STATISTICAL ANALYSIS PLAN

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Treatment groups	Seroguard, 1.5 and 2.4 mL/kg; Placebo
Protocol No.	SG-2/1215
Protocol title	Phase II multi-center, randomized, double-blind, placebo-controlled efficacy and dose ranging trial of the drug product Seroguard, solution (JSC Pharmasyntez, Russia) used for the prevention of pelvic adhesions.
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1. INTRODUCTION

This document describes the planned statistical analysis of clinical trial data (JSC Pharmasyntez) as per protocol SG- 2/1215: Phase II multi-center randomized double-blind placebo-controlled efficacy and dose ranging trial of the drug product Seroguard, solution (JSC Pharmasyntez, Russia) used for the prevention of pelvic adhesions.

2. LIST OF ABBREVIATIONS

Abbreviation	Definition
AE	Adverse event
ALP	Alkaline phosphatase
ALT	Alanine aminotransferase
APTT	Activated partial thromboplastin time
AR	Adverse reaction
ASA	American Association of Anaesthetists
AST	Aspartate aminotransferase
ATC	Anatomical Therapeutic Chemical classification system
BADS	Biologically Active Dietary Supplements
BMI	Body Mass Index = Weight/Height $(cm)^2$
BP	Blood pressure
CI	Confidence interval
COX	Cyclooxygenase
CRF	Case Report Form
CRO	Contract research organization
DBP	Diastolic blood pressure
EC	Ethics Committee
ECG	Electrocardiogram
ESR	Erythrocyte sedimentation rate
FDA	Food and Drug Administration
GCP	Good Clinical Practice
GGT	Gamma-glutamyl transpeptidase
HIV	Human immunodeficiency virus
HR	Heart rate
ICD	International classification of diseases
ICH	The International Conference on Harmonization of Technical Requirements for Registration of Pharmaceuticals for Human Use
ICH GCP	International Conference on Harmonization Good Clinical Practice Guidelines
INN	International nonproprietary name
INR	International normalized ratio
ITT	Intent-to-treat, or population comprising all patients included in the trial
LEC	Local ethics committee
LLN	Lower limit of normal
MedDRA	Medical Dictionary for Regulatory Activities
mm Hg	millimeter of mercury
NEC	National ethics committee
PAI	Pelvic Adhesions Index
PATE	Pulmonary artery thromboembolia
PP	Per protocol, or population of patients who completed the trial as per protocol
RNA	Ribonucleic acid
RR	Respiratory rate
SAE	Serious adverse event
SAR	Serious adverse reaction
SBP	Systolic blood pressure
SOP	Standard operating procedure
TESS	Treatment Emergency Sign and Symptom

Abbreviation	Definition
ULN	Upper limit of normal
WHO	World Health Organization
WMO	World Medical Association

3. STUDY DESIGN

A multi-center, randomized, double-blind, placebo-controlled efficacy and dose ranging clinical trial of the drug product Seroguard, solution (JSC Pharmasyntez, Russia) used for the prevention of pelvic adhesions will be performed.

After a female patient successfully completes screening procedures she will undergo a planned laparoscopic operation. All patients will be randomized into treatment groups at the surgery date with the help of on-line IWRS system (Interactive Web Response System). The test drug or placebo are administered at the final stage of the surgery. After the surgery, a patient will stay in hospital for a 6-day observation period. At day 7, unless clinically contraindicated, a patient can be discharged from hospital and will be further observed on an outpatient basis. The observation period duration is 4 weeks up to day 28 of the study. Then a final evaluation of the treatment efficacy is carried out at the repeated MRI of the abdomen and pelvis.

Trial procedures for evaluation of safety and efficacy of the test drug and placebo will be the same in all treatment groups:

1) group of placebo, 1.5 mL/kg – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases;
2) group of placebo, 2.4 mL/kg – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases;
3) group of Seroguard, 1.5 mL/kg – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases;
4) group of Seroguard, 2.4 mL/kg – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.

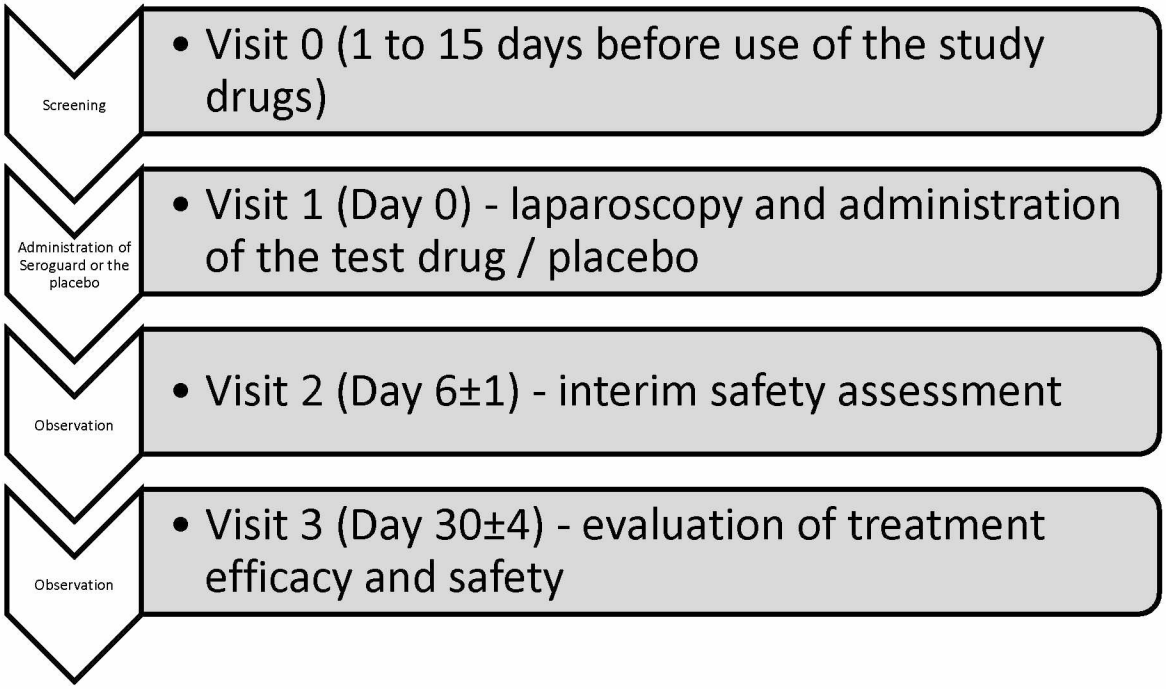

Figure 3.1 Study Design Flowchart

3.1 RANDOMIZATION

After female patients sign the informed consent form to participate in the study and it is

confirmed that they meet the inclusion criteria and do not have the non-inclusion criteria they will be allocated into treatment groups by means of a centralized block randomization in a 1:1:1:1 ratio without stratification by the study centre via on-line IWRS system (Interactive Web Response System). A study subject will be assigned a randomization ID in the order of access to the IWRS system. Randomization IDs corresponding to the test drug or placebo administration will be randomly assigned to the equal number of patients.

1. Placebo, 1.5 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.
2. Placebo, 2.4 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.
3. Seroguard, 1.5 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.
4. Seroguard, 2.4 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.

A block generation of the randomization sequence will be used to generate a randomization list. The randomization list will be generated by a statistics software using a random number generator at the stage of preparation to the study.

It is only a patient's randomization ID that will be recorded in the CRF with no specification of the administered drug.

Investigators will have an online training on using the IWRS system.

A register of screened and randomized patients will be maintained for all study centers. The register form is provided in the Study Center File. It should be regularly filled in by investigators entering all the data required.

For patients to be identified in case of an insured event, each of them will be assigned a unique identification code created by the following scheme:

- Study authorization number;
- Date the study authorization was issued in the DD MM YYYY format;
- Medical organization number specified in the authorization;
- Patient's initials (first letters of her surname, name and patronymic);
- Patient's birthday in the DD MM YYYY format;
- Patient's unique number (can consist of digits and/or letters).

Study authorization number	Date the study authorization was issued (DD MM YYYY)	Medical organization number specified in the authorization	Patient's initials (first letters of her surname, name and patronymic)	Patient's birthday (DD MM YYYY)	Patient' unique number (can consist of digits and/or letters)

3.2 BLINDING

The present trial is designed as a double-blind, placebo-controlled study. In order to provide the maximum objective evaluation of the primary endpoint neither a medical

Investigator, nor patients will have access to the treatment assignment code.

