

Division	: Worldwide Development
Information Type	: Reporting and Analysis Plan (RAP)

Title	: Reporting and Analysis Plan for Study 204958: An open-label, randomised, three arm, single dose, multi-centre, parallel group study in healthy subjects to compare the pharmacokinetics of subcutaneous mepolizumab when delivered as a liquid drug product in a safety syringe or an auto injector with a reconstituted lyophilised drug product from a vial.
Compound Number	: SB-240563
Effective Date	: 03-AUG-2017

Description :

- The purpose of this RAP is to describe the planned statistical analyses and associated data displays to be included in the Clinical Study Report for Protocol 204958.
- This RAP defines the content of the final Statistical Analysis Complete (SAC) deliverable.

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1. REPORTING & ANALYSIS PLAN SYNOPSIS

Overview	Key Elements of the Reporting and Analysis Plan (RAP)
Purpose	<ul style="list-style-type: none"> This RAP defines the content of the final Statistical Analysis Complete (SAC) deliverable.
Protocol	<ul style="list-style-type: none"> This RAP is based on protocol amendment 2 dated 17-NOV-2016 [GlaxoSmithKline Document Number: 2016N275057_02].
Primary Objective / Endpoint	<ul style="list-style-type: none"> To compare the pharmacokinetics of subcutaneous mepolizumab following a single dose of the liquid drug product in safety syringe with the lyophilized drug product. <ul style="list-style-type: none"> Mepolizumab PK parameters: Cmax, AUC(0-t) and AUC(0-∞) To compare the pharmacokinetics of subcutaneous mepolizumab following a single dose of the liquid drug product in autoinjector with the lyophilized drug product. <ul style="list-style-type: none"> Mepolizumab PK parameters: Cmax, AUC(0-t) and AUC(0-∞)
Study Design	<ul style="list-style-type: none"> Single dose, randomised, open-label, multi-centre, parallel group study in healthy subjects. Two test drug products (mepolizumab liquid drug product in an autoinjector and mepolizumab liquid drug product in a safety syringe) will be compared with a reference drug product (reconstituted lyophilised mepolizumab drug product from a vial). Approximately 243 healthy subjects will be randomised to obtain at least 216 completed subjects. Mepolizumab injection site (upper arm, abdomen or thigh) and treatment will be assigned randomly. The randomisation will be stratified by body weight (<70kg, 70-80kg and ≥80kg). Subjects will be followed for 85 days following drug administration.
Analysis Population	<ul style="list-style-type: none"> Primary: Pharmacokinetic Population. Comprise all subjects receiving study drug for whom a pharmacokinetic sample was obtained and analysed.
Hypothesis	<ul style="list-style-type: none"> No formal hypothesis will be tested. For AUC(0-t), AUC(0-∞) and Cmax, point estimates and corresponding two-sided 90% confidence intervals will be constructed for the ratio of the geometric mean of each test treatment to the geometric mean of the reference treatment, $\mu(\text{test})/\mu(\text{reference})$.
Primary Analyses	<ul style="list-style-type: none"> The analysis for each treatment comparison will be conducted excluding subjects receiving the test treatment that is not relevant for that comparison. The parameters AUC(0-t), AUC(0-∞) and Cmax will be \log_e transformed and analysed separately using a fixed effects model, including treatment group and injection site (upper arm, abdomen, thigh) as categorical variables and baseline weight as a continuous covariate fitted on the \log_e scale. Point estimates and associated two-sided 90% CIs will be constructed for the differences between the test and reference treatments on the \log_e scale; these will be back-transformed to provide point estimates and two-sided 90% CIs for the ratio of each of the test treatments to the reference treatment on the original scale.

Overview	Key Elements of the Reporting and Analysis Plan (RAP)
Secondary Analyses	<ul style="list-style-type: none">Safety data will be presented in tabular and/or graphical format and summarised descriptively according to GSK's Integrated Data Standards Library (IDSL) standards.
Exploratory Analyses	<ul style="list-style-type: none">Ratio to baseline blood eosinophils will be log transformed and compared between treatments at each visit using a mixed model repeated measures analysis, adjusting for the covariates of baseline blood eosinophil count (log scale) and baseline weight (log scale). Visit and injection site (upper arm, abdomen, thigh) will be fitted as categorical variables with the effect of treatment group and baseline blood eosinophil count varying at each visit (i.e. visit-by-baseline and visit-by-treatment interactions will be included in the model).

2. SUMMARY OF KEY PROTOCOL INFORMATION

2.1. Changes to the Protocol Defined Statistical Analysis Plan

Three additional analysis populations were defined for reporting screen failures, inclusion exclusion criteria deviations and blood eosinophils. These are described in Section 4.

There are no other changes to the protocol defined statistical analysis plan.

2.2. Study Objective(s) and Endpoint(s)

Objectives	Endpoints
Primary Objectives	Primary Endpoints
<ul style="list-style-type: none"> To compare the pharmacokinetics of subcutaneous mepolizumab following a single dose of the liquid drug product in safety syringe with the lyophilized drug product. To compare the pharmacokinetics of subcutaneous mepolizumab following a single dose of the liquid drug product in autoinjector with the lyophilized drug product. 	<ul style="list-style-type: none"> Mepolizumab PK parameters: Cmax, AUC(0-t) and AUC(0-∞) Mepolizumab PK parameters: Cmax, AUC(0-t) and AUC(0-∞)
Secondary Objectives	Secondary Endpoints
<ul style="list-style-type: none"> To assess additional pharmacokinetic parameters following mepolizumab subcutaneous administration of the liquid drug product in autoinjector or the liquid drug product in safety syringe in comparison with the lyophilized drug product, as data permit. To assess the safety and tolerability of mepolizumab following a single SC dose of the liquid drug product in autoinjector or the liquid drug product in safety syringe in comparison with the lyophilised drug product. To assess the immunogenicity of mepolizumab following a single SC dose of the liquid drug product in autoinjector or the liquid drug product in safety syringe in 	<ul style="list-style-type: none"> Mepolizumab PK parameters: tmax, CL/F, Vd/F, λz, t ½, tlast, %AUCex Adverse events (AEs), serious adverse events (SAEs), including systemic reactions and injection site reactions Haematology and Clinical Chemistry Vital signs 12-lead ECG Frequency of positive anti-mepolizumab binding antibodies and neutralizing antibodies

Objectives	Endpoints
comparison with the lyophilised drug product.	
Exploratory Objectives	Exploratory Endpoints
<ul style="list-style-type: none"> To evaluate mepolizumab pharmacodynamic effects on blood eosinophil count following a single SC dose of the liquid drug product in safety syringe or the liquid drug product in autoinjector in comparison with the lyophilised drug product. To evaluate safety syringe and autoinjector use & functionality. 	<ul style="list-style-type: none"> Ratio to baseline in blood eosinophil count over time User and device errors

2.3. Study Design

Overview of Study Design and Key Features	
<pre> graph TD A[Healthy subjects n=243 (216 completed subjects) 1:1:1 72 per group] --> B[Lyophilised powder/vial] A --> C[Liquid/autoinjector] A --> D[Liquid/safety syringe] B --> E[100mg SC] C --> E D --> E E --> F[Day 85/follow up] F --> G[PK, PD, safety, immunogenicity] </pre>	
Design Features	<ul style="list-style-type: none"> Single dose, randomised, open-label, multi-centre, parallel group study in healthy subjects. Two test drug products (mepolizumab liquid drug product in an autoinjector and mepolizumab liquid drug product in a safety syringe) will be compared with a reference drug product (reconstituted lyophilised mepolizumab drug product from a vial). Subjects followed for 85 days following drug administration.
Dosing	<ul style="list-style-type: none"> A single dose of 100mg mepolizumab administered subcutaneously by a health care professional.

Overview of Study Design and Key Features	
Treatment Assignment	<ul style="list-style-type: none"> Approximately 243 healthy subjects will be randomised to obtain at least 216 completed subjects. Mepolizumab injection site and treatment will be assigned randomly and the randomization schedule will be generated using GSK validated randomisation software RandAll NG. Allocations to injection site and treatment will be made centrally via an interactive response system (IRS). The randomisation will be stratified by body weight (<70kg, 70-<80kg and ≥80kg) measured on Day -1. Subjects will be randomised in a 1:1:1 ratio to one of 3 different injection sites (upper arm, abdomen and thigh) and in a 1:1:1 ratio to one of 3 mepolizumab treatments (liquid drug product in an autoinjector, liquid drug product in a safety syringe and reconstituted lyophilised drug product from a vial). A minimum of 27 subjects will be randomised within each of the 3 body weight strata to ensure at least 3 subjects within each body weight strata, injection site and mepolizumab treatment combination.
Time and events	<ul style="list-style-type: none"> See Appendix 1: Time & Events.
Interim Analysis	<ul style="list-style-type: none"> No interim analyses are planned.

2.4. Statistical Hypotheses

This study is designed to evaluate mepolizumab PK comparability following a single SC administration, i.e. the relative bioavailability, between

- The liquid drug product from the autoinjector (test) and the reconstituted lyophilised drug product from the vial (reference)
- The liquid drug product from the safety syringe (test) and the reconstituted lyophilised drug product from the vial (reference)

For AUC(0-t), AUC(0-∞) and Cmax, point estimates and corresponding two-sided 90% confidence intervals will be constructed for the ratio of the geometric mean of each test treatment to the geometric mean of the reference treatment, $\mu(\text{test})/\mu(\text{reference})$. No formal hypothesis will be tested. However, interpretation of the comparability of the autoinjector and safety syringe with the reconstituted lyophilised drug product will be guided by a two-sided 90% confidence interval (CI) for $\mu(\text{test})/\mu(\text{reference})$ in the range (0.80, 1.25) for AUC(0-t), AUC(0-∞) and Cmax.

3. PLANNED ANALYSES

3.1. Interim Analyses

No interim analyses are planned.

3.2. Final Analyses

The final planned analyses will be performed after the completion of the following steps:

1. All subjects have completed the study as defined in the protocol.
2. All required database cleaning activities have been completed and final database release and database freeze (DBF) has been declared by Data Management.
3. A review has taken place to identify any subjects with a discrepancy between randomised treatment and actual treatment received. This information will be included in the SDTM datasets at database freeze (DBF).
4. Treatment allocations have been unblinded via the RandAll NG system, as described in SOP_54840. Although the study is open-label, treatment allocations remain blinded in the RandAll NG system until source data lock (SDL) as per SOP_54840.

4. ANALYSIS POPULATIONS

Population	Definition / Criteria	Analyses Evaluated
All Subjects Enrolled	<ul style="list-style-type: none"> • Comprise all subjects enrolled and for whom a record exists in the data base. 	<ul style="list-style-type: none"> • Screen failures
Randomised	<ul style="list-style-type: none"> • Comprise all randomised subjects 	<ul style="list-style-type: none"> • Listing of exclusions from study populations
All Treated Subjects (Safety)	<ul style="list-style-type: none"> • Comprise all subjects who receive mepolizumab. • This population will be based on the treatment the subject actually received. 	<ul style="list-style-type: none"> • Study population • Safety • Immunogenicity • User/device errors
Pharmacokinetic (PK)	<ul style="list-style-type: none"> • Subjects in the 'All Treated Subjects' population for whom a PK sample was obtained and analysed. • This population will be based on the treatment the subject actually received. 	<ul style="list-style-type: none"> • PK, including primary analysis
Pharmacodynamic (PD)	<ul style="list-style-type: none"> • Subjects in the 'All Treated Subjects' population who had a baseline PD measurement and at least one post-treatment PD measurement. • This population will be based on the treatment the subject actually received. 	<ul style="list-style-type: none"> • Blood eosinophils

NOTES :

- Please refer to [Appendix 10](#): List of Data Displays which details the population to be used for each displays being generated.

4.1. Protocol Deviations

- Protocol deviations will be tracked by the study team throughout the conduct of the study in accordance with the Protocol Deviation Management Plan.
 - Data will be reviewed prior to DBF to ensure all important deviations are captured and categorised on the protocol deviations dataset.
 - This dataset will be the basis for the summaries and listings of protocol deviations.
- Important protocol deviations (including deviations related to study inclusion/exclusion criteria, conduct of the trial, subject management or subject assessment) will be summarised and listed.
- A separate summary and listing of all inclusion/exclusion criteria deviations will also be provided. This summary will be based on data as recorded on the inclusion/exclusion page of the eCRF.

5. CONSIDERATIONS FOR DATA ANALYSES AND DATA HANDLING CONVENTIONS

Table 1 provides an overview of appendices within the RAP for outlining general considerations for data analyses and data handling conventions.

Table 1 Overview of Appendices

Section	Component
Section 12.1	Appendix 1 : Time & Events
Section 12.2	Appendix 2 : Treatment States and Phases
Section 12.3	Appendix 3 : Data Display Standards & Handling Conventions <ul style="list-style-type: none"> • Study Treatment & Injection Site Descriptors • Baseline Definition & Derivations • Reporting Process & Standards
Section 12.4	Appendix 4 : Derived and Transformed Data <ul style="list-style-type: none"> • General • Study Population • Pharmacokinetics • Safety • Blood Eosinophils
Section 12.5	Appendix 5 : Premature Withdrawals & Handling of Missing Data
Section 12.6	Appendix 6 : Values of Potential Clinical Importance
Section 12.7	Appendix 7 : Multicenter Studies
Section 12.8	Appendix 8 : Examination of Covariates, Subgroups & Other Strata
Section 12.9	Appendix 9 : Abbreviations & Trade Marks
Section 12.10	Appendix 10 : List of Data Displays

6. STUDY POPULATION ANALYSES

6.1. Overview of Planned Analyses

The study population analyses will be based on the “All Treated Subjects (Safety)” population.

Table 2 provides an overview of the planned study population analyses. Full details of the data displays to be presented are given in [Appendix 10: List of Data Displays](#).

Table 2 Overview of Planned Study Population Analyses

Display Type	Data Displays Generated		
	Table	Figure	Listing
Study Populations	Y		Y
Screen Failures	Y		Y
Randomisation			Y
Subject Disposition	Y		Y
Important Protocol Deviations	Y		Y
Inclusion/Exclusion Criteria Deviations			Y
Exposure to Study Treatment			Y
Demographics	Y		Y
Past and Current Medical Conditions	Y		Y
Family History of Cardiovascular Risk Factors	Y		Y
Other Family History			Y
Smoking History	Y		
Concomitant Medications			Y

NOTES :

- Y = Yes display generated.

