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Dossier zur Nutzenbewertung gemäß § 35a SGB V

Fruquintinib (FRUZAQLA®)

Takeda GmbH

Modul 4 A, Anhang 4-G

Behandlung von Patienten mit metastasierendem Kolorektalkarzinom (mCRC), die zuvor mit verfügbaren Standardtherapien, einschließlich Fluoropyrimidin-, Oxaliplatin- und Irinotecan-basierten Chemotherapien, Anti-VEGF-Arzneimitteln und Anti-EGFR- Arzneimitteln, behandelt wurden und bei denen die Erkrankung unter Behandlung mit Trifluridin-Tipiracil oder Regorafenib fortgeschritten ist, oder die diese Behandlung nicht vertragen

Zusatzanalysen

Stand: 03.06.2024

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4.2.6 Sicherheit

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
ECOG: 0

Statistics	Placebo + BSC N=102	Fruquintinib + BSC N=193
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.0 (97.0, 100.0)	82.7 (77.3, 88.1)
6 months	99.0 (97.0, 100.0)	81.8 (76.1, 87.4)
9 months	NE (NE, NE)	81.8 (76.1, 87.4)
12 months	NE (NE, NE)	76.3 (64.7, 87.9)
18 months	NE (NE, NE)	76.3 (64.7, 87.9)
Median Follow-up Time (months)	2.83	4.57

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
ECOG: 0

Statistics	Placebo + BSC N=102	Fruquintinib + BSC N=193
Number of Subjects with Events, n (%)	0	18 (9.3)
Number of Subjects Censored, n (%)	102 (100.0)	175 (90.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.4*, 8.4*	0.5, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.016

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
ECOG: 0

Statistics	Placebo + BSC N=102	Fruquintinib + BSC N=193
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.7 (91.5, 97.9)
6 months	100.0 (100.0, 100.0)	88.3 (82.5, 94.1)
9 months	NE (NE, NE)	86.3 (79.3, 93.2)
12 months	NE (NE, NE)	86.3 (79.3, 93.2)
18 months	NE (NE, NE)	43.1 (0.0, 100.0)
Median Follow-up Time (months)	2.83	4.67

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
ECOG: 0

Statistics	Placebo + BSC N=102	Fruquintinib + BSC N=193
Number of Subjects with Events, n (%)	0	17 (8.8)
Number of Subjects Censored, n (%)	102 (100.0)	176 (91.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 8.4*	0.5, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.016

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
ECOG: 0

Statistics	Placebo + BSC N=102	Fruquintinib + BSC N=193
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.7 (91.5, 97.9)
6 months	100.0 (100.0, 100.0)	88.3 (82.5, 94.1)
9 months	NE (NE, NE)	86.3 (79.3, 93.2)
12 months	NE (NE, NE)	86.3 (79.3, 93.2)
18 months	NE (NE, NE)	86.3 (79.3, 93.2)
Median Follow-up Time (months)	2.83	4.67

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Number of Subjects with Events, n (%)	33 (25.8)	62 (23.6)
Number of Subjects Censored, n (%)	95 (74.2)	201 (76.4)
Time to first TEAE (months)		
25% percentile (95% CI)	2.23 (1.38, NE)	4.27 (2.83, 12.22)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.723 (0.219)
95% CI		(0.471, 1.112)
Log-rank p-value		0.102

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Kaplan-Meier Estimates at % (95% CI)		
3 months	72.7 (64.5, 80.9)	79.6 (74.5, 84.7)
6 months	69.1 (58.6, 79.5)	71.5 (64.9, 78.2)
9 months	69.1 (58.6, 79.5)	71.5 (64.9, 78.2)
12 months	69.1 (58.6, 79.5)	65.6 (52.8, 78.3)
18 months	NE (NE, NE)	56.2 (36.0, 76.4)
Median Follow-up Time (months)	2.43	2.86

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Number of Subjects with Events, n (%)	21 (16.4)	20 (7.6)
Number of Subjects Censored, n (%)	107 (83.6)	243 (92.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.40, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.6*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.329 (0.320)
95% CI		(0.176, 0.616)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Kaplan-Meier Estimates at % (95% CI)		
3 months	81.9 (74.5, 89.3)	93.8 (90.7, 96.8)
6 months	77.8 (67.3, 88.3)	90.1 (85.5, 94.7)
9 months	77.8 (67.3, 88.3)	90.1 (85.5, 94.7)
12 months	77.8 (67.3, 88.3)	90.1 (85.5, 94.7)
18 months	NE (NE, NE)	77.2 (53.5, 100.0)
Median Follow-up Time (months)	2.58	3.25

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Number of Subjects with Events, n (%)	9 (7.0)	23 (8.7)
Number of Subjects Censored, n (%)	119 (93.0)	240 (91.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.058 (0.397)
95% CI		(0.486, 2.304)
Log-rank p-value		0.850

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Kaplan-Meier Estimates at % (95% CI)		
3 months	91.9 (86.8, 97.0)	91.2 (87.5, 94.8)
6 months	91.9 (86.8, 97.0)	89.9 (85.4, 94.3)
9 months	91.9 (86.8, 97.0)	89.9 (85.4, 94.3)
12 months	91.9 (86.8, 97.0)	82.4 (67.7, 97.0)
18 months	NE (NE, NE)	82.4 (67.7, 97.0)
Median Follow-up Time (months)	2.46	3.06

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Number of Subjects with Events, n (%)	3 (2.3)	30 (11.4)
Number of Subjects Censored, n (%)	125 (97.7)	233 (88.6)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		4.862 (0.607)
95% CI		(1.481, 15.961)
Log-rank p-value		0.004

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.3 (96.1, 100.0)	88.2 (84.2, 92.2)
6 months	93.9 (85.0, 100.0)	88.2 (84.2, 92.2)
9 months	93.9 (85.0, 100.0)	88.2 (84.2, 92.2)
12 months	93.9 (85.0, 100.0)	88.2 (84.2, 92.2)
18 months	NE (NE, NE)	88.2 (84.2, 92.2)
Median Follow-up Time (months)	2.56	2.86

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Number of Subjects with Events, n (%)	1 (0.8)	27 (10.3)
Number of Subjects Censored, n (%)	127 (99.2)	236 (89.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		13.540 (1.019)
95% CI		(1.838, 99.739)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.1 (97.5, 100.0)	89.4 (85.7, 93.2)
6 months	99.1 (97.5, 100.0)	89.4 (85.7, 93.2)
9 months	99.1 (97.5, 100.0)	89.4 (85.7, 93.2)
12 months	99.1 (97.5, 100.0)	89.4 (85.7, 93.2)
18 months	NE (NE, NE)	89.4 (85.7, 93.2)
Median Follow-up Time (months)	2.56	2.86

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Number of Subjects with Events, n (%)	1 (0.8)	13 (4.9)
Number of Subjects Censored, n (%)	127 (99.2)	250 (95.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		5.705 (1.041)
95% CI		(0.741, 43.908)
Log-rank p-value		0.059

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.2 (97.7, 100.0)	94.9 (92.1, 97.8)
6 months	99.2 (97.7, 100.0)	93.8 (90.3, 97.4)
9 months	99.2 (97.7, 100.0)	93.8 (90.3, 97.4)
12 months	99.2 (97.7, 100.0)	93.8 (90.3, 97.4)
18 months	NE (NE, NE)	93.8 (90.3, 97.4)
Median Follow-up Time (months)	2.58	3.06

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3E
Summary of Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
ECOG: 1

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Number of Subjects with Events, n (%)	0	12 (4.6)
Number of Subjects Censored, n (%)	128 (100.0)	251 (95.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.021

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
<= 18 months

Statistics	Placebo + BSC N=128	Fruquintinib + BSC N=263
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.3 (92.6, 98.0)
6 months	100.0 (100.0, 100.0)	94.2 (90.7, 97.7)
9 months	100.0 (100.0, 100.0)	94.2 (90.7, 97.7)
12 months	100.0 (100.0, 100.0)	94.2 (90.7, 97.7)
18 months	NE (NE, NE)	94.2 (90.7, 97.7)
Median Follow-up Time (months)	2.58	3.06

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Number of Subjects with Events, n (%)	3 (23.1)	5 (13.5)
Number of Subjects Censored, n (%)	10 (76.9)	32 (86.5)
Time to first TEAE (months)		
25% percentile (95% CI)	2.30 (1.94, NE)	NE (1.74, NE)
Median (95% CI)	4.14 (1.94, NE)	NE (4.57, NE)
75% percentile (95% CI)	4.14 (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Min, Max	1.3*, 4.1	1.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.349 (0.790)
95% CI		(0.074, 1.643)
Log-rank p-value		0.204

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Kaplan-Meier Estimates at % (95% CI)		
3 months	71.4 (38.0, 100.0)	89.1 (79.0, 99.2)
6 months	0.0 (NE, NE)	78.0 (55.7, 100.0)
9 months	0.0 (NE, NE)	78.0 (55.7, 100.0)
12 months	0.0 (NE, NE)	78.0 (55.7, 100.0)
18 months	0.0 (NE, NE)	78.0 (55.7, 100.0)
Median Follow-up Time (months)	1.94	2.83

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Number of Subjects with Events, n (%)	0	4 (10.8)
Number of Subjects Censored, n (%)	13 (100.0)	33 (89.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (4.57, NE)
Median (95% CI)	NE (NE, NE)	NE (4.57, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 5.6*	1.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.234

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	91.8 (82.9, 100.0)
6 months	NE (NE, NE)	80.3 (57.9, 100.0)
9 months	NE (NE, NE)	80.3 (57.9, 100.0)
12 months	NE (NE, NE)	80.3 (57.9, 100.0)
18 months	NE (NE, NE)	80.3 (57.9, 100.0)
Median Follow-up Time (months)	2.30	2.83

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Number of Subjects with Events, n (%)	0	3 (8.1)
Number of Subjects Censored, n (%)	13 (100.0)	34 (91.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 5.6*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.421

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	91.7 (82.8, 100.0)
6 months	NE (NE, NE)	91.7 (82.8, 100.0)
9 months	NE (NE, NE)	91.7 (82.8, 100.0)
12 months	NE (NE, NE)	91.7 (82.8, 100.0)
18 months	NE (NE, NE)	91.7 (82.8, 100.0)
Median Follow-up Time (months)	2.30	2.83

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Number of Subjects with Events, n (%)	0	3 (8.1)
Number of Subjects Censored, n (%)	13 (100.0)	34 (91.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 5.6*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.421

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	91.7 (82.8, 100.0)
6 months	NE (NE, NE)	91.7 (82.8, 100.0)
9 months	NE (NE, NE)	91.7 (82.8, 100.0)
12 months	NE (NE, NE)	91.7 (82.8, 100.0)
18 months	NE (NE, NE)	91.7 (82.8, 100.0)
Median Follow-up Time (months)	2.30	2.83

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Number of Subjects with Events, n (%)	0	1 (2.7)
Number of Subjects Censored, n (%)	13 (100.0)	36 (97.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 5.6*	1.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.540

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	97.3 (92.1, 100.0)
6 months	NE (NE, NE)	97.3 (92.1, 100.0)
9 months	NE (NE, NE)	97.3 (92.1, 100.0)
12 months	NE (NE, NE)	97.3 (92.1, 100.0)
18 months	NE (NE, NE)	97.3 (92.1, 100.0)
Median Follow-up Time (months)	2.30	2.83

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Number of Subjects with Events, n (%)	0	1 (2.7)
Number of Subjects Censored, n (%)	13 (100.0)	36 (97.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 5.6*	1.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.540

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
<= 18 months

Statistics	Placebo + BSC N=13	Fruquintinib + BSC N=37
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	97.3 (92.1, 100.0)
6 months	NE (NE, NE)	97.3 (92.1, 100.0)
9 months	NE (NE, NE)	97.3 (92.1, 100.0)
12 months	NE (NE, NE)	97.3 (92.1, 100.0)
18 months	NE (NE, NE)	97.3 (92.1, 100.0)
Median Follow-up Time (months)	2.30	2.83

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Number of Subjects with Events, n (%)	41 (18.9)	86 (20.5)
Number of Subjects Censored, n (%)	176 (81.1)	333 (79.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.76, NE)	11.04 (4.27, 16.07)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.1, 19.8*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.829 (0.195)
95% CI		(0.566, 1.215)
Log-rank p-value		0.348

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Kaplan-Meier Estimates at % (95% CI)		
3 months	80.8 (75.3, 86.2)	84.3 (80.7, 87.8)
6 months	77.2 (70.1, 84.4)	75.6 (70.7, 80.5)
9 months	77.2 (70.1, 84.4)	75.6 (70.7, 80.5)
12 months	77.2 (70.1, 84.4)	72.3 (64.4, 80.2)
18 months	NE (NE, NE)	50.3 (20.4, 80.3)
Median Follow-up Time (months)	2.83	3.65

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Number of Subjects with Events, n (%)	28 (12.9)	23 (5.5)
Number of Subjects Censored, n (%)	189 (87.1)	396 (94.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.75, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.6*, 19.8*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.271 (0.295)
95% CI		(0.152, 0.483)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Kaplan-Meier Estimates at % (95% CI)		
3 months	86.5 (81.6, 91.4)	96.4 (94.6, 98.3)
6 months	82.8 (75.8, 89.8)	92.7 (89.6, 95.9)
9 months	82.8 (75.8, 89.8)	92.7 (89.6, 95.9)
12 months	82.8 (75.8, 89.8)	92.7 (89.6, 95.9)
18 months	NE (NE, NE)	86.1 (73.3, 98.9)
Median Follow-up Time (months)	2.83	4.24

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Number of Subjects with Events, n (%)	9 (4.1)	35 (8.4)
Number of Subjects Censored, n (%)	208 (95.9)	384 (91.6)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (16.07, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.1, 19.8*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.608 (0.378)
95% CI		(0.766, 3.376)
Log-rank p-value		0.187

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.4 (92.5, 98.4)	92.9 (90.3, 95.4)
6 months	95.4 (92.5, 98.4)	90.5 (87.2, 93.8)
9 months	95.4 (92.5, 98.4)	90.5 (87.2, 93.8)
12 months	95.4 (92.5, 98.4)	86.6 (78.4, 94.7)
18 months	NE (NE, NE)	64.9 (27.7, 100.0)
Median Follow-up Time (months)	2.83	3.78

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Number of Subjects with Events, n (%)	4 (1.8)	64 (15.3)
Number of Subjects Censored, n (%)	213 (98.2)	355 (84.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 19.8*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		8.568 (0.518)
95% CI		(3.104, 23.648)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.6 (97.0, 100.0)	85.0 (81.6, 88.5)
6 months	96.2 (91.3, 100.0)	83.8 (80.0, 87.6)
9 months	96.2 (91.3, 100.0)	83.8 (80.0, 87.6)
12 months	96.2 (91.3, 100.0)	80.3 (72.7, 88.0)
18 months	NE (NE, NE)	80.3 (72.7, 88.0)
Median Follow-up Time (months)	2.83	3.61

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Number of Subjects with Events, n (%)	2 (0.9)	59 (14.1)
Number of Subjects Censored, n (%)	215 (99.1)	360 (85.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 19.8*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		16.210 (0.721)
95% CI		(3.944, 66.619)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.0 (97.7, 100.0)	86.0 (82.7, 89.4)
6 months	99.0 (97.7, 100.0)	85.5 (82.0, 89.0)
9 months	99.0 (97.7, 100.0)	85.5 (82.0, 89.0)
12 months	99.0 (97.7, 100.0)	82.1 (74.7, 89.5)
18 months	NE (NE, NE)	82.1 (74.7, 89.5)
Median Follow-up Time (months)	2.83	3.65

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Number of Subjects with Events, n (%)	1 (0.5)	30 (7.2)
Number of Subjects Censored, n (%)	216 (99.5)	389 (92.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	NE (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.2*, 13.0*	0.4, 19.8*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		11.224 (1.020)
95% CI		(1.520, 82.880)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.5 (98.6, 100.0)	94.7 (92.4, 96.9)
6 months	99.5 (98.6, 100.0)	90.5 (86.7, 94.2)
9 months	99.5 (98.6, 100.0)	89.3 (84.9, 93.6)
12 months	99.5 (98.6, 100.0)	89.3 (84.9, 93.6)
18 months	NE (NE, NE)	59.5 (11.8, 100.0)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3F
Summary of Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
> 18 months

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Number of Subjects with Events, n (%)	0	28 (6.7)
Number of Subjects Censored, n (%)	217 (100.0)	391 (93.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.4, 19.8*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Colon

Statistics	Placebo + BSC N=217	Fruquintinib + BSC N=419
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.9 (92.7, 97.1)
6 months	100.0 (100.0, 100.0)	90.7 (87.0, 94.4)
9 months	100.0 (100.0, 100.0)	89.5 (85.2, 93.9)
12 months	100.0 (100.0, 100.0)	89.5 (85.2, 93.9)
18 months	NE (NE, NE)	89.5 (85.2, 93.9)
Median Follow-up Time (months)	2.83	3.75

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Number of Subjects with Events, n (%)	32 (23.2)	55 (19.9)
Number of Subjects Censored, n (%)	106 (76.8)	221 (80.1)
Time to first TEAE (months)		
25% percentile (95% CI)	3.19 (2.23, NE)	11.04 (3.91, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Min, Max	0.4*, 6.8*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.641 (0.230)
95% CI		(0.408, 1.006)
Log-rank p-value		0.051

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Kaplan-Meier Estimates at % (95% CI)		
3 months	76.4 (68.9, 83.9)	84.9 (80.5, 89.2)
6 months	69.5 (58.0, 81.0)	76.1 (70.1, 82.2)
9 months	NE (NE, NE)	76.1 (70.1, 82.2)
12 months	NE (NE, NE)	68.5 (53.4, 83.7)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.45

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Number of Subjects with Events, n (%)	20 (14.5)	17 (6.2)
Number of Subjects Censored, n (%)	118 (85.5)	259 (93.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.19, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 6.8*	0.8*, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.255 (0.351)
95% CI		(0.128, 0.507)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Kaplan-Meier Estimates at % (95% CI)		
3 months	84.9 (78.4, 91.5)	96.1 (93.7, 98.5)
6 months	77.3 (65.3, 89.2)	91.8 (87.7, 95.9)
9 months	NE (NE, NE)	91.8 (87.7, 95.9)
12 months	NE (NE, NE)	91.8 (87.7, 95.9)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Number of Subjects with Events, n (%)	5 (3.6)	20 (7.2)
Number of Subjects Censored, n (%)	133 (96.4)	256 (92.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 6.8*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.642 (0.508)
95% CI		(0.607, 4.441)
Log-rank p-value		0.356

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Kaplan-Meier Estimates at % (95% CI)		
3 months	96.3 (93.0, 99.5)	94.0 (91.2, 96.9)
6 months	96.3 (93.0, 99.5)	91.8 (88.1, 95.6)
9 months	NE (NE, NE)	91.8 (88.1, 95.6)
12 months	NE (NE, NE)	82.7 (65.2, 100.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Number of Subjects with Events, n (%)	3 (2.2)	37 (13.4)
Number of Subjects Censored, n (%)	135 (97.8)	239 (86.6)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.61, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.3, 6.8*	0.0, 12.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		6.768 (0.602)
95% CI		(2.078, 22.041)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.5 (96.4, 100.0)	86.1 (82.0, 90.3)
6 months	93.3 (83.2, 100.0)	86.1 (82.0, 90.3)
9 months	NE (NE, NE)	86.1 (82.0, 90.3)
12 months	NE (NE, NE)	86.1 (82.0, 90.3)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	3.37

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Number of Subjects with Events, n (%)	1 (0.7)	34 (12.3)
Number of Subjects Censored, n (%)	137 (99.3)	242 (87.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 6.8*	0.0, 12.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		19.229 (1.016)
95% CI		(2.625, 140.838)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.2 (97.7, 100.0)	87.3 (83.3, 91.3)
6 months	99.2 (97.7, 100.0)	87.3 (83.3, 91.3)
9 months	NE (NE, NE)	87.3 (83.3, 91.3)
12 months	NE (NE, NE)	87.3 (83.3, 91.3)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	3.43

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Number of Subjects with Events, n (%)	0	13 (4.7)
Number of Subjects Censored, n (%)	138 (100.0)	263 (95.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 6.8*	0.4, 12.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.016

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	96.1 (93.8, 98.5)
6 months	100.0 (100.0, 100.0)	93.3 (89.3, 97.2)
9 months	NE (NE, NE)	93.3 (89.3, 97.2)
12 months	NE (NE, NE)	93.3 (89.3, 97.2)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.70

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Number of Subjects with Events, n (%)	0	13 (4.7)
Number of Subjects Censored, n (%)	138 (100.0)	263 (95.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 6.8*	0.4, 12.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.016

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Colon

Statistics	Placebo + BSC N=138	Fruquintinib + BSC N=276
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	96.1 (93.8, 98.5)
6 months	100.0 (100.0, 100.0)	93.3 (89.3, 97.2)
9 months	NE (NE, NE)	93.3 (89.3, 97.2)
12 months	NE (NE, NE)	93.3 (89.3, 97.2)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.70

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Number of Subjects with Events, n (%)	9 (13.0)	30 (21.3)
Number of Subjects Censored, n (%)	60 (87.0)	111 (78.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (4.14, NE)	16.07 (3.32, NE)
Median (95% CI)	NE (NE, NE)	16.07 (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.308 (0.394)
95% CI		(0.605, 2.831)
Log-rank p-value		0.516

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Kaplan-Meier Estimates at % (95% CI)		
3 months	87.7 (79.7, 95.7)	83.0 (76.7, 89.4)
6 months	80.4 (64.9, 96.0)	75.5 (67.2, 83.8)
9 months	80.4 (64.9, 96.0)	75.5 (67.2, 83.8)
12 months	80.4 (64.9, 96.0)	75.5 (67.2, 83.8)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Number of Subjects with Events, n (%)	6 (8.7)	8 (5.7)
Number of Subjects Censored, n (%)	63 (91.3)	133 (94.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.6*, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.599 (0.563)
95% CI		(0.199, 1.806)
Log-rank p-value		0.422

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Kaplan-Meier Estimates at % (95% CI)		
3 months	90.9 (83.9, 97.8)	95.6 (92.1, 99.0)
6 months	90.9 (83.9, 97.8)	93.2 (88.5, 97.9)
9 months	90.9 (83.9, 97.8)	93.2 (88.5, 97.9)
12 months	90.9 (83.9, 97.8)	93.2 (88.5, 97.9)
18 months	NE (NE, NE)	93.2 (88.5, 97.9)
Median Follow-up Time (months)	2.83	4.67

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Number of Subjects with Events, n (%)	2 (2.9)	12 (8.5)
Number of Subjects Censored, n (%)	67 (97.1)	129 (91.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (16.07, NE)
Median (95% CI)	NE (NE, NE)	16.07 (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		2.102 (0.775)
95% CI		(0.461, 9.594)
Log-rank p-value		0.319

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Kaplan-Meier Estimates at % (95% CI)		
3 months	96.6 (92.0, 100.0)	92.2 (87.4, 96.9)
6 months	96.6 (92.0, 100.0)	90.4 (84.6, 96.2)
9 months	96.6 (92.0, 100.0)	90.4 (84.6, 96.2)
12 months	96.6 (92.0, 100.0)	90.4 (84.6, 96.2)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	4.53

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Number of Subjects with Events, n (%)	0	20 (14.2)
Number of Subjects Censored, n (%)	69 (100.0)	121 (85.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.005

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	87.6 (82.1, 93.2)
6 months	100.0 (100.0, 100.0)	84.4 (77.5, 91.3)
9 months	100.0 (100.0, 100.0)	84.4 (77.5, 91.3)
12 months	100.0 (100.0, 100.0)	77.9 (64.1, 91.7)
18 months	NE (NE, NE)	77.9 (64.1, 91.7)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Number of Subjects with Events, n (%)	0	18 (12.8)
Number of Subjects Censored, n (%)	69 (100.0)	123 (87.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.007

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	88.4 (83.0, 93.7)
6 months	100.0 (100.0, 100.0)	86.9 (80.9, 92.9)
9 months	100.0 (100.0, 100.0)	86.9 (80.9, 92.9)
12 months	100.0 (100.0, 100.0)	80.2 (66.5, 94.0)
18 months	NE (NE, NE)	80.2 (66.5, 94.0)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Number of Subjects with Events, n (%)	1 (1.4)	15 (10.6)
Number of Subjects Censored, n (%)	68 (98.6)	126 (89.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.2*, 13.0*	0.5, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		7.219 (1.093)
95% CI		(0.848, 61.469)
Log-rank p-value		0.048

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.5 (95.5, 100.0)	91.7 (86.9, 96.4)
6 months	98.5 (95.5, 100.0)	88.5 (82.2, 94.8)
9 months	98.5 (95.5, 100.0)	85.8 (77.7, 93.9)
12 months	98.5 (95.5, 100.0)	85.8 (77.7, 93.9)
18 months	NE (NE, NE)	42.9 (0.0, 100.0)
Median Follow-up Time (months)	2.83	3.84

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Number of Subjects with Events, n (%)	0	13 (9.2)
Number of Subjects Censored, n (%)	69 (100.0)	128 (90.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.5, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.016

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Rectum

Statistics	Placebo + BSC N=69	Fruquintinib + BSC N=141
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	92.4 (87.9, 97.0)
6 months	100.0 (100.0, 100.0)	89.3 (83.1, 95.4)
9 months	100.0 (100.0, 100.0)	86.5 (78.4, 94.5)
12 months	100.0 (100.0, 100.0)	86.5 (78.4, 94.5)
18 months	NE (NE, NE)	86.5 (78.4, 94.5)
Median Follow-up Time (months)	2.83	3.84

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Number of Subjects with Events, n (%)	3 (13.0)	6 (15.4)
Number of Subjects Censored, n (%)	20 (87.0)	33 (84.6)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.95, NE)	NE (2.76, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0, 8.4*	0.9*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.377 (0.736)
95% CI		(0.326, 5.823)
Log-rank p-value		0.689

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Kaplan-Meier Estimates at % (95% CI)		
3 months	85.8 (70.9, 100.0)	88.8 (78.5, 99.2)
6 months	85.8 (70.9, 100.0)	76.6 (58.4, 94.9)
9 months	NE (NE, NE)	76.6 (58.4, 94.9)
12 months	NE (NE, NE)	76.6 (58.4, 94.9)
18 months	NE (NE, NE)	76.6 (58.4, 94.9)
Median Follow-up Time (months)	2.83	2.83

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Number of Subjects with Events, n (%)	2 (8.7)	2 (5.1)
Number of Subjects Censored, n (%)	21 (91.3)	37 (94.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.95, NE)	NE (5.95, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0, 8.4*	0.9*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.549 (1.079)
95% CI		(0.066, 4.550)
Log-rank p-value		0.681

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Kaplan-Meier Estimates at % (95% CI)		
3 months	90.0 (76.8, 100.0)	97.4 (92.3, 100.0)
6 months	90.0 (76.8, 100.0)	89.9 (75.0, 100.0)
9 months	NE (NE, NE)	89.9 (75.0, 100.0)
12 months	NE (NE, NE)	89.9 (75.0, 100.0)
18 months	NE (NE, NE)	89.9 (75.0, 100.0)
Median Follow-up Time (months)	2.83	3.02

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Number of Subjects with Events, n (%)	2 (8.7)	3 (7.7)
Number of Subjects Censored, n (%)	21 (91.3)	36 (92.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (1.77, NE)	NE (3.19, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 8.4*	0.9*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.285 (0.937)
95% CI		(0.205, 8.054)
Log-rank p-value		0.754

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Kaplan-Meier Estimates at % (95% CI)		
3 months	89.7 (76.2, 100.0)	94.3 (86.7, 100.0)
6 months	89.7 (76.2, 100.0)	89.1 (76.8, 100.0)
9 months	NE (NE, NE)	89.1 (76.8, 100.0)
12 months	NE (NE, NE)	89.1 (76.8, 100.0)
18 months	NE (NE, NE)	89.1 (76.8, 100.0)
Median Follow-up Time (months)	2.83	2.86

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Number of Subjects with Events, n (%)	1 (4.3)	10 (25.6)
Number of Subjects Censored, n (%)	22 (95.7)	29 (74.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.62, NE)	1.77 (0.56, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.6, 8.4*	0.2, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		5.779 (1.077)
95% CI		(0.700, 47.686)
Log-rank p-value		0.074

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.7 (87.3, 100.0)	73.9 (60.0, 87.9)
6 months	95.7 (87.3, 100.0)	73.9 (60.0, 87.9)
9 months	NE (NE, NE)	73.9 (60.0, 87.9)
12 months	NE (NE, NE)	73.9 (60.0, 87.9)
18 months	NE (NE, NE)	73.9 (60.0, 87.9)
Median Follow-up Time (months)	2.83	2.83

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Number of Subjects with Events, n (%)	1 (4.3)	10 (25.6)
Number of Subjects Censored, n (%)	22 (95.7)	29 (74.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.62, NE)	1.77 (0.56, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.6, 8.4*	0.2, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		5.779 (1.077)
95% CI		(0.700, 47.686)
Log-rank p-value		0.074

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.7 (87.3, 100.0)	73.9 (60.0, 87.9)
6 months	95.7 (87.3, 100.0)	73.9 (60.0, 87.9)
9 months	NE (NE, NE)	73.9 (60.0, 87.9)
12 months	NE (NE, NE)	73.9 (60.0, 87.9)
18 months	NE (NE, NE)	73.9 (60.0, 87.9)
Median Follow-up Time (months)	2.83	2.83

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Number of Subjects with Events, n (%)	0	3 (7.7)
Number of Subjects Censored, n (%)	23 (100.0)	36 (92.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (5.03, NE)
Median (95% CI)	NE (NE, NE)	NE (5.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 8.4*	0.5, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.414

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	97.4 (92.5, 100.0)
6 months	100.0 (100.0, 100.0)	81.2 (60.2, 100.0)
9 months	NE (NE, NE)	81.2 (60.2, 100.0)
12 months	NE (NE, NE)	81.2 (60.2, 100.0)
18 months	NE (NE, NE)	81.2 (60.2, 100.0)
Median Follow-up Time (months)	2.83	2.86

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3G
Summary of Time to Onset of TEAE by SOC/PT by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Colon and Rectum

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Number of Subjects with Events, n (%)	0	3 (7.7)
Number of Subjects Censored, n (%)	23 (100.0)	36 (92.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (5.03, NE)
Median (95% CI)	NE (NE, NE)	NE (5.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 8.4*	0.5, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.414

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
WT (Wild Type)

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=39
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	97.4 (92.5, 100.0)
6 months	100.0 (100.0, 100.0)	81.2 (60.2, 100.0)
9 months	NE (NE, NE)	81.2 (60.2, 100.0)
12 months	NE (NE, NE)	81.2 (60.2, 100.0)
18 months	NE (NE, NE)	81.2 (60.2, 100.0)
Median Follow-up Time (months)	2.83	2.86

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Number of Subjects with Events, n (%)	19 (22.4)	34 (20.1)
Number of Subjects Censored, n (%)	66 (77.6)	135 (79.9)
Time to first TEAE (months)		
25% percentile (95% CI)	3.75 (1.94, NE)	NE (3.61, NE)
Median (95% CI)	NE (4.14, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Min, Max	0.2*, 6.8*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.697 (0.292)
95% CI		(0.393, 1.235)
Log-rank p-value		0.212

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Kaplan-Meier Estimates at % (95% CI)		
3 months	79.4 (70.4, 88.5)	84.5 (78.9, 90.1)
6 months	66.5 (50.7, 82.3)	75.0 (67.2, 82.8)
9 months	NE (NE, NE)	75.0 (67.2, 82.8)
12 months	NE (NE, NE)	75.0 (67.2, 82.8)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Number of Subjects with Events, n (%)	11 (12.9)	9 (5.3)
Number of Subjects Censored, n (%)	74 (87.1)	160 (94.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.19, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.9*, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.259 (0.473)
95% CI		(0.103, 0.655)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Kaplan-Meier Estimates at % (95% CI)		
3 months	87.5 (79.7, 95.2)	96.1 (93.1, 99.2)
6 months	79.5 (66.6, 92.3)	92.6 (87.7, 97.5)
9 months	NE (NE, NE)	92.6 (87.7, 97.5)
12 months	NE (NE, NE)	92.6 (87.7, 97.5)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	4.50

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Number of Subjects with Events, n (%)	5 (5.9)	17 (10.1)
Number of Subjects Censored, n (%)	80 (94.1)	152 (89.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.514 (0.511)
95% CI		(0.556, 4.123)
Log-rank p-value		0.409

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Kaplan-Meier Estimates at % (95% CI)		
3 months	93.6 (88.1, 99.0)	90.6 (86.0, 95.2)
6 months	93.6 (88.1, 99.0)	87.8 (81.9, 93.8)
9 months	NE (NE, NE)	87.8 (81.9, 93.8)
12 months	NE (NE, NE)	87.8 (81.9, 93.8)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Number of Subjects with Events, n (%)	1 (1.2)	25 (14.8)
Number of Subjects Censored, n (%)	84 (98.8)	144 (85.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.61, NE)	NE (5.55, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		12.499 (1.021)
95% CI		(1.690, 92.455)
Log-rank p-value		0.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	86.0 (80.6, 91.3)
6 months	95.0 (85.4, 100.0)	82.9 (76.2, 89.5)
9 months	NE (NE, NE)	82.9 (76.2, 89.5)
12 months	NE (NE, NE)	82.9 (76.2, 89.5)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Number of Subjects with Events, n (%)	0	24 (14.2)
Number of Subjects Censored, n (%)	85 (100.0)	145 (85.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	86.0 (80.6, 91.3)
6 months	100.0 (100.0, 100.0)	84.6 (78.7, 90.5)
9 months	NE (NE, NE)	84.6 (78.7, 90.5)
12 months	NE (NE, NE)	84.6 (78.7, 90.5)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Number of Subjects with Events, n (%)	0	12 (7.1)
Number of Subjects Censored, n (%)	85 (100.0)	157 (92.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (NE, NE)
Median (95% CI)	NE (NE, NE)	13.14 (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	13.14 (NE, NE)
Min, Max	0.2*, 6.8*	0.5, 13.1
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.027

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.1 (90.3, 97.8)
6 months	100.0 (100.0, 100.0)	91.2 (85.7, 96.6)
9 months	NE (NE, NE)	91.2 (85.7, 96.6)
12 months	NE (NE, NE)	91.2 (85.7, 96.6)
18 months	NE (NE, NE)	0.0 (NE, NE)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Number of Subjects with Events, n (%)	0	10 (5.9)
Number of Subjects Censored, n (%)	85 (100.0)	159 (94.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.5, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.035

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
WT (Wild Type)

Statistics	Placebo + BSC N=85	Fruquintinib + BSC N=169
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.7 (91.1, 98.3)
6 months	100.0 (100.0, 100.0)	91.8 (86.4, 97.1)
9 months	NE (NE, NE)	91.8 (86.4, 97.1)
12 months	NE (NE, NE)	91.8 (86.4, 97.1)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Number of Subjects with Events, n (%)	25 (17.2)	57 (19.9)
Number of Subjects Censored, n (%)	120 (82.8)	230 (80.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.27, NE)	11.04 (4.37, 16.07)
Median (95% CI)	NE (NE, NE)	16.07 (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.4*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.911 (0.245)
95% CI		(0.563, 1.473)
Log-rank p-value		0.657

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Kaplan-Meier Estimates at % (95% CI)		
3 months	81.5 (74.8, 88.1)	84.7 (80.4, 89.0)
6 months	81.5 (74.8, 88.1)	76.4 (70.4, 82.4)
9 months	81.5 (74.8, 88.1)	76.4 (70.4, 82.4)
12 months	81.5 (74.8, 88.1)	71.3 (60.1, 82.5)
18 months	NE (NE, NE)	46.8 (16.7, 76.9)
Median Follow-up Time (months)	2.83	3.48

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Number of Subjects with Events, n (%)	17 (11.7)	18 (6.3)
Number of Subjects Censored, n (%)	128 (88.3)	269 (93.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.6*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.388 (0.348)
95% CI		(0.196, 0.768)
Log-rank p-value		0.005

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Kaplan-Meier Estimates at % (95% CI)		
3 months	87.1 (81.4, 92.9)	96.0 (93.7, 98.3)
6 months	87.1 (81.4, 92.9)	91.8 (87.7, 95.9)
9 months	87.1 (81.4, 92.9)	91.8 (87.7, 95.9)
12 months	87.1 (81.4, 92.9)	91.8 (87.7, 95.9)
18 months	NE (NE, NE)	80.3 (59.0, 100.0)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Number of Subjects with Events, n (%)	4 (2.8)	18 (6.3)
Number of Subjects Censored, n (%)	141 (97.2)	269 (93.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.4*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.698 (0.563)
95% CI		(0.564, 5.117)
Log-rank p-value		0.318

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Kaplan-Meier Estimates at % (95% CI)		
3 months	97.0 (94.1, 99.9)	95.2 (92.6, 97.7)
6 months	97.0 (94.1, 99.9)	93.1 (89.6, 96.6)
9 months	97.0 (94.1, 99.9)	93.1 (89.6, 96.6)
12 months	97.0 (94.1, 99.9)	86.9 (74.7, 99.1)
18 months	NE (NE, NE)	65.1 (27.2, 100.0)
Median Follow-up Time (months)	2.83	3.68

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Number of Subjects with Events, n (%)	3 (2.1)	42 (14.6)
Number of Subjects Censored, n (%)	142 (97.9)	245 (85.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.3, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		7.686 (0.601)
95% CI		(2.366, 24.963)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Kaplan-Meier Estimates at % (95% CI)		
3 months	97.9 (95.5, 100.0)	85.3 (81.2, 89.5)
6 months	97.9 (95.5, 100.0)	85.3 (81.2, 89.5)
9 months	97.9 (95.5, 100.0)	85.3 (81.2, 89.5)
12 months	97.9 (95.5, 100.0)	80.3 (70.0, 90.6)
18 months	NE (NE, NE)	80.3 (70.0, 90.6)
Median Follow-up Time (months)	2.83	3.35

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Number of Subjects with Events, n (%)	2 (1.4)	38 (13.2)
Number of Subjects Censored, n (%)	143 (98.6)	249 (86.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		10.626 (0.730)
95% CI		(2.541, 44.440)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.6 (96.6, 100.0)	86.8 (82.8, 90.8)
6 months	98.6 (96.6, 100.0)	86.8 (82.8, 90.8)
9 months	98.6 (96.6, 100.0)	86.8 (82.8, 90.8)
12 months	98.6 (96.6, 100.0)	82.0 (72.1, 91.9)
18 months	NE (NE, NE)	82.0 (72.1, 91.9)
Median Follow-up Time (months)	2.83	3.35

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Number of Subjects with Events, n (%)	1 (0.7)	19 (6.6)
Number of Subjects Censored, n (%)	144 (99.3)	268 (93.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		6.841 (1.032)
95% CI		(0.905, 51.723)
Log-rank p-value		0.032

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.3 (97.9, 100.0)	95.3 (92.8, 97.8)
6 months	99.3 (97.9, 100.0)	90.6 (85.9, 95.3)
9 months	99.3 (97.9, 100.0)	88.7 (82.8, 94.6)
12 months	99.3 (97.9, 100.0)	88.7 (82.8, 94.6)
18 months	NE (NE, NE)	88.7 (82.8, 94.6)
Median Follow-up Time (months)	2.83	3.68

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3H
Summary of Time to Onset of TEAE by SOC/PT by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Mutant

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Number of Subjects with Events, n (%)	0	19 (6.6)
Number of Subjects Censored, n (%)	145 (100.0)	268 (93.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.010

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
WT (Wild Type)

Statistics	Placebo + BSC N=145	Fruquintinib + BSC N=287
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.3 (92.8, 97.8)
6 months	100.0 (100.0, 100.0)	90.6 (85.9, 95.3)
9 months	100.0 (100.0, 100.0)	88.7 (82.8, 94.6)
12 months	100.0 (100.0, 100.0)	88.7 (82.8, 94.6)
18 months	NE (NE, NE)	88.7 (82.8, 94.6)
Median Follow-up Time (months)	2.83	3.68

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Number of Subjects with Events, n (%)	41 (20.8)	77 (19.4)
Number of Subjects Censored, n (%)	156 (79.2)	320 (80.6)
Time to first TEAE (months)		
25% percentile (95% CI)	4.14 (2.30, NE)	11.04 (4.47, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Min, Max	0.2*, 8.4*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.725 (0.197)
95% CI		(0.493, 1.066)
Log-rank p-value		0.102

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Kaplan-Meier Estimates at % (95% CI)		
3 months	79.0 (72.9, 85.0)	84.4 (80.7, 88.1)
6 months	72.3 (63.0, 81.5)	76.3 (71.3, 81.3)
9 months	NE (NE, NE)	76.3 (71.3, 81.3)
12 months	NE (NE, NE)	72.5 (63.8, 81.2)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.55

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Number of Subjects with Events, n (%)	26 (13.2)	20 (5.0)
Number of Subjects Censored, n (%)	171 (86.8)	377 (95.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.75, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.6*, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.285 (0.303)
95% CI		(0.157, 0.516)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Kaplan-Meier Estimates at % (95% CI)		
3 months	86.1 (80.8, 91.3)	96.2 (94.3, 98.2)
6 months	81.8 (74.2, 89.5)	93.4 (90.4, 96.3)
9 months	NE (NE, NE)	93.4 (90.4, 96.3)
12 months	NE (NE, NE)	93.4 (90.4, 96.3)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.94

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Number of Subjects with Events, n (%)	9 (4.6)	31 (7.8)
Number of Subjects Censored, n (%)	188 (95.4)	366 (92.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.379 (0.383)
95% CI		(0.651, 2.921)
Log-rank p-value		0.389

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.0 (91.7, 98.2)	93.2 (90.6, 95.8)
6 months	95.0 (91.7, 98.2)	90.5 (87.0, 94.0)
9 months	NE (NE, NE)	90.5 (87.0, 94.0)
12 months	NE (NE, NE)	86.0 (76.7, 95.3)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Number of Subjects with Events, n (%)	3 (1.5)	62 (15.6)
Number of Subjects Censored, n (%)	194 (98.5)	335 (84.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.0, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		10.170 (0.592)
95% CI		(3.188, 32.437)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.9 (97.5, 100.0)	84.7 (81.1, 88.3)
6 months	96.3 (90.9, 100.0)	83.3 (79.3, 87.4)
9 months	NE (NE, NE)	83.3 (79.3, 87.4)
12 months	NE (NE, NE)	79.2 (70.4, 88.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.32

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Number of Subjects with Events, n (%)	1 (0.5)	57 (14.4)
Number of Subjects Censored, n (%)	196 (99.5)	340 (85.6)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.0, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		28.586 (1.009)
95% CI		(3.956, 206.560)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.5 (98.4, 100.0)	85.8 (82.3, 89.2)
6 months	99.5 (98.4, 100.0)	85.1 (81.5, 88.8)
9 months	NE (NE, NE)	85.1 (81.5, 88.8)
12 months	NE (NE, NE)	81.1 (72.6, 89.6)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.35

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Number of Subjects with Events, n (%)	1 (0.5)	26 (6.5)
Number of Subjects Censored, n (%)	196 (99.5)	371 (93.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (NE, NE)
Median (95% CI)	NE (NE, NE)	13.14 (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	13.14 (NE, NE)
Min, Max	0.2*, 8.4*	0.4, 13.1
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		9.612 (1.023)
95% CI		(1.295, 71.357)
Log-rank p-value		0.007

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.5 (98.5, 100.0)	94.9 (92.7, 97.1)
6 months	99.5 (98.5, 100.0)	91.5 (87.9, 95.2)
9 months	NE (NE, NE)	90.1 (85.6, 94.7)
12 months	NE (NE, NE)	90.1 (85.6, 94.7)
18 months	NE (NE, NE)	0.0 (NE, NE)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Number of Subjects with Events, n (%)	0	24 (6.0)
Number of Subjects Censored, n (%)	197 (100.0)	373 (94.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.4, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
WT (Wild Type)

Statistics	Placebo + BSC N=197	Fruquintinib + BSC N=397
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.2 (93.0, 97.4)
6 months	100.0 (100.0, 100.0)	91.8 (88.2, 95.4)
9 months	NE (NE, NE)	90.4 (85.8, 94.9)
12 months	NE (NE, NE)	90.4 (85.8, 94.9)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Number of Subjects with Events, n (%)	1 (10.0)	0
Number of Subjects Censored, n (%)	9 (90.0)	7 (100.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.49, NE)	NE (NE, NE)
Median (95% CI)	NE (0.49, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.5, 13.0*	1.9*, 7.4*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.317

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Kaplan-Meier Estimates at % (95% CI)		
3 months	90.0 (71.4, 100.0)	100.0 (100.0, 100.0)
6 months	90.0 (71.4, 100.0)	100.0 (100.0, 100.0)
9 months	90.0 (71.4, 100.0)	NE (NE, NE)
12 months	90.0 (71.4, 100.0)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	5.29

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Number of Subjects with Events, n (%)	1 (10.0)	0
Number of Subjects Censored, n (%)	9 (90.0)	7 (100.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.82, NE)	NE (NE, NE)
Median (95% CI)	NE (0.82, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.8, 13.0*	1.9*, 7.4*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.317

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Kaplan-Meier Estimates at % (95% CI)		
3 months	90.0 (71.4, 100.0)	100.0 (100.0, 100.0)
6 months	90.0 (71.4, 100.0)	100.0 (100.0, 100.0)
9 months	90.0 (71.4, 100.0)	NE (NE, NE)
12 months	90.0 (71.4, 100.0)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	5.29

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Number of Subjects with Events, n (%)	0	1 (14.3)
Number of Subjects Censored, n (%)	10 (100.0)	6 (85.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.62, NE)
Median (95% CI)	NE (NE, NE)	NE (0.62, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.8*, 13.0*	0.6, 7.4*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.157

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	85.7 (59.8, 100.0)
6 months	100.0 (100.0, 100.0)	85.7 (59.8, 100.0)
9 months	100.0 (100.0, 100.0)	NE (NE, NE)
12 months	100.0 (100.0, 100.0)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	5.29

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Number of Subjects with Events, n (%)	0	1 (14.3)
Number of Subjects Censored, n (%)	10 (100.0)	6 (85.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.62, NE)
Median (95% CI)	NE (NE, NE)	NE (0.62, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.8*, 13.0*	0.6, 7.4*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.157

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	85.7 (59.8, 100.0)
6 months	100.0 (100.0, 100.0)	85.7 (59.8, 100.0)
9 months	100.0 (100.0, 100.0)	NE (NE, NE)
12 months	100.0 (100.0, 100.0)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	5.29

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Number of Subjects with Events, n (%)	0	2 (28.6)
Number of Subjects Censored, n (%)	10 (100.0)	5 (71.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	2.10 (0.95, NE)
Median (95% CI)	NE (NE, NE)	NE (0.95, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (2.10, NE)
Min, Max	0.8*, 13.0*	1.0, 7.4*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		NE

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	68.6 (32.1, 100.0)
6 months	100.0 (100.0, 100.0)	68.6 (32.1, 100.0)
9 months	100.0 (100.0, 100.0)	NE (NE, NE)
12 months	100.0 (100.0, 100.0)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	4.57

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Number of Subjects with Events, n (%)	0	2 (28.6)
Number of Subjects Censored, n (%)	10 (100.0)	5 (71.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	2.10 (0.95, NE)
Median (95% CI)	NE (NE, NE)	NE (0.95, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (2.10, NE)
Min, Max	0.8*, 13.0*	1.0, 7.4*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		NE

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
V600 E Mutation

Statistics	Placebo + BSC N=10	Fruquintinib + BSC N=7
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	68.6 (32.1, 100.0)
6 months	100.0 (100.0, 100.0)	68.6 (32.1, 100.0)
9 months	100.0 (100.0, 100.0)	NE (NE, NE)
12 months	100.0 (100.0, 100.0)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	4.57

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Number of Subjects with Events, n (%)	2 (8.7)	14 (26.9)
Number of Subjects Censored, n (%)	21 (91.3)	38 (73.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (1.64, NE)	4.37 (1.61, 16.07)
Median (95% CI)	NE (NE, NE)	16.07 (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (12.22, NE)
Min, Max	1.6, 6.4*	0.6, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		3.033 (0.805)
95% CI		(0.626, 14.706)
Log-rank p-value		0.200

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Kaplan-Meier Estimates at % (95% CI)		
3 months	90.6 (78.2, 100.0)	84.3 (74.3, 94.3)
6 months	90.6 (78.2, 100.0)	69.9 (54.5, 85.2)
9 months	NE (NE, NE)	69.9 (54.5, 85.2)
12 months	NE (NE, NE)	69.9 (54.5, 85.2)
18 months	NE (NE, NE)	34.9 (0.0, 70.0)
Median Follow-up Time (months)	2.86	3.60

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Number of Subjects with Events, n (%)	1 (4.3)	7 (13.5)
Number of Subjects Censored, n (%)	22 (95.7)	45 (86.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.27, NE)	12.22 (4.27, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (12.22, NE)
Min, Max	1.6*, 6.4*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		3.172 (1.181)
95% CI		(0.313, 32.122)
Log-rank p-value		0.447

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Kaplan-Meier Estimates at % (95% CI)		
3 months	94.7 (84.7, 100.0)	94.0 (87.5, 100.0)
6 months	94.7 (84.7, 100.0)	82.0 (67.9, 96.0)
9 months	NE (NE, NE)	82.0 (67.9, 96.0)
12 months	NE (NE, NE)	82.0 (67.9, 96.0)
18 months	NE (NE, NE)	61.5 (25.1, 97.8)
Median Follow-up Time (months)	2.86	3.76

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Number of Subjects with Events, n (%)	0	4 (7.7)
Number of Subjects Censored, n (%)	23 (100.0)	48 (92.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (16.07, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	1.6*, 6.4*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.254

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.1 (87.6, 100.0)
6 months	100.0 (100.0, 100.0)	94.1 (87.6, 100.0)
9 months	NE (NE, NE)	94.1 (87.6, 100.0)
12 months	NE (NE, NE)	94.1 (87.6, 100.0)
18 months	NE (NE, NE)	62.7 (12.3, 100.0)
Median Follow-up Time (months)	2.86	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Number of Subjects with Events, n (%)	1 (4.3)	4 (7.7)
Number of Subjects Censored, n (%)	22 (95.7)	48 (92.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.62, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.6, 6.4*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.776 (1.119)
95% CI		(0.198, 15.931)
Log-rank p-value		0.605

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.7 (87.3, 100.0)	92.2 (84.8, 99.5)
6 months	95.7 (87.3, 100.0)	92.2 (84.8, 99.5)
9 months	NE (NE, NE)	92.2 (84.8, 99.5)
12 months	NE (NE, NE)	92.2 (84.8, 99.5)
18 months	NE (NE, NE)	92.2 (84.8, 99.5)
Median Follow-up Time (months)	2.83	3.58

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Number of Subjects with Events, n (%)	1 (4.3)	4 (7.7)
Number of Subjects Censored, n (%)	22 (95.7)	48 (92.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.62, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.6, 6.4*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.776 (1.119)
95% CI		(0.198, 15.931)
Log-rank p-value		0.605

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.7 (87.3, 100.0)	92.2 (84.8, 99.5)
6 months	95.7 (87.3, 100.0)	92.2 (84.8, 99.5)
9 months	NE (NE, NE)	92.2 (84.8, 99.5)
12 months	NE (NE, NE)	92.2 (84.8, 99.5)
18 months	NE (NE, NE)	92.2 (84.8, 99.5)
Median Follow-up Time (months)	2.83	3.58

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Number of Subjects with Events, n (%)	0	3 (5.8)
Number of Subjects Censored, n (%)	23 (100.0)	49 (94.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (5.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.6*, 6.4*	0.7*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.356

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	97.9 (93.9, 100.0)
6 months	100.0 (100.0, 100.0)	88.6 (75.7, 100.0)
9 months	NE (NE, NE)	88.6 (75.7, 100.0)
12 months	NE (NE, NE)	88.6 (75.7, 100.0)
18 months	NE (NE, NE)	88.6 (75.7, 100.0)
Median Follow-up Time (months)	2.86	3.70

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3I
Summary of Time to Onset of TEAE by SOC/PT by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Other

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Number of Subjects with Events, n (%)	0	3 (5.8)
Number of Subjects Censored, n (%)	23 (100.0)	49 (94.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (5.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.6*, 6.4*	0.7*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.356

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
<=3

Statistics	Placebo + BSC N=23	Fruquintinib + BSC N=52
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	97.9 (93.9, 100.0)
6 months	100.0 (100.0, 100.0)	88.6 (75.7, 100.0)
9 months	NE (NE, NE)	88.6 (75.7, 100.0)
12 months	NE (NE, NE)	88.6 (75.7, 100.0)
18 months	NE (NE, NE)	88.6 (75.7, 100.0)
Median Follow-up Time (months)	2.86	3.70

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Number of Subjects with Events, n (%)	7 (15.6)	8 (10.5)
Number of Subjects Censored, n (%)	38 (84.4)	68 (89.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (1.94, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Min, Max	0.8, 5.6*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.724 (0.532)
95% CI		(0.255, 2.054)
Log-rank p-value		0.515

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Kaplan-Meier Estimates at % (95% CI)		
3 months	83.4 (72.0, 94.7)	88.7 (81.2, 96.2)
6 months	NE (NE, NE)	88.7 (81.2, 96.2)
9 months	NE (NE, NE)	88.7 (81.2, 96.2)
12 months	NE (NE, NE)	88.7 (81.2, 96.2)
18 months	NE (NE, NE)	88.7 (81.2, 96.2)
Median Follow-up Time (months)	2.83	3.60

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Number of Subjects with Events, n (%)	3 (6.7)	5 (6.6)
Number of Subjects Censored, n (%)	42 (93.3)	71 (93.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 5.6*	0.8, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.266 (0.754)
95% CI		(0.289, 5.543)
Log-rank p-value		0.814

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Kaplan-Meier Estimates at % (95% CI)		
3 months	92.4 (84.2, 100.0)	93.4 (87.7, 99.0)
6 months	NE (NE, NE)	93.4 (87.7, 99.0)
9 months	NE (NE, NE)	93.4 (87.7, 99.0)
12 months	NE (NE, NE)	93.4 (87.7, 99.0)
18 months	NE (NE, NE)	93.4 (87.7, 99.0)
Median Follow-up Time (months)	2.83	3.70

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Number of Subjects with Events, n (%)	1 (2.2)	4 (5.3)
Number of Subjects Censored, n (%)	44 (97.8)	72 (94.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 5.6*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		2.336 (1.133)
95% CI		(0.254, 21.510)
Log-rank p-value		0.424

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Kaplan-Meier Estimates at % (95% CI)		
3 months	97.7 (93.2, 100.0)	93.8 (87.7, 99.8)
6 months	NE (NE, NE)	93.8 (87.7, 99.8)
9 months	NE (NE, NE)	93.8 (87.7, 99.8)
12 months	NE (NE, NE)	93.8 (87.7, 99.8)
18 months	NE (NE, NE)	93.8 (87.7, 99.8)
Median Follow-up Time (months)	2.83	3.60

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Number of Subjects with Events, n (%)	1 (2.2)	10 (13.2)
Number of Subjects Censored, n (%)	44 (97.8)	66 (86.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.6, 5.6*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		6.289 (1.059)
95% CI		(0.789, 50.104)
Log-rank p-value		0.047

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Kaplan-Meier Estimates at % (95% CI)		
3 months	97.8 (93.5, 100.0)	86.5 (78.7, 94.3)
6 months	NE (NE, NE)	86.5 (78.7, 94.3)
9 months	NE (NE, NE)	86.5 (78.7, 94.3)
12 months	NE (NE, NE)	86.5 (78.7, 94.3)
18 months	NE (NE, NE)	86.5 (78.7, 94.3)
Median Follow-up Time (months)	2.83	3.22

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Number of Subjects with Events, n (%)	1 (2.2)	9 (11.8)
Number of Subjects Censored, n (%)	44 (97.8)	67 (88.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.6, 5.6*	0.2, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		6.289 (1.059)
95% CI		(0.789, 50.104)
Log-rank p-value		0.047

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Kaplan-Meier Estimates at % (95% CI)		
3 months	97.8 (93.5, 100.0)	87.8 (80.3, 95.3)
6 months	NE (NE, NE)	87.8 (80.3, 95.3)
9 months	NE (NE, NE)	87.8 (80.3, 95.3)
12 months	NE (NE, NE)	87.8 (80.3, 95.3)
18 months	NE (NE, NE)	87.8 (80.3, 95.3)
Median Follow-up Time (months)	2.83	3.24

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Number of Subjects with Events, n (%)	0	3 (3.9)
Number of Subjects Censored, n (%)	45 (100.0)	73 (96.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 5.6*	0.8*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.252

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	97.0 (92.9, 100.0)
6 months	NE (NE, NE)	92.6 (83.3, 100.0)
9 months	NE (NE, NE)	92.6 (83.3, 100.0)
12 months	NE (NE, NE)	92.6 (83.3, 100.0)
18 months	NE (NE, NE)	92.6 (83.3, 100.0)
Median Follow-up Time (months)	2.83	3.47

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Number of Subjects with Events, n (%)	0	3 (3.9)
Number of Subjects Censored, n (%)	45 (100.0)	73 (96.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 5.6*	0.8*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.252

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
<=3

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=76
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	97.0 (92.9, 100.0)
6 months	NE (NE, NE)	92.6 (83.3, 100.0)
9 months	NE (NE, NE)	92.6 (83.3, 100.0)
12 months	NE (NE, NE)	92.6 (83.3, 100.0)
18 months	NE (NE, NE)	92.6 (83.3, 100.0)
Median Follow-up Time (months)	2.83	3.47

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Number of Subjects with Events, n (%)	37 (20.0)	83 (21.8)
Number of Subjects Censored, n (%)	148 (80.0)	297 (78.2)
Time to first TEAE (months)		
25% percentile (95% CI)	4.14 (2.30, NE)	5.59 (3.65, 16.07)
Median (95% CI)	NE (NE, NE)	16.07 (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.833 (0.202)
95% CI		(0.561, 1.237)
Log-rank p-value		0.384

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Kaplan-Meier Estimates at % (95% CI)		
3 months	80.0 (73.9, 86.1)	83.8 (80.0, 87.6)
6 months	73.0 (63.5, 82.5)	73.5 (68.1, 78.9)
9 months	73.0 (63.5, 82.5)	73.5 (68.1, 78.9)
12 months	73.0 (63.5, 82.5)	69.4 (60.1, 78.7)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.60

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Number of Subjects with Events, n (%)	25 (13.5)	22 (5.8)
Number of Subjects Censored, n (%)	160 (86.5)	358 (94.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.75, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.6*, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.288 (0.301)
95% CI		(0.160, 0.520)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Kaplan-Meier Estimates at % (95% CI)		
3 months	85.9 (80.4, 91.3)	96.6 (94.7, 98.5)
6 months	81.5 (73.7, 89.4)	91.8 (88.2, 95.4)
9 months	81.5 (73.7, 89.4)	91.8 (88.2, 95.4)
12 months	81.5 (73.7, 89.4)	91.8 (88.2, 95.4)
18 months	NE (NE, NE)	82.7 (65.3, 100.0)
Median Follow-up Time (months)	2.79	4.01

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Number of Subjects with Events, n (%)	8 (4.3)	31 (8.2)
Number of Subjects Censored, n (%)	177 (95.7)	349 (91.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.540 (0.402)
95% CI		(0.701, 3.386)
Log-rank p-value		0.256

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.2 (91.9, 98.5)	93.4 (90.8, 95.9)
6 months	95.2 (91.9, 98.5)	90.6 (87.1, 94.1)
9 months	95.2 (91.9, 98.5)	90.6 (87.1, 94.1)
12 months	95.2 (91.9, 98.5)	85.6 (75.5, 95.8)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Number of Subjects with Events, n (%)	3 (1.6)	57 (15.0)
Number of Subjects Censored, n (%)	182 (98.4)	323 (85.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		8.758 (0.593)
95% CI		(2.739, 28.005)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.9 (97.3, 100.0)	85.4 (81.8, 89.0)
6 months	96.1 (90.6, 100.0)	84.0 (80.0, 88.1)
9 months	96.1 (90.6, 100.0)	84.0 (80.0, 88.1)
12 months	96.1 (90.6, 100.0)	80.0 (71.5, 88.6)
18 months	NE (NE, NE)	80.0 (71.5, 88.6)
Median Follow-up Time (months)	2.79	3.63

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Number of Subjects with Events, n (%)	1 (0.5)	53 (13.9)
Number of Subjects Censored, n (%)	184 (99.5)	327 (86.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		25.089 (1.010)
95% CI		(3.467, 181.540)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.4 (98.3, 100.0)	86.2 (82.7, 89.7)
6 months	99.4 (98.3, 100.0)	85.6 (81.9, 89.3)
9 months	99.4 (98.3, 100.0)	85.6 (81.9, 89.3)
12 months	99.4 (98.3, 100.0)	81.5 (73.0, 90.1)
18 months	NE (NE, NE)	81.5 (73.0, 90.1)
Median Follow-up Time (months)	2.79	3.63

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Number of Subjects with Events, n (%)	1 (0.5)	28 (7.4)
Number of Subjects Censored, n (%)	184 (99.5)	352 (92.6)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.2*, 13.0*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		10.427 (1.022)
95% CI		(1.408, 77.229)
Log-rank p-value		0.005

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.4 (98.4, 100.0)	94.4 (92.1, 96.8)
6 months	99.4 (98.4, 100.0)	90.5 (86.6, 94.4)
9 months	99.4 (98.4, 100.0)	89.1 (84.4, 93.8)
12 months	99.4 (98.4, 100.0)	89.1 (84.4, 93.8)
18 months	NE (NE, NE)	44.5 (0.0, 100.0)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3J
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
>3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Number of Subjects with Events, n (%)	0	26 (6.8)
Number of Subjects Censored, n (%)	185 (100.0)	354 (93.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.002

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
<=3

Statistics	Placebo + BSC N=185	Fruquintinib + BSC N=380
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.7 (92.4, 97.0)
6 months	100.0 (100.0, 100.0)	90.7 (86.8, 94.6)
9 months	100.0 (100.0, 100.0)	89.3 (84.6, 94.0)
12 months	100.0 (100.0, 100.0)	89.3 (84.6, 94.0)
18 months	NE (NE, NE)	89.3 (84.6, 94.0)
Median Follow-up Time (months)	2.83	3.75

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Number of Subjects with Events, n (%)	14 (21.9)	16 (12.9)
Number of Subjects Censored, n (%)	50 (78.1)	108 (87.1)
Time to first TEAE (months)		
25% percentile (95% CI)	3.19 (1.94, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Min, Max	0.7, 5.6*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.452 (0.380)
95% CI		(0.214, 0.952)
Log-rank p-value		0.034

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Kaplan-Meier Estimates at % (95% CI)		
3 months	78.1 (67.5, 88.7)	89.0 (83.3, 94.7)
6 months	NE (NE, NE)	84.4 (77.0, 91.8)
9 months	NE (NE, NE)	84.4 (77.0, 91.8)
12 months	NE (NE, NE)	84.4 (77.0, 91.8)
18 months	NE (NE, NE)	84.4 (77.0, 91.8)
Median Follow-up Time (months)	2.83	3.66

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Number of Subjects with Events, n (%)	6 (9.4)	9 (7.3)
Number of Subjects Censored, n (%)	58 (90.6)	115 (92.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.19, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 5.6*	0.8, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.561 (0.554)
95% CI		(0.190, 1.663)
Log-rank p-value		0.285

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Kaplan-Meier Estimates at % (95% CI)		
3 months	91.0 (83.4, 98.6)	95.1 (91.3, 98.9)
6 months	NE (NE, NE)	90.3 (83.9, 96.8)
9 months	NE (NE, NE)	90.3 (83.9, 96.8)
12 months	NE (NE, NE)	90.3 (83.9, 96.8)
18 months	NE (NE, NE)	90.3 (83.9, 96.8)
Median Follow-up Time (months)	2.83	3.73

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Number of Subjects with Events, n (%)	3 (4.7)	5 (4.0)
Number of Subjects Censored, n (%)	61 (95.3)	119 (96.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.7, 5.6*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.758 (0.740)
95% CI		(0.178, 3.233)
Log-rank p-value		0.730

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.1 (89.6, 100.0)	95.3 (91.3, 99.4)
6 months	NE (NE, NE)	95.3 (91.3, 99.4)
9 months	NE (NE, NE)	95.3 (91.3, 99.4)
12 months	NE (NE, NE)	95.3 (91.3, 99.4)
18 months	NE (NE, NE)	95.3 (91.3, 99.4)
Median Follow-up Time (months)	2.83	3.66

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Number of Subjects with Events, n (%)	1 (1.6)	22 (17.7)
Number of Subjects Censored, n (%)	63 (98.4)	102 (82.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	10.35 (4.70, NE)
Median (95% CI)	NE (NE, NE)	NE (10.35, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.6, 5.6*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		11.736 (1.026)
95% CI		(1.570, 87.732)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.4 (95.4, 100.0)	84.4 (78.0, 90.9)
6 months	NE (NE, NE)	79.8 (71.1, 88.5)
9 months	NE (NE, NE)	79.8 (71.1, 88.5)
12 months	NE (NE, NE)	68.4 (46.4, 90.4)
18 months	NE (NE, NE)	68.4 (46.4, 90.4)
Median Follow-up Time (months)	2.83	3.32

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Number of Subjects with Events, n (%)	1 (1.6)	19 (15.3)
Number of Subjects Censored, n (%)	63 (98.4)	105 (84.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	10.35 (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (10.35, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.6, 5.6*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		10.297 (1.030)
95% CI		(1.368, 77.485)
Log-rank p-value		0.006

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.4 (95.4, 100.0)	86.0 (79.9, 92.2)
6 months	NE (NE, NE)	83.9 (76.7, 91.2)
9 months	NE (NE, NE)	83.9 (76.7, 91.2)
12 months	NE (NE, NE)	73.4 (53.2, 93.7)
18 months	NE (NE, NE)	73.4 (53.2, 93.7)
Median Follow-up Time (months)	2.83	3.37

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Number of Subjects with Events, n (%)	0	7 (5.6)
Number of Subjects Censored, n (%)	64 (100.0)	117 (94.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (7.33, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 5.6*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.102

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.7 (92.0, 99.4)
6 months	NE (NE, NE)	93.0 (86.8, 99.3)
9 months	NE (NE, NE)	88.8 (78.7, 98.9)
12 months	NE (NE, NE)	88.8 (78.7, 98.9)
18 months	NE (NE, NE)	88.8 (78.7, 98.9)
Median Follow-up Time (months)	2.83	3.58

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Number of Subjects with Events, n (%)	0	7 (5.6)
Number of Subjects Censored, n (%)	64 (100.0)	117 (94.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (7.33, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 5.6*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.102

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
<=3

Statistics	Placebo + BSC N=64	Fruquintinib + BSC N=124
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.7 (92.0, 99.4)
6 months	NE (NE, NE)	93.0 (86.8, 99.3)
9 months	NE (NE, NE)	88.8 (78.7, 98.9)
12 months	NE (NE, NE)	88.8 (78.7, 98.9)
18 months	NE (NE, NE)	88.8 (78.7, 98.9)
Median Follow-up Time (months)	2.83	3.58

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Number of Subjects with Events, n (%)	30 (18.1)	75 (22.6)
Number of Subjects Censored, n (%)	136 (81.9)	257 (77.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.76, NE)	5.59 (3.61, 12.22)
Median (95% CI)	NE (NE, NE)	16.07 (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.970 (0.220)
95% CI		(0.631, 1.492)
Log-rank p-value		0.960

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Kaplan-Meier Estimates at % (95% CI)		
3 months	81.8 (75.6, 88.0)	83.0 (78.8, 87.1)
6 months	76.2 (66.8, 85.7)	72.7 (66.9, 78.6)
9 months	76.2 (66.8, 85.7)	72.7 (66.9, 78.6)
12 months	76.2 (66.8, 85.7)	67.9 (57.2, 78.6)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.37

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Number of Subjects with Events, n (%)	22 (13.3)	18 (5.4)
Number of Subjects Censored, n (%)	144 (86.7)	314 (94.6)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.75, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.6*, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.291 (0.326)
95% CI		(0.154, 0.552)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Kaplan-Meier Estimates at % (95% CI)		
3 months	85.7 (79.9, 91.5)	96.4 (94.2, 98.5)
6 months	83.1 (75.6, 90.6)	92.6 (89.0, 96.3)
9 months	83.1 (75.6, 90.6)	92.6 (89.0, 96.3)
12 months	83.1 (75.6, 90.6)	92.6 (89.0, 96.3)
18 months	NE (NE, NE)	82.3 (63.0, 100.0)
Median Follow-up Time (months)	2.81	4.07

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Number of Subjects with Events, n (%)	6 (3.6)	30 (9.0)
Number of Subjects Censored, n (%)	160 (96.4)	302 (91.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		2.047 (0.452)
95% CI		(0.844, 4.963)
Log-rank p-value		0.096

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Kaplan-Meier Estimates at % (95% CI)		
3 months	96.0 (92.8, 99.2)	92.7 (89.9, 95.6)
6 months	96.0 (92.8, 99.2)	89.6 (85.6, 93.5)
9 months	96.0 (92.8, 99.2)	89.6 (85.6, 93.5)
12 months	96.0 (92.8, 99.2)	83.6 (71.7, 95.5)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Number of Subjects with Events, n (%)	3 (1.8)	45 (13.6)
Number of Subjects Censored, n (%)	163 (98.2)	287 (86.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		7.602 (0.597)
95% CI		(2.360, 24.487)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.7 (97.0, 100.0)	86.0 (82.2, 89.8)
6 months	95.9 (90.2, 100.0)	86.0 (82.2, 89.8)
9 months	95.9 (90.2, 100.0)	86.0 (82.2, 89.8)
12 months	95.9 (90.2, 100.0)	86.0 (82.2, 89.8)
18 months	NE (NE, NE)	86.0 (82.2, 89.8)
Median Follow-up Time (months)	2.81	3.70

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Number of Subjects with Events, n (%)	1 (0.6)	43 (13.0)
Number of Subjects Censored, n (%)	165 (99.4)	289 (87.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		22.238 (1.012)
95% CI		(3.061, 161.559)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.3 (98.1, 100.0)	86.6 (82.9, 90.4)
6 months	99.3 (98.1, 100.0)	86.6 (82.9, 90.4)
9 months	99.3 (98.1, 100.0)	86.6 (82.9, 90.4)
12 months	99.3 (98.1, 100.0)	86.6 (82.9, 90.4)
18 months	NE (NE, NE)	86.6 (82.9, 90.4)
Median Follow-up Time (months)	2.81	3.70

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Number of Subjects with Events, n (%)	1 (0.6)	24 (7.2)
Number of Subjects Censored, n (%)	165 (99.4)	308 (92.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.2*, 13.0*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		9.382 (1.025)
95% CI		(1.259, 69.928)
Log-rank p-value		0.007

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.4 (98.2, 100.0)	94.5 (92.0, 97.1)
6 months	99.4 (98.2, 100.0)	90.0 (85.7, 94.3)
9 months	99.4 (98.2, 100.0)	90.0 (85.7, 94.3)
12 months	99.4 (98.2, 100.0)	90.0 (85.7, 94.3)
18 months	NE (NE, NE)	45.0 (0.0, 100.0)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3K
Summary of Time to Onset of TEAE by SOC/PT by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
>3

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Number of Subjects with Events, n (%)	0	22 (6.6)
Number of Subjects Censored, n (%)	166 (100.0)	310 (93.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=166	Fruquintinib + BSC N=332
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.8 (92.4, 97.3)
6 months	100.0 (100.0, 100.0)	90.3 (86.0, 94.6)
9 months	100.0 (100.0, 100.0)	90.3 (86.0, 94.6)
12 months	100.0 (100.0, 100.0)	90.3 (86.0, 94.6)
18 months	NE (NE, NE)	90.3 (86.0, 94.6)
Median Follow-up Time (months)	2.83	3.75

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Number of Subjects with Events, n (%)	42 (19.0)	87 (19.8)
Number of Subjects Censored, n (%)	179 (81.0)	353 (80.2)
Time to first TEAE (months)		
25% percentile (95% CI)	4.14 (2.76, NE)	11.04 (4.47, 16.07)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.806 (0.192)
95% CI		(0.553, 1.173)
Log-rank p-value		0.269

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Kaplan-Meier Estimates at % (95% CI)		
3 months	80.9 (75.5, 86.4)	84.8 (81.3, 88.2)
6 months	75.0 (66.6, 83.4)	76.0 (71.2, 80.9)
9 months	75.0 (66.6, 83.4)	76.0 (71.2, 80.9)
12 months	75.0 (66.6, 83.4)	72.6 (64.5, 80.7)
18 months	NE (NE, NE)	53.6 (27.9, 79.2)
Median Follow-up Time (months)	2.83	3.56

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Number of Subjects with Events, n (%)	27 (12.2)	27 (6.1)
Number of Subjects Censored, n (%)	194 (87.8)	413 (93.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.6*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.356 (0.280)
95% CI		(0.206, 0.616)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Kaplan-Meier Estimates at % (95% CI)		
3 months	87.2 (82.4, 91.9)	95.9 (94.0, 97.8)
6 months	83.5 (76.8, 90.3)	91.7 (88.4, 95.0)
9 months	83.5 (76.8, 90.3)	91.7 (88.4, 95.0)
12 months	83.5 (76.8, 90.3)	91.7 (88.4, 95.0)
18 months	NE (NE, NE)	84.7 (71.0, 98.3)
Median Follow-up Time (months)	2.83	3.86

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Number of Subjects with Events, n (%)	9 (4.1)	32 (7.3)
Number of Subjects Censored, n (%)	212 (95.9)	408 (92.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (16.07, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.499 (0.383)
95% CI		(0.708, 3.173)
Log-rank p-value		0.259

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.5 (92.6, 98.4)	93.9 (91.6, 96.3)
6 months	95.5 (92.6, 98.4)	91.5 (88.4, 94.7)
9 months	95.5 (92.6, 98.4)	91.5 (88.4, 94.7)
12 months	95.5 (92.6, 98.4)	87.4 (78.9, 95.9)
18 months	NE (NE, NE)	69.9 (38.5, 100.0)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Number of Subjects with Events, n (%)	4 (1.8)	64 (14.5)
Number of Subjects Censored, n (%)	217 (98.2)	376 (85.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		7.902 (0.516)
95% CI		(2.874, 21.724)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.6 (97.0, 100.0)	85.8 (82.4, 89.1)
6 months	96.3 (91.6, 100.0)	84.5 (80.9, 88.2)
9 months	96.3 (91.6, 100.0)	84.5 (80.9, 88.2)
12 months	96.3 (91.6, 100.0)	80.9 (73.0, 88.7)
18 months	NE (NE, NE)	80.9 (73.0, 88.7)
Median Follow-up Time (months)	2.83	3.43

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Number of Subjects with Events, n (%)	2 (0.9)	59 (13.4)
Number of Subjects Censored, n (%)	219 (99.1)	381 (86.6)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		14.901 (0.719)
95% CI		(3.639, 61.024)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.1 (97.8, 100.0)	86.7 (83.5, 89.9)
6 months	99.1 (97.8, 100.0)	86.2 (82.8, 89.5)
9 months	99.1 (97.8, 100.0)	86.2 (82.8, 89.5)
12 months	99.1 (97.8, 100.0)	82.6 (75.0, 90.2)
18 months	NE (NE, NE)	82.6 (75.0, 90.2)
Median Follow-up Time (months)	2.83	3.50

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Number of Subjects with Events, n (%)	1 (0.5)	31 (7.0)
Number of Subjects Censored, n (%)	220 (99.5)	409 (93.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	NE (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.2*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		11.545 (1.019)
95% CI		(1.566, 85.101)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.5 (98.6, 100.0)	94.7 (92.5, 96.8)
6 months	99.5 (98.6, 100.0)	90.4 (86.7, 94.2)
9 months	99.5 (98.6, 100.0)	89.2 (84.7, 93.6)
12 months	99.5 (98.6, 100.0)	89.2 (84.7, 93.6)
18 months	NE (NE, NE)	66.9 (28.9, 100.0)
Median Follow-up Time (months)	2.83	3.70

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Number of Subjects with Events, n (%)	0	29 (6.6)
Number of Subjects Censored, n (%)	221 (100.0)	411 (93.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Yes

Statistics	Placebo + BSC N=221	Fruquintinib + BSC N=440
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.9 (92.8, 97.0)
6 months	100.0 (100.0, 100.0)	90.6 (86.9, 94.4)
9 months	100.0 (100.0, 100.0)	89.4 (85.0, 93.8)
12 months	100.0 (100.0, 100.0)	89.4 (85.0, 93.8)
18 months	NE (NE, NE)	89.4 (85.0, 93.8)
Median Follow-up Time (months)	2.83	3.70

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
No

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Number of Subjects with Events, n (%)	2 (22.2)	4 (25.0)
Number of Subjects Censored, n (%)	7 (77.8)	12 (75.0)
Time to first TEAE (months)		
25% percentile (95% CI)	2.30 (1.22, NE)	3.61 (0.07, NE)
Median (95% CI)	NE (1.22, NE)	NE (3.61, NE)
75% percentile (95% CI)	NE (2.30, NE)	NE (NE, NE)
Min, Max	1.2, 4.7*	0.1, 12.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.204 (1.256)
95% CI		(0.103, 14.116)
Log-rank p-value		0.808