Blinding is performed in such a way that disclosing a randomization code of a certain subject excludes a disclosure of the code in general (i.e. the randomization code has no indication of the treatment group).

In order to ensure the double blind design of the study, an unblinded pharmacist will be included in a study team of the investigation site. The unblinded pharmacist will distribute a study drug for a particular patient by using the IRWS system, calculate the volume of the drug to be administered (mL) to each patient according to the treatment group and data on the patient's weight, and prepare the drug immediately prior to its administration to the patient in accordance with the "Study drug preparation instructions for unblinded study team members" (provided to study centers as a separate document).

An unblinded pharmacist of the study team must not inform a site representative or other blinded team members, or Sponsor representative/blinded CRO representative on the treatment group (except for cases when unblinding is necessary to make a decision on the further strategy of a patient treatment). A fact of unblinding as well as reasons of an inquiry for information unblinding are to be recorded in the patient's primary documentation in detail.

3.3 STUDY DRUGS

1. Placebo, 1.5 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.
2. Placebo, 2.4 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.
3. Seroguard, 1.5 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.
4. Seroguard, 2.4 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.

Table 3.1 Schedule of Visits and Study Procedures

Procedures	Screening	Surgery	Observation		Unscheduled visit[1]	Early termination visit
	Visit 0	Visit 1	Visit 2	Visit 3		
	Day -15 to -1	Day 0	Day 6±1	Day 30±4		
Informed consent	+					
Evaluation of the inclusion, non-inclusion criteria	+	+				
Evaluation of the withdrawal criteria			+		+	
Collection of medical and pharmacotherapeutic analysis data	+					
Collection of demographic and anthropometric data	+					
Physical examination	+	+	+	+	+	+
Local status assessment		+	+	+	+	+[2]
Measurement of vital signs[3]	+	+	+	+	+	+
HIV, RW, HBV and HCV blood test	+					
Pregnancy test	+			+		+
Randomization		+				
Complete blood count	+		+	+	+	+
Blood biochemistry	+		+	+	+	+
Coagulogram	+			+		+
Urinalysis	+		+	+	+	+
Abdominal /pelvic MRI	+			+		+
Abdominal ultrasound	+		+			+
Pelvic ultrasound	+			+		+
Gynecological examination and colposcopy	+					
Cervical cytology by Pap smears	+					
Smear microscopy	+					
Hysterosalpingography[4]	+					
12-lead ECG	+		+	+	+	+
Concomitant therapy evaluation		+	+	+	+	+
Administration of the test drug/placebo		+				
Detection of ARs	+	+	+	+	+	+

[1] Any additional study procedure can be performed if indicated, at the discretion of the Principal Investigator
[2] If applicable
[3] Blood pressure, heart rate at the radial artery, respiration rate, body temperature will be measured.
[4] Performed at the discretion of a doctor for women diagnosed with infertility who are enrolled in the study.

4. STUDY OBJECTIVES

The trial is aimed at evaluating efficacy of Seroguard solution used for the prevention of pelvic adhesions.

4.1 PRIMARY OBJECTIVES

To compare the efficacy of Seroguard solution administered at the dose of 1.5 or 2.4 mL/kg and the placebo (1.5 or 2.4 mL/kg of 0.9 % sodium chloride solution) in terms of presence, severity and extent of adhesions after laparoscopic treatment of pelvic adhesions in female patients.

To evaluate the safety profile of Seroguard solution administered at the dose of 1.5 or 2.4 mL/kg as compared to the placebo (1.5 or 2.4 mL/kg of 0.9 % sodium chloride solution) after laparoscopic treatment of pelvic adhesions.

4.2 SECONDARY OBJECTIVES:

1. to determine a change in the number of pelvic adhesions as based on post-surgery MRI data in comparison to pre-surgery MRI data;
2. to determine a change in thickness of pelvic adhesions as based on post-surgery MRI data in comparison to pre-surgery MRI data;
3. to determine a frequency of detecting limited mobility of pelvic organs post surgery (as based on transvaginal ultrasound results);
4. to determine a frequency of hyperechoic linear lesion detection post surgery as based on transvaginal ultrasound results;
5. to determine a change in the frequency of detecting pelvic organ limited mobility in comparison to the baseline (absolute change and percentage from the baseline);
6. to determine a change in frequency of hyperechoic linear lesion detection as based on results of a repeated transvaginal ultrasound in comparison to the baseline;
7. to determine a frequency of detecting no ultrasound signs of pelvic adhesive disease post surgery (defined as no limited mobility of pelvic organs and no hyperechoic linear lesions);
8. to determine a number of adhesions at the surgery;
9. to determine a number of dense adhesions at the surgery;
10. to determine a percentage of patients with any adverse reactions;
11. to determine a percentage of patients with any serious adverse reactions;
12. to determine a percentage of patients with adverse reactions “definitely”, “probably” or “possibly” related to the test drug or the placebo;
13. to determine a percentage of female patients with serious adverse reactions “definitely”, “probably” or “possibly” related to the test drug or the placebo;
14. to determine a percentage of patients with mild adverse reactions;
15. to determine a percentage of patients with moderate adverse reactions;
16. to determine a percentage of patients with severe adverse reactions;

17. to determine a percentage of patients with clinically significant changes in physical examination results;
18. to determine a percentage of patients with clinically significant changes in vital signs;
19. to determine a percentage of patients with clinically significant changes in ECG results;
20. to determine a percentage of patients with clinically significant changes in laboratory test results.

5. DETERMINATION OF THE SAMPLE SIZE[1]

In the studies of Adept® (Innoventica plc) that is the closest drug to the test one by its mechanism of action (U.S. Food and Drug Administration, 2006), a primary endpoint defined as a decrease in the number of adhesions by 3 or more (in patients with 10 or less adhesions at the baseline) or by 30% and more (in patients with >10 adhesions at the baseline) at the second look diagnostic laparoscopy was used and it was achieved in 45 %.

As soon as performance of a second look laparoscopy in the present trial is ethically unacceptable, MRI will be used for the purpose of primary endpoint evaluation. According to the publication (Ghonge & Ghonge, 2014) MRI results strongly correlate to those of a diagnostic laparoscopy (including both pre- and post-surgery examinations at second look laparoscopies). The only exceptions are the thinnest adhesions that cannot be visualized by MRI but for this purpose high field MRI can be performed. Hence, MRI allows to visualize adhesions both in terms of their quality and quantity and to obtain data with the same degree of detalization as during pre- and post-surgery laparoscopic examination.

Thus, the size will be calculated on the basis of efficacy of similar drugs studied on the laparoscopy data basis, however, in the present trial MRI control will be used first and for most due to ethical considerations and due to a strong correlation between MRI and laparoscopy data.

According to the above Adept® studies (U.S. Food and Drug Administration, 2006), the primary endpoint effectiveness (clinical success determined as a decrease in the number of adhesions at the second look diagnostic laparoscopy by 3 and more (in patients with 10 or less adhesions at the baseline) or by 30% and more (in patients with > 10 adhesions at the baseline)) is 45%. According to the literature review and meta-analysis (Ahmad, et al., 2014), clinical efficacy in the control group (placebo) is achieved in no more than 10% cases.

Using these baseline data, the following assumptions are made (as per the method specified in (U.S. Department of Health and Human Services, Food and Drug Administration, Center for Drug Evaluation and Research (CDER), Center for Biologics Evaluation and Research (CBER), 2010)):

1. The study will be conducted as a *superiority trial*, i.e. at least one dosage of Seroguard is to be more efficient than the placebo with the *superiority margin* of 5% and more (definition of the endpoint and superiority margin given in the main pivotal of Adept® is used). Each dosage of the test drug will be compared with the placebo separately. Comparison of the two dosages of the test drug by their

[1] Cited by the Study protocol

efficacy is not planned and it will be studied in phase III clinical trials.

2. Expected rates of achieving the primary endpoint in the different dosage groups will be considered as initially equal.
3. First type error (α) for the superiority hypothesis is 5% (0.05).
4. Second type error (β) is set at 20 % (0.2) which corresponds to 80% power.
5. Expected withdrawal rate at screening is 15% and after randomization – 10%.