7. PHARMACOKINETIC ANALYSES

The primary objective of this study is to evaluate the PK comparability of the liquid drug product administered by both the autoinjector and safety syringe with the lyophilised drug product when reconstituted from the vial.

7.1. Overview of Planned Pharmacokinetic Analyses

The pharmacokinetic (PK) analyses will be based on the “Pharmacokinetic” population.

The planned primary statistical analysis is detailed in Section [7.4](#). Summaries of the PK concentration-time data and PK parameters are detailed in Section [7.2](#) and Section [7.3](#) respectively.

Table 3 provides an overview of the planned pharmacokinetic data displays. Full details of the data displays to be presented are given in [Appendix 10: List of Data Displays](#).

Table 3 Overview of Planned Pharmacokinetic Analyses

Endpoints	Untransformed								Log-Transformed							
	Stats Analysis			Summary		Individual		Stats Analysis			Summary		Individual			
	F	T	L	F	T	F	L	F	T	L	F	T	F	L	F	L
PK Plasma Concentrations				Y ^{[1][2]}	Y	Y ^[1]	Y									
Derived Plasma PK Parameters					Y		Y	Y ^[3]	Y ^[3]		Y ^[3]	Y				

NOTES :

- T = Table, F = Figures, L = Listings, Y = Yes display generated.
- Stats Analysis = Represents TFL related to any formal statistical analyses (i.e. modelling) conducted.
- Summary = Represents TFL related to any summaries (descriptive statistics) of the observed raw data.
- Individual = Represents FL related to any displays of individual subject observed raw data.

1. Linear and Semi-Log plots will be created on the same display.
2. Separate Mean (\pm SD) and Median plots will be generated.
3. Cmax, AUC(0-t) and AUC(0- ∞) only.

7.2. Drug Concentration Measures

Blood sampling time will be related to the start of dosing. Linear and semi-logarithmic individual plasma concentration-time profiles and mean (\pm SD) and median profiles will be plotted for each treatment.

Plasma concentrations of mepolizumab will be listed and summarised by treatment group and nominal time. Summaries, including mean (\pm SD) and median profile plots, will also be produced by treatment group and injection site, treatment group and baseline body weight category (<70kg, 70-<80kg and \geq 80kg), and treatment group, injection site and baseline body weight category. Any subjects randomised in error to the incorrect weight strata will be summarised according to the stratum corresponding to their actual body weight. No formal statistical analysis of the body weight subgroups is planned.

Refer to [Appendix 3: Data Display Standards & Handling Conventions, Section 12.3.3 Reporting Process & Standards](#).

7.3. Derived Plasma Pharmacokinetic Parameters

- Mepolizumab pharmacokinetic parameters will be calculated by standard non-compartmental analysis according to current working practices (GUI_51487 (4.0)) and using Phoenix.
- Calculations will be based on the actual sampling times recorded during the study.
- From the plasma concentration-time data, the pharmacokinetic parameters in [Table 4](#) will be determined for mepolizumab, as data permit, for each treatment and for each subject.

- Individual and geometric mean (95% CI) Cmax, AUC(0-t) and AUC(0-∞) will be plotted by treatment group, by treatment group and injection site, by treatment group and baseline body weight category (<70kg, 70-<80kg and ≥80kg), and by treatment group, injection site and baseline body weight category.
- All pharmacokinetic parameters will be listed and summarized descriptively by treatment group, by treatment group and injection site, by treatment group and baseline body weight category (<70kg, 70-<80kg and ≥80kg), and by treatment group, injection site and baseline body weight category.
- Any subjects randomised in error to the incorrect weight strata will be summarised according to the stratum corresponding to their actual body weight. No formal statistical analysis of the body weight subgroups is planned.
- Refer to [Appendix 3: Data Display Standards & Handling Conventions](#), Section [12.3.3 Reporting Process & Standards](#).

Table 4 Derived Pharmacokinetic Parameters

Parameter	Parameter Description
Cmax	Maximum observed plasma concentration
tmax	Time to Cmax
AUC(0-∞)	Area under the plasma concentration-time curve from time zero extrapolated to infinite time.
AUC(0-t)	Area under the plasma concentration-time curve from time zero to the time of the last quantifiable concentration.
AUC(0-week4)	Area under the plasma concentration-time from time zero to Week 4.
%AUCextrapolated	Percentage of AUC(0-∞) obtained by extrapolation
tlast	Last time point where the concentration is above the limit of quantification
CL/F	Apparent clearance
Vd/F	Apparent volume of distribution
λz	Terminal phase elimination rate constant. The number of points used to determine λz will also be reported.
t½	Terminal phase half-life

NOTES: Additional parameters may be included as required.

7.4. Planned Primary Pharmacokinetic Analyses

Primary Statistical Analyses
Endpoint(s)
<ul style="list-style-type: none"> • Cmax, AUC(0-t), AUC(0-∞)
Endpoint Derivation
<ul style="list-style-type: none"> • Derivation of pharmacokinetic parameters will be according to current working practices (GUI_51487 (4.0)).
Handling of Missing Data
<ul style="list-style-type: none"> • Analysis will be performed on all available data and no imputation will be performed for missing data.
Model Specification
<ul style="list-style-type: none"> • Each test treatment (liquid formulation from the autoinjector or safety syringe) will be compared to the reference (reconstituted lyophilised powder from the vial). • Separate models will be used for each treatment comparison, including only data from the relevant test treatment and the reference treatment. Data from the test treatment that is not relevant for that comparison will be excluded. • The parameters Cmax, AUC(0-t), AUC(0-∞) will be \log_e transformed and analysed separately using a fixed effects analysis of covariance model, including treatment group and injection site (upper arm, abdomen, thigh) as categorical variables and baseline body weight as a continuous covariate fitted on the \log_e scale. • The MIXED procedure in SAS will be used with the following options:- <ul style="list-style-type: none"> ○ The Kenward and Roger method for approximating the denominator degrees of freedom to correct for bias in the estimated variance-covariance. ○ The OBSMARGIN option on the LSMEANS statement in order to compute the adjusted geometric means with weights proportional to the input data set.
Multiple Comparisons and Multiplicity
<ul style="list-style-type: none"> • Each treatment comparison will be considered separately and no adjustment for multiplicity will be made.
Model Checking & Diagnostics
<ul style="list-style-type: none"> • Distributional assumptions underlying the models used for analysis will be examined by obtaining box plots and normal probability plots of the studentized residuals and plots of the residuals versus the fitted values (i.e. checking the normality assumption and constant variance assumption of the model respectively) to gain confidence that the model assumptions are reasonable.
Model Results Presentation
<p>For each PK parameter:-</p> <ul style="list-style-type: none"> • Adjusted geometric mean for each treatment group and standard error (\log_e scale). • Point estimates and associated two-sided 90% confidence intervals for the ratio of each of the test treatments to the reference treatment (obtained by back-transforming estimates and 90% CIs for the treatment differences from the statistical model on the \log_e scale).

8. SAFETY ANALYSIS

The safety displays to be created as part of this RAP include all the required and relevant displays identified as per the IDSL Core Safety Statistical Displays.

Analysis of safety data will be based on the ‘All Treated (Safety)’ population.

All safety data will be presented using the treatment group descriptors defined in Section 12.3. In addition, a “Total Liquid” column will present the combined results from the liquid autoinjector and liquid safety syringe, and a “Total” column will present the combined results across all 3 randomised treatment groups.

8.1. Overview of Planned Adverse Event Analyses

Table 5 provides an overview of the planned analyses of adverse event data. Full details of the data displays to be presented are given in [Appendix 10: List of Data Displays](#).

Table 5 Overview of Planned Adverse Event Analyses

Endpoint / Parameter/ Display Type	Absolute		
	Summary		Individual
	T	F	L
Adverse Events (AEs)			
All AEs by SOC	Y		Y
Common AEs by Overall Frequency ^[1]	Y		
No. of Subjects & No. of Occurrences of Common AEs by SOC and PT ^[1]	Y		
All AEs by SOC and Maximum Intensity	Y		
All Drug-Related AEs by SOC	Y		
All Drug-Related AEs by SOC and Maximum Intensity	Y		
AEs by Highest Post Baseline Binding Antibody Result (see Section 9.1)	Y		
AEs Leading to Withdrawal from Study by Overall Frequency	Y		Y
AEs reported on the Day of Dosing ^[2]	Y		Y
Subject Numbers for Individual AEs			Y
Relationship Between AE SOCs, PT & Verbatim Text			Y
Serious and Other Significant AEs			
Fatal Serious AEs by Overall Frequency	Y		Y
All Serious AEs by SOC	Y		
Non-Fatal Serious AEs			Y
Reasons for Considering as a Serious AE			Y
Drug-Related Fatal Serious AEs by Overall Frequency	Y		
Drug-Related Serious AEs by SOC	Y		
No. of Subjects & No. of Occurrences of All Serious AEs	Y		
Adverse Events of Special Interest (AESI)			
Anaphylaxis	Y		Y
Systemic Reactions – Allergic (Type I Hypersensitivity) and Other Systemic	Y		Y
Systemic Reactions – Allergic (Type I Hypersensitivity)	Y		Y
Systemic Reactions – Other Systemic	Y		Y

Endpoint / Parameter/ Display Type	Absolute		
	Summary		Individual
	T	F	L
Local Injection Site Reactions	Y		Y
Opportunistic Infections	Y		Y
Malignancies	Y		Y
Serious Cardiac, Vascular and Thromboembolic Events	Y		Y
Serious Ischemic Events	Y		Y

NOTES :

- T = Table, F = Figure, L = Listing, Y = Yes display generated, SOC = System Organ Class, PT = Preferred Term.
- Summary = Represents TFL related to any summaries (i.e. descriptive statistics) of the observed raw data.
- Individual = Represents FL related to any displays of individual subject observed raw data.

[1] Common AEs will be defined as AEs with frequency $\geq 3\%$ (prior to rounding to nearest percent) in either the Total Liquid or Lyophilised Vial treatment groups.

[2] AEs reported on the day of dosing will be defined as adverse events with a start date equal to the date of dosing.

8.1.1. Adverse Events of Special Interest

Adverse events of special interest (AESIs) are adverse events associated with the identified and potential risks of mepolizumab. AESIs reported by the investigator as anaphylaxis reactions, systemic reactions (further categorised by the investigator as either allergic (type I hypersensitivity) or other systemic reactions) and local injection site reactions are collected via targeted eCRF within the study.

AESIs of opportunistic infections, malignancies, serious cardiac vascular and thromboembolic (CVT) events and serious ischemic events will be identified from a list of relevant preferred terms maintained within a project level reference dataset created based on the MedDRA dictionary available at the time of database freeze for this study. Further details of how relevant preferred terms are identified are given in the Program Safety Analysis Plan (PSAP).

Separate summary tables showing the number and percent of subjects with each type of AESI, broken down by preferred term will be created.

For each type of AESI a profile summary table will be produced containing information including, but not be limited to, the number of occurrences of the event, event characteristics, time to onset, intensity, outcome and action taken.

Separate listings of AESIs identified by the investigator as anaphylaxis, allergic (type I hypersensitivity), other systemic reactions and local injection site reactions will be produced, as well as listings of opportunistic infections, malignancies, serious CVT events and serious ischemic events.

8.2. Overview of Other Safety Analyses

Table 6 provides an overview of the planned analyses for laboratory data, ECG and vital signs. Full details of the data displays to be presented are given in [Appendix 10: List of Data Displays](#).

Table 6 Overview of Other Safety Analyses

Endpoint / Parameter/ Display Type	Absolute			Change from BL		
	Summary		Individual	Summary		Individual
	T	F	L	T	F	L
Haematology						
Haematology Changes from Baseline				Y		
Haematology Shifts from Baseline Relative to Normal Range				Y		
Haematology Shifts from Baseline Relative to PCI Range				Y		
Haematology Data for Subjects with Any Value of Potential Clinical Concern			Y			
Chemistry						
Chemistry Changes from Baseline				Y		
Chemistry Shifts from Baseline Relative to Normal Range				Y		
Chemistry Shifts from Baseline Relative to PCI Range				Y		
Chemistry Data for Subjects with Any Value of Potential Clinical Concern			Y			
ECG						
ECG Findings	Y					
Vital Signs						
Vital Signs Change from Baseline				Y		

NOTES:

- T = Table, F = Figures, L = Listings, Y = Yes display generated. PCI = Potential Clinical Importance – see Section 12.6.
- Summary = Represents TFL related to any summaries (i.e. descriptive statistics) of the observed raw data.
- Individual = Represents FL related to any displays of individual subject observed raw data.

9. IMMUNOGENICITY

9.1. Overview of Planned Immunogenicity Analyses

For the immunogenicity assessment, two types of anti-drug antibody (ADA) assays will be performed, a binding anti-drug antibody assay and a neutralizing antibody assay.

For the binding assay, there will be a three tiered analysis: screening, confirmation and titration. The screening assay produces a result of positive or negative relative to a screening cut point. Positive samples continue with the confirmation assay, which also produces a result of positive or negative relative to a confirmation cut point. For positive confirmation samples, a titre value will also be obtained to quantify the degree of binding in a titration assay and the sample will be tested with the neutralizing assay, which also reports results as positive or negative.

The binding ADA results at each visit will be categorised as negative, transient positive (defined as a single confirmatory positive immunogenic response that does not occur at

the final study assessment) or persistent positive (defined as a confirmatory positive immunogenic response for at least 2 consecutive assessments excluding the screening visit, or a single result at the final study assessment). In addition, the highest post-baseline binding ADA confirmatory result obtained for a subject will be summarised. Subjects with both positive and negative results will be identified in the positive category. Summary statistics for the highest titre result will also be presented.

A summary of adverse events by highest post-baseline binding antibody result (as defined above) will be produced.

A summary of treatment emergent positive confirmatory binding ADA assays in the subset of subjects who did not have a positive confirmatory binding ADA assay prior to the dosing of study treatment will also be presented.

Neutralizing antibody assay results will be summarised by visit. In addition, the highest post-baseline neutralising assay result during the treatment period of the study will be summarised, with subjects with both positive and negative results identified in the positive category.

Immunogenicity data will be listed for subjects with at least one positive screening binding assay.