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
No

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Kaplan-Meier Estimates at % (95% CI)		
3 months	71.1 (35.9, 100.0)	80.8 (61.2, 100.0)
6 months	NE (NE, NE)	71.8 (47.7, 95.9)
9 months	NE (NE, NE)	71.8 (47.7, 95.9)
12 months	NE (NE, NE)	71.8 (47.7, 95.9)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.30	4.12

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
No

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Number of Subjects with Events, n (%)	1 (11.1)	0
Number of Subjects Censored, n (%)	8 (88.9)	16 (100.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (1.22, NE)	NE (NE, NE)
Median (95% CI)	NE (1.22, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.2, 4.7*	1.7*, 12.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.317

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
No

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Kaplan-Meier Estimates at % (95% CI)		
3 months	88.9 (68.4, 100.0)	100.0 (100.0, 100.0)
6 months	NE (NE, NE)	100.0 (100.0, 100.0)
9 months	NE (NE, NE)	100.0 (100.0, 100.0)
12 months	NE (NE, NE)	100.0 (100.0, 100.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.30	5.04

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
No

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Number of Subjects with Events, n (%)	0	3 (18.8)
Number of Subjects Censored, n (%)	9 (100.0)	13 (81.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.07, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.2*, 4.7*	0.1, 12.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.480

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
No

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	80.8 (61.2, 100.0)
6 months	NE (NE, NE)	80.8 (61.2, 100.0)
9 months	NE (NE, NE)	80.8 (61.2, 100.0)
12 months	NE (NE, NE)	80.8 (61.2, 100.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.30	4.19

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
No

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Number of Subjects with Events, n (%)	0	3 (18.8)
Number of Subjects Censored, n (%)	9 (100.0)	13 (81.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.20, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.2*, 4.7*	0.2, 12.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.317

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
No

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	80.8 (61.2, 100.0)
6 months	NE (NE, NE)	80.8 (61.2, 100.0)
9 months	NE (NE, NE)	80.8 (61.2, 100.0)
12 months	NE (NE, NE)	80.8 (61.2, 100.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.30	3.66

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3L
Summary of Time to Onset of TEAE by SOC/PT by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
No

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Number of Subjects with Events, n (%)	0	3 (18.8)
Number of Subjects Censored, n (%)	9 (100.0)	13 (81.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.62, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.2*, 4.7*	0.6, 12.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.317

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=9	Fruquintinib + BSC N=16
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	80.8 (61.2, 100.0)
6 months	NE (NE, NE)	80.8 (61.2, 100.0)
9 months	NE (NE, NE)	80.8 (61.2, 100.0)
12 months	NE (NE, NE)	80.8 (61.2, 100.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.30	3.66

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	18 (20.5)	37 (20.7)
Number of Subjects Censored, n (%)	70 (79.5)	142 (79.3)
Time to first TEAE (months)		
25% percentile (95% CI)	3.75 (2.37, NE)	11.04 (3.61, NE)
Median (95% CI)	NE (4.14, NE)	NE (11.04, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Min, Max	0.2*, 6.8*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.742 (0.296)
95% CI		(0.416, 1.324)
Log-rank p-value		0.337

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	81.5 (73.0, 90.1)	84.8 (79.4, 90.2)
6 months	67.5 (50.9, 84.1)	75.1 (67.5, 82.6)
9 months	NE (NE, NE)	75.1 (67.5, 82.6)
12 months	NE (NE, NE)	67.6 (52.0, 83.1)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	11 (12.5)	11 (6.1)
Number of Subjects Censored, n (%)	77 (87.5)	168 (93.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.19, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.9*, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.298 (0.446)
95% CI		(0.124, 0.716)
Log-rank p-value		0.005

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	88.0 (80.6, 95.5)	95.7 (92.7, 98.8)
6 months	79.6 (66.5, 92.8)	91.6 (86.6, 96.6)
9 months	NE (NE, NE)	91.6 (86.6, 96.6)
12 months	NE (NE, NE)	91.6 (86.6, 96.6)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	4.50

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	5 (5.7)	18 (10.1)
Number of Subjects Censored, n (%)	83 (94.3)	161 (89.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.495 (0.513)
95% CI		(0.547, 4.082)
Log-rank p-value		0.379

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	93.8 (88.5, 99.1)	91.1 (86.8, 95.4)
6 months	93.8 (88.5, 99.1)	88.5 (83.0, 94.1)
9 months	NE (NE, NE)	88.5 (83.0, 94.1)
12 months	NE (NE, NE)	79.7 (62.5, 96.9)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	1 (1.1)	25 (14.0)
Number of Subjects Censored, n (%)	87 (98.9)	154 (86.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.61, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		13.206 (1.023)
95% CI		(1.779, 98.009)
Log-rank p-value		0.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	86.7 (81.6, 91.8)
6 months	94.7 (84.7, 100.0)	83.8 (77.5, 90.1)
9 months	NE (NE, NE)	83.8 (77.5, 90.1)
12 months	NE (NE, NE)	83.8 (77.5, 90.1)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	0	23 (12.8)
Number of Subjects Censored, n (%)	88 (100.0)	156 (87.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.1, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	87.4 (82.4, 92.3)
6 months	100.0 (100.0, 100.0)	86.1 (80.7, 91.6)
9 months	NE (NE, NE)	86.1 (80.7, 91.6)
12 months	NE (NE, NE)	86.1 (80.7, 91.6)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	0	14 (7.8)
Number of Subjects Censored, n (%)	88 (100.0)	165 (92.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (NE, NE)
Median (95% CI)	NE (NE, NE)	13.14 (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	13.14 (NE, NE)
Min, Max	0.2*, 6.8*	0.5, 13.1
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.018

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	93.3 (89.5, 97.1)
6 months	100.0 (100.0, 100.0)	90.5 (85.2, 95.9)
9 months	NE (NE, NE)	90.5 (85.2, 95.9)
12 months	NE (NE, NE)	90.5 (85.2, 95.9)
18 months	NE (NE, NE)	0.0 (NE, NE)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	0	12 (6.7)
Number of Subjects Censored, n (%)	88 (100.0)	167 (93.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 6.8*	0.5, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.023

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Yes

Statistics	Placebo + BSC N=88	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	93.9 (90.2, 97.6)
6 months	100.0 (100.0, 100.0)	91.1 (85.8, 96.4)
9 months	NE (NE, NE)	91.1 (85.8, 96.4)
12 months	NE (NE, NE)	91.1 (85.8, 96.4)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Number of Subjects with Events, n (%)	26 (18.3)	54 (19.5)
Number of Subjects Censored, n (%)	116 (81.7)	223 (80.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.27, NE)	12.22 (4.37, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.4*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.829 (0.244)
95% CI		(0.514, 1.337)
Log-rank p-value		0.432

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Kaplan-Meier Estimates at % (95% CI)		
3 months	80.1 (73.2, 87.1)	84.5 (80.1, 88.9)
6 months	80.1 (73.2, 87.1)	76.4 (70.3, 82.6)
9 months	80.1 (73.2, 87.1)	76.4 (70.3, 82.6)
12 months	80.1 (73.2, 87.1)	76.4 (70.3, 82.6)
18 months	NE (NE, NE)	50.2 (18.6, 81.7)
Median Follow-up Time (months)	2.79	3.48

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Number of Subjects with Events, n (%)	17 (12.0)	16 (5.8)
Number of Subjects Censored, n (%)	125 (88.0)	261 (94.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.6*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.358 (0.359)
95% CI		(0.177, 0.724)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Kaplan-Meier Estimates at % (95% CI)		
3 months	86.8 (80.9, 92.7)	96.2 (93.9, 98.5)
6 months	86.8 (80.9, 92.7)	92.4 (88.3, 96.5)
9 months	86.8 (80.9, 92.7)	92.4 (88.3, 96.5)
12 months	86.8 (80.9, 92.7)	92.4 (88.3, 96.5)
18 months	NE (NE, NE)	80.9 (59.4, 100.0)
Median Follow-up Time (months)	2.81	3.78

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Number of Subjects with Events, n (%)	4 (2.8)	17 (6.1)
Number of Subjects Censored, n (%)	138 (97.2)	260 (93.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (16.07, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.4*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.715 (0.564)
95% CI		(0.568, 5.183)
Log-rank p-value		0.319

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Kaplan-Meier Estimates at % (95% CI)		
3 months	96.9 (93.9, 99.9)	95.0 (92.3, 97.6)
6 months	96.9 (93.9, 99.9)	92.8 (89.2, 96.4)
9 months	96.9 (93.9, 99.9)	92.8 (89.2, 96.4)
12 months	96.9 (93.9, 99.9)	92.8 (89.2, 96.4)
18 months	NE (NE, NE)	69.6 (30.1, 100.0)
Median Follow-up Time (months)	2.83	3.68

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Number of Subjects with Events, n (%)	3 (2.1)	42 (15.2)
Number of Subjects Censored, n (%)	139 (97.9)	235 (84.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.3, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		7.133 (0.599)
95% CI		(2.204, 23.082)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Kaplan-Meier Estimates at % (95% CI)		
3 months	97.8 (95.4, 100.0)	84.8 (80.6, 89.1)
6 months	97.8 (95.4, 100.0)	84.8 (80.6, 89.1)
9 months	97.8 (95.4, 100.0)	84.8 (80.6, 89.1)
12 months	97.8 (95.4, 100.0)	79.5 (68.7, 90.4)
18 months	NE (NE, NE)	79.5 (68.7, 90.4)
Median Follow-up Time (months)	2.79	3.35

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Number of Subjects with Events, n (%)	2 (1.4)	39 (14.1)
Number of Subjects Censored, n (%)	140 (98.6)	238 (85.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		9.877 (0.726)
95% CI		(2.378, 41.020)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.5 (96.5, 100.0)	85.9 (81.8, 90.1)
6 months	98.5 (96.5, 100.0)	85.9 (81.8, 90.1)
9 months	98.5 (96.5, 100.0)	85.9 (81.8, 90.1)
12 months	98.5 (96.5, 100.0)	80.9 (70.5, 91.2)
18 months	NE (NE, NE)	80.9 (70.5, 91.2)
Median Follow-up Time (months)	2.79	3.35

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Number of Subjects with Events, n (%)	1 (0.7)	17 (6.1)
Number of Subjects Censored, n (%)	141 (99.3)	260 (93.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		6.095 (1.035)
95% CI		(0.802, 46.350)
Log-rank p-value		0.045

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.3 (97.9, 100.0)	95.9 (93.5, 98.3)
6 months	99.3 (97.9, 100.0)	91.0 (86.3, 95.8)
9 months	99.3 (97.9, 100.0)	89.1 (83.1, 95.1)
12 months	99.3 (97.9, 100.0)	89.1 (83.1, 95.1)
18 months	NE (NE, NE)	89.1 (83.1, 95.1)
Median Follow-up Time (months)	2.83	3.68

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3M
Summary of Time to Onset of TEAE by SOC/PT by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
No

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Number of Subjects with Events, n (%)	0	17 (6.1)
Number of Subjects Censored, n (%)	142 (100.0)	260 (93.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.014

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
TAS-102

Statistics	Placebo + BSC N=142	Fruquintinib + BSC N=277
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.9 (93.5, 98.3)
6 months	100.0 (100.0, 100.0)	91.0 (86.3, 95.8)
9 months	100.0 (100.0, 100.0)	89.1 (83.1, 95.1)
12 months	100.0 (100.0, 100.0)	89.1 (83.1, 95.1)
18 months	NE (NE, NE)	89.1 (83.1, 95.1)
Median Follow-up Time (months)	2.83	3.68

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Number of Subjects with Events, n (%)	27 (22.3)	45 (19.0)
Number of Subjects Censored, n (%)	94 (77.7)	192 (81.0)
Time to first TEAE (months)		
25% percentile (95% CI)	4.14 (1.94, NE)	11.04 (4.27, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.695 (0.248)
95% CI		(0.428, 1.130)
Log-rank p-value		0.170

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Kaplan-Meier Estimates at % (95% CI)		
3 months	77.7 (69.9, 85.5)	84.1 (79.2, 88.9)
6 months	70.5 (58.0, 83.0)	77.1 (70.6, 83.6)
9 months	70.5 (58.0, 83.0)	77.1 (70.6, 83.6)
12 months	70.5 (58.0, 83.0)	70.7 (57.3, 84.2)
18 months	NE (NE, NE)	70.7 (57.3, 84.2)
Median Follow-up Time (months)	2.83	3.32

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Number of Subjects with Events, n (%)	16 (13.2)	13 (5.5)
Number of Subjects Censored, n (%)	105 (86.8)	224 (94.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.19, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.8*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.321 (0.379)
95% CI		(0.153, 0.676)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Kaplan-Meier Estimates at % (95% CI)		
3 months	85.6 (78.7, 92.4)	95.5 (92.8, 98.3)
6 months	83.2 (75.2, 91.3)	93.0 (89.1, 96.9)
9 months	83.2 (75.2, 91.3)	93.0 (89.1, 96.9)
12 months	83.2 (75.2, 91.3)	93.0 (89.1, 96.9)
18 months	NE (NE, NE)	93.0 (89.1, 96.9)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Number of Subjects with Events, n (%)	4 (3.3)	25 (10.5)
Number of Subjects Censored, n (%)	117 (96.7)	212 (89.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		2.739 (0.541)
95% CI		(0.948, 7.915)
Log-rank p-value		0.048

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Kaplan-Meier Estimates at % (95% CI)		
3 months	96.3 (92.8, 99.9)	90.5 (86.6, 94.4)
6 months	96.3 (92.8, 99.9)	87.9 (83.0, 92.8)
9 months	96.3 (92.8, 99.9)	87.9 (83.0, 92.8)
12 months	96.3 (92.8, 99.9)	80.5 (66.1, 95.0)
18 months	NE (NE, NE)	80.5 (66.1, 95.0)
Median Follow-up Time (months)	2.83	3.52

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Number of Subjects with Events, n (%)	2 (1.7)	37 (15.6)
Number of Subjects Censored, n (%)	119 (98.3)	200 (84.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		9.456 (0.727)
95% CI		(2.275, 39.311)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.3 (96.0, 100.0)	84.4 (79.7, 89.1)
6 months	98.3 (96.0, 100.0)	84.4 (79.7, 89.1)
9 months	98.3 (96.0, 100.0)	84.4 (79.7, 89.1)
12 months	98.3 (96.0, 100.0)	77.9 (65.0, 90.9)
18 months	NE (NE, NE)	77.9 (65.0, 90.9)
Median Follow-up Time (months)	2.83	3.22

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Number of Subjects with Events, n (%)	2 (1.7)	34 (14.3)
Number of Subjects Censored, n (%)	119 (98.3)	203 (85.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		8.913 (0.728)
95% CI		(2.139, 37.136)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.3 (96.0, 100.0)	85.8 (81.3, 90.3)
6 months	98.3 (96.0, 100.0)	85.8 (81.3, 90.3)
9 months	98.3 (96.0, 100.0)	85.8 (81.3, 90.3)
12 months	98.3 (96.0, 100.0)	79.6 (67.3, 91.9)
18 months	NE (NE, NE)	79.6 (67.3, 91.9)
Median Follow-up Time (months)	2.83	3.22

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Number of Subjects with Events, n (%)	1 (0.8)	6 (2.5)
Number of Subjects Censored, n (%)	120 (99.2)	231 (97.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	NE (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.2*, 13.0*	0.8*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		2.052 (1.106)
95% CI		(0.235, 17.949)
Log-rank p-value		0.544

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.2 (97.5, 100.0)	98.2 (96.4, 100.0)
6 months	99.2 (97.5, 100.0)	96.9 (93.8, 100.0)
9 months	99.2 (97.5, 100.0)	96.9 (93.8, 100.0)
12 months	99.2 (97.5, 100.0)	96.9 (93.8, 100.0)
18 months	NE (NE, NE)	64.6 (12.9, 100.0)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Number of Subjects with Events, n (%)	0	4 (1.7)
Number of Subjects Censored, n (%)	121 (100.0)	233 (98.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.8*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.238

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
TAS-102

Statistics	Placebo + BSC N=121	Fruquintinib + BSC N=237
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	98.6 (97.0, 100.0)
6 months	100.0 (100.0, 100.0)	97.3 (94.3, 100.0)
9 months	100.0 (100.0, 100.0)	97.3 (94.3, 100.0)
12 months	100.0 (100.0, 100.0)	97.3 (94.3, 100.0)
18 months	NE (NE, NE)	97.3 (94.3, 100.0)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Number of Subjects with Events, n (%)	1 (5.6)	6 (15.0)
Number of Subjects Censored, n (%)	17 (94.4)	34 (85.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (1.91, NE)	NE (2.53, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.8*, 6.5*	0.7, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		2.582 (1.084)
95% CI		(0.308, 21.625)
Log-rank p-value		0.395

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Kaplan-Meier Estimates at % (95% CI)		
3 months	94.1 (82.9, 100.0)	84.4 (72.8, 95.9)
6 months	94.1 (82.9, 100.0)	84.4 (72.8, 95.9)
9 months	NE (NE, NE)	84.4 (72.8, 95.9)
12 months	NE (NE, NE)	84.4 (72.8, 95.9)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	4.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Number of Subjects with Events, n (%)	0	4 (10.0)
Number of Subjects Censored, n (%)	18 (100.0)	36 (90.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (3.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.8*, 6.5*	1.0, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.231

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	92.3 (83.9, 100.0)
6 months	100.0 (100.0, 100.0)	88.7 (78.2, 99.3)
9 months	NE (NE, NE)	88.7 (78.2, 99.3)
12 months	NE (NE, NE)	88.7 (78.2, 99.3)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	4.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Number of Subjects with Events, n (%)	1 (5.6)	1 (2.5)
Number of Subjects Censored, n (%)	17 (94.4)	39 (97.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (1.91, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.8*, 6.5*	0.7, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.372 (1.414)
95% CI		(0.023, 5.943)
Log-rank p-value		0.466

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Kaplan-Meier Estimates at % (95% CI)		
3 months	94.1 (82.9, 100.0)	97.5 (92.7, 100.0)
6 months	94.1 (82.9, 100.0)	97.5 (92.7, 100.0)
9 months	NE (NE, NE)	97.5 (92.7, 100.0)
12 months	NE (NE, NE)	97.5 (92.7, 100.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	4.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Number of Subjects with Events, n (%)	0	11 (27.5)
Number of Subjects Censored, n (%)	18 (100.0)	29 (72.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	4.70 (0.69, NE)
Median (95% CI)	NE (NE, NE)	NE (5.55, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.8*, 6.5*	0.1, 15.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.015

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	76.5 (63.1, 90.0)
6 months	100.0 (100.0, 100.0)	64.6 (45.6, 83.7)
9 months	NE (NE, NE)	64.6 (45.6, 83.7)
12 months	NE (NE, NE)	64.6 (45.6, 83.7)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.10

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Number of Subjects with Events, n (%)	0	10 (25.0)
Number of Subjects Censored, n (%)	18 (100.0)	30 (75.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	4.70 (0.69, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.8*, 6.5*	0.1, 15.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.019

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	76.5 (63.1, 90.0)
6 months	100.0 (100.0, 100.0)	71.1 (54.9, 87.3)
9 months	NE (NE, NE)	71.1 (54.9, 87.3)
12 months	NE (NE, NE)	71.1 (54.9, 87.3)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.10

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Number of Subjects with Events, n (%)	0	7 (17.5)
Number of Subjects Censored, n (%)	18 (100.0)	33 (82.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	7.33 (2.10, NE)
Median (95% CI)	NE (NE, NE)	NE (5.19, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (7.33, NE)
Min, Max	1.8*, 6.5*	0.5, 12.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.111

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	89.1 (79.0, 99.2)
6 months	100.0 (100.0, 100.0)	75.4 (55.9, 94.9)
9 months	NE (NE, NE)	56.6 (21.4, 91.7)
12 months	NE (NE, NE)	56.6 (21.4, 91.7)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.65

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Number of Subjects with Events, n (%)	0	7 (17.5)
Number of Subjects Censored, n (%)	18 (100.0)	33 (82.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	7.33 (2.10, NE)
Median (95% CI)	NE (NE, NE)	NE (5.19, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (7.33, NE)
Min, Max	1.8*, 6.5*	0.5, 12.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.111

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Regorafenib

Statistics	Placebo + BSC N=18	Fruquintinib + BSC N=40
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	89.1 (79.0, 99.2)
6 months	100.0 (100.0, 100.0)	75.4 (55.9, 94.9)
9 months	NE (NE, NE)	56.6 (21.4, 91.7)
12 months	NE (NE, NE)	56.6 (21.4, 91.7)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.65

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	16 (17.6)	40 (22.3)
Number of Subjects Censored, n (%)	75 (82.4)	139 (77.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.27, NE)	4.99 (3.58, NE)
Median (95% CI)	NE (NE, NE)	16.07 (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	16.07 (NE, NE)
Min, Max	0.4*, 8.4*	0.1, 16.1
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.826 (0.305)
95% CI		(0.454, 1.502)
Log-rank p-value		0.507

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	82.2 (74.0, 90.5)	85.4 (80.1, 90.7)
6 months	76.3 (62.9, 89.8)	72.4 (64.3, 80.5)
9 months	NE (NE, NE)	72.4 (64.3, 80.5)
12 months	NE (NE, NE)	72.4 (64.3, 80.5)
18 months	NE (NE, NE)	0.0 (NE, NE)
Median Follow-up Time (months)	2.79	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	12 (13.2)	10 (5.6)
Number of Subjects Censored, n (%)	79 (86.8)	169 (94.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.75, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 8.4*	0.6*, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.232 (0.461)
95% CI		(0.094, 0.573)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	87.0 (79.8, 94.2)	97.6 (95.3, 99.9)
6 months	80.8 (67.3, 94.3)	91.6 (85.9, 97.4)
9 months	NE (NE, NE)	91.6 (85.9, 97.4)
12 months	NE (NE, NE)	91.6 (85.9, 97.4)
18 months	NE (NE, NE)	76.4 (48.6, 100.0)
Median Follow-up Time (months)	2.79	4.37

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	4 (4.4)	9 (5.0)
Number of Subjects Censored, n (%)	87 (95.6)	170 (95.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (NE, NE)
Median (95% CI)	NE (NE, NE)	16.07 (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	16.07 (NE, NE)
Min, Max	0.4*, 8.4*	0.1, 16.1
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.781 (0.623)
95% CI		(0.230, 2.649)
Log-rank p-value		0.706

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.4 (90.9, 99.8)	96.4 (93.6, 99.2)
6 months	95.4 (90.9, 99.8)	94.1 (89.8, 98.4)
9 months	NE (NE, NE)	94.1 (89.8, 98.4)
12 months	NE (NE, NE)	94.1 (89.8, 98.4)
18 months	NE (NE, NE)	0.0 (NE, NE)
Median Follow-up Time (months)	2.79	3.94

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	2 (2.2)	19 (10.6)
Number of Subjects Censored, n (%)	89 (97.8)	160 (89.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.61, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.3, 8.4*	0.1, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		4.354 (0.746)
95% CI		(1.008, 18.804)
Log-rank p-value		0.032

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.9 (96.8, 100.0)	89.1 (84.5, 93.7)
6 months	92.3 (79.7, 100.0)	89.1 (84.5, 93.7)
9 months	NE (NE, NE)	89.1 (84.5, 93.7)
12 months	NE (NE, NE)	89.1 (84.5, 93.7)
18 months	NE (NE, NE)	89.1 (84.5, 93.7)
Median Follow-up Time (months)	2.79	3.78

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	0	18 (10.1)
Number of Subjects Censored, n (%)	91 (100.0)	161 (89.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 8.4*	0.1, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	89.7 (85.2, 94.2)
6 months	100.0 (100.0, 100.0)	89.7 (85.2, 94.2)
9 months	NE (NE, NE)	89.7 (85.2, 94.2)
12 months	NE (NE, NE)	89.7 (85.2, 94.2)
18 months	NE (NE, NE)	89.7 (85.2, 94.2)
Median Follow-up Time (months)	2.79	3.78

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	0	18 (10.1)
Number of Subjects Censored, n (%)	91 (100.0)	161 (89.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 8.4*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.011

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	91.7 (87.5, 95.9)
6 months	100.0 (100.0, 100.0)	86.5 (80.1, 92.9)
9 months	NE (NE, NE)	86.5 (80.1, 92.9)
12 months	NE (NE, NE)	86.5 (80.1, 92.9)
18 months	NE (NE, NE)	86.5 (80.1, 92.9)
Median Follow-up Time (months)	2.79	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3N
Summary of Time to Onset of TEAE by SOC/PT by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
TAS-102 and Regorafenib

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Number of Subjects with Events, n (%)	0	18 (10.1)
Number of Subjects Censored, n (%)	91 (100.0)	161 (89.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 8.4*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.011

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=91	Fruquintinib + BSC N=179
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	91.7 (87.5, 95.9)
6 months	100.0 (100.0, 100.0)	86.5 (80.1, 92.9)
9 months	NE (NE, NE)	86.5 (80.1, 92.9)
12 months	NE (NE, NE)	86.5 (80.1, 92.9)
18 months	NE (NE, NE)	86.5 (80.1, 92.9)
Median Follow-up Time (months)	2.79	3.75

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Number of Subjects with Events, n (%)	40 (25.8)	73 (21.8)
Number of Subjects Censored, n (%)	115 (74.2)	262 (78.2)
Time to first TEAE (months)		
25% percentile (95% CI)	2.40 (1.77, NE)	5.59 (3.58, 12.22)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Min, Max	0.4*, 6.8*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.617 (0.203)
95% CI		(0.415, 0.920)
Log-rank p-value		0.019

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Kaplan-Meier Estimates at % (95% CI)		
3 months	73.3 (65.9, 80.7)	82.4 (78.2, 86.6)
6 months	66.6 (55.3, 77.9)	72.8 (66.7, 78.8)
9 months	NE (NE, NE)	72.8 (66.7, 78.8)
12 months	NE (NE, NE)	67.2 (55.3, 79.1)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.69	3.25

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Number of Subjects with Events, n (%)	25 (16.1)	23 (6.9)
Number of Subjects Censored, n (%)	130 (83.9)	312 (93.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.19, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 6.8*	0.6*, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.262 (0.307)
95% CI		(0.144, 0.478)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Kaplan-Meier Estimates at % (95% CI)		
3 months	82.8 (76.3, 89.4)	95.2 (92.9, 97.6)
6 months	75.3 (63.6, 87.1)	90.7 (86.5, 94.8)
9 months	NE (NE, NE)	90.7 (86.5, 94.8)
12 months	NE (NE, NE)	90.7 (86.5, 94.8)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Number of Subjects with Events, n (%)	9 (5.8)	32 (9.6)
Number of Subjects Censored, n (%)	146 (94.2)	303 (90.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 6.8*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.350 (0.383)
95% CI		(0.638, 2.859)
Log-rank p-value		0.437

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Kaplan-Meier Estimates at % (95% CI)		
3 months	93.5 (89.4, 97.6)	91.0 (87.8, 94.2)
6 months	93.5 (89.4, 97.6)	88.6 (84.4, 92.8)
9 months	NE (NE, NE)	88.6 (84.4, 92.8)
12 months	NE (NE, NE)	81.8 (68.4, 95.2)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.73	3.38

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Number of Subjects with Events, n (%)	3 (1.9)	44 (13.1)
Number of Subjects Censored, n (%)	152 (98.1)	291 (86.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.61, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.3, 6.8*	0.0, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		6.982 (0.599)
95% CI		(2.159, 22.575)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.7 (96.9, 100.0)	87.1 (83.4, 90.7)
6 months	93.8 (84.2, 100.0)	86.1 (81.9, 90.2)
9 months	NE (NE, NE)	86.1 (81.9, 90.2)
12 months	NE (NE, NE)	78.2 (63.1, 93.3)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.76	3.22

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Number of Subjects with Events, n (%)	1 (0.6)	40 (11.9)
Number of Subjects Censored, n (%)	154 (99.4)	295 (88.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 6.8*	0.0, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		19.485 (1.013)
95% CI		(2.673, 142.011)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.3 (98.1, 100.0)	88.0 (84.5, 91.6)
6 months	99.3 (98.1, 100.0)	88.0 (84.5, 91.6)
9 months	NE (NE, NE)	88.0 (84.5, 91.6)
12 months	NE (NE, NE)	80.7 (66.6, 94.8)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.76	3.22

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Number of Subjects with Events, n (%)	1 (0.6)	21 (6.3)
Number of Subjects Censored, n (%)	154 (99.4)	314 (93.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (NE, NE)
Median (95% CI)	NE (NE, NE)	13.14 (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	13.14 (NE, NE)
Min, Max	0.4*, 6.8*	0.4, 13.1
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		7.609 (1.029)
95% CI		(1.012, 57.208)
Log-rank p-value		0.020

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.3 (98.1, 100.0)	94.9 (92.4, 97.3)
6 months	99.3 (98.1, 100.0)	91.4 (87.3, 95.5)
9 months	NE (NE, NE)	91.4 (87.3, 95.5)
12 months	NE (NE, NE)	91.4 (87.3, 95.5)
18 months	NE (NE, NE)	0.0 (NE, NE)
Median Follow-up Time (months)	2.79	3.38

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Number of Subjects with Events, n (%)	0	19 (5.7)
Number of Subjects Censored, n (%)	155 (100.0)	316 (94.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 6.8*	0.4, 16.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.007

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Yes

Statistics	Placebo + BSC N=155	Fruquintinib + BSC N=335
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.2 (92.8, 97.6)
6 months	100.0 (100.0, 100.0)	91.7 (87.6, 95.8)
9 months	NE (NE, NE)	91.7 (87.6, 95.8)
12 months	NE (NE, NE)	91.7 (87.6, 95.8)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.38

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Number of Subjects with Events, n (%)	4 (5.3)	18 (14.9)
Number of Subjects Censored, n (%)	71 (94.7)	103 (85.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (4.14, NE)	16.07 (4.37, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.3, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		2.007 (0.566)
95% CI		(0.662, 6.090)
Log-rank p-value		0.131

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.6 (90.7, 100.0)	90.6 (85.3, 95.9)
6 months	90.6 (79.9, 100.0)	83.4 (76.0, 90.8)
9 months	90.6 (79.9, 100.0)	83.4 (76.0, 90.8)
12 months	90.6 (79.9, 100.0)	83.4 (76.0, 90.8)
18 months	NE (NE, NE)	55.6 (10.8, 100.0)
Median Follow-up Time (months)	2.86	4.63

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Number of Subjects with Events, n (%)	3 (4.0)	4 (3.3)
Number of Subjects Censored, n (%)	72 (96.0)	117 (96.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.8, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.517 (0.792)
95% CI		(0.109, 2.442)
Log-rank p-value		0.436

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.6 (90.7, 100.0)	98.2 (95.8, 100.0)
6 months	95.6 (90.7, 100.0)	95.4 (90.9, 99.9)
9 months	95.6 (90.7, 100.0)	95.4 (90.9, 99.9)
12 months	95.6 (90.7, 100.0)	95.4 (90.9, 99.9)
18 months	NE (NE, NE)	95.4 (90.9, 99.9)
Median Follow-up Time (months)	2.86	4.67

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Number of Subjects with Events, n (%)	0	3 (2.5)
Number of Subjects Censored, n (%)	75 (100.0)	118 (97.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (16.07, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 13.0*	0.8*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.320

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	100.0 (100.0, 100.0)
6 months	100.0 (100.0, 100.0)	97.7 (94.6, 100.0)
9 months	100.0 (100.0, 100.0)	97.7 (94.6, 100.0)
12 months	100.0 (100.0, 100.0)	97.7 (94.6, 100.0)
18 months	NE (NE, NE)	65.1 (13.0, 100.0)
Median Follow-up Time (months)	2.86	4.67

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Number of Subjects with Events, n (%)	1 (1.3)	23 (19.0)
Number of Subjects Censored, n (%)	74 (98.7)	98 (81.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (2.00, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		13.088 (1.024)
95% CI		(1.760, 97.345)
Log-rank p-value		0.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.6 (96.0, 100.0)	81.6 (74.6, 88.5)
6 months	98.6 (96.0, 100.0)	80.0 (72.6, 87.5)
9 months	98.6 (96.0, 100.0)	80.0 (72.6, 87.5)
12 months	98.6 (96.0, 100.0)	80.0 (72.6, 87.5)
18 months	NE (NE, NE)	80.0 (72.6, 87.5)
Median Follow-up Time (months)	2.83	4.37

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Number of Subjects with Events, n (%)	1 (1.3)	22 (18.2)
Number of Subjects Censored, n (%)	74 (98.7)	99 (81.8)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (2.56, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		12.417 (1.025)
95% CI		(1.666, 92.559)
Log-rank p-value		0.002

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.6 (96.0, 100.0)	82.3 (75.5, 89.2)
6 months	98.6 (96.0, 100.0)	80.8 (73.4, 88.2)
9 months	98.6 (96.0, 100.0)	80.8 (73.4, 88.2)
12 months	98.6 (96.0, 100.0)	80.8 (73.4, 88.2)
18 months	NE (NE, NE)	80.8 (73.4, 88.2)
Median Follow-up Time (months)	2.83	4.37

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Number of Subjects with Events, n (%)	0	10 (8.3)
Number of Subjects Censored, n (%)	75 (100.0)	111 (91.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.080

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.8 (90.7, 98.9)
6 months	100.0 (100.0, 100.0)	89.6 (82.8, 96.5)
9 months	100.0 (100.0, 100.0)	86.8 (78.1, 95.5)
12 months	100.0 (100.0, 100.0)	86.8 (78.1, 95.5)
18 months	NE (NE, NE)	86.8 (78.1, 95.5)
Median Follow-up Time (months)	2.86	4.57

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3O
Summary of Time to Onset of TEAE by SOC/PT by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
No

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Number of Subjects with Events, n (%)	0	10 (8.3)
Number of Subjects Censored, n (%)	75 (100.0)	111 (91.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.080

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=75	Fruquintinib + BSC N=121
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.8 (90.7, 98.9)
6 months	100.0 (100.0, 100.0)	89.6 (82.8, 96.5)
9 months	100.0 (100.0, 100.0)	86.8 (78.1, 95.5)
12 months	100.0 (100.0, 100.0)	86.8 (78.1, 95.5)
18 months	NE (NE, NE)	86.8 (78.1, 95.5)
Median Follow-up Time (months)	2.86	4.57

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Number of Subjects with Events, n (%)	2 (18.2)	1 (4.8)
Number of Subjects Censored, n (%)	9 (81.8)	20 (95.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.69, NE)	NE (0.99, NE)
Median (95% CI)	NE (1.28, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Min, Max	0.7, 6.5*	1.0, 9.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.000 (>999)
95% CI		(0.000, NE)
Log-rank p-value		0.016

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Kaplan-Meier Estimates at % (95% CI)		
3 months	81.8 (59.0, 100.0)	95.2 (86.1, 100.0)
6 months	81.8 (59.0, 100.0)	95.2 (86.1, 100.0)
9 months	NE (NE, NE)	95.2 (86.1, 100.0)
12 months	NE (NE, NE)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.20	4.57

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Number of Subjects with Events, n (%)	2 (18.2)	1 (4.8)
Number of Subjects Censored, n (%)	9 (81.8)	20 (95.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (1.02, NE)	NE (0.99, NE)
Median (95% CI)	NE (1.28, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0, 6.5*	1.0, 9.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.000 (>999)
95% CI		(0.000, NE)
Log-rank p-value		0.016

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Kaplan-Meier Estimates at % (95% CI)		
3 months	81.8 (59.0, 100.0)	95.2 (86.1, 100.0)
6 months	81.8 (59.0, 100.0)	95.2 (86.1, 100.0)
9 months	NE (NE, NE)	95.2 (86.1, 100.0)
12 months	NE (NE, NE)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.20	4.57

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Number of Subjects with Events, n (%)	0	2 (9.5)
Number of Subjects Censored, n (%)	11 (100.0)	19 (90.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.20, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 6.5*	0.2, 9.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.683

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	90.5 (77.9, 100.0)
6 months	100.0 (100.0, 100.0)	90.5 (77.9, 100.0)
9 months	NE (NE, NE)	90.5 (77.9, 100.0)
12 months	NE (NE, NE)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.20	4.21

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Number of Subjects with Events, n (%)	0	2 (9.5)
Number of Subjects Censored, n (%)	11 (100.0)	19 (90.5)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.23, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 6.5*	0.2, 9.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.683

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	90.5 (77.9, 100.0)
6 months	100.0 (100.0, 100.0)	90.5 (77.9, 100.0)
9 months	NE (NE, NE)	90.5 (77.9, 100.0)
12 months	NE (NE, NE)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.20	4.21

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Number of Subjects with Events, n (%)	0	1 (4.8)
Number of Subjects Censored, n (%)	11 (100.0)	20 (95.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.46, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 6.5*	0.5, 9.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		NE

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.2 (86.1, 100.0)
6 months	100.0 (100.0, 100.0)	95.2 (86.1, 100.0)
9 months	NE (NE, NE)	95.2 (86.1, 100.0)
12 months	NE (NE, NE)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.20	4.21

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Number of Subjects with Events, n (%)	0	1 (4.8)
Number of Subjects Censored, n (%)	11 (100.0)	20 (95.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.46, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0*, 6.5*	0.5, 9.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		NE

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Yes

Statistics	Placebo + BSC N=11	Fruquintinib + BSC N=21
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.2 (86.1, 100.0)
6 months	100.0 (100.0, 100.0)	95.2 (86.1, 100.0)
9 months	NE (NE, NE)	95.2 (86.1, 100.0)
12 months	NE (NE, NE)	NE (NE, NE)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.20	4.21

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Number of Subjects with Events, n (%)	42 (19.2)	90 (20.7)
Number of Subjects Censored, n (%)	177 (80.8)	345 (79.3)
Time to first TEAE (months)		
25% percentile (95% CI)	4.14 (2.76, NE)	5.95 (4.27, 16.07)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.834 (0.191)
95% CI		(0.574, 1.212)
Log-rank p-value		0.360

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Kaplan-Meier Estimates at % (95% CI)		
3 months	80.7 (75.2, 86.2)	84.1 (80.6, 87.6)
6 months	74.7 (66.3, 83.1)	75.0 (70.0, 79.9)
9 months	74.7 (66.3, 83.1)	75.0 (70.0, 79.9)
12 months	74.7 (66.3, 83.1)	71.8 (64.2, 79.5)
18 months	NE (NE, NE)	53.6 (28.4, 78.9)
Median Follow-up Time (months)	2.83	3.55

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Number of Subjects with Events, n (%)	26 (11.9)	26 (6.0)
Number of Subjects Censored, n (%)	193 (88.1)	409 (94.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.6*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.349 (0.286)
95% CI		(0.199, 0.612)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Kaplan-Meier Estimates at % (95% CI)		
3 months	87.5 (82.8, 92.3)	96.1 (94.2, 98.0)
6 months	83.9 (77.1, 90.7)	91.9 (88.6, 95.2)
9 months	83.9 (77.1, 90.7)	91.9 (88.6, 95.2)
12 months	83.9 (77.1, 90.7)	91.9 (88.6, 95.2)
18 months	NE (NE, NE)	85.8 (73.8, 97.8)
Median Follow-up Time (months)	2.83	3.94

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Number of Subjects with Events, n (%)	9 (4.1)	35 (8.0)
Number of Subjects Censored, n (%)	210 (95.9)	400 (92.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (16.07, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.615 (0.378)
95% CI		(0.769, 3.390)
Log-rank p-value		0.186

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.5 (92.6, 98.4)	93.1 (90.6, 95.6)
6 months	95.5 (92.6, 98.4)	90.7 (87.5, 94.0)
9 months	95.5 (92.6, 98.4)	90.7 (87.5, 94.0)
12 months	95.5 (92.6, 98.4)	86.9 (79.0, 94.8)
18 months	NE (NE, NE)	69.5 (38.4, 100.0)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Number of Subjects with Events, n (%)	4 (1.8)	65 (14.9)
Number of Subjects Censored, n (%)	215 (98.2)	370 (85.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		8.498 (0.516)
95% CI		(3.091, 23.360)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.6 (97.0, 100.0)	85.3 (81.9, 88.7)
6 months	96.3 (91.6, 100.0)	84.1 (80.3, 87.8)
9 months	96.3 (91.6, 100.0)	84.1 (80.3, 87.8)
12 months	96.3 (91.6, 100.0)	80.7 (73.3, 88.1)
18 months	NE (NE, NE)	80.7 (73.3, 88.1)
Median Follow-up Time (months)	2.83	3.38

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Number of Subjects with Events, n (%)	2 (0.9)	60 (13.8)
Number of Subjects Censored, n (%)	217 (99.1)	375 (86.2)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		15.978 (0.719)
95% CI		(3.902, 65.427)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.0 (97.7, 100.0)	86.3 (83.0, 89.6)
6 months	99.0 (97.7, 100.0)	85.7 (82.3, 89.2)
9 months	99.0 (97.7, 100.0)	85.7 (82.3, 89.2)
12 months	99.0 (97.7, 100.0)	82.4 (75.3, 89.6)
18 months	NE (NE, NE)	82.4 (75.3, 89.6)
Median Follow-up Time (months)	2.83	3.48

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Number of Subjects with Events, n (%)	1 (0.5)	30 (6.9)
Number of Subjects Censored, n (%)	218 (99.5)	405 (93.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	NE (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.2*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		11.402 (1.020)
95% CI		(1.544, 84.208)
Log-rank p-value		0.003

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.5 (98.6, 100.0)	94.8 (92.7, 97.0)
6 months	99.5 (98.6, 100.0)	90.6 (86.9, 94.3)
9 months	99.5 (98.6, 100.0)	89.4 (85.1, 93.8)
12 months	99.5 (98.6, 100.0)	89.4 (85.1, 93.8)
18 months	NE (NE, NE)	67.1 (29.0, 100.0)
Median Follow-up Time (months)	2.83	3.71

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3P
Summary of Time to Onset of TEAE by SOC/PT by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
No

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Number of Subjects with Events, n (%)	0	28 (6.4)
Number of Subjects Censored, n (%)	219 (100.0)	407 (93.6)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Single

Statistics	Placebo + BSC N=219	Fruquintinib + BSC N=435
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.1 (93.0, 97.2)
6 months	100.0 (100.0, 100.0)	90.8 (87.1, 94.5)
9 months	100.0 (100.0, 100.0)	89.6 (85.3, 94.0)
12 months	100.0 (100.0, 100.0)	89.6 (85.3, 94.0)
18 months	NE (NE, NE)	89.6 (85.3, 94.0)
Median Follow-up Time (months)	2.83	3.71

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	5 (11.1)	8 (13.3)
Number of Subjects Censored, n (%)	40 (88.9)	52 (86.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.76, NE)	NE (3.12, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Min, Max	1.0, 13.0*	0.3, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.156 (0.642)
95% CI		(0.328, 4.067)
Log-rank p-value		0.784

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	87.6 (77.4, 97.9)	91.5 (84.3, 98.6)
6 months	87.6 (77.4, 97.9)	84.9 (75.1, 94.7)
9 months	87.6 (77.4, 97.9)	84.9 (75.1, 94.7)
12 months	87.6 (77.4, 97.9)	84.9 (75.1, 94.7)
18 months	NE (NE, NE)	84.9 (75.1, 94.7)
Median Follow-up Time (months)	2.83	4.65

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	4 (8.9)	1 (1.7)
Number of Subjects Censored, n (%)	41 (91.1)	59 (98.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0, 13.0*	1.5*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.214 (1.139)
95% CI		(0.023, 1.991)
Log-rank p-value		0.154

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	90.1 (80.9, 99.4)	98.1 (94.6, 100.0)
6 months	90.1 (80.9, 99.4)	98.1 (94.6, 100.0)
9 months	90.1 (80.9, 99.4)	98.1 (94.6, 100.0)
12 months	90.1 (80.9, 99.4)	98.1 (94.6, 100.0)
18 months	NE (NE, NE)	98.1 (94.6, 100.0)
Median Follow-up Time (months)	2.83	4.73

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	3 (5.0)
Number of Subjects Censored, n (%)	45 (100.0)	57 (95.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	1.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.306

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	98.3 (95.1, 100.0)
6 months	100.0 (100.0, 100.0)	94.0 (87.3, 100.0)
9 months	100.0 (100.0, 100.0)	94.0 (87.3, 100.0)
12 months	100.0 (100.0, 100.0)	94.0 (87.3, 100.0)
18 months	NE (NE, NE)	94.0 (87.3, 100.0)
Median Follow-up Time (months)	2.83	4.67

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	8 (13.3)
Number of Subjects Censored, n (%)	45 (100.0)	52 (86.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (1.87, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	0.3, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.015

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	86.6 (78.0, 95.2)
6 months	100.0 (100.0, 100.0)	86.6 (78.0, 95.2)
9 months	100.0 (100.0, 100.0)	86.6 (78.0, 95.2)
12 months	100.0 (100.0, 100.0)	86.6 (78.0, 95.2)
18 months	NE (NE, NE)	86.6 (78.0, 95.2)
Median Follow-up Time (months)	2.83	4.73

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	7 (11.7)
Number of Subjects Censored, n (%)	45 (100.0)	53 (88.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.028

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	88.2 (80.0, 96.4)
6 months	100.0 (100.0, 100.0)	88.2 (80.0, 96.4)
9 months	100.0 (100.0, 100.0)	88.2 (80.0, 96.4)
12 months	100.0 (100.0, 100.0)	88.2 (80.0, 96.4)
18 months	NE (NE, NE)	88.2 (80.0, 96.4)
Median Follow-up Time (months)	2.83	4.73

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	7 (11.7)
Number of Subjects Censored, n (%)	45 (100.0)	53 (88.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (5.19, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	0.5, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.054

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	91.5 (84.3, 98.6)
6 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
9 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
12 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
18 months	NE (NE, NE)	84.1 (72.1, 96.1)
Median Follow-up Time (months)	2.83	4.21

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	7 (11.7)
Number of Subjects Censored, n (%)	45 (100.0)	53 (88.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (5.19, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	0.5, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.054

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Single

Statistics	Placebo + BSC N=45	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	91.5 (84.3, 98.6)
6 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
9 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
12 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
18 months	NE (NE, NE)	84.1 (72.1, 96.1)
Median Follow-up Time (months)	2.83	4.21

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	39 (21.2)	83 (21.0)
Number of Subjects Censored, n (%)	145 (78.8)	313 (79.0)
Time to first TEAE (months)		
25% percentile (95% CI)	3.75 (2.27, NE)	5.95 (3.91, 16.07)
Median (95% CI)	NE (NE, NE)	16.07 (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 8.4*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.748 (0.199)
95% CI		(0.507, 1.105)
Log-rank p-value		0.153

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	78.9 (72.7, 85.1)	83.6 (79.8, 87.3)
6 months	71.2 (61.0, 81.4)	74.4 (69.1, 79.7)
9 months	NE (NE, NE)	74.4 (69.1, 79.7)
12 months	NE (NE, NE)	70.7 (62.0, 79.4)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.38

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	24 (13.0)	26 (6.6)
Number of Subjects Censored, n (%)	160 (87.0)	370 (93.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.75, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.6*, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.346 (0.294)
95% CI		(0.194, 0.616)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	86.4 (81.0, 91.8)	95.7 (93.7, 97.8)
6 months	81.8 (73.7, 89.9)	91.0 (87.4, 94.7)
9 months	NE (NE, NE)	91.0 (87.4, 94.7)
12 months	NE (NE, NE)	91.0 (87.4, 94.7)
18 months	NE (NE, NE)	83.4 (68.8, 98.0)
Median Follow-up Time (months)	2.81	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	9 (4.9)	32 (8.1)
Number of Subjects Censored, n (%)	175 (95.1)	364 (91.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 8.4*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.291 (0.383)
95% CI		(0.609, 2.736)
Log-rank p-value		0.475

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	94.5 (91.0, 98.0)	92.7 (90.0, 95.4)
6 months	94.5 (91.0, 98.0)	90.8 (87.3, 94.2)
9 months	NE (NE, NE)	90.8 (87.3, 94.2)
12 months	NE (NE, NE)	86.2 (77.0, 95.5)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.65

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	4 (2.2)	59 (14.9)
Number of Subjects Censored, n (%)	180 (97.8)	337 (85.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.0, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		6.353 (0.518)
95% CI		(2.304, 17.521)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.3 (96.4, 100.0)	85.4 (81.9, 88.9)
6 months	95.3 (89.3, 100.0)	84.0 (80.0, 88.0)
9 months	NE (NE, NE)	84.0 (80.0, 88.0)
12 months	NE (NE, NE)	79.8 (70.9, 88.7)
18 months	NE (NE, NE)	79.8 (70.9, 88.7)
Median Follow-up Time (months)	2.79	3.25

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	2 (1.1)	55 (13.9)
Number of Subjects Censored, n (%)	182 (98.9)	341 (86.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.0, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		12.055 (0.720)
95% CI		(2.938, 49.471)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.9 (97.3, 100.0)	86.2 (82.8, 89.7)
6 months	98.9 (97.3, 100.0)	85.6 (81.9, 89.2)
9 months	NE (NE, NE)	85.6 (81.9, 89.2)
12 months	NE (NE, NE)	81.5 (73.0, 90.0)
18 months	NE (NE, NE)	81.5 (73.0, 90.0)
Median Follow-up Time (months)	2.79	3.29

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	1 (0.5)	24 (6.1)
Number of Subjects Censored, n (%)	183 (99.5)	372 (93.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.2*, 8.4*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		7.957 (1.026)
95% CI		(1.066, 59.408)
Log-rank p-value		0.014

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.4 (98.4, 100.0)	95.4 (93.2, 97.5)
6 months	99.4 (98.4, 100.0)	91.9 (88.3, 95.6)
9 months	NE (NE, NE)	90.6 (86.1, 95.0)
12 months	NE (NE, NE)	90.6 (86.1, 95.0)
18 months	NE (NE, NE)	45.3 (0.0, 100.0)
Median Follow-up Time (months)	2.83	3.60

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3Q
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Multiple

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	0	22 (5.6)
Number of Subjects Censored, n (%)	184 (100.0)	374 (94.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.005

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Single

Statistics	Placebo + BSC N=184	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.6 (93.5, 97.7)
6 months	100.0 (100.0, 100.0)	92.2 (88.6, 95.8)
9 months	NE (NE, NE)	90.8 (86.4, 95.3)
12 months	NE (NE, NE)	90.8 (86.4, 95.3)
18 months	NE (NE, NE)	90.8 (86.4, 95.3)
Median Follow-up Time (months)	2.83	3.60

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	4 (9.5)	8 (13.3)
Number of Subjects Censored, n (%)	38 (90.5)	52 (86.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.30, NE)	NE (3.12, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Min, Max	1.0, 13.0*	0.3, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.291 (0.705)
95% CI		(0.324, 5.141)
Log-rank p-value		0.694

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	89.7 (80.1, 99.3)	91.5 (84.3, 98.6)
6 months	89.7 (80.1, 99.3)	84.9 (75.1, 94.7)
9 months	89.7 (80.1, 99.3)	84.9 (75.1, 94.7)
12 months	89.7 (80.1, 99.3)	84.9 (75.1, 94.7)
18 months	NE (NE, NE)	84.9 (75.1, 94.7)
Median Follow-up Time (months)	2.83	4.65

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	3 (7.1)	1 (1.7)
Number of Subjects Censored, n (%)	39 (92.9)	59 (98.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.0, 13.0*	1.5*, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.234 (1.179)
95% CI		(0.023, 2.366)
Log-rank p-value		0.201

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	92.5 (84.3, 100.0)	98.1 (94.6, 100.0)
6 months	92.5 (84.3, 100.0)	98.1 (94.6, 100.0)
9 months	92.5 (84.3, 100.0)	98.1 (94.6, 100.0)
12 months	92.5 (84.3, 100.0)	98.1 (94.6, 100.0)
18 months	NE (NE, NE)	98.1 (94.6, 100.0)
Median Follow-up Time (months)	2.83	4.73

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	3 (5.0)
Number of Subjects Censored, n (%)	42 (100.0)	57 (95.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	1.0, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.342

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	98.3 (95.1, 100.0)
6 months	100.0 (100.0, 100.0)	94.0 (87.3, 100.0)
9 months	100.0 (100.0, 100.0)	94.0 (87.3, 100.0)
12 months	100.0 (100.0, 100.0)	94.0 (87.3, 100.0)
18 months	NE (NE, NE)	94.0 (87.3, 100.0)
Median Follow-up Time (months)	2.83	4.67

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	8 (13.3)
Number of Subjects Censored, n (%)	42 (100.0)	52 (86.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (1.87, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	0.3, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.017

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	86.6 (78.0, 95.2)
6 months	100.0 (100.0, 100.0)	86.6 (78.0, 95.2)
9 months	100.0 (100.0, 100.0)	86.6 (78.0, 95.2)
12 months	100.0 (100.0, 100.0)	86.6 (78.0, 95.2)
18 months	NE (NE, NE)	86.6 (78.0, 95.2)
Median Follow-up Time (months)	2.83	4.73

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	7 (11.7)
Number of Subjects Censored, n (%)	42 (100.0)	53 (88.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.031

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	88.2 (80.0, 96.4)
6 months	100.0 (100.0, 100.0)	88.2 (80.0, 96.4)
9 months	100.0 (100.0, 100.0)	88.2 (80.0, 96.4)
12 months	100.0 (100.0, 100.0)	88.2 (80.0, 96.4)
18 months	NE (NE, NE)	88.2 (80.0, 96.4)
Median Follow-up Time (months)	2.83	4.73

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	7 (11.7)
Number of Subjects Censored, n (%)	42 (100.0)	53 (88.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (5.19, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	0.5, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.062

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	91.5 (84.3, 98.6)
6 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
9 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
12 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
18 months	NE (NE, NE)	84.1 (72.1, 96.1)
Median Follow-up Time (months)	2.83	4.21

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Number of Subjects with Events, n (%)	0	7 (11.7)
Number of Subjects Censored, n (%)	42 (100.0)	53 (88.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (5.19, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	1.3*, 13.0*	0.5, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.062

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Single

Statistics	Placebo + BSC N=42	Fruquintinib + BSC N=60
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	91.5 (84.3, 98.6)
6 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
9 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
12 months	100.0 (100.0, 100.0)	84.1 (72.1, 96.1)
18 months	NE (NE, NE)	84.1 (72.1, 96.1)
Median Follow-up Time (months)	2.83	4.21

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	40 (21.3)	83 (21.0)
Number of Subjects Censored, n (%)	148 (78.7)	313 (79.0)
Time to first TEAE (months)		
25% percentile (95% CI)	3.75 (2.27, NE)	5.95 (3.91, 16.07)
Median (95% CI)	NE (NE, NE)	16.07 (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 8.4*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.749 (0.197)
95% CI		(0.509, 1.102)
Log-rank p-value		0.149

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	78.6 (72.4, 84.8)	83.6 (79.8, 87.3)
6 months	71.3 (61.3, 81.2)	74.4 (69.1, 79.7)
9 months	NE (NE, NE)	74.4 (69.1, 79.7)
12 months	NE (NE, NE)	70.7 (62.0, 79.4)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.79	3.38

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	25 (13.3)	26 (6.6)
Number of Subjects Censored, n (%)	163 (86.7)	370 (93.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.75, NE)	NE (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.6*, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.339 (0.291)
95% CI		(0.192, 0.600)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	85.9 (80.5, 91.3)	95.7 (93.7, 97.8)
6 months	81.5 (73.5, 89.4)	91.0 (87.4, 94.7)
9 months	NE (NE, NE)	91.0 (87.4, 94.7)
12 months	NE (NE, NE)	91.0 (87.4, 94.7)
18 months	NE (NE, NE)	83.4 (68.8, 98.0)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	9 (4.8)	32 (8.1)
Number of Subjects Censored, n (%)	179 (95.2)	364 (91.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (16.07, NE)
Min, Max	0.2*, 8.4*	0.1, 17.5*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.343 (0.383)
95% CI		(0.634, 2.845)
Log-rank p-value		0.415

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	94.7 (91.2, 98.1)	92.7 (90.0, 95.4)
6 months	94.7 (91.2, 98.1)	90.8 (87.3, 94.2)
9 months	NE (NE, NE)	90.8 (87.3, 94.2)
12 months	NE (NE, NE)	86.2 (77.0, 95.5)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.81	3.65

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	4 (2.1)	59 (14.9)
Number of Subjects Censored, n (%)	184 (97.9)	337 (85.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.0, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		6.503 (0.518)
95% CI		(2.358, 17.933)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.3 (96.5, 100.0)	85.4 (81.9, 88.9)
6 months	95.5 (89.6, 100.0)	84.0 (80.0, 88.0)
9 months	NE (NE, NE)	84.0 (80.0, 88.0)
12 months	NE (NE, NE)	79.8 (70.9, 88.7)
18 months	NE (NE, NE)	79.8 (70.9, 88.7)
Median Follow-up Time (months)	2.81	3.25

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	2 (1.1)	55 (13.9)
Number of Subjects Censored, n (%)	186 (98.9)	341 (86.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.0, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		12.348 (0.720)
95% CI		(3.009, 50.668)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.9 (97.3, 100.0)	86.2 (82.8, 89.7)
6 months	98.9 (97.3, 100.0)	85.6 (81.9, 89.2)
9 months	NE (NE, NE)	85.6 (81.9, 89.2)
12 months	NE (NE, NE)	81.5 (73.0, 90.0)
18 months	NE (NE, NE)	81.5 (73.0, 90.0)
Median Follow-up Time (months)	2.81	3.29

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	1 (0.5)	24 (6.1)
Number of Subjects Censored, n (%)	187 (99.5)	372 (93.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.2*, 8.4*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		8.085 (1.026)
95% CI		(1.083, 60.369)
Log-rank p-value		0.013

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.5 (98.4, 100.0)	95.4 (93.2, 97.5)
6 months	99.5 (98.4, 100.0)	91.9 (88.3, 95.6)
9 months	NE (NE, NE)	90.6 (86.1, 95.0)
12 months	NE (NE, NE)	90.6 (86.1, 95.0)
18 months	NE (NE, NE)	45.3 (0.0, 100.0)
Median Follow-up Time (months)	2.83	3.60

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3R
Summary of Time to Onset of TEAE by SOC/PT by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Multiple

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Number of Subjects with Events, n (%)	0	22 (5.6)
Number of Subjects Censored, n (%)	188 (100.0)	374 (94.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.4, 18.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.005

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
< 18.5

Statistics	Placebo + BSC N=188	Fruquintinib + BSC N=396
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.6 (93.5, 97.7)
6 months	100.0 (100.0, 100.0)	92.2 (88.6, 95.8)
9 months	NE (NE, NE)	90.8 (86.4, 95.3)
12 months	NE (NE, NE)	90.8 (86.4, 95.3)
18 months	NE (NE, NE)	90.8 (86.4, 95.3)
Median Follow-up Time (months)	2.83	3.60

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Number of Subjects with Events, n (%)	4 (28.6)	11 (55.0)
Number of Subjects Censored, n (%)	10 (71.4)	9 (45.0)
Time to first TEAE (months)		
25% percentile (95% CI)	1.94 (0.39, NE)	1.54 (0.49, 2.66)
Median (95% CI)	NE (0.99, NE)	2.69 (1.51, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (2.69, NE)

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Min, Max	0.4, 4.1*	0.5, 12.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.299 (0.624)
95% CI		(0.383, 4.412)
Log-rank p-value		0.795

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Kaplan-Meier Estimates at % (95% CI)		
3 months	68.8 (42.7, 94.8)	47.0 (24.1, 69.9)
6 months	NE (NE, NE)	35.2 (8.9, 61.6)
9 months	NE (NE, NE)	35.2 (8.9, 61.6)
12 months	NE (NE, NE)	35.2 (8.9, 61.6)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.38	2.60

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Number of Subjects with Events, n (%)	2 (14.3)	4 (20.0)
Number of Subjects Censored, n (%)	12 (85.7)	16 (80.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.69, NE)	5.03 (1.51, NE)
Median (95% CI)	NE (1.94, NE)	NE (5.03, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.7, 4.1*	0.6*, 12.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.462 (1.006)
95% CI		(0.064, 3.314)
Log-rank p-value		0.459

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Kaplan-Meier Estimates at % (95% CI)		
3 months	82.5 (60.0, 100.0)	82.1 (63.6, 100.0)
6 months	NE (NE, NE)	70.4 (43.8, 96.9)
9 months	NE (NE, NE)	70.4 (43.8, 96.9)
12 months	NE (NE, NE)	70.4 (43.8, 96.9)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.38	2.92

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Number of Subjects with Events, n (%)	1 (7.1)	3 (15.0)
Number of Subjects Censored, n (%)	13 (92.9)	17 (85.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (0.99, NE)	NE (0.49, NE)
Median (95% CI)	NE (NE, NE)	NE (2.69, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.9*, 4.1*	0.5, 12.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.665 (1.182)
95% CI		(0.164, 16.883)
Log-rank p-value		0.725

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Kaplan-Meier Estimates at % (95% CI)		
3 months	92.3 (77.8, 100.0)	79.4 (57.8, 100.0)
6 months	NE (NE, NE)	79.4 (57.8, 100.0)
9 months	NE (NE, NE)	79.4 (57.8, 100.0)
12 months	NE (NE, NE)	79.4 (57.8, 100.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.38	2.68

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Number of Subjects with Events, n (%)	0	4 (20.0)
Number of Subjects Censored, n (%)	14 (100.0)	16 (80.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.03, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.9*, 4.1*	0.0, 12.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.117

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	79.4 (61.4, 97.4)
6 months	NE (NE, NE)	79.4 (61.4, 97.4)
9 months	NE (NE, NE)	79.4 (61.4, 97.4)
12 months	NE (NE, NE)	79.4 (61.4, 97.4)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.38	2.73

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Number of Subjects with Events, n (%)	0	4 (20.0)
Number of Subjects Censored, n (%)	14 (100.0)	16 (80.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (0.03, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.9*, 4.1*	0.0, 12.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.117

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	79.4 (61.4, 97.4)
6 months	NE (NE, NE)	79.4 (61.4, 97.4)
9 months	NE (NE, NE)	79.4 (61.4, 97.4)
12 months	NE (NE, NE)	79.4 (61.4, 97.4)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.38	2.73

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Number of Subjects with Events, n (%)	0	1 (5.0)
Number of Subjects Censored, n (%)	14 (100.0)	19 (95.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (1.84, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.9*, 4.1*	0.6*, 12.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.386

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.1 (82.9, 100.0)
6 months	NE (NE, NE)	94.1 (82.9, 100.0)
9 months	NE (NE, NE)	94.1 (82.9, 100.0)
12 months	NE (NE, NE)	94.1 (82.9, 100.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.38	2.92

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Number of Subjects with Events, n (%)	0	1 (5.0)
Number of Subjects Censored, n (%)	14 (100.0)	19 (95.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (1.84, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.9*, 4.1*	0.6*, 12.3*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.386

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
< 18.5

Statistics	Placebo + BSC N=14	Fruquintinib + BSC N=20
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.1 (82.9, 100.0)
6 months	NE (NE, NE)	94.1 (82.9, 100.0)
9 months	NE (NE, NE)	94.1 (82.9, 100.0)
12 months	NE (NE, NE)	94.1 (82.9, 100.0)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.38	2.92

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Number of Subjects with Events, n (%)	15 (19.7)	32 (22.9)
Number of Subjects Censored, n (%)	61 (80.3)	108 (77.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.27, NE)	5.59 (3.32, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.1, 15.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.002 (0.324)
95% CI		(0.531, 1.892)
Log-rank p-value		0.976

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Kaplan-Meier Estimates at % (95% CI)		
3 months	77.4 (67.1, 87.6)	82.9 (76.6, 89.3)
6 months	77.4 (67.1, 87.6)	70.1 (59.9, 80.2)
9 months	NE (NE, NE)	70.1 (59.9, 80.2)
12 months	NE (NE, NE)	70.1 (59.9, 80.2)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.30

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Number of Subjects with Events, n (%)	9 (11.8)	12 (8.6)
Number of Subjects Censored, n (%)	67 (88.2)	128 (91.4)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (2.60, NE)	12.22 (12.22, NE)
Median (95% CI)	NE (NE, NE)	NE (12.22, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.8, 15.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.534 (0.472)
95% CI		(0.212, 1.345)
Log-rank p-value		0.267

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Kaplan-Meier Estimates at % (95% CI)		
3 months	84.5 (75.0, 94.0)	94.8 (91.0, 98.5)
6 months	84.5 (75.0, 94.0)	88.3 (81.0, 95.6)
9 months	NE (NE, NE)	88.3 (81.0, 95.6)
12 months	NE (NE, NE)	88.3 (81.0, 95.6)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Number of Subjects with Events, n (%)	3 (3.9)	8 (5.7)
Number of Subjects Censored, n (%)	73 (96.1)	132 (94.3)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.2, 15.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.602 (0.686)
95% CI		(0.417, 6.150)
Log-rank p-value		0.494

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Kaplan-Meier Estimates at % (95% CI)		
3 months	95.5 (90.5, 100.0)	94.9 (91.2, 98.6)
6 months	95.5 (90.5, 100.0)	92.5 (86.6, 98.4)
9 months	NE (NE, NE)	92.5 (86.6, 98.4)
12 months	NE (NE, NE)	92.5 (86.6, 98.4)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.70

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Number of Subjects with Events, n (%)	0	20 (14.3)
Number of Subjects Censored, n (%)	76 (100.0)	120 (85.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	10.35 (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (10.35, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.1, 15.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	86.8 (81.1, 92.5)
6 months	100.0 (100.0, 100.0)	84.6 (77.6, 91.6)
9 months	NE (NE, NE)	84.6 (77.6, 91.6)
12 months	NE (NE, NE)	74.0 (53.7, 94.4)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.32

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Number of Subjects with Events, n (%)	0	18 (12.9)
Number of Subjects Censored, n (%)	76 (100.0)	122 (87.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (10.35, NE)
Median (95% CI)	NE (NE, NE)	NE (10.35, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.1, 15.6*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	87.5 (81.9, 93.1)
6 months	100.0 (100.0, 100.0)	87.5 (81.9, 93.1)
9 months	NE (NE, NE)	87.5 (81.9, 93.1)
12 months	NE (NE, NE)	76.6 (55.9, 97.2)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.32

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Number of Subjects with Events, n (%)	1 (1.3)	10 (7.1)
Number of Subjects Censored, n (%)	75 (98.7)	130 (92.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (7.33, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.5, 12.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		2.981 (1.064)
95% CI		(0.370, 24.004)
Log-rank p-value		0.323

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.6 (96.0, 100.0)	95.4 (91.9, 99.0)
6 months	98.6 (96.0, 100.0)	89.8 (82.5, 97.0)
9 months	NE (NE, NE)	85.3 (74.3, 96.3)
12 months	NE (NE, NE)	85.3 (74.3, 96.3)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.35

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Number of Subjects with Events, n (%)	0	10 (7.1)
Number of Subjects Censored, n (%)	76 (100.0)	130 (92.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (7.33, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.2*, 8.4*	0.5, 12.9*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.109

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
>= 18.5 to < 24

Statistics	Placebo + BSC N=76	Fruquintinib + BSC N=140
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	95.4 (91.9, 99.0)
6 months	100.0 (100.0, 100.0)	89.8 (82.5, 97.0)
9 months	NE (NE, NE)	85.3 (74.3, 96.3)
12 months	NE (NE, NE)	85.3 (74.3, 96.3)
18 months	NE (NE, NE)	NE (NE, NE)
Median Follow-up Time (months)	2.83	3.35

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Number of Subjects with Events, n (%)	24 (17.8)	46 (16.1)
Number of Subjects Censored, n (%)	111 (82.2)	239 (83.9)
Time to first TEAE (months)		
25% percentile (95% CI)	4.14 (3.19, NE)	16.07 (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.667 (0.260)
95% CI		(0.401, 1.109)
Log-rank p-value		0.129

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Kaplan-Meier Estimates at % (95% CI)		
3 months	83.7 (77.3, 90.1)	88.2 (84.4, 92.1)
6 months	73.3 (60.4, 86.1)	81.1 (75.8, 86.4)
9 months	73.3 (60.4, 86.1)	81.1 (75.8, 86.4)
12 months	73.3 (60.4, 86.1)	75.3 (63.3, 87.3)
18 months	NE (NE, NE)	60.3 (32.2, 88.4)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Number of Subjects with Events, n (%)	16 (11.9)	11 (3.9)
Number of Subjects Censored, n (%)	119 (88.1)	274 (96.1)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (3.75, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.7, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		0.235 (0.409)
95% CI		(0.106, 0.524)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Kaplan-Meier Estimates at % (95% CI)		
3 months	89.2 (83.8, 94.6)	97.4 (95.6, 99.3)
6 months	83.0 (73.2, 92.9)	95.0 (91.9, 98.0)
9 months	83.0 (73.2, 92.9)	95.0 (91.9, 98.0)
12 months	83.0 (73.2, 92.9)	95.0 (91.9, 98.0)
18 months	NE (NE, NE)	95.0 (91.9, 98.0)
Median Follow-up Time (months)	2.83	4.24

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Number of Subjects with Events, n (%)	5 (3.7)	23 (8.1)
Number of Subjects Censored, n (%)	130 (96.3)	262 (91.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	16.07 (11.04, NE)
Median (95% CI)	NE (NE, NE)	NE (16.07, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		1.661 (0.501)
95% CI		(0.622, 4.438)
Log-rank p-value		0.299

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Kaplan-Meier Estimates at % (95% CI)		
3 months	96.0 (92.6, 99.5)	93.6 (90.7, 96.6)
6 months	96.0 (92.6, 99.5)	91.2 (87.4, 95.0)
9 months	96.0 (92.6, 99.5)	91.2 (87.4, 95.0)
12 months	96.0 (92.6, 99.5)	84.7 (71.9, 97.4)
18 months	NE (NE, NE)	67.7 (36.3, 99.1)
Median Follow-up Time (months)	2.83	3.94

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Number of Subjects with Events, n (%)	3 (2.2)	43 (15.1)
Number of Subjects Censored, n (%)	132 (97.8)	242 (84.9)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.3, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		6.514 (0.599)
95% CI		(2.013, 21.074)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Kaplan-Meier Estimates at % (95% CI)		
3 months	98.5 (96.4, 100.0)	84.9 (80.7, 89.1)
6 months	94.2 (85.7, 100.0)	84.1 (79.6, 88.5)
9 months	94.2 (85.7, 100.0)	84.1 (79.6, 88.5)
12 months	94.2 (85.7, 100.0)	84.1 (79.6, 88.5)
18 months	NE (NE, NE)	84.1 (79.6, 88.5)
Median Follow-up Time (months)	2.83	3.68

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Number of Subjects with Events, n (%)	1 (0.7)	40 (14.0)
Number of Subjects Censored, n (%)	134 (99.3)	245 (86.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.1, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		18.286 (1.014)
95% CI		(2.508, 133.314)
Log-rank p-value		<.001

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Kaplan-Meier Estimates at % (95% CI)		
3 months	99.2 (97.7, 100.0)	86.0 (81.9, 90.1)
6 months	99.2 (97.7, 100.0)	85.2 (80.8, 89.5)
9 months	99.2 (97.7, 100.0)	85.2 (80.8, 89.5)
12 months	99.2 (97.7, 100.0)	85.2 (80.8, 89.5)
18 months	NE (NE, NE)	85.2 (80.8, 89.5)
Median Follow-up Time (months)	2.83	3.68

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Number of Subjects with Events, n (%)	0	20 (7.0)
Number of Subjects Censored, n (%)	135 (100.0)	265 (93.0)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	13.14 (13.14, NE)
Median (95% CI)	NE (NE, NE)	NE (13.14, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (13.14, NE)
Min, Max	0.4*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.015

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.4 (91.7, 97.2)
6 months	100.0 (100.0, 100.0)	90.7 (86.2, 95.2)
9 months	100.0 (100.0, 100.0)	90.7 (86.2, 95.2)
12 months	100.0 (100.0, 100.0)	90.7 (86.2, 95.2)
18 months	NE (NE, NE)	68.0 (29.4, 100.0)
Median Follow-up Time (months)	2.83	3.75

* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.5.3S
Summary of Time to Onset of TEAE by SOC/PT by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3 in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
>= 24

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Number of Subjects with Events, n (%)	0	18 (6.3)
Number of Subjects Censored, n (%)	135 (100.0)	267 (93.7)
Time to first TEAE (months)		
25% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Median (95% CI)	NE (NE, NE)	NE (NE, NE)
75% percentile (95% CI)	NE (NE, NE)	NE (NE, NE)
Min, Max	0.4*, 13.0*	0.4, 20.1*
Comparison (Fruquintinib + BSC vs Placebo + BSC)		
Hazard Ratio (SE)		NE (NE)
95% CI		(NE, NE)
Log-rank p-value		0.019

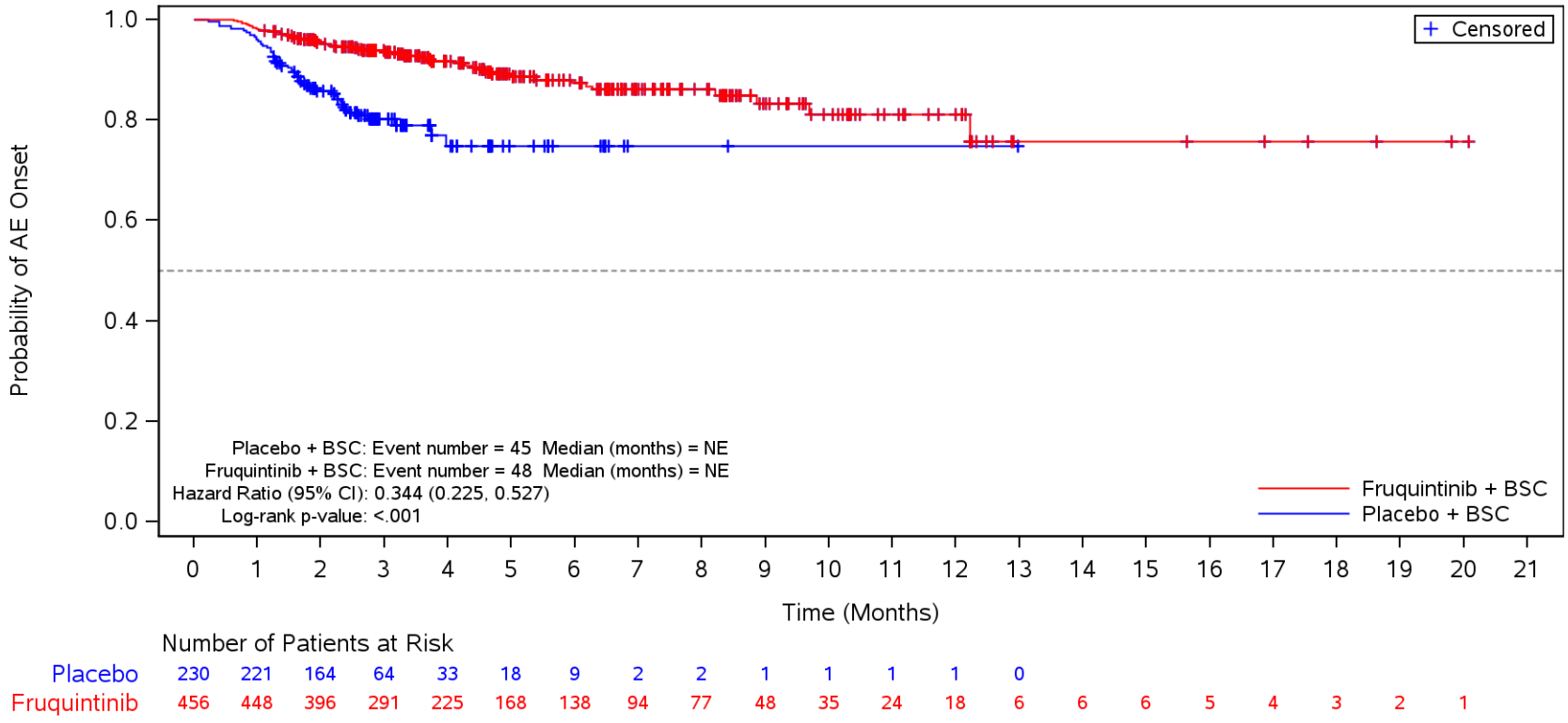
* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Table 35.1.1.6.3.3C
Summary of Time to Onset of TEAE by SOC/PT by Sex
Safety Population
Serious TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Female

Statistics	Placebo + BSC N=135	Fruquintinib + BSC N=285
Kaplan-Meier Estimates at % (95% CI)		
3 months	100.0 (100.0, 100.0)	94.8 (92.1, 97.5)
6 months	100.0 (100.0, 100.0)	91.0 (86.5, 95.5)
9 months	100.0 (100.0, 100.0)	91.0 (86.5, 95.5)
12 months	100.0 (100.0, 100.0)	91.0 (86.5, 95.5)
18 months	NE (NE, NE)	91.0 (86.5, 95.5)
Median Follow-up Time (months)	2.83	3.75