Null and alternative hypotheses for the *superiority testing* are as follows:

The null hypothesis (H_0) holds that the difference in the rate of the primary endpoint achievement between one of the Seroguard dosages and the placebo will not exceed 5% in favor of the drug

$$H_0: p_1 - p_0 \leq 0{,}05$$

The alternative hypothesis (H_A) holds that the difference in the rate of the primary endpoint achievement between one of the Seroguard dosages and the placebo will exceed 5% in favor of the drug

$$H_A: p_1 - p_0 > 0{,}05$$

where p_0 and p_1 are the rates of the primary endpoint achievement in the groups of the placebo and Seroguard (at any dosage), respectively.

In this case for the purpose of the sample size calculation in each group the formula given in: *Chow S, Shao J, Wang H. Sample Size Calculations in Clinical Research. 2nd ed.: Chapman&Hall / CRC Biostatistics Series; 2008,* is employed:

$$n = (p_1 \times (1 - p_0) + p_0 \times (1 - p_0)) \times \left(\frac{z_{1-\alpha} + z_{1-\beta}}{p_1 - p_0 - \delta}\right)^2$$

where

n is the size of a group;

z is the value of the normal distribution function at the given α and β levels;

δ is the superiority margin – 5%;

p_1 is the expected percentage in the test drug group (at any dosage) – 45%;

p_0 is the expected percentage in the placebo group – 5%.

By inserting the above data in the formula a minimum of patients in the placebo group without consideration of their withdrawal rate is calculated: 24 completed cases which corresponds to 26 randomized and 30 screened patients.

Thus, the total number of patients to be enrolled in the study is:

1. Placebo, 1.5 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases;
2. Placebo, 2.4 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases;
3. Seroguard, 1.5 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases;
4. Seroguard, 2.4 mL/kg group – up to 30 screened patients which corresponds to 26 randomizations and 24 completed cases.

Thus, 120 female patients are to be screened and at least 104 are to be randomized.

6. MISSING DATA SUBSTITUTION

Substitution of missing data will be performed only in the adverse event (AE) analysis.

In order to determine whether a certain AE is a study event (TESS – Treatment Emergency Sign and Symptom) missing dates of AE starting will be substituted by using the following algorithm:

AEs with a missing starting date will included in the analysis.

If an AE starting date is incomplete the following rules should be applied:

Day	Month	Year	AE is included in the analysis if
Missing	Present	Present	the month and year is ≥ the date of the first drug dose administration (month and year).
Missing	Missing	Present	the year is ≥ the year of the first drug dose administration
Present	Missing	Missing	The worst variant. Included
Present	Present	Missing	The worst variant. Included
Present	Missing	Present	the year is ≥ the year of the first drug dose administration
Missing	Present	Missing	the month is ≥ the month of the first drug dose administration (it is assumed that the year is 2017).

If the relationship with the drug is missing the given AE is classified as "related".

7. ANALYSIS POPULATIONS

A patient's classification into a particular analysis population will be approved by the study Sponsor prior to the statistical analysis.

7.1 EFFICACY ANALYSIS SET

7.1.1 Intent-to-treat (ITT)

The ITT set also known as the full analysis set includes all randomized patients exposed to the drug regardless of their compliance with the protocol throughout the study. This is the main analysis set and it will be used for evaluation of all planned parameters.

A patient's classification into the ITT population will be made prior to the analysis and is a subject to the Sponsor approval.

7.1.2 Per-protocol (PP)

In addition to analysis as per ITT all planned parameters will be also analyzed with the use of the patients data selected by the principle of a patient's compliance with the protocol (PP). The given population won't be analyzed, if it is more than 90% and less than 50% of the ITT population. A patient's data are to be excluded from the PP data set in the following cases:

- the inclusion and non-inclusion criteria are significantly violated;
- forbidden concomitant therapy is used;
- any other major violation of the protocol considered as significantly violating the primary efficacy evaluation in the given study subject.

A patient's classification into the PP population will be made prior to the analysis and is a subject to the Sponsor approval.

7.2 SAFETY POPULATION

The data set for the safety evaluation analysis is identical to the ITT data set. But, in contrast to the intent-to-treat population, all subjects data are analyzed depending on the actual treatment received (if it different from the one that was assigned via randomization). All safety analyses will be based on the safety analysis data set.

8. PATIENT POPULATION

The ITT population is considered the primary analysis population. An additional analysis of the primary efficacy endpoint will also be performed in the PP population to confirm the results obtained.

The groups of placebo at different dosages are merged into one to be compared with the groups of Seroguard 1.5 mL/kg and 2.4 mL/kg.

8.1 PATIENT DISPOSITION

The number of screened patients, that of randomized (included in the study) patients, number of subjects in the populations under analysis and of subjects who completed the study will be presented by treatment groups.

8.2 DEMOGRAPHIC AND OTHER BASELINE CHARACTERISTICS

Demographic characteristics will be described by treatment groups in the ITT population (primary population for the efficacy analysis):

- age,
- race,
- sex (female only),
- height,
- body weight,
- BMI,
- physical examination,
- vital signs,
- pregnancy test,
- prior therapy,
- previous diseases,
- concomitant diseases,
- underlying disease information,
- HIV, RW, HBV and HCV blood test results,
- gynecological examination and colposcopy,
- smear cytology and microscopy,
- hysterosalpingography,
- 12-lead ECG (abnormalities only).

The treatment groups will be compared by the following demographic and baseline characteristics:

- age,
- BMI,
- symptoms and parameters of the disease,

- physical examination data.

Treatment groups will be compared by using a mixed linear model where a study center is a random factor. The hypothesis that the three groups are equal is tested.

The intergroup comparison of physical examination data and ECG abnormalities will be carried out by using Fisher's exact test.

The treatment group comparison by parameters of the disease will be performed with the use of either Fisher's exact test (for nominal data) or a mixed linear model (ANOVA) (for continuous data). All tests are given in table templates.

Concurrent and previous diseases will be coded by the MedDRA dictionary and presented in groups by the System Organ Class (SOC) and Preferred Terms (PT).

The comparison of treatment groups by the below parameters won't be carried out:

- vital signs,
- pregnancy test,
- previous diseases,
- concomitant diseases,
- HIV, RW, HBV and HCV blood test results.

9. EFFICACY AND SAFETY VARIABLES

9.1 PRIMARY EFFICACY VARIABLE

Achieving clinical efficacy of the drug determined as:

- frequency of reduction of the adhesions number at the repeated MRI by 3 or more (in patients with 10 and less adhesions at the baseline) or by 30% and more (in patients with >10 adhesions at the baseline) in comparison to baseline MRI data.

9.2 SECONDARY EFFICACY VARIABLES

1. change in the thickness of pelvic adhesions by a repeated MRI in comparison to baseline MRI data;
2. frequency of detecting pelvic organs limited mobility post surgery (based on transvaginal ultrasound results) on Day 30±4 after surgery;
3. frequency of detection of hyperechoic linear lesions post surgery as based on transvaginal ultrasound results;
4. change in the frequency of detecting pelvic organs limited mobility in comparison to the baseline (absolute change and percentage from the baseline);
5. change in the frequency of hyperechoic linear lesion detection as based on results of a repeated transvaginal ultrasound in comparison to the baseline;
6. frequency of detecting no ultrasound signs of pelvic adhesive disease post surgery (defined as no limited mobility of pelvic organs and no hyperechoic linear lesions).

9.3 SAFETY VARIABLES

- Vital signs (body temperature, blood pressure, HR, RR)

- Laboratory test results:
  - blood biochemistry – total protein, glucose, ALT, AST, total bilirubin, alkaline phosphatase, amylase, creatinine;
  - complete blood count – RBC, WBC, platelet count, haemoglobin, hematocrit, WBC differential, ESR;
  - coagulogram – coagulation time, international normalized ratio (INR), thrombin time, activated partial thromboplastin time (APTT);
  - urinalysis – color, transparency, pH, specific gravity, protein, glucose, WBC, RBC, bacteria, casts, salts.
- ECG data – heart rate [HR]; PR, QRS, QT intervals and calculated QTc interval.
- Ultrasound data
- Incidence of adverse reactions
- Incidence of serious adverse reactions
- Incidence of unexpected adverse reactions
- Incidence of adverse and serious adverse reactions resulting in treatment discontinuation/withdrawal from the study

10. EFFICACY ANALYSIS

If treatment groups show a statistically significant difference this issue will be discussed separately with the Sponsor. In such case it may be necessary to consider a possibility of building a logistic model and deriving required CI limits from it.

10.1 PRIMARY EFFICACY VARIABLE

The analysis is performed both in the ITT and PP populations.