10. EXPLORATORY STATISTICAL ANALYSES

10.1. Blood Eosinophils

10.1.1. Overview of Planned Analyses for Blood Eosinophils

Blood eosinophil analyses will be based on the “Pharmacodynamic” population.

Blood eosinophil values will be \log_e -transformed prior to summary and analysis. Non-detectable values of 0 GI/L, will be replaced by half of the lowest observed detectable (non-zero) value in the study data set, prior to log transformation.

Table 7 provides an overview of the planned analyses for blood eosinophils. Full details of data displays to be presented are given in [Appendix 10: List of Data Displays](#).

Table 7 Overview of Planned Analyses for Blood Eosinophils

Endpoint	Untransformed						Log-Transformed							
	Stats Analysis			Summary		Individual		Stats Analysis			Summary		Individual	
	F	T	L	F	T	F	L	F	T	L	F	T	F	L
Absolute Blood Eosinophils					Y							Y		
Ratio to Baseline Blood Eosinophils					Y			Y	Y			Y		

NOTES :

- T = Table, F = Figures, L = Listings, Y = Yes display generated.
- Stats Analysis = Represents TFL related to any formal statistical analyses (i.e. modelling) conducted.
- Summary = Represents TFL related to any summaries (descriptive statistics) of the observed raw data.
- Individual = Represents FL related to any displays of individual subject observed raw data.

10.1.2. Planned Analysis of Blood Eosinophils

Blood Eosinophil Analyses	
Endpoint(s)	
<ul style="list-style-type: none"> • Ratio to Baseline Blood Eosinophils 	
Model Specification	
<ul style="list-style-type: none"> • Ratio to Baseline Blood Eosinophils will be \log_e transformed and compared between treatments using a mixed model repeated measures analysis, adjusting for baseline blood eosinophil count (\log_e scale) and baseline weight (\log_e scale) as fixed effects. • Visit (Day 3, Day 5, Day 10, Day 29, Day 57 and Day 85) and injection site (upper arm, abdomen and thigh) will be fitted as categorical fixed effects variables. • Treatment-by-visit and baseline blood eosinophil count-by-visit interaction effects will be included in the model as fixed effects. • Each test treatment (liquid formulation from the autoinjector or safety syringe) will be compared to the reference (reconstituted lyophilised powder from the vial) at each visit. • The MIXED procedure in SAS will be used with the following options:- 	

Blood Eosinophil Analyses
<ul style="list-style-type: none"> ○ The Kenward and Roger method (DDFM = KR) for approximating the denominator degrees of freedom to correct for bias in the estimated variance-covariance matrix. ○ REPEATED statement with TYPE=UN to specify an unstructured covariance structure for the R matrix. ○ The OBSMARGIN option on the LSMEANS statement in order to compute the adjusted geometric means with weights proportional to the input data set.
Model Checking & Diagnostics
<ul style="list-style-type: none"> ● The normality assumption will be examined by obtaining box plots and normal probability plots of the studentized marginal residuals at each visit. ● If the model fails to converge, alternative correlation structures will be considered.
Model Results Presentation
<p>For each visit (Day 3, Day 5, Day 10, Day 29, Day 57 and Day 85):-</p> <ul style="list-style-type: none"> ● Summary statistics for the ratio to baseline blood eosinophil count. ● Model adjusted geometric mean ratio to baseline blood eosinophils for each treatment group and standard error (\log_e scale). ● Point estimates and associated two-sided 95% confidence intervals for the ratio of each of the test treatments to the reference treatment (obtained by back-transforming estimates and 95% CIs for the treatment differences from the repeated measures statistical model on the \log_e scale).

10.2. User/Device Errors

Summaries of the user/device errors will be based on the “All Treated” population.

Any user/device errors reported on the ‘Injection Assessment’ page in the eCRF will be summarised and listed by test treatment. Details of the data displays to be presented are given in [Appendix 10: List of Data Displays](#).

11. REFERENCES

GlaxoSmithKline Document Number 2016N275057_02 Study ID 204958. Clinical Protocol for Study 204958: An open label, randomised, three arm, single dose, multicentre, parallel group study in healthy subjects to compare the pharmacokinetics of subcutaneous mepolizumab when delivered as a liquid drug product in a safety syringe or an auto injector with a reconstituted lyophilised drug product from a vial. Report Date 17-NOV-2016.

12. APPENDICES

Section	Appendix
RAP Section 5 : General Considerations for Data Analyses & Data Handling Conventions	
Section 12.1	Appendix 1: Time & Events
Section 12.2	Appendix 2: Treatment States and Phases
Section 12.3	Appendix 3: Data Display Standards & Handling Conventions <ul style="list-style-type: none"> • Study Treatment & Injection Site Descriptors • Baseline Definition & Derivations • Reporting Process & Standards
Section 12.4	Appendix 4: Derived and Transformed Data <ul style="list-style-type: none"> • General • Study Population • Pharmacokinetics • Safety • Blood Eosinophils
Section 12.5	Appendix 5: Premature Withdrawals & Handling of Missing Data
Section 12.6	Appendix 6: Values of Potential Clinical Importance
Section 12.7	Appendix 7: Multicenter Studies
Section 12.8	Appendix 8: Examination of Covariates, Subgroups & Other Strata
Other RAP Appendices	
Section 12.9	Appendix 9: Abbreviations & Trade Marks
Section 12.10	Appendix 10: List of Data Displays
Section 12.11	Appendix 11: Example Mock Shells for Data Displays

12.1. Appendix 1: Time & Events

12.1.1. Protocol Defined Time & Events

Procedure	Screening (up to 30 days prior to Day 1)	Treatment Period 1 [Days]																	Notes:
		Day-1	1	2	3	4	5	6	7	8	9	10	15	22	29	43	57	85 (FUP/EW)	
Informed consent	X																		
Inclusion and exclusion criteria	X	X																	
Demography	X																		
Full physical exam including height ¹ and weight ²		X	X															X	¹ Height only at screening ² Weight collected only at day -1
Medical history (includes substance usage) Including Cardiovascular medical history/risk factors		X																	
Alcohol test	X	X																	Alcohol measured in Serum
Drug Screen	X	X																	Serum or Urine drug screen
Urine Cotinine test	X	X																	Tobacco

Procedure	Screening (up to 30 days prior to Day 1)	Treatment Period 1 [Days]																	Notes:
		Day -1	1	2	3	4	5	6	7	8	9	10	15	22	29	43	57	85 (FUP/EW)	
Past and current medical conditions	X																		
Pregnancy test	X	X													X		X		All pregnancy tests will be performed in urine.
Laboratory assessments including haematology, chemistry and urinalysis	X	X					X										X		Includes Liver chemistry
HIV, Hep B and Hep C screen	X																		If test otherwise performed within 3 months prior to first dose of study treatment, testing at screening is not required
Immunogenicity	X		X ³												X	X		X	³ Day 1 Predose. Including binding and neutralising antibody
12-lead ECG	X		X															X	Day 1 – Predose
Vital signs	X	X	X ⁴	X	X	X	X	X	X						X		X		⁴ Day 1 – Predose

Procedure	Screening (up to 30 days prior to Day 1)	Treatment Period 1 [Days]																	Notes:
		Day -1	1	2	3	4	5	6	7	8	9	10	15	22	29	43	57	85 (FUP/EW)	
Parasite screening	X ⁵																		⁵ Only required in high risk countries or for subjects who have visited high risk countries in the past six months. Sites should use local laboratories
Randomisation			X																
Study Treatment			X																Complete either the autoinjector or the safety syringe functionality assessment when applicable
AE review		X		←-----→														Including local injection site reactions and systemic reactions Collected from day -1 to Day 85	
SAE review	X	X		←-----→														Including local injection site reactions and systemic reactions Collected from screening to Day 85	
Concomitant medication review	X	X		←-----→														Collected from screening to Day 85	

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Procedure	Screening (up to 30 days prior to Day 1)	Treatment Period 1 [Days]																	Notes:
		Day -1	1	2	3	4	5	6	7	8	9	10	15	22	29	43	57	85 (FUP/EW)	
Blood Samples for PK			X ⁶	X	X	X	X	X	X	X	X	X	X	X	X	X	X	⁶ Day 1 – Predose, 2h & 8h Postdose	
Blood samples for PD (blood eosinophils)			X ⁷		X		X					X			X		X	⁷ Day 1 – Predose	
Autoinjector and safety syringe user/device error assessment-			X															HCP reported.	
Follow up (FUP)																	X		

12.2. Appendix 2: Treatment States and Phases

12.2.1. Treatment Phases

Assessments and events will be classified according to the time of occurrence relative to the dose of study treatment.

12.2.1.1. Treatment Phases for Adverse Events

Treatment State	Definition
Pre-Treatment	<ul style="list-style-type: none">• AE start date < Mepolizumab dosing date
On-Treatment	<ul style="list-style-type: none">• Mepolizumab dosing date ≤ AE start date ≤ Mepolizumab dosing date + 28 days• Any adverse event with missing start date will be assumed to be “On-Treatment”.• Any adverse event with partial start date will be assumed to be “On-Treatment” unless there is evidence to the contrary (e.g. month/year of onset is present and is earlier than the month/year of the dose of study treatment).
Post-Treatment	<ul style="list-style-type: none">• AE start date > Mepolizumab dosing date + 28 days

12.3. Appendix 3: Data Display Standards & Handling Conventions

12.3.1. Study Treatment & Injection Site Descriptors

Separate descriptors for treatment group and injection site will be assigned as follows:-

Treatment Group Descriptions ^[1]			
RandAll NG		Data Displays for Reporting	
Code	Description	Treatment Group Description	Order ^[2]
A1	Liquid auto injector - abdomen	Liquid Autoinjector	2
A2	Liquid auto injector – arm	Liquid Autoinjector	2
A3	Liquid auto injector – thigh	Liquid Autoinjector	2
S1	Liquid safety syringe - abdomen	Liquid Safety Syringe	3
S2	Liquid safety syringe – arm	Liquid Safety Syringe	3
S3	Liquid safety syringe – thigh	Liquid Safety Syringe	3
R1	Reconstituted lyophilised – abdomen	Lyophilised Vial	1
R2	Reconstituted lyophilised – arm	Lyophilised Vial	1
R3	Reconstituted lyophilised – thigh	Lyophilised Vial	1

NOTES:

1. For summaries of safety data, a “Total Liquid” column will present the combined results from the liquid autoinjector and liquid safety syringe, and a “Total” column will present the combined results across all 3 randomised treatment groups.
2. Order represents treatments being presented in TFL, as appropriate.

Injection Site Descriptions			
RandAll NG		Data Displays for Reporting	
Code	Description	Injection Site Description	Order ^[1]
A1	Liquid auto injector - abdomen	Abdomen	1
A2	Liquid auto injector – arm	Arm	2
A3	Liquid auto injector – thigh	Thigh	3
S1	Liquid safety syringe - abdomen	Abdomen	1
S2	Liquid safety syringe – arm	Arm	2
S3	Liquid safety syringe – thigh	Thigh	3
R1	Reconstituted lyophilised – abdomen	Abdomen	1
R2	Reconstituted lyophilised – arm	Arm	2
R3	Reconstituted lyophilised – thigh	Thigh	3

NOTES:

1. Order represents treatments being presented in TFL, as appropriate.

12.3.2. Baseline Definition & Derivations

12.3.2.1. Baseline Definitions

- Baseline will be defined for all subjects in the ‘All Treated Subjects’ population.
- The baseline values for each assessment will be the latest available assessment prior to receiving the single dose of mepolizumab.

12.3.2.2. Derivations and Handling of Missing Baseline Data

Definition	Reporting Details
Change from Baseline	= Post-Dose Visit Value – Baseline
% Change from Baseline	= $100 \times [(Post-Dose Visit Value - Baseline) / Baseline]$
Ratio to Baseline	= Visit Value / Baseline

NOTES :

- Unless otherwise specified, the baseline definitions specified in Section 12.3.2.1 will be used for derivations for endpoints / parameters and indicated on summaries and listings.
- Unless otherwise stated, if baseline data is missing no derivation will be performed and will be set to missing.

12.3.3. Reporting Process & Standards

Reporting Process	
Software	
<ul style="list-style-type: none"> The currently supported versions of SAS software will be used. 	
Reporting Area	
HARP Server	: uk1salx00175
HARP Area	: sb240563/mid204958
Analysis Datasets	
<ul style="list-style-type: none"> Analysis datasets will be created according to CDISC standards. For creation of ADaM datasets (ADCM/ADAE), the same version of dictionary datasets will be implemented for conversion from SI to SDTM. 	
Generation of RTF Files	
<ul style="list-style-type: none"> RTF files will be generated for final reporting effort. 	

Reporting Standards	
General	
<ul style="list-style-type: none"> The current GSK Integrated Data Standards Library (IDSL) will be applied for reporting, unless otherwise stated: <ul style="list-style-type: none"> 4.03 to 4.23: General Principles 5.01 to 5.08: Principles Related to Data Listings 6.01 to 6.11: Principles Related to Summary Tables 7.01 to 7.13: Principles Related to Graphics Listings will include treatment and injection site (see Section 12.3.1). 	