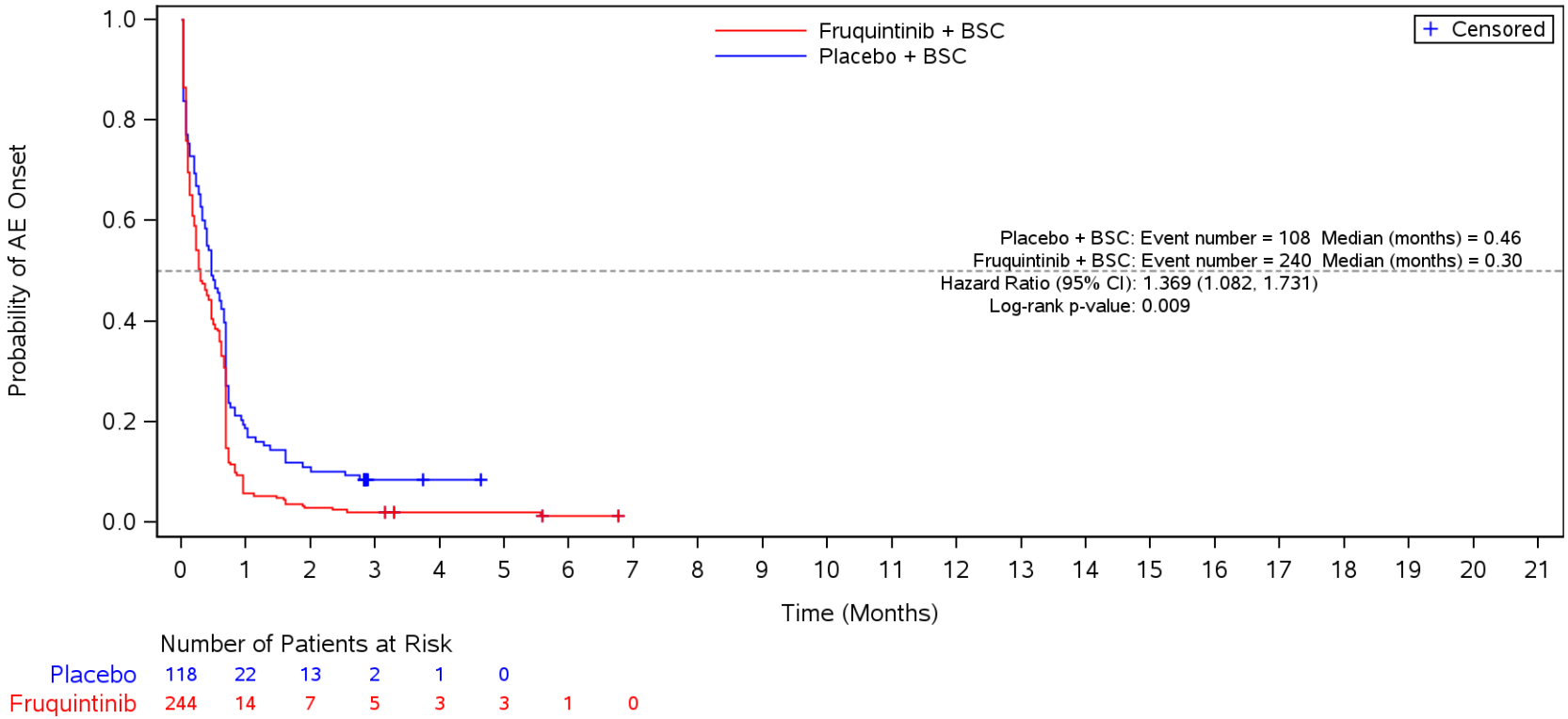
* indicates censored value.
Note: The adjusted HR and its 95% CI are estimated using unstratified Cox's proportional hazards model in which the randomization schedule stratification factors and treatment group are covariates.
P-value is calculated using the stratified log-rank test.
Follow-up time (months) is calculated as ((last dose date + 37 days) – first dose date + 1)/30.4375.
Note: Percentages are based on the number of subjects in each treatment group unless otherwise specified.
BSC=Best supportive care; CI=Confidence interval; HR=Hazard ratio; Max=Maximum; Min=Minimum; SE=Standard error.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
TEAE
<65 years



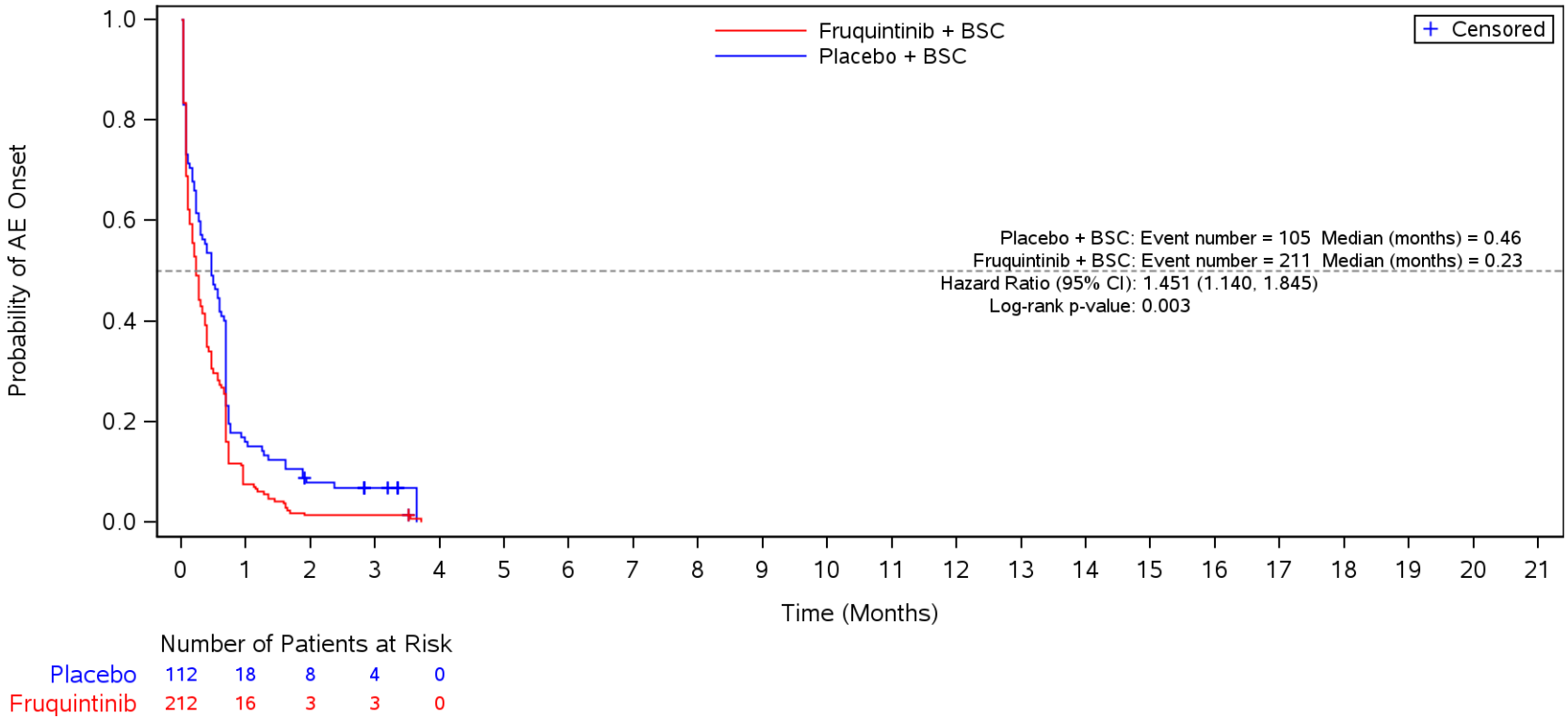
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
TEAE
<65 years



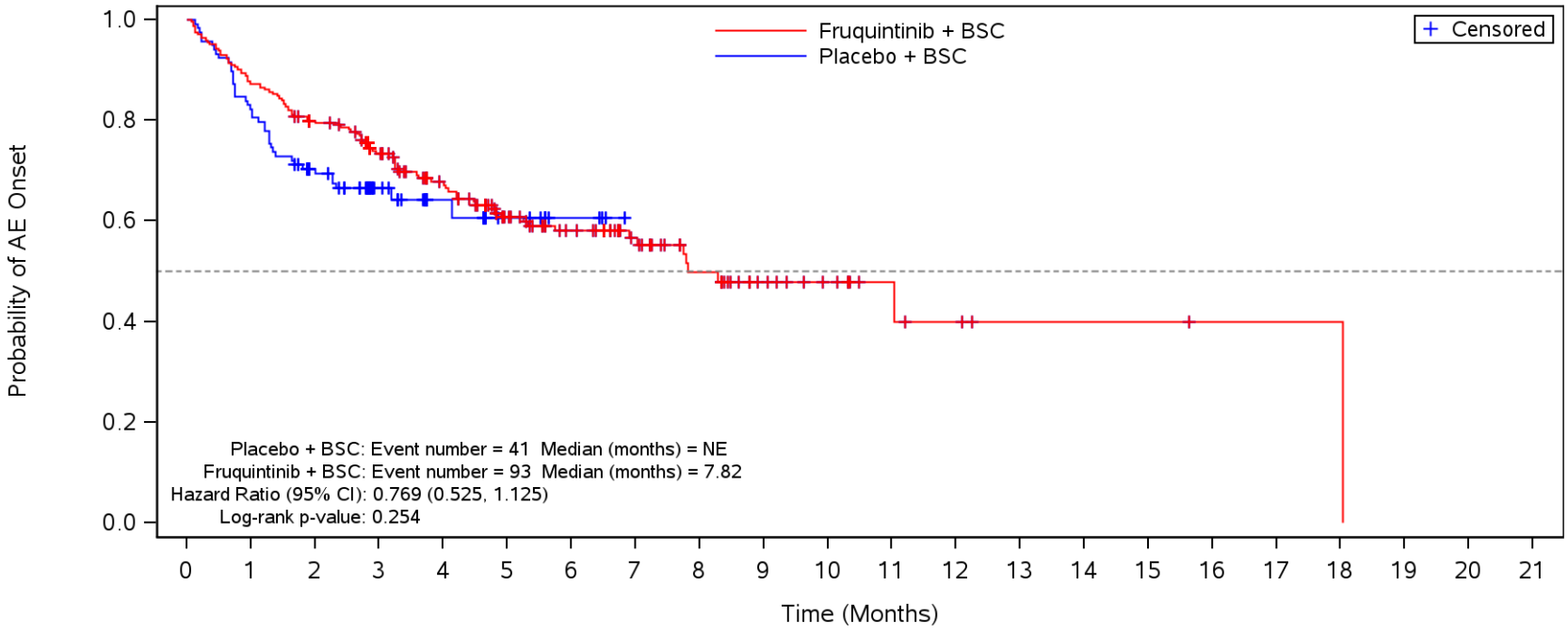
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
TEAE
>=65 years



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
Serious TEAE
<65 years

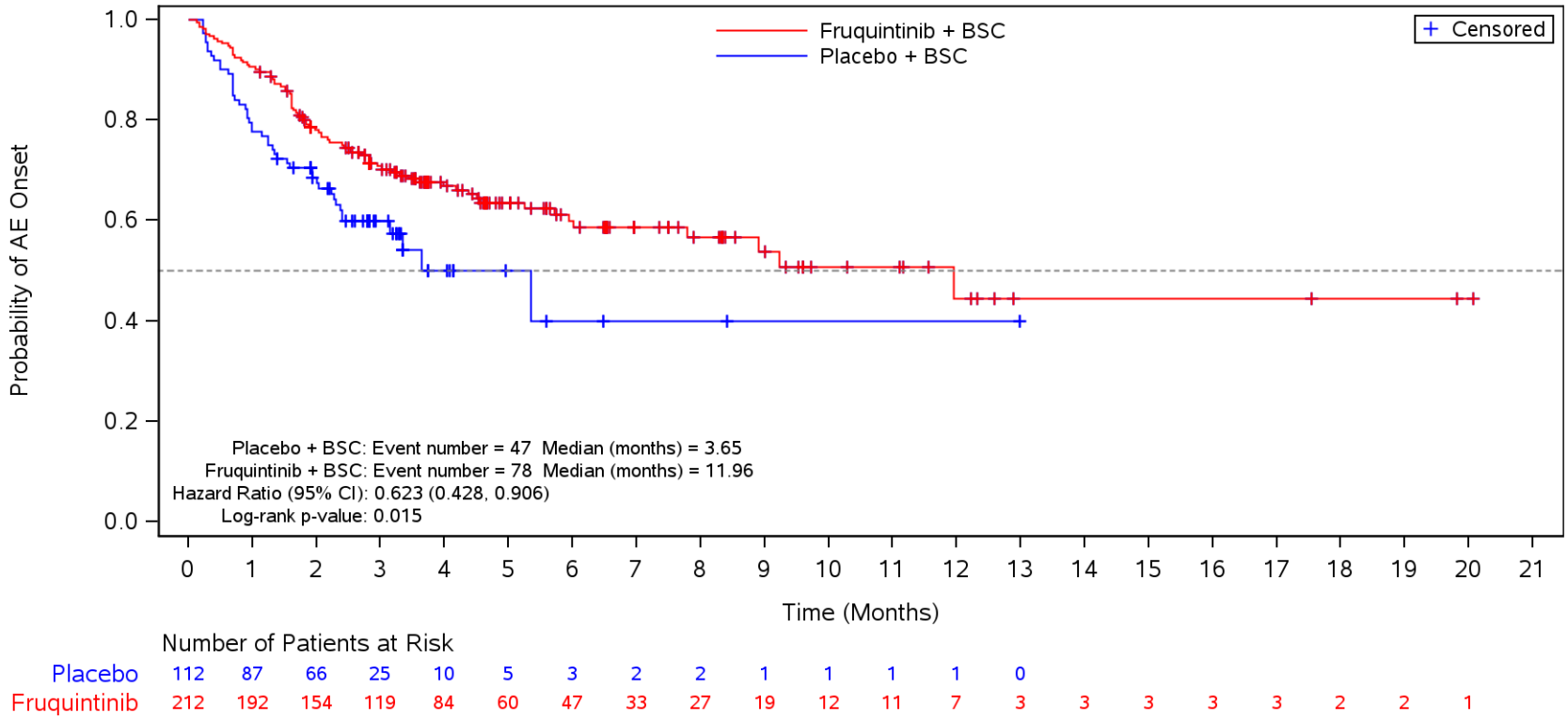


Number of Patients at Risk

Placebo	118	97	74	32	18	10	4	0												
Fruquintinib	244	213	188	126	102	74	59	40	27	16	11	6	4	2	2	2	1	1	1	0

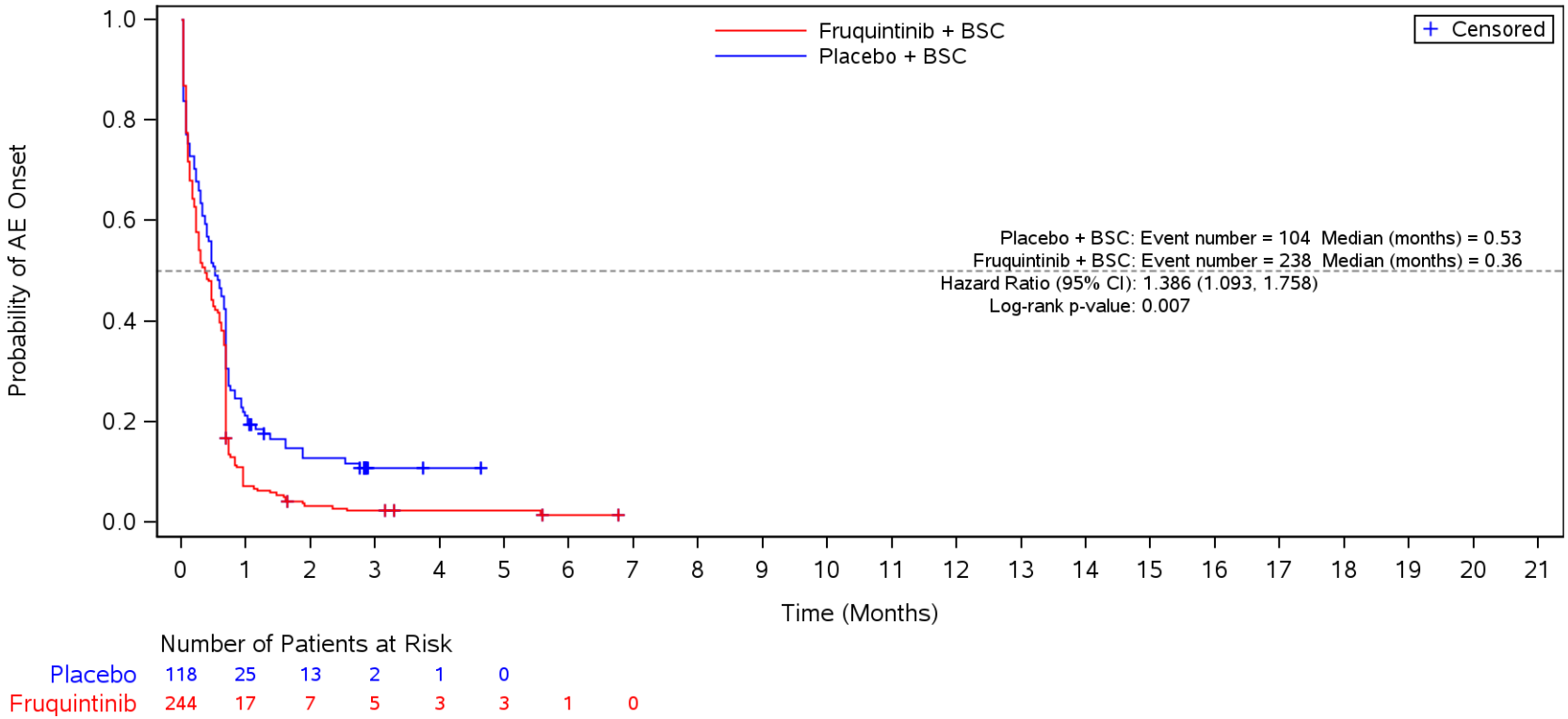
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
Serious TEAE
>=65 years



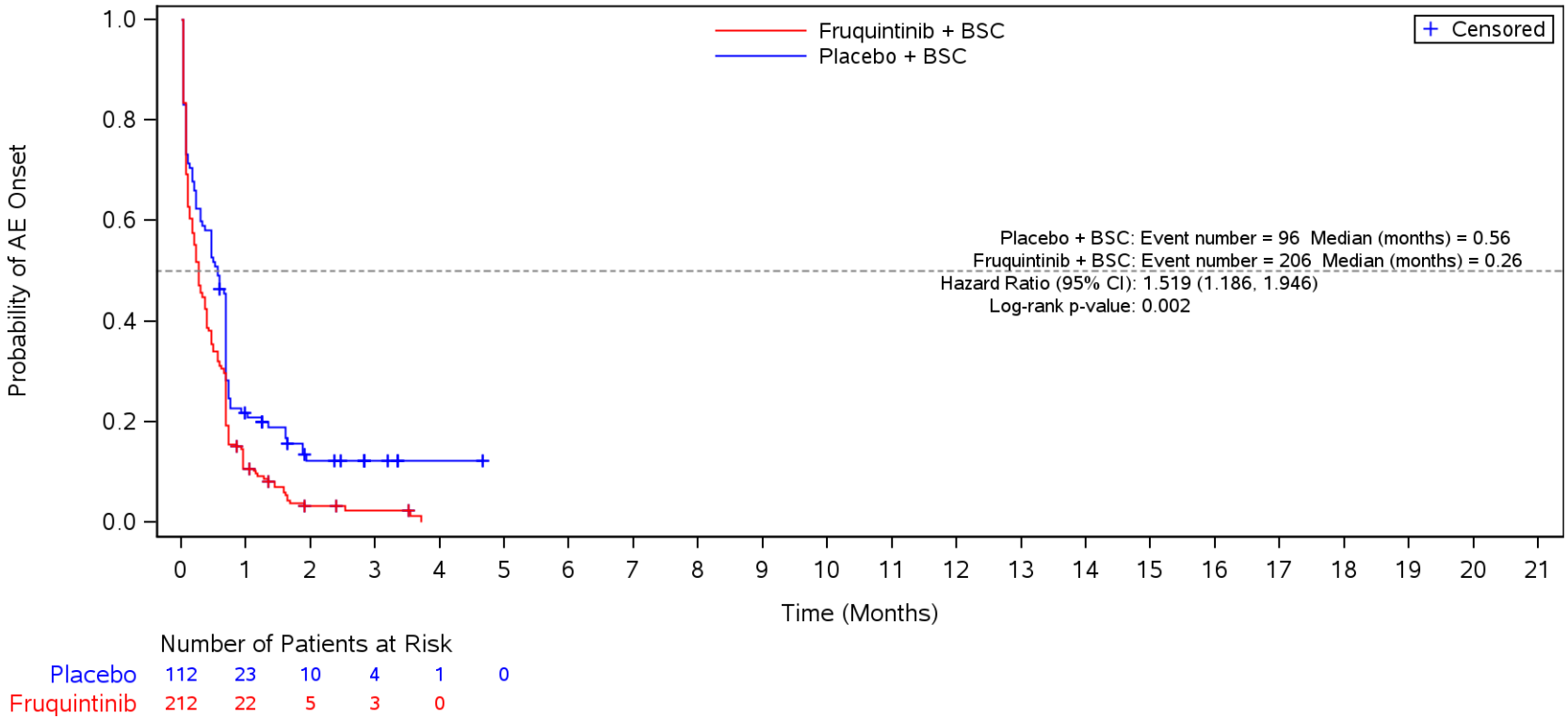
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
TEAE ≤ CTCAE Grade 2
<65 years



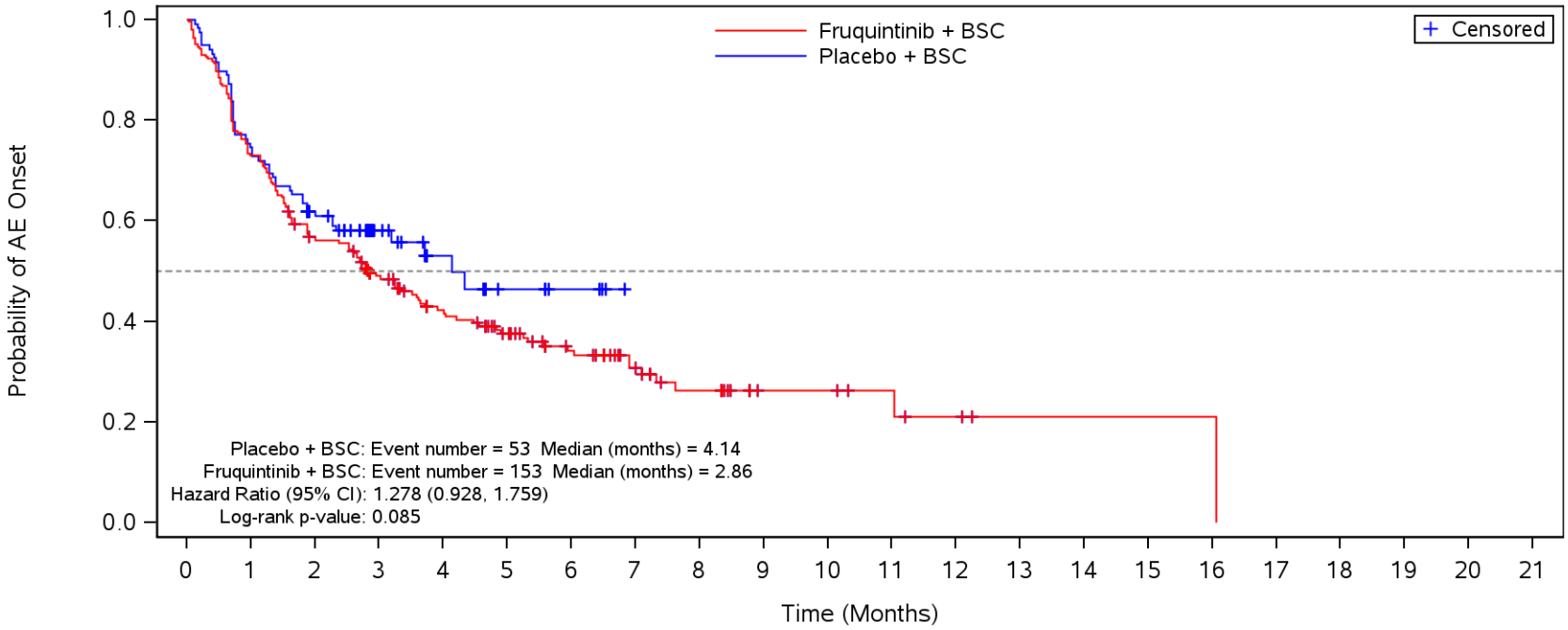
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
TEAE ≤ CTCAE Grade 2
>=65 years



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
TEAE ≥ CTCAE Grade 3
<65 years

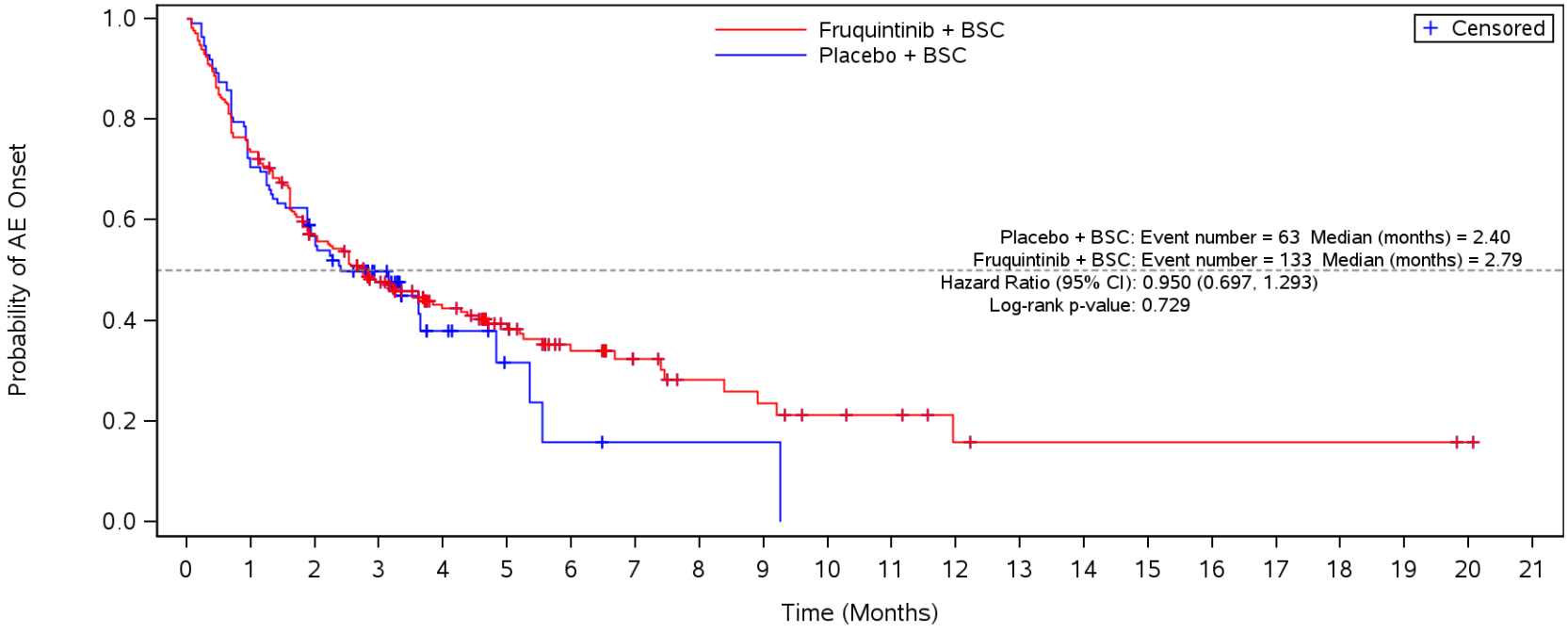


Number of Patients at Risk

Placebo	118	88	67	27	16	7	4	0										
Fruquintinib	244	178	136	84	65	51	38	23	16	7	7	5	3	1	1	1	1	0

BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
TEAE ≥ CTCAE Grade 3
>=65 years

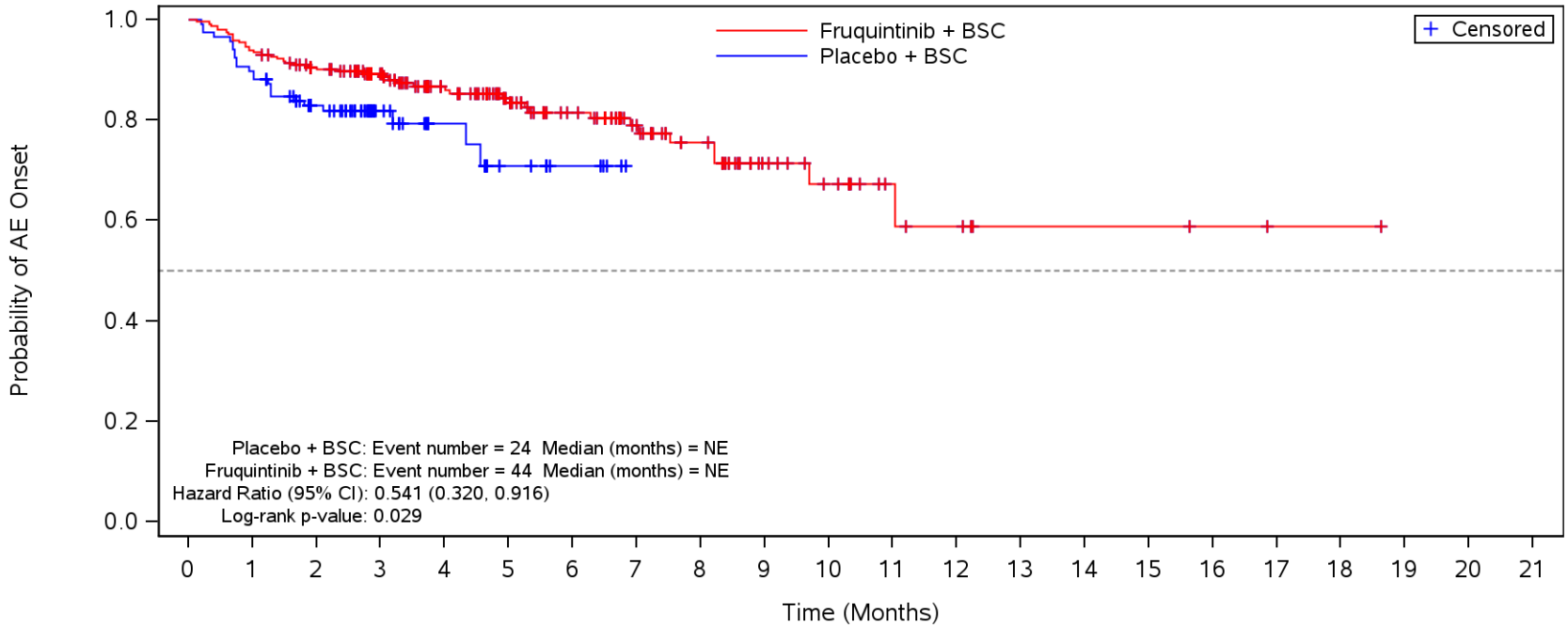


Number of Patients at Risk

Placebo	112	79	57	24	9	4	2	1	1	1	0										
Fruquintinib	212	156	115	83	59	40	27	17	12	10	7	6	3	2	2	2	2	2	2	2	1

BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
Discontinuation due to TEAE
<65 years

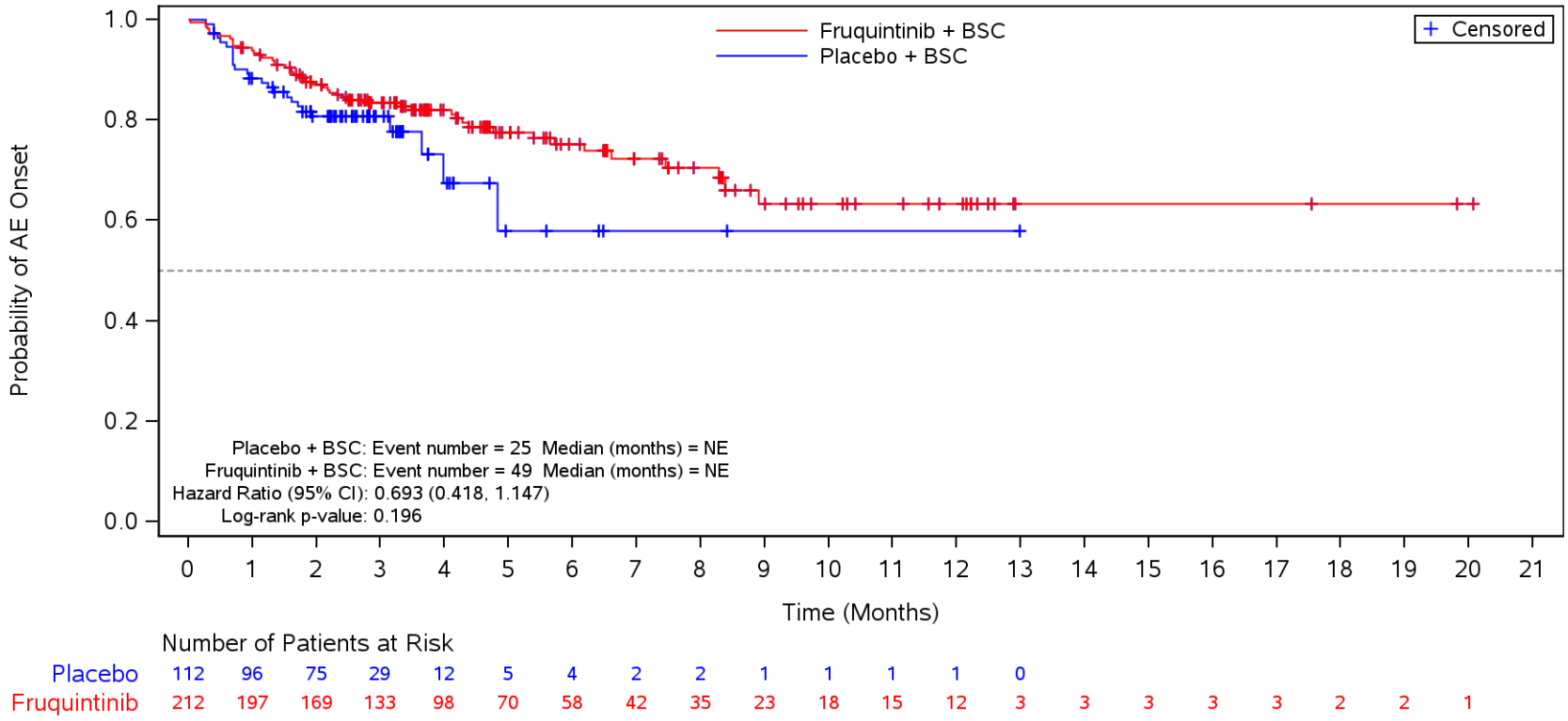


Number of Patients at Risk

Placebo	118	106	81	34	19	10	5	0												
Fruquintinib	244	229	211	149	120	94	75	50	38	21	15	8	6	3	3	3	2	1	1	0

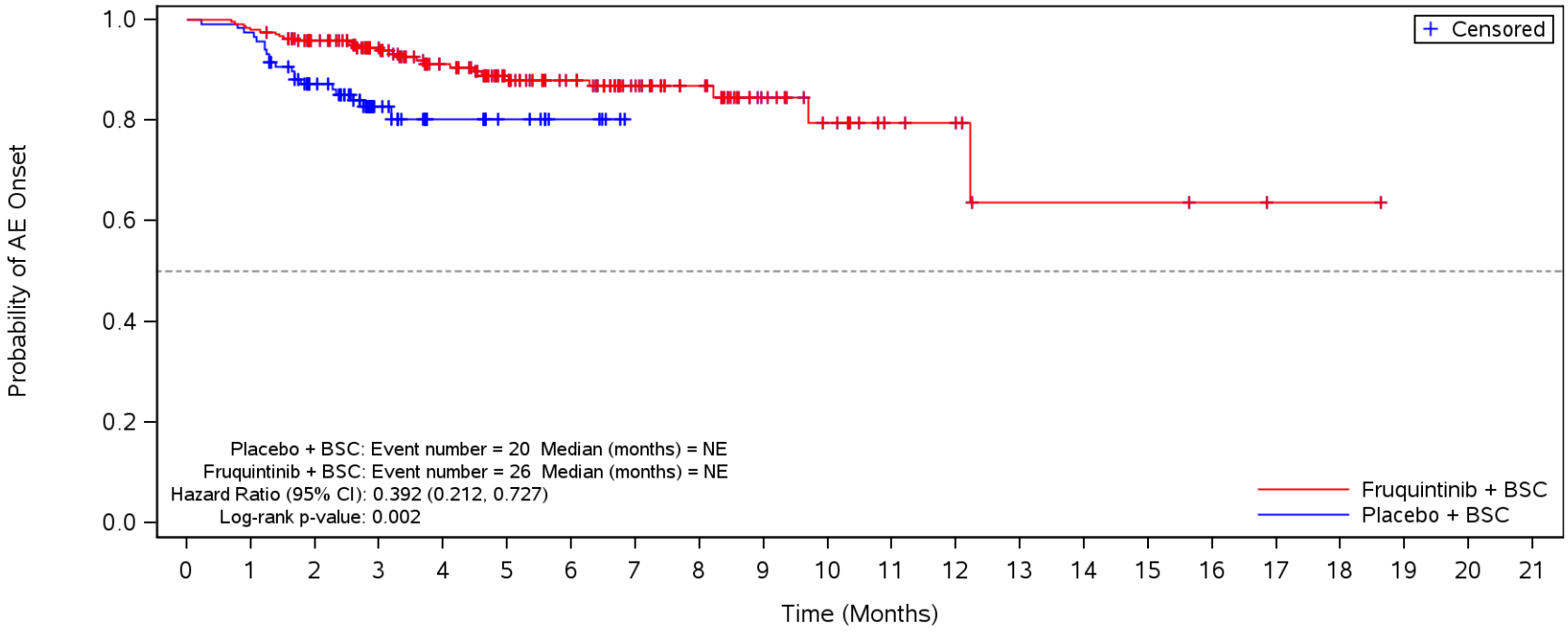
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
Discontinuation due to TEAE
>=65 years



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Age
Safety Population
Deaths (Grade 5 TEAEs)
<65 years

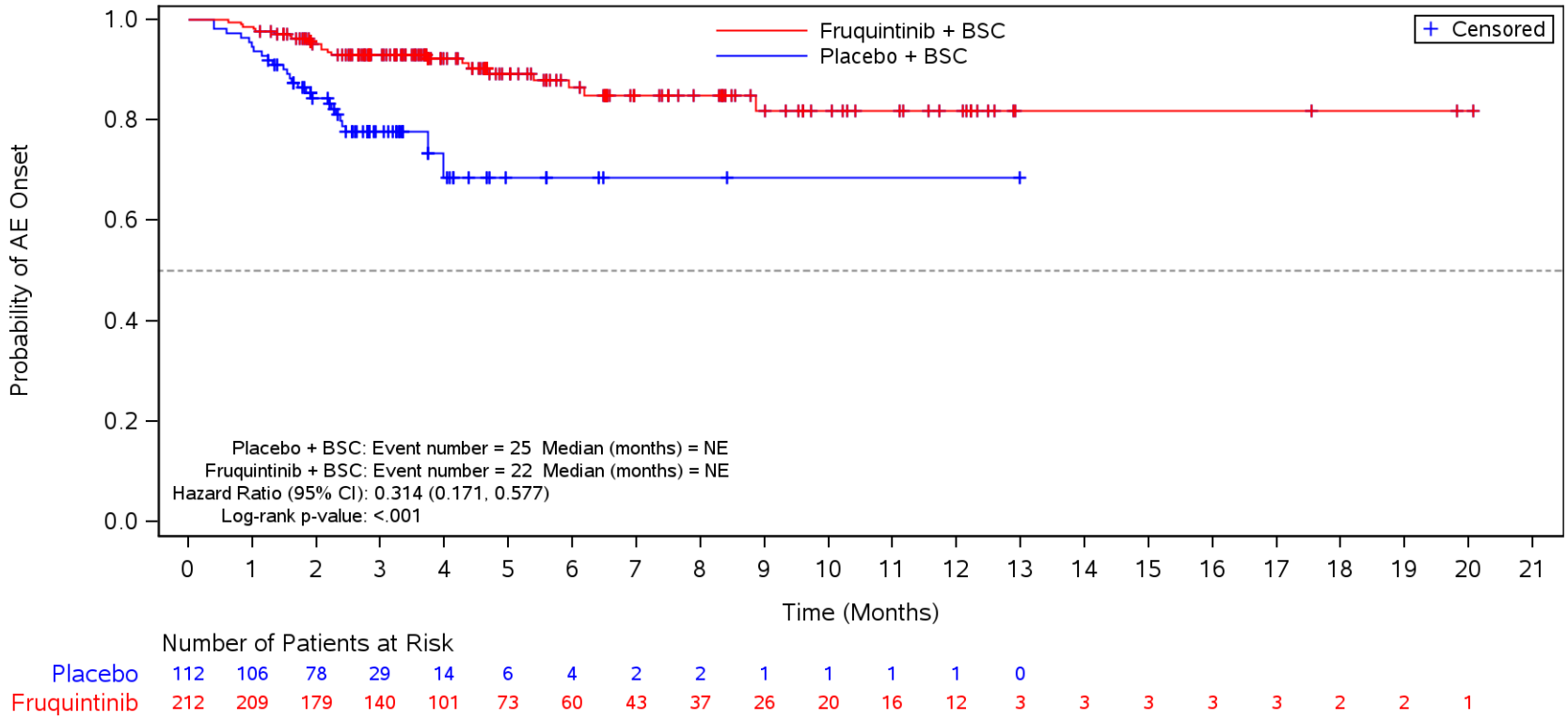


Number of Patients at Risk

Placebo	118	115	86	35	19	12	5	0												
Fruquintinib	244	239	217	151	124	95	78	51	40	22	15	8	6	3	3	3	2	1	1	0

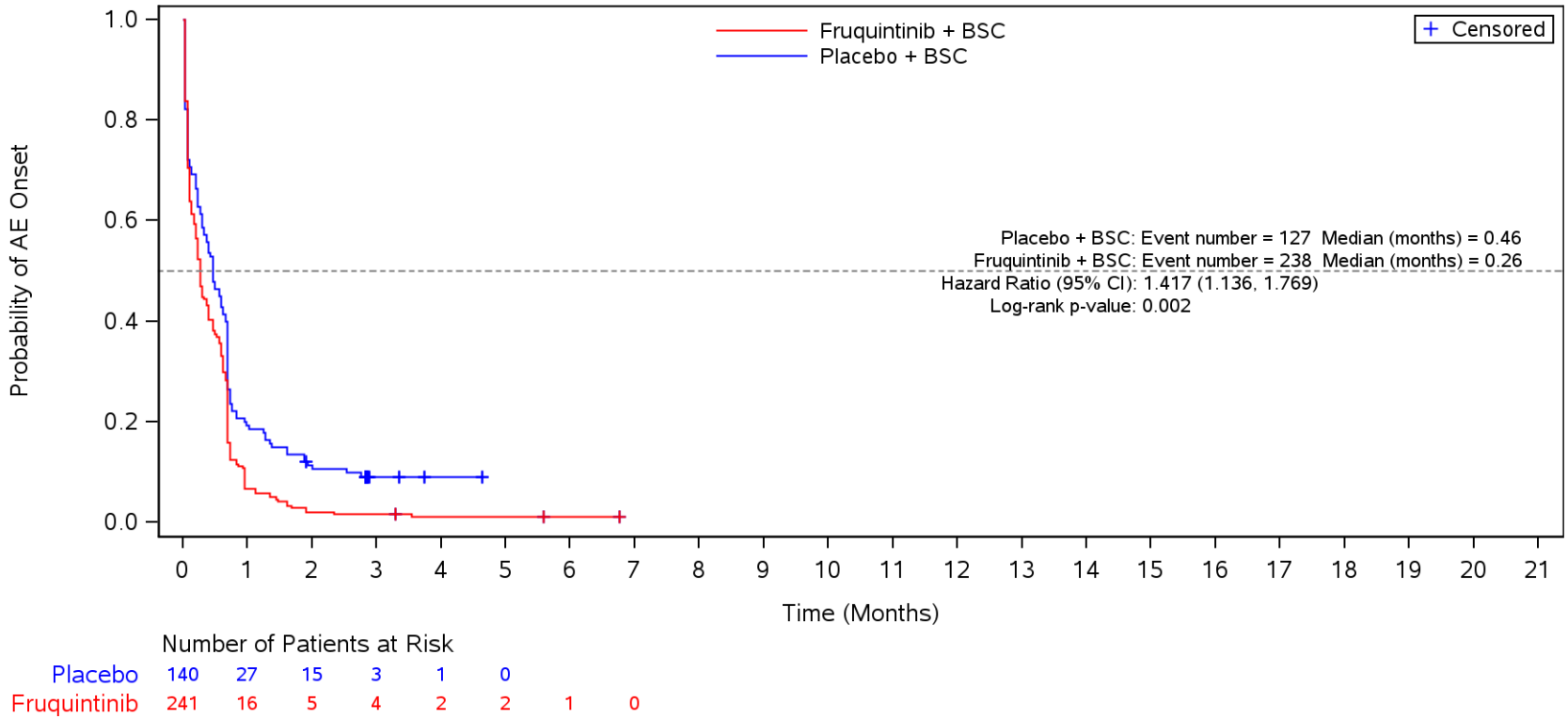
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
TEAE
Male



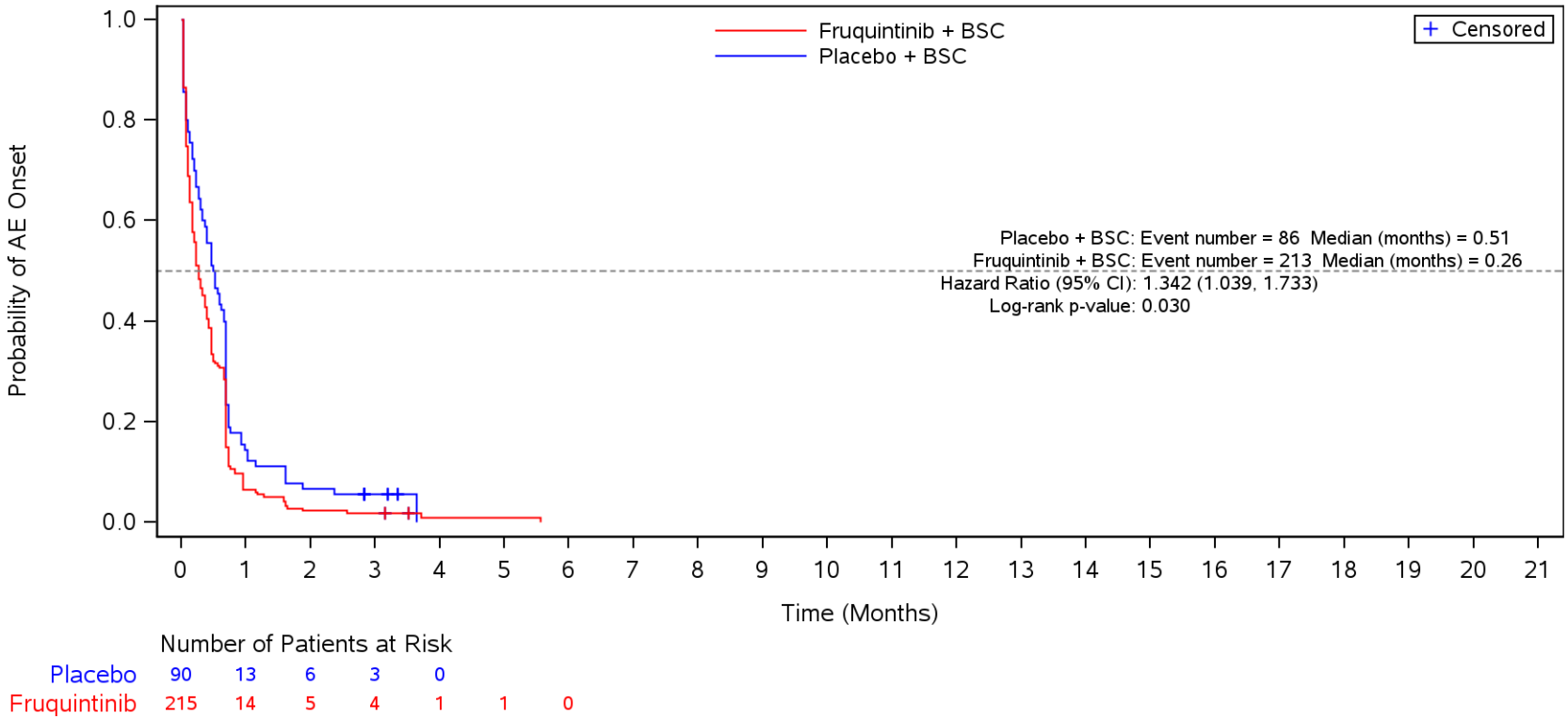
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
TEAE
Male



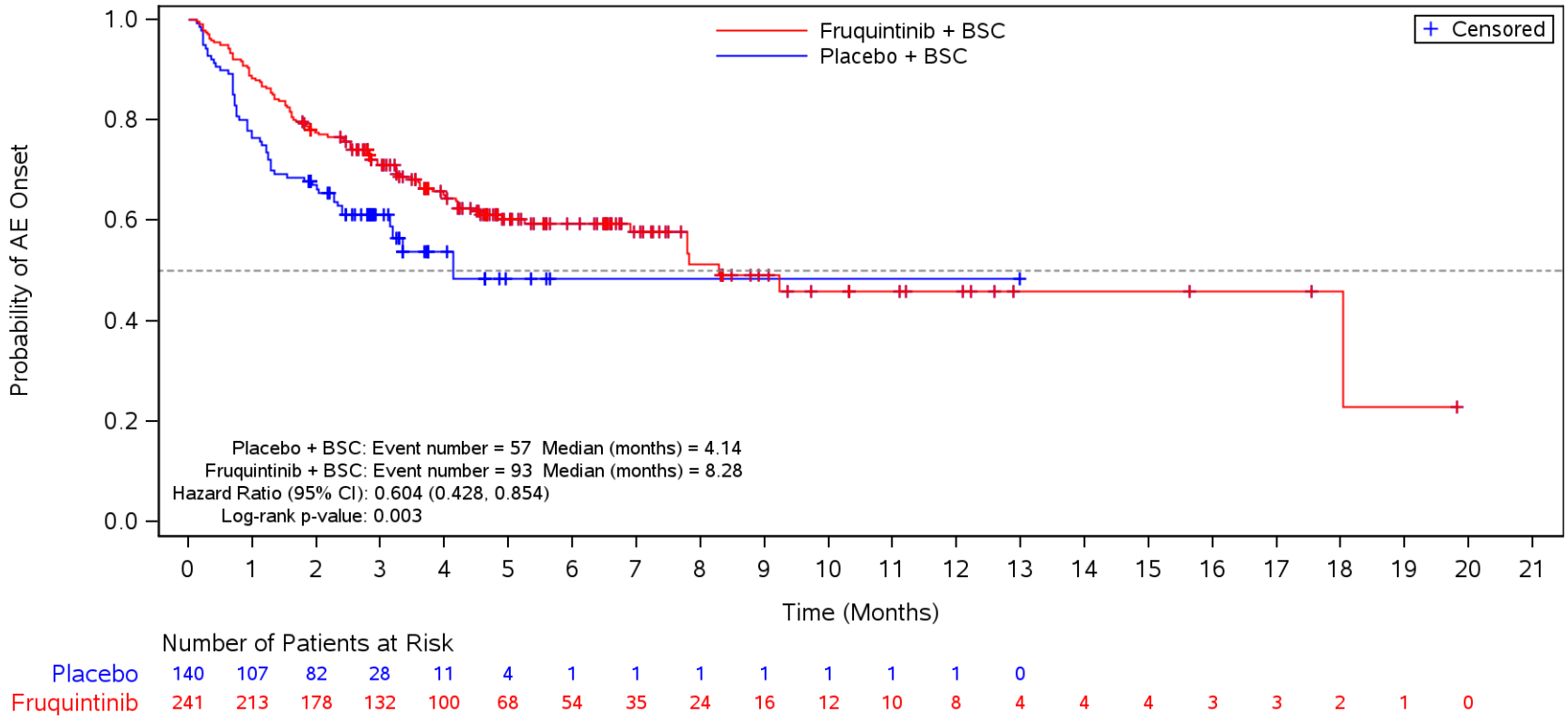
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
TEAE
Female



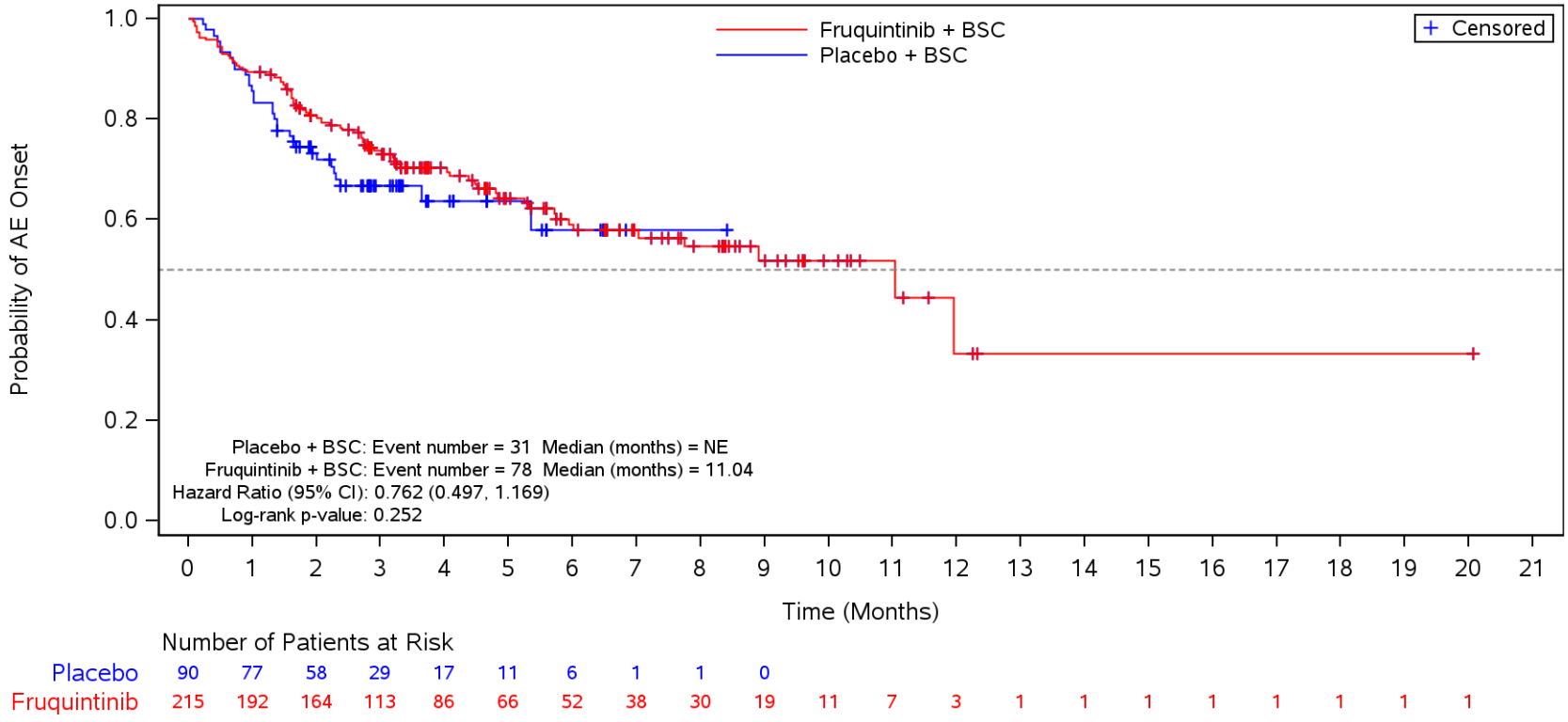
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
Serious TEAE
Male



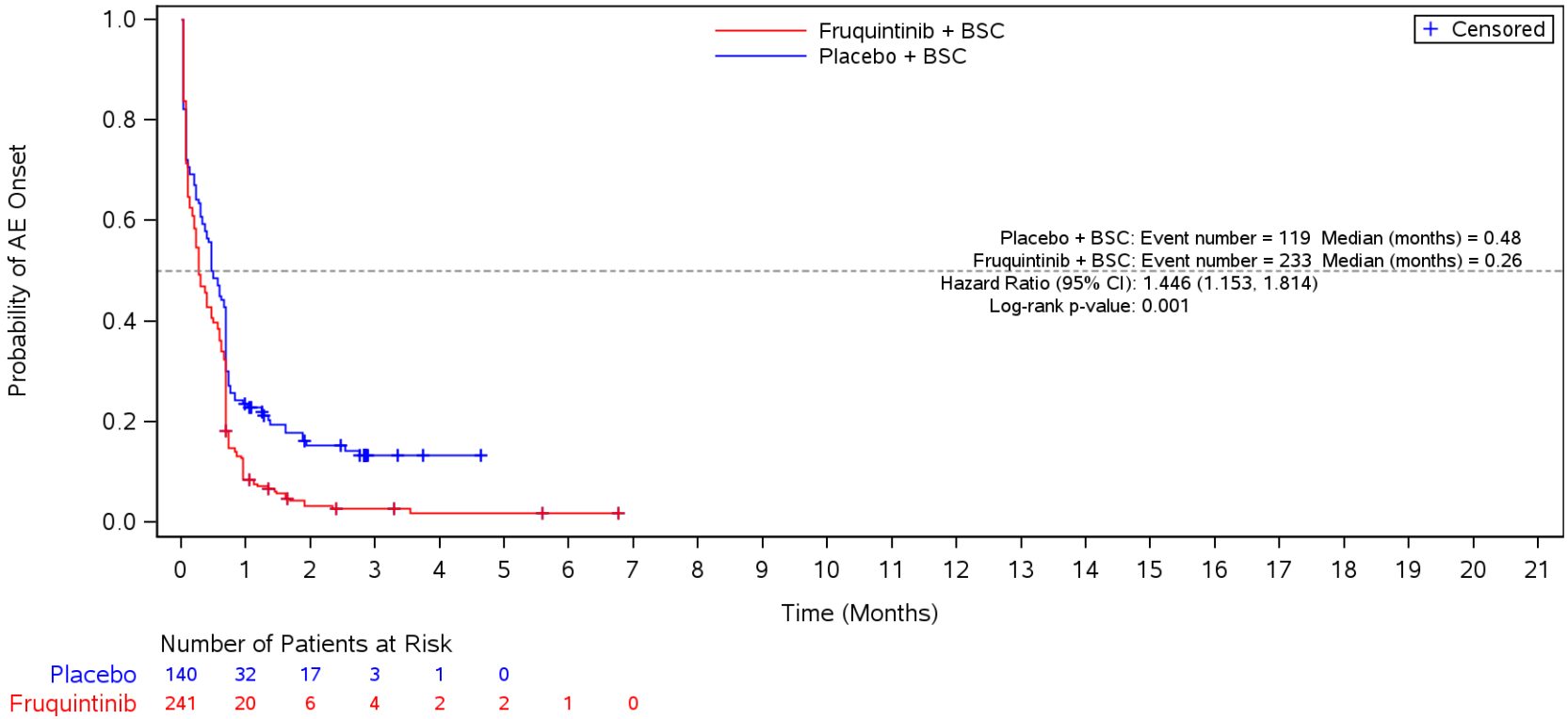
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
Serious TEAE
Female



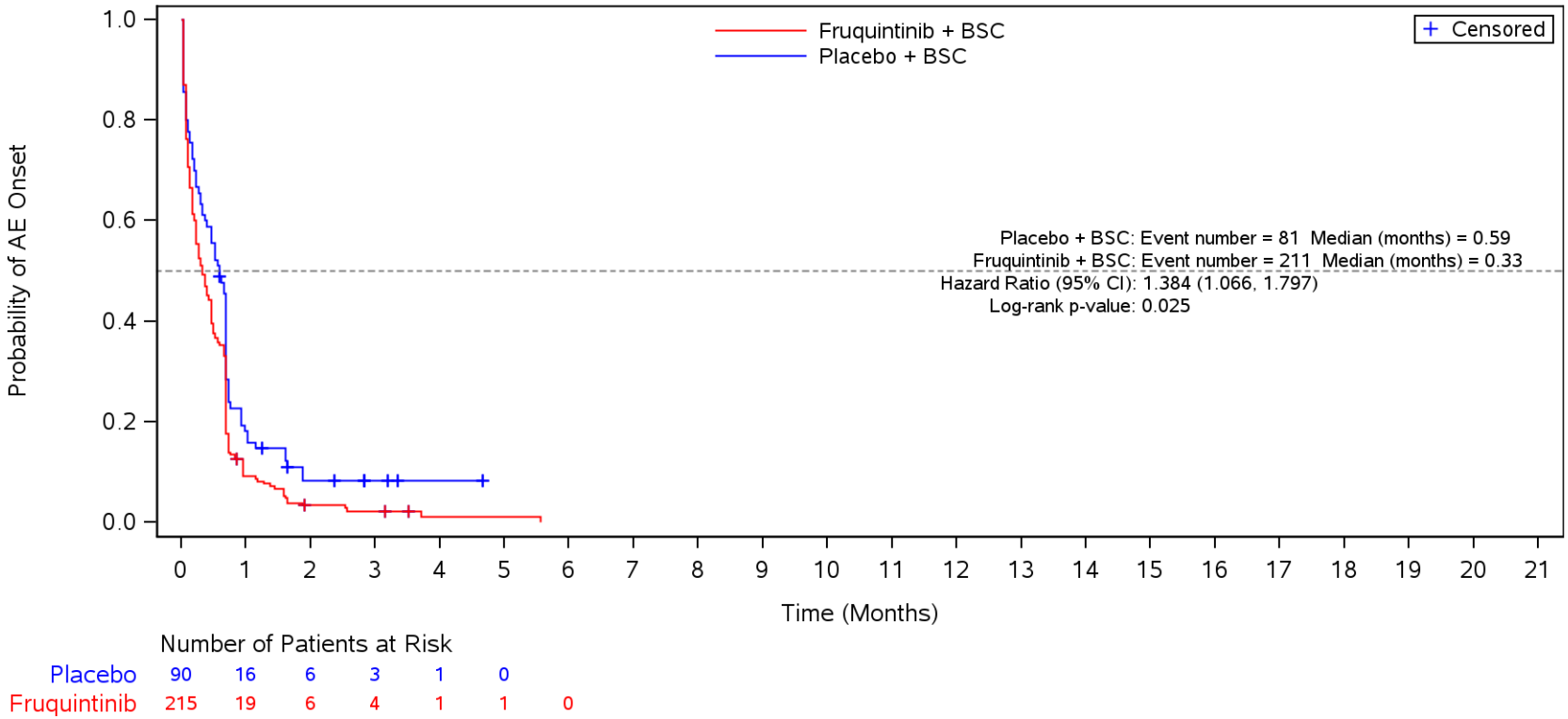
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
TEAE ≤ CTCAE Grade 2
Male



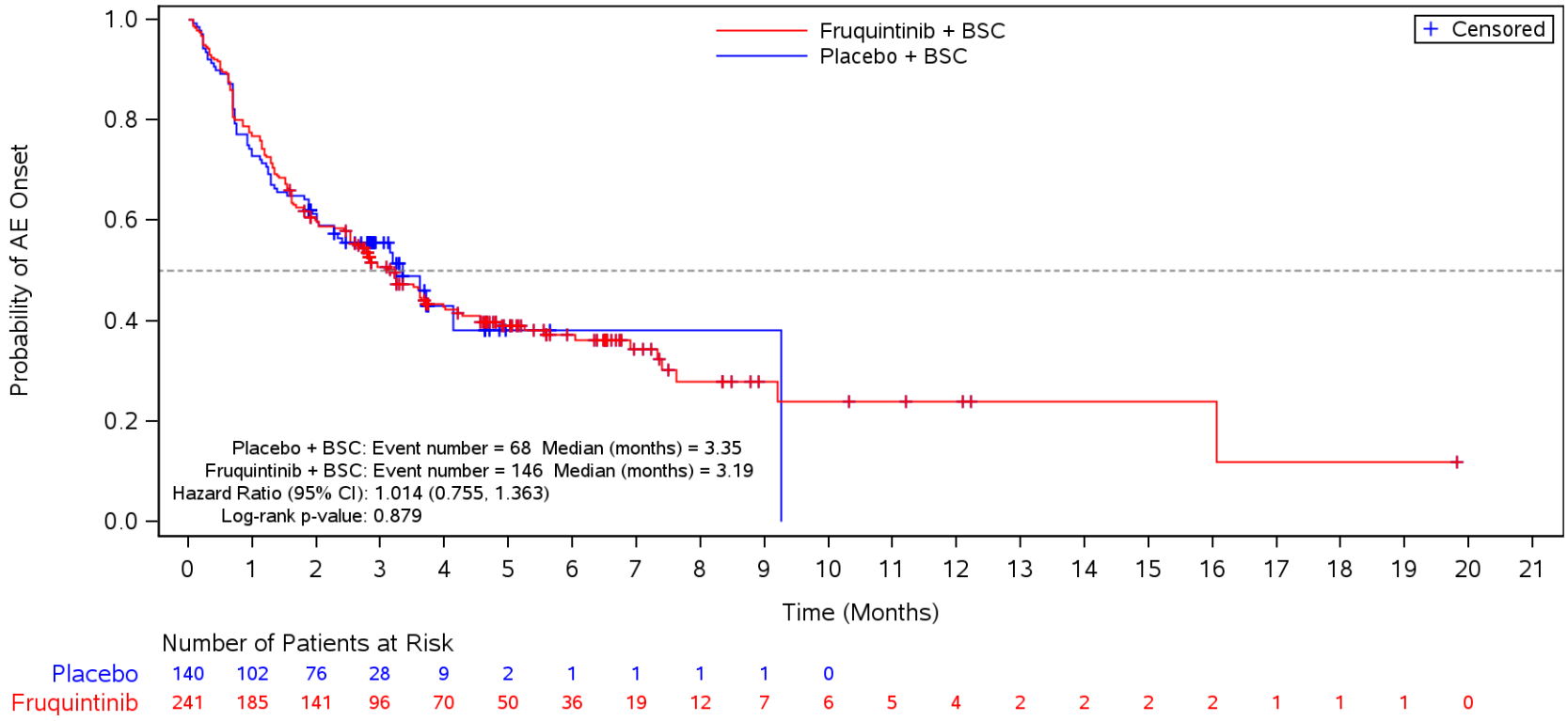
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
TEAE ≤ CTCAE Grade 2
Female



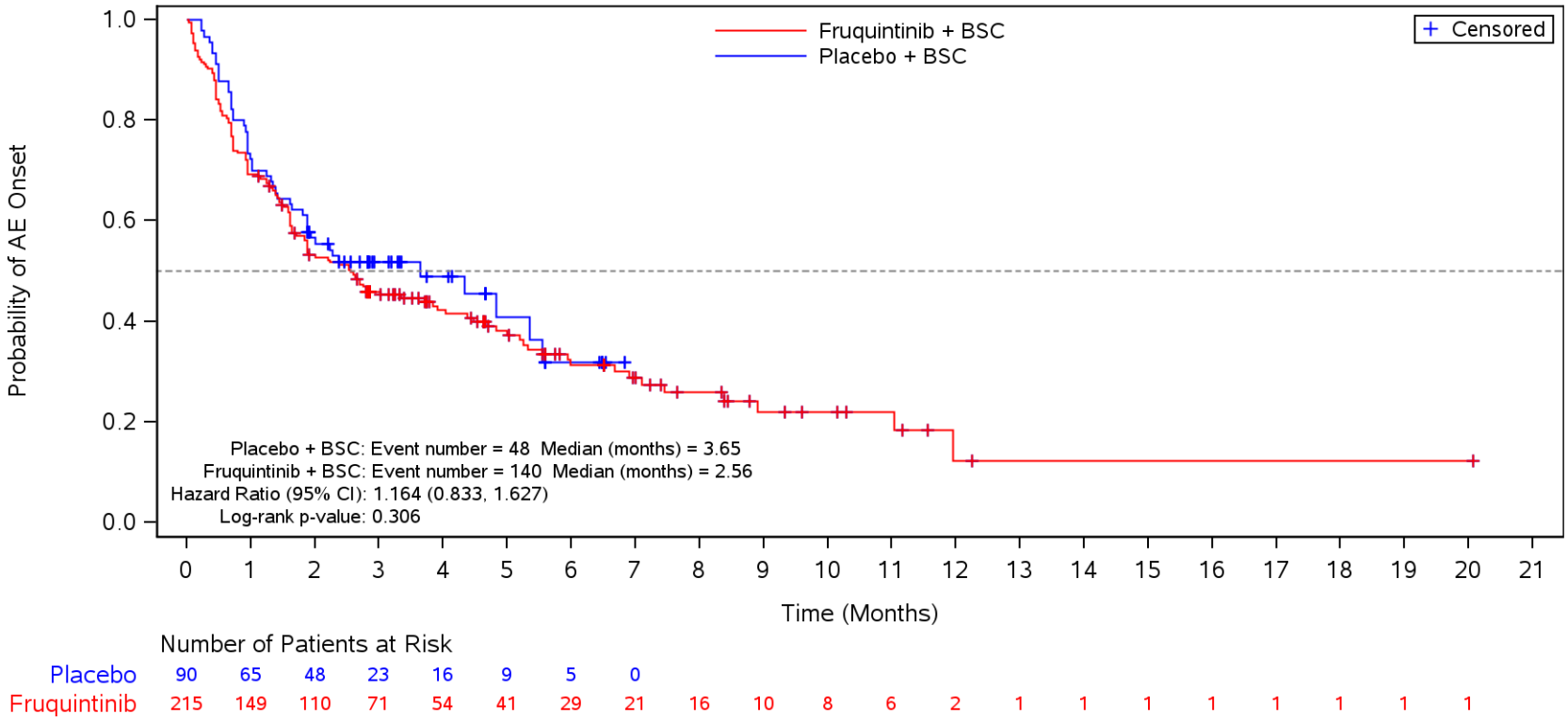
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
TEAE ≥ CTCAE Grade 3
Male



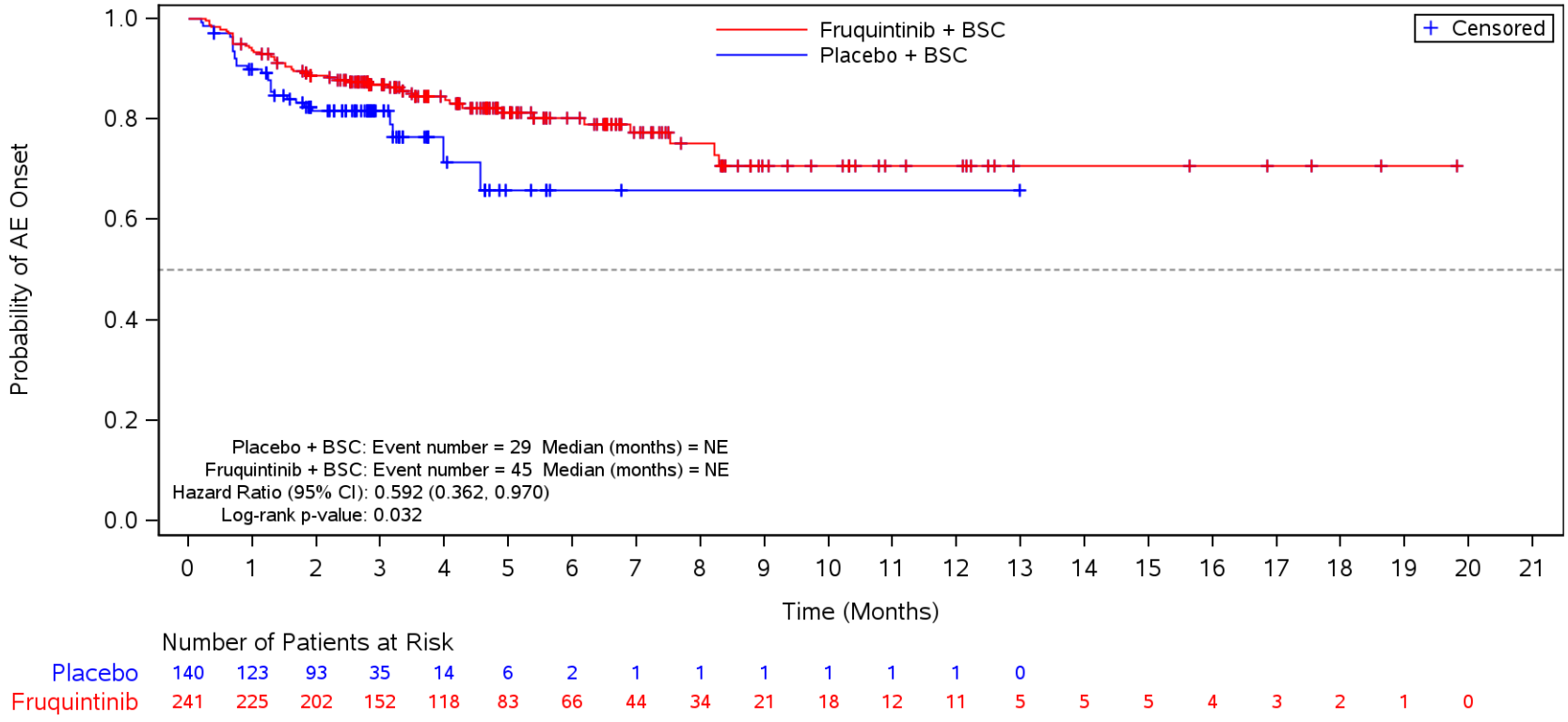
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
TEAE ≥ CTCAE Grade 3
Female



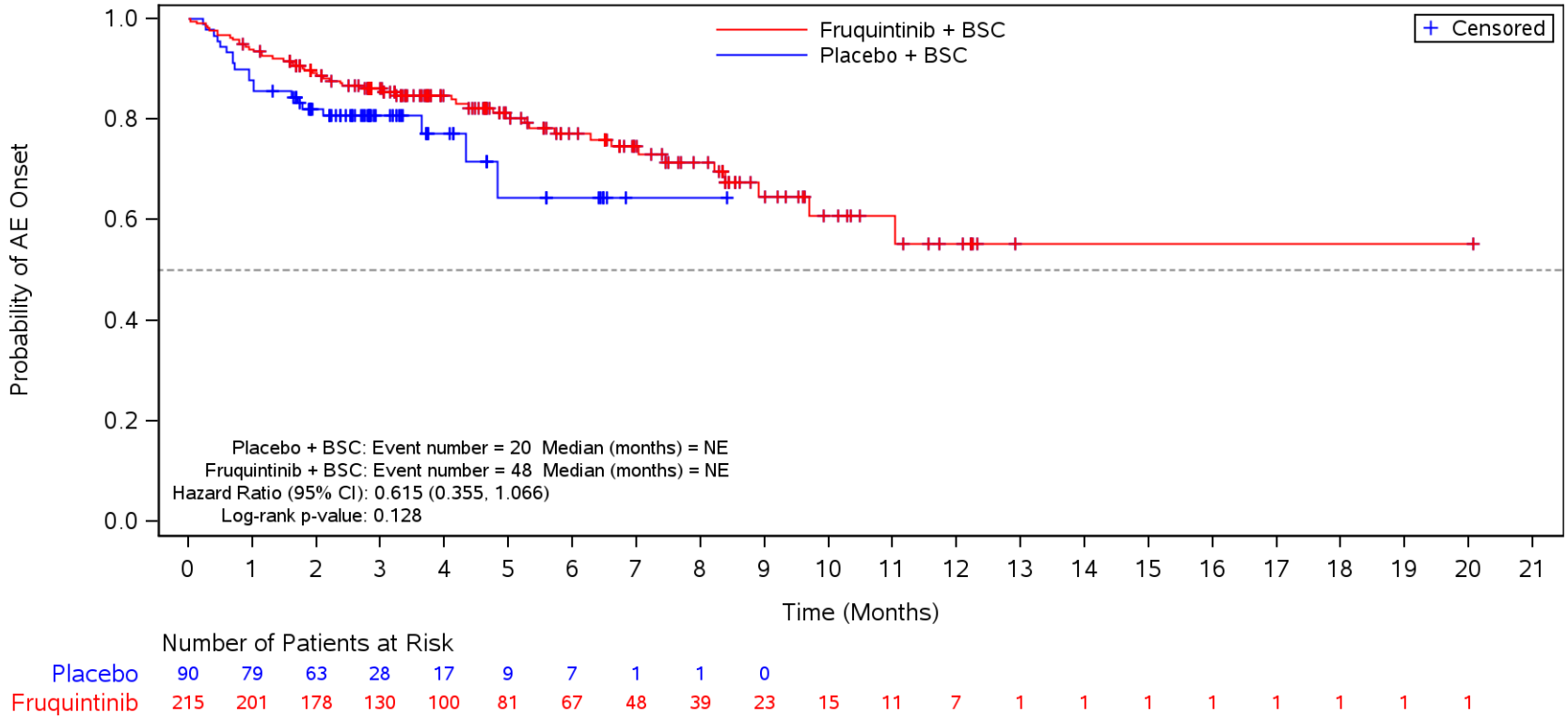
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
Discontinuation due to TEAE
Male