Treatment success is defined as:

- *frequency of reduction of the adhesions number at the repeated MRI by 3 or more (in patients with 10 and less adhesions at the baseline) or by 30% and more (in patients with >10 adhesions at the baseline) in comparison to baseline MRI data.*

Null hypothesis (H0) is worded in the following way: the test drug (Seroguard at the dose of XX) is superior to the reference drug (placebo) by the primary endpoint.

The hypothesis testing is:

$$\text{Null hypothesis } H_0\colon\ p_T - p_R \leq d$$

$$\text{Alternative hypothesis } H_1\colon\ p_T - p_R > d$$

where $p_T$is the treatment success ratio in the group of the test drug Seroguard at a certain dose (T, test);

p_R is the treatment success ratio in the group of the reference drug – placebo (R, reference);

d is the superiority margin in the test and reference drug groups. d margin is 5.0%.

To test the null hypothesis a one-tailed 95% confidence interval (CI) for the ratio difference will be calculated by the method suggested in **Newcombes Hybrid Score**

interval 1998.[1]

It is assumed that if the lower boundary of the *one-tailed* 95% CI is > d (5.0%), then the null hypothesis is rejected and an alternative hypothesis is accepted: "the test drug (Seroguard at the dose of XX) is not superior to the reference drug (placebo) by the primary endpoint".

10.2 SECONDARY EFFICACY VARIABLES

The analysis is performed only in the ITT population.

A point of "last observation" will be additionally determined for secondary efficacy variables. It is the last measurement of the parameter except the baseline (Visit 0).

The number of hyperechoic linear lesions post surgery is presented in the similar way as for the primary efficacy variable but a non-parametric Mann-Whitney test for the intergroup comparison will be calculated additionally.

Thickness of adhesions, their extent, limited mobility of pelvic organs and absence of ultrasound signs of pelvic adhesive disease will be described as nominal data. Intergroup comparisons at visits will be performed by means of the Fisher's exact test (in comparison with the placebo group). Tables will show a change in frequencies from the baseline (screening). The significance of intra-group changes will be tested by means of the symmetry test (Bowker test).

Severity of adhesions (PAI index) will be described by treatment groups and visits as a continuous value. Visit 0 (screening) is taken as the baseline. A change from the baseline also will be presented in a table. The intergroup comparison will be performed by means of a linear mixed model where a study centre is a random factor. A baseline is to be included in the model for "change in the adhesion thickness" variable (adhesion thickness at the baseline). "Seroguard, 1.5 mL/kg" and "Seroguard. 2.4 mL/kg" treatment groups will be compared to the placebo group. A Mann-Whitney test will be calculated to confirm the intergroup comparisons.

Adjustments for multiple comparison won't be provided.

11. SAFETY ANALYSIS

Safety analysis is performed in the safety population.

A point of "last observation" will be additionally determined for safety parameters. It is the last measurement of a parameter, including the one at the early termination visit, except the baseline (Visit 0).

Evaluated parameters:

- Incidence of adverse events and/or serious adverse events in the treatment groups;
- Complete blood count;
- Blood biochemistry;
- Urinalysis;
- Coagulogram;
- Concomitant therapy;
- Vital signs (body weight, blood pressure, heart rate, RR, and body temperature);
- Pregnancy test;

[11] Lower boundary

- 12-lead ECG;
- Physical examination parameters;
- Abdominal ultrasound;
- Postoperative wound assessment (local status).

Adverse event is any untoward symptom or condition that developed after administration of a study drug even if it is not considered as having a causal relationship with this treatment. A notion of the study drug includes both the investigational product and the reference drug.

A serious adverse event is any untoward symptom or pathological condition that:

1. results in death;
2. is life-threatening;
3. requires hospitalization or prolongation of existing hospitalization;
4. results in persistent or significant disability and/or incapacity;
5. results in a congenital anomaly or birth defect;
6. is considered to be an important medical event.

The following cases of hospitalization are not considered as serious adverse events:

- routine treatment or monitoring of the study disease if it is not related with any deterioration in the patient's condition;
- pre-planned treatment for a concurrent condition that has been diagnosed before the study initiation, is not related to the study disease, and is not worsening;
- hospitalization for general health problems not related with any deterioration in the patient's condition.

11.1 ASSESSMENT OF ADVERSE EVENTS AND SERIOUS ADVERSE EVENTS

All adverse events (AEs) documented in the Case Report Forms (CRF) will be divided into TESS (events emerging during the trial, i.e. after the start of treatment) and non-TESS (see Section 6).

All adverse events will be coded by the MedDRA dictionary.

The number and percentage of patients with TESS AEs in each treatment group will be presented in tables by the system organ class and preferred term, casual relation to the study drug and degree of severity.

Treatment arms will be compared by TESS AE rates in the "system of organs" groups.

The methodology of comparison is described in:

- Helmut Strasser & Christian Weber (1999). On the asymptotic theory of permutation statistics. **Mathematical Methods of Statistics** *8*, 220-250.
- Torsten Hothorn, Kurt Hornik, Mark A. van de Wiel & Achim Zeileis (2006). A Lego System for Conditional Inference. **The American Statistician**, *60*(3), 257-263.
- Torsten Hothorn, Kurt Hornik, Mark A. van de Wiel & Achim Zeileis (2008). Implementing a class of permutation tests: The coin package, **Journal of Statistical Software**, *28*(8), 1-23. http://www.jstatsoft.org/v28/i08

One patient can have several MedDRA SOC (System Organ Class) terms. The number of patient's SOC terms will be counted and recorded in the matrix. If a patient has no SOC term, it is scored as "0".

A patient's record will be presented like the following:

Patient's ID	Treatment group	SOC_2	SOC_3	SOC_4	SOC_5	SOC_6
XXXXXXX	xxxxxxxxxxx	xx (events)	xx (events)	xx (events)	xx (events)	xx (events)

A test for independence of two multivariate data sets is a kind of Monte Carlo simulations. The resulting p-value allows to evaluate the difference or similarity of two groups by an aggregate parameter set (SOC terms) rather than by each parameter taken separately.

All AEs and SAEs recorded in CFRs (TESS and non-TESS) will be presented in a list.

11.2 LABORATORY DATA EVALUATION

Parameters will be described as discrete variables by study visits (days). The comparison of treatment groups by laboratory test parameters is not planned.

The following information will be provided additionally:

1) tabulated integrated listing from the database;

2) tabulated integrated listing representing only laboratory test abnormalities;

3) separate tables of laboratory data with an analysis of parameters as quantitative variables (mean, standard deviation and median).

If repeated laboratory tests (re-tests) are performed after examination at a visit, the result of the given re-test (if not omitted) will be included in the analysis instead of the one obtained at the visit. If several repeated laboratory tests are performed the last available result will be included in the analysis.

When absolute values of the parameter are analyzed, such values like "<XX[1] " or " >XX" (less and more than XX) will be regarded as "XX", and "NOT FOUND" – as "0".

The treatment groups will be compared by the number of laboratory test abnormalities (separately for complete blood count, blood biochemistry, etc.) by means of the Cochran-Mantel-Haenszel test (for flags of L/N/H deviations with control by the parameter).

11.3 CONCOMITANT THERAPY

Concomitant therapy will be coded and presented in groups by the ATC code. The therapy will be represented in the table by two code levels: level 3 and 5 (three and five digits of the code). The comparison of groups by this parameter is not provided.

11.4 ABDOMINAL ULTRASOUND

Abnormalities found at an abdominal ultrasound examination will be presented by means of descriptive statistics (as absolute and relative frequencies) by study visits and treatment groups. Treatment groups will be compared with the use of the Fisher's exact test (with no regard of abnormalities as clinically significant / insignificant).

11.5 12-LEAD ECG

Abnormalities in ECG parameters will be presented by study visits by means of descriptive statistics (as absolute and relative frequencies). Treatment groups will be

[1] XX - a numeric value

compared with the use of the Fisher's exact test (with no regard of abnormalities as clinically significant / insignificant).

ECG parameters will be also presented by means of descriptive statistics (continuous data). A change from the baseline (Visit 0) will be calculated for each parameter. Treatment groups won't be compared by values determined at the visits or by parameter changes.

11.6 VITAL SIGNS ASSESSMENT

Vital signs will be presented by means of descriptive statistics. A change from the baseline will be calculated for each parameter. Treatment groups won't be compared by values determined at visits or by parameter changes.