Reporting Standards	
Formats	
<ul style="list-style-type: none"> The reported precision (decimal places) will follow the IDSL statistical principles but may be adjusted to a clinically interpretable number of DPs. 	
Planned and Actual Time	
<ul style="list-style-type: none"> Reporting for tables, figures and formal statistical analyses : <ul style="list-style-type: none"> Actual time relative to dosing will be used for individual subject plasma concentration-time figures and for derivation of PK parameters. Planned time relative to dosing will be used in all other figures, summaries, statistical analyses and calculation of any derived parameters. The impact of any major deviation from the planned assessment times and/or scheduled visit days on the analyses and interpretation of the results will be assessed as appropriate. Reporting for Data Listings: <ul style="list-style-type: none"> Planned and actual time relative to study drug dosing will be shown in listings (Refer to IDSL Statistical Principle 5.05.1). Unscheduled or unplanned readings will be presented within the subject's listings. Visits outside the protocol defined time-windows (i.e. recorded as protocol deviations) will be included in listings, summaries and statistical analyses. 	
Unscheduled Visits	
<ul style="list-style-type: none"> Data recorded at an unscheduled visit will be re-assigned to the closest nominal visit at which collection of data was scheduled, unless information already exists at that visit. Unscheduled data re-assigned to a scheduled visit will be reported in summary tables and figures. Unscheduled data that is not re-assigned to a scheduled visit will not be included in summary tables or figures. All unscheduled visits will be included in listings and individual subject figures. 	
Descriptive Summary Statistics	
Continuous Data	Refer to IDSL Statistical Principle 6.06.1
Categorical Data	N, n, frequency, %
Reporting of Pharmacokinetic Concentration Data	
Descriptive Summary Statistics (All Parameters)	N, n, no. imputed, mean, 95% CI for mean, standard deviation, minimum, median and maximum will be reported. Assign zero to NQ values (Refer to GUI_51487 for further details)

Reporting Standards	
Reporting of Pharmacokinetic Parameters	
Descriptive Summary Statistics (All parameters)	N, n, mean, 95% CI for mean, standard deviation, minimum, median and maximum will be reported.
Log-Normal Parameters	Cmax, AUC(0-∞), AUC(0-t), AUC(0-week4), CL/F, Vd/F, λz, t½, %AUCextrapolated
Additional Descriptive Summary Statistics (Log-Normal parameters)	N, n, geometric mean, 95% CI of geometric mean, standard deviation (SD) of logged data and coefficient of variation (CVb (%)) will be reported. $CV_b (\%) = \sqrt{(\exp(SD^2) - 1)} * 100$ $(SD = SD \text{ of log transformed data})$
Parameters to be listed only	Number of points used to determine λz
Graphical Displays	
<ul style="list-style-type: none"> Refer to IDSL Statistical Principals 7.01 to 7.13. 	

12.4. Appendix 4: Derived and Transformed Data

12.4.1. General

Multiple Measurements at One Time Point
<ul style="list-style-type: none"> May arise when unscheduled visits are re-assigned to a nominal visit (see Section 12.3.3). If there is data at the nominal visit, the nominal visit data will be used in the summary tables and figures. All assessments will be listed. Subjects having both High and Low values for Normal Ranges at any post-baseline visits for safety parameters will be counted in both the High and Low categories of “Any visit post-baseline” row of related summary tables. This will also be applicable to relevant Potential Clinical Importance summary tables.
Study Day
<ul style="list-style-type: none"> Calculated as the number of days from dosing date for mepolizumab: <p>Ref Date = Missing → Study Day = Missing</p> <p>Ref Date < Mepolizumab dosing date → Study Day = Ref Date – Mepolizumab dosing date</p> <p>Ref Date ≥ Mepolizumab dosing date → Study Day = Ref Date – Mepolizumab dosing date + 1</p>

12.4.2. Study Population

Demographics
Age
<ul style="list-style-type: none"> GSK standard IDSL algorithms will be used for calculating age where birth day and month will be imputed ‘30th June’. Birth date will be presented in listings as ‘YYYY’. Age will be calculated relative to the date of the screening visit (Visit 1).
Body Mass Index (BMI)
<ul style="list-style-type: none"> Calculated as $\text{Weight (kg)} / [\text{Height (m)}^2]$
Extent of Exposure
<ul style="list-style-type: none"> As this is a single dose study, exposure data will be listed only.

12.4.3. Pharmacokinetics

Derivation of pharmacokinetic parameters is detailed in Section 7.3.

12.4.4. Safety

Adverse Events
Drug Related AEs
AEs with relationship marked 'YES' or relationship missing.
AE Time Since First Dose (Days)
<ul style="list-style-type: none">• If AE start date < Mepolizumab dosing date then Time since first dose = Mepolizumab dosing date – AE start date• If AE start date \geq Mepolizumab dosing date then Time since first dose = AE start date – Mepolizumab dosing date +1• Missing if AE start date or mepolizumab dosing date is missing.
AE Duration (Days)
<ul style="list-style-type: none">• AE end date – AE start date + 1• Missing if AE start date or end date is missing.
AEs of Special Interest
<ul style="list-style-type: none">• See Section 8.1.1

12.4.5. Blood Eosinophils

See Section [10.1.1](#) for handling of non-detectable blood eosinophil values of 0 GI/L.

12.5. Appendix 5: Premature Withdrawals & Handling of Missing Data

12.5.1. Premature Withdrawals

Element	Reporting Detail
General	<ul style="list-style-type: none"> Subject study completion is defined as completion of assessments on Day 85. Withdrawn subjects will not be replaced in the study. All available data from subjects who were withdrawn from the study will be listed and all available planned data will be included in summary tables and figures, unless otherwise specified.
Screen Failures	<ul style="list-style-type: none"> A subject will be assigned a subject number at the time when the informed consent form (ICF) is signed. A subject who is assigned a subject number, but is never subsequently randomised will be considered a screen failure.

12.5.2. Handling of Missing Data

Element	Reporting Detail
General	<ul style="list-style-type: none"> Analysis will be performed on all available data and no imputation will be performed for missing data Missing data occurs when any requested data is not provided, leading to blank fields on the collection instrument. These data will be indicated by the use of a "blank" in subject listing displays, unless all data for a specific visit are missing in which case the data is excluded from the listing. Data below the limit of quantification (BLQ) is not missing data and must be displayed as such and included in all listings and summaries.
Outliers	<ul style="list-style-type: none"> Any subjects excluded from the summaries and/or statistical analyses because their values are considered outliers will be documented along with the reason for exclusion in the clinical study report.

12.5.2.1. Handling of Missing and Partial Dates

Element	Reporting Detail
General	<ul style="list-style-type: none"> Partial dates will be displayed as captured in subject listing displays.
Adverse Events	<ul style="list-style-type: none"> Any partial dates for adverse events will be raised to data management. If the full date cannot be ascertained, the following assumptions will be made: <ul style="list-style-type: none"> If the partial date is a start date, a '01' will be used for the day and 'Jan' will be used for the month. However, if this imputation results in a date prior to the first dose of mepolizumab and the event could possibly have occurred during treatment from the partial information, then the date of the first dose of mepolizumab will be assumed to be the start date. The event will then be considered to start on-treatment (worst case). If the partial date is a stop date, a '28/29/30/31' will be used for the day (dependent on the month and year) and 'Dec' will be used for the month. Completely missing start or end dates will remain missing, with no imputation applied. Consequently, time to onset and duration of such events will be missing. Adverse events with completely missing start dates will be considered to start on-treatment (worst case). The recorded partial date will be displayed in listings.

12.6. Appendix 6: Values of Potential Clinical Importance

12.6.1. Laboratory Values of Potential Clinical Concern

Haematology				
Laboratory Parameter	Units	Age Category	Clinical Concern Range	
			Low Flag (< x)	High Flag (>x)
Hematocrit	Ratio of 1	12+	0.201	0.599
Hemoglobin	G/L	12+	71	199
Platelet Count	Gl/L	1+	31	1499
White Blood Cell Count (WBC)	Gl/L	12+	1.1	

Clinical Chemistry				
Laboratory Parameter	Units	Age Category	Clinical Concern Range	
			Low Flag (< x)	High Flag (>x)
ALT	U/L	3-12		>143 (and Total Bilirubin >43)
	U/L	13+		>239 (and Total Bilirubin >43)
Calcium	mmol/L	3+	1.50	3.24
Glucose	mmol/L	1+	2.2	27.8
Phosphorus, Inorg	mmol/L	3+	0.32	
Potassium	mmol/L	3+	2.8	6.5
Sodium	mmol/L	0+	120	160

Possible Hy's Law Cases			
Laboratory Parameter	Units	Category	Clinical Concern Range
ALT, Bilirubin			ALT \geq 3xULN and Bilirubin \geq 2xULN (>35% direct)
ALT, INR			ALT \geq 3xULN and INR > 1.5

12.7. Appendix 7: Multicenter Studies

- This study will be conducted in 3 centres attributed to a single contract research organisation (CRO).
- The randomisation for this study is allocated centrally.
- Centre will not be included as a covariate in the statistical analyses for this study.

12.8. Appendix 8: Examination of Covariates, Subgroups & Other Strata

12.8.1. Handling of Covariates

- Baseline body weight, on \log_e scale will be included as a covariate in all statistical analyses. For analyses where a baseline value (of the analysis variable) is available this will also be included in the statistical analysis. These covariates will be included as fixed effects in the statistical model.

12.8.2. Handling of Subgroups

- Pharmacokinetic concentrations and parameters will be summarised by baseline weight category (<70 kg, 70-<80 kg and ≥ 80 kg) and injection site – see Section 7.2 and Section 7.3. No formal statistical analysis of these subgroups is planned.
- No subgroup analyses are planned for any other study endpoints.

12.9. Appendix 9: Abbreviations & Trade Marks

12.9.1. Abbreviations

Abbreviation	Description
ADA	Anti-Drug Antibody
ADaM	Analysis Data Model
AE	Adverse Event
A&R	Analysis and Reporting
BLQ	Below the Limit of Quantification
CDISC	Clinical Data Interchange Standards Consortium
CI	Confidence Interval
CPMS	Clinical Pharmacology Modelling & Simulation
CS	Clinical Statistics
CSR	Clinical Study Report
CTR	Clinical Trial Register
CV _b	Coefficient of Variation (Between)
DOB	Date of Birth
DP	Decimal Places
eCRF	Electronic Case Record Form
GUI	Guidance
ICH	International Conference on Harmonisation
IDSL	Integrated Data Standards Library
IMMS	International Modules Management System
IP	Investigational Product
PCI	Potential Clinical Importance
PD	Pharmacodynamic
PDMP	Protocol Deviation Management Plan
PK	Pharmacokinetic
QC	Quality Control
QTcF	Frederica's QT Interval Corrected for Heart Rate
QTcB	Bazett's QT Interval Corrected for Heart Rate
RAP	Reporting & Analysis Plan
SAC	Statistical Analysis Complete
SDL	Source Data Lock
SDTM	Study Data Tabulation Model
SOP	Standard Operation Procedure
TA	Therapeutic Area
TFL	Tables, Figures & Listings
GSK	GlaxoSmithKline

12.9.2. Trademarks

Trademarks of the GlaxoSmithKline Group of Companies
NONE

Trademarks not owned by the GlaxoSmithKline Group of Companies
Phoenix
SAS

12.10. Appendix 10: List of Data Displays

12.10.1. Study Population Tables

Study Population Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
6.1	ASE	TAB_POP1	Summary of Study Populations by Treatment		SAC
6.2	Randomised	TAB_POP2	Summary of Study Populations By Treatment and Injection Site		SAC
6.3	ASE	ES6	Summary of Screen Failures		SAC
6.4	ASE	NS1	Summary of Number of Subjects by Country and Site, by Treatment	"Not Treated" column should be added to include subjects who were not randomised, or randomised subjects who did not receive treatment.	SAC
6.5	ASE	NS1	Summary of Number of Subjects by Country and Site, by Treatment and Injection Site	"Not Treated" column should be added to include subjects who were not randomised, or randomised subjects who did not receive treatment.	SAC
6.6	All Treated	ES1	Summary of Subject Disposition by Treatment		SAC
6.7	All Treated	DV1	Summary of Important Protocol Deviations by Treatment		SAC
6.8	All Treated	DM1	Summary of Demographic Characteristics by Treatment		SAC
6.9	All Treated	DM5	Summary of Race and Racial Combinations by Treatment		SAC
6.10	ASE	DM11	Summary of Age Ranges by Treatment	"Not Treated" column should be added to include subjects who were not randomised, or randomised subjects who did not receive treatment.	SAC
6.11	All Treated	MH1	Summary of Past Medical Conditions by Treatment		SAC
6.12	All Treated	MH1	Summary of Current Medical Conditions by Treatment		SAC

Study Population Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
6.13	All Treated	FH1	Summary of Family History of Cardiovascular Risk Factors by Treatment		SAC
6.14	All Treated	SU1	Summary of Smoking History by Treatment	Smoking status (current/former/never) only	SAC

12.10.2. Pharmacokinetic Figures

Pharmacokinetic : Figures					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
PK Concentration					
7.1	PK	PK16a	Individual Plasma Mepolizumab Concentration-Time Plots (Linear and Semi-Log) by Subject	Actual body weight category, treatment, injection site and subject number as by-line.	SAC
7.2	PK	PK26	Individual Plasma Mepolizumab Concentration-Time Plots (Linear and Semi-Log) by Treatment	Treatment as by-line. All subjects receiving the treatment on the same graph ("spaghetti" plot).	SAC
7.3	PK	PK17	Mean Plasma Mepolizumab Concentration-Time Plots by Treatment (Linear and Semi-Log)		SAC
7.4	PK	PK18	Median Plasma Mepolizumab Concentration-Time Plots by Treatment (Linear and Semi-Log)		SAC
7.5	PK	PK17	Mean Plasma Mepolizumab Concentration-Time Plots by Treatment and Injection Site (Linear and Semi-Log)		SAC

Pharmacokinetic : Figures					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
7.6	PK	PK18	Median Plasma Mepolizumab Concentration-Time Plots by Treatment and Injection Site (Linear and Semi-Log)		SAC
7.7	PK	PK17	Mean Plasma Mepolizumab Concentration-Time Plots by Baseline Body Weight Category and Treatment (Linear and Semi-Log)	Use actual body weight category	SAC
7.8	PK	PK18	Median Plasma Mepolizumab Concentration-Time Plots by Baseline Body Weight Category and Treatment (Linear and Semi-Log)	Use actual body weight category	SAC
7.9	PK	PK17	Mean Plasma Mepolizumab Concentration-Time Plots by Baseline Body Weight Category, Treatment and Injection Site (Linear and Semi-Log)	Actual body weight category as by-line.	SAC
7.10	PK	PK18	Median Plasma Mepolizumab Concentration-Time Plots by Baseline Body Weight Category, Treatment and Injection Site (Linear and Semi-Log)	Actual body weight category as by-line.	SAC
PK Parameter					
7.11	PK	FIG_PK1	Individual Subject (+Geometric Mean and 95% CI) Derived Plasma Mepolizumab PK Parameters by Treatment	AUC(0-inf), AUC(0-t) and Cmax only	SAC
7.12	PK	FIG_PK2	Individual Subject (+Geometric Mean and 95% CI) Derived Plasma Mepolizumab PK Parameters by Treatment and Injection Site	AUC(0-inf), AUC(0-t) and Cmax only	SAC
7.13	PK	FIG_PK3	Individual Subject (+Geometric Mean and 95% CI) Derived Plasma Mepolizumab PK Parameters by Baseline Body Weight Category and Treatment	AUC(0-inf), AUC(0-t) and Cmax only Use actual body weight category.	SAC

