPC	194 (0)	96 (13)	48 (13)	17 (13)	8 (13)	4 (13)	1 (13)	1 (13)	0 (13)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

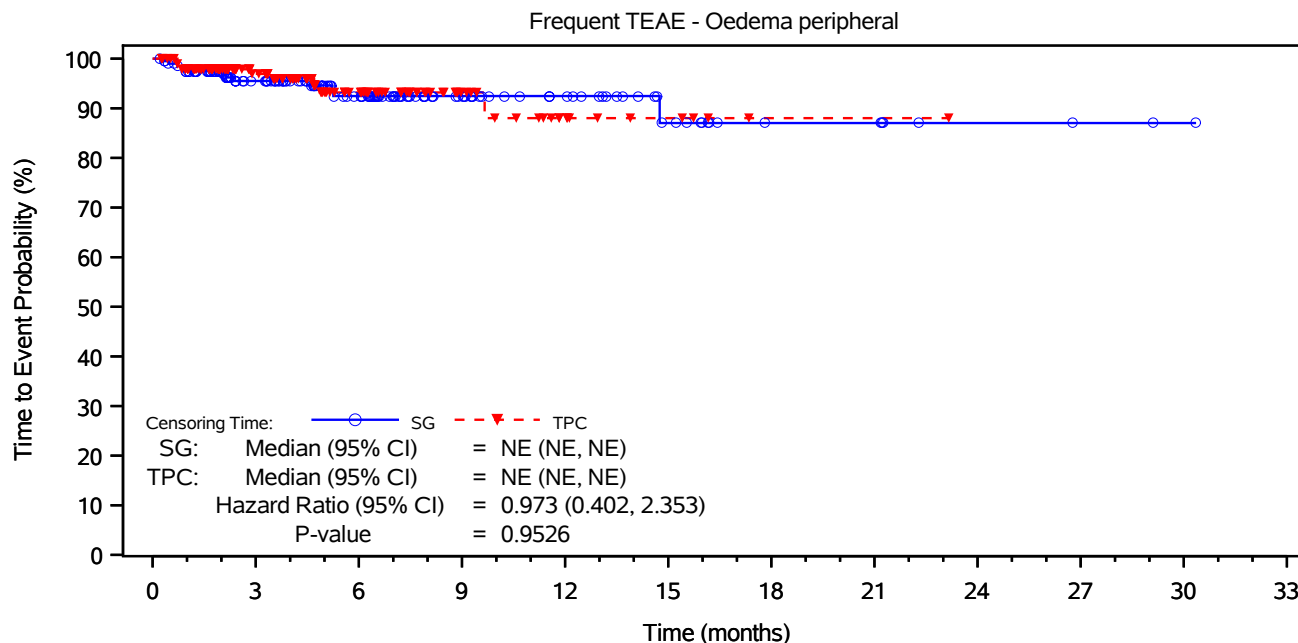
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	128 (8)	82 (11)	43 (11)	28 (11)	15 (12)	7 (12)	7 (12)	3 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	103 (5)	52 (8)	21 (8)	10 (9)	5 (9)	1 (9)	1 (9)	0 (9)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

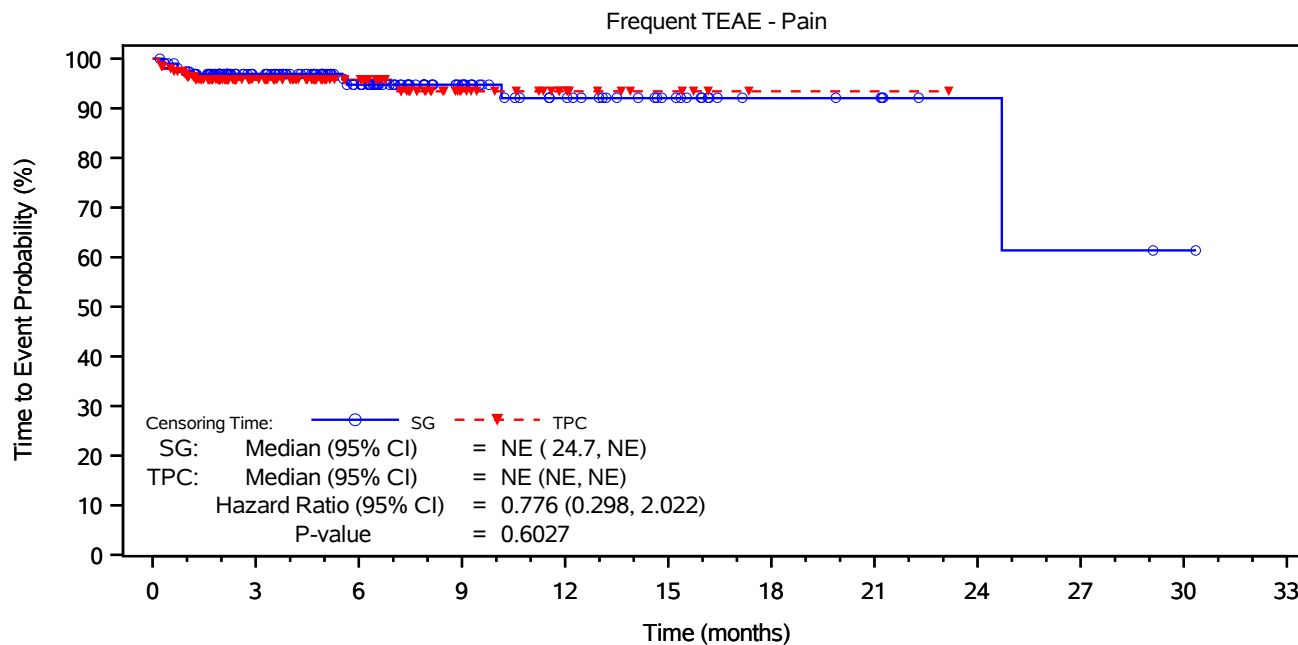
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	129 (6)	83 (8)	45 (8)	28 (9)	17 (9)	8 (9)	7 (9)	3 (9)	2 (10)	1 (10)	0 (10)
TPC	194 (0)	102 (8)	55 (8)	21 (9)	11 (9)	5 (9)	1 (9)	1 (9)	0 (9)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

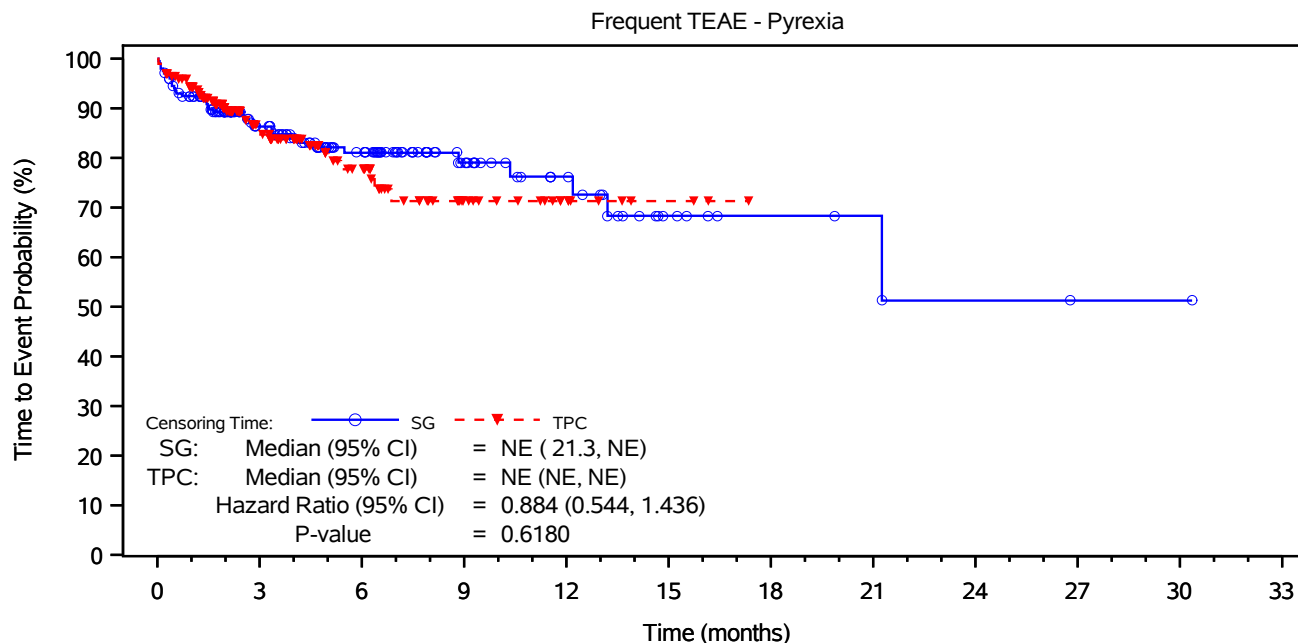
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	114 (25)	73 (31)	38 (32)	22 (33)	9 (35)	5 (35)	4 (35)	2 (36)	1 (36)	1 (36)	0 (36)
TPC	194 (0)	89 (23)	45 (29)	19 (32)	9 (32)	3 (32)	0 (32)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

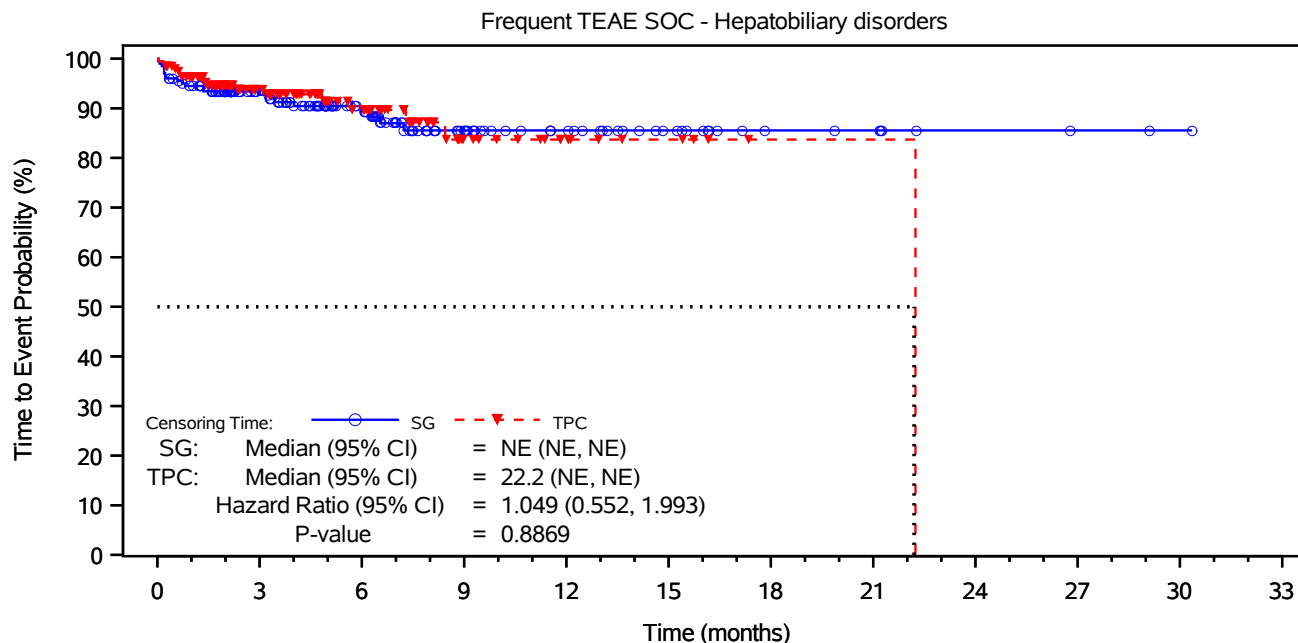
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	129 (14)	83 (18)	43 (21)	28 (21)	17 (21)	8 (21)	7 (21)	3 (21)	2 (21)	1 (21)	0 (21)
TPC	194 (0)	100 (11)	52 (14)	18 (16)	10 (16)	5 (16)	1 (16)	1 (16)	0 (17)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

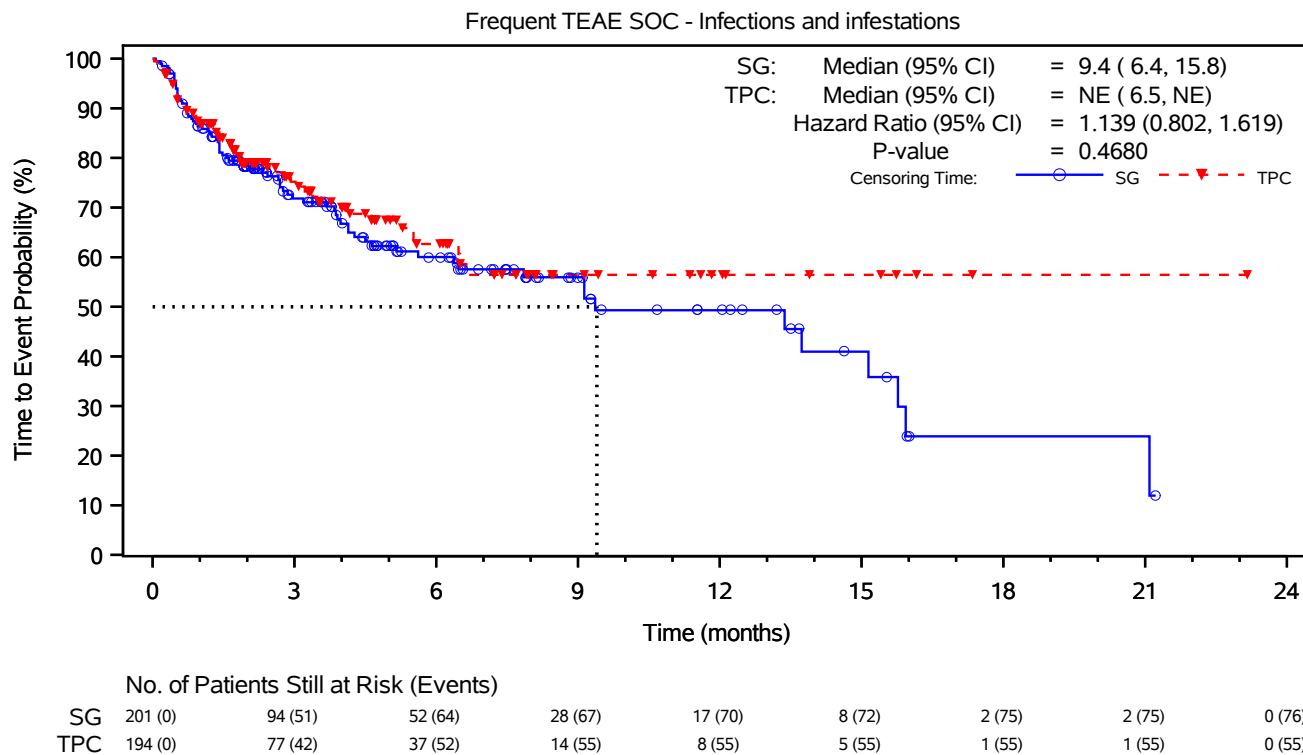
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

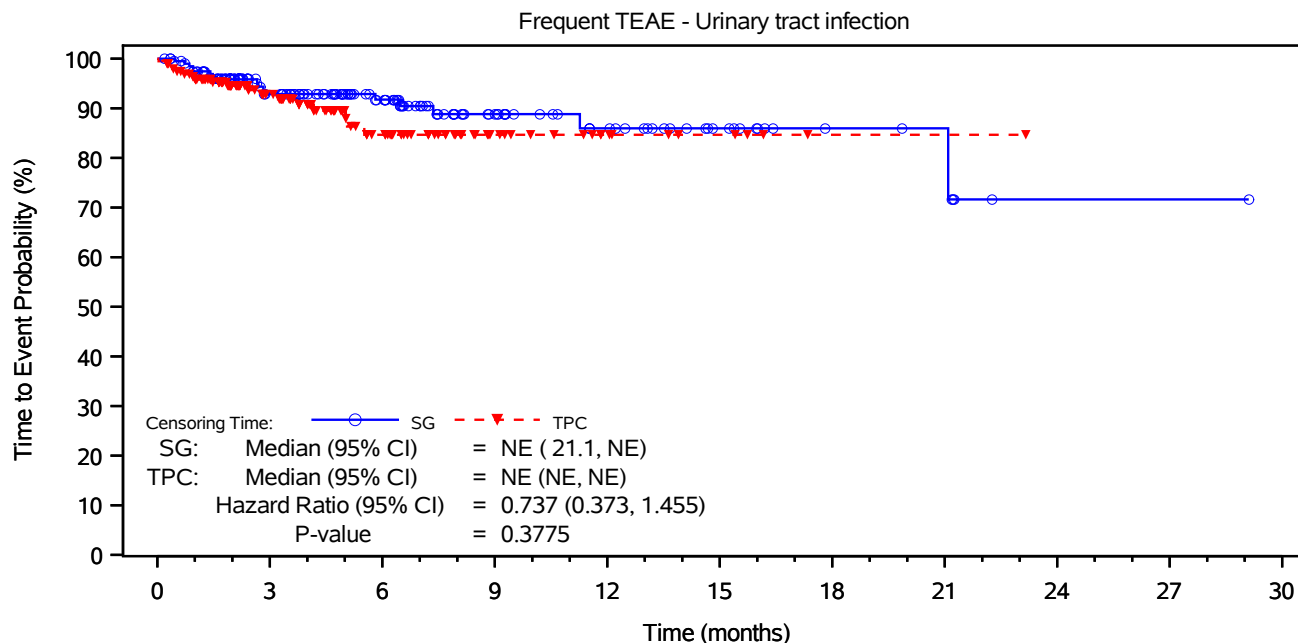
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	123 (12)	80 (13)	42 (15)	27 (16)	15 (16)	7 (16)	6 (16)	1 (17)	1 (17)	0 (17)
TPC	194 (0)	98 (12)	47 (18)	18 (18)	9 (18)	5 (18)	1 (18)	1 (18)	0 (18)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

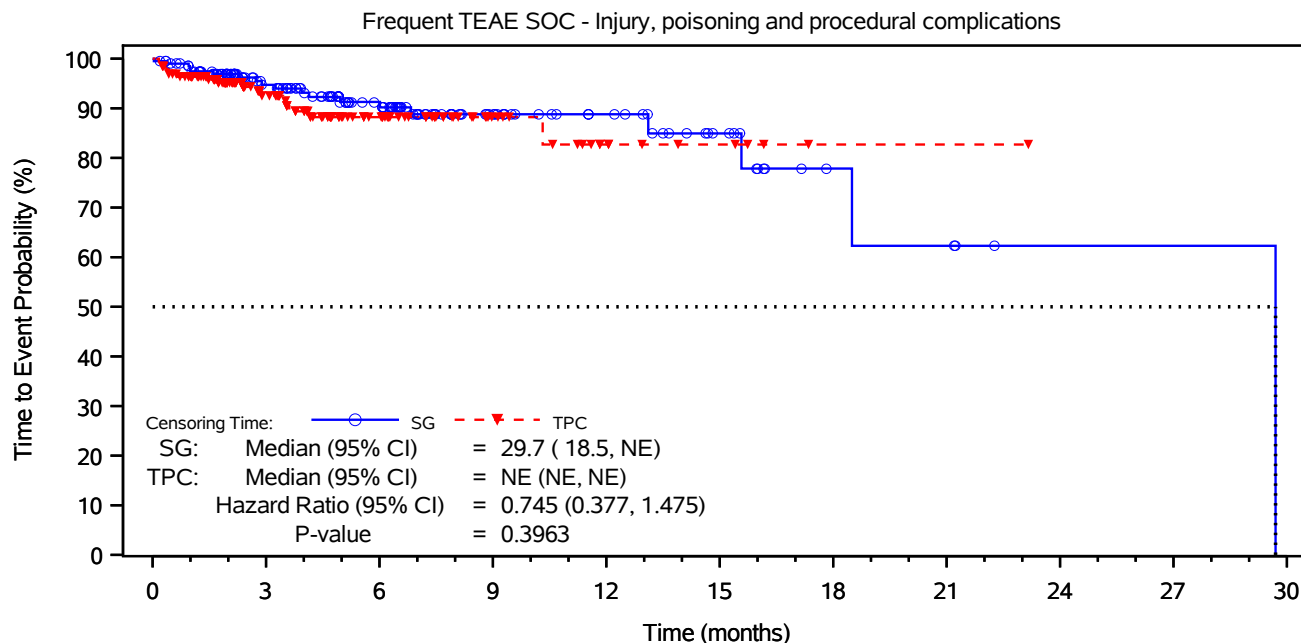
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	126 (9)	83 (13)	41 (15)	27 (15)	15 (16)	5 (17)	4 (18)	1 (18)	1 (18)	0 (19)
TPC	194 (0)	99 (12)	49 (16)	19 (16)	9 (17)	5 (17)	1 (17)	1 (17)	0 (17)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

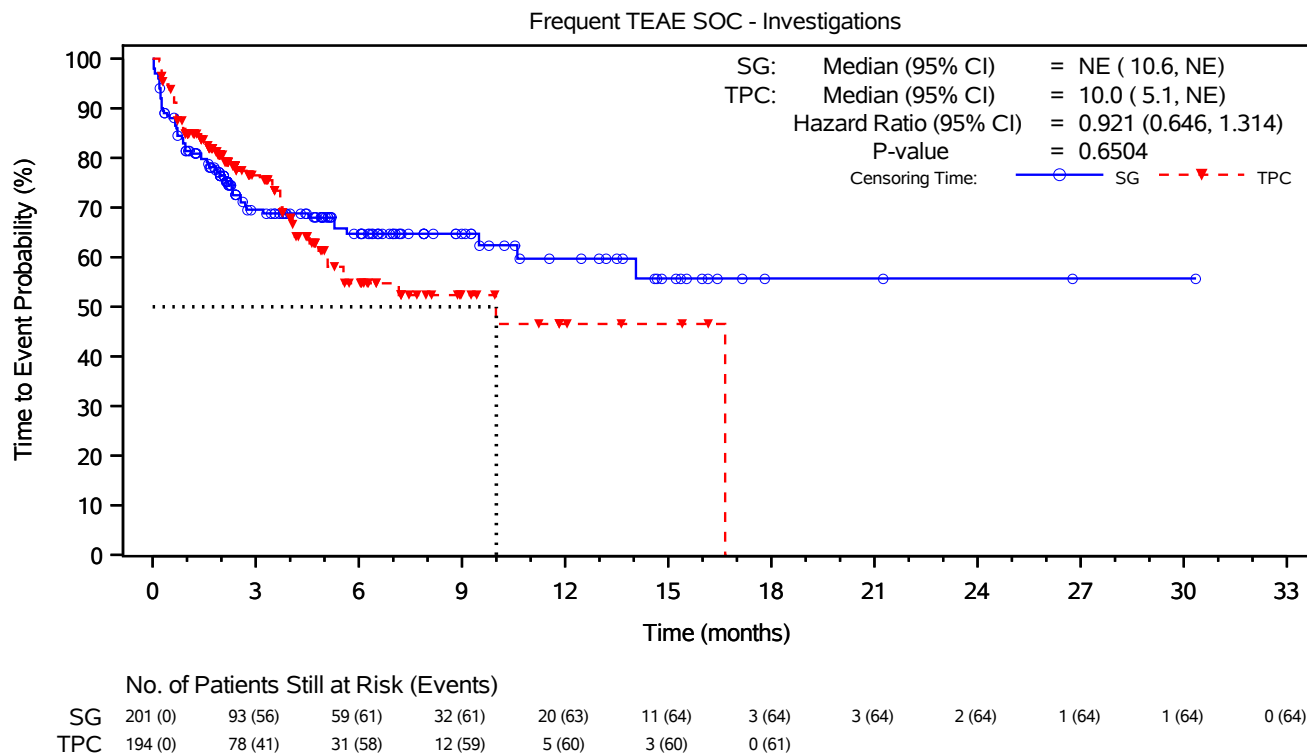
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

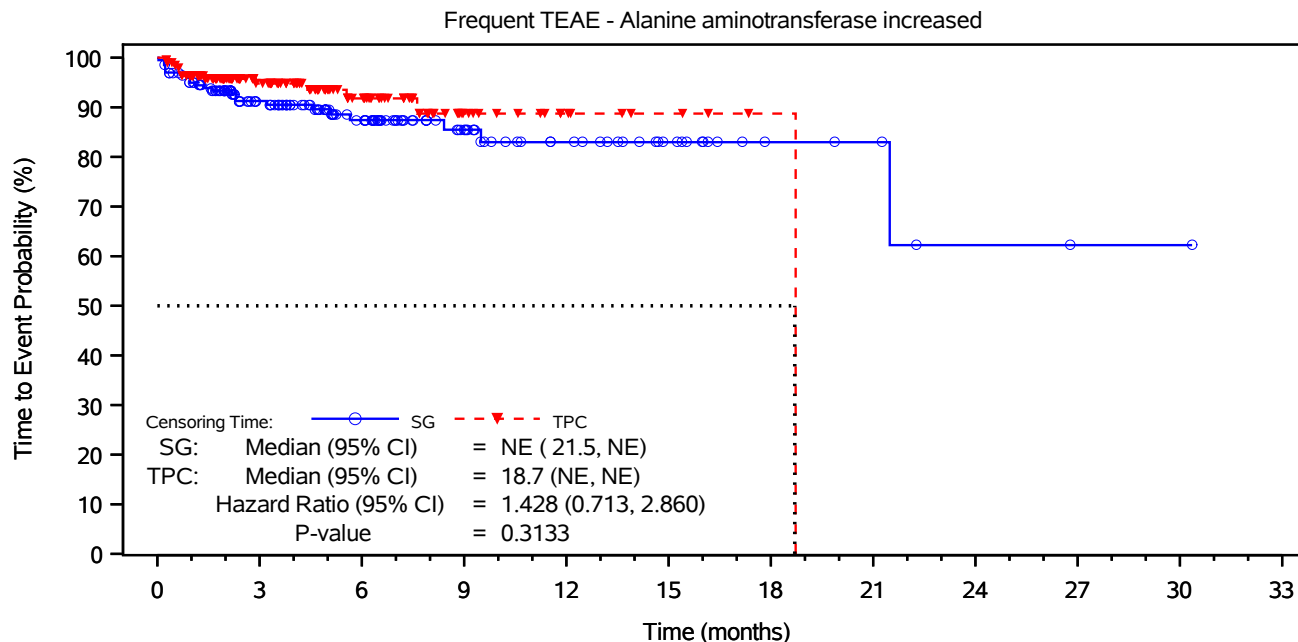
Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	120 (16)	76 (20)	41 (21)	25 (22)	15 (22)	6 (22)	5 (22)	2 (23)	1 (23)	1 (23)	0 (23)
TPC	194 (0)	100 (9)	49 (11)	17 (12)	8 (12)	4 (12)	1 (12)	0 (13)				

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

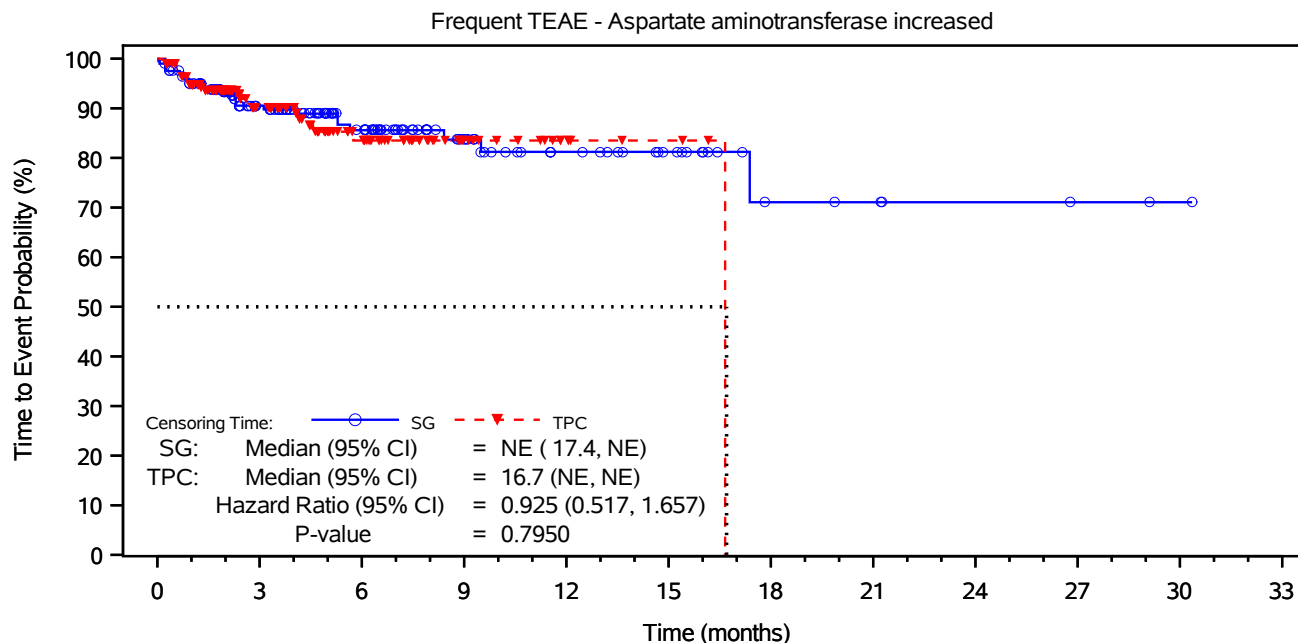
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	120 (17)	76 (22)	41 (23)	24 (24)	16 (24)	6 (25)	5 (25)	3 (25)	2 (25)	1 (25)	0 (25)
TPC	194 (0)	96 (16)	47 (21)	17 (21)	7 (21)	3 (21)	0 (22)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

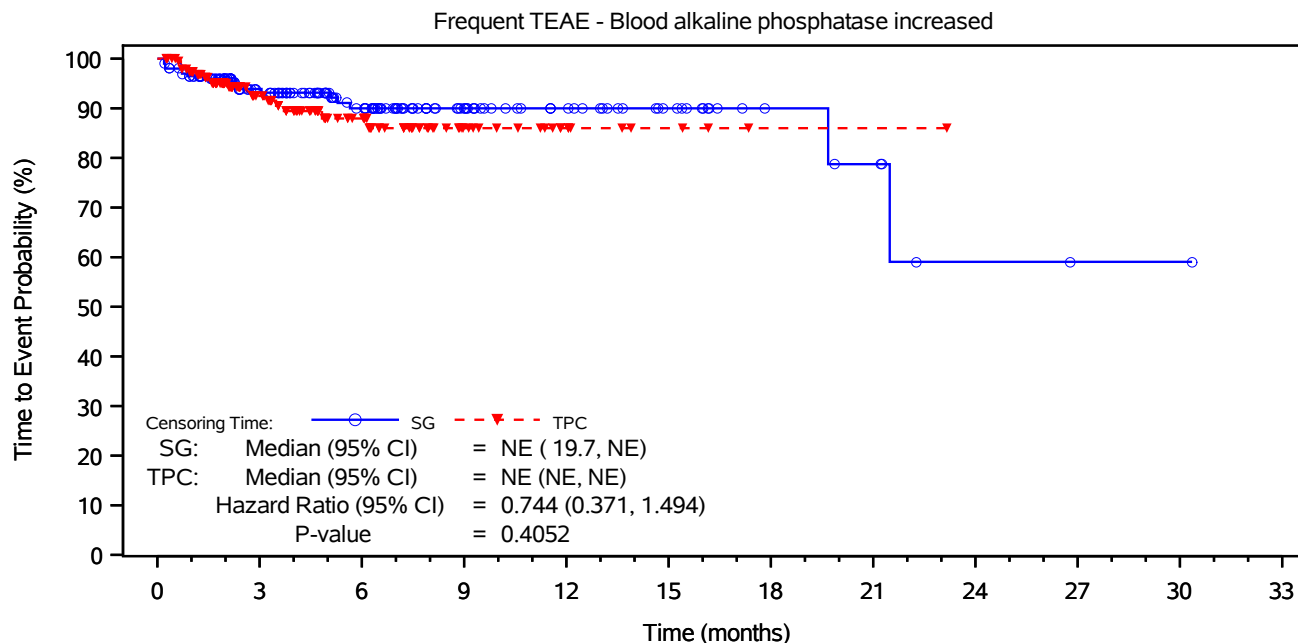
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	126 (11)	82 (15)	45 (15)	29 (15)	18 (15)	8 (15)	6 (16)	2 (17)	1 (17)	1 (17)	0 (17)
TPC	194 (0)	98 (12)	50 (16)	19 (17)	9 (17)	4 (17)	1 (17)	1 (17)	0 (17)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

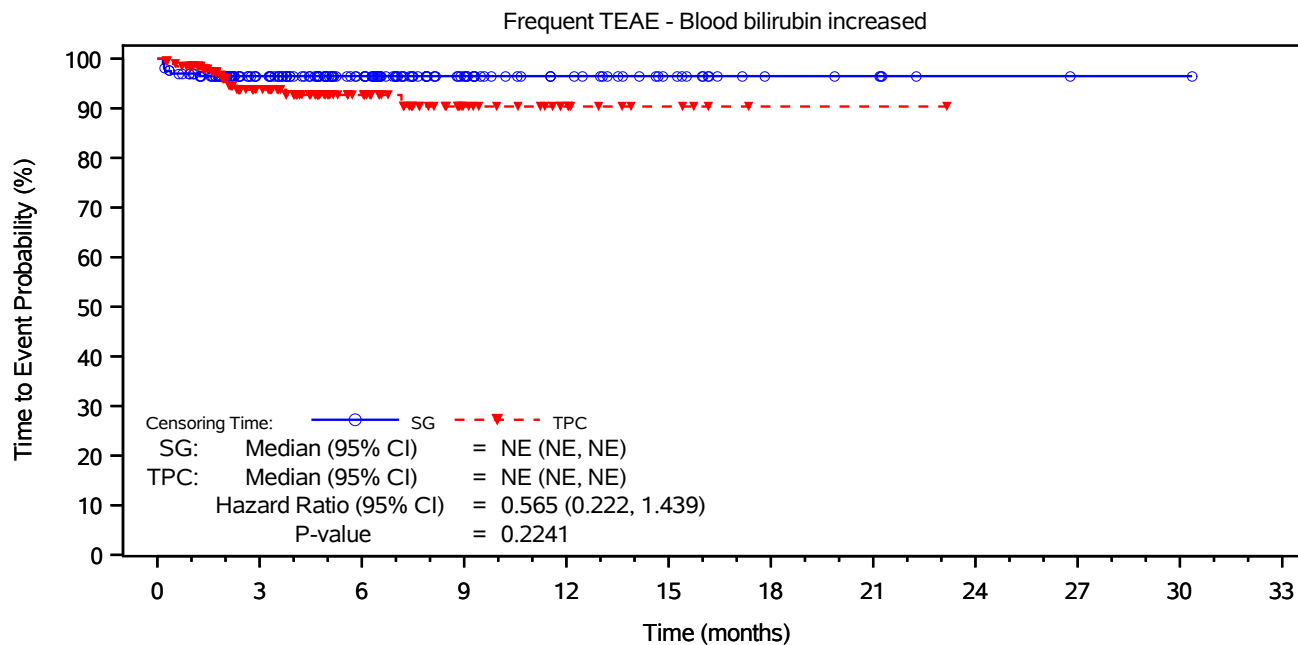
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	130 (7)	86 (7)	45 (7)	28 (7)	17 (7)	7 (7)	6 (7)	2 (7)	1 (7)	1 (7)	0 (7)
TPC	194 (0)	100 (10)	52 (11)	21 (12)	11 (12)	5 (12)	1 (12)	1 (12)	0 (12)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

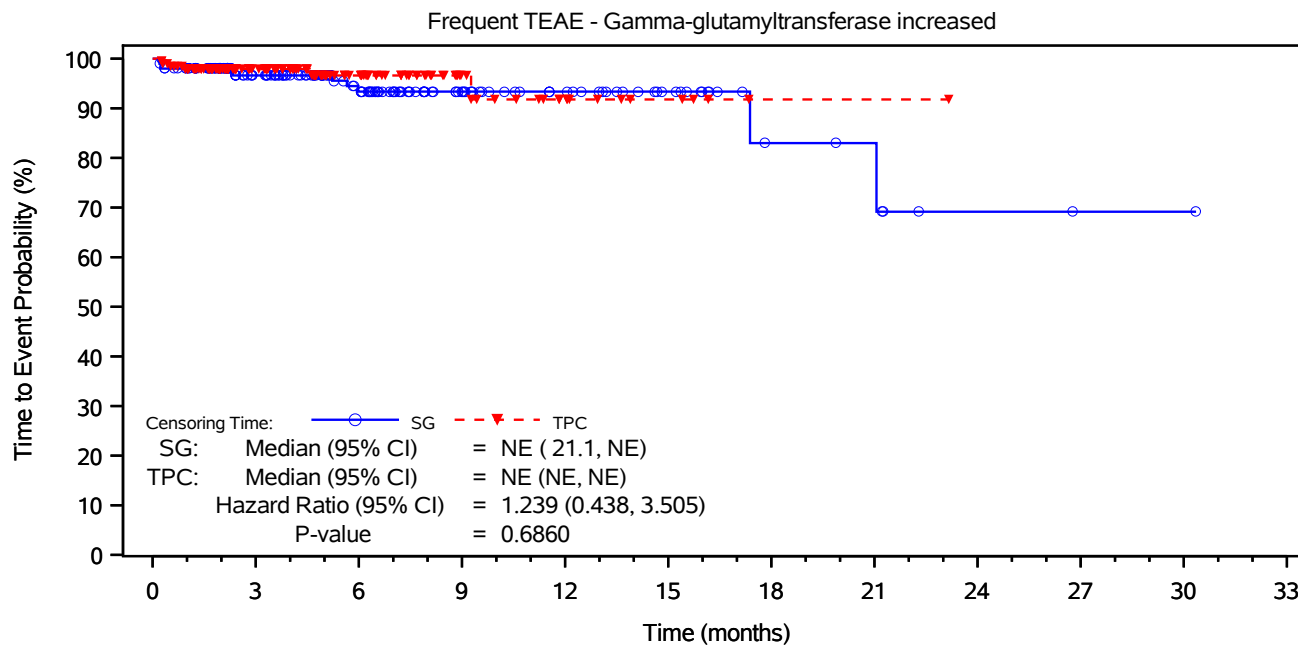
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	
SG	201 (0)	130 (6)	84 (9)	46 (9)	30 (9)	18 (9)	7 (10)	6 (10)	2 (11)	1 (11)	1 (11)	0 (11)
TPC	194 (0)	103 (4)	53 (5)	21 (5)	11 (6)	5 (6)	1 (6)	1 (6)	0 (6)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

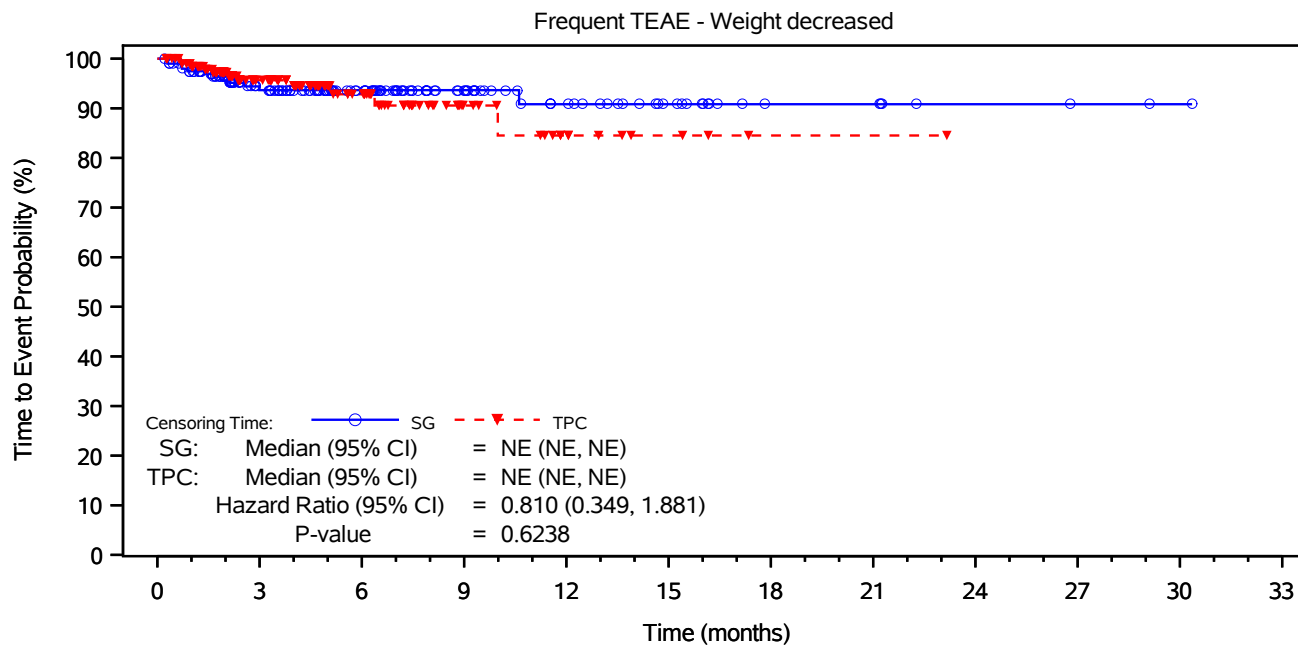
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	125 (11)	82 (11)	46 (11)	28 (12)	17 (12)	7 (12)	7 (12)	3 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	99 (7)	50 (9)	18 (10)	9 (11)	4 (11)	1 (11)	1 (11)	0 (11)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

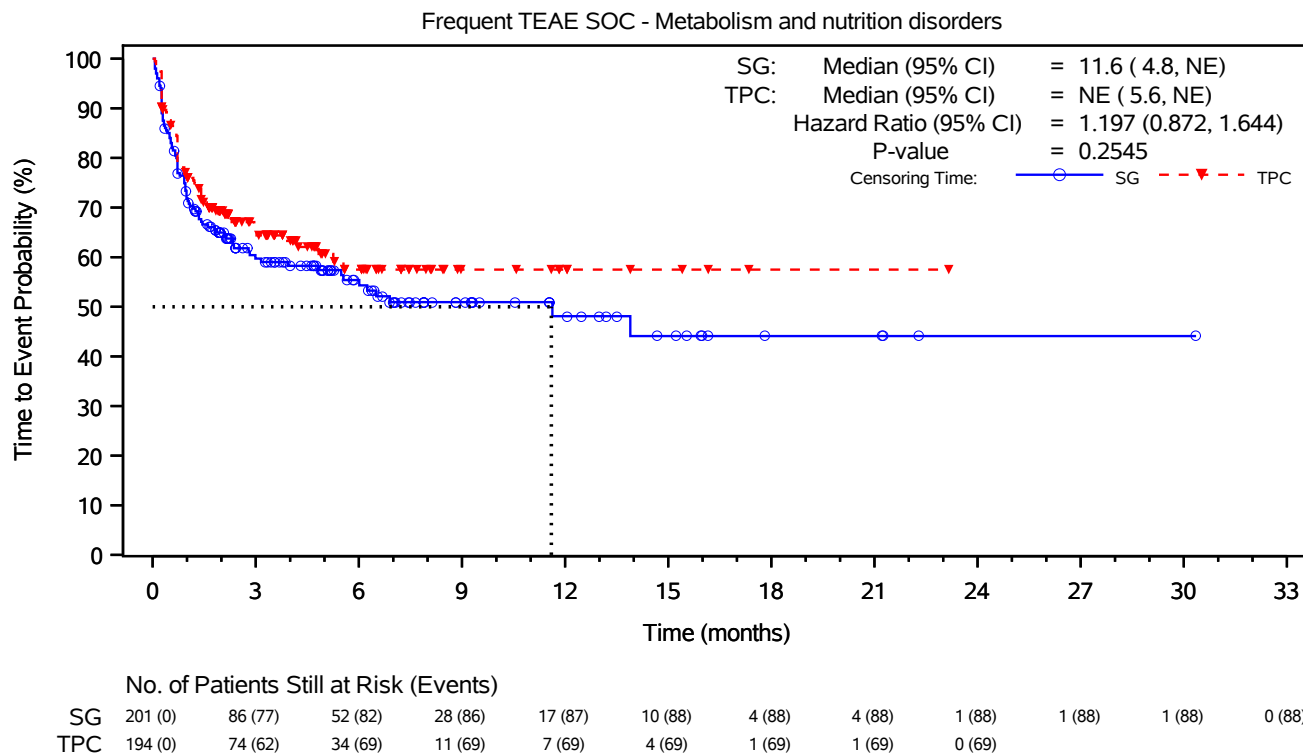
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

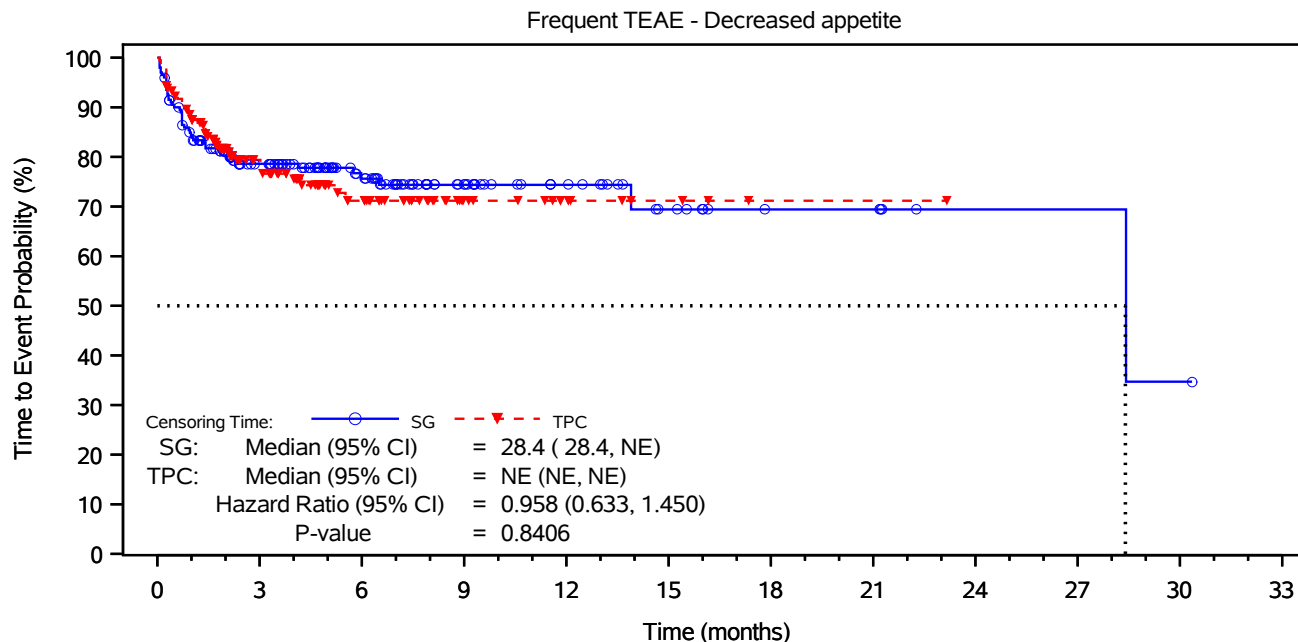
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	109 (41)	68 (44)	37 (45)	22 (45)	12 (46)	6 (46)	6 (46)	2 (46)	2 (46)	1 (47)	0 (47)
TPC	194 (0)	86 (37)	43 (44)	16 (44)	9 (44)	4 (44)	1 (44)	1 (44)	0 (44)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

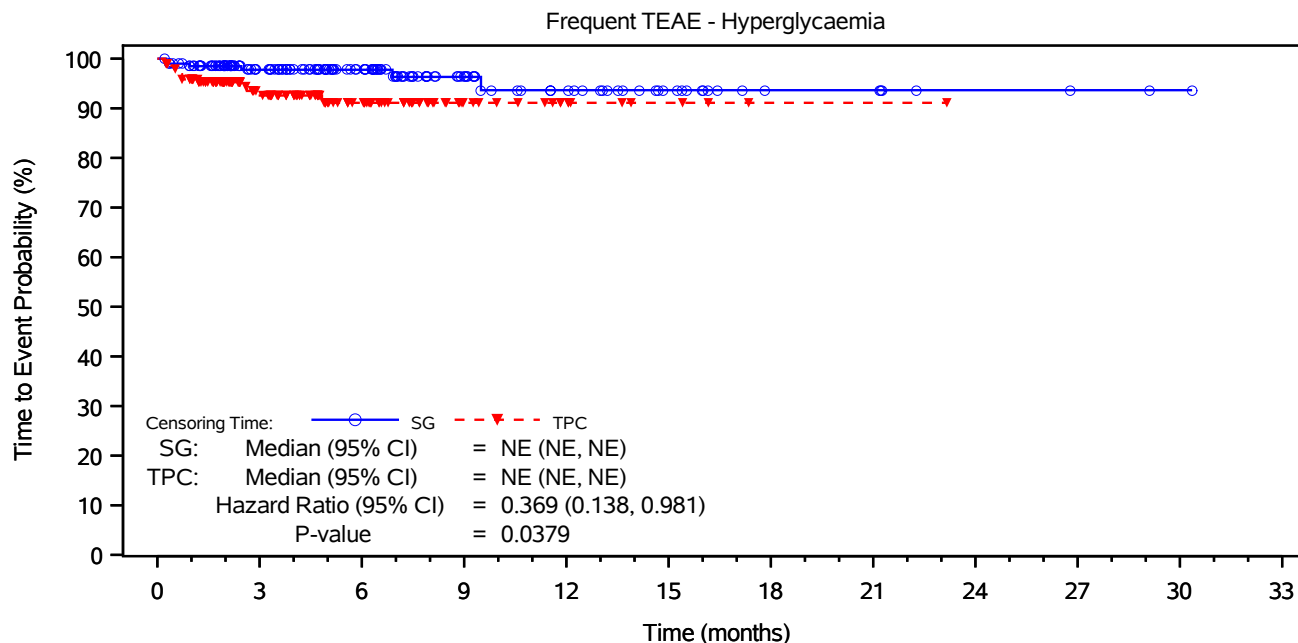
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	129 (4)	85 (4)	44 (5)	28 (6)	16 (6)	7 (6)	7 (6)	3 (6)	2 (6)	1 (6)	0 (6)
TPC	194 (0)	100 (12)	50 (13)	17 (13)	9 (13)	4 (13)	1 (13)	1 (13)	0 (13)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

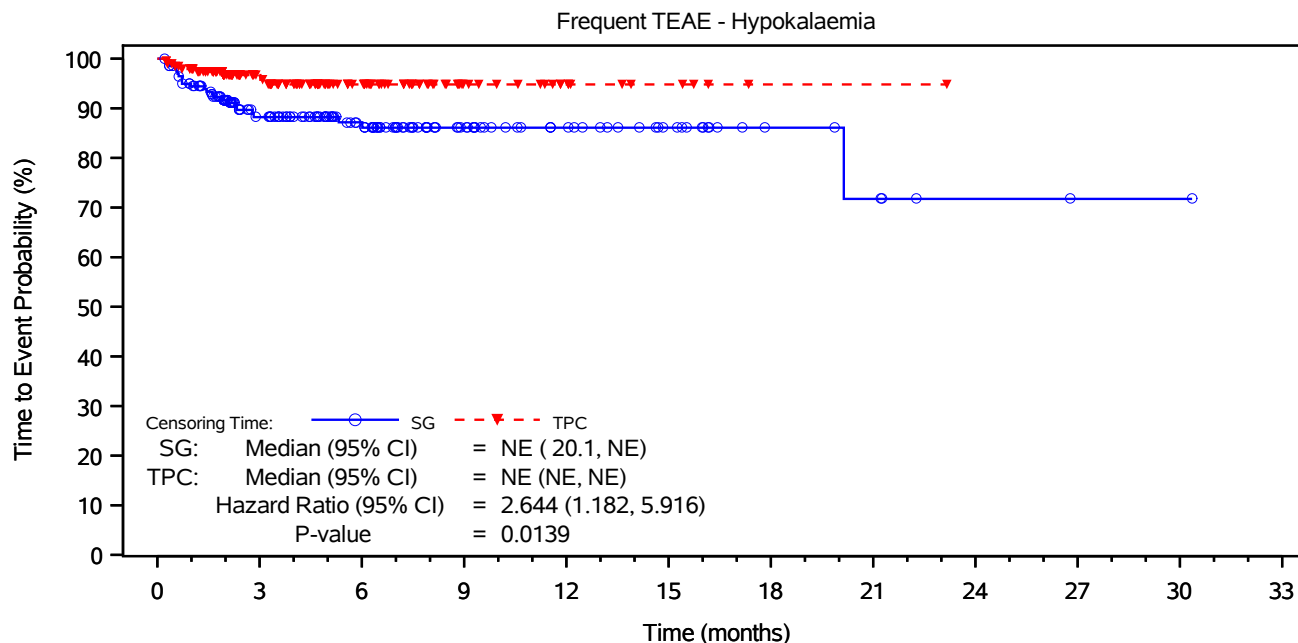
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	120 (21)	80 (22)	42 (23)	27 (23)	17 (23)	7 (23)	5 (24)	2 (24)	1 (24)	1 (24)	0 (24)
TPC	194 (0)	103 (6)	53 (8)	19 (8)	10 (8)	5 (8)	1 (8)	1 (8)	0 (8)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

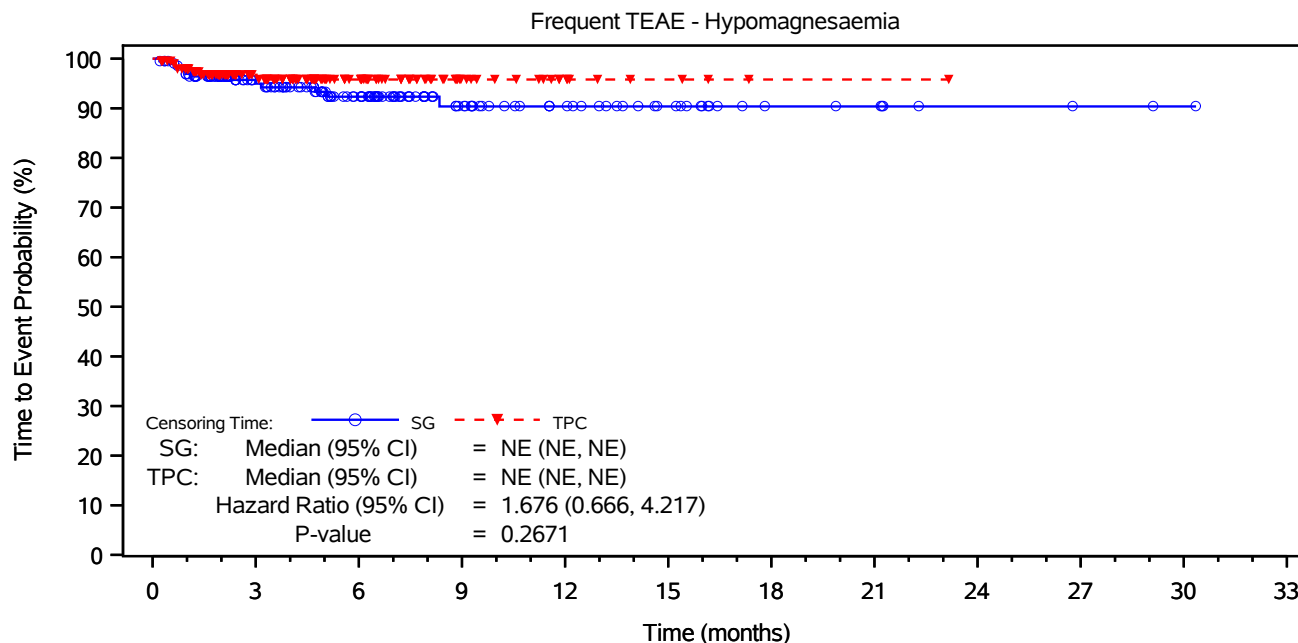
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	126 (9)	84 (12)	43 (13)	28 (13)	18 (13)	8 (13)	7 (13)	3 (13)	2 (13)	1 (13)	0 (13)
TPC	194 (0)	102 (6)	52 (7)	19 (7)	9 (7)	4 (7)	1 (7)	1 (7)	0 (7)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

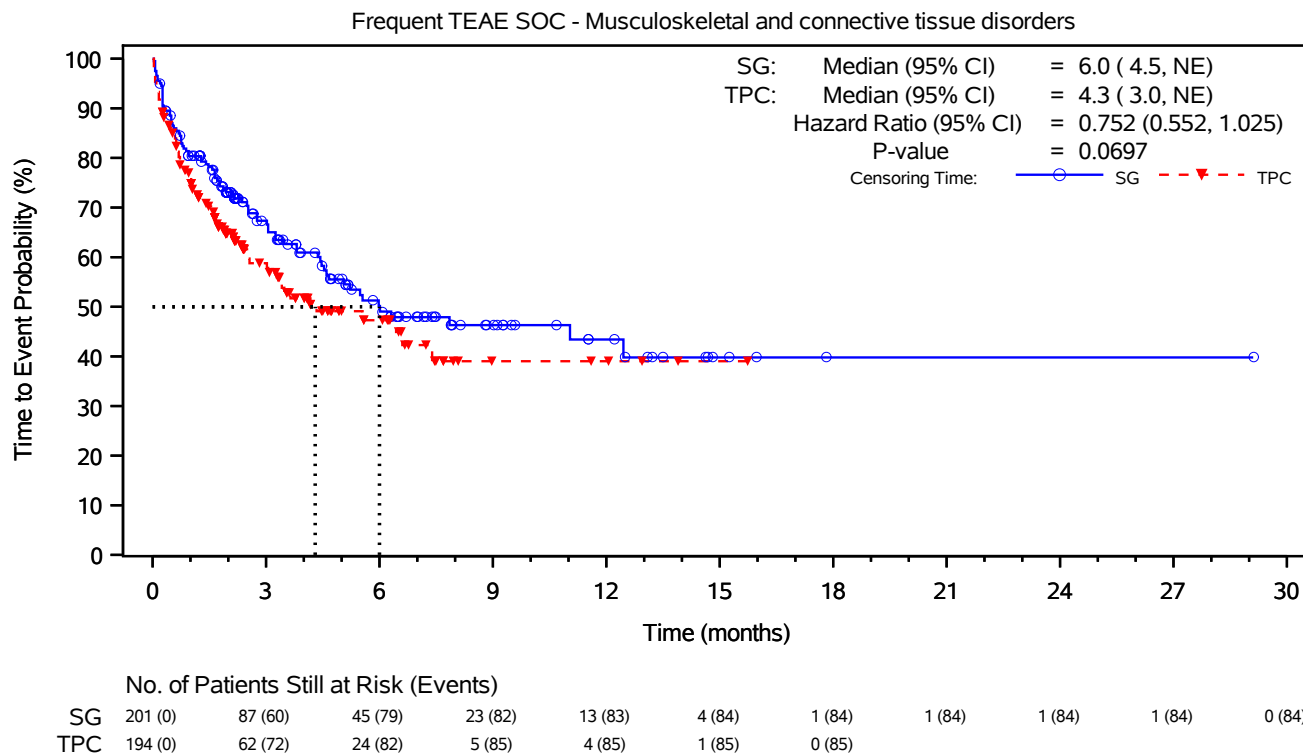
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

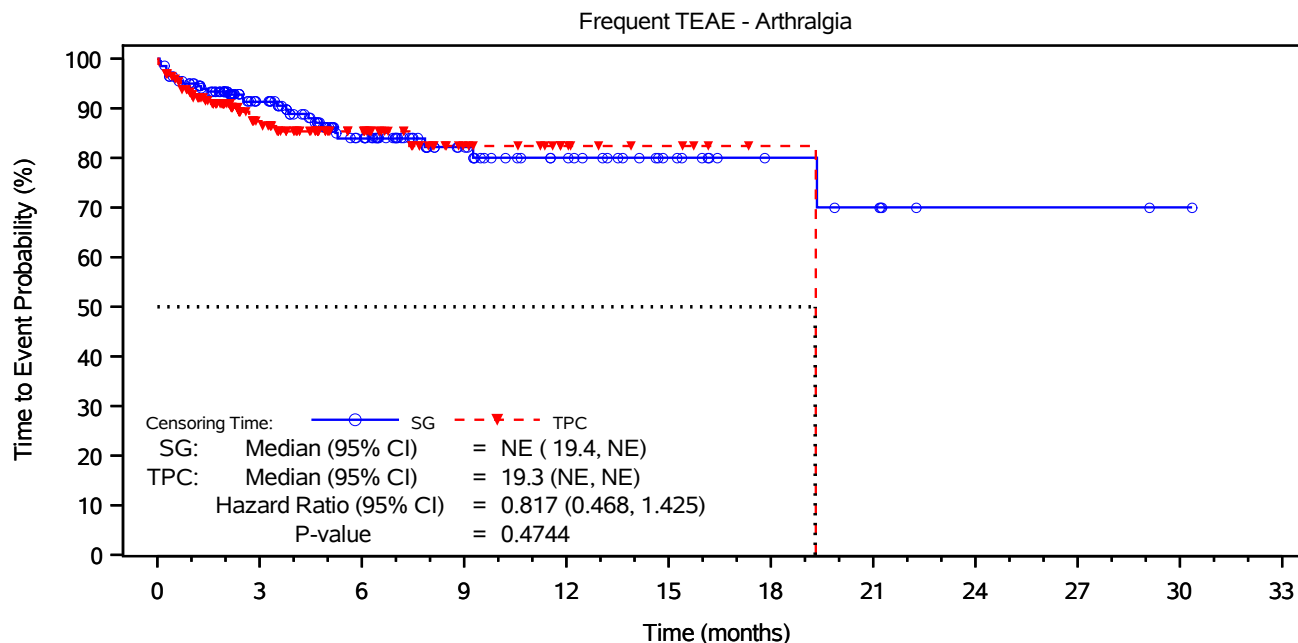
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	121 (16)	72 (24)	40 (25)	26 (26)	15 (26)	8 (26)	6 (27)	2 (27)	2 (27)	1 (27)	0 (27)
TPC	194 (0)	88 (21)	45 (23)	17 (24)	9 (24)	5 (24)	1 (24)	0 (25)				

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

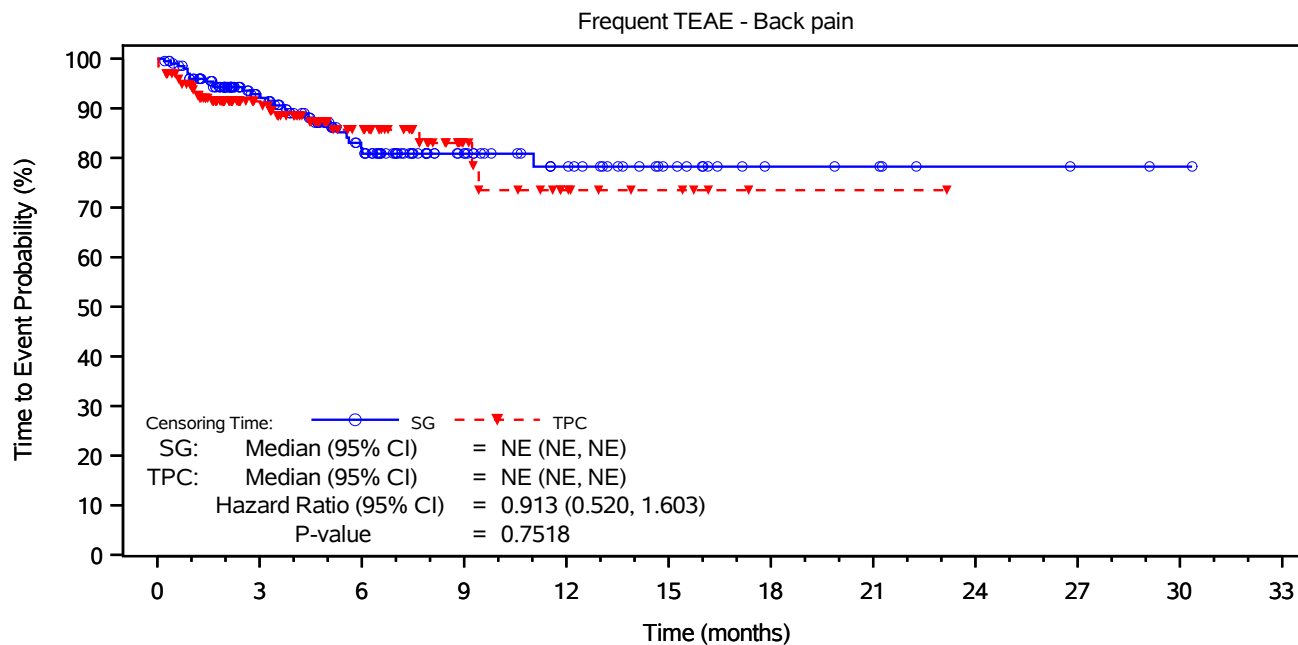
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	124 (13)	75 (25)	41 (26)	27 (27)	15 (27)	7 (27)	6 (27)	3 (27)	2 (27)	1 (27)	0 (27)
TPC	194 (0)	97 (16)	50 (21)	19 (22)	9 (24)	5 (24)	1 (24)	1 (24)	0 (24)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

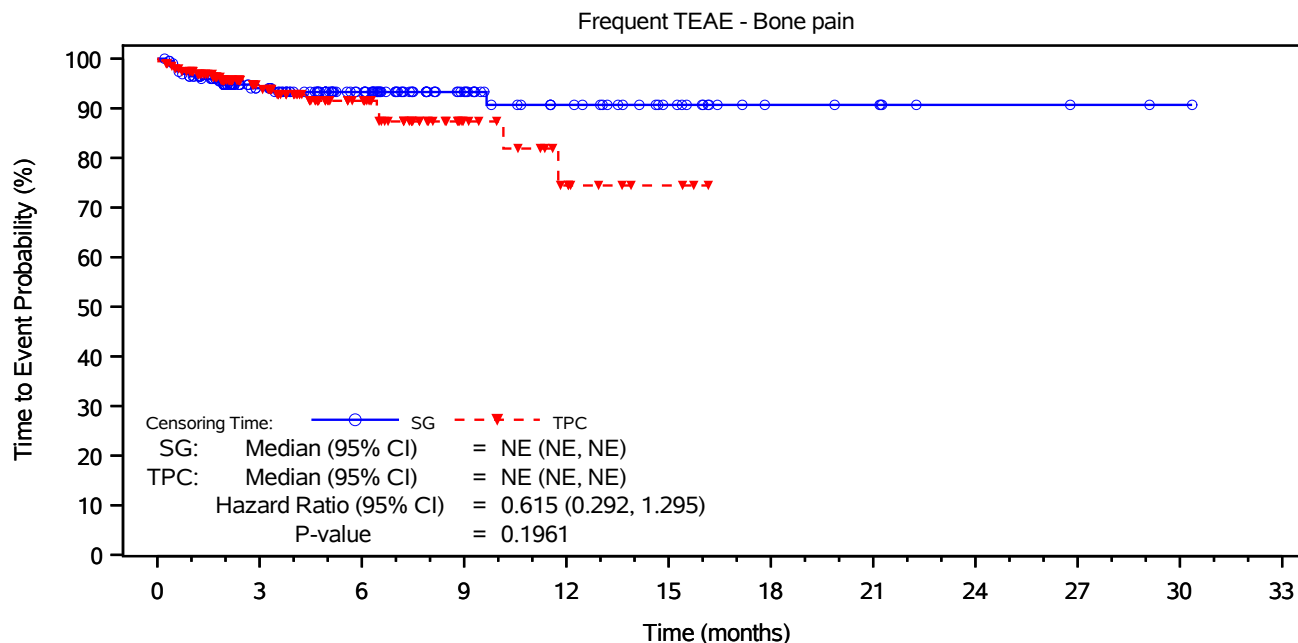
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	126 (11)	86 (12)	46 (12)	29 (13)	18 (13)	8 (13)	7 (13)	3 (13)	2 (13)	1 (13)	0 (13)
TPC	194 (0)	101 (9)	52 (12)	19 (14)	9 (16)	3 (16)	0 (16)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

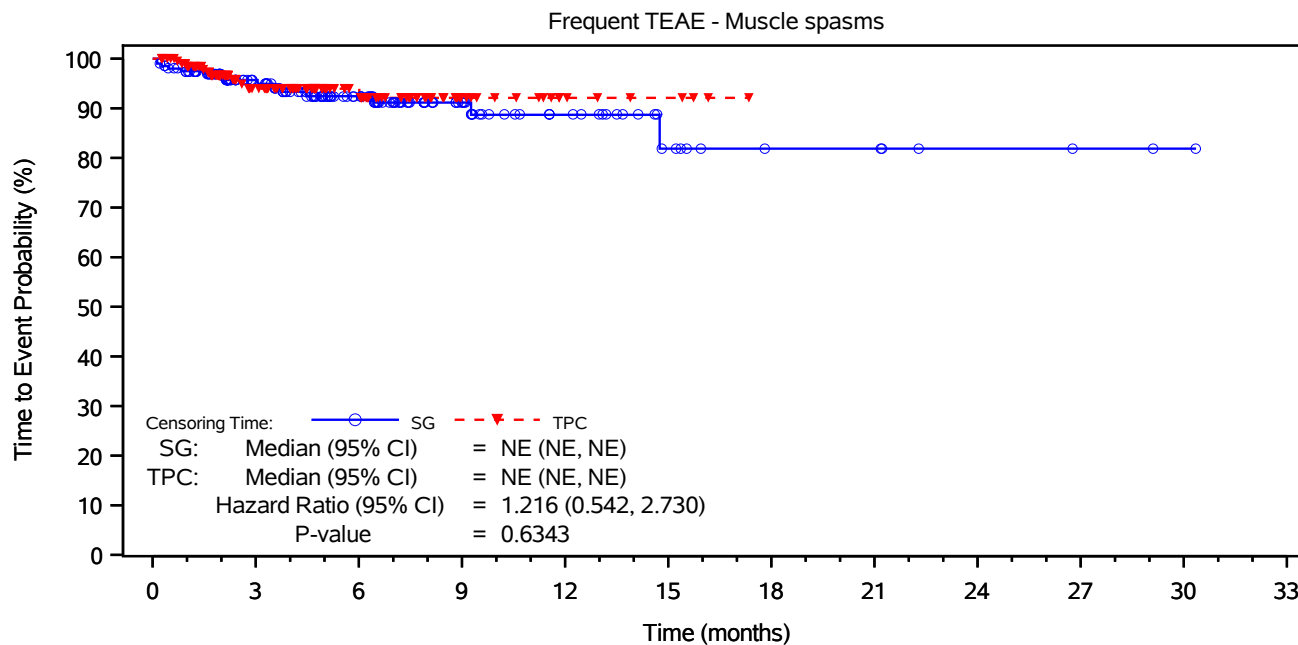
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	126 (8)	80 (12)	41 (13)	23 (14)	11 (15)	6 (15)	6 (15)	3 (15)	2 (15)	1 (15)	0 (15)
TPC	194 (0)	99 (9)	51 (9)	17 (10)	7 (10)	4 (10)	0 (10)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

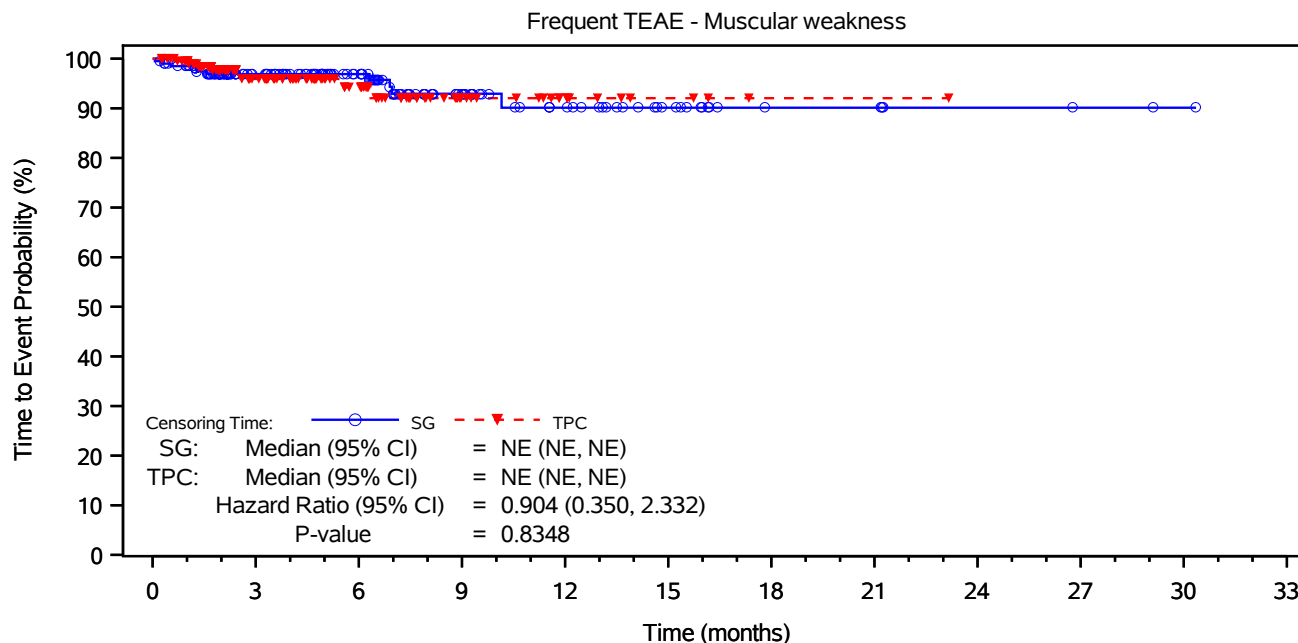
Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	131 (6)	88 (6)	44 (9)	27 (10)	15 (10)	6 (10)	6 (10)	3 (10)	2 (10)	1 (10)	0 (10)
TPC	194 (0)	101 (6)	52 (7)	19 (8)	10 (8)	4 (8)	1 (8)	1 (8)	0 (8)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

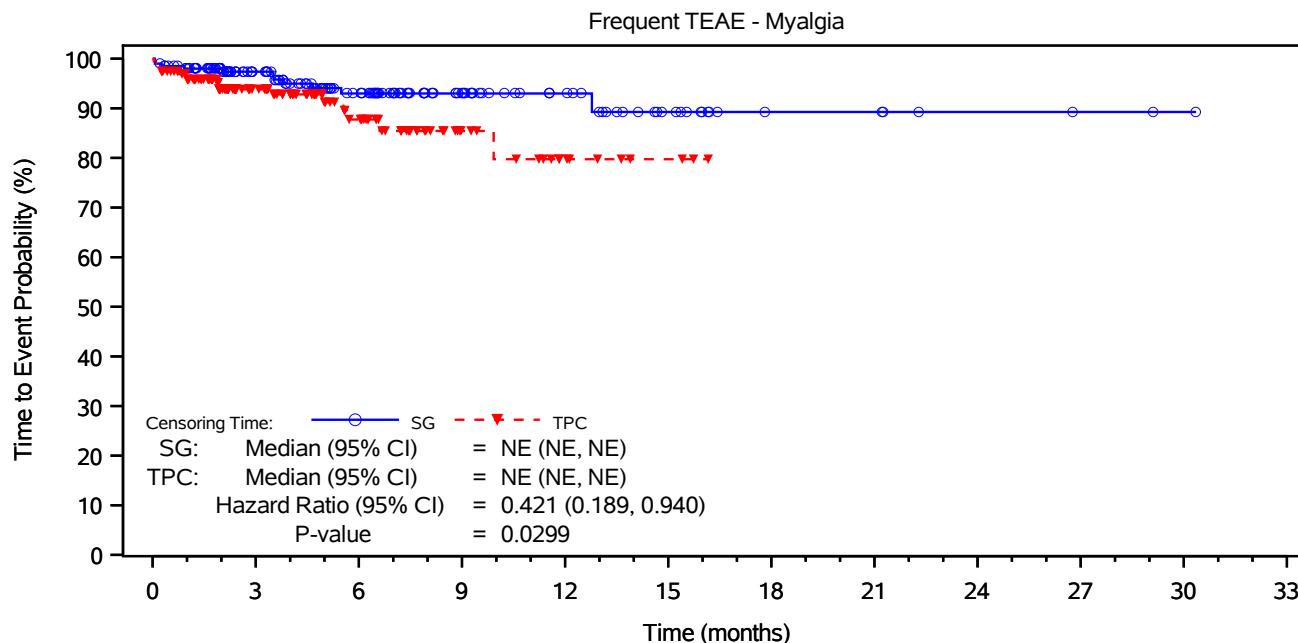
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	129 (5)	83 (10)	45 (10)	28 (10)	15 (11)	6 (11)	6 (11)	3 (11)	2 (11)	1 (11)	0 (11)
TPC	194 (0)	99 (11)	48 (15)	17 (16)	8 (17)	3 (17)	0 (17)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

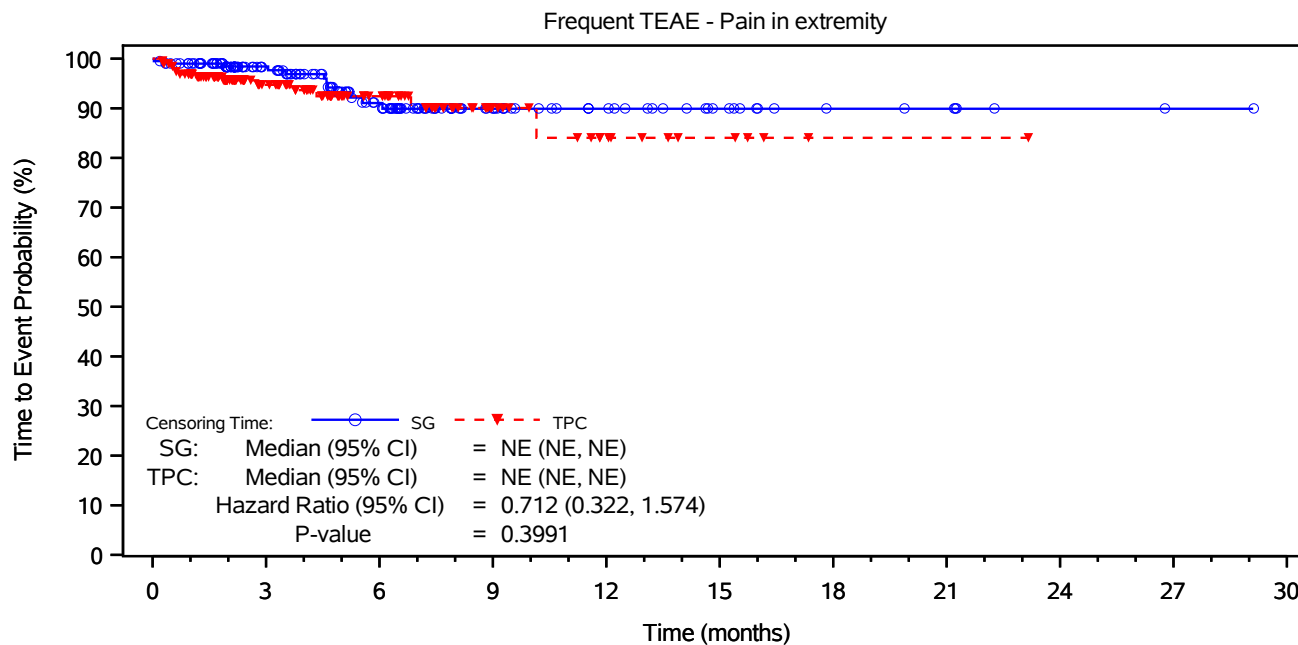
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file: g-tae-frq-exg.pdf  
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	130 (3)	79 (11)	39 (12)	24 (12)	14 (12)	7 (12)	6 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	101 (9)	51 (11)	19 (12)	10 (13)	5 (13)	1 (13)	1 (13)	0 (13)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

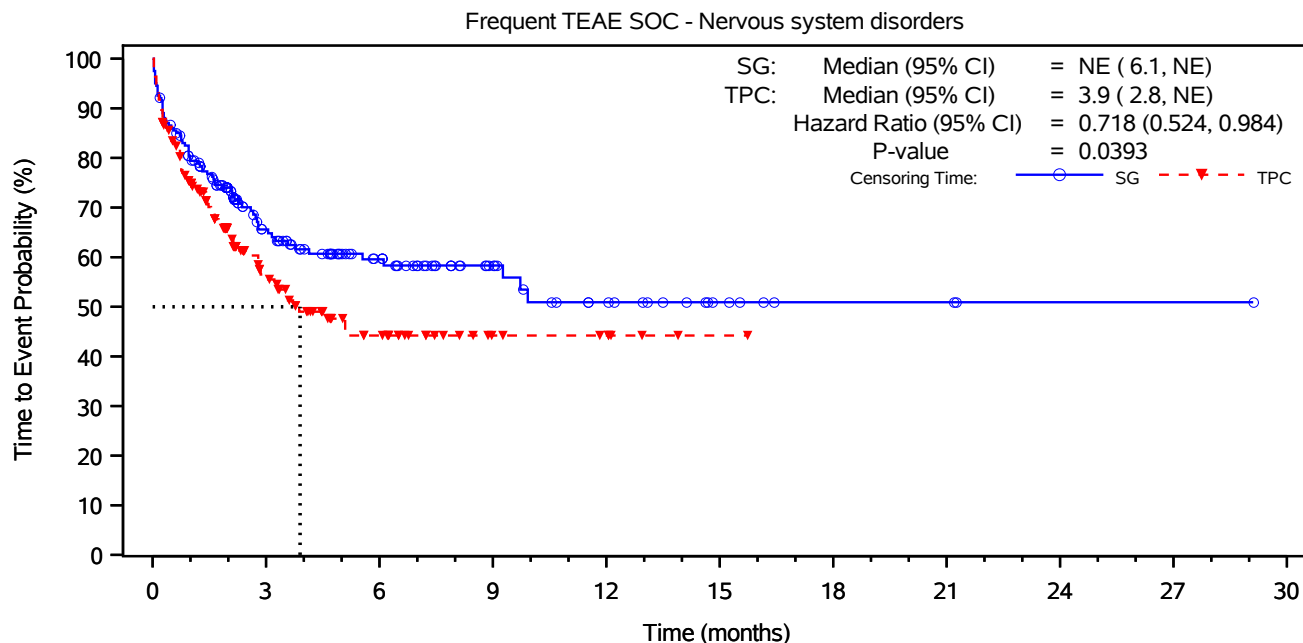
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	85 (63)	51 (70)	27 (71)	16 (74)	7 (74)	3 (74)	3 (74)	1 (74)	1 (74)	0 (74)
TPC	194 (0)	57 (74)	24 (84)	8 (84)	6 (84)	1 (84)	0 (84)				

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

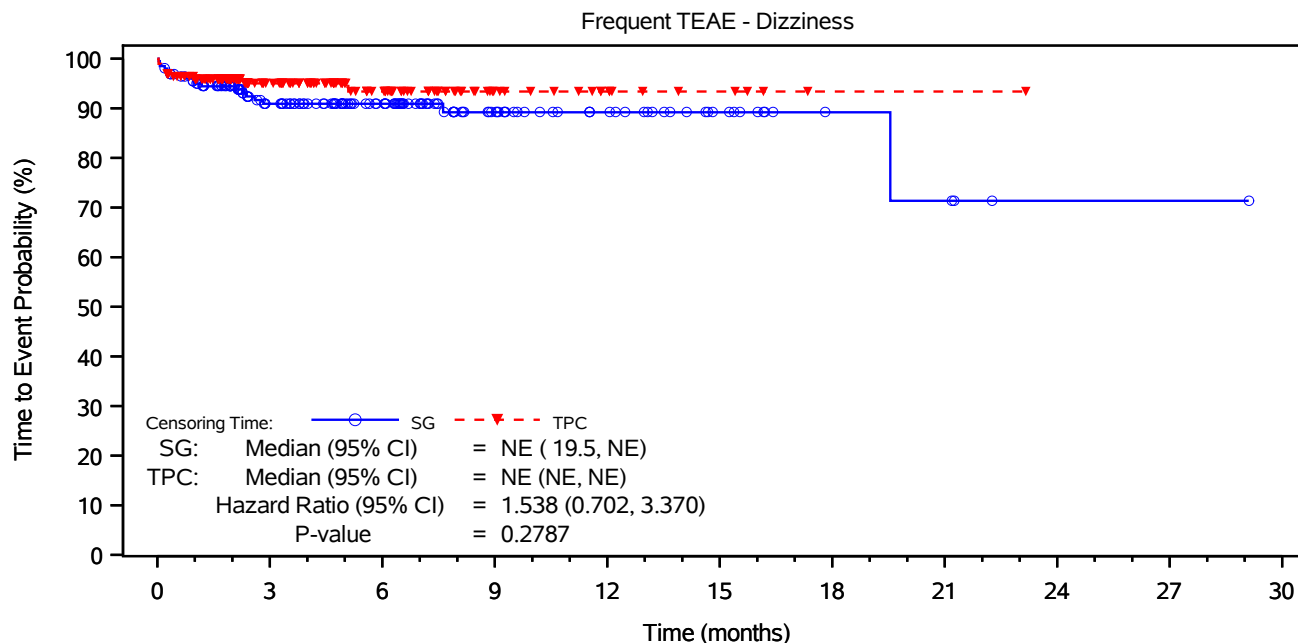
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	119 (16)	81 (16)	40 (17)	25 (17)	13 (17)	5 (17)	4 (18)	1 (18)	1 (18)	0 (18)
TPC	194 (0)	98 (9)	51 (10)	18 (10)	10 (10)	5 (10)	1 (10)	1 (10)	0 (10)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

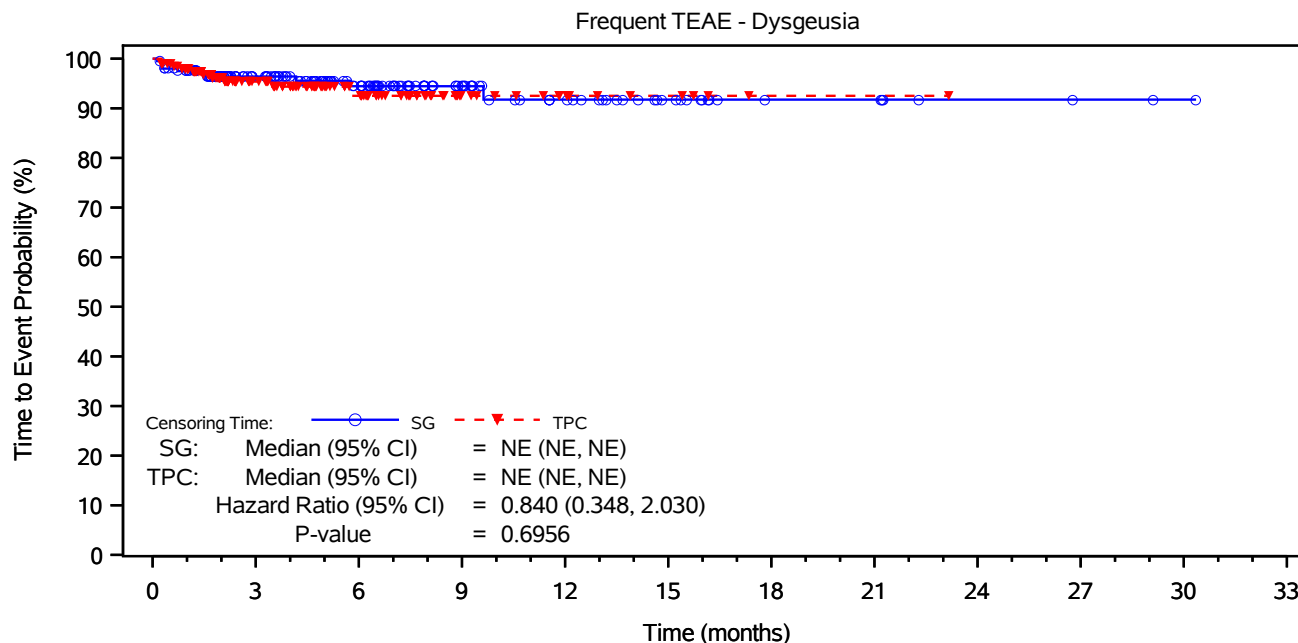
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	126 (7)	84 (9)	45 (9)	28 (10)	16 (10)	7 (10)	7 (10)	3 (10)	2 (10)	1 (10)	0 (10)
TPC	194 (0)	100 (8)	50 (10)	17 (10)	10 (10)	5 (10)	1 (10)	1 (10)	0 (10)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