11.7 PHYSICAL EXAMINATION

Physical examination results will be presented as nominal values by means of absolute and relative frequencies in tables of changes by the study time points and treatment groups. Intergroup comparisons won't be provided.

11.8 POSTOPERATIVE WOUND ASSESSMENT

Results of the postoperative wound examination will be presented as nominal values by means of absolute and relative frequencies in tables of changes by the study time points and treatment groups. Intergroup comparisons won't be provided.

12. INTERIM ANALYSIS

An interim analysis is not provided.

13. GENERAL PROVISIONS

Visit 0 (screening) is taken as the baseline.

Unless otherwise specified all statistical tests are bilateral with 5% alpha level. Unless otherwise specified all confidence intervals (CI) are two-sided 95% ones.

Unless otherwise specified continuous data are presented by a number of observations, arithmetic mean with the standard deviation, 95 % CI, median and range. The precision is one digit to the right of the decimal point.

Unless otherwise specified nominal values are described by absolute and relative frequencies. A relative frequency is calculated on the basis of the number of patients in the population under analysis rather than the number of patients at a visit (time point).

Different time periods are calculated either on the basis of physical sense or as on the date of signing the informed consent (for age, disease duration, etc).

14. TABLE TEMPLATES[1]

Table 14.1 Patient disposition

	Seroguard, 1.5 mL/kg	Seroguard, 2.4 mL/kg	Placebo
Number of subjects enrolled	xx (100.0%)	xx (100.0%)	xx (100.0%)
Safety population	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
PP population	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
ITT population	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Study completion			
Study was completed as per protocol	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Study was not completed	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Adverse event	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Death	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No contact with the patient	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
…			

Table 14.2 Reasons of patients exclusion from the PP population[2]

	Seroguard, 1.5 mL/kg	Seroguard, 2.4 mL/kg	Placebo
Violation of the inclusion/non-inclusion criteria	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Patient's noncompliance[3]	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
…			

Table 14.3 Reasons of patients exclusion from the ITT population

Same as in Table 14.2

14.1 DEMOGRAPHIC AND OTHER BASELINE CHARACTERISTICS

Table 14.4 Demographic and Other Baseline Characteristics. Screening. ITT population. N = XX

Parameter	Seroguard, 1.5 mL/kg, N=XX	Seroguard, 2.4 mL/kg, N=XX	Placebo N = xx	p-value
Age (years)				0.xxx[4]
N	xx	xx	xx	
Mean (SD)[5]	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)	
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]	
Median	xx.x	xx.x	xx.x	
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
p normal distribution	0.xxx	0.xxx	0.xxx	
Sex				---
Female	xx (100.0%)	xx (100.0%)	xx (100.0%)	
Race				---
Caucasian	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Other	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Height (cm)				---
N	xx	xx	xx	
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)	
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]	
Median	xx.x	xx.x	xx.x	
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
p normal distribution	0.xxx	0.xxx	0.xxx	
Weight (kg)				---
N	xx	xx	xx	
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)	
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]	
Median	xx.x	xx.x	xx.x	
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	

[1] Tables in the report can differ from the templates if it does not result in a loss of meaning or required information.
[2] One patient can have several protocol violations.
[3] If there is such a parameter
[4] ANOVA (mixed model). H_0: $\mu_1 = \mu_2 = \mu_3$
[5] Standard deviation

Parameter	Seroguard, 1.5 mL/kg, N=XX	Seroguard, 2.4 mL/kg, N=XX	Placebo N = xx	p-value
p normal distribution	0.xxx	0.xxx	0.xxx	
BMI (kg/m²)				**0.xxx**[1]
N	xx	xx	xx	
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)	
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]	
Median	xx.x	xx.x	xx.x	
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
p normal distribution	0.xxx	0.xxx	0.xxx	

Table 14.5 Data on disease. Screening. ITT population. N = xx

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx	p-value
Time since diagnosis (months)				**0.xxx**[2]
N	xx	xx	xx	
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)	
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]	
Median	xx.x	xx.x	xx.x	
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
p normal distribution	0.xxx	0.xxx	0.xxx	
Gynecological history				
Age at menarche (years)				**0.xxx**[3]
N	xx	xx	xx	
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)	
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]	
Median	xx.x	xx.x	xx.x	
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
p normal distribution	0.xxx	0.xxx	0.xxx	
Character of menstruation				**0.xxx**[4]
Normal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Abnormal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Time since last menstruation (days)				**0.xxx**[5]
N	xx	xx	xx	
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)	
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]	
Median	xx.x	xx.x	xx.x	
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
p normal distribution	0.xxx	0.xxx	0.xxx	
Previous pregnancies				**0.xxx**[6]
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
No	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Yes	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Number of pregnancies				**0.xxx**[7]
N	xx	xx	xx	
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)	
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]	
Median	xx.x	xx.x	xx.x	
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
p normal distribution	0.xxx	0.xxx	0.xxx	
Pregnancies that resulted in birth (% of the total number)				**0.xxx**[8]
N	xx	xx	xx	
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)	
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]	
Median	xx.x	xx.x	xx.x	
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	

[1] ANOVA (mixed model). H_0: $\mu_1 = \mu_2 = \mu_3$
[2] ANOVA (mixed model). H_0: $\mu_1 = \mu_2 = \mu_3$
[3] ANOVA (mixed model). H_0: $\mu_1 = \mu_2 = \mu_3$
[4] Fisher's exact test
[5] ANOVA (mixed model). H_0: $\mu_1 = \mu_2 = \mu_3$
[6] Fisher's exact test
[7] ANOVA (mixed model). H_0: $\mu_1 = \mu_2 = \mu_3$
[8] ANOVA (mixed model). H_0: $\mu_1 = \mu_2 = \mu_3$

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx	p-value
p normal distribution	0.xxx	0.xxx	0.xxx	
Gestation course				0.xxx[1]
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Normal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Abnormal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Gynecological examination				
Mucous membrane, vagina and uterus color				---
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Color 1	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Color 2	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Type of vaginal discharge				---
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Type 1	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Type 2	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Cervix shape				0.xxx[2]
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Conical	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Cylindrical	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Deformed	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
External os shape				0.xxx[3]
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Round	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Split	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Abnormalities				0.xxx[4]
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
No	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Yes	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Scars	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Polyps	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Ectropion	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Other	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Colposcopy				0.xxx[5]
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Normal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Abnormal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically significant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically insignificant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Cervical cytology by Pap smears				0.xxx[6]
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Normal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Abnormal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically significant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically insignificant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Smear microscopy (culture test)				0.xxx[7]
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Normal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Abnormal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically significant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically insignificant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Hysterosalpingography				---
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Normal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Abnormal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically significant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically insignificant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	

[1] Fisher's exact test
[2] Fisher's exact test
[3] Fisher's exact test
[4] Fisher's exact test (yes, no, no data)
[5] Fisher's exact test (with no regard of data as clinically significant/insignificant)
[6] Fisher's exact test (with no regard of data as clinically significant/insignificant)
[7] Fisher's exact test (with no regard of data as clinically significant/insignificant)

Table 14.6 Previous diseases. ITT population. Screening. N = XX

System Organ Class Term Preferred Term	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Patients in total	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**
SOC term	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**
Preferred term 1	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Preferred term 2	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
…			

Table 14.7 Concurrent diseases. ITT population. Screening. N = XX

Same as in Table 14.6

Table 14.8 Prior therapy. Screening. ITT population. N = XX

Therapeutic subgroup Drug (ATC code)	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Therapeutic subgroup (level 3 ATC code)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Drug 1 (level 5 ATC code)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Drug 2 (level 5 ATC code)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
…			

Table 14.9 Physical examination. ITT population. Screening. N = xx

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx	p-value
General health				0.xxx[1]
Not assessed/ no data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Normal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Abnormal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically significant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Clinically insignificant	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Skin				
…				
Musculoskeletal system				
…				
Lymph nodes				
…				
Thyroid				
…				
Upper airways				
…				
Lungs				
…				
Cardiovascular system				
…				
Abdominal organs				
…				
Kidneys				
…				
Mental status				
…				

[1] Cochran-Mantel-Haenszel test (for flags of Normal/Abnormal/No data with control by the parameter)

Table 14.10 HIV, RW, HBV and HCV test results. ITT population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
HIV			
(-)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
(+)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
RW			
(-)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
(+)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
HBV			
(-)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
(+)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
HCV			
(-)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
(+)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)

Table 14.11 Pregnancy test. Screening. ITT population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Pregnancy test			
Negative	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Positive	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data/not performed	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)

Table 14.12 12-lead ECG Screening. ITT population. N = XX

Group	Result				p-value[1]
	Normal	Abnormal: Clinically insignificant	Abnormal: Clinically significant	No data	
12-lead ECG					0.xxx
Seroguard, 1.5 mL/kg	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Seroguard, 2.4 mL/kg	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Placebo	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	

Table 14.13 Vital signs. ITT population. Screening. N = XX

Group	Result				p-value[2]
	Normal	Abnormal: Clinically insignificant	Abnormal: Clinically significant	No data	
RR					0.xxx
Seroguard, 1.5 mL/kg	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Seroguard, 2.4 mL/kg	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Placebo	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
HR					
…					

Parameters: RR, HR, SBP, DBP, body temperature.

