NON INTERVENTIONAL STUDY STATISTICAL ANALYSIS REPORT (POST-MARKET CLINICAL FOLLOW-UP STUDY)

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The Performance and Safety of Petit Drill in the French Paediatric Population: a post-market clinical follow-up study

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Draft 1	v0.5	13/05/2025	New version CEN RNSR (after incorporating the changes requested by KIRR) with track changes
Draft 1	v0.6	13/05/2025	New version sent to CEN by Kalaivani RUHIER
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SOMMAIRE

1 ABBREVIATION

ADE	Adverse Device Effect
AE	Adverse Event
ANSM	*Agence Nationale de sécurité du médicament et des produits de santé*
BMI	Body Mass Index
CI	Confidence Interval
CIR	Clinical Investigation Report
CIP	Clinical Investigation Plan
CPP	Comité de Protection des Personnes
CRO	Clinical Research Organization
CSS	Cough Symptom Score
D0	The day before treatment initiation
D1	The first day of treatment initiation
D2	The second day of treatment initiation
D3	Third day of treatment
DD	Device Deficiencies
EC	Ethics Committee
eCRF	Electronic Case Report Form
FAS	Full Analysis Set
FDA	Food and Drug Administration
GCP	Good Clinical Practice
GDPR	General Data Protection Regulation
ICF	Informed Consent Form
IFU	Instructions for Use
MCID	Minimum Clinically Important Difference
MD	Medical Device
MDCG	Medical Device Coordination Group guidelines
MDR	Medical Device Regulation
MHRA	Medicines and Healthcare products Regulatory Agency
OTC	Over-the-Counter
PAC-QoL	Parent-proxy Children's Acute Cough-specific QoL Questionnaire
PCQ	Pediatric Cough Questionnaire
PI	Principal investigator of the site
PMCF	Post-Market Clinical Follow-up
PRO	Patient Reported Outcome
QoL	Quality of Life
QC	Quality Control
SAE	Serious Adverse Event

SADE	Serious Adverse Device Effect
SAP	Statistical Analysis Plan
SD	Standard Deviation
URTI	Upper Respiratory Tract Infection
VAS	Visual Analogue Scale
WHO	World Health Organisation

2 INTRODUCTION

This present document refers to the final statistical analysis report of the Touxpetit study Its objective is to present the results of all the pre-specified study objectives. This report has been produced in accordance with all the approved documents prior to the database lock, including:

- Synopsis Version 6.0, dated 06/02/2024.
- Protocol Version 6.0, dated 26/03/2024.
- Annotated CRF Version 3.0, one annotated eCRF for data collected in the Nurstrial application dated on 19/03/202 and one annotated eCRF for data collected in the ENNOV eCRF on 08/03/2024.
- Statistical Analysis Plan (SAP, v1.0 dated 31/03/2025).
- Data review report (DR, v1.0 dated 31/03/2025).

The data was reviewed on March 12th, 2025, and the database lock was performed in March 31st, 2025. The results presented in this document are reported in the following formats: tables, figures, and listings, all produced from the derived database. The TFLs were generated and edited using SAS version 9.4.

2.1 Study objectives

2.1.1 Primary objective

To assess the performance of the Petit Drill medical device in the treatment of throat irritation (sore throat) associated with dry cough in infants starting at 6 months of age and in children up to 6 years of age.

2.1.2 Secondary objectives

- SO1. To describe the clinical and sociodemographic characteristics of children using Petit Drill.

The following secondary objectives described the performance and clinical benefit of Petit Drill in terms of:

- SO2. Changes in nightly cough frequency, severity, bothersome for the child, and ability to sleep for child and parent(s) throughout the 3 day-treatment;
- SO3. Changes in daily cough severity;
- SO4. Evolution of Quality of life.

The following secondary objectives will describe the use and safety of Petit Drill:

- SO5. Adherence to use of Petit Drill Syrup;
- SO6. Parents' satisfaction with Petit Drill use;
- SO7. Safety of the Petit Drill medical device in infants aged from 6 months to children up to 6 years of age.

2.1.3 Exploratory objectives

- SO8. To describe the dispensing modalities of Petit Drill by age group;
- SO9. To describe the study objectives (except SO8) according to child's range of age.

2.2 Study methods

2.2.1 Study design

This is an observational, prospective French national, monocentric, single-arm, descriptive clinical investigation with pre-screened patients, for whom we have not to mandate or recommend any additional interventions or in-person visits. Patients continued to be treated as per routine practice.

2.2.2 Inclusion/exclusion criteria

The entry criteria have been chosen in such a way as to allow selection of the population targeted by Petit Drill when used for its intended purpose. These criteria also had to ensure that the study could be carried out effectively and that the regulations were complied with. Finally, most of exclusion criteria were supposed to limit confounding factor.
Criteria hereafter were necessary and sufficient to meet the objectives of this study.

2.2.2.1 Inclusion criteria

Children meeting the following inclusion criteria were included:

- IC1. Boys or girls, 6 months to 6 years of age;
- IC2. With one of his/her parents/legal guardian purchases Petit Drill in a participating pharmacy in accordance with recommendations for use (regarding age and type of cough);
- IC3. For infants between 6 months and 12 months of age – a confirmed prescription from a treating physician;
- IC4. With an acute cough lasting less than 48 hours
- IC5. With a score ≥ 3 at least for 3 of the 5 items of PCQ, (based on assessment of the night before inclusion);
- IC6. For whom child-minding will allow to respect the recommended daily doses* of Petit Drill during the 3 day-treatment;
- IC7. With a parent/legal guardian having a smartphone allowing using the ePRO App. NursTrial®;
- IC8. With a parent/legal guardian able to understand and to complete to the questionnaires in timely manner;
- IC9. With parent(s)/legal guardian who provide their signed informed consent for the child's enrolment in the study.

** 2-4 doses on D1, then 3 to 4 doses on D2 and D3, including one of the daily doses taken at bedtime.*

2.2.2.2 Exclusion criteria

Children meeting one of the following exclusion criteria were excluded:

- EC1. Presenting with one of the following conditions:
  - Chronic respiratory illness such as asthma, recurrent wheezing associated to viral infections and bronchitis;
  - Lower respiratory infections, such as bronchitis, bronchiolitis, and pneumonia;
  - Tonsillitis, otitis, or sinusitis;
  - Persistent cough lasting more than 3 weeks, whatever the etiology;
  - Gastrointestinal pathology, involving vomiting, nausea, or diarrhoea.
- EC2. With ongoing use of paracetamol, and/or homeopathic products against cough;
- EC3. Having had corticosteroid treatment, antibiotics, antihistaminic or any cough medication (such as, but not limited to, Phytoxil, Arkotoux) in the previous 15 days since inclusion;
- EC4. With a brother/sister already included in the present clinical investigation*;
- EC5. Enrolled in another clinical trial or being in a period of exclusion from a previous clinical trial.

** If several children were eligible in the same household, only one may was enrolled at random.*

2.2.3 Study populations

Pre-screen-failed/refusal register 1 (Pharmacist register): pre-screening log completed by the pharmacist for children not taking part in the study with the collection of the following data: age, sex and reason for non-inclusion to the investigation.

Screen-failed register 2 (Investigator register): pre-screening log will be completed by the investigator for children not taking part in the study including the following data: age, sex, reason for non-inclusion in the investigation, date of dry cough onset and the PCQ-score (based on the recall of the night prior inclusion).

Full Analysis Set (FAS) population*: The analysis population will consist of patients who have been included in this clinical investigation after fulfilling all eligibility criteria.

Safety population: The safety population will include all patients from the FAS population who have used Petit Drill at least once.

Performance population*: The performance population will consist of all patients from the safety population without any major deviation from the protocol** and for whom at least one evaluation of the primary outcome is available after treatment initiation (baseline and the last assessment) and whose parent(s) or legal guardian did not withdraw their consent at any time.

Note:
*FAS population refers to the analysis population and performance population refers to the evaluable population.
**Taking treatments prohibited by the protocol before and during the study was considered a major deviation.

2.2.4 Study subpopulations

2 subpopulations based on age were defined as follow:

- Patients aged from 6 months to 12 months old (12 included): [6 months -12 months];
- Patients aged from 12 (12 not included) months old to 6 years old:]12months – 6 years].

These two subpopulations will only be used to meet the exploratory objective SO8 of the protocol.

2.2.5 Subgroup definition

Age subgroup was defined as follow:

- Patients aged from 6 months to 24 months old (24 not included): [6 months – 24 months[;
- Patients aged from 24 months (24 included) old to 6 years old: [24 months – 6 years].

All the objectives except the exploratory objective SO8 were reproduced by age subgroup.

2.3 Statistical methodology

The statistical analysis to be conducted following the premature termination of the study, along with the derivation rules, are fully detailed in the final version of SAP dated on March 31st, 2025. The final analysis is exclusively descriptive.

The table below provides a summary of the analyses that were performed for the final analysis following the study's early termination.

Summary_Table 1: Analyses performed after premature study termination

Analyses performed	Scheduled TFLs (before the premature study termination)	Based on planned TFLs (1) or new TFLs (2)	Type of TFLs to be produced	TFLs performed (after the premature study termination)	Population concerned
Description of Study conduct (key dates/durations)	**Scheduled** _Table 1	1	Table	Table 1	Full analysis population
Children not pre-selected by pharmacists (Register 1) and not included by the investigator (Register 2)	**Scheduled** _Table 2 and **Scheduled** _Table 3	1 & 2	Table	Table 2 and Listing 1, Table 3 and listing 2	Full analysis population
Disposition of patients - Overall population	**Scheduled** _Table 4 and **Scheduled** _Figure 1	1	Table & Figure	Table 4 and Figure 1	Full analysis population
Disposition of patients - Subgroup and subpopulation	**Scheduled** _Table 7	1	Table	Table 5	Full analysis population
Disposition of patients - Patients included per geographical region and the follow-up duration	**Scheduled** _Table 5	1	Table	Table 6	Full analysis population
Disposition of patients - Excluded patients from populations	**Scheduled** _Listing 1 to **Scheduled** _Listing 3	1	Listing	Listing 3 to Listing 5	Full analysis population
Disposition of patients – Patient prematurely discontinued	**Scheduled_Table 6 and Scheduled** _Listing 4	1	Table and Listing	Table 7 and Listing 6	Full analysis population
Demographics and patients' characteristics	**Scheduled** _Table 8	1 & 2	Table and Listing	Table 8 and Listing 7	Full analysis population
Disease history at baseline - Associated symptoms with cough	**Scheduled _Table 9 and Scheduled** _Table 10	1 & 2	Table and Listing	Table 9 and Table 10 and Listing 8	Full analysis population
Medical history - pre-existing medical condition	**Scheduled _Table 11**	1 & 2	Table and Listing	Table 11 and Listing 9	Full analysis population
Prior treatment for ongoing cough	**Scheduled _Table 12 – 13, Scheduled** _Listing 5	1	Listing	Listing 10	Full analysis population
Ongoing concomitant treatment	**Scheduled _Table 14 – 15, Scheduled** _Listing 6	1	Listing	Listing 11	Full analysis population
All concomitant treatment during follow-up	**Scheduled _Table 16 – 17, Scheduled** _Listing 7	1	Listing	Listing 12	Full analysis population
Primary endpoint - Change in PCQ total score	**Scheduled _Table 22**	2	Listing and patient profile	Figure 2 and Listing 13	Performance population

Analyses performed	Scheduled TFLs (before the premature study termination)	Based on planned TFLs (1) or new TFLs (2)	Type of TFLs to be produced	TFLs performed (after the premature study termination)	Population concerned
Secondary outcome - PCQ items	**Scheduled _Table 23 to 29**	2	Ppatient profile	Figure 3	Performance population
Secondary outcome - Daily cough severity	**Scheduled _Table 30 to 33**	2	Listing and patient profile	Figure 4 and Listing 14	Performance population
Secondary outcome - Change in PAC-QoL total score	**Scheduled _Table 34**	2	Listing and patient profile	Figure 5 and Listing 15	Performance population
Secondary outcome - PAC-QoL items	**Scheduled _Table 35**	2	Patient profile	Figure 6	FAS population
Secondary outcome - Adherence	**Scheduled _Table 36**	2	Listing	Listing 16	FAS population
Secondary outcome - Satisfaction questionnaire	**Scheduled _**Table 37	1 & 2	Table and listing	Table 12 and Listing 17	Full analysis population
Secondary outcome - Summary of adverse events	**Scheduled _**Table 38 to 48	1	Table	Table 13 (first part of the scheduled table 38, until Number of ADE per patient related to device)	Safety population
Secondary outcome - all AEs	**Scheduled _**Listing 8 to 9	1	Listing	Listing 18	Safety population
Secondary outcome - Device deficiencies	**Scheduled _**Table 49	1	Table	Table 14	Safety population

3 INDEX

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4 RESULTS

The tables, figures and listings presented below are based on the database extracted on April 1st, 2025, following the database lock performed on March 31st, 2025. All content in Part 7 has been produced in accordance with the Statistical Analysis Plan, signed on March 31st, 2025.

The study spanned a period of almost 10 months, from March 9th to December 31th, 2024, corresponding to the pre-screening of the first patient and the cut-off date, given to the 45 pharmacies actively participating in the study, for inclusions, with recruitment taking place over 8 months within that period and with an effective study duration of 8-month (between March 14, 2024 and November, 7th, 2024).
Remote inclusion visits were coordinated with an investigator, based at the clinical investigation site CEN Experimental, the first patient being included on March 14, 2024.
Remote follow-up of the patients lasted up to 4 days. The last patient's last visit took place on November 7th, 2024.

4.1 Description of Study Conduct

Table 1 : Description of Study conduct (key dates/durations)

Key dates/durations at data extraction (01/04/2025)	
First patient in (FPI)	**14/03/2024**
Last patient in (LPI)	**06/11/2024**
Duration of inclusion period[1]	**8 months**
Last patient last visit (LPLV)	**07/11/2024**
Duration of study[2]	**8 months**

[1]*Date of LPI – Date of FPI.*
[2]*Date of LPLV – Date of FPI.*
The recruitment was opened till 31st of December but no patient included in December

4.2 Children not pre-selected by pharmacists (Register 1) and not included by the investigator (Register 2)

Table 2 : Children not pre-selected by pharmacists (Register 1) (n=54)

Number of children not pre-selected by pharmacists	Parameter	N_{R1} = 54
	N	54
	Missing	0
	<6 months	6 (11.1%)
Age	[6 - 12] months	19 (35.2%)
	]12 - 24] months	16 (29.6%)
	]2 - 6] years	12 (22.2%)
	>6 years	1 (1.9%)
Sex	N	54
	Missing	0
	Boy	23 (42.6%)
	Girl	31 (57.4%)
Main reasons for non-participation		N (%)*
Taking treatment(s) prohibited in the study		3 (5.6%)
Associated pathology(ies) excluded from the study		4 (7.4%)
Acute dry cough > 48 hours		5 (9.3%)
Without prescription of the syrup for an infant aged 6 to 12 months		3 (5.6%)
Refusal of parent/legal guardian to participate in the study		34 (63%)
Age		7 (13%)
Other reason		3 (5.6%)
Reason for refusal by parent or legal representative (n=34)		
Refused data collection		2 (5.9%)
Does not have time		15 (44.1%)
Not interested		17 (50%)

*The total may exceed 100% if a patient has more than one reason for non-participation.

Listing 1: Patients not pre-selected by pharmacists* (Register 1) n=54

Pharmacist ID	Child ID	Child age (ENG)	Child sex (ENG)	Reason if other reason (ENG)	Details of parental refusal (ENG)
32	450	]12 - 24] months	Girl	Acute dry cough > 48 hours	
32	454	]12 - 24] months	Girl	Other reason: 1 single dose in the evening	
32	466	]12 - 24] months	Girl	Acute dry cough > 48 hours	
76	541	]12 - 24] months	Boy	Refusal of parent/legal guardian to participate in the study	Not interested
64	641	]2 - 6] years	Boy	Refusal of parent/legal guardian to participate in the study	Does not have time
88	693	[6 - 12] months	Girl	Acute dry cough > 48 hours	
27	722	<6 months	Boy	Taking treatment(s) prohibited in the study and Age greater than 6 years old	
38	741	]12 - 24] months	Boy	Refusal of parent/legal guardian to participate in the study	Does not have time
104	774	]12 - 24] months	Boy	Refusal of parent/legal guardian to participate in the study	Does not have time
76	777	]12 - 24] months	Boy	Refusal of parent/legal guardian to participate in the study	Not interested
104	780	[6 - 12] months	Boy	Refusal of parent/legal guardian to participate in the study	Not interested
76	812	]12 - 24] months	Girl	Refusal of parent/legal guardian to participate in the study	Not interested
104	833	[6 - 12] months	Boy	Refusal of parent/legal guardian to participate in the study	Not interested
76	841	]2 - 6] years	Girl	Refusal of parent/legal guardian to participate in the study	Not interested
178	856	[6 - 12] months	Boy	Taking treatment(s) prohibited in the study	
93	861	]12 - 24] months	Girl	Refusal of parent/legal guardian to participate in the study	Not interested
93	884	]2 - 6] years	Boy	Taking treatment(s) prohibited in the study	
42	915	[6 - 12] months	Girl	Associated pathology(ies) excluded from the study	
40	918	]12 - 24] months	Girl	Refusal of parent/legal guardian to participate in the study	Not interested
151	941	]2 - 6] years	Girl	Refusal of parent/legal guardian to participate in the study	Not interested
151	943	]12 - 24] months	Boy	Refusal of parent/legal guardian to participate in the study	Not interested
102	954	]2 - 6] years	Girl	Refusal of parent/legal guardian to participate in the study	Does not have time

Pharmacist ID	Child ID	Child age (ENG)	Child sex (ENG)	Reason if other reason (ENG)	Details of parental refusal (ENG)
102	956	>6 years	Girl	Age greater than 6 years old	
102	959	]2 - 6] years	Boy	Refusal of parent/legal guardian to participate in the study	Does not have time
151	986	[6 - 12] months	Girl	Refusal of parent/legal guardian to participate in the study	Does not have time
178	989	[6 - 12] months	Boy	Refusal of parent/legal guardian to participate in the study	Does not have time
77	994	[6 - 12] months	Girl	Refusal of parent/legal guardian to participate in the study	Does not have time
77	996	[6 - 12] months	Boy	Refusal of parent/legal guardian to participate in the study	Not interested
77	998	<6 months	Girl	Refusal of parent/legal guardian to participate in the study and Age greater than 6 years old	Does not have time
178	1004	[6 - 12] months	Girl	Refusal of parent/legal guardian to participate in the study	Does not have time
165	1021	[6 - 12] months	Girl	Refusal of parent/legal guardian to participate in the study	Does not have time
165	1023	[6 - 12] months	Boy	Refusal of parent/legal guardian to participate in the study	Does not have time
165	1047	<6 months	Girl	Age	
126	1075	]12 - 24] months	Girl	Associated pathology(ies) excluded from the study	
126	1077	]12 - 24] months	Girl	Associated pathology(ies) excluded from the study	
3	1137	[6 - 12] months	Girl	Refusal of parent/legal guardian to participate in the study	Not interested
6	1164	]2 - 6] years	Boy	Refusal of parent/legal guardian to participate in the study	Does not have time
40	1166	[6 - 12] months	Boy	Refusal of parent/legal guardian to participate in the study	Not interested
178	1201	]2 - 6] years	Boy	Associated pathology(ies) excluded from the study	
53	1224	]2 - 6] years	Girl	Refusal of parent/legal guardian to participate in the study	Not interested
43	1231	]12 - 24] months	Boy	Refusal of parent/legal guardian to participate in the study	Refused data collection
53	1243	[6 - 12] months	Boy	Refusal of parent/legal guardian to participate in the study	Does not have time
53	1246	[6 - 12] months	Girl	Acute dry cough > 48 hours	
42	1265	<6 months	Boy	Acute dry cough > 48 hours and Age greater than 6 years old	
60	1268	<6 months	Girl	Without prescription of the syrup for an infant aged 6 to 12 months and Age greater than 6 years old	
60	1270	]2 - 6] years	Boy	Refusal of parent/legal guardian to participate in the study	Does not have time

Pharmacist ID	Child ID	Child age (ENG)	Child sex (ENG)	Reason if other reason (ENG)	Details of parental refusal (ENG)
60	1272	]12 - 24] months	Girl	Without prescription of the syrup for an infant aged 6 to 12 months	
60	1275	[6 - 12] months	Girl	Refusal of parent/legal guardian to participate in the study	Not interested
60	1278	]12 - 24] months	Boy	Refusal of parent/legal guardian to participate in the study	Not interested
60	1280	[6 - 12] months	Girl	Refusal of parent/legal guardian to participate in the study	Not interested
38	1284	[6 - 12] months	Girl	Without prescription of the syrup for an infant aged 6 to 12 months	
65	1290	]2 - 6] years	Girl	Refusal of parent/legal guardian to participate in the study	Refused data collection
65	1296	]2 - 6] years	Girl	Other reason: Pharmacy visit on a Saturday	
53	1299	<6 months	Girl	Age greater than 6 years old and Other reason: Pharmacy visit on a Saturday	

*The listing above has been sorted according to the Child ID column

52 children referred by pharmacists were not included in the study:

- **32** for study logistics reasons:
  - **9** out of time (weekends or after 6pm)
  - **23** parents were unreachable
- **20** children not meeting selection criteria
  - **10** are not in the ENNOV database (contacted upstream by our operators (TEC) before transmission to the PI)
    - 2 children were under 12 months of age and did not have a prescription
    - 1 child had had a cough for more than 48 hours
    - 3 children were taking or had taken a prohibited treatment in the last 15 days
    - 2 parents no longer wished to participate following a call from the investigating physician
    - 1 parent was not available for the doctor's call
    - 1 parent for whom the syrup had been dispensed 3 days before the form was completed
  - **10** are in the ENNOV database (contacted directly by the PI) (see the characteristics of the 10 children in the following tables):
    - 4 due to PCQ score criteria
    - 3 children were over 6 years old
    - 3 children were under 12 months of age and did not have a prescription

ENNOV database: number of children not included by principal investigator (after the telephone appointment): 10

The characteristics of the 10 children in the ENNOV database are described below:

Table 3 : Children not included by principal investigator (Register 2) (n=10)

Number of children not included by principal investigator		**N_{R2}=10**
Age (year)	N	10
	Missing	0
	Mean (± SD)	4.9 ± 4.5
	Median	3.8
	Q1-Q3	0.9 - 8.5
	Min – Max	0.6 - 13.8
Sex	N	10
	Missing	0
	Boy	4 (40%)
	Girl	6 (60%)
PCQ total score before inclusion	N	4
	Missing	6
	Mean (± SD)	8.3 ± 2.1
	Median	8.5
	Q1-Q3	6.5 - 10
	Min – Max	6 - 10

		%*
Do not meet eligibility criteria	N	Not all criteria are filled by the IP. In most cases, the IP stopped at the first criterion not met. The percentage can therefore not be presented.
Boys or girls aged less than 6 months or more than 6 years of age	4	**ID103** ID 107 ID 117 ID 122
With one of his/her parents/legal guardian having purchased Petit Drill in a pharmacy not participating in the study	0	
No confirmed prescription from a treating physician for infants between 6 months and 12 months of age	3	ID104 ID 110 ID 120
No acute dry cough lasting less than 48 hours	0	
With a score ≥ 3 for less than 3 of the 5 PCQ questions (based on assessment the night prior to inclusion)	4	ID 101 **ID 103** ID 119 ID 131
No respect of the recommended daily doses* of Petit Drill during the 3 day-treatment despite child-minding	0	
None of the parents/legal guardian have a smartphone allowing using the ePRO App. NursTrial®	0	
None of the parent/legal guardian is able to understand and to complete the questionnaires	0	
No signed informed consent for the child's enrolment in the study from any parent(s)/legal guardian	0	
Presenting: Chronic respiratory illness such as asthma, recurrent wheezing associated to viral infections and bronchitis; Lower respiratory infections, such as bronchitis, bronchiolitis, and pneumonia; Tonsillitis, otitis, or sinusitis; Persistent cough lasting more than 3 weeks, whatever the etiology; Gastrointestinal pathology, involving vomiting, nausea, or diarrhea;	0	
With ongoing use of paracetamol, and/or homeopathic products against cough	0	
Having had corticosteroid treatment, antibiotics, antihistaminic or any cough medication (such as, but not limited to, Phytoxil, Arkotoux) in the previous 15 days since inclusion	0	
With a brother/sister already included in the present clinical investigation	0	
Enrolled in another clinical trial or being in a period of exclusion from a previous clinical trial.	0	

*Not all criteria were filled in by the PI. In most cases, the PI stopped at the first criterion not met. The percentage can therefore not be presented.
In bold, patient 103 for whom 2 inclusion criteria are not met

Listing 2: Patients not included by principal investigator (Register 2) (n=10)

Patient Number	Age (years)	Sex	Main reasons for non-inclusion	PCQ total score before inclusion	Prescription
6D9E.101	2.5	Girl	IC5 not respected: With a score greater than 3 or equal to 3 for less than 3 of the 5 PCQ questions (based on assessment the night prior to inclusion)	2;1;1;1;1=6	.
6D9E.103	6.9	Boy	IC1 not respected: Boys or girls aged less than 6 months or more than 6 years of age AND IC5 not respected: With a score greater than 3 or equal to 3 for less than 3 of the 5 PCQ questions (based on a	2;1;1;2;1=7	.
6D9E.104	0.7	Girl	IC3 not respected: No confirmed prescription from a treating physician for infants between 6 months and 12 months of age		No
6D9E.107	8.5	Girl	IC1 not respected: Boys or girls aged less than 6 months or more than 6 years of age		.
6D9E.110	0.6	Girl	IC3 not respected: No confirmed prescription from a treating physician for infants between 6 months and 12 months of age		No
6D9E.117	8.9	Boy	IC1 not respected: Boys or girls aged less than 6 months or more than 6 years of age		.
6D9E.119	5.1	Boy	IC5 not respected: With a score greater than 3 or equal to 3 for less than 3 of the 5 PCQ questions (based on assessment the night prior to inclusion)	2;2;2;2;2=10	.
6D9E.120	0.9	Girl	IC3 not respected: No confirmed prescription from a treating physician for infants between 6 months and 12 months of age		No
6D9E.122	13.8	Girl	IC1 not respected: Boys or girls aged less than 6 months or more than 6 years of age		.
6D9E.131	1	Boy	IC5 not respected: With a score greater than 3 or equal to 3 for less than 3 of the 5 PCQ questions (based on assessment the night prior to inclusion)	2;2;2;2;2=10	.