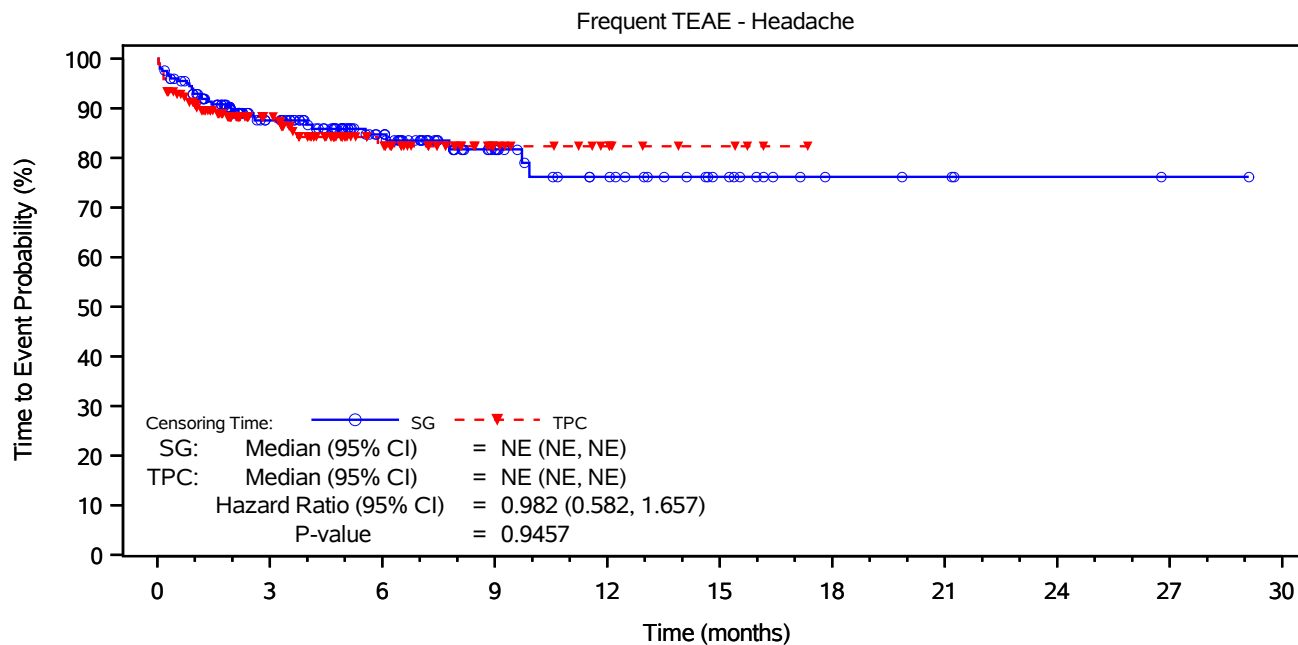
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	116 (23)	72 (26)	36 (28)	23 (30)	13 (30)	5 (30)	4 (30)	2 (30)	1 (30)	0 (30)
TPC	194 (0)	94 (22)	44 (27)	16 (27)	9 (27)	4 (27)	0 (27)				

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

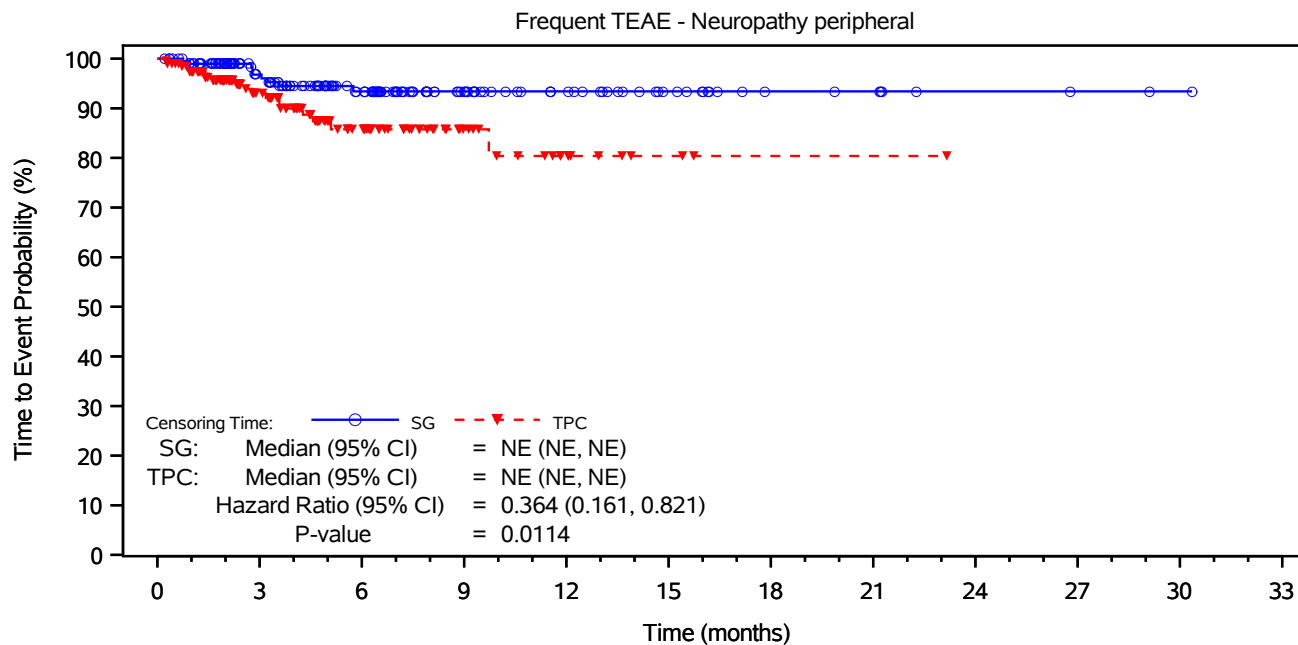
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	129 (5)	85 (9)	46 (9)	29 (9)	17 (9)	8 (9)	7 (9)	3 (9)	2 (9)	1 (9)	0 (9)
TPC	194 (0)	100 (11)	47 (17)	19 (17)	9 (18)	3 (18)	1 (18)	1 (18)	0 (18)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

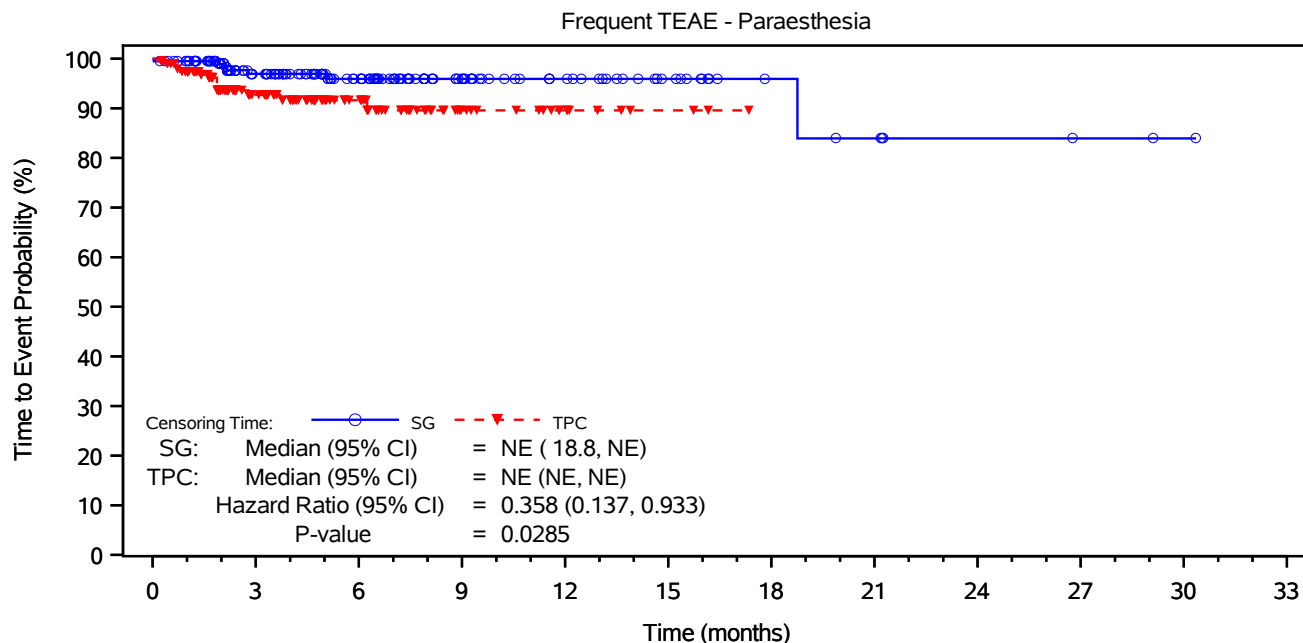
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	129 (5)	85 (6)	46 (6)	29 (6)	17 (6)	8 (6)	6 (7)	3 (7)	2 (7)	1 (7)	0 (7)
TPC	194 (0)	97 (12)	50 (13)	18 (14)	9 (14)	3 (14)	0 (14)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

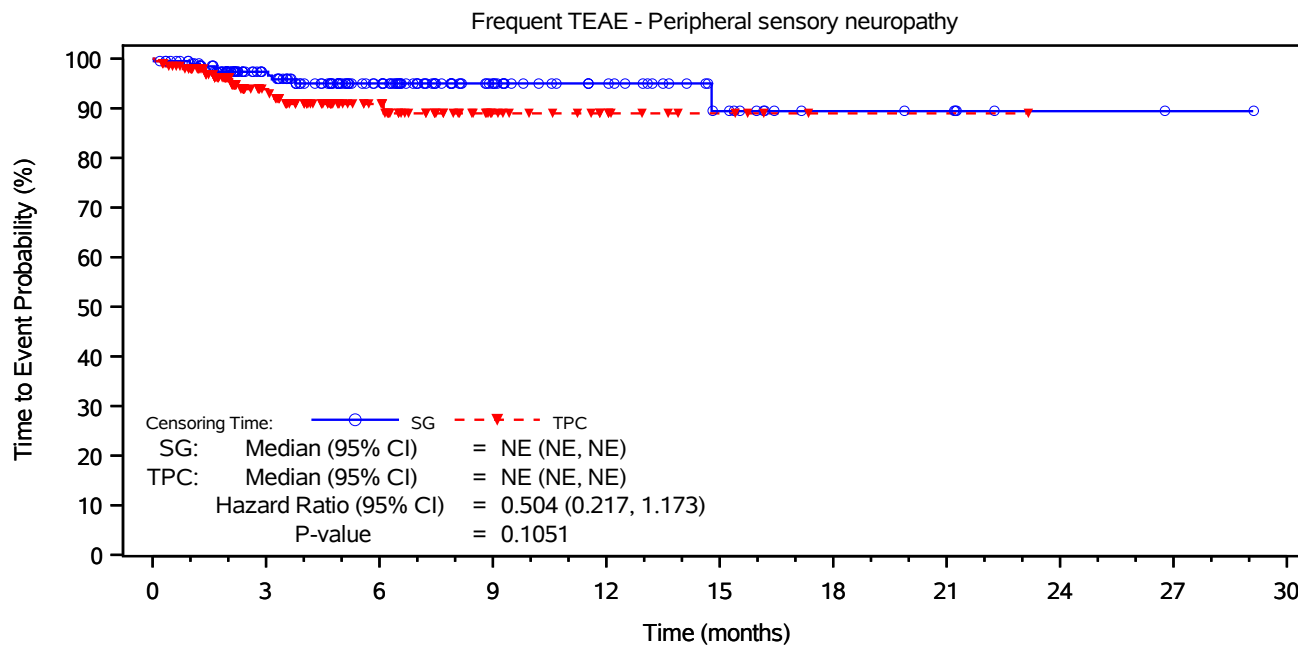
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	128 (5)	82 (8)	44 (8)	28 (8)	15 (9)	7 (9)	6 (9)	2 (9)	1 (9)	0 (9)
TPC	194 (0)	97 (10)	51 (13)	20 (14)	11 (14)	5 (14)	1 (14)	1 (14)	0 (14)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

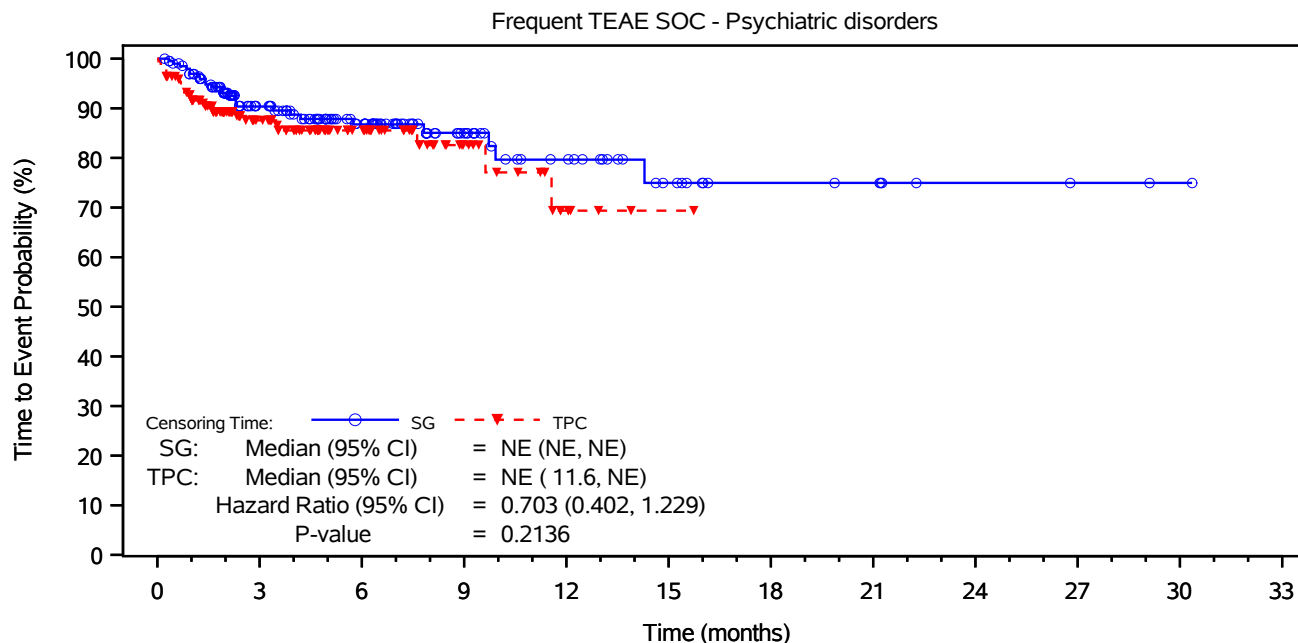
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	118 (17)	77 (21)	40 (22)	25 (24)	14 (25)	8 (25)	7 (25)	3 (25)	2 (25)	1 (25)	0 (25)
TPC	194 (0)	93 (22)	47 (24)	18 (25)	6 (27)	1 (27)	0 (27)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

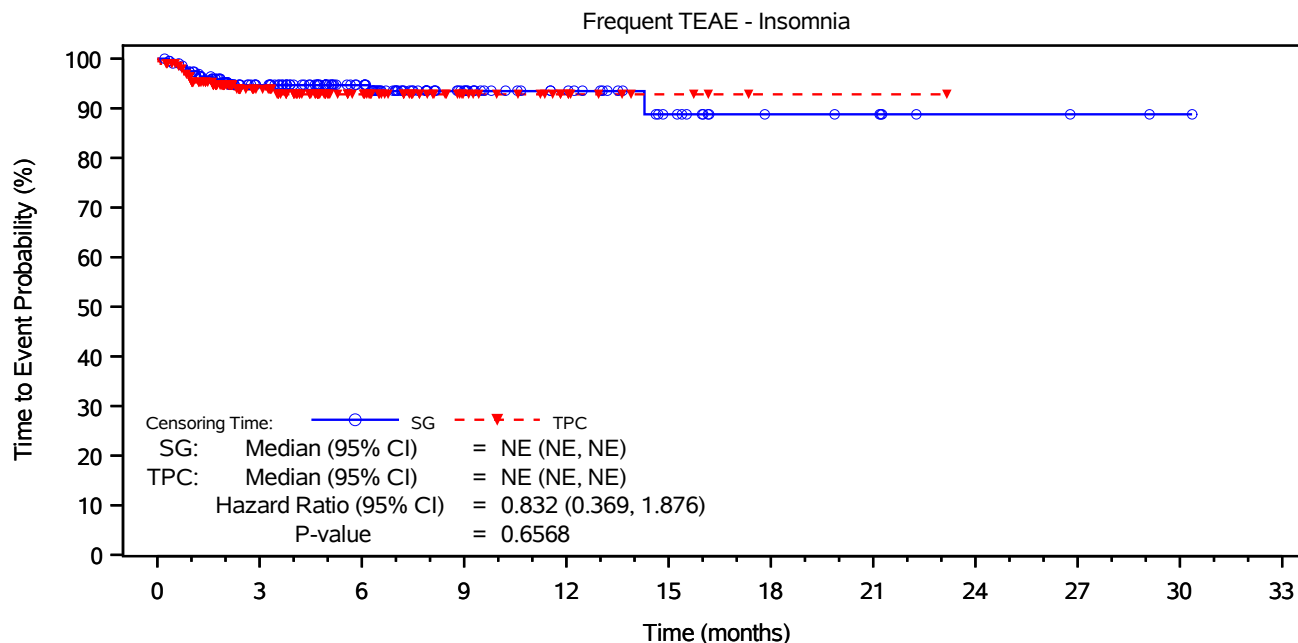
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	124 (10)	83 (10)	43 (11)	28 (11)	16 (12)	8 (12)	7 (12)	3 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	100 (11)	51 (12)	20 (12)	10 (12)	4 (12)	1 (12)	1 (12)	0 (12)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

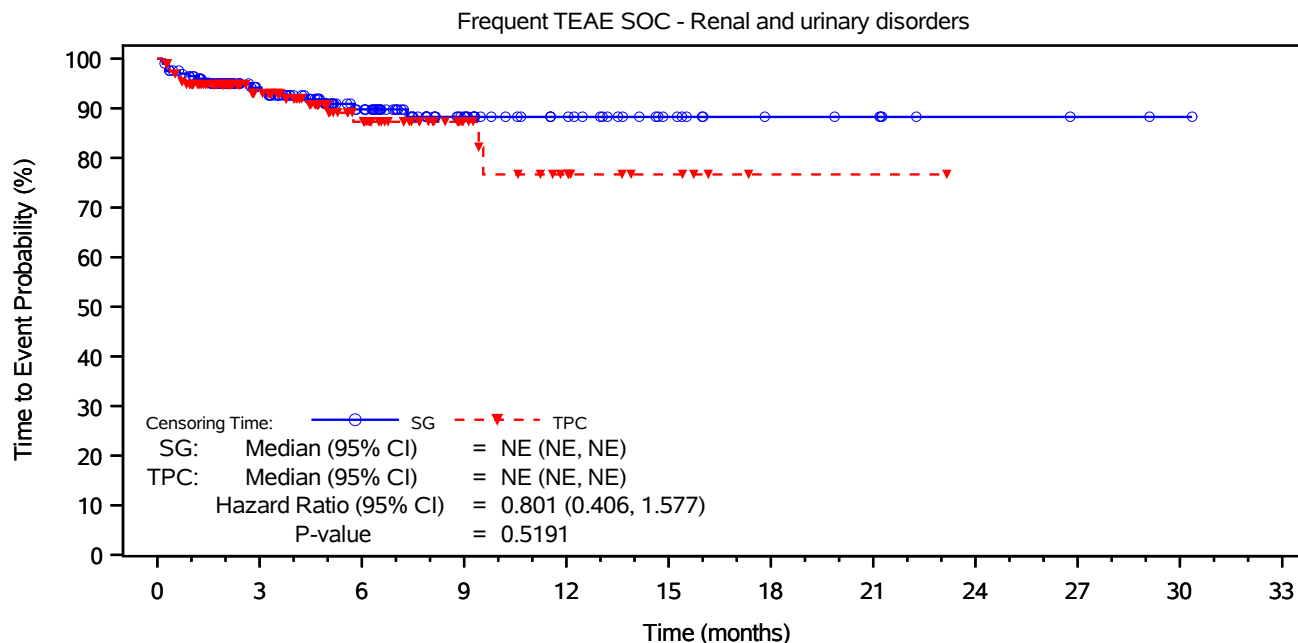
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	127 (11)	79 (16)	42 (17)	26 (17)	14 (17)	8 (17)	7 (17)	3 (17)	2 (17)	1 (17)	0 (17)
TPC	194 (0)	99 (12)	48 (16)	19 (16)	10 (18)	5 (18)	1 (18)	1 (18)	0 (18)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

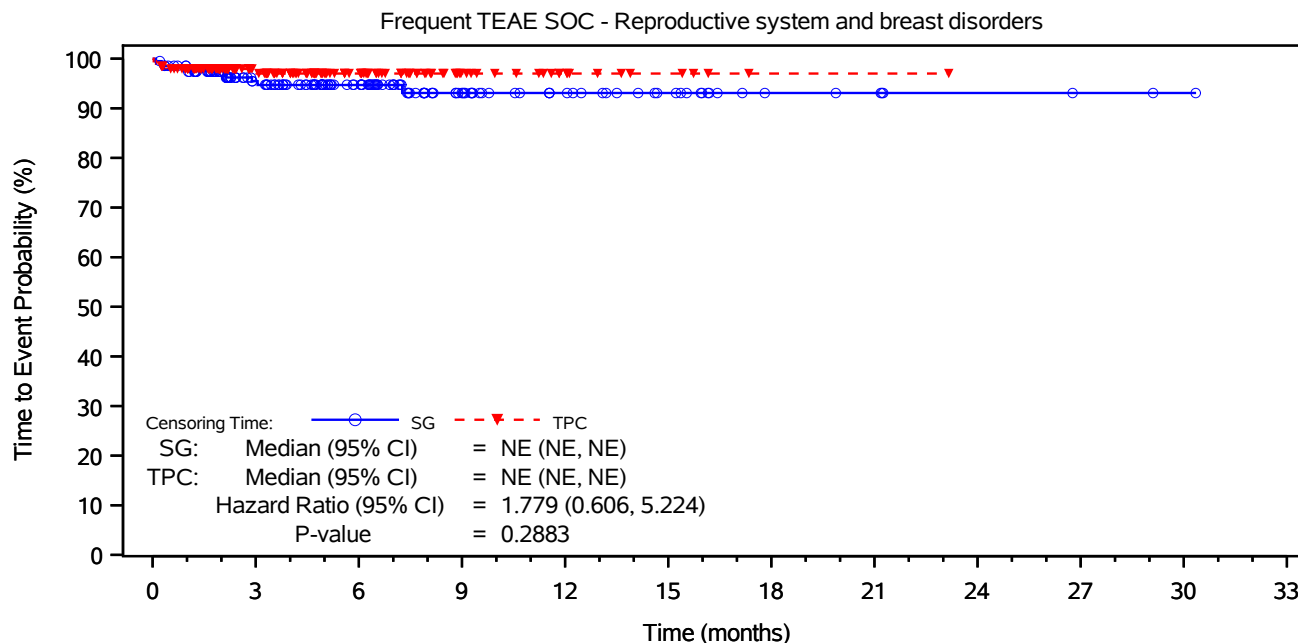
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	125 (8)	83 (9)	42 (10)	26 (10)	17 (10)	7 (10)	6 (10)	3 (10)	2 (10)	1 (10)	0 (10)
TPC	194 (0)	106 (4)	55 (5)	21 (5)	11 (5)	5 (5)	1 (5)	1 (5)	0 (5)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

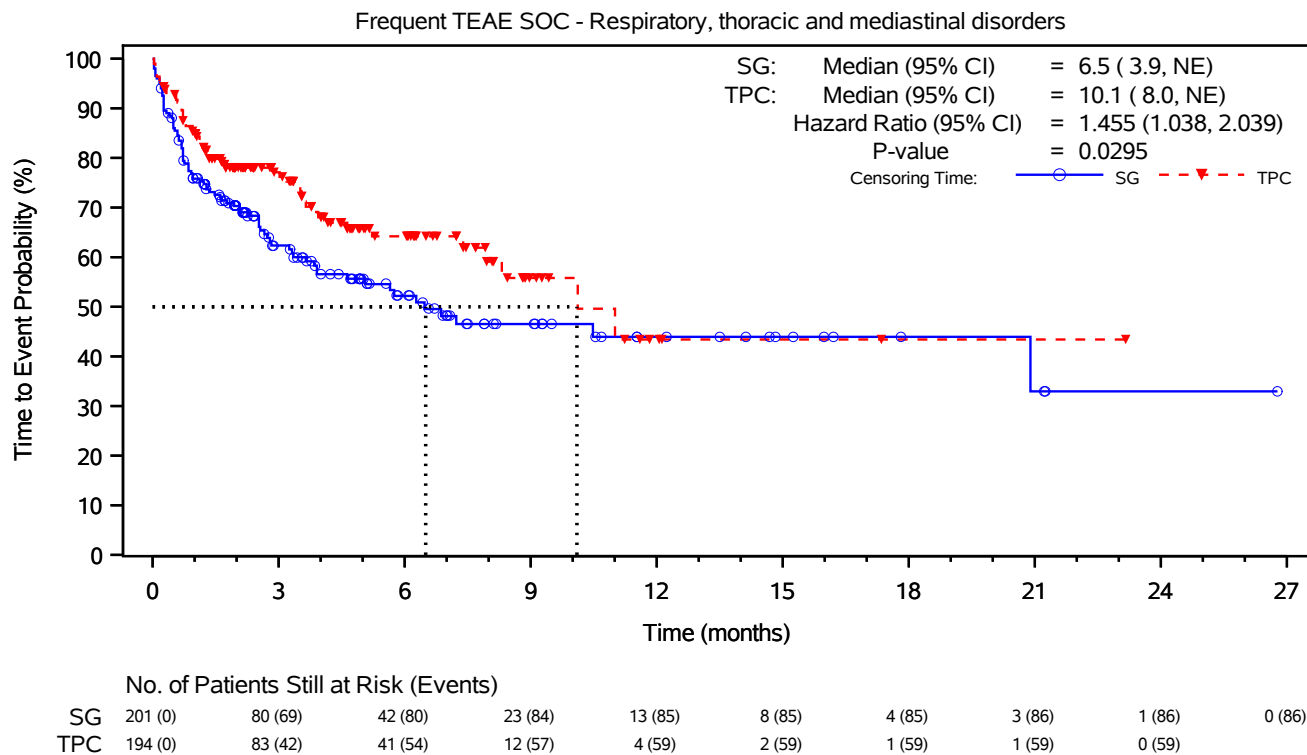
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

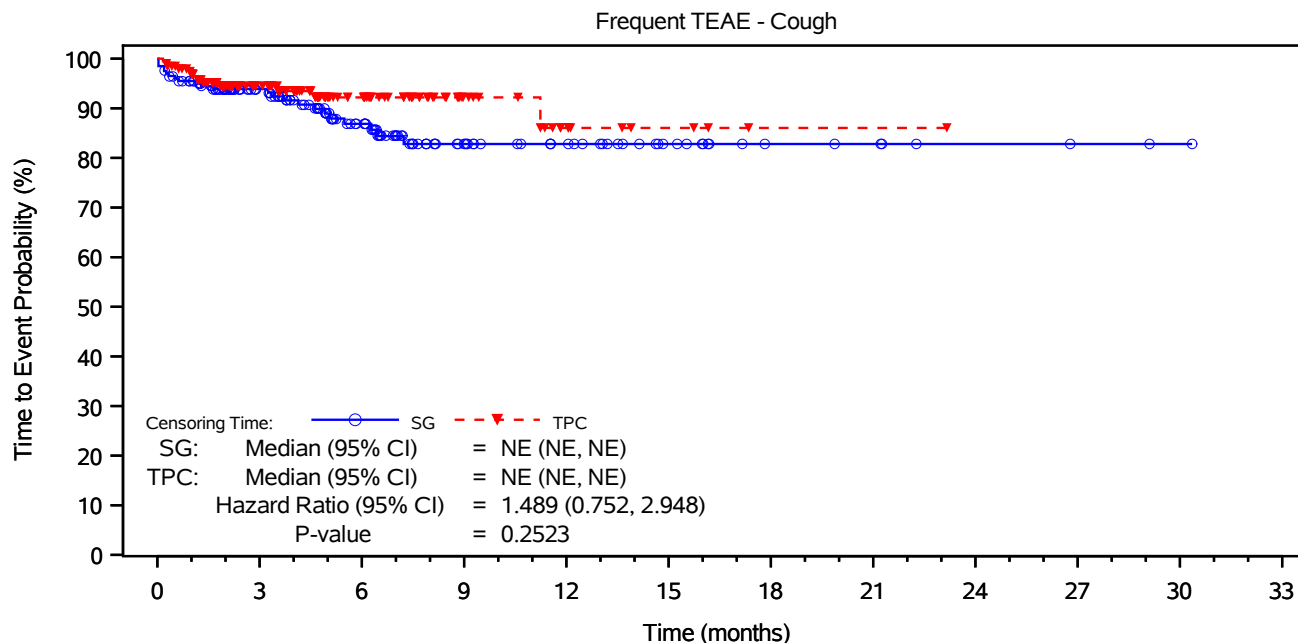
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	127 (12)	77 (20)	39 (23)	27 (23)	15 (23)	7 (23)	6 (23)	3 (23)	2 (23)	1 (23)	0 (23)
TPC	194 (0)	100 (10)	51 (12)	19 (12)	9 (13)	4 (13)	1 (13)	1 (13)	0 (13)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

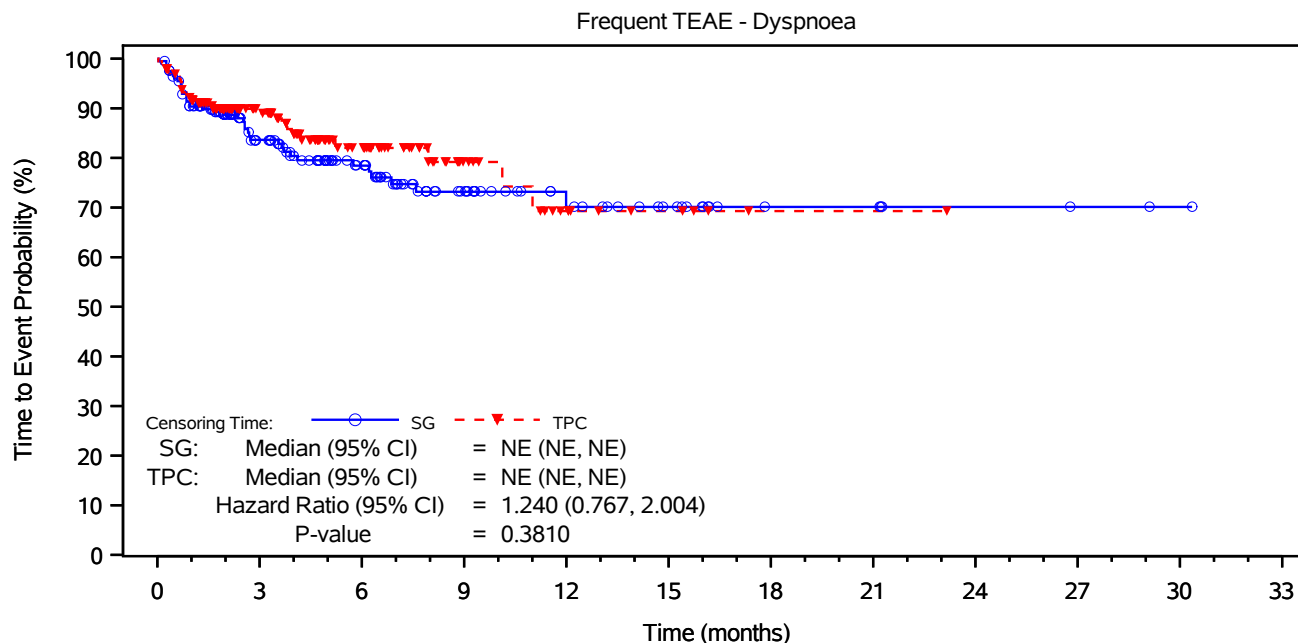
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	111 (29)	70 (35)	38 (39)	23 (40)	15 (40)	6 (40)	6 (40)	3 (40)	2 (40)	1 (40)	0 (40)
TPC	194 (0)	97 (19)	50 (26)	19 (27)	10 (29)	5 (29)	1 (29)	1 (29)	0 (29)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

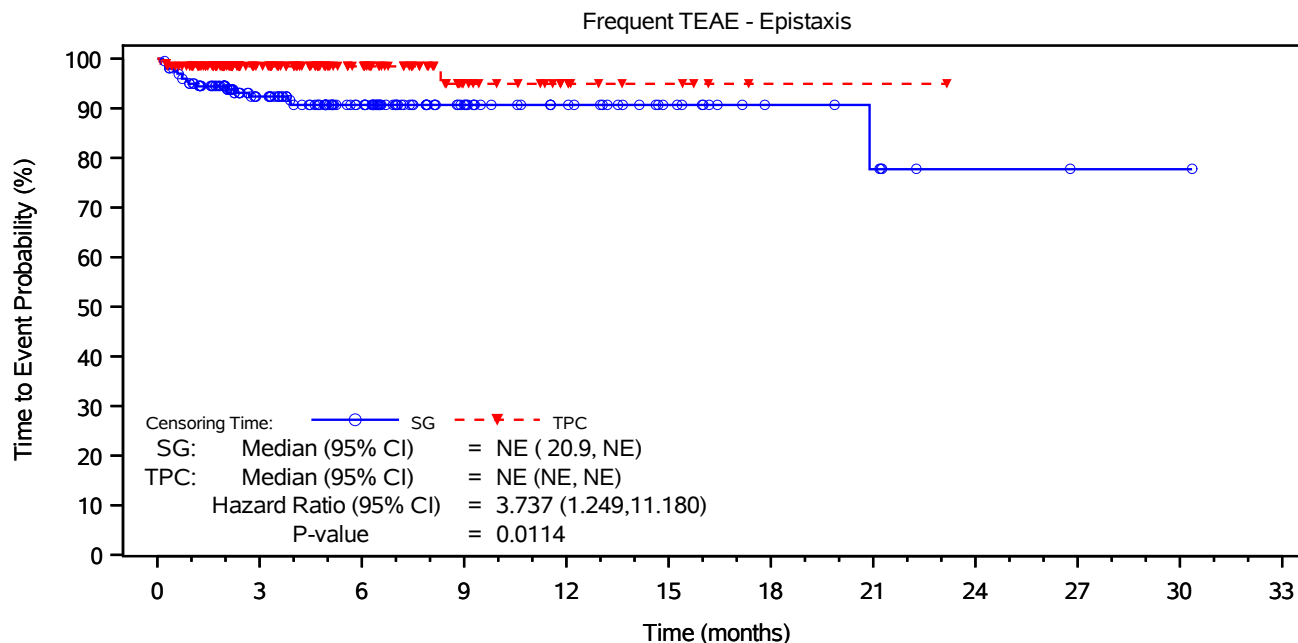
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	122 (14)	80 (16)	41 (16)	27 (16)	16 (16)	8 (16)	6 (17)	2 (17)	1 (17)	1 (17)	0 (17)
TPC	194 (0)	106 (3)	55 (3)	20 (4)	10 (4)	5 (4)	1 (4)	1 (4)	0 (4)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

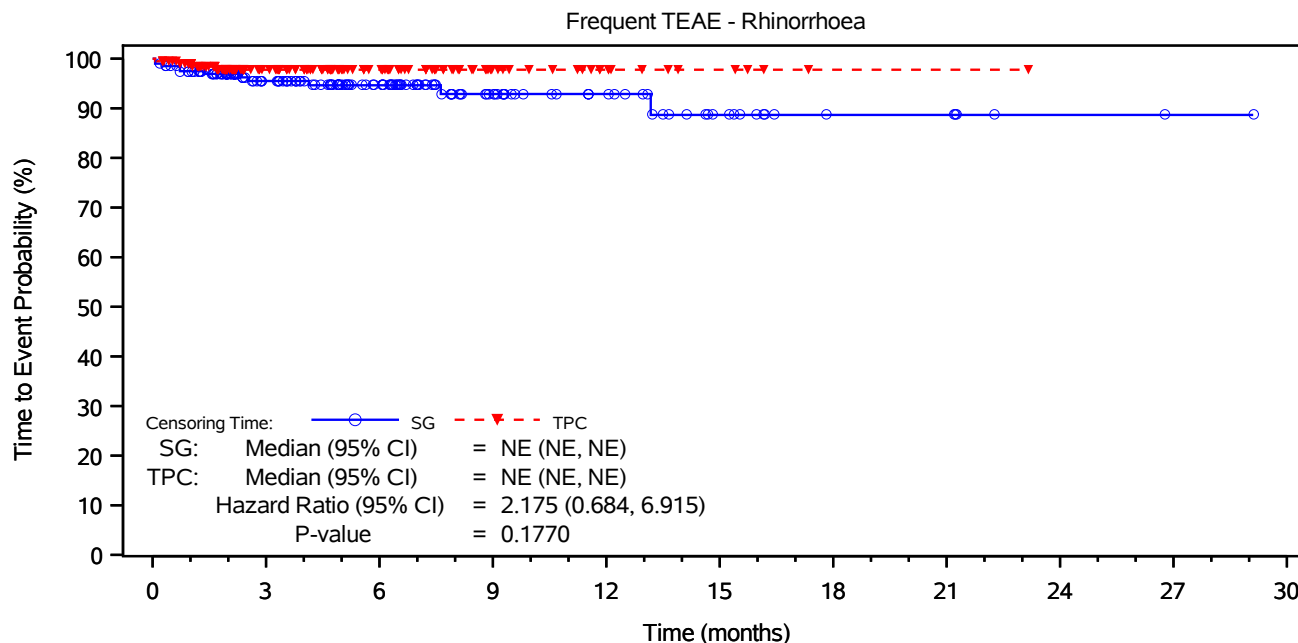
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	125 (8)	82 (9)	42 (10)	27 (10)	14 (11)	6 (11)	6 (11)	2 (11)	1 (11)	0 (11)
TPC	194 (0)	104 (4)	55 (4)	21 (4)	11 (4)	5 (4)	1 (4)	1 (4)	0 (4)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

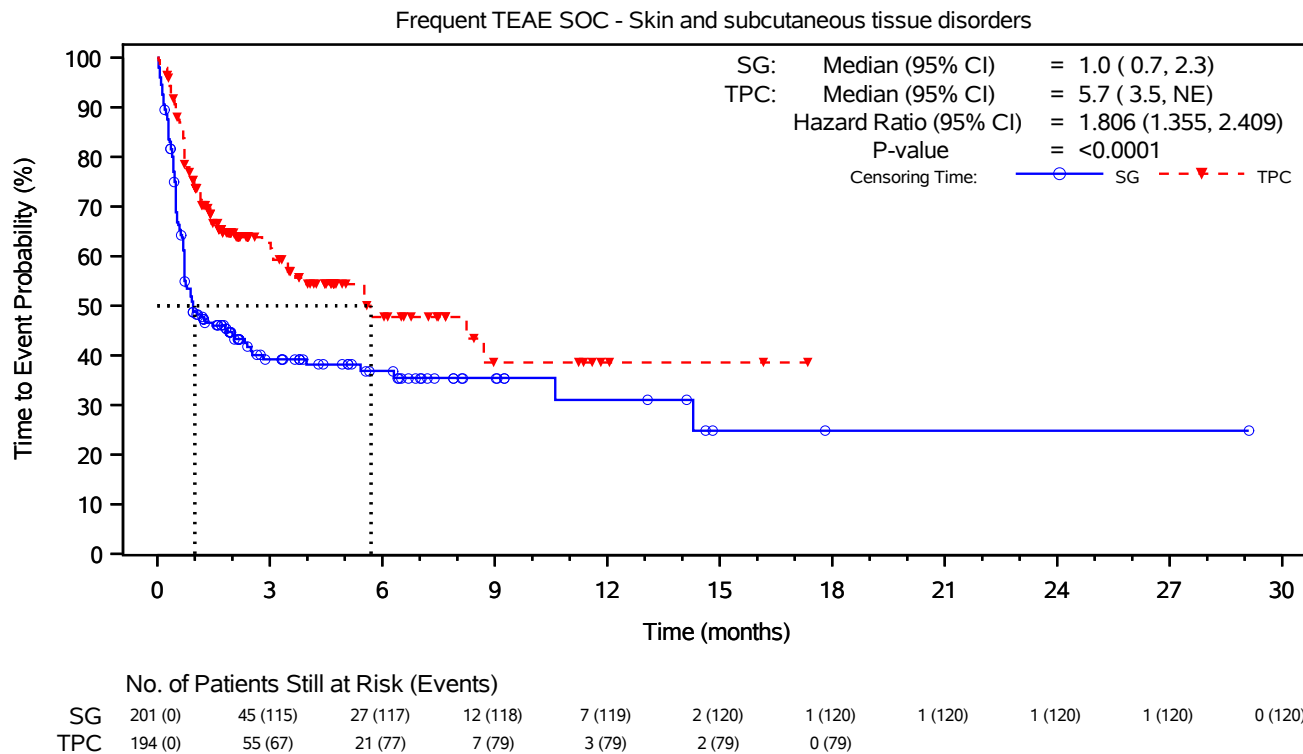
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

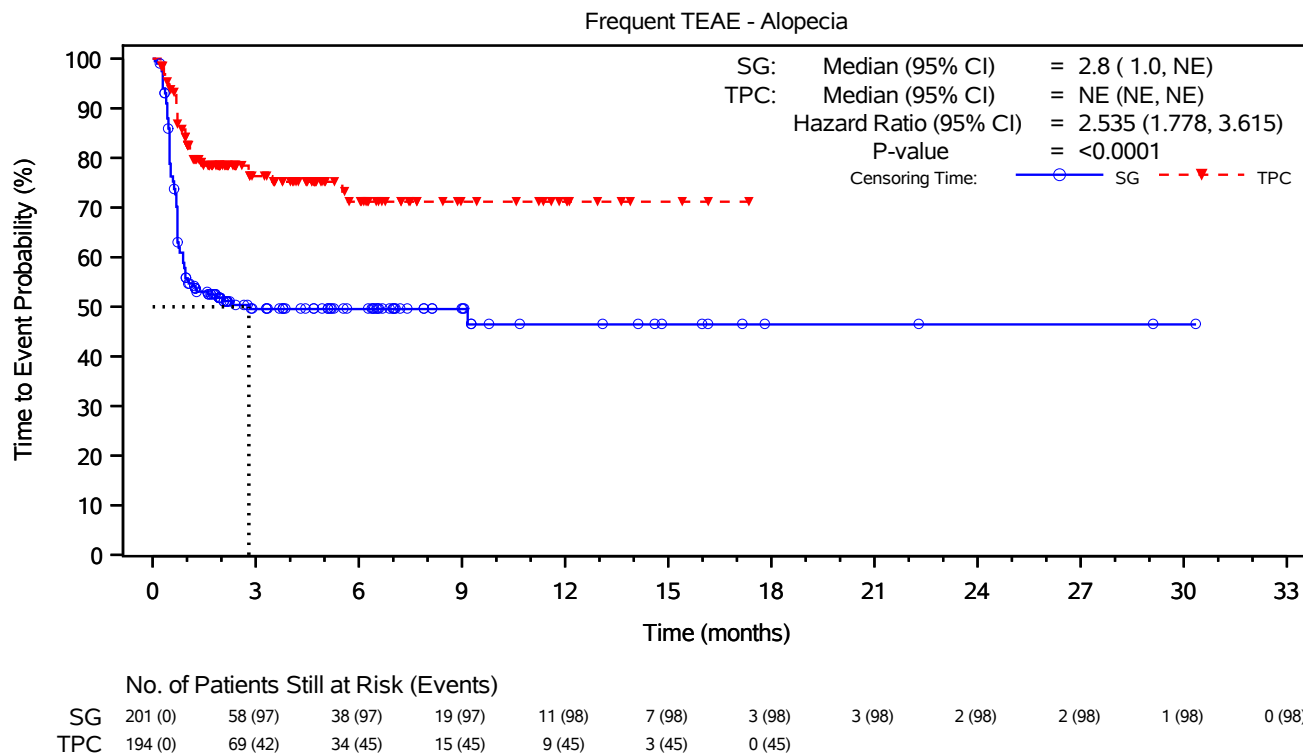
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

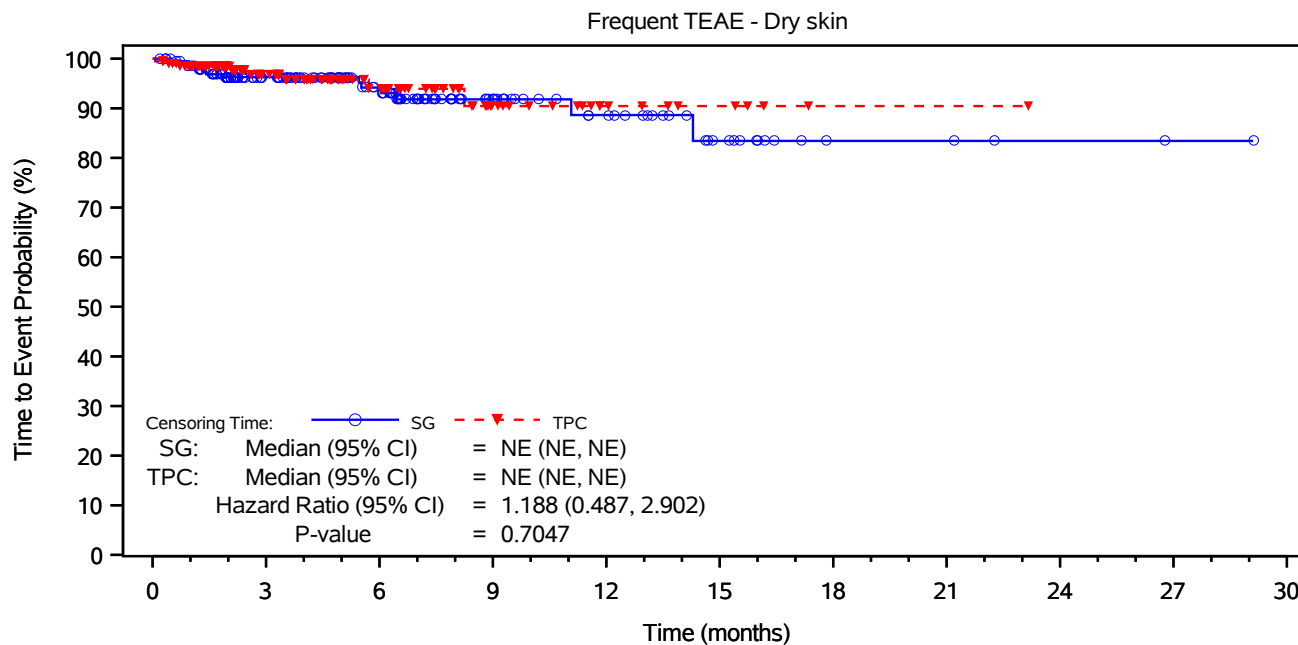
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	128 (7)	85 (9)	41 (11)	26 (12)	13 (13)	4 (13)	4 (13)	2 (13)	1 (13)	0 (13)
TPC	194 (0)	102 (5)	50 (7)	19 (8)	9 (8)	5 (8)	1 (8)	1 (8)	0 (8)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

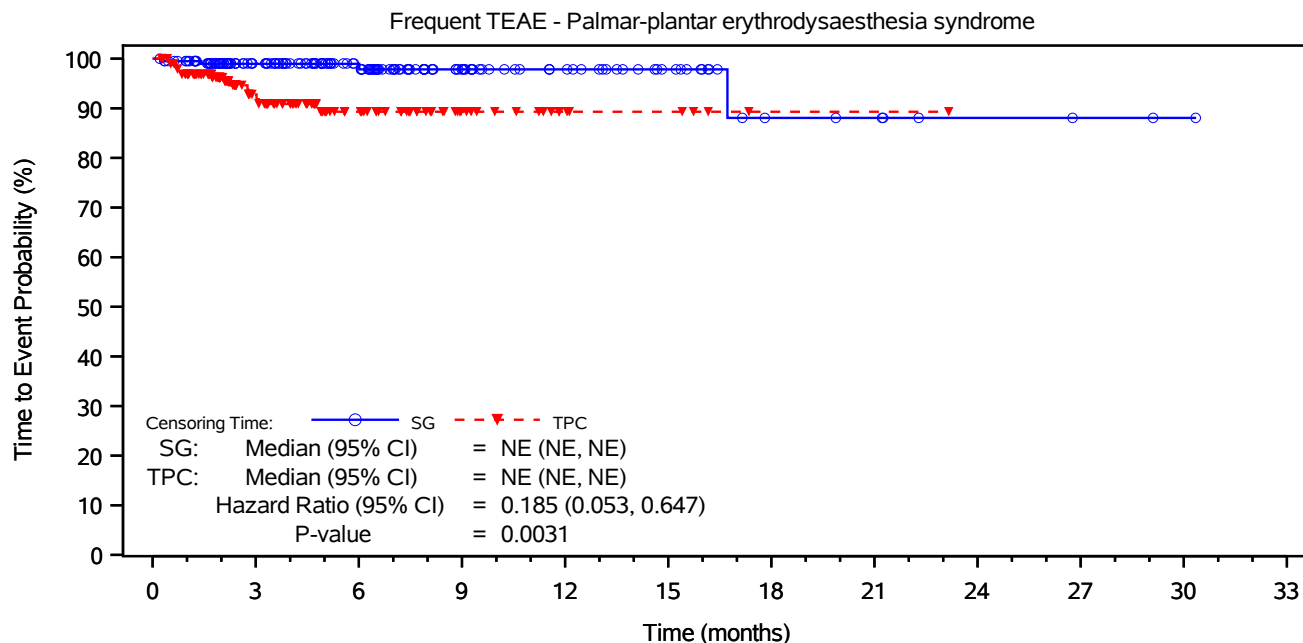
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	132 (2)	89 (2)	47 (3)	30 (3)	18 (3)	7 (4)	6 (4)	3 (4)	2 (4)	1 (4)	0 (4)
TPC	194 (0)	97 (11)	45 (14)	17 (14)	7 (14)	5 (14)	1 (14)	1 (14)	0 (14)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

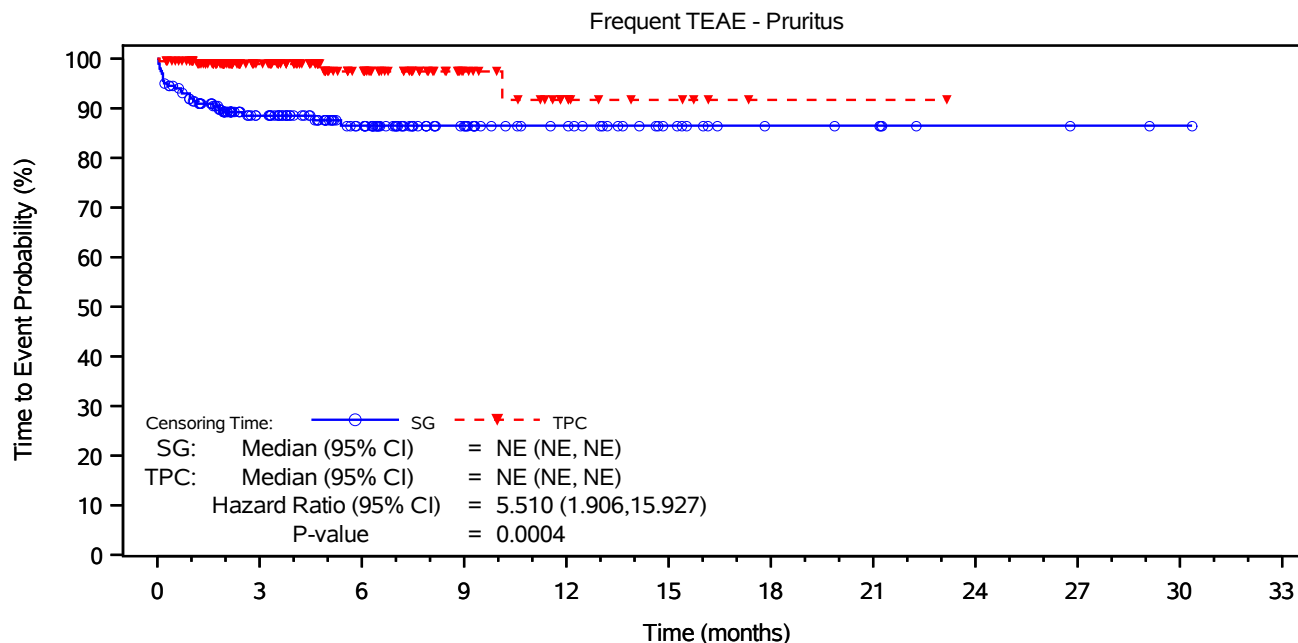
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	117 (22)	76 (24)	41 (24)	27 (24)	15 (24)	8 (24)	7 (24)	3 (24)	2 (24)	1 (24)	0 (24)
TPC	194 (0)	104 (2)	53 (3)	21 (3)	10 (4)	5 (4)	1 (4)	1 (4)	0 (4)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

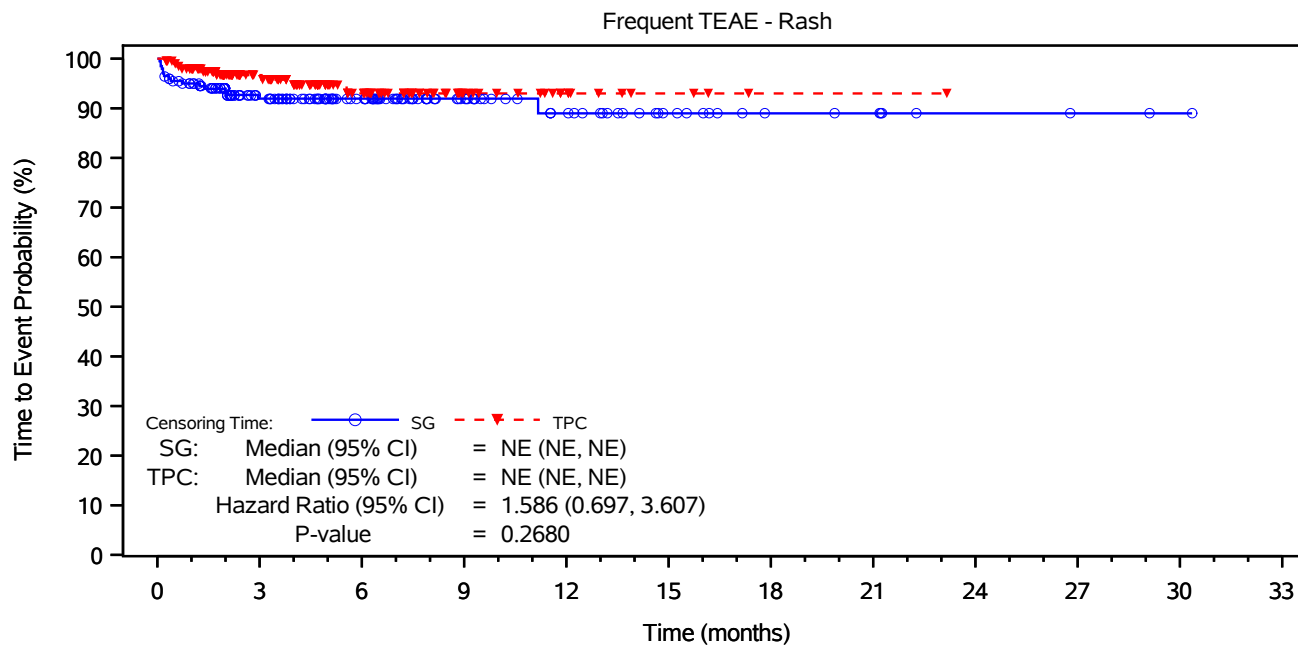
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	122 (15)	81 (15)	43 (15)	27 (16)	15 (16)	8 (16)	7 (16)	3 (16)	2 (16)	1 (16)	0 (16)
TPC	194 (0)	104 (6)	52 (9)	20 (9)	10 (9)	4 (9)	1 (9)	1 (9)	0 (9)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

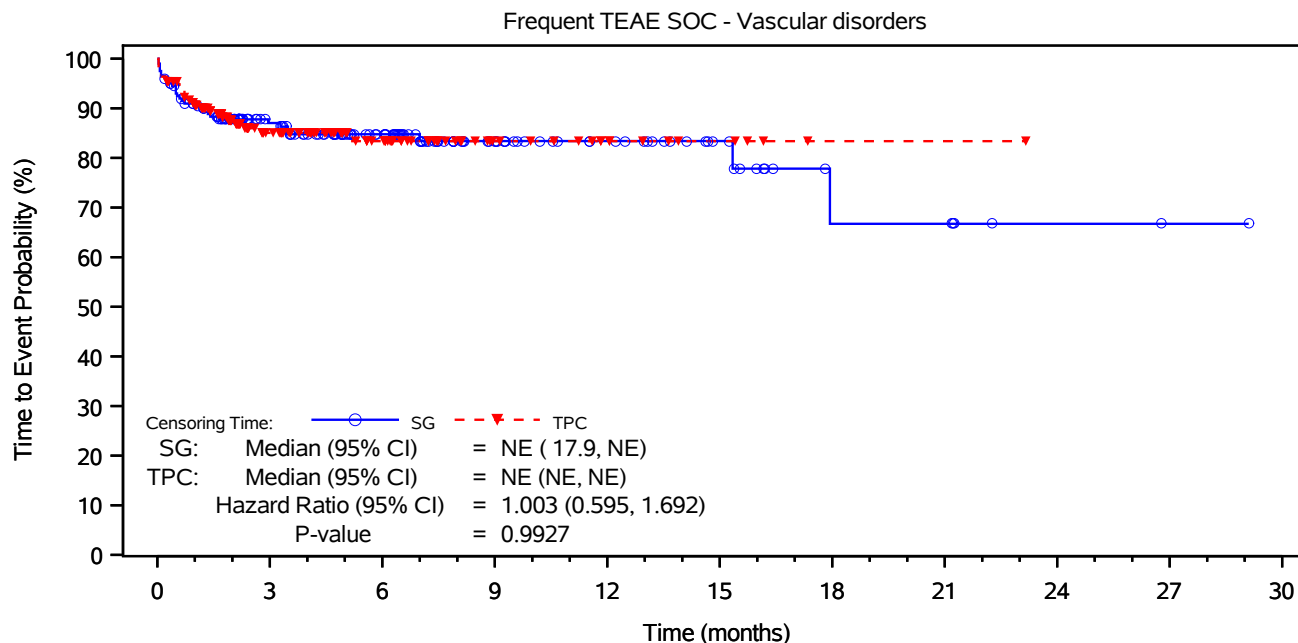
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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	118 (25)	79 (28)	41 (29)	27 (29)	16 (29)	6 (31)	6 (31)	2 (31)	1 (31)	0 (31)
TPC	194 (0)	86 (26)	45 (27)	17 (27)	10 (27)	5 (27)	1 (27)	1 (27)	0 (27)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

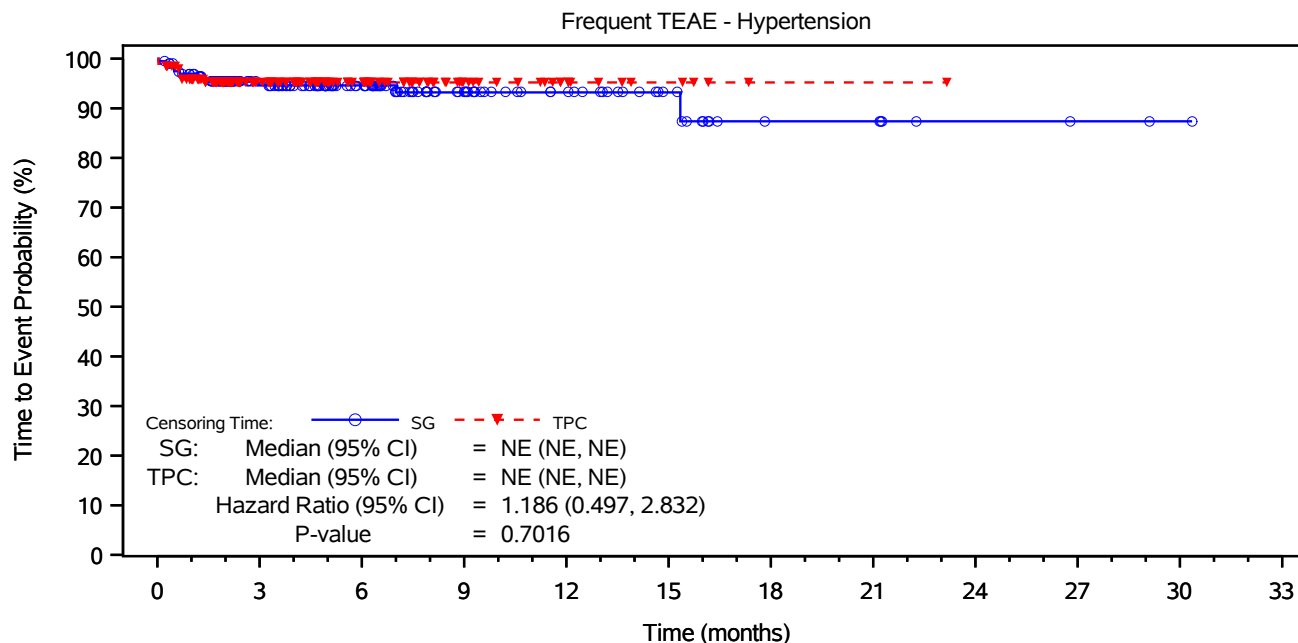
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.1: KM Plot for Time to the First Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	127 (10)	85 (10)	45 (11)	29 (11)	17 (11)	7 (12)	7 (12)	3 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	100 (9)	53 (9)	21 (9)	11 (9)	5 (9)	1 (9)	1 (9)	0 (9)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.5: Time to the First Frequent Serious TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Blood and lymphatic system disorders			
Patients With Events (%)	15 ( 7.5%)	12 ( 6.2%)	
Patients Without Events (Censored) (%)	186 ( 92.5%)	182 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.212 (0.567, 2.592)
p-value			0.6203

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable.

Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Table 15.11.7.5: Time to the First Frequent Serious TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE - Febrile neutropenia			
Patients With Events (%)	8 ( 4.0%)	10 ( 5.2%)	
Patients Without Events (Censored) (%)	193 ( 96.0%)	184 ( 94.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.779 (0.307, 1.978)
p-value			0.5977

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable.

Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.5: Time to the First Frequent Serious TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Patients With Events (%)	21 ( 10.4%)	6 ( 3.1%)	
Patients Without Events (Censored) (%)	180 ( 89.6%)	188 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.312 (1.335, 8.217)
p-value			0.0062

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable.

Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.5: Time to the First Frequent Serious TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Infections and infestations			
Patients With Events (%)	19 ( 9.5%)	8 ( 4.1%)	
Patients Without Events (Censored) (%)	182 ( 90.5%)	186 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.943 (0.840, 4.494)
p-value			0.1139

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable.

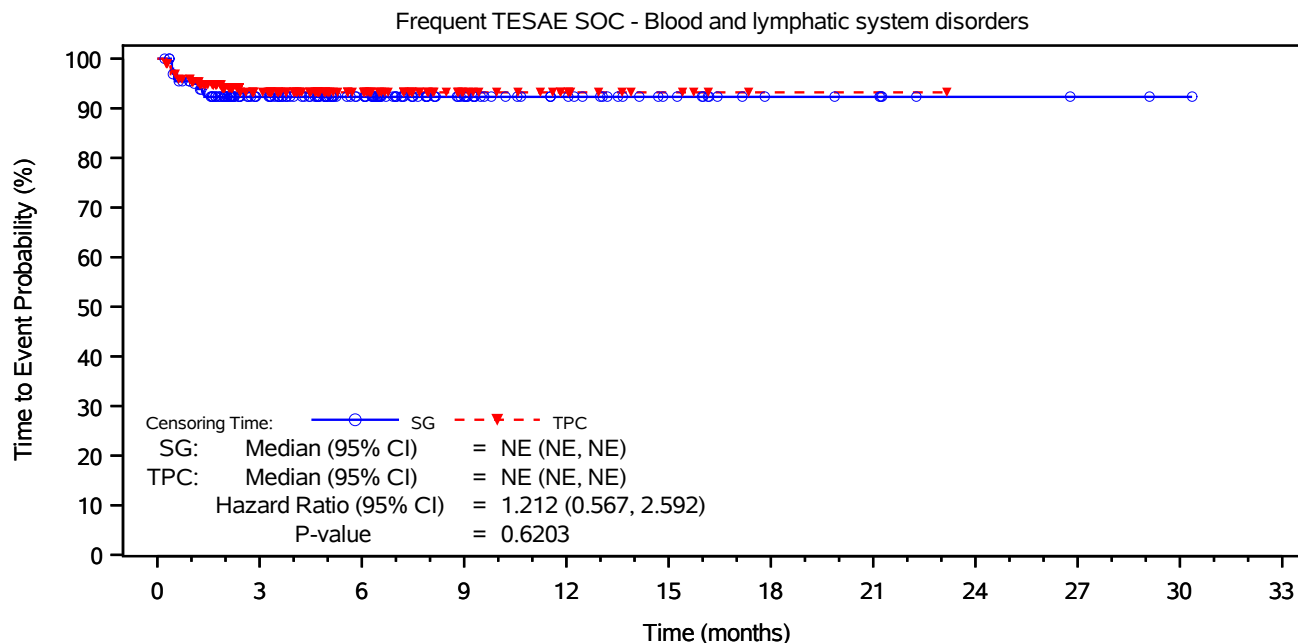
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Figure 15.11.7.5: KM Plot for Time to the First Frequent Serious TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	126 (15)	84 (15)	44 (15)	27 (15)	16 (15)	8 (15)	7 (15)	3 (15)	2 (15)	1 (15)	0 (15)
TPC	194 (0)	101 (12)	51 (12)	20 (12)	11 (12)	5 (12)	1 (12)	1 (12)	0 (12)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

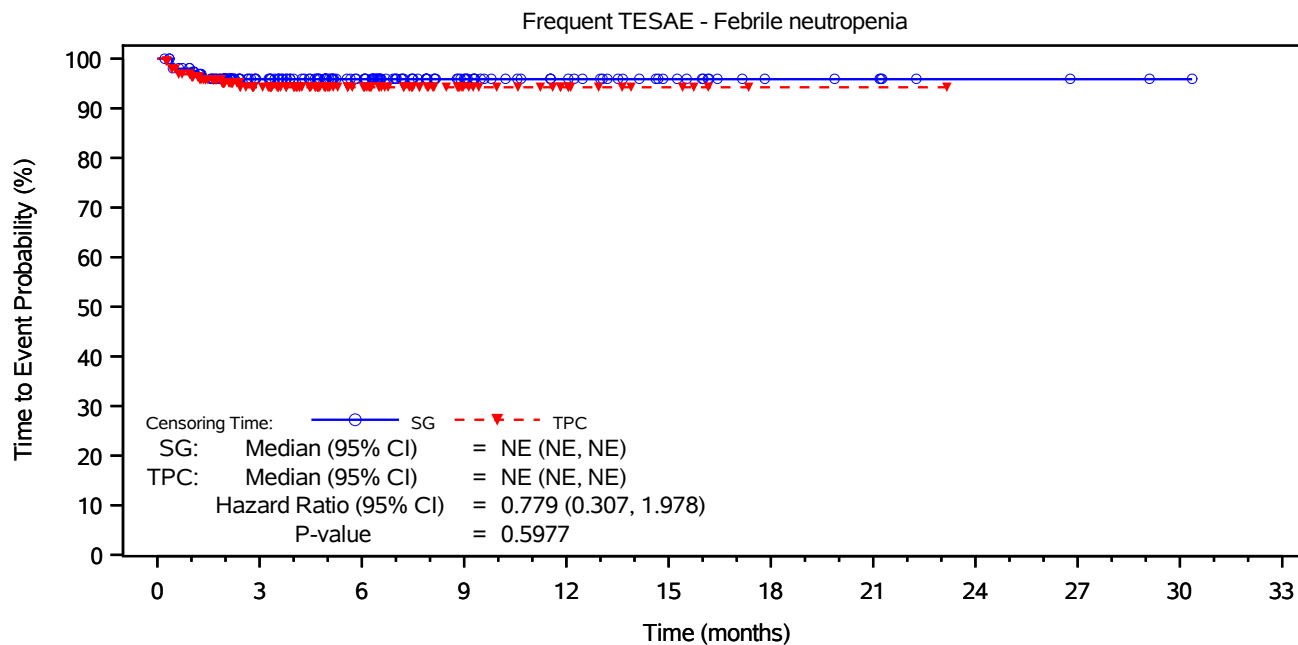
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Figure 15.11.7.5: KM Plot for Time to the First Frequent Serious TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	129 (8)	86 (8)	46 (8)	29 (8)	17 (8)	8 (8)	7 (8)	3 (8)	2 (8)	1 (8)	0 (8)
TPC	194 (0)	102 (10)	52 (10)	20 (10)	11 (10)	5 (10)	1 (10)	1 (10)	0 (10)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

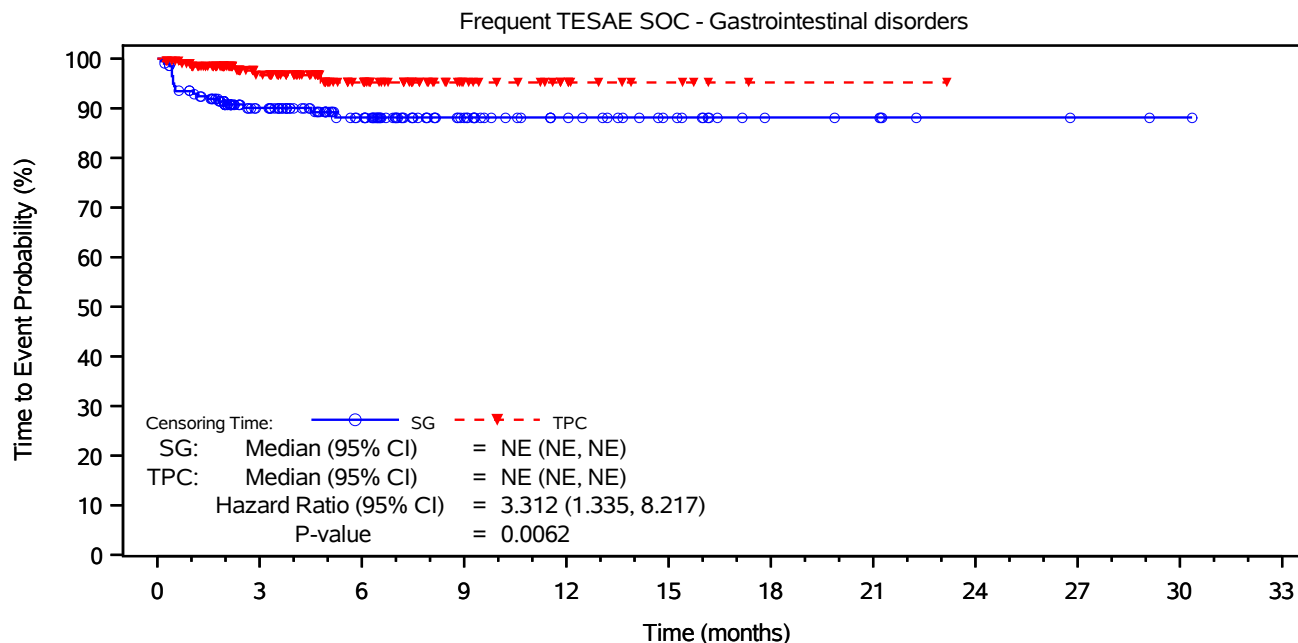
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.5: KM Plot for Time to the First Frequent Serious TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	123 (19)	80 (21)	42 (21)	26 (21)	17 (21)	8 (21)	7 (21)	3 (21)	2 (21)	1 (21)	0 (21)
TPC	194 (0)	103 (5)	52 (6)	21 (6)	11 (6)	5 (6)	1 (6)	1 (6)	0 (6)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

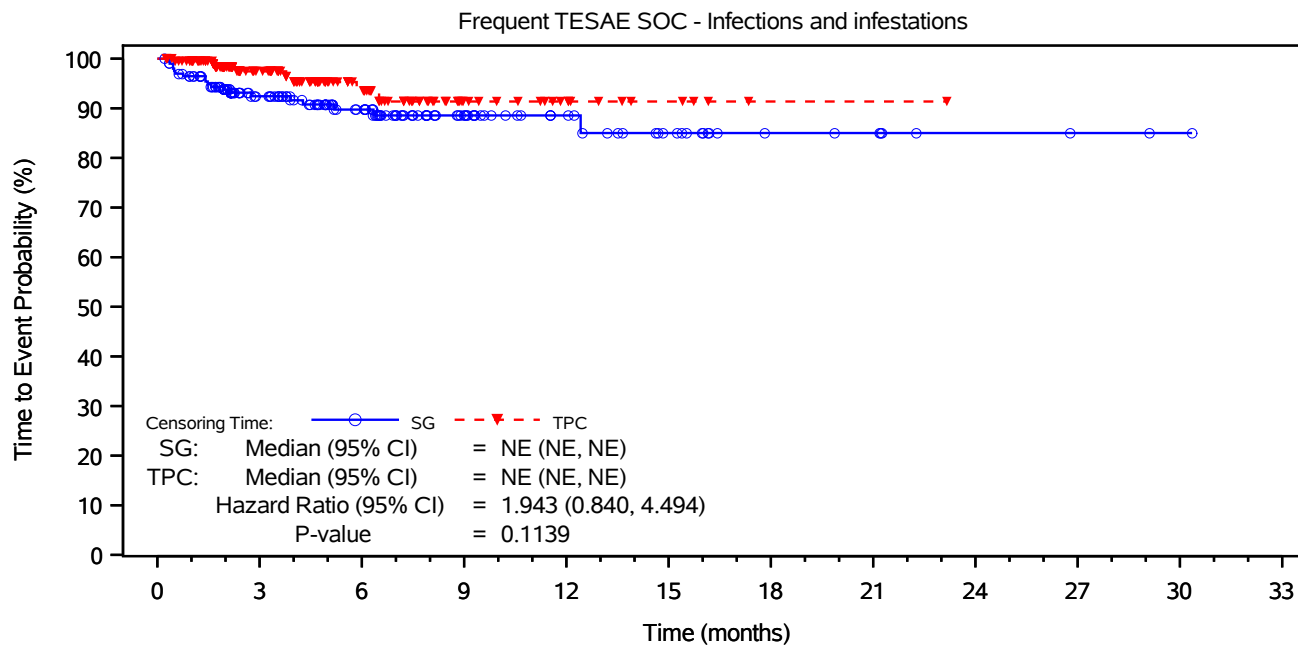
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.5: KM Plot for Time to the First Frequent Serious TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	125 (14)	83 (17)	44 (18)	27 (18)	17 (19)	8 (19)	7 (19)	3 (19)	2 (19)	1 (19)	0 (19)
TPC	194 (0)	105 (4)	52 (7)	19 (8)	11 (8)	5 (8)	1 (8)	1 (8)	0 (8)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Patients With Events (%)	115 ( 57.2%)	83 ( 42.8%)	
Patients Without Events (Censored) (%)	86 ( 42.8%)	111 ( 57.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.9, 3.0)	8.3 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.485 (1.117, 1.974)
p-value			0.0062

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Patients With Events (%)	16 ( 8.0%)	5 ( 2.6%)	
Patients Without Events (Censored) (%)	185 ( 92.0%)	189 ( 97.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.883 (1.053, 7.896)
p-value			0.0312

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Febrile neutropenia</b>			
Patients With Events (%)	12 ( 6.0%)	11 ( 5.7%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	183 ( 94.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.054 (0.464, 2.393)
p-value			0.9016

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Leukopenia</b>			
Patients With Events (%)	20 ( 10.0%)	11 ( 5.7%)	
Patients Without Events (Censored) (%)	181 ( 90.0%)	183 ( 94.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.779 (0.852, 3.716)
p-value			0.1220

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Patients With Events (%)	104 ( 51.7%)	75 ( 38.7%)	
Patients Without Events (Censored) (%)	97 ( 48.3%)	119 ( 61.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	2.6 (1.0, NE)	9.6 (4.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.436 (1.066, 1.935)
p-value			0.0173

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Patients With Events (%)	31 ( 15.4%)	11 ( 5.7%)	
Patients Without Events (Censored) (%)	170 ( 84.6%)	183 ( 94.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.628 (1.319, 5.237)
p-value			0.0043

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Diarrhoea</b>			
Patients With Events (%)	19 ( 9.5%)	3 ( 1.5%)	
Patients Without Events (Censored) (%)	182 ( 90.5%)	191 ( 98.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.953 (1.759, 20.141)
p-value			0.0011

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - General disorders and administration site conditions			
Patients With Events (%)	20 ( 10.0%)	12 ( 6.2%)	
Patients Without Events (Censored) (%)	181 ( 90.0%)	182 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.413 (0.685, 2.916)
p-value			0.3468

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Fatigue</b>			
Patients With Events (%)	12 ( 6.0%)	6 ( 3.1%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	188 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.822 (0.683, 4.860)
p-value			0.2237

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
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Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Infections and infestations			
Patients With Events (%)	21 ( 10.4%)	8 ( 4.1%)	
Patients Without Events (Censored) (%)	180 ( 89.6%)	186 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.077 (0.907, 4.756)
p-value			0.0774

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Investigations			
Patients With Events (%)	12 ( 6.0%)	8 ( 4.1%)	
Patients Without Events (Censored) (%)	189 ( 94.0%)	186 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (21.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.241 (0.497, 3.100)
p-value			0.6426

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Metabolism and nutrition disorders			
Patients With Events (%)	17 ( 8.5%)	6 ( 3.1%)	
Patients Without Events (Censored) (%)	184 ( 91.5%)	188 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.436 (0.952, 6.234)
p-value			0.0550

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Patients With Events (%)	7 ( 3.5%)	14 ( 7.2%)	
Patients Without Events (Censored) (%)	194 ( 96.5%)	180 ( 92.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.322 (0.123, 0.842)
p-value			0.0151

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Patients With Events (%)	11 ( 5.5%)	17 ( 8.8%)	
Patients Without Events (Censored) (%)	190 ( 94.5%)	177 ( 91.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.463 (0.211, 1.016)
p-value			0.0493

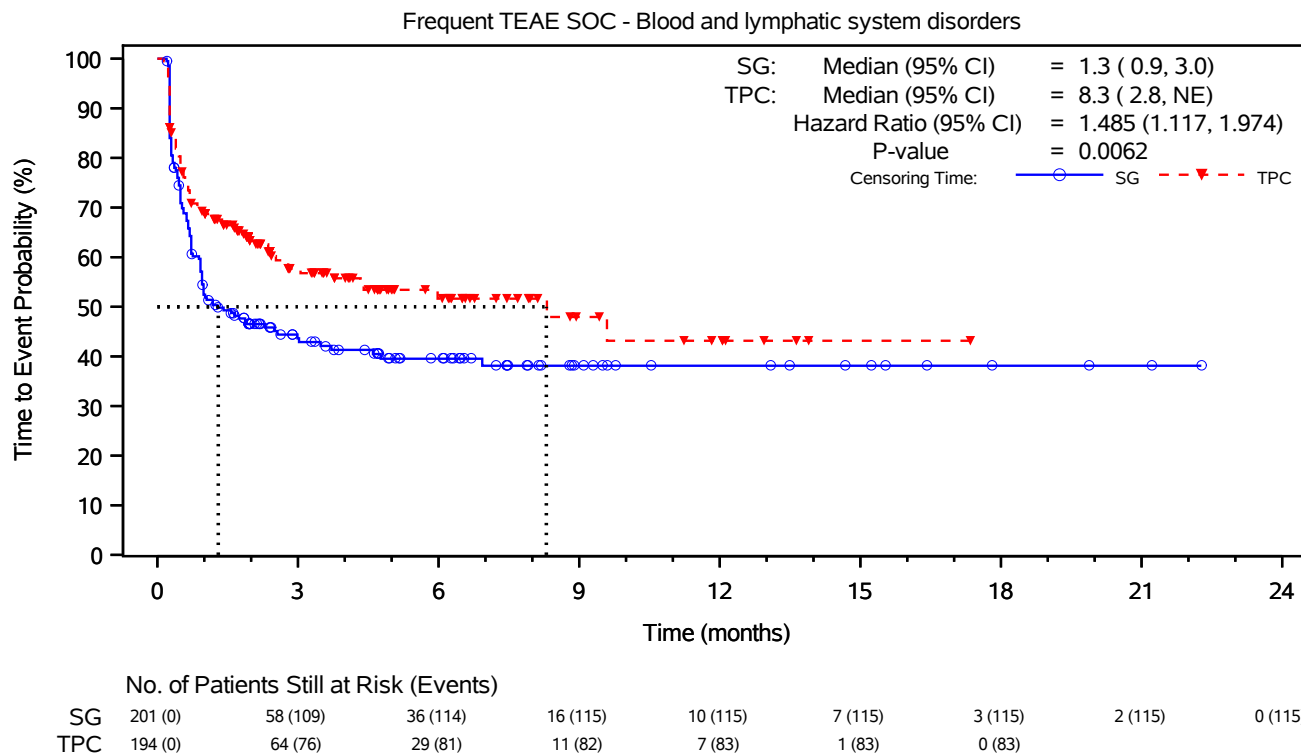
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

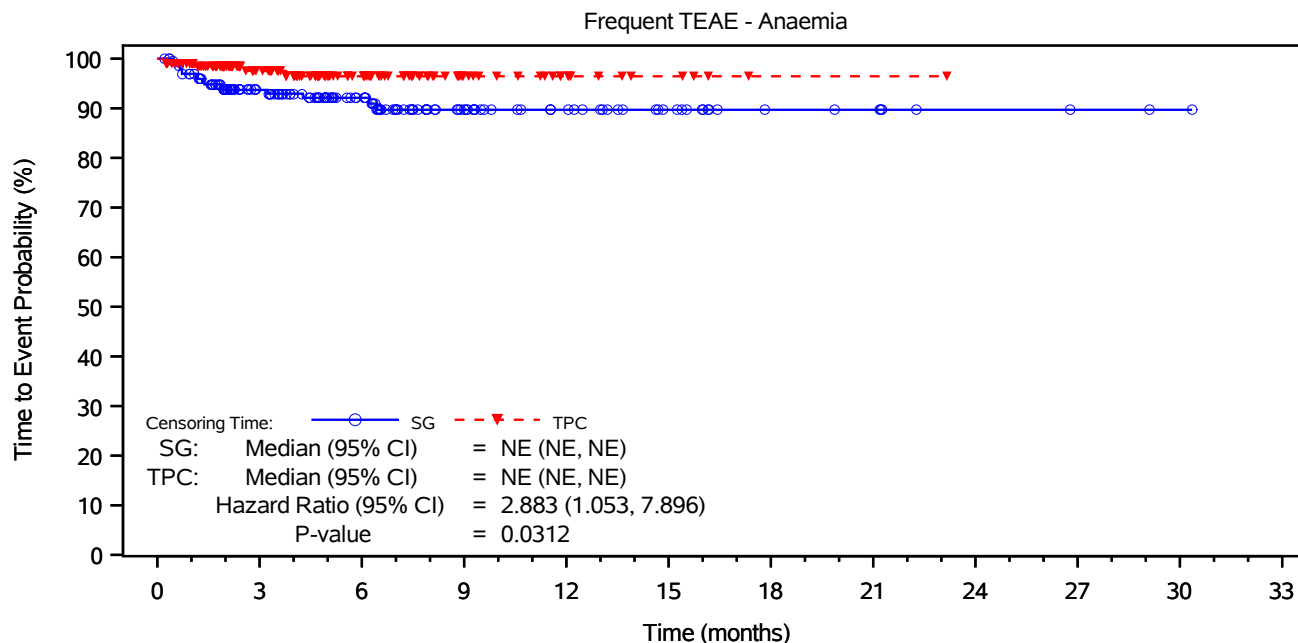
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	126 (12)	83 (14)	43 (16)	28 (16)	17 (16)	8 (16)	7 (16)	3 (16)	2 (16)	1 (16)	0 (16)
TPC	194 (0)	104 (4)	54 (5)	21 (5)	11 (5)	5 (5)	1 (5)	1 (5)	0 (5)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

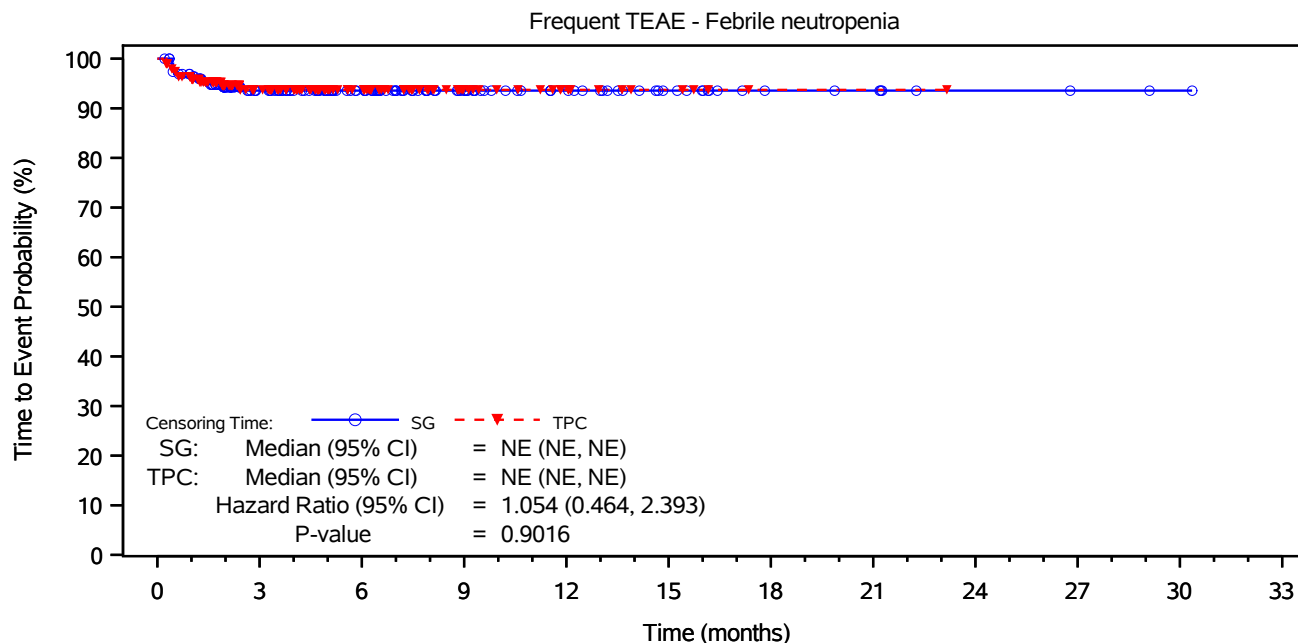
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	125 (12)	84 (12)	46 (12)	29 (12)	17 (12)	8 (12)	7 (12)	3 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	101 (11)	52 (11)	20 (11)	11 (11)	5 (11)	1 (11)	1 (11)	0 (11)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