[1] Fisher's exact test (with no regard of data as clinically significant/insignificant)
[2] Fisher's exact test (with no regard of data as clinically significant/insignificant)

14.2 EFFICACY ANALYSIS

14.2.1 Primary efficacy variable

Table 14.14 Treatment success. Decrease in the number of adhesions. ITT population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Treatment success (reduction of the adhesions number by 3 or more...)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
$p_T - p_R$ 95% CI [xx.x; ---]	x.xx [xx.x; ---]	x.xx [xx.x; ---]	

Table 14.15 Treatment success. Decrease in the number of adhesions. PP population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Treatment success (reduction of the adhesions number by 3 or more...)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
$p_T - p_R$ 95% CI [xx.x; ---]	x.xx [xx.x; ---]	x.xx [xx.x; ---]	

14.2.2 Secondary efficacy variables

Table 14.16 Assessment of adhesion severity by PAI (Pelvic Adhesions Index) ITT population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Visit 0 (Screening). Baseline			
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[1] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	
Visit 3 (day 30±4). Observation			
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[2] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	
Change. Visit 3 (day 30±4). Observation			
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-value for change	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[3] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	
Early termination visit (last available observation)			
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[4] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	
Change. Early termination visit (last available observation)			

[1] ANOVA (mixed model) / Mann-Whitney test
[2] ANOVA (mixed model) / Mann-Whitney test
[3] ANOVA (mixed model) / Mann-Whitney test
[4] ANOVA (mixed model) / Mann-Whitney test

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-value for change	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[1] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	

Table 14.17 Number of hyperechoic linear lesions post surgery as based on transvaginal ultrasound results. ITT population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Visit 0 (Screening) Baseline			
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[2] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	
Visit 3 (day 30±4). Observation			
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[3] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	
Change. Visit 3 (day 30±4). Observation			
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-value for change	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[4] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	
Early termination visit (last available observation)			
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[5] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	
Change. Early termination visit (last available observation)			
N	xx	xx	xx
Mean (SD)	xx.x (xx.x)	xx.x (xx.x)	xx.x (xx.x)
95% CI	[xx.x; xx.x]	[xx.x; xx.x]	[xx.x; xx.x]
Median	xx.x	xx.x	xx.x
Min - Max	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
p normal distribution	0.xxx	0.xxx	0.xxx
p-value for change	0.xxx	0.xxx	0.xxx
p-ANOVA vs.[6] Placebo	0.xxx/0.xxx	0.xxx/0.xxx	

[1] ANOVA (mixed model) / Mann-Whitney test
[2] ANOVA (mixed model) / Mann-Whitney test
[3] ANOVA (mixed model) / Mann-Whitney test
[4] ANOVA (mixed model) / Mann-Whitney test
[5] ANOVA (mixed model) / Mann-Whitney test
[6] ANOVA (mixed model) / Mann-Whitney test

Table 14.18 Limited mobility of pelvic organs post surgery. ITT population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Visit 0 (Screening)			
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Not detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data[1]	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
p-value (Fisher's test) vs. Placebo	0.xxx	0.xxx	
Visit 3 (day 30±4). Observation			
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Not detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
p-value (Fisher's test) vs. Placebo	0.xxx	0.xxx	
Early termination visit (last available observation)			
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Not detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
p-value (Fisher's test) vs. Placebo	0.xxx	0.xxx	

Visit 0 (Screening)	Visit 3 (day 30±4). Observation									Total
	Seroguard, 1.5 mL/kg N = xx			Seroguard, 2.4 mL/kg N = xx			Placebo N = xx			
	Detected	Not detected	No data	Detected	Not detected	No data	Detected	Not detected	No data	
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
Not detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
No data[2]	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
Total	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**
p-Bowker's	0.xxx			0.xxx			0.xxx			

Visit 0 (Screening)	Early termination visit (last available observation)									Total
	Seroguard, 1.5 mL/kg N = xx			Seroguard, 2.4 mL/kg N = xx			Placebo N = xx			
	Detected	Not detected	No data	Detected	Not detected	No data	Detected	Not detected	No data	
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
Not detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
No data[3]	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
Total	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**
p-Bowker's	0.xxx			0.xxx			0.xxx			

[1] If the data set is complete this category should be omitted
[2] If the data set is complete this category should be omitted
[3] If the data set is complete this category should be omitted

Table 14.19 Absence of pelvic adhesive disease signs. ITT population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Visit 0 (Screening)			
None	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data[1]	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
p-value (Fisher's test) vs. Placebo	0.xxx	0.xxx	
Visit 3 (day 30±4). Observation			
None	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
p-value (Fisher's test) vs. Placebo	0.xxx	0.xxx	
Early termination visit (last available observation)			
None	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
p-value (Fisher's test) vs. Placebo	0.xxx	0.xxx	

Visit 0 (Screening)	Visit 3 (day 30±4). Observation									Total
	Seroguard, 1.5 mL/kg N = xx			Seroguard, 2.4 mL/kg N = xx			Placebo N = xx			
	None	Detected	No data	None	Detected	No data	None	Detected	No data	
None	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
No data[2]	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
Total	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**
p-Bowker's	0.xxx			0.xxx			0.xxx			

Visit 0 (Screening)	Early termination visit (last available observation)									Total
	Seroguard, 1.5 mL/kg N = xx			Seroguard, 2.4 mL/kg N = xx			Placebo N = xx			
	None	Detected	No data	None	Detected	No data	None	Detected	No data	
None	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
Detected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
No data[3]	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
Total	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**
p-Bowker's	0.xxx			0.xxx			0.xxx			

[1] If the data set is complete this category should be omitted
[2] If the data set is complete this category should be omitted
[3] If the data set is complete this category should be omitted

Table 14.20 Thickness of adhesions. ITT population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Visit 0 (Screening)			
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
0*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
1*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
2*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
3*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
p-value (Fisher's test) vs. Placebo	0.xxx	0.xxx	
Visit 3 (day 30±4). Observation			
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
0*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
1*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
2*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
3*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
p-value (Fisher's test) vs. Placebo	0.xxx	0.xxx	
Early termination visit (last available observation)			
No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
0*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
1*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
2*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
3*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
p-value (Fisher's test) vs. Placebo	0.xxx	0.xxx	

***0 – none; 1 – thin; 2 – marked; 3– marked with an impaired passage through organs involved.**

Group	Visit 0 (Screening)	Visit 3 (day 30±4) No data	0*	1*	2*	3*	Total
Seroguard, 1.5 mL/kg	No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
	0*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
	1*	xx (xx.x%)	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%)	**xx (xx.x%)**
	3*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
	Total	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**
	p-value[1]	0.xxx					
				Last observation/study completion date			
	Visit 0 (Screening)	**No data**	**0***	**1***	**2***	**3***	**Total**
	No data	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
	0*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
	1*	xx (xx.x%)	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%)	**xx (xx.x%)**
	3*	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	**xx (xx.x%)**
	Total	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**
	p-value[1]	0.xxx					

[1] p-Bowker

Group	Visit 0 (Screening)	No data	Visit 3 (day 30±4) 0*	1*	2*	3*	Total
Seroguard, 2.4 mL/kg							
…							
Placebo							
…							

Table 14.21 Extent of the adhesion process in the pelvic cavity. ITT population. N = XX

Same as in Table 14.20

*0 – none; 1 – one region (right lateral space, left lateral space, Douglas pouch or vesicouterine pouch); 2 – two regions; 3 – subtotal pelvic adhesions (three regions); 4 – total pelvic adhesions.