4.3 Disposition of patients

Table 4 : Disposition of patients – FAS population

		FAS population N=12
FAS population[1]	Yes	12
Reason for exclusion from the FAS population	Do not meet eligibility criteria	N=0 - 0.0% [4]
Safety population[2]	Yes	12 (100%)
	No	0 (0.0%)
If no, Reason for exclusion from the safety population	Children who have never taken the syrup	NA
Performance population[3]	Yes	7 (58.3%)
	No	5 (41.7%)
If no, Reason for exclusion from the performance population	Patients lost to follow-up	0 (0.0%)
	Patients who discontinued the treatment	1 (20.0%)
	Patients no evaluation for the primary endpoint	0 (0.0%)
	Taking treatment(s) prohibited in the study	4 (80.0%)

[1]Full Analysis Set (FAS) population: The analysis population will be those patients who have been included in this clinical investigation after fulfilling all selection criteria.
[2]Safety population: The safety population will be made up of all patients from the FAS population who have used Petit Drill at least once.
[3]Performance population: The performance population will be made up of all patients from the safety population for whom at least one evaluation of the primary outcome is available (baseline and the last assessment) and whose parent(s) or legal guardian did not withdraw their consent at any time.
[4] No patients were excluded from the FAS population.

Table 5 : Subgroup and subpopulation – FAS population

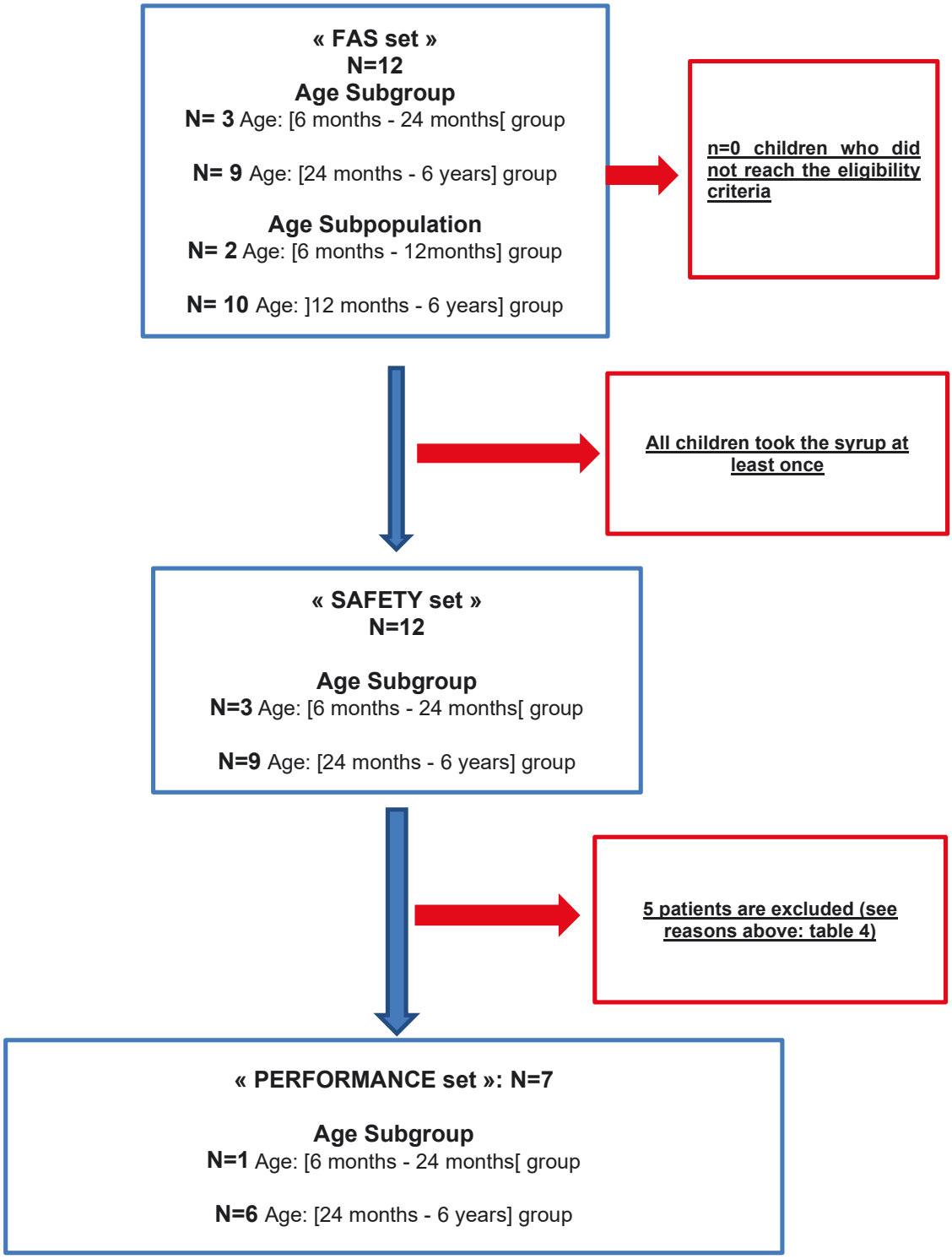
Age subpopulation/ Age subgroup		**All patients (FAS)** N=12
Age subpopulation	N	12
	Missing	0
	[6 months – 12 months]	2 (16.7%)
	]12 months – 6 years]	10 (83.3%)
Age subgroup	N	12
	Missing	0
	[6 months – 24 months[	3 (25%)
	[24 months – 6 years]	9 (75%)

Table 6 : Disposition of patients -Number of patients included per region and follow-up duration– FAS population

		FAS population N=12
Geographic region	N	12
	Missing	0
	Auvergne-Rhône-Alpes	0 (0.0%)
	Bourgogne-Franche-Comté	1 (8.3%)
	Bretagne	0 (0.0%)
	Centre-Val de Loire	1 (8.3%)
	Corse	0 (0.0%)
	Grand Est	3 (25.0%)
	Hauts-de-France	2 (16.7%)
	Île-de-France	0 (0.0%)
	Normandie	0 (0.0%)
	Nouvelle-Aquitaine	3 (25.0%)
	Occitanie	2 (16.7%)
	Pays de la Loire	0 (0.0%)
	Provence-Alpes-Côte d'Azur	0 (0.0%)
Follow-up duration (days)[1]	N	12
	Missing	0
	Mean (± SD)	3.6 ± 0.8
	Median	4
	Q1-Q3	3.5 - 4
	Min – Max	2 - 4

[1]- Duration of study: Date of study end – Date of inclusion

Figure 1: Disposition of patients: Flow chart



Listing 3: Patients excluded from FAS population (N=0)

Patient Number	FAS population	Region	Forbidden treatments at inclusion	Age (years)	Sex	Reason for exclusion	Date of inclusion
XX-XX	No						

Listing 4: Patients excluded from the Safety population (N=0)

Patient Number	Safety population	Region	Forbidden treatments at inclusion	Age (years)	Sex	Reason for exclusion	Date of inclusion
XX-XX	No						

Listing 5: Patients excluded from the Performance population (N=5)

Subject ID	Presence of the patient in the PERFORMANCE population	Region	Age calculated in years	Sex (D1)	Reason for exclusion from the PERFORMANCE population	Date of inclusion
6D9E.109	No	Grand Est	1.5	Girl	Taking treatment(s) prohibited in the study (baseline): VENTOLINE	25/03/2024
6D9E.111	No	Nouvelle-Aquitaine	2.3	Girl	Taking treatment(s) prohibited in the study (during the follow-up): CELESTENE + TUSSIDANE	28/03/2024
6D9E.127	No	Grand Est	5.6	Girl	Taking treatment(s) prohibited in the study (during the follow-up): DOLIPRANE + PIVALONE	02/10/2024
6D9E.133	No	Grand Est	0.7	Boy	Taking treatment(s) prohibited in the study (started one day before D1): DOLIPRANE	04/11/2024
6D9E.134	No	Hauts-de-France	2.1	Girl	Patient with tonsillitis: Syrup taken for only one day before diagnosis of tonsillitis (D2), Syrup taken only on the day of inclusion: D1	06/11/2024

Table 7 : Patients prematurely discontinued from the study – FAS population

Patients prematurely discontinued from the study		N/% (according to FAS population)
Number and percentages of patients prematurely discontinued from the study	**Yes**	3 (25.0%)
	No	9 (75.0%)
	Missing	0
Reasons for premature discontinuation*		
	Serious/non-serious adverse event leading to the discontinuation of Petit Drill	1 (33.3%)
	Decision of parent/legal representative	0 (0.0%)
	Withdrawal of consent	0 (0.0%)
	Premature discontinuation of Petit Drill syrup	1 (33.3%)
	Lost to follow-up	2 (66.7%)
	Other reason for premature discontinuation	0 (0.0%)
	Missing	0

*The total may exceed 100%, if a patient has more than one reason reasons for premature discontinuation. 3 patients and 4 reasons (patient with 2 reasons) patient 134

Listing 6: Patients who discontinued prematurely the study from FAS population (N=3)

Subject ID	Presence of the patient in the FAS population	Presence of the patient in the SAFETY population	Presence of the patient in the PERFORMANCE population	Region	Treatments at baseline	Age calculated in years	Sex	Reason for who discontinued prematurely the study	Date of inclusion	Date withdrawal	Follow-up duration (days)
6D9E.109	Yes	Yes	No	Grand Est	VENTOLINE	1.5	Girl	Lost to follow-up	25/03/2024	27/03/2024	2
6D9E.112	Yes	Yes	Yes	Nouvelle-Aquitaine		3.0	Boy	Lost to follow-up	28/03/2024	01/04/2024	4
6D9E.134	Yes	Yes	No	Hauts-de-France		2.1	Girl	Serious/non-serious adverse event leading to the discontinuation of Petit Drill and Premature discontinuation of Petit Drill syrup	06/11/2024	07/11/2024	2

[1]- Duration of study: Date of study end – Date of inclusion

4.4 Clinical and sociodemographic characteristics of children using Petit Drill (FAS population)

4.4.1 Baseline demographics (FAS population)

Table 8 : Demographic and patient's characteristics at baseline – FAS population

		All patients (FAS)
		N=12
Age[1] (years)	N	12
	Missing	0
	Mean (± SD)	3.1 ± 1.9
	Median	2.7
	Q1-Q3	1.8 - 4.8
	Min – Max	0.7 - 6
Age (months)	N	12
	Missing	0
	Mean (± SD)	37.6 ± 22.4
	Median	31.9
	Q1-Q3	22 - 57.7
	Min – Max	8.1 - 71.7
Age subgroup	N	12
	Missing	0
	[6 months – 24 months[	3 (25%)
	[24 months – 6 years]	9 (75%)
Sex	N	12
	Missing	0
	Boy	5 (41.7%)
	Girl	7 (58.3%)
Weight (kg)	N	12
	Missing	0
	Mean (± SD)	15.5 ± 4.2
	Median	13.8
	Q1-Q3	12.5 - 20
	Min – Max	9.9 - 22
Height (cm)	N	12
	Missing	0
	Mean (± SD)	96.9 ± 13.8
	Median	95
	Q1-Q3	87.5 - 107
	Min – Max	75 - 120

BMI (kg/m²)[2]	N	12
	Missing	0
	Thinness	0 (0.0%)
	Normal	11 (91.7%)
	Overweight	1 (8.3%)
	Obese	0 (0.0%)
	N	12
	Missing	0
	Mean (± SD)	16.4 ± 1.6
	Median	16.3
	Q1-Q3	15.5 - 17.5
	Min – Max	13.8 - 19.2
Total number of children in the family (siblings)	N	12
	Missing	0
	Mean (± SD)	2.1 ± 0.9
	Median	2
	Q1-Q3	1.5 - 2.5
	Min – Max	1 - 4
Rank among siblings	N	12
	Missing	0
	Only child	3 (25%)
	1	4 (33.3%)
	2	2 (16.7%)
	3	2 (16.7%)
	4 and +	1 (8.3%)

1 – Age: Date of inclusion – Date of Birth.
2 – BMI: calculating with the corpulence diagram

Listing 7: Demographic and patient's characteristics at baseline – FAS population (n=12)

Subject ID	Presence of the patient in the FAS population	Presence of the patient in the SAFETY population	Presence of the patient in the PERFORMANCE population	Region	Date of inclusion	Age calculated in years	Age subgroup	Sex	Weight	Height	Body mass index (in classes)	Number of children in the family (Siblings)	Rank among siblings
6D9E.102	Yes	Yes	Yes	Hauts-de-France	14/03/2024	5.3	[24 months – 6 years]	Girl	21	117	Normal	2	1
6D9E.109	Yes	Yes	No	Grand Est	25/03/2024	1.5	[6 months – 24 months[	Girl	14	88	Normal	3	3
6D9E.111	Yes	Yes	No	Nouvelle-Aquitaine	28/03/2024	2.3	[24 months – 6 years]	Girl	13	97	Normal	4	4 and more
6D9E.112	Yes	Yes	Yes	Nouvelle-Aquitaine	28/03/2024	3.0	[24 months – 6 years]	Boy	12	87	Normal	2	1
6D9E.113	Yes	Yes	Yes	Nouvelle-Aquitaine	28/03/2024	4.3	[24 months – 6 years]	Boy	22	107	Overweight	2	1
6D9E.114	Yes	Yes	Yes	Centre-Val de Loire	29/03/2024	3.9	[24 months – 6 years]	Girl	16	100	Normal	2	1
6D9E.116	Yes	Yes	Yes	Occitanie	03/04/2024	0.7	[6 months – 24 months[	Boy	11.4	82	Normal	1	Only child
6D9E.118	Yes	Yes	Yes	Bourgogne-Franche-Comté	04/04/2024	6.0	[24 months – 6 years]	Girl	20	107	Normal	3	3
6D9E.127	Yes	Yes	No	Grand Est	02/10/2024	5.6	[24 months – 6 years]	Girl	20	120	Normal	2	2
6D9E.129	Yes	Yes	Yes	Occitanie	14/10/2024	2.2	[24 months – 6 years]	Boy	13.5	90	Normal	2	2
6D9E.133	Yes	Yes	No	Grand Est	04/11/2024	0.7	[6 months – 24 months[	Boy	9.9	75	Normal	1	Only child
6D9E.134	Yes	Yes	No	Hauts-de-France	06/11/2024	2.1	[24 months – 6 years]	Girl	13.5	93	Normal	1	Only child

4.4.2 Disease history at baseline (FAS population)

Table 9 : Acute dry cough diagnosis - FAS population

		FAS Population (N=12)
Acute dry cough diagnosis: Time between date of onset of acute dry cough symptoms and date of inclusion (days)	N	12
	Missing	0
	Mean (± SD)	1.5 ± 0.7
	Median	2
	Q1-Q3	1 - 2
	Min – Max	0 - 2
Acute dry cough diagnosis in categories	< 1 day	1 (8.3%)
	[1 – 2 days]	11 (91.7%)

Table 10 : Associated symptoms with cough at baseline – FAS population

		FAS Population (N=12)
Patients with at least one associated symptom with cough	N	12
	No	3 (25%)
	Yes	9 (75%)
Number of associated symptoms with cough	N	9
	Missing	0
	Mean (± SD)	1.4 ± 0.7
	Median	1
	Q1-Q3	1 - 1
	Min – Max	–1 - 3
Number of associated symptoms with cough in category	N	9
	Missing	0
	0	0 (0.0%)
	1	6 (66.7%)
	2	2 (22.2%)
	≥3	1 (11.1%)
Type of associated symptoms with cough*	N	9
	Missing	0
	Fever	0 (0.0%)
	Runny nose	8 (88.9%)
	Congestion	1 (11.1%)
	Sore throat	2 (22.2%)
	Ear pain	0 (0.0%)
	Other sensation of pain (which may be expressed in younger children by crying more frequently than usual))	1 (11.1%)
	Digestive symptoms (vomiting or diarrhea)	0 (0.0%)
	Reduced appetite	1 (11.1%)

*The total may exceed 100%, if a patient has more than one associated symptom with cough

Listing 8: Disease history – Acute dry cough diagnosis and associated symptoms at baseline – FAS population (n=9)

Subject ID	Presence of the patient in the FAS population	Presence of the patient in the SAFETY population	Presence of the patient in the PERFORMANCE population	Region	Date of inclusion	Age calculated in years	Sex	Start date of dry cough	Combined associated symptoms at baseline
6D9E.109	Yes	Yes	No	Grand Est	25/03/2024	1.5	Girl	23/03/2024	Runny nose
6D9E.111	Yes	Yes	No	Nouvelle-Aquitaine	28/03/2024	2.3	Girl	27/03/2024	Runny nose +Sore throat +Reduced appetite
6D9E.113	Yes	Yes	Yes	Nouvelle-Aquitaine	28/03/2024	4.3	Boy	27/03/2024	Runny nose
6D9E.114	Yes	Yes	Yes	Centre-Val de Loire	29/03/2024	3.9	Girl	27/03/2024	Runny nose +Other sensation of pain
6D9E.118	Yes	Yes	Yes	Bourgogne-Franche-Comté	04/04/2024	6.0	Girl	03/04/2024	Runny nose
6D9E.127	Yes	Yes	No	Grand Est	02/10/2024	5.6	Girl	30/09/2024	Runny nose +Sore throat
6D9E.129	Yes	Yes	Yes	Occitanie	14/10/2024	2.2	Boy	12/10/2024	Runny nose
6D9E.133	Yes	Yes	No	Grand Est	04/11/2024	0.7	Boy	04/11/2024	Congestion
6D9E.134	Yes	Yes	No	Hauts-de-France	06/11/2024	2.1	Girl	04/11/2024	Runny nose

4.4.3 Medical history at baseline (FAS population)

Table 11 : Pre-existing medical conditions concomitant to cough at baseline – FAS population

		FAS Population (N=12)
Patients with at least one pre-existing medical condition concomitant to cough	N	12
	Missing	0
	No	12 (100%)
	Yes	0 (0.0%)
Number of pre-existing medical conditions	N	12
	Missing	0
	Mean (± SD)	0
	Median	0
	Q1-Q3	0 - 0
	Min – Max	0 - 0
Number of pre-existing medical conditions in category	N	12
	Missing	0
	0	12 (100%)
	1	0 (0.0%)
	2	0 (0.0%)
	≥3	0 (0.0%)
Type of pre-existing medical conditions	N	12
	Missing	0
	Asthma	0 (0.0%)
	Bronchitis	0 (0.0%)
	Bronchiolitis	0 (0.0%)
	Pneumonia	0 (0.0%)
	Tonsillitis	0 (0.0%)
	Otitis	0 (0.0%)
	Sinusitis	0 (0.0%)
	Vomiting	0 (0.0%)
	Nausea	0 (0.0%)
	Diarrhea	0 (0.0%)
	Other	0 (0.0%)

Listing 9: Medical history – Pre-existing medical conditions concomitant to cough at baseline – FAS population (N=0)

Patient Number	FAS population	Safety population	Performance population	Region	Date of inclusion	Age (years)	Sex	Date of acute dry cough	Type of pre-existing medical conditions
XX-XX	Yes								

4.4.4 Prior treatment for ongoing cough at baseline (FAS population)

Listing 10: Prior treatment for ongoing cough at baseline -FAS population (N=1 treatment for 1 patient*)

Subject ID	FAS	Safety	Performance	Age	Sex	Date of inclusion	Treatment	Drug name	Anatomical group	ATC classification name	Dose	Unit	Other unite	Frequency	Route	Start date	End date	Duration of concomittant medication (day)
6D9E.109	Yes	Yes	No	1.5	Girl	25/03/2024	VENTOLINE	VENTOLINE [SALBUTAMOL]	RESPIRATORY SYSTEM	SELECTIVE BETA-2-ADRENORECEPTOR AGONISTS	100	Other	µG	Once daily	Inhalation	25/03/2024	26/03/2024	1

* Ventoline treatment was entered into the database by the principal investigator as a treatment for cough, but without specifying its indication. At the time of data review, this treatment had been presented only as a treatment without indication, without specifying whether it was a treatment for current cough or for another reason.