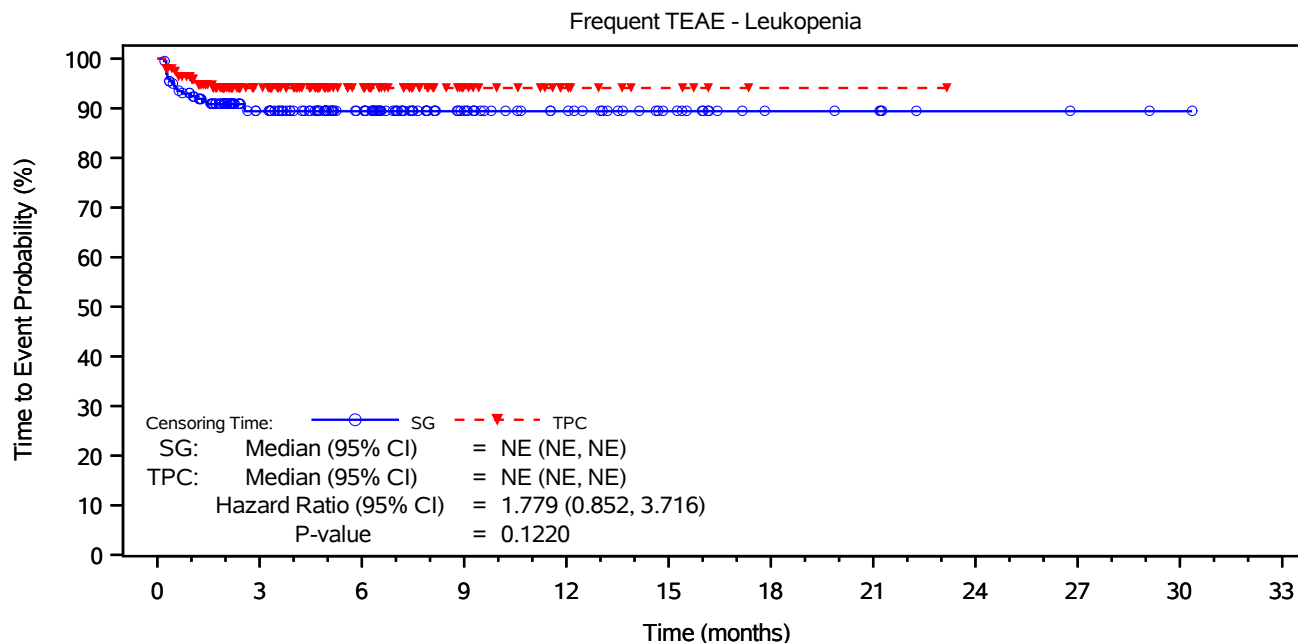
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	122 (20)	83 (20)	44 (20)	30 (20)	18 (20)	8 (20)	7 (20)	3 (20)	2 (20)	1 (20)	0 (20)
TPC	194 (0)	103 (11)	52 (11)	21 (11)	11 (11)	5 (11)	1 (11)	1 (11)	0 (11)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

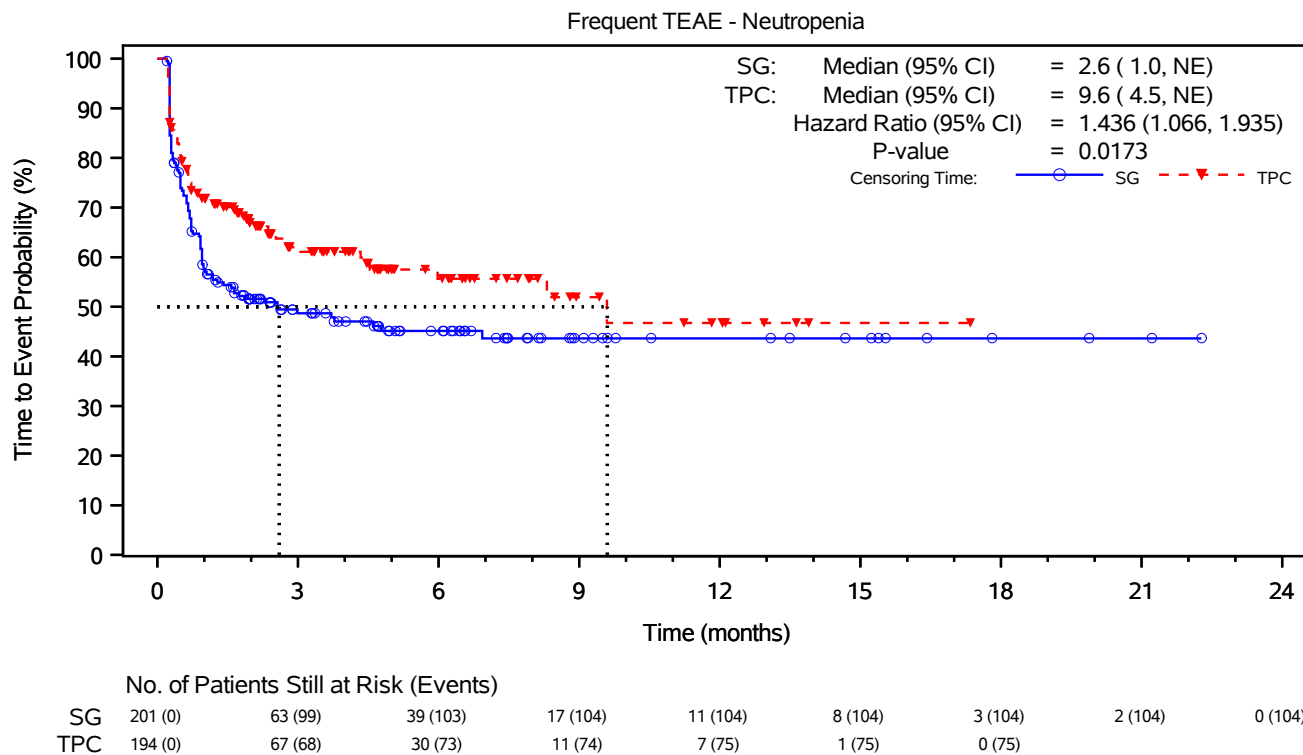
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

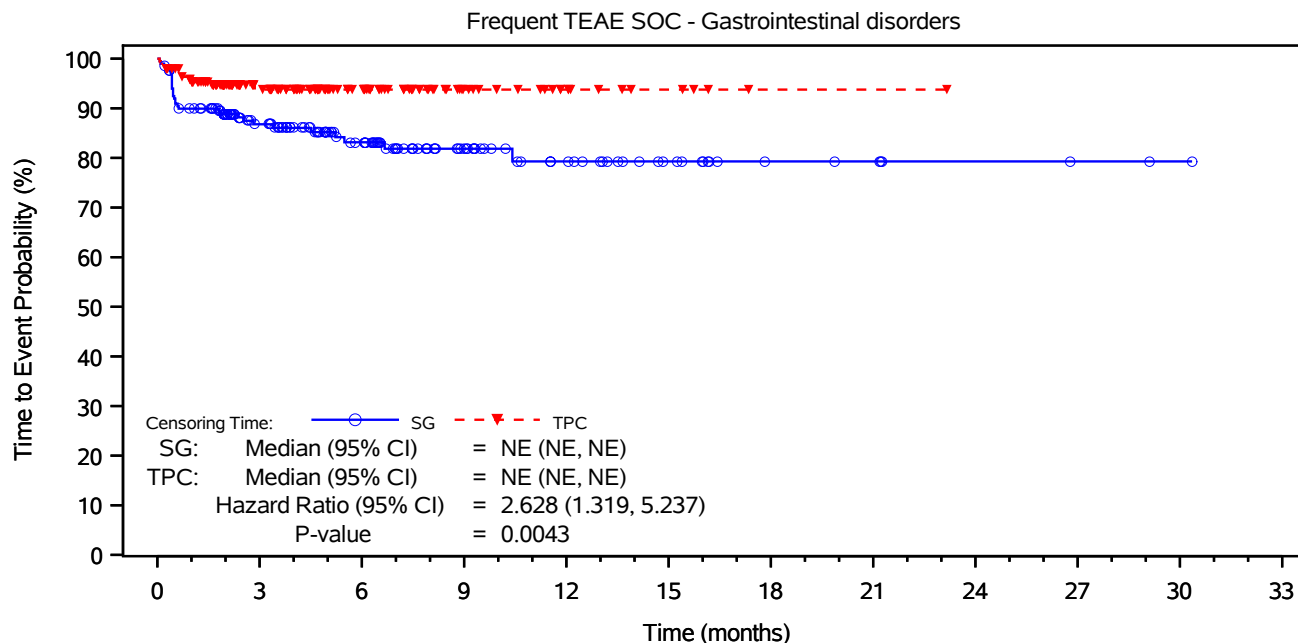
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	122 (25)	79 (29)	43 (30)	26 (31)	15 (31)	7 (31)	6 (31)	3 (31)	2 (31)	1 (31)	0 (31)
TPC	194 (0)	103 (11)	53 (11)	21 (11)	11 (11)	5 (11)	1 (11)	1 (11)	0 (11)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

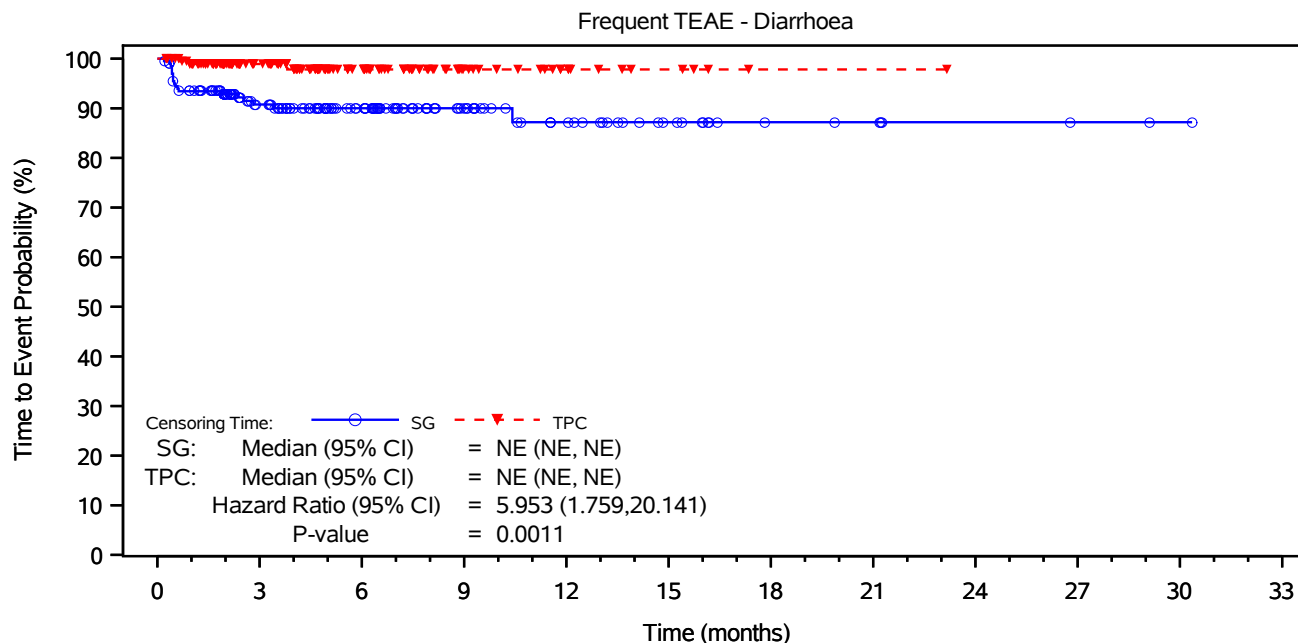
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	124 (17)	81 (18)	43 (18)	26 (19)	15 (19)	7 (19)	6 (19)	3 (19)	2 (19)	1 (19)	0 (19)
TPC	194 (0)	106 (2)	54 (3)	21 (3)	11 (3)	5 (3)	1 (3)	1 (3)	0 (3)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

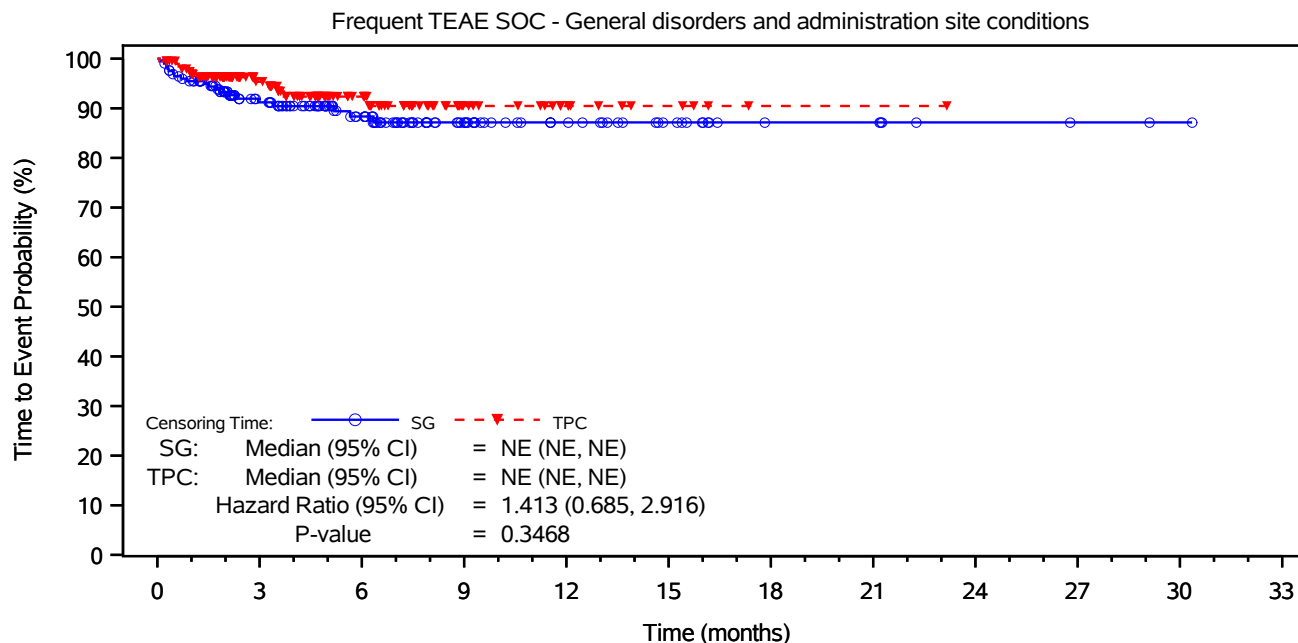
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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	123 (16)	81 (19)	43 (20)	26 (20)	16 (20)	7 (20)	7 (20)	3 (20)	2 (20)	1 (20)	0 (20)
TPC	194 (0)	103 (8)	54 (11)	20 (12)	11 (12)	5 (12)	1 (12)	1 (12)	0 (12)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

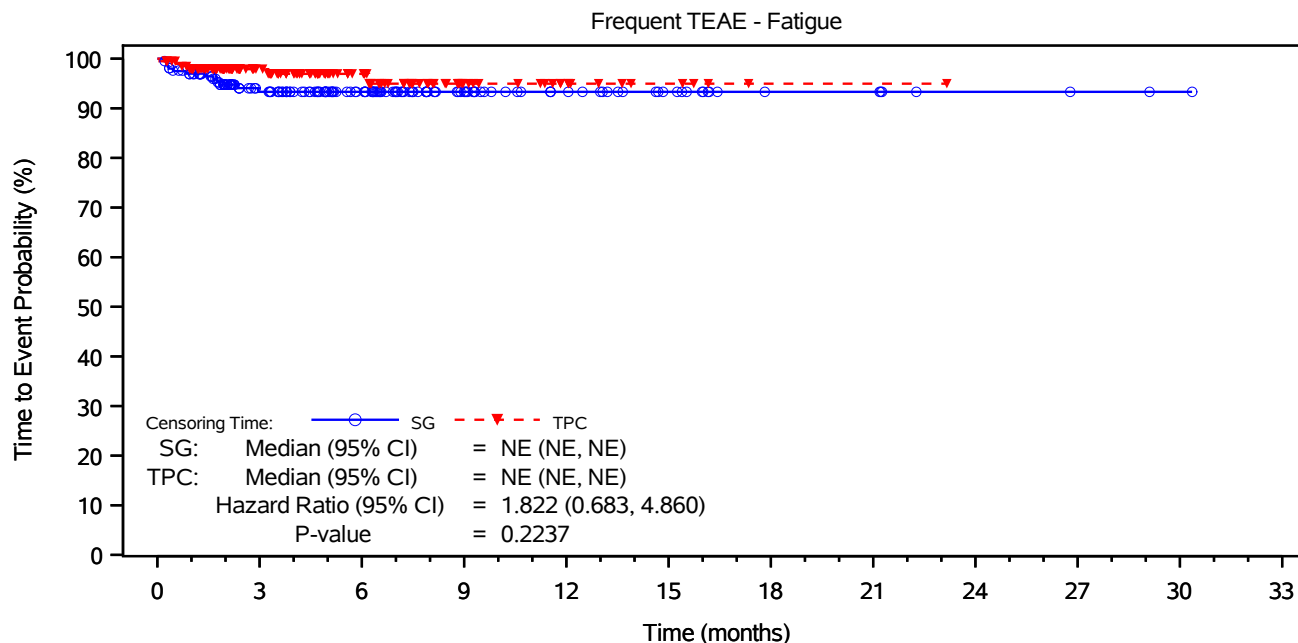
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	125 (12)	84 (12)	43 (12)	26 (12)	16 (12)	7 (12)	7 (12)	3 (12)	2 (12)	1 (12)	0 (12)
TPC	194 (0)	104 (4)	54 (5)	20 (6)	11 (6)	5 (6)	1 (6)	1 (6)	0 (6)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

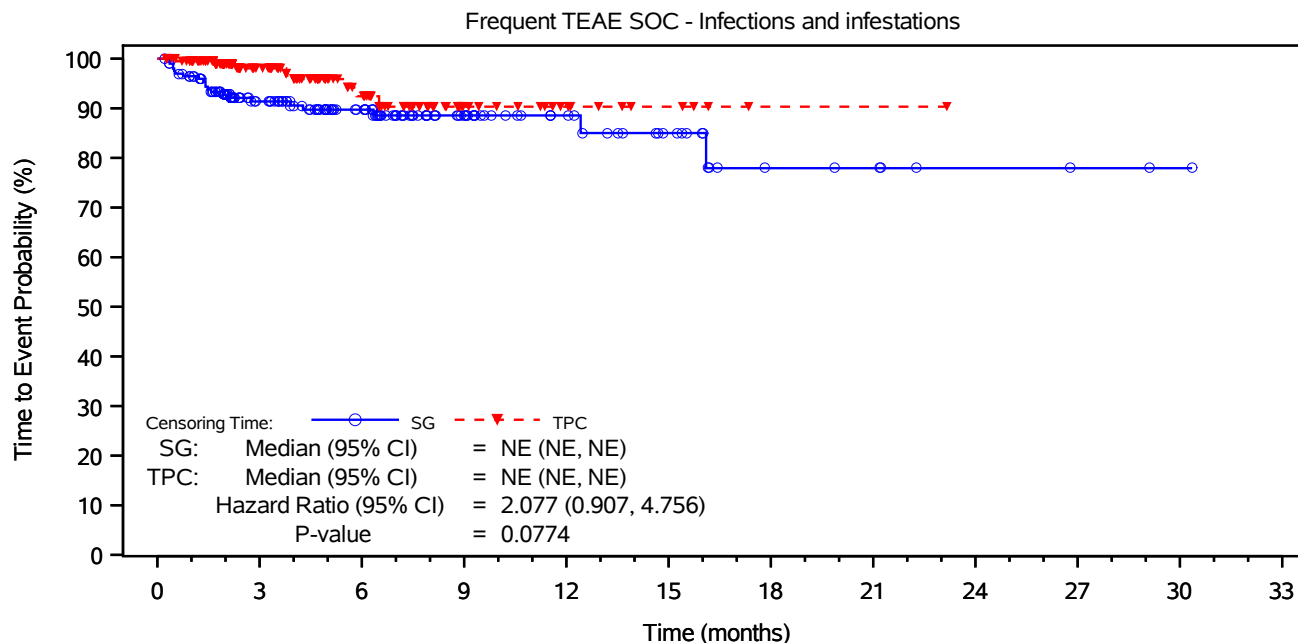
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	124 (16)	84 (18)	44 (19)	27 (19)	17 (20)	7 (21)	6 (21)	3 (21)	2 (21)	1 (21)	0 (21)
TPC	194 (0)	105 (3)	52 (7)	19 (8)	11 (8)	5 (8)	1 (8)	1 (8)	0 (8)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

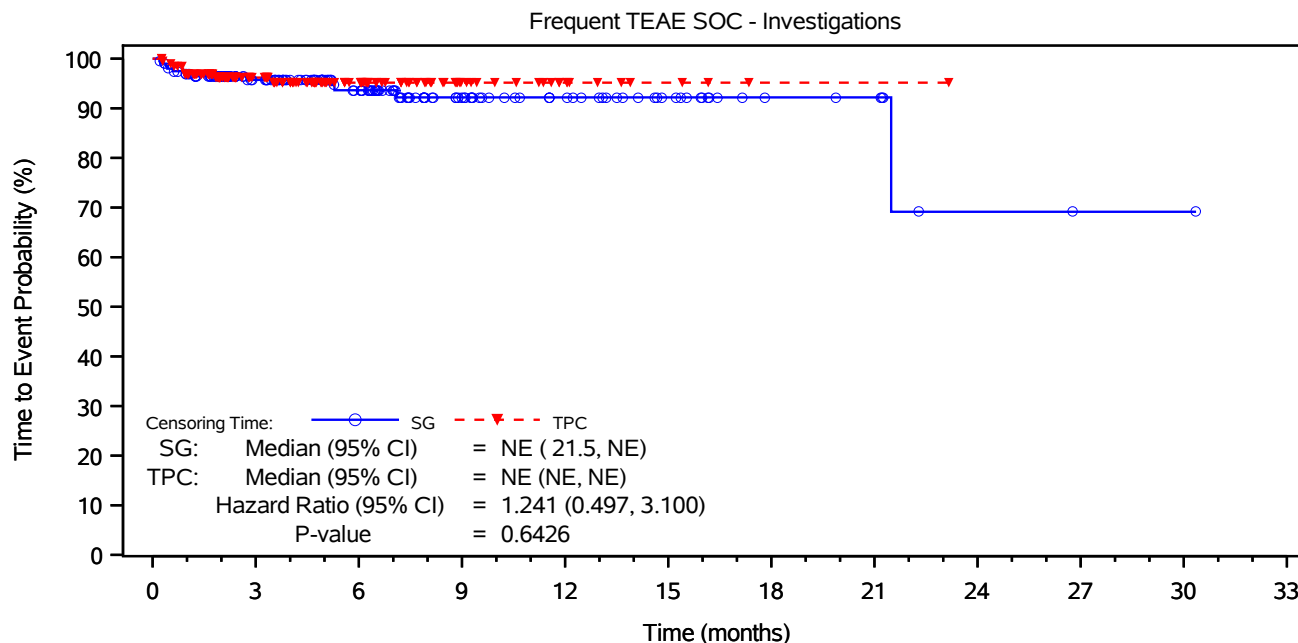
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	131 (8)	87 (10)	46 (11)	30 (11)	18 (11)	8 (11)	7 (11)	2 (12)	1 (12)	1 (12)	0 (12)
TPC	194 (0)	101 (7)	52 (8)	20 (8)	10 (8)	4 (8)	1 (8)	1 (8)	0 (8)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

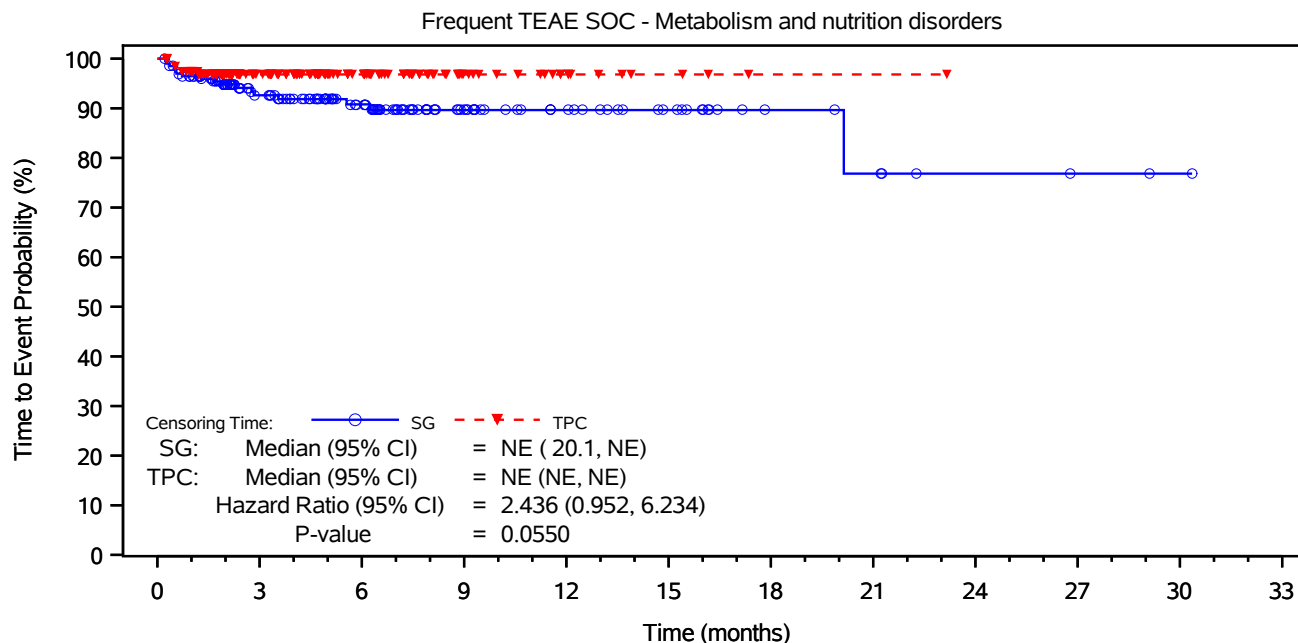
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	201 (0)	123 (13)	83 (15)	42 (16)	27 (16)	18 (16)	8 (16)	6 (17)	3 (17)	2 (17)	1 (17)	0 (17)
TPC	194 (0)	104 (6)	54 (6)	20 (6)	10 (6)	4 (6)	1 (6)	1 (6)	0 (6)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

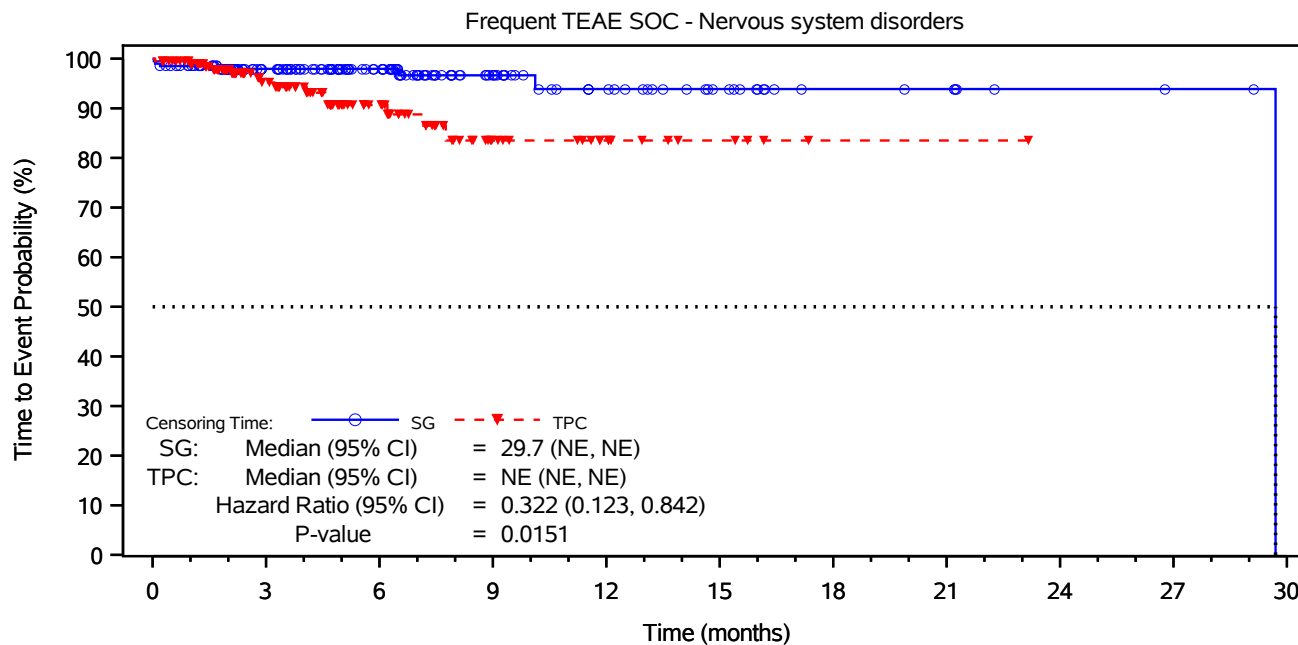
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	201 (0)	130 (4)	88 (4)	46 (5)	28 (6)	17 (6)	8 (6)	7 (6)	3 (6)	2 (6)	0 (7)
TPC	194 (0)	101 (7)	51 (11)	19 (14)	11 (14)	5 (14)	1 (14)	1 (14)	0 (14)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

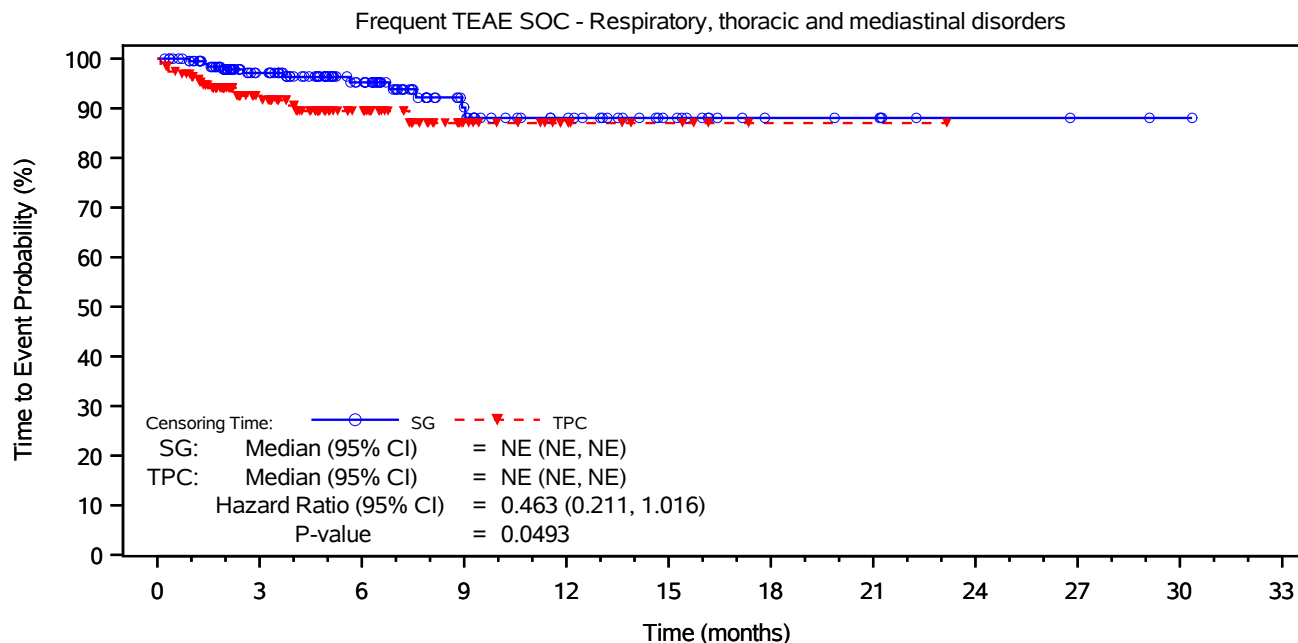
Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by Selected SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
SG	201 (0)	130 (5)	85 (7)	44 (10)	29 (11)	17 (11)	8 (11)	7 (11)	3 (11)	2 (11)	1 (11)	0 (11)
TPC	194 (0)	102 (13)	53 (16)	20 (17)	10 (17)	5 (17)	1 (17)	1 (17)	0 (17)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratio and CI are from the stratified Cox regression analysis. P-value is from the stratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq.sas v9.4 Output file:  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.8: TEAE Leading to Study Drug Discontinuation by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

System Organ Class Preferred Term	SG (N=201)	TPC (N=194)	Total (N=395)
Subjects with Any Treatment-Emergent Adverse Events Leading to Study Drug Discontinuation	14 ( 7.0%)	6 ( 3.1%)	20 ( 5.1%)
Blood and lymphatic system disorders	3 ( 1.5%)	1 ( 0.5%)	4 ( 1.0%)
Neutropenia	2 ( 1.0%)	0	2 ( 0.5%)
Anaemia	1 ( 0.5%)	0	1 ( 0.3%)
Leukopenia	1 ( 0.5%)	0	1 ( 0.3%)
Thrombocytopenia	0	1 ( 0.5%)	1 ( 0.3%)
Gastrointestinal disorders	3 ( 1.5%)	0	3 ( 0.8%)
Abdominal pain	1 ( 0.5%)	0	1 ( 0.3%)
Colitis	1 ( 0.5%)	0	1 ( 0.3%)
Neutropenic colitis	1 ( 0.5%)	0	1 ( 0.3%)
General disorders and administration site conditions	3 ( 1.5%)	0	3 ( 0.8%)
Asthenia	2 ( 1.0%)	0	2 ( 0.5%)
General physical health deterioration	1 ( 0.5%)	0	1 ( 0.3%)
Hepatobiliary disorders	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
Hyperbilirubinaemia	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
Infections and infestations	3 ( 1.5%)	1 ( 0.5%)	4 ( 1.0%)
Pneumonia	1 ( 0.5%)	1 ( 0.5%)	2 ( 0.5%)
COVID-19 pneumonia	1 ( 0.5%)	0	1 ( 0.3%)
Diverticulitis	1 ( 0.5%)	0	1 ( 0.3%)

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
Multiple AEs are counted only once per subject for each SOC/PT. MedDRA Version 25.0 were used for coding.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.8: TEAE Leading to Study Drug Discontinuation by SOC and PT  
Safety Population  
Excluding participants pre-selected to Gemcitabine

System Organ Class Preferred Term	SG (N=201)	TPC (N=194)	Total (N=395)
Subjects with Any Treatment-Emergent Adverse Events Leading to Study Drug Discontinuation	14 ( 7.0%)	6 ( 3.1%)	20 ( 5.1%)
Investigations	1 ( 0.5%)	0	1 ( 0.3%)
Alanine aminotransferase increased	1 ( 0.5%)	0	1 ( 0.3%)
Aspartate aminotransferase increased	1 ( 0.5%)	0	1 ( 0.3%)
Metabolism and nutrition disorders	0	1 ( 0.5%)	1 ( 0.3%)
Decreased appetite	0	1 ( 0.5%)	1 ( 0.3%)
Musculoskeletal and connective tissue disorders	1 ( 0.5%)	0	1 ( 0.3%)
Muscular weakness	1 ( 0.5%)	0	1 ( 0.3%)
Nervous system disorders	1 ( 0.5%)	3 ( 1.5%)	4 ( 1.0%)
Polyneuropathy	0	2 ( 1.0%)	2 ( 0.5%)
Nervous system disorder	1 ( 0.5%)	0	1 ( 0.3%)
Peripheral sensory neuropathy	0	1 ( 0.5%)	1 ( 0.3%)
Respiratory, thoracic and mediastinal disorders	1 ( 0.5%)	0	1 ( 0.3%)
Pleural effusion	1 ( 0.5%)	0	1 ( 0.3%)

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group. Multiple AEs are counted only once per subject for each SOC/PT. MedDRA Version 25.0 were used for coding. Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date. The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia. The analysis is based on Interim 2 data cut at 7/1/2022.

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**Anhang 4-G 7.5: Subgruppenanalysen**

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9352
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	95 (100.0%)	89 ( 96.7%)	
Patients (%) Without Events (Censored)	0	3 ( 3.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.537 (1.142, 2.070)
p-value			0.0047
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	106 (100.0%)	96 ( 94.1%)	
Patients (%) Without Events (Censored)	0	6 ( 5.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.545 (1.163, 2.053)
p-value			0.0031

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.6203
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	192 (100.0%)	177 ( 95.2%)	
Patients (%) Without Events (Censored)	0	9 ( 4.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.520 (1.232, 1.874)
p-value			<0.0001
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	9 (100.0%)	8 (100.0%)	
Patients (%) Without Events (Censored)	0	0	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.0, 0.3)	0.2 (0.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.250 (0.742, 6.828)
p-value			0.1430

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09

Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.7772
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	180 (100.0%)	163 ( 95.3%)	
Patients (%) Without Events (Censored)	0	8 ( 4.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.535 (1.234, 1.909)
p-value			0.0001
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	21 (100.0%)	22 ( 95.7%)	
Patients (%) Without Events (Censored)	0	1 ( 4.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.0, 0.1)	0.1 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.764 (0.945, 3.293)
p-value			0.0773

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.5780
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	155 (100.0%)	138 ( 93.9%)	
Patients (%) Without Events (Censored)	0	9 ( 6.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.478 (1.168, 1.870)
p-value			0.0012
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	46 (100.0%)	47 (100.0%)	
Patients (%) Without Events (Censored)	0	0	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.970 (1.274, 3.046)
p-value			0.0021

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.5511
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	141 (100.0%)	125 ( 94.7%)	
Patients (%) Without Events (Censored)	0	7 ( 5.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.522 (1.187, 1.951)
p-value			0.0008
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	13 (100.0%)	16 (100.0%)	
Patients (%) Without Events (Censored)	0	0	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.0, 0.3)	0.2 (0.1, 0.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.281 (1.037, 5.017)
p-value			0.0461

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9353
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	87 (100.0%)	86 ( 95.6%)	
Patients (%) Without Events (Censored)	0	4 ( 4.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.511 (1.112, 2.054)
p-value			0.0081
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	114 (100.0%)	99 ( 95.2%)	
Patients (%) Without Events (Censored)	0	5 ( 4.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.557 (1.181, 2.052)
p-value			0.0018

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9620
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	123 (100.0%)	115 ( 95.0%)	
Patients (%) Without Events (Censored)	0	6 ( 5.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.520 (1.170, 1.975)
p-value			0.0018
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	78 (100.0%)	70 ( 95.9%)	
Patients (%) Without Events (Censored)	0	3 ( 4.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.702 (1.212, 2.390)
p-value			0.0020

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.1545
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	116 (100.0%)	113 ( 95.0%)	
Patients (%) Without Events (Censored)	0	6 ( 5.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.391 (1.069, 1.811)
p-value			0.0168
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	80 (100.0%)	70 ( 95.9%)	
Patients (%) Without Events (Censored)	0	3 ( 4.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.821 (1.300, 2.551)
p-value			0.0004

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.0033
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	21 (100.0%)	23 (100.0%)	
Patients (%) Without Events (Censored)	0	0	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.0, 0.1)	0.1 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.660 (1.783, 7.514)
p-value			0.0002
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	126 (100.0%)	112 ( 93.3%)	
Patients (%) Without Events (Censored)	0	8 ( 6.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.575 (1.210, 2.049)
p-value			0.0006
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	
Patients (%) With Events	54 (100.0%)	50 ( 98.0%)	
Patients (%) Without Events (Censored)	0	1 ( 2.0%)	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.227 (0.831, 1.814)
p-value			0.3252

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9310
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	13 (100.0%)	13 ( 92.9%)	
Patients (%) Without Events (Censored)	0	1 ( 7.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.2 (0.1, NE)	0.1 (0.0, 0.5)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.923 (0.778, 4.753)
p-value			0.2417
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	181 (100.0%)	168 ( 95.5%)	
Patients (%) Without Events (Censored)	0	8 ( 4.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.531 (1.234, 1.899)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.4873
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	177 (100.0%)	162 ( 94.7%)	
Patients (%) Without Events (Censored)	0	9 ( 5.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.576 (1.264, 1.964)
p-value			<0.0001
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	24 (100.0%)	23 (100.0%)	
Patients (%) Without Events (Censored)	0	0	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.360 (0.754, 2.452)
p-value			0.3838

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.2713
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	122 (100.0%)	121 ( 93.8%)	
Patients (%) Without Events (Censored)	0	8 ( 6.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.682 (1.296, 2.185)
p-value			0.0001
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	79 (100.0%)	64 ( 98.5%)	
Patients (%) Without Events (Censored)	0	1 ( 1.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.340 (0.958, 1.875)
p-value			0.0847

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.4239
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	68 (100.0%)	70 ( 97.2%)	
Patients (%) Without Events (Censored)	0	2 ( 2.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.2 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.457 (1.038, 2.044)
p-value			0.0281
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	71 (100.0%)	70 ( 94.6%)	
Patients (%) Without Events (Censored)	0	4 ( 5.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.1)	0.2 (0.1, 0.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.605 (1.140, 2.262)
p-value			0.0084
Trop2: H-Score > 200			
Total Patients	40	26	
Patients (%) With Events	40 (100.0%)	25 ( 96.2%)	
Patients (%) Without Events (Censored)	0	1 ( 3.8%)	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.2.1.2: Time to the First Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

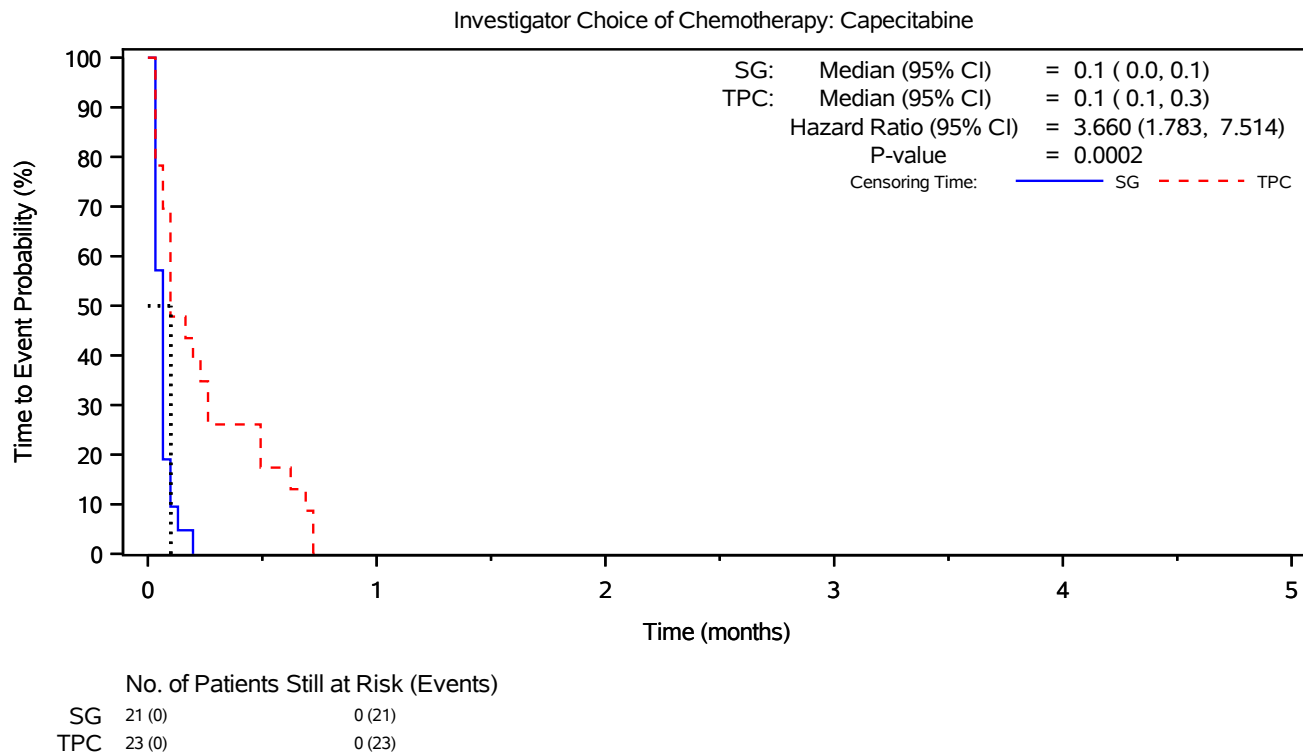
	SG (N=201)	TPC (N=194)	Treatment Comparison
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.1, 0.2)	0.1 (0.1, 0.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.187 (0.707, 1.994)
p-value			0.5344

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Figure 15.11.2.1.2: KM Plot for Time to the First TEAE by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

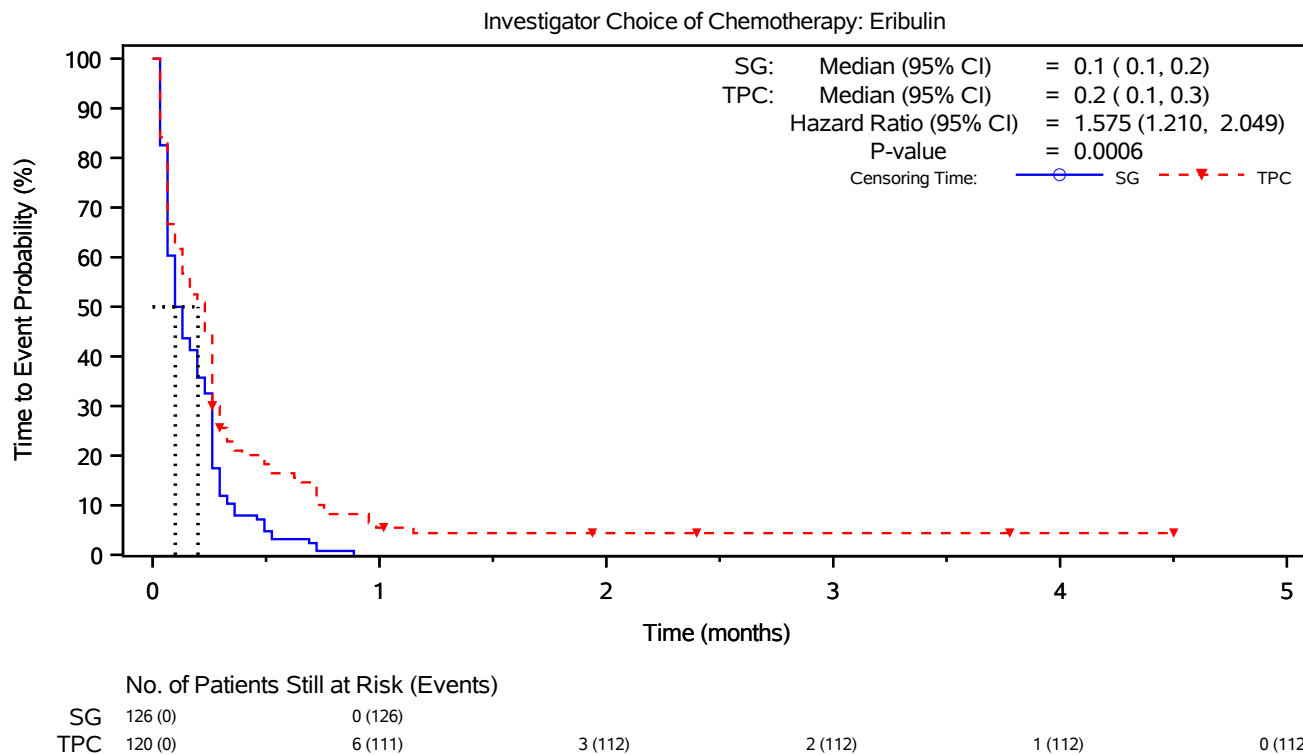
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.2.1.2: KM Plot for Time to the First TEAE by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

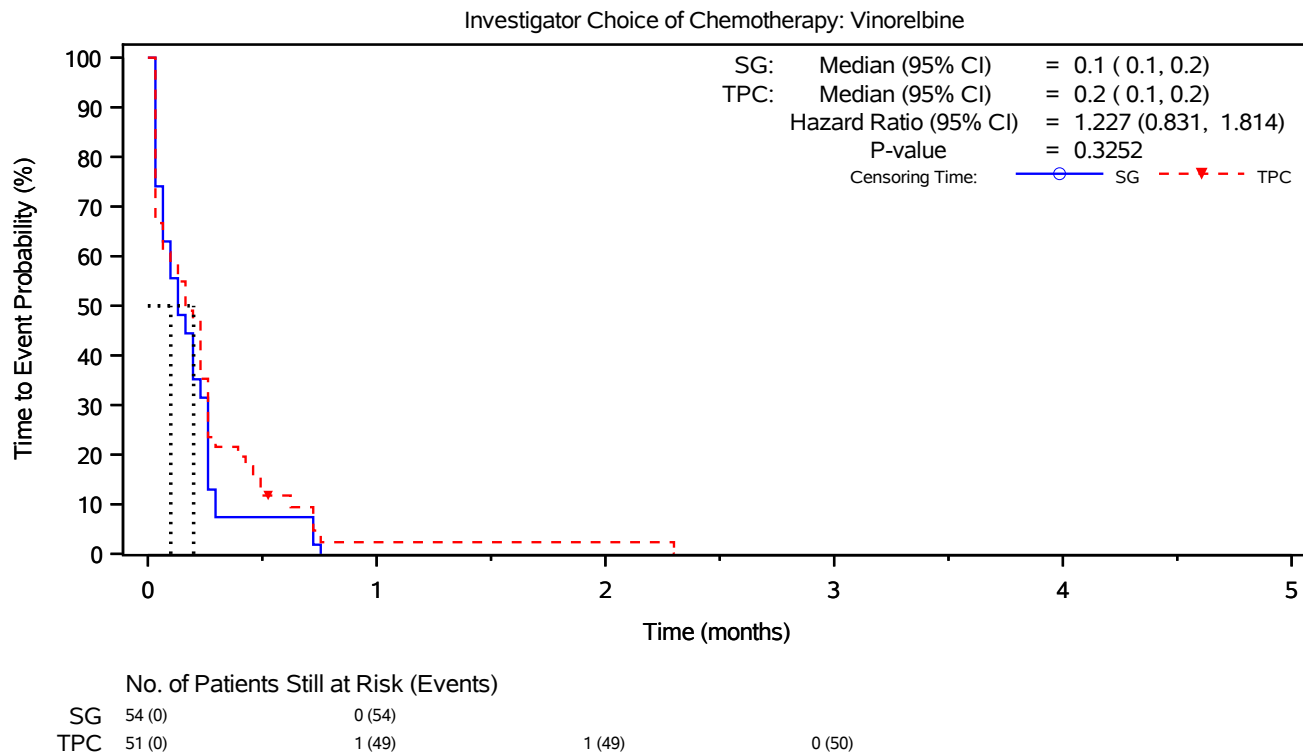
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.2.1.2: KM Plot for Time to the First TEAE by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9152
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	26 ( 27.4%)	17 ( 18.5%)	
Patients (%) Without Events (Censored)	69 ( 72.6%)	75 ( 81.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (10.2, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.387 (0.752, 2.558)
p-value			0.2954
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	29 ( 27.4%)	17 ( 16.7%)	
Patients (%) Without Events (Censored)	77 ( 72.6%)	85 ( 83.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	17.9 (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.453 (0.794, 2.660)
p-value			0.2217

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9796
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	53 ( 27.6%)	34 ( 18.3%)	
Patients (%) Without Events (Censored)	139 ( 72.4%)	152 ( 81.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.379 (0.895, 2.126)
p-value			0.1434
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	2 ( 22.2%)	0	
Patients (%) Without Events (Censored)	7 ( 77.8%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2416

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.3920
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	49 ( 27.2%)	28 ( 16.4%)	
Patients (%) Without Events (Censored)	131 ( 72.8%)	143 ( 83.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.529 (0.959, 2.437)
p-value			0.0719
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	6 ( 28.6%)	6 ( 26.1%)	
Patients (%) Without Events (Censored)	15 ( 71.4%)	17 ( 73.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.7, NE)	NE (2.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.892 (0.279, 2.848)
p-value			0.8464

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.1134
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	35 ( 22.6%)	25 ( 17.0%)	
Patients (%) Without Events (Censored)	120 ( 77.4%)	122 ( 83.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.172 (0.700, 1.964)
p-value			0.5445
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	20 ( 43.5%)	9 ( 19.1%)	
Patients (%) Without Events (Censored)	26 ( 56.5%)	38 ( 80.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	17.9 (2.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.382 (1.082, 5.241)
p-value			0.0261

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09

Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.8856
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	43 ( 30.5%)	26 ( 19.7%)	
Patients (%) Without Events (Censored)	98 ( 69.5%)	106 ( 80.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	17.9 (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.368 (0.837, 2.236)
p-value			0.2094
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	1 ( 7.7%)	1 ( 6.3%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	15 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.110 (0.069, 17.806)
p-value			0.9415

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.3946
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	20 ( 23.0%)	16 ( 17.8%)	
Patients (%) Without Events (Censored)	67 ( 77.0%)	74 ( 82.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.117 (0.575, 2.168)
p-value			0.7460
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	35 ( 30.7%)	18 ( 17.3%)	
Patients (%) Without Events (Censored)	79 ( 69.3%)	86 ( 82.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.688 (0.955, 2.982)
p-value			0.0678

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.1981
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	36 ( 29.3%)	19 ( 15.7%)	
Patients (%) Without Events (Censored)	87 ( 70.7%)	102 ( 84.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.807 (1.035, 3.154)
p-value			0.0348
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	19 ( 24.4%)	15 ( 20.5%)	
Patients (%) Without Events (Censored)	59 ( 75.6%)	58 ( 79.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	17.9 (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.944 (0.475, 1.876)
p-value			0.8706

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.6029
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	31 ( 26.7%)	17 ( 14.3%)	
Patients (%) Without Events (Censored)	85 ( 73.3%)	102 ( 85.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.723 (0.951, 3.123)
p-value			0.0704
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	24 ( 30.0%)	16 ( 21.9%)	
Patients (%) Without Events (Censored)	56 ( 70.0%)	57 ( 78.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	17.9 (6.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.295 (0.687, 2.443)
p-value			0.4220

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.7822
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	5 ( 23.8%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	16 ( 76.2%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (4.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.691 (0.404, 7.083)
p-value			0.4675
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	37 ( 29.4%)	24 ( 20.0%)	
Patients (%) Without Events (Censored)	89 ( 70.6%)	96 ( 80.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	17.9 (10.2, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.424 (0.850, 2.383)
p-value			0.1771
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	
Patients (%) With Events	13 ( 24.1%)	7 ( 13.7%)	
Patients (%) Without Events (Censored)	41 ( 75.9%)	44 ( 86.3%)	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.412 (0.560, 3.562)
p-value			0.4637

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.0952
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	3 ( 21.4%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	11 ( 78.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.3, NE)	NE (1.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.146 (0.013, 1.700)
p-value			0.0911
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	51 ( 28.2%)	30 ( 17.0%)	
Patients (%) Without Events (Censored)	130 ( 71.8%)	146 ( 83.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.551 (0.986, 2.438)
p-value			0.0557

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.7918
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	47 ( 26.6%)	30 ( 17.5%)	
Patients (%) Without Events (Censored)	130 ( 73.4%)	141 ( 82.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.398 (0.882, 2.214)
p-value			0.1525
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	8 ( 33.3%)	4 ( 17.4%)	
Patients (%) Without Events (Censored)	16 ( 66.7%)	19 ( 82.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.7, NE)	NE (5.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.576 (0.473, 5.254)
p-value			0.4549

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.6962
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	33 ( 27.0%)	23 ( 17.8%)	
Patients (%) Without Events (Censored)	89 ( 73.0%)	106 ( 82.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (17.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.346 (0.786, 2.305)
p-value			0.2779
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	22 ( 27.8%)	11 ( 16.9%)	
Patients (%) Without Events (Censored)	57 ( 72.2%)	54 ( 83.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.569 (0.760, 3.238)
p-value			0.2191

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.7738
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	18 ( 26.5%)	12 ( 16.7%)	
Patients (%) Without Events (Censored)	50 ( 73.5%)	60 ( 83.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.603 (0.771, 3.334)
p-value			0.2041
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	20 ( 28.2%)	14 ( 18.9%)	
Patients (%) Without Events (Censored)	51 ( 71.8%)	60 ( 81.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.219 (0.611, 2.430)
p-value			0.5725
Trop2: H-Score > 200			
Total Patients	40	26	
Patients (%) With Events	13 ( 32.5%)	6 ( 23.1%)	
Patients (%) Without Events (Censored)	27 ( 67.5%)	20 ( 76.9%)	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.2.2: Time to the First Serious Treatment-Emergent Adverse Event (SAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	17.9 (10.2, NE)	NE (4.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.262 (0.473, 3.363)
p-value			0.6400

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.3681
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	72 ( 75.8%)	48 ( 52.2%)	
Patients (%) Without Events (Censored)	23 ( 24.2%)	44 ( 47.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.5, 1.6)	2.9 (1.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.663 (1.154, 2.398)
p-value			0.0055
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	79 ( 74.5%)	62 ( 60.8%)	
Patients (%) Without Events (Censored)	27 ( 25.5%)	40 ( 39.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.6, 1.0)	1.9 (0.7, 3.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.341 (0.961, 1.872)
p-value			0.0864

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.7983
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	144 ( 75.0%)	105 ( 56.5%)	
Patients (%) Without Events (Censored)	48 ( 25.0%)	81 ( 43.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.7, 1.0)	2.4 (1.0, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.477 (1.148, 1.900)
p-value			0.0023
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	7 ( 77.8%)	5 ( 62.5%)	
Patients (%) Without Events (Censored)	2 ( 22.2%)	3 ( 37.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.2, NE)	4.5 (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.483 (0.718, 8.589)
p-value			0.1379

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.3299
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	137 ( 76.1%)	96 ( 56.1%)	
Patients (%) Without Events (Censored)	43 ( 23.9%)	75 ( 43.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.6, 1.0)	2.6 (1.2, 4.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.549 (1.193, 2.012)
p-value			0.0010
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	14 ( 66.7%)	14 ( 60.9%)	
Patients (%) Without Events (Censored)	7 ( 33.3%)	9 ( 39.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.4, NE)	1.7 (0.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.022 (0.486, 2.149)
p-value			0.9474

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.2531
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	114 ( 73.5%)	84 ( 57.1%)	
Patients (%) Without Events (Censored)	41 ( 26.5%)	63 ( 42.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.6, 1.2)	2.1 (0.9, 3.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.371 (1.034, 1.818)
p-value			0.0284
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	37 ( 80.4%)	26 ( 55.3%)	
Patients (%) Without Events (Censored)	9 ( 19.6%)	21 ( 44.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 1.0)	3.7 (0.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.919 (1.156, 3.187)
p-value			0.0106

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.5717
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	109 ( 77.3%)	79 ( 59.8%)	
Patients (%) Without Events (Censored)	32 ( 22.7%)	53 ( 40.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 1.0)	2.1 (0.9, 3.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.467 (1.097, 1.961)
p-value			0.0097
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	8 ( 61.5%)	9 ( 56.3%)	
Patients (%) Without Events (Censored)	5 ( 38.5%)	7 ( 43.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (0.3, NE)	0.7 (0.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.148 (0.442, 2.981)
p-value			0.8104

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.1818
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	59 ( 67.8%)	51 ( 56.7%)	
Patients (%) Without Events (Censored)	28 ( 32.2%)	39 ( 43.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.6, 1.9)	2.9 (1.0, 7.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.212 (0.832, 1.765)
p-value			0.3183
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	92 ( 80.7%)	59 ( 56.7%)	
Patients (%) Without Events (Censored)	22 ( 19.3%)	45 ( 43.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 1.0)	2.1 (0.7, 3.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.723 (1.241, 2.390)
p-value			0.0010

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.5056
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	90 ( 73.2%)	69 ( 57.0%)	
Patients (%) Without Events (Censored)	33 ( 26.8%)	52 ( 43.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.7, 1.2)	2.3 (1.0, 4.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.392 (1.017, 1.906)
p-value			0.0365
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	61 ( 78.2%)	41 ( 56.2%)	
Patients (%) Without Events (Censored)	17 ( 21.8%)	32 ( 43.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 1.0)	2.4 (0.7, 7.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.635 (1.100, 2.431)
p-value			0.0161

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.4184
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	86 ( 74.1%)	66 ( 55.5%)	
Patients (%) Without Events (Censored)	30 ( 25.9%)	53 ( 44.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.6, 1.6)	2.4 (0.9, 4.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.397 (1.013, 1.926)
p-value			0.0363
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	63 ( 78.8%)	43 ( 58.9%)	
Patients (%) Without Events (Censored)	17 ( 21.3%)	30 ( 41.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.4, 1.0)	2.6 (0.9, 5.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.746 (1.183, 2.577)
p-value			0.0054

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.0188
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	17 ( 81.0%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	4 ( 19.0%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.4, 3.0)	NE (7.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.917 (1.603, 9.572)
p-value			0.0013
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	92 ( 73.0%)	70 ( 58.3%)	
Patients (%) Without Events (Censored)	34 ( 27.0%)	50 ( 41.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 1.2)	2.4 (1.2, 4.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.402 (1.027, 1.915)
p-value			0.0301
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	
Patients (%) With Events	42 ( 77.8%)	33 ( 64.7%)	
Patients (%) Without Events (Censored)	12 ( 22.2%)	18 ( 35.3%)	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.5, 1.0)	0.9 (0.5, 2.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.154 (0.727, 1.830)
p-value			0.5747

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.4871
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	8 ( 61.5%)	7 ( 50.0%)	
Patients (%) Without Events (Censored)	5 ( 38.5%)	7 ( 50.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.3, NE)	0.9 (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.014 (0.354, 2.900)
p-value			0.9879
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	138 ( 76.2%)	101 ( 57.4%)	
Patients (%) Without Events (Censored)	43 ( 23.8%)	75 ( 42.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 1.0)	2.3 (1.1, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.524 (1.179, 1.971)
p-value			0.0012

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9132
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	132 ( 74.6%)	96 ( 56.1%)	
Patients (%) Without Events (Censored)	45 ( 25.4%)	75 ( 43.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 1.0)	2.4 (1.0, 3.5)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.490 (1.145, 1.939)
p-value			0.0028
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	19 ( 79.2%)	14 ( 60.9%)	
Patients (%) Without Events (Censored)	5 ( 20.8%)	9 ( 39.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.5 (0.6, 3.7)	5.0 (0.7, 7.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.419 (0.711, 2.833)
p-value			0.3212

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9678
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	92 ( 75.4%)	73 ( 56.6%)	
Patients (%) Without Events (Censored)	30 ( 24.6%)	56 ( 43.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.6, 1.0)	2.4 (0.9, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.505 (1.107, 2.048)
p-value			0.0087
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	59 ( 74.7%)	37 ( 56.9%)	
Patients (%) Without Events (Censored)	20 ( 25.3%)	28 ( 43.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 1.3)	2.7 (0.7, 9.6)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.461 (0.968, 2.206)
p-value			0.0692

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.7104
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	54 ( 79.4%)	42 ( 58.3%)	
Patients (%) Without Events (Censored)	14 ( 20.6%)	30 ( 41.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.4, 1.0)	1.1 (0.7, 7.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.732 (1.155, 2.597)
p-value			0.0069
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	51 ( 71.8%)	43 ( 58.1%)	
Patients (%) Without Events (Censored)	20 ( 28.2%)	31 ( 41.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.7, 2.8)	2.4 (0.7, 5.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.092 (0.725, 1.646)
p-value			0.6804
Trop2: H-Score > 200			
Total Patients	40	26	
Patients (%) With Events	31 ( 77.5%)	17 ( 65.4%)	
Patients (%) Without Events (Censored)	9 ( 22.5%)	9 ( 34.6%)	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.2.3.2: Time to the First Grade 3 or Higher Treatment-Emergent Adverse Event (TEAE) by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.3, 0.9)	2.1 (0.6, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.547 (0.854, 2.804)
p-value			0.1458

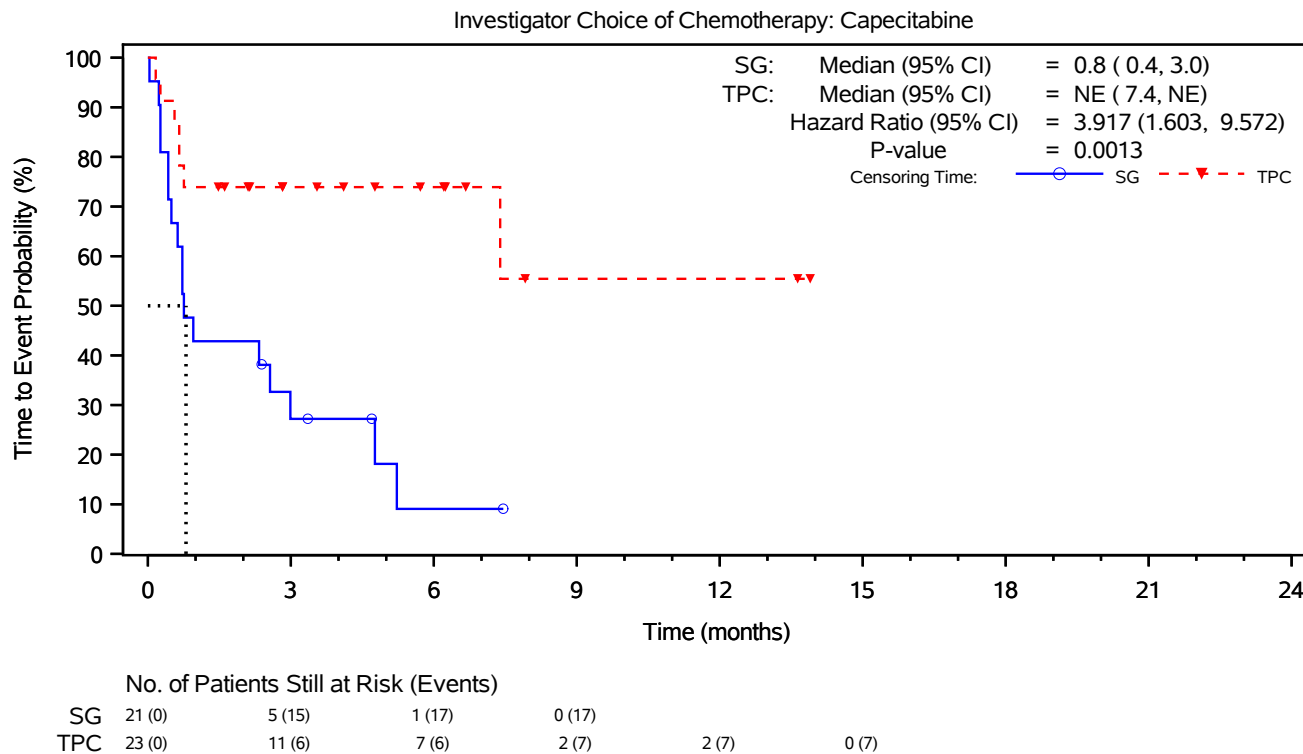
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Figure 15.11.2.3.2: KM Plot for Time to the First Grade 3 or Higher TEAE by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

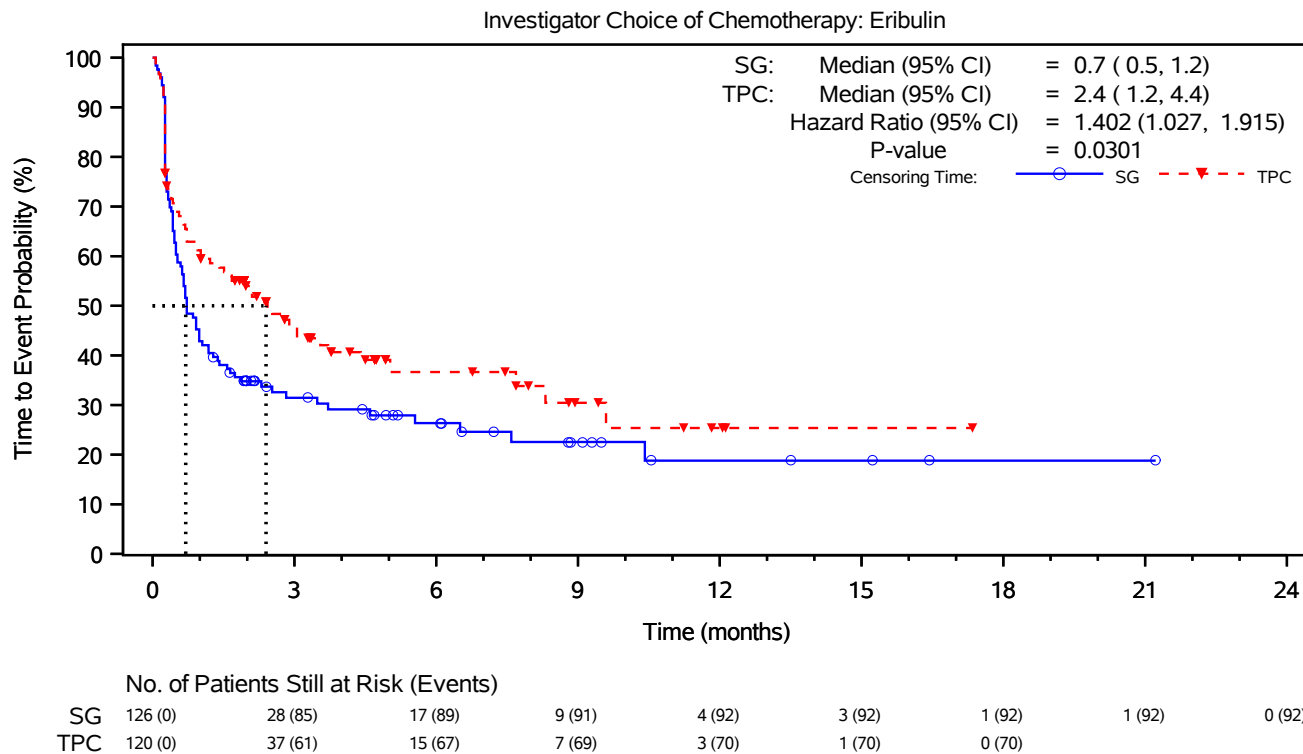
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.2.3.2: KM Plot for Time to the First Grade 3 or Higher TEAE by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

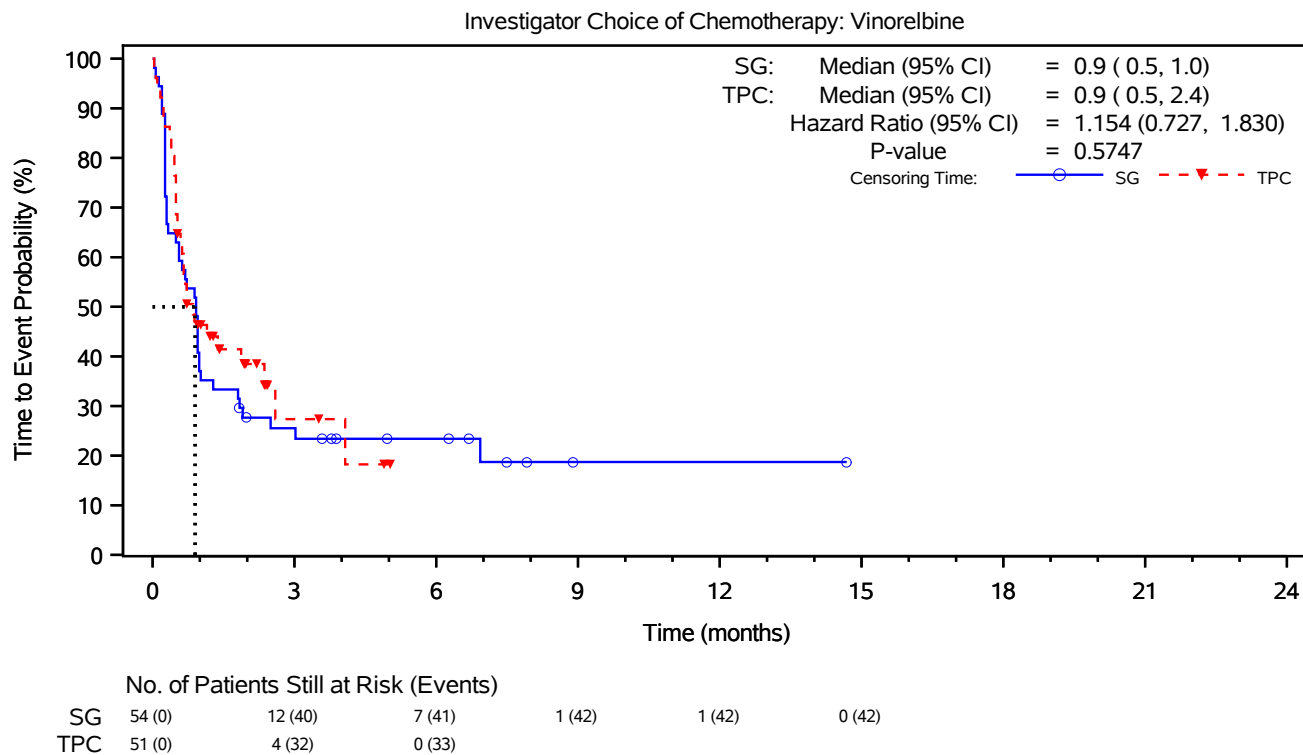
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9206
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	5 ( 5.3%)	2 ( 2.2%)	
Patients (%) Without Events (Censored)	90 ( 94.7%)	90 ( 97.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.757 (0.334, 9.252)
p-value			0.5007
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	9 ( 8.5%)	4 ( 3.9%)	
Patients (%) Without Events (Censored)	97 ( 91.5%)	98 ( 96.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.814 (0.554, 5.935)
p-value			0.3183

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9889
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	11 ( 5.7%)	6 ( 3.2%)	
Patients (%) Without Events (Censored)	181 ( 94.3%)	180 ( 96.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.450 (0.531, 3.960)
p-value			0.4663
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	3 ( 33.3%)	0	
Patients (%) Without Events (Censored)	6 ( 66.7%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	7.2 (0.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1247

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9907
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	12 ( 6.7%)	6 ( 3.5%)	
Patients (%) Without Events (Censored)	168 ( 93.3%)	165 ( 96.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.535 (0.571, 4.125)
p-value			0.3921
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	2 ( 9.5%)	0	
Patients (%) Without Events (Censored)	19 ( 90.5%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2314

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.1416
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	5 ( 3.2%)	4 ( 2.7%)	
Patients (%) Without Events (Censored)	150 ( 96.8%)	143 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.106 (0.297, 4.128)
p-value			0.8800
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	9 ( 19.6%)	2 ( 4.3%)	
Patients (%) Without Events (Censored)	37 ( 80.4%)	45 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (7.2, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.963 (0.853, 18.413)
p-value			0.0579

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.8537
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	11 ( 7.8%)	5 ( 3.8%)	
Patients (%) Without Events (Censored)	130 ( 92.2%)	127 ( 96.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.491 (0.511, 4.349)
p-value			0.4620
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	1 ( 7.7%)	1 ( 6.3%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	15 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.192 (0.075, 19.059)
p-value			0.9012

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.5589
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	1 ( 1.1%)	1 ( 1.1%)	
Patients (%) Without Events (Censored)	86 ( 98.9%)	89 ( 98.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.714 (0.045, 11.415)
p-value			0.8106
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	13 ( 11.4%)	5 ( 4.8%)	
Patients (%) Without Events (Censored)	101 ( 88.6%)	99 ( 95.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.976 (0.699, 5.583)
p-value			0.1908

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9820
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	9 ( 7.3%)	4 ( 3.3%)	
Patients (%) Without Events (Censored)	114 ( 92.7%)	117 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.882 (0.577, 6.137)
p-value			0.2870
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	5 ( 6.4%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	73 ( 93.6%)	71 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.691 (0.319, 8.957)
p-value			0.5321

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.5759
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	9 ( 7.8%)	3 ( 2.5%)	
Patients (%) Without Events (Censored)	107 ( 92.2%)	116 ( 97.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.268 (0.602, 8.541)
p-value			0.2145
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	5 ( 6.3%)	3 ( 4.1%)	
Patients (%) Without Events (Censored)	75 ( 93.8%)	70 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.360 (0.325, 5.699)
p-value			0.6724

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9889
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	0	
Patients (%) Without Events (Censored)	18 ( 85.7%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (4.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0681
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	8 ( 6.3%)	3 ( 2.5%)	
Patients (%) Without Events (Censored)	118 ( 93.7%)	117 ( 97.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.339 (0.620, 8.827)
p-value			0.1968
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	
Patients (%) With Events	3 ( 5.6%)	3 ( 5.9%)	
Patients (%) Without Events (Censored)	51 ( 94.4%)	48 ( 94.1%)	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (13.0, NE)	NE (5.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.433 (0.066, 2.842)
p-value			0.3725

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9903
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (7.2, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	13 ( 7.2%)	6 ( 3.4%)	
Patients (%) Without Events (Censored)	168 ( 92.8%)	170 ( 96.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.772 (0.669, 4.696)
p-value			0.2435

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9890
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	11 ( 6.2%)	6 ( 3.5%)	
Patients (%) Without Events (Censored)	166 ( 93.8%)	165 ( 96.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.462 (0.536, 3.986)
p-value			0.4553
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	3 ( 12.5%)	0	
Patients (%) Without Events (Censored)	21 ( 87.5%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (7.2, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1266

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.4044
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	6 ( 4.9%)	4 ( 3.1%)	
Patients (%) Without Events (Censored)	116 ( 95.1%)	125 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.179 (0.325, 4.286)
p-value			0.8019
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	8 ( 10.1%)	2 ( 3.1%)	
Patients (%) Without Events (Censored)	71 ( 89.9%)	63 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.923 (0.619, 13.793)
p-value			0.1555

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Interaction p-value			0.9925
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	2 ( 2.9%)	3 ( 4.2%)	
Patients (%) Without Events (Censored)	66 ( 97.1%)	69 ( 95.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.662 (0.110, 3.968)
p-value			0.6494
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	8 ( 11.3%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	63 ( 88.7%)	72 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.051 (0.636, 14.634)
p-value			0.1440
Trop2: H-Score > 200			
Total Patients	40	26	
Patients (%) With Events	2 ( 5.0%)	0	
Patients (%) Without Events (Censored)	38 ( 95.0%)	26 (100.0%)	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.5.2: Time to the First TEAE Leading to Any Study Drug Discontinuation by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3124

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9150
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	90 ( 94.7%)	74 ( 80.4%)	
Patients (%) Without Events (Censored)	5 ( 5.3%)	18 ( 19.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	0.5 (0.4, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.506 (1.105, 2.052)
p-value			0.0096
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	97 ( 91.5%)	83 ( 81.4%)	
Patients (%) Without Events (Censored)	9 ( 8.5%)	19 ( 18.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.4 (0.3, 0.5)	0.7 (0.5, 1.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.617 (1.201, 2.176)
p-value			0.0014

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.8643
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	60 ( 63.2%)	25 ( 27.2%)	
Patients (%) Without Events (Censored)	35 ( 36.8%)	67 ( 72.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (0.9, 3.4)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.915 (1.827, 4.652)
p-value			<0.0001
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	60 ( 56.6%)	24 ( 23.5%)	
Patients (%) Without Events (Censored)	46 ( 43.4%)	78 ( 76.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.4 (1.0, 6.0)	NE (5.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.182 (1.977, 5.123)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.1207
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	7 ( 7.4%)	3 ( 3.3%)	
Patients (%) Without Events (Censored)	88 ( 92.6%)	89 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.260 (0.584, 8.741)
p-value			0.2251
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	5 ( 4.7%)	8 ( 7.8%)	
Patients (%) Without Events (Censored)	101 ( 95.3%)	94 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.558 (0.182, 1.707)
p-value			0.2998

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.7002
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	29 ( 30.5%)	17 ( 18.5%)	
Patients (%) Without Events (Censored)	66 ( 69.5%)	75 ( 81.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (7.3, NE)	NE (11.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.585 (0.870, 2.889)
p-value			0.1270
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	27 ( 25.5%)	18 ( 17.6%)	
Patients (%) Without Events (Censored)	79 ( 74.5%)	84 ( 82.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	28.1 (28.1, NE)	NE (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.373 (0.752, 2.508)
p-value			0.3026

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.2623
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	43 ( 45.3%)	26 ( 28.3%)	
Patients (%) Without Events (Censored)	52 ( 54.7%)	66 ( 71.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	7.9 (4.3, 13.7)	NE (5.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.388 (0.852, 2.261)
p-value			0.1864
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	33 ( 31.1%)	29 ( 28.4%)	
Patients (%) Without Events (Censored)	73 ( 68.9%)	73 ( 71.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	15.1 (13.4, 21.1)	NE (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.951 (0.573, 1.578)
p-value			0.8419

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.3628
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	18 ( 18.9%)	23 ( 25.0%)	
Patients (%) Without Events (Censored)	77 ( 81.1%)	69 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.8, NE)	NE (9.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.596 (0.320, 1.110)
p-value			0.0999
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	17 ( 16.0%)	31 ( 30.4%)	
Patients (%) Without Events (Censored)	89 ( 84.0%)	71 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	6.2 (5.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.371 (0.203, 0.679)
p-value			0.0008

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.0523
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	74 ( 77.9%)	44 ( 47.8%)	
Patients (%) Without Events (Censored)	21 ( 22.1%)	48 ( 52.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.7)	4.4 (2.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.096 (1.439, 3.052)
p-value			<0.0001
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	73 ( 68.9%)	59 ( 57.8%)	
Patients (%) Without Events (Censored)	33 ( 31.1%)	43 ( 42.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.7, 1.3)	1.9 (0.7, 4.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.298 (0.919, 1.831)
p-value			0.1432

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9630
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	178 ( 92.7%)	150 ( 80.6%)	
Patients (%) Without Events (Censored)	14 ( 7.3%)	36 ( 19.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	0.6 (0.5, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.545 (1.241, 1.924)
p-value			<0.0001
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	9 (100.0%)	7 ( 87.5%)	
Patients (%) Without Events (Censored)	0	1 ( 12.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.8)	0.6 (0.2, 1.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.023 (0.667, 6.137)
p-value			0.1859

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.8063
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	115 ( 59.9%)	47 ( 25.3%)	
Patients (%) Without Events (Censored)	77 ( 40.1%)	139 ( 74.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (1.3, 3.3)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.077 (2.190, 4.324)
p-value			<0.0001
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	5 ( 55.6%)	2 ( 25.0%)	
Patients (%) Without Events (Censored)	4 ( 44.4%)	6 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.8 (0.2, NE)	NE (0.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.359 (0.444, 12.540)
p-value			0.3007

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			1.0000
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	12 ( 6.3%)	11 ( 5.9%)	
Patients (%) Without Events (Censored)	180 ( 93.8%)	175 ( 94.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.019 (0.450, 2.311)
p-value			0.9641
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.9786
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	54 ( 28.1%)	35 ( 18.8%)	
Patients (%) Without Events (Censored)	138 ( 71.9%)	151 ( 81.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	28.1 (28.1, NE)	NE (11.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.418 (0.924, 2.177)
p-value			0.1097
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	2 ( 22.2%)	0	
Patients (%) Without Events (Censored)	7 ( 77.8%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (0.8, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2416

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.1780
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	71 ( 37.0%)	54 ( 29.0%)	
Patients (%) Without Events (Censored)	121 ( 63.0%)	132 ( 71.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.4 (6.5, 15.8)	NE (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.108 (0.776, 1.580)
p-value			0.5740
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	5 ( 55.6%)	1 ( 12.5%)	
Patients (%) Without Events (Censored)	4 ( 44.4%)	7 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.2 (0.7, NE)	NE (0.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.059 (0.473, 34.871)
p-value			0.1668

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.3072
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	33 ( 17.2%)	53 ( 28.5%)	
Patients (%) Without Events (Censored)	159 ( 82.8%)	133 ( 71.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (6.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.451 (0.290, 0.703)
p-value			0.0003
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	2 ( 22.2%)	1 ( 12.5%)	
Patients (%) Without Events (Censored)	7 ( 77.8%)	7 ( 87.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (3.1, NE)	NE (5.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.097 (0.098, 12.287)
p-value			0.9400

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.5947
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	141 ( 73.4%)	98 ( 52.7%)	
Patients (%) Without Events (Censored)	51 ( 26.6%)	88 ( 47.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.7, 0.9)	2.5 (1.6, 4.9)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.653 (1.275, 2.141)
p-value			0.0001
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	6 ( 66.7%)	5 ( 62.5%)	
Patients (%) Without Events (Censored)	3 ( 33.3%)	3 ( 37.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.6 (0.3, NE)	1.3 (0.3, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.288 (0.392, 4.229)
p-value			0.6818

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Safety Population  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.4786
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	167 ( 92.8%)	137 ( 80.1%)	
Patients (%) Without Events (Censored)	13 ( 7.2%)	34 ( 19.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	0.7 (0.5, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.593 (1.268, 2.001)
p-value			<0.0001
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	20 ( 95.2%)	20 ( 87.0%)	
Patients (%) Without Events (Censored)	1 ( 4.8%)	3 ( 13.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.5 (0.3, 0.7)	0.4 (0.3, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.246 (0.667, 2.328)
p-value			0.4737

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9429
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: Yes</b>			
Total Patients	180	171	
Patients (%) With Events	108 ( 60.0%)	44 ( 25.7%)	
Patients (%) Without Events (Censored)	72 ( 40.0%)	127 ( 74.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.7 (1.2, 3.4)	NE (8.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.053 (2.148, 4.338)
p-value			<0.0001
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: No</b>			
Total Patients	21	23	
Patients (%) With Events	12 ( 57.1%)	5 ( 21.7%)	
Patients (%) Without Events (Censored)	9 ( 42.9%)	18 ( 78.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	2.7 (0.5, NE)	NE (7.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.150 (1.100, 9.024)
p-value			0.0245

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.3158
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	11 ( 6.1%)	8 ( 4.7%)	
Patients (%) Without Events (Censored)	169 ( 93.9%)	163 ( 95.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.261 (0.507, 3.135)
p-value			0.6173
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	20 ( 95.2%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.349 (0.036, 3.358)
p-value			0.3399

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Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.6112
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: Yes</b>			
Total Patients	180	171	
Patients (%) With Events	49 ( 27.2%)	30 ( 17.5%)	
Patients (%) Without Events (Censored)	131 ( 72.8%)	141 ( 82.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	28.1 (28.1, NE)	NE (11.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.447 (0.916, 2.286)
p-value			0.1116
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: No</b>			
Total Patients	21	23	
Patients (%) With Events	7 ( 33.3%)	5 ( 21.7%)	
Patients (%) Without Events (Censored)	14 ( 66.7%)	18 ( 78.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	7.3 (1.0, NE)	11.7 (11.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.543 (0.736, 8.781)
p-value			0.1293