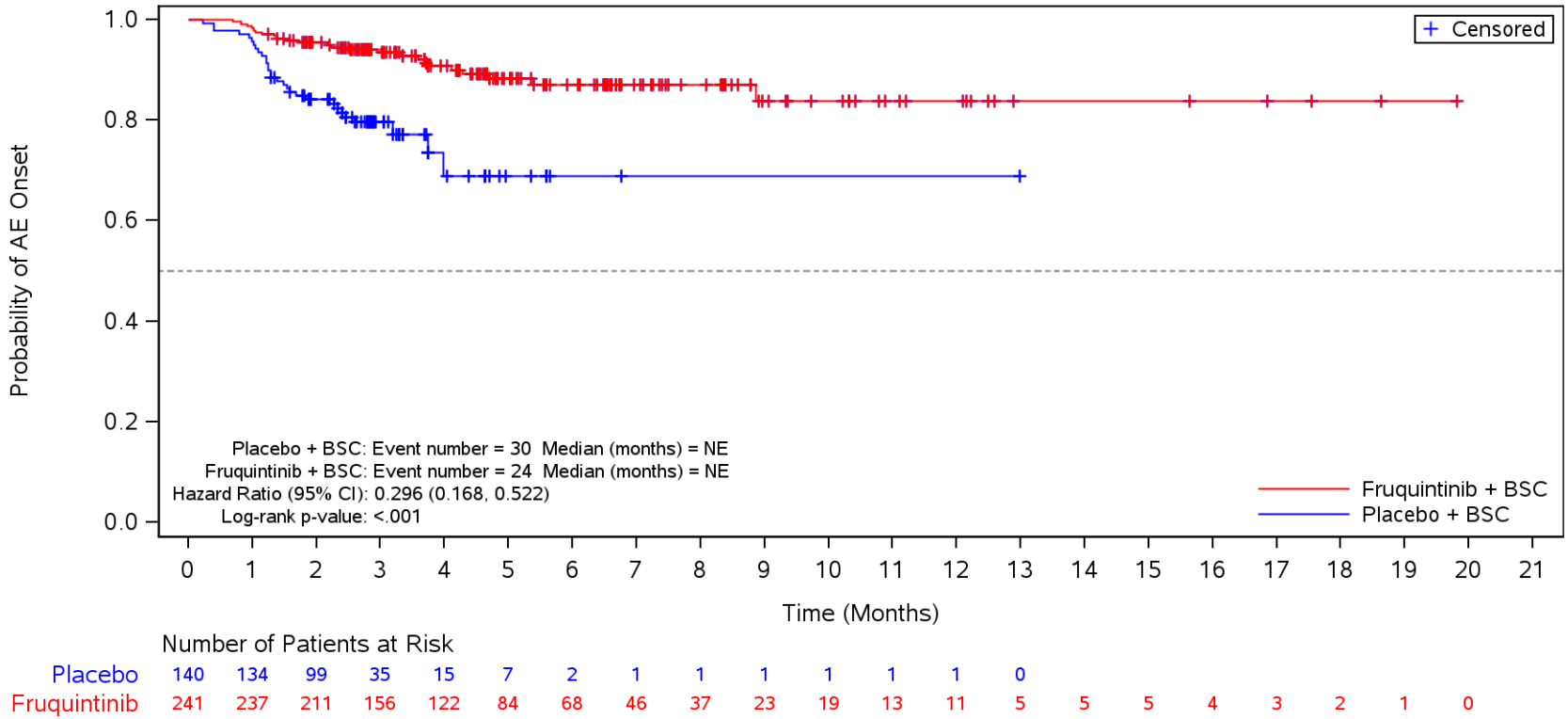
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
Discontinuation due to TEAE
Female



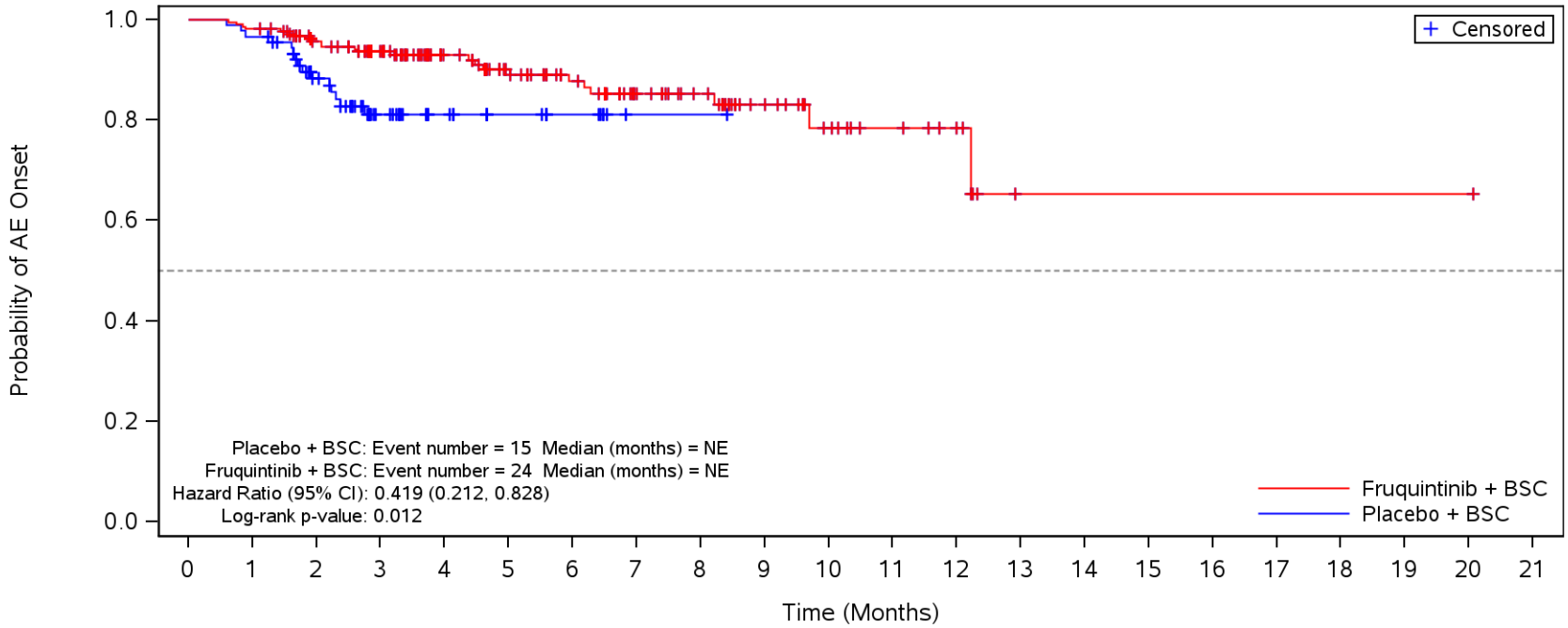
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Sex
Safety Population
Deaths (Grade 5 TEAEs)
Male



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE
North America

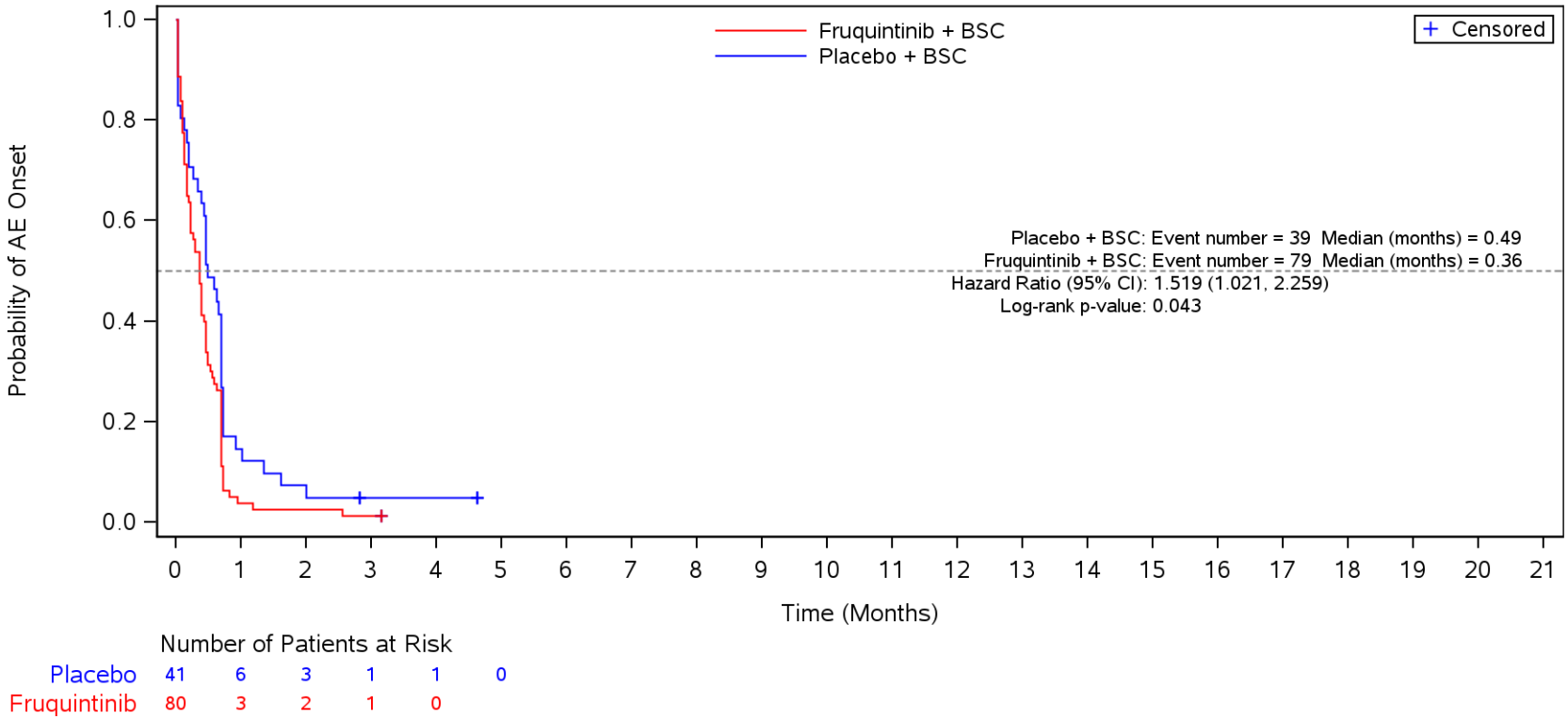


Number of Patients at Risk

Placebo	90	87	65	29	18	11	7	1	1	0											
Fruquintinib	215	211	185	135	103	84	70	48	40	25	16	11	7	1	1	1	1	1	1	1	1

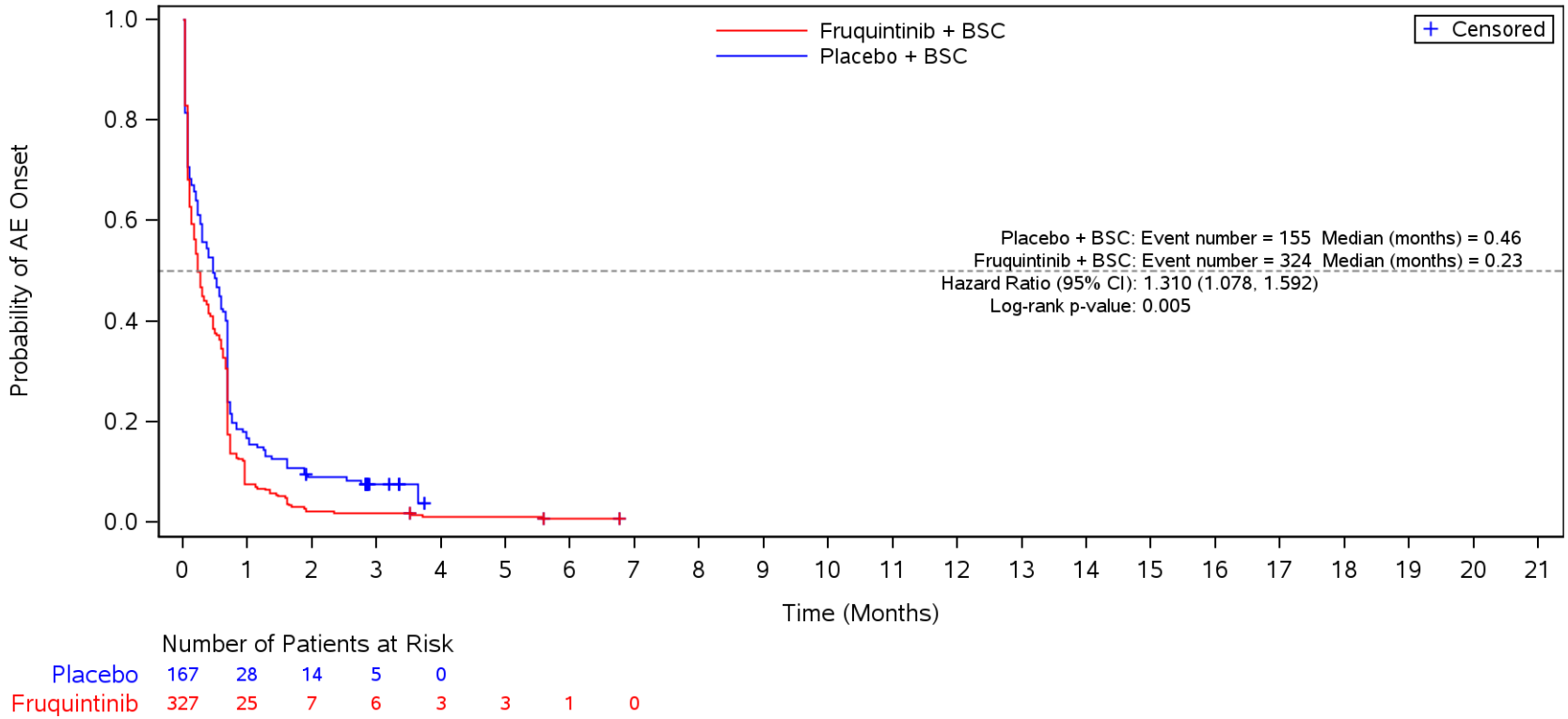
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE
North America



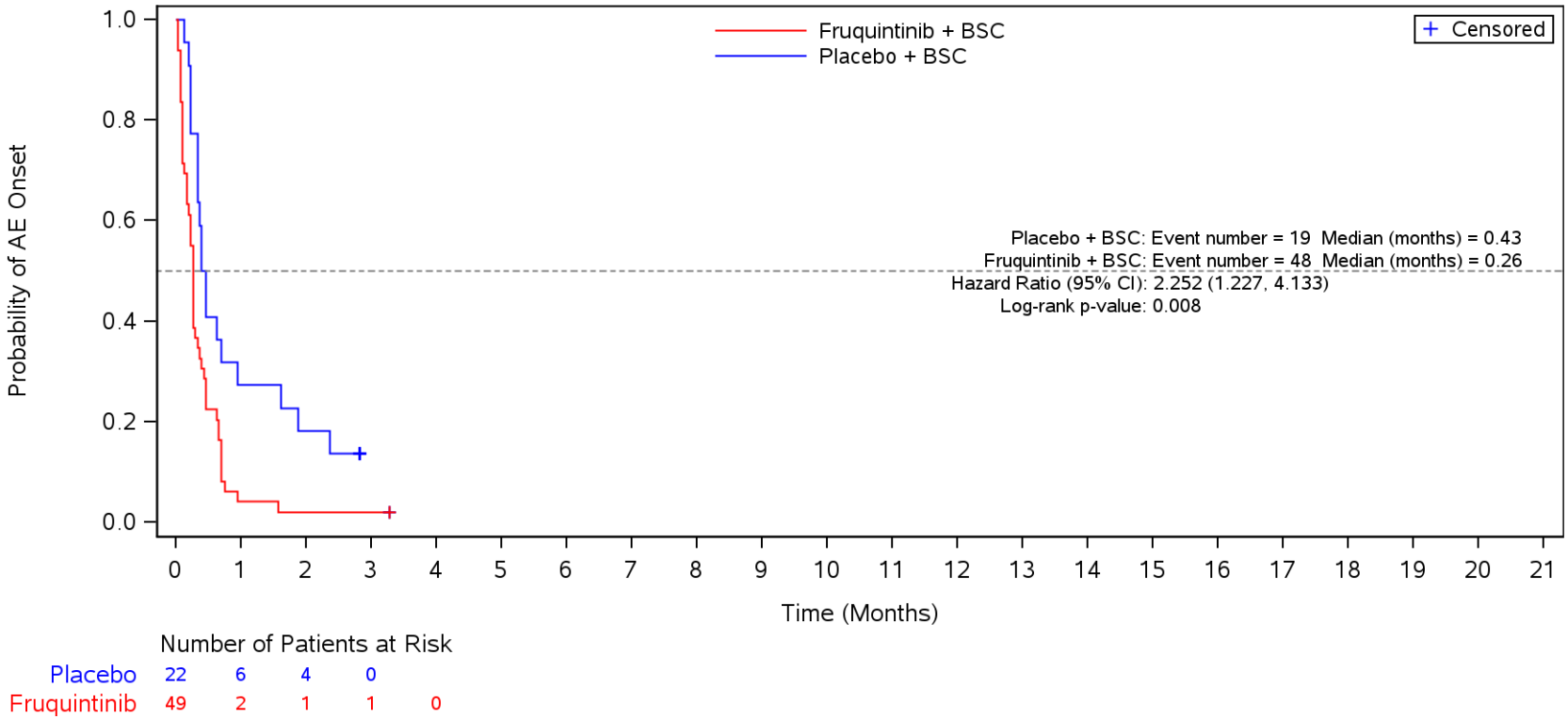
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE
Europe



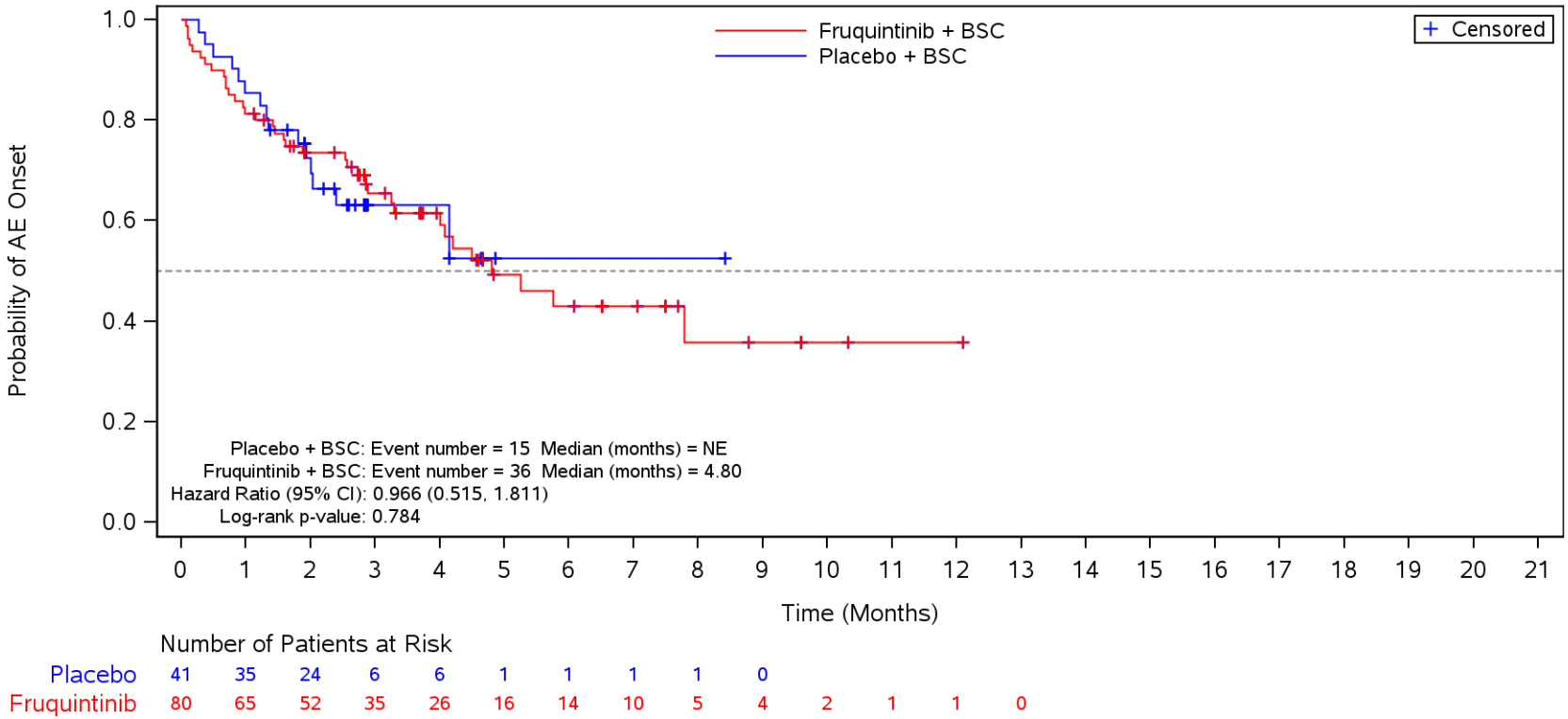
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE
Asia



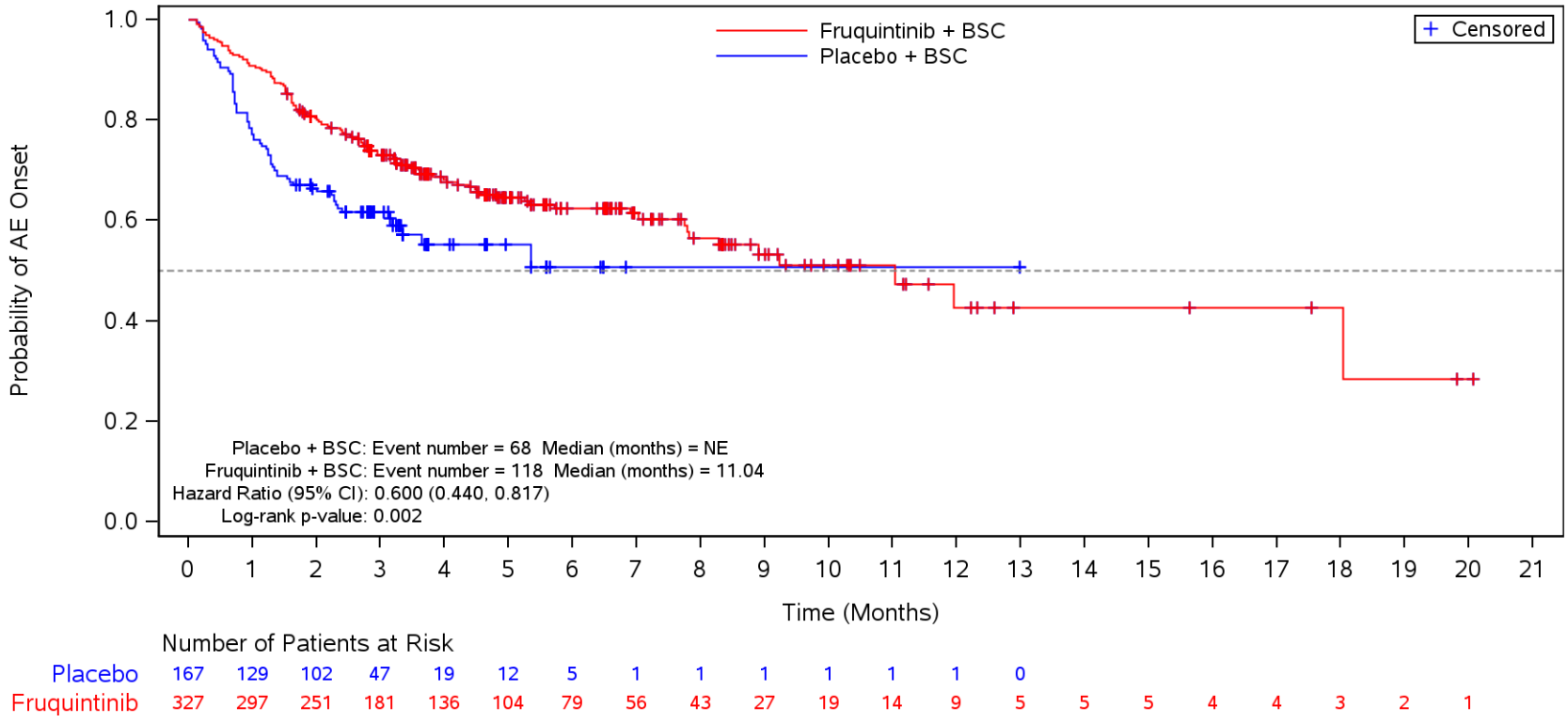
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
Serious TEAE
North America



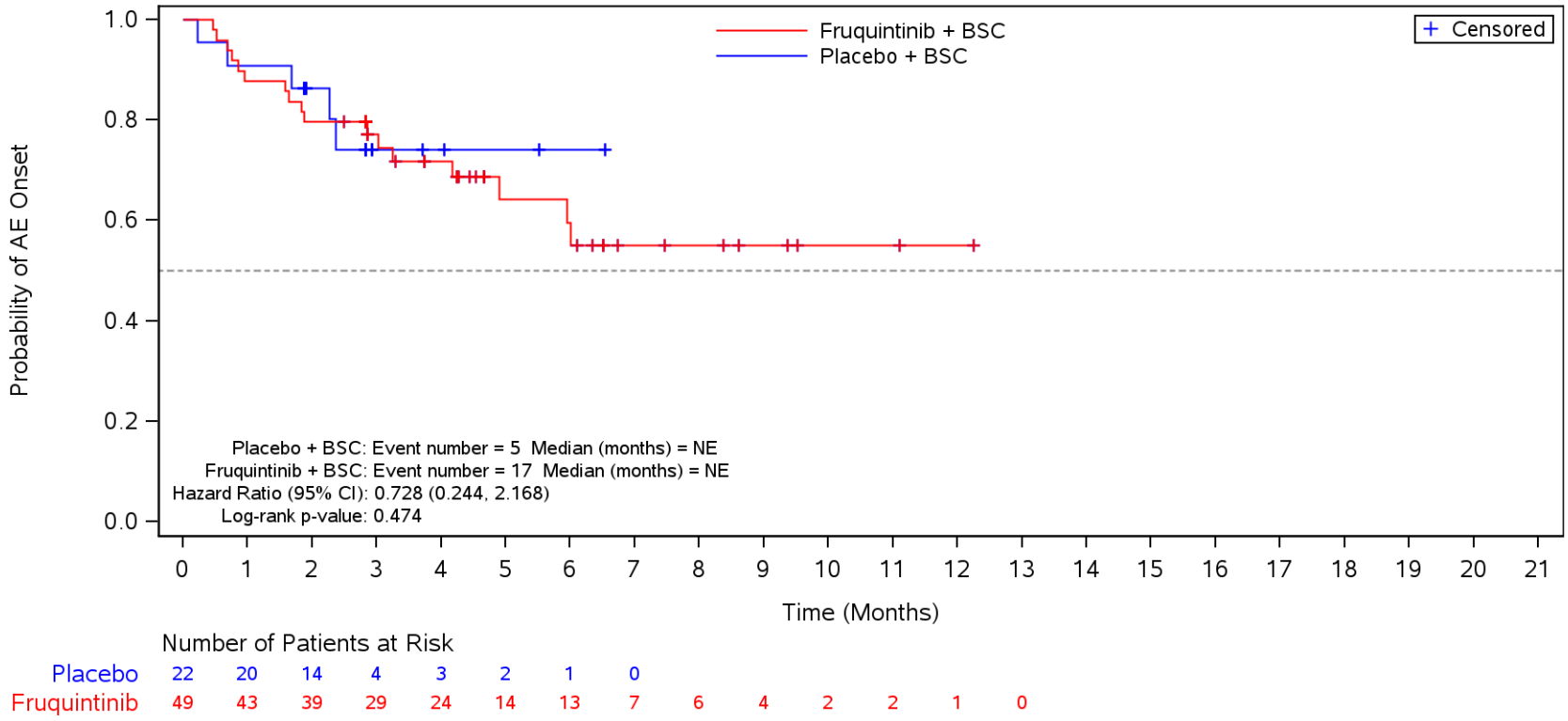
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
Serious TEAE
Europe



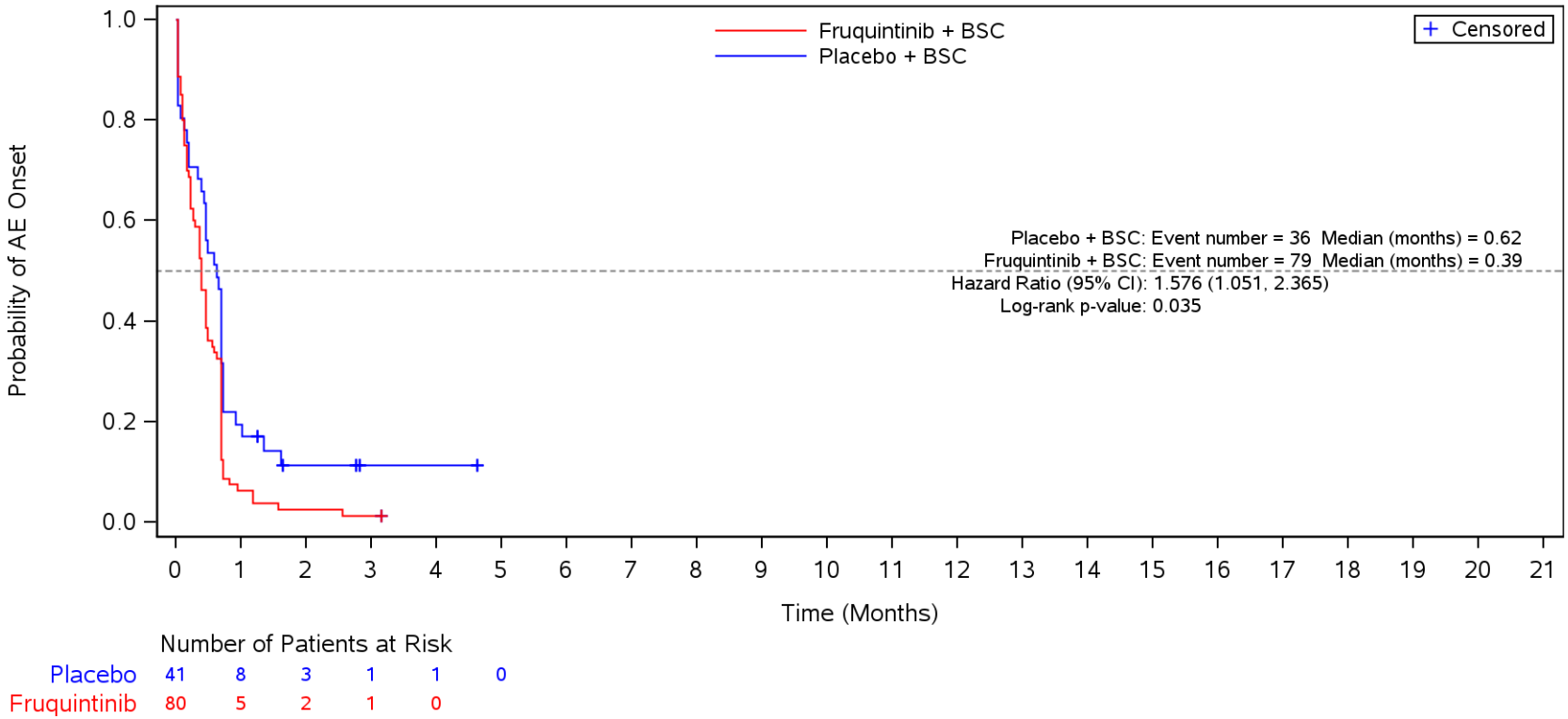
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
Serious TEAE
Asia



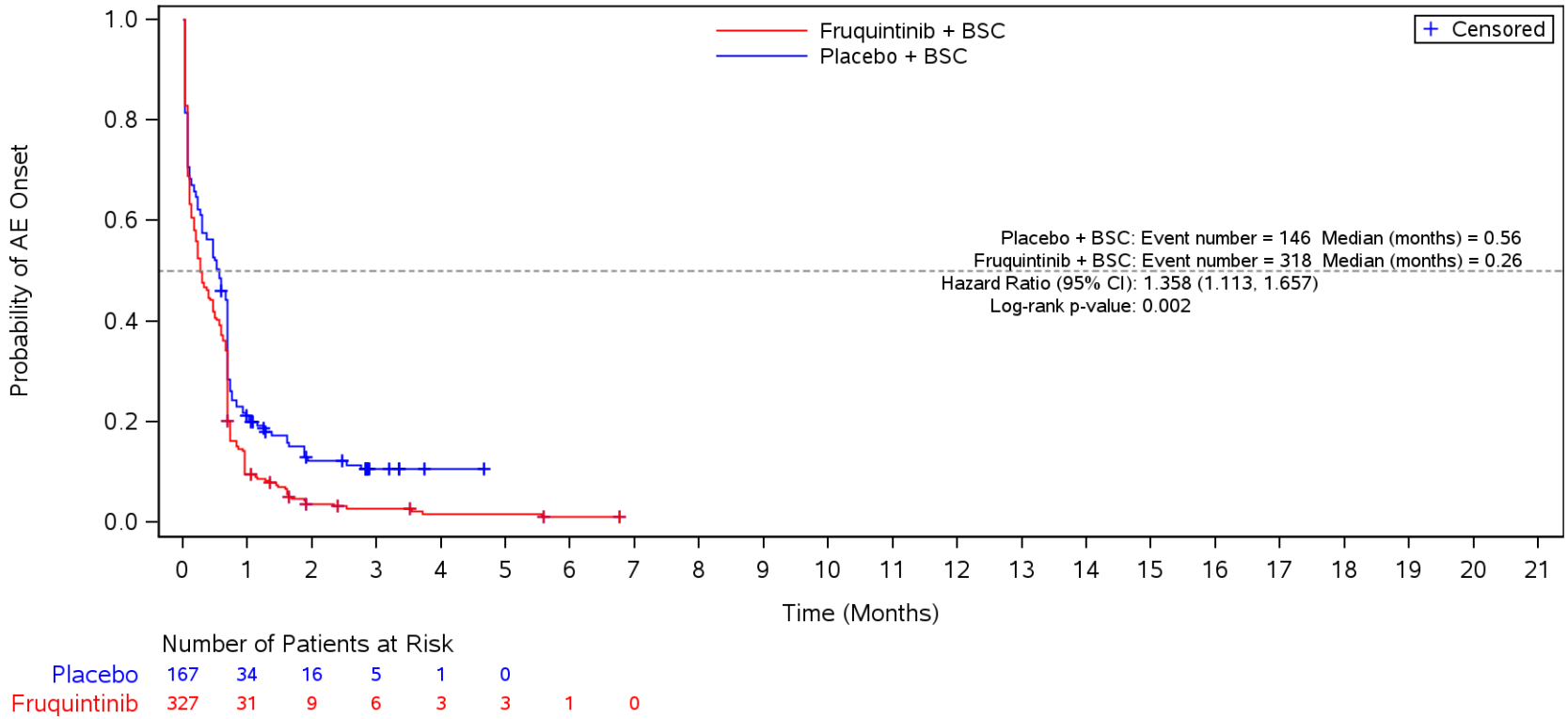
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE ≤ CTCAE Grade 2
North America



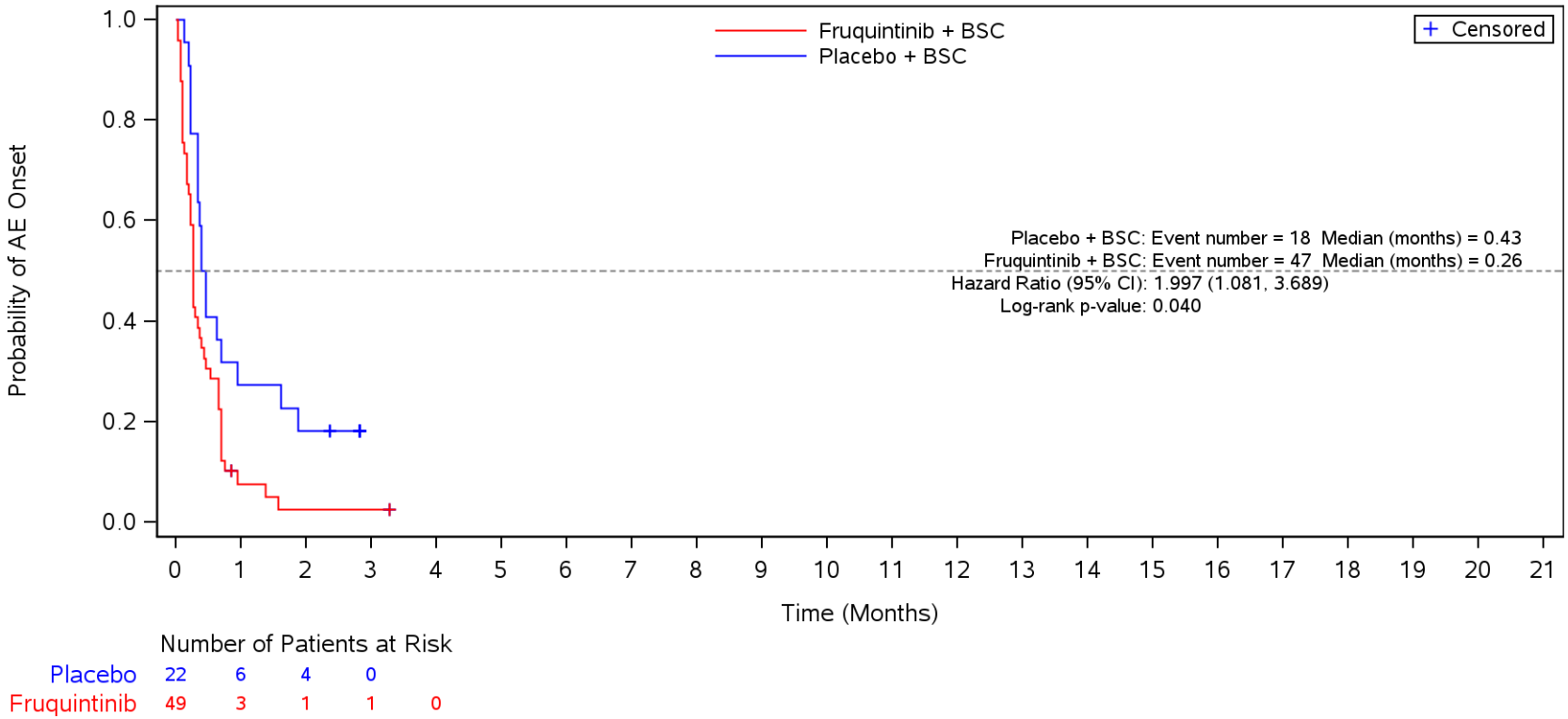
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE ≤ CTCAE Grade 2
Europe



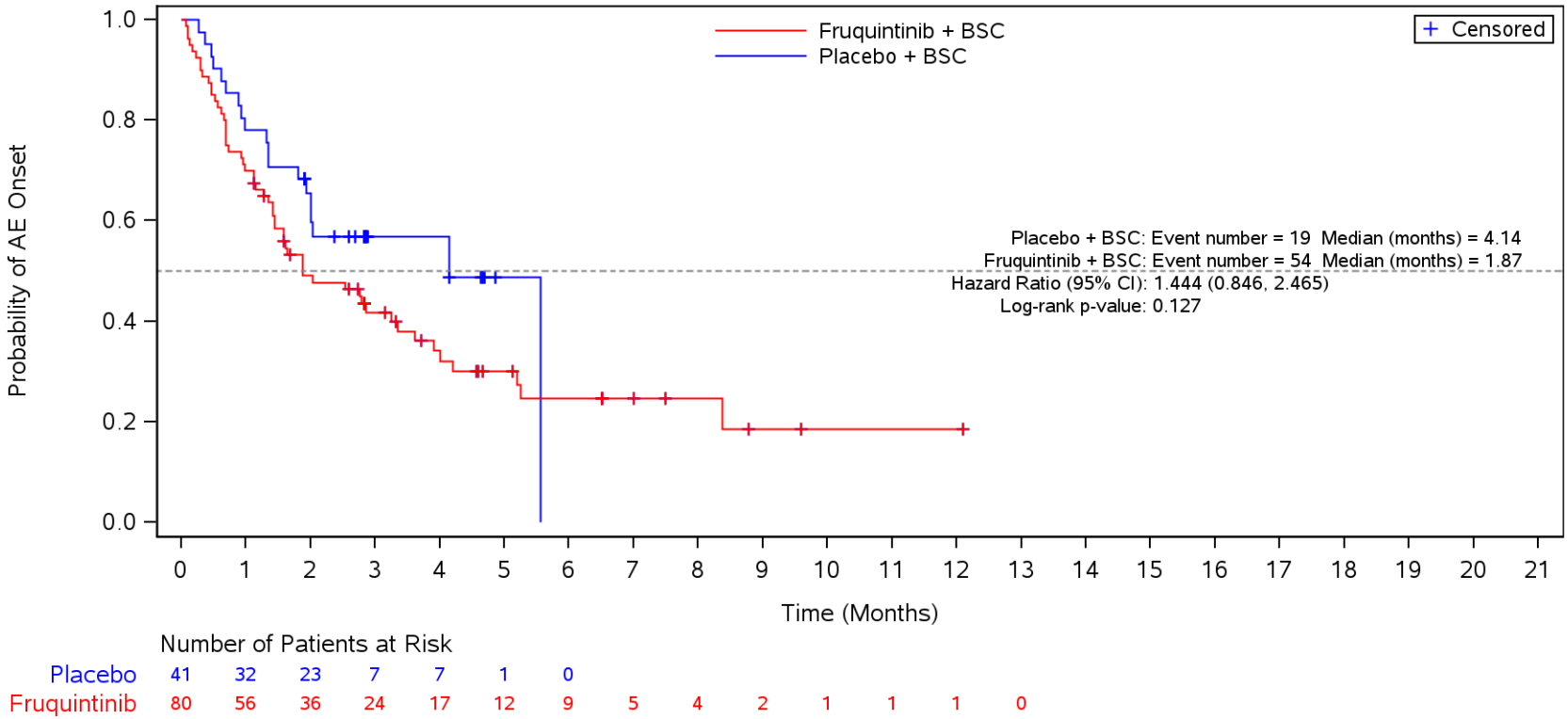
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE ≤ CTCAE Grade 2
Asia



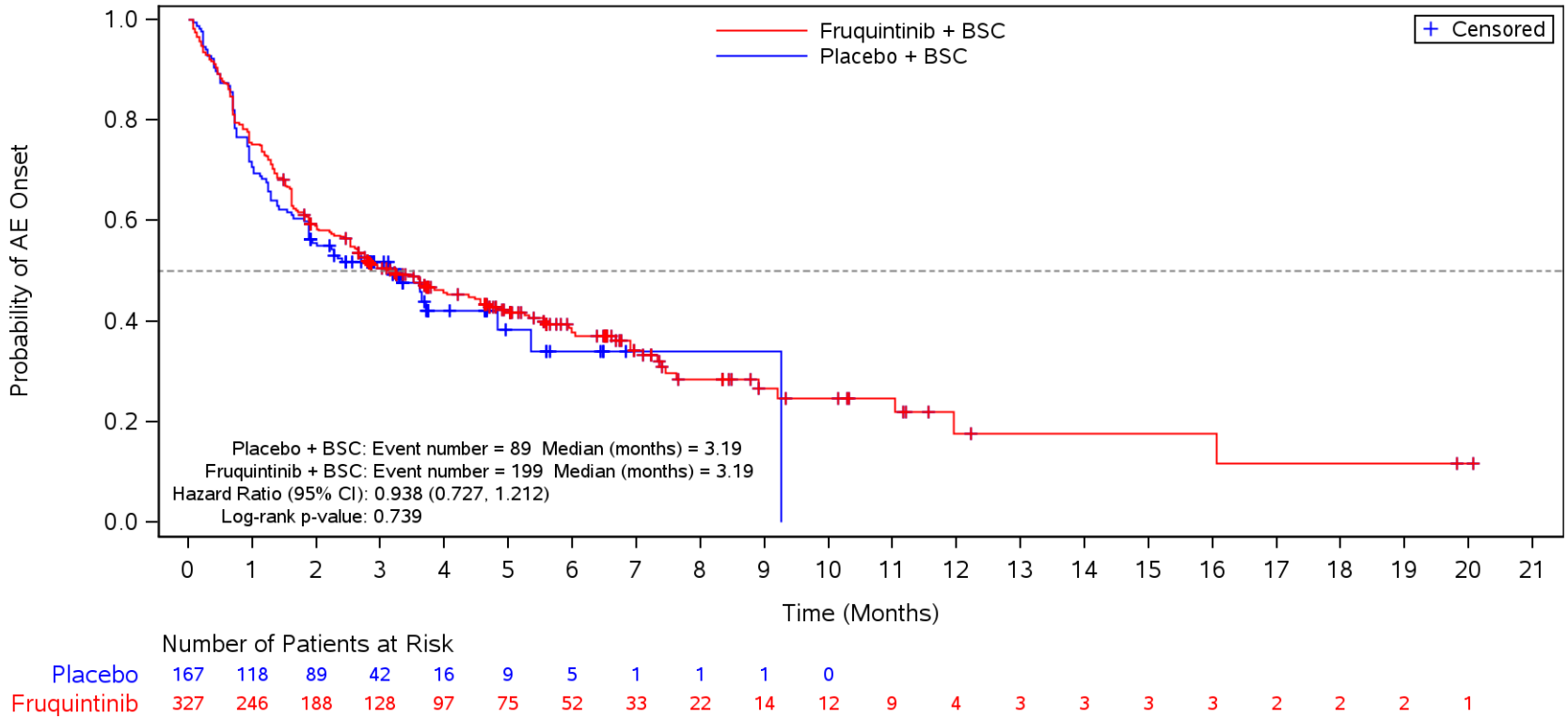
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE ≥ CTCAE Grade 3
North America



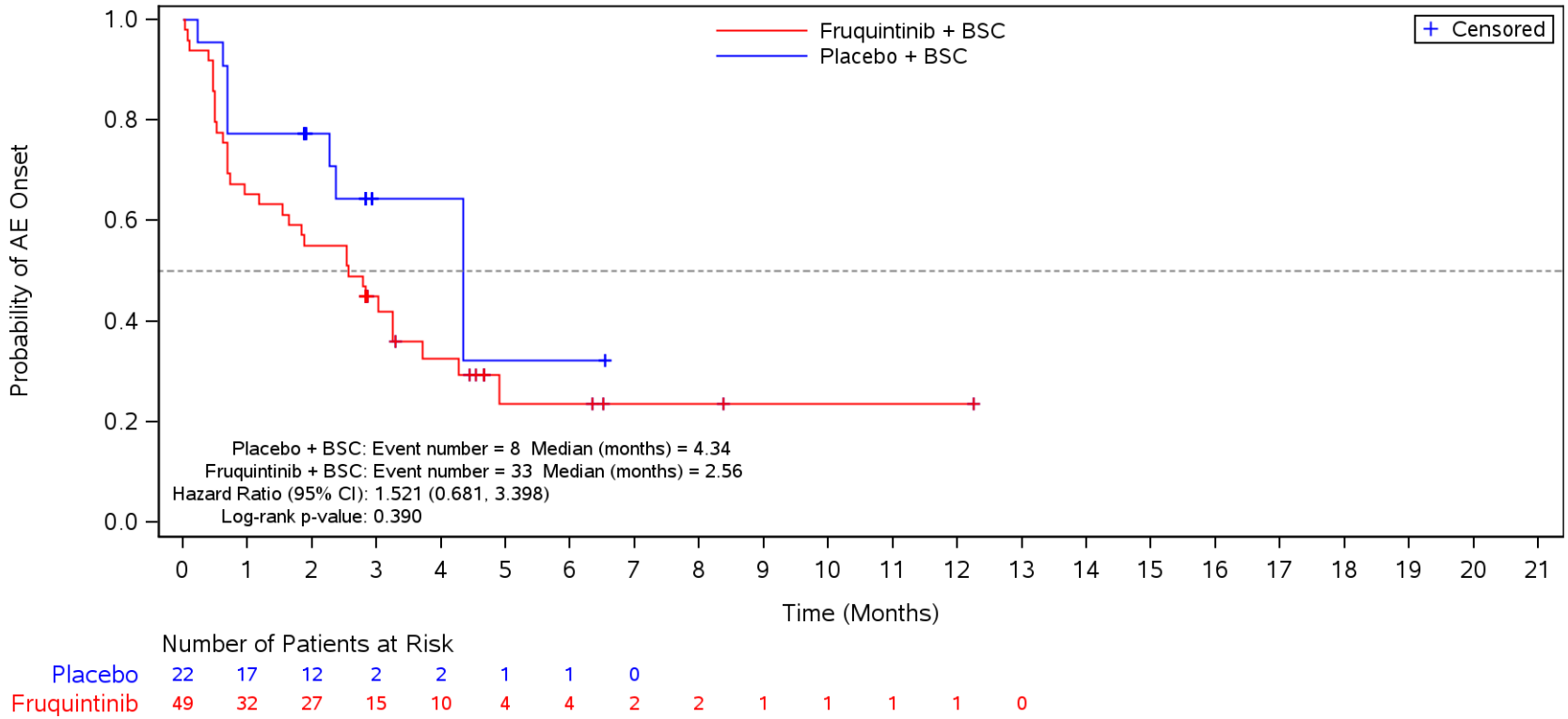
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE ≥ CTCAE Grade 3
Europe



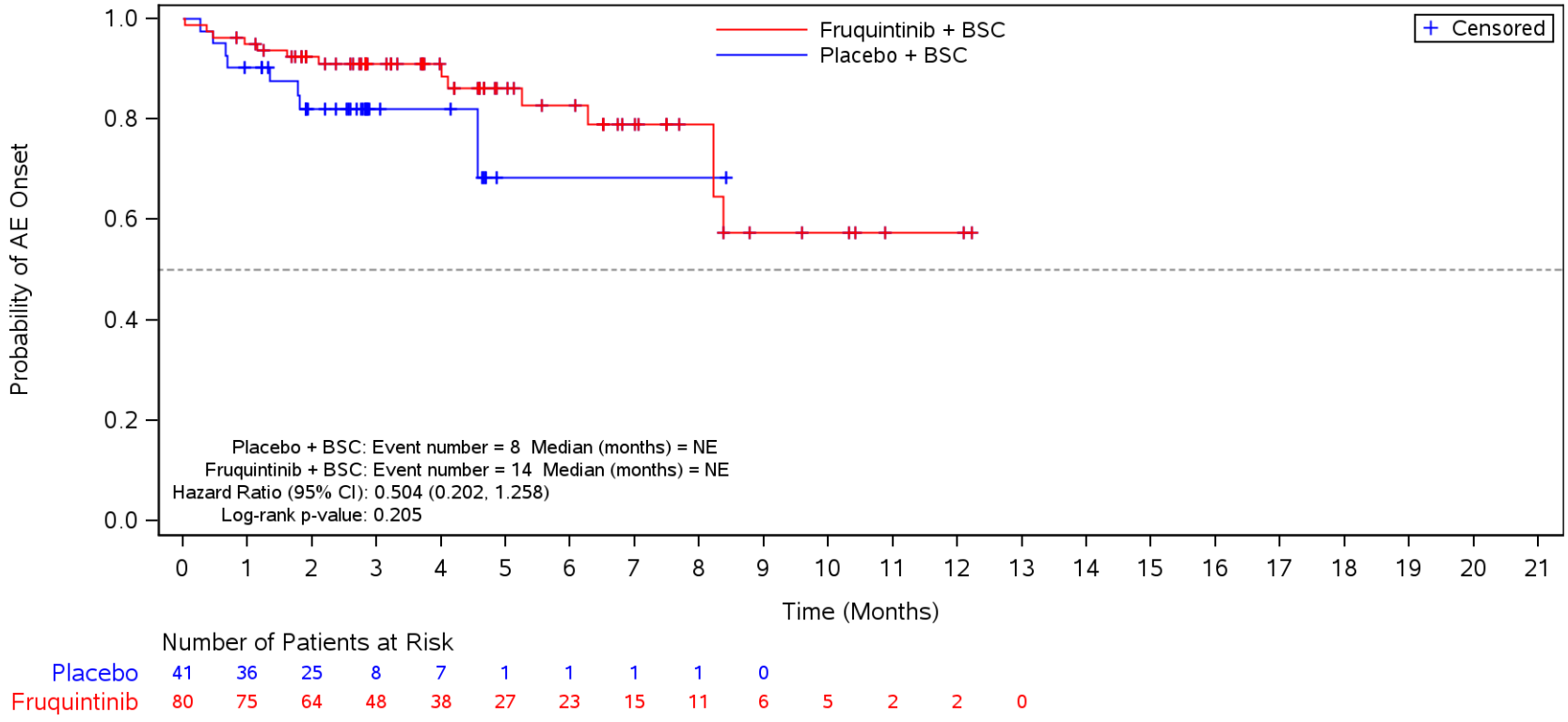
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
TEAE ≥ CTCAE Grade 3
Asia



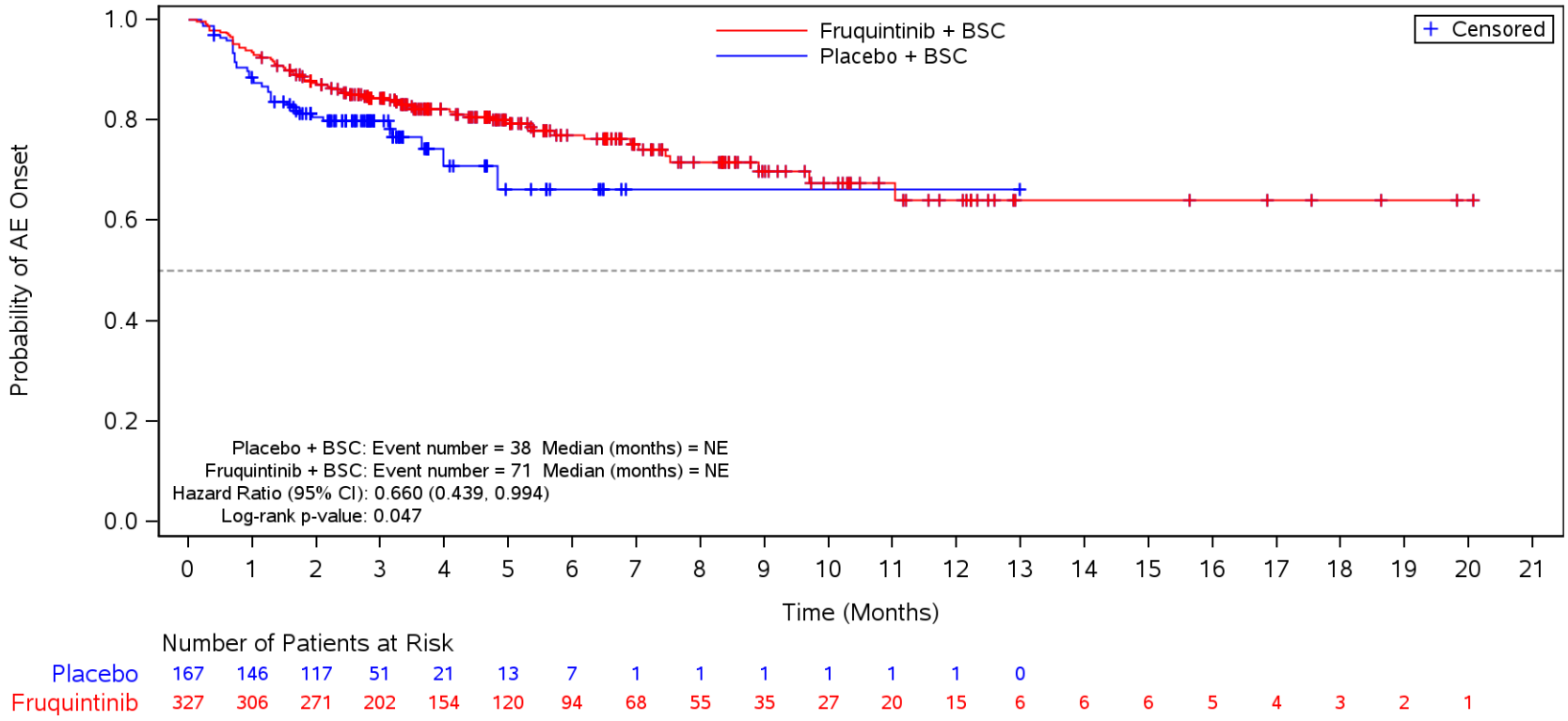
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
Discontinuation due to TEAE
North America



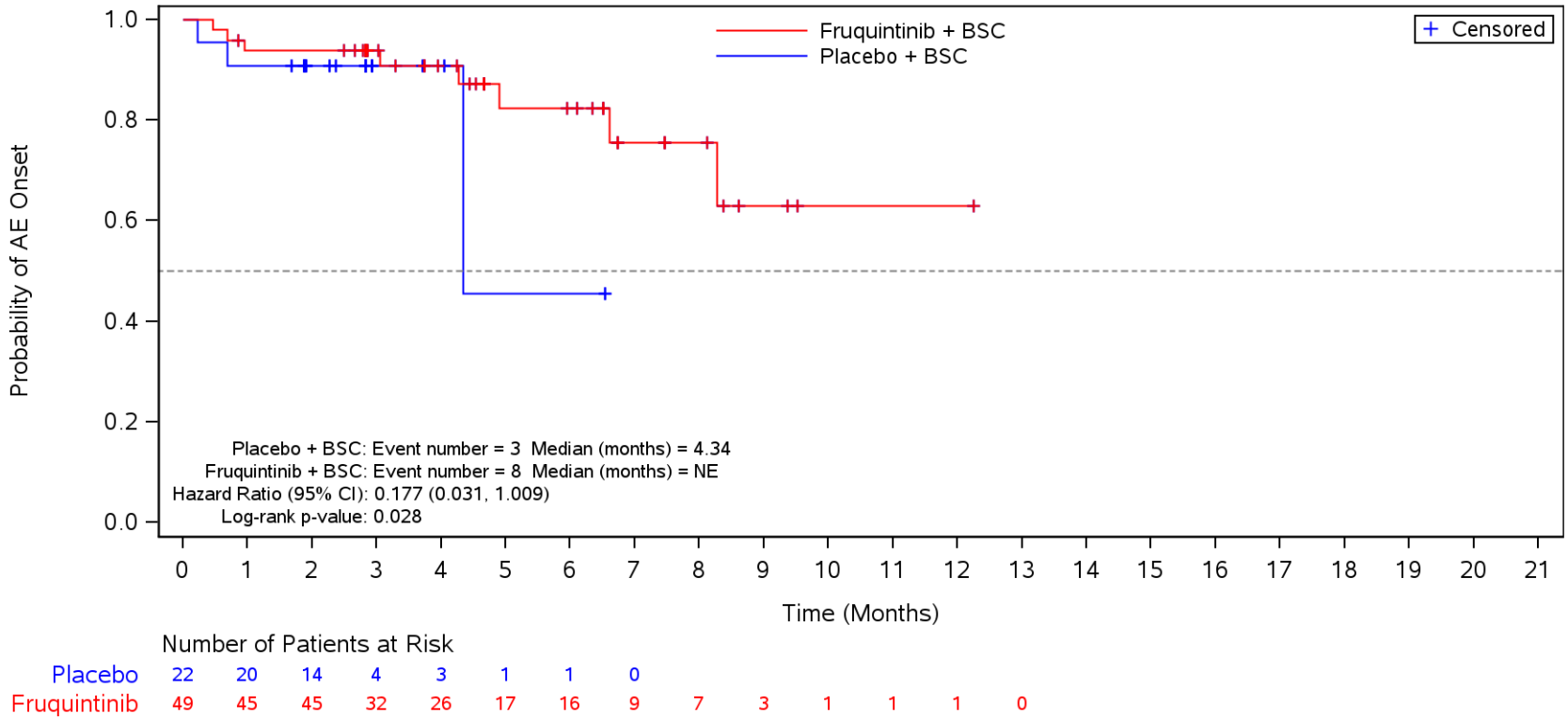
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
Discontinuation due to TEAE
Europe



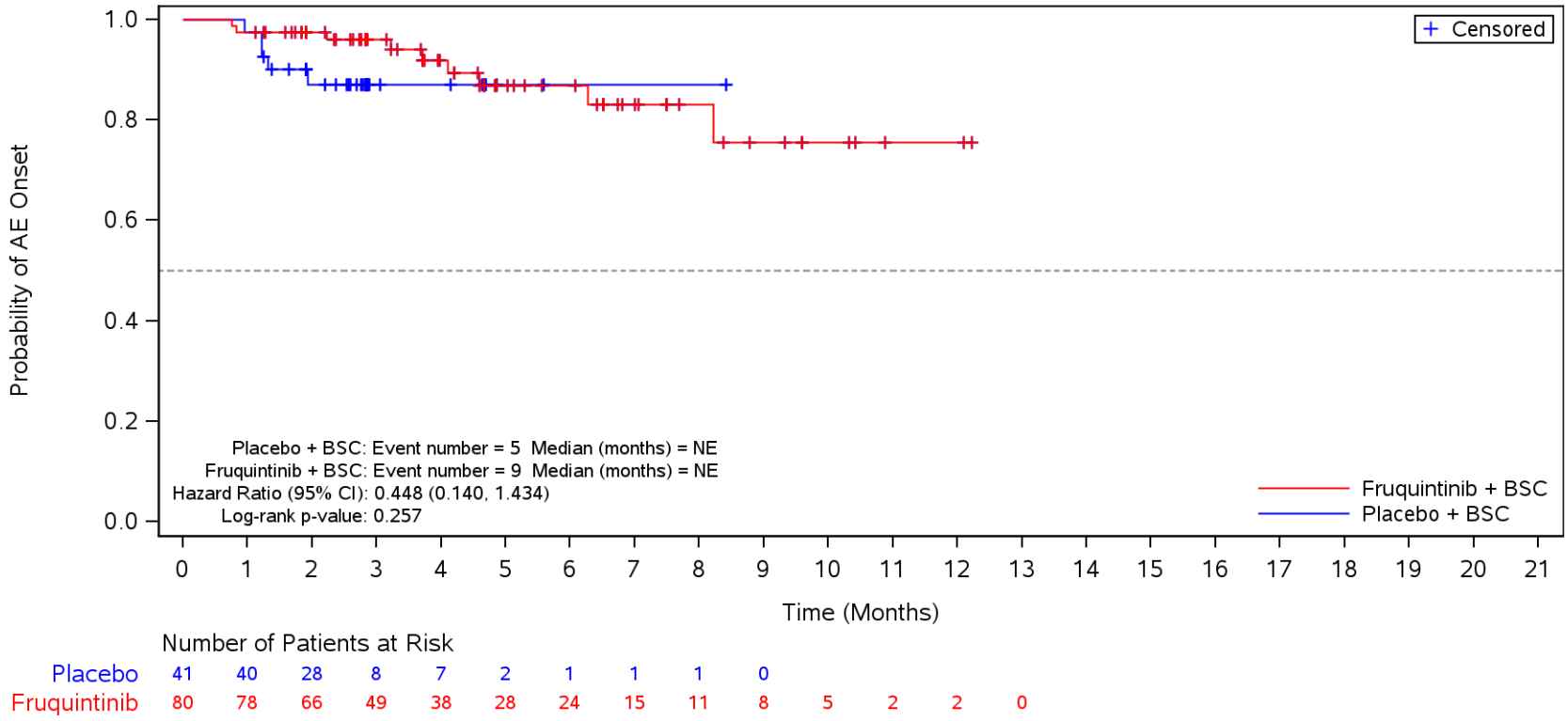
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
Discontinuation due to TEAE
Asia



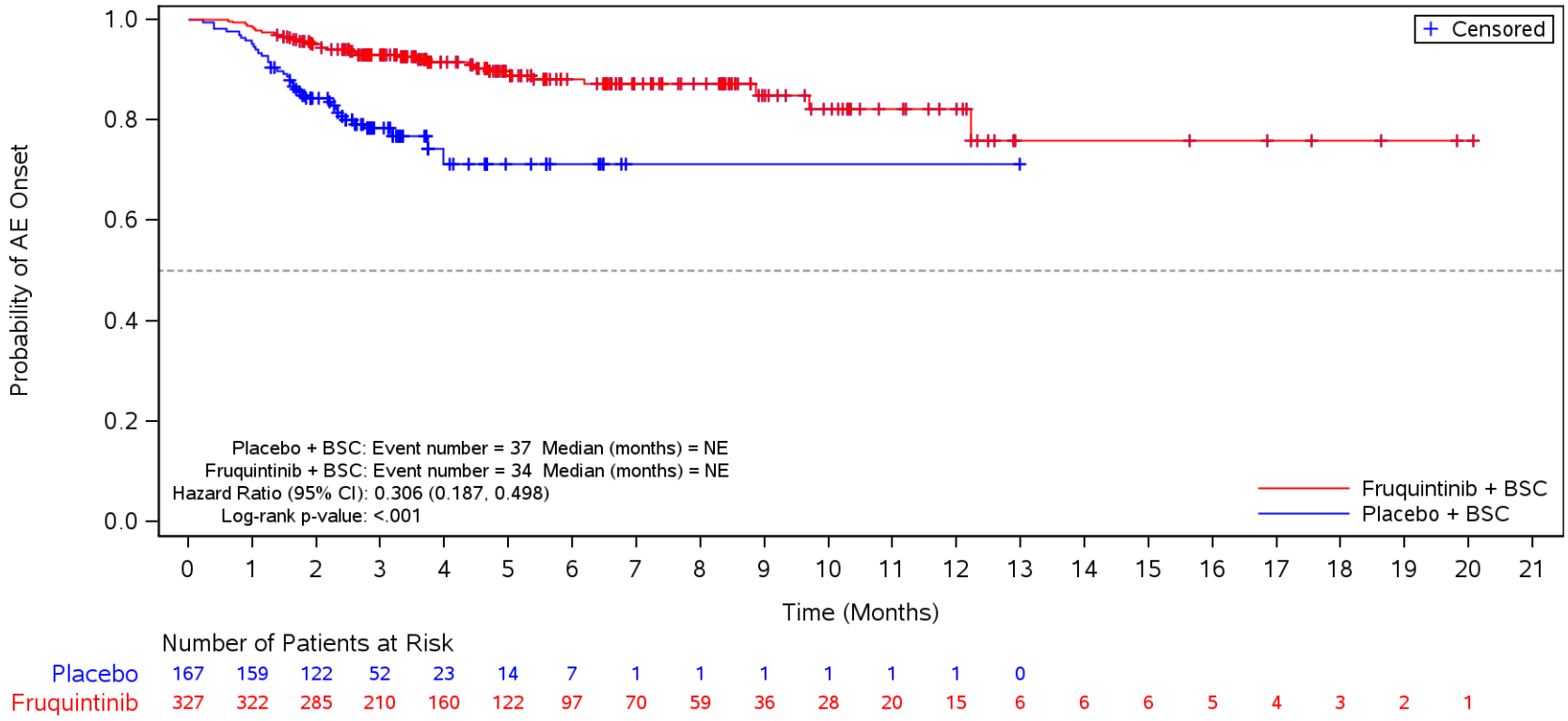
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
Deaths (Grade 5 TEAEs)
North America



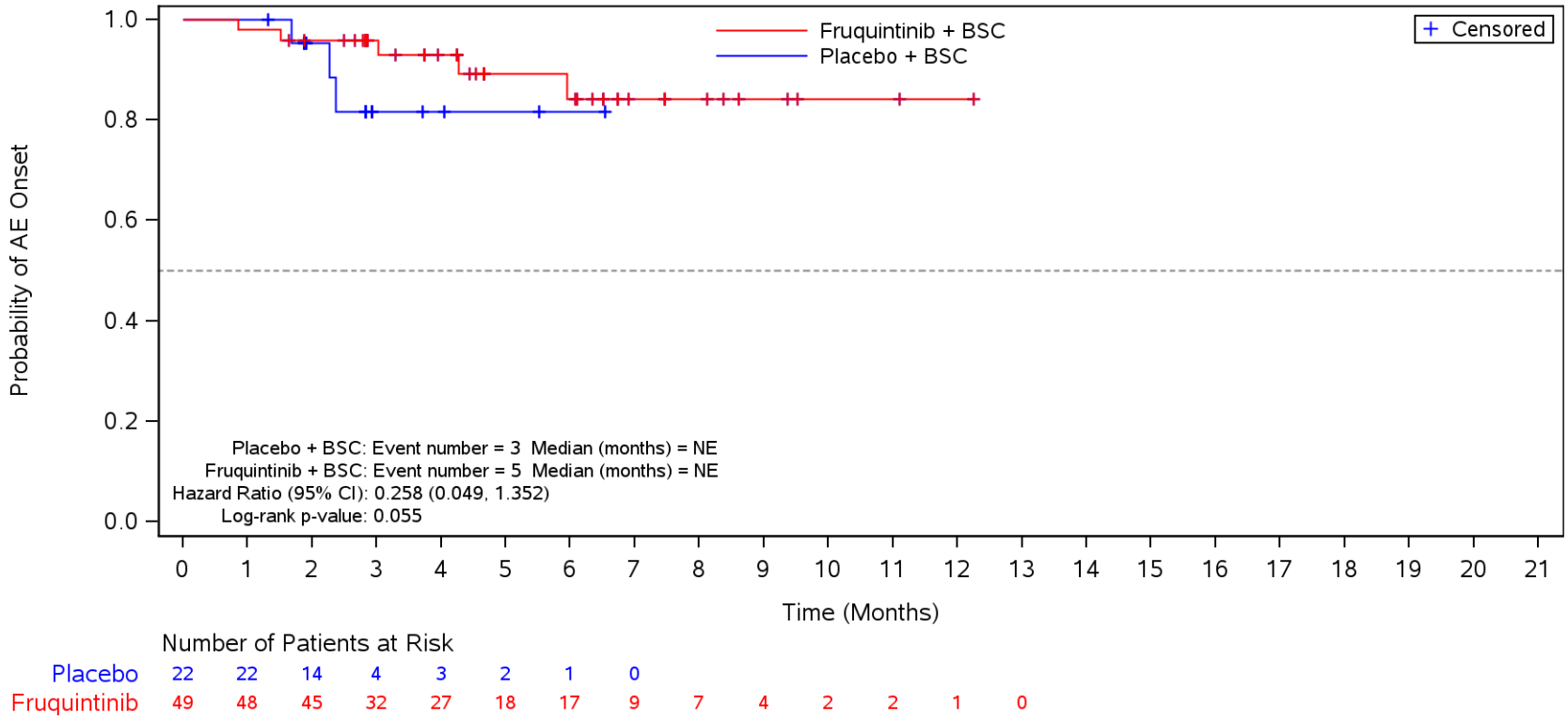
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Geographic Region
Safety Population
Deaths (Grade 5 TEAEs)
Europe



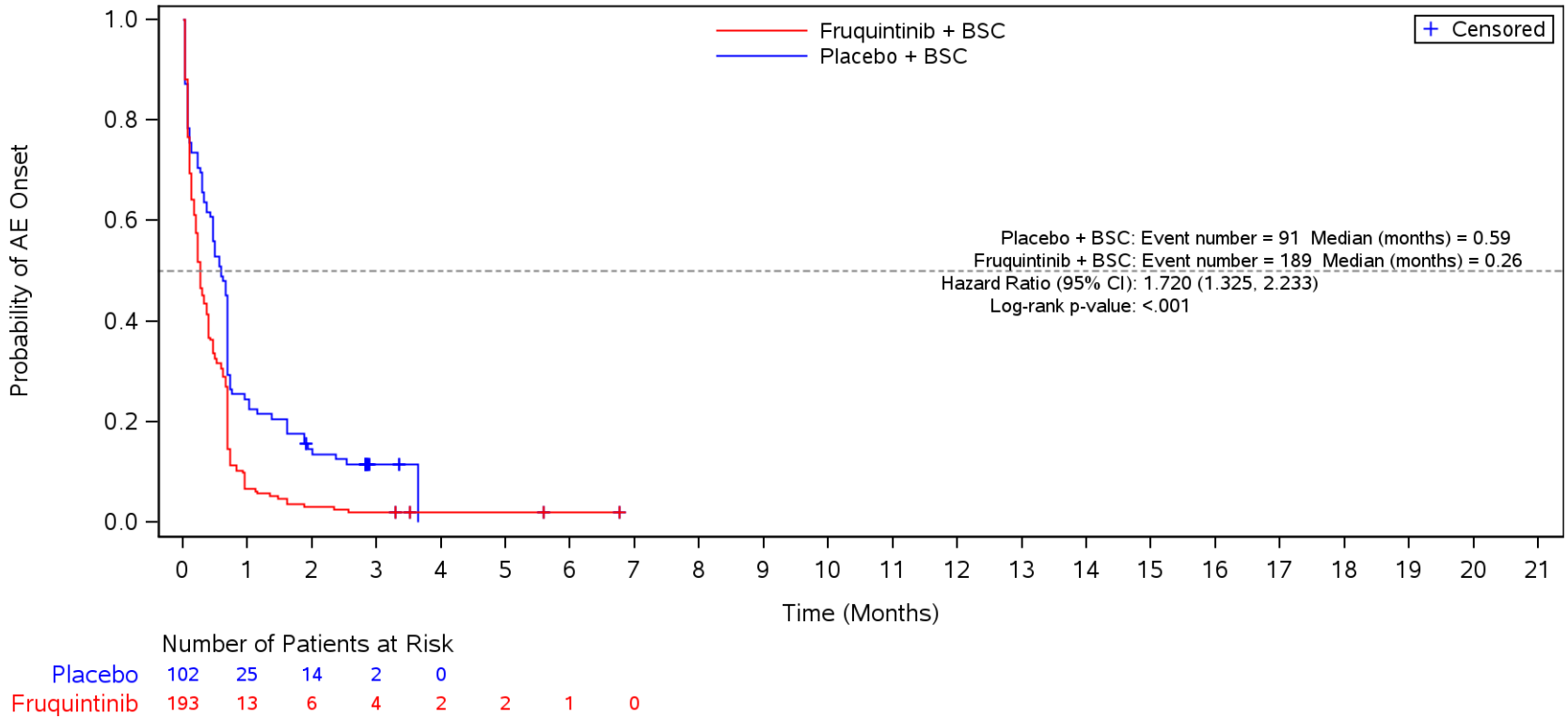
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
TEAE
ECOG: 0



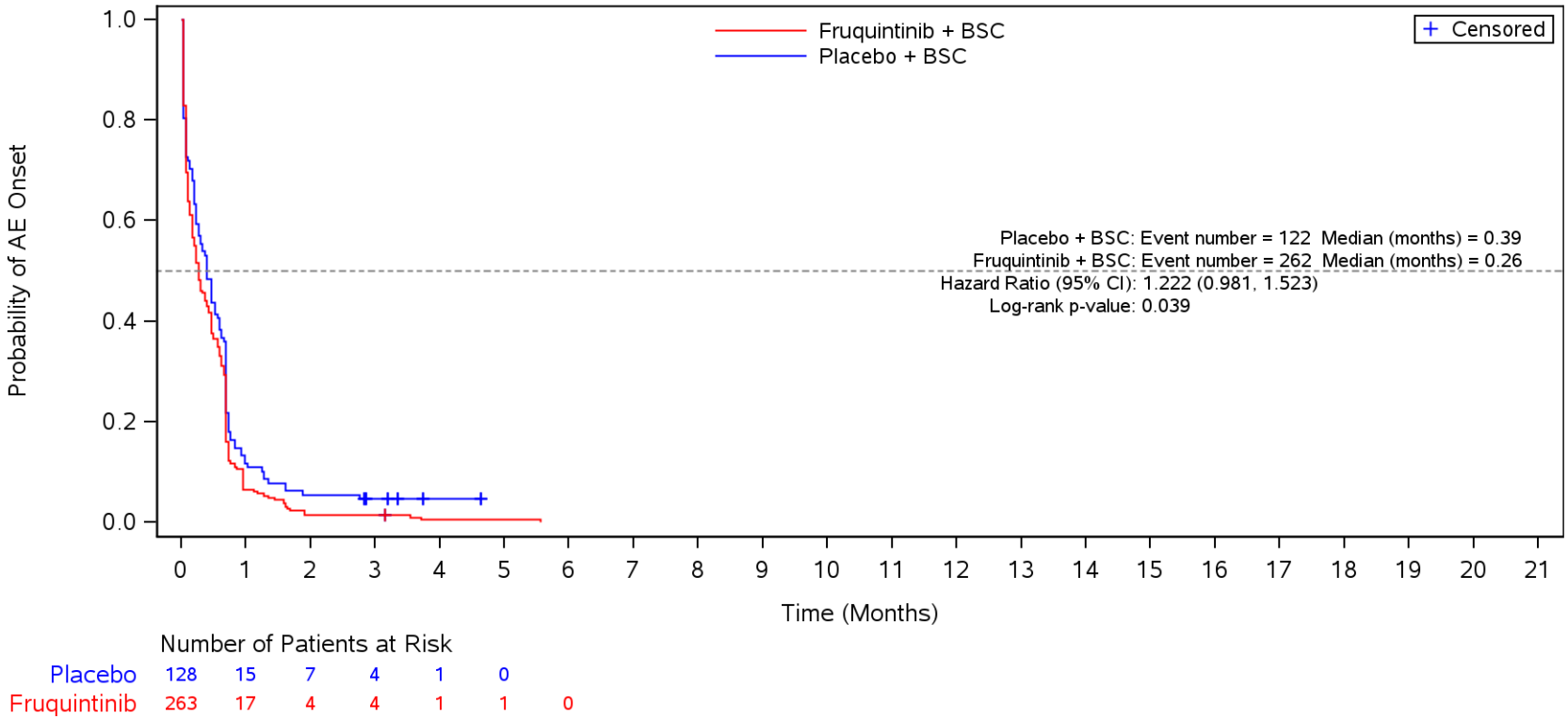
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
TEAE
ECOG: 0