14.3 SAFETY ANALYSIS

Table 14.22 12-lead ECG during the study. Safety population. N = XX

Group	Visit	Result Normal	Abnormal Clinically insignificant	Abnormal Clinically significant	No data	p-value[2]
12-lead ECG						
Seroguard, 1.5 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Seroguard, 2.4 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Placebo	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Seroguard, 1.5 mL/kg	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Seroguard, 2.4 mL/kg	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Placebo	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Seroguard, 1.5 mL/kg	Visit 3 (day 30±4)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Seroguard, 2.4 mL/kg	Visit 3 (day 30±4)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Placebo	Visit 3 (day 30±4)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Seroguard, 1.5 mL/kg	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Seroguard, 2.4 mL/kg	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Placebo	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
…						

[1] p-Bowker
[2] Fisher's exact test (with no regard of data as clinically significant/insignificant)

Table 14.23 12-lead ECG during the study. Absolute values. Safety population. N = XX

Group	Visit	Result							Change						p-value	
		N	Mean	SD	Median	Min.	Max.	Norm.	N	Mean	SD	Median	Min.	Max.	Norm.	Change
HR (beats per minute)																
Seroguard, 1.5mL/kg	Visit 0 (Screening)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx								
Seroguard, 2.4mL/kg	Visit 0 (Screening)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx								
Placebo	Visit 0 (Screening)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx								
Seroguard, 1.5mL/kg	Visit 2 (day 6±1)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Seroguard, 2.4mL/kg	Visit 2 (day 6±1)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Placebo	Visit 2 (day 6±1)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
…																
PR (ms)																
…																

Parameters: HR, PR, QRS, QT, QTc

Table 14.24 Abdominal ultrasound during the study. Safety population. N = XX

Group	Visit	Result				p-value[1]
		Normal	Abnormal		No data	
			Clinically insignificant	Clinically significant		
Abdominal ultrasound						
Seroguard, 1.5 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Seroguard, 2.4 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Placebo	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Seroguard, 1.5 mL/kg	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Seroguard, 2.4 mL/kg	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Placebo	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Seroguard, 1.5 mL/kg	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Seroguard, 2.4 mL/kg	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
Placebo	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	
…						

[1] Fisher's exact test (with no regard of data as clinically significant/insignificant)

Table 14.25 Physical examination. Safety population. N = xx

Group	Visit	Parameter	Result				
				Abnormal finding			
			No data	Clinically insignificant	Clinically significant	Normal	Not assessed/ no data
Seroguard, 1.5 mL/kg	Visit 1. Surgery Day 0	General health	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Skin	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Musculoskeletal system	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Lymph nodes	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Thyroid	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Upper airways	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Lungs	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Cardiovascular system	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Abdominal organs	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Kidneys	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Mental status	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg		General health	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Skin	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Musculoskeletal system	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Lymph nodes	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Thyroid	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Upper airways	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Lungs	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Cardiovascular system	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Abdominal organs	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Kidneys	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Mental status	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo		General health	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Skin	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Musculoskeletal system	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Lymph nodes	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Thyroid	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Upper airways	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Lungs	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Cardiovascular system	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Abdominal organs	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Kidneys	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Mental status	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
...							

Table 14.26 Local status assessment. Safety population. N = XX

Group	Visit	Parameter	Result		
			No data	No	Yes
Seroguard, 1.5 mL/kg	Visit 2 (day 6±1)	Tenderness on palpation	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Hyperemia	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Oedema	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Exudate	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg		Tenderness on palpation	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Hyperemia	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Oedema	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Exudate	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo		Tenderness on palpation	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Hyperemia	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Oedema	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
		Exudate	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
…					

Table 14.27 Pregnancy test. Safety population. N = XX

Group	Visit	Result		
		Negative	Positive	Not assessed/ no data
Seroguard, 1.5 mL/kg	Visit 0. Screening	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 0. Screening	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 0. Screening	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 1.5 mL/kg	Visit 3. Day 30±4	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 3. Day 30±4	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 3. Day 30±4	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 1.5 mL/kg	Last observation/ Study completion	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Last observation/ Study completion	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Last observation/ Study completion	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)

Table 14.28 Concomitant therapy during the study. Safety population. N = XX

Therapeutic subgroup Drug (ATC code)	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = xx
Therapeutic subgroup (level 3 ATC code)	**xx (xx.x%)**	**xx (xx.x%)**	**xx (xx.x%)**
Drug 1 (level 5 ATC code)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Drug 2 (level 5 ATC code)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
…			

Table 14.29 Vital signs. Safety population. N = XX

Group	Visit	Result							Change						p-value	
		N	Mean	SD	Median	Min.	Max.	Norm.	N	Mean	SD	Median	Min.	Max.	Norm.	Change
HR (beats per minute)																
Seroguard, 1.5 mL/kg	Visit 0 (Screening)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx								
Seroguard, 2.4 mL/kg	Visit 0 (Screening)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx								
Placebo	Visit 0 (Screening)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx								
Seroguard, 1.5 mL/kg	Visit 1 (day 0)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Seroguard, 2.4 mL/kg	Visit 1 (day 0)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Placebo	Visit 1 (day 0)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
…																
RR (per minute)																
…																

Parameters: RR, HR, SBP, DBP, body temperature.

Table 14.30 Laboratory data evaluation. Coagulogram. Safety population. N = XX

Group	Visit	Result					
		Lower than normal		Normal	Higher than normal		No data
		Clinically insignificant	Clinically significant		Clinically insignificant	Clinically significant	
Clotting time							
Seroguard, 1.5 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 1.5 mL/kg	Visit 3 (day 30±4)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 3 (day 30±4)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 3 (day 30±4)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 1.5 mL/kg	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Thrombin time							
…							
INR							
…							
APTT							
…							

Table 14.31 Laboratory data evaluation. Coagulogram. Abnormal findings only. Safety population. N = XX

Group	Visit	Result			
		Lower than normal		Higher than normal	
		Clinically insignificant	Clinically significant	Clinically insignificant	Clinically significant
Clotting time					
Seroguard, 1.5 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)

Group	Visit	Result			
		Lower than normal		Higher than normal	
		Clinically insignificant	Clinically significant	Clinically insignificant	Clinically significant
Thrombin time					
…					
INR					
…					
APTT					
…					

Table 14.32 Laboratory data evaluation. Complete blood count. Safety population. N = XX

Group	Visit	Result					
		Lower than normal			Higher than normal		No data
		Clinically insignificant	Clinically significant	Normal	Clinically insignificant	Clinically significant	
Haemoglobin							
Seroguard, 1.5 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 1.5 mL/kg	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 1.5 mL/kg	Visit 3 (day 30±4)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 3 (day 30±4)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 3 (day 30±4)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 1.5 mL/kg	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Last observation/study completion date	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Hematocrit							
…							
RBC							
…							
WBC							
…							
Platelet count							

p-value = 0.xxx[1]

[1] Cochran-Mantel-Haenszel test (for flags of L/N/H deviations with control by the parameter)

Table 14.33 Laboratory data evaluation. Complete blood count. Abnormal findings only. Safety population. N = XX

Group	Visit	Result			
		Lower than normal		Higher than normal	
		Clinically insignificant	Clinically significant	Clinically insignificant	Clinically significant
Haemoglobin					
Seroguard, 1.5 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 0 (Screening)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 1.5 mL/kg	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Seroguard, 2.4 mL/kg	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Placebo	Visit 2 (day 6±1)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Hematocrit					
…					
RBC					
…					
WBC					
…					
Platelet count					

Table 14.34 Laboratory data evaluation. Blood biochemistry. Safety population. N = XX

Same as in Tables 14.30, 14.32

Table 14.35 Laboratory data evaluation. Blood biochemistry. Abnormal findings only. Safety population. N = XX

Same as in Tables 14.31,14.33

Table 14.36 Laboratory data evaluation. Urinalysis. Safety population. N = XX

Same as in Tables 14.30, 14.32

Table 14.37 Laboratory data evaluation. Urinalysis. Abnormal findings only. Safety population. N = XX

Same as in Tables 14.31,14.33

Table 14.38 Brief summary of adverse events. Safety population. N = XX

Parameter	Seroguard, 1.5 mL/kg N = xx	Seroguard, 2.4 mL/kg N = xx	Placebo N = XX	p-value[1]
Patients with AEs[2]	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Patients with SAEs[3]	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Patients with AE with fatal outcome	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Patients with mild to moderate AEs	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Patients with severe AEs	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Patients with AEs related or possibly related to the study drug (certain, probable, possible, unlikely, conditional or unclassifiable relation)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx
Patients with AEs that resulted in drug withdrawal	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	0.xxx