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.1877
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: Yes</b>			
Total Patients	180	171	
Patients (%) With Events	69 ( 38.3%)	45 ( 26.3%)	
Patients (%) Without Events (Censored)	111 ( 61.7%)	126 ( 73.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	13.4 (6.4, 15.8)	NE (6.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.289 (0.885, 1.880)
p-value			0.1847
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: No</b>			
Total Patients	21	23	
Patients (%) With Events	7 ( 33.3%)	10 ( 43.5%)	
Patients (%) Without Events (Censored)	14 ( 66.7%)	13 ( 56.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	9.1 (1.4, NE)	NE (0.9, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.735 (0.279, 1.938)
p-value			0.5374

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.5349
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	34 ( 18.9%)	50 ( 29.2%)	
Patients (%) Without Events (Censored)	146 ( 81.1%)	121 ( 70.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	9.7 (6.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.481 (0.309, 0.748)
p-value			0.0009
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	4 ( 17.4%)	
Patients (%) Without Events (Censored)	20 ( 95.2%)	19 ( 82.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (6.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.233 (0.025, 2.176)
p-value			0.1680

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
Neutropenia+			
Interaction p-value			0.1534
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	135 ( 75.0%)	89 ( 52.0%)	
Patients (%) Without Events (Censored)	45 ( 25.0%)	82 ( 48.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 0.9)	4.1 (1.6, 7.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.726 (1.319, 2.259)
p-value			<0.0001
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	12 ( 57.1%)	14 ( 60.9%)	
Patients (%) Without Events (Censored)	9 ( 42.9%)	9 ( 39.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.6, NE)	1.9 (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.020 (0.467, 2.228)
p-value			0.9767

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.0131
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	143 ( 92.3%)	119 ( 81.0%)	
Patients (%) Without Events (Censored)	12 ( 7.7%)	28 ( 19.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.4 (0.3, 0.5)	0.5 (0.4, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.346 (1.054, 1.720)
p-value			0.0168
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	44 ( 95.7%)	38 ( 80.9%)	
Patients (%) Without Events (Censored)	2 ( 4.3%)	9 ( 19.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.4)	0.7 (0.5, 1.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.676 (1.701, 4.210)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.2896
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	87 ( 56.1%)	35 ( 23.8%)	
Patients (%) Without Events (Censored)	68 ( 43.9%)	112 ( 76.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.4 (1.5, 6.0)	NE (8.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.806 (1.893, 4.161)
p-value			<0.0001
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	33 ( 71.7%)	14 ( 29.8%)	
Patients (%) Without Events (Censored)	13 ( 28.3%)	33 ( 70.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 2.7)	7.6 (4.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.187 (2.228, 7.868)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.0750
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	7 ( 4.5%)	10 ( 6.8%)	
Patients (%) Without Events (Censored)	148 ( 95.5%)	137 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.622 (0.236, 1.634)
p-value			0.3295
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	5 ( 10.9%)	1 ( 2.1%)	
Patients (%) Without Events (Censored)	41 ( 89.1%)	46 ( 97.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.438 (0.635, 46.551)
p-value			0.0824

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.6872
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	43 ( 27.7%)	24 ( 16.3%)	
Patients (%) Without Events (Censored)	112 ( 72.3%)	123 ( 83.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (12.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.601 (0.970, 2.643)
p-value			0.0630
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	13 ( 28.3%)	11 ( 23.4%)	
Patients (%) Without Events (Censored)	33 ( 71.7%)	36 ( 76.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	28.1 (5.6, NE)	11.7 (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.340 (0.589, 3.048)
p-value			0.4856

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.1307
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	55 ( 35.5%)	43 ( 29.3%)	
Patients (%) Without Events (Censored)	100 ( 64.5%)	104 ( 70.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	13.7 (7.9, 15.8)	NE (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.020 (0.683, 1.524)
p-value			0.9226
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	21 ( 45.7%)	12 ( 25.5%)	
Patients (%) Without Events (Censored)	25 ( 54.3%)	35 ( 74.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.8 (2.7, NE)	NE (3.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.964 (0.965, 3.997)
p-value			0.0582

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.1611
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	25 ( 16.1%)	43 ( 29.3%)	
Patients (%) Without Events (Censored)	130 ( 83.9%)	104 ( 70.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	9.1 (5.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.390 (0.236, 0.645)
p-value			0.0001
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	10 ( 21.7%)	11 ( 23.4%)	
Patients (%) Without Events (Censored)	36 ( 78.3%)	36 ( 76.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	14.8 (14.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.801 (0.338, 1.896)
p-value			0.6106

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.5348
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	115 ( 74.2%)	80 ( 54.4%)	
Patients (%) Without Events (Censored)	40 ( 25.8%)	67 ( 45.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	2.4 (0.8, 4.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.534 (1.152, 2.044)
p-value			0.0032
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	32 ( 69.6%)	23 ( 48.9%)	
Patients (%) Without Events (Censored)	14 ( 30.4%)	24 ( 51.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.7, 1.0)	4.4 (1.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.919 (1.117, 3.296)
p-value			0.0169

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.2200
Race: White			
Total Patients	141	132	
Patients (%) With Events	132 ( 93.6%)	107 ( 81.1%)	
Patients (%) Without Events (Censored)	9 ( 6.4%)	25 ( 18.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	0.7 (0.5, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.633 (1.263, 2.113)
p-value			0.0002
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	13 (100.0%)	13 ( 81.3%)	
Patients (%) Without Events (Censored)	0	3 ( 18.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.0, 0.3)	0.5 (0.3, 0.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.599 (1.166, 5.796)
p-value			0.0194

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.4806
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	85 ( 60.3%)	33 ( 25.0%)	
Patients (%) Without Events (Censored)	56 ( 39.7%)	99 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (1.2, 2.9)	NE (6.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.088 (2.062, 4.625)
p-value			<0.0001
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	7 ( 53.8%)	5 ( 31.3%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	11 ( 68.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.0 (0.1, NE)	NE (1.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.717 (0.522, 5.644)
p-value			0.3648

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.9999
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	8 ( 5.7%)	10 ( 7.6%)	
Patients (%) Without Events (Censored)	133 ( 94.3%)	122 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.702 (0.277, 1.779)
p-value			0.4546
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.1706
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	41 ( 29.1%)	25 ( 18.9%)	
Patients (%) Without Events (Censored)	100 ( 70.9%)	107 ( 81.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	28.1 (12.0, NE)	NE (11.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.427 (0.864, 2.357)
p-value			0.1637
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	6 ( 46.2%)	2 ( 12.5%)	
Patients (%) Without Events (Censored)	7 ( 53.8%)	14 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	7.2 (0.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.579 (0.921, 22.754)
p-value			0.0432

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.3029
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	54 ( 38.3%)	41 ( 31.1%)	
Patients (%) Without Events (Censored)	87 ( 61.7%)	91 ( 68.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	13.7 (7.9, 15.9)	NE (5.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.039 (0.689, 1.568)
p-value			0.8550
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	4 ( 30.8%)	2 ( 12.5%)	
Patients (%) Without Events (Censored)	9 ( 69.2%)	14 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.4 (2.9, NE)	NE (4.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.653 (0.479, 14.686)
p-value			0.2459

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.3837
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	33 ( 23.4%)	39 ( 29.5%)	
Patients (%) Without Events (Censored)	108 ( 76.6%)	93 ( 70.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.8, NE)	NE (5.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.610 (0.381, 0.976)
p-value			0.0374
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	1 ( 7.7%)	4 ( 25.0%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	12 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.9, NE)	9.1 (9.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.307 (0.034, 2.772)
p-value			0.2661

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9751
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	103 ( 73.0%)	72 ( 54.5%)	
Patients (%) Without Events (Censored)	38 ( 27.0%)	60 ( 45.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	2.4 (0.8, 4.5)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.561 (1.154, 2.112)
p-value			0.0036
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	11 ( 84.6%)	10 ( 62.5%)	
Patients (%) Without Events (Censored)	2 ( 15.4%)	6 ( 37.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 3.1)	0.8 (0.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.581 (0.670, 3.734)
p-value			0.3131

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.3496
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	81 ( 93.1%)	71 ( 78.9%)	
Patients (%) Without Events (Censored)	6 ( 6.9%)	19 ( 21.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.5)	0.7 (0.5, 0.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.707 (1.235, 2.358)
p-value			0.0010
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	106 ( 93.0%)	86 ( 82.7%)	
Patients (%) Without Events (Censored)	8 ( 7.0%)	18 ( 17.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.5)	0.5 (0.4, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.411 (1.060, 1.878)
p-value			0.0202

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.2466
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	53 ( 60.9%)	20 ( 22.2%)	
Patients (%) Without Events (Censored)	34 ( 39.1%)	70 ( 77.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.6 (0.9, 4.3)	NE (6.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.831 (2.286, 6.420)
p-value			<0.0001
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	67 ( 58.8%)	29 ( 27.9%)	
Patients (%) Without Events (Censored)	47 ( 41.2%)	75 ( 72.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	2.7 (1.0, 5.1)	8.5 (5.3, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.528 (1.633, 3.915)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.4242
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	7 ( 8.0%)	5 ( 5.6%)	
Patients (%) Without Events (Censored)	80 ( 92.0%)	85 ( 94.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.427 (0.453, 4.497)
p-value			0.5440
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	5 ( 4.4%)	6 ( 5.8%)	
Patients (%) Without Events (Censored)	109 ( 95.6%)	98 ( 94.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.715 (0.218, 2.344)
p-value			0.5787

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.3620
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	28 ( 32.2%)	15 ( 16.7%)	
Patients (%) Without Events (Censored)	59 ( 67.8%)	75 ( 83.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	28.1 (7.3, NE)	NE (11.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.818 (0.964, 3.429)
p-value			0.0610
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	28 ( 24.6%)	20 ( 19.2%)	
Patients (%) Without Events (Censored)	86 ( 75.4%)	84 ( 80.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (11.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.236 (0.696, 2.196)
p-value			0.4722

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.4743
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	34 ( 39.1%)	22 ( 24.4%)	
Patients (%) Without Events (Censored)	53 ( 60.9%)	68 ( 75.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.4 (4.6, 21.1)	NE (6.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.365 (0.796, 2.342)
p-value			0.2577
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	42 ( 36.8%)	33 ( 31.7%)	
Patients (%) Without Events (Censored)	72 ( 63.2%)	71 ( 68.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	15.1 (5.2, 15.9)	6.6 (4.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.051 (0.665, 1.659)
p-value			0.8282

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.5599
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	16 ( 18.4%)	24 ( 26.7%)	
Patients (%) Without Events (Censored)	71 ( 81.6%)	66 ( 73.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (6.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.562 (0.297, 1.063)
p-value			0.0723
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	19 ( 16.7%)	30 ( 28.8%)	
Patients (%) Without Events (Censored)	95 ( 83.3%)	74 ( 71.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.8, NE)	9.7 (4.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.397 (0.220, 0.718)
p-value			0.0016

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.8534
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	69 ( 79.3%)	49 ( 54.4%)	
Patients (%) Without Events (Censored)	18 ( 20.7%)	41 ( 45.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 1.0)	2.4 (0.7, 8.5)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.662 (1.149, 2.404)
p-value			0.0058
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	78 ( 68.4%)	54 ( 51.9%)	
Patients (%) Without Events (Censored)	36 ( 31.6%)	50 ( 48.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	2.5 (1.2, 4.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.604 (1.133, 2.272)
p-value			0.0080

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.0023
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	111 ( 90.2%)	98 ( 81.0%)	
Patients (%) Without Events (Censored)	12 ( 9.8%)	23 ( 19.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.5 (0.4, 0.7)	0.6 (0.4, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.255 (0.954, 1.650)
p-value			0.0993
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	76 ( 97.4%)	59 ( 80.8%)	
Patients (%) Without Events (Censored)	2 ( 2.6%)	14 ( 19.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (NE, NE)	0.7 (0.5, 0.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.396 (1.689, 3.399)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.1153
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	77 ( 62.6%)	27 ( 22.3%)	
Patients (%) Without Events (Censored)	46 ( 37.4%)	94 ( 77.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (1.0, 2.9)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.832 (2.467, 5.952)
p-value			<0.0001
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	43 ( 55.1%)	22 ( 30.1%)	
Patients (%) Without Events (Censored)	35 ( 44.9%)	51 ( 69.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.7 (1.0, 8.2)	NE (3.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.179 (1.302, 3.646)
p-value			0.0024

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.1039
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	9 ( 7.3%)	5 ( 4.1%)	
Patients (%) Without Events (Censored)	114 ( 92.7%)	116 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.788 (0.599, 5.337)
p-value			0.2916
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	3 ( 3.8%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	75 ( 96.2%)	67 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.414 (0.103, 1.659)
p-value			0.1995

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.2962
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	28 ( 22.8%)	21 ( 17.4%)	
Patients (%) Without Events (Censored)	95 ( 77.2%)	100 ( 82.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (12.0, NE)	NE (11.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.193 (0.675, 2.109)
p-value			0.5421
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	28 ( 35.9%)	14 ( 19.2%)	
Patients (%) Without Events (Censored)	50 ( 64.1%)	59 ( 80.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	28.1 (7.2, NE)	NE (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.944 (1.019, 3.708)
p-value			0.0414

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.8584
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	47 ( 38.2%)	34 ( 28.1%)	
Patients (%) Without Events (Censored)	76 ( 61.8%)	87 ( 71.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.4 (5.2, 15.8)	NE (6.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.208 (0.776, 1.881)
p-value			0.4029
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	29 ( 37.2%)	21 ( 28.8%)	
Patients (%) Without Events (Censored)	49 ( 62.8%)	52 ( 71.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	13.7 (4.1, NE)	6.5 (4.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.103 (0.624, 1.947)
p-value			0.7346

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Gilead Sciences, Inc.  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.7890
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	17 ( 13.8%)	28 ( 23.1%)	
Patients (%) Without Events (Censored)	106 ( 86.2%)	93 ( 76.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.500 (0.273, 0.918)
p-value			0.0223
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	18 ( 23.1%)	26 ( 35.6%)	
Patients (%) Without Events (Censored)	60 ( 76.9%)	47 ( 64.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (10.2, NE)	6.1 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.422 (0.230, 0.777)
p-value			0.0044

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.0413
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	83 ( 67.5%)	67 ( 55.4%)	
Patients (%) Without Events (Censored)	40 ( 32.5%)	54 ( 44.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.7, 1.3)	2.7 (1.0, 6.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.320 (0.955, 1.825)
p-value			0.0879
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	64 ( 82.1%)	36 ( 49.3%)	
Patients (%) Without Events (Censored)	14 ( 17.9%)	37 ( 50.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.5 (0.3, 0.7)	2.4 (0.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.249 (1.493, 3.390)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.2724
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	107 ( 92.2%)	96 ( 80.7%)	
Patients (%) Without Events (Censored)	9 ( 7.8%)	23 ( 19.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.5 (0.3, 0.5)	0.7 (0.4, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.470 (1.112, 1.944)
p-value			0.0056
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	76 ( 95.0%)	60 ( 82.2%)	
Patients (%) Without Events (Censored)	4 ( 5.0%)	13 ( 17.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.3)	0.5 (0.5, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.835 (1.304, 2.583)
p-value			0.0006

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.3947
<b>Prior CDK treatment duration: &lt;= 12 months</b>			
Total Patients	116	119	
Patients (%) With Events	71 ( 61.2%)	32 ( 26.9%)	
Patients (%) Without Events (Censored)	45 ( 38.8%)	87 ( 73.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	2.1 (1.3, 3.4)	NE (5.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.759 (1.814, 4.199)
p-value			<0.0001
<b>Prior CDK treatment duration: &gt; 12 months</b>			
Total Patients	80	73	
Patients (%) With Events	48 ( 60.0%)	17 ( 23.3%)	
Patients (%) Without Events (Censored)	32 ( 40.0%)	56 ( 76.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.5 (0.7, 5.1)	NE (6.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.634 (2.086, 6.329)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.4058
<b>Prior CDK treatment duration: &lt;= 12 months</b>			
Total Patients	116	119	
Patients (%) With Events	7 ( 6.0%)	5 ( 4.2%)	
Patients (%) Without Events (Censored)	109 ( 94.0%)	114 ( 95.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.427 (0.453, 4.499)
p-value			0.5439
<b>Prior CDK treatment duration: &gt; 12 months</b>			
Total Patients	80	73	
Patients (%) With Events	5 ( 6.3%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	75 ( 93.8%)	67 ( 91.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.708 (0.216, 2.321)
p-value			0.5679

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.5432
<b>Prior CDK treatment duration: &lt;= 12 months</b>			
Total Patients	116	119	
Patients (%) With Events	32 ( 27.6%)	22 ( 18.5%)	
Patients (%) Without Events (Censored)	84 ( 72.4%)	97 ( 81.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (12.0, NE)	NE (11.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.347 (0.778, 2.334)
p-value			0.2862
<b>Prior CDK treatment duration: &gt; 12 months</b>			
Total Patients	80	73	
Patients (%) With Events	23 ( 28.8%)	12 ( 16.4%)	
Patients (%) Without Events (Censored)	57 ( 71.3%)	61 ( 83.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	28.1 (NE, NE)	NE (11.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.741 (0.861, 3.517)
p-value			0.1186

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.6616
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	46 ( 39.7%)	32 ( 26.9%)	
Patients (%) Without Events (Censored)	70 ( 60.3%)	87 ( 73.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.4 (5.2, 15.1)	NE (4.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.249 (0.793, 1.967)
p-value			0.3376
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	29 ( 36.3%)	23 ( 31.5%)	
Patients (%) Without Events (Censored)	51 ( 63.8%)	50 ( 68.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	15.8 (4.6, 21.1)	6.6 (5.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.067 (0.617, 1.846)
p-value			0.8132

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.7888
<b>Prior CDK treatment duration: &lt;= 12 months</b>			
Total Patients	116	119	
Patients (%) With Events	19 ( 16.4%)	29 ( 24.4%)	
Patients (%) Without Events (Censored)	97 ( 83.6%)	90 ( 75.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (14.8, NE)	NE (6.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.452 (0.249, 0.823)
p-value			0.0077
<b>Prior CDK treatment duration: &gt; 12 months</b>			
Total Patients	80	73	
Patients (%) With Events	14 ( 17.5%)	25 ( 34.2%)	
Patients (%) Without Events (Censored)	66 ( 82.5%)	48 ( 65.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	9.7 (5.1, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.433 (0.225, 0.833)
p-value			0.0099

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.1196
<b>Prior CDK treatment duration: &lt;= 12 months</b>			
Total Patients	116	119	
Patients (%) With Events	80 ( 69.0%)	65 ( 54.6%)	
Patients (%) Without Events (Censored)	36 ( 31.0%)	54 ( 45.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.7, 1.1)	2.4 (1.0, 4.5)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.400 (1.007, 1.947)
p-value			0.0414
<b>Prior CDK treatment duration: &gt; 12 months</b>			
Total Patients	80	73	
Patients (%) With Events	65 ( 81.3%)	38 ( 52.1%)	
Patients (%) Without Events (Censored)	15 ( 18.8%)	35 ( 47.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.6 (0.4, 0.8)	2.7 (0.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.068 (1.383, 3.093)
p-value			0.0004

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.1786
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	19 ( 90.5%)	19 ( 82.6%)	
Patients (%) Without Events (Censored)	2 ( 9.5%)	4 ( 17.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.1, 0.5)	0.7 (0.5, 1.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.029 (1.052, 3.913)
p-value			0.0315
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	119 ( 94.4%)	97 ( 80.8%)	
Patients (%) Without Events (Censored)	7 ( 5.6%)	23 ( 19.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	0.6 (0.4, 0.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.570 (1.195, 2.063)
p-value			0.0010
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	49 ( 90.7%)	41 ( 80.4%)	
Patients (%) Without Events (Censored)	5 ( 9.3%)	10 ( 19.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.7)	0.5 (0.5, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.250 (0.823, 1.899)
p-value			0.2997

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.7939
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	13 ( 61.9%)	11 ( 47.8%)	
Patients (%) Without Events (Censored)	8 ( 38.1%)	12 ( 52.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.5 (0.3, NE)	6.7 (2.0, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.746 (0.777, 3.923)
p-value			0.1718
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	75 ( 59.5%)	24 ( 20.0%)	
Patients (%) Without Events (Censored)	51 ( 40.5%)	96 ( 80.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.7 (1.0, 3.6)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			4.240 (2.673, 6.728)
p-value			<0.0001
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	32 ( 59.3%)	14 ( 27.5%)	
Patients (%) Without Events (Censored)	22 ( 40.7%)	37 ( 72.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.6 (1.2, 8.2)	4.9 (2.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.998 (1.053, 3.791)
p-value			0.0311

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.9881
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	0	
Patients (%) Without Events (Censored)	20 ( 95.2%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2953
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	8 ( 6.3%)	7 ( 5.8%)	
Patients (%) Without Events (Censored)	118 ( 93.7%)	113 ( 94.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.083 (0.393, 2.986)
p-value			0.8773
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	3 ( 5.6%)	4 ( 7.8%)	
Patients (%) Without Events (Censored)	51 ( 94.4%)	47 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.536 (0.118, 2.434)
p-value			0.4124

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.0333
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	4 ( 19.0%)	10 ( 43.5%)	
Patients (%) Without Events (Censored)	17 ( 81.0%)	13 ( 56.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	11.2 (1.3, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.468 (0.145, 1.505)
p-value			0.1896
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	36 ( 28.6%)	19 ( 15.8%)	
Patients (%) Without Events (Censored)	90 ( 71.4%)	101 ( 84.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	28.1 (12.0, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.813 (1.036, 3.173)
p-value			0.0340
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	16 ( 29.6%)	6 ( 11.8%)	
Patients (%) Without Events (Censored)	38 ( 70.4%)	45 ( 88.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (7.2, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.947 (0.746, 5.084)
p-value			0.1679

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9287
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	8 ( 38.1%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	13 ( 61.9%)	16 ( 69.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	15.8 (3.9, NE)	NE (2.8, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.095 (0.383, 3.126)
p-value			0.8655
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	48 ( 38.1%)	36 ( 30.0%)	
Patients (%) Without Events (Censored)	78 ( 61.9%)	84 ( 70.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	13.4 (5.6, 15.9)	NE (6.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.173 (0.761, 1.808)
p-value			0.4718
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
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Safety Population  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	20 ( 37.0%)	12 ( 23.5%)	
Patients (%) Without Events (Censored)	34 ( 63.0%)	39 ( 76.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.1 (3.8, NE)	5.5 (4.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.063 (0.502, 2.248)
p-value			0.8718

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Safety Population  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.5714
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	18 ( 85.7%)	16 ( 69.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (2.8, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.480 (0.124, 1.859)
p-value			0.2794
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	23 ( 18.3%)	41 ( 34.2%)	
Patients (%) Without Events (Censored)	103 ( 81.7%)	79 ( 65.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (14.8, NE)	9.1 (5.1, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.408 (0.243, 0.685)
p-value			0.0005
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
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Safety Population  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	9 ( 16.7%)	6 ( 11.8%)	
Patients (%) Without Events (Censored)	45 ( 83.3%)	45 ( 88.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.858 (0.295, 2.491)
p-value			0.7776

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.0014
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	16 ( 76.2%)	5 ( 21.7%)	
Patients (%) Without Events (Censored)	5 ( 23.8%)	18 ( 78.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.4, 1.0)	NE (4.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			6.844 (2.460, 19.045)
p-value			<0.0001
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	91 ( 72.2%)	65 ( 54.2%)	
Patients (%) Without Events (Censored)	35 ( 27.8%)	55 ( 45.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.7, 0.9)	2.5 (1.6, 6.0)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.548 (1.123, 2.133)
p-value			0.0059
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	40 ( 74.1%)	33 ( 64.7%)	
Patients (%) Without Events (Censored)	14 ( 25.9%)	18 ( 35.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.6, 1.6)	0.7 (0.5, 1.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.008 (0.632, 1.607)
p-value			0.9738

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.4438
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	12 ( 92.3%)	11 ( 78.6%)	
Patients (%) Without Events (Censored)	1 ( 7.7%)	3 ( 21.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.4 (0.2, 0.7)	0.5 (0.3, 0.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.188 (0.513, 2.750)
p-value			0.7238
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	168 ( 92.8%)	142 ( 80.7%)	
Patients (%) Without Events (Censored)	13 ( 7.2%)	34 ( 19.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	0.6 (0.5, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.574 (1.256, 1.972)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Safety Population  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.4440
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	7 ( 53.8%)	1 ( 7.1%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	8.2 (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.456 (0.777, 53.663)
p-value			0.0475
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	108 ( 59.7%)	47 ( 26.7%)	
Patients (%) Without Events (Censored)	73 ( 40.3%)	129 ( 73.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (1.2, 2.9)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.954 (2.096, 4.164)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.9909
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	0	1 ( 7.1%)	
Patients (%) Without Events (Censored)	13 (100.0%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2770
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	10 ( 5.5%)	10 ( 5.7%)	
Patients (%) Without Events (Censored)	171 ( 94.5%)	166 ( 94.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.945 (0.393, 2.271)
p-value			0.8984

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.7441
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	5 ( 38.5%)	2 ( 14.3%)	
Patients (%) Without Events (Censored)	8 ( 61.5%)	12 ( 85.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.985 (0.359, 10.969)
p-value			0.4232
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	49 ( 27.1%)	31 ( 17.6%)	
Patients (%) Without Events (Censored)	132 ( 72.9%)	145 ( 82.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	28.1 (28.1, NE)	NE (11.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.494 (0.950, 2.350)
p-value			0.0809

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.0502
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	3 ( 23.1%)	5 ( 35.7%)	
Patients (%) Without Events (Censored)	10 ( 76.9%)	9 ( 64.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.9, NE)	NE (0.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.112 (0.012, 1.036)
p-value			0.0246
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	67 ( 37.0%)	48 ( 27.3%)	
Patients (%) Without Events (Censored)	114 ( 63.0%)	128 ( 72.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	13.4 (6.5, 15.9)	NE (6.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.257 (0.867, 1.823)
p-value			0.2263

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.2586
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	2 ( 15.4%)	5 ( 35.7%)	
Patients (%) Without Events (Censored)	11 ( 84.6%)	9 ( 64.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.1, NE)	4.6 (0.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.119 (0.019, 0.725)
p-value			0.0121
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	31 ( 17.1%)	47 ( 26.7%)	
Patients (%) Without Events (Censored)	150 ( 82.9%)	129 ( 73.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.8, NE)	NE (9.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.495 (0.313, 0.784)
p-value			0.0023

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.3625
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	10 ( 76.9%)	5 ( 35.7%)	
Patients (%) Without Events (Censored)	3 ( 23.1%)	9 ( 64.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 3.1)	NE (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.390 (0.813, 7.025)
p-value			0.1076
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	131 ( 72.4%)	97 ( 55.1%)	
Patients (%) Without Events (Censored)	50 ( 27.6%)	79 ( 44.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	2.4 (1.0, 4.5)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.529 (1.175, 1.990)
p-value			0.0014

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.5535
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	164 ( 92.7%)	137 ( 80.1%)	
Patients (%) Without Events (Censored)	13 ( 7.3%)	34 ( 19.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	0.5 (0.5, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.592 (1.266, 2.002)
p-value			<0.0001
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	23 ( 95.8%)	20 ( 87.0%)	
Patients (%) Without Events (Censored)	1 ( 4.2%)	3 ( 13.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.4 (0.2, 0.8)	0.7 (0.5, 1.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.286 (0.699, 2.365)
p-value			0.4256

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9713
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes</b>			
Total Patients	177	171	
Patients (%) With Events	103 ( 58.2%)	42 ( 24.6%)	
Patients (%) Without Events (Censored)	74 ( 41.8%)	129 ( 75.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.1 (1.3, 4.3)	NE (7.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.055 (2.133, 4.377)
p-value			<0.0001
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No</b>			
Total Patients	24	23	
Patients (%) With Events	17 ( 70.8%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	7 ( 29.2%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (0.3, 2.8)	8.5 (4.4, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.963 (1.224, 7.174)
p-value			0.0115

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.9886
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	11 ( 6.2%)	11 ( 6.4%)	
Patients (%) Without Events (Censored)	166 ( 93.8%)	160 ( 93.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.934 (0.405, 2.154)
p-value			0.8715
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	1 ( 4.2%)	0	
Patients (%) Without Events (Censored)	23 ( 95.8%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3276

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.4114
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes</b>			
Total Patients	177	171	
Patients (%) With Events	50 ( 28.2%)	33 ( 19.3%)	
Patients (%) Without Events (Censored)	127 ( 71.8%)	138 ( 80.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	28.1 (12.0, NE)	NE (11.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.386 (0.890, 2.158)
p-value			0.1485
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No</b>			
Total Patients	24	23	
Patients (%) With Events	6 ( 25.0%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	18 ( 75.0%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (11.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.757 (0.554, 13.731)
p-value			0.2000

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.7887
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes</b>			
Total Patients	177	171	
Patients (%) With Events	63 ( 35.6%)	47 ( 27.5%)	
Patients (%) Without Events (Censored)	114 ( 64.4%)	124 ( 72.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.4 (6.5, 15.8)	NE (6.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.147 (0.785, 1.675)
p-value			0.4809
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No</b>			
Total Patients	24	23	
Patients (%) With Events	13 ( 54.2%)	8 ( 34.8%)	
Patients (%) Without Events (Censored)	11 ( 45.8%)	15 ( 65.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.4 (2.1, NE)	5.5 (2.8, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.286 (0.530, 3.119)
p-value			0.5769

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Neuropathy+			
Interaction p-value			0.7323
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	29 ( 16.4%)	47 ( 27.5%)	
Patients (%) Without Events (Censored)	148 ( 83.6%)	124 ( 72.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	9.7 (6.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.461 (0.289, 0.736)
p-value			0.0009
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	6 ( 25.0%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	18 ( 75.0%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.8, NE)	NE (5.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.544 (0.172, 1.724)
p-value			0.2880

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Neutropenia+			
Interaction p-value			0.2807
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	133 ( 75.1%)	91 ( 53.2%)	
Patients (%) Without Events (Censored)	44 ( 24.9%)	80 ( 46.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 0.8)	2.4 (1.2, 4.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.731 (1.324, 2.265)
p-value			<0.0001
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	14 ( 58.3%)	12 ( 52.2%)	
Patients (%) Without Events (Censored)	10 ( 41.7%)	11 ( 47.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.7 (0.6, NE)	4.5 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.106 (0.510, 2.398)
p-value			0.8294

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
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Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9324
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	112 ( 91.8%)	104 ( 80.6%)	
Patients (%) Without Events (Censored)	10 ( 8.2%)	25 ( 19.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	0.7 (0.5, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.580 (1.208, 2.068)
p-value			0.0009
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	75 ( 94.9%)	53 ( 81.5%)	
Patients (%) Without Events (Censored)	4 ( 5.1%)	12 ( 18.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.5)	0.5 (0.3, 0.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.501 (1.048, 2.150)
p-value			0.0238

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9246
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	73 ( 59.8%)	32 ( 24.8%)	
Patients (%) Without Events (Censored)	49 ( 40.2%)	97 ( 75.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (1.2, 4.3)	NE (6.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.091 (2.038, 4.687)
p-value			<0.0001
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	47 ( 59.5%)	17 ( 26.2%)	
Patients (%) Without Events (Censored)	32 ( 40.5%)	48 ( 73.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.1 (0.8, 5.1)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.962 (1.698, 5.167)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.6265
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	7 ( 5.7%)	8 ( 6.2%)	
Patients (%) Without Events (Censored)	115 ( 94.3%)	121 ( 93.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.881 (0.319, 2.429)
p-value			0.8060
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	5 ( 6.3%)	3 ( 4.6%)	
Patients (%) Without Events (Censored)	74 ( 93.7%)	62 ( 95.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.363 (0.326, 5.705)
p-value			0.6708

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.8842
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	38 ( 31.1%)	25 ( 19.4%)	
Patients (%) Without Events (Censored)	84 ( 68.9%)	104 ( 80.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	28.1 (7.3, NE)	NE (11.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.528 (0.918, 2.542)
p-value			0.1035
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	18 ( 22.8%)	10 ( 15.4%)	
Patients (%) Without Events (Censored)	61 ( 77.2%)	55 ( 84.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	11.7 (11.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.452 (0.669, 3.151)
p-value			0.3402

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.4357
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	50 ( 41.0%)	40 ( 31.0%)	
Patients (%) Without Events (Censored)	72 ( 59.0%)	89 ( 69.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.1 (5.2, 21.1)	NE (5.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.098 (0.722, 1.671)
p-value			0.6637
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	26 ( 32.9%)	15 ( 23.1%)	
Patients (%) Without Events (Censored)	53 ( 67.1%)	50 ( 76.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	13.4 (4.3, NE)	NE (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.429 (0.756, 2.701)
p-value			0.2695

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.8344
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	18 ( 14.8%)	31 ( 24.0%)	
Patients (%) Without Events (Censored)	104 ( 85.2%)	98 ( 76.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.444 (0.246, 0.801)
p-value			0.0056
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	17 ( 21.5%)	23 ( 35.4%)	
Patients (%) Without Events (Censored)	62 ( 78.5%)	42 ( 64.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (10.2, NE)	6.2 (3.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.490 (0.260, 0.923)
p-value			0.0245

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.5898
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	85 ( 69.7%)	64 ( 49.6%)	
Patients (%) Without Events (Censored)	37 ( 30.3%)	65 ( 50.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	4.1 (1.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.695 (1.224, 2.347)
p-value			0.0014
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	62 ( 78.5%)	39 ( 60.0%)	
Patients (%) Without Events (Censored)	17 ( 21.5%)	26 ( 40.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 1.0)	2.0 (0.6, 7.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.453 (0.971, 2.174)
p-value			0.0646

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9817
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	62 ( 91.2%)	59 ( 81.9%)	
Patients (%) Without Events (Censored)	6 ( 8.8%)	13 ( 18.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	0.6 (0.5, 0.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.762 (1.226, 2.531)
p-value			0.0023
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	64 ( 90.1%)	57 ( 77.0%)	
Patients (%) Without Events (Censored)	7 ( 9.9%)	17 ( 23.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.4 (0.3, 0.7)	0.5 (0.3, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.271 (0.887, 1.820)
p-value			0.1840
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	39 ( 97.5%)	22 ( 84.6%)	
Patients (%) Without Events (Censored)	1 ( 2.5%)	4 ( 15.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.5)	0.7 (0.5, 1.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.885 (1.100, 3.227)
p-value			0.0177

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.4025
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	33 ( 48.5%)	17 ( 23.6%)	
Patients (%) Without Events (Censored)	35 ( 51.5%)	55 ( 76.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.0 (0.7, NE)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.565 (1.427, 4.610)
p-value			0.0011
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	45 ( 63.4%)	14 ( 18.9%)	
Patients (%) Without Events (Censored)	26 ( 36.6%)	60 ( 81.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.7, 3.6)	NE (5.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.236 (2.321, 7.730)
p-value			<0.0001
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	25 ( 62.5%)	11 ( 42.3%)	
Patients (%) Without Events (Censored)	15 ( 37.5%)	15 ( 57.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.4 (1.0, 8.2)	6.7 (1.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.809 (0.883, 3.708)
p-value			0.1002

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Hypersensitivity+</b>			
Interaction p-value			0.5748
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	16 ( 23.5%)	13 ( 18.1%)	
Patients (%) Without Events (Censored)	52 ( 76.5%)	59 ( 81.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (11.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.417 (0.681, 2.949)
p-value			0.3579
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	20 ( 28.2%)	12 ( 16.2%)	
Patients (%) Without Events (Censored)	51 ( 71.8%)	62 ( 83.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (7.3, NE)	NE (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.504 (0.732, 3.094)
p-value			0.2639
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	13 ( 32.5%)	7 ( 26.9%)	
Patients (%) Without Events (Censored)	27 ( 67.5%)	19 ( 73.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	28.1 (5.2, NE)	NE (2.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.947 (0.371, 2.414)
p-value			0.9139

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.5194
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	21 ( 30.9%)	21 ( 29.2%)	
Patients (%) Without Events (Censored)	47 ( 69.1%)	51 ( 70.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.6, NE)	NE (5.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.031 (0.563, 1.888)
p-value			0.9247
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	25 ( 35.2%)	18 ( 24.3%)	
Patients (%) Without Events (Censored)	46 ( 64.8%)	56 ( 75.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	13.4 (9.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.954 (0.504, 1.806)
p-value			0.8804
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	20 ( 50.0%)	9 ( 34.6%)	
Patients (%) Without Events (Censored)	20 ( 50.0%)	17 ( 65.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	5.2 (3.7, 15.8)	NE (3.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.477 (0.666, 3.277)
p-value			0.3339

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.1109
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	10 ( 14.7%)	25 ( 34.7%)	
Patients (%) Without Events (Censored)	58 ( 85.3%)	47 ( 65.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	14.8 (14.8, NE)	9.1 (4.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.310 (0.144, 0.667)
p-value			0.0016
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	10 ( 14.1%)	16 ( 21.6%)	
Patients (%) Without Events (Censored)	61 ( 85.9%)	58 ( 78.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (5.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.401 (0.178, 0.903)
p-value			0.0232
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	13 ( 32.5%)	9 ( 34.6%)	
Patients (%) Without Events (Censored)	27 ( 67.5%)	17 ( 65.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.2, NE)	9.7 (2.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.888 (0.379, 2.080)
p-value			0.7818

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.2758
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	51 ( 75.0%)	44 ( 61.1%)	
Patients (%) Without Events (Censored)	17 ( 25.0%)	28 ( 38.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 1.0)	1.0 (0.7, 4.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.496 (0.996, 2.246)
p-value			0.0543
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	48 ( 67.6%)	36 ( 48.6%)	
Patients (%) Without Events (Censored)	23 ( 32.4%)	38 ( 51.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 1.6)	4.9 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.384 (0.897, 2.135)
p-value			0.1343
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.2: Time to the First Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	32 ( 80.0%)	14 ( 53.8%)	
Patients (%) Without Events (Censored)	8 ( 20.0%)	12 ( 46.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.3, 0.7)	4.2 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.202 (1.171, 4.142)
p-value			0.0120

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

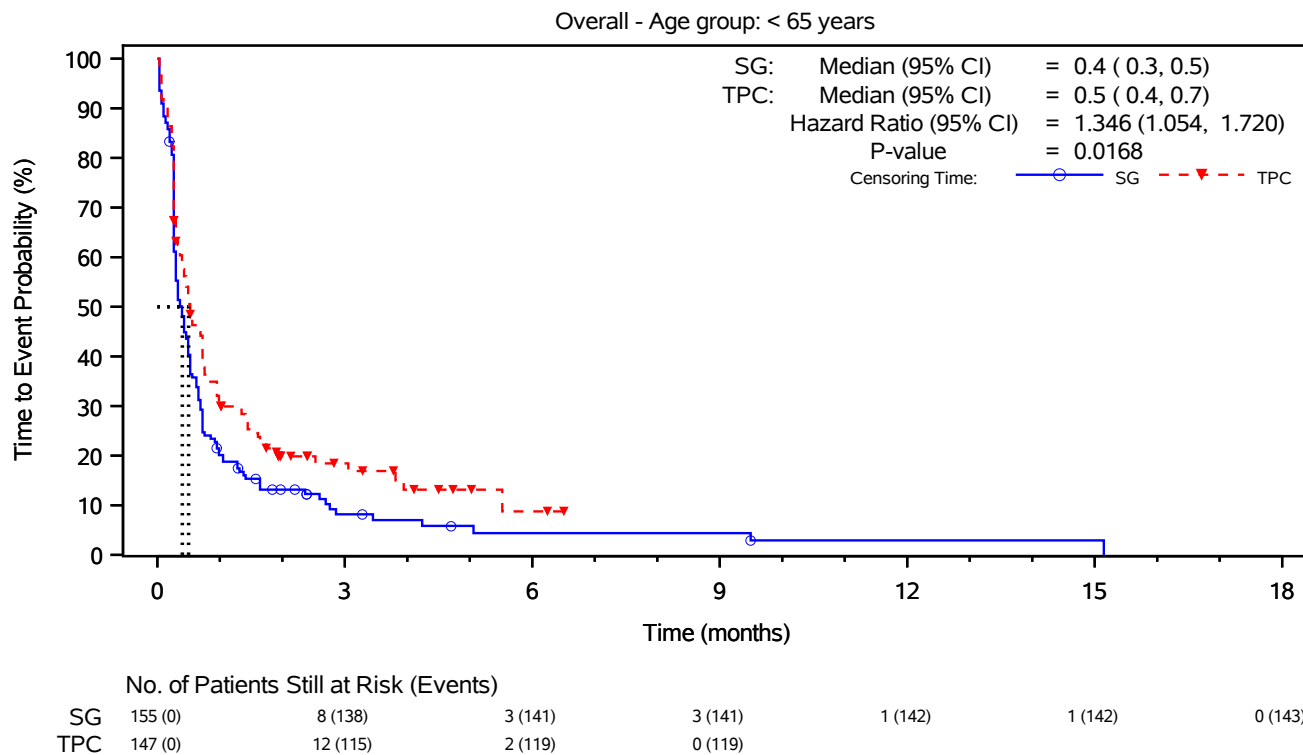
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Figure 15.11.4.2.1: KM Plot for Time to the First TEAE of Special Interest by Age Group  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

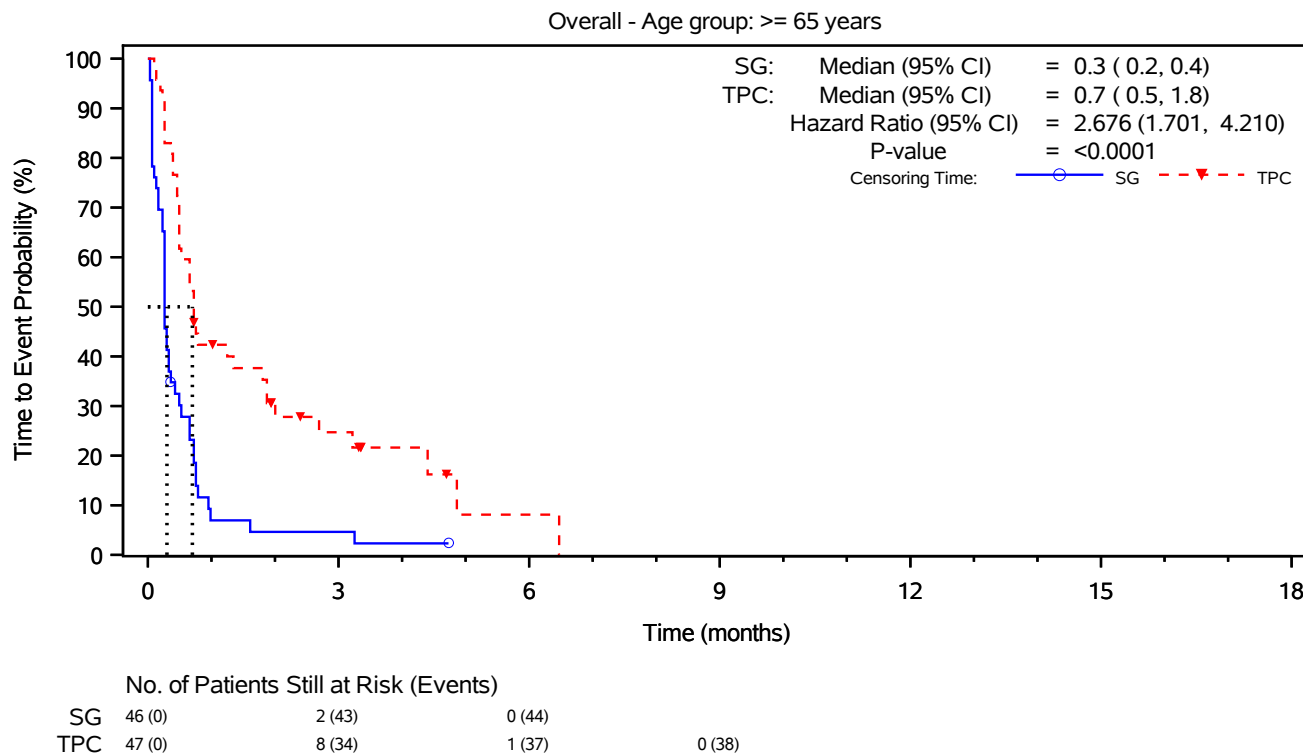
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Figure 15.11.4.2.1: KM Plot for Time to the First TEAE of Special Interest by Age Group  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

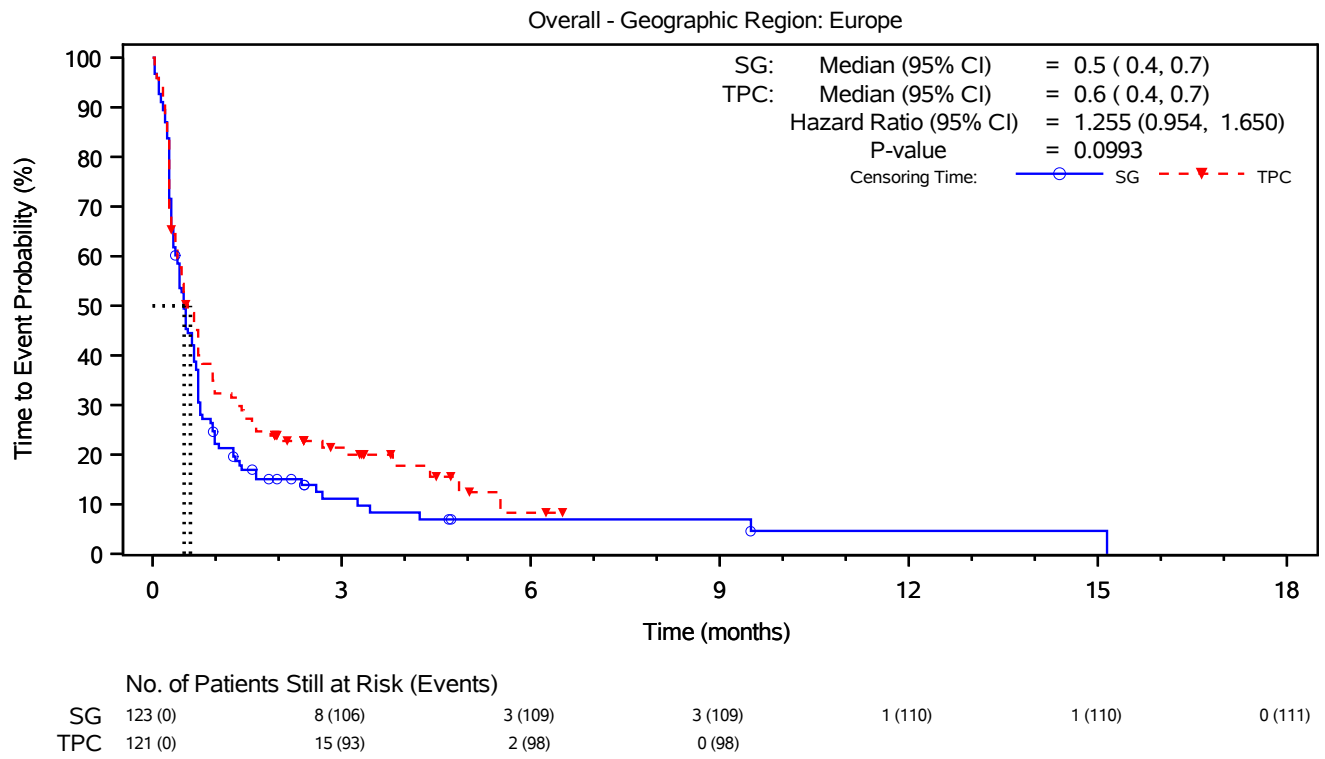
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Figure 15.11.4.2.2: KM Plot for Time to the First TEAE of Special Interest by Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

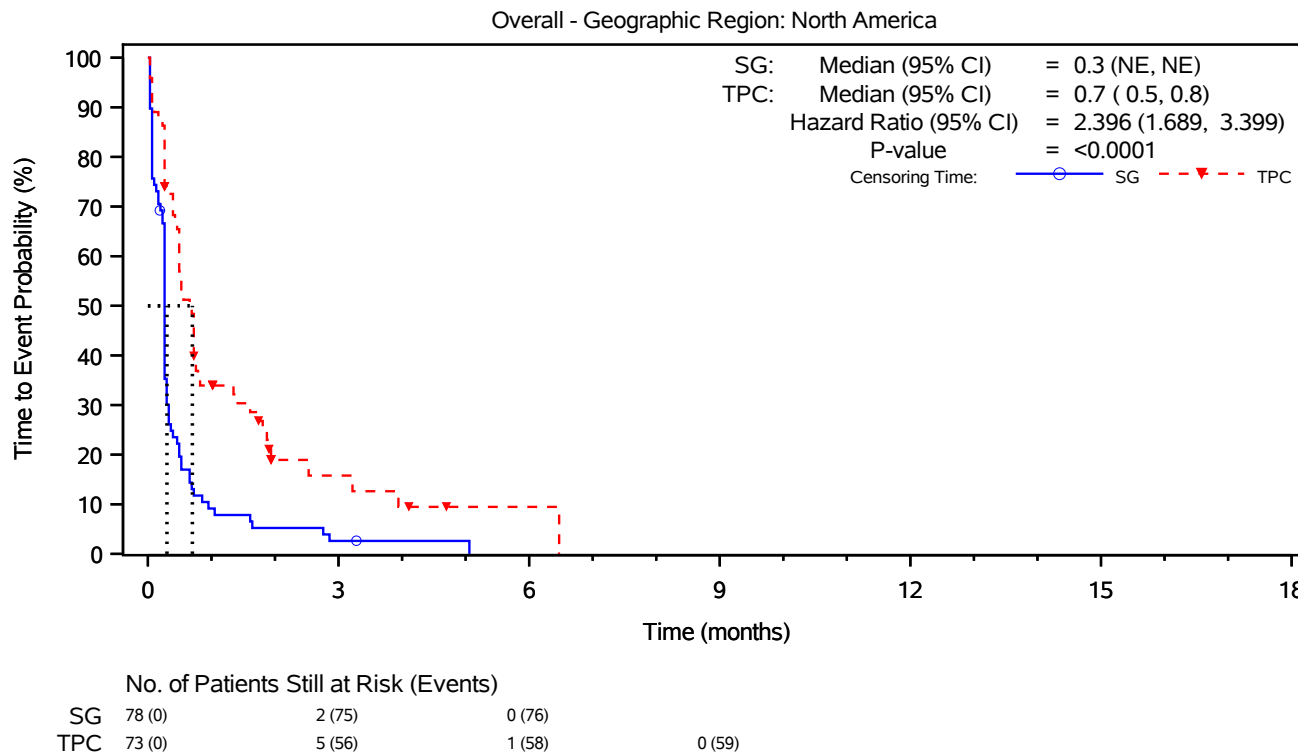
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Gilead Sciences, Inc.  
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Figure 15.11.4.2.2: KM Plot for Time to the First TEAE of Special Interest by Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

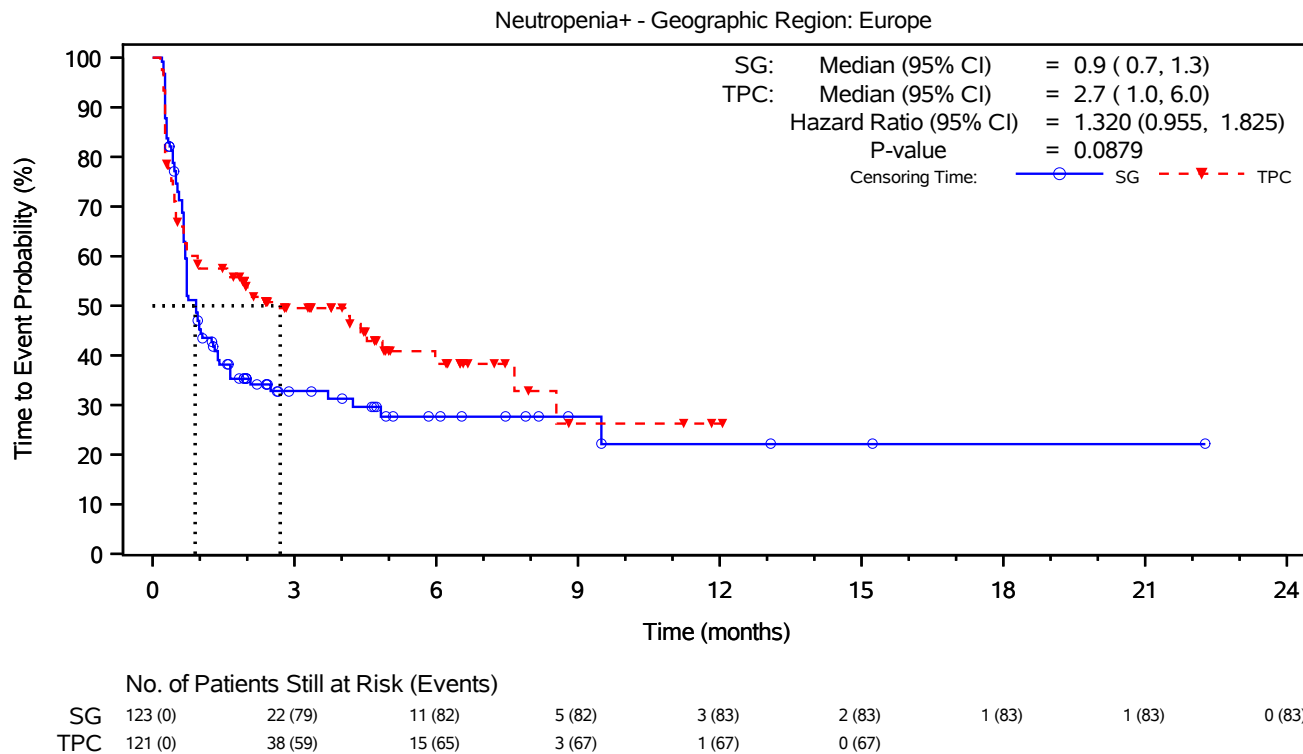
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.2.2: KM Plot for Time to the First TEAE of Special Interest by Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

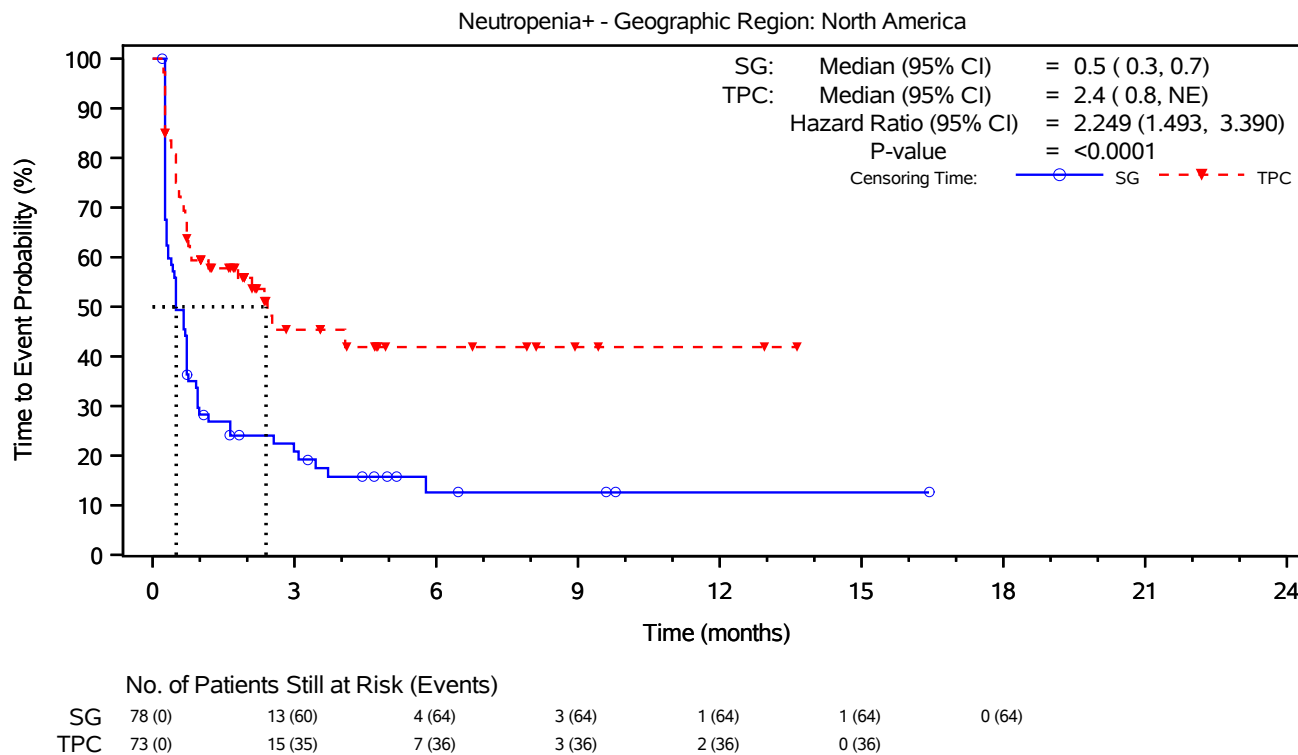
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Figure 15.11.4.2.2: KM Plot for Time to the First TEAE of Special Interest by Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

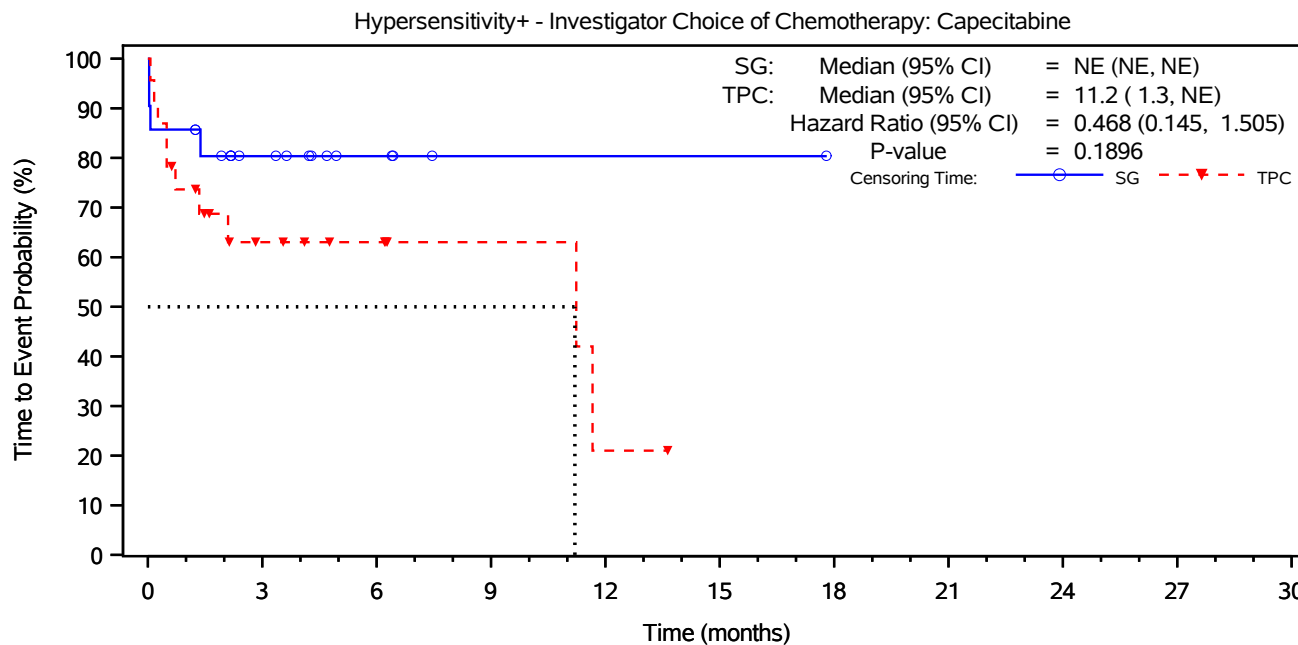
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.2.3: KM Plot for Time to the First TEAE of Special Interest by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)						
	0	3	6	9	12	15	18
SG	21 (0)	10 (4)	4 (4)	1 (4)	1 (4)	0 (4)	0 (4)
TPC	23 (0)	9 (8)	6 (8)	3 (8)	1 (10)	0 (10)	0 (10)

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

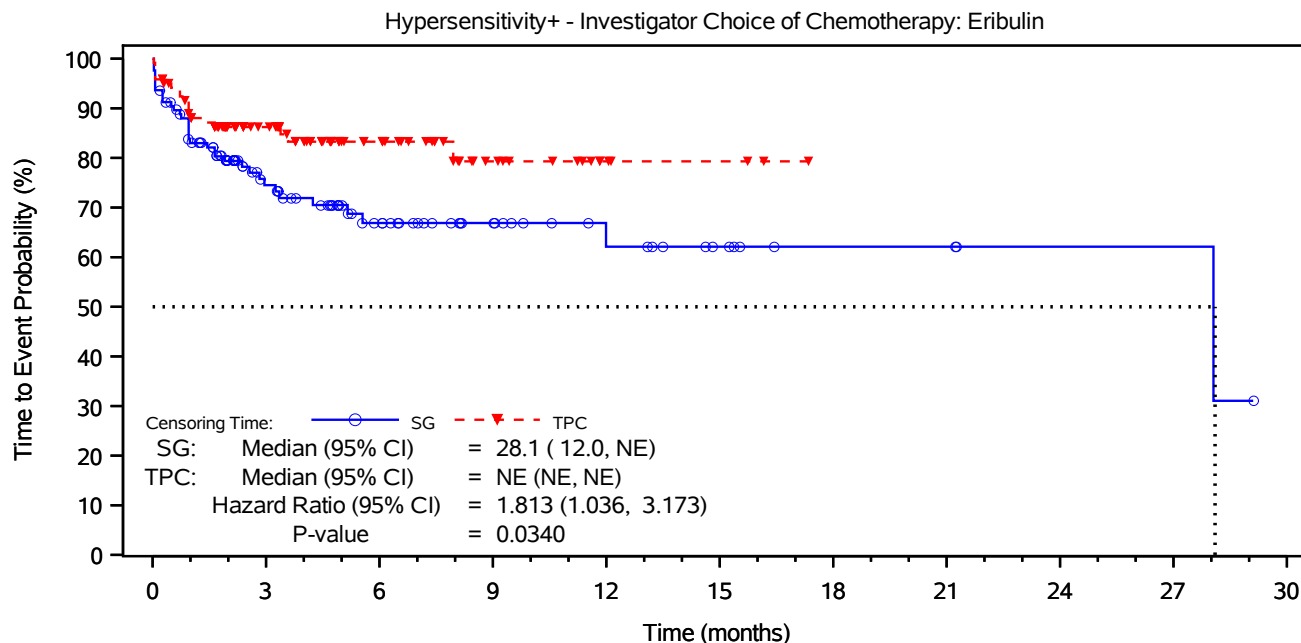
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.2.3: KM Plot for Time to the First TEAE of Special Interest by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	126 (0)	59 (29)	34 (34)	21 (34)	13 (35)	8 (35)	4 (35)	4 (35)	2 (35)	2 (35)	0 (36)
TPC	120 (0)	67 (16)	33 (18)	14 (19)	5 (19)	3 (19)	0 (19)				

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

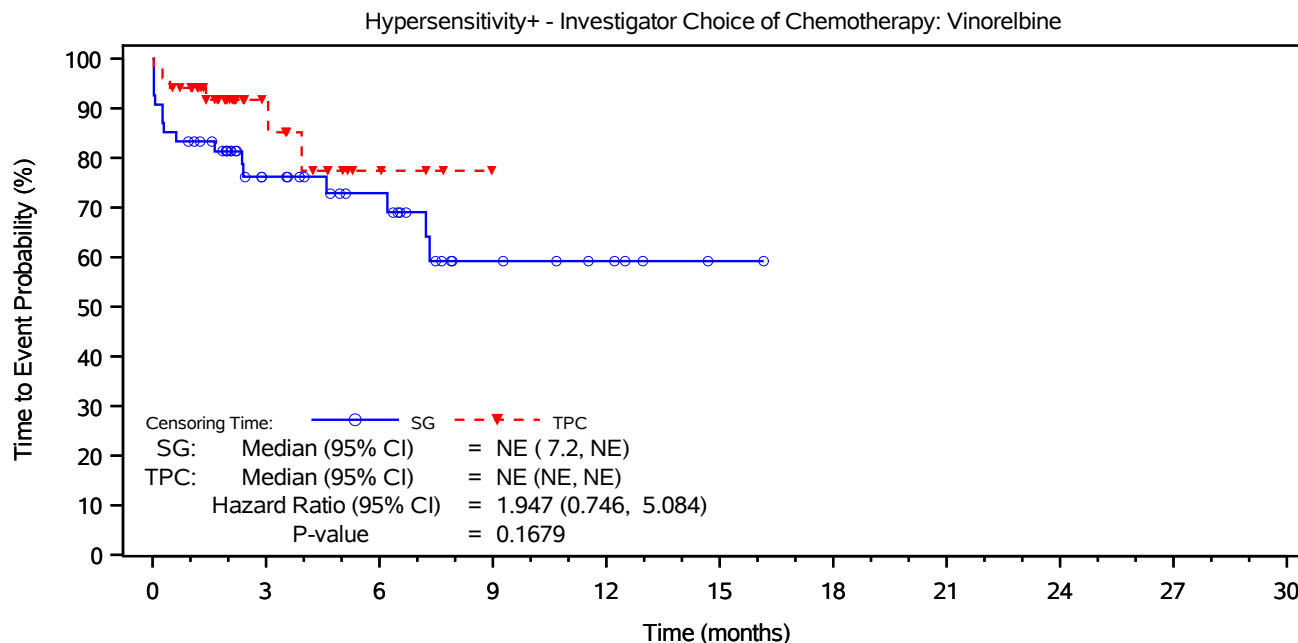
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.2.3: KM Plot for Time to the First TEAE of Special Interest by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)						
SG	54 (0)	27 (12)	19 (13)	8 (16)	5 (16)	1 (16)	0 (16)
TPC	51 (0)	14 (4)	4 (6)	0 (6)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

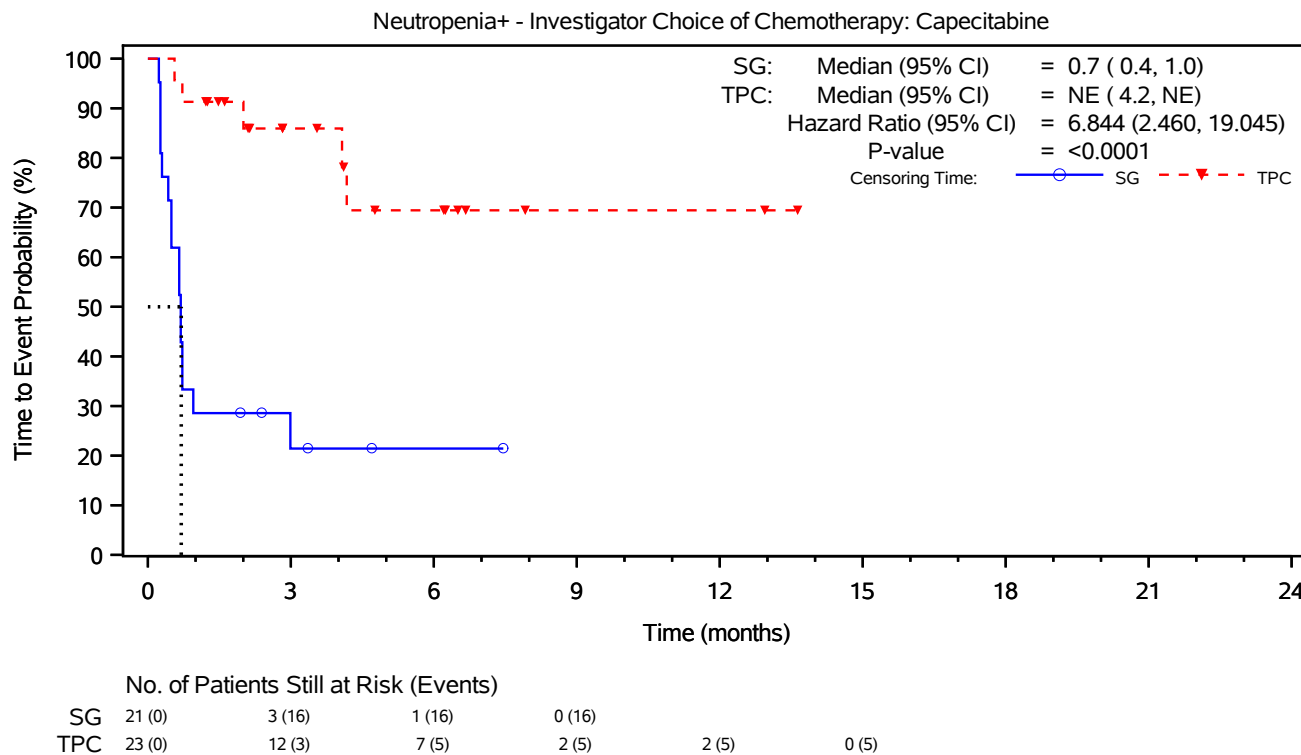
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.2.3: KM Plot for Time to the First TEAE of Special Interest by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

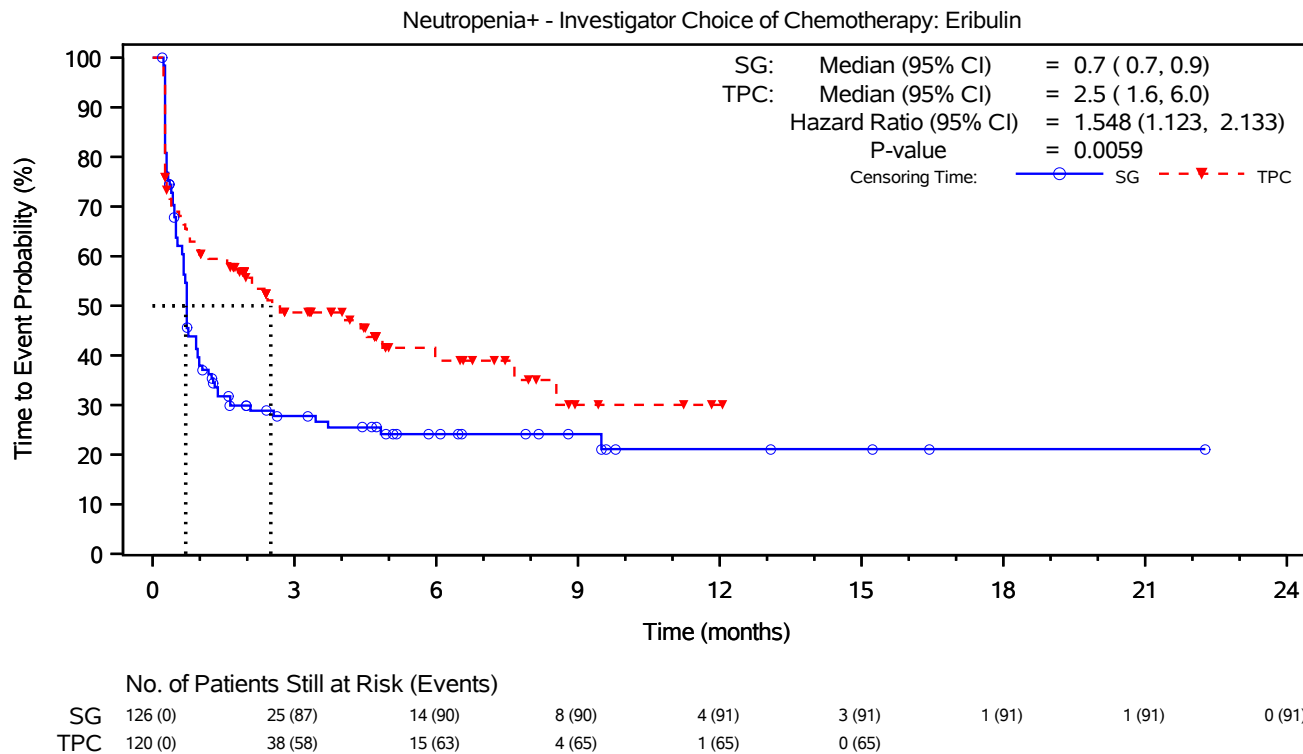
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.4.2.3: KM Plot for Time to the First TEAE of Special Interest by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

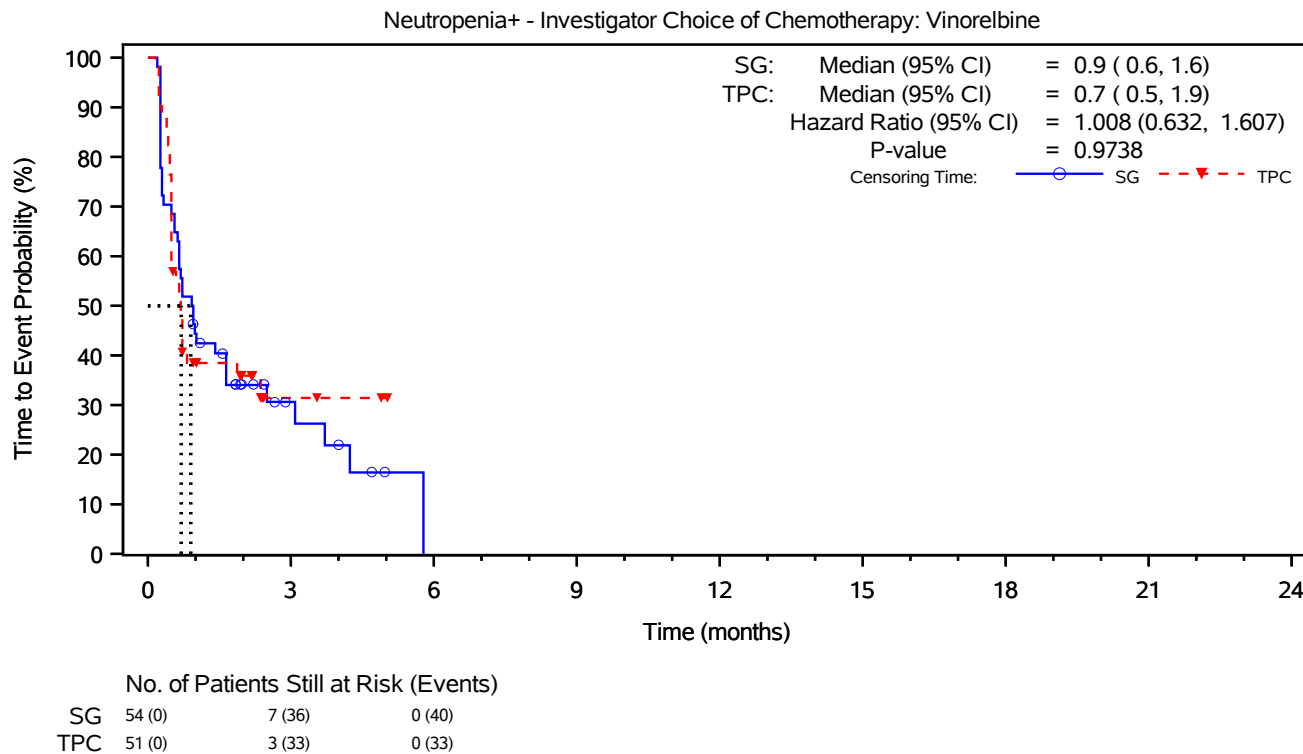
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.4.2.3: KM Plot for Time to the First TEAE of Special Interest by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.6338
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	18 ( 18.9%)	9 ( 9.8%)	
Patients (%) Without Events (Censored)	77 ( 81.1%)	83 ( 90.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.829 (0.820, 4.080)
p-value			0.1356
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	17 ( 16.0%)	11 ( 10.8%)	
Patients (%) Without Events (Censored)	89 ( 84.0%)	91 ( 89.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.405 (0.657, 3.004)
p-value			0.3783

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.1619
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	5 ( 5.3%)	3 ( 3.3%)	
Patients (%) Without Events (Censored)	90 ( 94.7%)	89 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.587 (0.379, 6.642)
p-value			0.5245
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	3 ( 2.8%)	7 ( 6.9%)	
Patients (%) Without Events (Censored)	103 ( 97.2%)	95 ( 93.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.395 (0.102, 1.527)
p-value			0.1631

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.3516
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	11 ( 11.6%)	3 ( 3.3%)	
Patients (%) Without Events (Censored)	84 ( 88.4%)	89 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.029 (0.841, 10.914)
p-value			0.0749
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	8 ( 7.5%)	5 ( 4.9%)	
Patients (%) Without Events (Censored)	98 ( 92.5%)	97 ( 95.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.359 (0.443, 4.172)
p-value			0.5900

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9346
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	6 ( 6.3%)	5 ( 5.4%)	
Patients (%) Without Events (Censored)	89 ( 93.7%)	87 ( 94.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.137 (0.347, 3.728)
p-value			0.8321
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	8 ( 7.5%)	7 ( 6.9%)	
Patients (%) Without Events (Censored)	98 ( 92.5%)	95 ( 93.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.074 (0.390, 2.963)
p-value			0.8886

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9835
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	33 ( 17.2%)	20 ( 10.8%)	
Patients (%) Without Events (Censored)	159 ( 82.8%)	166 ( 89.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.517 (0.869, 2.647)
p-value			0.1406
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	2 ( 22.2%)	0	
Patients (%) Without Events (Censored)	7 ( 77.8%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2416

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9996
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	9 ( 4.7%)	1 ( 0.5%)	
Patients (%) Without Events (Censored)	183 ( 95.3%)	185 ( 99.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			8.658 (1.097, 68.346)
p-value			0.0136
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.9999
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	8 ( 4.2%)	10 ( 5.4%)	
Patients (%) Without Events (Censored)	184 ( 95.8%)	176 ( 94.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.750 (0.296, 1.900)
p-value			0.5427
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9891
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	18 ( 9.4%)	8 ( 4.3%)	
Patients (%) Without Events (Censored)	174 ( 90.6%)	178 ( 95.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.904 (0.825, 4.397)
p-value			0.1251
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	0	
Patients (%) Without Events (Censored)	8 ( 88.9%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (6.3, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.4795

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9881
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	13 ( 6.8%)	12 ( 6.5%)	
Patients (%) Without Events (Censored)	179 ( 93.2%)	174 ( 93.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.023 (0.467, 2.243)
p-value			0.9539
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	0	
Patients (%) Without Events (Censored)	8 ( 88.9%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (0.4, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3458

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.0602
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	32 ( 17.8%)	14 ( 8.2%)	
Patients (%) Without Events (Censored)	148 ( 82.2%)	157 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.075 (1.106, 3.893)
p-value			0.0202
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	6 ( 26.1%)	
Patients (%) Without Events (Censored)	18 ( 85.7%)	17 ( 73.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.3, NE)	NE (2.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.394 (0.092, 1.688)
p-value			0.1915

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9996
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	9 ( 5.0%)	1 ( 0.6%)	
Patients (%) Without Events (Censored)	171 ( 95.0%)	170 ( 99.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			8.463 (1.072, 66.811)
p-value			0.0150
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	21 (100.0%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.9910
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	8 ( 4.4%)	7 ( 4.1%)	
Patients (%) Without Events (Censored)	172 ( 95.6%)	164 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.060 (0.384, 2.923)
p-value			0.9110
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	0	3 ( 13.0%)	
Patients (%) Without Events (Censored)	21 (100.0%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0823

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.2850
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	16 ( 8.9%)	5 ( 2.9%)	
Patients (%) Without Events (Censored)	164 ( 91.1%)	166 ( 97.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.607 (0.951, 7.146)
p-value			0.0532
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	18 ( 85.7%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.3, NE)	NE (2.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.898 (0.173, 4.659)
p-value			0.8889

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9879
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: Yes</b>			
Total Patients	180	171	
Patients (%) With Events	14 ( 7.8%)	9 ( 5.3%)	
Patients (%) Without Events (Censored)	166 ( 92.2%)	162 ( 94.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.454 (0.630, 3.360)
p-value			0.3784
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: No</b>			
Total Patients	21	23	
Patients (%) With Events	0	3 ( 13.0%)	
Patients (%) Without Events (Censored)	21 (100.0%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (2.4, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0823

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.2679
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	21 ( 13.5%)	14 ( 9.5%)	
Patients (%) Without Events (Censored)	134 ( 86.5%)	133 ( 90.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.355 (0.688, 2.666)
p-value			0.3786
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	14 ( 30.4%)	6 ( 12.8%)	
Patients (%) Without Events (Censored)	32 ( 69.6%)	41 ( 87.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.484 (0.954, 6.470)
p-value			0.0540

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Safety Population  
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	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.0635
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	4 ( 2.6%)	9 ( 6.1%)	
Patients (%) Without Events (Censored)	151 ( 97.4%)	138 ( 93.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.399 (0.123, 1.297)
p-value			0.1136
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	4 ( 8.7%)	1 ( 2.1%)	
Patients (%) Without Events (Censored)	42 ( 91.3%)	46 ( 97.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.297 (0.480, 38.448)
p-value			0.1549

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.6731
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	9 ( 5.8%)	4 ( 2.7%)	
Patients (%) Without Events (Censored)	146 ( 94.2%)	143 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.917 (0.589, 6.242)
p-value			0.2715
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	10 ( 21.7%)	4 ( 8.5%)	
Patients (%) Without Events (Censored)	36 ( 78.3%)	43 ( 91.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.467 (0.773, 7.876)
p-value			0.1149

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.1752
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	10 ( 6.5%)	11 ( 7.5%)	
Patients (%) Without Events (Censored)	145 ( 93.5%)	136 ( 92.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.829 (0.352, 1.952)
p-value			0.6659
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	4 ( 8.7%)	1 ( 2.1%)	
Patients (%) Without Events (Censored)	42 ( 91.3%)	46 ( 97.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.297 (0.480, 38.448)
p-value			0.1549

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9858
Race: White			
Total Patients	141	132	
Patients (%) With Events	28 ( 19.9%)	18 ( 13.6%)	
Patients (%) Without Events (Censored)	113 ( 80.1%)	114 ( 86.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.328 (0.733, 2.409)
p-value			0.3483
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2994

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.9998
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	5 ( 3.5%)	9 ( 6.8%)	
Patients (%) Without Events (Censored)	136 ( 96.5%)	123 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.493 (0.165, 1.470)
p-value			0.1958
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9901
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	16 ( 11.3%)	7 ( 5.3%)	
Patients (%) Without Events (Censored)	125 ( 88.7%)	125 ( 94.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.787 (0.730, 4.374)
p-value			0.1976
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2994

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9999
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	10 ( 7.1%)	11 ( 8.3%)	
Patients (%) Without Events (Censored)	131 ( 92.9%)	121 ( 91.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.816 (0.346, 1.921)
p-value			0.6418
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.7729
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	15 ( 17.2%)	10 ( 11.1%)	
Patients (%) Without Events (Censored)	72 ( 82.8%)	80 ( 88.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.514 (0.679, 3.375)
p-value			0.3104
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	20 ( 17.5%)	10 ( 9.6%)	
Patients (%) Without Events (Censored)	94 ( 82.5%)	94 ( 90.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.683 (0.785, 3.605)
p-value			0.1757

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.2289
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	6 ( 6.9%)	5 ( 5.6%)	
Patients (%) Without Events (Censored)	81 ( 93.1%)	85 ( 94.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.208 (0.369, 3.962)
p-value			0.7557
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	2 ( 1.8%)	5 ( 4.8%)	
Patients (%) Without Events (Censored)	112 ( 98.2%)	99 ( 95.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.351 (0.068, 1.809)
p-value			0.1906

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9079
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	7 ( 8.0%)	3 ( 3.3%)	
Patients (%) Without Events (Censored)	80 ( 92.0%)	87 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.208 (0.569, 8.567)
p-value			0.2404
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	12 ( 10.5%)	5 ( 4.8%)	
Patients (%) Without Events (Censored)	102 ( 89.5%)	99 ( 95.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.820 (0.637, 5.203)
p-value			0.2566

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.6013
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	8 ( 9.2%)	6 ( 6.7%)	
Patients (%) Without Events (Censored)	79 ( 90.8%)	84 ( 93.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.344 (0.466, 3.875)
p-value			0.5839
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	6 ( 5.3%)	6 ( 5.8%)	
Patients (%) Without Events (Censored)	108 ( 94.7%)	98 ( 94.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.892 (0.288, 2.765)
p-value			0.8439

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.1405
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	23 ( 18.7%)	10 ( 8.3%)	
Patients (%) Without Events (Censored)	100 ( 81.3%)	111 ( 91.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.301 (1.095, 4.837)
p-value			0.0238
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	12 ( 15.4%)	10 ( 13.7%)	
Patients (%) Without Events (Censored)	66 ( 84.6%)	63 ( 86.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (12.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.910 (0.391, 2.118)
p-value			0.8301

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.1058
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	6 ( 4.9%)	4 ( 3.3%)	
Patients (%) Without Events (Censored)	117 ( 95.1%)	117 ( 96.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.499 (0.423, 5.314)
p-value			0.5287
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	2 ( 2.6%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	76 ( 97.4%)	67 ( 91.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.271 (0.054, 1.345)
p-value			0.0875

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.1692
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	14 ( 11.4%)	4 ( 3.3%)	
Patients (%) Without Events (Censored)	109 ( 88.6%)	117 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.297 (1.084, 10.031)
p-value			0.0259
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	5 ( 6.4%)	4 ( 5.5%)	
Patients (%) Without Events (Censored)	73 ( 93.6%)	69 ( 94.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.801 (0.212, 3.029)
p-value			0.7428

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.1934
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	10 ( 8.1%)	6 ( 5.0%)	
Patients (%) Without Events (Censored)	113 ( 91.9%)	115 ( 95.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.673 (0.608, 4.605)
p-value			0.3148
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	4 ( 5.1%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	74 ( 94.9%)	67 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.555 (0.156, 1.970)
p-value			0.3578

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.5922
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	21 ( 18.1%)	11 ( 9.2%)	
Patients (%) Without Events (Censored)	95 ( 81.9%)	108 ( 90.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.843 (0.884, 3.843)
p-value			0.0993
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	14 ( 17.5%)	9 ( 12.3%)	
Patients (%) Without Events (Censored)	66 ( 82.5%)	64 ( 87.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.357 (0.587, 3.135)
p-value			0.4728

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9817
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	12 ( 10.3%)	5 ( 4.2%)	
Patients (%) Without Events (Censored)	104 ( 89.7%)	114 ( 95.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.022 (0.703, 5.809)
p-value			0.1825
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	7 ( 8.8%)	3 ( 4.1%)	
Patients (%) Without Events (Censored)	73 ( 91.3%)	70 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.949 (0.504, 7.542)
p-value			0.3244

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.0817
<b>Prior CDK treatment duration: &lt;= 12 months</b>			
Total Patients	116	119	
Patients (%) With Events	10 ( 8.6%)	5 ( 4.2%)	
Patients (%) Without Events (Censored)	106 ( 91.4%)	114 ( 95.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.079 (0.711, 6.085)
p-value			0.1729
<b>Prior CDK treatment duration: &gt; 12 months</b>			
Total Patients	80	73	
Patients (%) With Events	4 ( 5.0%)	7 ( 9.6%)	
Patients (%) Without Events (Censored)	76 ( 95.0%)	66 ( 90.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.491 (0.144, 1.677)
p-value			0.2466

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.4230
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	18 ( 85.7%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.370 (0.350, 32.402)
p-value			0.2636
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	24 ( 19.0%)	14 ( 11.7%)	
Patients (%) Without Events (Censored)	102 ( 81.0%)	106 ( 88.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.641 (0.849, 3.173)
p-value			0.1371
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	8 ( 14.8%)	5 ( 9.8%)	
Patients (%) Without Events (Censored)	46 ( 85.2%)	46 ( 90.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (12.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.117 (0.352, 3.544)
p-value			0.8532

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.9888
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	0	
Patients (%) Without Events (Censored)	20 ( 95.2%)	23 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2953
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	6 ( 4.8%)	6 ( 5.0%)	
Patients (%) Without Events (Censored)	120 ( 95.2%)	114 ( 95.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.946 (0.305, 2.934)
p-value			0.9255
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	1 ( 1.9%)	4 ( 7.8%)	
Patients (%) Without Events (Censored)	53 ( 98.1%)	47 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.207 (0.023, 1.853)
p-value			0.1191