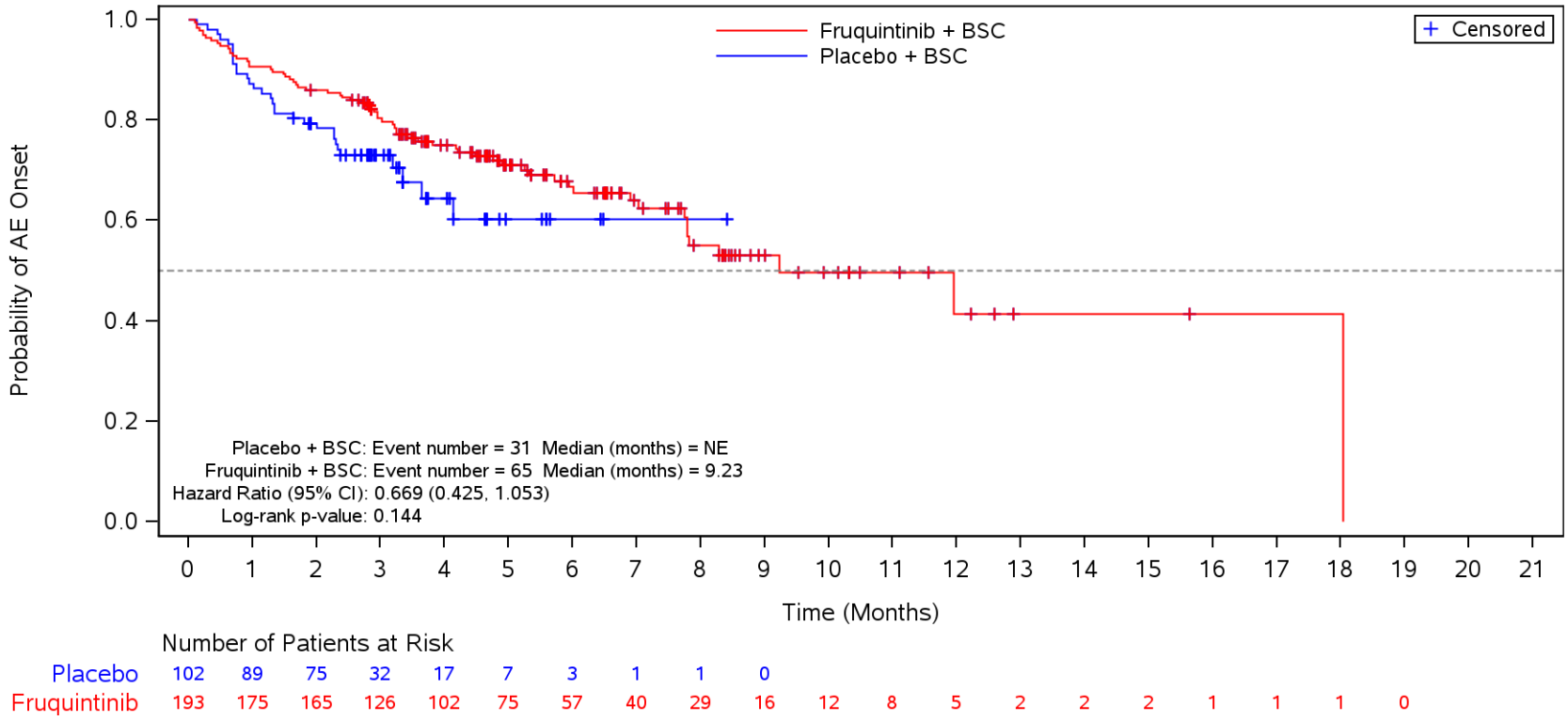
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
TEAE
ECOG: 1



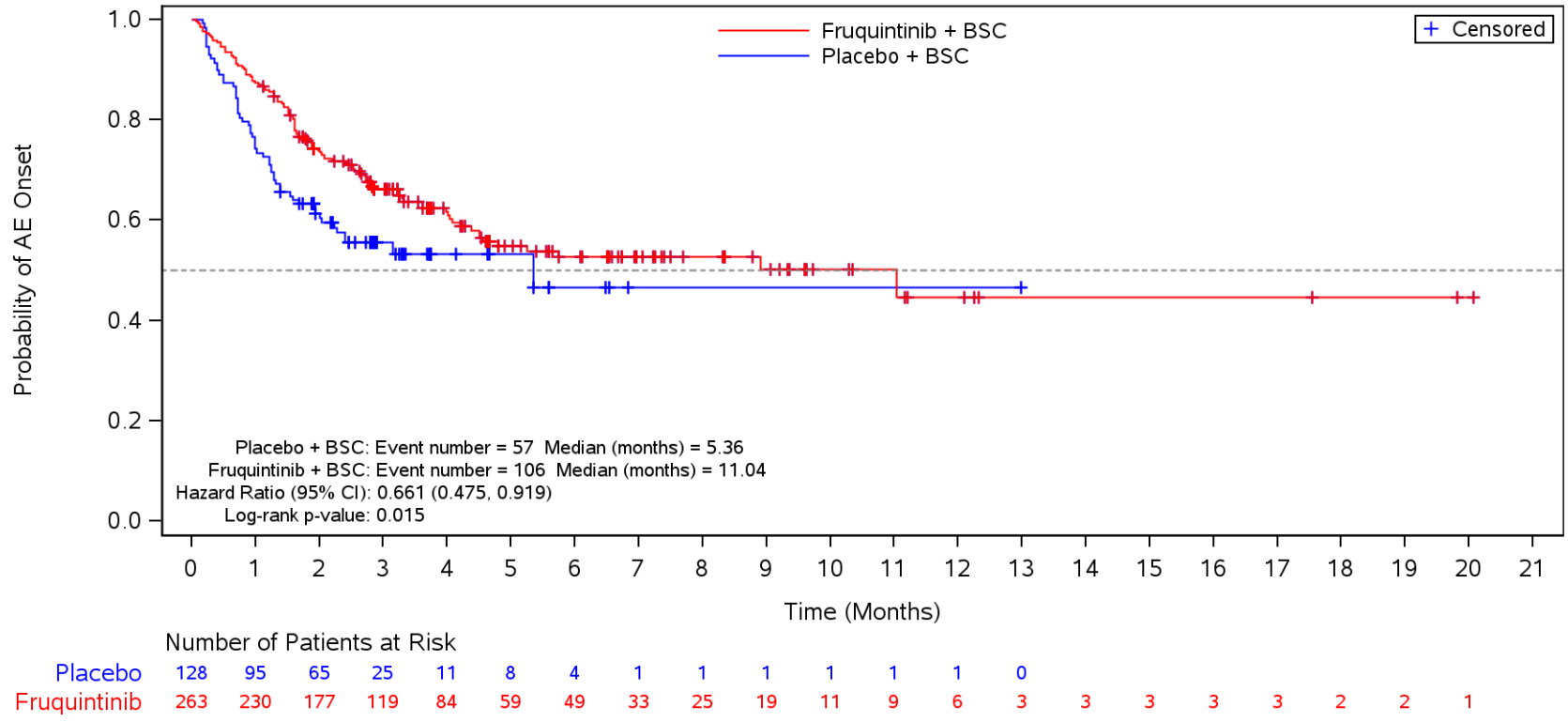
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
Serious TEAE
ECOG: 0



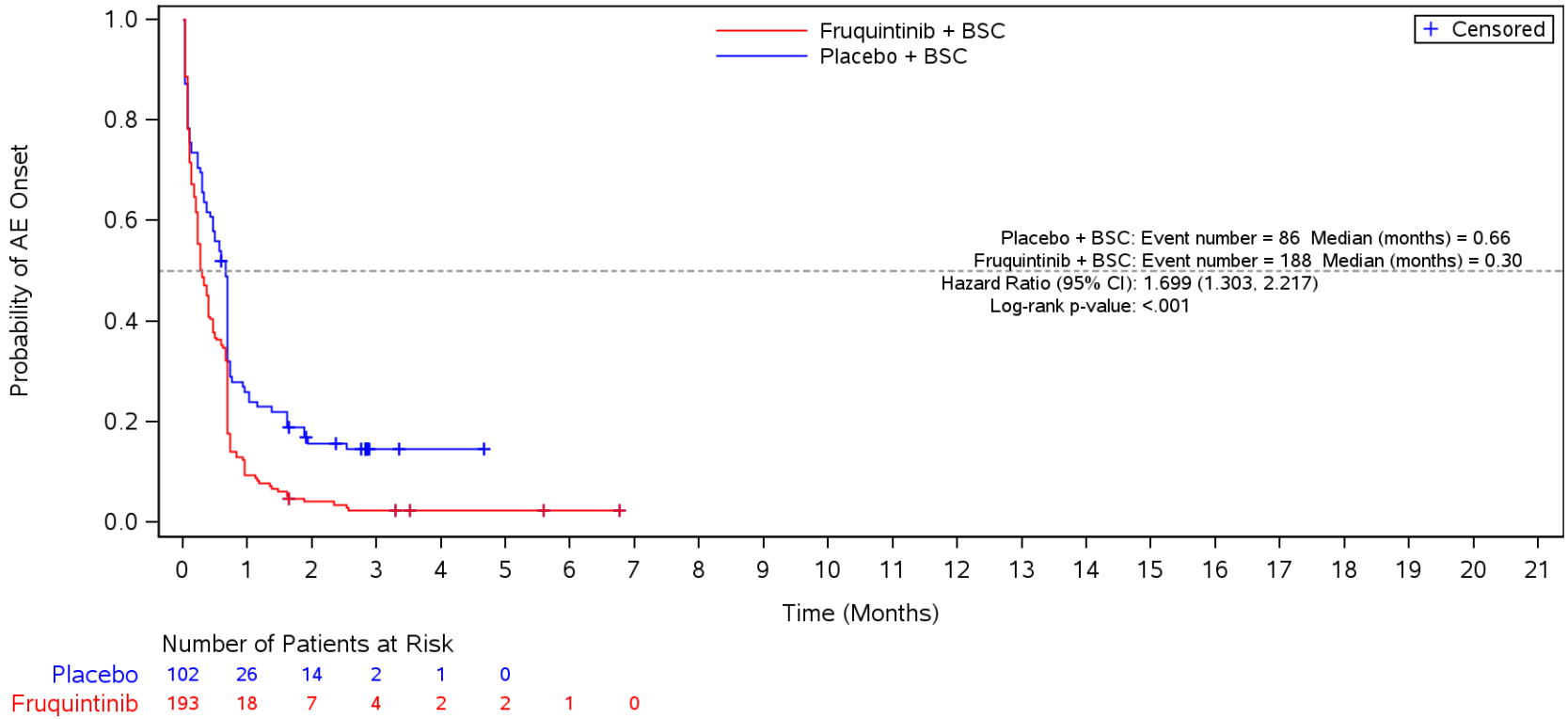
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
Serious TEAE
ECOG: 1



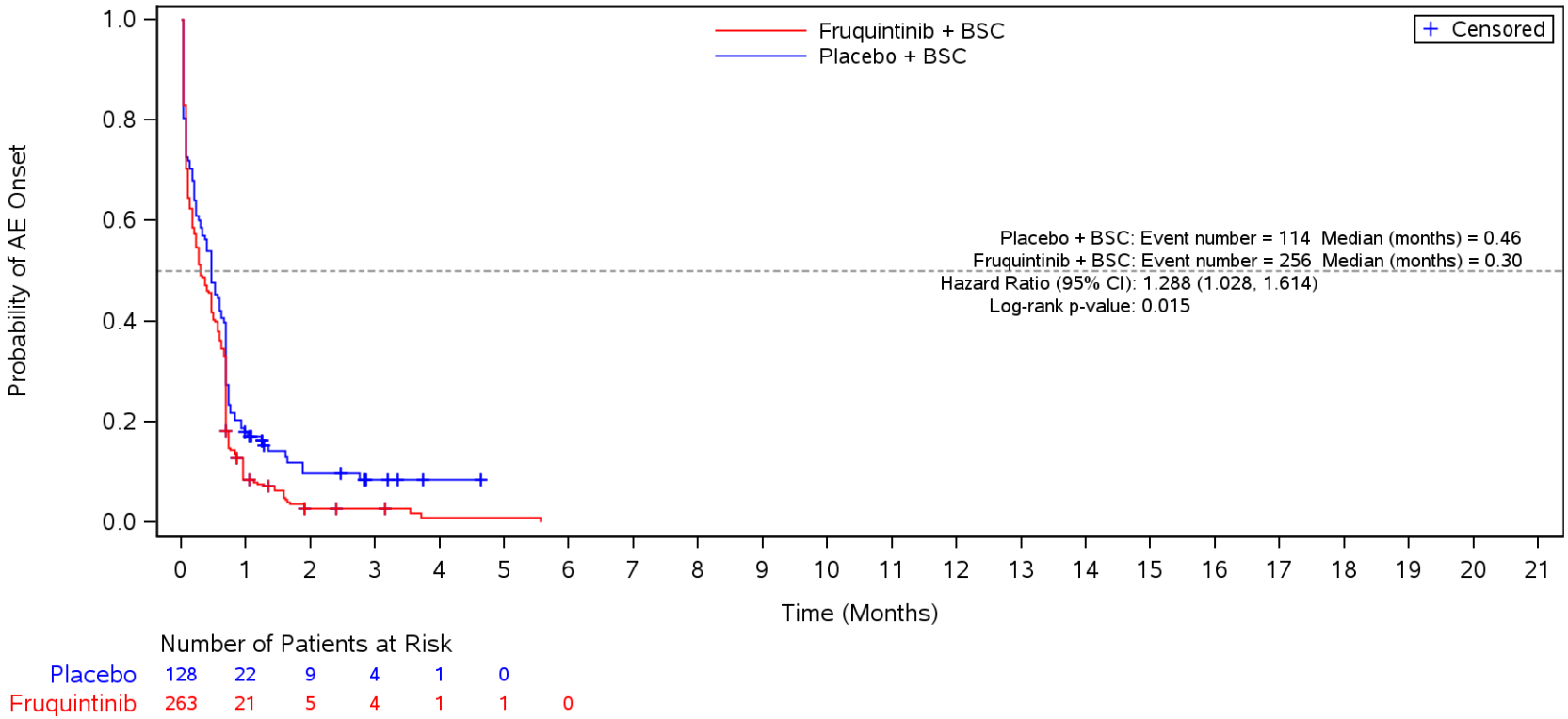
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
TEAE ≤ CTCAE Grade 2
ECOG: 0



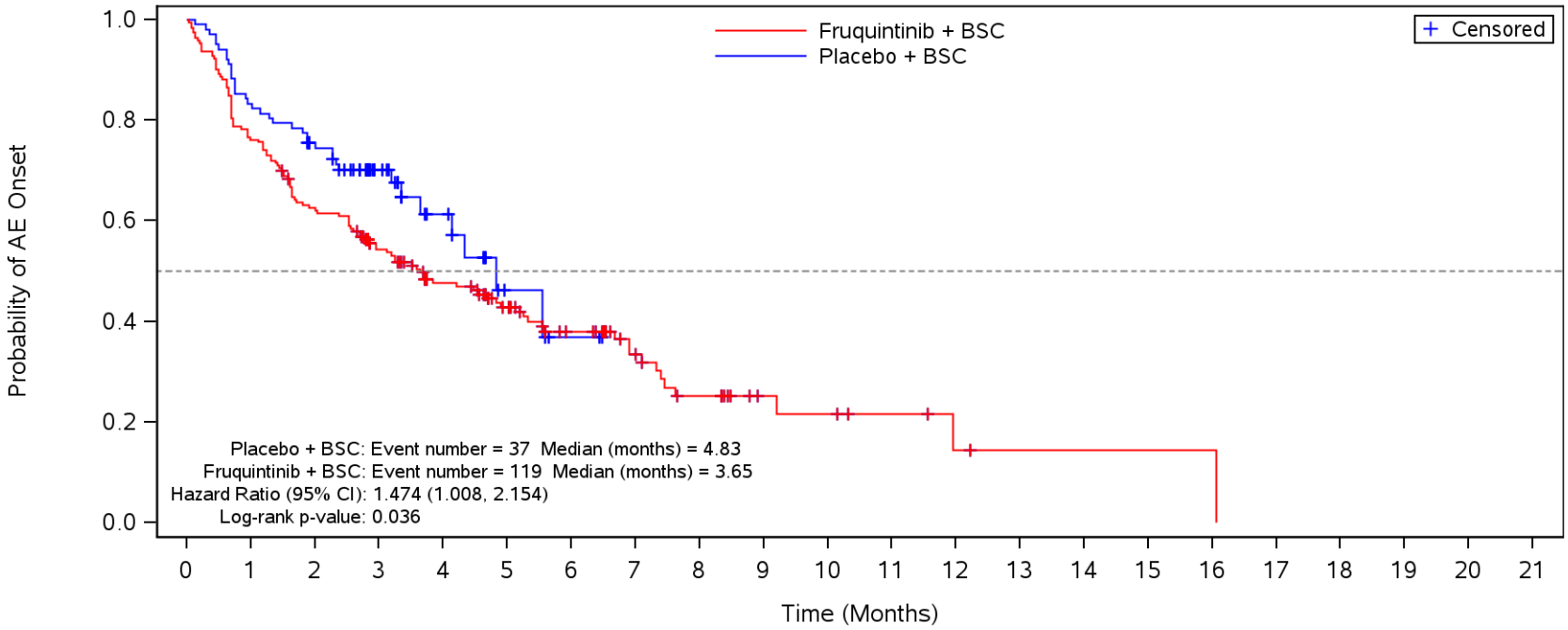
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
TEAE ≤ CTCAE Grade 2
ECOG: 1



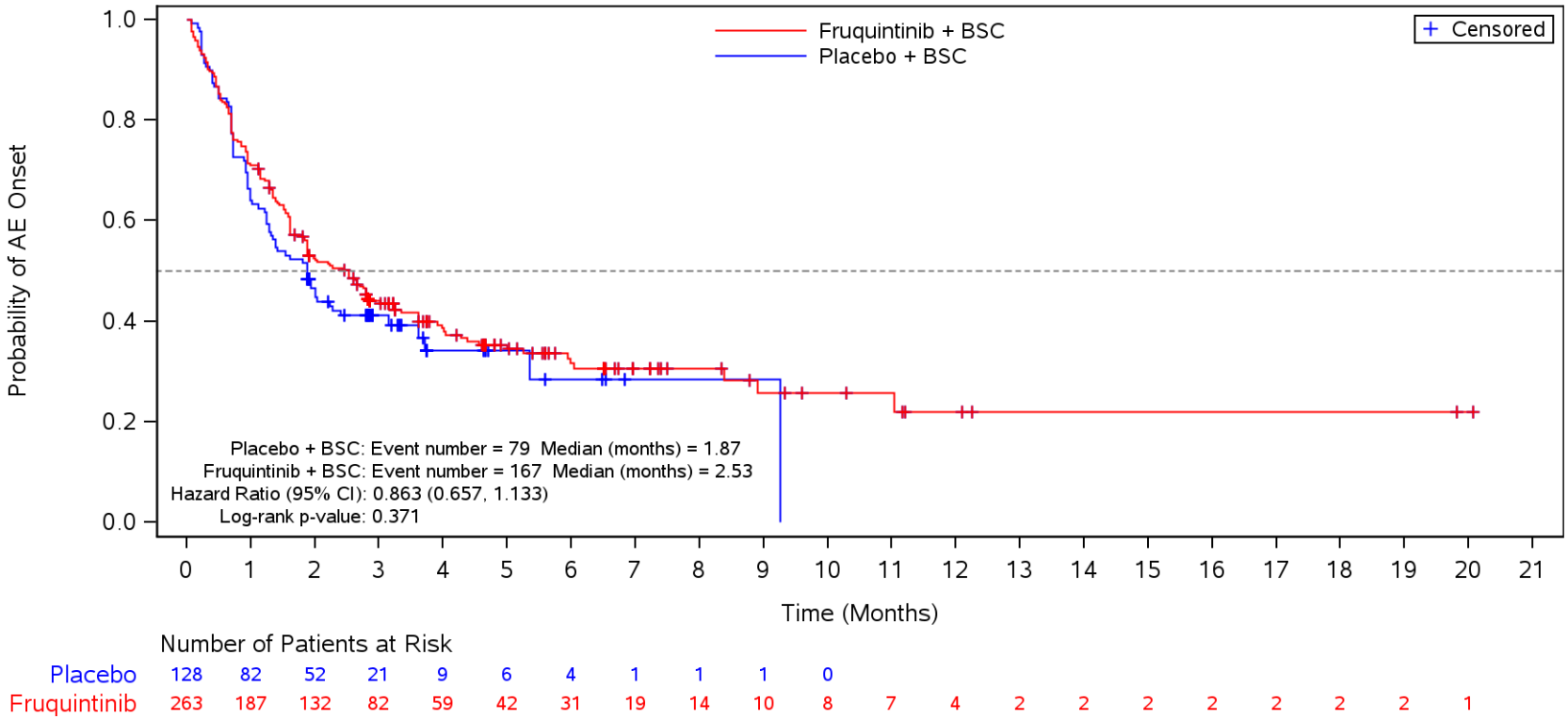
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3
ECOG: 0



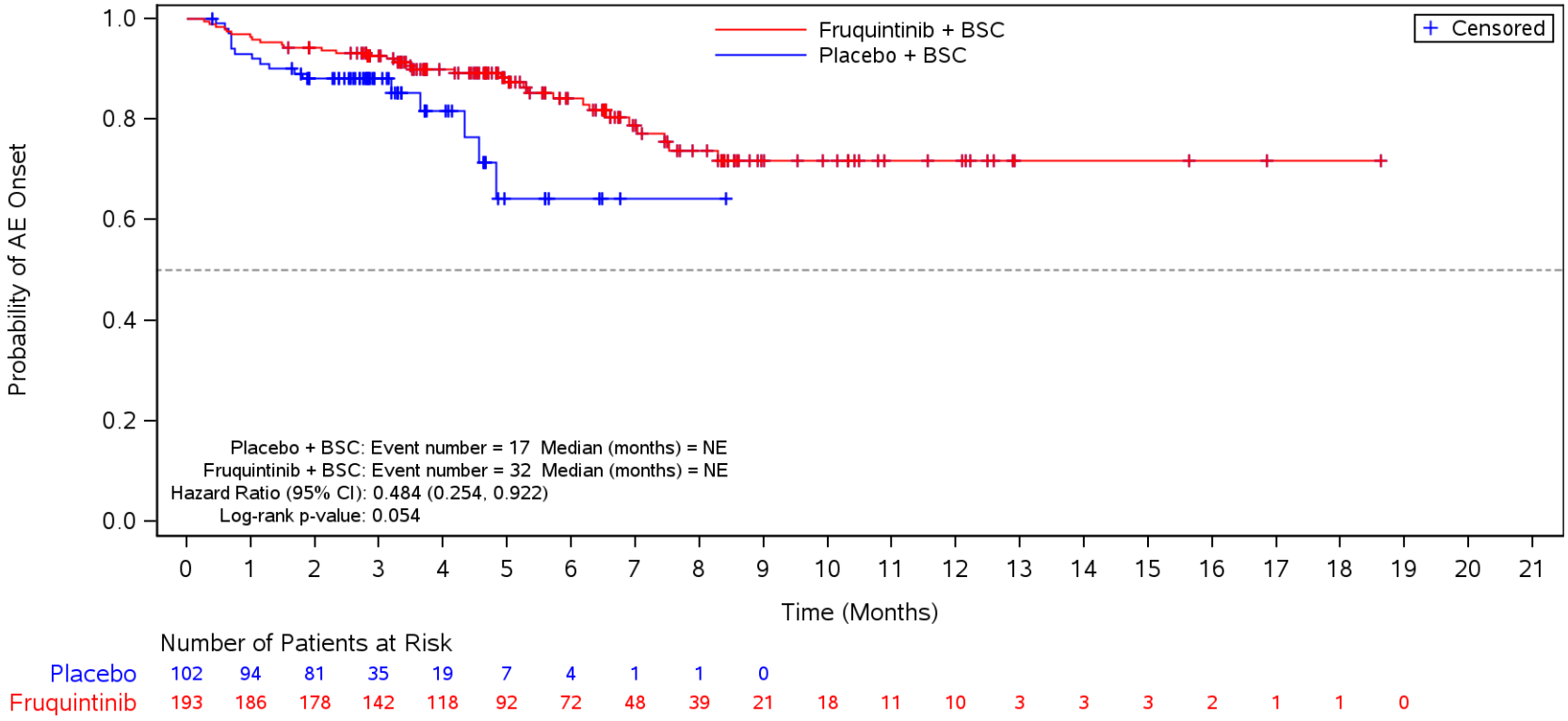
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3
ECOG: 1



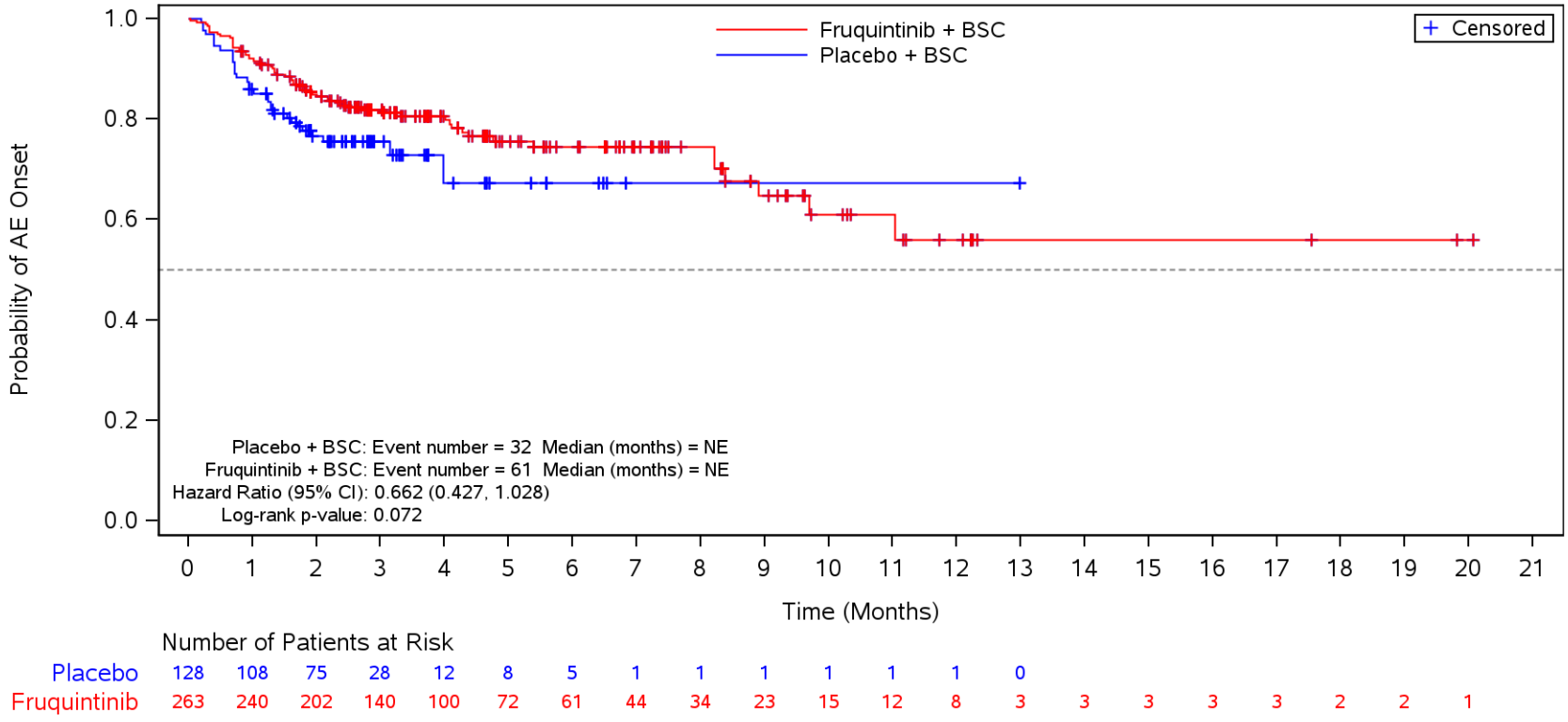
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
Discontinuation due to TEAE
ECOG: 0



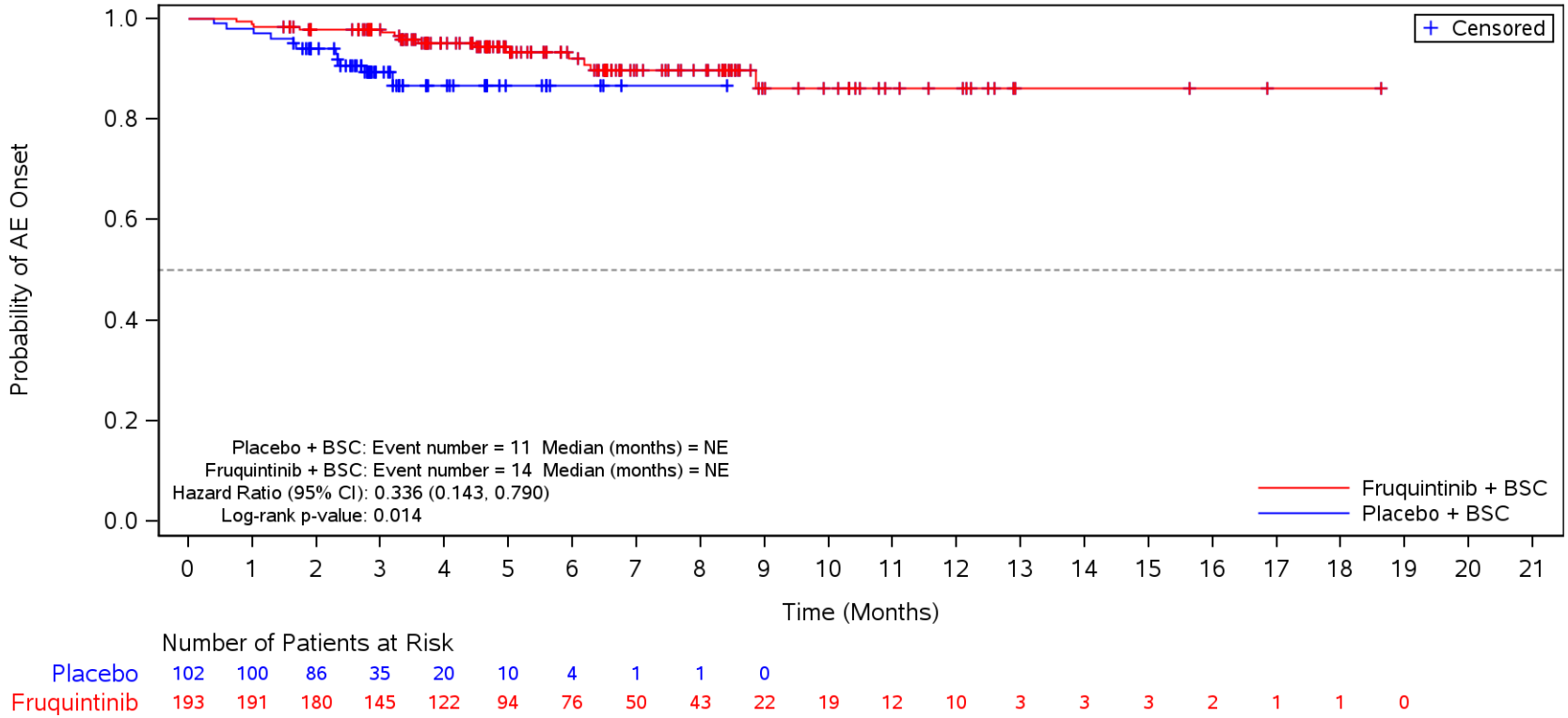
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
Discontinuation due to TEAE
ECOG: 1



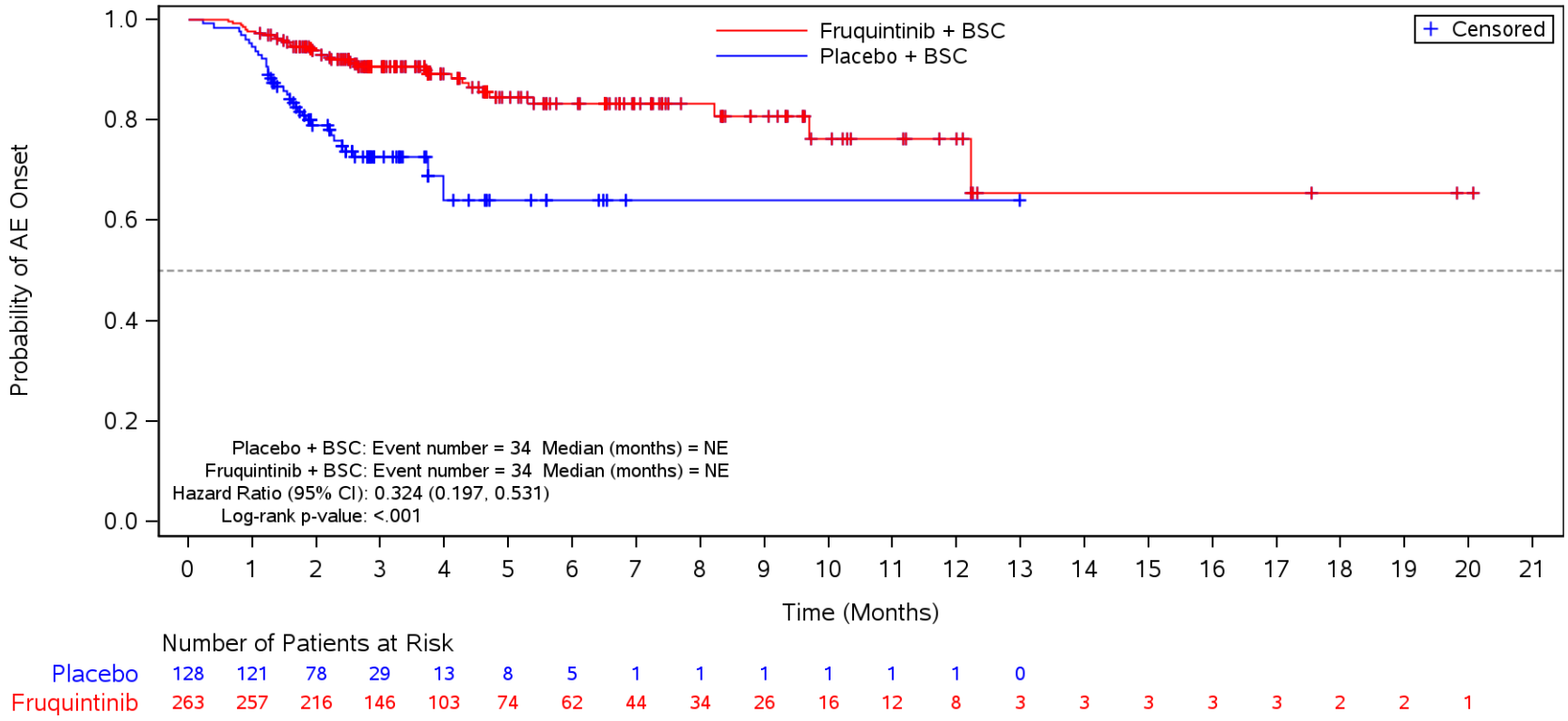
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE by ECOG PS
Safety Population
Deaths (Grade 5 TEAEs)
ECOG: 0



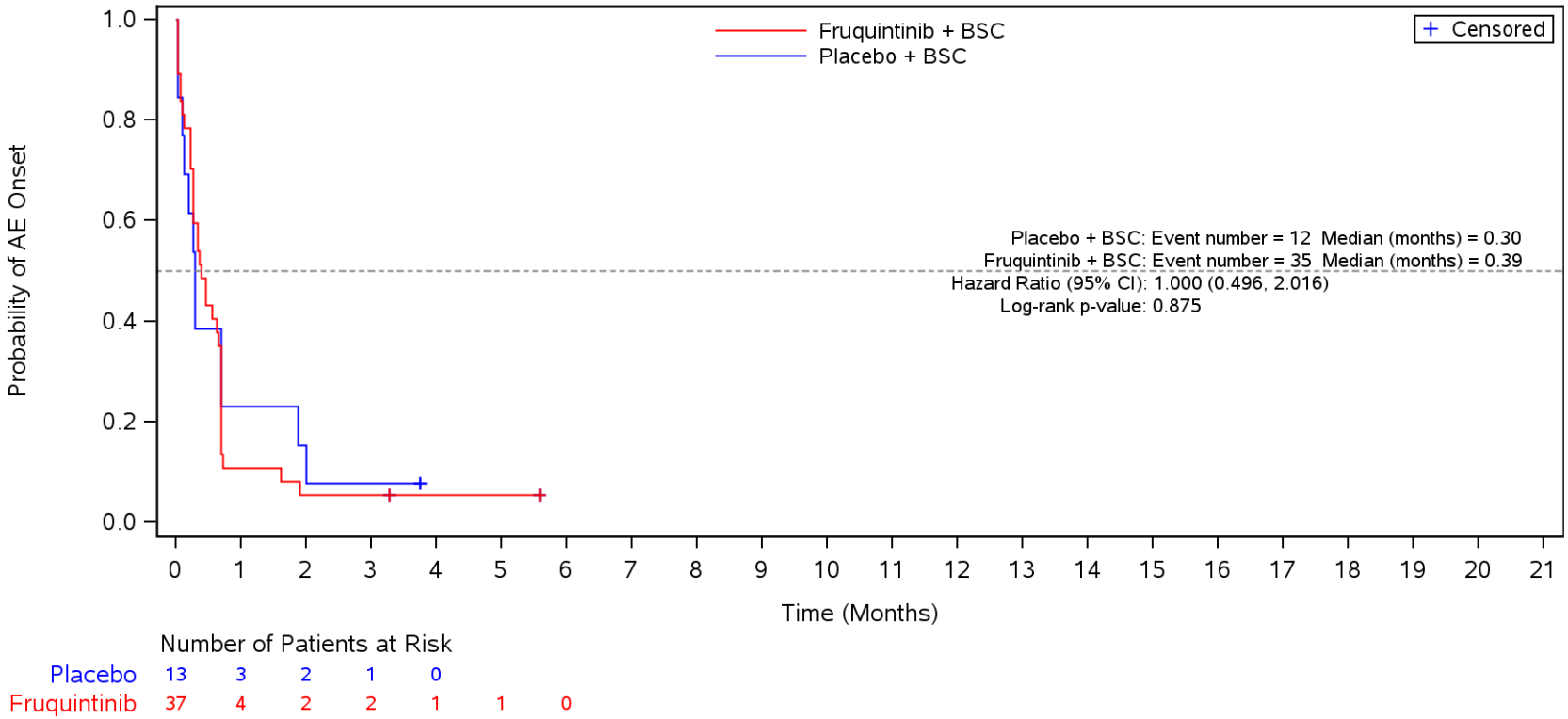
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
TEAE
<= 18 months



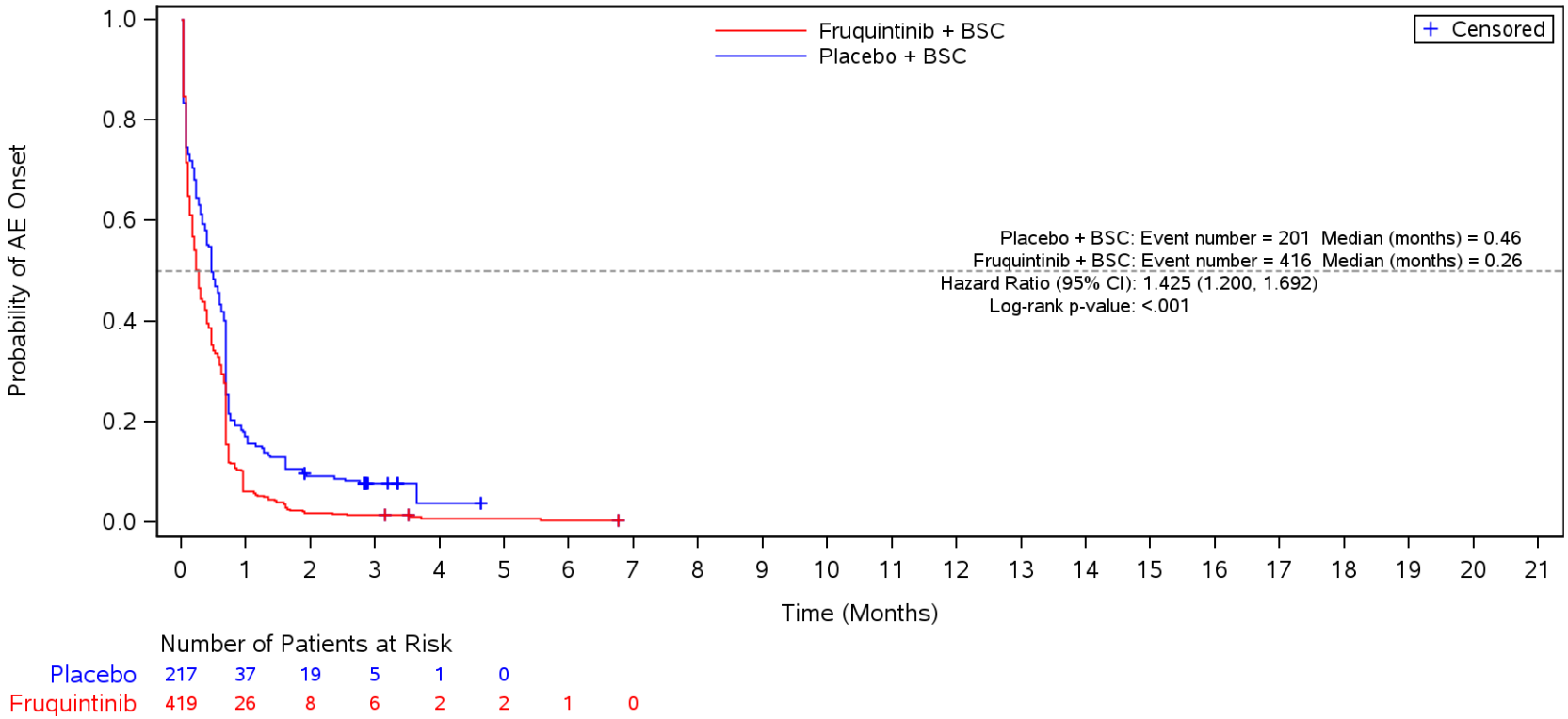
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
TEAE
<= 18 months



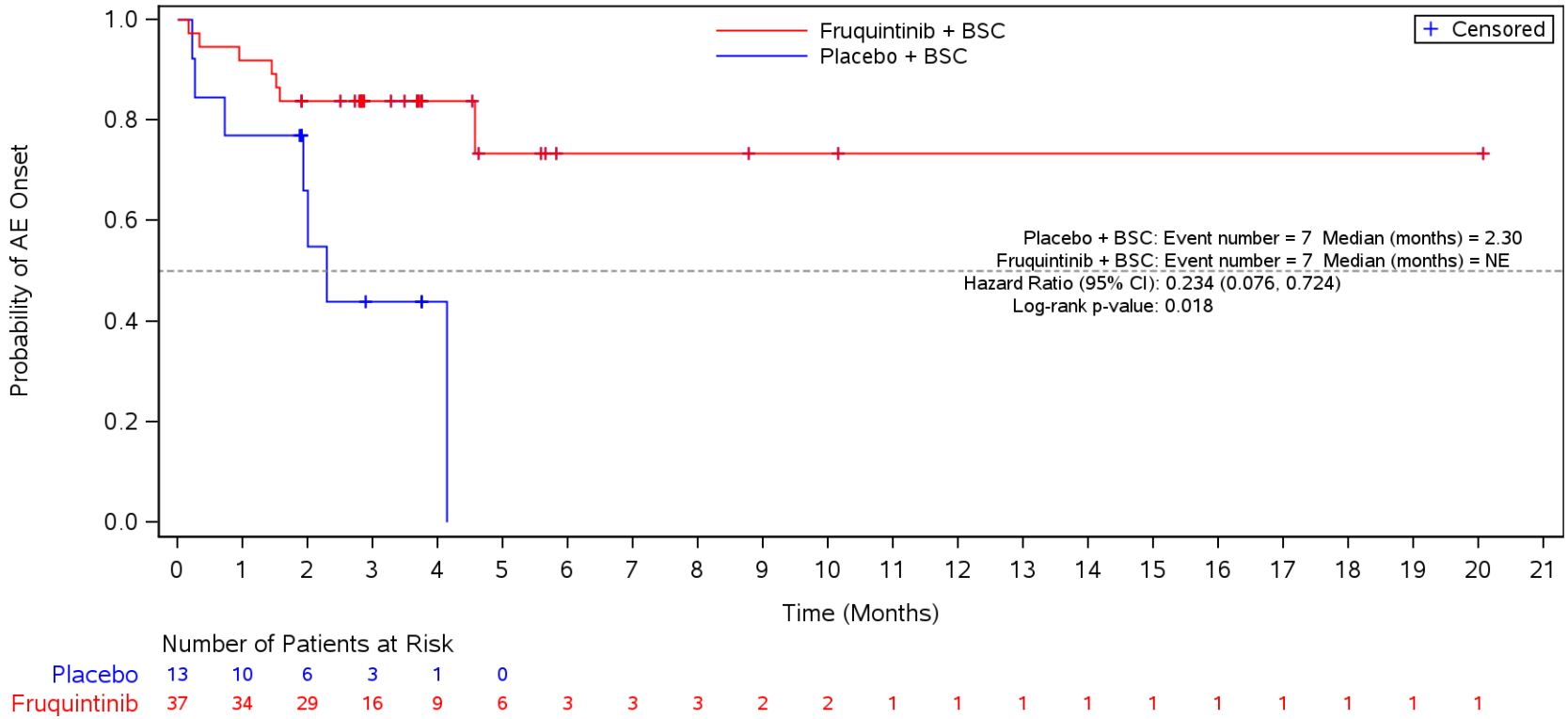
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
TEAE
> 18 months



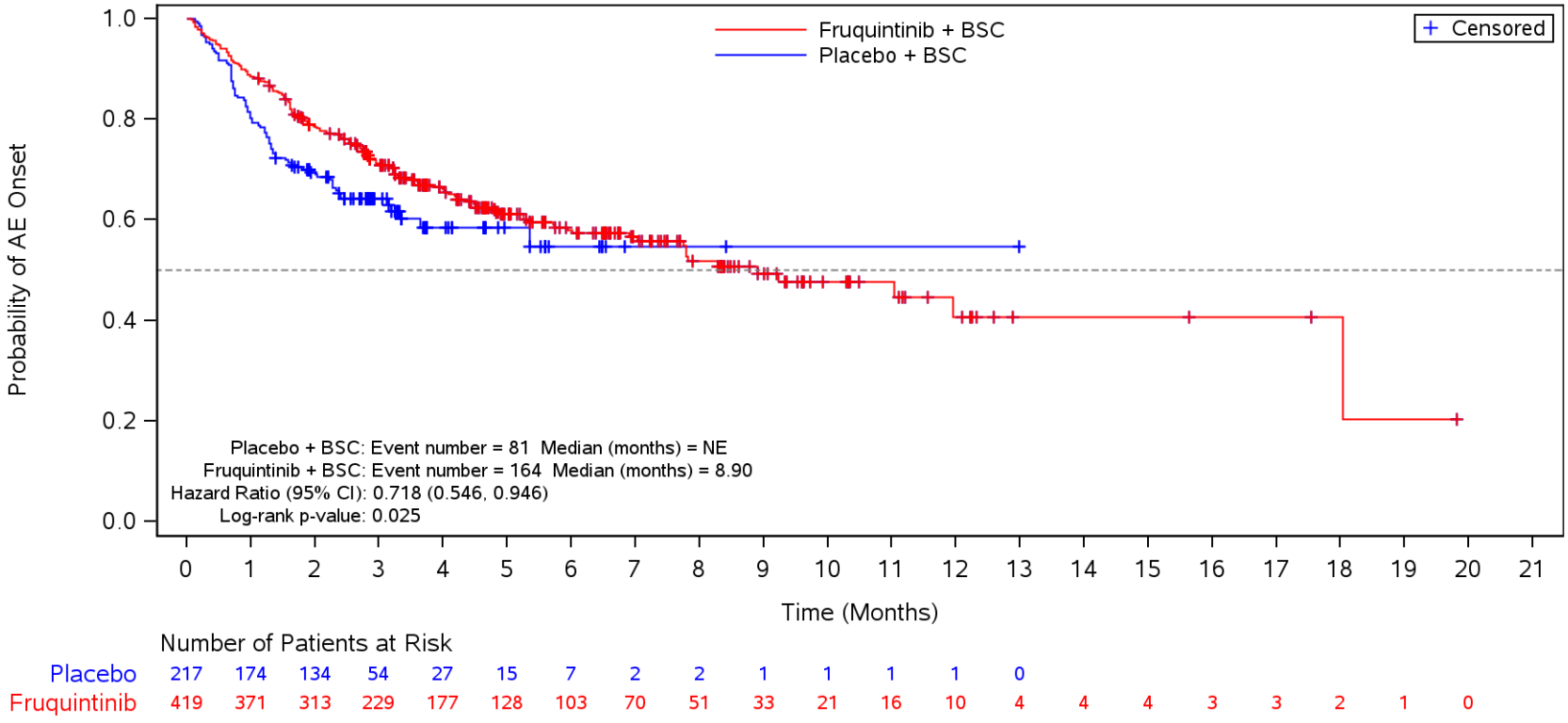
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
Serious TEAE
<= 18 months



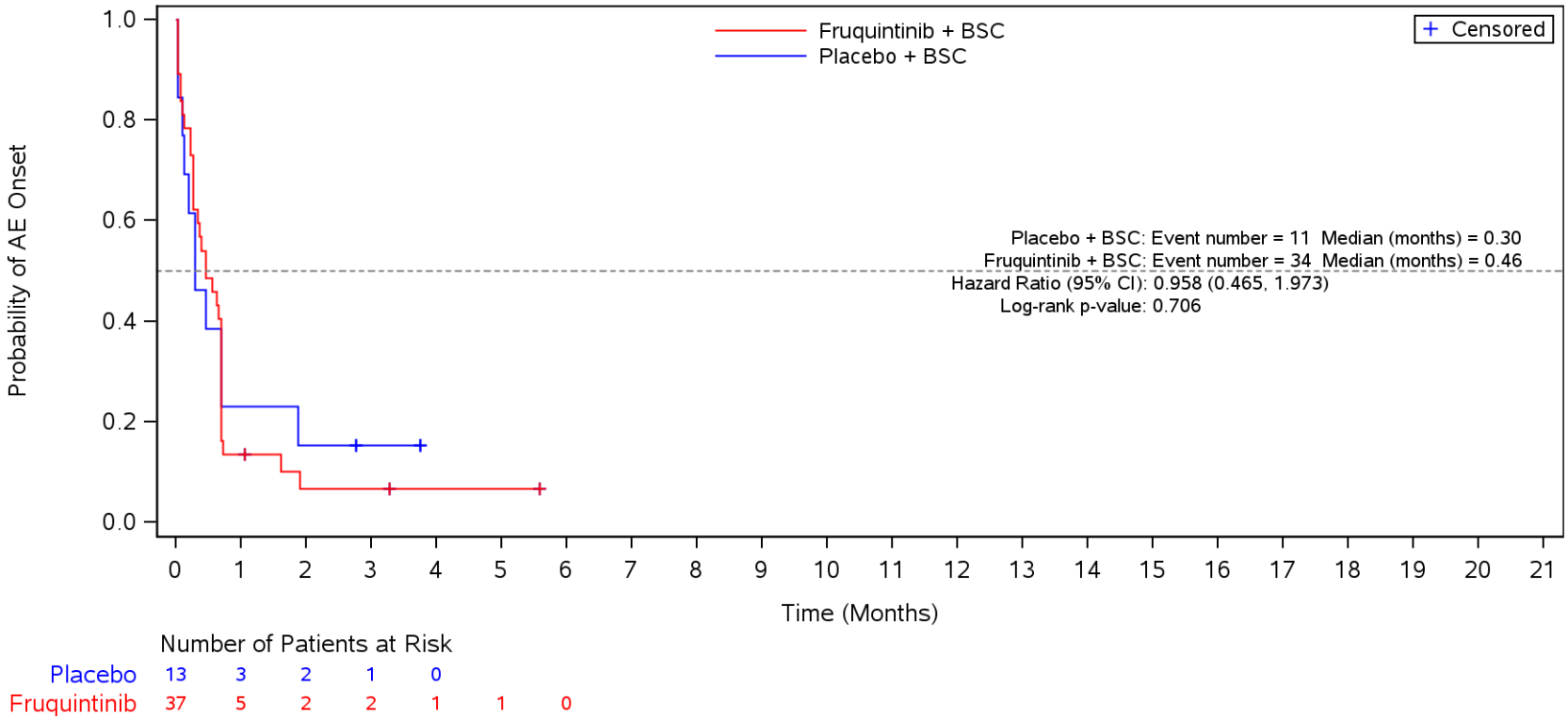
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
Serious TEAE
> 18 months



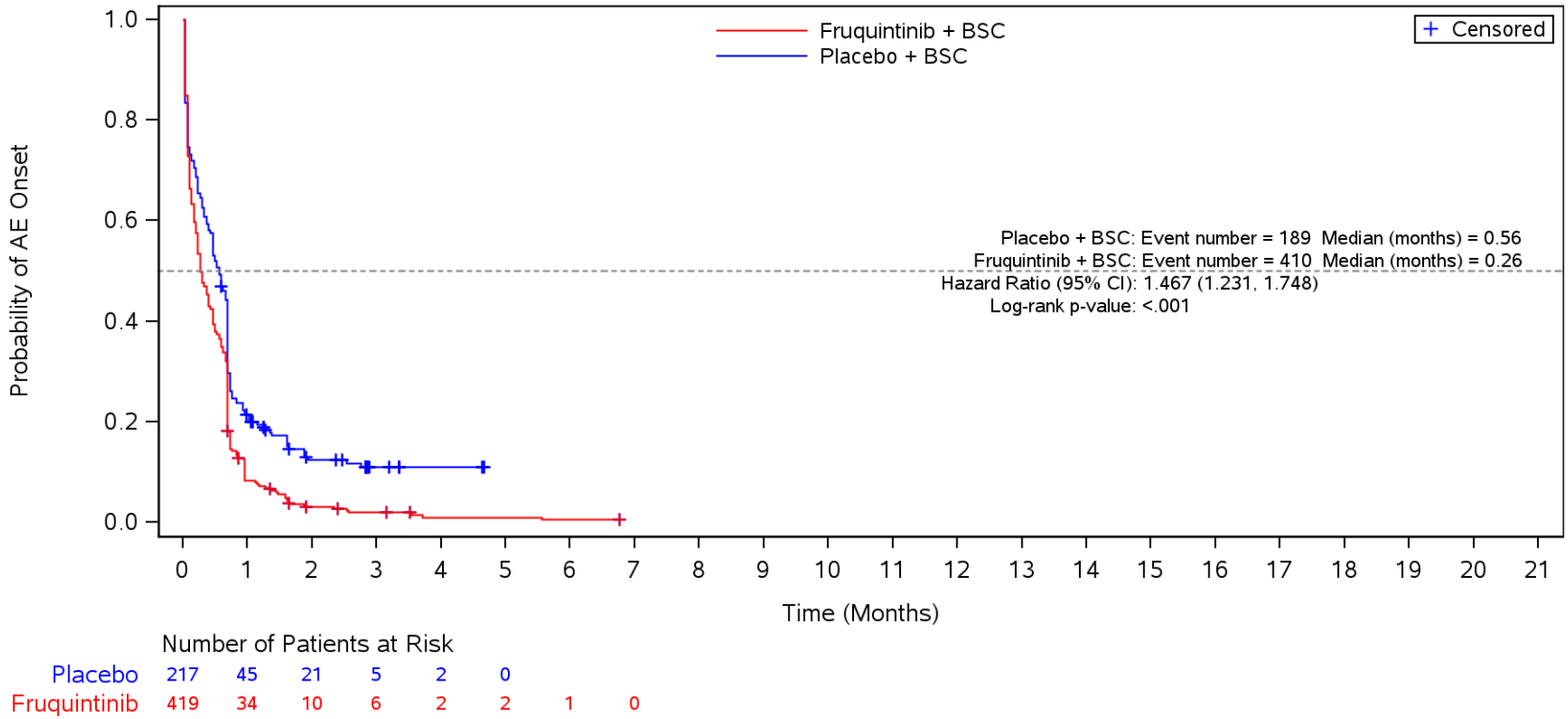
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
TEAE ≤ CTCAE Grade 2
<= 18 months



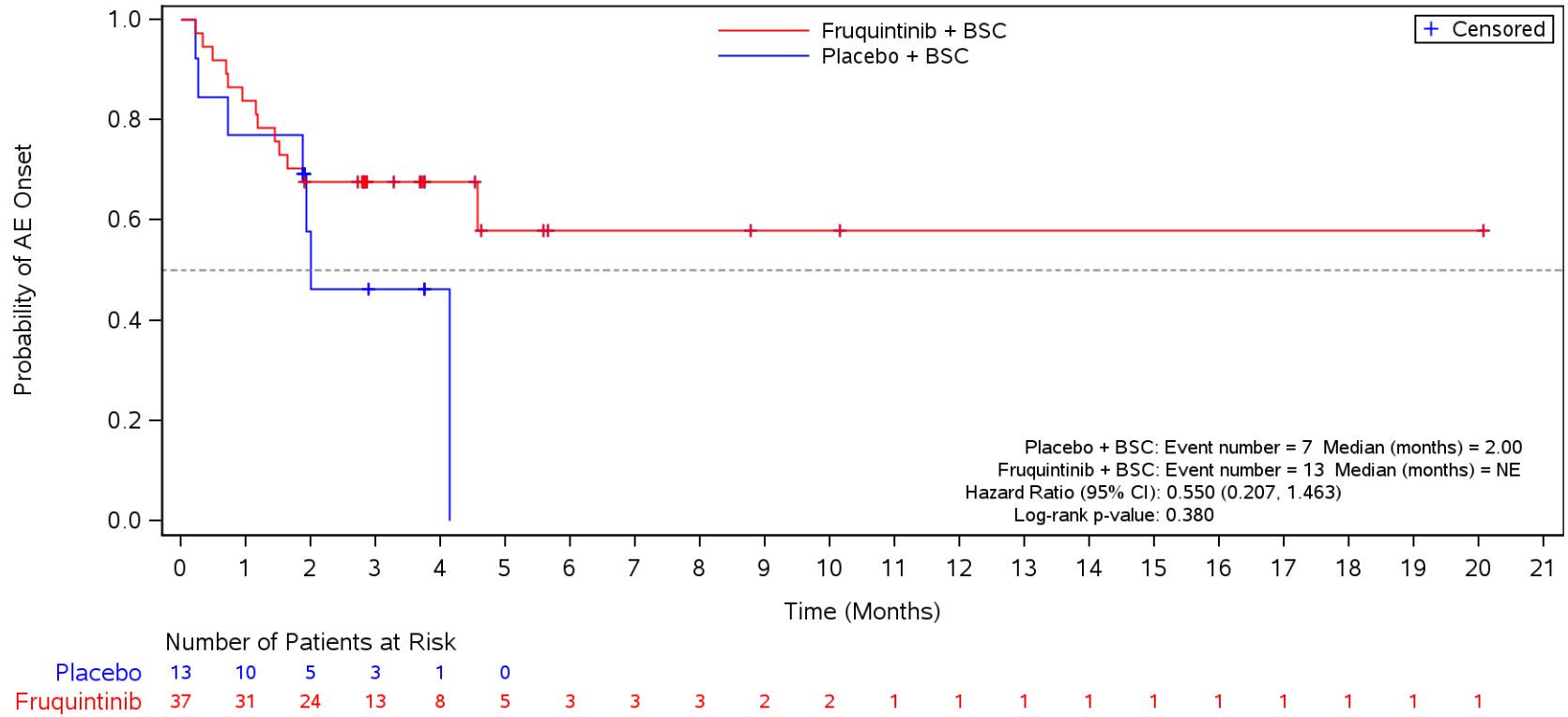
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
TEAE ≤ CTCAE Grade 2
> 18 months



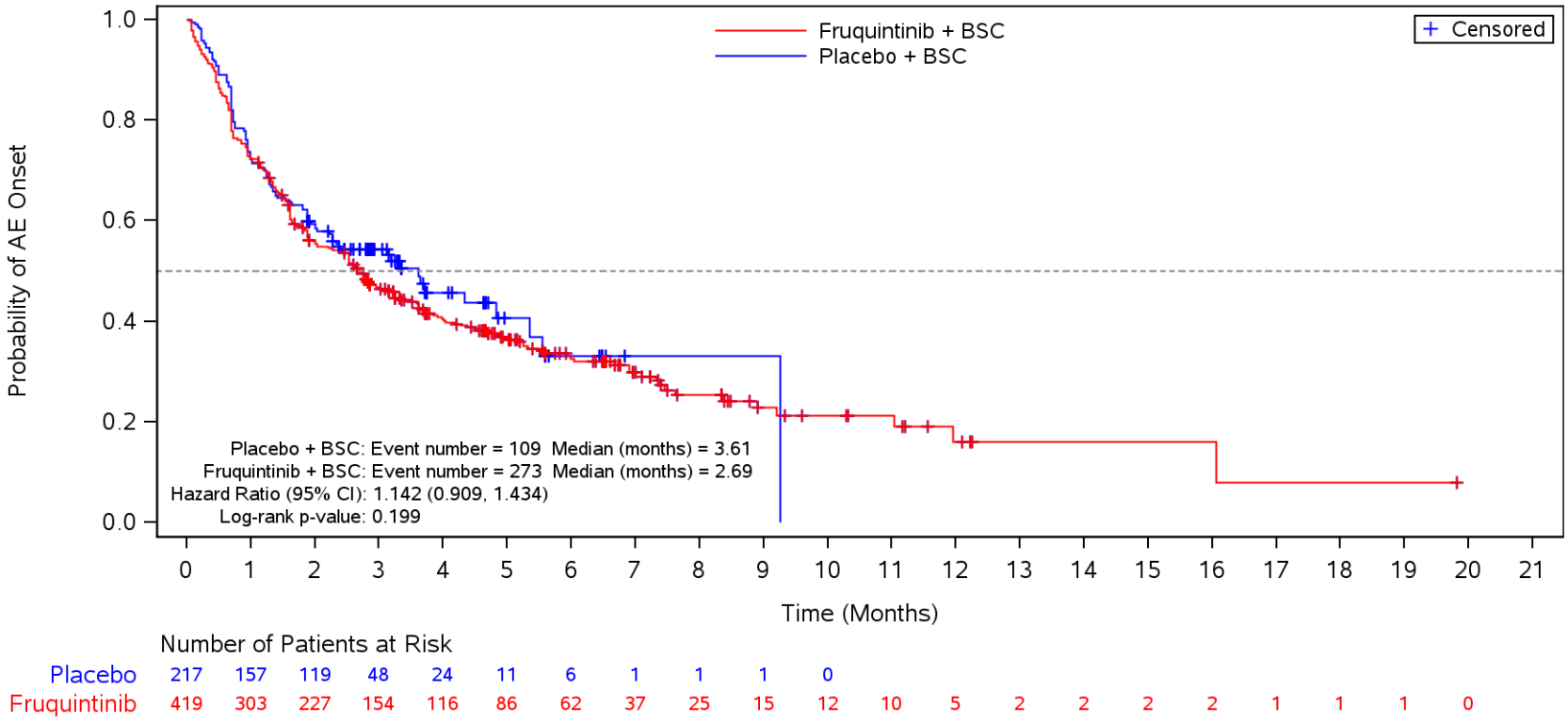
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3
<= 18 months



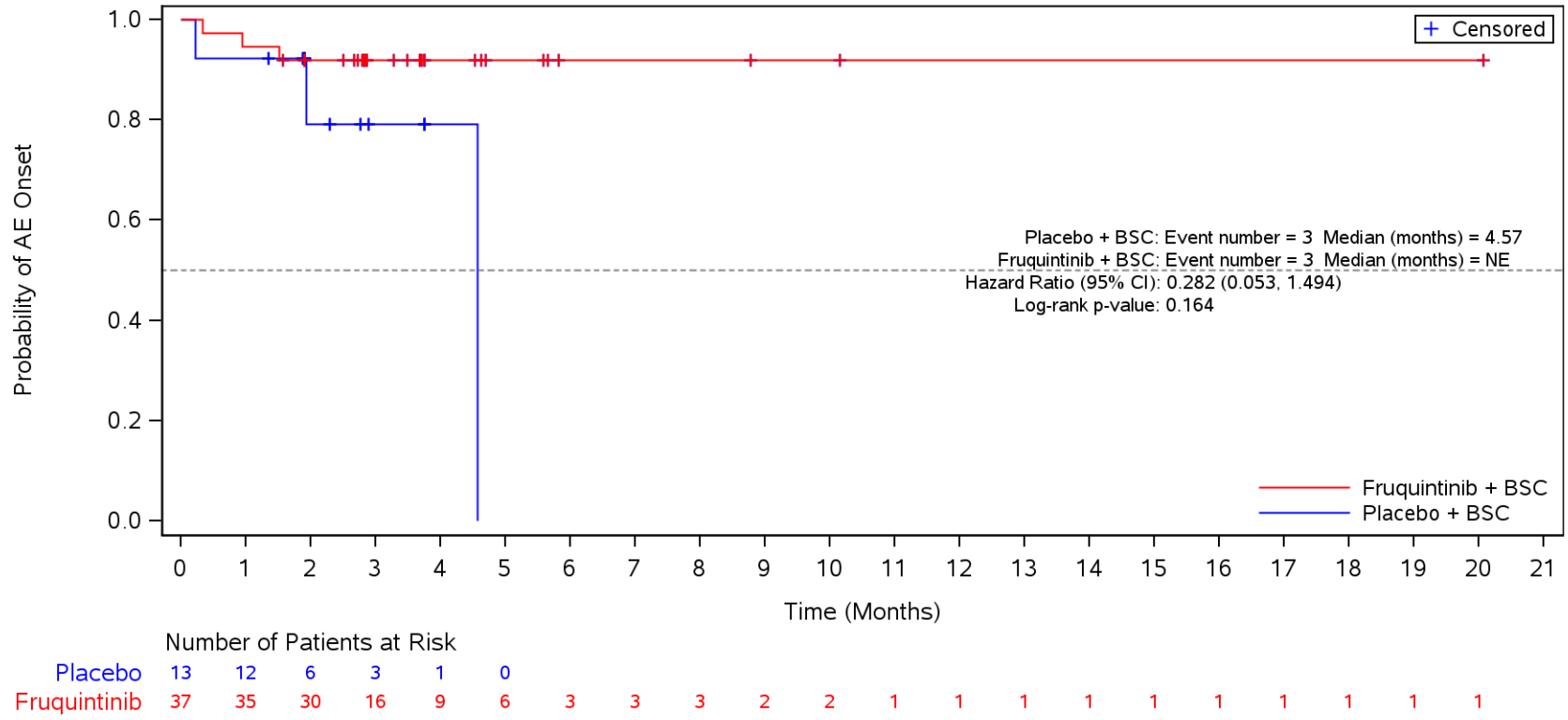
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3
> 18 months



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
Discontinuation due to TEAE
<= 18 months

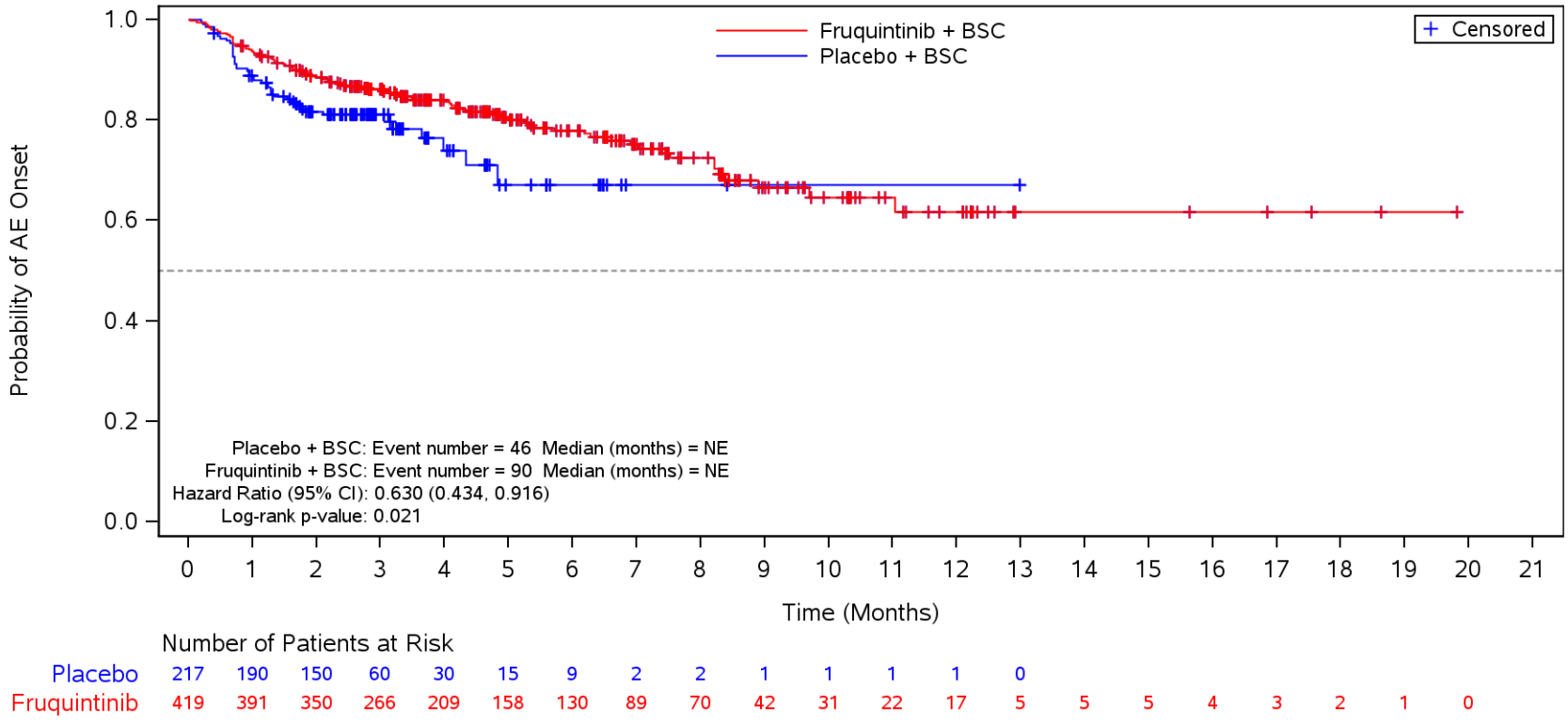


Number of Patients at Risk

Placebo	13	12	6	3	1	0															
Fruquintinib	37	35	30	16	9	6	3	3	3	2	2	1	1	1	1	1	1	1	1	1	1

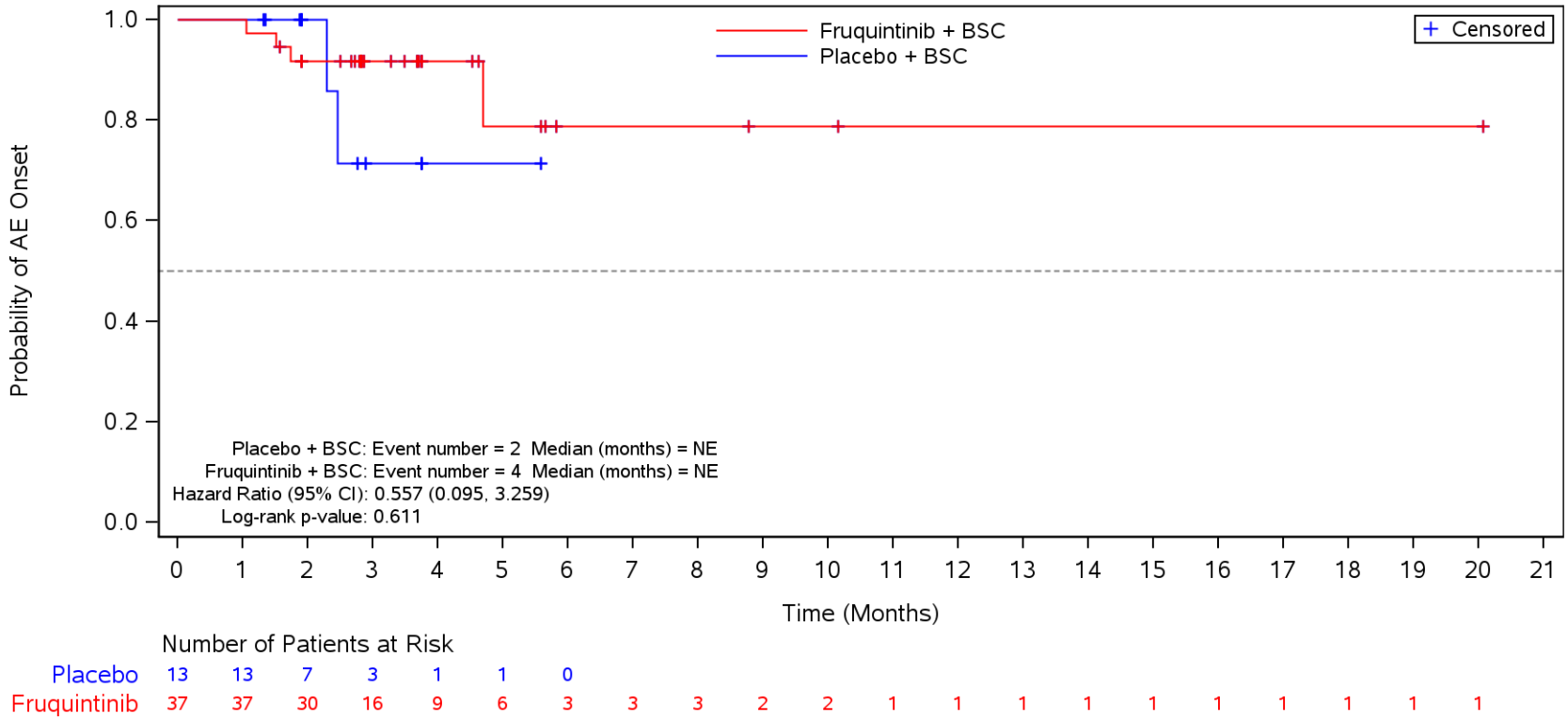
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
Discontinuation due to TEAE
> 18 months



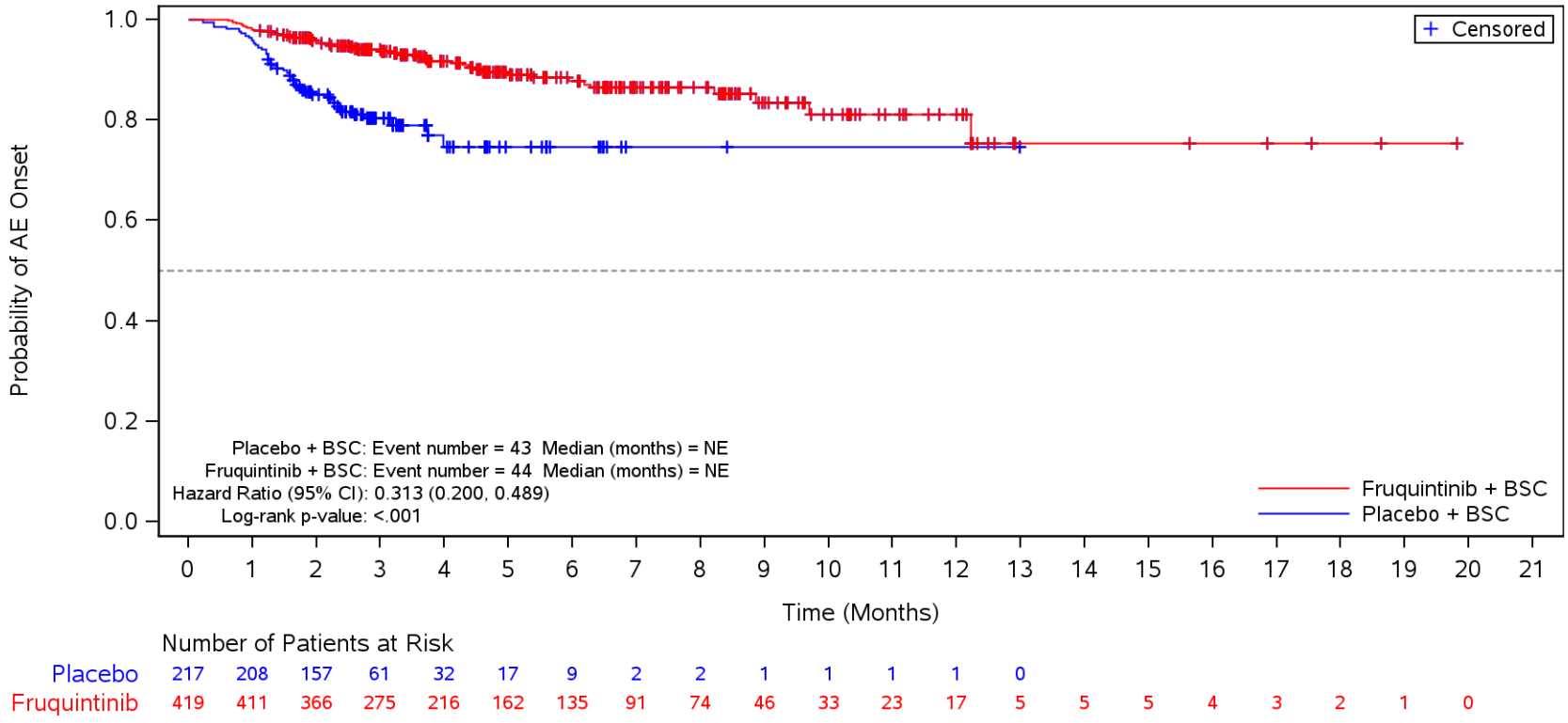
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Duration of Metastatic Disease
Safety Population
Deaths (Grade 5 TEAEs)
<= 18 months