Pharmacokinetic : Figures					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
7.14	PK	FIG_PK4	Individual Subject (+Geometric Mean and 95% CI) Derived Plasma Mepolizumab PK Parameters by Baseline Body Weight Category, Treatment and Injection Site	AUC(0-inf), AUC(0-t) and Cmax only. Use actual body weight category.	SAC
7.15	PK	FIG_PK5	Adjusted Geometric Means and Treatment Ratios (90% CI) for Primary Analysis of Derived Plasma Mepolizumab PK Parameters	AUC(0-inf), AUC(0-t) and Cmax only	SAC

12.10.3. Pharmacokinetic Tables

Pharmacokinetic : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
PK Concentration					
7.1	PK	PK01	Summary of Plasma Mepolizumab Concentration-Time Data by Treatment	Treatment as by-line.	SAC
7.2	PK	PK01	Summary of Plasma Mepolizumab Concentration-Time Data by Treatment and Injection Site	Treatment and injection site as by-line.	SAC
7.3	PK	PK01	Summary of Plasma Mepolizumab Concentration-Time Data by Baseline Body Weight Category and Treatment	Use actual body weight category.	SAC
7.4	PK	PK01	Summary of Plasma Mepolizumab Concentration-Time Data by Baseline Body Weight Category, Treatment and Injection Site	Use actual body weight category. Body weight category, treatment and injection site as by-line.	SAC

Pharmacokinetic : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
PK Parameter					
7.5	PK	PK03	Summary of Untransformed Derived Plasma Mepolizumab Pharmacokinetic Parameters by Treatment	Cmax, AUC(0-∞), AUC(0-t), AUC(0-week4), CL/F, Vd/F, λz, t½, %AUCextrapolated, tmax, tlast	SAC
7.6	PK	PK05	Summary of Log-transformed Derived Plasma Mepolizumab Pharmacokinetic Parameters by Treatment	Cmax, AUC(0-∞), AUC(0-t), AUC(0-week4), CL/F, Vd/F, λz, t½, %AUCextrapolated	SAC
7.7	PK	PK03	Summary of Untransformed Derived Plasma Mepolizumab Pharmacokinetic Parameters by Treatment and Injection Site	Parameter as by-line. See Table 7.5 for list of parameters.	SAC
7.8	PK	PK05	Summary of Log-transformed Derived Plasma Mepolizumab Pharmacokinetic Parameters by Treatment and Injection Site	Parameter as by-line. See Table 7.6 for list of parameters.	SAC
7.9	PK	PK03	Summary of Untransformed Derived Plasma Mepolizumab Pharmacokinetic Parameters by Baseline Body Weight Category and Treatment	Use actual body weight category. Parameter as by-line. See Table 7.5 for list of parameters.	SAC
7.10	PK	PK05	Summary of Log-transformed Derived Plasma Mepolizumab Pharmacokinetic Parameters by Baseline Body Weight Category and Treatment	Use actual body weight category. Parameter as by-line. See Table 7.6 for list of parameters.	SAC
7.11	PK	PK03	Summary of Untransformed Derived Plasma Mepolizumab Pharmacokinetic Parameters by Baseline Body Weight Category, Treatment and Injection Site	Use actual body weight category. Parameter and body weight category as by-line. See Table 7.5 for list of parameters.	SAC

Pharmacokinetic : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
7.12	PK	PK05	Summary of Log-transformed Derived Plasma Mepolizumab Pharmacokinetic Parameters by Baseline Body Weight Category, Treatment and Injection Site	Use actual body weight category. Parameter and body weight category as by-line. See Table 7.6 for list of parameters.	SAC
7.13	PK	TAB_PK1	Summary of Statistical Analysis of Derived Plasma Mepolizumab AUC(0-inf), AUC(0-t) and Cmax		SAC

12.10.4. Safety Tables

Programming Note:

For all safety tables, five treatment groups should appear as follows: Lyophilised Vial, Liquid Autoinjector, Liquid Safety Syringe, Total Liquid and Total.

Safety : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
Adverse Events					
8.1	All Treated	AE1	Summary of All On-Treatment Adverse Events by System Organ Class and Preferred Term		SAC
8.2	All Treated	AE1	Summary of All Post-Treatment Adverse Events by System Organ Class and Preferred Term		SAC
8.3	All Treated	AE3	Summary of Common (>=3% Incidence [1]) On-Treatment Adverse Events by Overall Frequency	Add footnote as follows:- [1] AEs with >=3% Incidence in either the Total Liquid or Lyophilised Vial treatment groups are presented.	SAC
8.4	All Treated	AE15	Summary of Common (>=3% Incidence[1]) On-Treatment Adverse Events by Preferred Term (Number of Subjects and Occurrences)	Add footnote as follows:- [1] AEs with >=3% Incidence in either the Total Liquid or Lyophilised Vial treatment groups are presented.	SAC
8.5	All Treated	AE5A	Summary of All On-Treatment Adverse Events by Maximum Intensity by System Organ Class and Preferred Term		SAC
8.6	All Treated	AE1	Summary of All Drug-Related Adverse Events by System Organ Class and Preferred Term		SAC

Safety : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
8.7	All Treated	AE5A	Summary of All Drug-Related Adverse Events by Maximum Intensity by System Organ Class and Preferred Term		SAC
8.8	All Treated	AE1	Summary of On-Treatment Adverse Events by Highest Post-Baseline Binding Antibody Result	Add in row with n in each binding antibody result category (negative, Transient positive, Persistent positive). See Section 9 for derivation of highest post-baseline binding antibody result.	SAC
8.9	All Treated	AE3	Summary of All Adverse Events Leading to Withdrawal from the Study by Overall Frequency		SAC
8.10	All Treated	AE1	Summary of Adverse Events Reported on the Day of Dosing by System Organ Class and Preferred Term		SAC
8.11	All Treated	AE7	Listing of Subject Numbers for Individual On-Treatment Adverse Events		SAC
8.12	All Treated	AE2	Listing of Relationship of Adverse Event, System Organ Classes, Preferred Terms and Verbatim Text		SAC
Serious Adverse Events					
8.13	All Treated	AE3	Summary of Fatal Serious Adverse Events by Overall Frequency		SAC
8.14	All Treated	AE3	Summary of Drug-Related Fatal Serious Adverse Events by Overall Frequency		SAC
8.15	All Treated	AE1	Summary of All On-Treatment Serious Adverse Events by System Organ Class and Preferred Term		SAC

Safety : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
8.16	All Treated	AE16	Summary of All On-Treatment Serious Adverse Events by System Organ Class and Preferred Term (Number of Subjects and Occurrences)		SAC
8.17	All Treated	AE1	Summary of All Post-Treatment Serious Adverse Events by System Organ Class and Preferred Term		SAC
8.18	All Treated	AE1	Summary of All Pre-Treatment Serious Adverse Events by System Organ Class and Preferred Term		SAC
8.19	All Treated	AE1	Summary of All Drug-Related Serious Adverse Events by System Organ Class and Preferred Term		SAC
Adverse Events of Special Interest					
8.20	All Treated	AE1	Summary of On-Treatment Adverse Events Reported by the Investigator as Meeting the Criteria for Anaphylaxis		SAC
8.21	All Treated	TAB_S1	Summary Profile of On-Treatment Adverse Events Reported by the Investigator as Meeting the Criteria for Anaphylaxis		SAC
8.22	All Treated	AE1	Summary of On-Treatment Adverse Events Defined by the Investigator as Systemic Reactions - Allergic (Type I Hypersensitivity) and Other Systemic		SAC
8.23	All Treated	TAB_S1	Summary Profile of On-Treatment Adverse Events Defined by the Investigator as Systemic Reactions - Allergic (Type I Hypersensitivity) and Other Systemic		SAC
8.24	All Treated	AE1	Summary of On-Treatment Adverse Events Defined by the Investigator as Systemic Reactions - Allergic (Type I Hypersensitivity)		SAC

Safety : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
8.25	All Treated	TAB_S1	Summary Profile of On-Treatment Adverse Events Defined by the Investigator as Systemic Reactions - Allergic (Type I Hypersensitivity)		SAC
8.26	All Treated	AE1	Summary of On-Treatment Adverse Events Defined by the Investigator as Systemic Reactions – Other Systemic		SAC
8.27	All Treated	TAB_S1	Summary Profile of On-Treatment Adverse Events Defined by the Investigator as Systemic Reactions - Other Systemic		SAC
8.28	All Treated	AE1	Summary of On-Treatment Adverse Events Defined by the Investigator as Local Injection Site Reactions		SAC
8.29	All Treated	TAB_S1	Summary Profile of On-Treatment Adverse Events Defined by the Investigator as Local Injection Site Reactions		SAC
8.30	All Treated	AE1	Summary of On-Treatment Adverse Events Categorised as Serious Cardiac, Vascular and Thromboembolic Events		SAC
8.31	All Treated	TAB_S1	Summary Profile of On-Treatment Adverse Events Categorised as Serious Cardiac, Vascular and Thromboembolic Events		SAC
8.32	All Treated	AE1	Summary of On-Treatment Adverse Events Categorised as Serious Ischemic Events		SAC
8.33	All Treated	TAB_S1	Summary Profile of On-Treatment Adverse Events Categorised as Serious Ischemic Events		SAC
8.34	All Treated	AE1	Summary of On-Treatment Adverse Events Categorised as Malignancies		SAC

Safety : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
8.35	All Treated	TAB_S1	Summary Profile of On-Treatment Adverse Events Categorised as Malignancies		SAC
8.36	All Treated	AE1	Summary of On-Treatment Adverse Events Categorised as Opportunistic Infections		SAC
8.37	All Treated	TAB_S1	Summary Profile of On-Treatment Adverse Events Categorised as Opportunistic Infections		SAC
Laboratory - Haematology					
8.38	All Treated	LB1	Summary of Haematology Changes from Baseline by Visit	Include baseline values	SAC
8.39	All Treated	LB3	Summary of Haematology Shifts from Baseline Relative to Normal Range by Visit		SAC
8.40	All Treated	LB3	Summary of Haematology Shifts from Baseline Relative to PCI Criteria by Visit		SAC
Laboratory – Clinical Chemistry					
8.41	All Treated	LB1	Summary of Clinical Chemistry Changes from Baseline by Visit	Include baseline values	SAC
8.42	All Treated	LB3	Summary of Clinical Chemistry Shifts from Baseline Relative to Normal Range by Visit		SAC
8.43	All Treated	LB3	Summary of Clinical Chemistry Shifts from Baseline Relative to PCI Criteria by Visit		SAC

Safety : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
ECG					
8.44	All Treated	EG1	Summary of ECG Findings by Visit		SAC
8.45	All Treated	EG2	Summary of ECG Values by Visit		SAC
8.46	All Treated	EG2	Summary of Change from Baseline in ECG Values by Visit	Include baseline values	SAC
Vital Signs					
8.47	All Treated	VS1	Summary of Vital Signs by Visit		SAC
8.48	All Treated	VS1	Summary of Change from Baseline in Vital Signs by Visit	Include baseline values	SAC

12.10.5. Immunogenicity Tables

Immunogenicity : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
9.1	All Treated	TAB_S2	Summary of Binding Antibody by Visit	Include highest post-baseline result. If highest post-baseline result is positive, include summary statistics (minimum, median, maximum) for titre value – see shell.	SAC
9.2	All Treated	TAB_S2	Summary of Binding Antibody By Visit – Subjects Without Positive Result Prior to Dosing	Post-Day 1 visits only, plus highest post-baseline result and titre summary	SAC

Immunogenicity : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
9.3	All Treated	TAB_S3	Summary of Neutralising Antibody by Visit	Include highest post-baseline result. If highest post-baseline result is positive, include summary statistics (minimum, median, maximum) for titre value – see shell.	SAC

12.10.6. Exploratory Figures

Exploratory : Figures					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
Blood Eosinophils					
10.1	All Treated	FIG_PD1	Adjusted Geometric Mean (95% CI) Ratio to Baseline Blood Eosinophils by Visit	Adjusted geometric means for each treatment from statistical analysis.	SAC
10.2	All Treated	FIG_PD2	Adjusted Treatment Ratios (95% CI) for Ratio to Baseline Blood Eosinophils by Visit	Treatment ratios relative to lyophilised vial formation from statistical analysis.	SAC

12.10.7. Exploratory Tables

Exploratory : Tables					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
Blood Eosinophils					
10.1	PD	<i>TAB_PD1</i>	Summary of Blood Eosinophils (Gl/L) by Visit		SAC
10.2	PD	<i>TAB_PD2</i>	Summary of Ratio to Baseline Blood Eosinophils by Visit		SAC
10.3	PD	<i>TAB_PD3</i>	Summary of Statistical Analysis of Blood Eosinophils Ratio to Baseline		SAC
User/Device Errors					
10.4	All Treated	<i>TAB_AI</i>	Summary of Injection Assessment – Liquid Autoinjector		SAC
10.5	All Treated	<i>TAB_SS</i>	Summary of Injection Assessment – Liquid Safety Syringe		SAC

12.10.8. ICH and Other Listings

ICH and Other Listings					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
Study Population					
1	ASE	ES7	Listing of Reasons for Screen Failure		SAC
2	Randomised	SP3	Listing of Subjects Excluded from Any Population		SAC
3	All Treated	TA1	Listing of Randomised and Actual Treatment		SAC
4	All Treated	ES2	Listing of Reasons for Withdrawal		SAC
5	All Treated	DV2	Listing of Important Protocol Deviations		SAC
6	All Treated	IE3	Listing of Subjects with Inclusion/Exclusion Criteria Deviations		SAC
7	All Treated	EX3	Listing of Exposure Data		SAC
8	All Treated	DM2	Listing of Demographic Characteristics		SAC
9	All Treated	DM9	Listing of Race		SAC
10	All Treated	MH2	Listing of Medical Conditions		SAC
11	All Treated	FH5	Listing of Family History		SAC
12	All Treated	CM3	Listing of Concomitant Medications	Include all data collected on the CRF, plus study day for start date	SAC
PK Concentration					
13	PK	PK07	Listing of Plasma Concentration-Time Data	Actual body weight category, treatment and injection site as by-line.	SAC
14	PK	PK13	Listing of Derived Plasma Mepolizumab Pharmacokinetic Parameters	Actual body weight category, treatment and injection site as by-line.	SAC