Table 14.39 Adverse Events. Safety population. N = XX

MEDDRA System Organ Class term MEDDRA Preferred term	Seroguard, 1.5 mL/kg *n (%)*		Seroguard, 2.4 mL/kg *n (%)*		Placebo *n (%)*	
	X (%)	*Y*	*X (%)*	*Y*	*X (%)*	*Y*
Patients with AEs	xx (xx.x)		xx (xx.x)		xx (xx.x)	
SOC term	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
Preferred term 1	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
Preferred term 2	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
…						

X = number of patients who experienced at least one event of the given group.
% = percentage of patients who experienced at least one event of the given group.
Y = total number of events
p-value = 0.xxx

[1] Fisher's exact test
[2] AEs and SAEs
[3] SAEs only

Table 14.40 Serious adverse events. Safety population. N = XX

MEDDRA System Organ Class term MEDDRA Preferred term	Seroguard, 1.5 mL/kg *n (%)* *X (%)*	*Y*	Seroguard, 2.4 mL/kg *n (%)* *X (%)*	*Y*	Placebo *n (%)* *X (%)*	*Y*
Patients with SAEs	xx (xx.x)		xx (xx.x)		xx (xx.x)	
SOC term	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
Preferred term 1	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
Preferred term 2	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
…						

X = number of patients who experienced at least one event of the given group.
% = percentage of patients who experienced at least one event of the given group.
Y = total number of events

Table 14.41 Adverse events by the degree of severity. Safety population. N = XX

MEDDRA System Organ Class term MEDDRA Preferred term	Degree of severity	Seroguard, 1.5 mL/kg *n (%)* *X (%)*	*Y*	Seroguard, 2.4 mL/kg *n (%)* *X (%)*	*Y*	Placebo *n (%)* *X (%)*	*Y*
Patients with AEs							
	Mild	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Moderate	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Severe	xx (xx.x)		xx (xx.x)		xx (xx.x)	
SOC term							
Preferred term 1	Mild	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
Preferred term 2	Mild	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
…	Moderate						

X = number of patients who experienced at least one event of the given group.
% = percentage of patients who experienced at least one event of the given group.
Y = total number of events

Table 14.42 Serious adverse events by the degree of severity. Safety population. N = XX

MEDDRA System Organ Class term MEDDRA Preferred term	Degree of severity	Seroguard, 1.5 mL/kg n (%) X (%)	Y	Seroguard, 2.4 mL/kg n (%) X (%)	Y	Placebo n (%) X (%)	Y
Patients with SAEs							
	Mild	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Moderate	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Severe	xx (xx.x)		xx (xx.x)		xx (xx.x)	
SOC term							
Preferred term 1	Mild	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
Preferred term 2	Mild	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
…	Moderate						

X = number of patients who experienced at least one event of the given group.
% = percentage of patients who experienced at least one event of the given group. Y = total number of events

Table 14.43 Adverse events and their relation to the study drug. Safety population. N = XX

MEDDRA System Organ Class term MEDDRA Preferred term	Relation to the study drug (as assessed by the investigator)	Seroguard, 1.5 mL/kg n (%) X (%)	Y	Seroguard, 2.4 mL/kg n (%) X (%)	Y	Placebo n (%) X (%)	Y
Patients with AEs							
	Not related	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Certain	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Probable	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Possible	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Unlikely	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Conditional	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Unclassifiable	xx (xx.x)		xx (xx.x)		xx (xx.x)	
SOC term		**xx (xx.x)**	**xx**	**xx (xx.x)**	**xx**	**xx (xx.x)**	**xx**
Preferred term 1	Certain	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
Preferred term 2	Unlikely	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
…							

X = number of patients who experienced at least one event of the given group.
% = percentage of patients who experienced at least one event of the given group.
Y = total number of events

Table 14.44 Serious adverse events and their relation to the study drug. Safety population. N = XX

MEDDRA System Organ Class term MEDDRA Preferred term	Relation to the study drug (as assessed by the investigator)	Seroguard, 1.5 mL/kg n (%)		Seroguard, 2.4 mL/kg n (%)		Placebo n (%)	
		X (%)	Y	X (%)	Y	X (%)	Y
Patients with SAEs							
	Not related	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Certain	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Probable	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Possible	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Unlikely	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Conditional	xx (xx.x)		xx (xx.x)		xx (xx.x)	
	Unclassifiable	xx (xx.x)		xx (xx.x)		xx (xx.x)	
SOC term		**xx (xx.x)**	**xx**	**xx (xx.x)**	**xx**	**xx (xx.x)**	**xx**
Preferred term 1	Certain	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
Preferred term 2	Unlikely	xx (xx.x)	xx	xx (xx.x)	xx	xx (xx.x)	xx
…							

X = number of patients who experienced at least one event of the given group. % = percentage of patients who experienced at least one AE of the given group. Y = total number of events

Table 14.45 Laboratory data evaluation. Complete blood count. Absolute values. Safety population. N = XX

Group	Visit	Result							Change						p-value	
		N	Mean	SD	Median	Min.	Max.	Norm.	N	Mean	SD	Median	Min.	Max.	Norm.	Change
Haemoglobin (g/dL)																
Seroguard, 1.5 mL/kg	Visit 0 (Screening)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx								
Seroguard, 2.4 mL/kg	Visit 0 (Screening)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx								
Placebo	Visit 0 (Screening)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx								
Seroguard, 1.5 mL/kg	Visit 2 (day 6±1)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Seroguard, 2.4 mL/kg	Visit 2 (day 6±1)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Placebo	Visit 2 (day 6±1)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Seroguard, 1.5 mL/kg	Visit 3 (day 30±4)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Seroguard, 2.4 mL/kg	Visit 3 (day 30±4)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Placebo	Visit 3 (day 30±4)	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Seroguard, 1.5 mL/kg	Last observation /study completion date	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Seroguard, 2.4 mL/kg	Last observation /study completion date	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Placebo	Last observation /study completion date	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	xx	xx.x	xx.x	xx.x	xx.x	xx.x	0.xxx	0.xxx
Hematocrit (%)																
…																

Table 14.46 Laboratory data evaluation. Blood biochemistry.
Absolute values. Safety population. N = XX

Same as in Table 14.45

Table 14.47 Laboratory data evaluation. Urinalysis.
Absolute values. Safety population. N = XX

Same as in Table 14.45

Table 14.48 Laboratory data evaluation. Coagulogram.
Absolute values. Safety population. N = XX

Same as in Table 14.45

Listing. 1 Adverse Events. Listing

Centre-Patient	Sex	Age (years)	Treatment group	AE number	AE description	MEDDRA System Organ Class	Preferred Term	Low Level Term	AE starting date	AE resolution date	Relation to the study drug	Degree of severity	Actions taken due to AE	Was treatment for the AE assigned?	AE outcome	Is the AE serious?
xx-xxxx	XXXXXX	xx.x	XXXXXXX	1	xxxxxxxxxxx	xxxxxxxxxxx	xxxxxxxxxxx	xxxxxxxxxxx	xxxx-xx-xx	xxxx-xx-xx	xxxx	xxxx	xxxx	xxx	xxxxxx	xxxx
xx-xxxx	XXXXXX	xx.x	XXXXXXX	1	xxxxxxxxxxx	xxxxxxxxxxx	xxxxxxxxxxx	xxxxxxxxxxx	xxxx-xx-xx	xxxx-xx-xx	xxxx	xxxx	xxxx	xxx	xxxxxx	xxxx

Listing. 2 Laboratory data evaluation. Complete blood count. Listing

Centre-Patient	Sex	Age (years)	Visit	Treatment group	Test date	Parameter	Value	Measurement units	H/N/L/ND	Significance of the deviation
xx-xxxx	xxxxx	xx.x	xxxxxxxx	xxxxxxxxxx	xxxx-xx-xx	xx.x	g/dL	N	xx.x	Clinically insignificant
xx-xxxx	xxxxx	xx.x	xxxxxxxx	xxxxxxxxxx	xxxx-xx-xx	xx.x	g/dL	N	xx.x	Clinically significant

Listing. 3 Laboratory data evaluation. Blood biochemistry. Listing

Same as Listing 2

Listing. 4 Laboratory data evaluation. Urinalysis. Listing

Same as Listing 2