4.4.5 Ongoing concomitant treatment (other than cough treatments) at baseline (FAS population)

Listing 11: Ongoing concomitant treatment (other than cough treatments) at baseline - FAS population (N=3 treatments for 2 patients)

Subject ID	FAS	Safety	Performance	Age	Sex	Date of inclusion	Treatment	Drug name	Anatomical group	ATC classification name	Dose	Unit	Other unite	Frequency	Route	Start date	End date	Duration of concomittant medication (day)
6D9E.127	Yes	Yes	No	5.6	Girl	02/10/2024	DOLIPRANE	DOLIPRANE	NERVOUS SYSTEM	ANILIDES	1	Milliliter		Twice daily	Oral	02/10/2024	05/10/2024	3
6D9E.127	Yes	Yes	No	5.6	Girl	02/10/2024	PIVALONE	PIVALONE 1 PER CENT	ALIMENTARY TRACT AND METABOLISM	CORTICOSTEROIDS ACTING LOCALLY	1	Other	PULVERISATION	1 time only	Other	02/10/2024	05/10/2024	3
6D9E.133	Yes	Yes	No	0.7	Boy	04/11/2024	DOLIPRANE	DOLIPRANE	NERVOUS SYSTEM	ANILIDES	1	Other	DOSE/POIDS	Twice daily	Oral	03/11/2024	07/11/2024	3

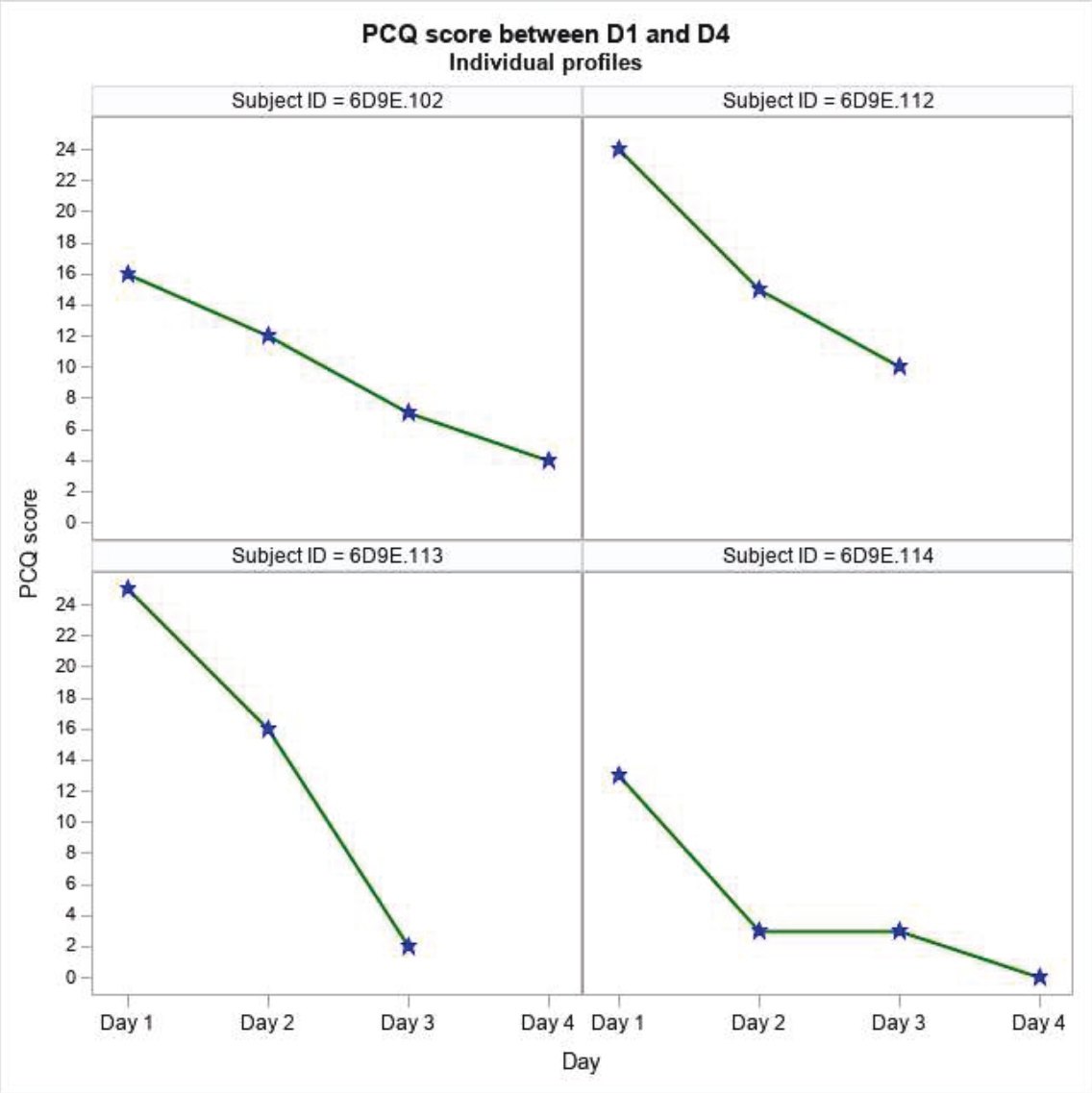
4.5 Concomitant treatments during follow up (FAS population)

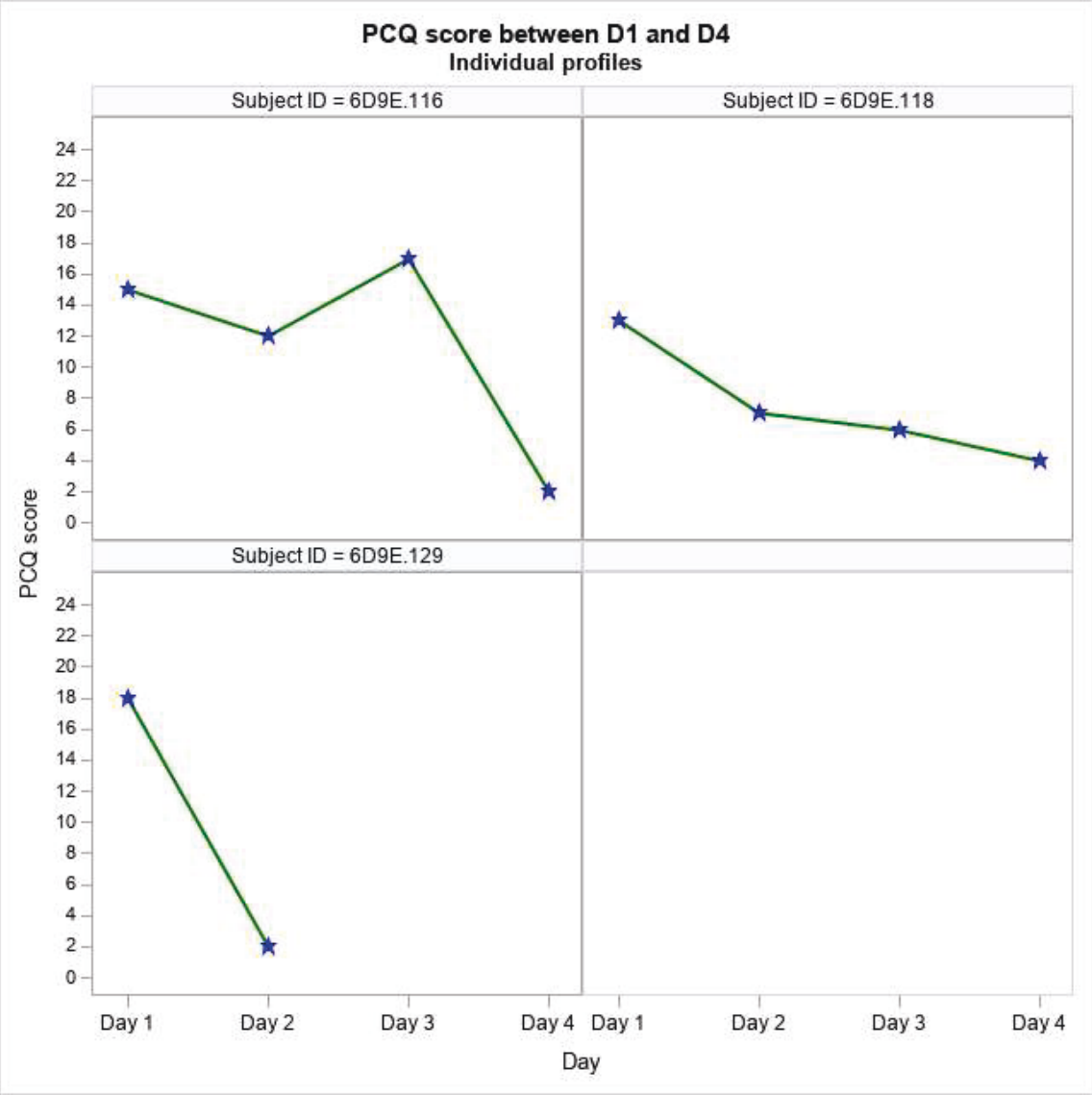
Listing 12: All concomitant treatment during follow-up – FAS population (N=2 treatments for 1 patient)

Subject ID	FAS	Safety	Performance	Age	Sex	Date of inclusion	Treatment	Indication	Drug name	Anatomical group	ATC classification name	Dose	Unit	Other unite	Frequency	Route	Start date	End date	Duration of concomittant medication (day)
6D9E.111	Yes	Yes	No	2.3	Girl	28/03/2024	CELESTENE	TOUX	CELESTENE [BETAMETHASONE]	ALIMENTARY TRACT AND METABOLISM	CORTICOSTEROIDS FOR LOCAL ORAL TREATMENT	70	Drop		1 time only	Oral	30/03/2024	31/03/2024	3
6D9E.111	Yes	Yes	No	2.3	Girl	28/03/2024	TUSSIDANE	TOUX	TUSSIDANE	RESPIRATORY SYSTEM	OPIUM ALKALOIDS AND DERIVATIVES	1	Othe r	CUILLERE MESURE	1 time only	Oral	30/03/2024	31/03/2024	3

4.6 Primary endpoint - Change in PCQ total score (PERFORMANCE POPULATION)

Figure 2 and 3: Patient profile for PCQ total score - PERFORMANCE population




PCQ score between D1 and D4
Individual profiles
Subject ID = 6D9E.116
Subject ID = 6D9E.118
Subject ID = 6D9E.129
PCQ score
0
2
4
6
8
10
12
14
16
18
20
22
24
Day 1
Day 2
Day 3
Day 4
Day

Listing 13: Multi-occurrence listing (per child and per visit) for PCQ score (PERFORMANCE POPULATION) (n=7)

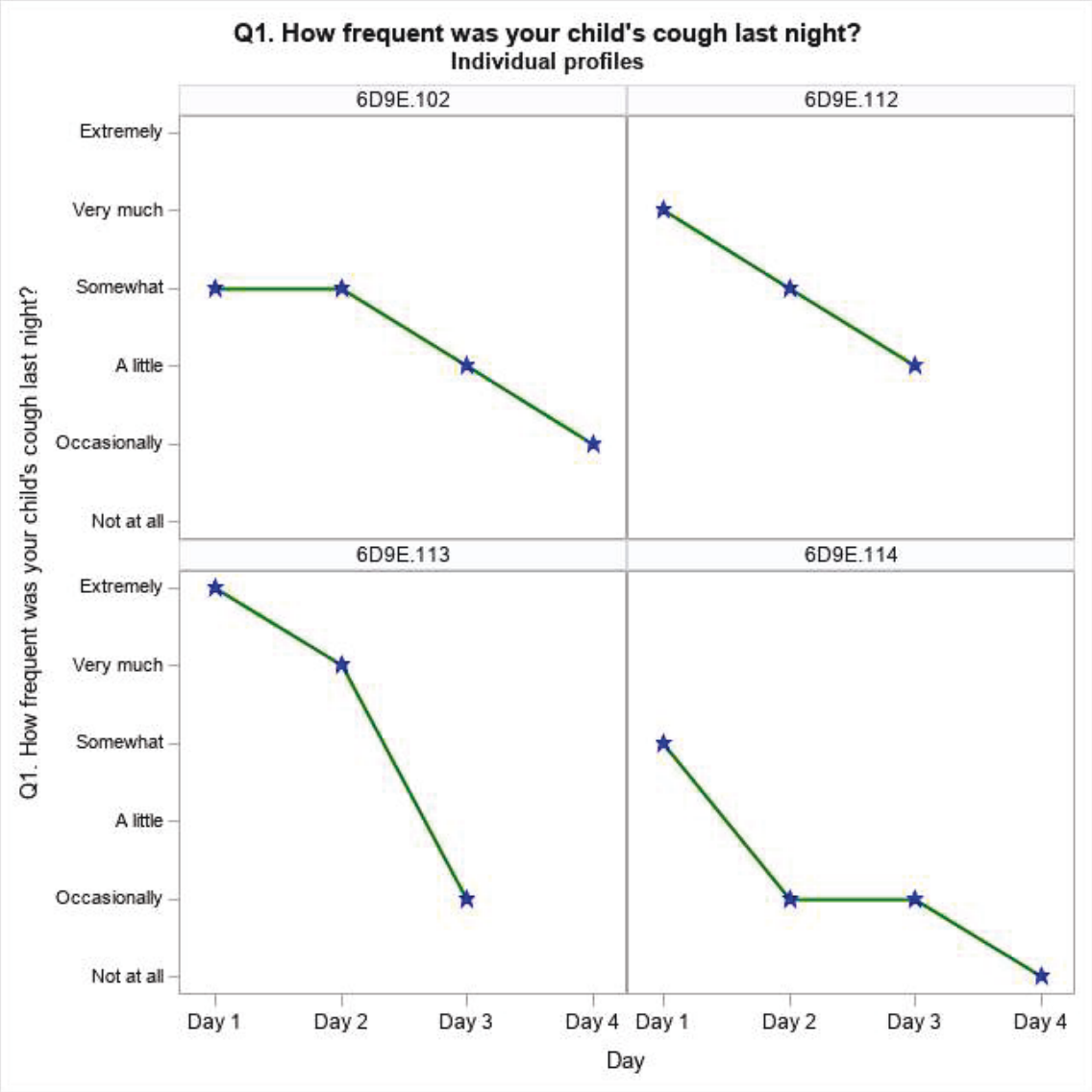
Patient number	Visit number	FAS population	Safety population	Performance population	Inclusion Date	Questionnaire Date	Age	Sex	Q1	Q2	Q3	Q4	Q5	PCQ Score	Delta between baseline and each day	Patients with a 3-point decrease
6D9E.102	DAY 1	Yes	Yes	Yes	14/03/2024	14/03/2024	5	Girl	Somewhat	Somewhat	Somewhat	Very much	Somewhat	16	.	.
6D9E.102	DAY 2	Yes	Yes	Yes	14/03/2024	15/03/2024	5	Girl	Somewhat	A little	A little	A little	Somewhat	12	-4	
6D9E.102	DAY 3	Yes	Yes	Yes	14/03/2024	16/03/2024	5	Girl	A little	Occasionally	Occasionally	A little	Occasionally	7	-9	
6D9E.102	DAY 4	Yes	Yes	Yes	14/03/2024	17/03/2024	5	Girl	Occasionally	Occasionally	Not at all	Occasionally	Occasionally	4	-12	Yes
6D9E.112	DAY 1	Yes	Yes	Yes	28/03/2024	29/03/2024	3	Boy	Very much	Extremely	Extremely	Extremely	Extremely	24	.	.
6D9E.112	DAY 2	Yes	Yes	Yes	28/03/2024	30/03/2024	3	Boy	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	15	-9	
6D9E.112	DAY 3	Yes	Yes	Yes	28/03/2024	31/03/2024	3	Boy	A little	A little	A little	A little	A little	10	-14	Yes
6D9E.113	DAY 1	Yes	Yes	Yes	28/03/2024	28/03/2024	4	Boy	Extremely	Extremely	Extremely	Extremely	Extremely	25	.	.
6D9E.113	DAY 2	Yes	Yes	Yes	28/03/2024	29/03/2024	4	Boy	Very much	Somewhat	Somewhat	Somewhat	Somewhat	16	-9	
6D9E.113	DAY 3	Yes	Yes	Yes	28/03/2024	30/03/2024	4	Boy	Occasionally	Not at all	Not at all	Occasionally	Not at all	2	-23	Yes
6D9E.114	DAY 1	Yes	Yes	Yes	29/03/2024	29/03/2024	4	Girl	Somewhat	A little	A little	Somewhat	Somewhat	13	.	.
6D9E.114	DAY 2	Yes	Yes	Yes	29/03/2024	30/03/2024	4	Girl	Occasionally	Not at all	Not at all	Occasionally	Occasionally	3	-10	
6D9E.114	DAY 3	Yes	Yes	Yes	29/03/2024	31/03/2024	4	Girl	Occasionally	Not at all	Not at all	A little	Not at all	3	-10	
6D9E.114	DAY 4	Yes	Yes	Yes	29/03/2024	01/04/2024	4	Girl	Not at all	Not at all	Not at all	Not at all	Not at all	0	-13	Yes
6D9E.116	DAY 1	Yes	Yes	Yes	03/04/2024	03/04/2024	1	Boy	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	15	.	.
6D9E.116	DAY 2	Yes	Yes	Yes	03/04/2024	04/04/2024	1	Boy	Somewhat	A little	A little	Somewhat	A little	12	-3	
6D9E.116	DAY 3	Yes	Yes	Yes	03/04/2024	05/04/2024	1	Boy	Somewhat	Very much	Very much	Somewhat	Somewhat	17	2	
6D9E.116	DAY 4	Yes	Yes	Yes	03/04/2024	06/04/2024	1	Boy	Occasionally	Not at all	Not at all	Occasionally	Not at all	2	-13	Yes
6D9E.118	DAY 1	Yes	Yes	Yes	04/04/2024	04/04/2024	6	Girl	Somewhat	A little	A little	Somewhat	Somewhat	13	.	.
6D9E.118	DAY 2	Yes	Yes	Yes	04/04/2024	05/04/2024	6	Girl	A little	A little	Occasionally	Occasionally	Occasionally	7	-6	
6D9E.118	DAY 3	Yes	Yes	Yes	04/04/2024	06/04/2024	6	Girl	A little	A little	Not at all	Occasionally	Occasionally	6	-7	
6D9E.118	DAY 4	Yes	Yes	Yes	04/04/2024	07/04/2024	6	Girl	Occasionally	Occasionally	Not at all	Occasionally	Occasionally	4	-9	Yes

Patient number	Visit number	FAS population	Safety population	Performance population	Inclusion Date	Questionnaire Date	Age	Sex	Q1	Q2	Q3	Q4	Q5	PCQ Score	Delta between baseline and each day	Patients with a 3-point decrease
6D9E.129	DAY 1	Yes	Yes	Yes	14/10/2024	14/10/2024	2	Boy	Somewhat	Very much	Somewhat	Very much	Very much	18	.	.
6D9E.129	DAY 2	Yes	Yes	Yes	14/10/2024	15/10/2024	2	Boy	Occasionally	Not at all	Not at all	Occasionally	Not at all	2	-16	Yes

PCQ. Q1. Cough frequency the night before the first syrup intake: “Q1. How frequent was your child's cough last night?”
PCQ. Q2. Sleep disturbance of the child the night before the first syrup intake: “Q2. How much did last night's cough affect your child's ability to sleep?”
PCQ. Q3. Sleep disturbance of the parent the night before the first syrup intake: ”Q3. How much did last night's cough affect your ability to sleep?”
PCQ. Q4. Cough severity the night before the first syrup intake: “Q4. How severe was your child's cough last night?”
PCQ. Q5. Degree of bothersomeness to the child the night before the first syrup intake: “Q5. How bothersome was last night’s cough to your child?”

4.7 Secondary outcome - PCQ items (PERFORMANCE POPULATION)

Figure 4 and 5: Patient profile for PCQ items - PERFORMANCE population – item 1 of PCQ



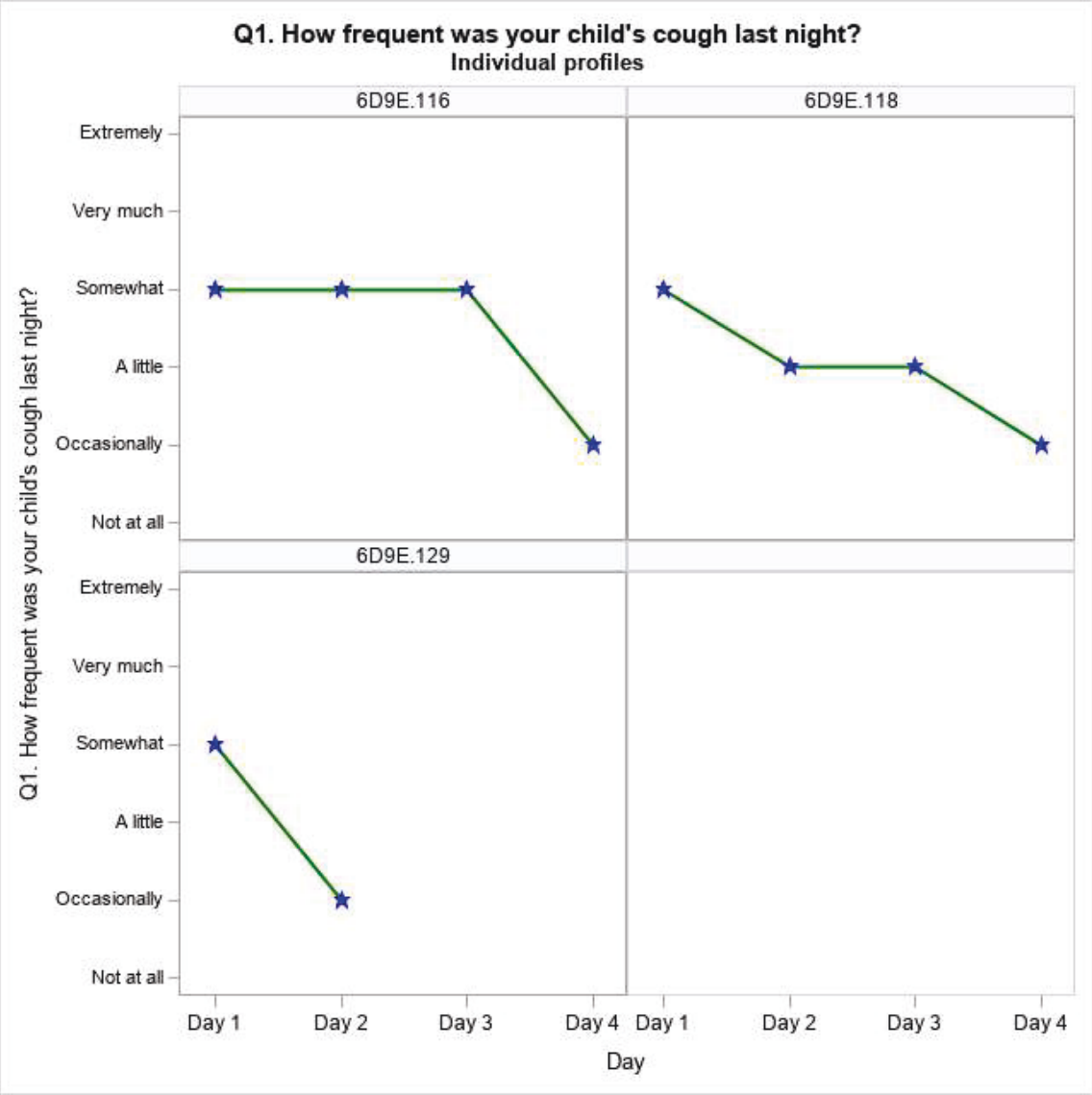
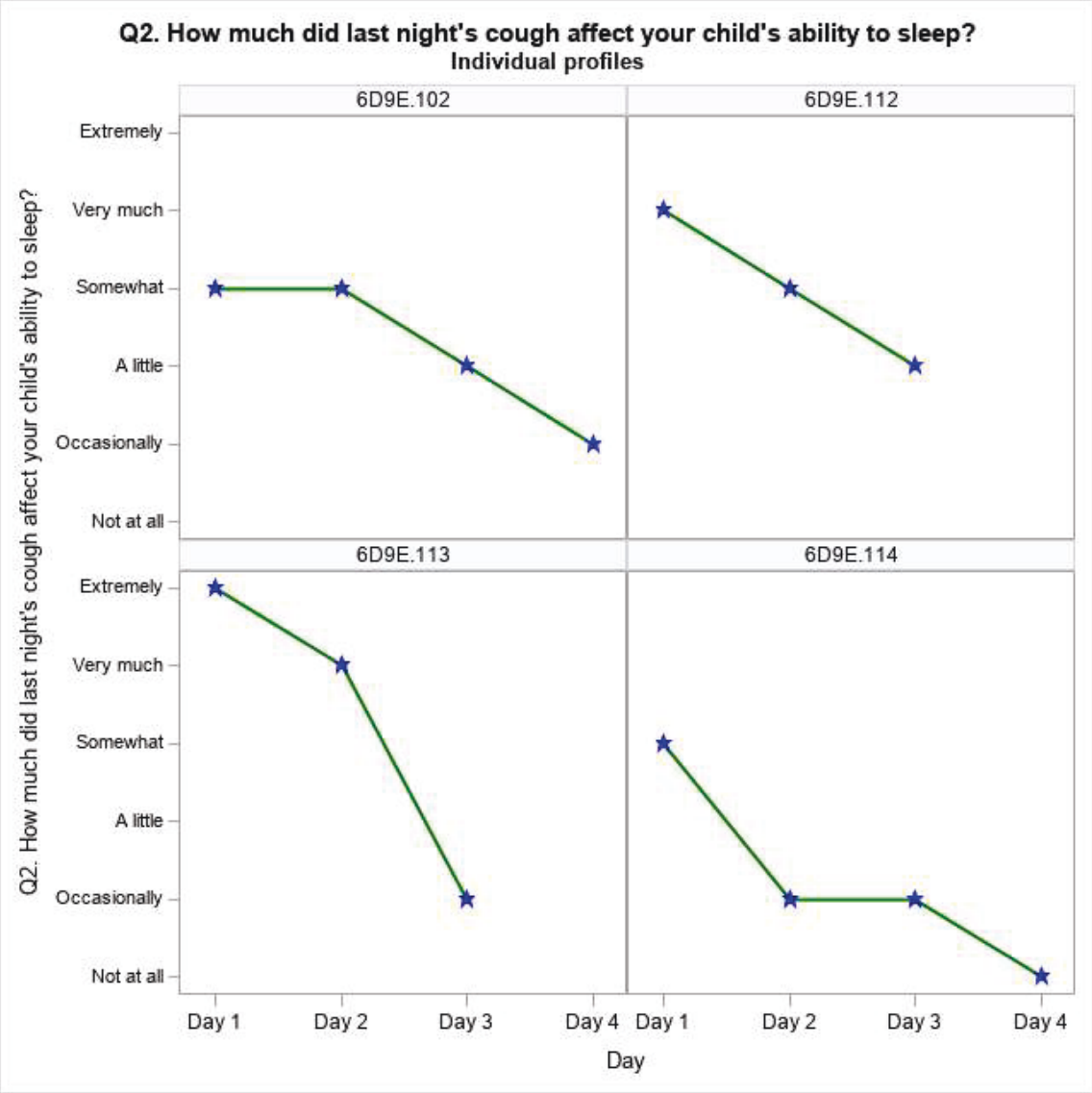