ICH and Other Listings					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
Adverse Events					
15	All Treated	AE8	Listing of All Adverse Events	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1)	SAC
16	All Treated	AE8	Listing of Adverse Events Leading to Withdrawal From Study	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1)	SAC
17	All Treated	AE8	Listing of Adverse Events Reported on the Day of Dosing		SAC
Serious Adverse Events					
18	All Treated	AE8	Listing of Fatal Serious Adverse Events	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1)	SAC
19	All Treated	AE8	Listing of Non-Fatal Serious Adverse Events	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1)	SAC
20	All Treated	AE14	Listing of Reasons for Considering as a Serious Adverse Event		SAC

ICH and Other Listings					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
Adverse Events of Special Interest					
21	All Treated	AE8	Listing of Adverse Events Reported by the Investigator as Meeting the Criteria for Anaphylaxis	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1) Add injection reaction symptoms.	SAC
22	All Treated	AE8	Listing of Adverse Events Defined by the Investigator as Systemic Reactions - Allergic (Type I Hypersensitivity)	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1) Add injection reaction symptoms.	SAC
23	All Treated	AE8	Listing of Adverse Events Defined by the Investigator as Systemic Reactions – Other Systemic	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1) Add injection reaction symptoms.	SAC
24	All Treated	AE8	Listing of Adverse Events Defined by the Investigator as Local Injection Site Reactions	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1) Add injection reaction symptoms.	SAC
25	All Treated	AE8	Listing of Adverse Events Categorised as Serious Cardiac, Vascular and Thromboembolic Events	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1)	SAC
26	All Treated	AE8	Listing of Adverse Events Categorised as Serious Ischemic Events	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1)	SAC

ICH and Other Listings					
No.	Population	IDSL / TST ID / Example Shell	Title	Programming Notes	Deliverable [Priority]
27	All Treated	AE8	Listing of Adverse Events Categorised as Malignancies	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1)	SAC
28	All Treated	AE8	Listing of Adverse Events Categorised as Opportunistic Infections	Add phase: Pre-treatment, on-treatment, post-treatment (see Section 12.2.1.1)	SAC
Laboratory					
29	All Treated	LB5	Listing of Haematology Data for Subjects with Abnormalities of Potential Clinical Concern		SAC
30	All Treated	LB5	Listing of Chemistry Data for Subjects with Abnormalities of Potential Clinical Concern		SAC
Immunogenicity					
31	All Treated	IMM2	Listing of Immunogenicity Data for Subjects with at Least One Positive Screening Binding Assay	Include columns for Screening Binding Assay, Confirmation Antibody Assay, Confirmation Assay Titre, Transient/Persistent, Neutralizing Antibody Assay	SAC
User/Device Errors					
32	All Treated	LIST_ERR	Listing of User/Device Errors	List user/device errors for injections where full dose was not successfully administered only.	SAC

12.11. Appendix 11: Example Mock Shells for Data Displays

Example TAB_POP1

Protocol: MID204958

Population: All Subjects Enrolled

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Table X
Summary of Study Populations by Treatment Group

Population	Liquid Autoinjector (N=XX)	Liquid Safety Syringe (N=XX)	Lyophilised Vial (N=XX)	Total (N=XXX)
All Subjects Enrolled				XXX
Randomised	XXX	XXX	XXX	XXX
All Treated Subjects (Safety)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)
Pharmacokinetic	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)
Pharmacodynamic	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)

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Example TAB_POP2
Protocol: MID204958
Population: Randomised

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Table X
Summary of Study Populations by Treatment Group and Injection Site

Population	Liquid Autoinjector (N=XX)			Liquid Safety Syringe (N=XX)			Lyophilised Vial (N=XX)		
	Arm	Abdomen	Thigh	Arm	Abdomen	Thigh	Arm	Abdomen	Thigh
Randomised	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
All Treated Subjects (Safety)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)
Pharmacokinetic	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)
Pharmacodynamic	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)	XXX (XX%)

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Example TAB_PK1

Protocol: MID204958

Population: Pharmacokinetic

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Table X.X
Summary of Statistical Analysis of Derived Plasma Mepolizumab Pharmacokinetic Parameters

Parameter	Test treatment	Adjusted Geometric Mean (SE (logs))		Ratio (Test/Ref)	90% CI for Ratio (Test/Ref)
		Test	Reference [1]		
AUC (0-inf) (day*ug/mL)	Liquid Autoinjector	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Liquid Safety Syringe	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
AUC (0-t) (day*ug/mL)	Liquid Autoinjector	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Liquid Safety Syringe	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
Cmax (ug/mL)	Liquid Autoinjector	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Liquid Safety Syringe	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)

[1] Reference treatment = Lyophilised Vial.

Note: The estimates of the geometric mean are adjusted for injection site (arm, abdomen, thigh) and baseline weight (loge scale).

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Example TAB_S1

Protocol: MID204958

Population: All Treated (Safety)

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Table X.X

Summary Profile of On-Treatment Adverse Events Defined by the Investigator as Allergic (Type I Hypersensitivity) Reactions

		Liquid Autoinjector (N=XX)	Liquid Safety Syringe (N=XX)	Lyophilised Vial (N=XX)	Liquid Total (N=xx)	Total (N=xx)
<u>1</u>	All Events					
	>= 1 event [1]	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
	1 event	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
	2 events	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
	3 events	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
	>=4 events	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
<u>2</u>	Serious Events					
	>= 1 event [1]	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
<u>3</u>	Events considered related to investigational product					
	>= 1 event [1]	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
<u>4</u>	Intensity [1]					
	Mild	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
	Moderate	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
	Severe	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
<u>5</u>	Outcome [1]					
	Recovered/Resolving	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
	Recovering/Resolving	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
	Not recovered/Not Resolved	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
	Recovered/Resolved with sequelae	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
	Fatal	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)

[1] Information presented as number of events / number (%) subjects with at least one event. Subjects may be counted in more than one row.

[2] Cardiac History=Yes includes all subjects with any past medical condition under Cardiac Disorders

[3] Unable to categorise time since last dose as event time not reported

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Example TAB_S1 (Cont.)

Protocol: MID204958

Population: All Treated (Safety)

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Table X.X

Summary Profile of On-Treatment Adverse Events Defined by the Investigator as Allergic (Type I Hypersensitivity) Reactions

	Liquid Autoinjector (N=XX)	Liquid Safety Syringe (N=XX)	Lyophilised Vial (N=XX)	Liquid Total (N=xx)	Total (N=xx)
6 Action Taken [1]					
Study treatment withdrawn	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
Dose reduced	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
Dose increased	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
Dose not changed	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
Dose interrupted/delayed	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
Not applicable	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
7 Cardiac History [1][2]					
Yes	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
No	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
8 Anaphylaxis Criteria Met					
Anaphylactic Criterion 1	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
Anaphylactic Criterion 2	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
Anaphylactic Criterion 3	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
9 No. doses prior to event [1]					
1	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
2	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
3	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
etc.					
10 No. doses prior to first event					
1	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
2	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
3	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
etc.					

[1] Information presented as number of events / number (%) subjects with at least one event. Subjects may be counted in more than one row.

[2] Cardiac History=Yes includes all subjects with any past medical condition under Cardiac Disorders

[3] Unable to categorise time since last dose as event time not reported

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Example TAB_S1 (Cont.)

Protocol: MID204958

Population: All Treated (Safety)

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Table X.X

Summary Profile of On-Treatment Adverse Events Defined by the Investigator as Allergic (Type I Hypersensitivity) Reactions

	Liquid Autoinjector (N=XX)	Liquid Safety Syringe (N=XXX)	Lyophilised Vial (N=XX)	Liquid Total (N=xx)	Total (N=xx)
11 Time since last dose to event onset [1]	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
<=1 hr	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
1-<6 hrs	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
6-<24 hrs	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
>=24 hrs	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
Missing [y]					
12 Time since last dose to first event onset	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
<=1 hr	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
1-<6 hrs	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
6-<24 hrs	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
>=24 hrs	xx (x%)	xx (x%)	xx (x%)	xx (x%)	xx (x%)
Missing [3]					
13 No. symptoms associated with event [1]	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
0 symptoms	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
1 symptom	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
2-5 symptoms	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
>5 symptoms					
14 Symptoms [1]					
ABDOMINAL	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
ANGIOEDEMA	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
ARTHRALGIA	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)	xx/xx (x%)
etc					

[1] Information presented as number of events / number (%) subjects with at least one event. Subjects may be counted in more than one row.

[2] Cardiac History=Yes includes all subjects with any past medical condition under Cardiac Disorders

[3] Unable to categorise time since last dose as event time not reported

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Programming Notes:-

Remove footnotes that are not relevant for the table.

Sections 1 - 6, 9, 10: Create for all adverse events of special interest

Sections 9 and 10: For studies longer than 1 year can consider the following categories: 1, 2, 3, 4, 5, 6, 7-12, 13-18, 19-24, >24

Section 7: Only for the following adverse events of special interest

Serious Cardiac, Vascular and Thromboembolic Events

Serious Ischemic Events

Section 8: Only for the following adverse events of special interest

Anaphylaxis

Systemic - Allergic (Type I Hypersensitivity)

Sections 11 - 14: Only for the following adverse events of special interest

Anaphylaxis

Systemic - Allergic (Type I Hypersensitivity) and Other Systemic

Systemic - Allergic (Type I Hypersensitivity)

Systemic - Other Systemic

Local Injection Site Reactions

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Example TAB_S2

Protocol: MID204958

Population: All Treated (Safety)

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Table X
Summary of Binding Antibody Results by Visit

Visit	Assay Result	Liquid Autoinjector (N=XX)	Liquid Safety Syringe (N=XX)	Lyophilised Vial (N=XX)	Liquid Total (N=xx)	Total (N=xx)
Screening	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Day 1	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Day 29	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	TRANSIENT POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	PERSISTENT POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)

[1] A subject is considered positive if they have at least one positive post-baseline ADA result.

[2] Highest post-baseline titre.

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Example TAB_S2 (Cont.)

Protocol: MID204958

Population: All Treated (Safety)

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Table X
Summary of Binding Antibody Results by Visit

Visit	Assay Result	Liquid Autoinjector (N=XX)	Liquid Safety Syringe (N=XX)	Lyophilised Vial (N=XX)	Liquid Total (N=xx)	Total (N=xx)
Day 43	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	TRANSIENT POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	PERSISTENT POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Day 85	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	PERSISTENT POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Any Post-Baseline	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE [1]	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	TRANSIENT POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	PERSISTENT POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Titre value [2]		Min. X	X	X	X	X
		Median X.X	X.X	X.X	X.X	X.X
		Max. X	X	X	X	X

[1] A subject is considered positive if they have at least one positive post-baseline ADA result.

[2] Highest post-baseline titre.

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Example TAB_S3

Protocol: MID204958

Population: All Treated (Safety)

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Table X
Summary of Neutralising Antibody Results by Visit

Visit	Assay Result	Liquid Autoinjector (N=XX)	Liquid Syringe (N=XX)	Lyophilised Vial (N=XX)	Liquid Total (N=xx)	Total (N=xx)
Screening	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Day 1	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Day 29	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Day 43	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Day 85	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
Any Post-Baseline	n	X	X	X	X	X
	NEGATIVE	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)
	POSITIVE [1]	X (XX%)	X (XX%)	X (XX%)	X (XX%)	X (XX%)

[1] A subject is considered positive if they have at least one positive post-baseline neutralising antibody result.

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Example TAB_PD1

Protocol: MID204958

Population: Pharmacodynamic

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Table X
Summary of Blood Eosinophils (GI/L)

Treatment	N	Visit	n	Geom. Mean	95% CI (Lower,Upper)	SD (logs)	Min.	Median	Max.
Lyophilised Vial	XX	Day 1	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 3	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 5	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 10	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 29	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 57	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 85	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
Liquid Autoinjector	XX	Day 1	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 3	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 5	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 10	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 29	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 57	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 85	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
Liquid Safety Syringe	XX	Day 1	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 3	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 5	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 10	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 29	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 57	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 85	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x

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Example TAB_PD2

Protocol: MID204958

Population: Pharmacodynamic

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Table X
Summary of Ratio to Baseline Blood Eosinophils

Treatment	N	Visit	n	Geom. Mean	95% CI (Lower,Upper)	SD (logs)	Min.	Median	Max.
Lyophilised Vial	XX	Day 3	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 5	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 10	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 29	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 57	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 85	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
Liquid Autoinjector	XX	Day 3	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 5	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 10	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 29	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 57	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 85	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
Liquid Safety Syringe	XX	Day 3	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 5	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 10	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 29	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 57	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x
		Day 85	XX	xxxxx.xx	(xxxxx.xx,xxxxx.xx)	xx.xxx	xx.x	xxxxx.xx	xx.x

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Example TAB_PD3

Protocol: MID204958

Population: Pharmacodynamic

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Table X.X
Summary of Statistical Analysis of Ratio to Baseline Blood Eosinophils

Test treatment	Visit	Adjusted Geometric Mean (SE (logs))		Ratio (Test/Ref)	95% CI for Ratio (Test/Ref)
		Test	Reference [1]		
Liquid Autoinjector	Day 3	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 5	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 10	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 29	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 57	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 85	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
Liquid Safety Syringe	Day 3	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 5	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 10	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 29	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 57	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)
	Day 85	XX.XXX (X.XX)	XX.XXX (X.XX)	X.XXX	(X.XXX, X.XXX)

[1] Reference treatment = Lyophilised Vial.

Note: The estimates of the geometric mean are adjusted for baseline blood eosinophil count (loge scale), injection site (arm, abdomen, thigh) and baseline weight (loge scale).