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9889
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	0	
Patients (%) Without Events (Censored)	20 ( 95.2%)	23 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2963
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	12 ( 9.5%)	7 ( 5.8%)	
Patients (%) Without Events (Censored)	114 ( 90.5%)	113 ( 94.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.554 (0.611, 3.950)
p-value			0.3516
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	6 ( 11.1%)	1 ( 2.0%)	
Patients (%) Without Events (Censored)	48 ( 88.9%)	50 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.895 (0.451, 33.619)
p-value			0.1830

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9865
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	2 ( 9.5%)	0	
Patients (%) Without Events (Censored)	19 ( 90.5%)	23 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1341
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	10 ( 7.9%)	8 ( 6.7%)	
Patients (%) Without Events (Censored)	116 ( 92.1%)	112 ( 93.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.183 (0.467, 2.997)
p-value			0.7201
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	2 ( 3.7%)	4 ( 7.8%)	
Patients (%) Without Events (Censored)	52 ( 96.3%)	47 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.428 (0.078, 2.344)
p-value			0.3140

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9848
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	0	2 ( 14.3%)	
Patients (%) Without Events (Censored)	13 (100.0%)	12 ( 85.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (1.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1303
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	32 ( 17.7%)	18 ( 10.2%)	
Patients (%) Without Events (Censored)	149 ( 82.3%)	158 ( 89.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.659 (0.930, 2.960)
p-value			0.0838

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9995
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	9 ( 5.0%)	1 ( 0.6%)	
Patients (%) Without Events (Censored)	172 ( 95.0%)	175 ( 99.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			8.781 (1.112, 69.319)
p-value			0.0128

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.9920
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	0	1 ( 7.1%)	
Patients (%) Without Events (Censored)	13 (100.0%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2770
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	7 ( 3.9%)	9 ( 5.1%)	
Patients (%) Without Events (Censored)	174 ( 96.1%)	167 ( 94.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.742 (0.276, 1.993)
p-value			0.5526

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Study IMMU-132-09Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9890
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	0	1 ( 7.1%)	
Patients (%) Without Events (Censored)	13 (100.0%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3173
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	17 ( 9.4%)	7 ( 4.0%)	
Patients (%) Without Events (Censored)	164 ( 90.6%)	169 ( 96.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.065 (0.853, 4.999)
p-value			0.1006

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9902
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	0	1 ( 7.1%)	
Patients (%) Without Events (Censored)	13 (100.0%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2770
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	13 ( 7.2%)	11 ( 6.3%)	
Patients (%) Without Events (Censored)	168 ( 92.8%)	165 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.137 (0.509, 2.538)
p-value			0.7536

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.5183
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	29 ( 16.4%)	18 ( 10.5%)	
Patients (%) Without Events (Censored)	148 ( 83.6%)	153 ( 89.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.493 (0.828, 2.692)
p-value			0.1810
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	6 ( 25.0%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	18 ( 75.0%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.314 (0.464, 11.536)
p-value			0.2924

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.9895
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	7 ( 4.0%)	10 ( 5.8%)	
Patients (%) Without Events (Censored)	170 ( 96.0%)	161 ( 94.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.655 (0.249, 1.720)
p-value			0.3863
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	1 ( 4.2%)	0	
Patients (%) Without Events (Censored)	23 ( 95.8%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3276

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.6602
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	15 ( 8.5%)	7 ( 4.1%)	
Patients (%) Without Events (Censored)	162 ( 91.5%)	164 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.825 (0.741, 4.498)
p-value			0.1845
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	4 ( 16.7%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	20 ( 83.3%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.802 (0.311, 25.244)
p-value			0.3374

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9872
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes</b>			
Total Patients	177	171	
Patients (%) With Events	12 ( 6.8%)	12 ( 7.0%)	
Patients (%) Without Events (Censored)	165 ( 93.2%)	159 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.941 (0.423, 2.096)
p-value			0.8815
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No</b>			
Total Patients	24	23	
Patients (%) With Events	2 ( 8.3%)	0	
Patients (%) Without Events (Censored)	22 ( 91.7%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1617

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.5092
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	22 ( 18.0%)	15 ( 11.6%)	
Patients (%) Without Events (Censored)	100 ( 82.0%)	114 ( 88.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.441 (0.745, 2.785)
p-value			0.2752
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	13 ( 16.5%)	5 ( 7.7%)	
Patients (%) Without Events (Censored)	66 ( 83.5%)	60 ( 92.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.094 (0.746, 5.881)
p-value			0.1513

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.2566
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	4 ( 3.3%)	8 ( 6.2%)	
Patients (%) Without Events (Censored)	118 ( 96.7%)	121 ( 93.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.497 (0.150, 1.652)
p-value			0.2447
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	4 ( 5.1%)	2 ( 3.1%)	
Patients (%) Without Events (Censored)	75 ( 94.9%)	63 ( 96.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.686 (0.309, 9.206)
p-value			0.5430

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.3301
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	10 ( 8.2%)	6 ( 4.7%)	
Patients (%) Without Events (Censored)	112 ( 91.8%)	123 ( 95.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.497 (0.539, 4.162)
p-value			0.4371
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	9 ( 11.4%)	2 ( 3.1%)	
Patients (%) Without Events (Censored)	70 ( 88.6%)	63 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.431 (0.741, 15.897)
p-value			0.0935

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.7190
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	9 ( 7.4%)	9 ( 7.0%)	
Patients (%) Without Events (Censored)	113 ( 92.6%)	120 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.011 (0.401, 2.547)
p-value			0.9814
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	5 ( 6.3%)	3 ( 4.6%)	
Patients (%) Without Events (Censored)	74 ( 93.7%)	62 ( 95.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.408 (0.336, 5.892)
p-value			0.6391

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9879
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	11 ( 16.2%)	8 ( 11.1%)	
Patients (%) Without Events (Censored)	57 ( 83.8%)	64 ( 88.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.478 (0.594, 3.678)
p-value			0.4031
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	12 ( 16.9%)	8 ( 10.8%)	
Patients (%) Without Events (Censored)	59 ( 83.1%)	66 ( 89.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.319 (0.536, 3.247)
p-value			0.5456
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	9 ( 22.5%)	4 ( 15.4%)	
Patients (%) Without Events (Censored)	31 ( 77.5%)	22 ( 84.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (12.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.438 (0.442, 4.674)
p-value			0.5457

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.8303
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	4 ( 5.9%)	2 ( 2.8%)	
Patients (%) Without Events (Censored)	64 ( 94.1%)	70 ( 97.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.087 (0.381, 11.425)
p-value			0.3868
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	8 ( 11.3%)	4 ( 5.4%)	
Patients (%) Without Events (Censored)	63 ( 88.7%)	70 ( 94.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.555 (0.461, 5.249)
p-value			0.4736
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	5 ( 12.5%)	2 ( 7.7%)	
Patients (%) Without Events (Censored)	35 ( 87.5%)	24 ( 92.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.532 (0.296, 7.935)
p-value			0.6083

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.4: Time to the First Serious Treatment-Emergent Adverse Event (TEAE) of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.8161
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	5 ( 7.4%)	5 ( 6.9%)	
Patients (%) Without Events (Censored)	63 ( 92.6%)	67 ( 93.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.063 (0.308, 3.671)
p-value			0.9235
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	5 ( 7.0%)	4 ( 5.4%)	
Patients (%) Without Events (Censored)	66 ( 93.0%)	70 ( 94.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.242 (0.333, 4.633)
p-value			0.7478
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	4 ( 10.0%)	3 ( 11.5%)	
Patients (%) Without Events (Censored)	36 ( 90.0%)	23 ( 88.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.838 (0.187, 3.743)
p-value			0.8163

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.0797
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	62 ( 65.3%)	34 ( 37.0%)	
Patients (%) Without Events (Censored)	33 ( 34.7%)	58 ( 63.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.7, 2.5)	NE (4.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.061 (1.355, 3.134)
p-value			0.0005
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	63 ( 59.4%)	52 ( 51.0%)	
Patients (%) Without Events (Censored)	43 ( 40.6%)	50 ( 49.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.9, 6.3)	3.1 (2.1, 9.6)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.267 (0.877, 1.829)
p-value			0.2172

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.7656
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	8 ( 8.4%)	1 ( 1.1%)	
Patients (%) Without Events (Censored)	87 ( 91.6%)	91 ( 98.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			7.548 (0.942, 60.448)
p-value			0.0250
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	11 ( 10.4%)	2 ( 2.0%)	
Patients (%) Without Events (Censored)	95 ( 89.6%)	100 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.188 (1.150, 23.412)
p-value			0.0168

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.1207
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	7 ( 7.4%)	3 ( 3.3%)	
Patients (%) Without Events (Censored)	88 ( 92.6%)	89 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.260 (0.584, 8.741)
p-value			0.2251
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	5 ( 4.7%)	8 ( 7.8%)	
Patients (%) Without Events (Censored)	101 ( 95.3%)	94 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.558 (0.182, 1.707)
p-value			0.2998

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.1969
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	11 ( 11.6%)	2 ( 2.2%)	
Patients (%) Without Events (Censored)	84 ( 88.4%)	90 ( 97.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.624 (1.020, 20.959)
p-value			0.0291
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	10 ( 9.4%)	6 ( 5.9%)	
Patients (%) Without Events (Censored)	96 ( 90.6%)	96 ( 94.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.297 (0.464, 3.626)
p-value			0.6186

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.0303
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	57 ( 60.0%)	30 ( 32.6%)	
Patients (%) Without Events (Censored)	38 ( 40.0%)	62 ( 67.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.7, 3.7)	NE (6.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.147 (1.378, 3.344)
p-value			0.0005
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	54 ( 50.9%)	47 ( 46.1%)	
Patients (%) Without Events (Censored)	52 ( 49.1%)	55 ( 53.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.6 (1.0, NE)	8.3 (2.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.122 (0.758, 1.659)
p-value			0.5894

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.4202
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	118 ( 61.5%)	83 ( 44.6%)	
Patients (%) Without Events (Censored)	74 ( 38.5%)	103 ( 55.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.9, 2.3)	5.8 (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.542 (1.164, 2.043)
p-value			0.0023
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	7 ( 77.8%)	3 ( 37.5%)	
Patients (%) Without Events (Censored)	2 ( 22.2%)	5 ( 62.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.3, NE)	NE (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.861 (0.727, 11.265)
p-value			0.1188

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9994
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	19 ( 9.9%)	3 ( 1.6%)	
Patients (%) Without Events (Censored)	173 ( 90.1%)	183 ( 98.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			5.974 (1.766, 20.210)
p-value			0.0011
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			1.0000
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	12 ( 6.3%)	11 ( 5.9%)	
Patients (%) Without Events (Censored)	180 ( 93.8%)	175 ( 94.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.019 (0.450, 2.311)
p-value			0.9641
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9890
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	20 ( 10.4%)	8 ( 4.3%)	
Patients (%) Without Events (Censored)	172 ( 89.6%)	178 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.081 (0.911, 4.752)
p-value			0.0756
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	0	
Patients (%) Without Events (Censored)	8 ( 88.9%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.4795

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.9921
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	5 ( 2.6%)	7 ( 3.8%)	
Patients (%) Without Events (Censored)	187 ( 97.4%)	179 ( 96.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.565 (0.178, 1.794)
p-value			0.3268
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	0	
Patients (%) Without Events (Censored)	8 ( 88.9%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.4142

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.7218
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	106 ( 55.2%)	74 ( 39.8%)	
Patients (%) Without Events (Censored)	86 ( 44.8%)	112 ( 60.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.6 (1.0, 4.6)	9.6 (4.3, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.504 (1.117, 2.025)
p-value			0.0068
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	5 ( 55.6%)	3 ( 37.5%)	
Patients (%) Without Events (Censored)	4 ( 44.4%)	5 ( 62.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.6 (0.3, NE)	NE (0.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.279 (0.538, 9.644)
p-value			0.2553

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.2176
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	114 ( 63.3%)	74 ( 43.3%)	
Patients (%) Without Events (Censored)	66 ( 36.7%)	97 ( 56.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.9, 2.2)	8.3 (3.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.676 (1.250, 2.246)
p-value			0.0005
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	11 ( 52.4%)	12 ( 52.2%)	
Patients (%) Without Events (Censored)	10 ( 47.6%)	11 ( 47.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.6 (0.5, NE)	2.3 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.896 (0.391, 2.052)
p-value			0.7921

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9909
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	16 ( 8.9%)	3 ( 1.8%)	
Patients (%) Without Events (Censored)	164 ( 91.1%)	168 ( 98.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.860 (1.414, 16.707)
p-value			0.0055
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	0	
Patients (%) Without Events (Censored)	18 ( 85.7%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0738

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.3158
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	11 ( 6.1%)	8 ( 4.7%)	
Patients (%) Without Events (Censored)	169 ( 93.9%)	163 ( 95.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.261 (0.507, 3.135)
p-value			0.6173
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	20 ( 95.2%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.349 (0.036, 3.358)
p-value			0.3399

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.5873
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: Yes</b>			
Total Patients	180	171	
Patients (%) With Events	18 ( 10.0%)	6 ( 3.5%)	
Patients (%) Without Events (Censored)	162 ( 90.0%)	165 ( 96.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.409 (0.950, 6.106)
p-value			0.0561
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: No</b>			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	18 ( 85.7%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.3, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.344 (0.214, 8.460)
p-value			0.7599

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.9921
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	5 ( 2.8%)	7 ( 4.1%)	
Patients (%) Without Events (Censored)	175 ( 97.2%)	164 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.530 (0.167, 1.683)
p-value			0.2737
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	0	
Patients (%) Without Events (Censored)	20 ( 95.2%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2781

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.1157
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: Yes</b>			
Total Patients	180	171	
Patients (%) With Events	104 ( 57.8%)	67 ( 39.2%)	
Patients (%) Without Events (Censored)	76 ( 42.2%)	104 ( 60.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.3 (0.9, 3.7)	9.6 (6.0, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.642 (1.208, 2.233)
p-value			0.0015
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: No</b>			
Total Patients	21	23	
Patients (%) With Events	7 ( 33.3%)	10 ( 43.5%)	
Patients (%) Without Events (Censored)	14 ( 66.7%)	13 ( 56.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (0.7, NE)	2.4 (0.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.700 (0.265, 1.851)
p-value			0.4682

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9070
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	95 ( 61.3%)	63 ( 42.9%)	
Patients (%) Without Events (Censored)	60 ( 38.7%)	84 ( 57.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.9, 2.5)	8.3 (2.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.566 (1.138, 2.154)
p-value			0.0056
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	30 ( 65.2%)	23 ( 48.9%)	
Patients (%) Without Events (Censored)	16 ( 34.8%)	24 ( 51.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.6, 6.3)	3.8 (1.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.642 (0.951, 2.833)
p-value			0.0719

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.7872
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	12 ( 7.7%)	2 ( 1.4%)	
Patients (%) Without Events (Censored)	143 ( 92.3%)	145 ( 98.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.186 (1.157, 23.245)
p-value			0.0165
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	7 ( 15.2%)	1 ( 2.1%)	
Patients (%) Without Events (Censored)	39 ( 84.8%)	46 ( 97.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			7.785 (0.957, 63.300)
p-value			0.0230

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.0750
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	7 ( 4.5%)	10 ( 6.8%)	
Patients (%) Without Events (Censored)	148 ( 95.5%)	137 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.622 (0.236, 1.634)
p-value			0.3295
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	5 ( 10.9%)	1 ( 2.1%)	
Patients (%) Without Events (Censored)	41 ( 89.1%)	46 ( 97.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.438 (0.635, 46.551)
p-value			0.0824

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.8492
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	10 ( 6.5%)	3 ( 2.0%)	
Patients (%) Without Events (Censored)	145 ( 93.5%)	144 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.649 (0.722, 9.718)
p-value			0.1273
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	11 ( 23.9%)	5 ( 10.6%)	
Patients (%) Without Events (Censored)	35 ( 76.1%)	42 ( 89.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (12.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.231 (0.774, 6.431)
p-value			0.1270

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.8467
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	88 ( 56.8%)	58 ( 39.5%)	
Patients (%) Without Events (Censored)	67 ( 43.2%)	89 ( 60.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (1.0, 4.6)	9.6 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.540 (1.104, 2.146)
p-value			0.0106
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	23 ( 50.0%)	19 ( 40.4%)	
Patients (%) Without Events (Censored)	23 ( 50.0%)	28 ( 59.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (0.9, NE)	6.0 (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.427 (0.776, 2.624)
p-value			0.2549

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.9084
Race: White			
Total Patients	141	132	
Patients (%) With Events	89 ( 63.1%)	62 ( 47.0%)	
Patients (%) Without Events (Censored)	52 ( 36.9%)	70 ( 53.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 2.3)	4.4 (2.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.499 (1.084, 2.075)
p-value			0.0140
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	8 ( 61.5%)	7 ( 43.8%)	
Patients (%) Without Events (Censored)	5 ( 38.5%)	9 ( 56.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (0.3, NE)	NE (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.567 (0.566, 4.340)
p-value			0.4120

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9997
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	11 ( 7.8%)	2 ( 1.5%)	
Patients (%) Without Events (Censored)	130 ( 92.2%)	130 ( 98.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.774 (1.055, 21.601)
p-value			0.0251
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.9999
Race: White			
Total Patients	141	132	
Patients (%) With Events	8 ( 5.7%)	10 ( 7.6%)	
Patients (%) Without Events (Censored)	133 ( 94.3%)	122 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.702 (0.277, 1.779)
p-value			0.4546
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9895
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	19 ( 13.5%)	8 ( 6.1%)	
Patients (%) Without Events (Censored)	122 ( 86.5%)	124 ( 93.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.802 (0.780, 4.160)
p-value			0.1621
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2994

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.9999
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	6 ( 4.3%)	7 ( 5.3%)	
Patients (%) Without Events (Censored)	135 ( 95.7%)	125 ( 94.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.611 (0.203, 1.838)
p-value			0.3758
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.8898
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	79 ( 56.0%)	54 ( 40.9%)	
Patients (%) Without Events (Censored)	62 ( 44.0%)	78 ( 59.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.9, 4.6)	9.6 (2.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.495 (1.057, 2.114)
p-value			0.0223
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	7 ( 53.8%)	7 ( 43.8%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	9 ( 56.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.7 (0.3, NE)	NE (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.401 (0.490, 4.009)
p-value			0.5673

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.7197
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	55 ( 63.2%)	41 ( 45.6%)	
Patients (%) Without Events (Censored)	32 ( 36.8%)	49 ( 54.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 3.7)	5.8 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.481 (0.987, 2.221)
p-value			0.0549
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	70 ( 61.4%)	45 ( 43.3%)	
Patients (%) Without Events (Censored)	44 ( 38.6%)	59 ( 56.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.9, 2.6)	3.8 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.673 (1.149, 2.434)
p-value			0.0068

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.3885
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	7 ( 8.0%)	2 ( 2.2%)	
Patients (%) Without Events (Censored)	80 ( 92.0%)	88 ( 97.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.612 (0.750, 17.403)
p-value			0.0869
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	12 ( 10.5%)	1 ( 1.0%)	
Patients (%) Without Events (Censored)	102 ( 89.5%)	103 ( 99.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			10.500 (1.364, 80.844)
p-value			0.0049

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.4242
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	7 ( 8.0%)	5 ( 5.6%)	
Patients (%) Without Events (Censored)	80 ( 92.0%)	85 ( 94.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.427 (0.453, 4.497)
p-value			0.5440
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	5 ( 4.4%)	6 ( 5.8%)	
Patients (%) Without Events (Censored)	109 ( 95.6%)	98 ( 94.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.715 (0.218, 2.344)
p-value			0.5787

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.8877
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	8 ( 9.2%)	3 ( 3.3%)	
Patients (%) Without Events (Censored)	79 ( 90.8%)	87 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.564 (0.678, 9.695)
p-value			0.1505
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	13 ( 11.4%)	5 ( 4.8%)	
Patients (%) Without Events (Censored)	101 ( 88.6%)	99 ( 95.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.937 (0.685, 5.478)
p-value			0.2049

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.7984
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	52 ( 59.8%)	36 ( 40.0%)	
Patients (%) Without Events (Censored)	35 ( 40.2%)	54 ( 60.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.7, 4.8)	8.3 (4.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.566 (1.022, 2.398)
p-value			0.0364
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	59 ( 51.8%)	41 ( 39.4%)	
Patients (%) Without Events (Censored)	55 ( 48.2%)	63 ( 60.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.5 (1.0, NE)	NE (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.481 (0.994, 2.206)
p-value			0.0553

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.1245
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	72 ( 58.5%)	57 ( 47.1%)	
Patients (%) Without Events (Censored)	51 ( 41.5%)	64 ( 52.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.5 (1.0, 4.8)	4.6 (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.339 (0.946, 1.897)
p-value			0.0957
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	53 ( 67.9%)	29 ( 39.7%)	
Patients (%) Without Events (Censored)	25 ( 32.1%)	44 ( 60.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.5, 1.9)	NE (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.073 (1.317, 3.262)
p-value			0.0014

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.3090
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	12 ( 9.8%)	1 ( 0.8%)	
Patients (%) Without Events (Censored)	111 ( 90.2%)	120 ( 99.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			11.458 (1.488, 88.251)
p-value			0.0031
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	7 ( 9.0%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	71 ( 91.0%)	71 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.138 (0.651, 15.131)
p-value			0.1332

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.1039
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	9 ( 7.3%)	5 ( 4.1%)	
Patients (%) Without Events (Censored)	114 ( 92.7%)	116 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.788 (0.599, 5.337)
p-value			0.2916
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	3 ( 3.8%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	75 ( 96.2%)	67 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.414 (0.103, 1.659)
p-value			0.1995

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.1063
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	14 ( 11.4%)	3 ( 2.5%)	
Patients (%) Without Events (Censored)	109 ( 88.6%)	118 ( 97.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.228 (1.211, 14.760)
p-value			0.0140
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	7 ( 9.0%)	5 ( 6.8%)	
Patients (%) Without Events (Censored)	71 ( 91.0%)	68 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.983 (0.308, 3.137)
p-value			0.9776

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.0192
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	62 ( 50.4%)	54 ( 44.6%)	
Patients (%) Without Events (Censored)	61 ( 49.6%)	67 ( 55.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.8 (1.0, NE)	8.3 (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.161 (0.806, 1.673)
p-value			0.4169
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	49 ( 62.8%)	23 ( 31.5%)	
Patients (%) Without Events (Censored)	29 ( 37.2%)	50 ( 68.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.5, 2.6)	NE (2.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.396 (1.459, 3.936)
p-value			0.0004

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.3165
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	70 ( 60.3%)	54 ( 45.4%)	
Patients (%) Without Events (Censored)	46 ( 39.7%)	65 ( 54.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (0.9, 3.8)	4.4 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.400 (0.981, 1.998)
p-value			0.0588
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	53 ( 66.3%)	32 ( 43.8%)	
Patients (%) Without Events (Censored)	27 ( 33.8%)	41 ( 56.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 1.9)	5.8 (1.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.900 (1.224, 2.949)
p-value			0.0042

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9673
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	12 ( 10.3%)	2 ( 1.7%)	
Patients (%) Without Events (Censored)	104 ( 89.7%)	117 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.165 (1.379, 27.567)
p-value			0.0065
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	7 ( 8.8%)	1 ( 1.4%)	
Patients (%) Without Events (Censored)	73 ( 91.3%)	72 ( 98.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.142 (0.756, 49.935)
p-value			0.0524

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.4058
<b>Prior CDK treatment duration: &lt;= 12 months</b>			
Total Patients	116	119	
Patients (%) With Events	7 ( 6.0%)	5 ( 4.2%)	
Patients (%) Without Events (Censored)	109 ( 94.0%)	114 ( 95.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.427 (0.453, 4.499)
p-value			0.5439
<b>Prior CDK treatment duration: &gt; 12 months</b>			
Total Patients	80	73	
Patients (%) With Events	5 ( 6.3%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	75 ( 93.8%)	67 ( 91.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.708 (0.216, 2.321)
p-value			0.5679

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.5535
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	13 ( 11.2%)	4 ( 3.4%)	
Patients (%) Without Events (Censored)	103 ( 88.8%)	115 ( 96.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.691 (0.863, 8.393)
p-value			0.0765
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	8 ( 10.0%)	4 ( 5.5%)	
Patients (%) Without Events (Censored)	72 ( 90.0%)	69 ( 94.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.676 (0.505, 5.570)
p-value			0.3937

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.5636
<b>Prior CDK treatment duration: &lt;= 12 months</b>			
Total Patients	116	119	
Patients (%) With Events	61 ( 52.6%)	46 ( 38.7%)	
Patients (%) Without Events (Censored)	55 ( 47.4%)	73 ( 61.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	2.6 (1.0, 6.9)	8.3 (4.3, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.395 (0.951, 2.048)
p-value			0.0814
<b>Prior CDK treatment duration: &gt; 12 months</b>			
Total Patients	80	73	
Patients (%) With Events	48 ( 60.0%)	31 ( 42.5%)	
Patients (%) Without Events (Censored)	32 ( 40.0%)	42 ( 57.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.0 (0.7, 2.6)	NE (1.8, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.698 (1.081, 2.669)
p-value			0.0232

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.0058
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	14 ( 66.7%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	7 ( 33.3%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.6, 4.8)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			7.552 (2.156, 26.458)
p-value			0.0002
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	81 ( 64.3%)	59 ( 49.2%)	
Patients (%) Without Events (Censored)	45 ( 35.7%)	61 ( 50.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 2.2)	4.4 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.473 (1.052, 2.062)
p-value			0.0213
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	30 ( 55.6%)	24 ( 47.1%)	
Patients (%) Without Events (Censored)	24 ( 44.4%)	27 ( 52.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (0.9, NE)	2.4 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.112 (0.646, 1.916)
p-value			0.7214

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.6621
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	2 ( 9.5%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	19 ( 90.5%)	21 ( 91.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.121 (0.158, 7.963)
p-value			0.9089
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	14 ( 11.1%)	0	
Patients (%) Without Events (Censored)	112 ( 88.9%)	120 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0002
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	3 ( 5.6%)	1 ( 2.0%)	
Patients (%) Without Events (Censored)	51 ( 94.4%)	50 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.303 (0.237, 22.397)
p-value			0.4599

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.9881
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	0	
Patients (%) Without Events (Censored)	20 ( 95.2%)	23 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2953
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	8 ( 6.3%)	7 ( 5.8%)	
Patients (%) Without Events (Censored)	118 ( 93.7%)	113 ( 94.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.083 (0.393, 2.986)
p-value			0.8773
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	3 ( 5.6%)	4 ( 7.8%)	
Patients (%) Without Events (Censored)	51 ( 94.4%)	47 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.536 (0.118, 2.434)
p-value			0.4124

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.5033
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	20 ( 95.2%)	22 ( 95.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.093 (0.068, 17.478)
p-value			0.9498
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	14 ( 11.1%)	6 ( 5.0%)	
Patients (%) Without Events (Censored)	112 ( 88.9%)	114 ( 95.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (16.1, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.112 (0.810, 5.510)
p-value			0.1179
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	6 ( 11.1%)	1 ( 2.0%)	
Patients (%) Without Events (Censored)	48 ( 88.9%)	50 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (5.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.331 (0.378, 29.341)
p-value			0.2518

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9747
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	13 ( 61.9%)	0	
Patients (%) Without Events (Censored)	8 ( 38.1%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.6 (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			<0.0001
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	69 ( 54.8%)	53 ( 44.2%)	
Patients (%) Without Events (Censored)	57 ( 45.2%)	67 ( 55.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.9, NE)	8.3 (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.346 (0.940, 1.928)
p-value			0.0978
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	29 ( 53.7%)	24 ( 47.1%)	
Patients (%) Without Events (Censored)	25 ( 46.3%)	27 ( 52.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (0.9, NE)	2.4 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.086 (0.628, 1.877)
p-value			0.7932

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.6473
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	7 ( 53.8%)	6 ( 42.9%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	8 ( 57.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.5 (0.3, NE)	4.6 (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.047 (0.335, 3.271)
p-value			0.9468
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	113 ( 62.4%)	79 ( 44.9%)	
Patients (%) Without Events (Censored)	68 ( 37.6%)	97 ( 55.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.9, 2.2)	5.8 (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.575 (1.181, 2.100)
p-value			0.0018

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9901
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.6547
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	17 ( 9.4%)	3 ( 1.7%)	
Patients (%) Without Events (Censored)	164 ( 90.6%)	173 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.479 (1.604, 18.711)
p-value			0.0023

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.9909
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	0	1 ( 7.1%)	
Patients (%) Without Events (Censored)	13 (100.0%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2770
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	10 ( 5.5%)	10 ( 5.7%)	
Patients (%) Without Events (Censored)	171 ( 94.5%)	166 ( 94.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.945 (0.393, 2.271)
p-value			0.8984

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.9891
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	0	1 ( 7.1%)	
Patients (%) Without Events (Censored)	13 (100.0%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3173
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	18 ( 9.9%)	7 ( 4.0%)	
Patients (%) Without Events (Censored)	163 ( 90.1%)	169 ( 96.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.124 (0.881, 5.117)
p-value			0.0861

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.3019
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	2 ( 14.3%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	12 ( 85.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.5, NE)	4.6 (4.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0368
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	5 ( 2.8%)	5 ( 2.8%)	
Patients (%) Without Events (Censored)	176 ( 97.2%)	171 ( 97.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.818 (0.235, 2.841)
p-value			0.7509

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.9034
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	6 ( 46.2%)	4 ( 28.6%)	
Patients (%) Without Events (Censored)	7 ( 53.8%)	10 ( 71.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.3, NE)	NE (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.695 (0.478, 6.013)
p-value			0.4124
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	101 ( 55.8%)	72 ( 40.9%)	
Patients (%) Without Events (Censored)	80 ( 44.2%)	104 ( 59.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (1.0, 4.6)	8.3 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.492 (1.102, 2.020)
p-value			0.0092

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.4747
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	109 ( 61.6%)	78 ( 45.6%)	
Patients (%) Without Events (Censored)	68 ( 38.4%)	93 ( 54.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 1.7)	4.4 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.524 (1.139, 2.039)
p-value			0.0043
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	16 ( 66.7%)	8 ( 34.8%)	
Patients (%) Without Events (Censored)	8 ( 33.3%)	15 ( 65.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.4 (1.0, 6.5)	NE (0.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.069 (0.885, 4.839)
p-value			0.0895

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Diarrhea			
Interaction p-value			0.5787
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	15 ( 8.5%)	2 ( 1.2%)	
Patients (%) Without Events (Censored)	162 ( 91.5%)	169 ( 98.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			7.182 (1.640, 31.441)
p-value			0.0022
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	4 ( 16.7%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	20 ( 83.3%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.844 (0.316, 25.570)
p-value			0.3294

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Febrile neutropenia			
Interaction p-value			0.9886
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	11 ( 6.2%)	11 ( 6.4%)	
Patients (%) Without Events (Censored)	166 ( 93.8%)	160 ( 93.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.934 (0.405, 2.154)
p-value			0.8715
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	1 ( 4.2%)	0	
Patients (%) Without Events (Censored)	23 ( 95.8%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3276

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.7318
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes</b>			
Total Patients	177	171	
Patients (%) With Events	17 ( 9.6%)	7 ( 4.1%)	
Patients (%) Without Events (Censored)	160 ( 90.4%)	164 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.017 (0.830, 4.904)
p-value			0.1143
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No</b>			
Total Patients	24	23	
Patients (%) With Events	4 ( 16.7%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	20 ( 83.3%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.802 (0.311, 25.244)
p-value			0.3374

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neuropathy+</b>			
Interaction p-value			0.9590
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	5 ( 2.8%)	6 ( 3.5%)	
Patients (%) Without Events (Censored)	172 ( 97.2%)	165 ( 96.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.652 (0.198, 2.153)
p-value			0.4799
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	1 ( 4.2%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	23 ( 95.8%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.799 (0.049, 12.926)
p-value			0.8744

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Neutropenia+			
Interaction p-value			0.9004
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	100 ( 56.5%)	70 ( 40.9%)	
Patients (%) Without Events (Censored)	77 ( 43.5%)	101 ( 59.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (0.9, 3.8)	8.3 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.513 (1.114, 2.054)
p-value			0.0075
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	11 ( 45.8%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	13 ( 54.2%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.0, NE)	NE (6.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.640 (0.635, 4.235)
p-value			0.3126

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.5812
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	74 ( 60.7%)	53 ( 41.1%)	
Patients (%) Without Events (Censored)	48 ( 39.3%)	76 ( 58.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.8, 3.7)	5.8 (2.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.673 (1.175, 2.382)
p-value			0.0038
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	51 ( 64.6%)	33 ( 50.8%)	
Patients (%) Without Events (Censored)	28 ( 35.4%)	32 ( 49.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.7, 2.5)	3.8 (1.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.413 (0.911, 2.191)
p-value			0.1218

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Diarrhea</b>			
Interaction p-value			0.9892
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	11 ( 9.0%)	3 ( 2.3%)	
Patients (%) Without Events (Censored)	111 ( 91.0%)	126 ( 97.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.593 (0.999, 12.925)
p-value			0.0365
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	8 ( 10.1%)	0	
Patients (%) Without Events (Censored)	71 ( 89.9%)	65 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0097

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Febrile neutropenia</b>			
Interaction p-value			0.6265
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	7 ( 5.7%)	8 ( 6.2%)	
Patients (%) Without Events (Censored)	115 ( 94.3%)	121 ( 93.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.881 (0.319, 2.429)
p-value			0.8060
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	5 ( 6.3%)	3 ( 4.6%)	
Patients (%) Without Events (Censored)	74 ( 93.7%)	62 ( 95.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.363 (0.326, 5.705)
p-value			0.6708

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.4415
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	12 ( 9.8%)	6 ( 4.7%)	
Patients (%) Without Events (Censored)	110 ( 90.2%)	123 ( 95.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.811 (0.674, 4.867)
p-value			0.2332
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	9 ( 11.4%)	2 ( 3.1%)	
Patients (%) Without Events (Censored)	70 ( 88.6%)	63 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.207 (0.688, 14.952)
p-value			0.1172

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.6862
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	64 ( 52.5%)	47 ( 36.4%)	
Patients (%) Without Events (Censored)	58 ( 47.5%)	82 ( 63.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.9 (1.0, NE)	NE (4.3, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.581 (1.084, 2.304)
p-value			0.0164
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	47 ( 59.5%)	30 ( 46.2%)	
Patients (%) Without Events (Censored)	32 ( 40.5%)	35 ( 53.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.4 (0.7, 4.8)	8.3 (1.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.392 (0.880, 2.201)
p-value			0.1584

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Overall			
Interaction p-value			0.0711
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	42 ( 61.8%)	39 ( 54.2%)	
Patients (%) Without Events (Censored)	26 ( 38.2%)	33 ( 45.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.6, 4.6)	2.4 (0.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.263 (0.817, 1.954)
p-value			0.3050
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	42 ( 59.2%)	29 ( 39.2%)	
Patients (%) Without Events (Censored)	29 ( 40.8%)	45 ( 60.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (0.9, 6.9)	8.3 (3.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.434 (0.889, 2.313)
p-value			0.1364
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	27 ( 67.5%)	10 ( 38.5%)	
Patients (%) Without Events (Censored)	13 ( 32.5%)	16 ( 61.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 2.2)	9.6 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.690 (1.293, 5.595)
p-value			0.0060

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Infections</b>			
Interaction p-value			0.7621
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	5 ( 7.4%)	4 ( 5.6%)	
Patients (%) Without Events (Censored)	63 ( 92.6%)	68 ( 94.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.306 (0.350, 4.873)
p-value			0.6915
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	8 ( 11.3%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	63 ( 88.7%)	72 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.310 (0.696, 15.747)
p-value			0.1115
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	6 ( 15.0%)	2 ( 7.7%)	
Patients (%) Without Events (Censored)	34 ( 85.0%)	24 ( 92.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.655 (0.329, 8.336)
p-value			0.5371

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable. The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10. The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC). The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Neutropenia+</b>			
Interaction p-value			0.1471
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	38 ( 55.9%)	35 ( 48.6%)	
Patients (%) Without Events (Censored)	30 ( 44.1%)	37 ( 51.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.3 (0.7, 4.8)	2.8 (1.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.250 (0.790, 1.980)
p-value			0.3536
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	36 ( 50.7%)	26 ( 35.1%)	
Patients (%) Without Events (Censored)	35 ( 49.3%)	48 ( 64.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.0 (1.0, NE)	8.3 (6.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.398 (0.842, 2.321)
p-value			0.1919
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Table 15.11.4.6: Time to the First Grade 3 or Higher TEAE of Special Interest by Subgroup  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	24 ( 60.0%)	9 ( 34.6%)	
Patients (%) Without Events (Censored)	16 ( 40.0%)	17 ( 65.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.5, NE)	9.6 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.335 (1.083, 5.034)
p-value			0.0266

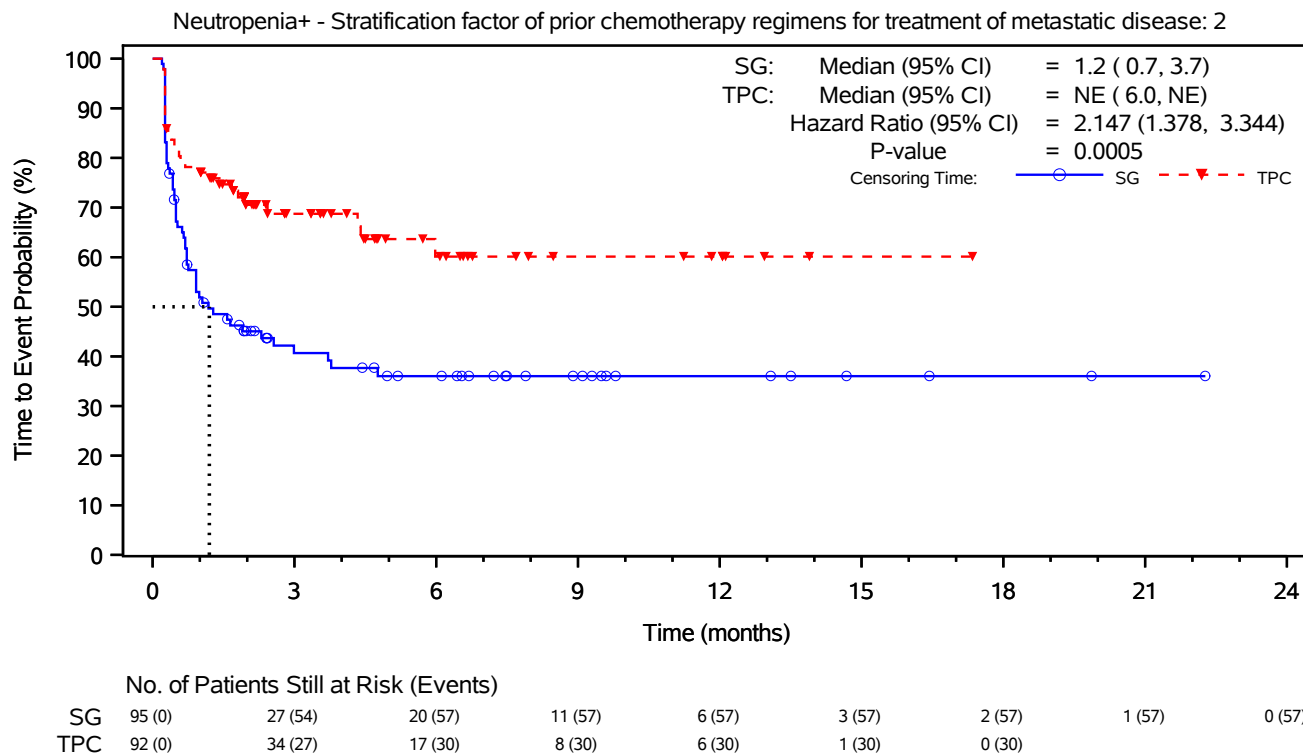
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup.  
Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.  
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.  
Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.  
The subgroup is kept if the number of total patients in of all categories over total (SG+TPC) is no less than 10.  
The subgroup is kept if at least one category has no less than 10 patients with events in total (SG and TPC).  
The analysis is based on Interim 2 data cut at 7/1/2022.

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Figure 15.11.4.6.1: KM Plot for Time to the First  $\geq$ Grade 3 TEAE of Special Interest by Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

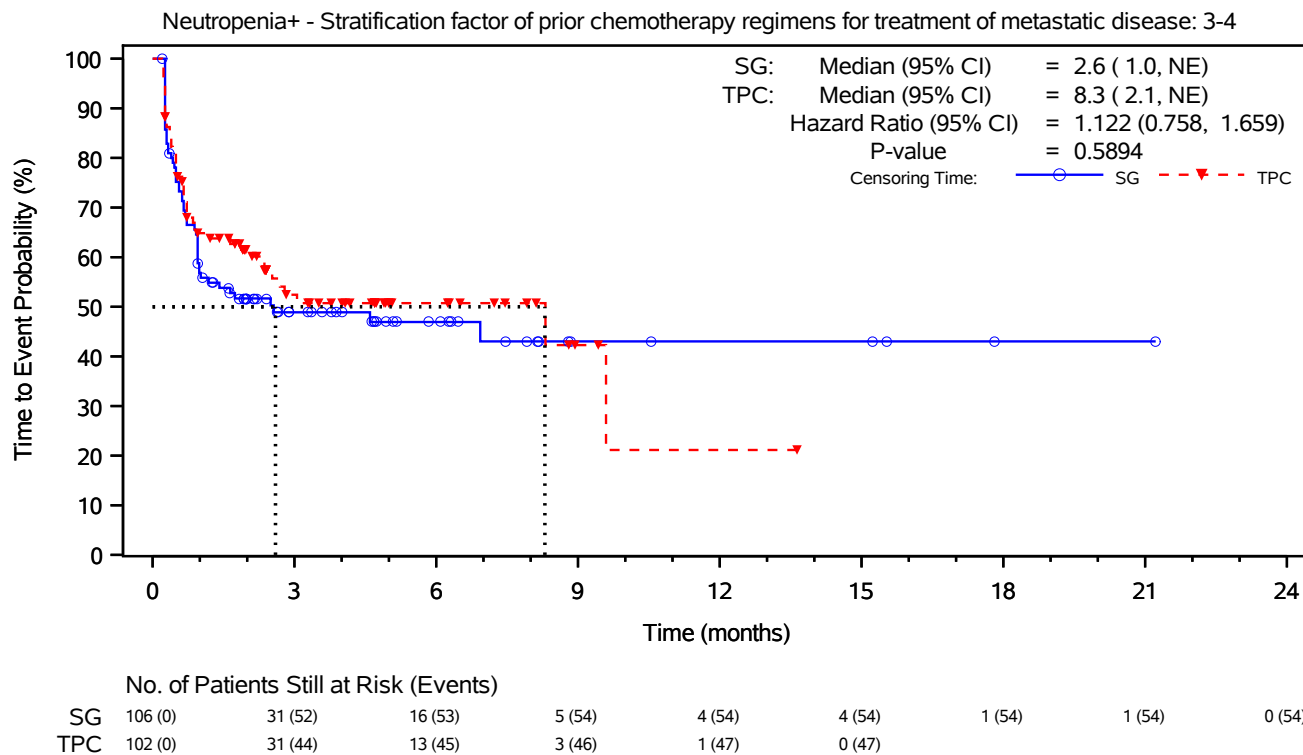
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Figure 15.11.4.6.1: KM Plot for Time to the First  $\geq$ Grade 3 TEAE of Special Interest by Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

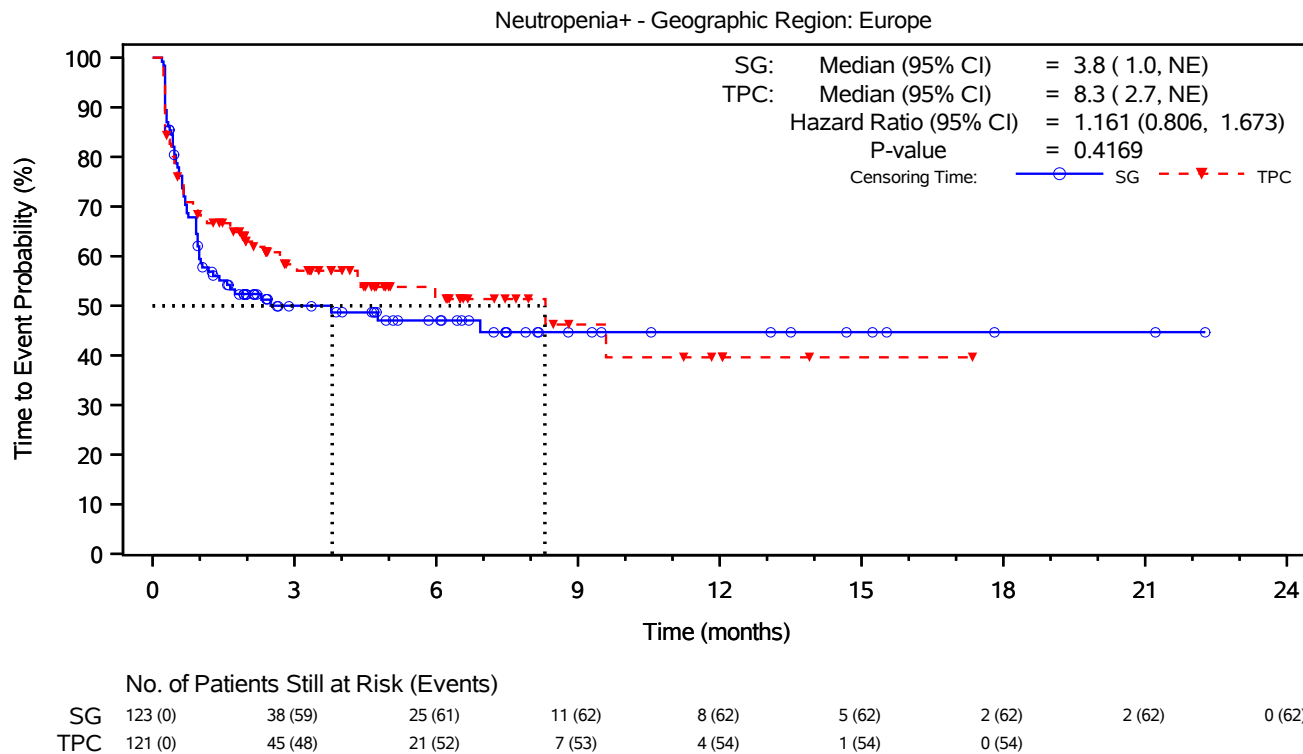
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.6.2: KM Plot for Time to the First  $\geq$ Grade 3 TEAE of Special Interest by Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

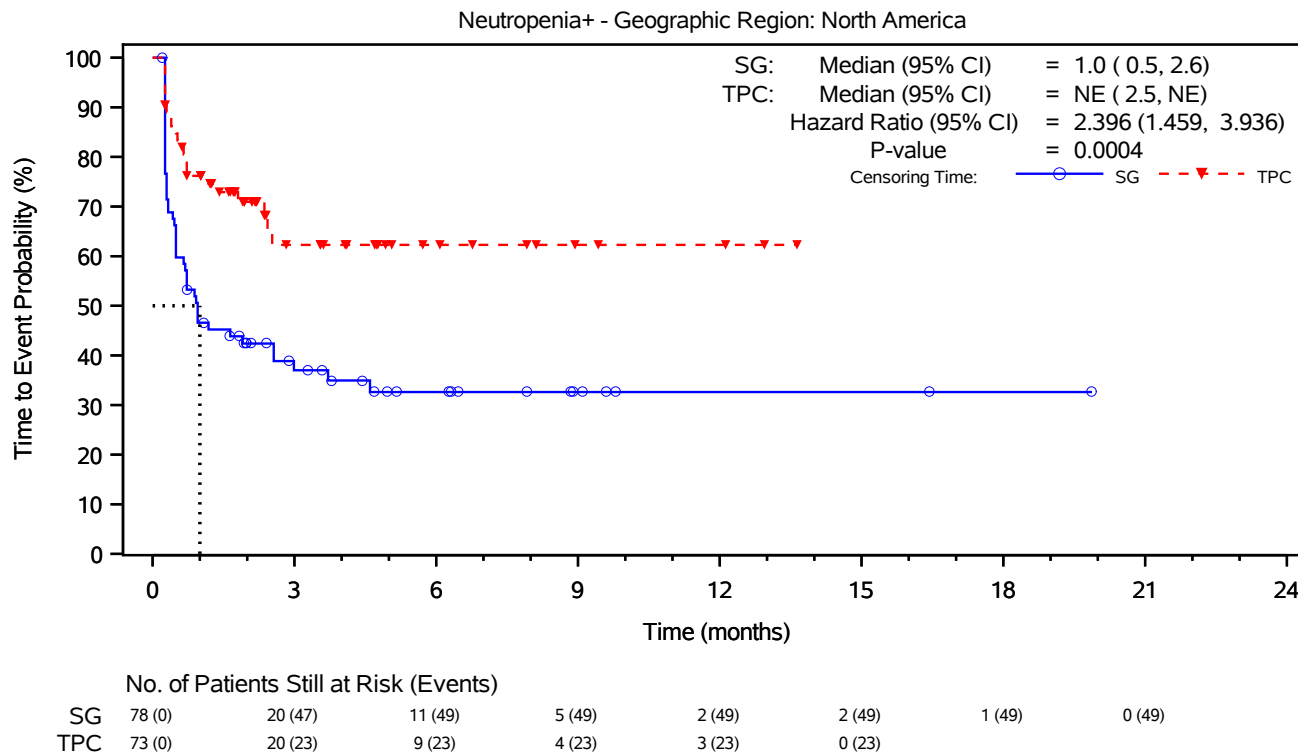
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.6.2: KM Plot for Time to the First  $\geq$ Grade 3 TEAE of Special Interest by Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

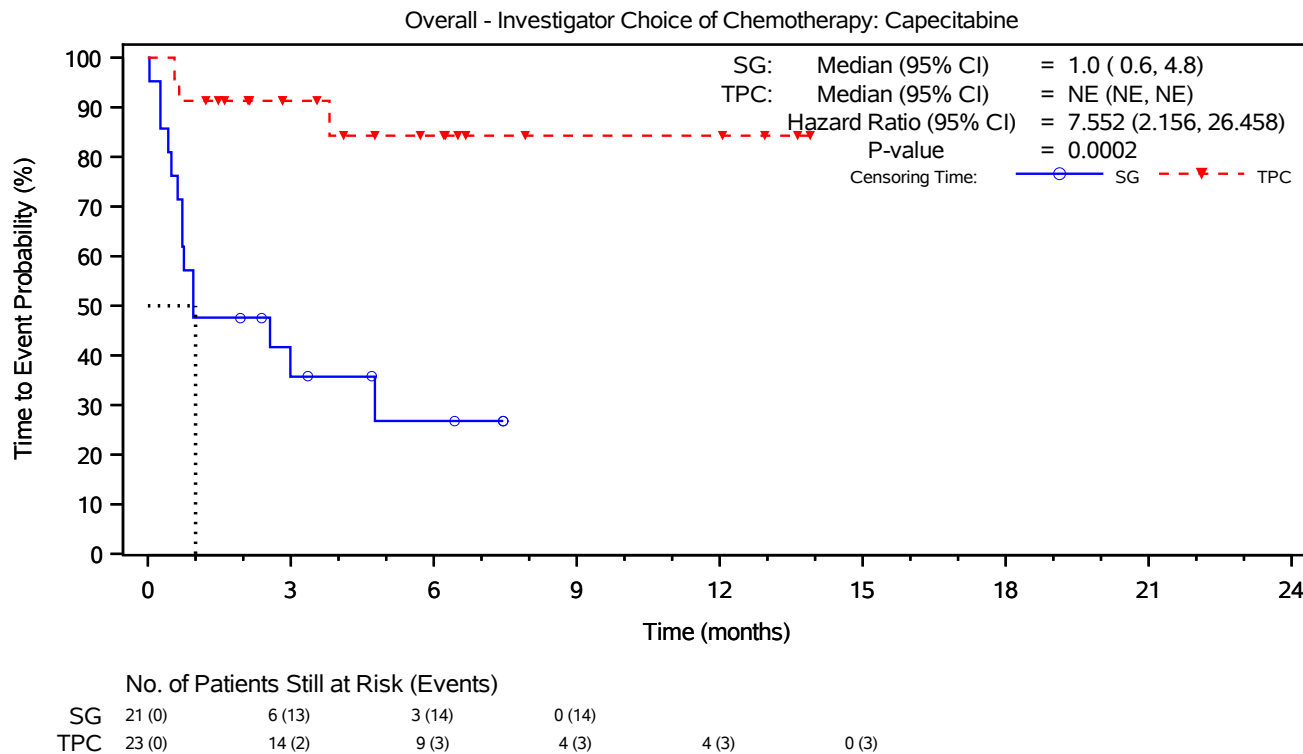
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.6.3: KM Plot for Time to the First  $\geq$ Grade 3 TEAE of Special Interest by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

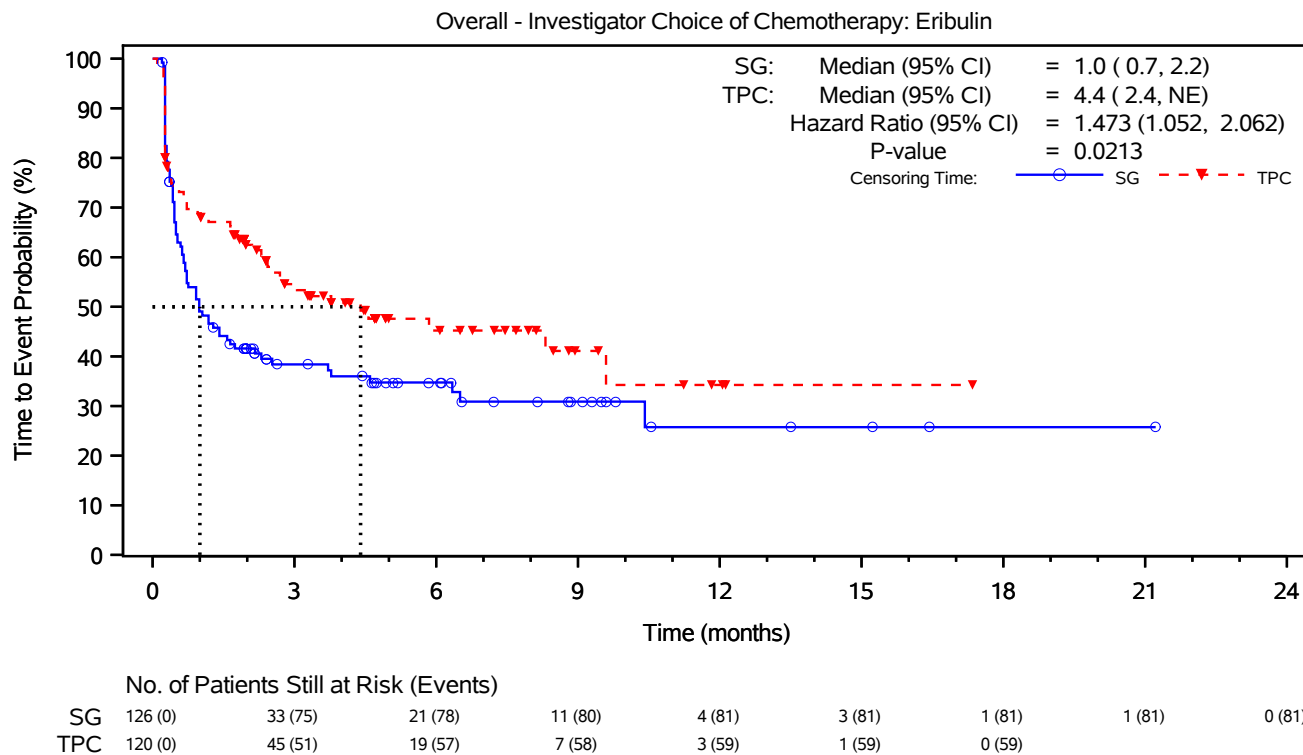
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.6.3: KM Plot for Time to the First  $\geq$ Grade 3 TEAE of Special Interest by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

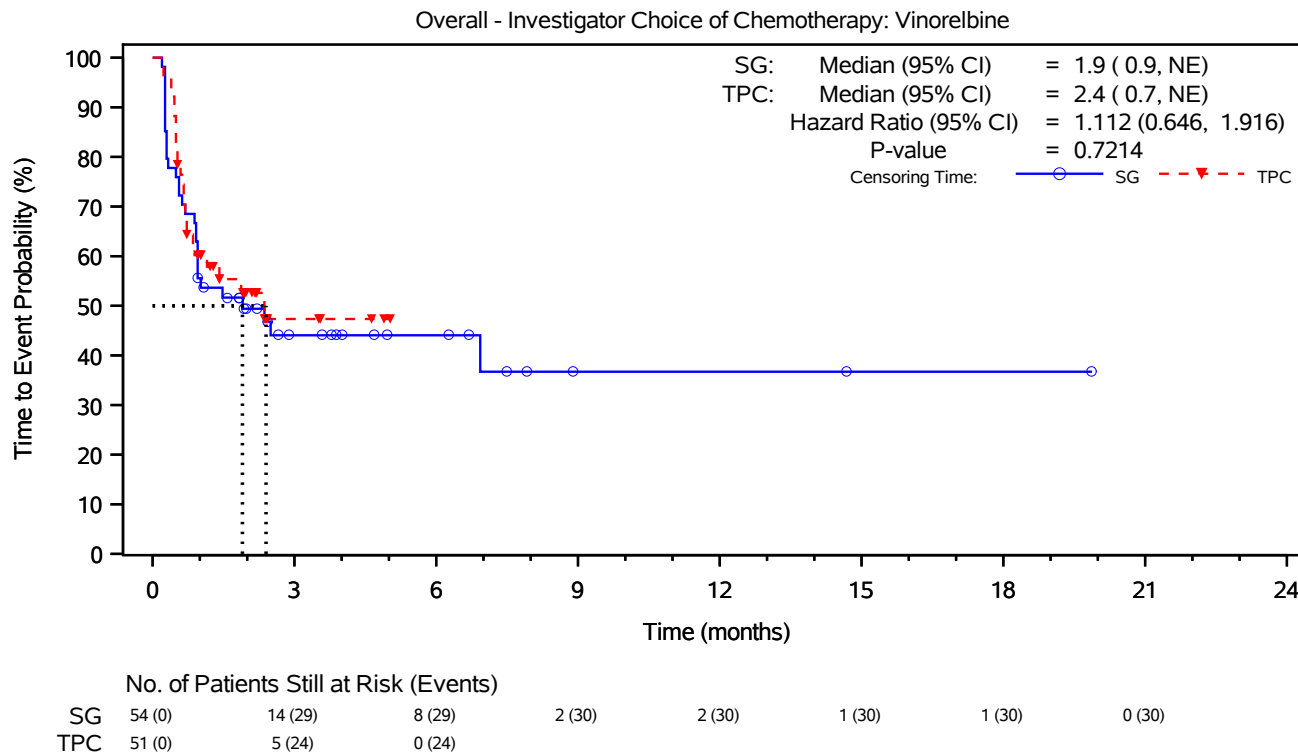
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.4.6.3: KM Plot for Time to the First  $\geq$ Grade 3 TEAE of Special Interest by Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.2874
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	79 ( 83.2%)	52 ( 56.5%)	
Patients (%) Without Events (Censored)	16 ( 16.8%)	40 ( 43.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.7)	2.1 (1.0, 4.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.899 (1.334, 2.704)
p-value			0.0003
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	86 ( 81.1%)	66 ( 64.7%)	
Patients (%) Without Events (Censored)	20 ( 18.9%)	36 ( 35.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 0.7)	0.8 (0.7, 2.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.489 (1.076, 2.061)
p-value			0.0178

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.6571
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	25 ( 26.3%)	17 ( 18.5%)	
Patients (%) Without Events (Censored)	70 ( 73.7%)	75 ( 81.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (13.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.324 (0.713, 2.456)
p-value			0.3726
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	45 ( 42.5%)	28 ( 27.5%)	
Patients (%) Without Events (Censored)	61 ( 57.5%)	74 ( 72.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.6 (3.9, NE)	NE (7.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.589 (0.991, 2.549)
p-value			0.0528

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.0599
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	71 ( 74.7%)	42 ( 45.7%)	
Patients (%) Without Events (Censored)	24 ( 25.3%)	50 ( 54.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 0.9)	4.5 (2.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.020 (1.376, 2.964)
p-value			0.0002
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	71 ( 67.0%)	59 ( 57.8%)	
Patients (%) Without Events (Censored)	35 ( 33.0%)	43 ( 42.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.7, 1.4)	1.9 (0.7, 4.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.254 (0.886, 1.773)
p-value			0.2092

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.0230
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	1 ( 1.1%)	11 ( 12.0%)	
Patients (%) Without Events (Censored)	94 ( 98.9%)	81 ( 88.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.072 (0.009, 0.562)
p-value			0.0010
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	11 ( 10.4%)	10 ( 9.8%)	
Patients (%) Without Events (Censored)	95 ( 89.6%)	92 ( 90.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.991 (0.420, 2.339)
p-value			0.9841

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9759
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	90 ( 94.7%)	68 ( 73.9%)	
Patients (%) Without Events (Censored)	5 ( 5.3%)	24 ( 26.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.1, 0.3)	0.8 (0.3, 1.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.996 (1.444, 2.757)
p-value			<0.0001
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	96 ( 90.6%)	70 ( 68.6%)	
Patients (%) Without Events (Censored)	10 ( 9.4%)	32 ( 31.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	0.8 (0.5, 1.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.891 (1.382, 2.589)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.8643
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	60 ( 63.2%)	25 ( 27.2%)	
Patients (%) Without Events (Censored)	35 ( 36.8%)	67 ( 72.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (0.9, 3.4)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.915 (1.827, 4.652)
p-value			<0.0001
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	60 ( 56.6%)	24 ( 23.5%)	
Patients (%) Without Events (Censored)	46 ( 43.4%)	78 ( 76.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.4 (1.0, 6.0)	NE (5.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.182 (1.977, 5.123)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Nausea			
Interaction p-value			0.2748
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	62 ( 65.3%)	29 ( 31.5%)	
Patients (%) Without Events (Censored)	33 ( 34.7%)	63 ( 68.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.3, 1.7)	NE (6.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.613 (1.678, 4.069)
p-value			<0.0001
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	58 ( 54.7%)	35 ( 34.3%)	
Patients (%) Without Events (Censored)	48 ( 45.3%)	67 ( 65.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.7, NE)	NE (3.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.808 (1.186, 2.757)
p-value			0.0052

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.0865
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	26 ( 27.4%)	9 ( 9.8%)	
Patients (%) Without Events (Censored)	69 ( 72.6%)	83 ( 90.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.750 (1.288, 5.872)
p-value			0.0064
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	24 ( 22.6%)	18 ( 17.6%)	
Patients (%) Without Events (Censored)	82 ( 77.4%)	84 ( 82.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.195 (0.645, 2.213)
p-value			0.5677

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.1383
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	2 ( 2.1%)	9 ( 9.8%)	
Patients (%) Without Events (Censored)	93 ( 97.9%)	83 ( 90.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.185 (0.040, 0.860)
p-value			0.0159
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	4 ( 3.8%)	4 ( 3.9%)	
Patients (%) Without Events (Censored)	102 ( 96.2%)	98 ( 96.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.793 (0.195, 3.235)
p-value			0.7465

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.9761
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	12 ( 12.6%)	4 ( 4.3%)	
Patients (%) Without Events (Censored)	83 ( 87.4%)	88 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.691 (0.864, 8.382)
p-value			0.0753
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	12 ( 11.3%)	4 ( 3.9%)	
Patients (%) Without Events (Censored)	94 ( 88.7%)	98 ( 96.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.721 (0.876, 8.451)
p-value			0.0713

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.8020
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	6 ( 6.3%)	10 ( 10.9%)	
Patients (%) Without Events (Censored)	89 ( 93.7%)	82 ( 89.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.412 (0.147, 1.154)
p-value			0.0820
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	5 ( 4.7%)	7 ( 6.9%)	
Patients (%) Without Events (Censored)	101 ( 95.3%)	95 ( 93.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.620 (0.196, 1.958)
p-value			0.4124

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.2241
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	37 ( 38.9%)	35 ( 38.0%)	
Patients (%) Without Events (Censored)	58 ( 61.1%)	57 ( 62.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.9 (5.6, NE)	NE (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.891 (0.560, 1.418)
p-value			0.6300
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	37 ( 34.9%)	49 ( 48.0%)	
Patients (%) Without Events (Censored)	69 ( 65.1%)	53 ( 52.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.3, NE)	3.2 (2.1, 5.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.613 (0.399, 0.940)
p-value			0.0240

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.9761
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	4 ( 4.2%)	8 ( 8.7%)	
Patients (%) Without Events (Censored)	91 ( 95.8%)	84 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.404 (0.121, 1.344)
p-value			0.1265
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	5 ( 4.7%)	10 ( 9.8%)	
Patients (%) Without Events (Censored)	101 ( 95.3%)	92 ( 90.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.353 (0.119, 1.048)
p-value			0.0508

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Paraesthesia			
Interaction p-value			0.7938
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	4 ( 4.2%)	7 ( 7.6%)	
Patients (%) Without Events (Censored)	91 ( 95.8%)	85 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.374 (0.096, 1.447)
p-value			0.1378
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	3 ( 2.8%)	7 ( 6.9%)	
Patients (%) Without Events (Censored)	103 ( 97.2%)	95 ( 93.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.333 (0.086, 1.295)
p-value			0.0963

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.7327
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	42 ( 44.2%)	28 ( 30.4%)	
Patients (%) Without Events (Censored)	53 ( 55.8%)	64 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.9 (3.4, NE)	11.0 (7.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.512 (0.937, 2.440)
p-value			0.0878
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	44 ( 41.5%)	31 ( 30.4%)	
Patients (%) Without Events (Censored)	62 ( 58.5%)	71 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	5.7 (2.7, NE)	10.1 (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.367 (0.860, 2.173)
p-value			0.1859

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Epistaxis			
Interaction p-value			0.6937
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	6 ( 6.3%)	1 ( 1.1%)	
Patients (%) Without Events (Censored)	89 ( 93.7%)	91 ( 98.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.270 (0.634, 43.836)
p-value			0.0854
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	11 ( 10.4%)	3 ( 2.9%)	
Patients (%) Without Events (Censored)	95 ( 89.6%)	99 ( 97.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.189 (0.878, 11.589)
p-value			0.0627

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.4516
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	58 ( 61.1%)	41 ( 44.6%)	
Patients (%) Without Events (Censored)	37 ( 38.9%)	51 ( 55.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.7, 2.5)	5.5 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.665 (1.115, 2.487)
p-value			0.0122
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	62 ( 58.5%)	38 ( 37.3%)	
Patients (%) Without Events (Censored)	44 ( 41.5%)	64 ( 62.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.7, 2.8)	8.7 (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.001 (1.335, 3.000)
p-value			0.0006

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alopecia			
Interaction p-value			0.9790
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	50 ( 52.6%)	23 ( 25.0%)	
Patients (%) Without Events (Censored)	45 ( 47.4%)	69 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.634 (1.605, 4.321)
p-value			<0.0001
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	48 ( 45.3%)	22 ( 21.6%)	
Patients (%) Without Events (Censored)	58 ( 54.7%)	80 ( 78.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.553 (1.540, 4.232)
p-value			0.0002

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.9918
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	4 ( 4.2%)	8 ( 8.7%)	
Patients (%) Without Events (Censored)	91 ( 95.8%)	84 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.402 (0.120, 1.344)
p-value			0.1259
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	0	6 ( 5.9%)	
Patients (%) Without Events (Censored)	106 (100.0%)	96 ( 94.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0059

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.1: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.6623
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	9 ( 9.5%)	1 ( 1.1%)	
Patients (%) Without Events (Censored)	86 ( 90.5%)	91 ( 98.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			8.654 (1.096, 68.315)
p-value			0.0135
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	15 ( 14.2%)	3 ( 2.9%)	
Patients (%) Without Events (Censored)	91 ( 85.8%)	99 ( 97.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (10.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.651 (1.342, 16.116)
p-value			0.0077

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.9746
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	157 ( 81.8%)	113 ( 60.8%)	
Patients (%) Without Events (Censored)	35 ( 18.2%)	73 ( 39.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 0.7)	1.7 (0.7, 2.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.677 (1.314, 2.140)
p-value			<0.0001
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	8 ( 88.9%)	5 ( 62.5%)	
Patients (%) Without Events (Censored)	1 ( 11.1%)	3 ( 37.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.3, NE)	1.3 (0.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.652 (0.538, 5.068)
p-value			0.3744

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.9124
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	66 ( 34.4%)	43 ( 23.1%)	
Patients (%) Without Events (Censored)	126 ( 65.6%)	143 ( 76.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.9, NE)	NE (13.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.466 (0.998, 2.154)
p-value			0.0511
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	4 ( 44.4%)	2 ( 25.0%)	
Patients (%) Without Events (Censored)	5 ( 55.6%)	6 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.3 (1.2, NE)	NE (0.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.517 (0.276, 8.330)
p-value			0.6294

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.6422
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	136 ( 70.8%)	96 ( 51.6%)	
Patients (%) Without Events (Censored)	56 ( 29.2%)	90 ( 48.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	4.1 (1.6, 6.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.587 (1.221, 2.063)
p-value			0.0005
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	6 ( 66.7%)	5 ( 62.5%)	
Patients (%) Without Events (Censored)	3 ( 33.3%)	3 ( 37.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.3, NE)	1.3 (0.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.288 (0.392, 4.229)
p-value			0.6818

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.9997
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	12 ( 6.3%)	21 ( 11.3%)	
Patients (%) Without Events (Censored)	180 ( 93.8%)	165 ( 88.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.490 (0.241, 1.000)
p-value			0.0452
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9523
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	178 ( 92.7%)	132 ( 71.0%)	
Patients (%) Without Events (Censored)	14 ( 7.3%)	54 ( 29.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	0.8 (0.5, 1.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.949 (1.549, 2.453)
p-value			<0.0001
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	8 ( 88.9%)	6 ( 75.0%)	
Patients (%) Without Events (Censored)	1 ( 11.1%)	2 ( 25.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.0, 0.8)	0.9 (0.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.165 (0.728, 6.439)
p-value			0.1315

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.8063
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	115 ( 59.9%)	47 ( 25.3%)	
Patients (%) Without Events (Censored)	77 ( 40.1%)	139 ( 74.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (1.3, 3.3)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.077 (2.190, 4.324)
p-value			<0.0001
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	5 ( 55.6%)	2 ( 25.0%)	
Patients (%) Without Events (Censored)	4 ( 44.4%)	6 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.8 (0.2, NE)	NE (0.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.359 (0.444, 12.540)
p-value			0.3007

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Nausea			
Interaction p-value			0.0995
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	113 ( 58.9%)	63 ( 33.9%)	
Patients (%) Without Events (Censored)	79 ( 41.1%)	123 ( 66.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.8, 3.5)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.050 (1.505, 2.793)
p-value			<0.0001
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	7 ( 77.8%)	1 ( 12.5%)	
Patients (%) Without Events (Censored)	2 ( 22.2%)	7 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.0, NE)	NE (1.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			12.357 (1.473, 103.635)
p-value			0.0041

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.5864
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	49 ( 25.5%)	26 ( 14.0%)	
Patients (%) Without Events (Censored)	143 ( 74.5%)	160 ( 86.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.742 (1.081, 2.808)
p-value			0.0208
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	1 ( 12.5%)	
Patients (%) Without Events (Censored)	8 ( 88.9%)	7 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.5, NE)	NE (1.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.504 (0.028, 9.015)
p-value			0.6363

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.9899
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	6 ( 3.1%)	12 ( 6.5%)	
Patients (%) Without Events (Censored)	186 ( 96.9%)	174 ( 93.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.416 (0.155, 1.115)
p-value			0.0723
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	0	1 ( 12.5%)	
Patients (%) Without Events (Censored)	9 (100.0%)	7 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (1.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2888

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.9884
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	22 ( 11.5%)	8 ( 4.3%)	
Patients (%) Without Events (Censored)	170 ( 88.5%)	178 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.472 (1.097, 5.574)
p-value			0.0240
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	2 ( 22.2%)	0	
Patients (%) Without Events (Censored)	7 ( 77.8%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.6, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2060

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.7430
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	10 ( 5.2%)	15 ( 8.1%)	
Patients (%) Without Events (Censored)	182 ( 94.8%)	171 ( 91.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.500 (0.222, 1.126)
p-value			0.0880
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	2 ( 25.0%)	
Patients (%) Without Events (Censored)	8 ( 88.9%)	6 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.5, NE)	NE (0.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.289 (0.024, 3.456)
p-value			0.3017

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.9697
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	71 ( 37.0%)	84 ( 45.2%)	
Patients (%) Without Events (Censored)	121 ( 63.0%)	102 ( 54.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (9.3, NE)	3.6 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.697 (0.507, 0.957)
p-value			0.0251
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	3 ( 33.3%)	0	
Patients (%) Without Events (Censored)	6 ( 66.7%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2168

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Study IMMU-132-09Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.9886
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	7 ( 3.6%)	18 ( 9.7%)	
Patients (%) Without Events (Censored)	185 ( 96.4%)	168 ( 90.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.303 (0.126, 0.729)
p-value			0.0048
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	2 ( 22.2%)	0	
Patients (%) Without Events (Censored)	7 ( 77.8%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3354

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Paraesthesia</b>			
Interaction p-value			0.9997
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	7 ( 3.6%)	14 ( 7.5%)	
Patients (%) Without Events (Censored)	185 ( 96.4%)	172 ( 92.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.354 (0.136, 0.924)
p-value			0.0268
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.6593
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	83 ( 43.2%)	58 ( 31.2%)	
Patients (%) Without Events (Censored)	109 ( 56.8%)	128 ( 68.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.5 (3.8, NE)	10.1 (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.425 (1.018, 1.995)
p-value			0.0382
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	3 ( 33.3%)	1 ( 12.5%)	
Patients (%) Without Events (Censored)	6 ( 66.7%)	7 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.1, NE)	NE (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.837 (0.189, 17.892)
p-value			0.5949

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Epistaxis</b>			
Interaction p-value			0.9996
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	17 ( 8.9%)	4 ( 2.2%)	
Patients (%) Without Events (Censored)	175 ( 91.1%)	182 ( 97.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.776 (1.264, 11.277)
p-value			0.0106
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.7962
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	113 ( 58.9%)	75 ( 40.3%)	
Patients (%) Without Events (Censored)	79 ( 41.1%)	111 ( 59.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 2.3)	5.7 (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.804 (1.346, 2.417)
p-value			<0.0001
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	7 ( 77.8%)	4 ( 50.0%)	
Patients (%) Without Events (Censored)	2 ( 22.2%)	4 ( 50.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.2, NE)	3.0 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.732 (0.480, 6.247)
p-value			0.3958

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alopecia			
Interaction p-value			0.6583
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	92 ( 47.9%)	43 ( 23.1%)	
Patients (%) Without Events (Censored)	100 ( 52.1%)	143 ( 76.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.2 (1.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.543 (1.769, 3.655)
p-value			<0.0001
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	6 ( 66.7%)	2 ( 25.0%)	
Patients (%) Without Events (Censored)	3 ( 33.3%)	6 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.3, NE)	NE (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.328 (0.663, 16.716)
p-value			0.1252

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.9910
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	4 ( 2.1%)	13 ( 7.0%)	
Patients (%) Without Events (Censored)	188 ( 97.9%)	173 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.227 (0.073, 0.712)
p-value			0.0058
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	0	1 ( 12.5%)	
Patients (%) Without Events (Censored)	9 (100.0%)	7 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (3.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1266

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.2: Time to the First Frequent TEAE by SOC, PT and Subgroup: Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.9899
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	22 ( 11.5%)	4 ( 2.2%)	
Patients (%) Without Events (Censored)	170 ( 88.5%)	182 ( 97.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.260 (1.811, 15.277)
p-value			0.0006
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	2 ( 22.2%)	0	
Patients (%) Without Events (Censored)	7 ( 77.8%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.2, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2416

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.3221
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	149 ( 82.8%)	103 ( 60.2%)	
Patients (%) Without Events (Censored)	31 ( 17.2%)	68 ( 39.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 0.7)	1.7 (0.8, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.741 (1.352, 2.242)
p-value			<0.0001
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	16 ( 76.2%)	15 ( 65.2%)	
Patients (%) Without Events (Censored)	5 ( 23.8%)	8 ( 34.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.3, 1.4)	0.7 (0.3, 2.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.137 (0.551, 2.348)
p-value			0.7416

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.1080
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	61 ( 33.9%)	42 ( 24.6%)	
Patients (%) Without Events (Censored)	119 ( 66.1%)	129 ( 75.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.9, NE)	NE (13.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.325 (0.894, 1.965)
p-value			0.1625
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	9 ( 42.9%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	12 ( 57.1%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	5.0 (1.0, NE)	NE (2.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.598 (0.968, 13.365)
p-value			0.0412

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.2803
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	130 ( 72.2%)	88 ( 51.5%)	
Patients (%) Without Events (Censored)	50 ( 27.8%)	83 ( 48.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	4.1 (1.6, 7.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.639 (1.250, 2.150)
p-value			0.0003
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	12 ( 57.1%)	13 ( 56.5%)	
Patients (%) Without Events (Censored)	9 ( 42.9%)	10 ( 43.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.6, NE)	1.9 (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.099 (0.496, 2.437)
p-value			0.8271

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.7595
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	11 ( 6.1%)	18 ( 10.5%)	
Patients (%) Without Events (Censored)	169 ( 93.9%)	153 ( 89.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.511 (0.241, 1.086)
p-value			0.0754
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	20 ( 95.2%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.299 (0.031, 2.906)
p-value			0.2702

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.2835
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: Yes</b>			
Total Patients	180	171	
Patients (%) With Events	168 ( 93.3%)	120 ( 70.2%)	
Patients (%) Without Events (Censored)	12 ( 6.7%)	51 ( 29.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	0.8 (0.6, 1.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.042 (1.607, 2.595)
p-value			<0.0001
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: No</b>			
Total Patients	21	23	
Patients (%) With Events	18 ( 85.7%)	18 ( 78.3%)	
Patients (%) Without Events (Censored)	3 ( 14.3%)	5 ( 21.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.1, 0.5)	0.7 (0.1, 1.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.386 (0.715, 2.688)
p-value			0.3312

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.9429
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	108 ( 60.0%)	44 ( 25.7%)	
Patients (%) Without Events (Censored)	72 ( 40.0%)	127 ( 74.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (1.2, 3.4)	NE (8.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.053 (2.148, 4.338)
p-value			<0.0001
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	12 ( 57.1%)	5 ( 21.7%)	
Patients (%) Without Events (Censored)	9 ( 42.9%)	18 ( 78.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.7 (0.5, NE)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.150 (1.100, 9.024)
p-value			0.0245

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Nausea			
Interaction p-value			0.3684
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	107 ( 59.4%)	53 ( 31.0%)	
Patients (%) Without Events (Censored)	73 ( 40.6%)	118 ( 69.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.8, 3.5)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.313 (1.663, 3.218)
p-value			<0.0001
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	13 ( 61.9%)	11 ( 47.8%)	
Patients (%) Without Events (Censored)	8 ( 38.1%)	12 ( 52.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.1, NE)	7.6 (0.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.559 (0.694, 3.504)
p-value			0.2802

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.9437
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	47 ( 26.1%)	25 ( 14.6%)	
Patients (%) Without Events (Censored)	133 ( 73.9%)	146 ( 85.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.695 (1.041, 2.757)
p-value			0.0317
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	18 ( 85.7%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.667 (0.278, 9.975)
p-value			0.5716

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.9997
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	6 ( 3.3%)	13 ( 7.6%)	
Patients (%) Without Events (Censored)	174 ( 96.7%)	158 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.371 (0.140, 0.984)
p-value			0.0382
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	21 (100.0%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.9879
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	21 ( 11.7%)	8 ( 4.7%)	
Patients (%) Without Events (Censored)	159 ( 88.3%)	163 ( 95.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.374 (1.051, 5.364)
p-value			0.0320
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	0	
Patients (%) Without Events (Censored)	18 ( 85.7%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	20.1 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1196

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.4238
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	9 ( 5.0%)	15 ( 8.8%)	
Patients (%) Without Events (Censored)	171 ( 95.0%)	156 ( 91.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.432 (0.187, 1.000)
p-value			0.0440
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	2 ( 9.5%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	19 ( 90.5%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.909 (0.123, 6.747)
p-value			0.9261

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.3813
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	67 ( 37.2%)	77 ( 45.0%)	
Patients (%) Without Events (Censored)	113 ( 62.8%)	94 ( 55.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.1, NE)	3.7 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.686 (0.493, 0.954)
p-value			0.0243
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	7 ( 33.3%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	14 ( 66.7%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.0, NE)	NE (1.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.210 (0.423, 3.455)
p-value			0.7326

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Study IMMU-132-09Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.9895
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	9 ( 5.0%)	16 ( 9.4%)	
Patients (%) Without Events (Censored)	171 ( 95.0%)	155 ( 90.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.422 (0.186, 0.960)
p-value			0.0339
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	0	2 ( 8.7%)	
Patients (%) Without Events (Censored)	21 (100.0%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1915

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Paraesthesia			
Interaction p-value			0.9906
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	7 ( 3.9%)	13 ( 7.6%)	
Patients (%) Without Events (Censored)	173 ( 96.1%)	158 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.373 (0.142, 0.985)
p-value			0.0384
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	0	1 ( 4.3%)	
Patients (%) Without Events (Censored)	21 (100.0%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3642

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.8951
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	78 ( 43.3%)	52 ( 30.4%)	
Patients (%) Without Events (Censored)	102 ( 56.7%)	119 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.9 (3.9, NE)	NE (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.442 (1.014, 2.049)
p-value			0.0407
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	8 ( 38.1%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	13 ( 61.9%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	5.7 (2.5, NE)	8.3 (2.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.932 (0.629, 5.930)
p-value			0.2452

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Epistaxis</b>			
Interaction p-value			0.9892
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: Yes</b>			
Total Patients	180	171	
Patients (%) With Events	17 ( 9.4%)	3 ( 1.8%)	
Patients (%) Without Events (Censored)	163 ( 90.6%)	168 ( 98.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.005 (1.462, 17.141)
p-value			0.0044
<b>Stratification factor of endocrine therapy in the metastatic setting for &gt;=6 months: No</b>			
Total Patients	21	23	
Patients (%) With Events	0	1 ( 4.3%)	
Patients (%) Without Events (Censored)	21 (100.0%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (8.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3173

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.4308
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	111 ( 61.7%)	74 ( 43.3%)	
Patients (%) Without Events (Censored)	69 ( 38.3%)	97 ( 56.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.7, 2.1)	5.5 (3.1, 8.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.752 (1.304, 2.354)
p-value			0.0002
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	9 ( 42.9%)	5 ( 21.7%)	
Patients (%) Without Events (Censored)	12 ( 57.1%)	18 ( 78.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.5, NE)	NE (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.401 (0.798, 7.221)
p-value			0.1074

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alopecia			
Interaction p-value			0.1324
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	90 ( 50.0%)	44 ( 25.7%)	
Patients (%) Without Events (Censored)	90 ( 50.0%)	127 ( 74.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.3 (0.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.373 (1.653, 3.405)
p-value			<0.0001
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	8 ( 38.1%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	13 ( 61.9%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			10.704 (1.333, 85.942)
p-value			0.0055

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.5726
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	3 ( 1.7%)	12 ( 7.0%)	
Patients (%) Without Events (Censored)	177 ( 98.3%)	159 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.199 (0.056, 0.707)
p-value			0.0056
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	20 ( 95.2%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	16.7 (NE, NE)	NE (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1502

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.3: Time to the First Frequent TEAE by SOC, PT and Subgroup: Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.9896
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	22 ( 12.2%)	4 ( 2.3%)	
Patients (%) Without Events (Censored)	158 ( 87.8%)	167 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.070 (1.745, 14.730)
p-value			0.0009
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	2 ( 9.5%)	0	
Patients (%) Without Events (Censored)	19 ( 90.5%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1212

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.2519
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	125 ( 80.6%)	90 ( 61.2%)	
Patients (%) Without Events (Censored)	30 ( 19.4%)	57 ( 38.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 0.7)	1.6 (0.7, 2.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.541 (1.174, 2.024)
p-value			0.0018
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	40 ( 87.0%)	28 ( 59.6%)	
Patients (%) Without Events (Censored)	6 ( 13.0%)	19 ( 40.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.4, 0.8)	2.0 (0.7, 6.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.316 (1.401, 3.828)
p-value			0.0008

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Interaction p-value			0.6024
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	53 ( 34.2%)	31 ( 21.1%)	
Patients (%) Without Events (Censored)	102 ( 65.8%)	116 ( 78.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.610 (1.033, 2.510)
p-value			0.0344
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	17 ( 37.0%)	14 ( 29.8%)	
Patients (%) Without Events (Censored)	29 ( 63.0%)	33 ( 70.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	7.2 (4.7, NE)	13.4 (4.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.242 (0.611, 2.523)
p-value			0.5475

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.7434
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	113 ( 72.9%)	79 ( 53.7%)	
Patients (%) Without Events (Censored)	42 ( 27.1%)	68 ( 46.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	2.4 (0.8, 7.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.508 (1.130, 2.012)
p-value			0.0050
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	29 ( 63.0%)	22 ( 46.8%)	
Patients (%) Without Events (Censored)	17 ( 37.0%)	25 ( 53.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.7, 1.6)	4.4 (1.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.701 (0.974, 2.969)
p-value			0.0615

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Thrombocytopenia</b>			
Interaction p-value			0.3123
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	9 ( 5.8%)	18 ( 12.2%)	
Patients (%) Without Events (Censored)	146 ( 94.2%)	129 ( 87.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.414 (0.185, 0.926)
p-value			0.0267
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	3 ( 6.5%)	3 ( 6.4%)	
Patients (%) Without Events (Censored)	43 ( 93.5%)	44 ( 93.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.982 (0.198, 4.878)
p-value			0.9827

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.8800
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	143 ( 92.3%)	101 ( 68.7%)	
Patients (%) Without Events (Censored)	12 ( 7.7%)	46 ( 31.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	1.0 (0.6, 1.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.981 (1.527, 2.569)
p-value			<0.0001
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	43 ( 93.5%)	37 ( 78.7%)	
Patients (%) Without Events (Censored)	3 ( 6.5%)	10 ( 21.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.1, 0.3)	0.7 (0.3, 0.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.060 (1.307, 3.247)
p-value			0.0016

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.2896
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	87 ( 56.1%)	35 ( 23.8%)	
Patients (%) Without Events (Censored)	68 ( 43.9%)	112 ( 76.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.4 (1.5, 6.0)	NE (8.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.806 (1.893, 4.161)
p-value			<0.0001
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	33 ( 71.7%)	14 ( 29.8%)	
Patients (%) Without Events (Censored)	13 ( 28.3%)	33 ( 70.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 2.7)	7.6 (4.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.187 (2.228, 7.868)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Nausea</b>			
Interaction p-value			0.7177
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	94 ( 60.6%)	50 ( 34.0%)	
Patients (%) Without Events (Censored)	61 ( 39.4%)	97 ( 66.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 2.6)	NE (6.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.115 (1.500, 2.983)
p-value			<0.0001
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	26 ( 56.5%)	14 ( 29.8%)	
Patients (%) Without Events (Censored)	20 ( 43.5%)	33 ( 70.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.3, NE)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.396 (1.245, 4.611)
p-value			0.0070