Q1. How frequent was your child's cough last night?
Individual profiles
6D9E.116
6D9E.118
6D9E.129
Extremely
Very much
Somewhat
A little
Occasionally
Not at all
Q1. How frequent was your child's cough last night?
Day 1
Day 2
Day 3
Day 4
Day

Figure 6 and 7: Patient profile for PCQ items - PERFORMANCE population – item 2 of PCQ



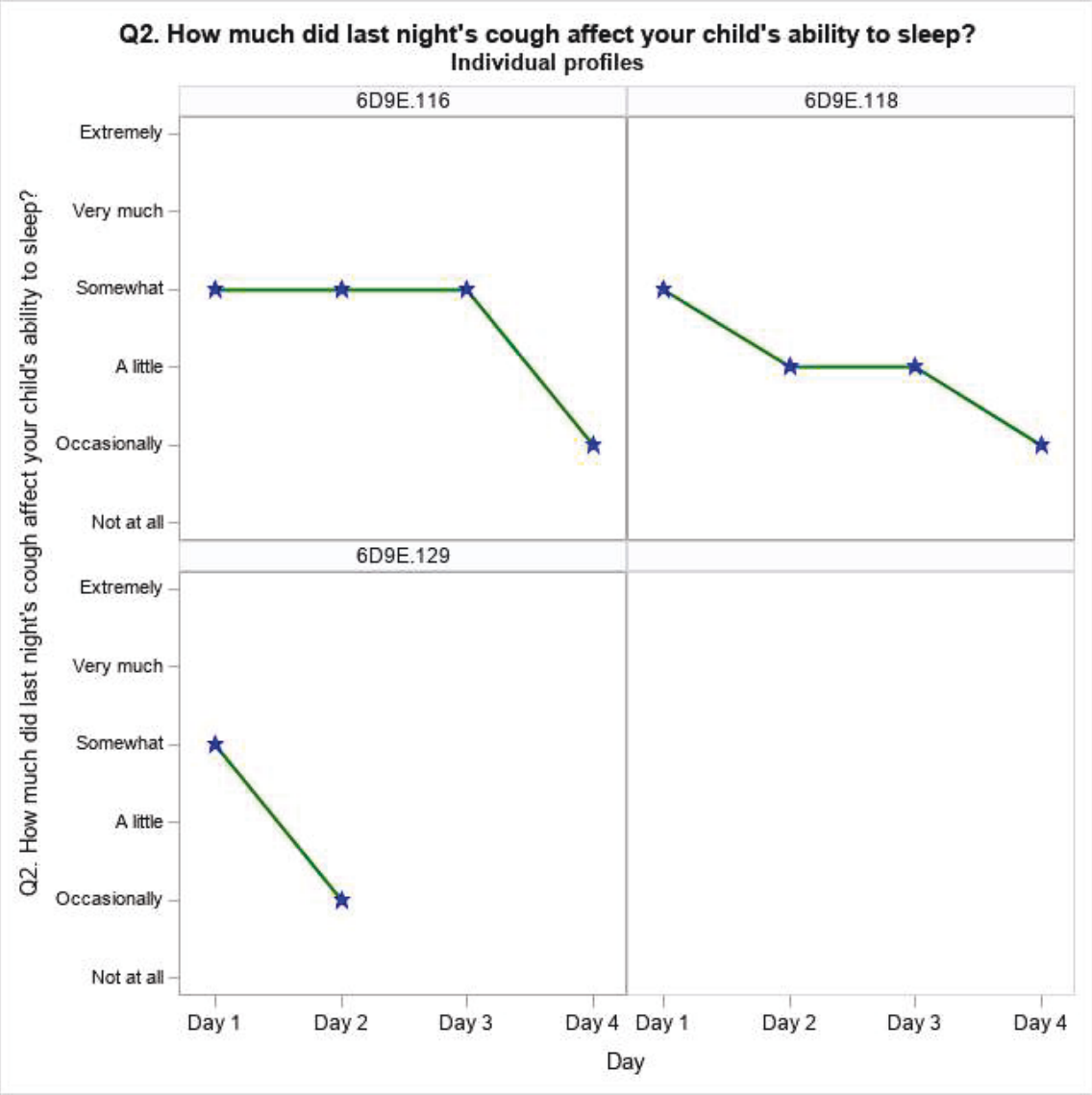
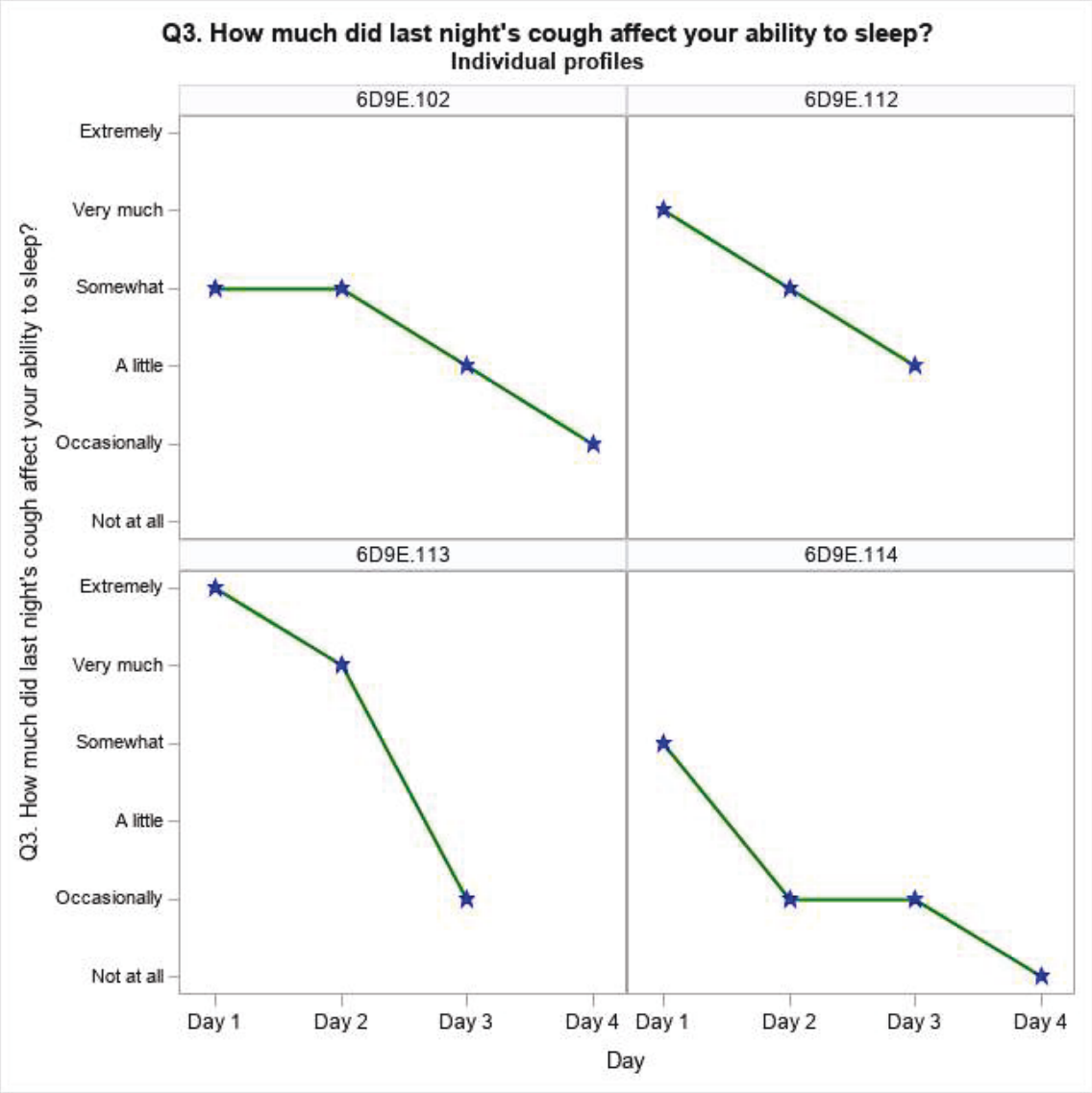

Q2. How much did last night's cough affect your child's ability to sleep?
Individual profiles
6D9E.116
6D9E.118
6D9E.129
Extremely
Very much
Somewhat
A little
Occasionally
Not at all
Q2. How much did last night's cough affect your child's ability to sleep?
Day 1
Day 2
Day 3
Day 4
Day

Figure 8 and 9: Patient profile for PCQ items - PERFORMANCE population – item 3 of PCQ



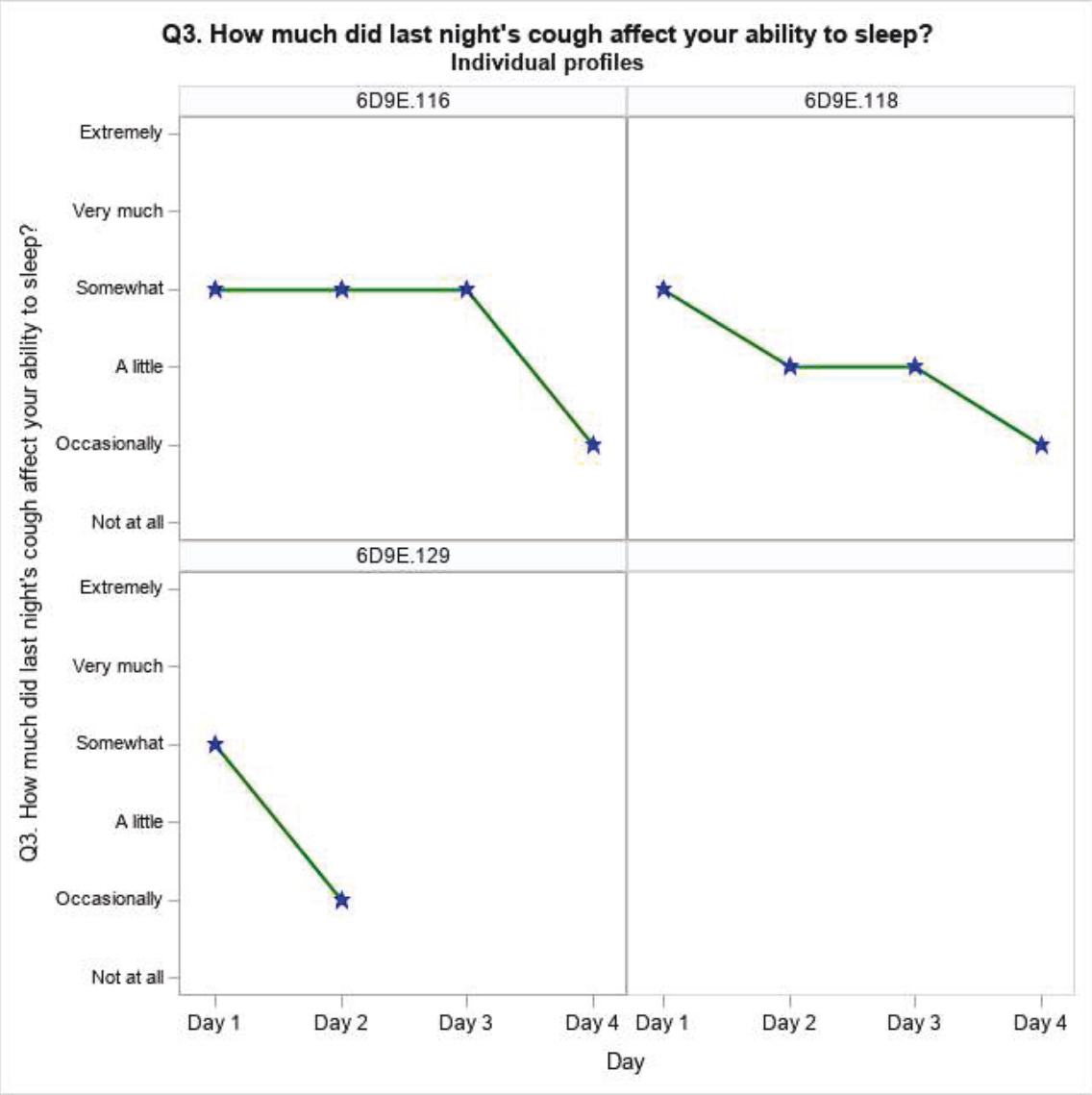
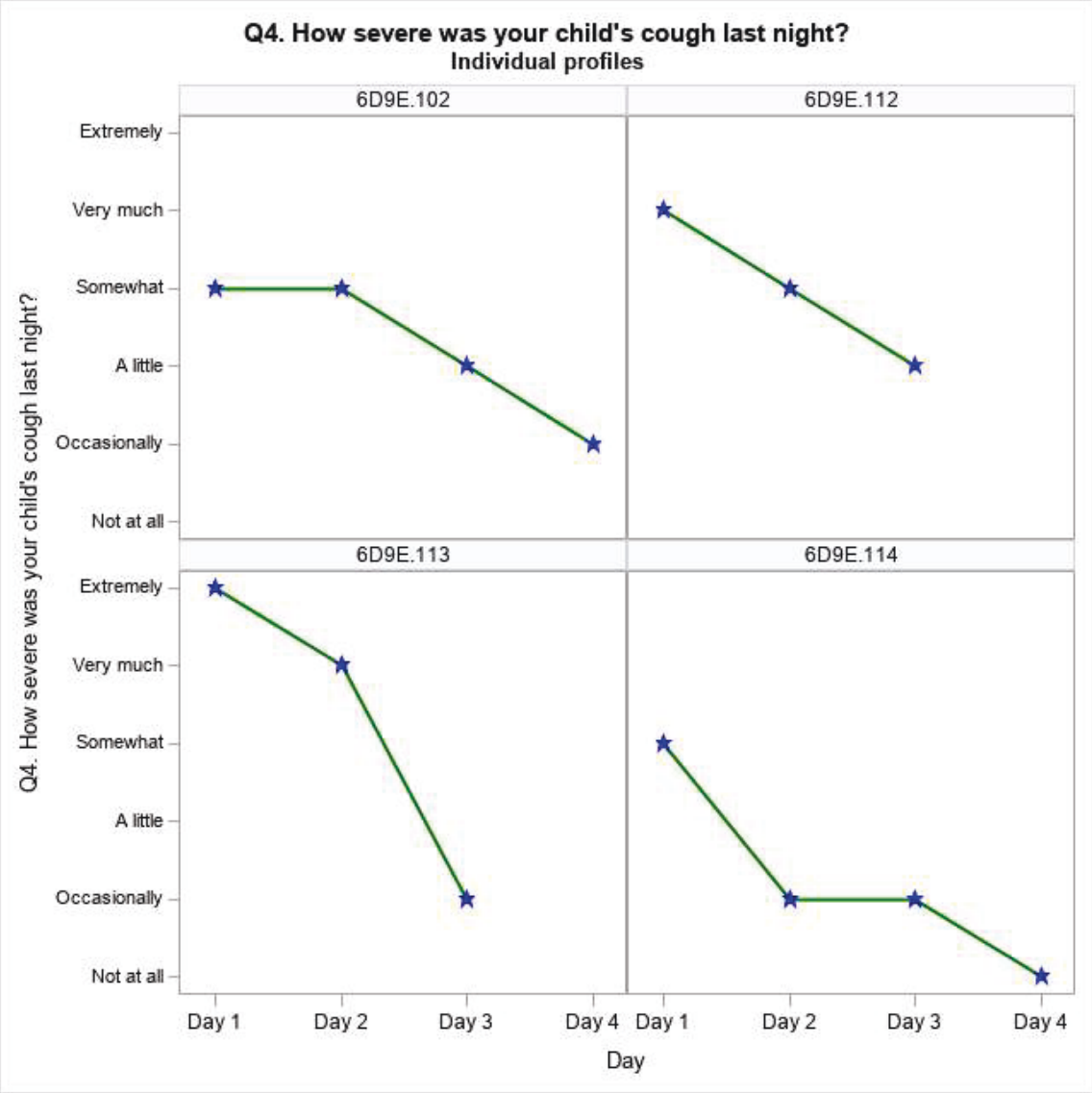

Q3. How much did last night's cough affect your ability to sleep?
Individual profiles
6D9E.116
6D9E.118
6D9E.129
Extremely
Very much
Somewhat
A little
Occasionally
Not at all
Q3. How much did last night's cough affect your ability to sleep?
Day 1
Day 2
Day 3
Day 4
Day

Figure 10 and 11: Patient profile for PCQ items - PERFORMANCE population – item 4 of PCQ