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE
Colon

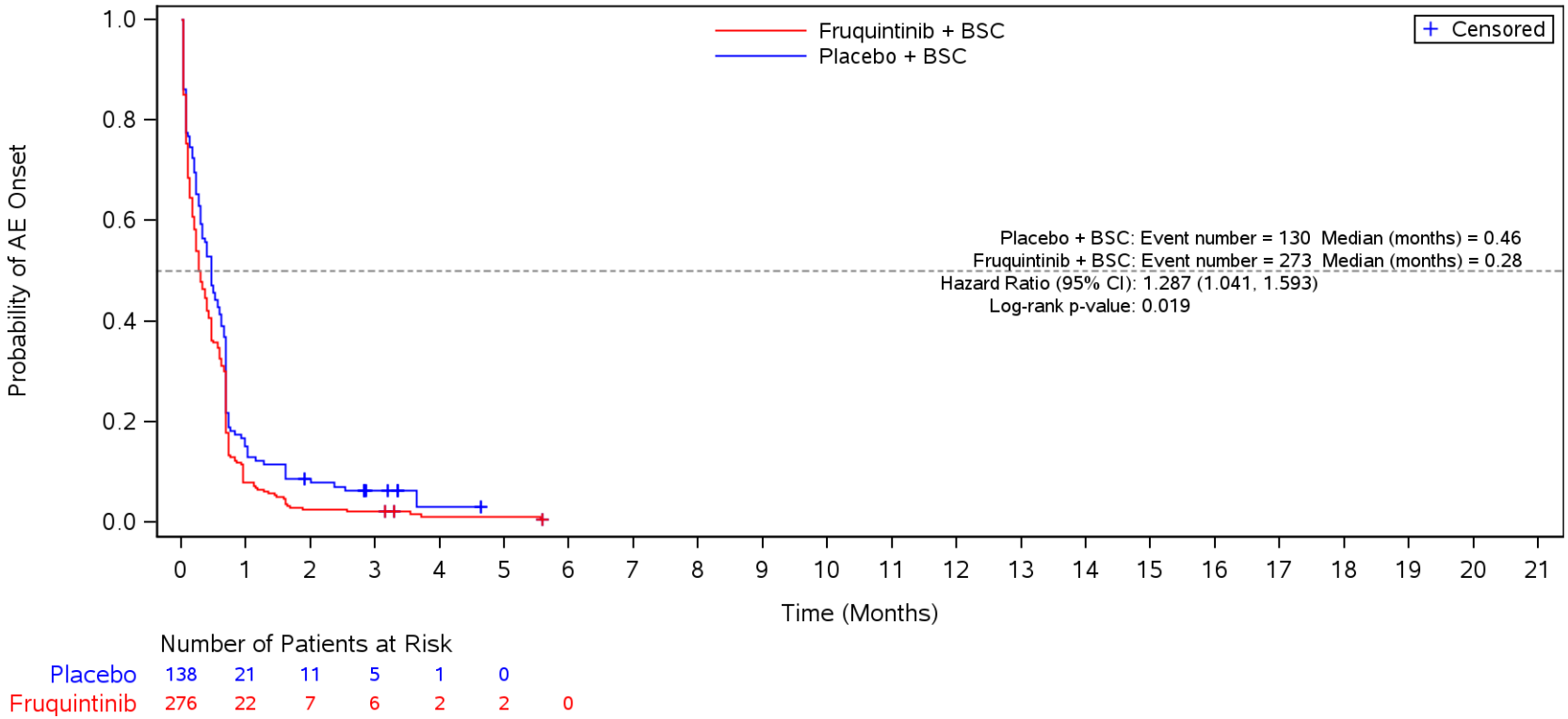


Number of Patients at Risk

Placebo	217	208	157	61	32	17	9	2	2	1	1	1	1	0							
Fruquintinib	419	411	366	275	216	162	135	91	74	46	33	23	17	5	5	5	4	3	2	1	0

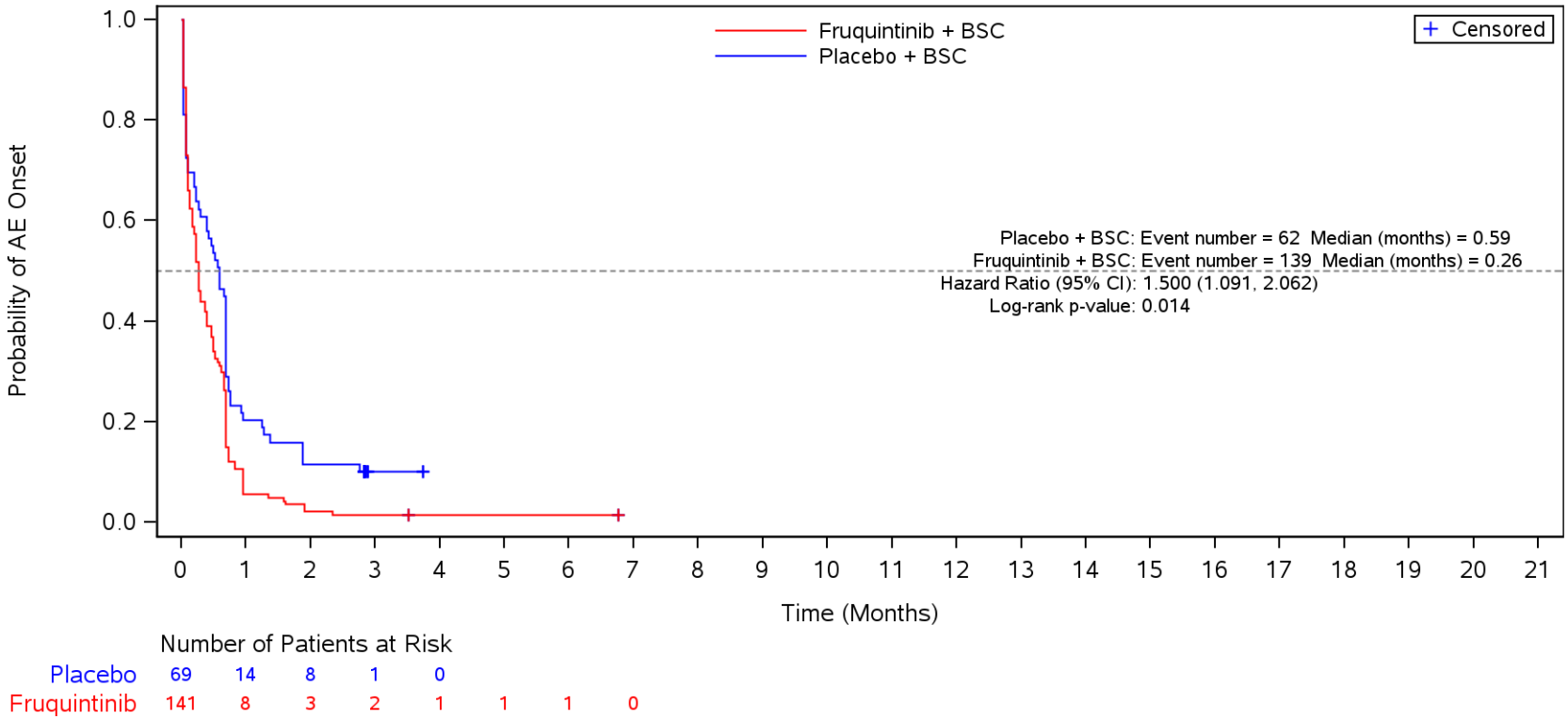
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE
Colon



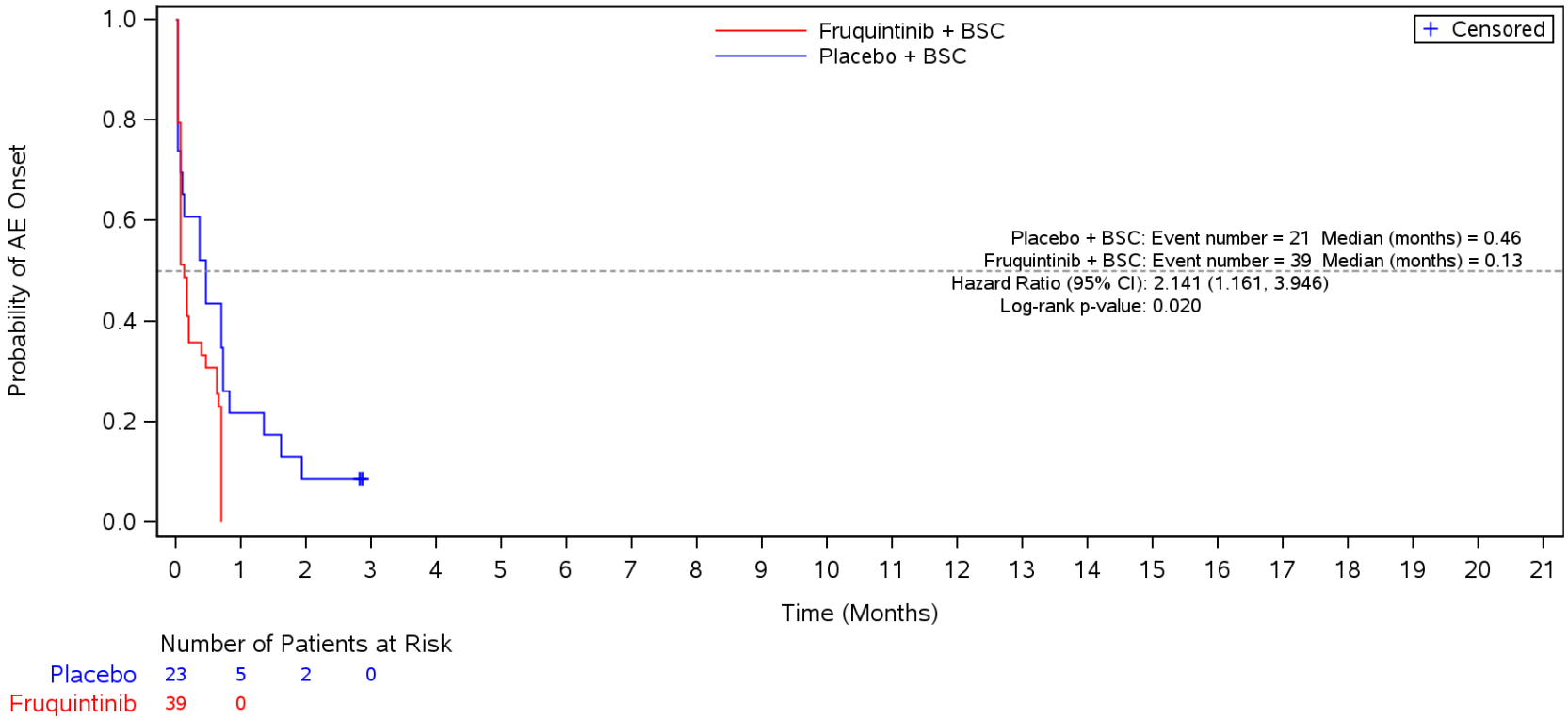
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE
Rectum



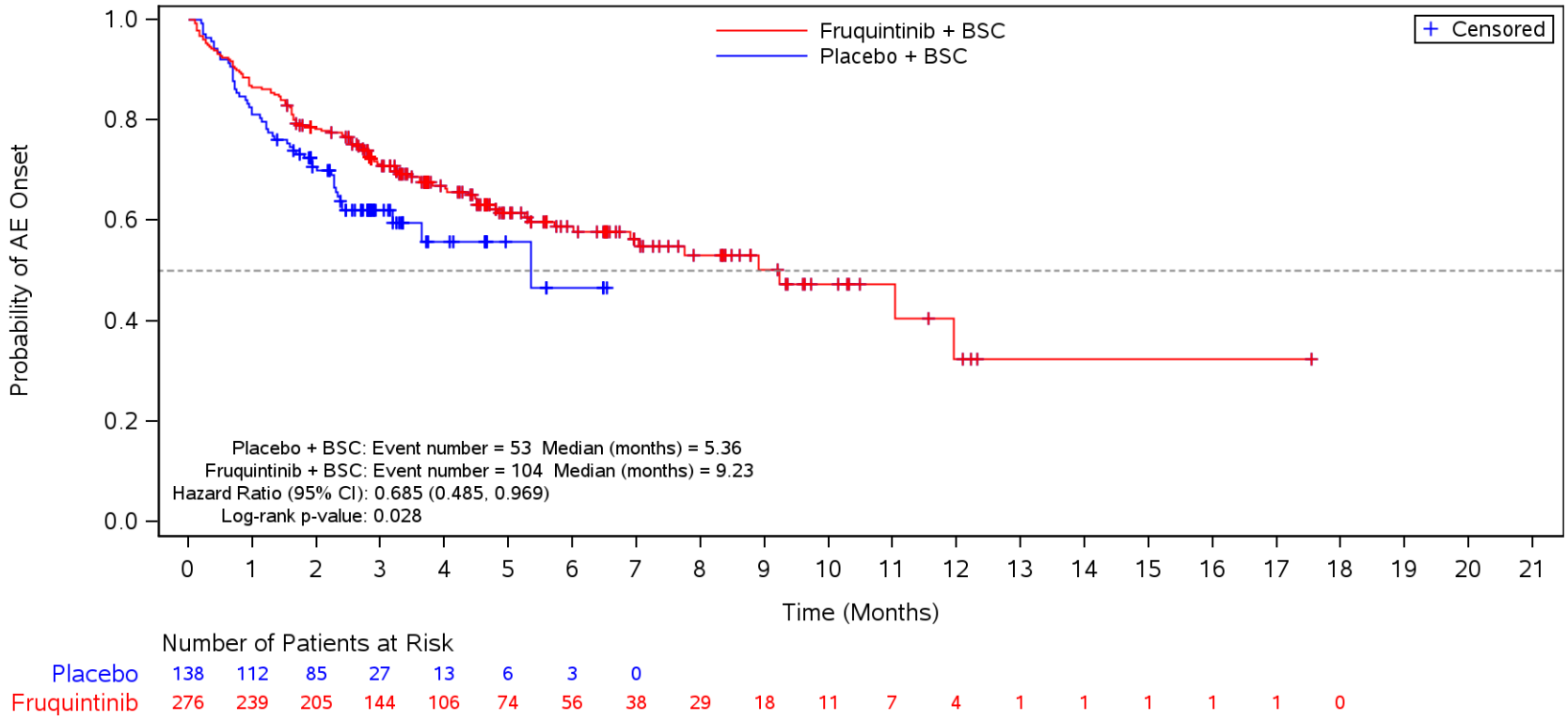
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE
Colon and Rectum



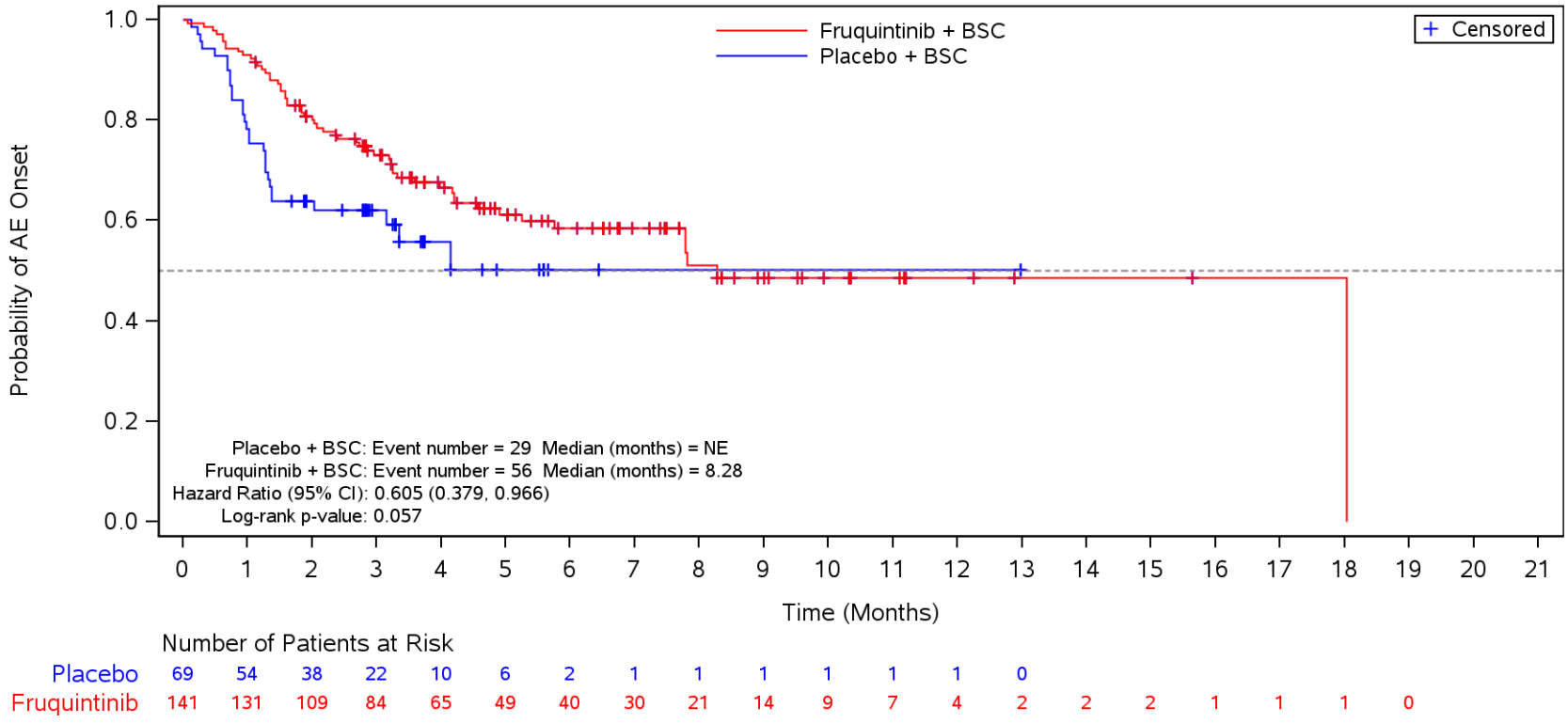
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
Serious TEAE
Colon



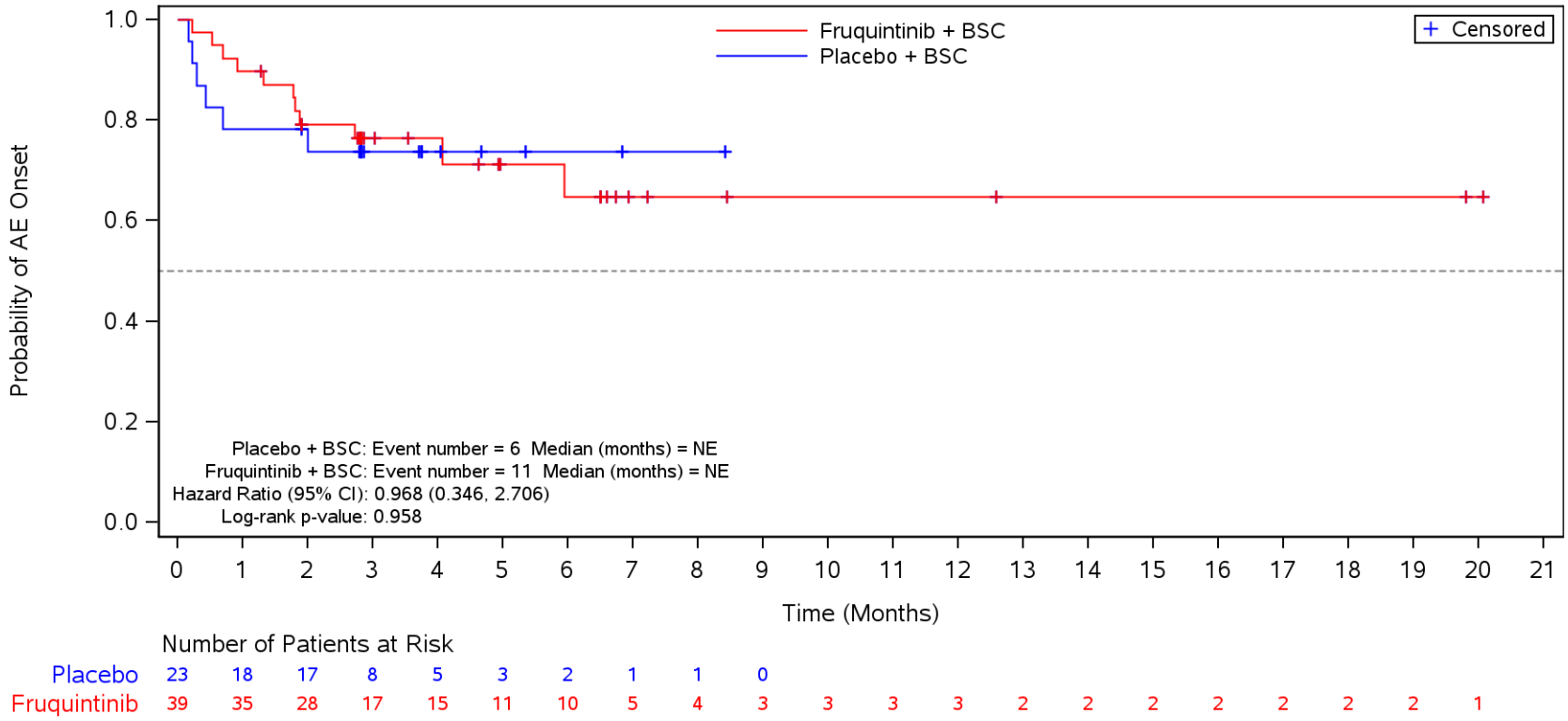
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
Serious TEAE
Rectum



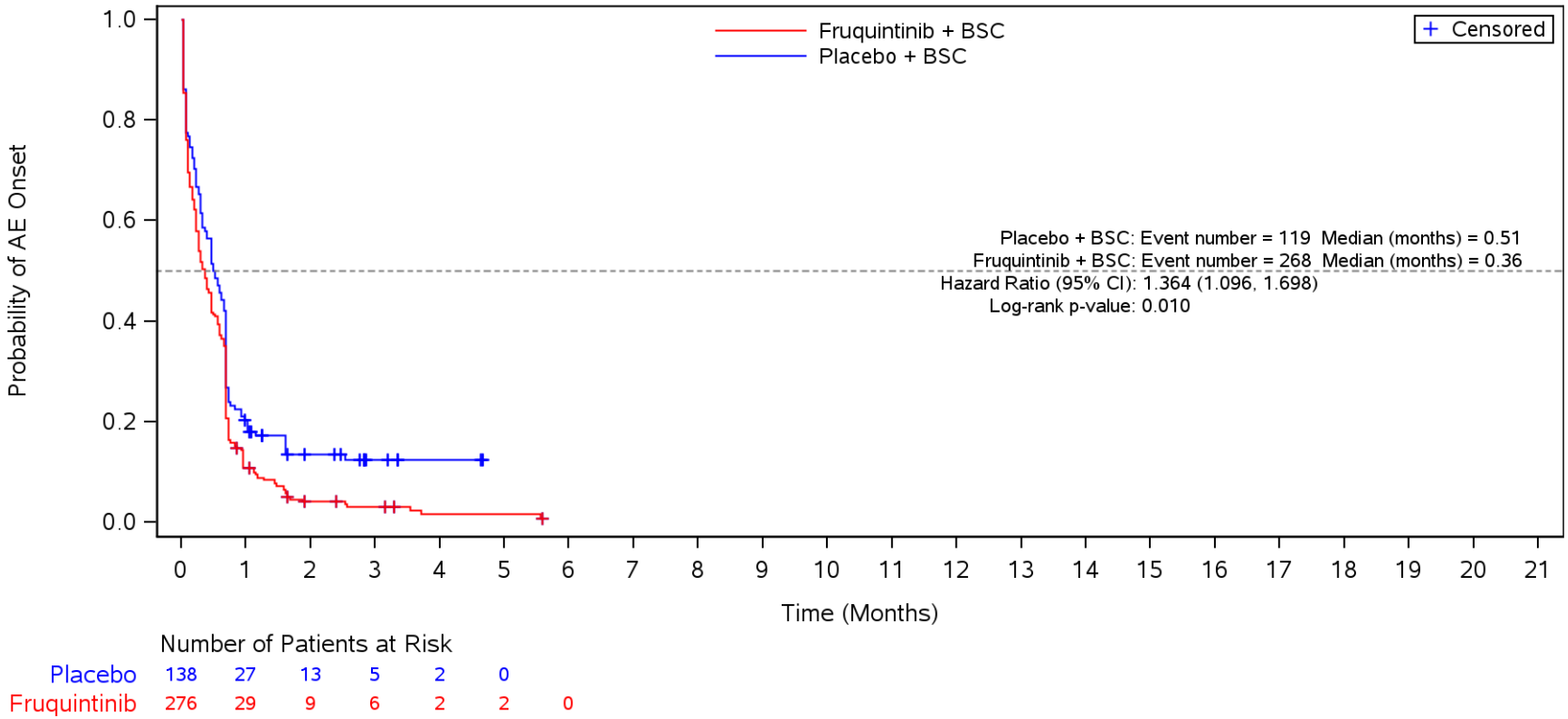
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
Serious TEAE
Colon and Rectum



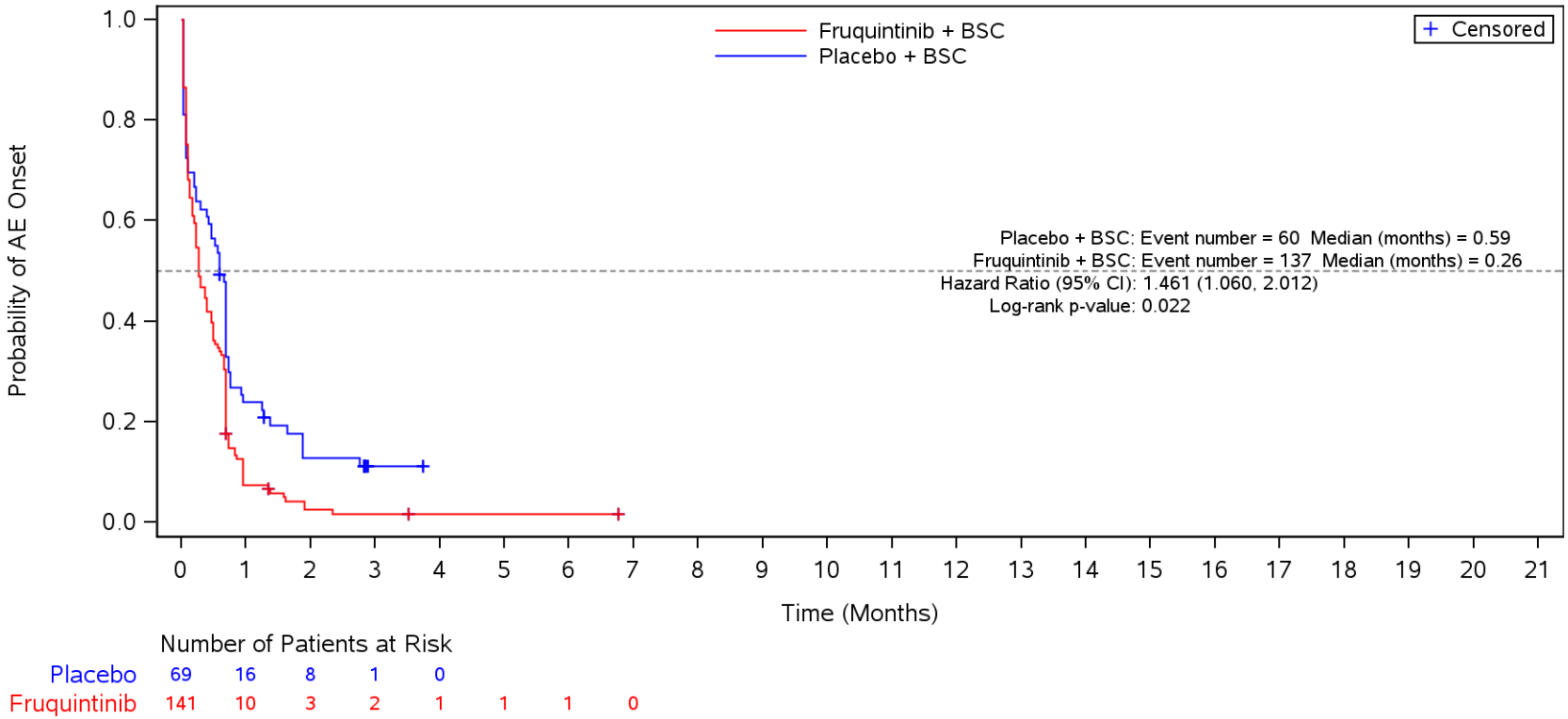
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≤ CTCAE Grade 2
Colon



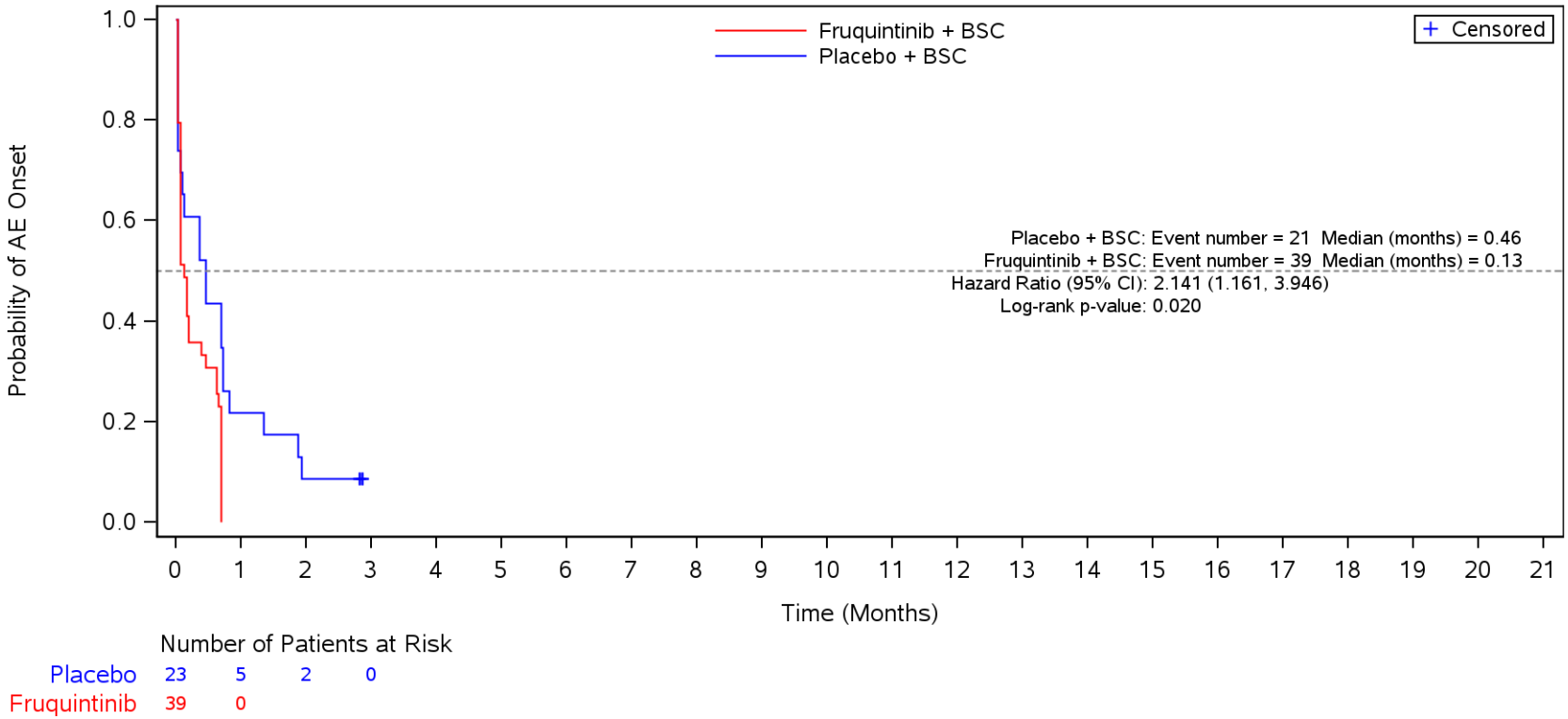
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≤ CTCAE Grade 2
Rectum



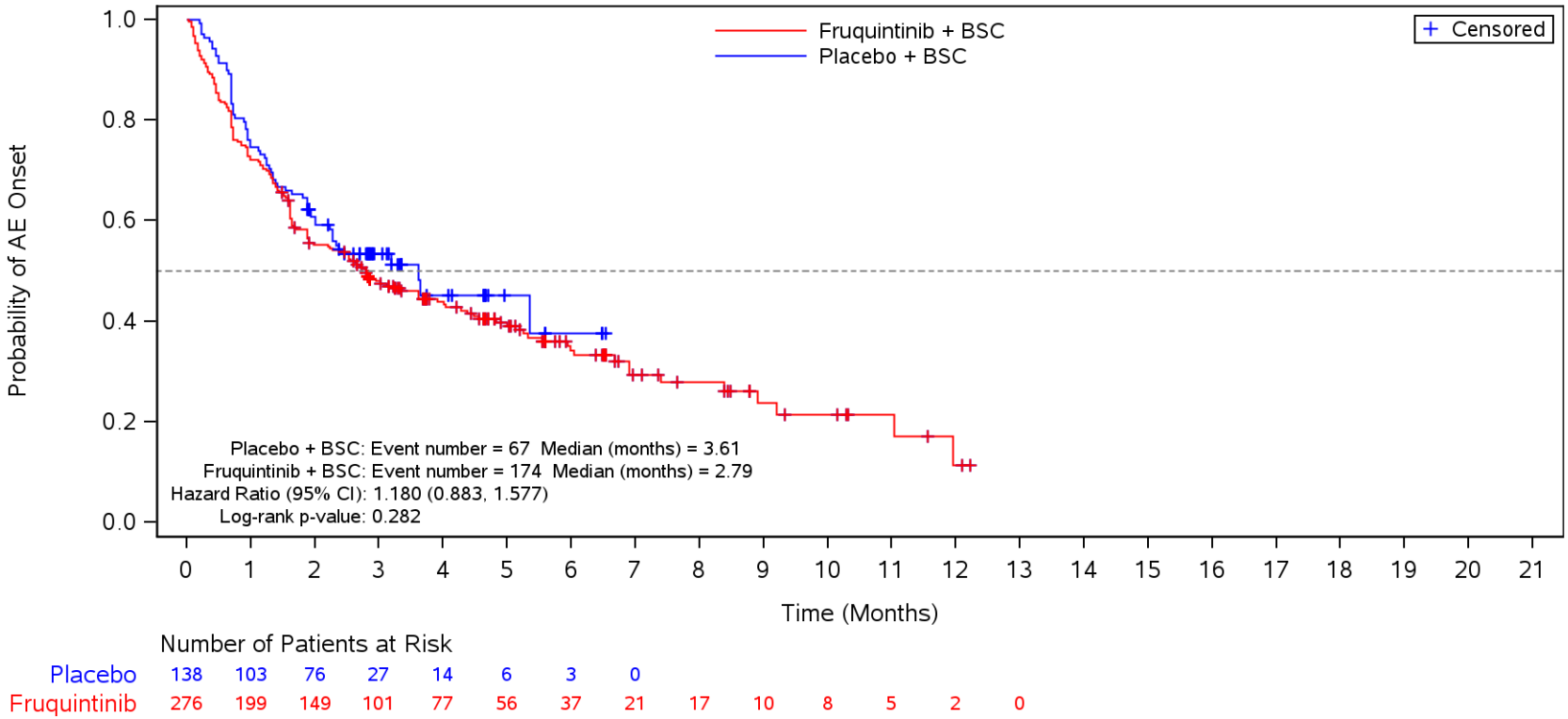
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≤ CTCAE Grade 2
Colon and Rectum



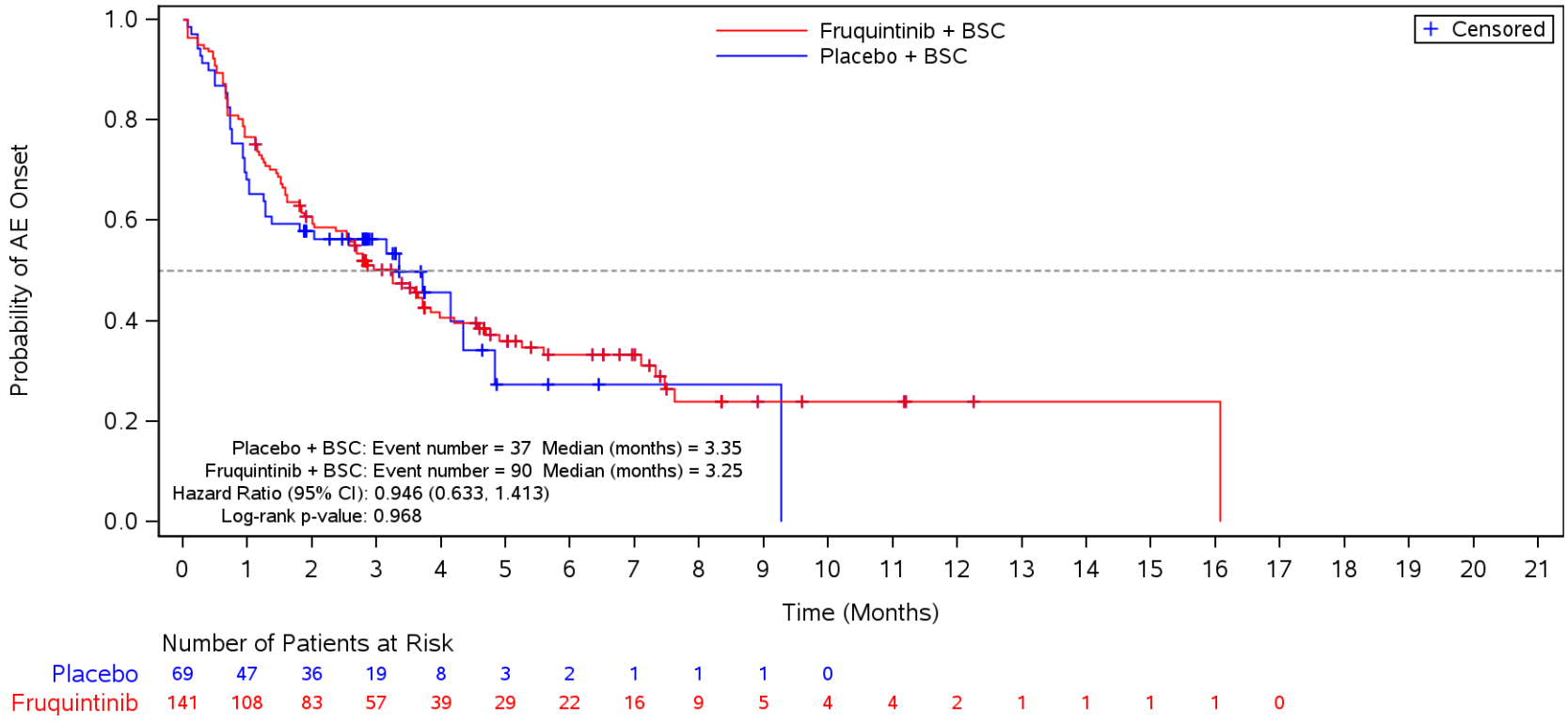
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3
Colon



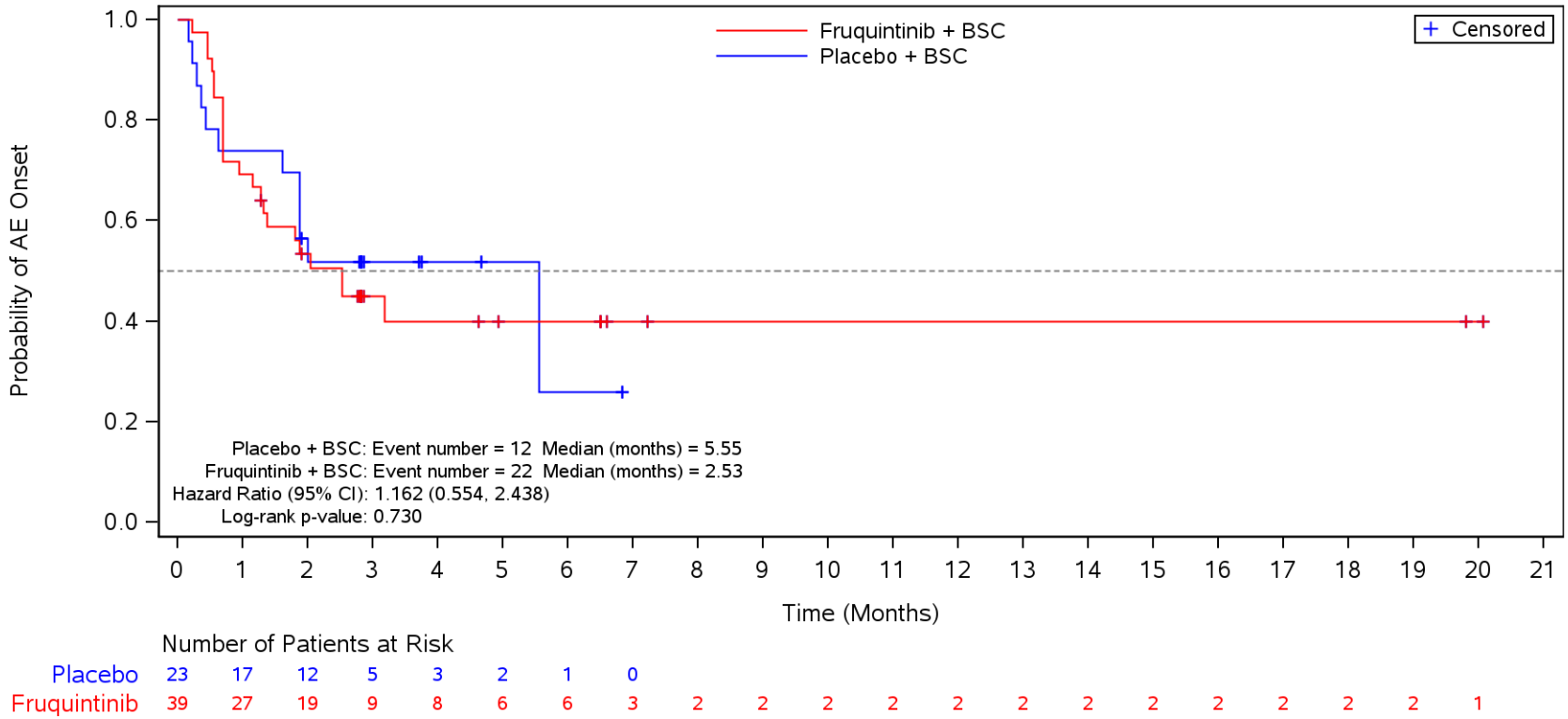
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3
Rectum



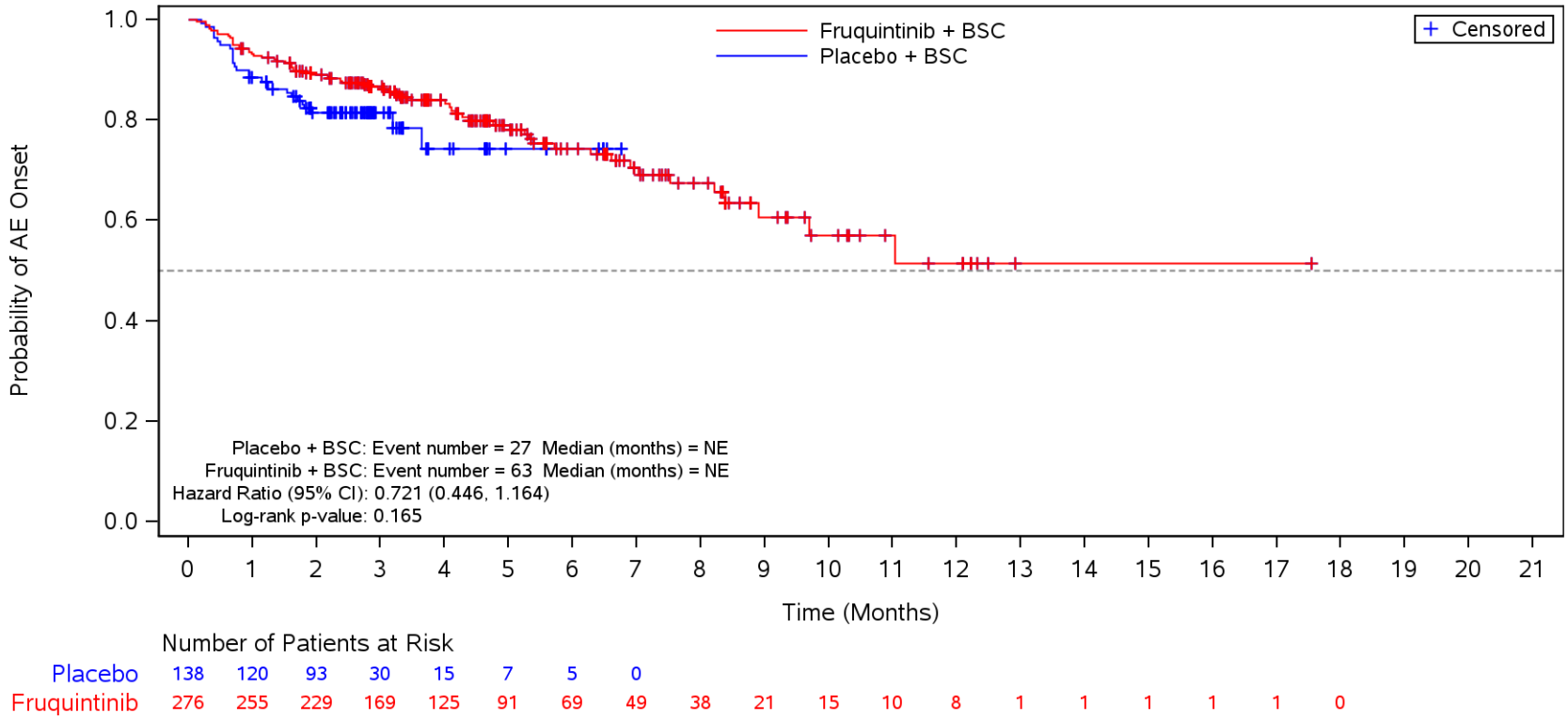
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3
Colon and Rectum



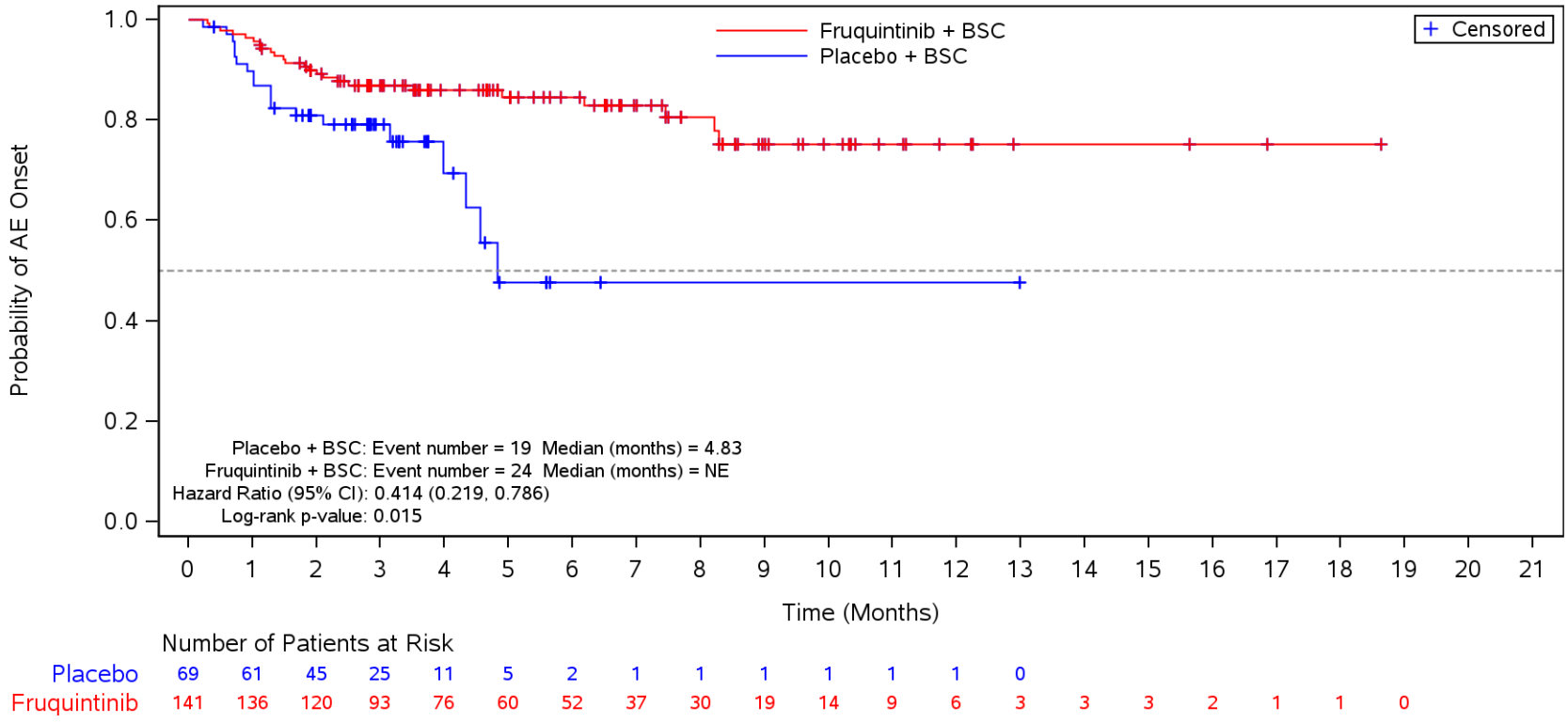
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
Discontinuation due to TEAE
Colon



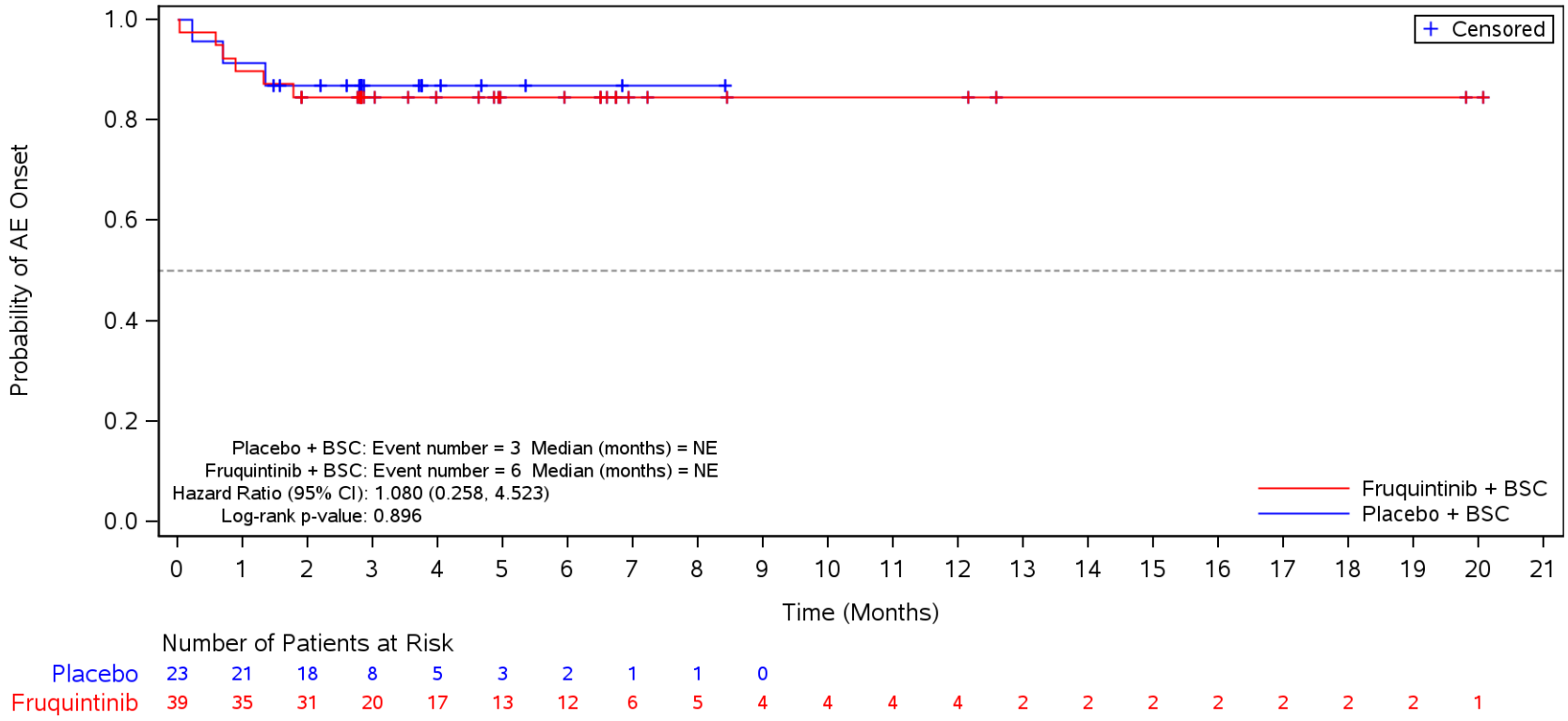
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
Discontinuation due to TEAE
Rectum



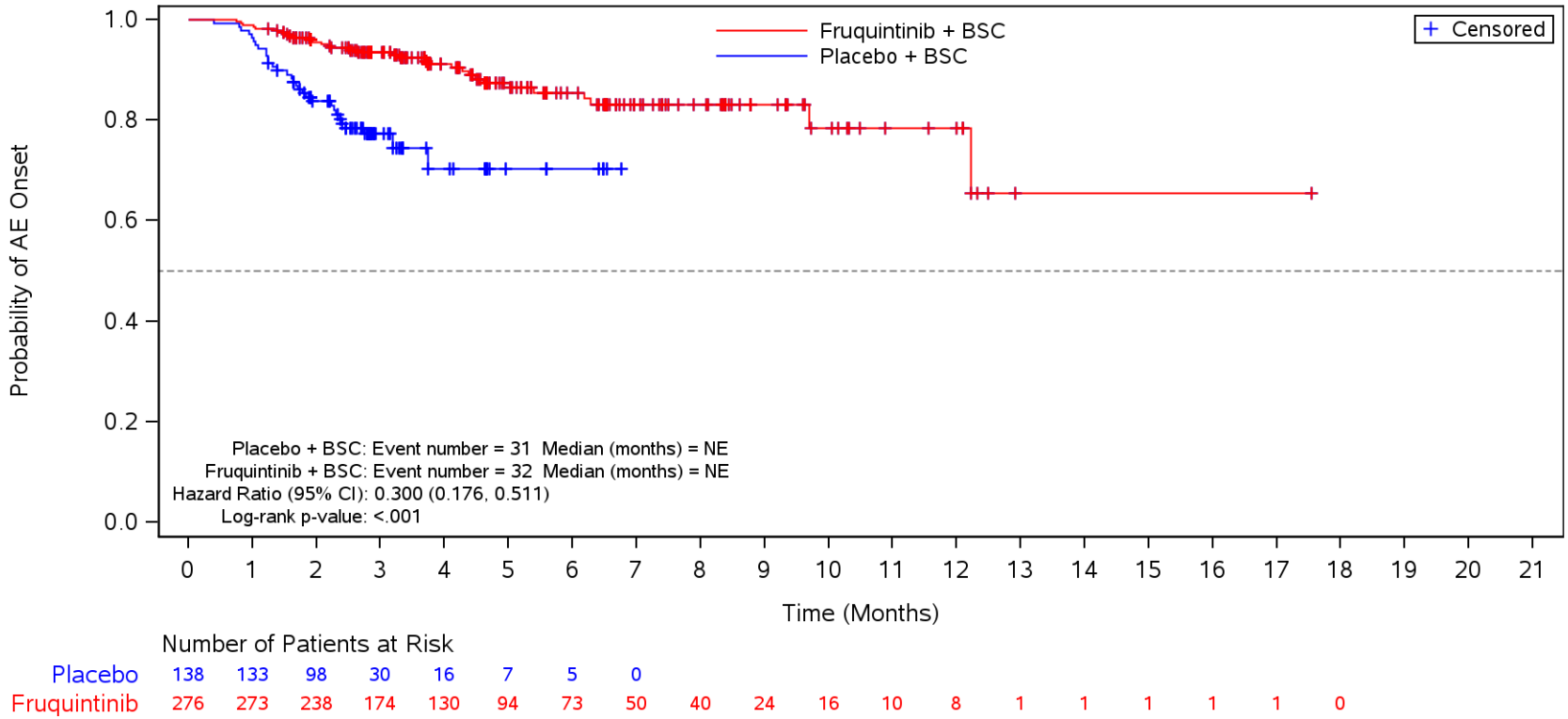
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
Discontinuation due to TEAE
Colon and Rectum



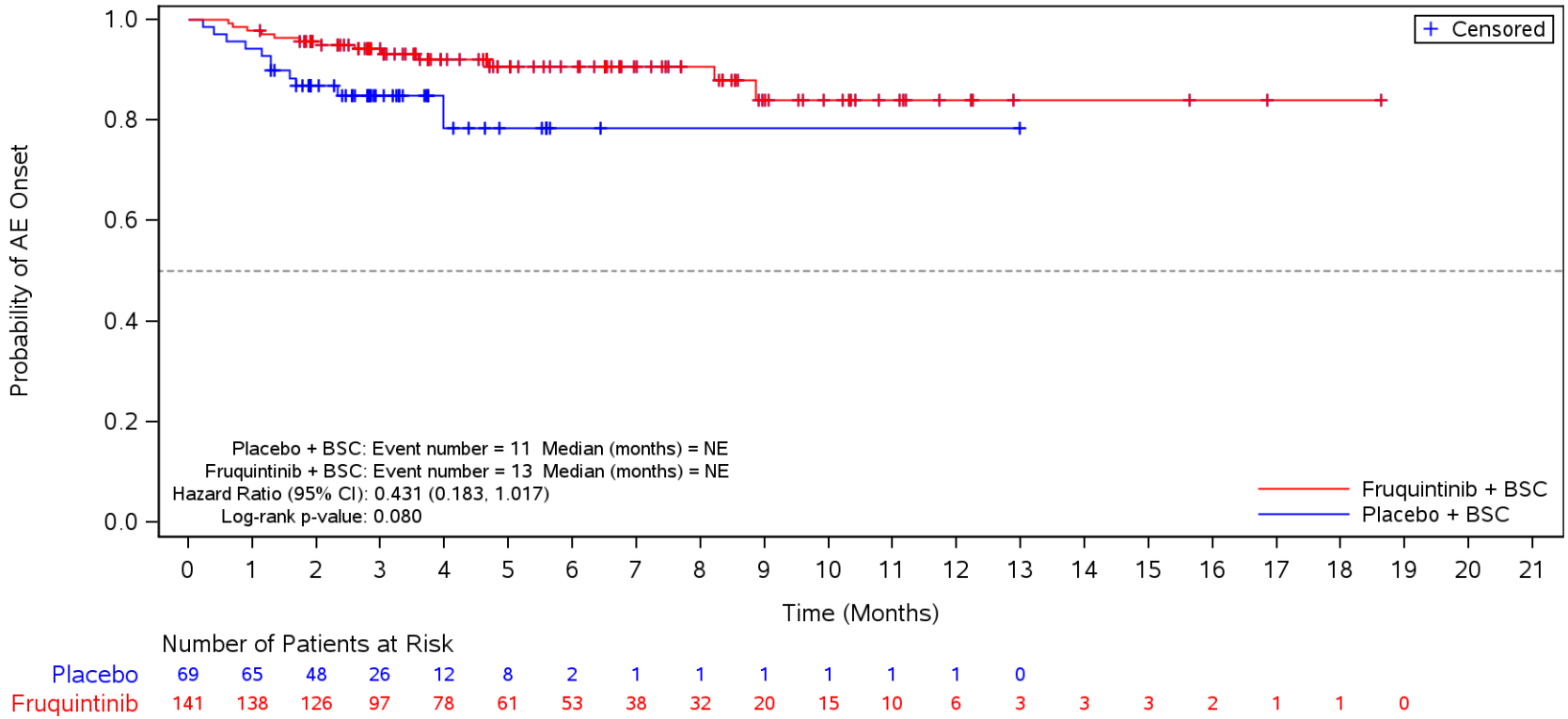
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
Deaths (Grade 5 TEAEs)
Colon



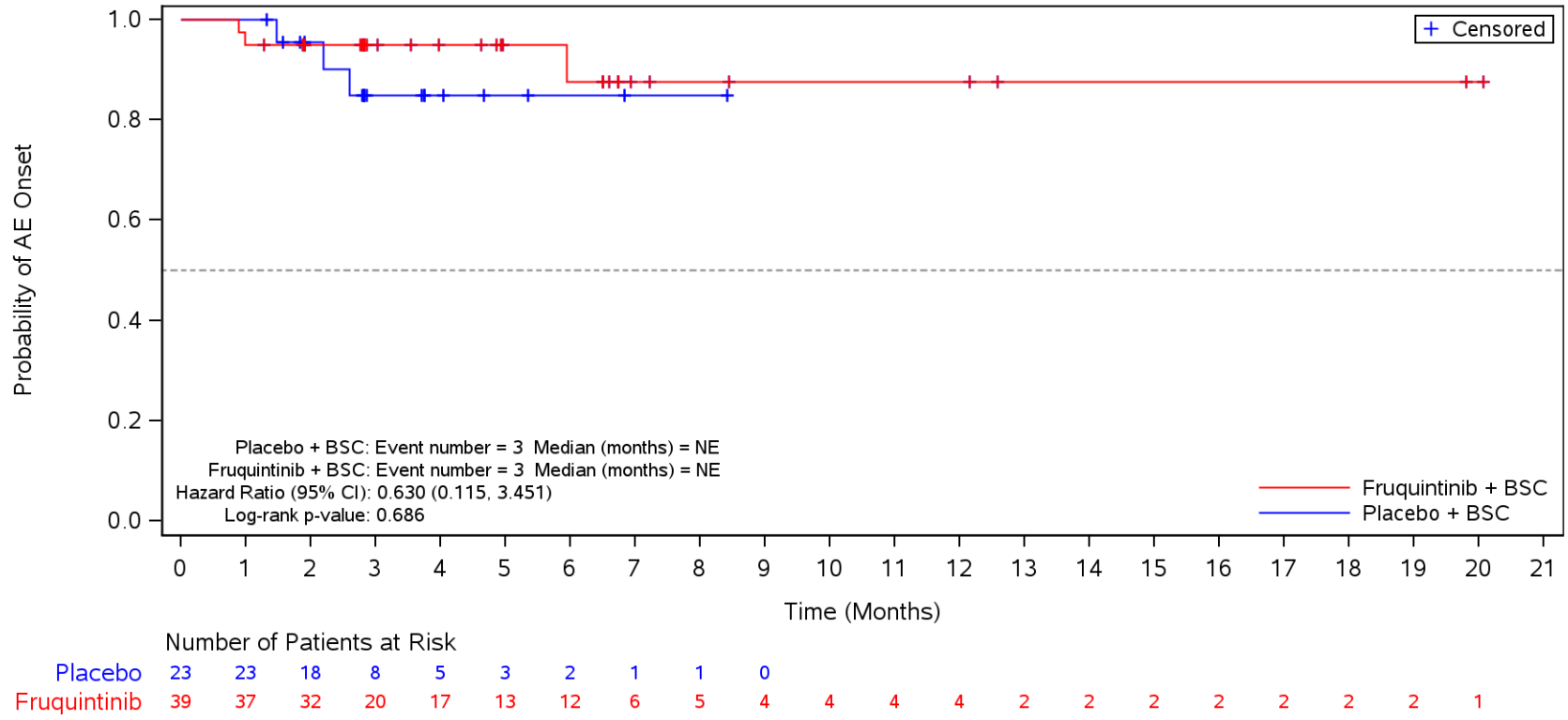
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Primary Tumor Site at 1st Diagnosis
Safety Population
Deaths (Grade 5 TEAEs)
Rectum



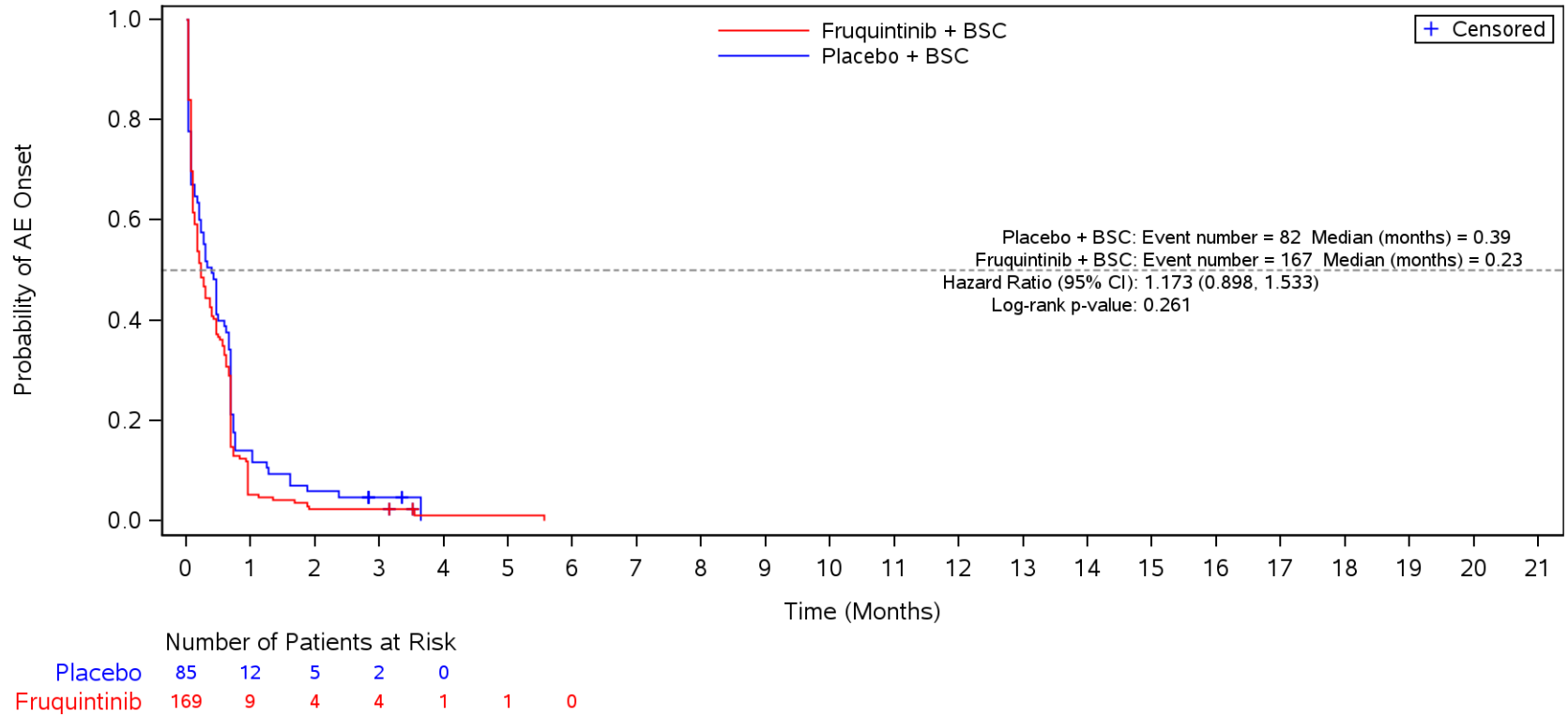
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
TEAE
WT (Wild Type)



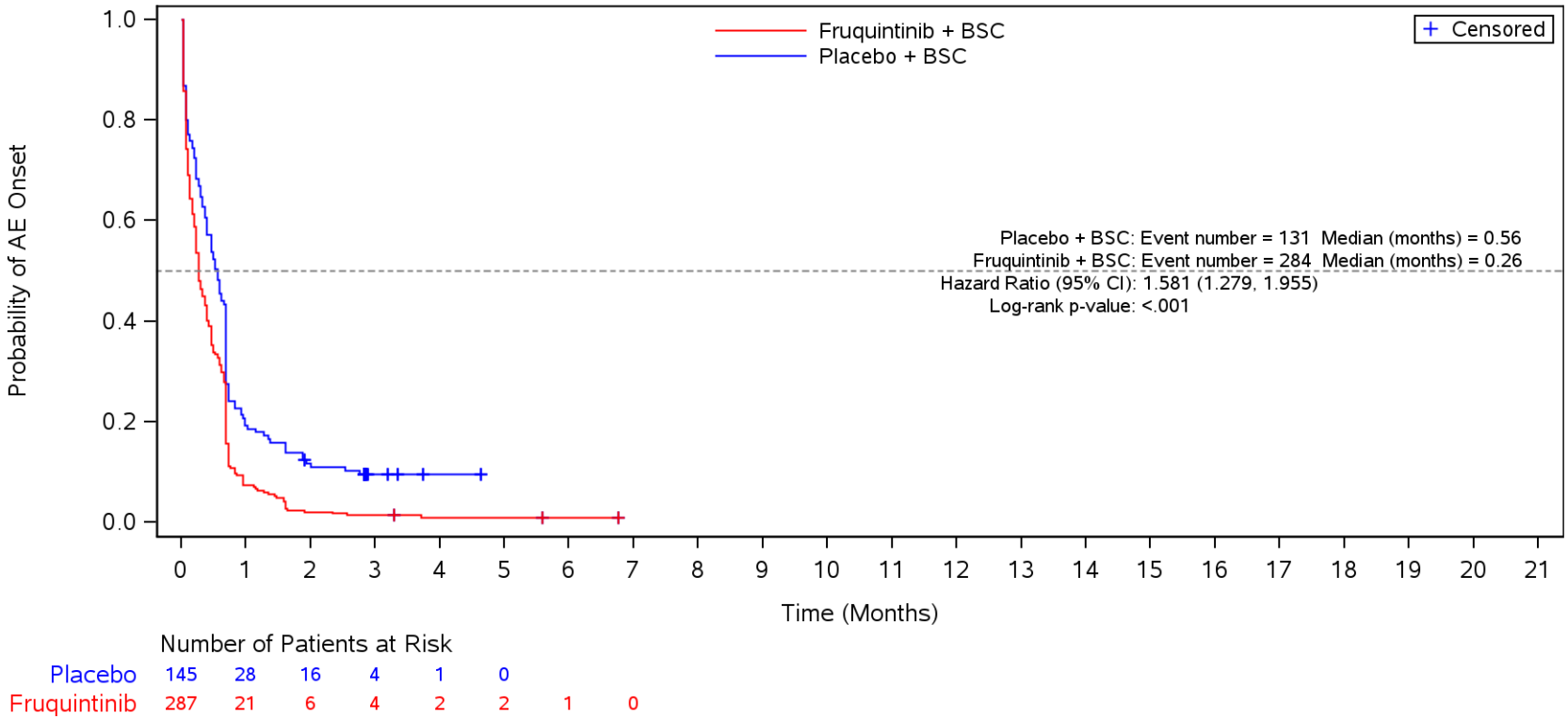
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
TEAE
WT (Wild Type)



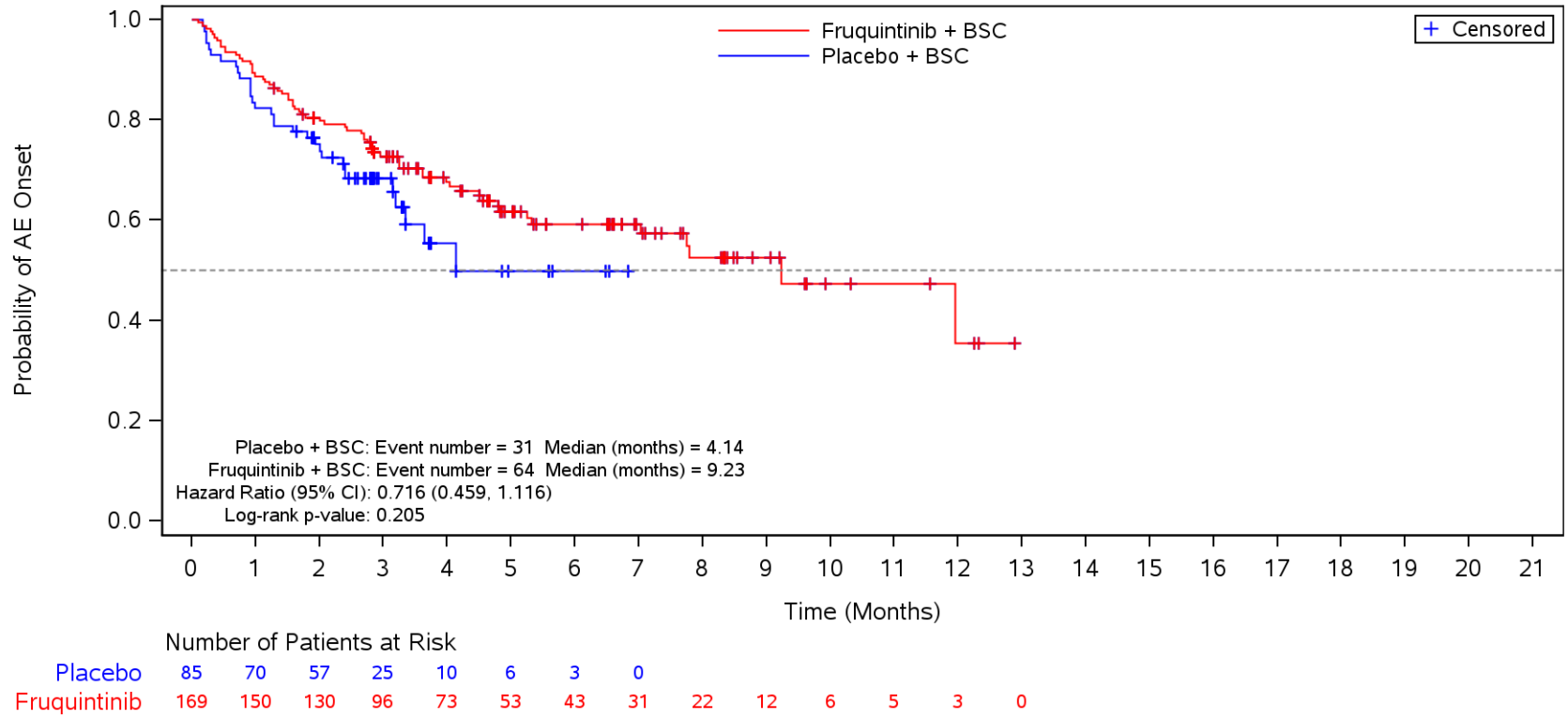
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
TEAE
Mutant