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Example TAB_AI

Protocol: MID204958

Population: All Treated Subjects (Safety)

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Table X.X
Summary of Injection Assessment - Liquid Autoinjector

		Liquid Autoinjector (N=XX)
Was the full dose successfully administered?	Yes	XX (XX%)
	No	XX (XX%)
User Errors	Incorrect injection site	XX (XX%)
	Pen was not pushed all the way down and held	XX (XX%)
	Pen was pulled away before end of injection	XX (XX%)
	Evidence of liquid leaking from the injection site	XX (XX%)
	Other	XX (XX%)
Device Errors	Pen leaking	XX (XX%)
	Components broken/cracked	XX (XX%)
	Cannot push the needle guard down to activate	XX (XX%)
	Pen does not activate (after pressing the needle guard down)	XX (XX%)
	Delivery stops before the end of injection	XX (XX%)
	Other	XX (XX%)

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Example TAB_SS

Protocol: MID204958

Population: All Treated Subjects (Safety)

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Table X.X
Summary of Injection Assessment - Liquid Safety Syringe

		Liquid Safety Syringe (N=XX)
Was the full dose successfully administered?	Yes	XX (XX%)
	No	XX (XX%)
User Errors	Incorrect injection site	XX (XX%)
	Needle not full inserted into site	XX (XX%)
	Plunger not slowly pushed down	XX (XX%)
	Plunger not pushed all the way down until the stopper reaches bottom of syringe	XX (XX%)
	Thumb not moved up, plunger not risen and needle guard not activated	XX (XX%)
	Evidence of liquid leaking from injection site	XX (XX%)
	Other	XX (XX%)
Device Errors	Syringe leaking	XX (XX%)
	Components broken/cracked	XX (XX%)
	Cannot push the plunger rod down	XX (XX%)
	Other	XX (XX%)

userid: /arenv/arprod/compound/study/final/drivers/username.sas DDMMYYYY HH:MM

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Example LIST_ERR

Protocol: MID204958

Population: All Treated Subjects (Safety)

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Table X.X
Listing of User/Device Errors

Treatment/ Injection Site	Site Id./ Unique Subject Id.	Was the Full Dose Successfully Administered?	User/Device Error
Liquid Autoinjector/ Arm	XXXXXX/ MID204958.XXXXXX	No	Delivery stops before end of injection
	XXXXXX/ MID204958.XXXXXX	No	Incorrect injection site selected - <i>specify</i> Pen leaking
Liquid Safety Syringe/ Abdomen	XXXXXX/ MID204958.XXXXXX	No	Incorrect injection site selected - <i>specify</i>

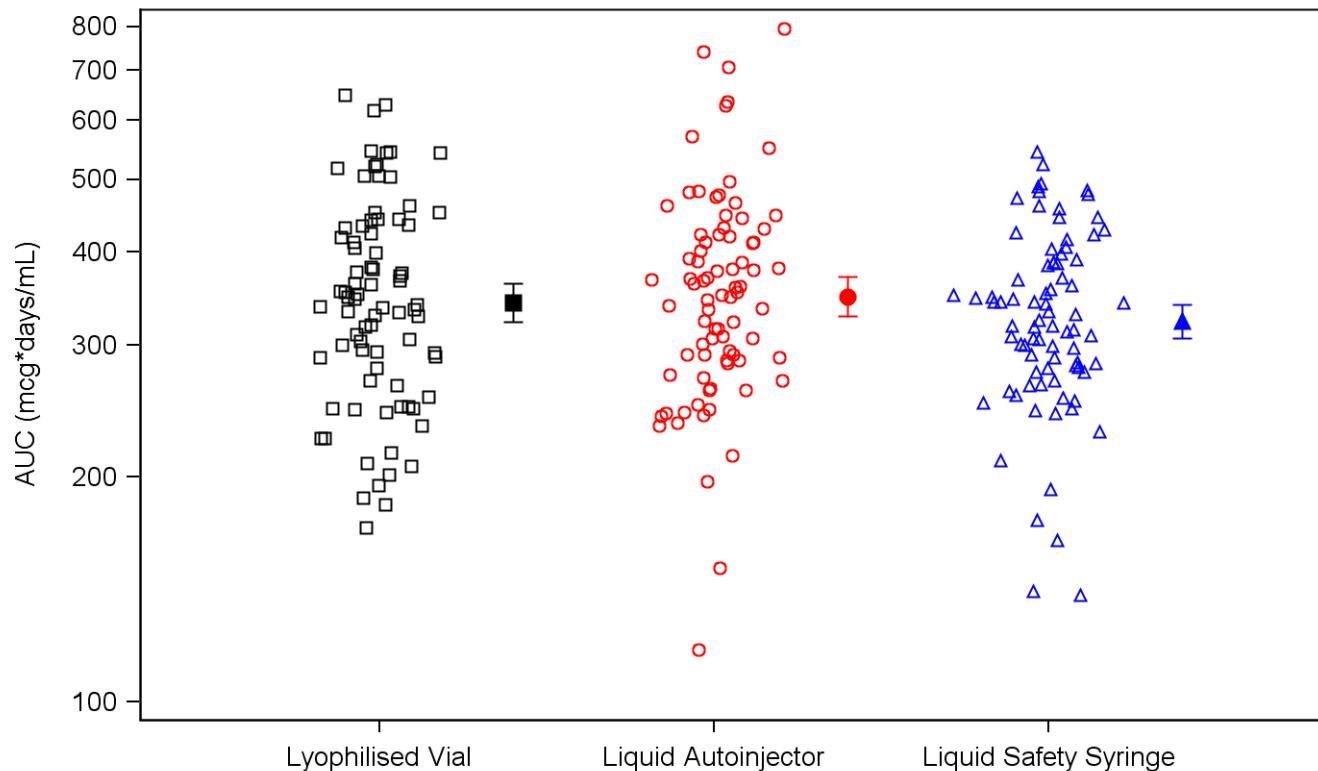
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Example FIG_PK1
Protocol: MID204958
Population: Pharmacokinetic

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Figure X.X
Individual Subject (+Geometric Mean and 95% CI) Derived Plasma Mepolizumab PK Parameters by Treatment

Parameter: AUC (mcg*days/mL)



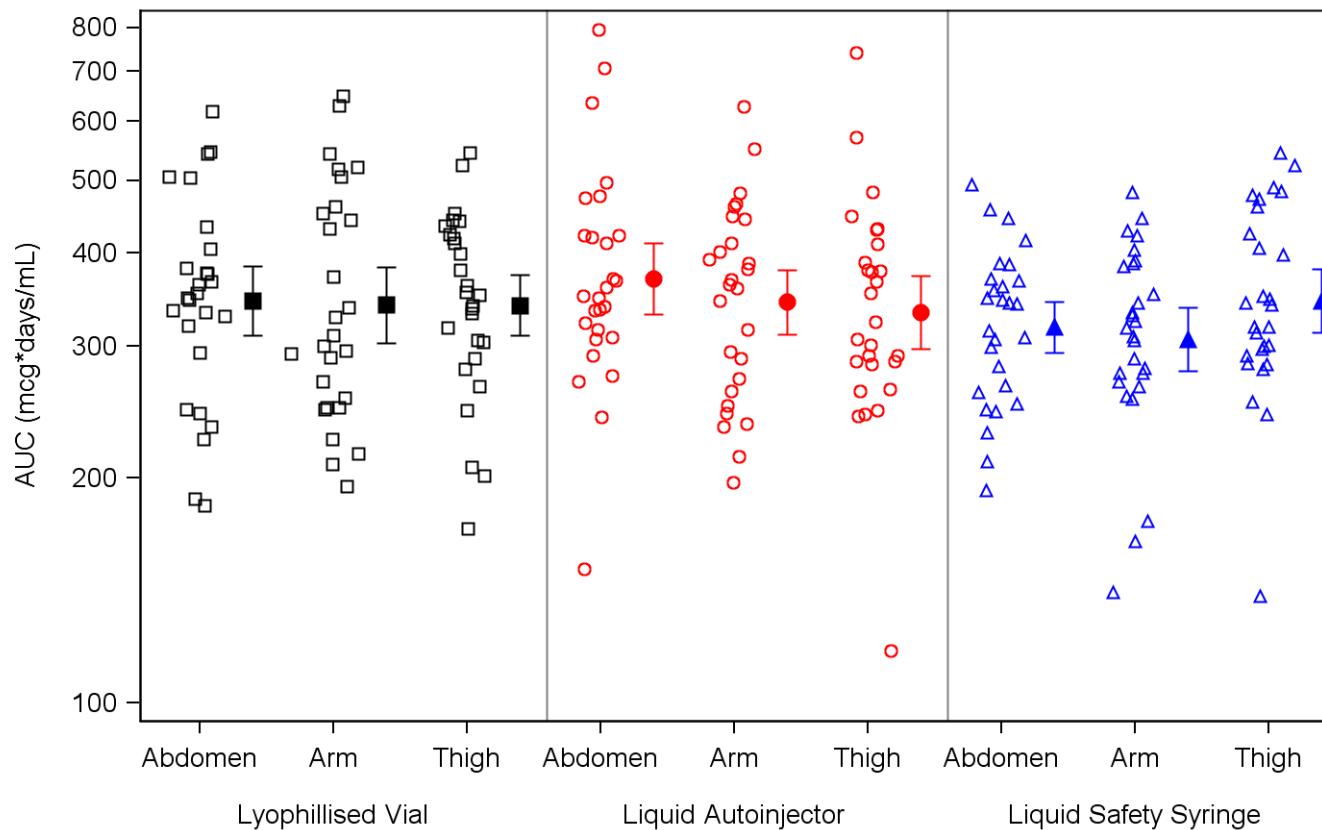
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Example FIG_PK2
Protocol: MID204958
Population: Pharmacokinetic

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Figure X.X
Individual Subject (+Geometric Mean and 95% CI) Derived Plasma Mepolizumab PK Parameters
by Treatment and Injection Site

Parameter: AUC (mcg*days/mL)



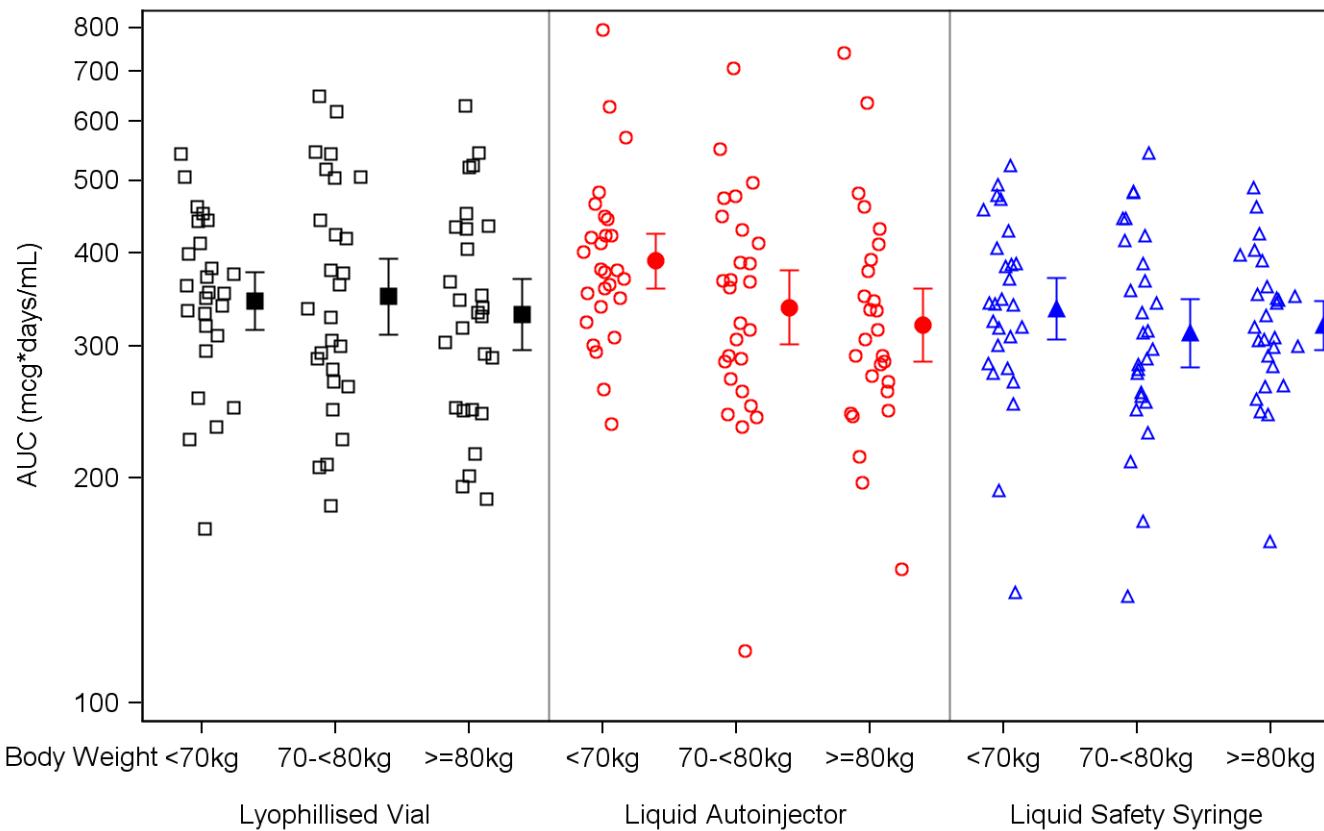
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Example FIG_PK3
Protocol: MID204958
Population: Pharmacokinetic

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Figure X.X
Individual Subject (+Geometric Mean and 95% CI) Derived Plasma Mepolizumab PK Parameters
by Baseline Body Weight Category and Treatment

Parameter: AUC (mcg*days/mL)