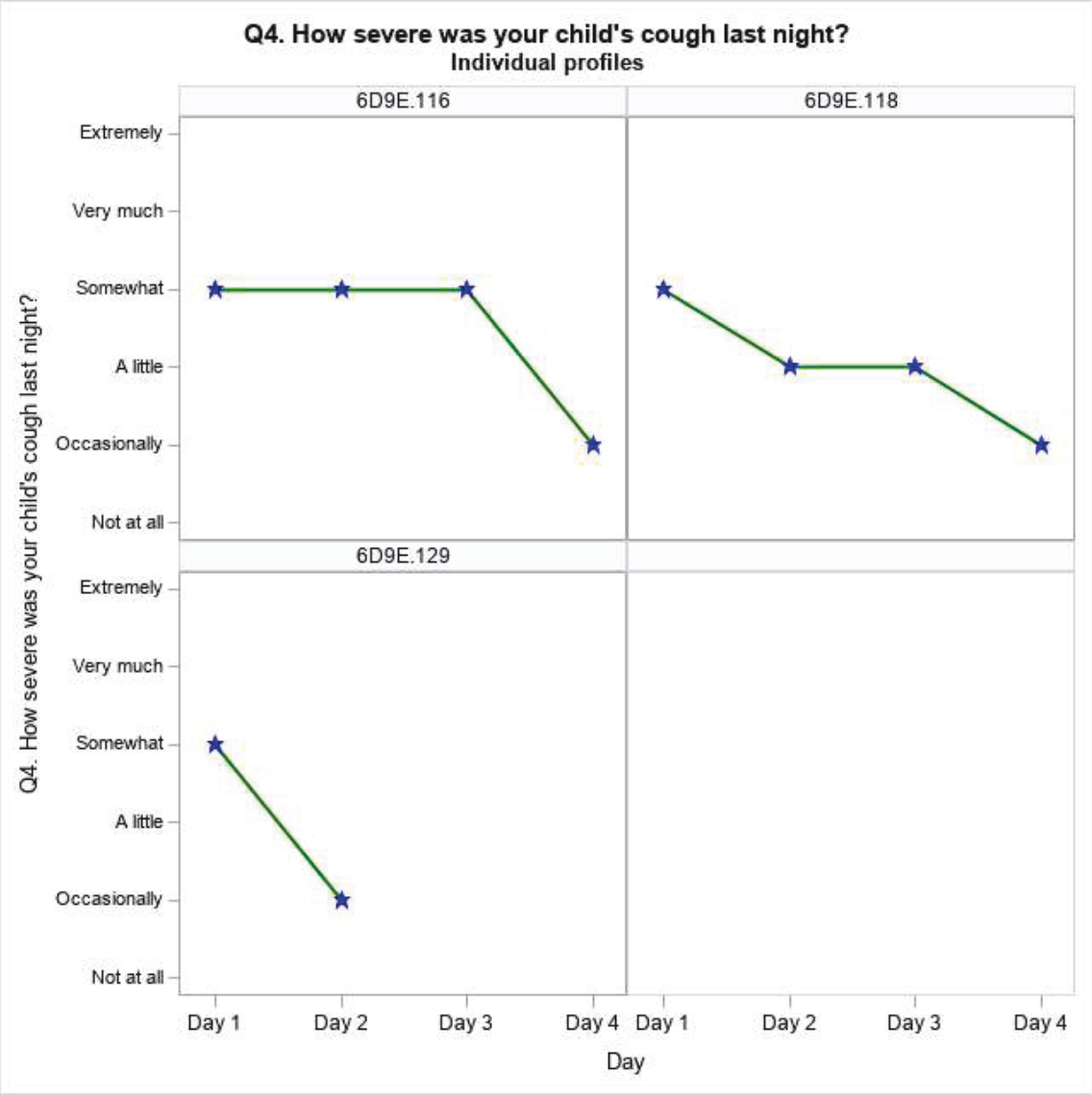
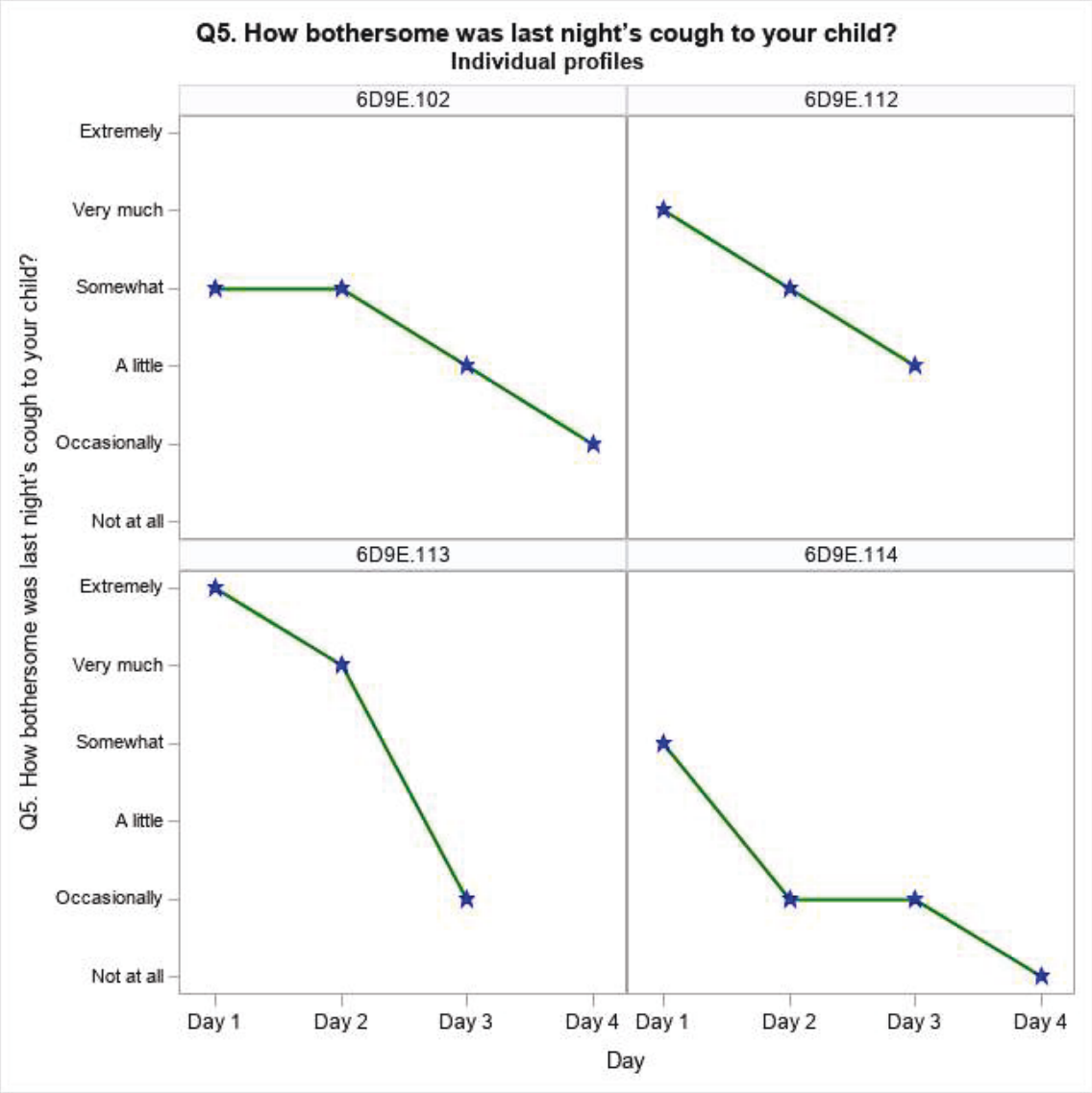
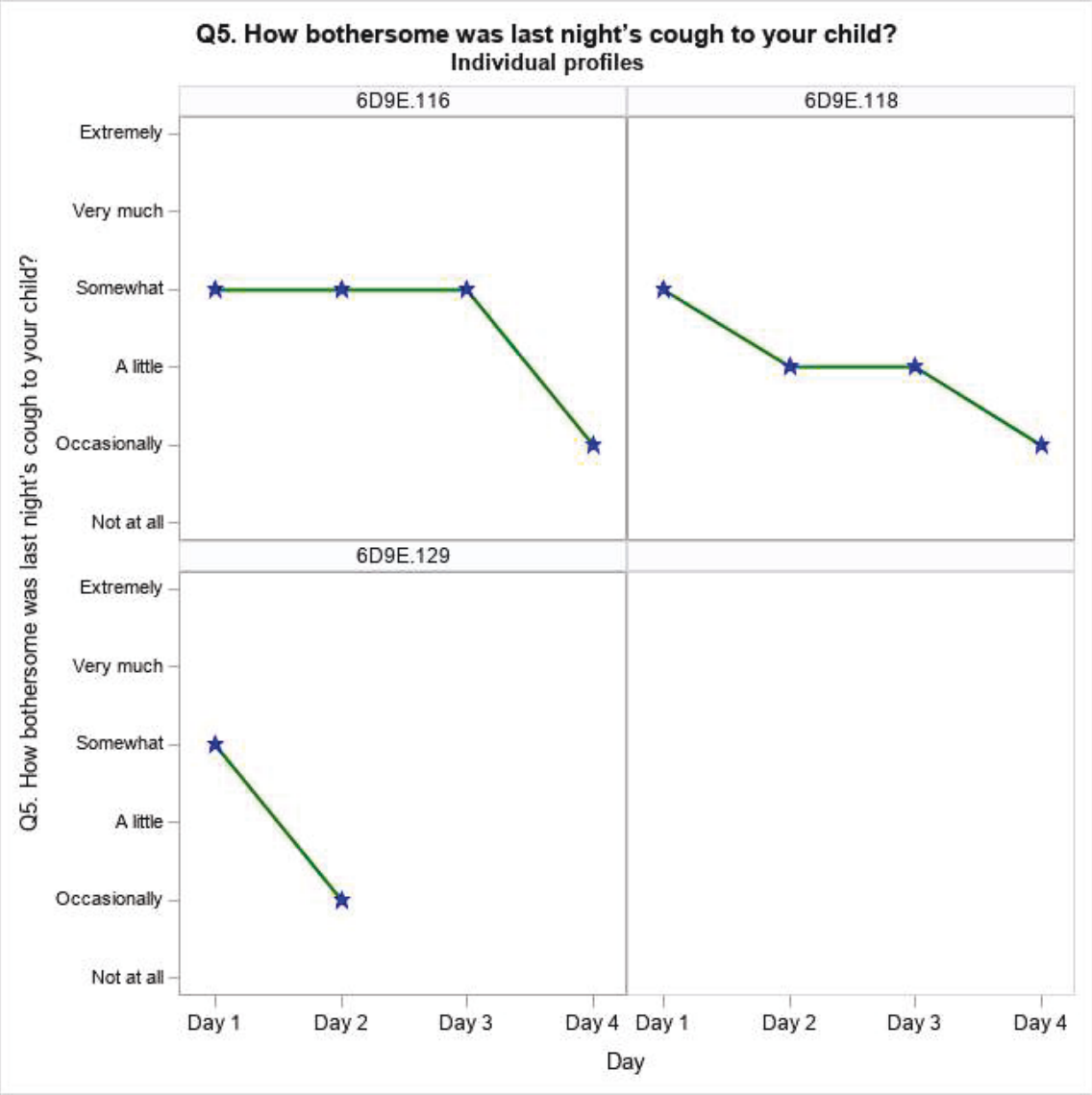

Q4. How severe was your child's cough last night?
Individual profiles
6D9E.116
6D9E.118
6D9E.129
Extremely
Very much
Somewhat
A little
Occasionally
Not at all
Q4. How severe was your child's cough last night?
Day 1
Day 2
Day 3
Day 4
Day

Figure 12 and 13: Patient profile for PCQ items - PERFORMANCE population – item 5 of PCQ

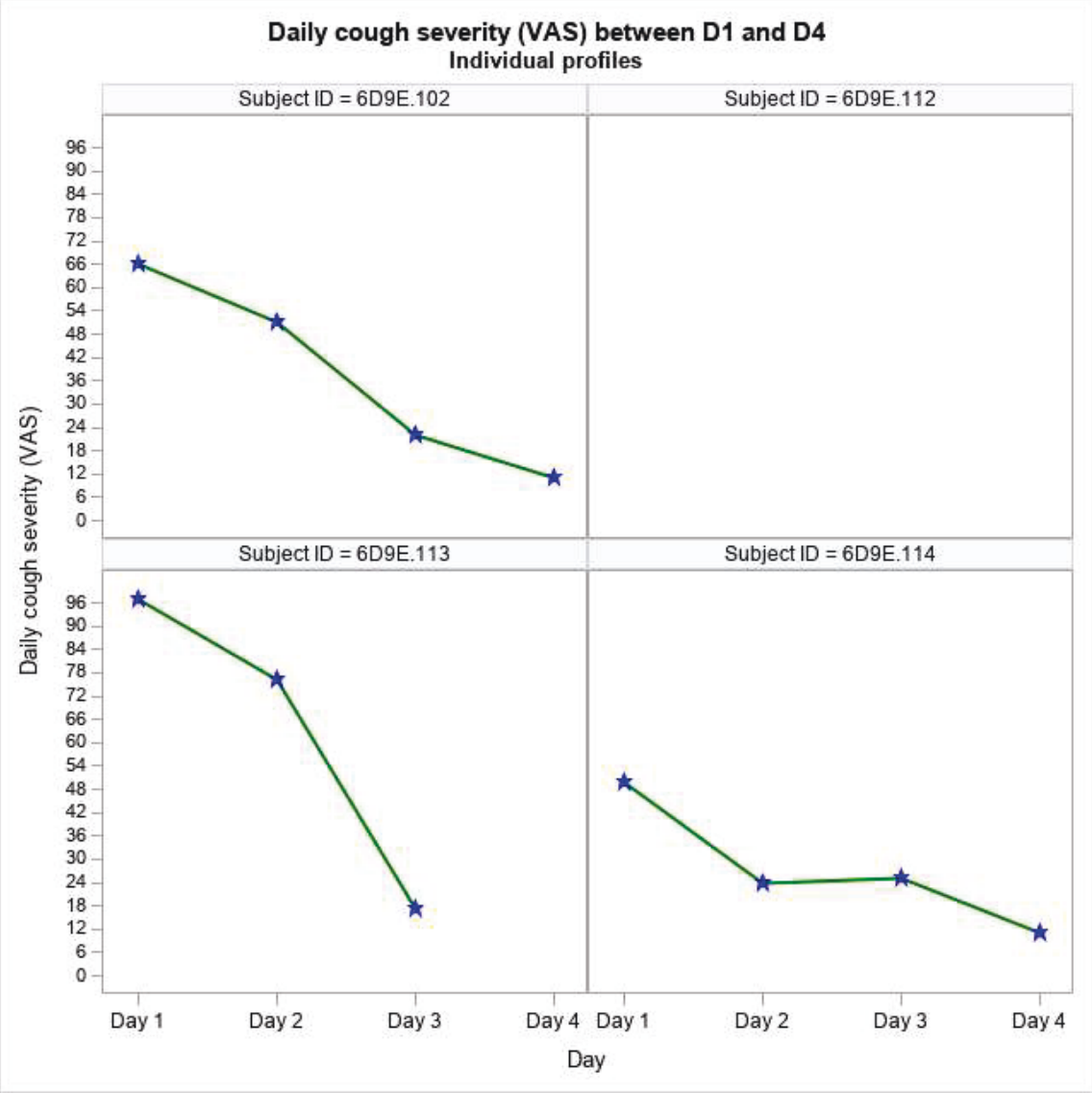


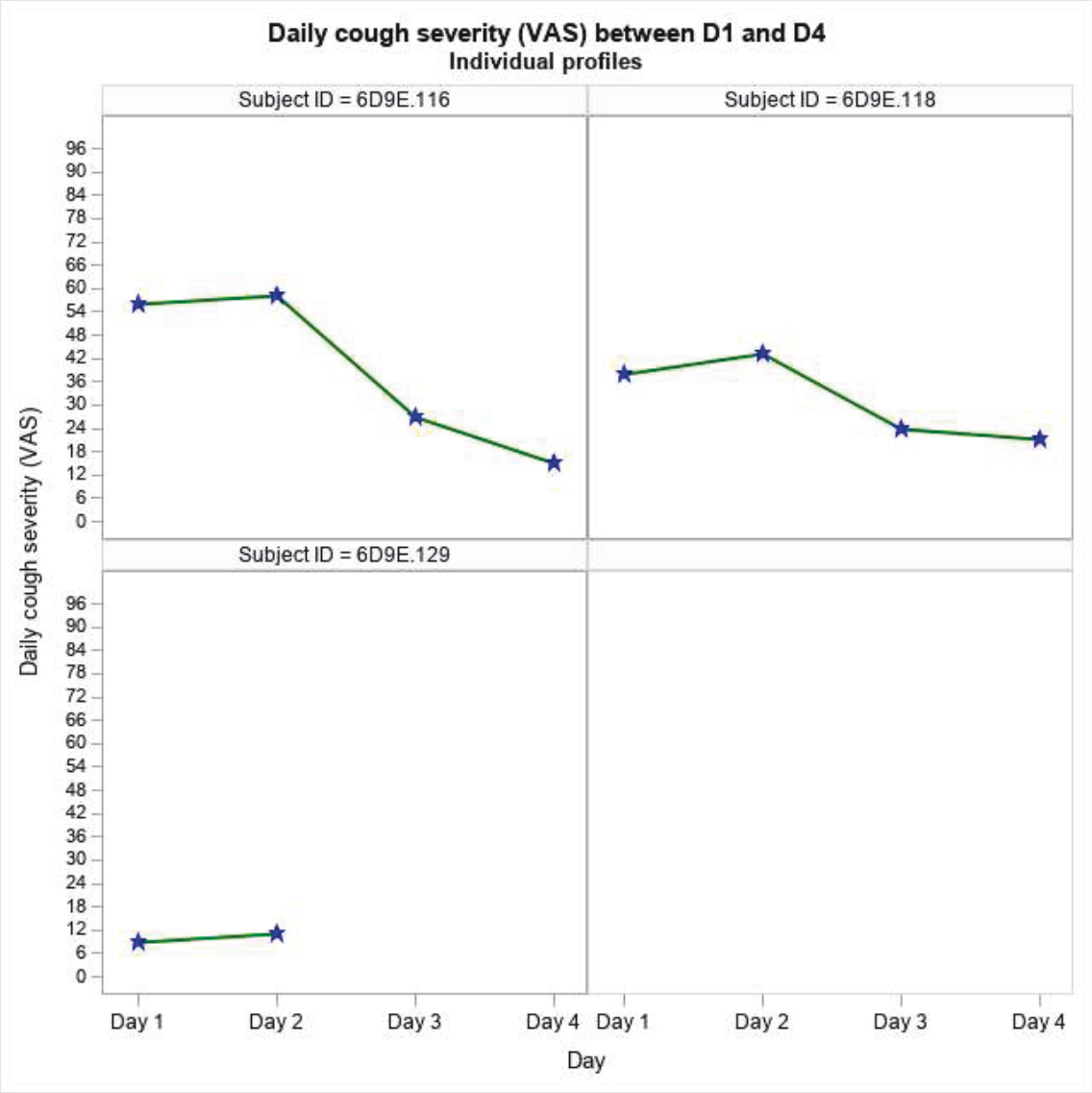

Q5. How bothersome was last night's cough to your child?
Individual profiles
6D9E.116
6D9E.118
6D9E.129
Extremely
Very much
Somewhat
A little
Occasionally
Not at all
Q5. How bothersome was last night's cough to your child?
Day 1
Day 2
Day 3
Day 4
Day

4.8 Secondary outcome - Daily cough severity (VAS) (PERFORMANCE POPULATION*)

* This analysis was carried out on the Performance population but without patient 112, who could not be assessed at baseline.

Figure 14 and 15: Patient profile for VAS score - PERFORMANCE population




Daily cough severity (VAS) between D1 and D4
Individual profiles
Subject ID = 6D9E.116
Subject ID = 6D9E.118
Subject ID = 6D9E.129
Daily cough severity (VAS)
96
90
84
78
72
66
60
54
48
42
36
30
24
18
12
6
0
Day 1
Day 2
Day 3
Day 4
Day

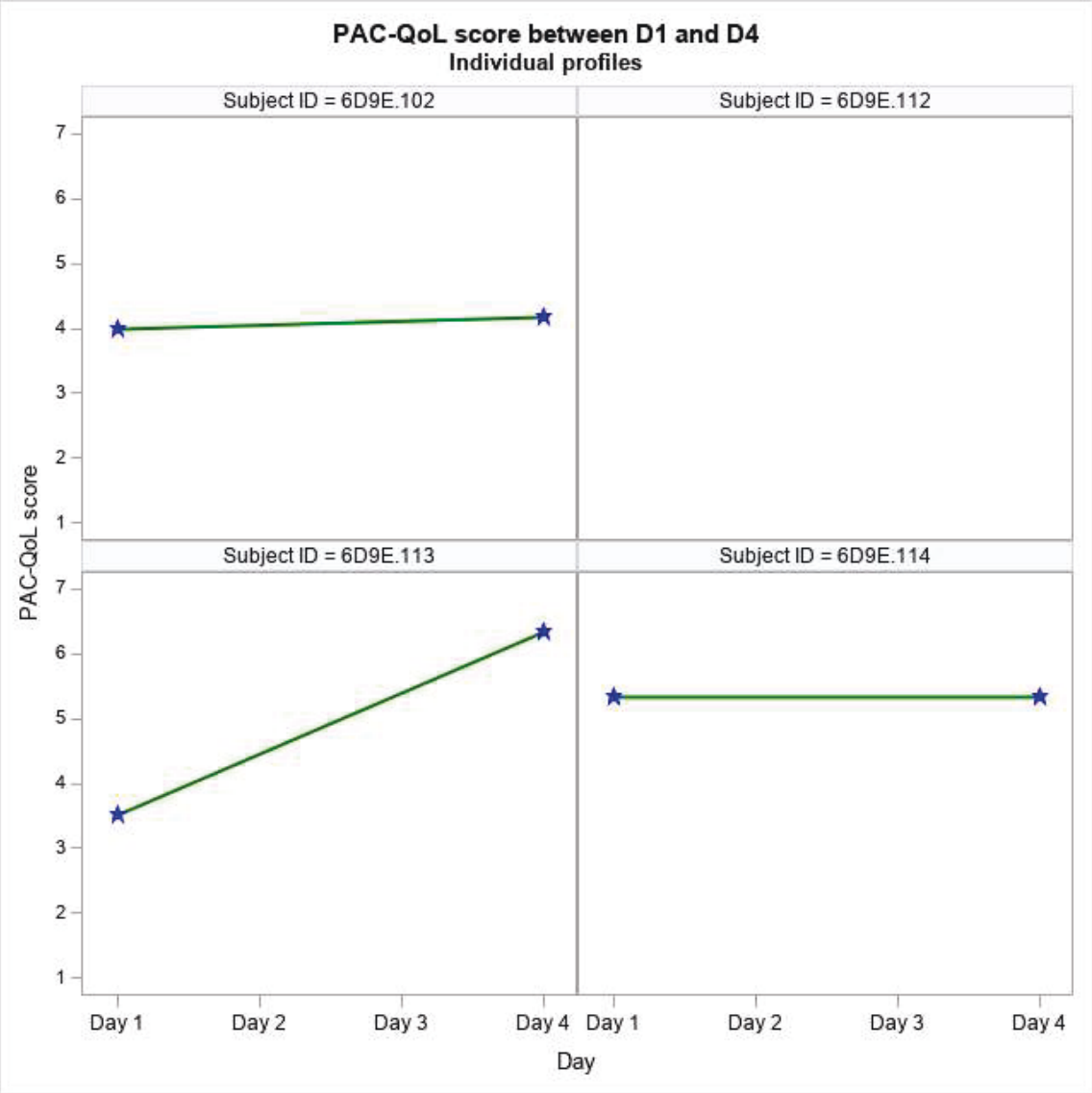
Listing 14: Multi-occurrence listing (per child and per visit) for VAS score (PERFORMANCE POPULATION) (n=6)