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.5452
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	40 ( 25.8%)	20 ( 13.6%)	
Patients (%) Without Events (Censored)	115 ( 74.2%)	127 ( 86.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.828 (1.067, 3.131)
p-value			0.0256
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	10 ( 21.7%)	7 ( 14.9%)	
Patients (%) Without Events (Censored)	36 ( 78.3%)	40 ( 85.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.263 (0.474, 3.365)
p-value			0.6374

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Hyperglycaemia</b>			
Interaction p-value			0.1908
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	5 ( 3.2%)	6 ( 4.1%)	
Patients (%) Without Events (Censored)	150 ( 96.8%)	141 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.634 (0.191, 2.109)
p-value			0.4540
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	1 ( 2.2%)	7 ( 14.9%)	
Patients (%) Without Events (Censored)	45 ( 97.8%)	40 ( 85.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.136 (0.017, 1.109)
p-value			0.0287

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Hypokalaemia</b>			
Interaction p-value			0.9967
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	16 ( 10.3%)	5 ( 3.4%)	
Patients (%) Without Events (Censored)	139 ( 89.7%)	142 ( 96.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.701 (0.981, 7.437)
p-value			0.0452
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	8 ( 17.4%)	3 ( 6.4%)	
Patients (%) Without Events (Censored)	38 ( 82.6%)	44 ( 93.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.813 (0.745, 10.616)
p-value			0.1109

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.1885
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	8 ( 5.2%)	15 ( 10.2%)	
Patients (%) Without Events (Censored)	147 ( 94.8%)	132 ( 89.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.351 (0.145, 0.847)
p-value			0.0153
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	3 ( 6.5%)	2 ( 4.3%)	
Patients (%) Without Events (Censored)	43 ( 93.5%)	45 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.541 (0.257, 9.246)
p-value			0.6334

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Nervous system disorders</b>			
Interaction p-value			0.4236
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	57 ( 36.8%)	67 ( 45.6%)	
Patients (%) Without Events (Censored)	98 ( 63.2%)	80 ( 54.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.1, NE)	3.7 (2.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.678 (0.475, 0.968)
p-value			0.0310
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	17 ( 37.0%)	17 ( 36.2%)	
Patients (%) Without Events (Censored)	29 ( 63.0%)	30 ( 63.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.9 (3.1, NE)	NE (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.912 (0.465, 1.791)
p-value			0.7972

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neuropathy peripheral</b>			
Interaction p-value			0.1078
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	6 ( 3.9%)	16 ( 10.9%)	
Patients (%) Without Events (Censored)	149 ( 96.1%)	131 ( 89.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.273 (0.106, 0.704)
p-value			0.0041
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	3 ( 6.5%)	2 ( 4.3%)	
Patients (%) Without Events (Censored)	43 ( 93.5%)	45 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.430 (0.239, 8.566)
p-value			0.6922

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Paraesthesia</b>			
Interaction p-value			0.6970
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	6 ( 3.9%)	11 ( 7.5%)	
Patients (%) Without Events (Censored)	149 ( 96.1%)	136 ( 92.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.364 (0.126, 1.050)
p-value			0.0515
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	1 ( 2.2%)	3 ( 6.4%)	
Patients (%) Without Events (Censored)	45 ( 97.8%)	44 ( 93.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.302 (0.031, 2.915)
p-value			0.2724

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.4981
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	69 ( 44.5%)	42 ( 28.6%)	
Patients (%) Without Events (Censored)	86 ( 55.5%)	105 ( 71.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.5 (3.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.567 (1.067, 2.301)
p-value			0.0210
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	17 ( 37.0%)	17 ( 36.2%)	
Patients (%) Without Events (Censored)	29 ( 63.0%)	30 ( 63.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	20.9 (3.6, NE)	8.3 (3.9, 11.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.181 (0.600, 2.325)
p-value			0.6349

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Epistaxis</b>			
Interaction p-value			0.2208
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	14 ( 9.0%)	2 ( 1.4%)	
Patients (%) Without Events (Censored)	141 ( 91.0%)	145 ( 98.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.432 (1.461, 28.307)
p-value			0.0046
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	3 ( 6.5%)	2 ( 4.3%)	
Patients (%) Without Events (Censored)	43 ( 93.5%)	45 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.9, NE)	NE (8.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.227 (0.198, 7.596)
p-value			0.8257

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.4806
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	94 ( 60.6%)	58 ( 39.5%)	
Patients (%) Without Events (Censored)	61 ( 39.4%)	89 ( 60.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 2.1)	8.2 (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.933 (1.393, 2.683)
p-value			<0.0001
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	26 ( 56.5%)	21 ( 44.7%)	
Patients (%) Without Events (Censored)	20 ( 43.5%)	26 ( 55.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.4 (0.5, 14.3)	3.5 (1.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.457 (0.810, 2.623)
p-value			0.2022

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Alopecia</b>			
Interaction p-value			0.1839
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	78 ( 50.3%)	30 ( 20.4%)	
Patients (%) Without Events (Censored)	77 ( 49.7%)	117 ( 79.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.1 (0.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.020 (1.981, 4.604)
p-value			<0.0001
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	20 ( 43.5%)	15 ( 31.9%)	
Patients (%) Without Events (Censored)	26 ( 56.5%)	32 ( 68.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.7, NE)	NE (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.639 (0.836, 3.211)
p-value			0.1433

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.5460
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	3 ( 1.9%)	8 ( 5.4%)	
Patients (%) Without Events (Censored)	152 ( 98.1%)	139 ( 94.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.240 (0.061, 0.941)
p-value			0.0276
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	1 ( 2.2%)	6 ( 12.8%)	
Patients (%) Without Events (Censored)	45 ( 97.8%)	41 ( 87.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.158 (0.019, 1.314)
p-value			0.0502

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.4: Time to the First Frequent TEAE by SOC, PT and Subgroup: Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Pruritus</b>			
Interaction p-value			0.1930
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	20 ( 12.9%)	2 ( 1.4%)	
Patients (%) Without Events (Censored)	135 ( 87.1%)	145 ( 98.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			9.322 (2.177, 39.912)
p-value			0.0002
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	4 ( 8.7%)	2 ( 4.3%)	
Patients (%) Without Events (Censored)	42 ( 91.3%)	45 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (10.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.149 (0.393, 11.741)
p-value			0.3658

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.8860
Race: White			
Total Patients	141	132	
Patients (%) With Events	115 ( 81.6%)	78 ( 59.1%)	
Patients (%) Without Events (Censored)	26 ( 18.4%)	54 ( 40.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.7)	1.8 (0.7, 4.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.665 (1.247, 2.223)
p-value			0.0005
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	11 ( 84.6%)	10 ( 62.5%)	
Patients (%) Without Events (Censored)	2 ( 15.4%)	6 ( 37.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.5 (0.3, 0.7)	0.7 (0.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.694 (0.717, 3.999)
p-value			0.2554

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.2845
Race: White			
Total Patients	141	132	
Patients (%) With Events	47 ( 33.3%)	27 ( 20.5%)	
Patients (%) Without Events (Censored)	94 ( 66.7%)	105 ( 79.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.6, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.562 (0.972, 2.511)
p-value			0.0643
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	3 ( 23.1%)	5 ( 31.3%)	
Patients (%) Without Events (Censored)	10 ( 76.9%)	11 ( 68.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.2, NE)	6.5 (4.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.719 (0.172, 3.011)
p-value			0.6563

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.9525
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	100 ( 70.9%)	70 ( 53.0%)	
Patients (%) Without Events (Censored)	41 ( 29.1%)	62 ( 47.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	2.4 (0.8, 6.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.538 (1.132, 2.090)
p-value			0.0056
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	11 ( 84.6%)	10 ( 62.5%)	
Patients (%) Without Events (Censored)	2 ( 15.4%)	6 ( 37.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 3.1)	0.8 (0.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.581 (0.670, 3.734)
p-value			0.3131

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.9998
Race: White			
Total Patients	141	132	
Patients (%) With Events	10 ( 7.1%)	16 ( 12.1%)	
Patients (%) Without Events (Censored)	131 ( 92.9%)	116 ( 87.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.532 (0.241, 1.175)
p-value			0.1122
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
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Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.5704
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	129 ( 91.5%)	90 ( 68.2%)	
Patients (%) Without Events (Censored)	12 ( 8.5%)	42 ( 31.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	0.8 (0.5, 1.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.980 (1.503, 2.607)
p-value			<0.0001
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	13 (100.0%)	12 ( 75.0%)	
Patients (%) Without Events (Censored)	0	4 ( 25.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.1 (0.0, 1.0)	1.2 (0.4, 3.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.428 (1.091, 5.404)
p-value			0.0287

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
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Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.4806
Race: White			
Total Patients	141	132	
Patients (%) With Events	85 ( 60.3%)	33 ( 25.0%)	
Patients (%) Without Events (Censored)	56 ( 39.7%)	99 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (1.2, 2.9)	NE (6.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.088 (2.062, 4.625)
p-value			<0.0001
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	7 ( 53.8%)	5 ( 31.3%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	11 ( 68.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.0 (0.1, NE)	NE (1.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.717 (0.522, 5.644)
p-value			0.3648

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Nausea			
Interaction p-value			0.4197
Race: White			
Total Patients	141	132	
Patients (%) With Events	80 ( 56.7%)	40 ( 30.3%)	
Patients (%) Without Events (Censored)	61 ( 43.3%)	92 ( 69.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.8, 6.0)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.221 (1.517, 3.251)
p-value			<0.0001
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	10 ( 76.9%)	5 ( 31.3%)	
Patients (%) Without Events (Censored)	3 ( 23.1%)	11 ( 68.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.1, NE)	NE (2.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.501 (1.190, 10.298)
p-value			0.0162

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.7704
Race: White			
Total Patients	141	132	
Patients (%) With Events	40 ( 28.4%)	20 ( 15.2%)	
Patients (%) Without Events (Censored)	101 ( 71.6%)	112 ( 84.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (14.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.743 (1.014, 2.997)
p-value			0.0413
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	2 ( 15.4%)	2 ( 12.5%)	
Patients (%) Without Events (Censored)	11 ( 84.6%)	14 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	8.2 (NE, NE)	NE (3.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.423 (0.197, 10.282)
p-value			0.7251

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.9998
Race: White			
Total Patients	141	132	
Patients (%) With Events	6 ( 4.3%)	11 ( 8.3%)	
Patients (%) Without Events (Censored)	135 ( 95.7%)	121 ( 91.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.420 (0.154, 1.147)
p-value			0.0813
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.9999
Race: White			
Total Patients	141	132	
Patients (%) With Events	13 ( 9.2%)	7 ( 5.3%)	
Patients (%) Without Events (Censored)	128 ( 90.8%)	125 ( 94.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.673 (0.667, 4.193)
p-value			0.2678
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.9998
Race: White			
Total Patients	141	132	
Patients (%) With Events	9 ( 6.4%)	12 ( 9.1%)	
Patients (%) Without Events (Censored)	132 ( 93.6%)	120 ( 90.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.547 (0.227, 1.318)
p-value			0.1728
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.7714
Race: White			
Total Patients	141	132	
Patients (%) With Events	59 ( 41.8%)	61 ( 46.2%)	
Patients (%) Without Events (Censored)	82 ( 58.2%)	71 ( 53.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.7 (3.2, NE)	3.3 (2.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.775 (0.541, 1.111)
p-value			0.1663
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	4 ( 30.8%)	5 ( 31.3%)	
Patients (%) Without Events (Censored)	9 ( 69.2%)	11 ( 68.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.3, NE)	5.1 (2.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.002 (0.267, 3.753)
p-value			0.9978

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.9914
Race: White			
Total Patients	141	132	
Patients (%) With Events	8 ( 5.7%)	10 ( 7.6%)	
Patients (%) Without Events (Censored)	133 ( 94.3%)	122 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.619 (0.243, 1.574)
p-value			0.3088
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	1 ( 6.3%)	
Patients (%) Without Events (Censored)	13 (100.0%)	15 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3674

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
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Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Paraesthesia</b>			
Interaction p-value			0.9998
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	7 ( 5.0%)	12 ( 9.1%)	
Patients (%) Without Events (Censored)	134 ( 95.0%)	120 ( 90.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.385 (0.144, 1.031)
p-value			0.0492
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.3146
Race: White			
Total Patients	141	132	
Patients (%) With Events	65 ( 46.1%)	41 ( 31.1%)	
Patients (%) Without Events (Censored)	76 ( 53.9%)	91 ( 68.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	5.7 (2.8, NE)	10.1 (7.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.559 (1.053, 2.306)
p-value			0.0254
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	7 ( 53.8%)	3 ( 18.8%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	13 ( 81.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	7.2 (0.5, NE)	NE (3.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.321 (0.855, 12.894)
p-value			0.0655

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Epistaxis</b>			
Interaction p-value			0.9996
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	14 ( 9.9%)	2 ( 1.5%)	
Patients (%) Without Events (Censored)	127 ( 90.1%)	130 ( 98.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.405 (1.455, 28.188)
p-value			0.0048
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.6858
Race: White			
Total Patients	141	132	
Patients (%) With Events	91 ( 64.5%)	57 ( 43.2%)	
Patients (%) Without Events (Censored)	50 ( 35.5%)	75 ( 56.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.7, 1.2)	5.5 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.935 (1.387, 2.699)
p-value			<0.0001
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	6 ( 46.2%)	6 ( 37.5%)	
Patients (%) Without Events (Censored)	7 ( 53.8%)	10 ( 62.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.3, NE)	8.2 (3.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.444 (0.464, 4.495)
p-value			0.5240

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Alopecia</b>			
Interaction p-value			0.8259
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	75 ( 53.2%)	31 ( 23.5%)	
Patients (%) Without Events (Censored)	66 ( 46.8%)	101 ( 76.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.925 (1.922, 4.450)
p-value			<0.0001
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	5 ( 38.5%)	3 ( 18.8%)	
Patients (%) Without Events (Censored)	8 ( 61.5%)	13 ( 81.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.375 (0.567, 9.953)
p-value			0.2223

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.9997
Race: White			
Total Patients	141	132	
Patients (%) With Events	3 ( 2.1%)	10 ( 7.6%)	
Patients (%) Without Events (Censored)	138 ( 97.9%)	122 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.233 (0.064, 0.851)
p-value			0.0166
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.5: Time to the First Frequent TEAE by SOC, PT and Subgroup: Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Pruritus</b>			
Interaction p-value			0.9909
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	17 ( 12.1%)	3 ( 2.3%)	
Patients (%) Without Events (Censored)	124 ( 87.9%)	129 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.164 (1.511, 17.653)
p-value			0.0035
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	2 ( 15.4%)	0	
Patients (%) Without Events (Censored)	11 ( 84.6%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1152

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.6122
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	78 ( 89.7%)	57 ( 63.3%)	
Patients (%) Without Events (Censored)	9 ( 10.3%)	33 ( 36.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.7)	1.6 (0.7, 4.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.787 (1.264, 2.527)
p-value			0.0008
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	87 ( 76.3%)	61 ( 58.7%)	
Patients (%) Without Events (Censored)	27 ( 23.7%)	43 ( 41.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.7)	1.7 (0.7, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.595 (1.148, 2.216)
p-value			0.0059

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.1147
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	38 ( 43.7%)	21 ( 23.3%)	
Patients (%) Without Events (Censored)	49 ( 56.3%)	69 ( 76.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	7.2 (3.1, NE)	NE (13.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.018 (1.183, 3.442)
p-value			0.0086
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	32 ( 28.1%)	24 ( 23.1%)	
Patients (%) Without Events (Censored)	82 ( 71.9%)	80 ( 76.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.6, NE)	NE (7.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.081 (0.635, 1.839)
p-value			0.7736

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.7293
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	68 ( 78.2%)	48 ( 53.3%)	
Patients (%) Without Events (Censored)	19 ( 21.8%)	42 ( 46.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	4.1 (0.7, 8.5)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.641 (1.130, 2.381)
p-value			0.0077
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	74 ( 64.9%)	53 ( 51.0%)	
Patients (%) Without Events (Censored)	40 ( 35.1%)	51 ( 49.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.2)	2.5 (1.6, 4.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.510 (1.061, 2.150)
p-value			0.0241

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.5459
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	5 ( 5.7%)	7 ( 7.8%)	
Patients (%) Without Events (Censored)	82 ( 94.3%)	83 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.623 (0.197, 1.974)
p-value			0.4169
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	7 ( 6.1%)	14 ( 13.5%)	
Patients (%) Without Events (Censored)	107 ( 93.9%)	90 ( 86.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.424 (0.171, 1.054)
p-value			0.0567

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.7834
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	80 ( 92.0%)	61 ( 67.8%)	
Patients (%) Without Events (Censored)	7 ( 8.0%)	29 ( 32.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.4)	1.0 (0.7, 1.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.084 (1.483, 2.929)
p-value			<0.0001
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	106 ( 93.0%)	77 ( 74.0%)	
Patients (%) Without Events (Censored)	8 ( 7.0%)	27 ( 26.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.2 (0.1, 0.3)	0.5 (0.3, 1.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.827 (1.354, 2.465)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.2466
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	53 ( 60.9%)	20 ( 22.2%)	
Patients (%) Without Events (Censored)	34 ( 39.1%)	70 ( 77.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.9, 4.3)	NE (6.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.831 (2.286, 6.420)
p-value			<0.0001
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	67 ( 58.8%)	29 ( 27.9%)	
Patients (%) Without Events (Censored)	47 ( 41.2%)	75 ( 72.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.7 (1.0, 5.1)	8.5 (5.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.528 (1.633, 3.915)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Nausea			
Interaction p-value			0.2533
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	51 ( 58.6%)	24 ( 26.7%)	
Patients (%) Without Events (Censored)	36 ( 41.4%)	66 ( 73.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.7, 20.7)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.723 (1.673, 4.432)
p-value			<0.0001
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	69 ( 60.5%)	40 ( 38.5%)	
Patients (%) Without Events (Censored)	45 ( 39.5%)	64 ( 61.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.3, 3.7)	7.6 (3.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.846 (1.249, 2.728)
p-value			0.0016

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.3962
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	19 ( 21.8%)	8 ( 8.9%)	
Patients (%) Without Events (Censored)	68 ( 78.2%)	82 ( 91.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.284 (0.992, 5.256)
p-value			0.0460
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	31 ( 27.2%)	19 ( 18.3%)	
Patients (%) Without Events (Censored)	83 ( 72.8%)	85 ( 81.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	14.5 (14.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.423 (0.803, 2.520)
p-value			0.2222

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.5983
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	3 ( 3.4%)	5 ( 5.6%)	
Patients (%) Without Events (Censored)	84 ( 96.6%)	85 ( 94.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.554 (0.131, 2.332)
p-value			0.4137
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	3 ( 2.6%)	8 ( 7.7%)	
Patients (%) Without Events (Censored)	111 ( 97.4%)	96 ( 92.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.299 (0.079, 1.132)
p-value			0.0595

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.1427
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	13 ( 14.9%)	2 ( 2.2%)	
Patients (%) Without Events (Censored)	74 ( 85.1%)	88 ( 97.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.760 (1.292, 25.670)
p-value			0.0095
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	11 ( 9.6%)	6 ( 5.8%)	
Patients (%) Without Events (Censored)	103 ( 90.4%)	98 ( 94.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.653 (0.611, 4.470)
p-value			0.3172

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.9775
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	5 ( 5.7%)	8 ( 8.9%)	
Patients (%) Without Events (Censored)	82 ( 94.3%)	82 ( 91.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.536 (0.174, 1.648)
p-value			0.2692
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	6 ( 5.3%)	9 ( 8.7%)	
Patients (%) Without Events (Censored)	108 ( 94.7%)	95 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.446 (0.155, 1.282)
p-value			0.1246

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.7982
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	33 ( 37.9%)	39 ( 43.3%)	
Patients (%) Without Events (Censored)	54 ( 62.1%)	51 ( 56.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.8, NE)	4.6 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.771 (0.484, 1.227)
p-value			0.2688
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	41 ( 36.0%)	45 ( 43.3%)	
Patients (%) Without Events (Censored)	73 ( 64.0%)	59 ( 56.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.7 (6.1, NE)	3.6 (2.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.693 (0.453, 1.061)
p-value			0.0895

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.4668
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	4 ( 4.6%)	6 ( 6.7%)	
Patients (%) Without Events (Censored)	83 ( 95.4%)	84 ( 93.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.602 (0.170, 2.140)
p-value			0.4266
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	5 ( 4.4%)	12 ( 11.5%)	
Patients (%) Without Events (Censored)	109 ( 95.6%)	92 ( 88.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.286 (0.100, 0.816)
p-value			0.0129

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Paraesthesia</b>			
Interaction p-value			0.7906
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	3 ( 3.4%)	7 ( 7.8%)	
Patients (%) Without Events (Censored)	84 ( 96.6%)	83 ( 92.2%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.355 (0.091, 1.379)
p-value			0.1184
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	4 ( 3.5%)	7 ( 6.7%)	
Patients (%) Without Events (Censored)	110 ( 96.5%)	97 ( 93.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.354 (0.091, 1.369)
p-value			0.1159

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.8275
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	31 ( 35.6%)	21 ( 23.3%)	
Patients (%) Without Events (Censored)	56 ( 64.4%)	69 ( 76.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	20.9 (3.9, NE)	10.1 (10.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.491 (0.855, 2.600)
p-value			0.1574
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	55 ( 48.2%)	38 ( 36.5%)	
Patients (%) Without Events (Censored)	59 ( 51.8%)	66 ( 63.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	5.7 (2.5, 10.5)	8.3 (3.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.388 (0.917, 2.099)
p-value			0.1209

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Epistaxis			
Interaction p-value			0.4113
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	8 ( 9.2%)	1 ( 1.1%)	
Patients (%) Without Events (Censored)	79 ( 90.8%)	89 ( 98.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.854 (0.849, 55.351)
p-value			0.0366
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	9 ( 7.9%)	3 ( 2.9%)	
Patients (%) Without Events (Censored)	105 ( 92.1%)	101 ( 97.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.662 (0.720, 9.849)
p-value			0.1272

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.1783
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	59 ( 67.8%)	38 ( 42.2%)	
Patients (%) Without Events (Censored)	28 ( 32.2%)	52 ( 57.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.5, 1.8)	5.7 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.262 (1.500, 3.410)
p-value			<0.0001
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	61 ( 53.5%)	41 ( 39.4%)	
Patients (%) Without Events (Censored)	53 ( 46.5%)	63 ( 60.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (0.7, 10.6)	5.5 (3.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.525 (1.026, 2.266)
p-value			0.0367

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alopecia			
Interaction p-value			0.0556
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	49 ( 56.3%)	18 ( 20.0%)	
Patients (%) Without Events (Censored)	38 ( 43.7%)	72 ( 80.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.836 (2.231, 6.594)
p-value			<0.0001
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	49 ( 43.0%)	27 ( 26.0%)	
Patients (%) Without Events (Censored)	65 ( 57.0%)	77 ( 74.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.879 (1.174, 3.007)
p-value			0.0080

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.7122
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	3 ( 3.4%)	9 ( 10.0%)	
Patients (%) Without Events (Censored)	84 ( 96.6%)	81 ( 90.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.230 (0.060, 0.888)
p-value			0.0215
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	1 ( 0.9%)	5 ( 4.8%)	
Patients (%) Without Events (Censored)	113 ( 99.1%)	99 ( 95.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.166 (0.019, 1.425)
p-value			0.0623

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.6: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.3112
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	12 ( 13.8%)	1 ( 1.1%)	
Patients (%) Without Events (Censored)	75 ( 86.2%)	89 ( 98.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (10.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			12.118 (1.573, 93.365)
p-value			0.0022
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	12 ( 10.5%)	3 ( 2.9%)	
Patients (%) Without Events (Censored)	102 ( 89.5%)	101 ( 97.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.553 (1.001, 12.604)
p-value			0.0363

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.0121
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	96 ( 78.0%)	80 ( 66.1%)	
Patients (%) Without Events (Censored)	27 ( 22.0%)	41 ( 33.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	1.6 (0.7, 2.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.348 (0.999, 1.818)
p-value			0.0486
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	69 ( 88.5%)	38 ( 52.1%)	
Patients (%) Without Events (Censored)	9 ( 11.5%)	35 ( 47.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.5 (0.3, 0.7)	2.1 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.423 (1.626, 3.609)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.7055
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	47 ( 38.2%)	30 ( 24.8%)	
Patients (%) Without Events (Censored)	76 ( 61.8%)	91 ( 75.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.4 (4.7, NE)	13.4 (7.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.567 (0.991, 2.480)
p-value			0.0531
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	23 ( 29.5%)	15 ( 20.5%)	
Patients (%) Without Events (Censored)	55 ( 70.5%)	58 ( 79.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.9, NE)	NE (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.386 (0.722, 2.660)
p-value			0.3253

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.0148
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	79 ( 64.2%)	67 ( 55.4%)	
Patients (%) Without Events (Censored)	44 ( 35.8%)	54 ( 44.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 1.6)	2.7 (1.0, 6.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.217 (0.878, 1.688)
p-value			0.2320
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	63 ( 80.8%)	34 ( 46.6%)	
Patients (%) Without Events (Censored)	15 ( 19.2%)	39 ( 53.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 0.7)	2.5 (0.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.332 (1.534, 3.544)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.0182
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	3 ( 2.4%)	15 ( 12.4%)	
Patients (%) Without Events (Censored)	120 ( 97.6%)	106 ( 87.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.163 (0.047, 0.566)
p-value			0.0011
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	9 ( 11.5%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	69 ( 88.5%)	67 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.311 (0.466, 3.687)
p-value			0.6075

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.8778
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	114 ( 92.7%)	85 ( 70.2%)	
Patients (%) Without Events (Censored)	9 ( 7.3%)	36 ( 29.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	0.8 (0.6, 1.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.946 (1.460, 2.594)
p-value			<0.0001
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	72 ( 92.3%)	53 ( 72.6%)	
Patients (%) Without Events (Censored)	6 ( 7.7%)	20 ( 27.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.2 (0.1, 0.3)	0.7 (0.4, 1.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.966 (1.370, 2.822)
p-value			0.0002

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.1153
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	77 ( 62.6%)	27 ( 22.3%)	
Patients (%) Without Events (Censored)	46 ( 37.4%)	94 ( 77.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (1.0, 2.9)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.832 (2.467, 5.952)
p-value			<0.0001
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	43 ( 55.1%)	22 ( 30.1%)	
Patients (%) Without Events (Censored)	35 ( 44.9%)	51 ( 69.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.7 (1.0, 8.2)	NE (3.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.179 (1.302, 3.646)
p-value			0.0024

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Nausea</b>			
Interaction p-value			0.9908
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	68 ( 55.3%)	38 ( 31.4%)	
Patients (%) Without Events (Censored)	55 ( 44.7%)	83 ( 68.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.4 (0.8, 9.1)	NE (6.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.153 (1.446, 3.206)
p-value			0.0001
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	52 ( 66.7%)	26 ( 35.6%)	
Patients (%) Without Events (Censored)	26 ( 33.3%)	47 ( 64.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.0 (0.3, 1.7)	NE (3.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.152 (1.340, 3.454)
p-value			0.0011

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.0284
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	31 ( 25.2%)	11 ( 9.1%)	
Patients (%) Without Events (Censored)	92 ( 74.8%)	110 ( 90.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.764 (1.387, 5.507)
p-value			0.0025
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	19 ( 24.4%)	16 ( 21.9%)	
Patients (%) Without Events (Censored)	59 ( 75.6%)	57 ( 78.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (23.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.943 (0.480, 1.852)
p-value			0.8670

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.4057
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	1 ( 0.8%)	5 ( 4.1%)	
Patients (%) Without Events (Censored)	122 ( 99.2%)	116 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.178 (0.021, 1.531)
p-value			0.0766
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	5 ( 6.4%)	8 ( 11.0%)	
Patients (%) Without Events (Censored)	73 ( 93.6%)	65 ( 89.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.462 (0.150, 1.426)
p-value			0.1693

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.0770
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	14 ( 11.4%)	2 ( 1.7%)	
Patients (%) Without Events (Censored)	109 ( 88.6%)	119 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.402 (1.449, 28.293)
p-value			0.0050
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	10 ( 12.8%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	68 ( 87.2%)	67 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.417 (0.514, 3.903)
p-value			0.4986

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.7707
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	7 ( 5.7%)	12 ( 9.9%)	
Patients (%) Without Events (Censored)	116 ( 94.3%)	109 ( 90.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.474 (0.185, 1.211)
p-value			0.1105
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	4 ( 5.1%)	5 ( 6.8%)	
Patients (%) Without Events (Censored)	74 ( 94.9%)	68 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.522 (0.138, 1.975)
p-value			0.3306

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.7744
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	42 ( 34.1%)	48 ( 39.7%)	
Patients (%) Without Events (Censored)	81 ( 65.9%)	73 ( 60.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.1, NE)	NE (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.742 (0.489, 1.126)
p-value			0.1584
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	32 ( 41.0%)	36 ( 49.3%)	
Patients (%) Without Events (Censored)	46 ( 59.0%)	37 ( 50.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.9 (2.6, NE)	2.8 (1.6, 5.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.686 (0.425, 1.107)
p-value			0.1212

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.5965
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	6 ( 4.9%)	11 ( 9.1%)	
Patients (%) Without Events (Censored)	117 ( 95.1%)	110 ( 90.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.445 (0.163, 1.211)
p-value			0.1028
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	3 ( 3.8%)	7 ( 9.6%)	
Patients (%) Without Events (Censored)	75 ( 96.2%)	66 ( 90.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.299 (0.077, 1.164)
p-value			0.0652

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Paraesthesia</b>			
Interaction p-value			0.3952
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	6 ( 4.9%)	10 ( 8.3%)	
Patients (%) Without Events (Censored)	117 ( 95.1%)	111 ( 91.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.432 (0.147, 1.269)
p-value			0.1174
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	1 ( 1.3%)	4 ( 5.5%)	
Patients (%) Without Events (Censored)	77 ( 98.7%)	69 ( 94.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.188 (0.021, 1.686)
p-value			0.0946

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.1930
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	43 ( 35.0%)	35 ( 28.9%)	
Patients (%) Without Events (Censored)	80 ( 65.0%)	86 ( 71.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	20.9 (6.5, NE)	NE (8.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.189 (0.760, 1.861)
p-value			0.4498
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	43 ( 55.1%)	24 ( 32.9%)	
Patients (%) Without Events (Censored)	35 ( 44.9%)	49 ( 67.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.3 (1.6, 5.7)	8.0 (4.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.861 (1.128, 3.068)
p-value			0.0131

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Epistaxis			
Interaction p-value			0.2557
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	13 ( 10.6%)	2 ( 1.7%)	
Patients (%) Without Events (Censored)	110 ( 89.4%)	119 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.989 (1.344, 26.682)
p-value			0.0076
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	4 ( 5.1%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	74 ( 94.9%)	71 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.706 (0.312, 9.344)
p-value			0.5330

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.2889
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	73 ( 59.3%)	45 ( 37.2%)	
Patients (%) Without Events (Censored)	50 ( 40.7%)	76 ( 62.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 2.5)	NE (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.096 (1.444, 3.042)
p-value			<0.0001
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	47 ( 60.3%)	34 ( 46.6%)	
Patients (%) Without Events (Censored)	31 ( 39.7%)	39 ( 53.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.5, 10.6)	4.0 (1.6, 8.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.452 (0.930, 2.269)
p-value			0.1024

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alopecia			
Interaction p-value			0.6318
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	59 ( 48.0%)	29 ( 24.0%)	
Patients (%) Without Events (Censored)	64 ( 52.0%)	92 ( 76.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.2 (0.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.470 (1.582, 3.856)
p-value			<0.0001
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	39 ( 50.0%)	16 ( 21.9%)	
Patients (%) Without Events (Censored)	39 ( 50.0%)	57 ( 78.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.832 (1.581, 5.074)
p-value			0.0003

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.3038
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	3 ( 2.4%)	7 ( 5.8%)	
Patients (%) Without Events (Censored)	120 ( 97.6%)	114 ( 94.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.311 (0.078, 1.232)
p-value			0.0803
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	1 ( 1.3%)	7 ( 9.6%)	
Patients (%) Without Events (Censored)	77 ( 98.7%)	66 ( 90.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.107 (0.013, 0.870)
p-value			0.0109

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.7: Time to the First Frequent TEAE by SOC, PT and Subgroup: Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.5947
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	15 ( 12.2%)	2 ( 1.7%)	
Patients (%) Without Events (Censored)	108 ( 87.8%)	119 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			7.277 (1.662, 31.855)
p-value			0.0020
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	9 ( 11.5%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	69 ( 88.5%)	71 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (10.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.991 (0.860, 18.526)
p-value			0.0564

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.1669
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	91 ( 78.4%)	73 ( 61.3%)	
Patients (%) Without Events (Censored)	25 ( 21.6%)	46 ( 38.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 0.9)	1.7 (0.7, 2.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.462 (1.071, 1.995)
p-value			0.0149
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	71 ( 88.8%)	45 ( 61.6%)	
Patients (%) Without Events (Censored)	9 ( 11.3%)	28 ( 38.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.5 (0.3, 0.7)	1.2 (0.7, 4.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.037 (1.398, 2.969)
p-value			0.0002

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.3419
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	41 ( 35.3%)	23 ( 19.3%)	
Patients (%) Without Events (Censored)	75 ( 64.7%)	96 ( 80.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.747 (1.046, 2.916)
p-value			0.0312
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	29 ( 36.3%)	22 ( 30.1%)	
Patients (%) Without Events (Censored)	51 ( 63.8%)	51 ( 69.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (4.7, NE)	13.4 (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.209 (0.694, 2.105)
p-value			0.5202

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.1267
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	78 ( 67.2%)	64 ( 53.8%)	
Patients (%) Without Events (Censored)	38 ( 32.8%)	55 ( 46.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.7, 1.2)	2.4 (1.0, 4.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.351 (0.969, 1.883)
p-value			0.0708
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	62 ( 77.5%)	37 ( 50.7%)	
Patients (%) Without Events (Censored)	18 ( 22.5%)	36 ( 49.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.4, 0.9)	4.2 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.987 (1.320, 2.990)
p-value			0.0010

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.8926
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	7 ( 6.0%)	13 ( 10.9%)	
Patients (%) Without Events (Censored)	109 ( 94.0%)	106 ( 89.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.445 (0.175, 1.128)
p-value			0.0803
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	5 ( 6.3%)	8 ( 11.0%)	
Patients (%) Without Events (Censored)	75 ( 93.8%)	65 ( 89.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.532 (0.174, 1.626)
p-value			0.2600

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09

Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.1542
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	108 ( 93.1%)	89 ( 74.8%)	
Patients (%) Without Events (Censored)	8 ( 6.9%)	30 ( 25.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	0.8 (0.5, 1.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.754 (1.316, 2.338)
p-value			<0.0001
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	74 ( 92.5%)	47 ( 64.4%)	
Patients (%) Without Events (Censored)	6 ( 7.5%)	26 ( 35.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.2 (0.1, 0.3)	1.2 (0.3, 1.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.350 (1.618, 3.415)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.3947
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	71 ( 61.2%)	32 ( 26.9%)	
Patients (%) Without Events (Censored)	45 ( 38.8%)	87 ( 73.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.1 (1.3, 3.4)	NE (5.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.759 (1.814, 4.199)
p-value			<0.0001
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	48 ( 60.0%)	17 ( 23.3%)	
Patients (%) Without Events (Censored)	32 ( 40.0%)	56 ( 76.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.5 (0.7, 5.1)	NE (6.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.634 (2.086, 6.329)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Nausea			
Interaction p-value			0.0763
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	66 ( 56.9%)	45 ( 37.8%)	
Patients (%) Without Events (Censored)	50 ( 43.1%)	74 ( 62.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.3, 8.2)	7.6 (3.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.715 (1.172, 2.508)
p-value			0.0048
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	50 ( 62.5%)	18 ( 24.7%)	
Patients (%) Without Events (Censored)	30 ( 37.5%)	55 ( 75.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.9, 3.7)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.199 (1.864, 5.492)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.2952
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	28 ( 24.1%)	19 ( 16.0%)	
Patients (%) Without Events (Censored)	88 ( 75.9%)	100 ( 84.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.387 (0.772, 2.493)
p-value			0.2692
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	21 ( 26.3%)	8 ( 11.0%)	
Patients (%) Without Events (Censored)	59 ( 73.8%)	65 ( 89.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.351 (1.040, 5.317)
p-value			0.0345

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.3663
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	4 ( 3.4%)	6 ( 5.0%)	
Patients (%) Without Events (Censored)	112 ( 96.6%)	113 ( 95.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.585 (0.164, 2.088)
p-value			0.4031
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	2 ( 2.5%)	7 ( 9.6%)	
Patients (%) Without Events (Censored)	78 ( 97.5%)	66 ( 90.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.228 (0.047, 1.104)
p-value			0.0448

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.7301
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	13 ( 11.2%)	4 ( 3.4%)	
Patients (%) Without Events (Censored)	103 ( 88.8%)	115 ( 96.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	20.1 (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.824 (0.908, 8.785)
p-value			0.0610
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	11 ( 13.8%)	4 ( 5.5%)	
Patients (%) Without Events (Censored)	69 ( 86.3%)	69 ( 94.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.480 (0.790, 7.788)
p-value			0.1076

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.5488
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	5 ( 4.3%)	10 ( 8.4%)	
Patients (%) Without Events (Censored)	111 ( 95.7%)	109 ( 91.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.319 (0.105, 0.968)
p-value			0.0346
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	5 ( 6.3%)	7 ( 9.6%)	
Patients (%) Without Events (Censored)	75 ( 93.8%)	66 ( 90.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.608 (0.193, 1.918)
p-value			0.3920

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.6223
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	41 ( 35.3%)	50 ( 42.0%)	
Patients (%) Without Events (Censored)	75 ( 64.7%)	69 ( 58.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.6, NE)	3.6 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.654 (0.430, 0.996)
p-value			0.0461
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	32 ( 40.0%)	34 ( 46.6%)	
Patients (%) Without Events (Censored)	48 ( 60.0%)	39 ( 53.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.6, NE)	3.9 (1.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.793 (0.489, 1.286)
p-value			0.3435

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.3509
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	6 ( 5.2%)	10 ( 8.4%)	
Patients (%) Without Events (Censored)	110 ( 94.8%)	109 ( 91.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.510 (0.185, 1.407)
p-value			0.1839
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	2 ( 2.5%)	8 ( 11.0%)	
Patients (%) Without Events (Censored)	78 ( 97.5%)	65 ( 89.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.189 (0.040, 0.893)
p-value			0.0187

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Paraesthesia</b>			
Interaction p-value			0.9052
<b>Prior CDK treatment duration: &lt;= 12 months</b>			
Total Patients	116	119	
Patients (%) With Events	4 ( 3.4%)	8 ( 6.7%)	
Patients (%) Without Events (Censored)	112 ( 96.6%)	111 ( 93.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.419 (0.125, 1.403)
p-value			0.1461
<b>Prior CDK treatment duration: &gt; 12 months</b>			
Total Patients	80	73	
Patients (%) With Events	3 ( 3.8%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	77 ( 96.3%)	67 ( 91.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.272 (0.055, 1.347)
p-value			0.0875

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.8379
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	47 ( 40.5%)	34 ( 28.6%)	
Patients (%) Without Events (Censored)	69 ( 59.5%)	85 ( 71.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	7.2 (3.9, NE)	11.0 (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.365 (0.875, 2.129)
p-value			0.1708
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	37 ( 46.3%)	24 ( 32.9%)	
Patients (%) Without Events (Censored)	43 ( 53.8%)	49 ( 67.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	5.7 (2.1, NE)	10.1 (5.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.515 (0.906, 2.534)
p-value			0.1121

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Epistaxis			
Interaction p-value			0.2799
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	12 ( 10.3%)	2 ( 1.7%)	
Patients (%) Without Events (Censored)	104 ( 89.7%)	117 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.344 (1.182, 24.156)
p-value			0.0148
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	4 ( 5.0%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	76 ( 95.0%)	71 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.738 (0.318, 9.492)
p-value			0.5181

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.2588
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	66 ( 56.9%)	50 ( 42.0%)	
Patients (%) Without Events (Censored)	50 ( 43.1%)	69 ( 58.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.7, 2.5)	5.5 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.621 (1.121, 2.343)
p-value			0.0099
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	52 ( 65.0%)	29 ( 39.7%)	
Patients (%) Without Events (Censored)	28 ( 35.0%)	44 ( 60.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 4.0)	8.2 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.178 (1.380, 3.436)
p-value			0.0006

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alopecia			
Interaction p-value			0.5688
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	57 ( 49.1%)	29 ( 24.4%)	
Patients (%) Without Events (Censored)	59 ( 50.9%)	90 ( 75.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.3 (0.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.399 (1.533, 3.755)
p-value			<0.0001
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	39 ( 48.8%)	16 ( 21.9%)	
Patients (%) Without Events (Censored)	41 ( 51.3%)	57 ( 78.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.878 (1.607, 5.156)
p-value			0.0002

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.8: Time to the First Frequent TEAE by SOC, PT and Subgroup: Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.3761
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	12 ( 10.3%)	3 ( 2.5%)	
Patients (%) Without Events (Censored)	104 ( 89.7%)	116 ( 97.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.927 (1.106, 13.949)
p-value			0.0225
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	12 ( 15.0%)	1 ( 1.4%)	
Patients (%) Without Events (Censored)	68 ( 85.0%)	72 ( 98.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (10.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			11.334 (1.474, 87.159)
p-value			0.0032

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Study IMMU-132-09

Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.2419
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	12 ( 92.3%)	6 ( 42.9%)	
Patients (%) Without Events (Censored)	1 ( 7.7%)	8 ( 57.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 1.0)	NE (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.756 (1.024, 7.416)
p-value			0.0409
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	147 ( 81.2%)	111 ( 63.1%)	
Patients (%) Without Events (Censored)	34 ( 18.8%)	65 ( 36.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 0.7)	1.6 (0.7, 2.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.562 (1.218, 2.002)
p-value			0.0004

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.2930
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	4 ( 30.8%)	4 ( 28.6%)	
Patients (%) Without Events (Censored)	9 ( 69.2%)	10 ( 71.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.4, NE)	NE (1.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.802 (0.192, 3.358)
p-value			0.7610
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	65 ( 35.9%)	41 ( 23.3%)	
Patients (%) Without Events (Censored)	116 ( 64.1%)	135 ( 76.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.6, NE)	NE (13.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.538 (1.040, 2.276)
p-value			0.0303

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.3351
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	10 ( 76.9%)	5 ( 35.7%)	
Patients (%) Without Events (Censored)	3 ( 23.1%)	9 ( 64.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 3.1)	NE (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.390 (0.813, 7.025)
p-value			0.1076
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	127 ( 70.2%)	95 ( 54.0%)	
Patients (%) Without Events (Censored)	54 ( 29.8%)	81 ( 46.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	2.5 (1.0, 4.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.483 (1.136, 1.937)
p-value			0.0035

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.7758
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	2 ( 14.3%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	12 ( 85.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (1.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.511 (0.046, 5.643)
p-value			0.5766
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	11 ( 6.1%)	19 ( 10.8%)	
Patients (%) Without Events (Censored)	170 ( 93.9%)	157 ( 89.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.504 (0.240, 1.062)
p-value			0.0663

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.3464
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	12 ( 92.3%)	11 ( 78.6%)	
Patients (%) Without Events (Censored)	1 ( 7.7%)	3 ( 21.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.1, 0.3)	0.4 (0.1, 1.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.499 (0.653, 3.437)
p-value			0.3833
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	168 ( 92.8%)	123 ( 69.9%)	
Patients (%) Without Events (Censored)	13 ( 7.2%)	53 ( 30.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	0.8 (0.7, 1.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.094 (1.650, 2.657)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.4440
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	7 ( 53.8%)	1 ( 7.1%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	8.2 (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.456 (0.777, 53.663)
p-value			0.0475
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	108 ( 59.7%)	47 ( 26.7%)	
Patients (%) Without Events (Censored)	73 ( 40.3%)	129 ( 73.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (1.2, 2.9)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.954 (2.096, 4.164)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Nausea			
Interaction p-value			0.9022
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	9 ( 69.2%)	4 ( 28.6%)	
Patients (%) Without Events (Censored)	4 ( 30.8%)	10 ( 71.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, NE)	NE (0.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.442 (0.732, 8.144)
p-value			0.1399
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	107 ( 59.1%)	57 ( 32.4%)	
Patients (%) Without Events (Censored)	74 ( 40.9%)	119 ( 67.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.8, 2.6)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.237 (1.621, 3.089)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.7762
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	5 ( 38.5%)	2 ( 14.3%)	
Patients (%) Without Events (Censored)	8 ( 61.5%)	12 ( 85.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	8.2 (1.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.634 (0.285, 9.371)
p-value			0.5780
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	42 ( 23.2%)	24 ( 13.6%)	
Patients (%) Without Events (Censored)	139 ( 76.8%)	152 ( 86.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.661 (1.005, 2.747)
p-value			0.0454

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.9916
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	0	1 ( 7.1%)	
Patients (%) Without Events (Censored)	13 (100.0%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3173
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	6 ( 3.3%)	12 ( 6.8%)	
Patients (%) Without Events (Censored)	175 ( 96.7%)	164 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.424 (0.158, 1.135)
p-value			0.0786

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.9915
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3576
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	21 ( 11.6%)	8 ( 4.5%)	
Patients (%) Without Events (Censored)	160 ( 88.4%)	168 ( 95.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.489 (1.102, 5.621)
p-value			0.0232

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.9997
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	10 ( 5.5%)	17 ( 9.7%)	
Patients (%) Without Events (Censored)	171 ( 94.5%)	159 ( 90.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.458 (0.208, 1.010)
p-value			0.0475

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.6252
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	4 ( 30.8%)	5 ( 35.7%)	
Patients (%) Without Events (Censored)	9 ( 69.2%)	9 ( 64.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.7, NE)	4.6 (0.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.354 (0.084, 1.480)
p-value			0.1432
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	68 ( 37.6%)	76 ( 43.2%)	
Patients (%) Without Events (Censored)	113 ( 62.4%)	100 ( 56.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.9 (6.1, NE)	3.9 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.767 (0.553, 1.066)
p-value			0.1130

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.6308
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	2 ( 14.3%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	12 ( 85.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.1, NE)	4.6 (4.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.170 (0.014, 2.102)
p-value			0.1323
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	8 ( 4.4%)	16 ( 9.1%)	
Patients (%) Without Events (Censored)	173 ( 95.6%)	160 ( 90.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.405 (0.173, 0.949)
p-value			0.0313

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Paraesthesia			
Interaction p-value			0.9913
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	0	1 ( 7.1%)	
Patients (%) Without Events (Censored)	13 (100.0%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2980
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	7 ( 3.9%)	13 ( 7.4%)	
Patients (%) Without Events (Censored)	174 ( 96.1%)	163 ( 92.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.389 (0.148, 1.026)
p-value			0.0482

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.7492
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	8 ( 61.5%)	5 ( 35.7%)	
Patients (%) Without Events (Censored)	5 ( 38.5%)	9 ( 64.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.5 (0.3, NE)	NE (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.445 (0.455, 4.590)
p-value			0.5295
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	76 ( 42.0%)	52 ( 29.5%)	
Patients (%) Without Events (Censored)	105 ( 58.0%)	124 ( 70.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.5 (3.9, NE)	11.0 (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.487 (1.044, 2.117)
p-value			0.0270

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Epistaxis</b>			
Interaction p-value			0.9932
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3367
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	16 ( 8.8%)	4 ( 2.3%)	
Patients (%) Without Events (Censored)	165 ( 91.2%)	172 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.599 (1.197, 10.817)
p-value			0.0148

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Study IMMU-132-09Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.5812
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	8 ( 61.5%)	6 ( 42.9%)	
Patients (%) Without Events (Censored)	5 ( 38.5%)	8 ( 57.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.8 (0.5, NE)	NE (0.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.117 (0.370, 3.373)
p-value			0.8433
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	107 ( 59.1%)	71 ( 40.3%)	
Patients (%) Without Events (Censored)	74 ( 40.9%)	105 ( 59.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 2.1)	5.7 (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.835 (1.358, 2.479)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alopecia			
Interaction p-value			0.8832
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	7 ( 53.8%)	3 ( 21.4%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	11 ( 78.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.2 (0.5, NE)	NE (1.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.225 (0.546, 9.060)
p-value			0.2524
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	86 ( 47.5%)	42 ( 23.9%)	
Patients (%) Without Events (Censored)	95 ( 52.5%)	134 ( 76.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.450 (1.693, 3.545)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.9929
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	0	1 ( 7.1%)	
Patients (%) Without Events (Censored)	13 (100.0%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3173
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	3 ( 1.7%)	12 ( 6.8%)	
Patients (%) Without Events (Censored)	178 ( 98.3%)	164 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.207 (0.058, 0.736)
p-value			0.0072

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.9: Time to the First Frequent TEAE by SOC, PT and Subgroup: Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.9883
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	3 ( 23.1%)	0	
Patients (%) Without Events (Censored)	10 ( 76.9%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2258
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	21 ( 11.6%)	3 ( 1.7%)	
Patients (%) Without Events (Censored)	160 ( 88.4%)	173 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.946 (2.071, 23.294)
p-value			0.0003

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.10: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.1563
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	147 ( 83.1%)	104 ( 60.8%)	
Patients (%) Without Events (Censored)	30 ( 16.9%)	67 ( 39.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.7)	1.6 (0.7, 2.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.833 (1.421, 2.365)
p-value			<0.0001
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	18 ( 75.0%)	14 ( 60.9%)	
Patients (%) Without Events (Censored)	6 ( 25.0%)	9 ( 39.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (0.4, 6.9)	2.1 (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.049 (0.518, 2.125)
p-value			0.9213

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.1353
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	62 ( 35.0%)	37 ( 21.6%)	
Patients (%) Without Events (Censored)	115 ( 65.0%)	134 ( 78.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.6, NE)	NE (13.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.657 (1.102, 2.491)
p-value			0.0144
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	8 ( 33.3%)	8 ( 34.8%)	
Patients (%) Without Events (Censored)	16 ( 66.7%)	15 ( 65.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.0, NE)	NE (1.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.723 (0.269, 1.942)
p-value			0.5177

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.2427
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes</b>			
Total Patients	177	171	
Patients (%) With Events	129 ( 72.9%)	89 ( 52.0%)	
Patients (%) Without Events (Censored)	48 ( 27.1%)	82 ( 48.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 0.9)	2.5 (1.2, 7.7)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.672 (1.274, 2.193)
p-value			0.0002
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No</b>			
Total Patients	24	23	
Patients (%) With Events	13 ( 54.2%)	12 ( 52.2%)	
Patients (%) Without Events (Censored)	11 ( 45.8%)	11 ( 47.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.7 (0.6, NE)	4.5 (0.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.021 (0.464, 2.246)
p-value			0.9935

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.9857
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	10 ( 5.6%)	21 ( 12.3%)	
Patients (%) Without Events (Censored)	167 ( 94.4%)	150 ( 87.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.403 (0.189, 0.858)
p-value			0.0148
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	2 ( 8.3%)	0	
Patients (%) Without Events (Censored)	22 ( 91.7%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1617

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.2265
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	165 ( 93.2%)	119 ( 69.6%)	
Patients (%) Without Events (Censored)	12 ( 6.8%)	52 ( 30.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.3)	1.0 (0.7, 1.2)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.059 (1.617, 2.623)
p-value			<0.0001
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	21 ( 87.5%)	19 ( 82.6%)	
Patients (%) Without Events (Censored)	3 ( 12.5%)	4 ( 17.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.2 (0.1, 0.3)	0.3 (0.2, 0.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.469 (0.786, 2.744)
p-value			0.2179

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.9713
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	103 ( 58.2%)	42 ( 24.6%)	
Patients (%) Without Events (Censored)	74 ( 41.8%)	129 ( 75.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.1 (1.3, 4.3)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.055 (2.133, 4.377)
p-value			<0.0001
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	17 ( 70.8%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	7 ( 29.2%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (0.3, 2.8)	8.5 (4.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.963 (1.224, 7.174)
p-value			0.0115

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Nausea			
Interaction p-value			0.9991
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	105 ( 59.3%)	56 ( 32.7%)	
Patients (%) Without Events (Censored)	72 ( 40.7%)	115 ( 67.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.8, 3.5)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.168 (1.566, 3.003)
p-value			<0.0001
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	15 ( 62.5%)	8 ( 34.8%)	
Patients (%) Without Events (Censored)	9 ( 37.5%)	15 ( 65.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.3, NE)	NE (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.174 (0.921, 5.134)
p-value			0.0630

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.5201
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	41 ( 23.2%)	21 ( 12.3%)	
Patients (%) Without Events (Censored)	136 ( 76.8%)	150 ( 87.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.799 (1.061, 3.052)
p-value			0.0271
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	9 ( 37.5%)	6 ( 26.1%)	
Patients (%) Without Events (Censored)	15 ( 62.5%)	17 ( 73.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.278 (0.453, 3.606)
p-value			0.6352

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.6415
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	5 ( 2.8%)	12 ( 7.0%)	
Patients (%) Without Events (Censored)	172 ( 97.2%)	159 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.358 (0.125, 1.020)
p-value			0.0447
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	1 ( 4.2%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	23 ( 95.8%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.723 (0.044, 11.882)
p-value			0.8196

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.7822
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	20 ( 11.3%)	7 ( 4.1%)	
Patients (%) Without Events (Censored)	157 ( 88.7%)	164 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.549 (1.073, 6.053)
p-value			0.0280
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	4 ( 16.7%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	20 ( 83.3%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.620 (0.404, 32.465)
p-value			0.2203

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.10: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.6240
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	9 ( 5.1%)	13 ( 7.6%)	
Patients (%) Without Events (Censored)	168 ( 94.9%)	158 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.541 (0.229, 1.279)
p-value			0.1554
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	2 ( 8.3%)	4 ( 17.4%)	
Patients (%) Without Events (Censored)	22 ( 91.7%)	19 ( 82.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	9.9 (5.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.301 (0.054, 1.680)
p-value			0.1428

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.10: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.5993
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	64 ( 36.2%)	75 ( 43.9%)	
Patients (%) Without Events (Censored)	113 ( 63.8%)	96 ( 56.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.1, NE)	3.6 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.705 (0.504, 0.986)
p-value			0.0402
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	10 ( 41.7%)	9 ( 39.1%)	
Patients (%) Without Events (Censored)	14 ( 58.3%)	14 ( 60.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.9 (2.7, NE)	NE (1.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.879 (0.354, 2.180)
p-value			0.7869

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.10: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.8494
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	7 ( 4.0%)	15 ( 8.8%)	
Patients (%) Without Events (Censored)	170 ( 96.0%)	156 ( 91.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.371 (0.151, 0.915)
p-value			0.0249
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	2 ( 8.3%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	22 ( 91.7%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.478 (0.079, 2.884)
p-value			0.4103

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.10: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Paraesthesia</b>			
Interaction p-value			0.9997
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes</b>			
Total Patients	177	171	
Patients (%) With Events	7 ( 4.0%)	14 ( 8.2%)	
Patients (%) Without Events (Censored)	170 ( 96.0%)	157 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.356 (0.136, 0.928)
p-value			0.0275
<b>Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No</b>			
Total Patients	24	23	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	24 (100.0%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.10: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.9958
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	75 ( 42.4%)	52 ( 30.4%)	
Patients (%) Without Events (Censored)	102 ( 57.6%)	119 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.5 (3.6, NE)	11.0 (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.445 (1.013, 2.059)
p-value			0.0411
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	11 ( 45.8%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	13 ( 54.2%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	10.5 (2.5, NE)	NE (4.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.361 (0.524, 3.533)
p-value			0.5291

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Epistaxis			
Interaction p-value			0.9903
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	15 ( 8.5%)	4 ( 2.3%)	
Patients (%) Without Events (Censored)	162 ( 91.5%)	167 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.308 (1.091, 10.027)
p-value			0.0251
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	2 ( 8.3%)	0	
Patients (%) Without Events (Censored)	22 ( 91.7%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2112

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.1149
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	101 ( 57.1%)	71 ( 41.5%)	
Patients (%) Without Events (Censored)	76 ( 42.9%)	100 ( 58.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 2.4)	5.6 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.658 (1.223, 2.249)
p-value			0.0010
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	19 ( 79.2%)	8 ( 34.8%)	
Patients (%) Without Events (Censored)	5 ( 20.8%)	15 ( 65.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.5, 2.8)	NE (3.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.412 (1.486, 7.836)
p-value			0.0021

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Study IMMU-132-09Table 15.11.7.2.10: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alopecia			
Interaction p-value			0.2646
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	84 ( 47.5%)	41 ( 24.0%)	
Patients (%) Without Events (Censored)	93 ( 52.5%)	130 ( 76.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.2 (1.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.400 (1.651, 3.489)
p-value			<0.0001
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	14 ( 58.3%)	4 ( 17.4%)	
Patients (%) Without Events (Censored)	10 ( 41.7%)	19 ( 82.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.5, NE)	NE (5.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.689 (1.538, 14.302)
p-value			0.0028

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.10: Time to the First Frequent TEAE by SOC, PT and Subgroup: Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.9901
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	4 ( 2.3%)	12 ( 7.0%)	
Patients (%) Without Events (Censored)	173 ( 97.7%)	159 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.231 (0.071, 0.750)
p-value			0.0084
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	0	2 ( 8.7%)	
Patients (%) Without Events (Censored)	24 (100.0%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1027

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.9886
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	20 ( 11.3%)	4 ( 2.3%)	
Patients (%) Without Events (Censored)	157 ( 88.7%)	167 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.760 (1.625, 13.941)
p-value			0.0017
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	4 ( 16.7%)	0	
Patients (%) Without Events (Censored)	20 ( 83.3%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0532

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.5835
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	97 ( 79.5%)	76 ( 58.9%)	
Patients (%) Without Events (Censored)	25 ( 20.5%)	53 ( 41.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.8)	1.8 (0.8, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.749 (1.294, 2.365)
p-value			0.0003
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	68 ( 86.1%)	42 ( 64.6%)	
Patients (%) Without Events (Censored)	11 ( 13.9%)	23 ( 35.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.7)	0.7 (0.5, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.462 (0.990, 2.159)
p-value			0.0577

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.3604
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	37 ( 30.3%)	29 ( 22.5%)	
Patients (%) Without Events (Censored)	85 ( 69.7%)	100 ( 77.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.9, NE)	NE (7.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.269 (0.780, 2.067)
p-value			0.3364
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	33 ( 41.8%)	16 ( 24.6%)	
Patients (%) Without Events (Censored)	46 ( 58.2%)	49 ( 75.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	7.2 (3.4, NE)	13.4 (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.806 (0.993, 3.284)
p-value			0.0509

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.5164
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	82 ( 67.2%)	62 ( 48.1%)	
Patients (%) Without Events (Censored)	40 ( 32.8%)	67 ( 51.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.7, 1.3)	4.2 (1.8, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.653 (1.188, 2.301)
p-value			0.0028
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	60 ( 75.9%)	39 ( 60.0%)	
Patients (%) Without Events (Censored)	19 ( 24.1%)	26 ( 40.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.7, 1.0)	2.0 (0.6, 7.7)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.369 (0.913, 2.054)
p-value			0.1235

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.0993
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	8 ( 6.6%)	9 ( 7.0%)	
Patients (%) Without Events (Censored)	114 ( 93.4%)	120 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.875 (0.337, 2.273)
p-value			0.7823
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	4 ( 5.1%)	12 ( 18.5%)	
Patients (%) Without Events (Censored)	75 ( 94.9%)	53 ( 81.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (8.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.233 (0.075, 0.725)
p-value			0.0061

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.4050
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	113 ( 92.6%)	94 ( 72.9%)	
Patients (%) Without Events (Censored)	9 ( 7.4%)	35 ( 27.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.3 (0.2, 0.3)	0.7 (0.4, 1.0)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.814 (1.373, 2.397)
p-value			<0.0001
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	73 ( 92.4%)	44 ( 67.7%)	
Patients (%) Without Events (Censored)	6 ( 7.6%)	21 ( 32.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.3 (0.1, 0.3)	1.0 (0.5, 1.8)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.267 (1.543, 3.331)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.9246
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	73 ( 59.8%)	32 ( 24.8%)	
Patients (%) Without Events (Censored)	49 ( 40.2%)	97 ( 75.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (1.2, 4.3)	NE (6.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.091 (2.038, 4.687)
p-value			<0.0001
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	47 ( 59.5%)	17 ( 26.2%)	
Patients (%) Without Events (Censored)	32 ( 40.5%)	48 ( 73.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.1 (0.8, 5.1)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.962 (1.698, 5.167)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Nausea</b>			
Interaction p-value			0.9122
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	75 ( 61.5%)	43 ( 33.3%)	
Patients (%) Without Events (Censored)	47 ( 38.5%)	86 ( 66.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.0 (0.3, 2.6)	NE (6.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.226 (1.527, 3.244)
p-value			<0.0001
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	45 ( 57.0%)	21 ( 32.3%)	
Patients (%) Without Events (Censored)	34 ( 43.0%)	44 ( 67.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.6 (0.7, 9.1)	NE (7.6, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.138 (1.272, 3.593)
p-value			0.0032

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.6556
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	31 ( 25.4%)	19 ( 14.7%)	
Patients (%) Without Events (Censored)	91 ( 74.6%)	110 ( 85.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (14.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.567 (0.880, 2.789)
p-value			0.1226
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	19 ( 24.1%)	8 ( 12.3%)	
Patients (%) Without Events (Censored)	60 ( 75.9%)	57 ( 87.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.946 (0.849, 4.461)
p-value			0.1095

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hyperglycaemia			
Interaction p-value			0.7208
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	4 ( 3.3%)	8 ( 6.2%)	
Patients (%) Without Events (Censored)	118 ( 96.7%)	121 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.400 (0.118, 1.350)
p-value			0.1271
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	2 ( 2.5%)	5 ( 7.7%)	
Patients (%) Without Events (Censored)	77 ( 97.5%)	60 ( 92.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.323 (0.063, 1.667)
p-value			0.1554

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.3015
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	12 ( 9.8%)	6 ( 4.7%)	
Patients (%) Without Events (Censored)	110 ( 90.2%)	123 ( 95.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.898 (0.701, 5.133)
p-value			0.1994
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	12 ( 15.2%)	2 ( 3.1%)	
Patients (%) Without Events (Censored)	67 ( 84.8%)	63 ( 96.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.765 (1.065, 21.306)
p-value			0.0241

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.0881
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	9 ( 7.4%)	9 ( 7.0%)	
Patients (%) Without Events (Censored)	113 ( 92.6%)	120 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.790 (0.309, 2.020)
p-value			0.6199
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	2 ( 2.5%)	8 ( 12.3%)	
Patients (%) Without Events (Censored)	77 ( 97.5%)	57 ( 87.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.179 (0.038, 0.844)
p-value			0.0144

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.0470
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	51 ( 41.8%)	52 ( 40.3%)	
Patients (%) Without Events (Censored)	71 ( 58.2%)	77 ( 59.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	9.7 (3.1, NE)	5.1 (2.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.932 (0.632, 1.374)
p-value			0.7243
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	23 ( 29.1%)	32 ( 49.2%)	
Patients (%) Without Events (Censored)	56 ( 70.9%)	33 ( 50.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (9.3, NE)	3.6 (2.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.474 (0.277, 0.813)
p-value			0.0055

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.9471
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	4 ( 3.3%)	9 ( 7.0%)	
Patients (%) Without Events (Censored)	118 ( 96.7%)	120 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.347 (0.106, 1.135)
p-value			0.0672
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	5 ( 6.3%)	9 ( 13.8%)	
Patients (%) Without Events (Censored)	74 ( 93.7%)	56 ( 86.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.398 (0.133, 1.191)
p-value			0.0877

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Paraesthesia			
Interaction p-value			0.4540
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	4 ( 3.3%)	6 ( 4.7%)	
Patients (%) Without Events (Censored)	118 ( 96.7%)	123 ( 95.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.468 (0.117, 1.873)
p-value			0.2720
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	3 ( 3.8%)	8 ( 12.3%)	
Patients (%) Without Events (Censored)	76 ( 96.2%)	57 ( 87.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.262 (0.069, 0.992)
p-value			0.0341

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.8065
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	53 ( 43.4%)	40 ( 31.0%)	
Patients (%) Without Events (Censored)	69 ( 56.6%)	89 ( 69.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.5 (2.8, NE)	10.1 (5.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.415 (0.938, 2.135)
p-value			0.0980
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	33 ( 41.8%)	19 ( 29.2%)	
Patients (%) Without Events (Censored)	46 ( 58.2%)	46 ( 70.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	10.5 (3.4, NE)	NE (8.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.532 (0.871, 2.697)
p-value			0.1347

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Epistaxis</b>			
Interaction p-value			0.4919
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	11 ( 9.0%)	2 ( 1.6%)	
Patients (%) Without Events (Censored)	111 ( 91.0%)	127 ( 98.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			5.678 (1.258, 25.623)
p-value			0.0107
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	6 ( 7.6%)	2 ( 3.1%)	
Patients (%) Without Events (Censored)	73 ( 92.4%)	63 ( 96.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	20.9 (20.9, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.263 (0.455, 11.250)
p-value			0.3049

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.0504
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	81 ( 66.4%)	50 ( 38.8%)	
Patients (%) Without Events (Censored)	41 ( 33.6%)	79 ( 61.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.6, 1.3)	8.7 (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.280 (1.601, 3.248)
p-value			<0.0001
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	39 ( 49.4%)	29 ( 44.6%)	
Patients (%) Without Events (Censored)	40 ( 50.6%)	36 ( 55.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.4 (0.7, NE)	5.5 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.256 (0.776, 2.033)
p-value			0.3574

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Alopecia			
Interaction p-value			0.0524
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	68 ( 55.7%)	28 ( 21.7%)	
Patients (%) Without Events (Censored)	54 ( 44.3%)	101 ( 78.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 9.2)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.366 (2.165, 5.232)
p-value			<0.0001
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	30 ( 38.0%)	17 ( 26.2%)	
Patients (%) Without Events (Censored)	49 ( 62.0%)	48 ( 73.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.636 (0.902, 2.969)
p-value			0.1046

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.11: Time to the First Frequent TEAE by SOC, PT and Subgroup: Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.5976
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	3 ( 2.5%)	9 ( 7.0%)	
Patients (%) Without Events (Censored)	119 ( 97.5%)	120 ( 93.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.262 (0.068, 1.012)
p-value			0.0383
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	1 ( 1.3%)	5 ( 7.7%)	
Patients (%) Without Events (Censored)	78 ( 98.7%)	60 ( 92.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.131 (0.015, 1.131)
p-value			0.0297

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.9856
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	17 ( 13.9%)	3 ( 2.3%)	
Patients (%) Without Events (Censored)	105 ( 86.1%)	126 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.603 (1.639, 19.158)
p-value			0.0020
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	7 ( 8.9%)	1 ( 1.5%)	
Patients (%) Without Events (Censored)	72 ( 91.1%)	64 ( 98.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.081 (0.748, 49.432)
p-value			0.0540

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.2669
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	56 ( 82.4%)	49 ( 68.1%)	
Patients (%) Without Events (Censored)	12 ( 17.6%)	23 ( 31.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.7)	0.8 (0.6, 2.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.509 (1.023, 2.226)
p-value			0.0424
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	58 ( 81.7%)	41 ( 55.4%)	
Patients (%) Without Events (Censored)	13 ( 18.3%)	33 ( 44.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.7, 1.0)	2.0 (0.5, 7.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.569 (1.049, 2.346)
p-value			0.0261
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	33 ( 82.5%)	16 ( 61.5%)	
Patients (%) Without Events (Censored)	7 ( 17.5%)	10 ( 38.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.5 (0.3, 0.7)	2.1 (0.5, 8.5)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.101 (1.150, 3.838)
p-value			0.0148

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.5627
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	20 ( 29.4%)	20 ( 27.8%)	
Patients (%) Without Events (Censored)	48 ( 70.6%)	52 ( 72.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.6, NE)	13.4 (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.160 (0.622, 2.160)
p-value			0.6559
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	28 ( 39.4%)	15 ( 20.3%)	
Patients (%) Without Events (Censored)	43 ( 60.6%)	59 ( 79.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.9 (4.3, NE)	NE (6.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.661 (0.882, 3.126)
p-value			0.1121
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	14 ( 35.0%)	6 ( 23.1%)	
Patients (%) Without Events (Censored)	26 ( 65.0%)	20 ( 76.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.2, NE)	NE (4.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.576 (0.605, 4.102)
p-value			0.3473

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.4077
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	50 ( 73.5%)	44 ( 61.1%)	
Patients (%) Without Events (Censored)	18 ( 26.5%)	28 ( 38.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 1.0)	1.0 (0.7, 4.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.456 (0.968, 2.191)
p-value			0.0748
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	46 ( 64.8%)	34 ( 45.9%)	
Patients (%) Without Events (Censored)	25 ( 35.2%)	40 ( 54.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.7, 2.6)	4.9 (1.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.376 (0.882, 2.145)
p-value			0.1515
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	30 ( 75.0%)	14 ( 53.8%)	
Patients (%) Without Events (Censored)	10 ( 25.0%)	12 ( 46.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 1.0)	4.2 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.964 (1.038, 3.716)
p-value			0.0349

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.9847
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	0	13 ( 18.1%)	
Patients (%) Without Events (Censored)	68 (100.0%)	59 ( 81.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (8.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0002
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	6 ( 8.5%)	5 ( 6.8%)	
Patients (%) Without Events (Censored)	65 ( 91.5%)	69 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.057 (0.318, 3.513)
p-value			0.9279
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	4 ( 10.0%)	1 ( 3.8%)	
Patients (%) Without Events (Censored)	36 ( 90.0%)	25 ( 96.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.667 (0.298, 23.871)
p-value			0.3613

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.7187
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	61 ( 89.7%)	53 ( 73.6%)	
Patients (%) Without Events (Censored)	7 ( 10.3%)	19 ( 26.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.1, 0.4)	0.8 (0.3, 1.3)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.775 (1.221, 2.582)
p-value			0.0025
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	65 ( 91.5%)	48 ( 64.9%)	
Patients (%) Without Events (Censored)	6 ( 8.5%)	26 ( 35.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.1, 0.3)	0.8 (0.5, 2.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.996 (1.365, 2.920)
p-value			0.0003
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	38 ( 95.0%)	22 ( 84.6%)	
Patients (%) Without Events (Censored)	2 ( 5.0%)	4 ( 15.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.2, 0.5)	0.7 (0.3, 1.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.713 (0.999, 2.937)
p-value			0.0495

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.4025
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	33 ( 48.5%)	17 ( 23.6%)	
Patients (%) Without Events (Censored)	35 ( 51.5%)	55 ( 76.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.0 (0.7, NE)	NE (7.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.565 (1.427, 4.610)
p-value			0.0011
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	45 ( 63.4%)	14 ( 18.9%)	
Patients (%) Without Events (Censored)	26 ( 36.6%)	60 ( 81.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.7, 3.6)	NE (5.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.236 (2.321, 7.730)
p-value			<0.0001
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	25 ( 62.5%)	11 ( 42.3%)	
Patients (%) Without Events (Censored)	15 ( 37.5%)	15 ( 57.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.4 (1.0, 8.2)	6.7 (1.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.809 (0.883, 3.708)
p-value			0.1002

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Nausea</b>			
Interaction p-value			0.7346
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	37 ( 54.4%)	24 ( 33.3%)	
Patients (%) Without Events (Censored)	31 ( 45.6%)	48 ( 66.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.3, NE)	NE (6.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.183 (1.303, 3.657)
p-value			0.0024
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	46 ( 64.8%)	22 ( 29.7%)	
Patients (%) Without Events (Censored)	25 ( 35.2%)	52 ( 70.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.3, 2.6)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.557 (1.535, 4.261)
p-value			0.0002
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	22 ( 55.0%)	9 ( 34.6%)	
Patients (%) Without Events (Censored)	18 ( 45.0%)	17 ( 65.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.0 (0.3, NE)	NE (2.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.784 (0.816, 3.899)
p-value			0.1401

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.4365
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	13 ( 19.1%)	12 ( 16.7%)	
Patients (%) Without Events (Censored)	55 ( 80.9%)	60 ( 83.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.189 (0.542, 2.606)
p-value			0.6661
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	19 ( 26.8%)	9 ( 12.2%)	
Patients (%) Without Events (Censored)	52 ( 73.2%)	65 ( 87.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.928 (0.864, 4.304)
p-value			0.1017
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	12 ( 30.0%)	4 ( 15.4%)	
Patients (%) Without Events (Censored)	28 ( 70.0%)	22 ( 84.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (7.0, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.151 (0.693, 6.677)
p-value			0.1743

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Hypokalaemia			
Interaction p-value			0.8490
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	6 ( 8.8%)	2 ( 2.8%)	
Patients (%) Without Events (Censored)	62 ( 91.2%)	70 ( 97.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.142 (0.634, 15.581)
p-value			0.1389
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	12 ( 16.9%)	5 ( 6.8%)	
Patients (%) Without Events (Censored)	59 ( 83.1%)	69 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	20.1 (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.986 (0.686, 5.745)
p-value			0.1967
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	4 ( 10.0%)	1 ( 3.8%)	
Patients (%) Without Events (Censored)	36 ( 90.0%)	25 ( 96.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.713 (0.303, 24.278)
p-value			0.3500

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.3266
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	3 ( 4.4%)	5 ( 6.9%)	
Patients (%) Without Events (Censored)	65 ( 95.6%)	67 ( 93.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (12.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.497 (0.116, 2.131)
p-value			0.3377
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	5 ( 7.0%)	6 ( 8.1%)	
Patients (%) Without Events (Censored)	66 ( 93.0%)	68 ( 91.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.595 (0.177, 2.000)
p-value			0.3985
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	1 ( 2.5%)	4 ( 15.4%)	
Patients (%) Without Events (Censored)	39 ( 97.5%)	22 ( 84.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.162 (0.018, 1.455)
p-value			0.0633

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Nervous system disorders</b>			
Interaction p-value			0.0316
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	19 ( 27.9%)	34 ( 47.2%)	
Patients (%) Without Events (Censored)	49 ( 72.1%)	38 ( 52.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (9.7, NE)	3.2 (1.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.516 (0.294, 0.908)
p-value			0.0193
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	24 ( 33.8%)	29 ( 39.2%)	
Patients (%) Without Events (Censored)	47 ( 66.2%)	45 ( 60.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.1, NE)	3.6 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.626 (0.359, 1.090)
p-value			0.0965
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	22 ( 55.0%)	11 ( 42.3%)	
Patients (%) Without Events (Censored)	18 ( 45.0%)	15 ( 57.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.8 (1.2, NE)	4.6 (1.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.405 (0.681, 2.900)
p-value			0.3568

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neuropathy peripheral			
Interaction p-value			0.2320
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	2 ( 2.9%)	8 ( 11.1%)	
Patients (%) Without Events (Censored)	66 ( 97.1%)	64 ( 88.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.241 (0.051, 1.139)
p-value			0.0516
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	3 ( 4.2%)	6 ( 8.1%)	
Patients (%) Without Events (Censored)	68 ( 95.8%)	68 ( 91.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.312 (0.077, 1.270)
p-value			0.0866
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	4 ( 10.0%)	3 ( 11.5%)	
Patients (%) Without Events (Censored)	36 ( 90.0%)	23 ( 88.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (9.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.892 (0.200, 3.987)
p-value			0.8752

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.5298
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	26 ( 38.2%)	18 ( 25.0%)	
Patients (%) Without Events (Censored)	42 ( 61.8%)	54 ( 75.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.9 (3.3, NE)	NE (7.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.812 (0.993, 3.309)
p-value			0.0502
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	27 ( 38.0%)	22 ( 29.7%)	
Patients (%) Without Events (Censored)	44 ( 62.0%)	52 ( 70.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	20.9 (2.8, NE)	8.0 (5.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.064 (0.601, 1.881)
p-value			0.8332
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	22 ( 55.0%)	12 ( 46.2%)	
Patients (%) Without Events (Censored)	18 ( 45.0%)	14 ( 53.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	4.6 (0.7, 10.5)	10.1 (3.5, 11.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.299 (0.641, 2.633)
p-value			0.4683

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Epistaxis</b>			
Interaction p-value			0.9925
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	4 ( 5.9%)	2 ( 2.8%)	
Patients (%) Without Events (Censored)	64 ( 94.1%)	70 ( 97.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.140 (0.392, 11.686)
p-value			0.3680
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	8 ( 11.3%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	63 ( 88.7%)	72 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.156 (0.653, 15.241)
p-value			0.1312
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	4 ( 10.0%)	0	
Patients (%) Without Events (Censored)	36 ( 90.0%)	26 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0939

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.2867
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	39 ( 57.4%)	28 ( 38.9%)	
Patients (%) Without Events (Censored)	29 ( 42.6%)	44 ( 61.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, 10.6)	8.2 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.008 (1.234, 3.268)
p-value			0.0042
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	44 ( 62.0%)	25 ( 33.8%)	
Patients (%) Without Events (Censored)	27 ( 38.0%)	49 ( 66.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.5 (0.7, 2.8)	NE (5.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.076 (1.267, 3.400)
p-value			0.0032
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	24 ( 60.0%)	15 ( 57.7%)	
Patients (%) Without Events (Censored)	16 ( 40.0%)	11 ( 42.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 14.3)	3.5 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.330 (0.696, 2.541)
p-value			0.3824

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Alopecia</b>			
Interaction p-value			0.7611
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	30 ( 44.1%)	16 ( 22.2%)	
Patients (%) Without Events (Censored)	38 ( 55.9%)	56 ( 77.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	9.2 (1.0, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.397 (1.305, 4.402)
p-value			0.0036
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	37 ( 52.1%)	17 ( 23.0%)	
Patients (%) Without Events (Censored)	34 ( 47.9%)	57 ( 77.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	2.1 (0.7, NE)	NE (5.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.730 (1.534, 4.860)
p-value			0.0004
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	20 ( 50.0%)	8 ( 30.8%)	
Patients (%) Without Events (Censored)	20 ( 50.0%)	18 ( 69.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.7, NE)	NE (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.134 (0.937, 4.858)
p-value			0.0633

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Pruritus			
Interaction p-value			0.9862
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	9 ( 13.2%)	0	
Patients (%) Without Events (Censored)	59 ( 86.8%)	72 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0016
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	8 ( 11.3%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	63 ( 88.7%)	72 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.010 (0.851, 18.893)
p-value			0.0570
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.12: Time to the First Frequent TEAE by SOC, PT and Subgroup: Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	4 ( 10.0%)	2 ( 7.7%)	
Patients (%) Without Events (Censored)	36 ( 90.0%)	24 ( 92.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (10.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.338 (0.245, 7.318)
p-value			0.7364

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.0018
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	17 ( 81.0%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	4 ( 19.0%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 0.7)	NE (4.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.068 (2.435, 15.118)
p-value			<0.0001
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	104 ( 82.5%)	74 ( 61.7%)	
Patients (%) Without Events (Censored)	22 ( 17.5%)	46 ( 38.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.5, 0.7)	1.6 (0.7, 3.7)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.609 (1.191, 2.175)
p-value			0.0014
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	44 ( 81.5%)	37 ( 72.5%)	
Patients (%) Without Events (Censored)	10 ( 18.5%)	14 ( 27.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.3, 1.0)	0.7 (0.5, 0.8)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.050 (0.675, 1.633)
p-value			0.8627

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Interaction p-value			0.0029
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	11 ( 52.4%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	10 ( 47.6%)	20 ( 87.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	5.2 (1.2, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			5.136 (1.425, 18.510)
p-value			0.0055
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	45 ( 35.7%)	26 ( 21.7%)	
Patients (%) Without Events (Censored)	81 ( 64.3%)	94 ( 78.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	9.4 (6.3, NE)	NE (13.4, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.749 (1.078, 2.837)
p-value			0.0221
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	14 ( 25.9%)	16 ( 31.4%)	
Patients (%) Without Events (Censored)	40 ( 74.1%)	35 ( 68.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	3.7 (2.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.633 (0.305, 1.315)
p-value			0.2167

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.0012
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	16 ( 76.2%)	5 ( 21.7%)	
Patients (%) Without Events (Censored)	5 ( 23.8%)	18 ( 78.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.4, 1.0)	NE (4.2, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			6.844 (2.460, 19.045)
p-value			<0.0001
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	87 ( 69.0%)	63 ( 52.5%)	
Patients (%) Without Events (Censored)	39 ( 31.0%)	57 ( 47.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.7 (0.7, 1.1)	4.1 (1.6, 7.7)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.484 (1.071, 2.056)
p-value			0.0144
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10.

Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant.

The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC).

Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	39 ( 72.2%)	33 ( 64.7%)	
Patients (%) Without Events (Censored)	15 ( 27.8%)	18 ( 35.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.6, 1.6)	0.7 (0.5, 1.9)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.989 (0.618, 1.581)
p-value			0.9608

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Thrombocytopenia			
Interaction p-value			0.9870
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	0	3 ( 13.0%)	
Patients (%) Without Events (Censored)	21 (100.0%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0942
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	10 ( 7.9%)	15 ( 12.5%)	
Patients (%) Without Events (Censored)	116 ( 92.1%)	105 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.608 (0.273, 1.354)
p-value			0.2182
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	2 ( 3.7%)	3 ( 5.9%)	
Patients (%) Without Events (Censored)	52 ( 96.3%)	48 ( 94.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.492 (0.080, 3.013)
p-value			0.4338

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.2120
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	21 (100.0%)	22 ( 95.7%)	
Patients (%) Without Events (Censored)	0	1 ( 4.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.1 (0.0, 0.1)	0.3 (0.1, 0.7)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.835 (1.460, 5.506)
p-value			0.0020
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	114 ( 90.5%)	82 ( 68.3%)	
Patients (%) Without Events (Censored)	12 ( 9.5%)	38 ( 31.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.3 (0.2, 0.3)	1.0 (0.8, 1.4)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.036 (1.522, 2.722)
p-value			<0.0001
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	51 ( 94.4%)	34 ( 66.7%)	
Patients (%) Without Events (Censored)	3 ( 5.6%)	17 ( 33.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.3 (0.3, 0.6)	0.5 (0.3, 1.4)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.703 (1.097, 2.643)
p-value			0.0154

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.7939
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	13 ( 61.9%)	11 ( 47.8%)	
Patients (%) Without Events (Censored)	8 ( 38.1%)	12 ( 52.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.5 (0.3, NE)	6.7 (2.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.746 (0.777, 3.923)
p-value			0.1718
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	75 ( 59.5%)	24 ( 20.0%)	
Patients (%) Without Events (Censored)	51 ( 40.5%)	96 ( 80.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (1.0, 3.6)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.240 (2.673, 6.728)
p-value			<0.0001
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	32 ( 59.3%)	14 ( 27.5%)	
Patients (%) Without Events (Censored)	22 ( 40.7%)	37 ( 72.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.6 (1.2, 8.2)	4.9 (2.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.998 (1.053, 3.791)
p-value			0.0311

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Nausea</b>			
Interaction p-value			0.7473
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	14 ( 66.7%)	13 ( 56.5%)	
Patients (%) Without Events (Censored)	7 ( 33.3%)	10 ( 43.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	0.1 (0.0, NE)	3.8 (0.4, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.939 (0.893, 4.210)
p-value			0.1012
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	72 ( 57.1%)	36 ( 30.0%)	
Patients (%) Without Events (Censored)	54 ( 42.9%)	84 ( 70.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.4 (0.7, 6.0)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.307 (1.544, 3.448)
p-value			<0.0001
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	34 ( 63.0%)	15 ( 29.4%)	
Patients (%) Without Events (Censored)	20 ( 37.0%)	36 ( 70.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.8, 3.7)	NE (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.306 (1.251, 4.252)
p-value			0.0056

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Vomiting			
Interaction p-value			0.6268
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	6 ( 28.6%)	4 ( 17.4%)	
Patients (%) Without Events (Censored)	15 ( 71.4%)	19 ( 82.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.953 (0.548, 6.960)
p-value			0.2939
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	30 ( 23.8%)	15 ( 12.5%)	
Patients (%) Without Events (Censored)	96 ( 76.2%)	105 ( 87.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (14.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.918 (1.032, 3.566)
p-value			0.0355
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	14 ( 25.9%)	8 ( 15.7%)	
Patients (%) Without Events (Censored)	40 ( 74.1%)	43 ( 84.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	23.0 (16.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.121 (0.451, 2.785)
p-value			0.8033

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Hyperglycaemia</b>			
Interaction p-value			0.9904
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	0	2 ( 8.7%)	
Patients (%) Without Events (Censored)	21 (100.0%)	21 ( 91.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1718
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	4 ( 3.2%)	11 ( 9.2%)	
Patients (%) Without Events (Censored)	122 ( 96.8%)	109 ( 90.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.328 (0.104, 1.031)
p-value			0.0448
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	2 ( 3.7%)	0	
Patients (%) Without Events (Censored)	52 ( 96.3%)	51 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.5351

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Hypokalaemia</b>			
Interaction p-value			0.3258
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	6 ( 28.6%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	15 ( 71.4%)	22 ( 95.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (2.3, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			6.980 (0.840, 58.021)
p-value			0.0363
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	16 ( 12.7%)	6 ( 5.0%)	
Patients (%) Without Events (Censored)	110 ( 87.3%)	114 ( 95.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.633 (1.030, 6.730)
p-value			0.0356
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	2 ( 3.7%)	1 ( 2.0%)	
Patients (%) Without Events (Censored)	52 ( 96.3%)	50 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	20.1 (20.1, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.926 (0.058, 14.797)
p-value			0.9564

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Myalgia			
Interaction p-value			0.9894
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	0	1 ( 4.3%)	
Patients (%) Without Events (Censored)	21 (100.0%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3042
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	3 ( 2.4%)	11 ( 9.2%)	
Patients (%) Without Events (Censored)	123 ( 97.6%)	109 ( 90.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.213 (0.059, 0.769)
p-value			0.0094
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	8 ( 14.8%)	5 ( 9.8%)	
Patients (%) Without Events (Censored)	46 ( 85.2%)	46 ( 90.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (12.8, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.937 (0.289, 3.040)
p-value			0.9162

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Nervous system disorders</b>			
Interaction p-value			0.7888
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	7 ( 33.3%)	9 ( 39.1%)	
Patients (%) Without Events (Censored)	14 ( 66.7%)	14 ( 60.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (2.1, NE)	NE (0.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.809 (0.300, 2.179)
p-value			0.6708
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	45 ( 35.7%)	58 ( 48.3%)	
Patients (%) Without Events (Censored)	81 ( 64.3%)	62 ( 51.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	9.9 (6.1, NE)	3.6 (2.6, 5.1)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.602 (0.407, 0.892)
p-value			0.0107
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	22 ( 40.7%)	17 ( 33.3%)	
Patients (%) Without Events (Censored)	32 ( 59.3%)	34 ( 66.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.1, NE)	NE (2.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.125 (0.595, 2.130)
p-value			0.7232

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neuropathy peripheral</b>			
Interaction p-value			0.9901
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	0	1 ( 4.3%)	
Patients (%) Without Events (Censored)	21 (100.0%)	22 ( 95.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3286
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	8 ( 6.3%)	15 ( 12.5%)	
Patients (%) Without Events (Censored)	118 ( 93.7%)	105 ( 87.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.462 (0.196, 1.093)
p-value			0.0714
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	1 ( 1.9%)	2 ( 3.9%)	
Patients (%) Without Events (Censored)	53 ( 98.1%)	49 ( 96.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.226 (0.016, 3.127)
p-value			0.2421

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Paraesthesia</b>			
Interaction p-value			0.9896
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	0	2 ( 8.7%)	
Patients (%) Without Events (Censored)	21 (100.0%)	21 ( 91.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1763
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	4 ( 3.2%)	10 ( 8.3%)	
Patients (%) Without Events (Censored)	122 ( 96.8%)	110 ( 91.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (18.8, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.265 (0.073, 0.962)
p-value			0.0302
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	3 ( 5.6%)	2 ( 3.9%)	
Patients (%) Without Events (Censored)	51 ( 94.4%)	49 ( 96.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.836 (0.134, 5.219)
p-value			0.8479

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.5778
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	8 ( 38.1%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	13 ( 61.9%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (2.1, NE)	8.3 (4.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.839 (0.658, 5.135)
p-value			0.2398
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	55 ( 43.7%)	44 ( 36.7%)	
Patients (%) Without Events (Censored)	71 ( 56.3%)	76 ( 63.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.3 (3.8, NE)	11.0 (4.2, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.210 (0.813, 1.799)
p-value			0.3454
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	23 ( 42.6%)	8 ( 15.7%)	
Patients (%) Without Events (Censored)	31 ( 57.4%)	43 ( 84.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	7.2 (2.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.693 (1.199, 6.048)
p-value			0.0127

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Epistaxis</b>			
Interaction p-value			0.9781
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	18 ( 85.7%)	22 ( 95.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (8.3, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.494 (0.363, 33.662)
p-value			0.2486
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	9 ( 7.1%)	2 ( 1.7%)	
Patients (%) Without Events (Censored)	117 ( 92.9%)	118 ( 98.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (20.9, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.963 (0.848, 18.513)
p-value			0.0590
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	5 ( 9.3%)	1 ( 2.0%)	
Patients (%) Without Events (Censored)	49 ( 90.7%)	50 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.202 (0.486, 36.301)
p-value			0.1565

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Skin and subcutaneous tissue disorders			
Interaction p-value			0.0004
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	12 ( 57.1%)	17 ( 73.9%)	
Patients (%) Without Events (Censored)	9 ( 42.9%)	6 ( 26.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.5, NE)	1.7 (0.7, 3.0)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.767 (0.365, 1.610)
p-value			0.4735
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	71 ( 56.3%)	52 ( 43.3%)	
Patients (%) Without Events (Censored)	55 ( 43.7%)	68 ( 56.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.5 (0.7, 6.3)	5.7 (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.602 (1.119, 2.293)
p-value			0.0093
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	37 ( 68.5%)	10 ( 19.6%)	
Patients (%) Without Events (Censored)	17 ( 31.5%)	41 ( 80.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.7 (0.6, 2.0)	NE (3.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.688 (2.325, 9.454)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Alopecia</b>			
Interaction p-value			0.7420
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	11 ( 52.4%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	10 ( 47.6%)	21 ( 91.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	2.1 (0.5, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			8.236 (1.818, 37.319)
p-value			0.0012
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	59 ( 46.8%)	40 ( 33.3%)	
Patients (%) Without Events (Censored)	67 ( 53.2%)	80 ( 66.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	9.2 (0.9, NE)	NE (5.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.649 (1.103, 2.464)
p-value			0.0140
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	28 ( 51.9%)	3 ( 5.9%)	
Patients (%) Without Events (Censored)	26 ( 48.1%)	48 ( 94.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			11.415 (3.464, 37.614)
p-value			<0.0001

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Palmar-plantar erythrodysesthesia syndrome			
Interaction p-value			0.9906
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	0	13 ( 56.5%)	
Patients (%) Without Events (Censored)	21 (100.0%)	10 ( 43.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	2.8 (0.9, 3.1)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			<0.0001
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	1 ( 0.8%)	1 ( 0.8%)	
Patients (%) Without Events (Censored)	125 ( 99.2%)	119 ( 99.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.718 (0.045, 11.480)
p-value			0.8139
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	3 ( 5.6%)	0	
Patients (%) Without Events (Censored)	51 ( 94.4%)	51 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (16.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1843

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Pruritus</b>			
Interaction p-value			0.9888
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	0	1 ( 4.3%)	
Patients (%) Without Events (Censored)	21 (100.0%)	22 ( 95.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (10.1, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.6171
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	14 ( 11.1%)	3 ( 2.5%)	
Patients (%) Without Events (Censored)	112 ( 88.9%)	117 ( 97.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			4.586 (1.318, 15.965)
p-value			0.0085
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.2.13: Time to the First Frequent TEAE by SOC, PT and Subgroup: Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

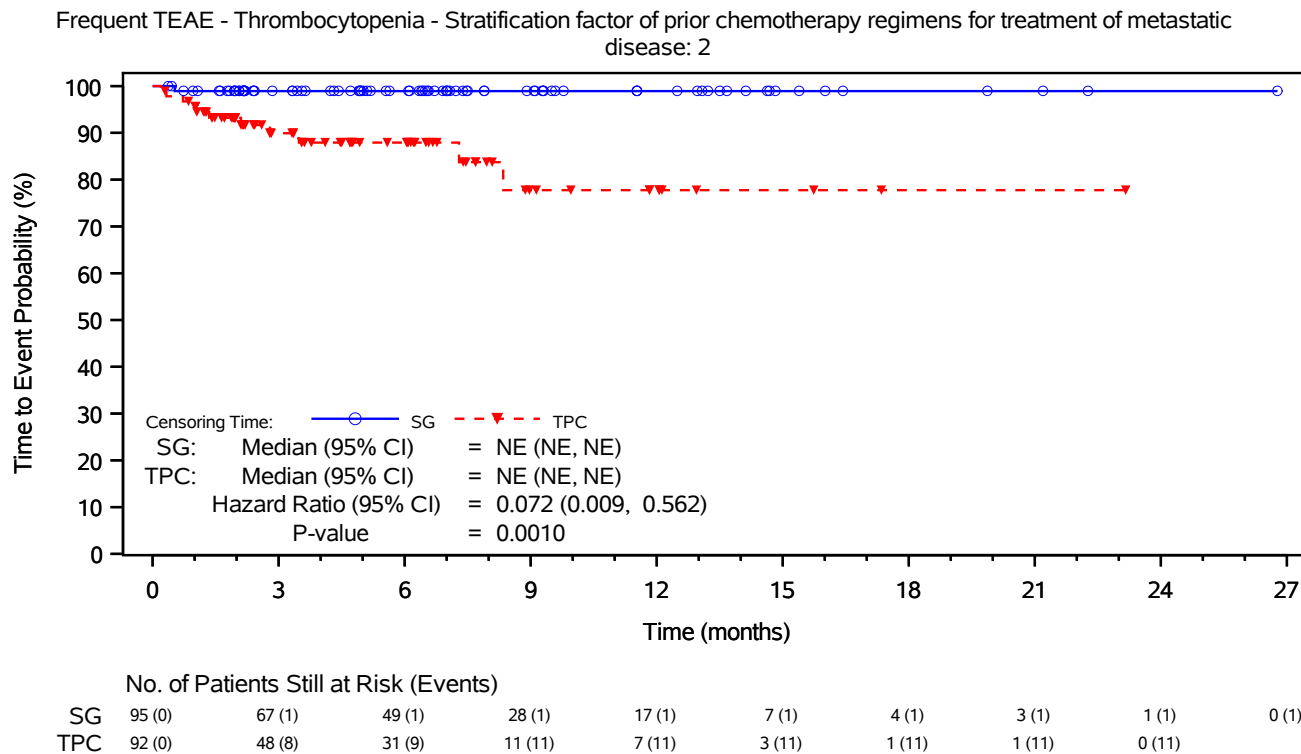
	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	10 ( 18.5%)	0	
Patients (%) Without Events (Censored)	44 ( 81.5%)	51 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0035

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients in at least one treatment arm is no less than 10. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Figure 15.11.7.2.1: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

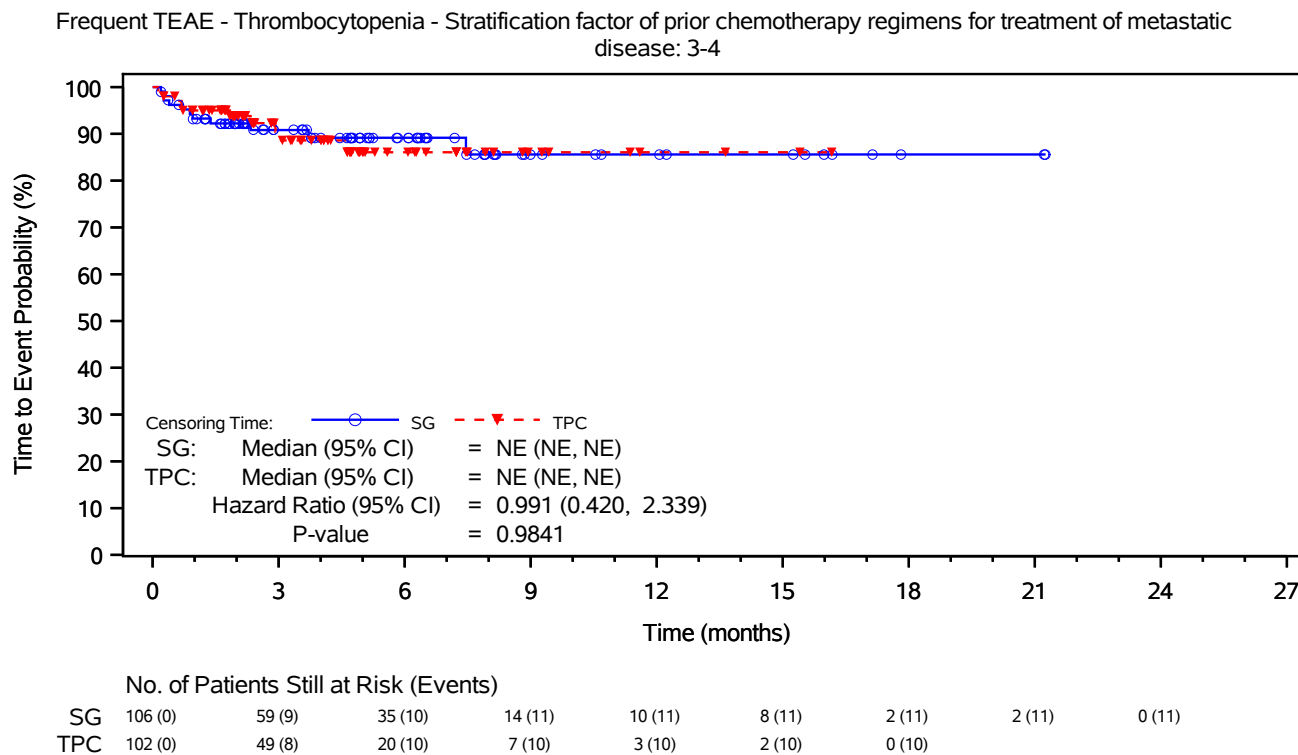
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.7.2.1: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

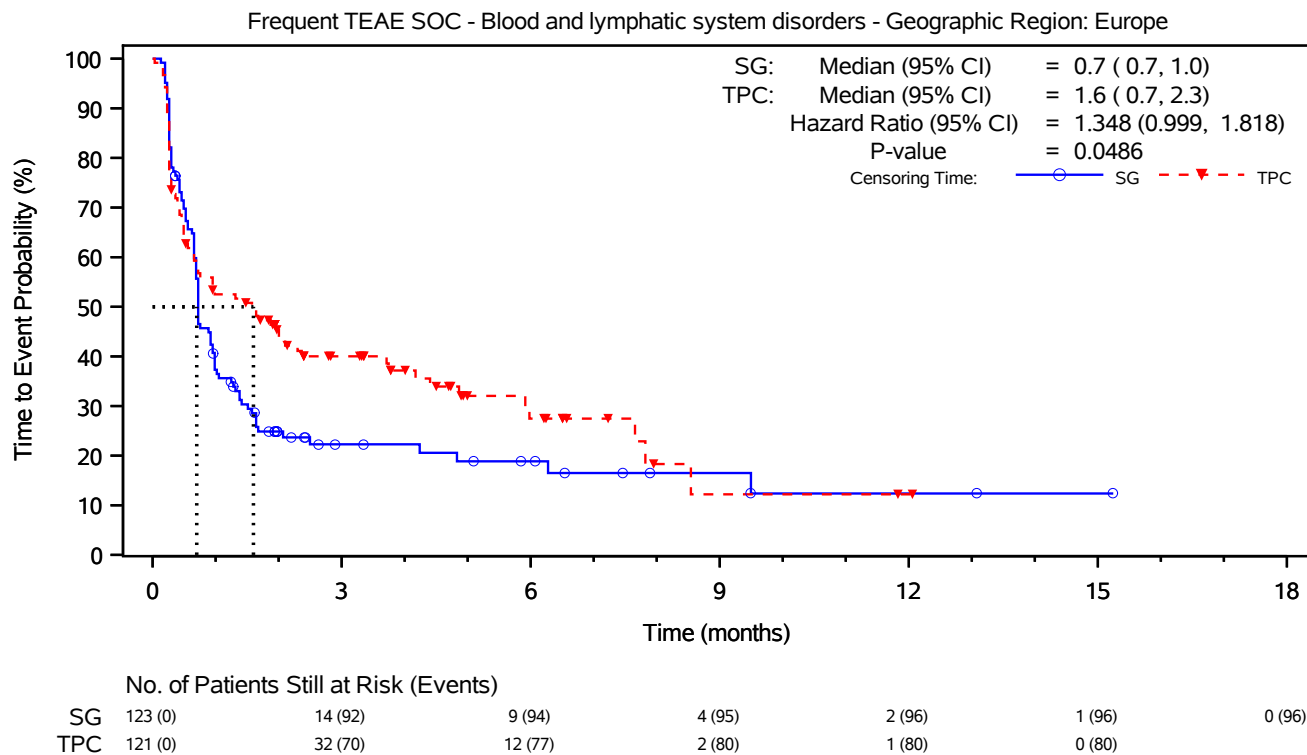
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Figure 15.11.7.2.2: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

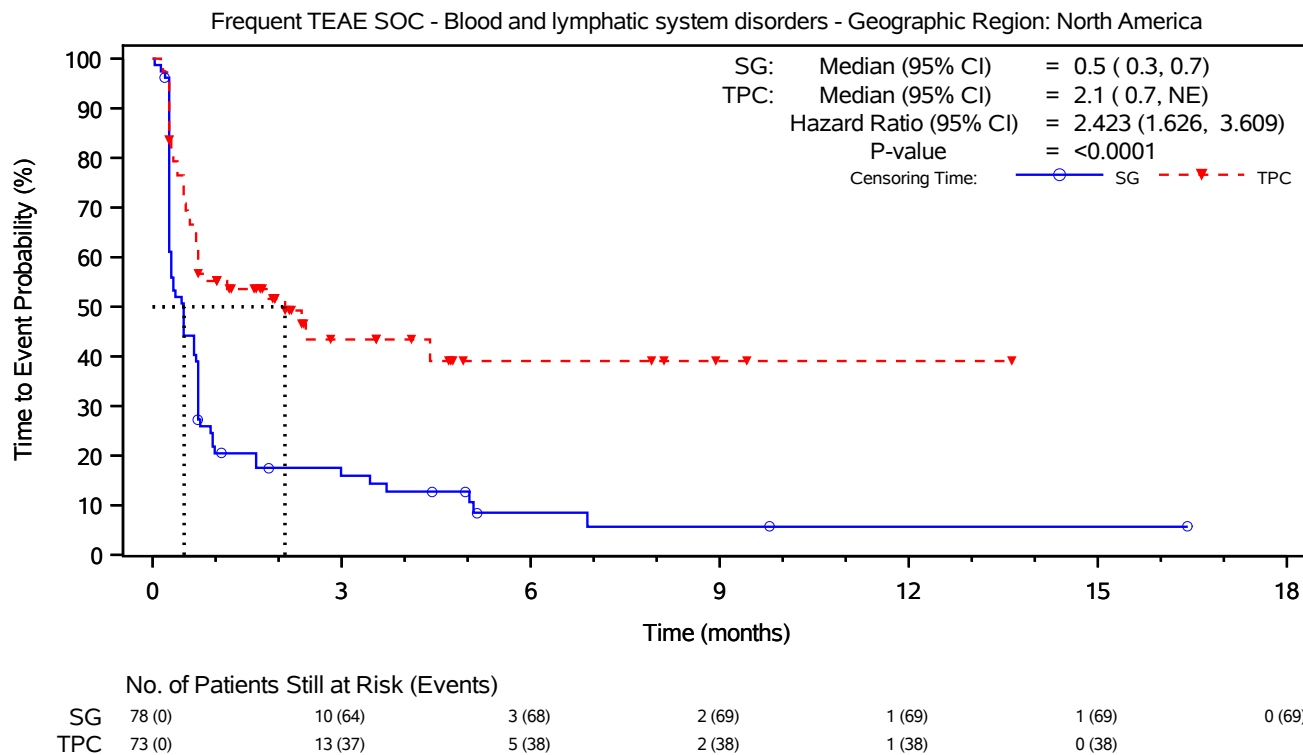
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Study IMMU-132-09

Figure 15.11.7.2.2: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

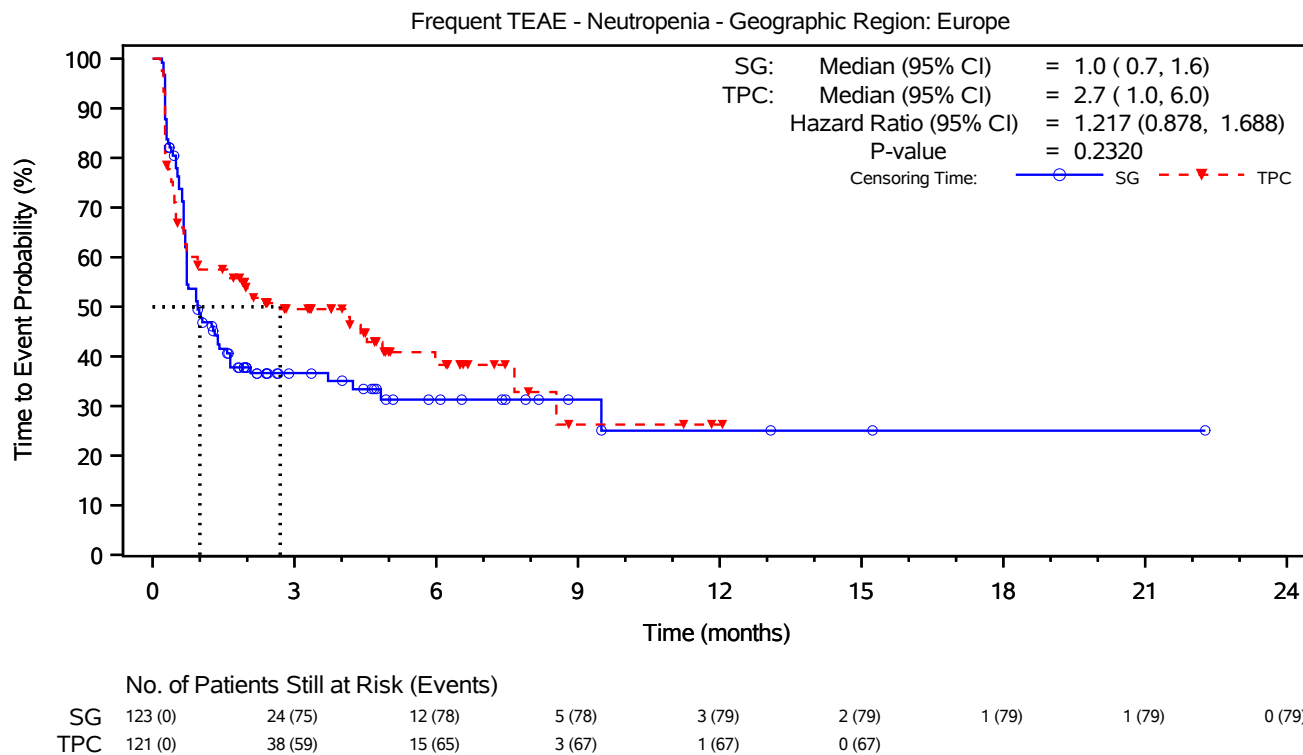
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Figure 15.11.7.2.2: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

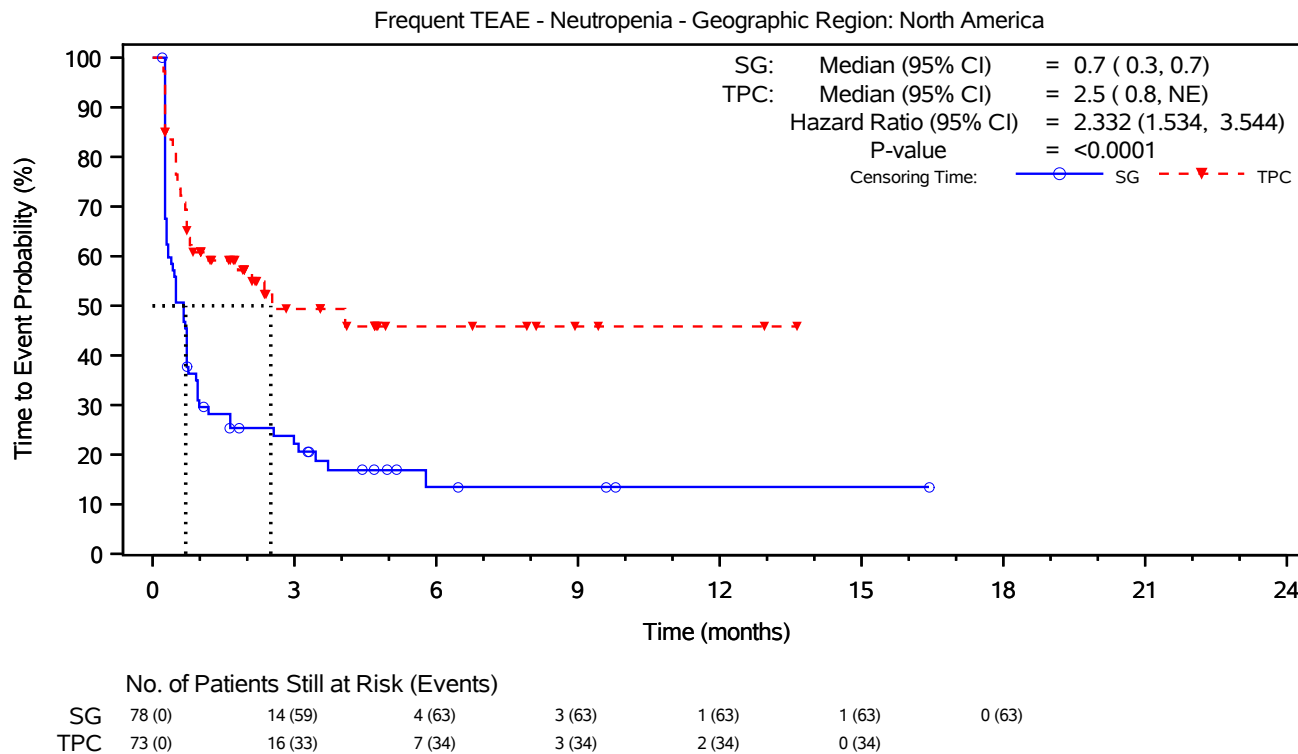
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Figure 15.11.7.2.2: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

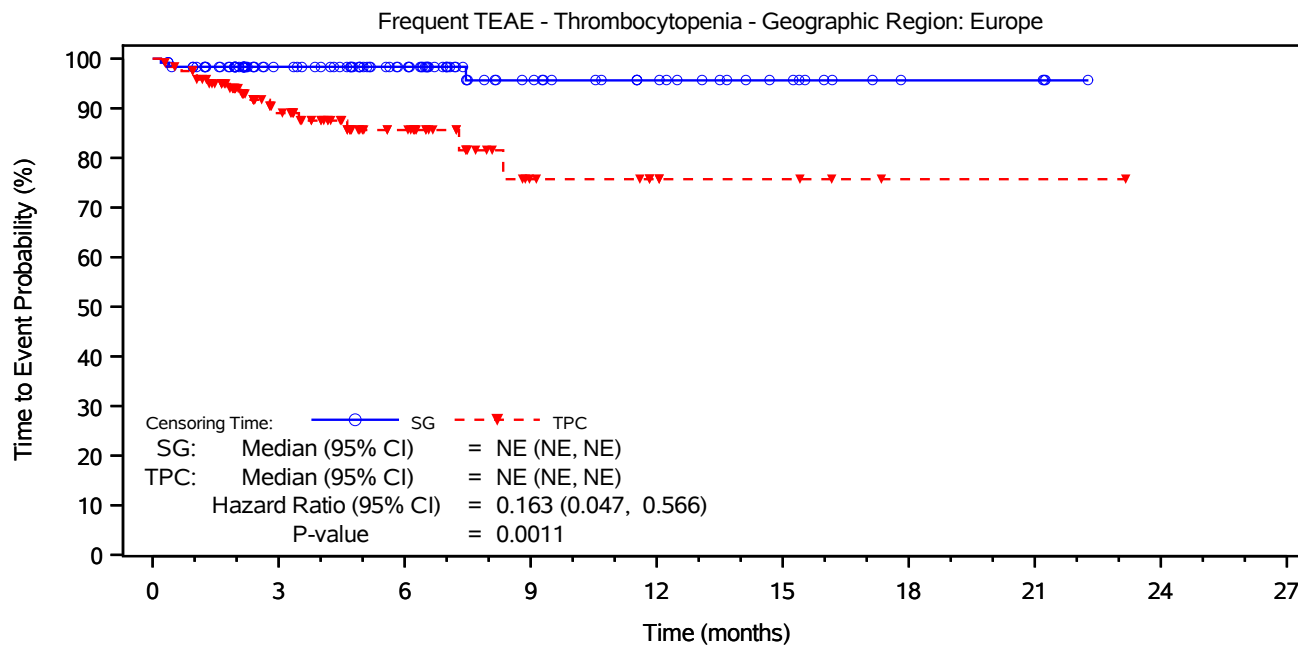
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Figure 15.11.7.2.2: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)								
SG	123 (0)	80 (2)	56 (2)	28 (3)	19 (3)	11 (3)	4 (3)	4 (3)	0 (3)
TPC	121 (0)	65 (11)	33 (13)	10 (15)	6 (15)	4 (15)	1 (15)	1 (15)	0 (15)

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

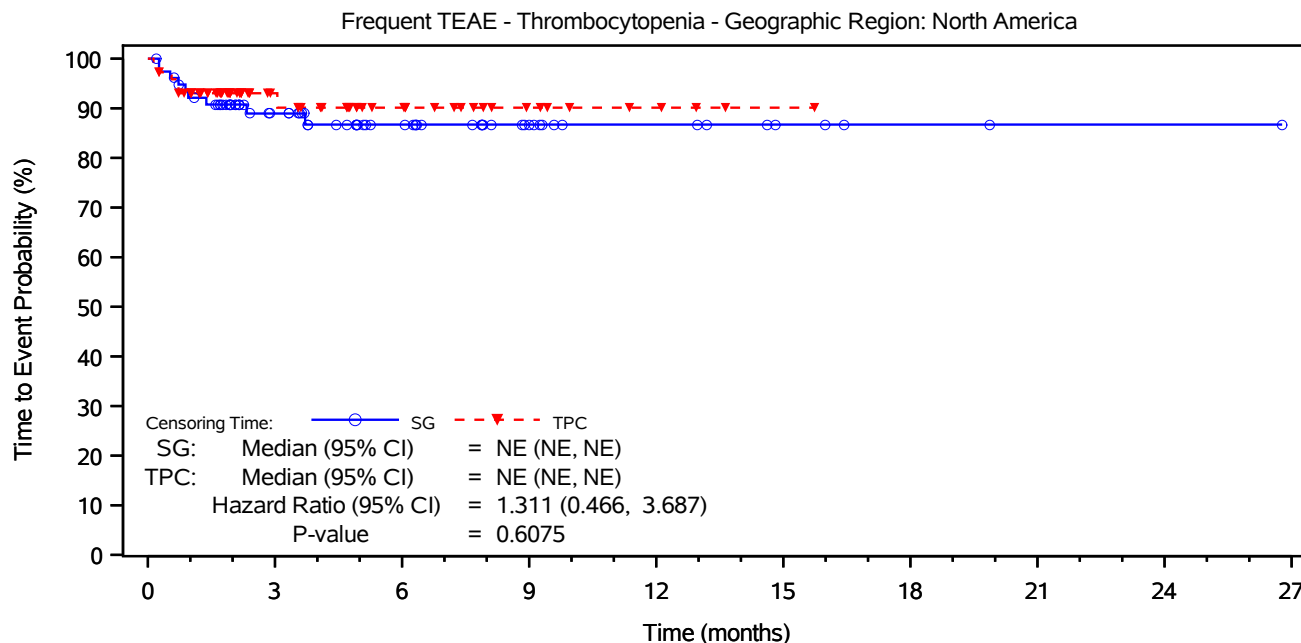
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Gilead Sciences, Inc.  
Study IMMU-132-09

Figure 15.11.7.2.2: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)									
	0	3	6	9	12	15	18	21	24	27
SG	78 (0)	46 (8)	28 (9)	14 (9)	8 (9)	4 (9)	2 (9)	1 (9)	1 (9)	0 (9)
TPC	73 (0)	32 (5)	18 (6)	8 (6)	4 (6)	1 (6)	0 (6)			

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

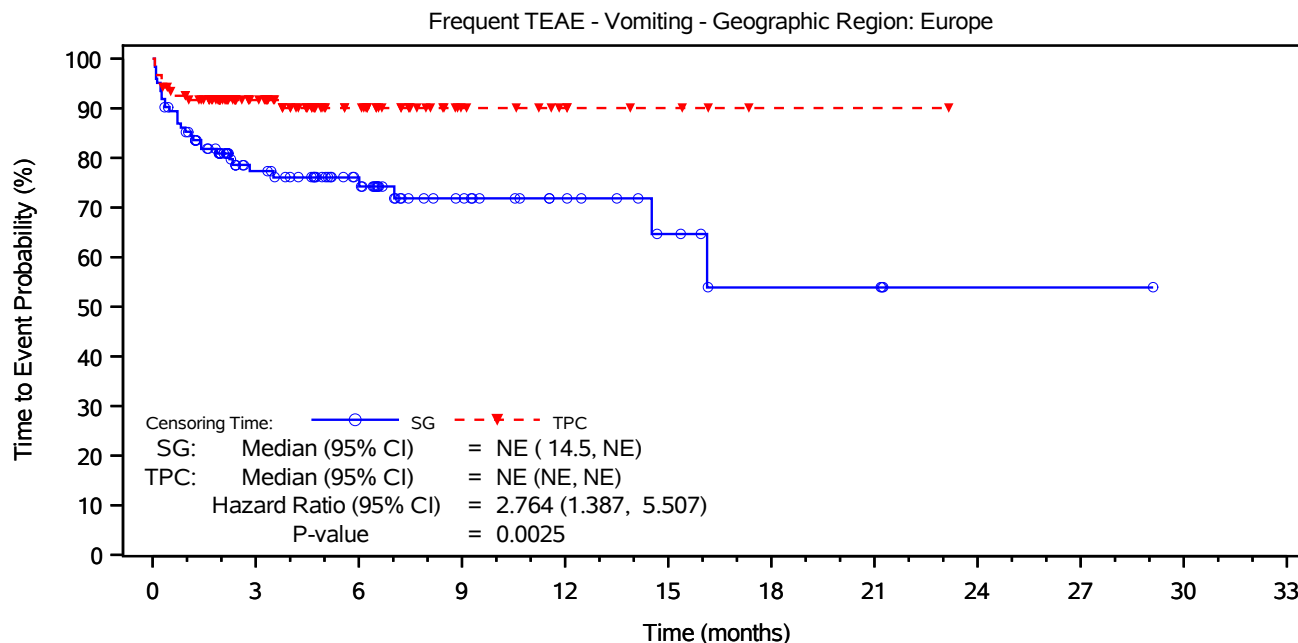
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.2.2: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	123 (0)	62 (26)	42 (27)	22 (29)	14 (29)	8 (30)	4 (31)	4 (31)	1 (31)	1 (31)	0 (31)
TPC	121 (0)	66 (10)	34 (11)	12 (11)	7 (11)	4 (11)	1 (11)	1 (11)	0 (11)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

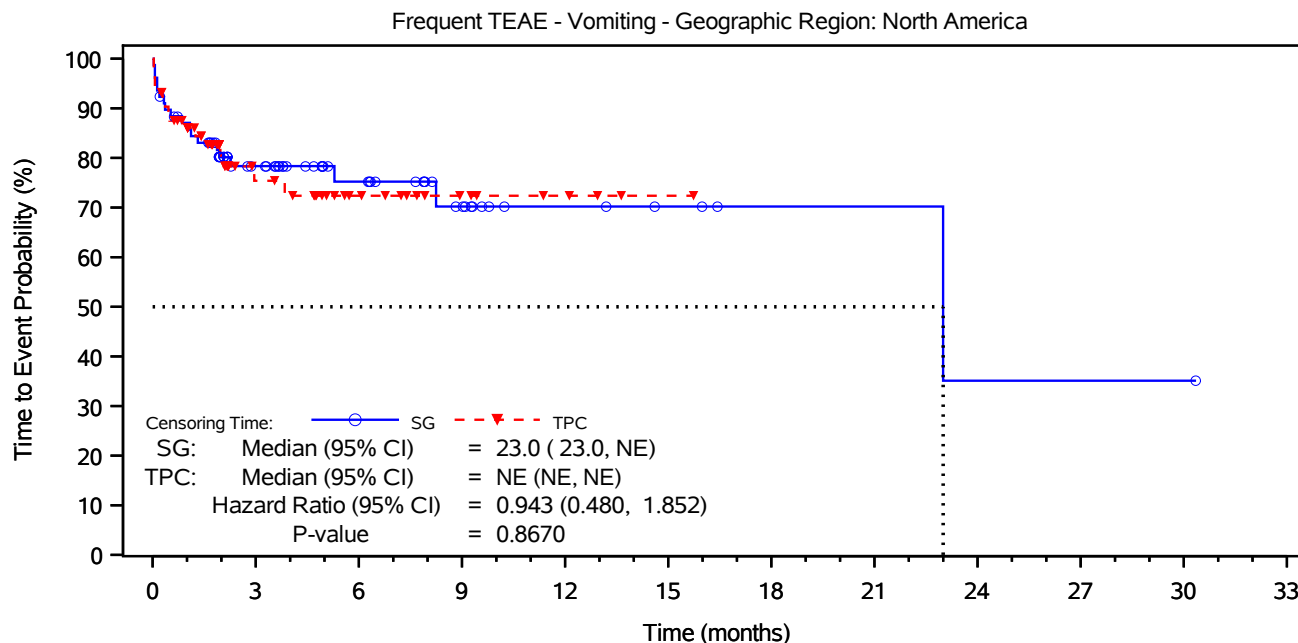
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-ttae-frq-subgrp.sas v9.4 Output file:  
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Figure 15.11.7.2.2: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	78 (0)	41 (16)	24 (17)	13 (18)	6 (18)	4 (18)	2 (18)	2 (18)	1 (19)	1 (19)	1 (19)	0 (19)
TPC	73 (0)	26 (15)	14 (16)	7 (16)	4 (16)	1 (16)	0 (16)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

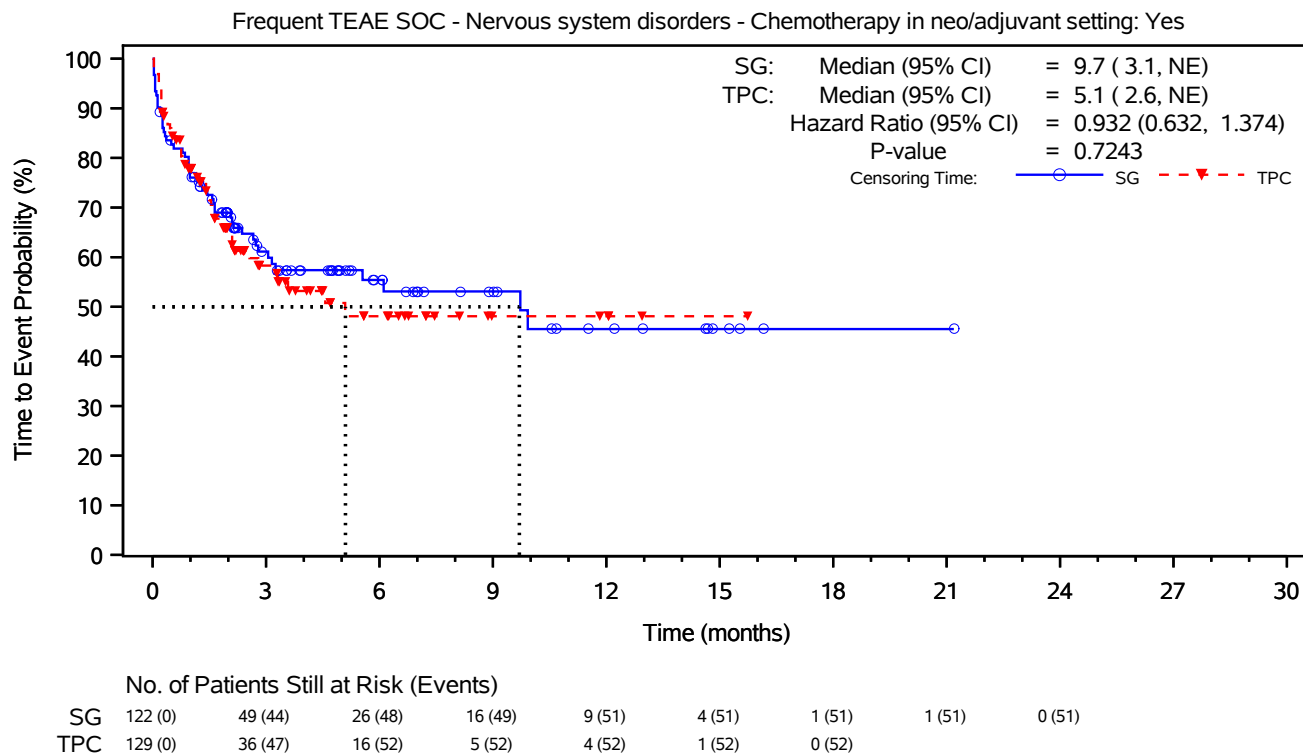
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq-subgrp.sas v9.4 Output file:  
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Figure 15.11.7.2.3: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

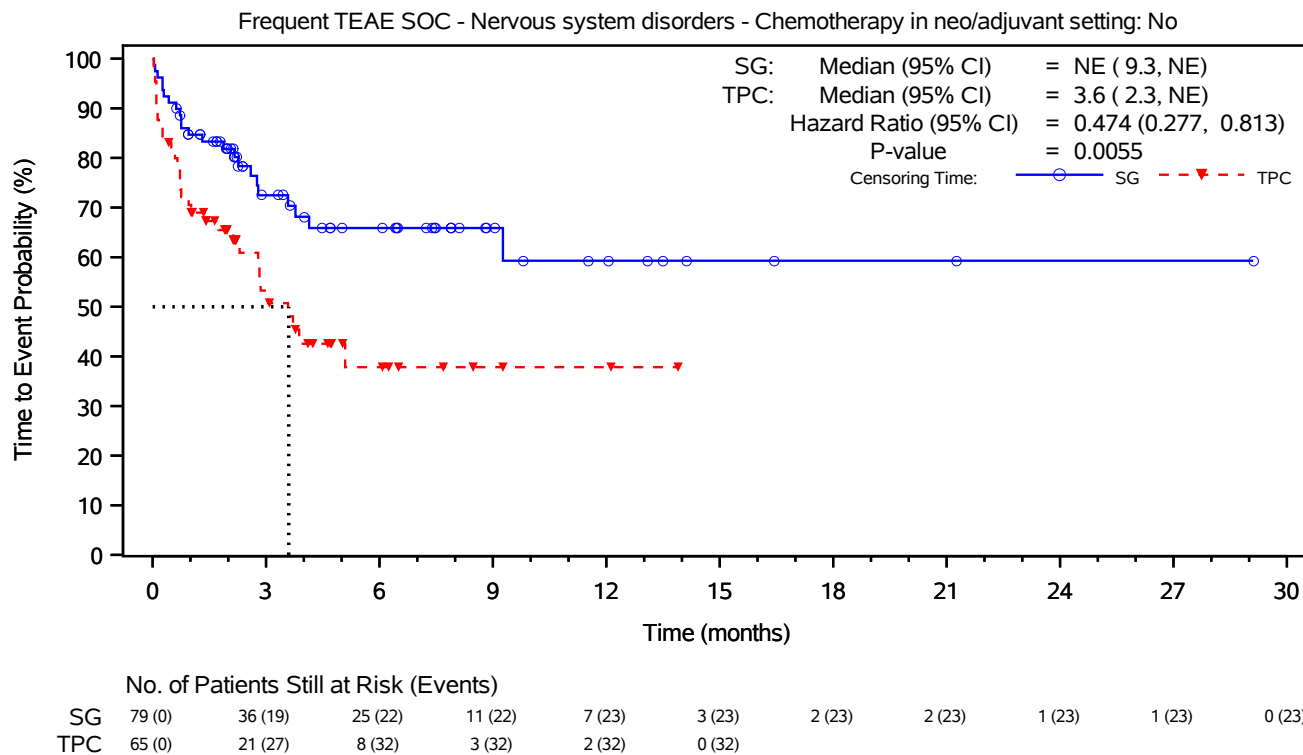
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-ttae-frq-subgrp.sas v9.4 Output file:  
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Figure 15.11.7.2.3: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

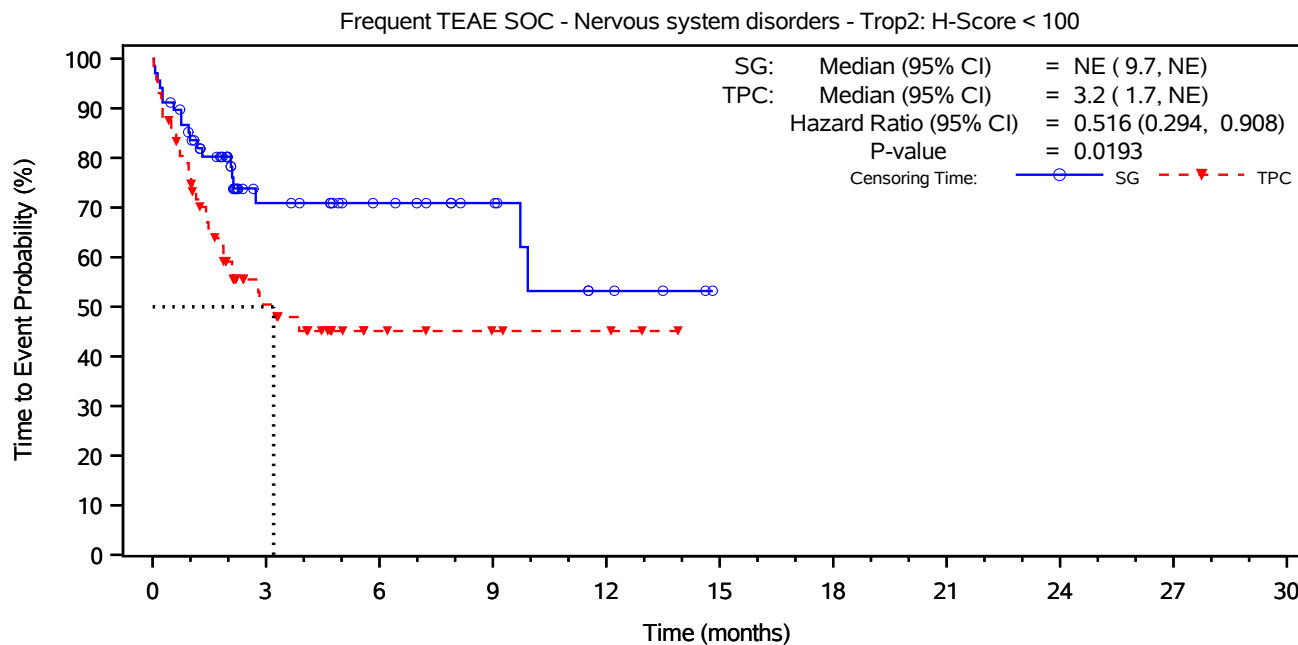
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-ttae-frq-subgrp.sas v9.4 Output file:  
g-ttae-frq-subgrp-exg3.pdf 12MAY2023:11:20

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Figure 15.11.7.2.4: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)					
	0	3	6	9	12	15
SG	68 (0)	24 (17)	16 (17)	10 (17)	4 (19)	0 (19)
TPC	72 (0)	20 (32)	7 (34)	4 (34)	3 (34)	0 (34)

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

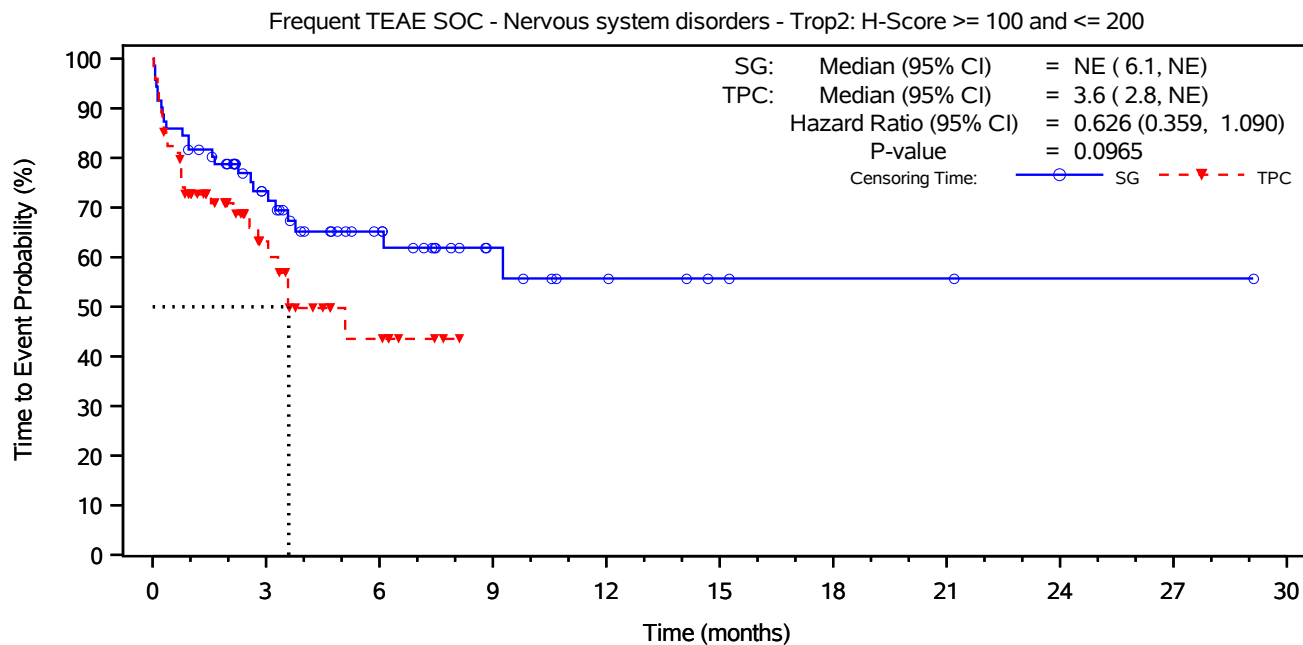
Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.2.4: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	71 (0)	38 (18)	22 (22)	10 (23)	6 (24)	3 (24)	2 (24)	2 (24)	1 (24)	1 (24)	0 (24)
TPC	74 (0)	20 (24)	7 (29)	0 (29)							

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

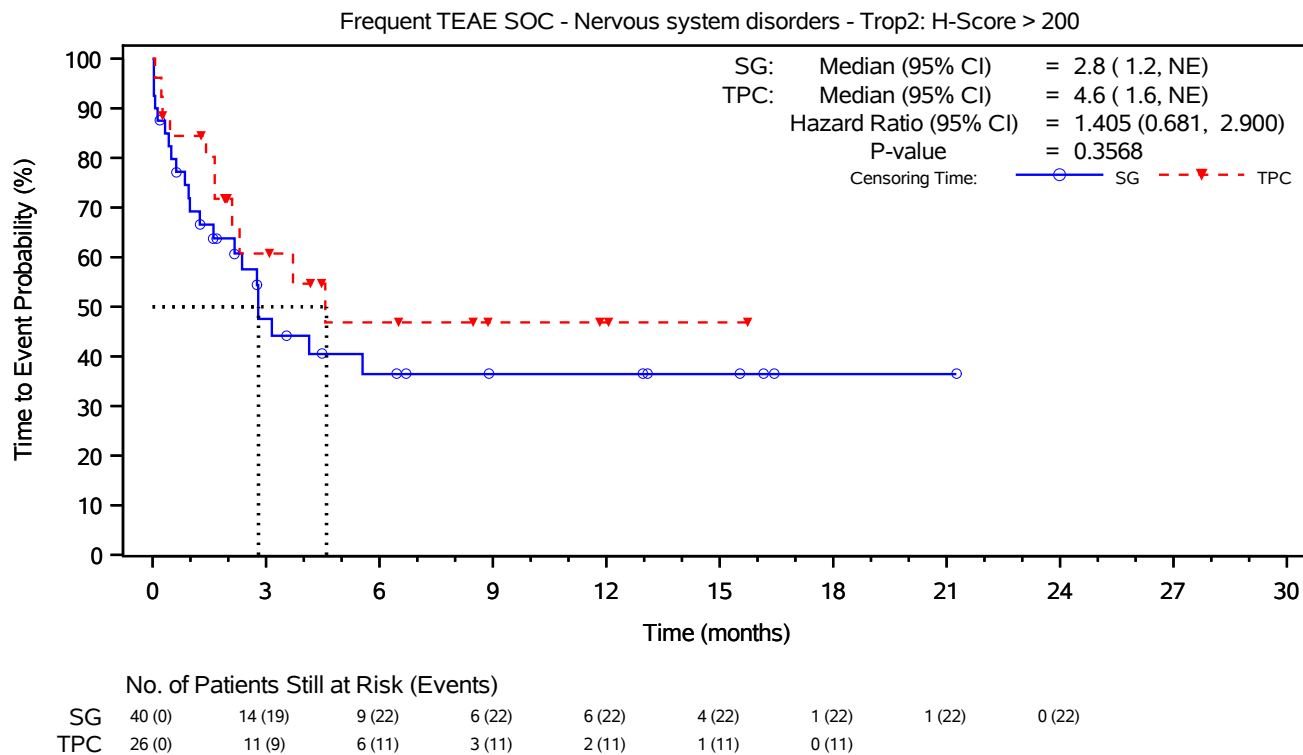
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq-subgrp.sas v9.4 Output file:  
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Figure 15.11.7.2.4: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

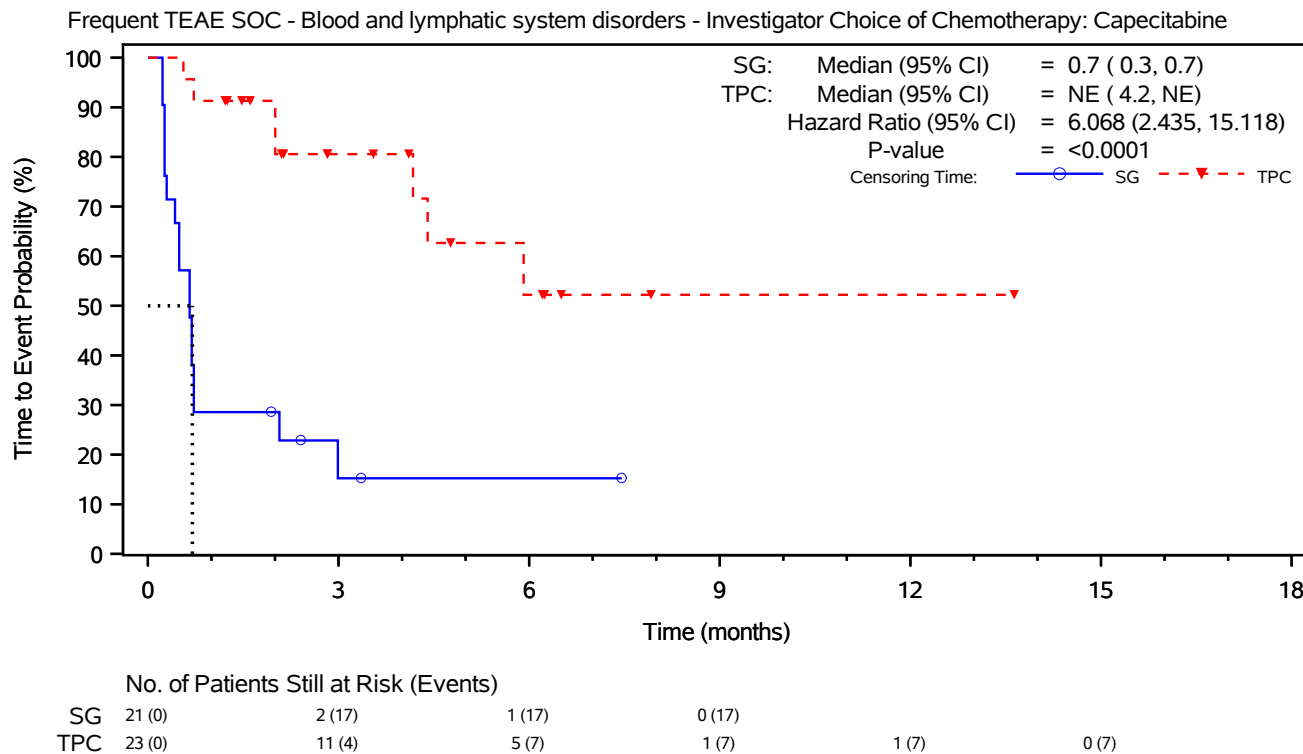
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq-subgrp.sas v9.4 Output file:  
g-tae-frq-subgrp-exg4.pdf 12MAY2023:11:20

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

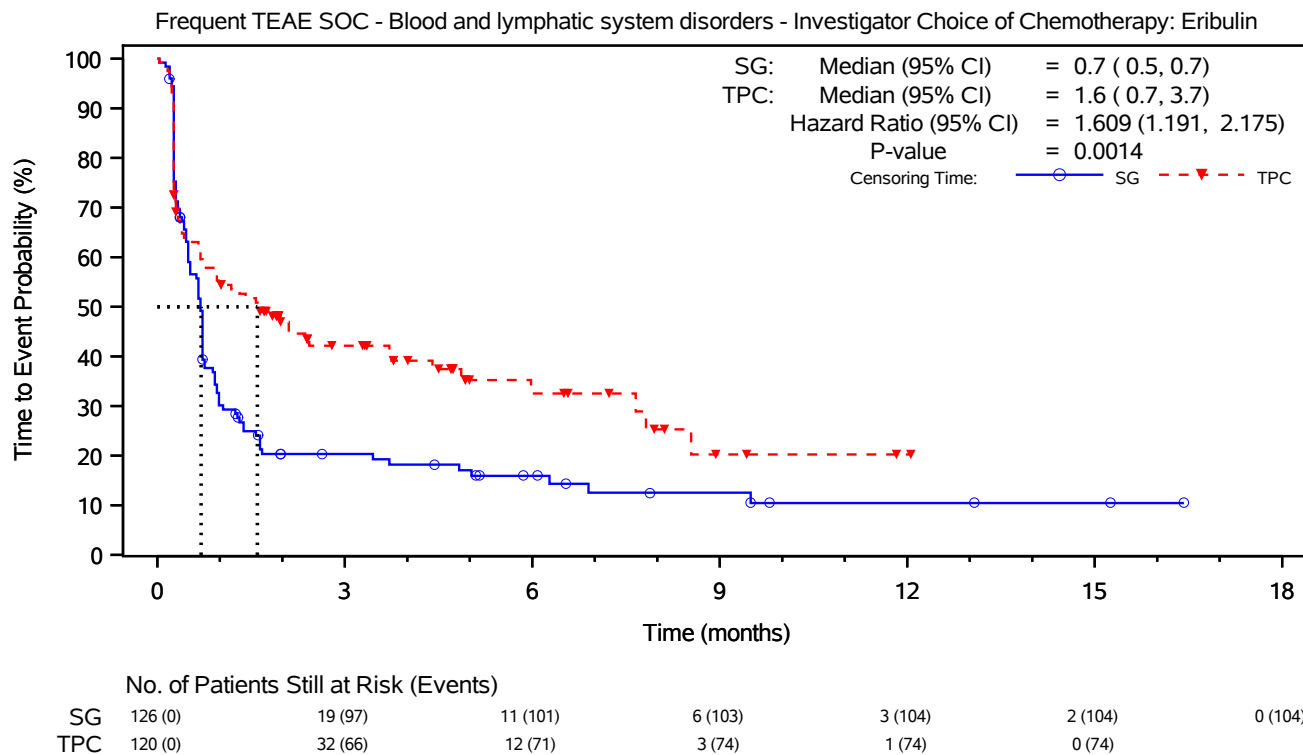
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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g-tae-frq-subgrp-exg5.pdf 12MAY2023:11:20

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

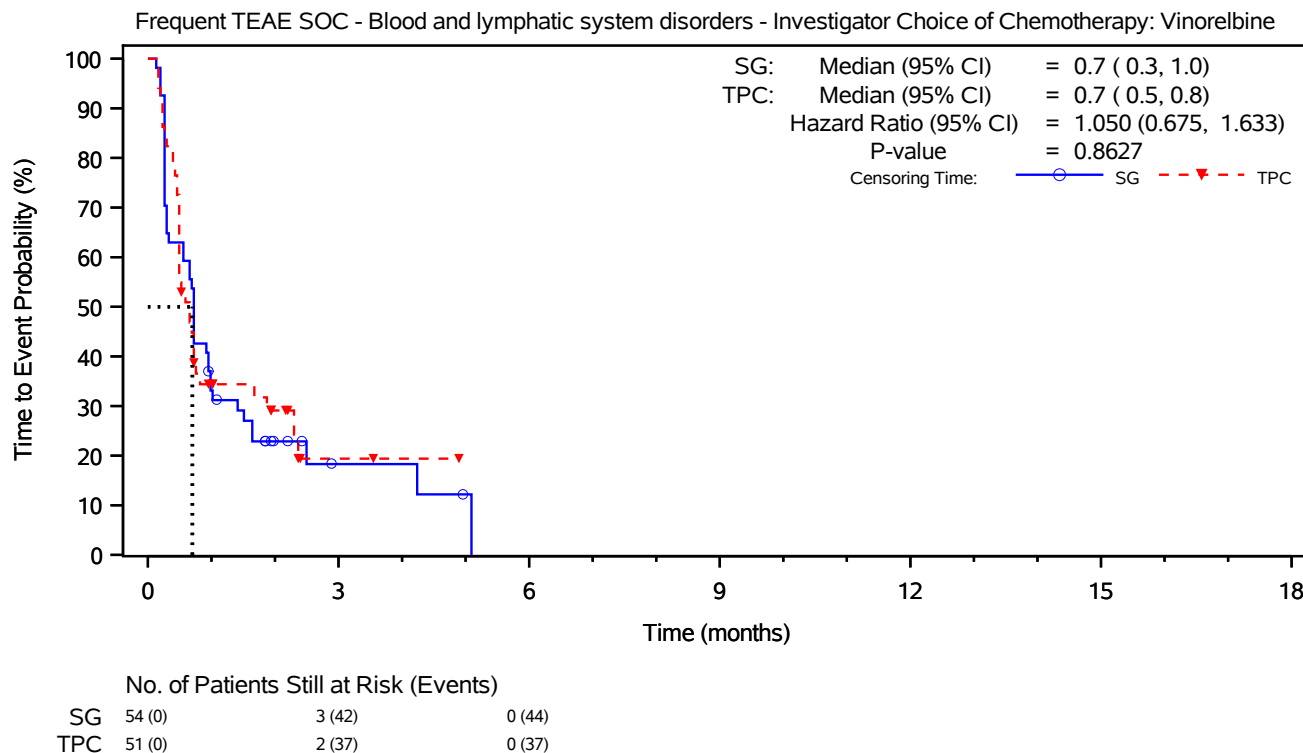
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

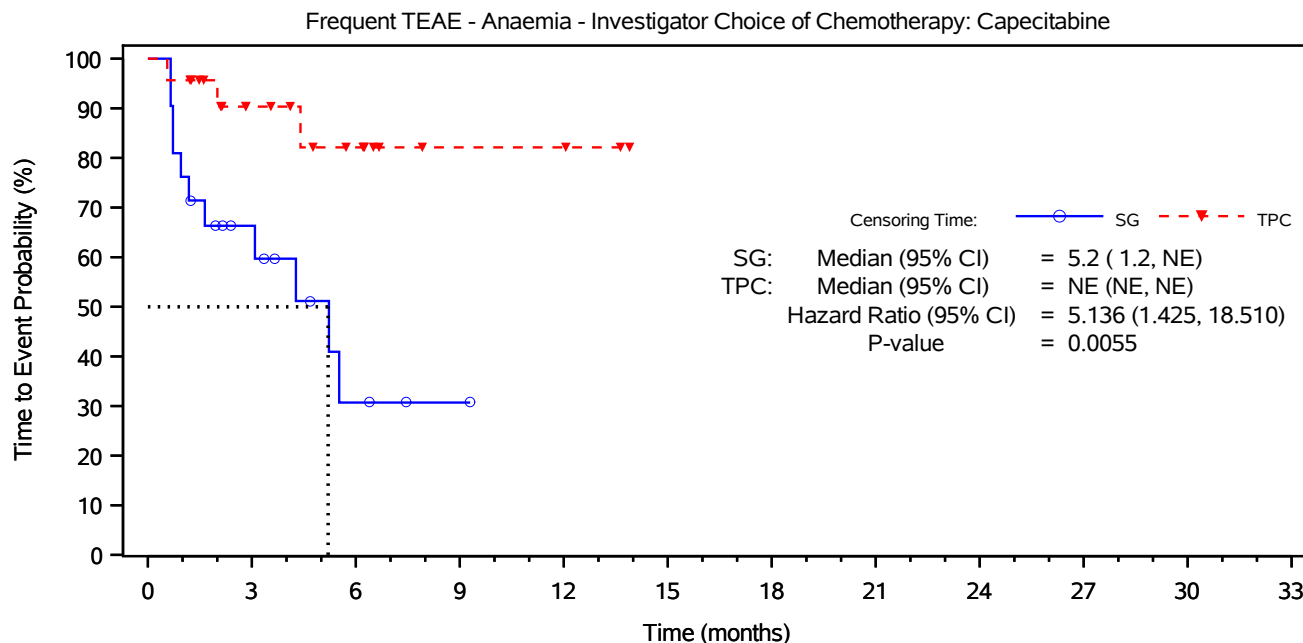
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-ttae-frq-subgrp.sas v9.4 Output file:  
g-ttae-frq-subgrp-exg5.pdf 12MAY2023:11:20

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)					
SG	21 (0)	10 (7)	3 (11)	1 (11)	0 (11)	
TPC	23 (0)	13 (2)	8 (3)	3 (3)	3 (3)	0 (3)

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

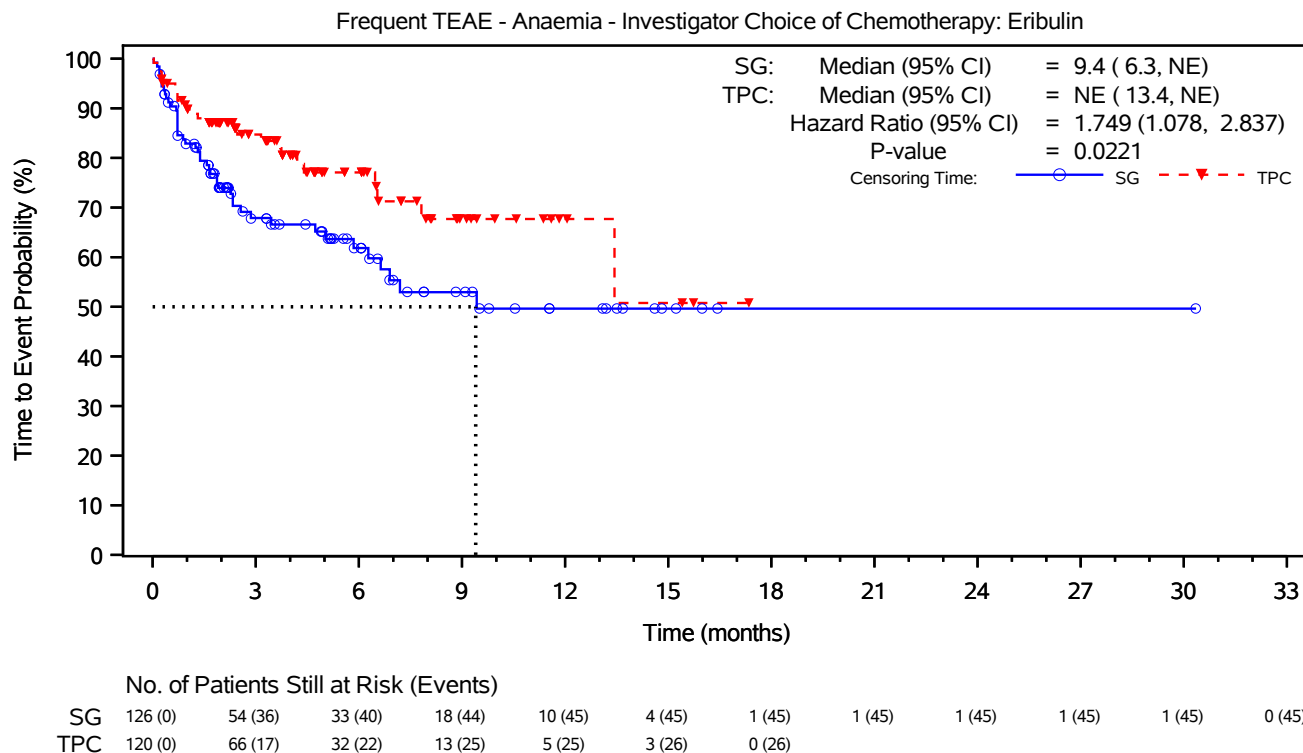
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-tae-frq-subgrp.sas v9.4 Output file:  
g-tae-frq-subgrp-exg5.pdf 12MAY2023:11:20

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

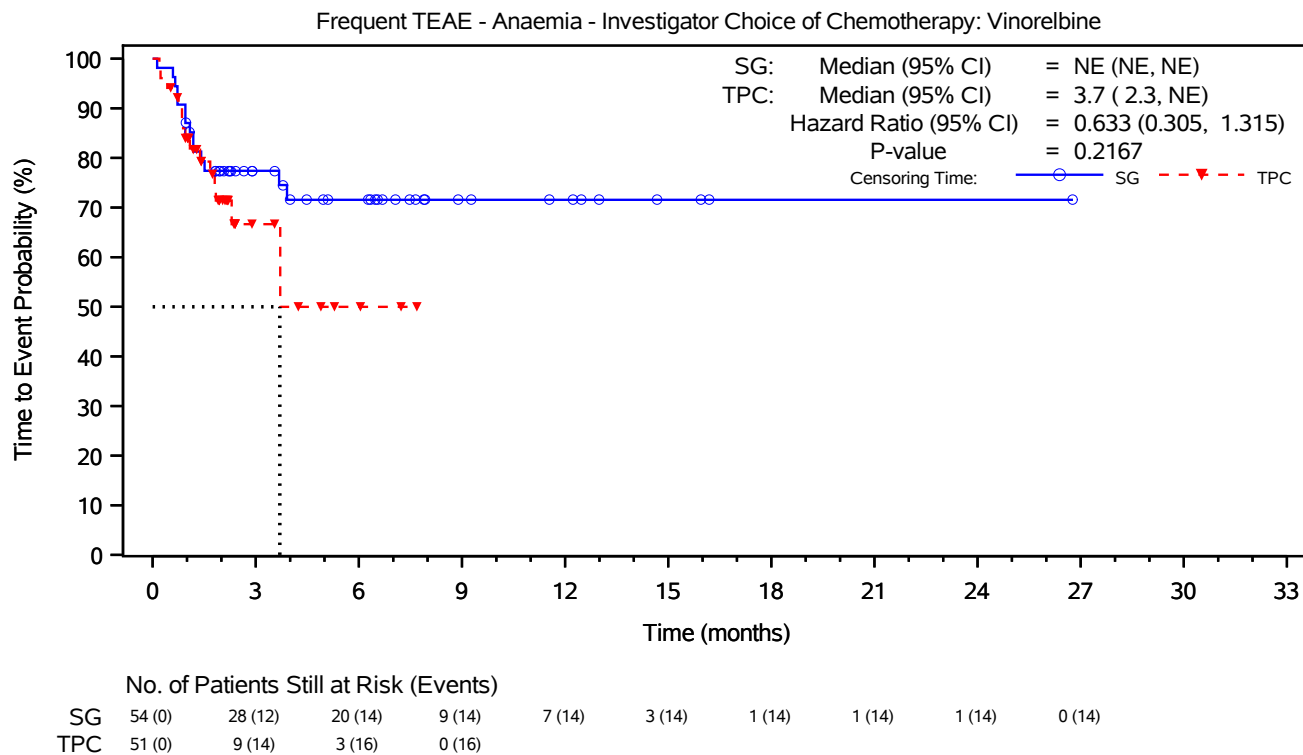
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

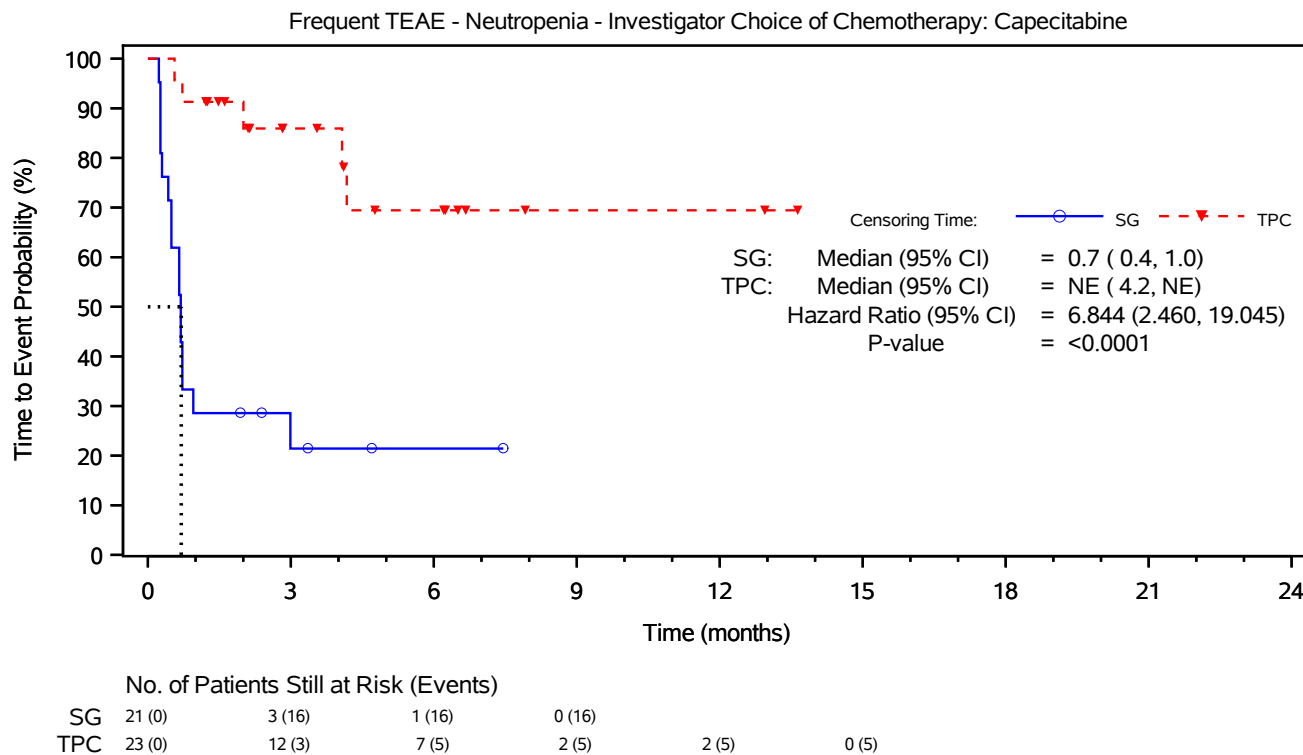
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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

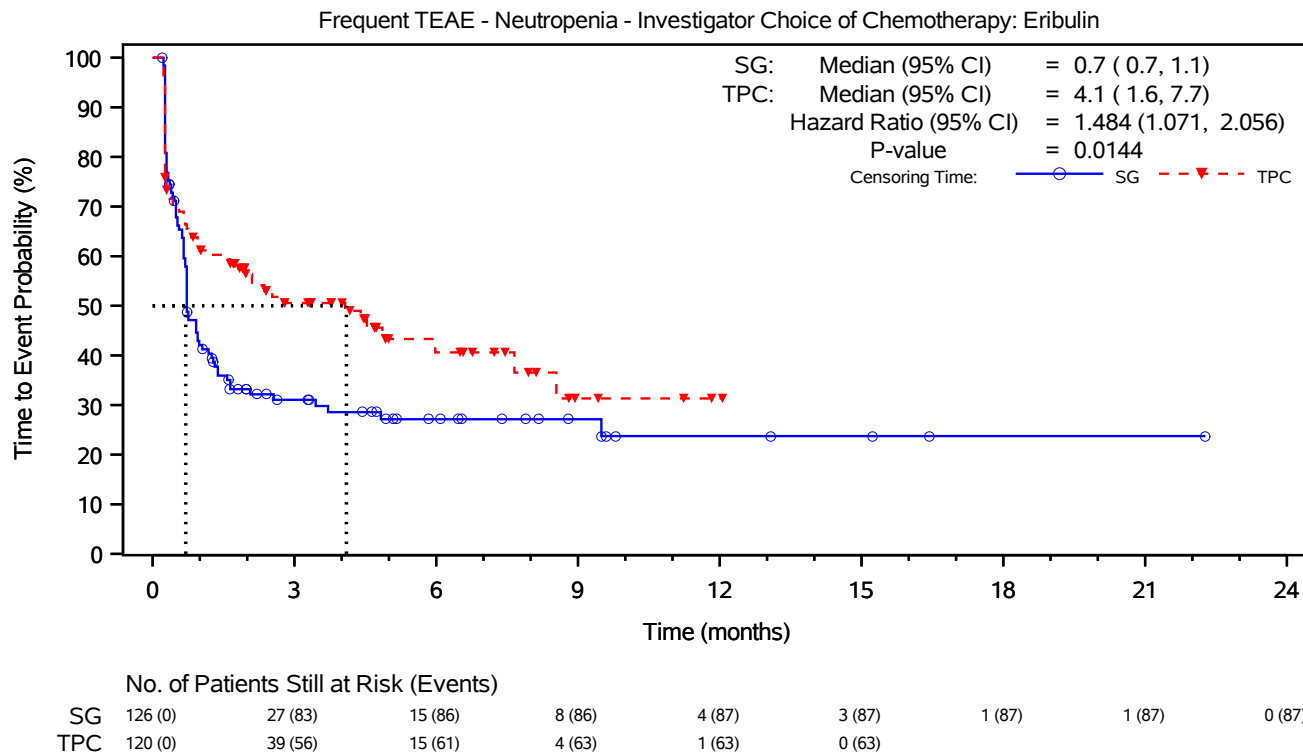
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

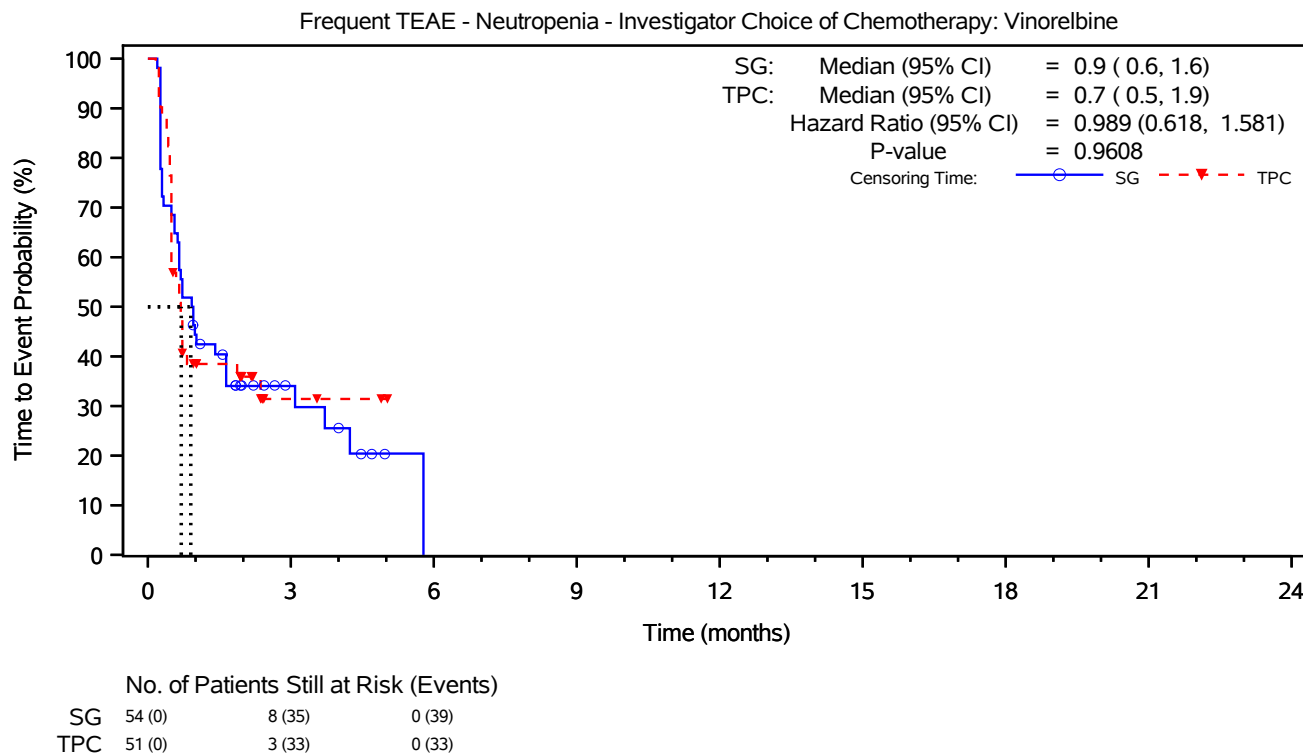
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

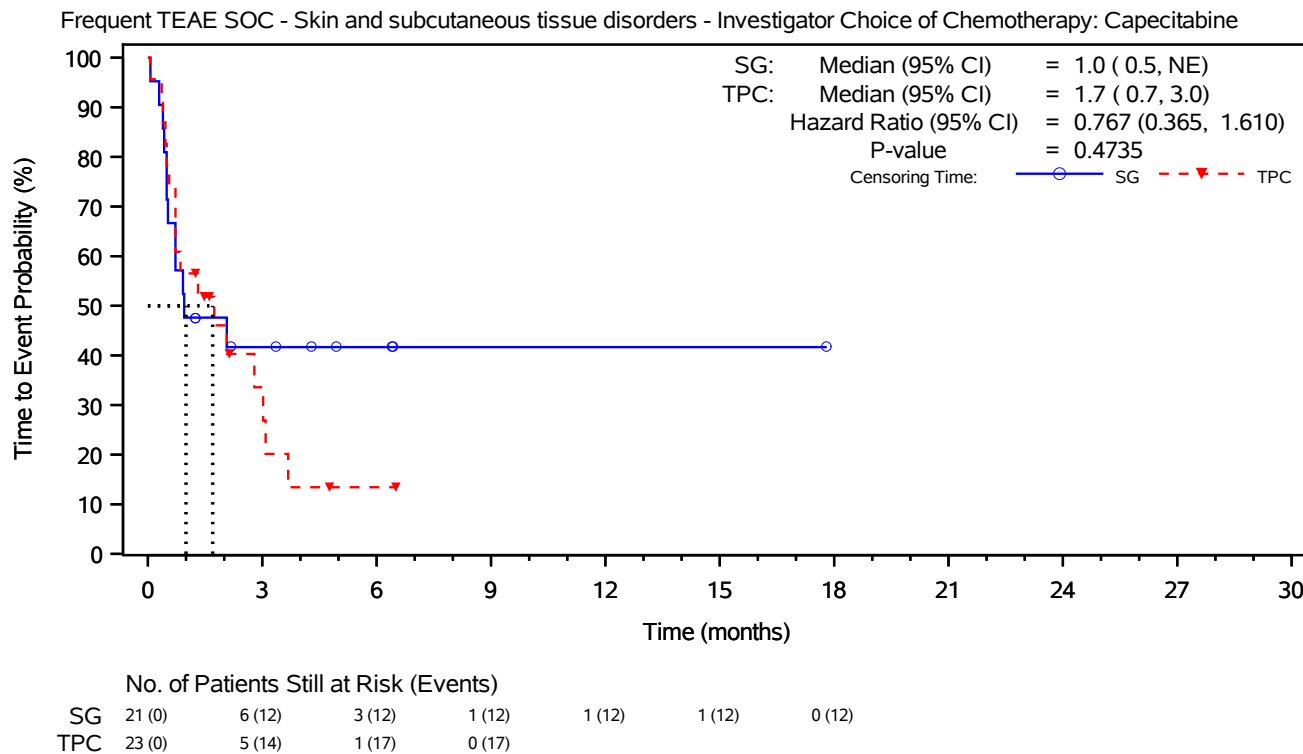
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

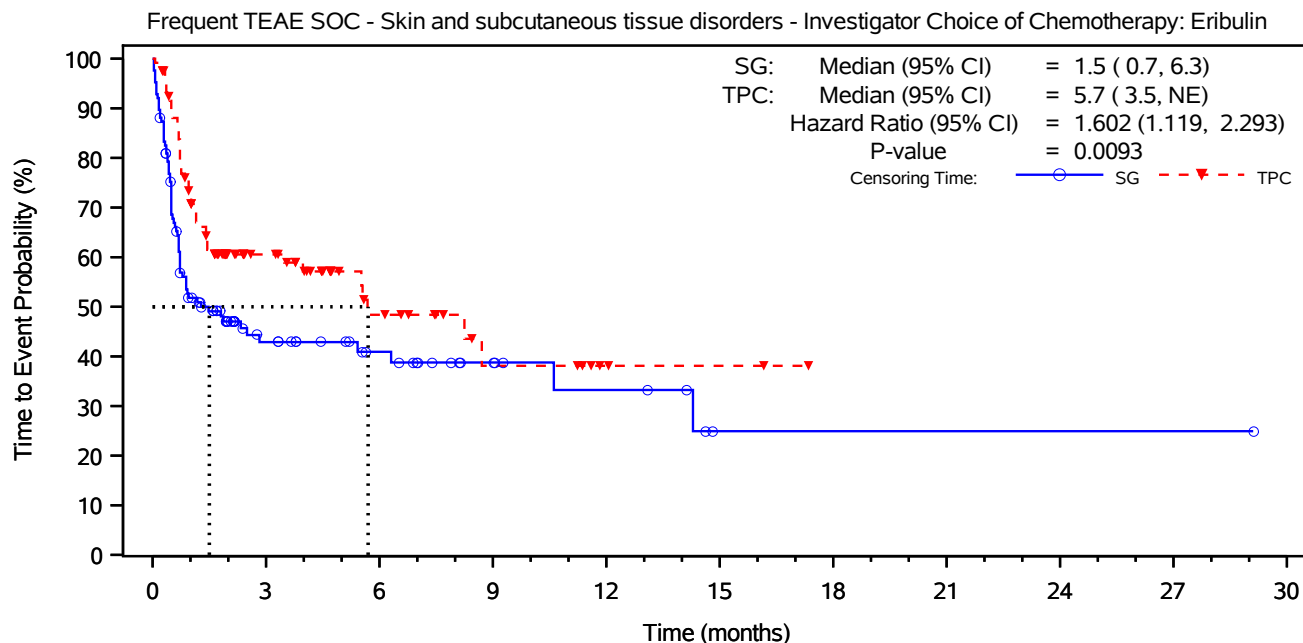
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
SG	126 (0)	30 (67)	19 (68)	10 (69)	6 (70)	1 (71)	1 (71)	1 (71)	1 (71)	1 (71)	0 (71)
TPC	120 (0)	39 (45)	16 (50)	7 (52)	3 (52)	2 (52)	0 (52)				

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

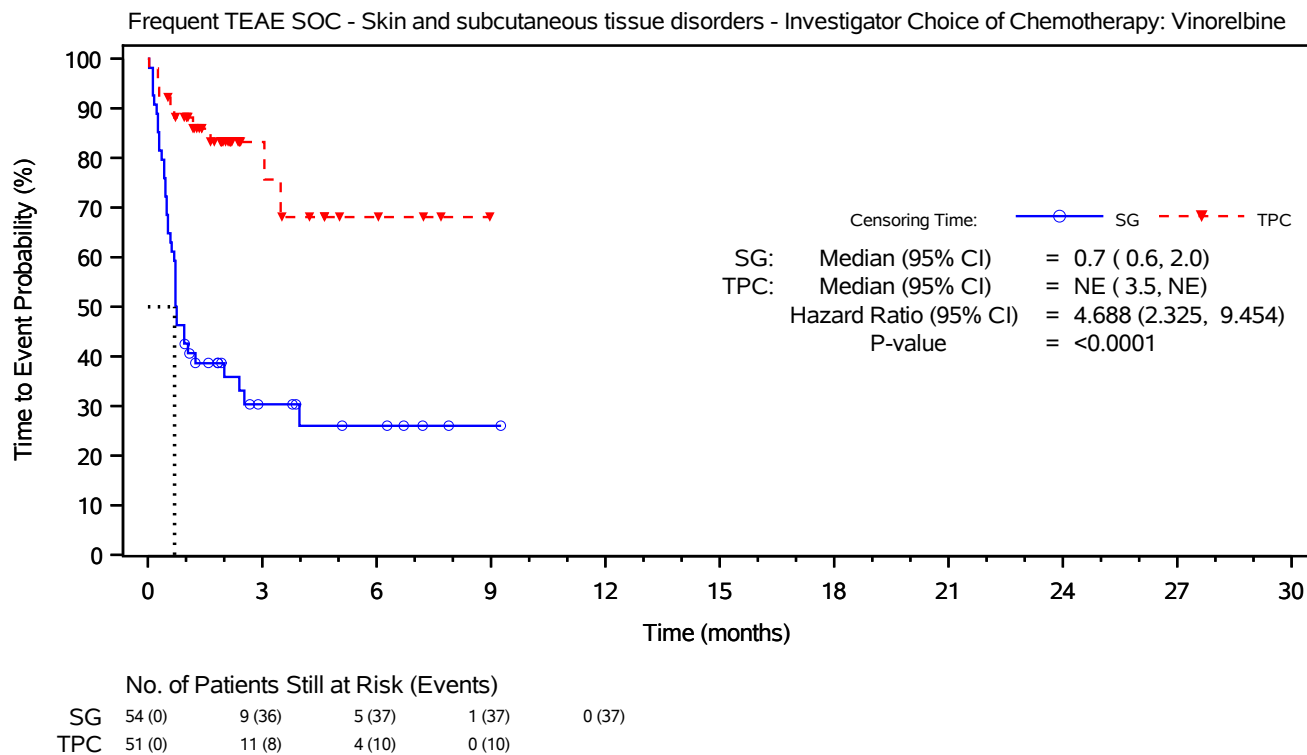
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-ttae-frq-subgrp.sas v9.4 Output file: g-ttae-frq-subgrp-exg5.pdf 12MAY2023:11:20

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Figure 15.11.7.2.5: KM Plot for Time to the First Frequent TEAE by Selected SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-ttae-frq-subgrp.sas v9.4 Output file:  
g-ttae-frq-subgrp-exg5.pdf 12MAY2023:11:20