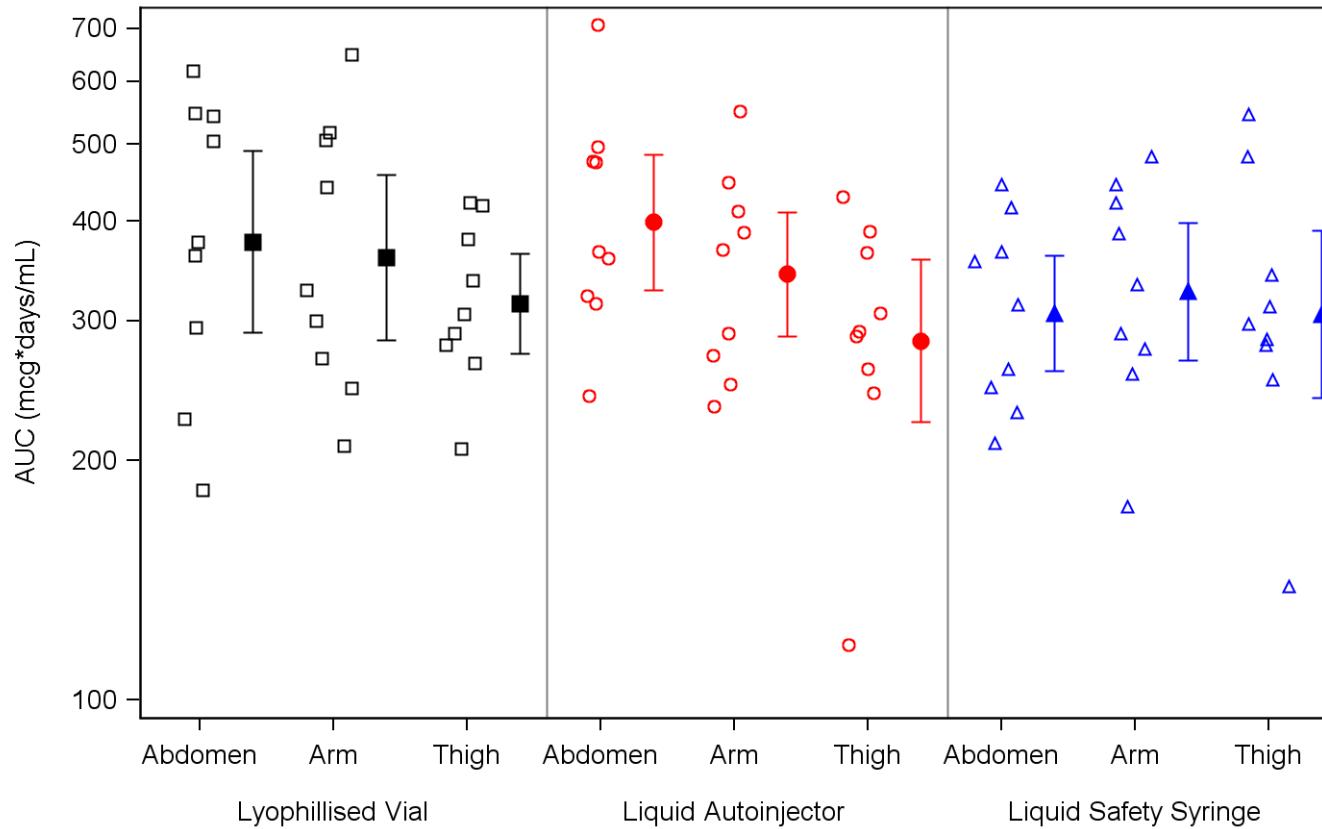
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Example FIG_PK4
Protocol: MID204958
Population: Pharmacokinetic

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Figure X.X
Individual Subject (+Geometric Mean and 95% CI) Derived Plasma Mepolizumab PK Parameters
by Baseline Body Weight Category, Treatment and Injection Site

Parameter: AUC (mcg*days/mL), Baseline Body Weight: <70 kg



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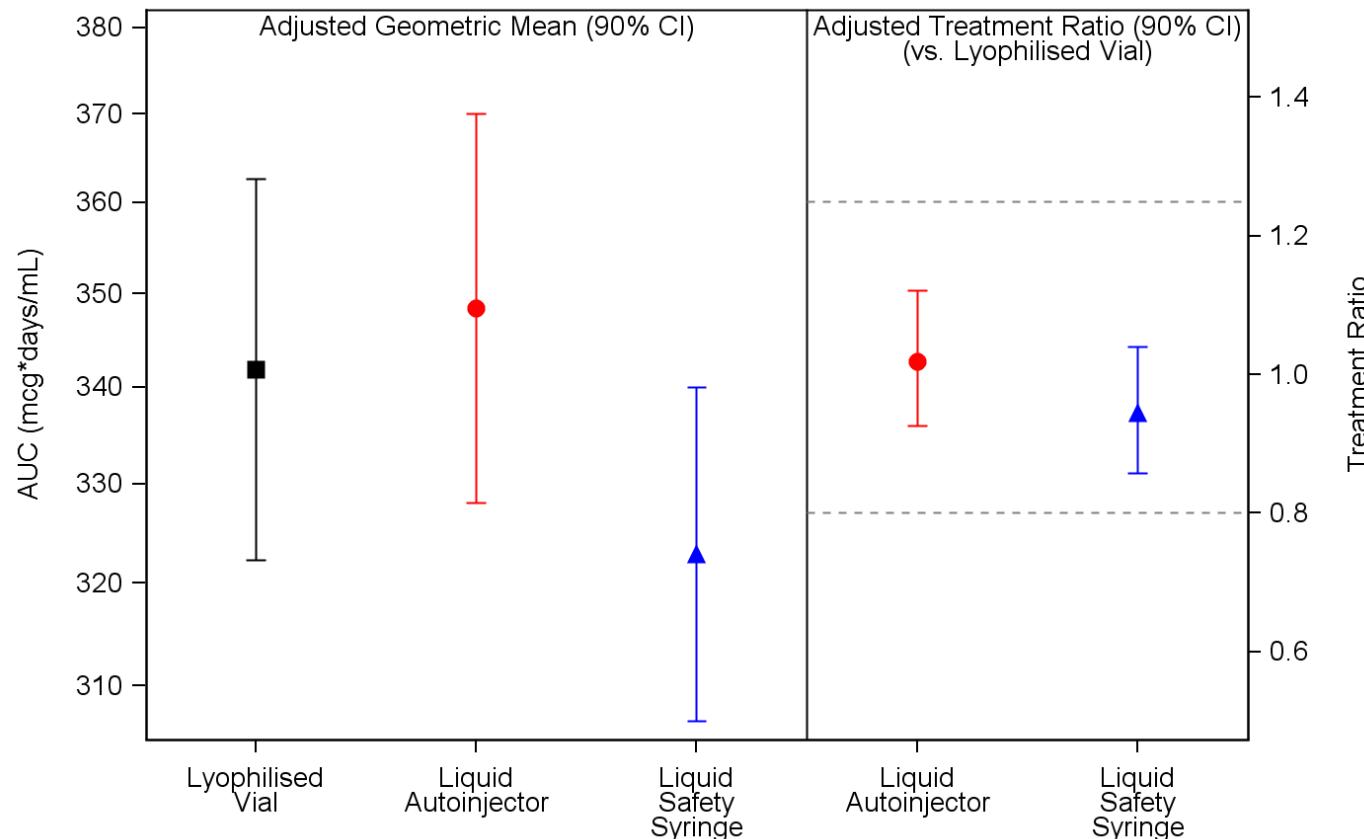
Example FIG_PK5
Protocol: MID204958
Population: Pharmacokinetic

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Figure X.X

Adjusted Geometric Means and Treatment Ratios (90% CI) for Primary Analysis of Derived Plasma Mepolizumab PK Parameters

Parameter: AUC (mcg*days/mL)

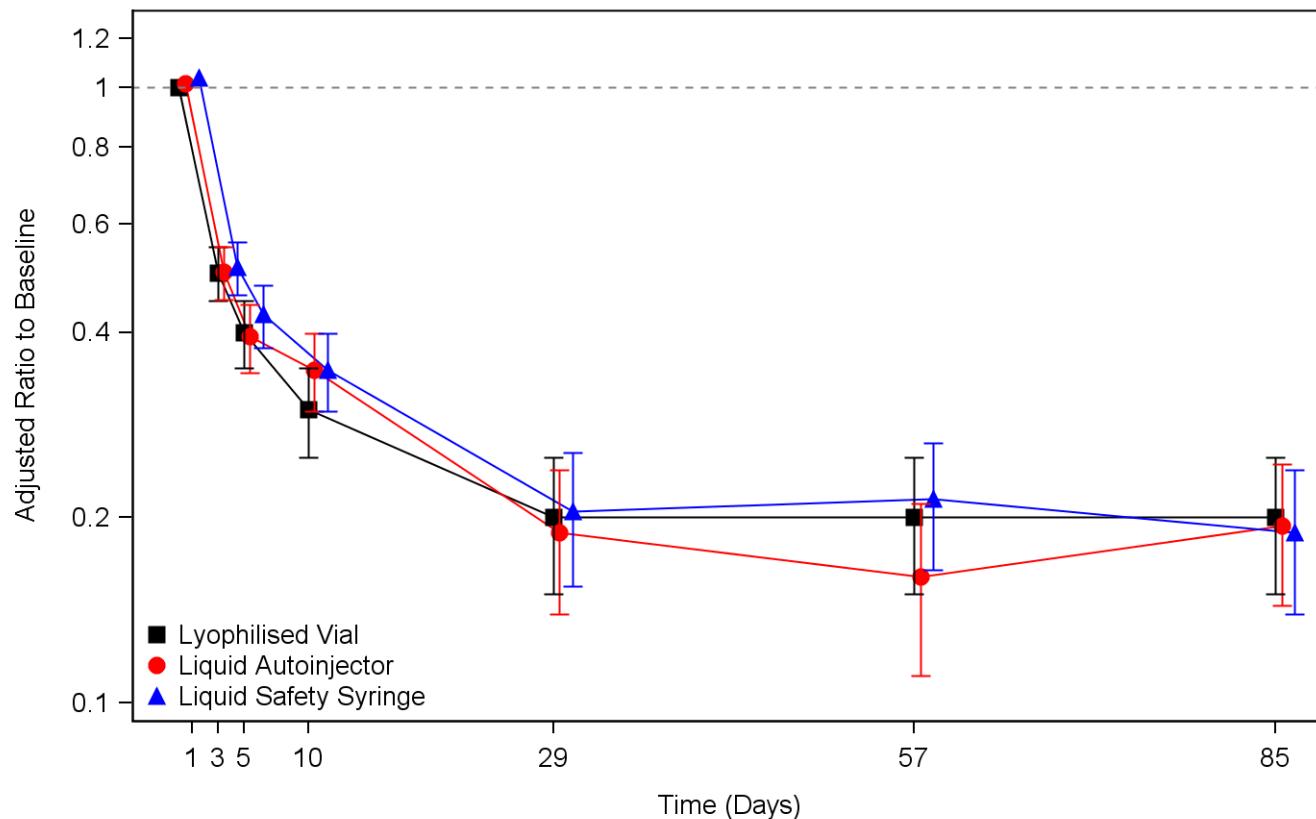


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Example FIG_PD1
Protocol: MID204958
Population: All Treated (Safety)

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Figure X.X
Summary of Adjusted Geometric Mean (95% CI) Ratio to Baseline Blood Eosinophils by Visit

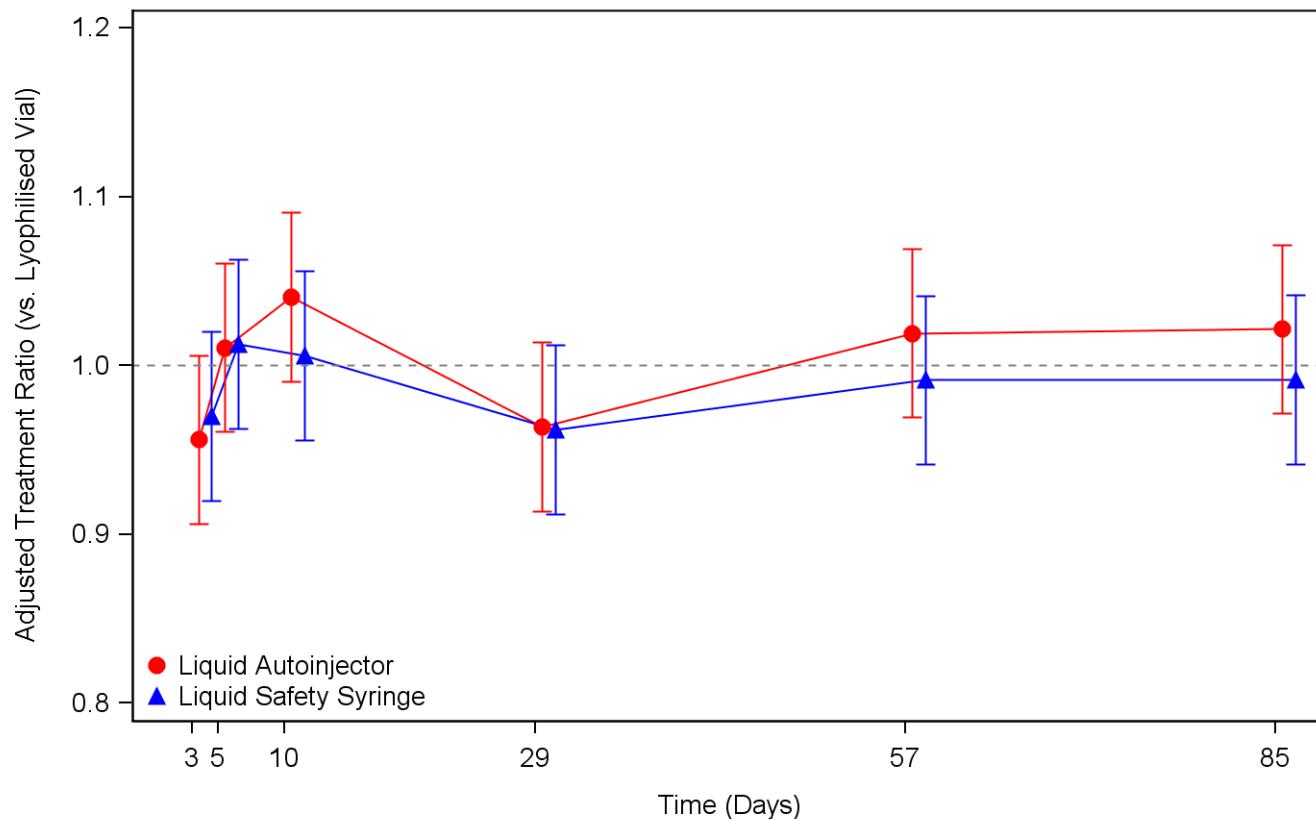


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Example FIG_PD2
Protocol: MID204958
Population: All Treated (Safety)

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Figure X.X
Summary of Adjusted Treatment Ratios (95% CI) for Ratio to Baseline Blood Eosinophils by Visit



userid: /arenv/arprod/compound/study/final/drivers/drivername.sas DDMMYYYY HH:MM