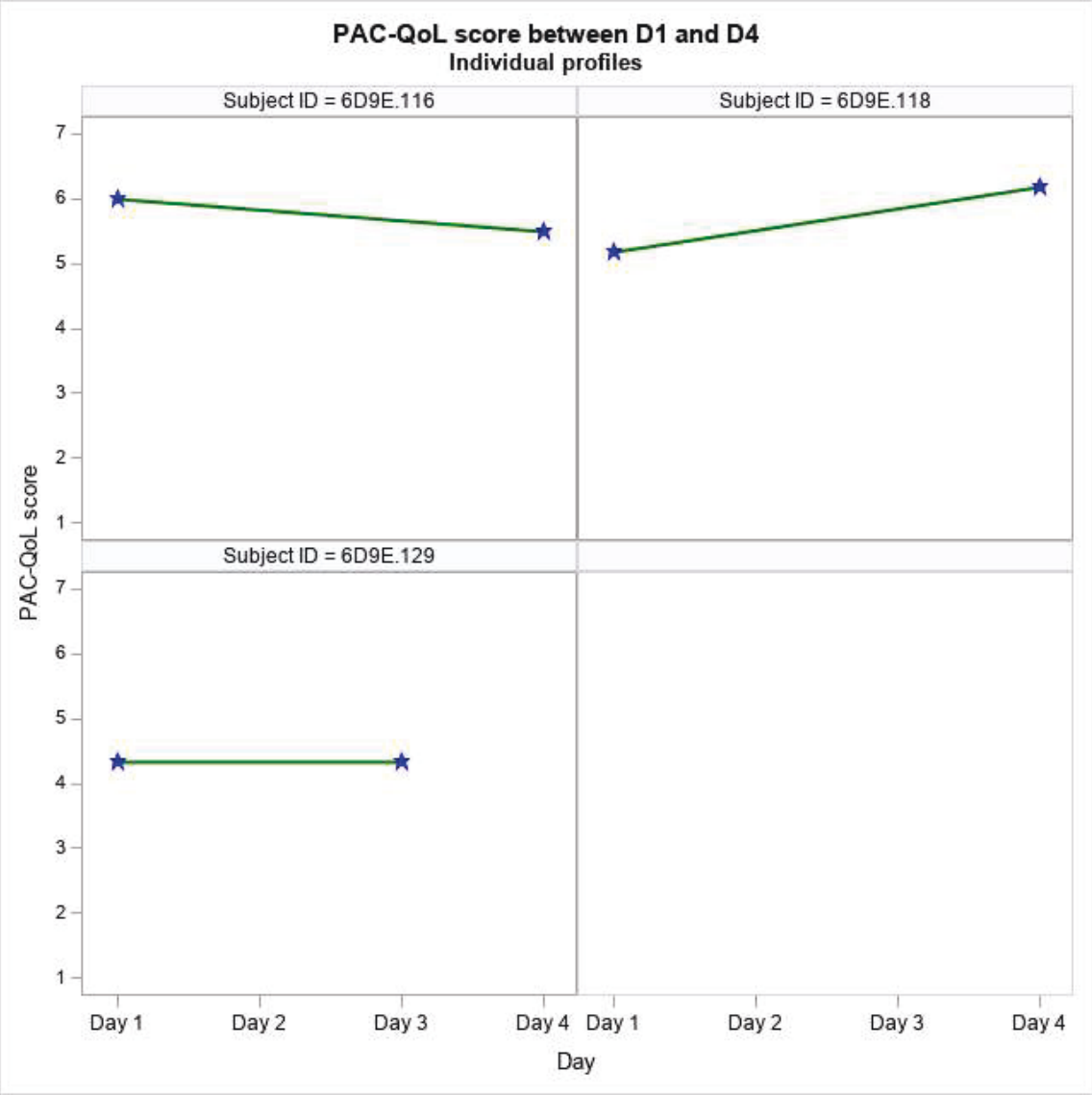
Patient number	Visit number	FAS population	Safety population	Performance population	Inclusion Date	Questionnaire Date	Age	Sex	VAS Score	Delta between baseline and each day
6D9E.102	DAY 1	Yes	Yes	Yes	14/03/2024	14/03/2024	5.3	Girl	66	.
6D9E.102	DAY 2	Yes	Yes	Yes	14/03/2024	15/03/2024	5.3	Girl	51	-15
6D9E.102	DAY 3	Yes	Yes	Yes	14/03/2024	16/03/2024	5.3	Girl	22	-44
6D9E.102	DAY 4	Yes	Yes	Yes	14/03/2024	17/03/2024	5.3	Girl	11	-55
6D9E.113	DAY 1	Yes	Yes	Yes	28/03/2024	28/03/2024	4.3	Boy	97	.
6D9E.113	DAY 2	Yes	Yes	Yes	28/03/2024	29/03/2024	4.3	Boy	76	-21
6D9E.113	DAY 3	Yes	Yes	Yes	28/03/2024	30/03/2024	4.3	Boy	17	-80
6D9E.114	DAY 1	Yes	Yes	Yes	29/03/2024	29/03/2024	3.9	Girl	50	.
6D9E.114	DAY 2	Yes	Yes	Yes	29/03/2024	30/03/2024	3.9	Girl	24	-26
6D9E.114	DAY 3	Yes	Yes	Yes	29/03/2024	31/03/2024	3.9	Girl	25	-25
6D9E.114	DAY 4	Yes	Yes	Yes	29/03/2024	01/04/2024	3.9	Girl	11	-39
6D9E.116	DAY 1	Yes	Yes	Yes	03/04/2024	03/04/2024	0.7	Boy	56	.
6D9E.116	DAY 2	Yes	Yes	Yes	03/04/2024	04/04/2024	0.7	Boy	58	2
6D9E.116	DAY 3	Yes	Yes	Yes	03/04/2024	05/04/2024	0.7	Boy	27	-29
6D9E.116	DAY 4	Yes	Yes	Yes	03/04/2024	06/04/2024	0.7	Boy	15	-41
6D9E.118	DAY 1	Yes	Yes	Yes	04/04/2024	04/04/2024	6	Girl	38	.
6D9E.118	DAY 2	Yes	Yes	Yes	04/04/2024	05/04/2024	6	Girl	43	5
6D9E.118	DAY 3	Yes	Yes	Yes	04/04/2024	06/04/2024	6	Girl	24	-14
6D9E.118	DAY 4	Yes	Yes	Yes	04/04/2024	07/04/2024	6	Girl	21	-17
6D9E.129	DAY 1	Yes	Yes	Yes	14/10/2024	14/10/2024	2.2	Boy	9	.
6D9E.129	DAY 2	Yes	Yes	Yes	14/10/2024	15/10/2024	2.2	Boy	11	2

4.9 Secondary outcome - Change in PAC-QoL total score*

* This analysis was carried out on the Performance population but without patient 112, who could not be assessed at baseline.

Figure 16 and 17: Patient profile for PAC-QoL total score - PERFORMANCE population




PAC-QoL score between D1 and D4
Individual profiles
Subject ID = 6D9E.116
Subject ID = 6D9E.118
Subject ID = 6D9E.129
PAC-QoL score
Day
Day 1
Day 2
Day 3
Day 4

Listing 15: Multi-occurrence listing (per child and per visit) for PAC-QoL score (PERFORMANCE POPULATION) (n=6)

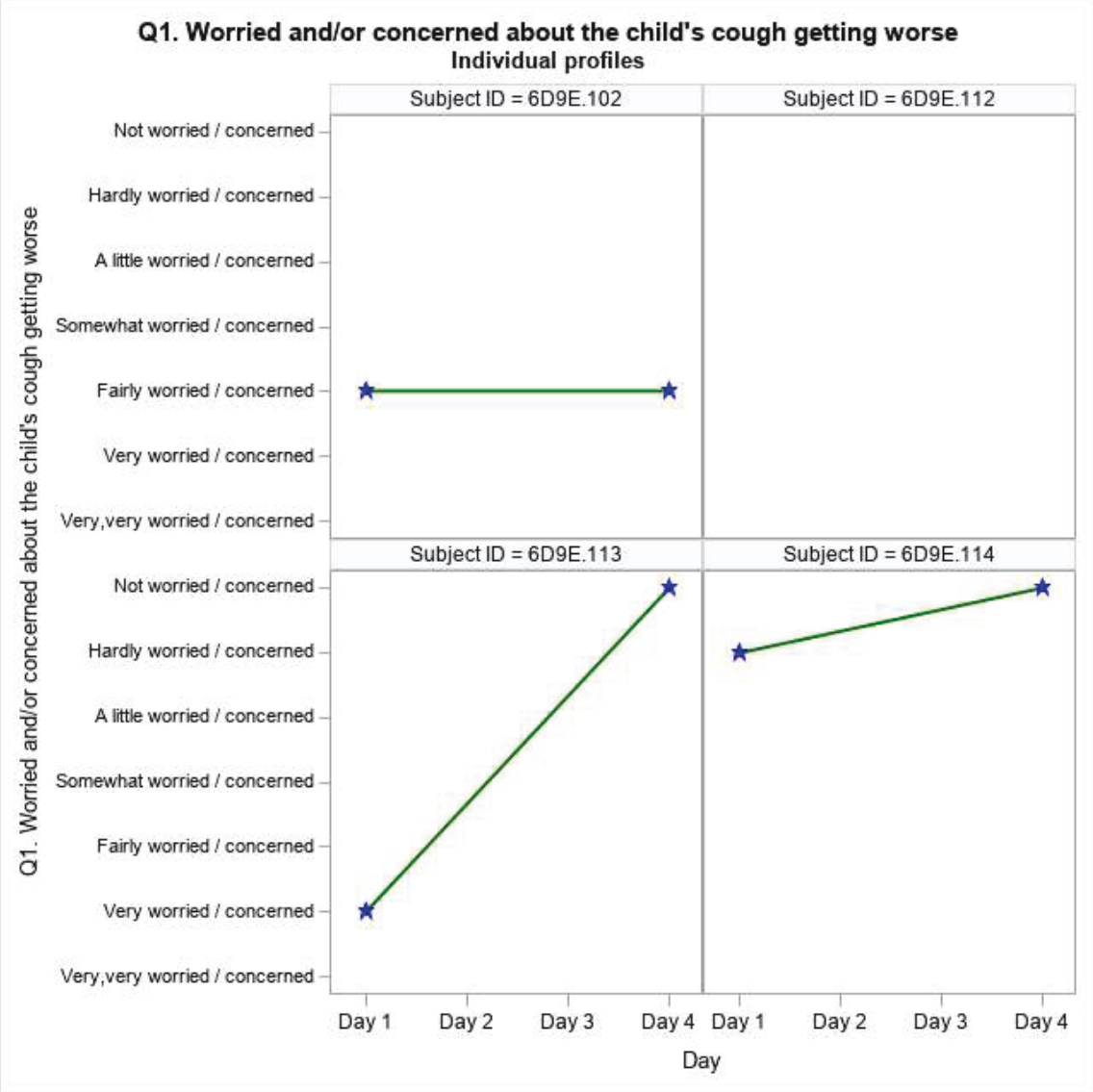
Patient number	Visit number	FAS population	Safety population	Performance population	Inclusion Date	Questionnaire Date	Age	Sex	Q1	Q2	Q3	Q4	Q5	Q6	PAC-QoL Score	Delta between baseline and each day
6D9E.102	DAY 1	Yes	Yes	Yes	14/03/2024	14/03/2024	5.3	Girl	Fairly worried / concerned	Hardly any of the time	Very worried / concerned	Somewhat worried / concerned	Very worried / concerned	None of the time	4	.
6D9E.102	DAY 4	Yes	Yes	Yes	14/03/2024	17/03/2024	5.3	Girl	Fairly worried / concerned	Some of the time	Somewhat worried / concerned	Somewhat worried / concerned	Fairly worried / concerned	None of the time	4.2	0.17
6D9E.113	DAY 1	Yes	Yes	Yes	28/03/2024	28/03/2024	4.3	Boy	Very worried / concerned	Most of the time	Fairly worried / concerned	Fairly worried / concerned	Somewhat worried / concerned	None of the time	3.5	.
6D9E.113	DAY 4	Yes	Yes	Yes	28/03/2024	31/03/2024	4.3	Boy	Not worried / concerned	Once in a while	Not worried / concerned	Not worried / concerned	A little worried / concerned	None of the time	6.3	2.83
6D9E.114	DAY 1	Yes	Yes	Yes	29/03/2024	29/03/2024	3.9	Girl	Hardly worried / concerned	Some of the time	Hardly worried / concerned	Hardly worried / concerned	Fairly worried / concerned	None of the time	5.3	.
6D9E.114	DAY 4	Yes	Yes	Yes	29/03/2024	01/04/2024	3.9	Girl	Not worried / concerned	Some of the time	A little worried / concerned	Not worried / concerned	Very worried / concerned	None of the time	5.3	0
6D9E.116	DAY 1	Yes	Yes	Yes	03/04/2024	03/04/2024	0.7	Boy	Hardly worried / concerned	Hardly any of the time	Hardly worried / concerned	Hardly worried / concerned	A little worried / concerned	None of the time	6	.
6D9E.116	DAY 4	Yes	Yes	Yes	03/04/2024	06/04/2024	0.7	Boy	Hardly worried / concerned	Some of the time	Hardly worried / concerned	A little worried / concerned	A little worried / concerned	None of the time	5.5	-0.5
6D9E.118	DAY 1	Yes	Yes	Yes	04/04/2024	04/04/2024	6	Girl	A little worried / concerned	Hardly any of the time	A little worried / concerned	A little worried / concerned	Somewhat worried / concerned	Hardly any of the time	5.2	.
6D9E.118	DAY 4	Yes	Yes	Yes	04/04/2024	07/04/2024	6	Girl	Not worried / concerned	Hardly any of the time	Hardly worried / concerned	Hardly worried / concerned	A little worried / concerned	None of the time	6.2	1
6D9E.129	DAY 1	Yes	Yes	Yes	14/10/2024	14/10/2024	2.2	Boy	Not worried / concerned	Some of the time	Somewhat worried / concerned	Somewhat worried / concerned	Fairly worried / concerned	Some of the time	4.3	.
6D9E.129	DAY 3	Yes	Yes	Yes	14/10/2024	16/10/2024	2.2	Boy	Somewhat worried / concerned	Some of the time	Somewhat worried / concerned	A little worried / concerned	Somewhat worried / concerned	Once in a while	4.3	0

Q1. Worried and/or concerned about the child's cough getting worse
Q2. Feeling tired and/or exhausted because of the child's cough
Q3. Worried/concerned about the effects of your child's cough on him/her
Q4. Worried and/or concerned about the cause of the child's cough
Q5. Worried and/or concerned that the child didn't sleep well due to cough
Q6. Change in family commitments due to child's cough

4.10 Secondary outcome - PAC-QoL items*

* This analysis was carried out on the Performance population but without patient 112, who could not be assessed at baseline.

Figure 18 and 19: Patient profile for PAC-QoL individual items - PERFORMANCE population– item 1 of PAC-QoL



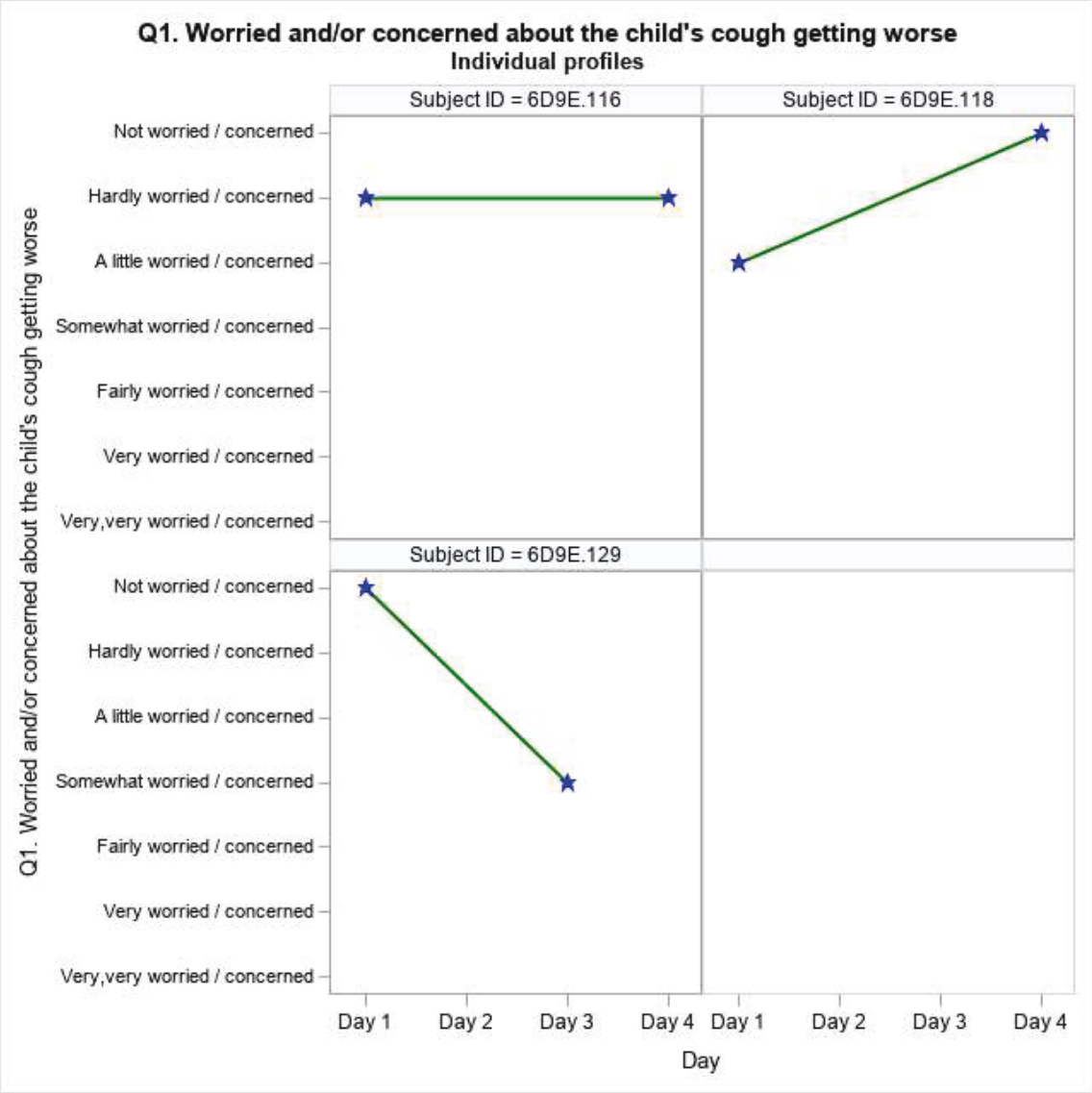
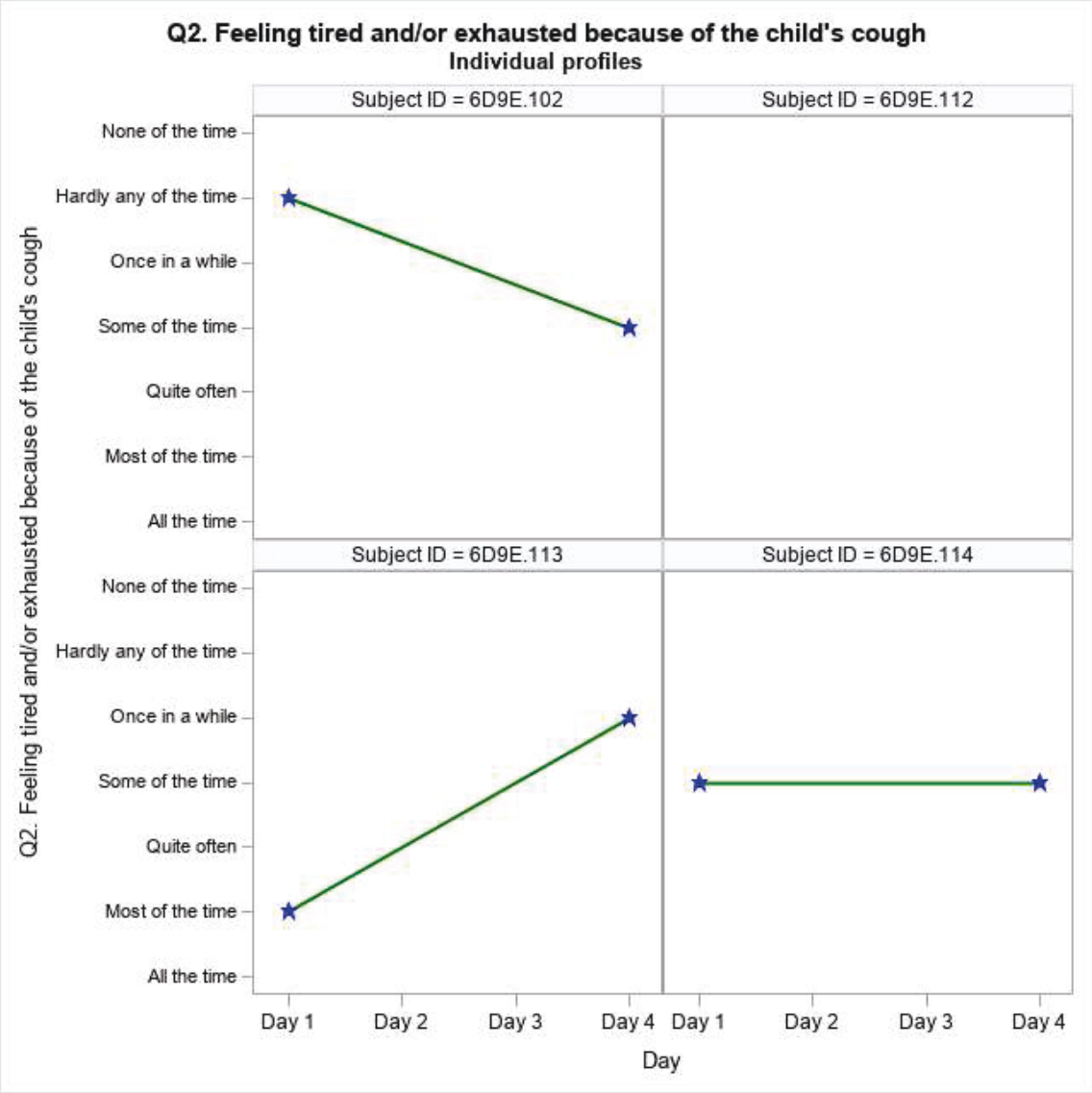

Q1. Worried and/or concerned about the child's cough getting worse
Individual profiles
Subject ID = 6D9E.116
Subject ID = 6D9E.118
Subject ID = 6D9E.129
Not worried / concerned
Hardly worried / concerned
A little worried / concerned
Somewhat worried / concerned
Fairly worried / concerned
Very worried / concerned
Very,very worried / concerned
Q1. Worried and/or concerned about the child's cough getting worse
Day 1
Day 2
Day 3
Day 4
Day

Figure 20 and 21: Patient profile for PAC-QoL individual items - PERFORMANCE population– item 2 of PAC-QoL