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.6.1: Time to the First Frequent Serious TEAE by Selected SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Interaction p-value			0.5290
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	10 ( 10.5%)	2 ( 2.2%)	
Patients (%) Without Events (Censored)	85 ( 89.5%)	90 ( 97.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.721 (1.034, 21.556)
p-value			0.0273
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	11 ( 10.4%)	4 ( 3.9%)	
Patients (%) Without Events (Censored)	95 ( 89.6%)	98 ( 96.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.551 (0.811, 8.022)
p-value			0.0969

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
Source: .../germandossier/jan2023/prog/t-ttae-frq-subgrp-exg.sas v9.4 Output file: t-ttsae-frq-sgrp-exgl.pdf 09MAY2023:11:05

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.6.2: Time to the First Frequent Serious TEAE by Selected SOC, PT and Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9897
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	20 ( 10.4%)	6 ( 3.2%)	
Patients (%) Without Events (Censored)	172 ( 89.6%)	180 ( 96.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.113 (1.249, 7.758)
p-value			0.0102
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	0	
Patients (%) Without Events (Censored)	8 ( 88.9%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3458

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09

Table 15.11.7.6.3: Time to the First Frequent Serious TEAE by Selected SOC, PT and Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9878
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	18 ( 10.0%)	5 ( 2.9%)	
Patients (%) Without Events (Censored)	162 ( 90.0%)	166 ( 97.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.289 (1.220, 8.866)
p-value			0.0127
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	18 ( 85.7%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.443 (0.358, 33.102)
p-value			0.2543

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Study IMMU-132-09

Table 15.11.7.6.4: Time to the First Frequent Serious TEAE by Selected SOC, PT and Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TESAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.8742
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	14 ( 9.0%)	4 ( 2.7%)	
Patients (%) Without Events (Censored)	141 ( 91.0%)	143 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.127 (1.027, 9.514)
p-value			0.0343
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	7 ( 15.2%)	2 ( 4.3%)	
Patients (%) Without Events (Censored)	39 ( 84.8%)	45 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.706 (0.769, 17.856)
p-value			0.0801

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Table 15.11.7.6.5: Time to the First Frequent Serious TEAE by Selected SOC, PT and Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9997
Race: White			
Total Patients	141	132	
Patients (%) With Events	15 ( 10.6%)	5 ( 3.8%)	
Patients (%) Without Events (Censored)	126 ( 89.4%)	127 ( 96.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.654 (0.963, 7.314)
p-value			0.0498
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Table 15.11.7.6.6: Time to the First Frequent Serious TEAE by Selected SOC, PT and Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Interaction p-value			0.4992
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	7 ( 8.0%)	3 ( 3.3%)	
Patients (%) Without Events (Censored)	80 ( 92.0%)	87 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.442 (0.632, 9.443)
p-value			0.1813
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	14 ( 12.3%)	3 ( 2.9%)	
Patients (%) Without Events (Censored)	100 ( 87.7%)	101 ( 97.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.123 (1.184, 14.356)
p-value			0.0157

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.6.7: Time to the First Frequent Serious TEAE by Selected SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9132
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	13 ( 10.6%)	4 ( 3.3%)	
Patients (%) Without Events (Censored)	110 ( 89.4%)	117 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.193 (1.040, 9.801)
p-value			0.0322
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	8 ( 10.3%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	70 ( 89.7%)	71 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.396 (0.720, 16.012)
p-value			0.1005

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Table 15.11.7.6.8: Time to the First Frequent Serious TEAE by Selected SOC, PT and Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Interaction p-value			0.7661
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	15 ( 12.9%)	4 ( 3.4%)	
Patients (%) Without Events (Censored)	101 ( 87.1%)	115 ( 96.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.829 (1.269, 11.554)
p-value			0.0105
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	6 ( 7.5%)	1 ( 1.4%)	
Patients (%) Without Events (Censored)	74 ( 92.5%)	72 ( 98.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.265 (0.634, 43.719)
p-value			0.0852

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Table 15.11.7.6.9: Time to the First Frequent Serious TEAE by Selected SOC, PT and Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9994
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	21 ( 11.6%)	5 ( 2.8%)	
Patients (%) Without Events (Censored)	160 ( 88.4%)	171 ( 97.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.058 (1.529, 10.765)
p-value			0.0023

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Table 15.11.7.6.10: Time to the First Frequent Serious TEAE by Selected SOC, PT and Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TESAE SOC - Gastrointestinal disorders			
Interaction p-value			0.2730
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	18 ( 10.2%)	4 ( 2.3%)	
Patients (%) Without Events (Censored)	159 ( 89.8%)	167 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.268 (1.444, 12.619)
p-value			0.0043
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	3 ( 12.5%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	21 ( 87.5%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.204 (0.200, 7.256)
p-value			0.8392

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.6.11: Time to the First Frequent Serious TEAE by Selected SOC, PT and Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TESAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.5710
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	14 ( 11.5%)	5 ( 3.9%)	
Patients (%) Without Events (Censored)	108 ( 88.5%)	124 ( 96.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.880 (1.037, 8.003)
p-value			0.0338
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	7 ( 8.9%)	1 ( 1.5%)	
Patients (%) Without Events (Censored)	72 ( 91.1%)	64 ( 98.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			5.507 (0.676, 44.846)
p-value			0.0730

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.6.12: Time to the First Frequent Serious TEAE by Selected SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TESAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.8203
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	10 ( 14.7%)	4 ( 5.6%)	
Patients (%) Without Events (Censored)	58 ( 85.3%)	68 ( 94.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.833 (0.888, 9.036)
p-value			0.0666
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	7 ( 9.9%)	0	
Patients (%) Without Events (Censored)	64 ( 90.1%)	74 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0137
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.6.12: Time to the First Frequent Serious TEAE by Selected SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	3 ( 7.5%)	1 ( 3.8%)	
Patients (%) Without Events (Censored)	37 ( 92.5%)	25 ( 96.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.016 (0.210, 19.388)
p-value			0.5357

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.6.13: Time to the First Frequent Serious TEAE by Selected SOC,PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TESAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.9894
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	18 ( 85.7%)	20 ( 87.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (5.2, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.097 (0.221, 5.437)
p-value			0.9096
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	13 ( 10.3%)	3 ( 2.5%)	
Patients (%) Without Events (Censored)	113 ( 89.7%)	117 ( 97.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			4.315 (1.230, 15.144)
p-value			0.0128
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.6.13: Time to the First Frequent Serious TEAE by Selected SOC,PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	5 ( 9.3%)	0	
Patients (%) Without Events (Censored)	49 ( 90.7%)	51 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0611

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group.  
The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm.  
NE = not estimable. The SOC/PT is kept if the stratified log-rank test for treatment comparison is significant.  
Treatment-emergent adverse events are defined as any AEs that started on or after the first dose date and up to 30 days after the last dose date.  
The following terms are mapped: Neutrophil count decreased->Neutropenia, White blood cell count decreased->Leukopenia, Lymphocyte count decreased ->Lymphopenia, Haemoglobin decreased->Anaemia, Red blood cell count decreased->Anaemia, Platelet count decreased->Thrombocytopenia  
The analysis is based on Interim 2 data cut at 7/1/2022.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.1: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.0539
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	58 ( 61.1%)	33 ( 35.9%)	
Patients (%) Without Events (Censored)	37 ( 38.9%)	59 ( 64.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.7, 3.0)	NE (4.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.964 (1.280, 3.015)
p-value			0.0014
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	57 ( 53.8%)	50 ( 49.0%)	
Patients (%) Without Events (Censored)	49 ( 46.2%)	52 ( 51.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (1.0, NE)	2.8 (1.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.119 (0.765, 1.637)
p-value			0.5848

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09

Table 15.11.7.4.1: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.1491
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	4 ( 4.2%)	3 ( 3.3%)	
Patients (%) Without Events (Censored)	91 ( 95.8%)	89 ( 96.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.132 (0.253, 5.070)
p-value			0.8714
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	12 ( 11.3%)	2 ( 2.0%)	
Patients (%) Without Events (Censored)	94 ( 88.7%)	100 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.434 (1.214, 24.319)
p-value			0.0130

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.4.1: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.0436
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	52 ( 54.7%)	28 ( 30.4%)	
Patients (%) Without Events (Censored)	43 ( 45.3%)	64 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.3 (0.9, NE)	NE (6.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.002 (1.263, 3.171)
p-value			0.0023
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	52 ( 49.1%)	47 ( 46.1%)	
Patients (%) Without Events (Censored)	54 ( 50.9%)	55 ( 53.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	4.6 (1.0, NE)	8.3 (2.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.077 (0.726, 1.599)
p-value			0.7423

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.4.1: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.3786
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	12 ( 12.6%)	6 ( 6.5%)	
Patients (%) Without Events (Censored)	83 ( 87.4%)	86 ( 93.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.860 (0.697, 4.964)
p-value			0.2095
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	19 ( 17.9%)	5 ( 4.9%)	
Patients (%) Without Events (Censored)	87 ( 82.1%)	97 ( 95.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.551 (1.325, 9.521)
p-value			0.0072

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.1: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.7656
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	8 ( 8.4%)	1 ( 1.1%)	
Patients (%) Without Events (Censored)	87 ( 91.6%)	91 ( 98.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			7.548 (0.942, 60.448)
p-value			0.0250
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	11 ( 10.4%)	2 ( 2.0%)	
Patients (%) Without Events (Censored)	95 ( 89.6%)	100 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.188 (1.150, 23.412)
p-value			0.0168

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.1: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.3350
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	2 ( 2.1%)	8 ( 8.7%)	
Patients (%) Without Events (Censored)	93 ( 97.9%)	84 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.180 (0.038, 0.852)
p-value			0.0151
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	5 ( 4.7%)	6 ( 5.9%)	
Patients (%) Without Events (Censored)	101 ( 95.3%)	96 ( 94.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.542 (0.152, 1.930)
p-value			0.3373

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.1: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.8128
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 2			
Total Patients	95	92	
Patients (%) With Events	5 ( 5.3%)	7 ( 7.6%)	
Patients (%) Without Events (Censored)	90 ( 94.7%)	85 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.547 (0.172, 1.737)
p-value			0.2994
Stratification factor of prior chemotherapy regimens for treatment of metastatic disease: 3-4			
Total Patients	106	102	
Patients (%) With Events	6 ( 5.7%)	10 ( 9.8%)	
Patients (%) Without Events (Censored)	100 ( 94.3%)	92 ( 90.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.484 (0.175, 1.339)
p-value			0.1534

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.2: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.9289
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	110 ( 57.3%)	79 ( 42.5%)	
Patients (%) Without Events (Censored)	82 ( 42.7%)	107 ( 57.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (1.0, 3.0)	8.3 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.463 (1.096, 1.955)
p-value			0.0096
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	5 ( 55.6%)	4 ( 50.0%)	
Patients (%) Without Events (Censored)	4 ( 44.4%)	4 ( 50.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.3, NE)	NE (0.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.618 (0.431, 6.067)
p-value			0.4805

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.2: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Interaction p-value			0.9997
<b>Stratification factor of visceral metastasis: Yes</b>			
Total Patients	192	186	
Patients (%) With Events	16 ( 8.3%)	5 ( 2.7%)	
Patients (%) Without Events (Censored)	176 ( 91.7%)	181 ( 97.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.859 (1.046, 7.815)
p-value			0.0323
<b>Stratification factor of visceral metastasis: No</b>			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.2: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.6611
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	99 ( 51.6%)	72 ( 38.7%)	
Patients (%) Without Events (Censored)	93 ( 48.4%)	114 ( 61.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.6 (1.1, NE)	9.6 (4.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.407 (1.038, 1.906)
p-value			0.0278
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	5 ( 55.6%)	3 ( 37.5%)	
Patients (%) Without Events (Censored)	4 ( 44.4%)	5 ( 62.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.6 (0.3, NE)	NE (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.279 (0.538, 9.644)
p-value			0.2553

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.2: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9872
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	30 ( 15.6%)	11 ( 5.9%)	
Patients (%) Without Events (Censored)	162 ( 84.4%)	175 ( 94.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.541 (1.272, 5.076)
p-value			0.0063
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	0	
Patients (%) Without Events (Censored)	8 ( 88.9%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3458

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.2: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.9994
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	19 ( 9.9%)	3 ( 1.6%)	
Patients (%) Without Events (Censored)	173 ( 90.1%)	183 ( 98.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.974 (1.766, 20.210)
p-value			0.0011
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	9 (100.0%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.2: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.9899
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	6 ( 3.1%)	14 ( 7.5%)	
Patients (%) Without Events (Censored)	186 ( 96.9%)	172 ( 92.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.272 (0.097, 0.759)
p-value			0.0078
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	0	
Patients (%) Without Events (Censored)	8 ( 88.9%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.5, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.4142

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.4.2: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Visceral Metastasis  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.9880
Stratification factor of visceral metastasis: Yes			
Total Patients	192	186	
Patients (%) With Events	10 ( 5.2%)	17 ( 9.1%)	
Patients (%) Without Events (Censored)	182 ( 94.8%)	169 ( 90.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.468 (0.213, 1.027)
p-value			0.0529
Stratification factor of visceral metastasis: No			
Total Patients	9	8	
Patients (%) With Events	1 ( 11.1%)	0	
Patients (%) Without Events (Censored)	8 ( 88.9%)	8 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.4795

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.1319
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	107 ( 59.4%)	72 ( 42.1%)	
Patients (%) Without Events (Censored)	73 ( 40.6%)	99 ( 57.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.9, 3.0)	8.3 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.570 (1.164, 2.117)
p-value			0.0030
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	8 ( 38.1%)	11 ( 47.8%)	
Patients (%) Without Events (Censored)	13 ( 61.9%)	12 ( 52.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.6, NE)	2.4 (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.727 (0.291, 1.817)
p-value			0.4926

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.7990
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	14 ( 7.8%)	4 ( 2.3%)	
Patients (%) Without Events (Censored)	166 ( 92.2%)	167 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.052 (1.003, 9.287)
p-value			0.0386
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	2 ( 9.5%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	19 ( 90.5%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (2.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.896 (0.171, 21.039)
p-value			0.5963

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.1335
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	98 ( 54.4%)	66 ( 38.6%)	
Patients (%) Without Events (Censored)	82 ( 45.6%)	105 ( 61.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.7 (1.0, 6.9)	9.6 (4.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.534 (1.123, 2.097)
p-value			0.0072
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	6 ( 28.6%)	9 ( 39.1%)	
Patients (%) Without Events (Censored)	15 ( 71.4%)	14 ( 60.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.0, NE)	4.3 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.669 (0.237, 1.888)
p-value			0.4426

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
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Table 15.11.7.4.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9501
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	26 ( 14.4%)	9 ( 5.3%)	
Patients (%) Without Events (Censored)	154 ( 85.6%)	162 ( 94.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.620 (1.226, 5.600)
p-value			0.0099
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	5 ( 23.8%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	16 ( 76.2%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.738 (0.530, 14.131)
p-value			0.2099

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.3: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Endocrin Therapy in the Metastatic Setting for >=6 Months  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.9909
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	16 ( 8.9%)	3 ( 1.8%)	
Patients (%) Without Events (Censored)	164 ( 91.1%)	168 ( 98.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.860 (1.414, 16.707)
p-value			0.0055
Stratification factor of endocrine therapy in the metastatic setting			
for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	3 ( 14.3%)	0	
Patients (%) Without Events (Censored)	18 ( 85.7%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0738

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.9905
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	6 ( 3.3%)	14 ( 8.2%)	
Patients (%) Without Events (Censored)	174 ( 96.7%)	157 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.257 (0.092, 0.720)
p-value			0.0054
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	0	
Patients (%) Without Events (Censored)	20 ( 95.2%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2953

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.4558
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: Yes			
Total Patients	180	171	
Patients (%) With Events	9 ( 5.0%)	15 ( 8.8%)	
Patients (%) Without Events (Censored)	171 ( 95.0%)	156 ( 91.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.457 (0.199, 1.051)
p-value			0.0592
Stratification factor of endocrine therapy in the metastatic setting for >=6 months: No			
Total Patients	21	23	
Patients (%) With Events	2 ( 9.5%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	19 ( 90.5%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (5.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.823 (0.112, 6.044)
p-value			0.8475

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.4: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.7397
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	89 ( 57.4%)	63 ( 42.9%)	
Patients (%) Without Events (Censored)	66 ( 42.6%)	84 ( 57.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.4 (0.9, 3.7)	8.3 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.416 (1.025, 1.956)
p-value			0.0351
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	26 ( 56.5%)	20 ( 42.6%)	
Patients (%) Without Events (Censored)	20 ( 43.5%)	27 ( 57.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, NE)	6.0 (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.584 (0.882, 2.842)
p-value			0.1238

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.4: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Interaction p-value			0.3807
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	10 ( 6.5%)	4 ( 2.7%)	
Patients (%) Without Events (Censored)	145 ( 93.5%)	143 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.101 (0.656, 6.721)
p-value			0.2007
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	6 ( 13.0%)	1 ( 2.1%)	
Patients (%) Without Events (Censored)	40 ( 87.0%)	46 ( 97.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.100 (0.734, 50.708)
p-value			0.0561

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.6841
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	84 ( 54.2%)	57 ( 38.8%)	
Patients (%) Without Events (Censored)	71 ( 45.8%)	90 ( 61.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.3 (1.0, NE)	9.6 (4.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.469 (1.049, 2.057)
p-value			0.0254
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	20 ( 43.5%)	18 ( 38.3%)	
Patients (%) Without Events (Censored)	26 ( 56.5%)	29 ( 61.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.0, NE)	NE (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.251 (0.661, 2.366)
p-value			0.5007

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.4616
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	20 ( 12.9%)	8 ( 5.4%)	
Patients (%) Without Events (Censored)	135 ( 87.1%)	139 ( 94.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.163 (0.950, 4.926)
p-value			0.0602
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	11 ( 23.9%)	3 ( 6.4%)	
Patients (%) Without Events (Censored)	35 ( 76.1%)	44 ( 93.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.945 (1.100, 14.148)
p-value			0.0231

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.4: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Diarrhoea</b>			
Interaction p-value			0.7872
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	12 ( 7.7%)	2 ( 1.4%)	
Patients (%) Without Events (Censored)	143 ( 92.3%)	145 ( 98.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.186 (1.157, 23.245)
p-value			0.0165
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	7 ( 15.2%)	1 ( 2.1%)	
Patients (%) Without Events (Censored)	39 ( 84.8%)	46 ( 97.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			7.785 (0.957, 63.300)
p-value			0.0230

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Nervous system disorders</b>			
Interaction p-value			0.4039
<b>Age group: &lt; 65 years</b>			
Total Patients	155	147	
Patients (%) With Events	4 ( 2.6%)	11 ( 7.5%)	
Patients (%) Without Events (Censored)	151 ( 97.4%)	136 ( 92.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.253 (0.079, 0.804)
p-value			0.0122
<b>Age group: &gt;= 65 years</b>			
Total Patients	46	47	
Patients (%) With Events	3 ( 6.5%)	3 ( 6.4%)	
Patients (%) Without Events (Censored)	43 ( 93.5%)	44 ( 93.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.663 (0.111, 3.977)
p-value			0.6507

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.4: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Age group  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.4550
Age group: < 65 years			
Total Patients	155	147	
Patients (%) With Events	9 ( 5.8%)	15 ( 10.2%)	
Patients (%) Without Events (Censored)	146 ( 94.2%)	132 ( 89.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.451 (0.196, 1.038)
p-value			0.0550
Age group: >= 65 years			
Total Patients	46	47	
Patients (%) With Events	2 ( 4.3%)	2 ( 4.3%)	
Patients (%) Without Events (Censored)	44 ( 95.7%)	45 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.932 (0.130, 6.665)
p-value			0.9445

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.5: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.9897
Race: White			
Total Patients	141	132	
Patients (%) With Events	80 ( 56.7%)	58 ( 43.9%)	
Patients (%) Without Events (Censored)	61 ( 43.3%)	74 ( 56.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.9, 3.0)	6.0 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.401 (0.999, 1.965)
p-value			0.0513
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	7 ( 53.8%)	7 ( 43.8%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	9 ( 56.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.7 (0.3, NE)	NE (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.401 (0.490, 4.009)
p-value			0.5673

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.5: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Interaction p-value			0.9920
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	13 ( 9.2%)	3 ( 2.3%)	
Patients (%) Without Events (Censored)	128 ( 90.8%)	129 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.651 (1.038, 12.844)
p-value			0.0309
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2827

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.5: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.9359
<b>Race: White</b>			
Total Patients	141	132	
Patients (%) With Events	75 ( 53.2%)	52 ( 39.4%)	
Patients (%) Without Events (Censored)	66 ( 46.8%)	80 ( 60.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (1.0, NE)	9.6 (4.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.453 (1.020, 2.070)
p-value			0.0381
<b>Race: Non-white</b>			
Total Patients	13	16	
Patients (%) With Events	7 ( 53.8%)	7 ( 43.8%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	9 ( 56.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.7 (0.3, NE)	NE (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.401 (0.490, 4.009)
p-value			0.5673

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.5: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.9884
Race: White			
Total Patients	141	132	
Patients (%) With Events	22 ( 15.6%)	9 ( 6.8%)	
Patients (%) Without Events (Censored)	119 ( 84.4%)	123 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.103 (0.966, 4.578)
p-value			0.0555
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	1 ( 6.3%)	
Patients (%) Without Events (Censored)	13 (100.0%)	15 ( 93.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.3674

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.5: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.9997
Race: White			
Total Patients	141	132	
Patients (%) With Events	11 ( 7.8%)	2 ( 1.5%)	
Patients (%) Without Events (Censored)	130 ( 92.2%)	130 ( 98.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.774 (1.055, 21.601)
p-value			0.0251
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.5: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.9997
Race: White			
Total Patients	141	132	
Patients (%) With Events	6 ( 4.3%)	13 ( 9.8%)	
Patients (%) Without Events (Censored)	135 ( 95.7%)	119 ( 90.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.258 (0.091, 0.732)
p-value			0.0062
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	0	0	
Patients (%) Without Events (Censored)	13 (100.0%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			NE

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.5: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Race  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.9898
Race: White			
Total Patients	141	132	
Patients (%) With Events	9 ( 6.4%)	12 ( 9.1%)	
Patients (%) Without Events (Censored)	132 ( 93.6%)	120 ( 90.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.529 (0.221, 1.266)
p-value			0.1468
Race: Non-white			
Total Patients	13	16	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	16 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2994

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.6: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.8116
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	54 ( 62.1%)	39 ( 43.3%)	
Patients (%) Without Events (Censored)	33 ( 37.9%)	51 ( 56.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.7, 4.6)	8.3 (2.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.502 (0.994, 2.271)
p-value			0.0507
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	61 ( 53.5%)	44 ( 42.3%)	
Patients (%) Without Events (Censored)	53 ( 46.5%)	60 ( 57.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.9, NE)	NE (2.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.425 (0.967, 2.100)
p-value			0.0753

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.6: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.2964
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	7 ( 8.0%)	1 ( 1.1%)	
Patients (%) Without Events (Censored)	80 ( 92.0%)	89 ( 98.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.537 (0.803, 53.237)
p-value			0.0433
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	9 ( 7.9%)	4 ( 3.8%)	
Patients (%) Without Events (Censored)	105 ( 92.1%)	100 ( 96.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.934 (0.595, 6.285)
p-value			0.2636

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.6: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.7893
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	49 ( 56.3%)	35 ( 38.9%)	
Patients (%) Without Events (Censored)	38 ( 43.7%)	55 ( 61.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	1.7 (0.9, NE)	8.3 (4.5, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.467 (0.950, 2.267)
p-value			0.0805
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	55 ( 48.2%)	40 ( 38.5%)	
Patients (%) Without Events (Censored)	59 ( 51.8%)	64 ( 61.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	3.0 (1.0, NE)	NE (2.7, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.386 (0.922, 2.083)
p-value			0.1228

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.6: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.8725
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	10 ( 11.5%)	4 ( 4.4%)	
Patients (%) Without Events (Censored)	77 ( 88.5%)	86 ( 95.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.473 (0.773, 7.909)
p-value			0.1149
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	21 ( 18.4%)	7 ( 6.7%)	
Patients (%) Without Events (Censored)	93 ( 81.6%)	97 ( 93.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.684 (1.140, 6.320)
p-value			0.0188

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.6: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.3885
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	7 ( 8.0%)	2 ( 2.2%)	
Patients (%) Without Events (Censored)	80 ( 92.0%)	88 ( 97.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.612 (0.750, 17.403)
p-value			0.0869
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	12 ( 10.5%)	1 ( 1.0%)	
Patients (%) Without Events (Censored)	102 ( 89.5%)	103 ( 99.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			10.500 (1.364, 80.844)
p-value			0.0049

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.6: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Nervous system disorders</b>			
Interaction p-value			0.4955
<b>Screening ECOG Status: 0</b>			
Total Patients	87	90	
Patients (%) With Events	4 ( 4.6%)	5 ( 5.6%)	
Patients (%) Without Events (Censored)	83 ( 95.4%)	85 ( 94.4%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.438 (0.103, 1.865)
p-value			0.2517
<b>Screening ECOG Status: 1</b>			
Total Patients	114	104	
Patients (%) With Events	3 ( 2.6%)	9 ( 8.7%)	
Patients (%) Without Events (Censored)	111 ( 97.4%)	95 ( 91.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.247 (0.067, 0.919)
p-value			0.0241

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.4.6: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline ECOG Status  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.2624
Screening ECOG Status: 0			
Total Patients	87	90	
Patients (%) With Events	2 ( 2.3%)	7 ( 7.8%)	
Patients (%) Without Events (Censored)	85 ( 97.7%)	83 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.253 (0.052, 1.226)
p-value			0.0656
Screening ECOG Status: 1			
Total Patients	114	104	
Patients (%) With Events	9 ( 7.9%)	10 ( 9.6%)	
Patients (%) Without Events (Censored)	105 ( 92.1%)	94 ( 90.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.665 (0.268, 1.645)
p-value			0.3750

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.7: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.0365
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	65 ( 52.8%)	57 ( 47.1%)	
Patients (%) Without Events (Censored)	58 ( 47.2%)	64 ( 52.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.3 (1.0, NE)	6.0 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.151 (0.806, 1.643)
p-value			0.4307
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	50 ( 64.1%)	26 ( 35.6%)	
Patients (%) Without Events (Censored)	28 ( 35.9%)	47 ( 64.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.9 (0.5, 2.6)	NE (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.161 (1.344, 3.475)
p-value			0.0013

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.7: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Interaction p-value			0.6104
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	8 ( 6.5%)	2 ( 1.7%)	
Patients (%) Without Events (Censored)	115 ( 93.5%)	119 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.661 (0.775, 17.281)
p-value			0.0793
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	8 ( 10.3%)	3 ( 4.1%)	
Patients (%) Without Events (Censored)	70 ( 89.7%)	70 ( 95.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.156 (0.571, 8.146)
p-value			0.2464

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.7: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.0039
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	56 ( 45.5%)	54 ( 44.6%)	
Patients (%) Without Events (Censored)	67 ( 54.5%)	67 ( 55.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.4, NE)	8.3 (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.011 (0.695, 1.470)
p-value			0.9519
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	48 ( 61.5%)	21 ( 28.8%)	
Patients (%) Without Events (Censored)	30 ( 38.5%)	52 ( 71.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.5, 3.0)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.564 (1.534, 4.285)
p-value			0.0002

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.7: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.0175
<b>Geographic Region: Europe</b>			
Total Patients	123	121	
Patients (%) With Events	21 ( 17.1%)	3 ( 2.5%)	
Patients (%) Without Events (Censored)	102 ( 82.9%)	118 ( 97.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			6.786 (2.021, 22.786)
p-value			0.0003
<b>Geographic Region: North America</b>			
Total Patients	78	73	
Patients (%) With Events	10 ( 12.8%)	8 ( 11.0%)	
Patients (%) Without Events (Censored)	68 ( 87.2%)	65 ( 89.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.090 (0.430, 2.765)
p-value			0.8552

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.3090
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	12 ( 9.8%)	1 ( 0.8%)	
Patients (%) Without Events (Censored)	111 ( 90.2%)	120 ( 99.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			11.458 (1.488, 88.251)
p-value			0.0031
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	7 ( 9.0%)	2 ( 2.7%)	
Patients (%) Without Events (Censored)	71 ( 91.0%)	71 ( 97.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.138 (0.651, 15.131)
p-value			0.1332

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.7: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.5830
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	4 ( 3.3%)	8 ( 6.6%)	
Patients (%) Without Events (Censored)	119 ( 96.7%)	113 ( 93.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.383 (0.114, 1.281)
p-value			0.1060
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	3 ( 3.8%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	75 ( 96.2%)	67 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.241 (0.048, 1.202)
p-value			0.0599

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Study IMMU-132-09

Table 15.11.7.4.7: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.8982
Geographic Region: Europe			
Total Patients	123	121	
Patients (%) With Events	7 ( 5.7%)	11 ( 9.1%)	
Patients (%) Without Events (Censored)	116 ( 94.3%)	110 ( 90.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.545 (0.210, 1.413)
p-value			0.2054
Geographic Region: North America			
Total Patients	78	73	
Patients (%) With Events	4 ( 5.1%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	74 ( 94.9%)	67 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.447 (0.125, 1.603)
p-value			0.2057

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.4.8: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.6654
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	65 ( 56.0%)	50 ( 42.0%)	
Patients (%) Without Events (Censored)	51 ( 44.0%)	69 ( 58.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (1.0, 4.6)	8.3 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.368 (0.945, 1.979)
p-value			0.0878
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	48 ( 60.0%)	33 ( 45.2%)	
Patients (%) Without Events (Censored)	32 ( 40.0%)	40 ( 54.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.7, NE)	6.0 (1.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.583 (1.016, 2.468)
p-value			0.0474

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.8: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.3678
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	9 ( 7.8%)	4 ( 3.4%)	
Patients (%) Without Events (Censored)	107 ( 92.2%)	115 ( 96.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.944 (0.595, 6.359)
p-value			0.2632
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	7 ( 8.8%)	1 ( 1.4%)	
Patients (%) Without Events (Censored)	73 ( 91.3%)	72 ( 98.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.153 (0.757, 50.019)
p-value			0.0521

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.4.8: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.4841
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	57 ( 49.1%)	45 ( 37.8%)	
Patients (%) Without Events (Censored)	59 ( 50.9%)	74 ( 62.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.8 (1.2, NE)	9.6 (4.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.286 (0.870, 1.903)
p-value			0.1965
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	45 ( 56.3%)	30 ( 41.1%)	
Patients (%) Without Events (Censored)	35 ( 43.8%)	43 ( 58.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.7, NE)	NE (2.8, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.625 (1.023, 2.580)
p-value			0.0434

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.4.8: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.6436
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	19 ( 16.4%)	6 ( 5.0%)	
Patients (%) Without Events (Censored)	97 ( 83.6%)	113 ( 95.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.094 (1.231, 7.772)
p-value			0.0115
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	12 ( 15.0%)	5 ( 6.8%)	
Patients (%) Without Events (Censored)	68 ( 85.0%)	68 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.168 (0.764, 6.153)
p-value			0.1364

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.8: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.9673
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	12 ( 10.3%)	2 ( 1.7%)	
Patients (%) Without Events (Censored)	104 ( 89.7%)	117 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.165 (1.379, 27.567)
p-value			0.0065
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	7 ( 8.8%)	1 ( 1.4%)	
Patients (%) Without Events (Censored)	73 ( 91.3%)	72 ( 98.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			6.142 (0.756, 49.935)
p-value			0.0524

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.8: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.8868
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	3 ( 2.6%)	7 ( 5.9%)	
Patients (%) Without Events (Censored)	113 ( 97.4%)	112 ( 94.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.263 (0.066, 1.049)
p-value			0.0437
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	4 ( 5.0%)	7 ( 9.6%)	
Patients (%) Without Events (Censored)	76 ( 95.0%)	66 ( 90.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.357 (0.092, 1.381)
p-value			0.1188

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.8: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Prior CDK Treatment Duration  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.5964
Prior CDK treatment duration: <= 12 months			
Total Patients	116	119	
Patients (%) With Events	6 ( 5.2%)	11 ( 9.2%)	
Patients (%) Without Events (Censored)	110 ( 94.8%)	108 ( 90.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.451 (0.165, 1.228)
p-value			0.1102
Prior CDK treatment duration: > 12 months			
Total Patients	80	73	
Patients (%) With Events	5 ( 6.3%)	6 ( 8.2%)	
Patients (%) Without Events (Censored)	75 ( 93.8%)	67 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.661 (0.201, 2.169)
p-value			0.4912

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.9: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.9096
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	7 ( 53.8%)	5 ( 35.7%)	
Patients (%) Without Events (Censored)	6 ( 46.2%)	9 ( 64.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.3, NE)	NE (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.567 (0.497, 4.943)
p-value			0.4416
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	104 ( 57.5%)	77 ( 43.8%)	
Patients (%) Without Events (Censored)	77 ( 42.5%)	99 ( 56.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.2 (0.9, 3.0)	8.3 (2.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.430 (1.064, 1.920)
p-value			0.0171

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.9: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Interaction p-value			0.9930
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.3, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.6547
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	15 ( 8.3%)	5 ( 2.8%)	
Patients (%) Without Events (Censored)	166 ( 91.7%)	171 ( 97.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.747 (0.997, 7.569)
p-value			0.0416

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.9: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.8366
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	6 ( 46.2%)	4 ( 28.6%)	
Patients (%) Without Events (Censored)	7 ( 53.8%)	10 ( 71.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (0.3, NE)	NE (0.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.695 (0.478, 6.013)
p-value			0.4124
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	95 ( 52.5%)	70 ( 39.8%)	
Patients (%) Without Events (Censored)	86 ( 47.5%)	106 ( 60.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.3 (1.0, NE)	9.6 (4.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.410 (1.035, 1.921)
p-value			0.0293

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.9: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.3890
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	1 ( 7.1%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	13 ( 92.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.411 (0.021, 7.892)
p-value			0.5467
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	29 ( 16.0%)	10 ( 5.7%)	
Patients (%) Without Events (Censored)	152 ( 84.0%)	166 ( 94.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.777 (1.352, 5.703)
p-value			0.0037

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.9: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.9901
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	0	
Patients (%) Without Events (Censored)	12 ( 92.3%)	14 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (3.4, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.6547
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	17 ( 9.4%)	3 ( 1.7%)	
Patients (%) Without Events (Censored)	164 ( 90.6%)	173 ( 98.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			5.479 (1.604, 18.711)
p-value			0.0023

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.9: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Nervous system disorders</b>			
Interaction p-value			0.7279
<b>Early relapse: Yes</b>			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	2 ( 14.3%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	12 ( 85.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (6.5, NE)	4.6 (4.6, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0309
<b>Early relapse: No</b>			
Total Patients	181	176	
Patients (%) With Events	6 ( 3.3%)	12 ( 6.8%)	
Patients (%) Without Events (Censored)	175 ( 96.7%)	164 ( 93.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.331 (0.116, 0.945)
p-value			0.0301

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.9: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Early Relapse  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.6103
Early relapse: Yes			
Total Patients	13	14	
Patients (%) With Events	1 ( 7.7%)	2 ( 14.3%)	
Patients (%) Without Events (Censored)	12 ( 92.3%)	12 ( 85.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.487 (0.044, 5.370)
p-value			0.5481
Early relapse: No			
Total Patients	181	176	
Patients (%) With Events	10 ( 5.5%)	15 ( 8.5%)	
Patients (%) Without Events (Censored)	171 ( 94.5%)	161 ( 91.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.535 (0.239, 1.194)
p-value			0.1212

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.10: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.8768
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	103 ( 58.2%)	75 ( 43.9%)	
Patients (%) Without Events (Censored)	74 ( 41.8%)	96 ( 56.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.1 (0.9, 2.6)	8.3 (2.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.449 (1.075, 1.952)
p-value			0.0142
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	12 ( 50.0%)	8 ( 34.8%)	
Patients (%) Without Events (Censored)	12 ( 50.0%)	15 ( 65.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.7 (0.6, NE)	NE (0.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.586 (0.648, 3.886)
p-value			0.3198

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.10: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Anaemia			
Interaction p-value			0.3552
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	15 ( 8.5%)	4 ( 2.3%)	
Patients (%) Without Events (Censored)	162 ( 91.5%)	167 ( 97.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.360 (1.113, 10.142)
p-value			0.0224
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	1 ( 4.2%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	23 ( 95.8%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.789 (0.049, 12.784)
p-value			0.8674

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.10: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.9642
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	94 ( 53.1%)	68 ( 39.8%)	
Patients (%) Without Events (Censored)	83 ( 46.9%)	103 ( 60.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.3 (1.0, 6.9)	9.6 (4.3, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.424 (1.042, 1.947)
p-value			0.0259
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	10 ( 41.7%)	7 ( 30.4%)	
Patients (%) Without Events (Censored)	14 ( 58.3%)	16 ( 69.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (1.0, NE)	NE (6.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.489 (0.566, 3.916)
p-value			0.4313

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.10: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.4705
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	25 ( 14.1%)	10 ( 5.8%)	
Patients (%) Without Events (Censored)	152 ( 85.9%)	161 ( 94.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.336 (1.120, 4.872)
p-value			0.0200
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	6 ( 25.0%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	18 ( 75.0%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			4.656 (0.559, 38.799)
p-value			0.1177

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.10: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Diarrhoea			
Interaction p-value			0.5787
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	15 ( 8.5%)	2 ( 1.2%)	
Patients (%) Without Events (Censored)	162 ( 91.5%)	169 ( 98.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			7.182 (1.640, 31.441)
p-value			0.0022
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	4 ( 16.7%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	20 ( 83.3%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.844 (0.316, 25.570)
p-value			0.3294

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.10: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.5723
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	6 ( 3.4%)	13 ( 7.6%)	
Patients (%) Without Events (Censored)	171 ( 96.6%)	158 ( 92.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.294 (0.104, 0.830)
p-value			0.0141
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	1 ( 4.2%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	23 ( 95.8%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.674 (0.042, 10.779)
p-value			0.7790

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.10: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Baseline Documented Target vs Non-Target Liver Lesions  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.2967
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): Yes			
Total Patients	177	171	
Patients (%) With Events	7 ( 4.0%)	14 ( 8.2%)	
Patients (%) Without Events (Censored)	170 ( 96.0%)	157 ( 91.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.405 (0.163, 1.008)
p-value			0.0448
Baseline documented Target or Non-target liver lesions per RECIST1.1 per Local Investigator Review (LIR): No			
Total Patients	24	23	
Patients (%) With Events	4 ( 16.7%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	20 ( 83.3%)	20 ( 87.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (7.6, NE)	NE (7.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.003 (0.222, 4.536)
p-value			0.9965

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.11: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.6235
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	67 ( 54.9%)	51 ( 39.5%)	
Patients (%) Without Events (Censored)	55 ( 45.1%)	78 ( 60.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.9, 6.9)	NE (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.535 (1.066, 2.211)
p-value			0.0205
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	48 ( 60.8%)	32 ( 49.2%)	
Patients (%) Without Events (Censored)	31 ( 39.2%)	33 ( 50.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.7, 3.5)	8.3 (1.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.308 (0.836, 2.047)
p-value			0.2413

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.11: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Interaction p-value			0.1597
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	6 ( 4.9%)	4 ( 3.1%)	
Patients (%) Without Events (Censored)	116 ( 95.1%)	125 ( 96.9%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.383 (0.389, 4.916)
p-value			0.6149
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	10 ( 12.7%)	1 ( 1.5%)	
Patients (%) Without Events (Censored)	69 ( 87.3%)	64 ( 98.5%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			8.073 (1.032, 63.138)
p-value			0.0178

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.7271
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	59 ( 48.4%)	45 ( 34.9%)	
Patients (%) Without Events (Censored)	63 ( 51.6%)	84 ( 65.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	4.6 (1.0, NE)	NE (6.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.476 (1.001, 2.176)
p-value			0.0485
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	45 ( 57.0%)	30 ( 46.2%)	
Patients (%) Without Events (Censored)	34 ( 43.0%)	35 ( 53.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.9, NE)	8.3 (1.9, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.319 (0.830, 2.094)
p-value			0.2452

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Gastrointestinal disorders			
Interaction p-value			0.1403
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	19 ( 15.6%)	10 ( 7.8%)	
Patients (%) Without Events (Censored)	103 ( 84.4%)	119 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.898 (0.880, 4.090)
p-value			0.0971
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	12 ( 15.2%)	1 ( 1.5%)	
Patients (%) Without Events (Censored)	67 ( 84.8%)	64 ( 98.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			9.778 (1.271, 75.255)
p-value			0.0071

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Diarrhoea</b>			
Interaction p-value			0.9892
<b>Chemotherapy in neo/adjuvant setting: Yes</b>			
Total Patients	122	129	
Patients (%) With Events	11 ( 9.0%)	3 ( 2.3%)	
Patients (%) Without Events (Censored)	111 ( 91.0%)	126 ( 97.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.593 (0.999, 12.925)
p-value			0.0365
<b>Chemotherapy in neo/adjuvant setting: No</b>			
Total Patients	79	65	
Patients (%) With Events	8 ( 10.1%)	0	
Patients (%) Without Events (Censored)	71 ( 89.9%)	65 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0097

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Nervous system disorders			
Interaction p-value			0.8971
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	4 ( 3.3%)	7 ( 5.4%)	
Patients (%) Without Events (Censored)	118 ( 96.7%)	122 ( 94.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.301 (0.077, 1.177)
p-value			0.0680
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	3 ( 3.8%)	7 ( 10.8%)	
Patients (%) Without Events (Censored)	76 ( 96.2%)	58 ( 89.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.313 (0.081, 1.216)
p-value			0.0764

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.11: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Chemotherapy in Neo/adjuvant Setting  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.5140
Chemotherapy in neo/adjuvant setting: Yes			
Total Patients	122	129	
Patients (%) With Events	8 ( 6.6%)	11 ( 8.5%)	
Patients (%) Without Events (Censored)	114 ( 93.4%)	118 ( 91.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.585 (0.233, 1.468)
p-value			0.2486
Chemotherapy in neo/adjuvant setting: No			
Total Patients	79	65	
Patients (%) With Events	3 ( 3.8%)	6 ( 9.2%)	
Patients (%) Without Events (Censored)	76 ( 96.2%)	59 ( 90.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.370 (0.092, 1.483)
p-value			0.1442

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.12: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.4078
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	40 ( 58.8%)	37 ( 51.4%)	
Patients (%) Without Events (Censored)	28 ( 41.2%)	35 ( 48.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.6 (0.7, 4.6)	2.5 (1.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.262 (0.806, 1.974)
p-value			0.3214
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	37 ( 52.1%)	27 ( 36.5%)	
Patients (%) Without Events (Censored)	34 ( 47.9%)	47 ( 63.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.0 (0.9, NE)	8.3 (6.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.374 (0.834, 2.262)
p-value			0.2089
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.12: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	25 ( 62.5%)	12 ( 46.2%)	
Patients (%) Without Events (Censored)	15 ( 37.5%)	14 ( 53.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	0.8 (0.5, 2.6)	9.6 (2.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.732 (0.869, 3.452)
p-value			0.1149

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.12: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Neutropenia</b>			
Interaction p-value			0.2943
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	37 ( 54.4%)	35 ( 48.6%)	
Patients (%) Without Events (Censored)	31 ( 45.6%)	37 ( 51.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.3 (0.7, 4.8)	4.4 (1.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.222 (0.769, 1.940)
p-value			0.4116
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	33 ( 46.5%)	24 ( 32.4%)	
Patients (%) Without Events (Censored)	38 ( 53.5%)	50 ( 67.6%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	6.9 (1.2, NE)	8.3 (6.0, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.346 (0.793, 2.284)
p-value			0.2675
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.12: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	21 ( 52.5%)	9 ( 34.6%)	
Patients (%) Without Events (Censored)	19 ( 47.5%)	17 ( 65.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.5, NE)	9.6 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.912 (0.874, 4.182)
p-value			0.1016

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.12: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.6215
<b>Trop2: H-Score &lt; 100</b>			
Total Patients	68	72	
Patients (%) With Events	12 ( 17.6%)	5 ( 6.9%)	
Patients (%) Without Events (Censored)	56 ( 82.4%)	67 ( 93.1%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.648 (0.933, 7.520)
p-value			0.0585
<b>Trop2: H-Score &gt;= 100 and &lt;= 200</b>			
Total Patients	71	74	
Patients (%) With Events	14 ( 19.7%)	4 ( 5.4%)	
Patients (%) Without Events (Censored)	57 ( 80.3%)	70 ( 94.6%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (10.4, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.972 (0.964, 9.162)
p-value			0.0471
<b>Trop2: H-Score &gt; 200</b>			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.12: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	2 ( 5.0%)	1 ( 3.8%)	
Patients (%) Without Events (Censored)	38 ( 95.0%)	25 ( 96.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.359 (0.123, 14.996)
p-value			0.8014

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.12: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.1594
Trop2: H-Score < 100			
Total Patients	68	72	
Patients (%) With Events	5 ( 7.4%)	4 ( 5.6%)	
Patients (%) Without Events (Censored)	63 ( 92.6%)	68 ( 94.4%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.288 (0.345, 4.803)
p-value			0.7053
Trop2: H-Score >= 100 and <= 200			
Total Patients	71	74	
Patients (%) With Events	3 ( 4.2%)	9 ( 12.2%)	
Patients (%) Without Events (Censored)	68 ( 95.8%)	65 ( 87.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.256 (0.068, 0.969)
p-value			0.0318
Trop2: H-Score > 200			
Total Patients	40	26	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.12: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Trop2 H-Score  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	1 ( 2.5%)	3 ( 11.5%)	
Patients (%) Without Events (Censored)	39 ( 97.5%)	23 ( 88.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.205 (0.021, 1.969)
p-value			0.1281

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09

Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Blood and lymphatic system disorders			
Interaction p-value			0.0055
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	13 ( 61.9%)	1 ( 4.3%)	
Patients (%) Without Events (Censored)	8 ( 38.1%)	22 ( 95.7%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.6 (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			19.794 (2.582, 151.777)
p-value			<0.0001
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	71 ( 56.3%)	55 ( 45.8%)	
Patients (%) Without Events (Censored)	55 ( 43.7%)	65 ( 54.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.3 (0.7, 4.6)	6.0 (2.5, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.332 (0.936, 1.897)
p-value			0.1032
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	31 ( 57.4%)	27 ( 52.9%)	
Patients (%) Without Events (Censored)	23 ( 42.6%)	24 ( 47.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.0 (0.9, NE)	1.4 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.987 (0.585, 1.666)
p-value			0.9389

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Gilead Sciences, Inc.  
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Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Anaemia</b>			
Interaction p-value			0.9897
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	2 ( 9.5%)	0	
Patients (%) Without Events (Censored)	19 ( 90.5%)	23 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1437
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	9 ( 7.1%)	4 ( 3.3%)	
Patients (%) Without Events (Censored)	117 ( 92.9%)	116 ( 96.7%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			2.128 (0.655, 6.912)
p-value			0.1978
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	5 ( 9.3%)	1 ( 2.0%)	
Patients (%) Without Events (Censored)	49 ( 90.7%)	50 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			3.767 (0.427, 33.200)
p-value			0.2010

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE - Neutropenia			
Interaction p-value			0.9753
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	13 ( 61.9%)	0	
Patients (%) Without Events (Censored)	8 ( 38.1%)	23 (100.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	2.6 (0.7, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			<0.0001
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	63 ( 50.0%)	51 ( 42.5%)	
Patients (%) Without Events (Censored)	63 ( 50.0%)	69 ( 57.5%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	3.7 (1.1, NE)	8.3 (3.1, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.236 (0.854, 1.789)
p-value			0.2531
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	28 ( 51.9%)	24 ( 47.1%)	
Patients (%) Without Events (Censored)	26 ( 48.1%)	27 ( 52.9%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	1.9 (0.9, NE)	2.4 (0.7, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.068 (0.616, 1.853)
p-value			0.8397

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Gilead Sciences, Inc.  
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Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Gastrointestinal disorders</b>			
Interaction p-value			0.8730
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	5 ( 23.8%)	3 ( 13.0%)	
Patients (%) Without Events (Censored)	16 ( 76.2%)	20 ( 87.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (5.2, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.932 (0.461, 8.088)
p-value			0.3557
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	20 ( 15.9%)	6 ( 5.0%)	
Patients (%) Without Events (Censored)	106 ( 84.1%)	114 ( 95.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			3.239 (1.300, 8.070)
p-value			0.0076
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
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Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	6 ( 11.1%)	2 ( 3.9%)	
Patients (%) Without Events (Censored)	48 ( 88.9%)	49 ( 96.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			1.814 (0.355, 9.274)
p-value			0.4686

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

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Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE - Diarrhoea</b>			
Interaction p-value			0.6621
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	2 ( 9.5%)	2 ( 8.7%)	
Patients (%) Without Events (Censored)	19 ( 90.5%)	21 ( 91.3%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			1.121 (0.158, 7.963)
p-value			0.9089
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	14 ( 11.1%)	0	
Patients (%) Without Events (Censored)	112 ( 88.9%)	120 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0002
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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## Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

Gilead Sciences, Inc.  
Study IMMU-132-09Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	3 ( 5.6%)	1 ( 2.0%)	
Patients (%) Without Events (Censored)	51 ( 94.4%)	50 ( 98.0%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			2.303 (0.237, 22.397)
p-value			0.4599

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
<b>Frequent TEAE SOC - Nervous system disorders</b>			
Interaction p-value			0.9928
<b>Investigators' Choice of Chemotherapy: Capecitabine</b>			
Total Patients	21	23	
Patients (%) With Events	1 ( 4.8%)	0	
Patients (%) Without Events (Censored)	20 ( 95.2%)	23 (100.0%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.2953
<b>Investigators' Choice of Chemotherapy: Eribulin</b>			
Total Patients	126	120	
Patients (%) With Events	6 ( 4.8%)	11 ( 9.2%)	
Patients (%) Without Events (Censored)	120 ( 95.2%)	109 ( 90.8%)	
<b>Kaplan-Meier Quartiles of Time to Event (months)</b>			
Median (95% CI)	29.7 (NE, NE)	NE (NE, NE)	
<b>Analysis SG vs. TPC</b>			
Hazard Ratio (95% CI)			0.370 (0.128, 1.069)
p-value			0.0557
<b>Investigators' Choice of Chemotherapy: Vinorelbine</b>			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	0	3 ( 5.9%)	
Patients (%) Without Events (Censored)	54 (100.0%)	48 ( 94.1%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.0127

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Frequent TEAE SOC - Respiratory, thoracic and mediastinal disorders			
Interaction p-value			0.9885
Investigators' Choice of Chemotherapy: Capecitabine			
Total Patients	21	23	
Patients (%) With Events	0	2 ( 8.7%)	
Patients (%) Without Events (Censored)	21 (100.0%)	21 ( 91.3%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (7.4, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			NE (NE, NE)
p-value			0.1470
Investigators' Choice of Chemotherapy: Eribulin			
Total Patients	126	120	
Patients (%) With Events	8 ( 6.3%)	11 ( 9.2%)	
Patients (%) Without Events (Censored)	118 ( 93.7%)	109 ( 90.8%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.623 (0.250, 1.553)
p-value			0.3060
Investigators' Choice of Chemotherapy: Vinorelbine			
Total Patients	54	51	

The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

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Table 15.11.7.4.13: Time to the First Grade 3 or Higher Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine

	SG (N=201)	TPC (N=194)	Treatment Comparison
Patients (%) With Events	3 ( 5.6%)	4 ( 7.8%)	
Patients (%) Without Events (Censored)	51 ( 94.4%)	47 ( 92.2%)	
Kaplan-Meier Quartiles of Time to Event (months)			
Median (95% CI)	NE (NE, NE)	NE (NE, NE)	
Analysis SG vs. TPC			
Hazard Ratio (95% CI)			0.495 (0.108, 2.270)
p-value			0.3565

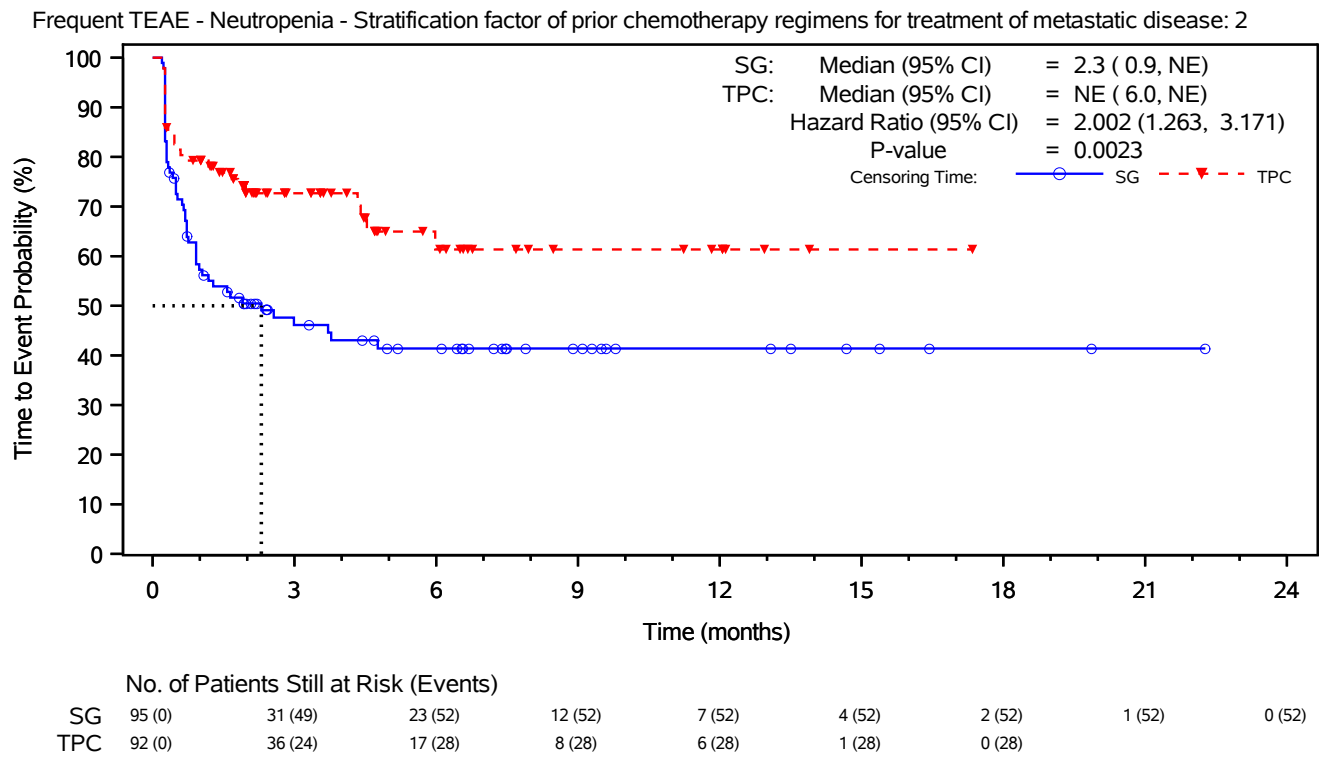
The denominator is the number of patients in the Safety Population excluding pre-selected to Gemcitabine for each treatment group per subgroup. The SOC/PT is kept if the number of patients of is no less than 10 or the incidence is no less than 5% in at least one treatment arm. Stratified log rank test is performed for treatment comparison in each SOC/PT, which is only be kept when the test is significant. The SOC/PT in the subgroup will be kept if at least one category of the subgroup has no less than 10 patients with events in total (SG + TPC). Interaction p-value is from Cox regression with treatment, subgroup and treatment\*subgroup interaction as covariates. Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test. Median event time is from Kaplan-Meier estimate and its 95% CI is from Brookmeyer-Crowley method. NE = Not Estimable.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022  
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Figure 15.11.7.4.1: KM Plot for Time to the First >=Grade 3 Frequent TEAE by SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

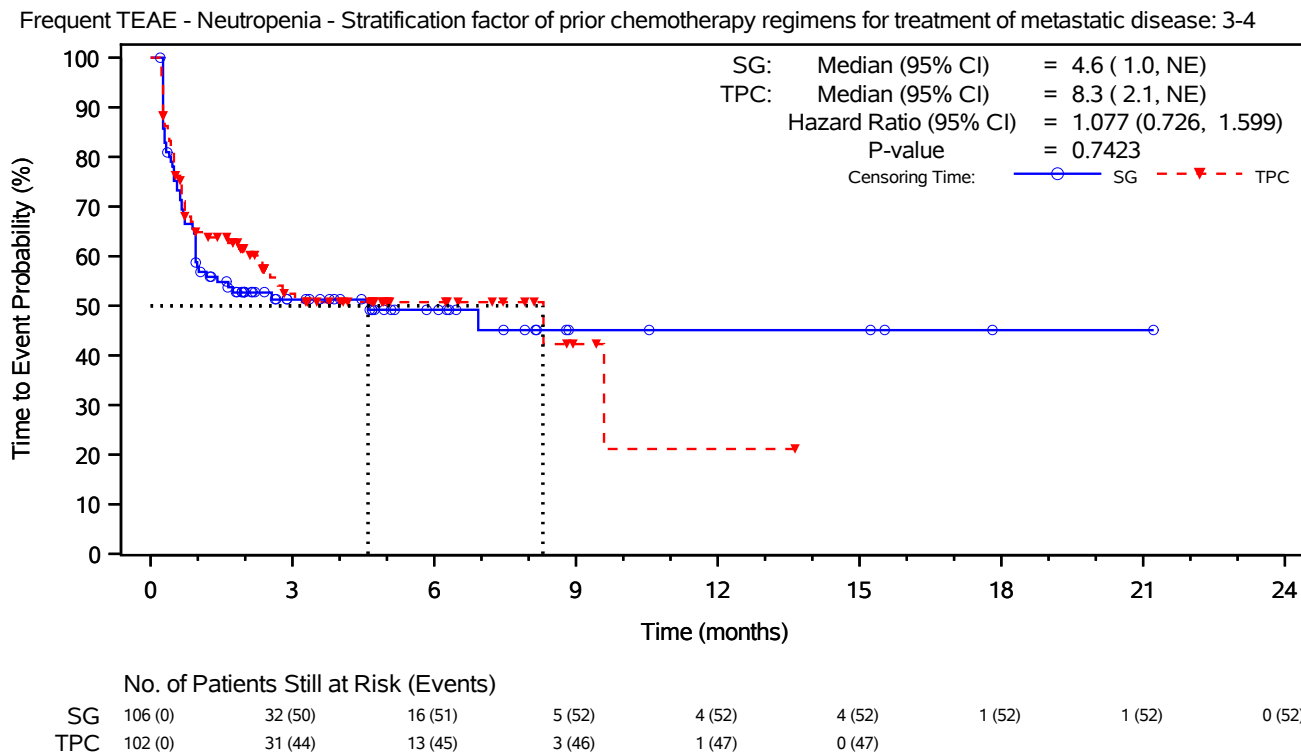
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.4.1: KM Plot for Time to the First >=Grade 3 Frequent TEAE by SOC, PT and Prior Chemotherapy for Treatment of Metastatic Disease  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

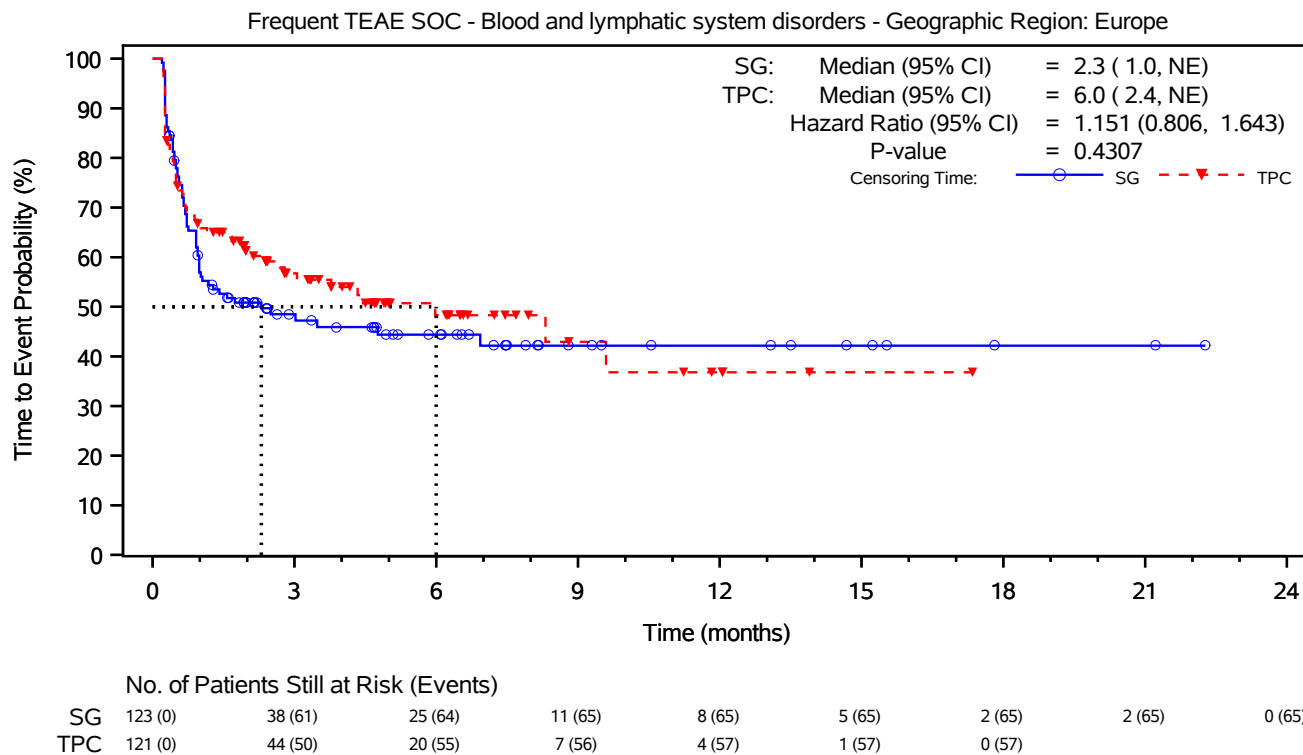
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

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Figure 15.11.7.4.2: KM Plot for Time to the First  $\geq$ Grade 3 Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

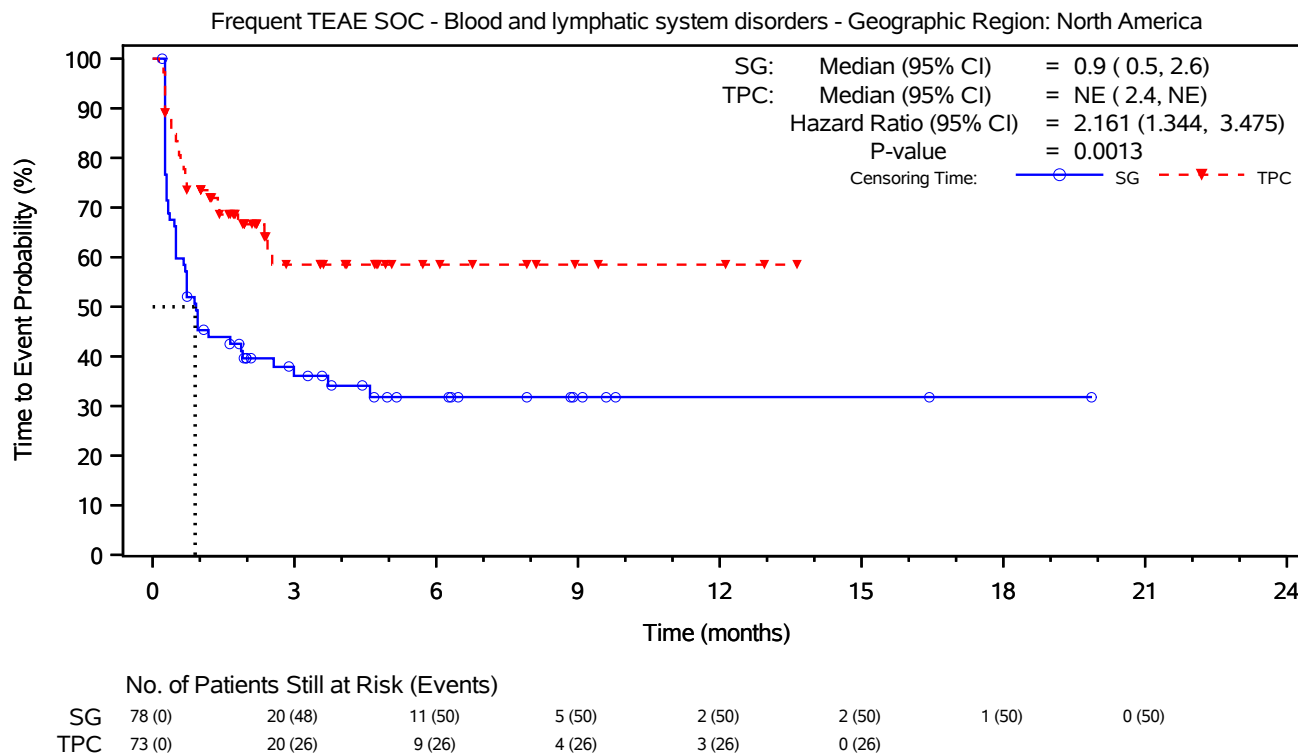
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

Source: .../germandossier/jan2023/prog/g-km-ttae-frq-subgrp.sas v9.4 Output file: g-ttae-g34-frq-subgrp-exg2.pdf 12MAY2023:11:20

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Figure 15.11.7.4.2: KM Plot for Time to the First  $\geq$ Grade 3 Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

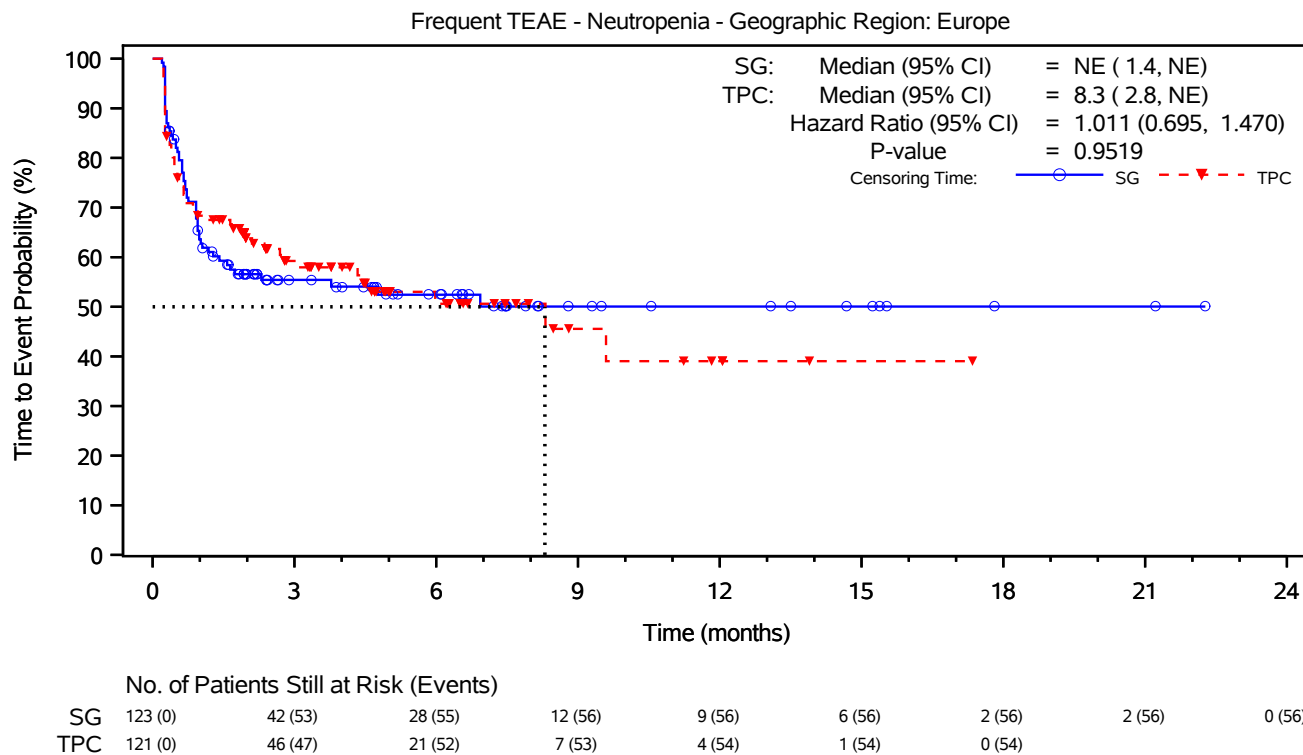
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.4.2: KM Plot for Time to the First  $\geq$ Grade 3 Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

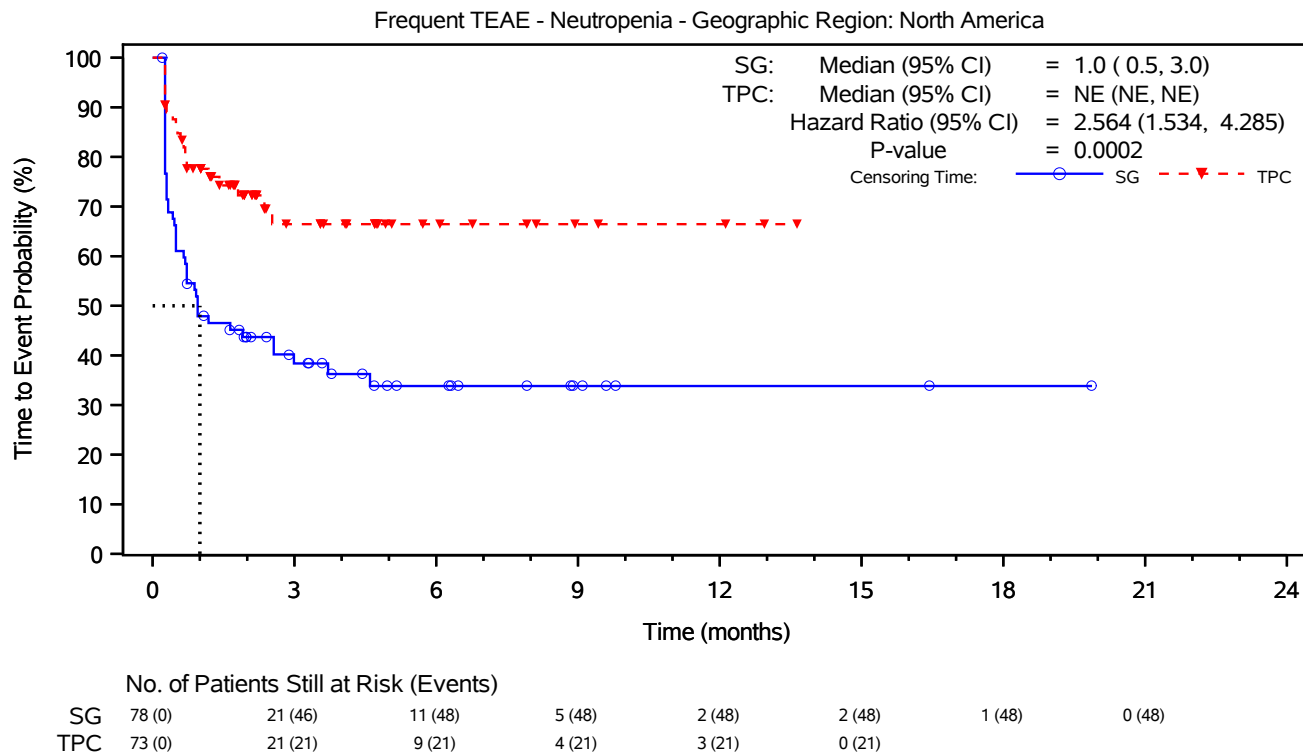
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.4.2: KM Plot for Time to the First  $\geq$ Grade 3 Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

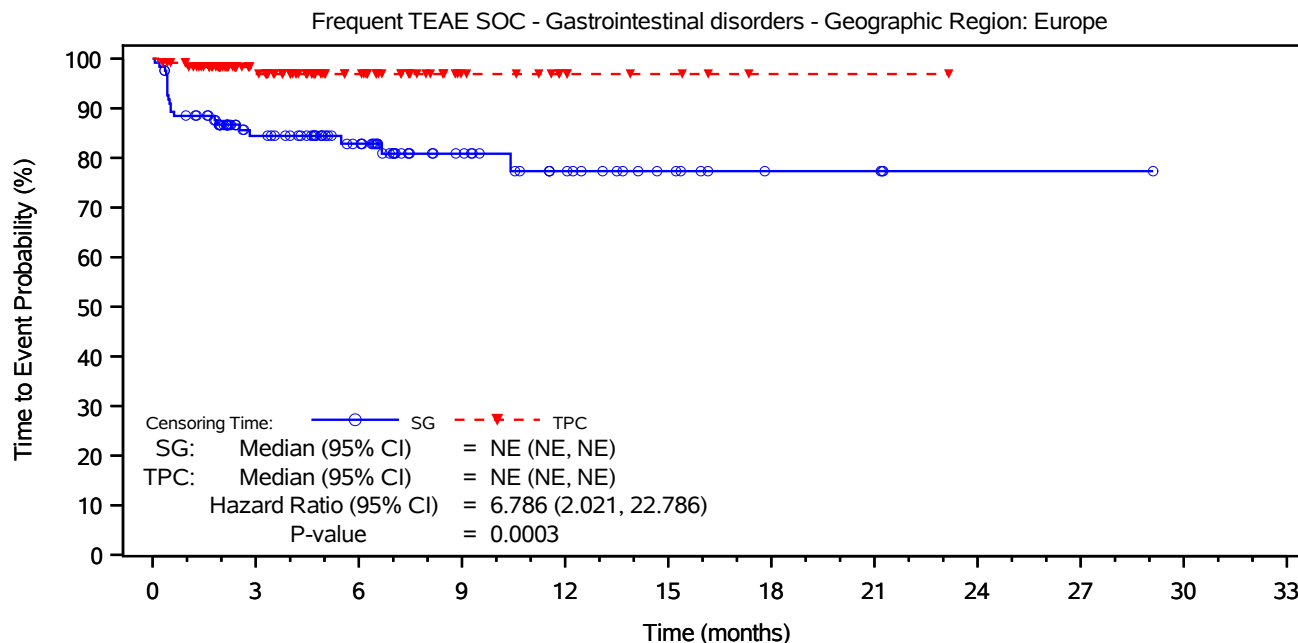
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.4.2: KM Plot for Time to the First >=Grade 3 Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)										
	0	3	6	9	12	15	18	21	24	27	30
SG	123 (0)	73 (18)	51 (19)	27 (20)	17 (21)	9 (21)	4 (21)	4 (21)	1 (21)	1 (21)	0 (21)
TPC	121 (0)	69 (3)	35 (3)	13 (3)	7 (3)	4 (3)	1 (3)	1 (3)	0 (3)		

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

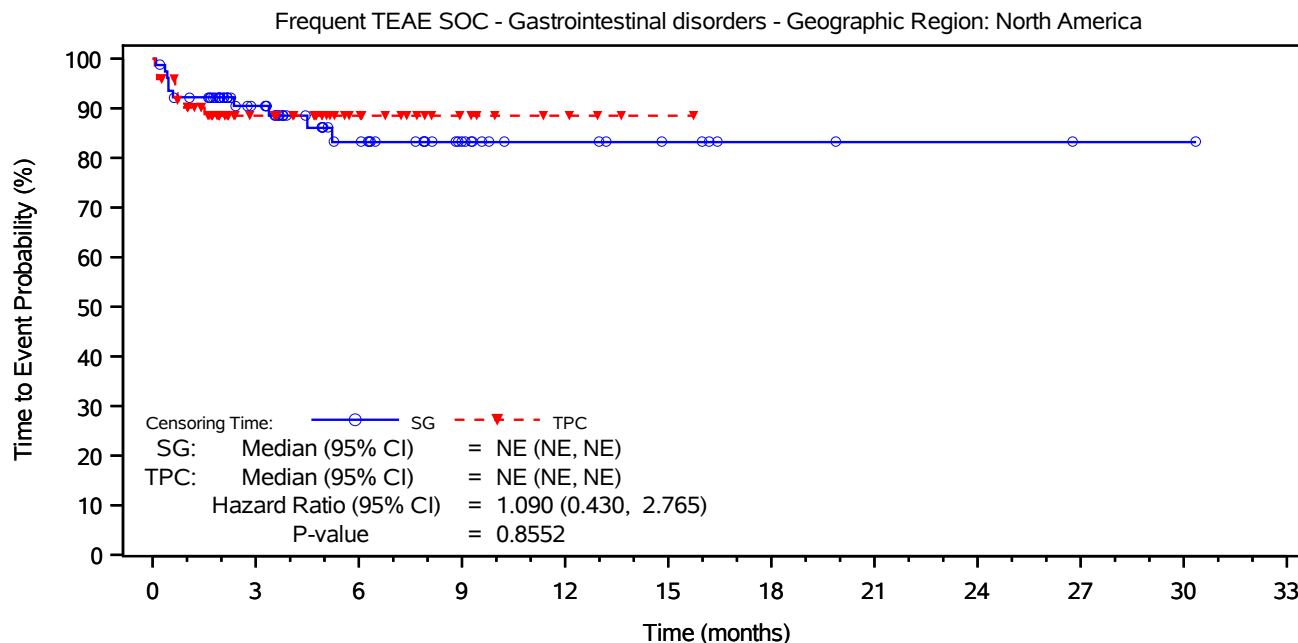
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.4.2: KM Plot for Time to the First >=Grade 3 Frequent TEAE by SOC, PT and Geographic Region  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)											
	0	3	6	9	12	15	18	21	24	27	30	33
SG	78 (0)	49 (7)	28 (10)	16 (10)	9 (10)	6 (10)	3 (10)	2 (10)	2 (10)	1 (10)	1 (10)	0 (10)
TPC	73 (0)	34 (8)	18 (8)	8 (8)	4 (8)	1 (8)	0 (8)					

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

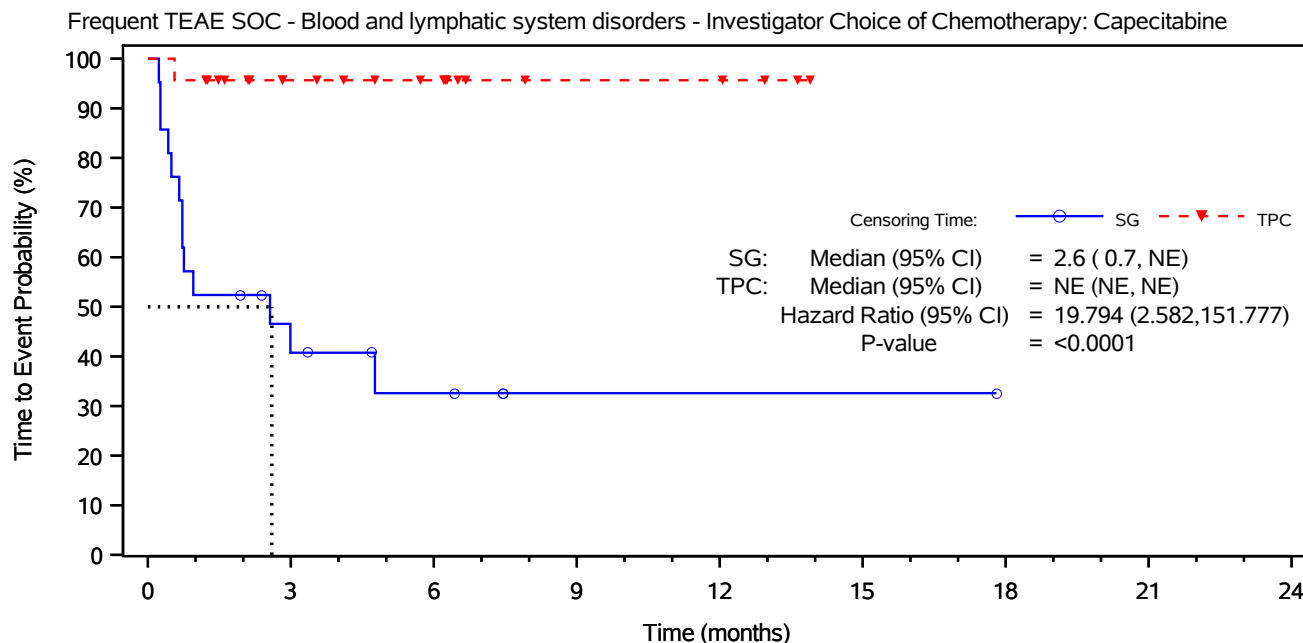
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Figure 15.11.7.4.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



	No. of Patients Still at Risk (Events)						
SG	21 (0)	7 (12)	4 (13)	1 (13)	1 (13)	1 (13)	0 (13)
TPC	23 (0)	14 (1)	10 (1)	4 (1)	4 (1)	0 (1)	

The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

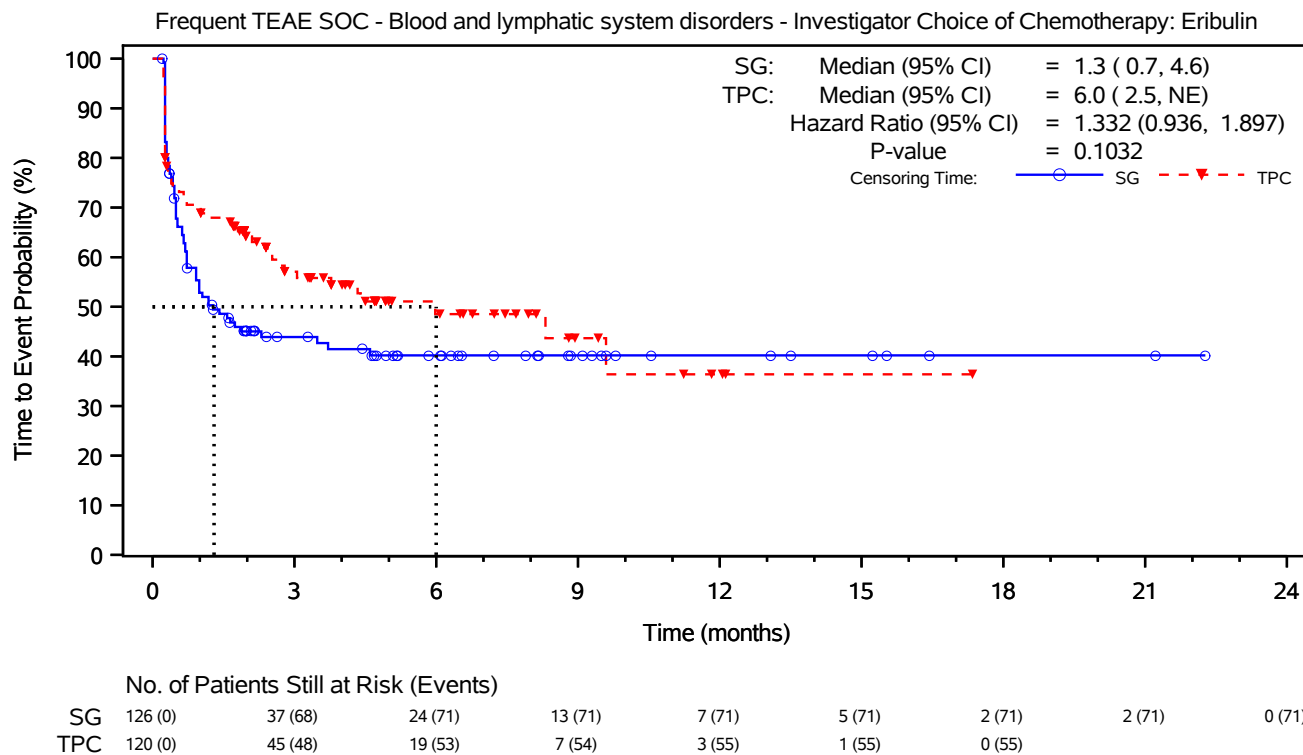
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.4.3: KM Plot for Time to the First  $\geq$ Grade 3 Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

NE = not estimable.

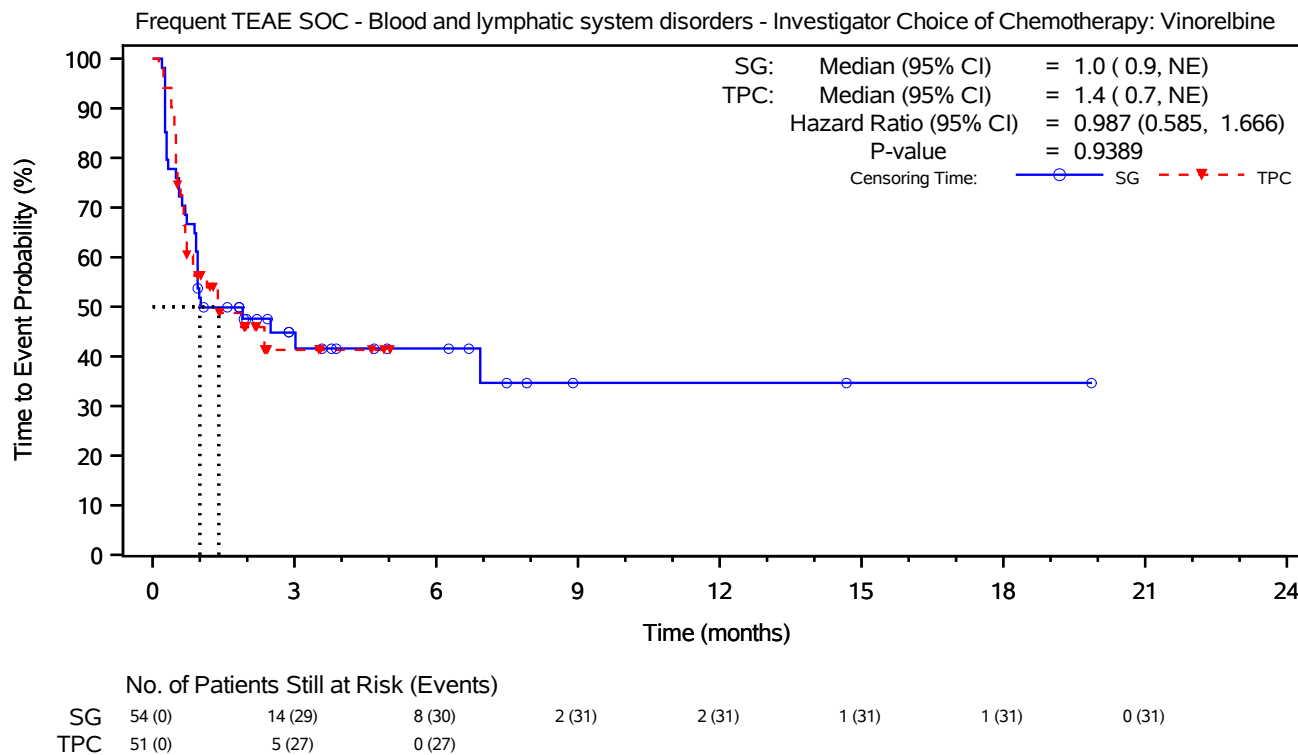
Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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Figure 15.11.7.4.3: KM Plot for Time to the First >=Grade 3 Frequent TEAE by SOC, PT and Investigator Choice of Chemotherapy Prior to Randomization  
Safety Population  
Excluding participants pre-selected to Gemcitabine



The analysis is based on Interim 2 data cut at 01Jul2022.

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Hazard ratios and CIs are from an unstratified Cox regression analysis. P-values are from an unstratified log-rank test.

Data Extracted: 28FEB2022, Data Cut Date 1 (PFS FA/OS IA1): 03JAN2022. Data Extracted: 09AUG2022, Data Cut Date 2 (SUR/OS IA2): 01JUL2022

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