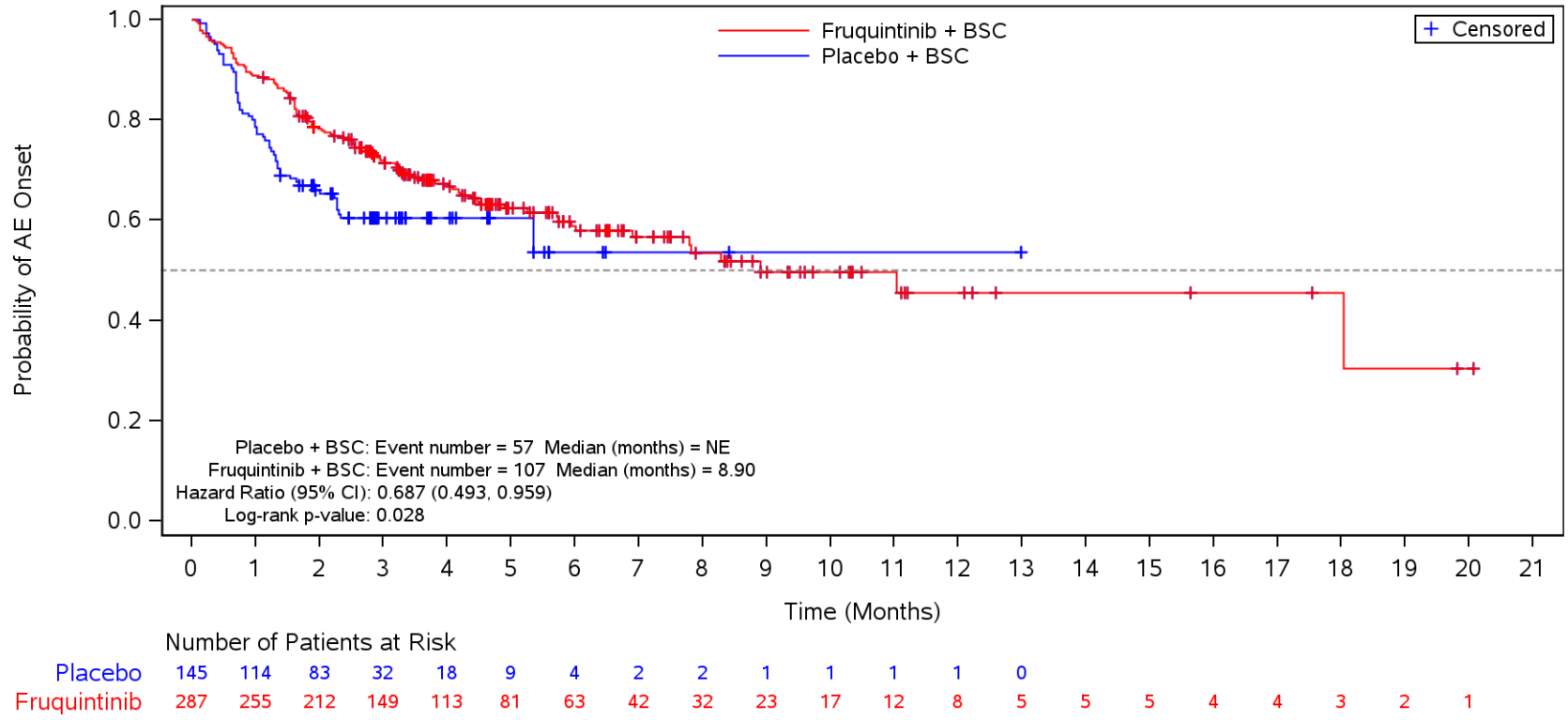
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
Serious TEAE
WT (Wild Type)



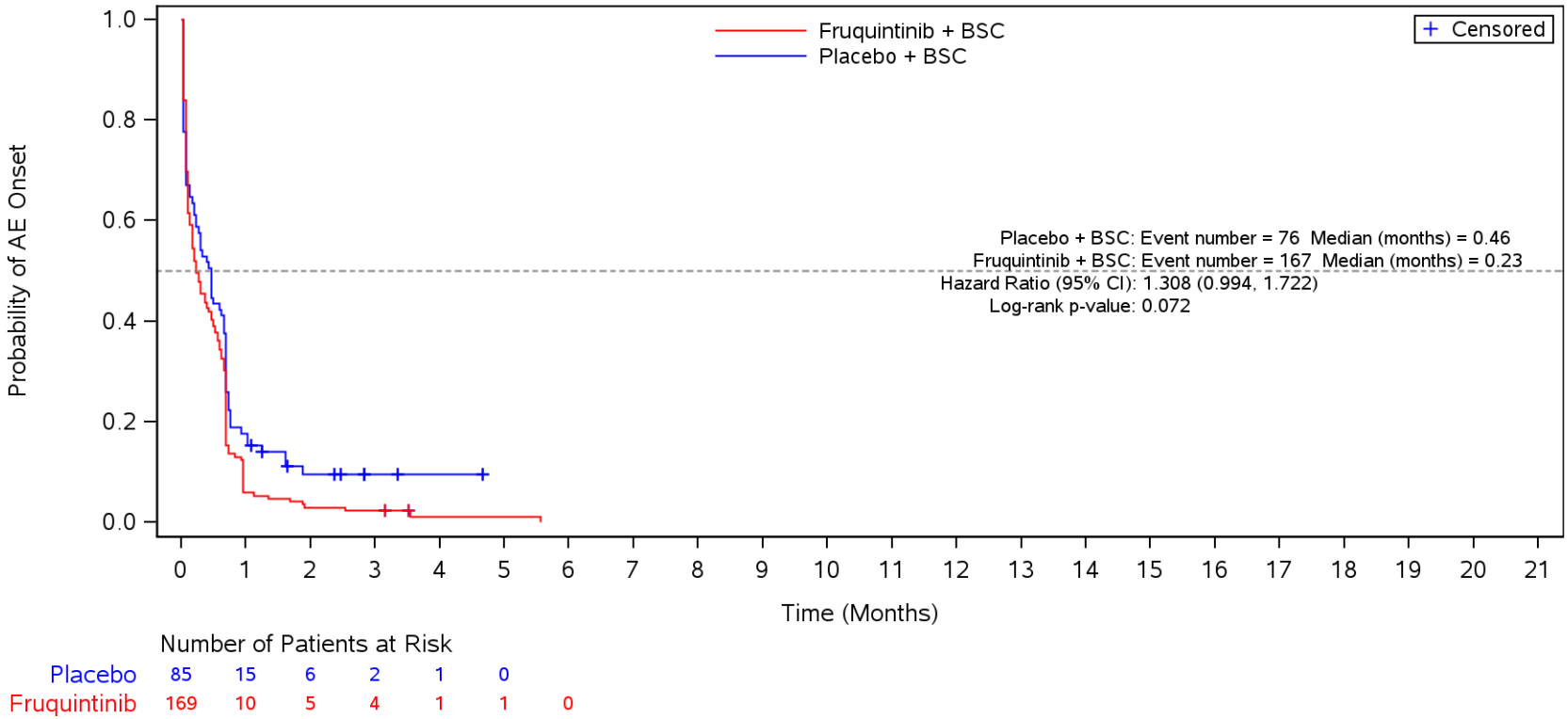
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
Serious TEAE
Mutant



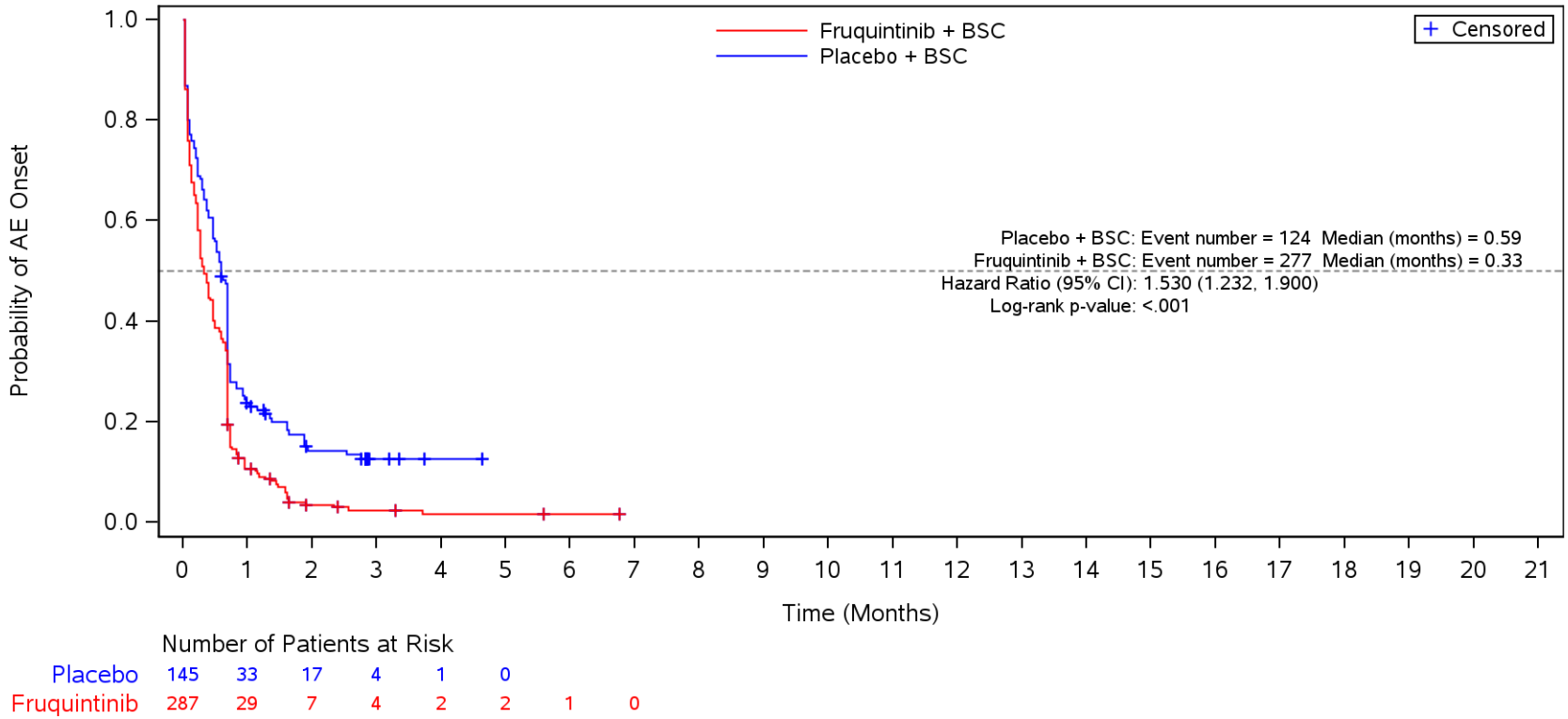
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
TEAE ≤ CTCAE Grade 2
WT (Wild Type)



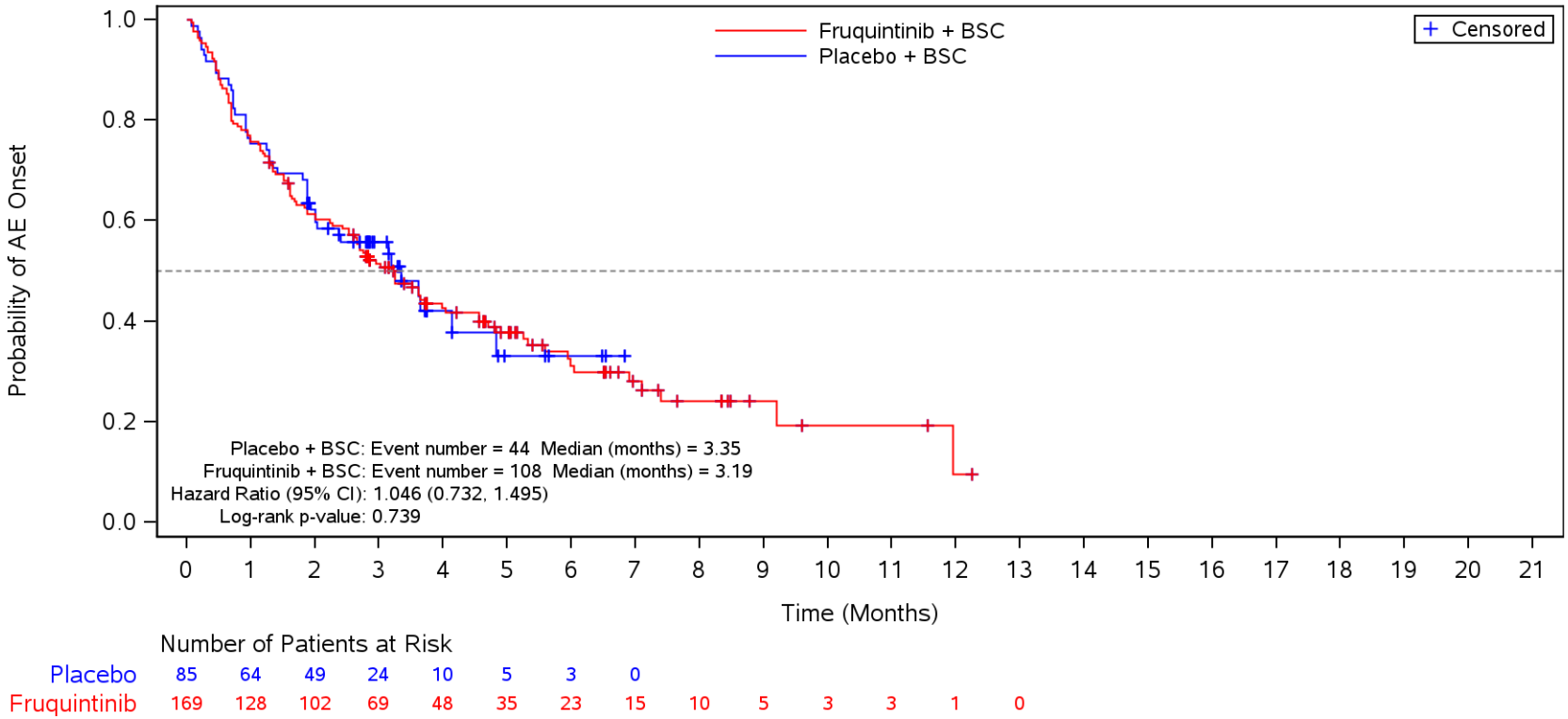
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
TEAE ≤ CTCAE Grade 2
Mutant



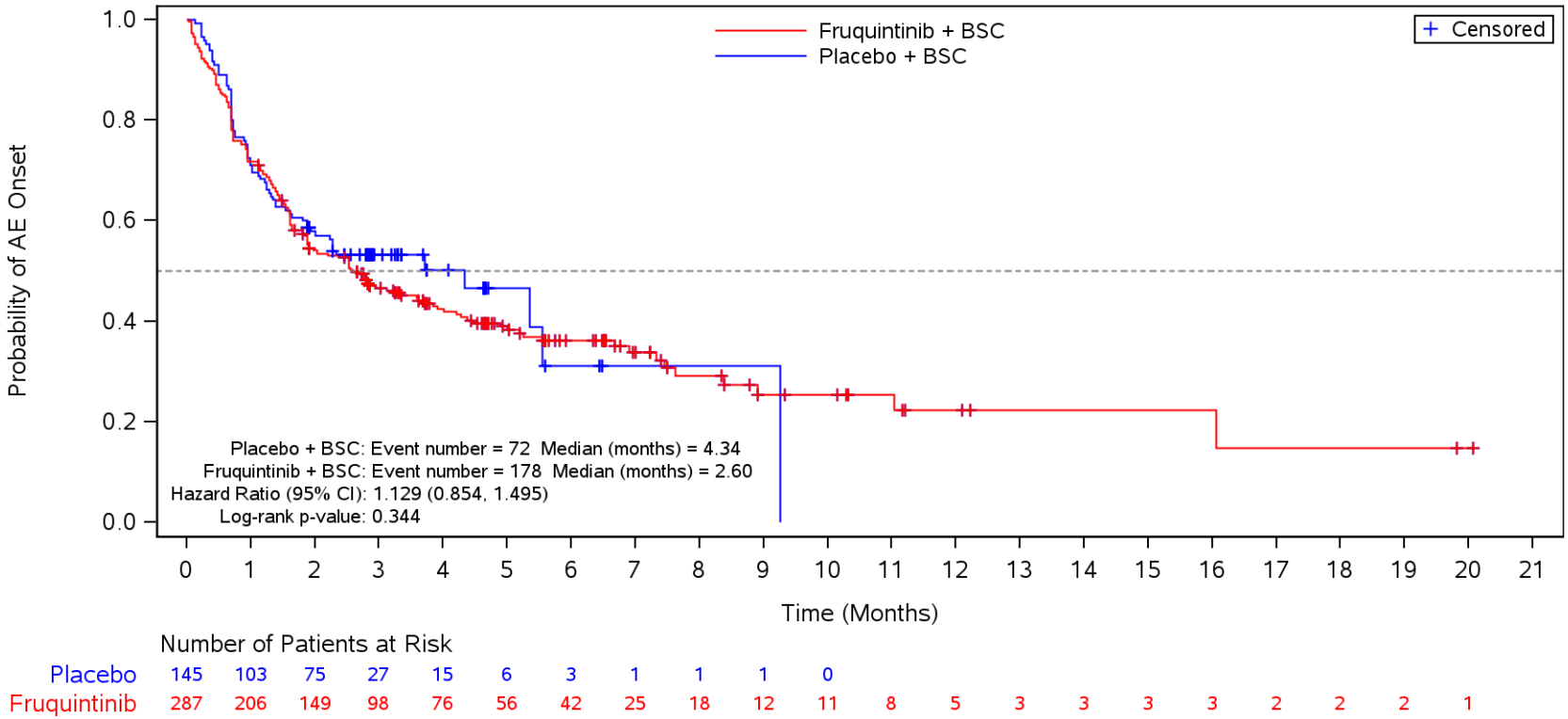
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3
WT (Wild Type)



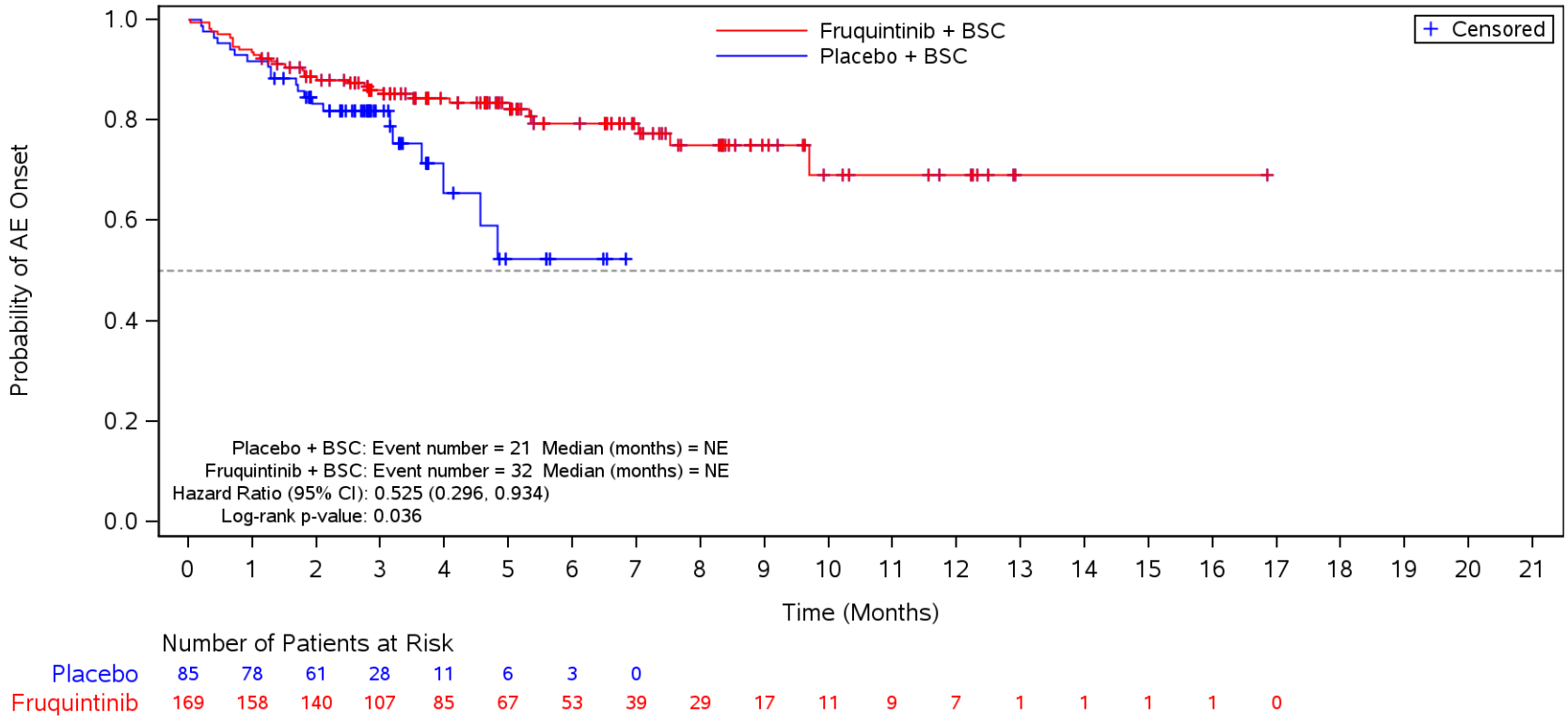
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3
Mutant



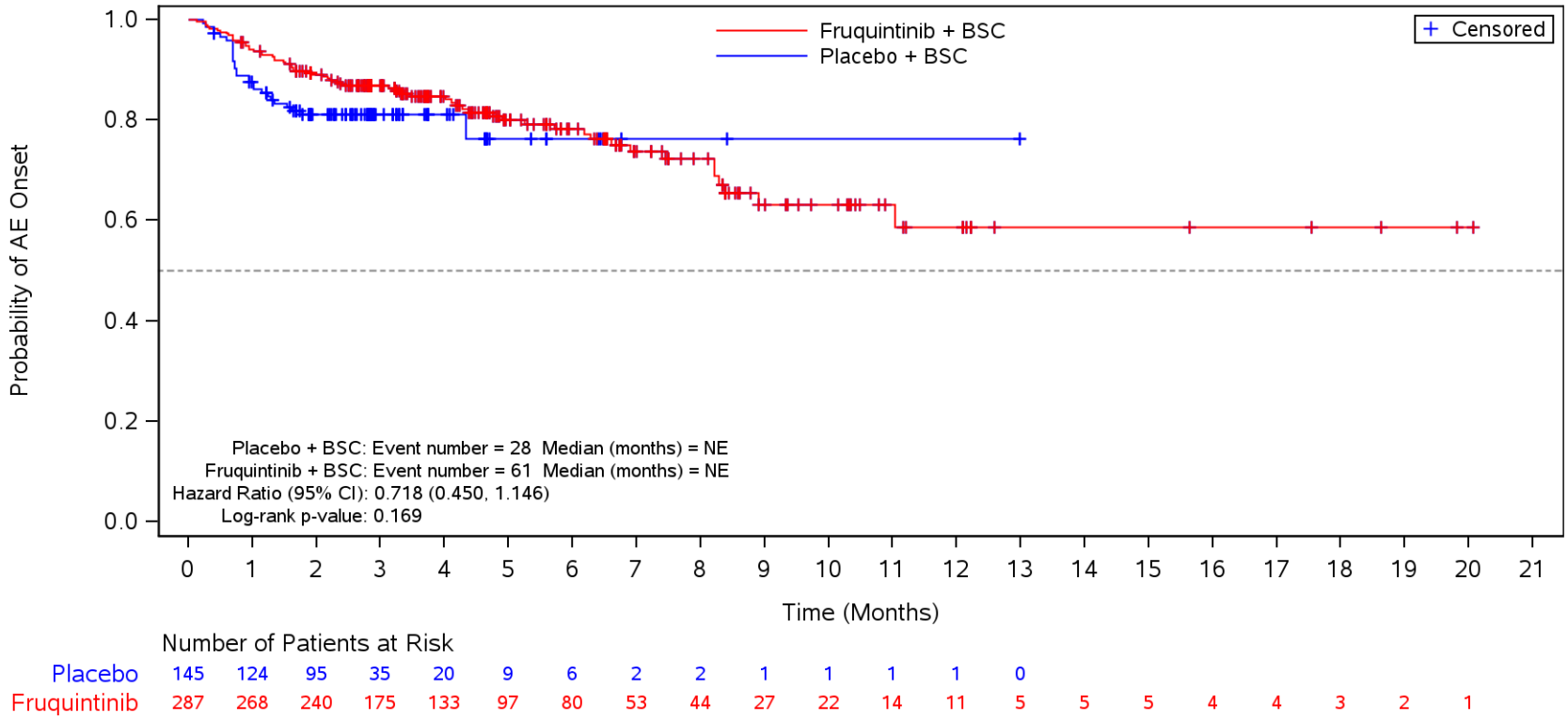
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
Discontinuation due to TEAE
WT (Wild Type)



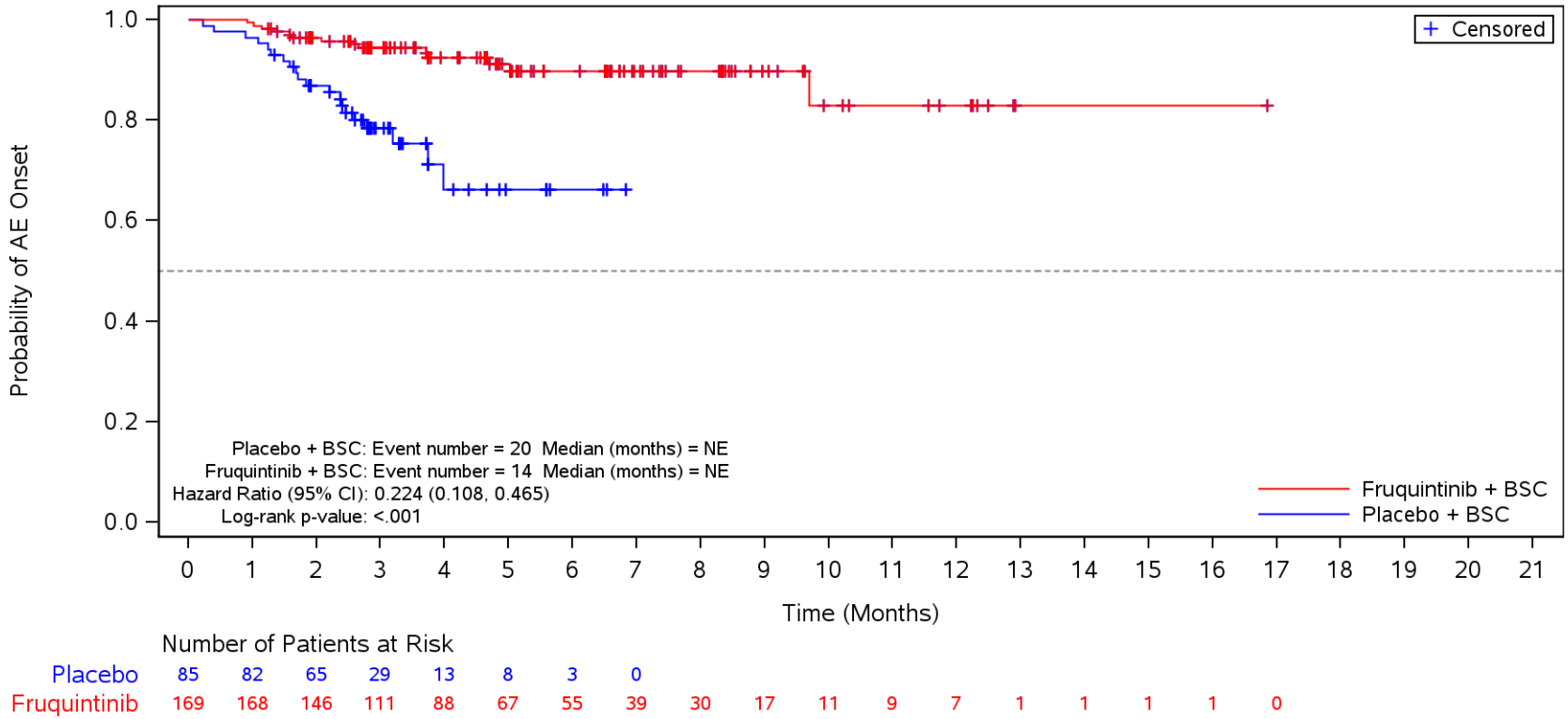
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
Discontinuation due to TEAE
Mutant



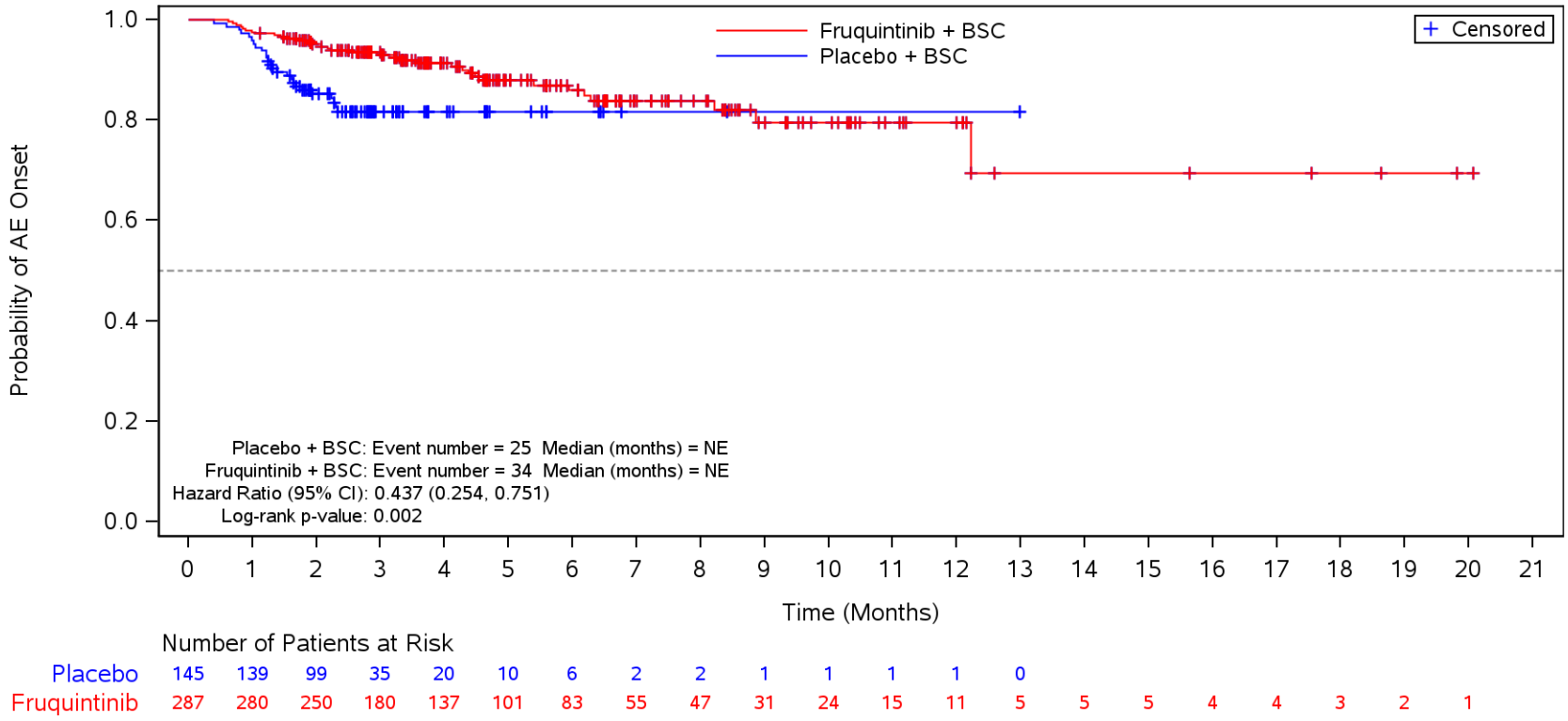
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE by RAS Status
Safety Population
Deaths (Grade 5 TEAEs)
WT (Wild Type)



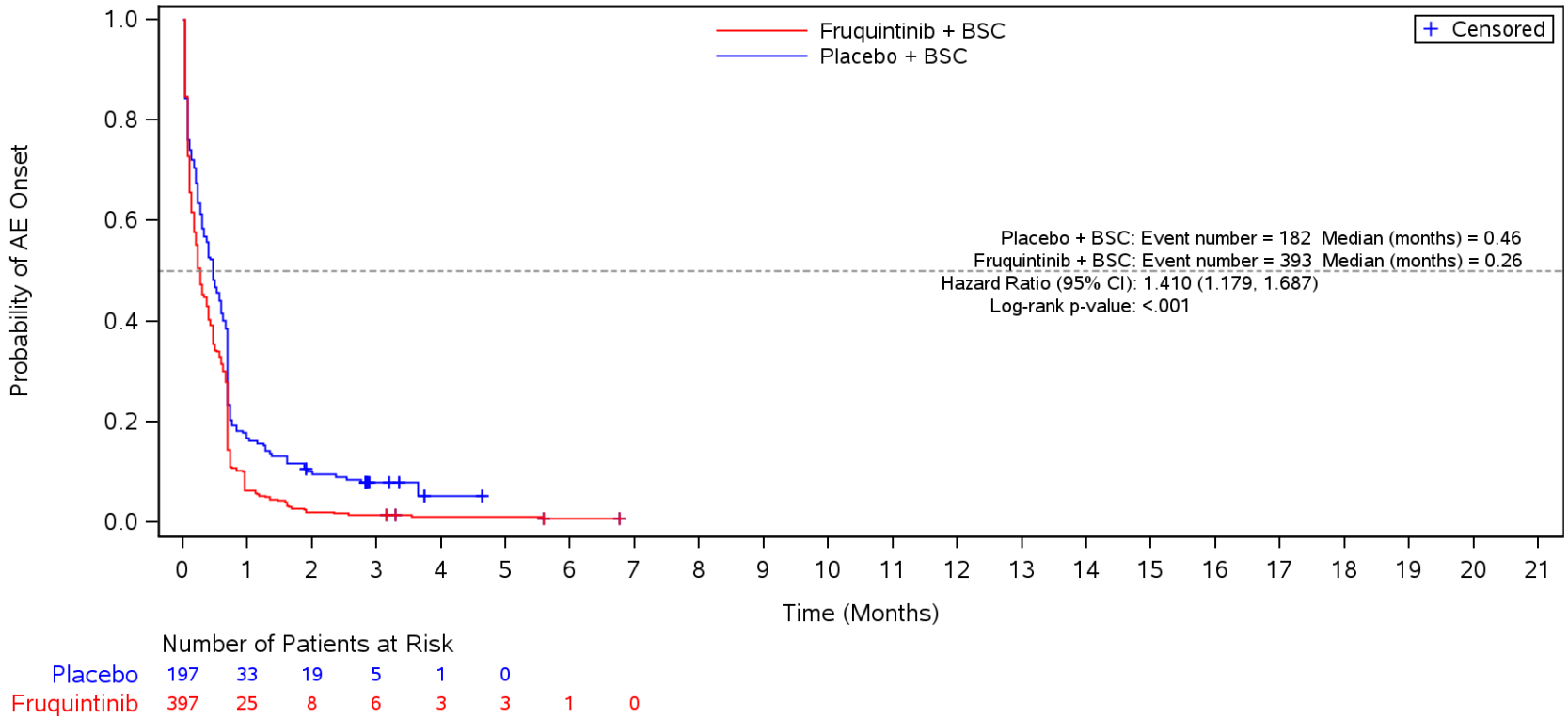
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE
WT (Wild Type)



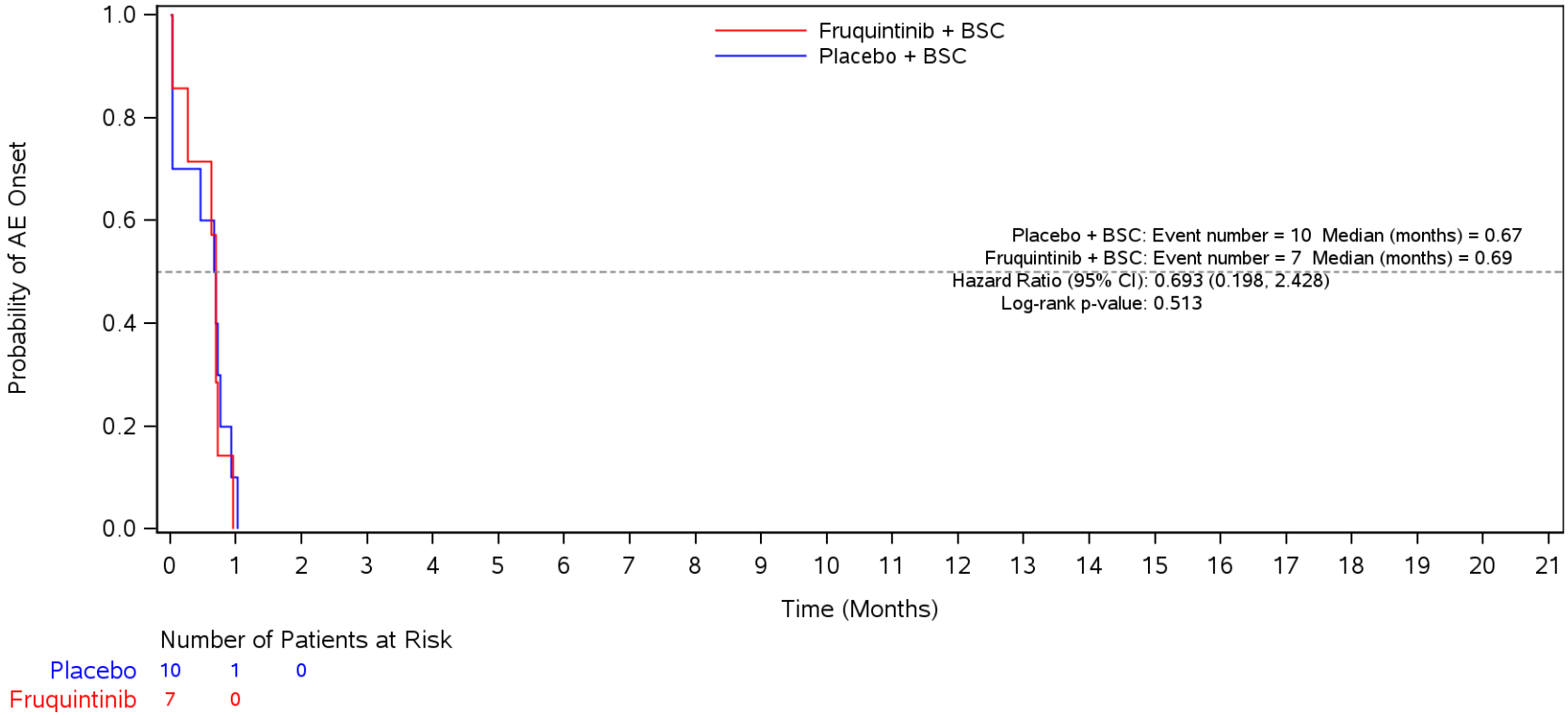
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE
WT (Wild Type)



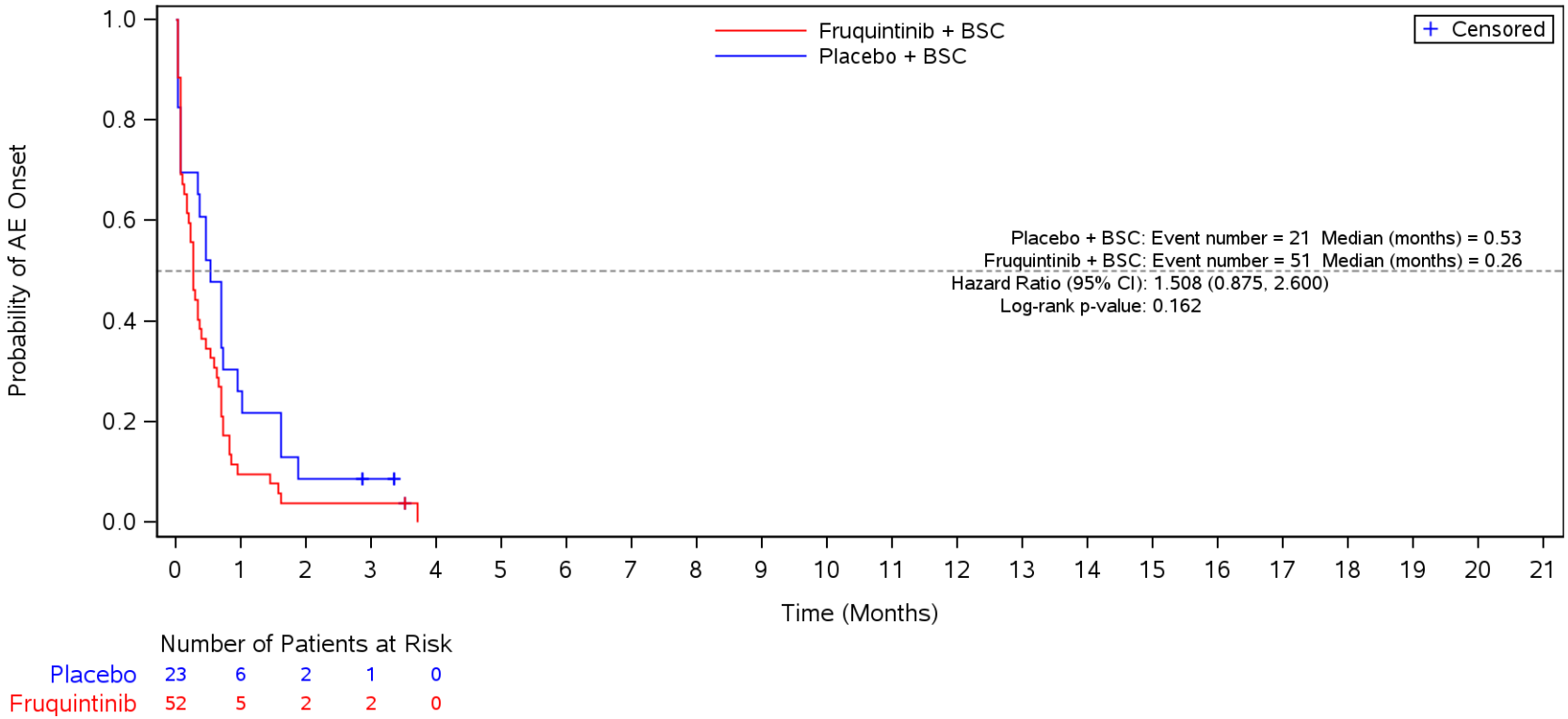
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE
V600 E Mutation



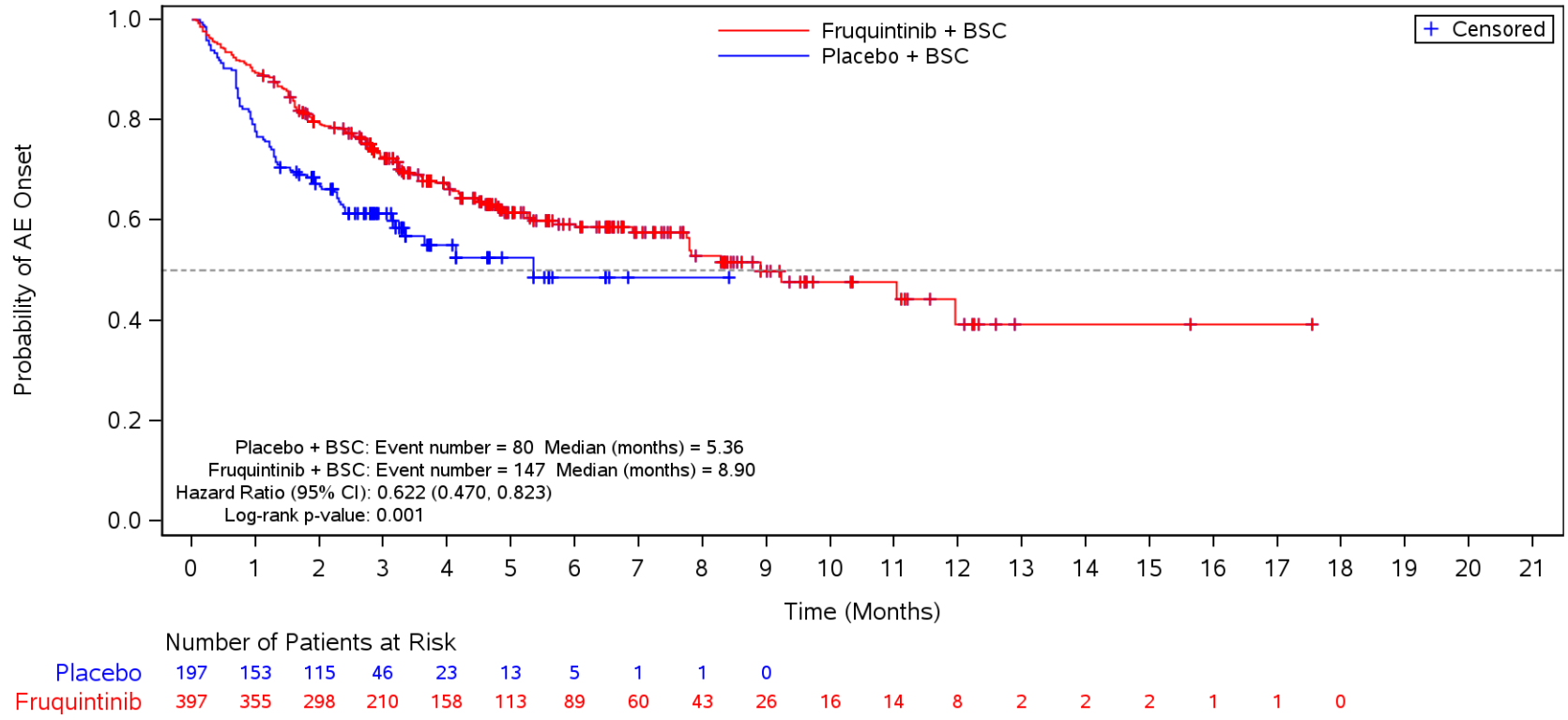
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE
Other



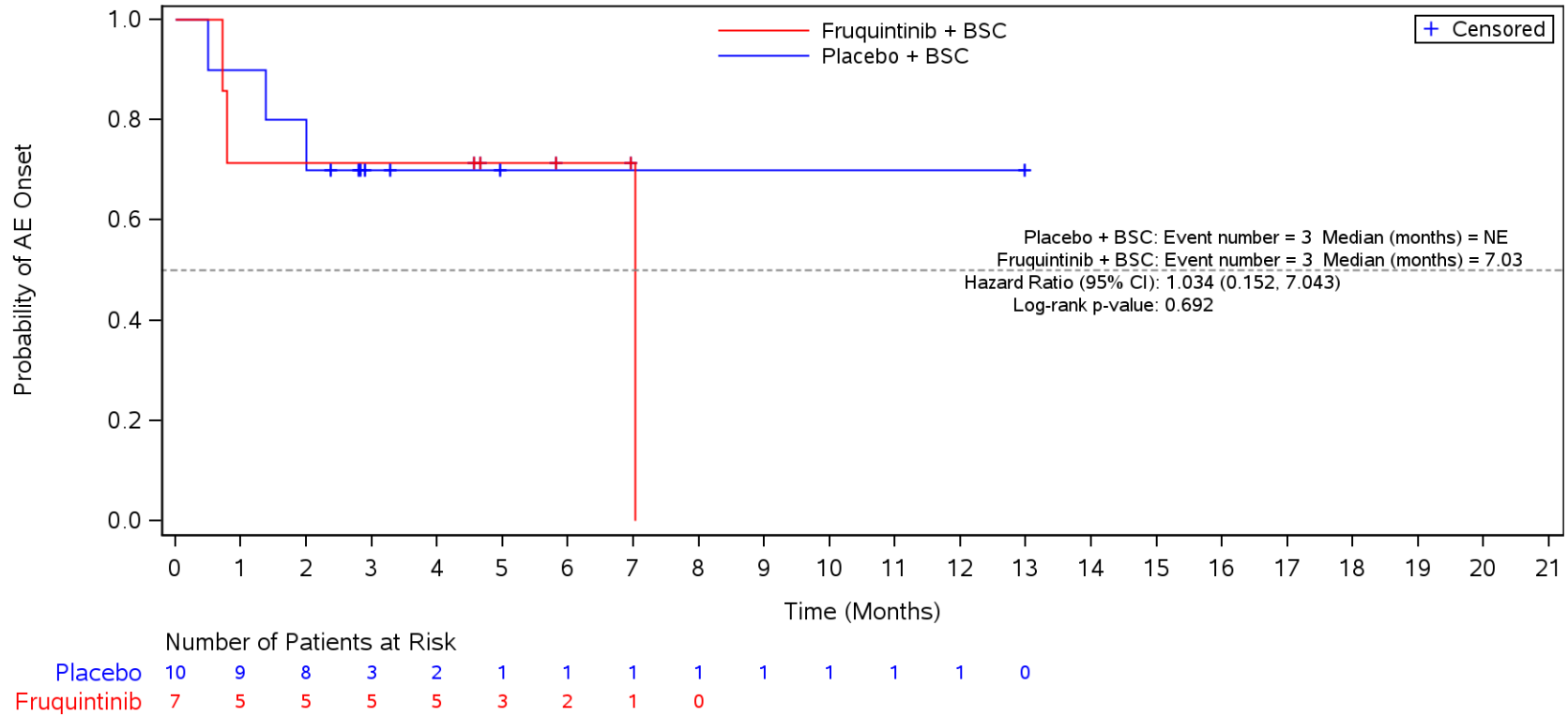
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
Serious TEAE
WT (Wild Type)



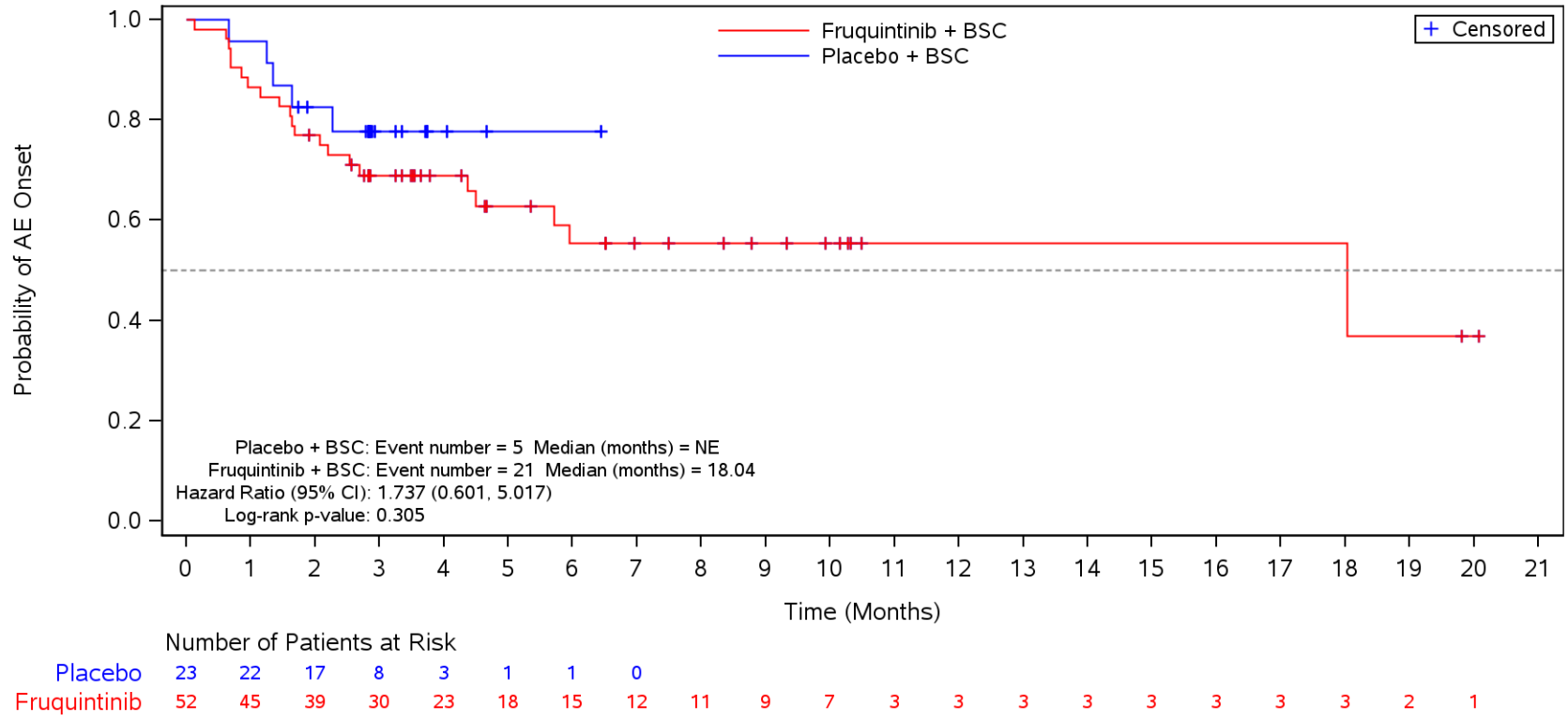
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
Serious TEAE
V600 E Mutation



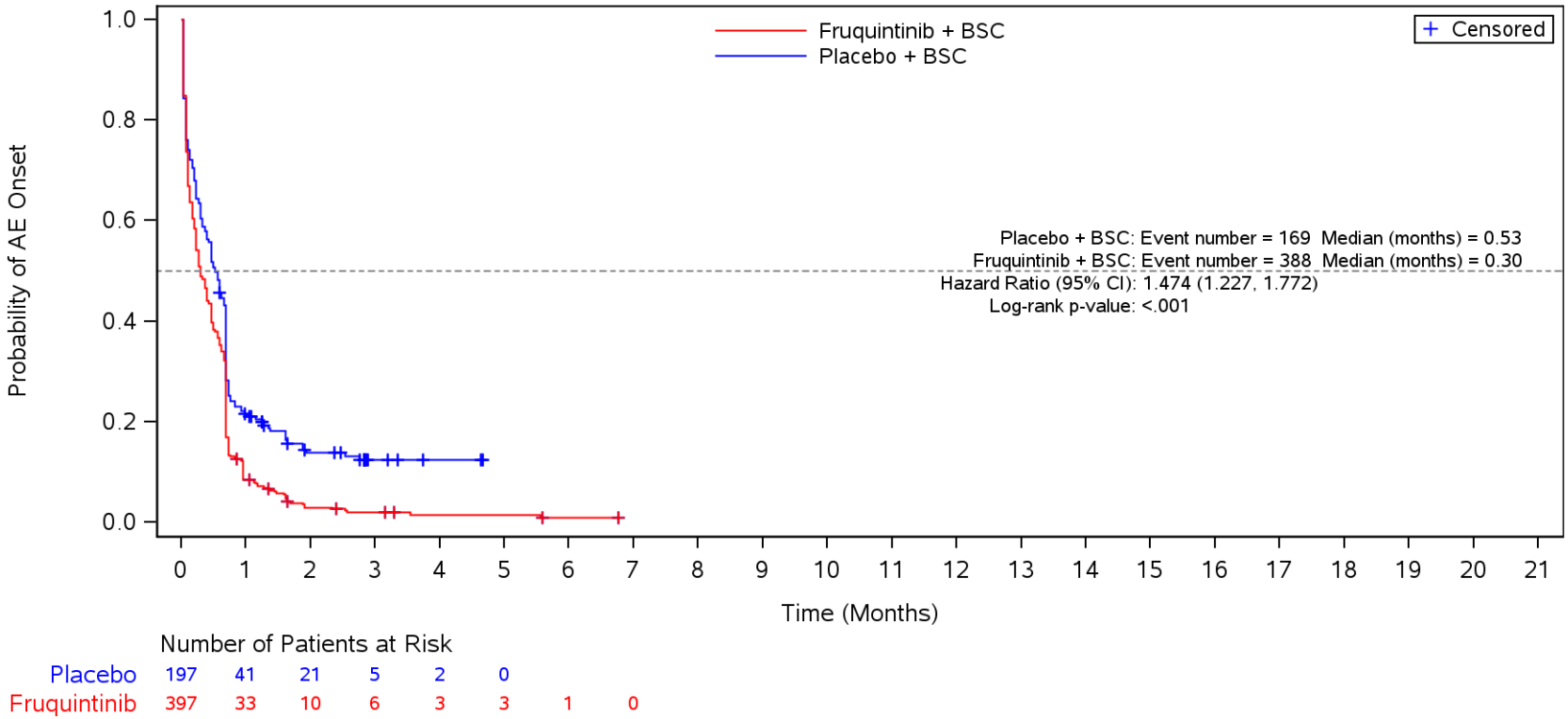
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
Serious TEAE
Other



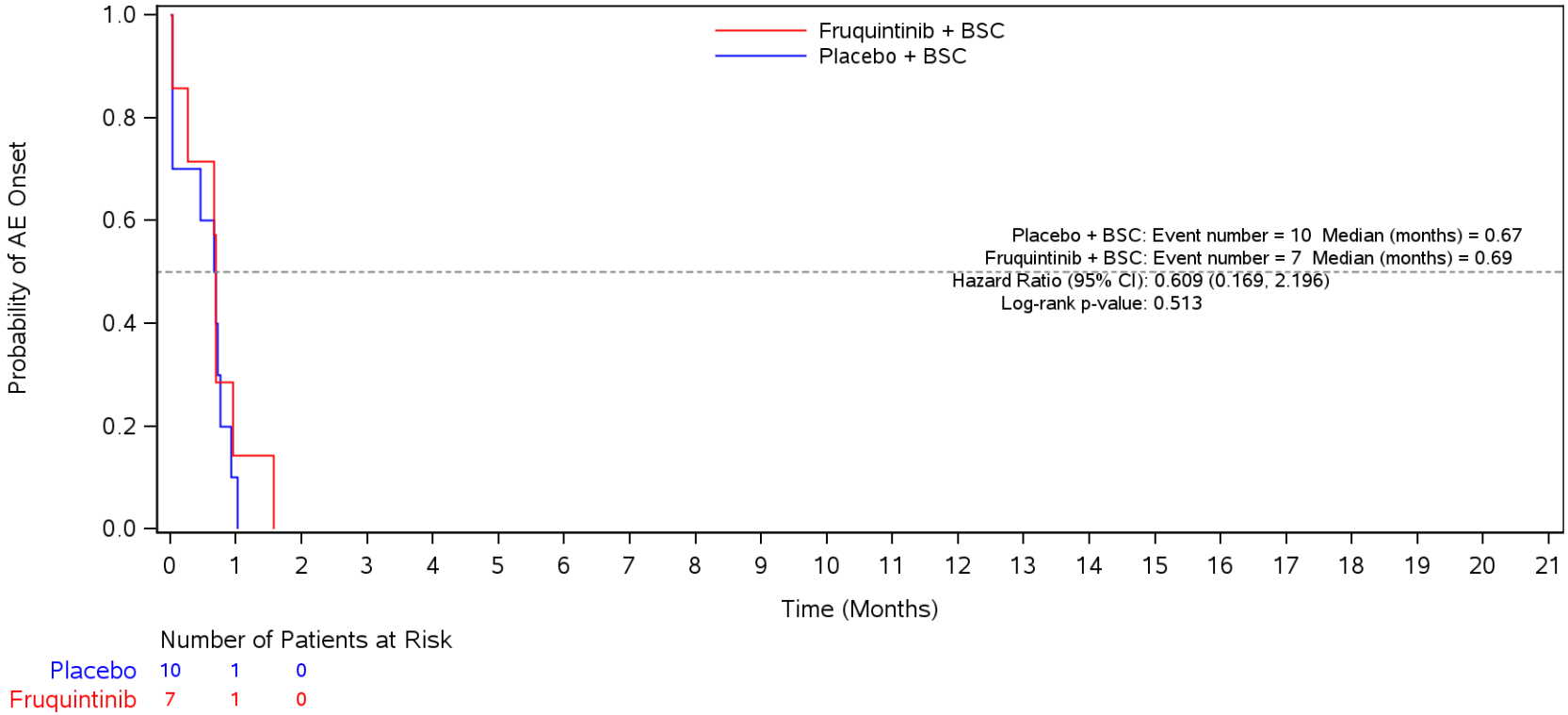
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE ≤ CTCAE Grade 2
WT (Wild Type)



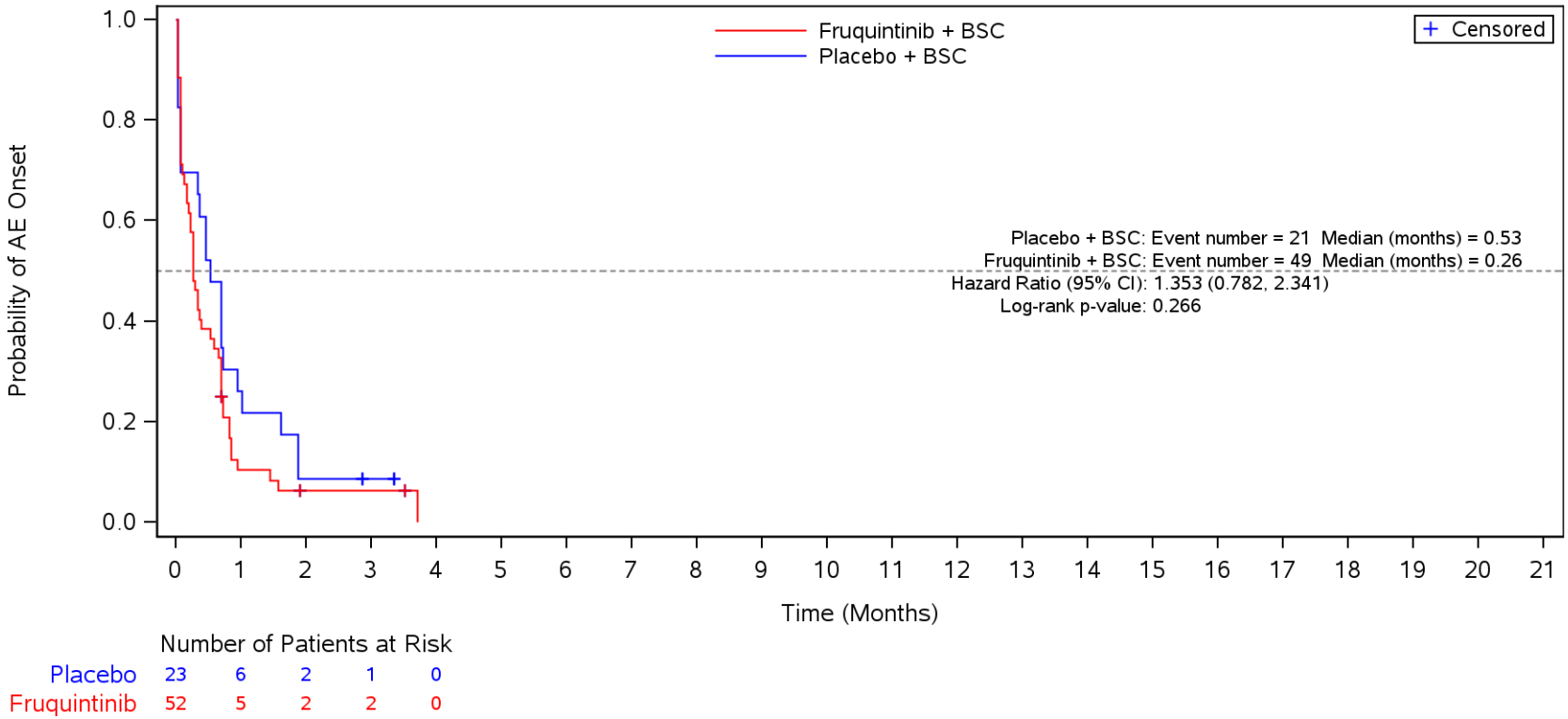
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE ≤ CTCAE Grade 2
V600 E Mutation



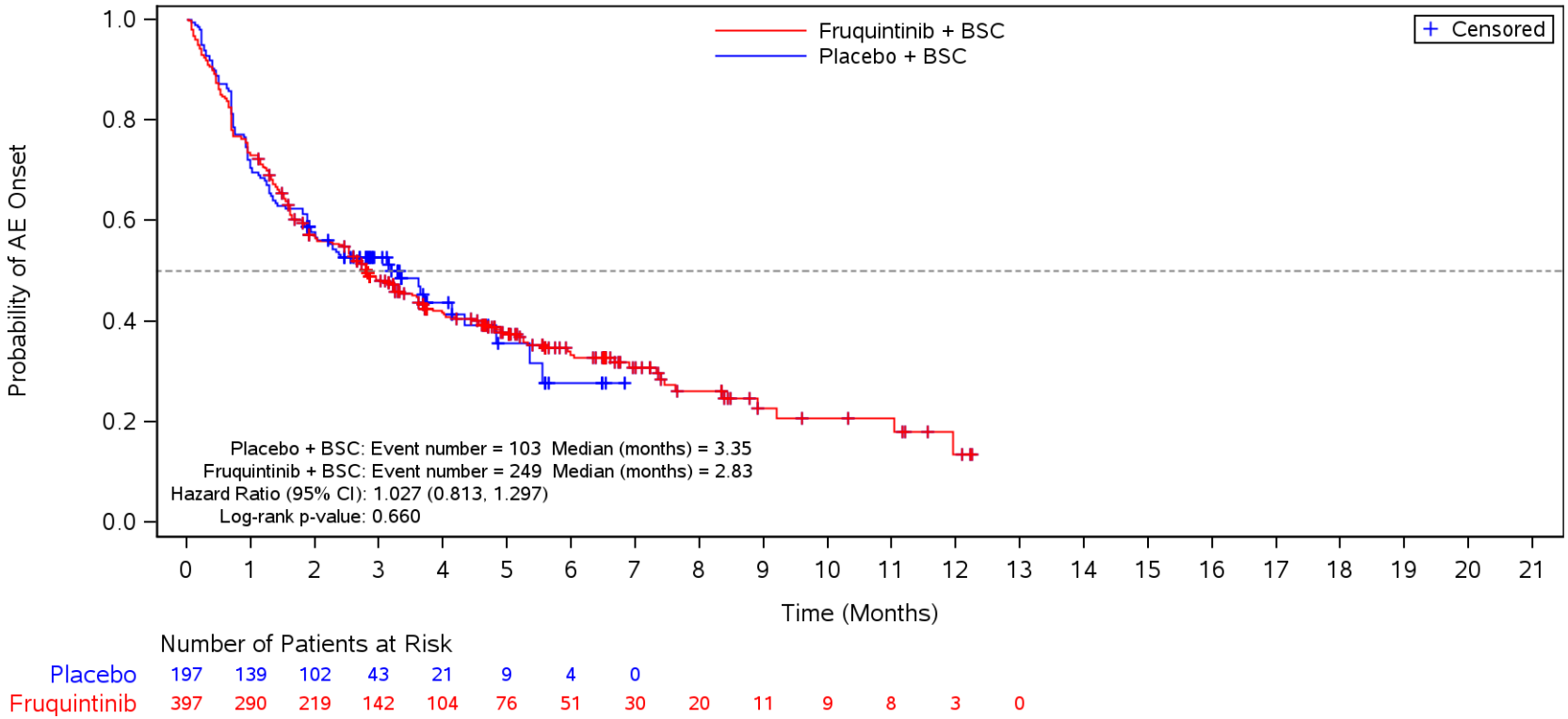
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE ≤ CTCAE Grade 2
Other



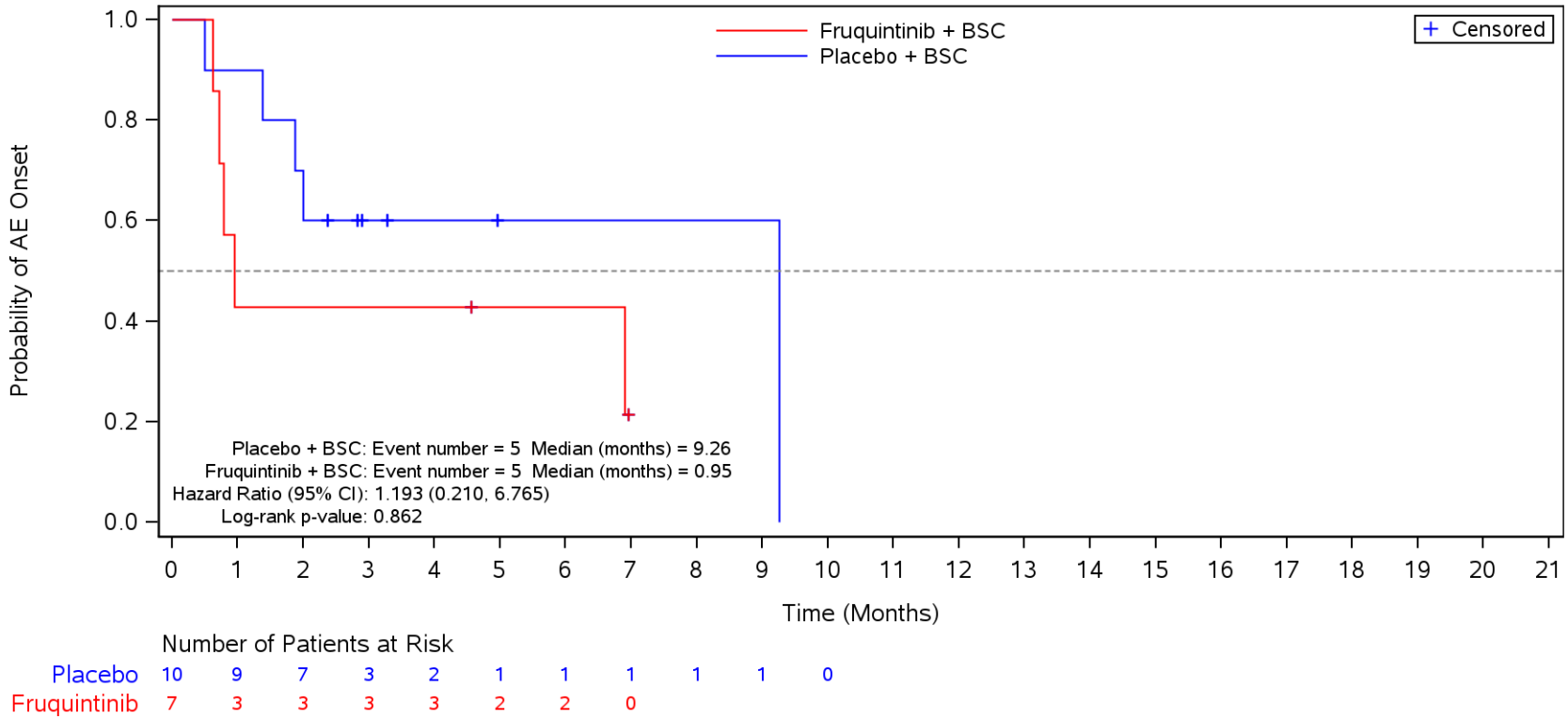
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3
WT (Wild Type)



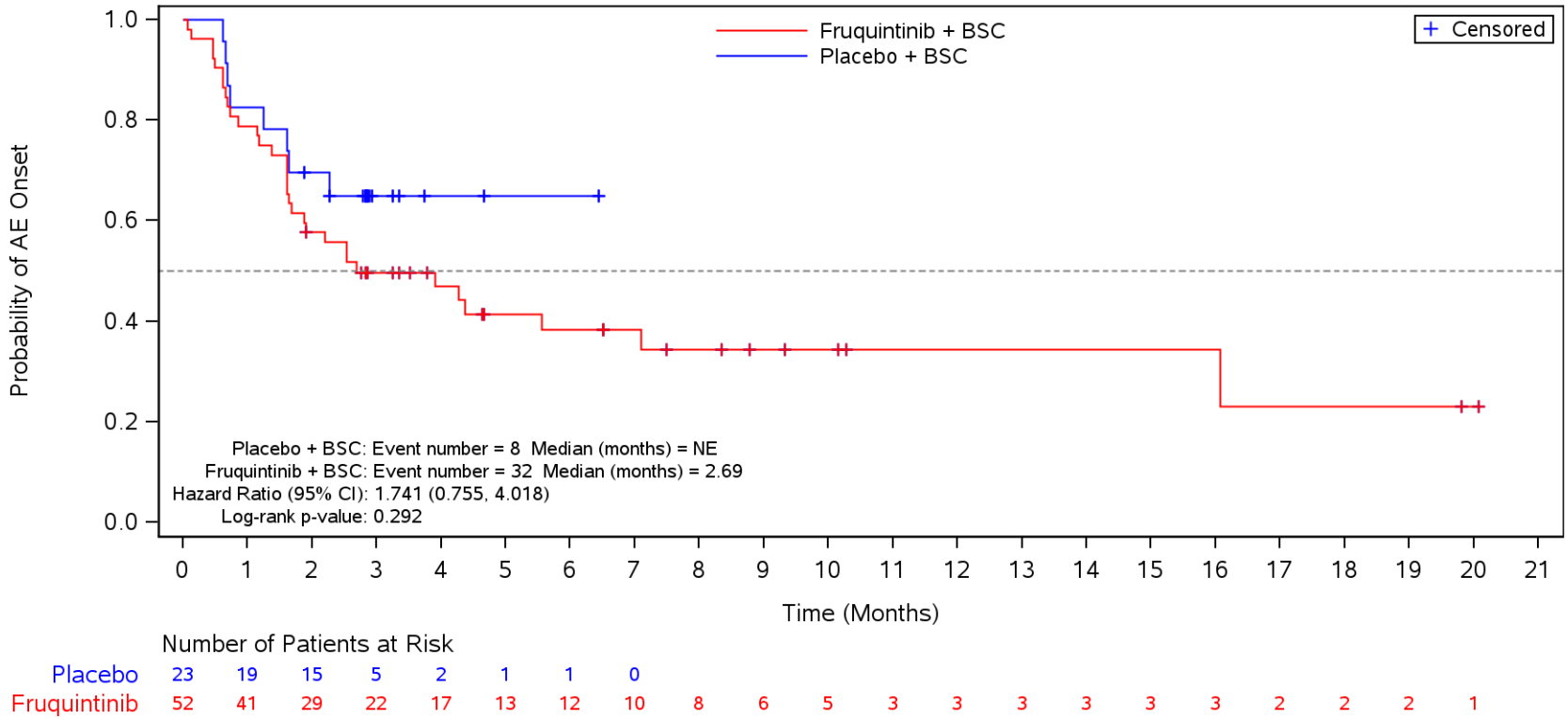
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3
V600 E Mutation



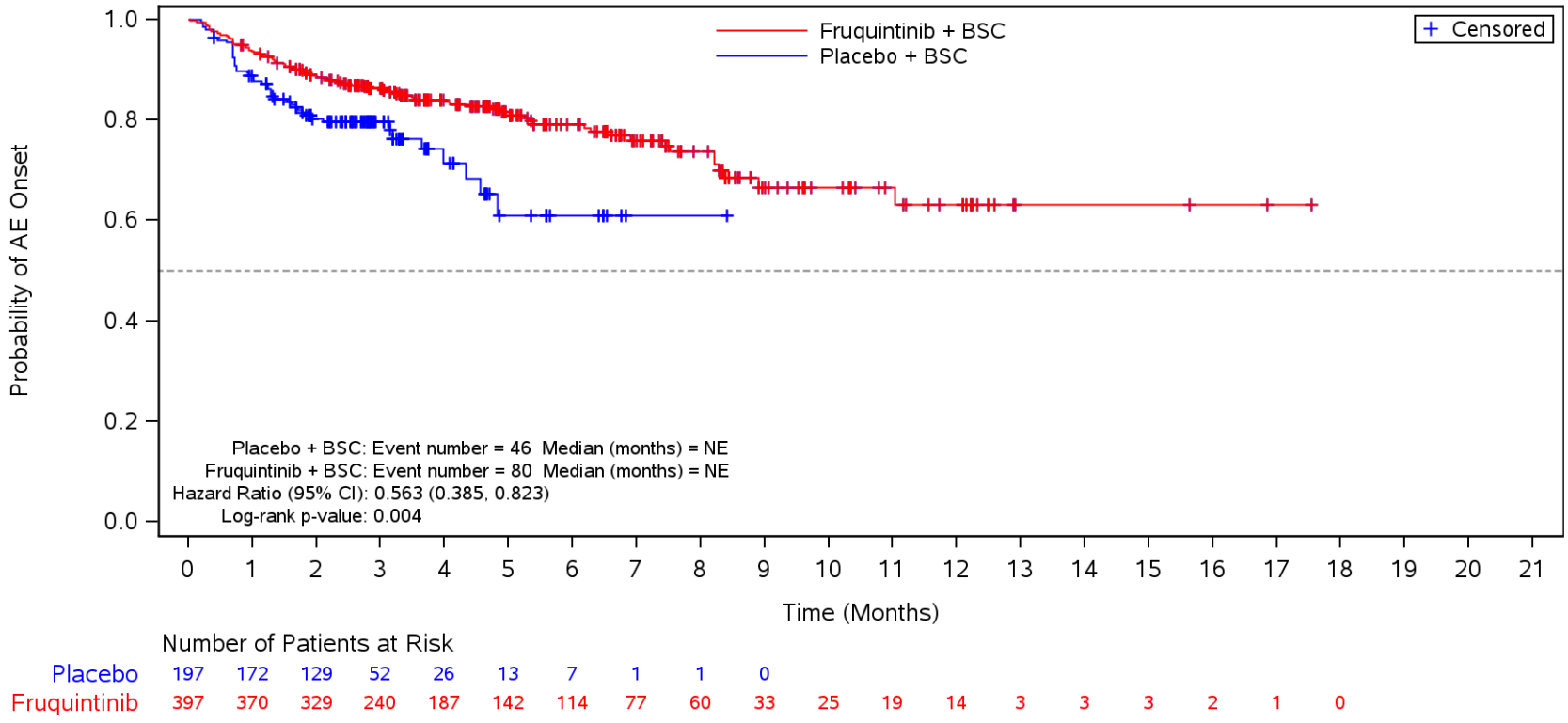
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3
Other