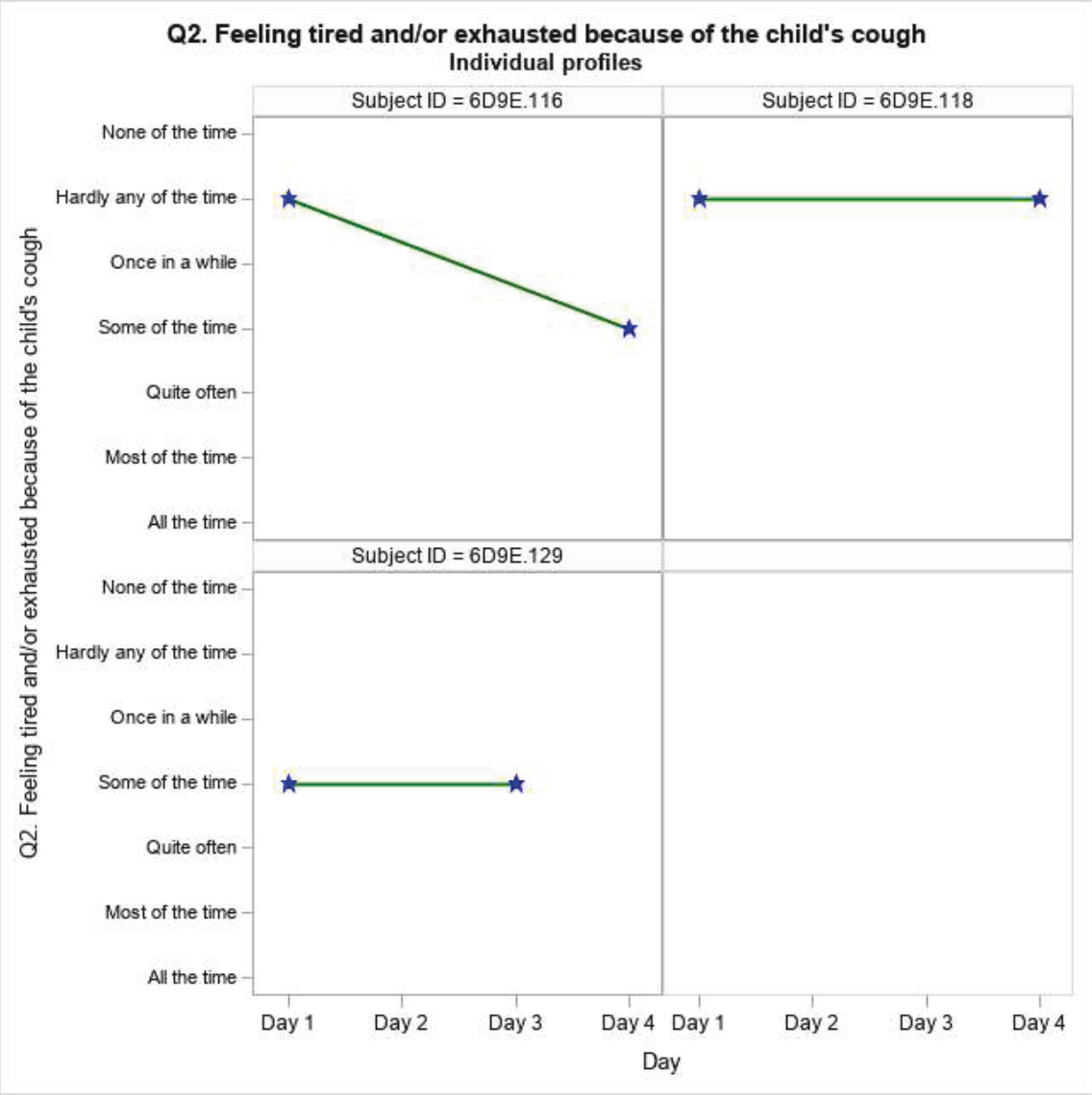
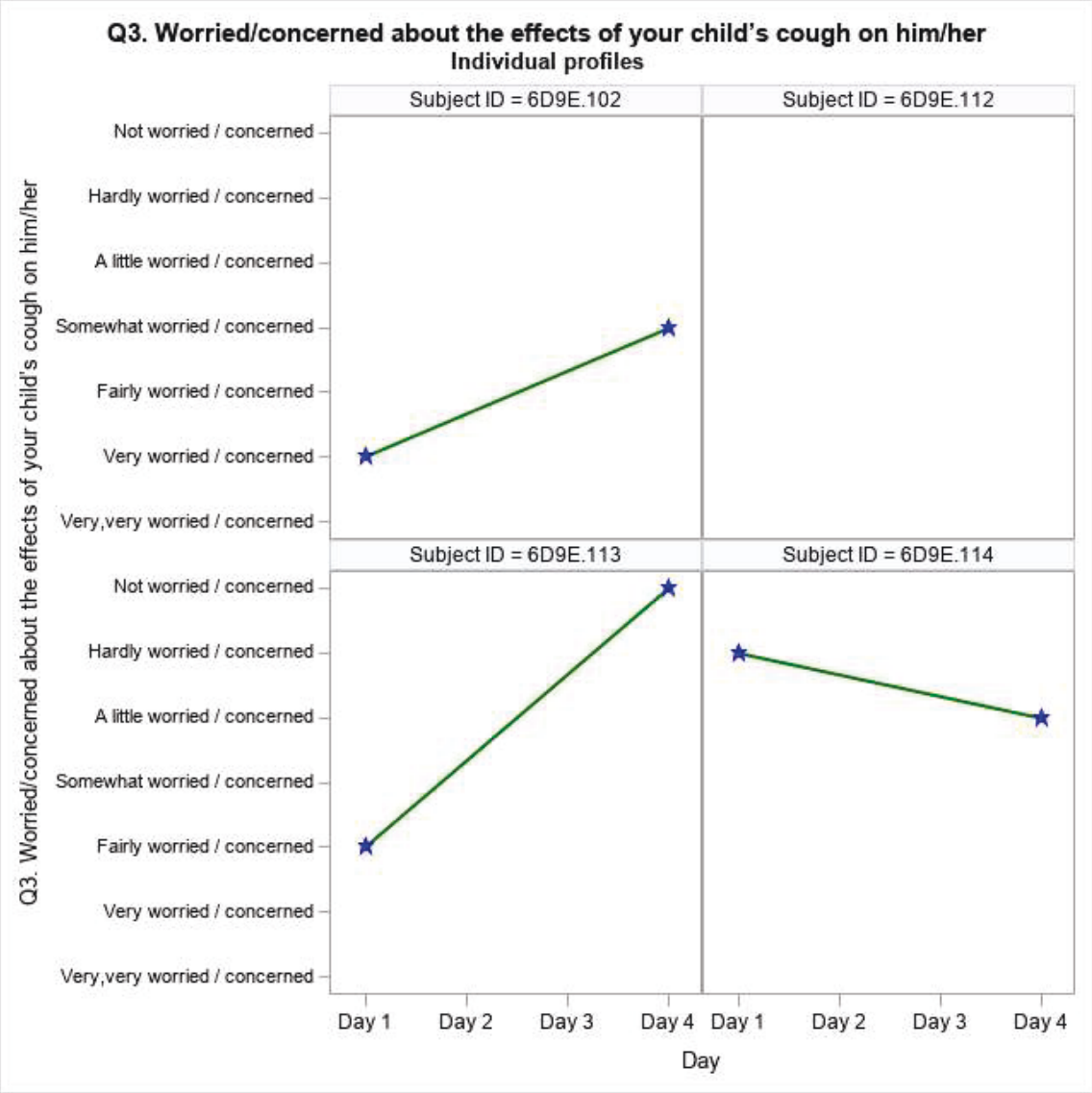

Q2. Feeling tired and/or exhausted because of the child's cough
Individual profiles
Subject ID = 6D9E.116
Subject ID = 6D9E.118
Subject ID = 6D9E.129
None of the time
Hardly any of the time
Once in a while
Some of the time
Quite often
Most of the time
All the time
Q2. Feeling tired and/or exhausted because of the child's cough
Day 1
Day 2
Day 3
Day 4
Day

Figure 22 and 23: Patient profile for PAC-QoL individual items - PERFORMANCE population– item 3 of PAC-QoL



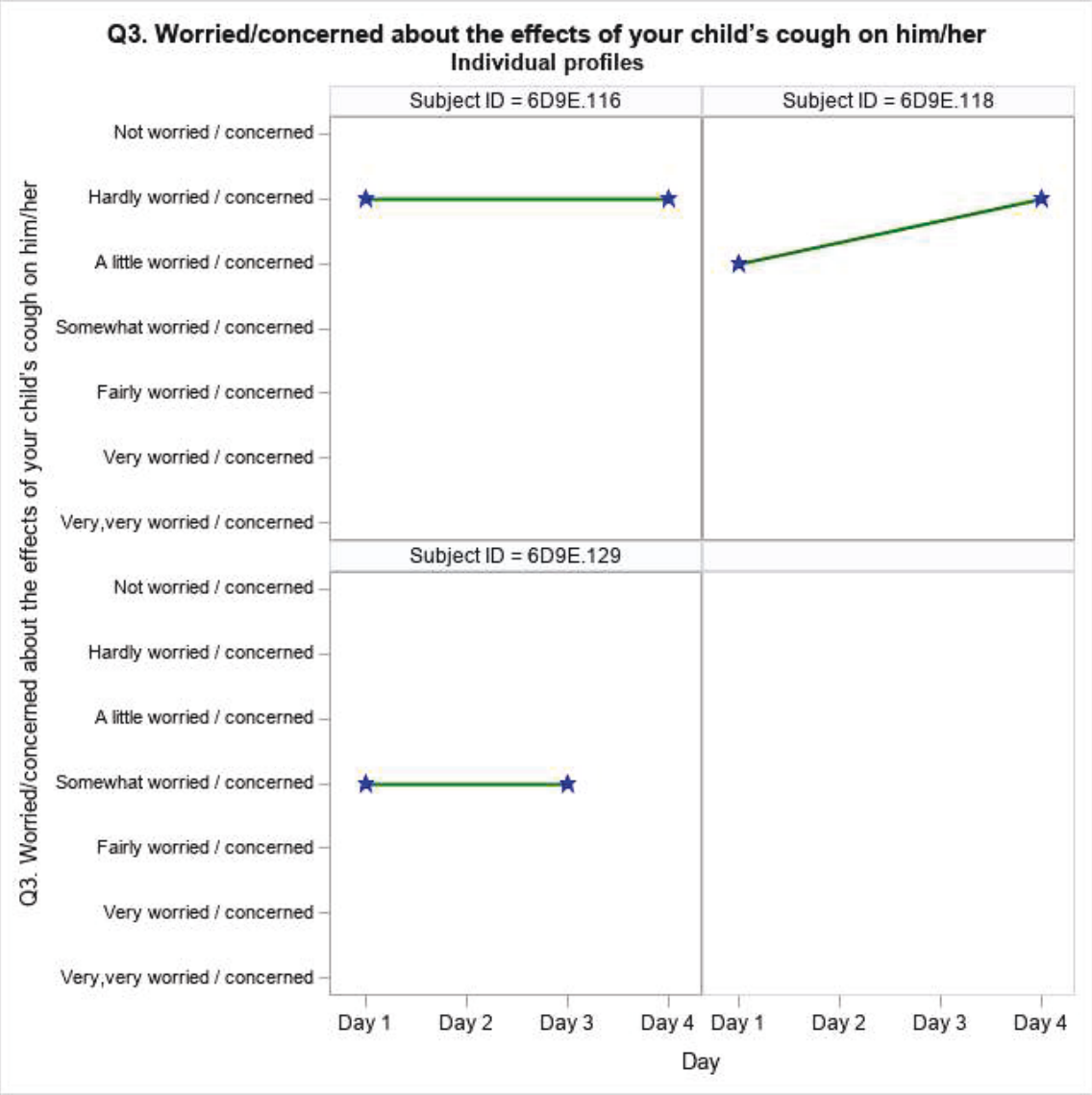
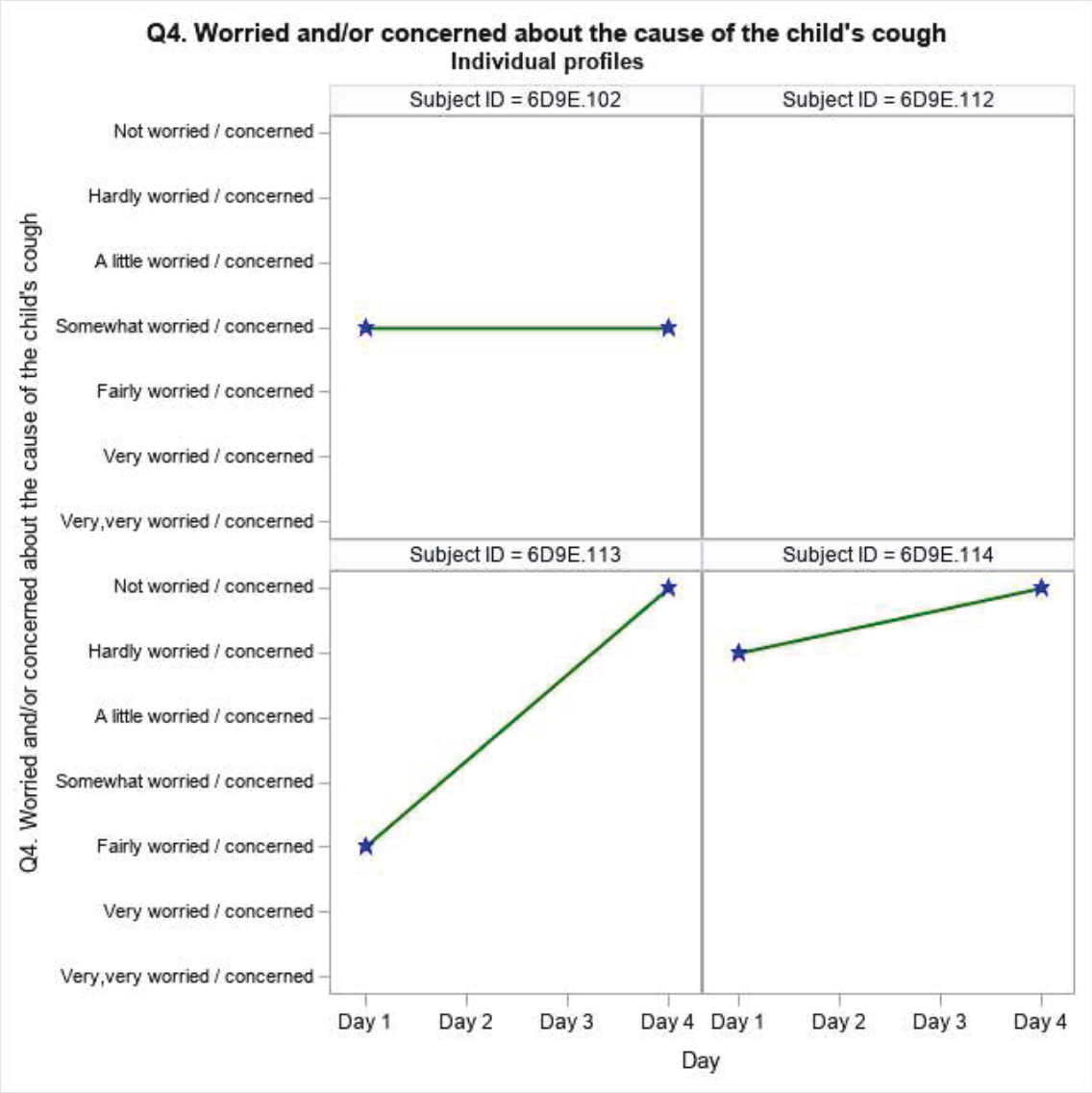

Q3. Worried/concerned about the effects of your child's cough on him/her
Individual profiles
Subject ID = 6D9E.116
Subject ID = 6D9E.118
Subject ID = 6D9E.129
Not worried / concerned
Hardly worried / concerned
A little worried / concerned
Somewhat worried / concerned
Fairly worried / concerned
Very worried / concerned
Very,very worried / concerned
Q3. Worried/concerned about the effects of your child's cough on him/her
Day 1
Day 2
Day 3
Day 4
Day

Figure 24 and 25: Patient profile for PAC-QoL individual items - PERFORMANCE population– item 4 of PAC-QoL



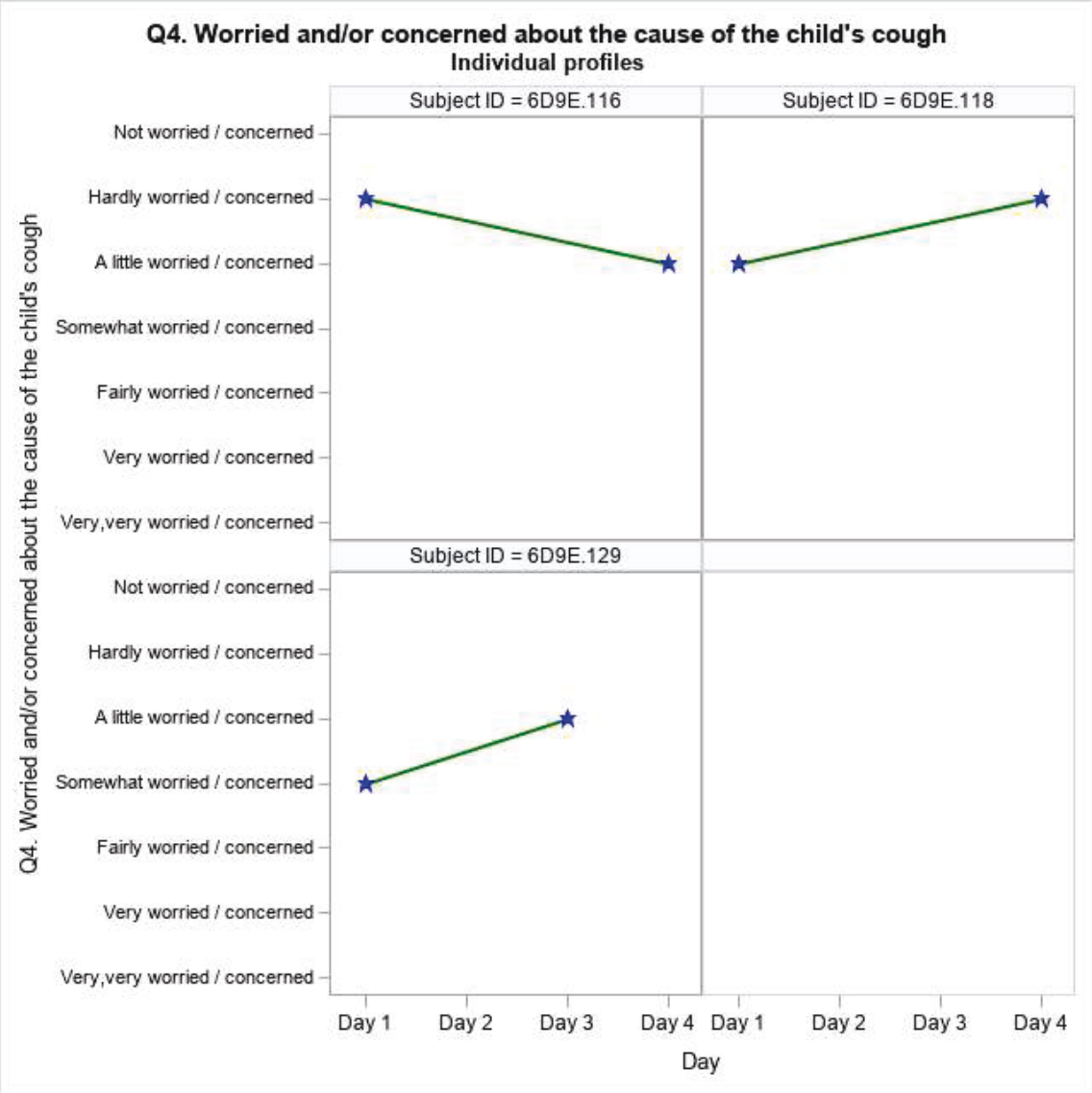
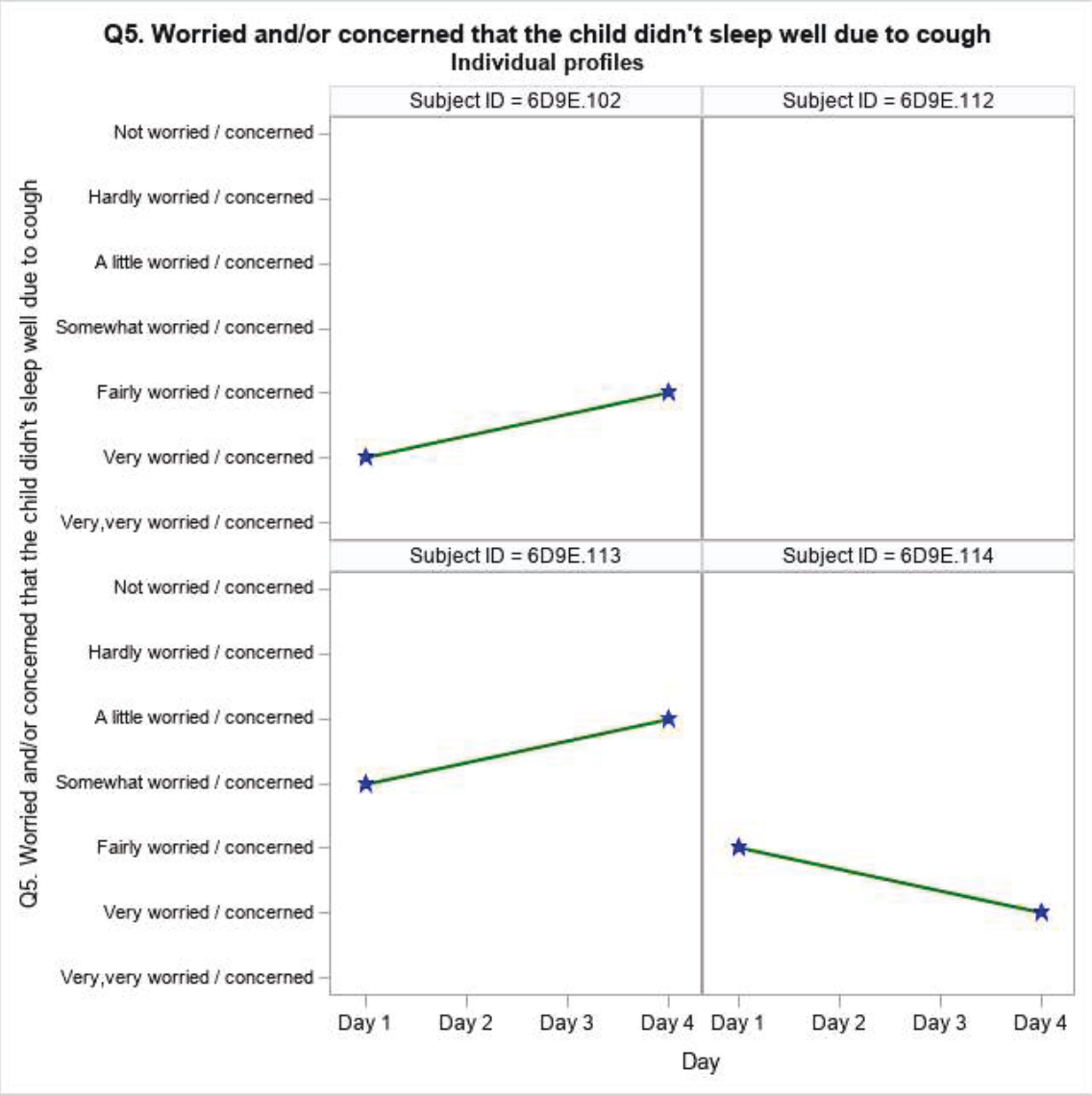

Q4. Worried and/or concerned about the cause of the child's cough
Individual profiles
Subject ID = 6D9E.116
Subject ID = 6D9E.118
Subject ID = 6D9E.129
Not worried / concerned
Hardly worried / concerned
A little worried / concerned
Somewhat worried / concerned
Fairly worried / concerned
Very worried / concerned
Very,very worried / concerned
Q4. Worried and/or concerned about the cause of the child's cough
Day 1
Day 2
Day 3
Day 4
Day

Figure 26 and 27: Patient profile for PAC-QoL individual items - PERFORMANCE population– item 5 of PAC-QoL



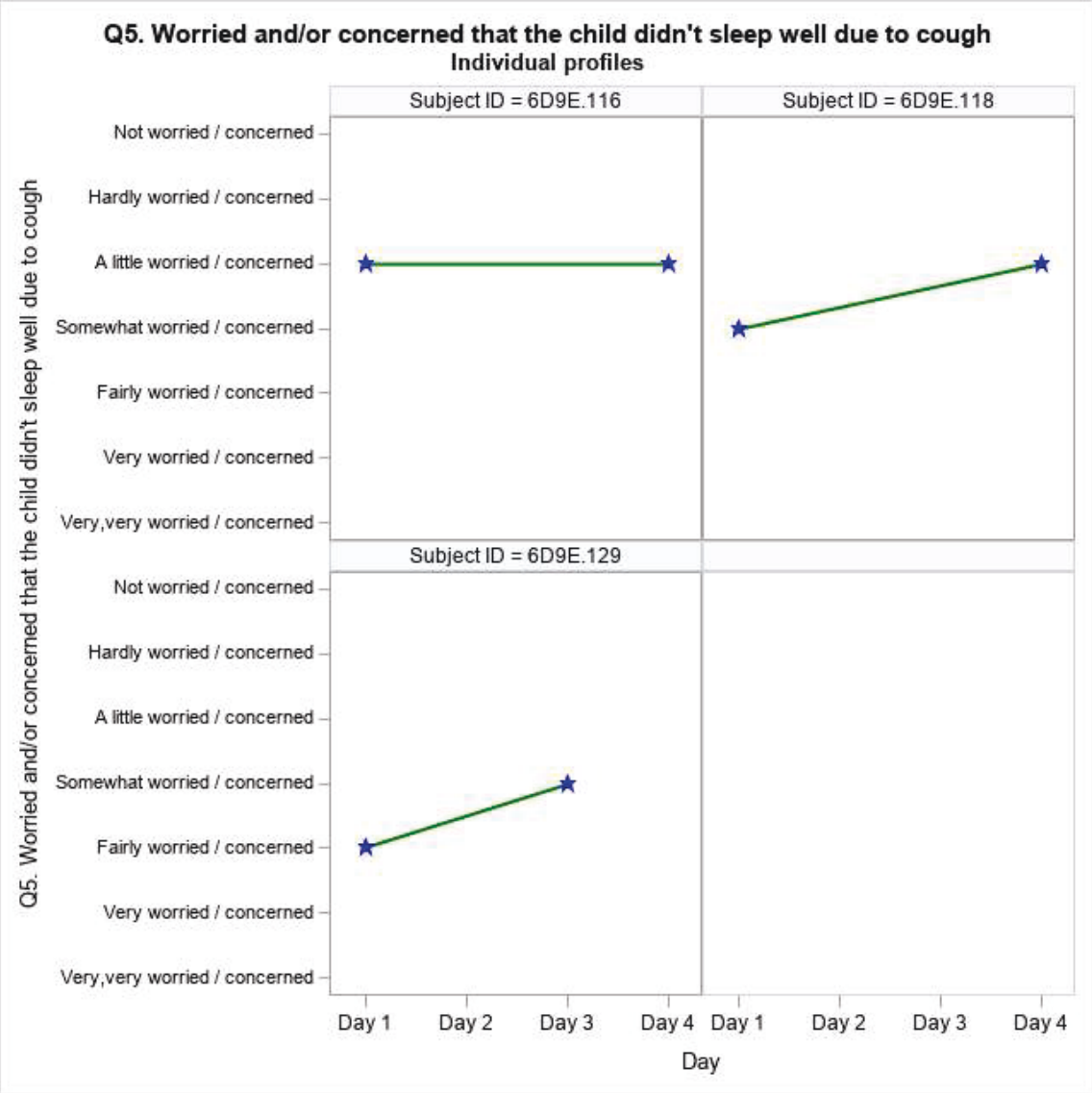
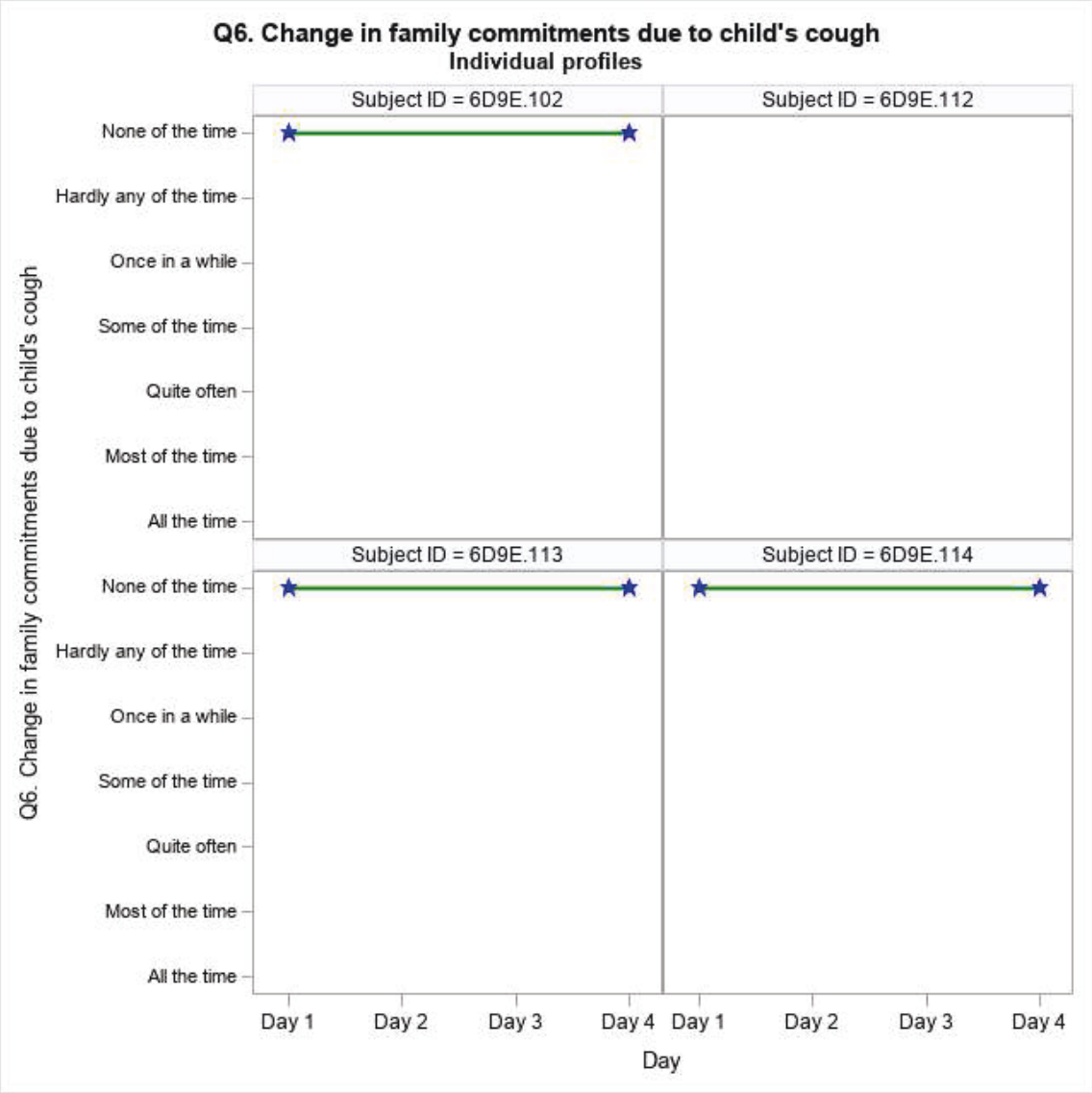
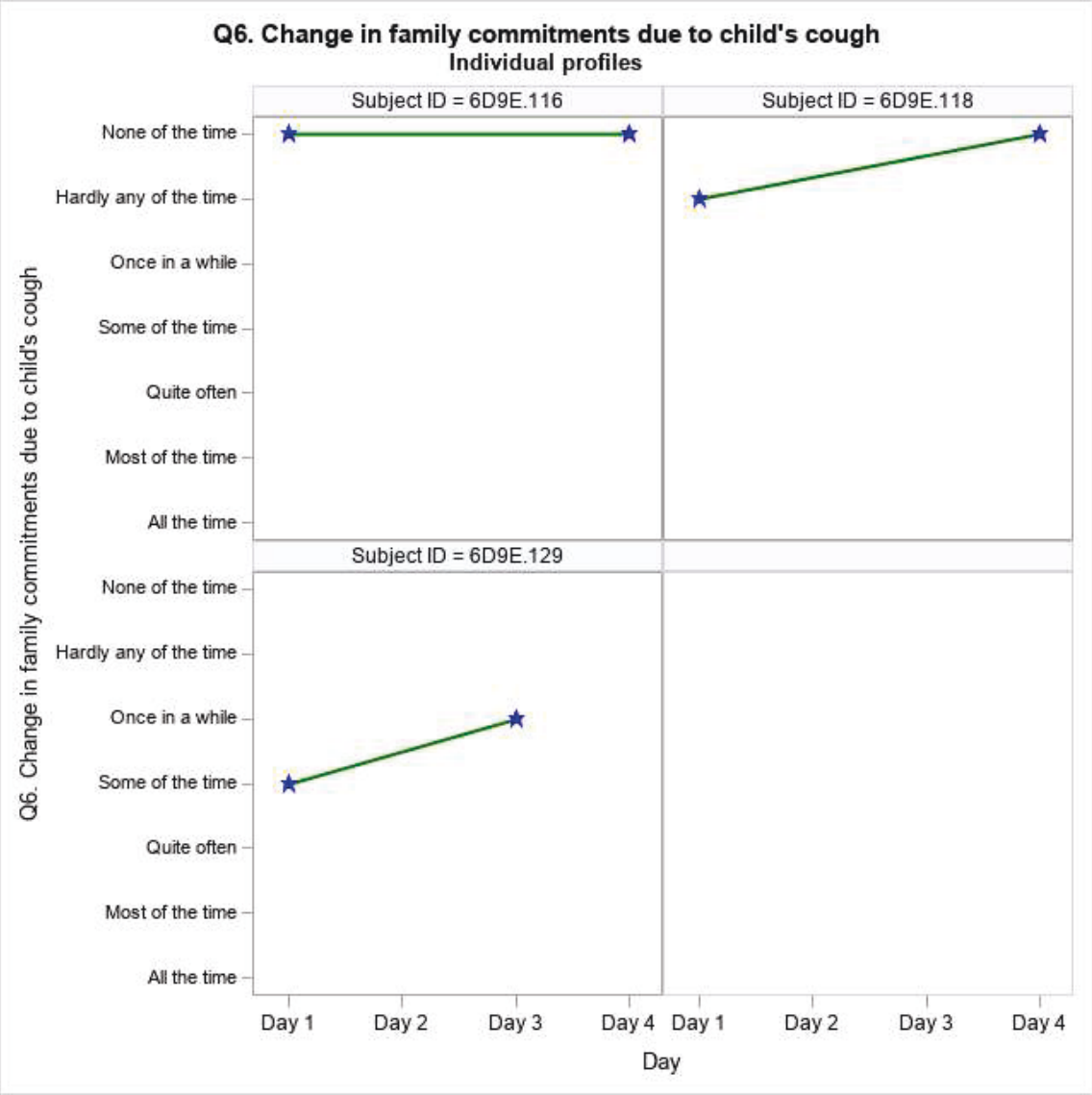

Q5. Worried and/or concerned that the child didn't sleep well due to cough
Individual profiles
Subject ID = 6D9E.116
Subject ID = 6D9E.118
Subject ID = 6D9E.129
Not worried / concerned
Hardly worried / concerned
A little worried / concerned
Somewhat worried / concerned
Fairly worried / concerned
Very worried / concerned
Very,very worried / concerned
Q5. Worried and/or concerned that the child didn't sleep well due to cough
Day 1
Day 2
Day 3
Day 4
Day

Figure 28 and 29: Patient profile for PAC-QoL individual items - PERFORMANCE population– item 6 of PAC-QoL




Q6. Change in family commitments due to child's cough
Individual profiles
Subject ID = 6D9E.116
Subject ID = 6D9E.118
Subject ID = 6D9E.129
None of the time
Hardly any of the time
Once in a while
Some of the time
Quite often
Most of the time
All the time
Q6. Change in family commitments due to child's cough
Day 1
Day 2
Day 3
Day 4
Day

4.11 Secondary outcome - Adherence (FAS population)

Listing 16: Daily consumption of syrup (n=12)

Patient number	FAS population	Safety population	Performance population	Inclusion Date	Age	Sex	Nb dose D1	Syrup taken the day before D2	Nb dose D2	Syrup taken the day before D3	Nb dose D3	Syrup taken the day before D4	Nb dose D4	Nb dose D5
6D9E.102	Yes	Yes	Yes	14/03/2024	5.3	Girl	2	Yes	3	Yes	1	Yes	3	0
6D9E.109	Yes	Yes	No	25/03/2024	1.5	Girl	0	Yes	0	.	0	.	0	0
6D9E.111	Yes	Yes	No	28/03/2024	2.3	Girl	1	Yes	4	Yes	4	Yes	2	0
6D9E.112	Yes	Yes	Yes	28/03/2024	3	Boy	0	Yes	0	Yes	0	.	0	0
6D9E.113	Yes	Yes	Yes	28/03/2024	4.3	Boy	0	Yes	2	Yes	0	No	0	0
6D9E.114	Yes	Yes	Yes	29/03/2024	3.9	Girl	2	Yes	3	Yes	3	Yes	2	1
6D9E.116	Yes	Yes	Yes	03/04/2024	0.7	Boy	1	Yes	3	Yes	2	Yes	1	0
6D9E.118	Yes	Yes	Yes	04/04/2024	6	Girl	1	Yes	3	Yes	3	Yes	1	0
6D9E.127	Yes	Yes	No	02/10/2024	5.6	Girl	1	Yes	3	Yes	2	Yes	3	0
6D9E.129	Yes	Yes	Yes	14/10/2024	2.2	Boy	1	Yes	2	No	0	.	0	0
6D9E.133	Yes	Yes	No	04/11/2024	0.7	Boy	0	Yes	3	Yes	2	Yes	2	0
6D9E.134	Yes	Yes	No	06/11/2024	2.1	Girl	0	Yes	0	.	0	.	0	0

4.12 Secondary outcome - Satisfaction questionnaire (FAS population)

Table 12 : Parents' satisfaction with Petit Drill, at 2-day treatment or at 3-day treatment – FAS population

Satisfaction		All patients (FAS population) N=12
		D4 n= 8 (or D3 n=1)*
Quality of therapeutic management received by the child	N	9
	Missing	3
	Excellent	2 (22.2%)
	Good	5 (55.6%)
	Fair	1 (11.1%)
	Poor	1 (11.1%)
Response to the child's needs	N	9
	Missing	3
	Almost all my child's needs were met	2 (22.2%)
	Most of my child's needs were met	4 (44.4%)
	Only few of my child's needs were met	3 (33.3%)
	None of my child's needs were met	0 (0.0%)
Willingness to recommend the syrup to another parent	N	9
	Missing	3
	No, definitely not	1 (11.1%)
	Not really	1 (11.1%)
	Yes, generally	2 (22.2%)
	Yes, definitely	5 (55.6%)
Satisfaction with information received from the IFU to use this treatment	N	9
	Missing	3
	Quite dissatisfied	0 (0.0%)
	Indifferent or mildly dissatisfied	0 (0.0%)
	Mostly satisfied	6 (66.7%)
	Very satisfied	3 (33.3%)
Ease of use of the syrup	N	9
	Missing	3
	No, definitely not	0 (0.0%)
	Not really	0 (0.0%)
	Yes, generally	2 (22.2%)
	Yes, definitely	7 (77.8%)

	N	9
	Missing	3
Feeling that the child enjoyed the taste of the syrup	No, definitely not	0 (0.0%)
	Not really	0 (0.0%)
	Yes, generally	2 (22.2%)
	Yes, definitely	7 (77.8%)

*3 patients did not complete the satisfaction questionnaire (patients prematurely discontinued from the study)

Listing 17: Parents' satisfaction (D3 or D4) (FAS population) (n=12 with 3 missing satisfaction questionnaires)

Patient number	FAS	SAFETY	PERFORMANCE	Inclusion Date	Age	Sex	Questionnaire date	Day of completion	Q1	Q2	Q3	Q4	Q5	Q6
6D9E.102	Yes	Yes	Yes	14/03/2024	5.3	Girl	17/03/2024	Day 4	Good	Most of my child's needs were met	Yes, definitely	Mostly satisfied	Yes, definitely	Yes, definitely
6D9E.109	Yes	Yes	No	25/03/2024	1.5	Girl	.		.	.	.	.	.	.
6D9E.111	Yes	Yes	No	28/03/2024	2.3	Girl	31/03/2024	Day 4	Poor	Only few of my child's needs were met	No, definitely not	Mostly satisfied	Yes, generally	Yes, generally
6D9E.112	Yes	Yes	Yes	28/03/2024	3	Boy	.		.	.	.	.	.	.
6D9E.113	Yes	Yes	Yes	28/03/2024	4.3	Boy	31/03/2024	Day 4	Good	Most of my child's needs were met	Yes, generally	Mostly satisfied	Yes, definitely	Yes, definitely
6D9E.114	Yes	Yes	Yes	29/03/2024	3.9	Girl	01/04/2024	Day 4	Excellent	Almost all of my child's needs were met	Yes, definitely	Mostly satisfied	Yes, definitely	Yes, definitely
6D9E.116	Yes	Yes	Yes	03/04/2024	0.7	Boy	06/04/2024	Day 4	Excellent	Almost all of my child's needs were met	Yes, definitely	Very satisfied	Yes, definitely	Yes, definitely
6D9E.118	Yes	Yes	Yes	04/04/2024	6	Girl	07/04/2024	Day 4	Good	Most of my child's needs were met	Yes, definitely	Mostly satisfied	Yes, definitely	Yes, definitely
6D9E.127	Yes	Yes	No	02/10/2024	5.6	Girl	05/10/2024	Day 4	Good	Only few of my child's needs were met	Yes, generally	Very satisfied	Yes, definitely	Yes, definitely
6D9E.129	Yes	Yes	Yes	14/10/2024	2.2	Boy	16/10/2024	Day 3	Good	Most of my child's needs were met	Yes, definitely	Mostly satisfied	Yes, generally	Yes, definitely
6D9E.133	Yes	Yes	No	04/11/2024	0.7	Boy	07/11/2024	Day 4	Fair	Only few of my child's needs were met	Not really	Very satisfied	Yes, definitely	Yes, generally
6D9E.134	Yes	Yes	No	06/11/2024	2.1	Girl	.		.	.	.	.	.	.

Q1. Quality of therapeutic management received by the child
Q2. Response to the child's needs
Q3. Willingness to recommend the syrup to another parent
Q4. Satisfaction with information received from the IFU to use this treatment
Q5. Ease of use of the syrup
Q6. Feeling that the child enjoyed the taste of the syrup

4.13 Secondary outcome: Safety evaluation - SAFETY population

Table 13 : Adverse events – Summary of AEs (SAFETY)

Safety		All patients (SAFETY) N=12
		# events	**# patients (%)**
Number of patients with at least one:			
Adverse events (AEs)		7	4 (33.3%)
Serious Adverse Events (SAEs)		0	0 (0.0%)
Adverse Device Effect (ADE): related to procedures		2	1 (8.3%)
Adverse Device Effect (ADE): related to device		2	1 (8.3%)
Serious Adverse Device Effect (SADE): related to procedures		0	0 (0.0%)
Serious Adverse Device Effect (SADE): related to device		0	0 (0.0%)
AEs leading to dose or frequency modifications		0	0 (0.0%)
AEs leading to temporary treatment discontinuation		0	0 (0.0%)
AEs leading to permanent treatment discontinuation		1	1 (8.3%)
AEs leading to the need of concomitant treatment		4	2 (16.7%)
SAEs leading to permanent treatment discontinuation		0	0 (0.0%)
SAEs leading to the need of concomitant treatment		0	0 (0.0%)
Non-serious AEs		7	4 (33.3%)
AEs leading to death		0	0 (0.0%)
SAE leading to death		0	0 (0.0%)
Treatment-related AEs leading to death		0	0 (0.0%)
Number of adverse events (AE) per patient		0	8 (66.7%)
		1	1 (8.3%)
		2	3 (25%)
		3	0 (0.0%)
		4-8	0 (0.0%)
		>8	0 (0.0%)
		N	12
		Missing	0
		Mean (± SD)	0.6 ± 0.9
		Median	0
		Q1-Q3	0 - 1.5
		Min – Max	0 - 2
Number of ADE per patient: related to procedure		0	11 (91.7%)
		1	0 (0.0%)
		2	1 (8.3%)
		3	0 (0.0%)
		4-8	0 (0.0%)

	>8	0 (0.0%)
	N	12
	Missing	0
	Mean (± SD)	0.2 ± 0.6
	Median	0
	Q1-Q3	0 - 0
	Min – Max	0 - 2
Number of ADE per patient: related to device	0	11 (91.7%)
	1	0 (0.0%)
	2	1 (8.3%)
	3	0 (0.0%)
	4-8	0 (0.0%)
	>8	0 (0.0%)
	N	12
	Missing	0
	Mean (± SD)	0.2 ± 0.6
	Median	0
	Q1-Q3	0 - 0
	Min – Max	0 - 2

Listing 18: Listing of all AE (n= 7 AE for 4 patients)

Subject ID	6D9E.111	6D9E.127	6D9E.133	6D9E.134
Presence of the patient in the FAS population	Yes	Yes	Yes	Yes
Presence of the patient in the SAFETY population	Yes	Yes	Yes	Yes
Presence of the patient in the PERFORMANCE population	No	No	No	No
Date of inclusion	28/03/2024	02/10/2024	04/11/2024	06/11/2024
Age calculated in years	2.3	5.6	0.7	2.1
Sex (D1)	Girl	Girl	Boy	Girl
Number of adverse events per child	2	2	2	1
EI 1 : 1st adverse event	VOMITING	HEAVY FATIGUE	DOSAGE ERROR	TONSILLITIS
MedDRA Primary System Organ Class Term text for the 1st adverse event	GASTROINTESTINAL DISORDERS	GENERAL DISORDERS AND ADMINISTRATION SITE CONDITIONS	INJURY, POISONING AND PROCEDURAL COMPLICATIONS	RESPIRATORY, THORACIC AND MEDIASTINAL DISORDERS
MedDRA Preferred Term text for the 1st adverse event	VOMITING	FATIGUE	UNDERDOSE	TONSILLITIS
Onset date for the 1st adverse event	30/03/2024	03/10/2024	06/11/2024	07/11/2024
End date for the 1st adverse event	31/03/2024	05/10/2024	06/11/2024	07/11/2024
AE duration, AE for the 1st adverse event	1	2	0	0
Intensity for the 1st adverse event	Moderate	.	.	Moderate
EI 2 : 2nd adverse event	INCREASED COUGH	INTENSE SORE THROAT	PRODUCT UNDERDOSING DUE TO INCORRECT PIPETTE HANDLING	
MedDRA Primary System Organ Class Term text for 2nd adverse event	RESPIRATORY, THORACIC AND MEDIASTINAL DISORDERS	RESPIRATORY, THORACIC AND MEDIASTINAL DISORDERS	INJURY, POISONING AND PROCEDURAL COMPLICATIONS	
MedDRA Preferred Term text for 2nd adverse event	COUGH	OROPHARYNGEAL PAIN	DEVICE USE ERROR	
Onset date for 2nd adverse event	30/03/2024	03/10/2024	06/11/2024	.
End date for 2nd adverse event	31/03/2024	05/10/2024	06/11/2024	.
AE duration, AE # for 2nd adverse event	1	2	0	.

Subject ID	6D9E.111	6D9E.127	6D9E.133	6D9E.134
Intensity for 2nd adverse event	Moderate	.	.	.
Evolution	Recovered without sequelae	Unknown	Unknown	Unknown
Recovered date (for both EI in case of 2 AE)	31/03/2024	.	.	.
Occurrence of at least one serious adverse event	No	No	No	No
Following the occurrence of the adverse event(s), the dose of Petit Drill was	None	.	.	Stopping product
Adverse Device Effect	Yes, an ADE related to the procedure	No, not an ADE	Yes, an ADE related to the device	No, not an ADE

4.14 Secondary outcome: Device deficiencies (SAFETY)

Table 14 : Device deficiencies - SAFETY population

Device deficiencies		All patients (SAFETY)
		N=12*
The bottle damaged during the use	N	9
	Missing	3
	No	9 (100.0%)
	Yes	0 (0.0%)
The pipette damaged during the use	N	9
	Missing	3
	No	9 (100.0%)
	Yes	0 (0.0%)
Use of more or less than the prescribed dose due to difficulty using the pipette	N	9
	Missing	3
	No	8 (88.9%)
	Yes	1 (11.1%)**
Use of more or less than the prescribed dose due to lack of clarity in the IFU	N	9
	Missing	3
	No	9 (100.0%)
	Yes	0 (0.0%)
Eye and/or ear damage during use	N	9
	Missing	3
	No	9 (100.0%)
	Yes	0 (0.0%)
Child potentially allergic to syrup	N	9
	Missing	3
	No	9 (100.0%)
	Yes	0 (0.0%)
Someone else, other than the child used the syrup (including accidental use)	N	9
	Missing	3
	No	9 (100.0%)
	Yes	0 (0.0%)
Child accidently accesses the bottle	N	9
	Missing	3
	No	9 (100.0%)
	Yes	0 (0.0%)
Other pipette used than the one proposed	N	9
	Missing	3
	No	9 (100.0%)

Device deficiencies		All patients (SAFETY)
		N=12*
	Yes	0 (0.0%)
Syrup reached air tube	N	9
	Missing	3
	No	9 (100.0%)
	Yes	0 (0.0%)
Pipette reached air tube	N	9
	Missing	3
	No	9 (100.0%)
	Yes	0 (0.0%)

*3 patients did not complete the device deficiencies questionnaire (patients prematurely discontinued from the study)
** patient 133 with misuse (cf AE section)