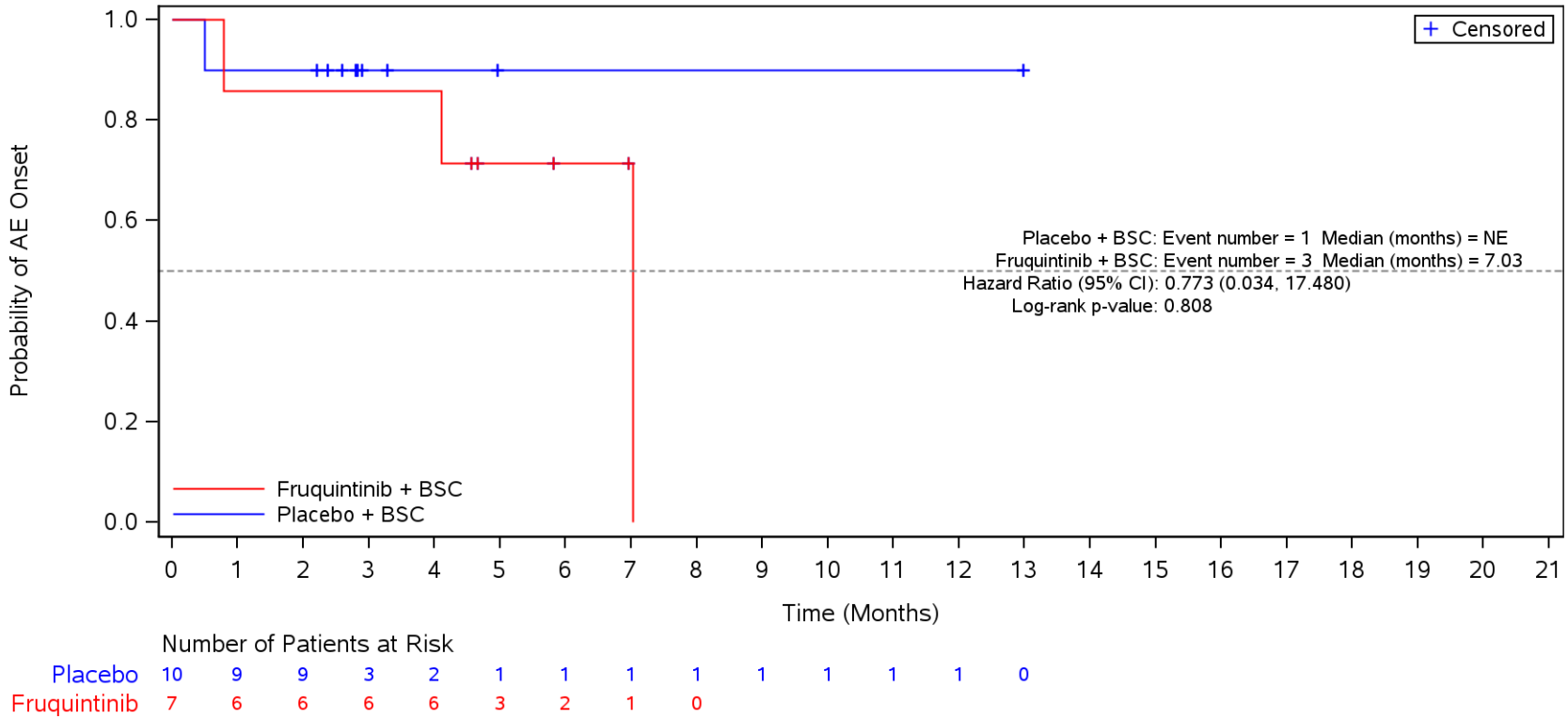
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
Discontinuation due to TEAE
WT (Wild Type)



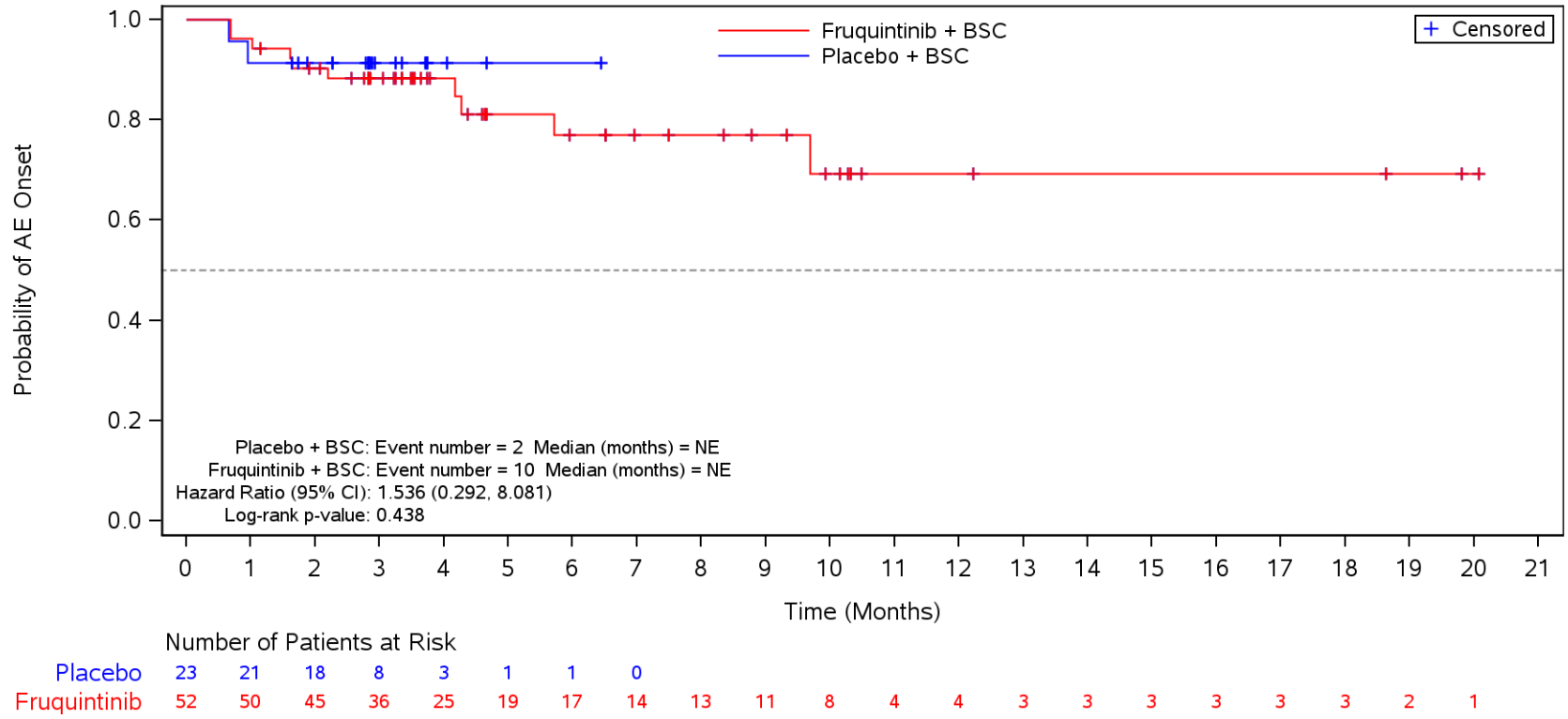
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
Discontinuation due to TEAE
V600 E Mutation



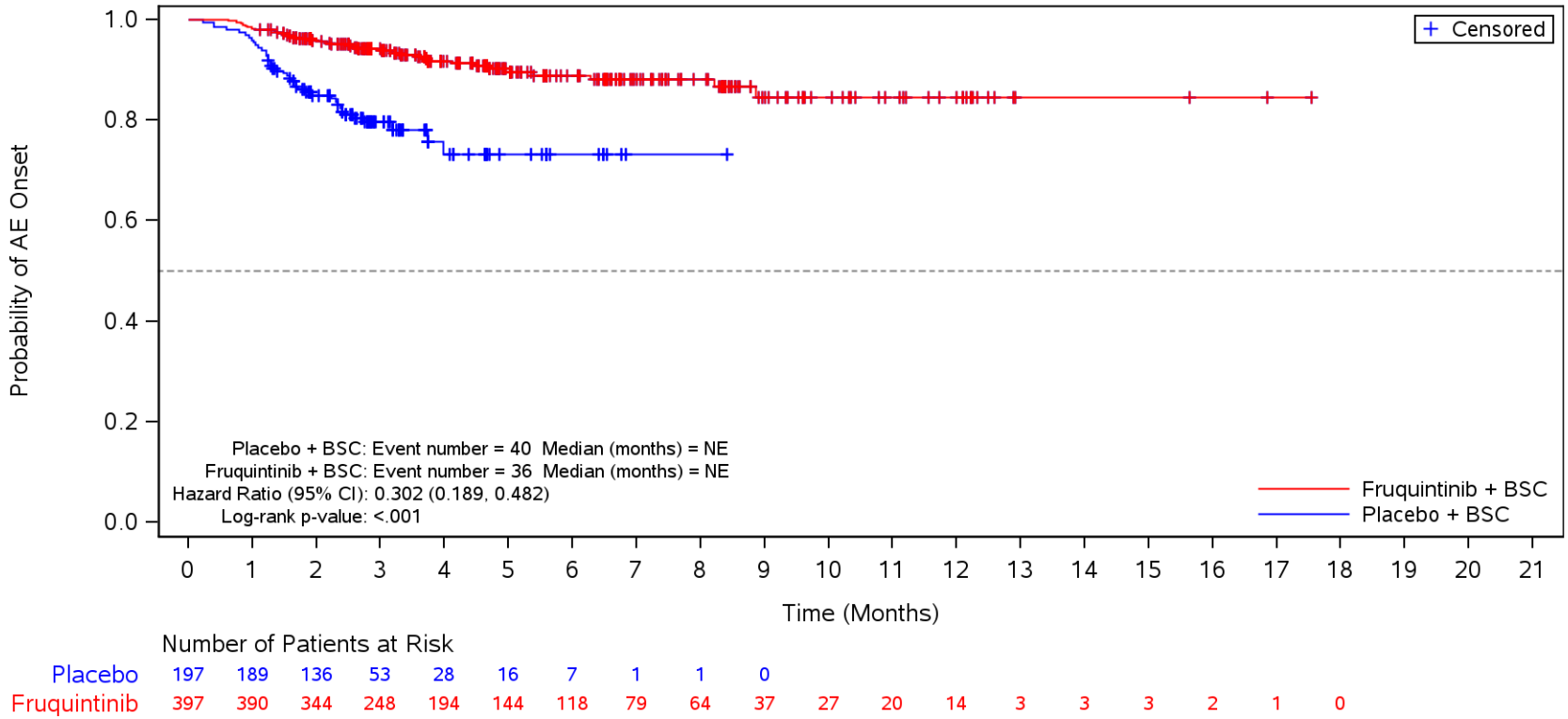
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
Discontinuation due to TEAE
Other



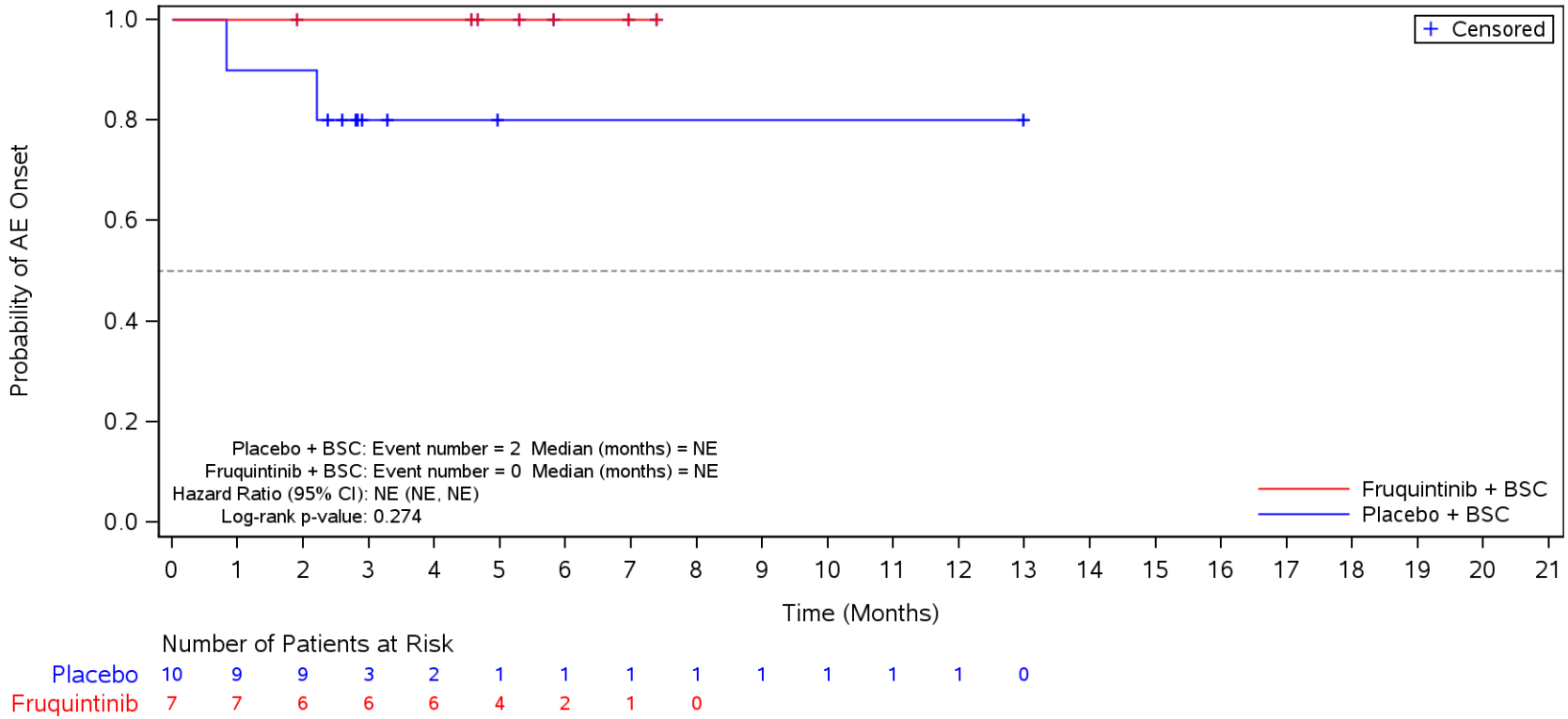
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
Deaths (Grade 5 TEAEs)
WT (Wild Type)



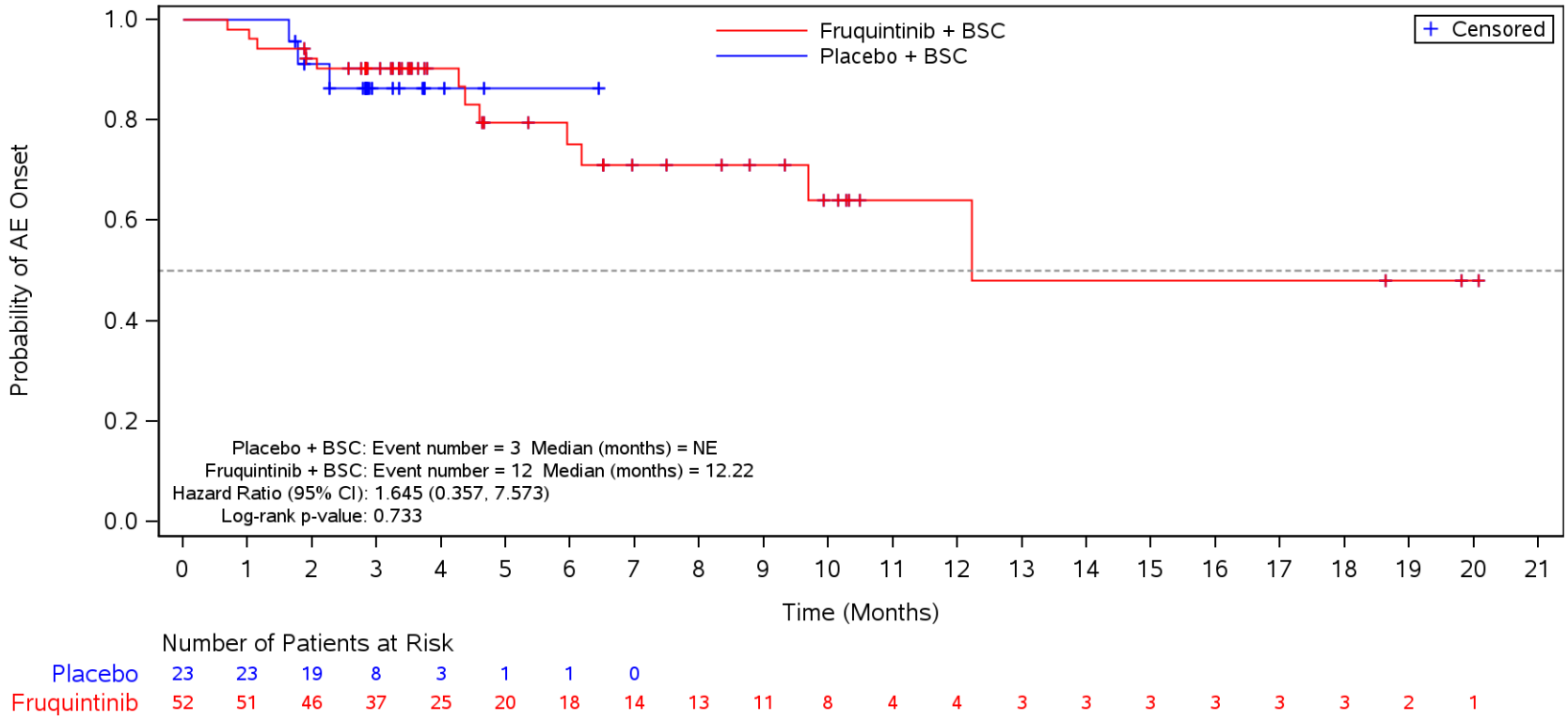
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE by BRAF Status
Safety Population
Deaths (Grade 5 TEAEs)
V600 E Mutation



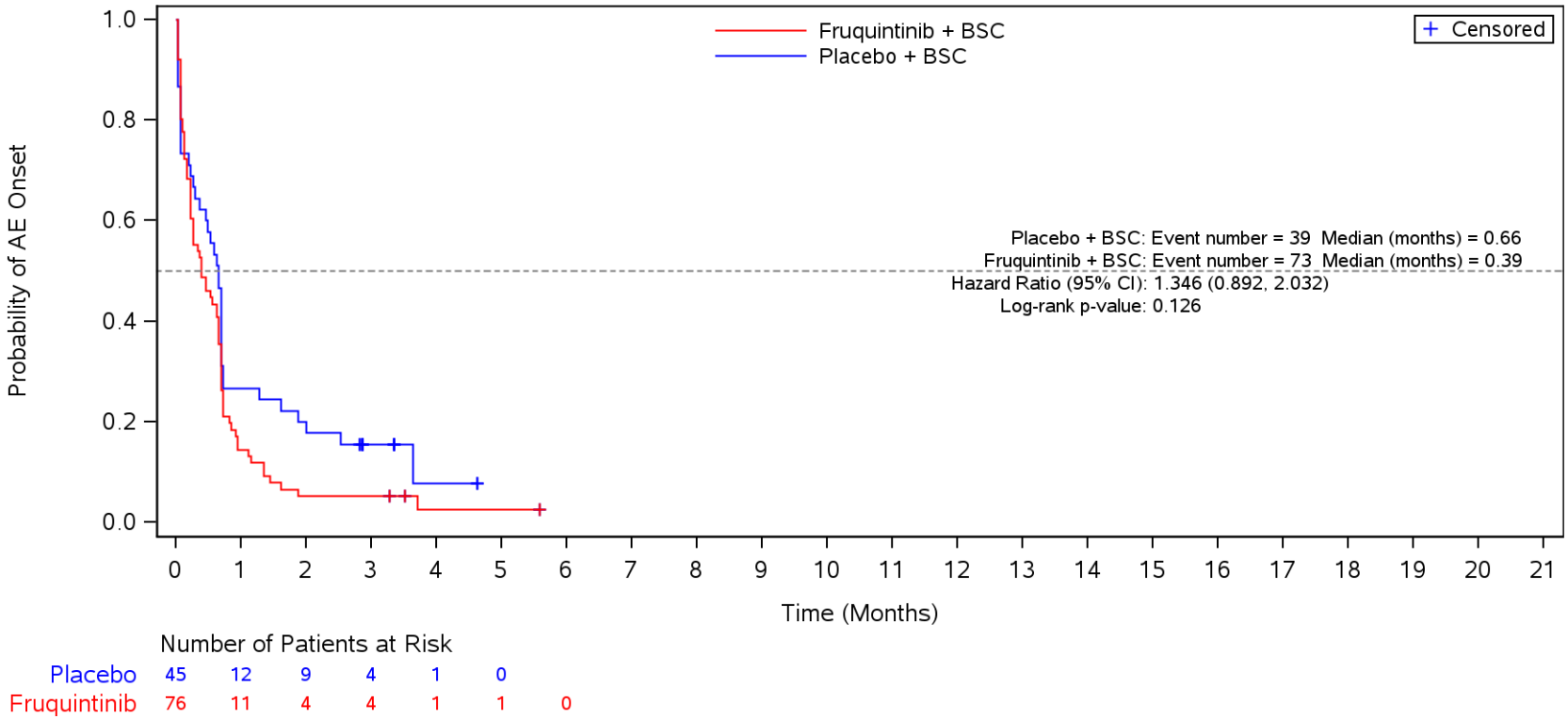
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE
<=3



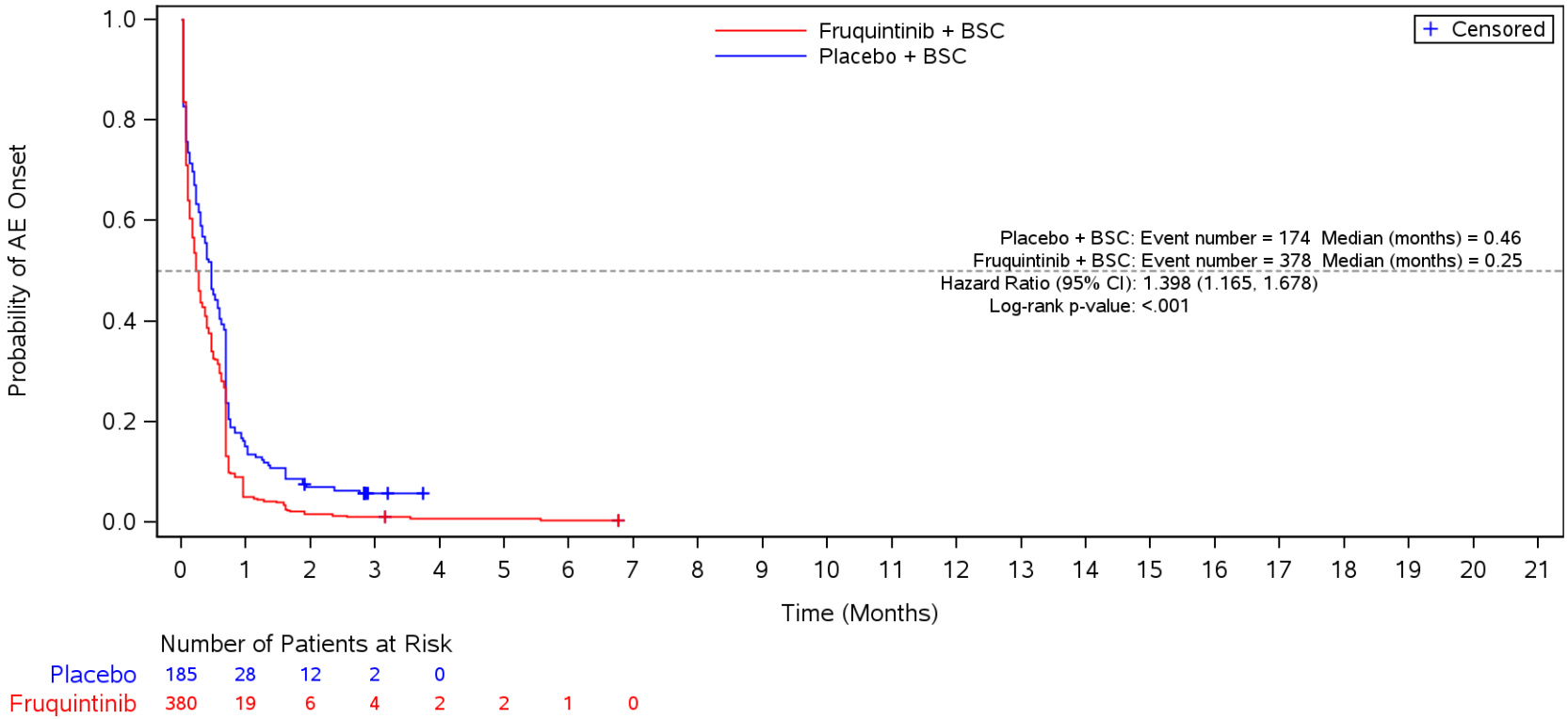
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE
<=3



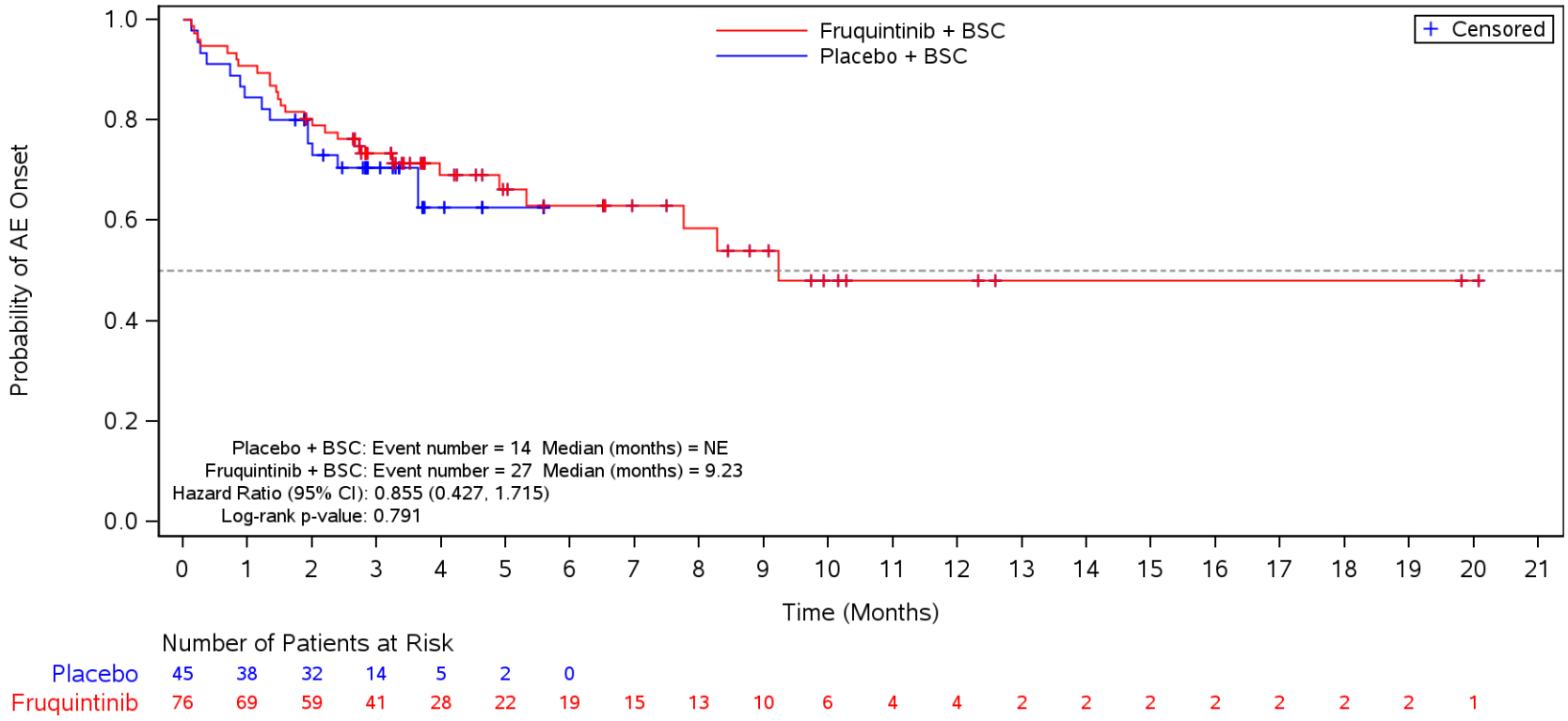
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE
>3



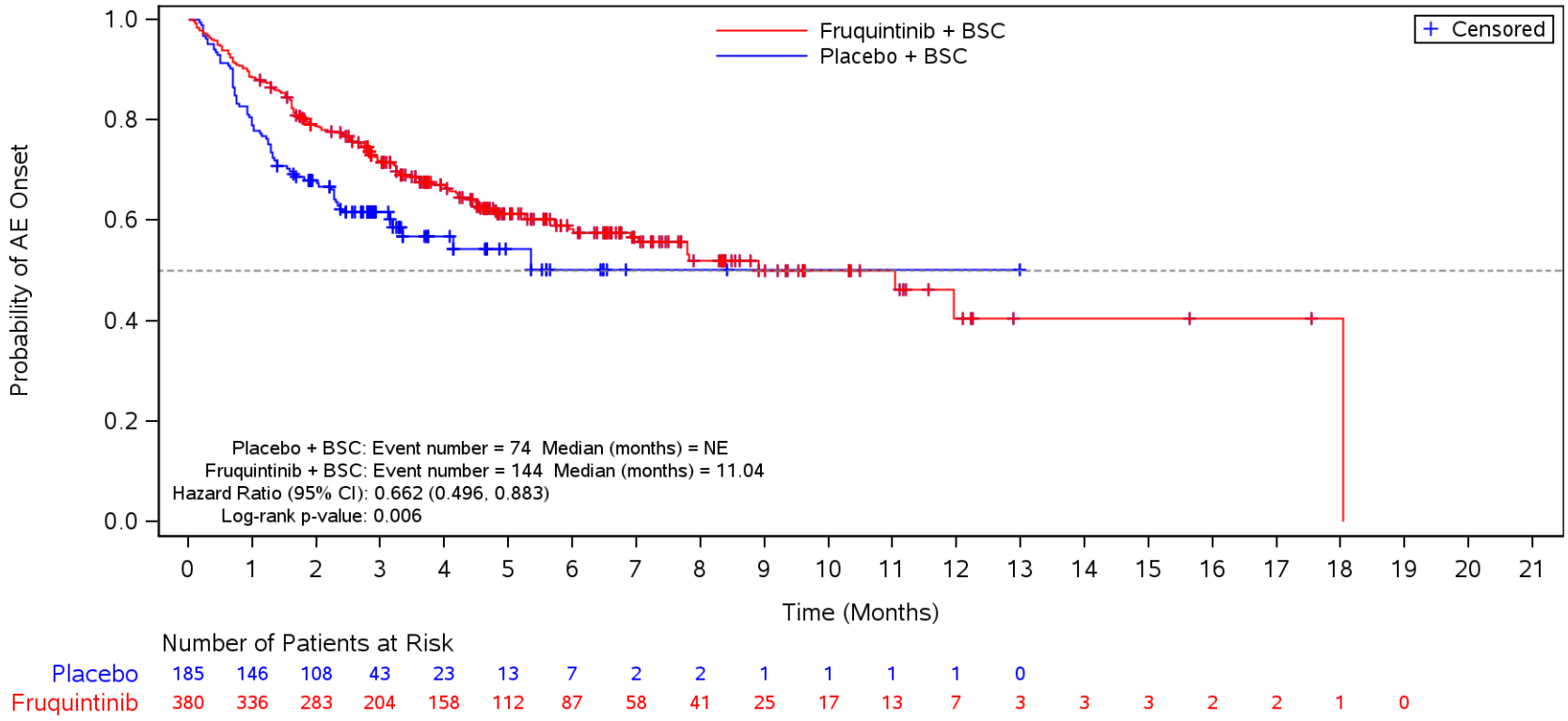
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
Serious TEAE
<=3



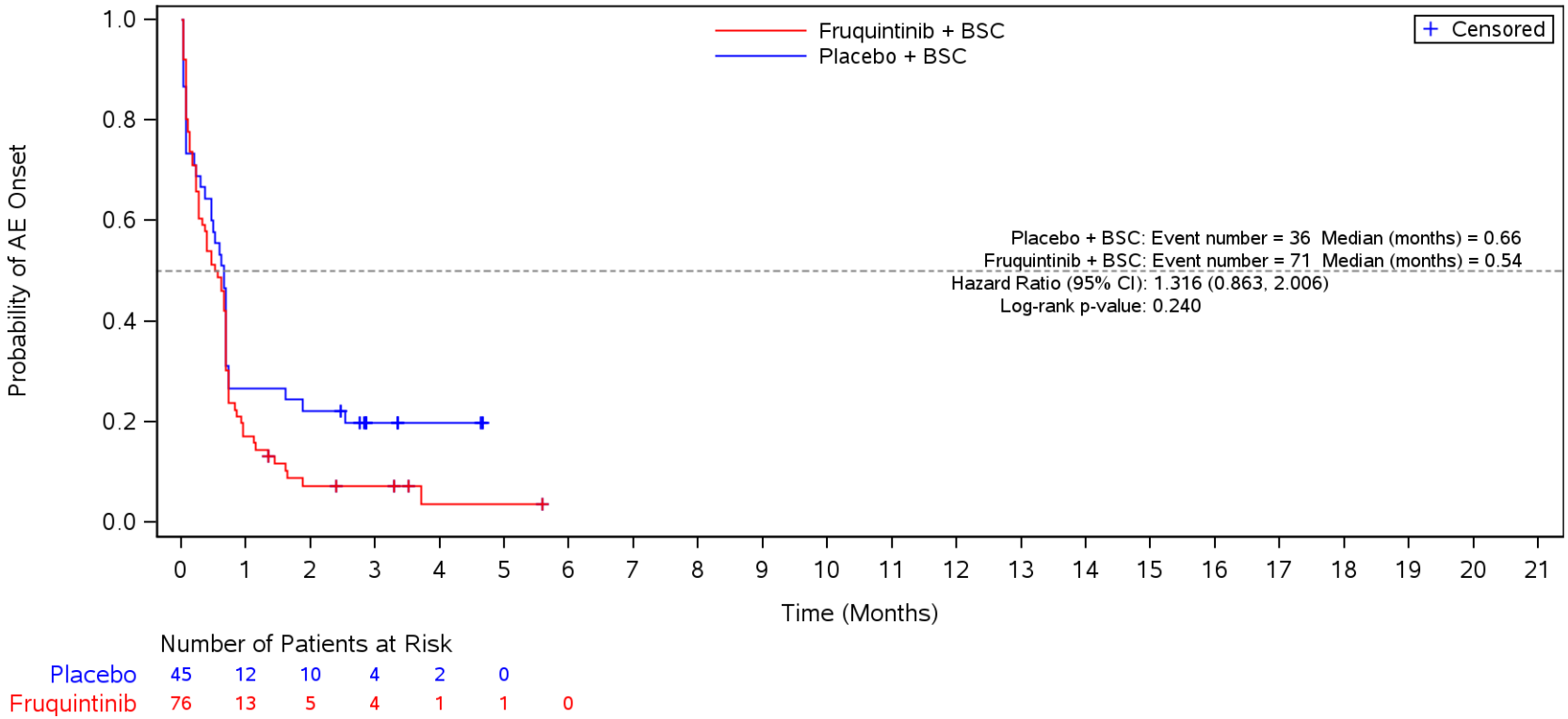
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
Serious TEAE
>3



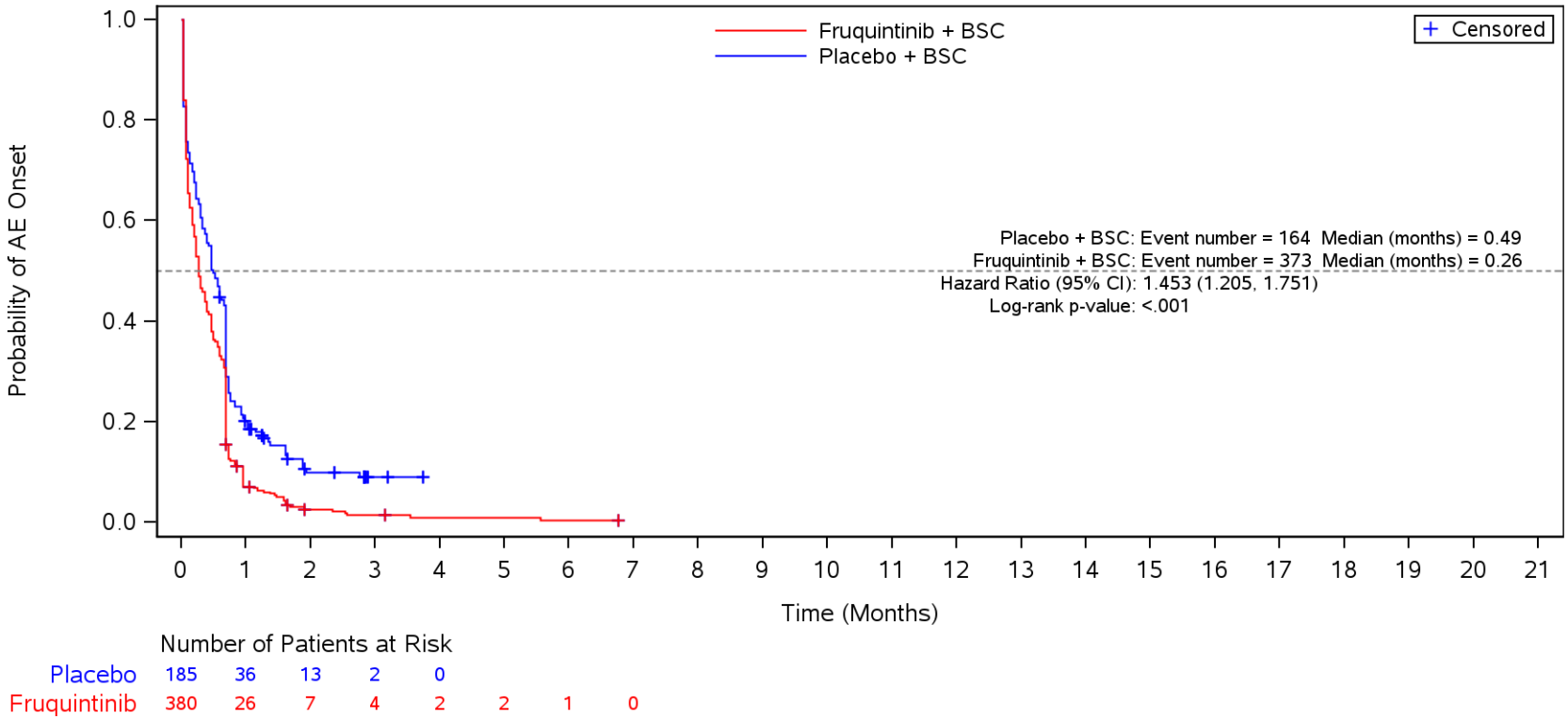
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≤ CTCAE Grade 2
<=3



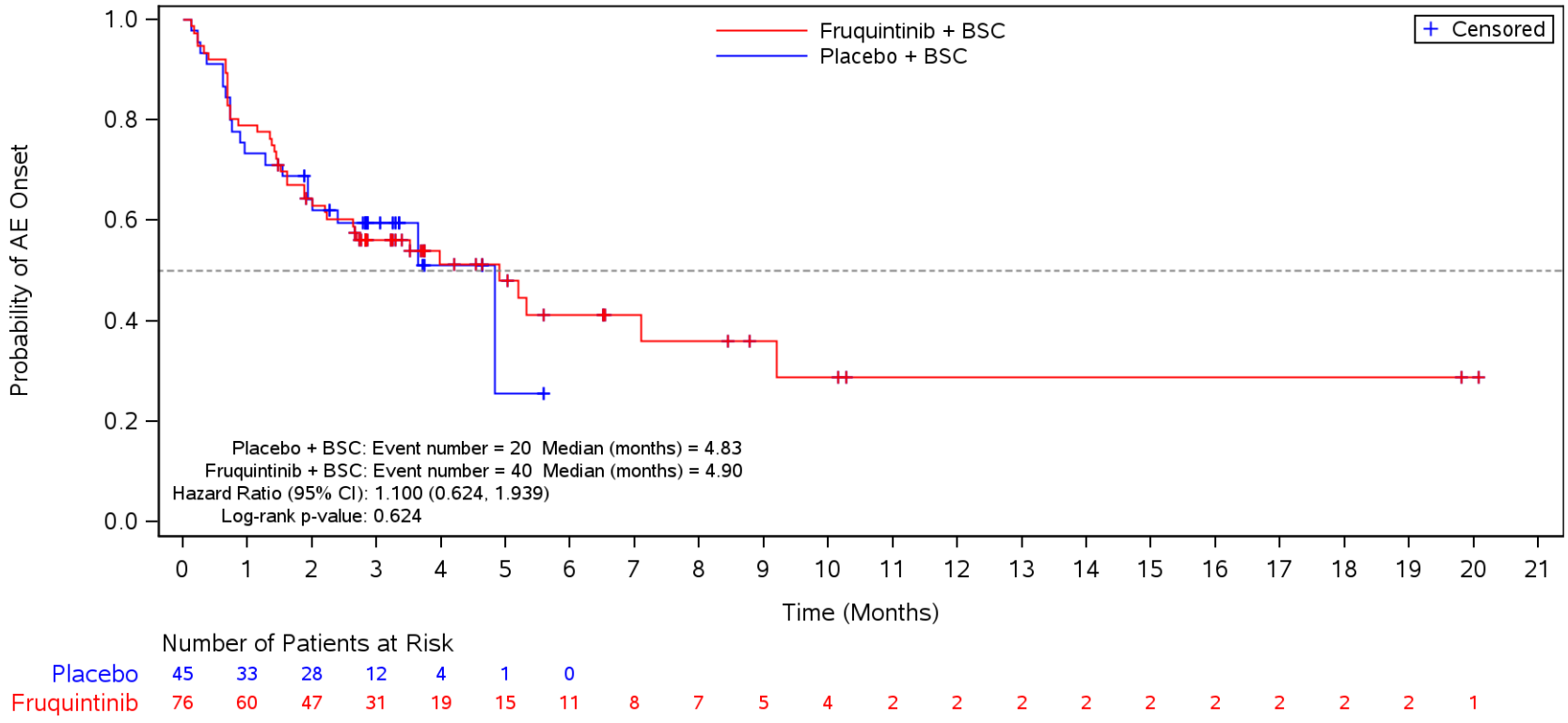
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≤ CTCAE Grade 2
>3



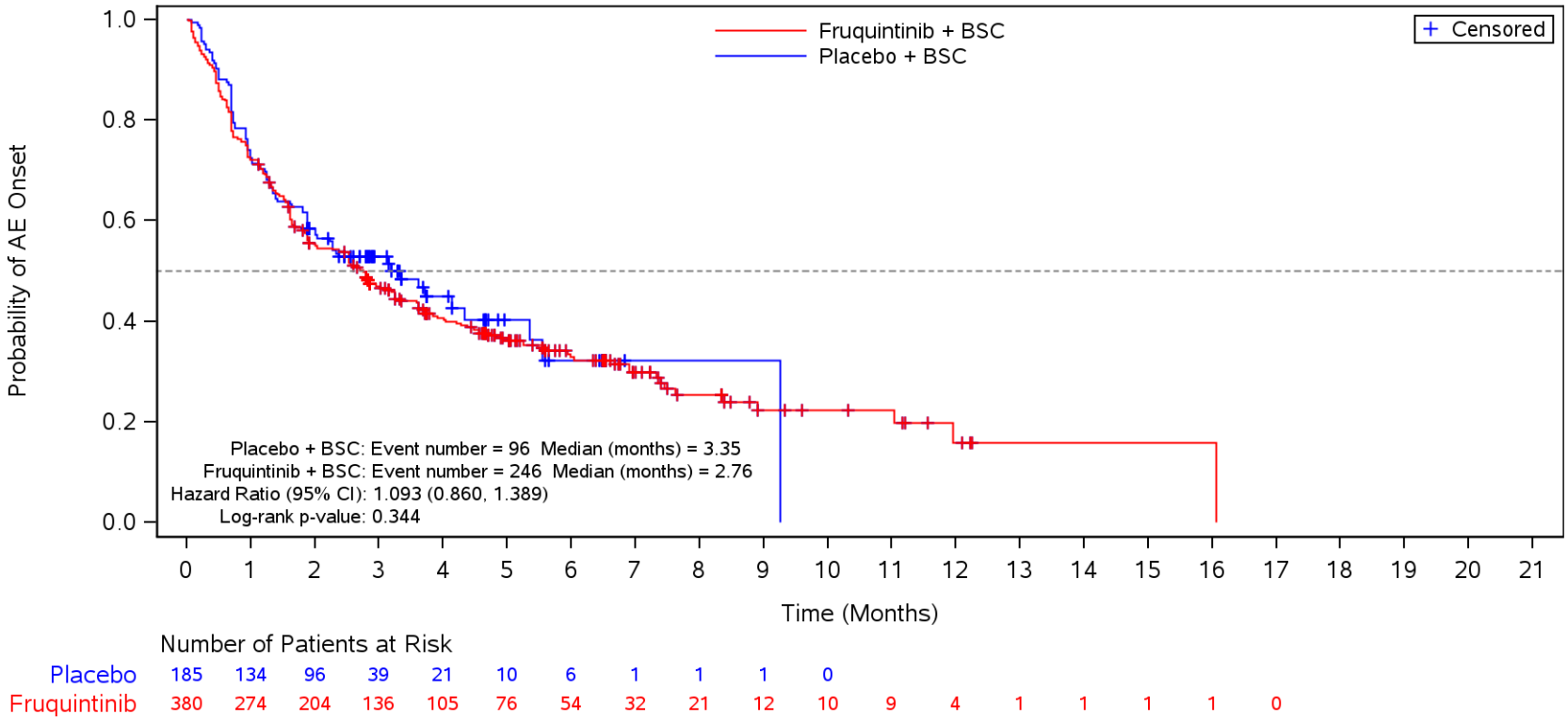
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3
<=3



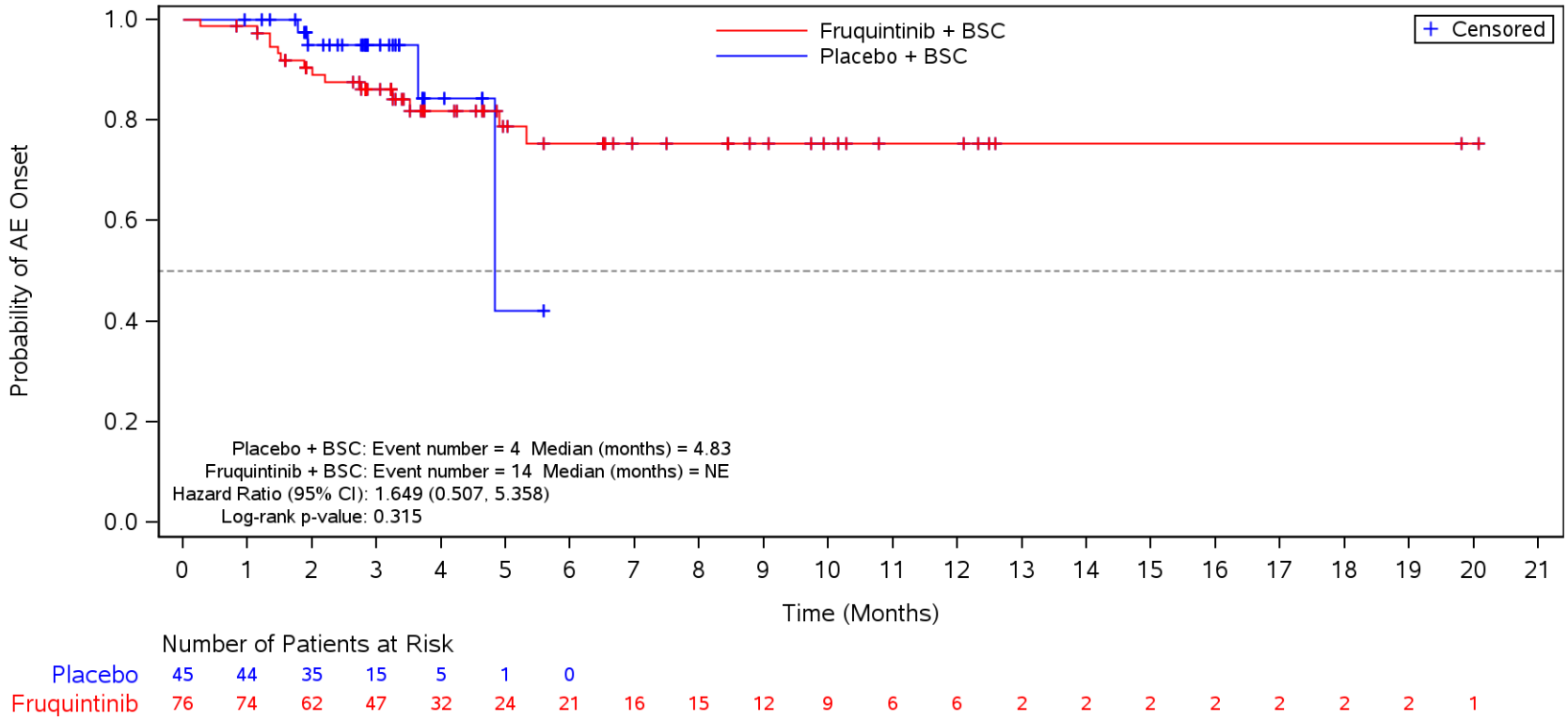
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3
>3



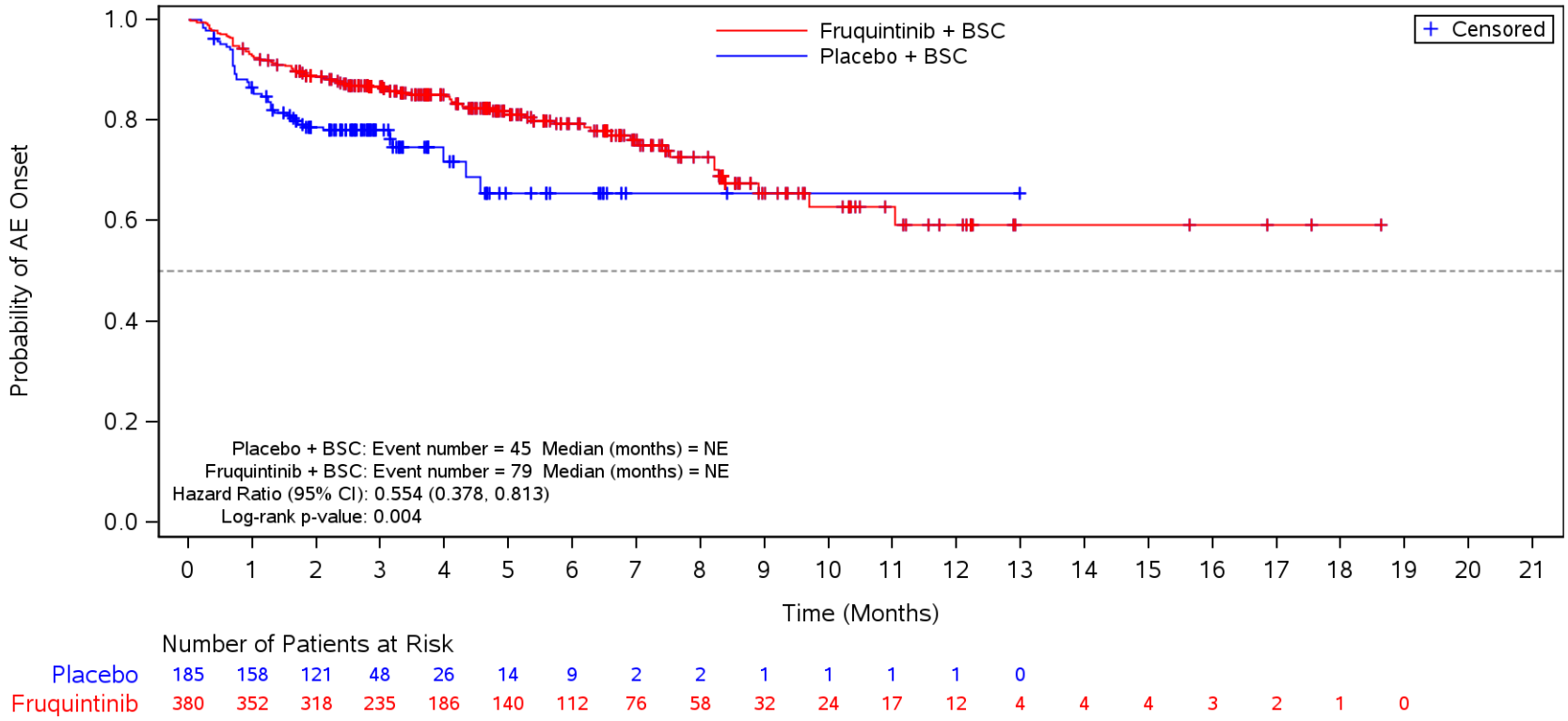
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
Discontinuation due to TEAE
<=3



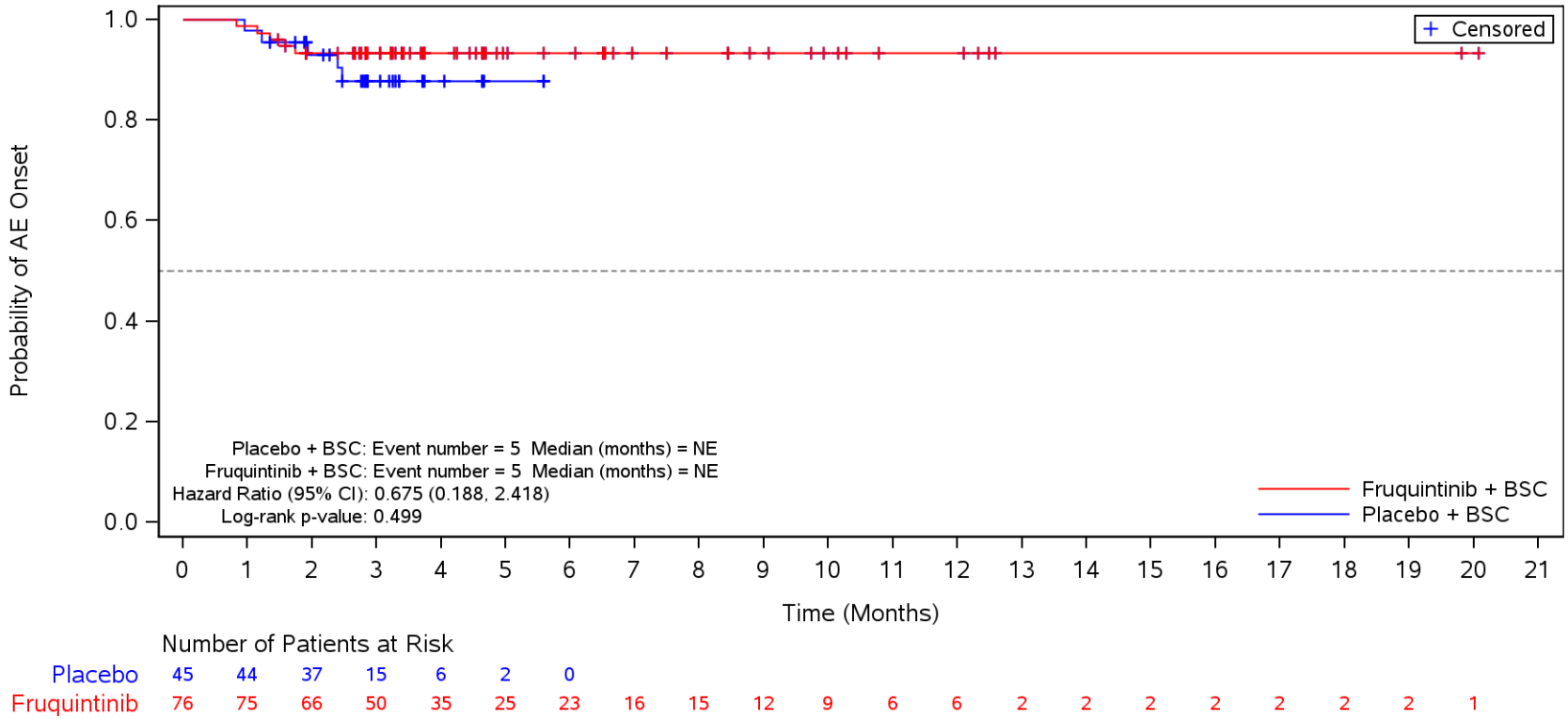
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
Discontinuation due to TEAE
>3



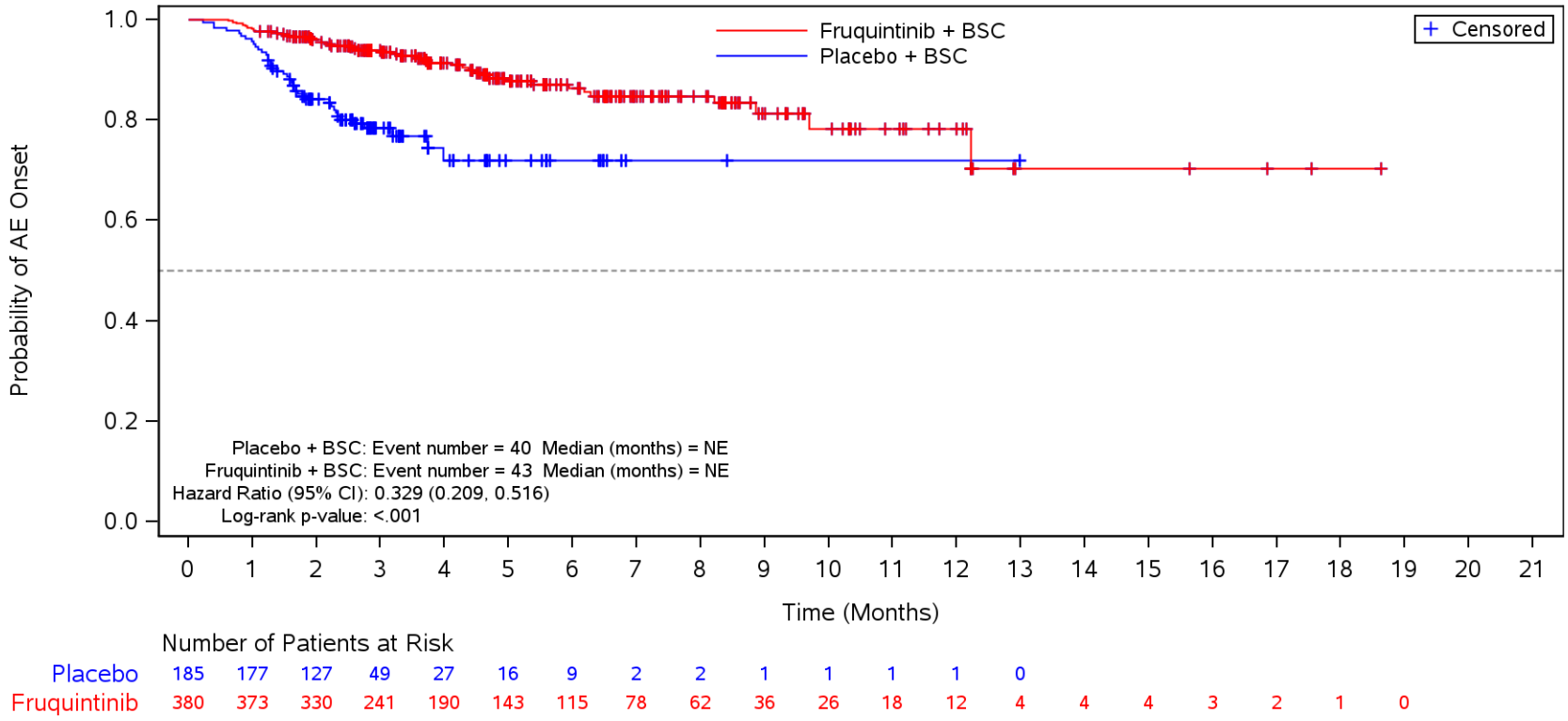
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines
Safety Population
Deaths (Grade 5 TEAEs)
<=3



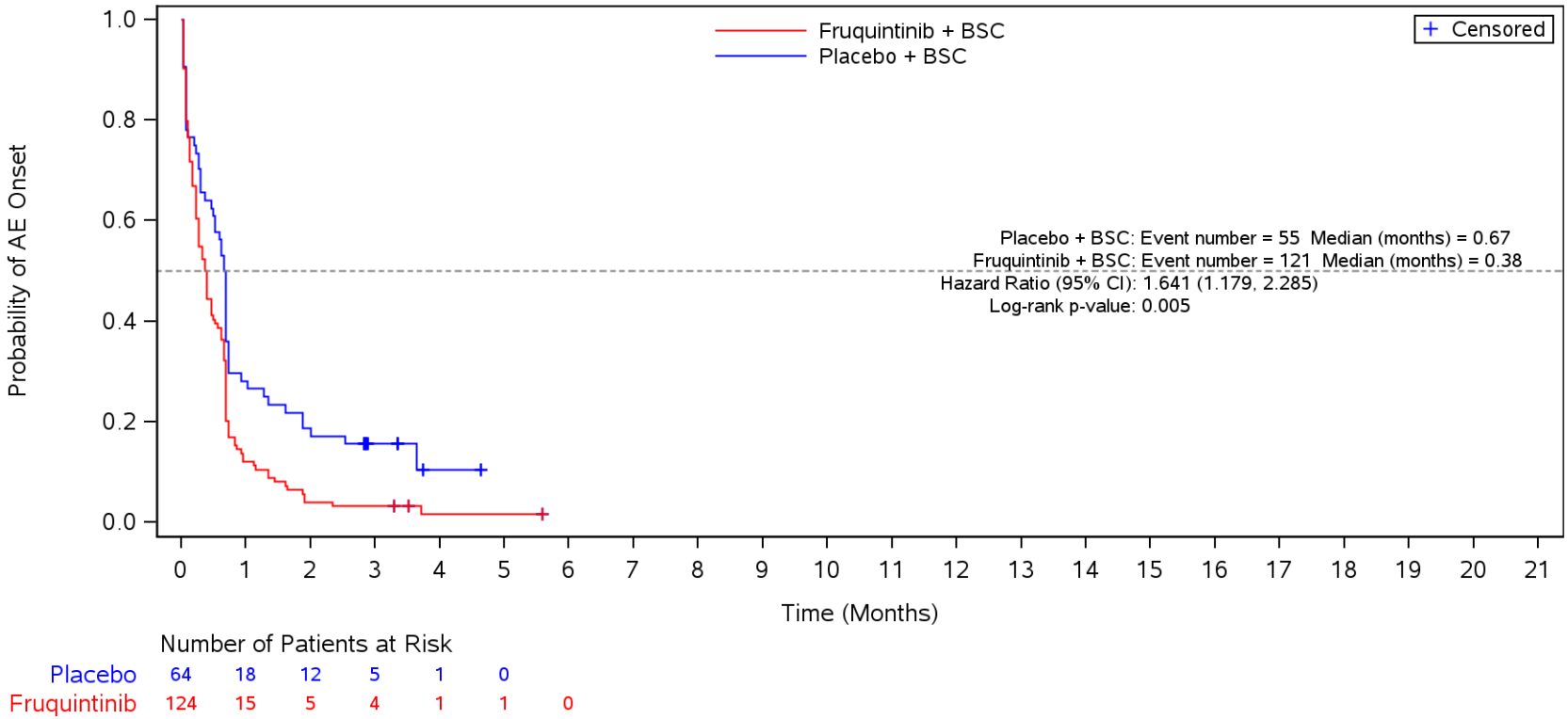
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE
<=3



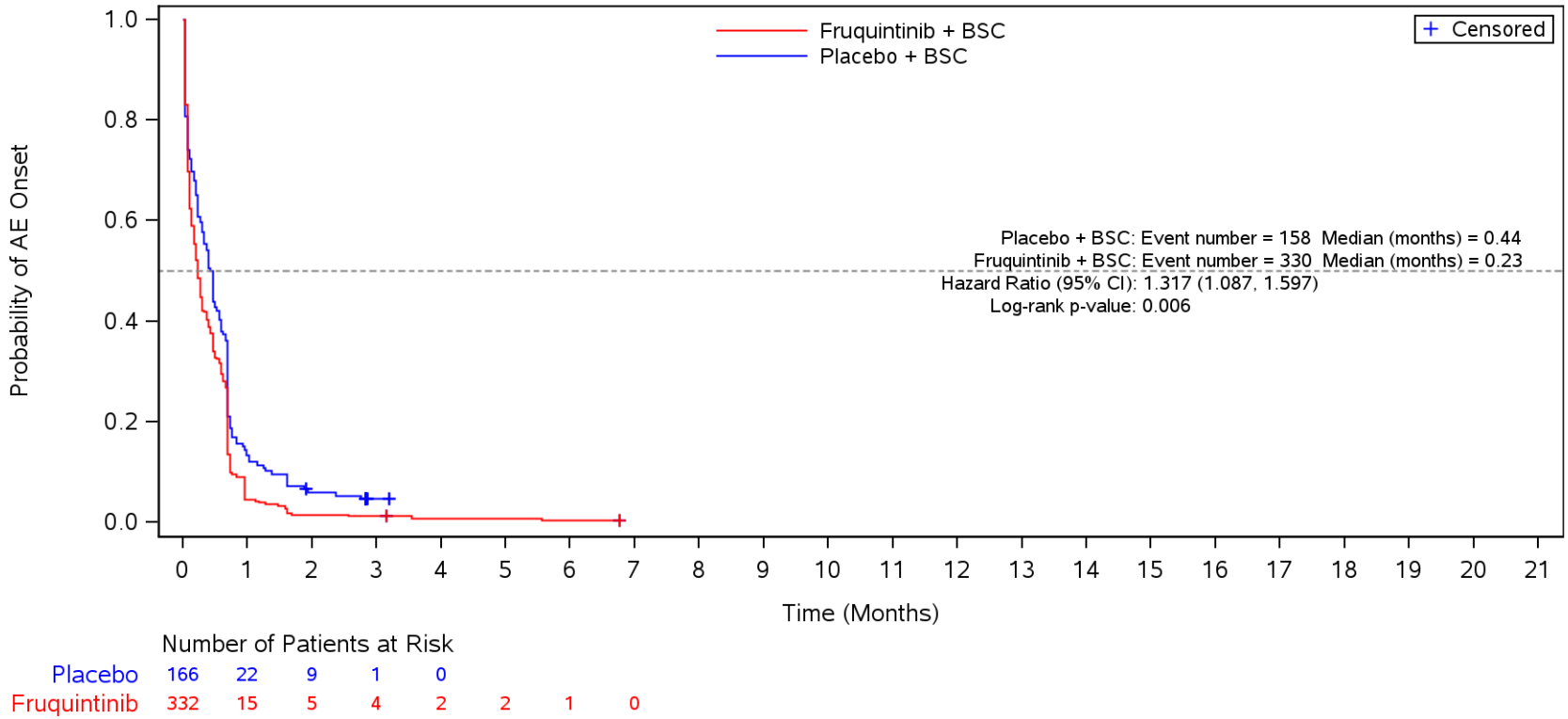
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE
<=3



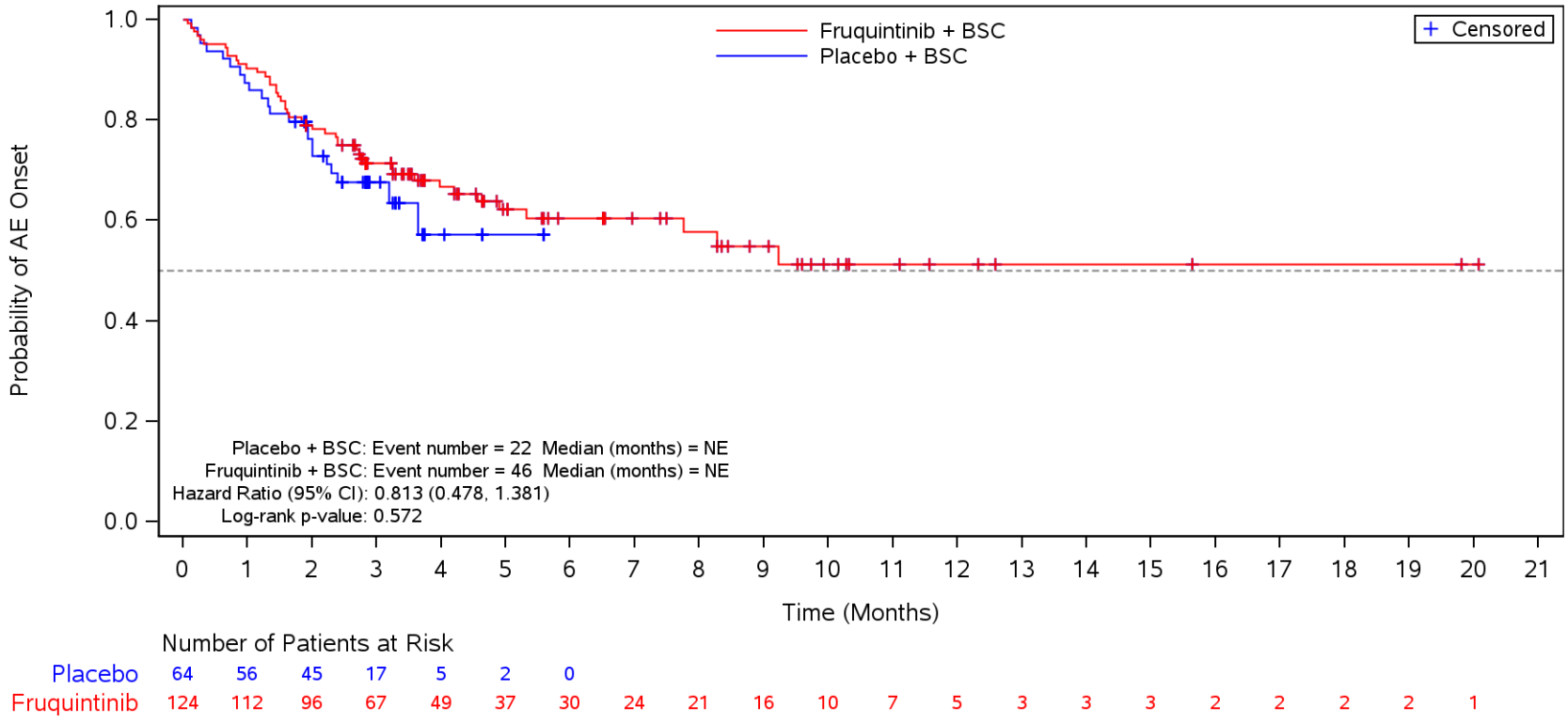
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE
>3



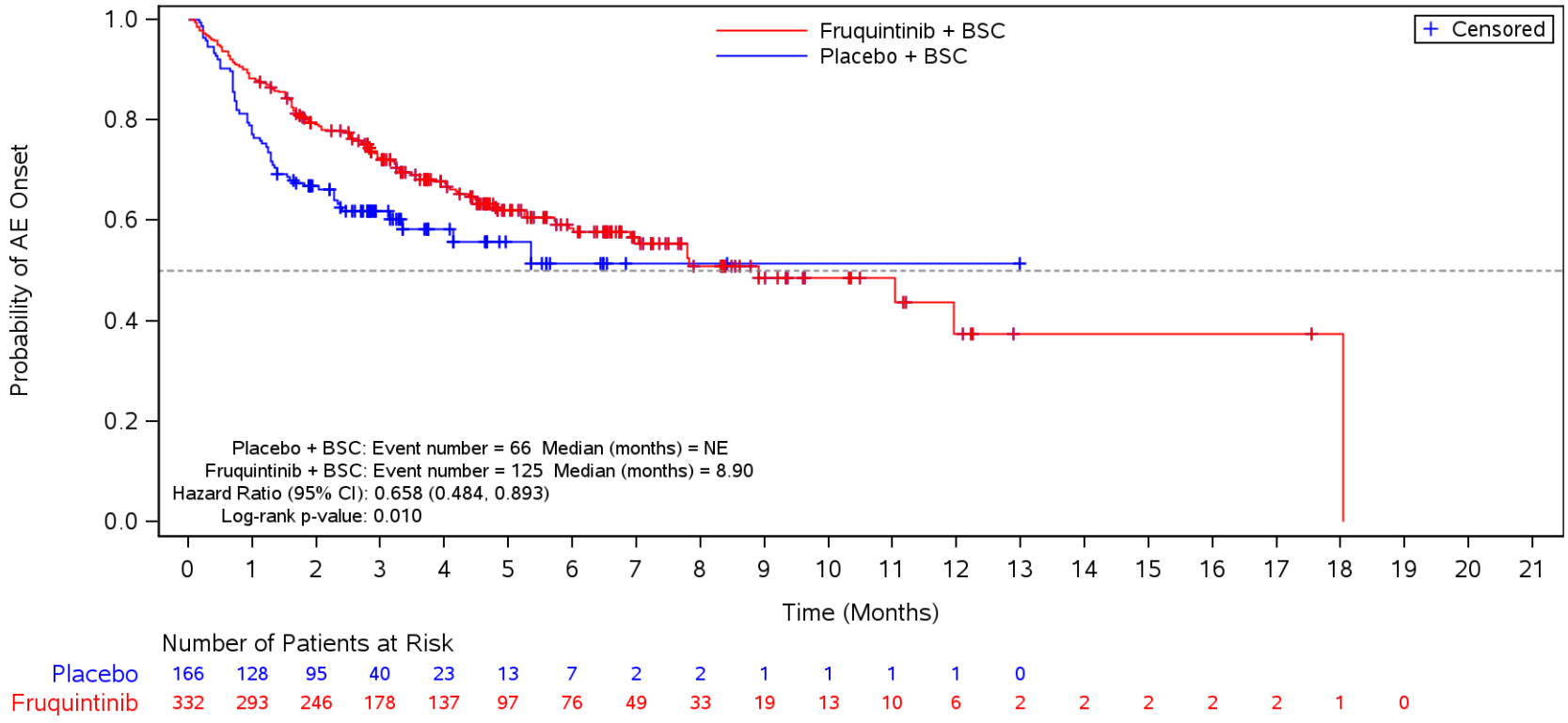
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Serious TEAE
<=3



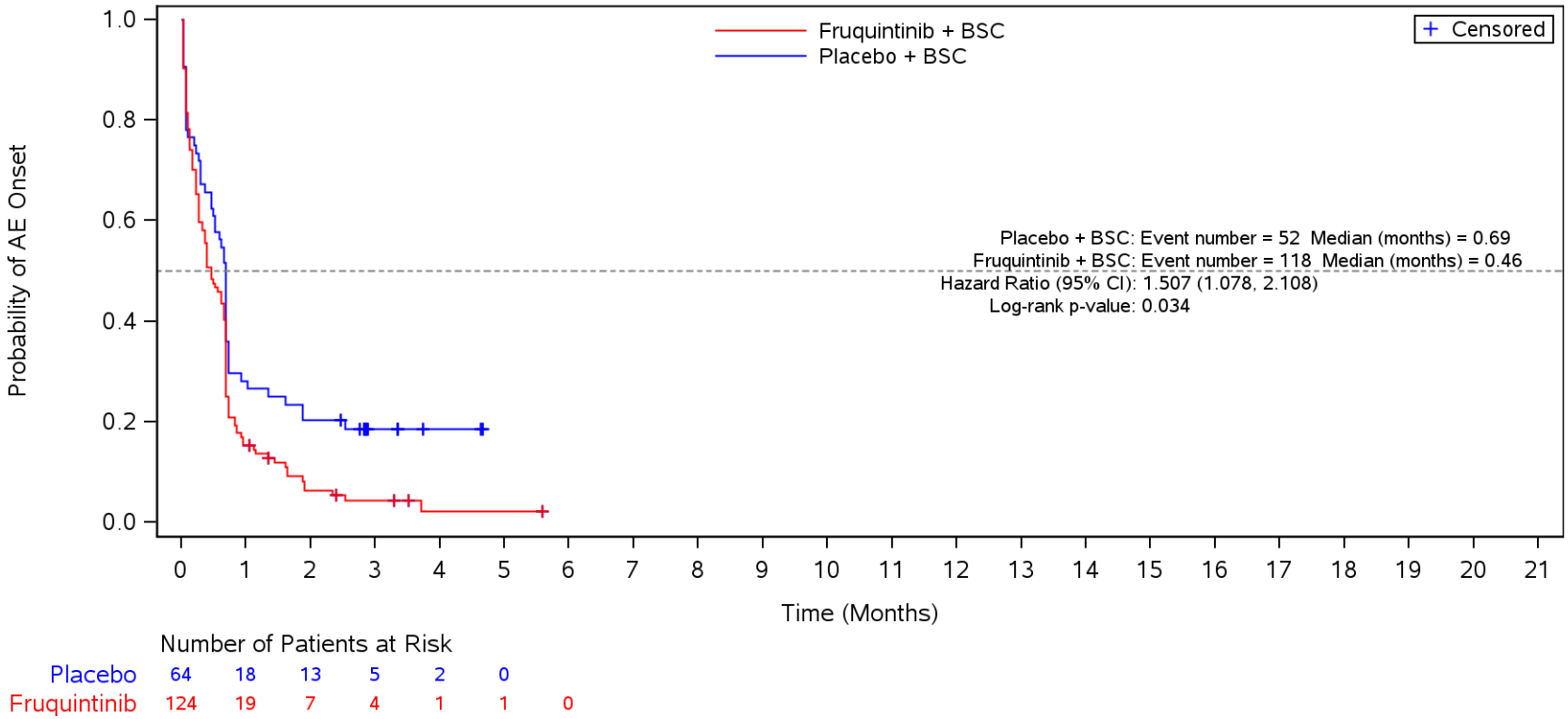
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Serious TEAE
>3



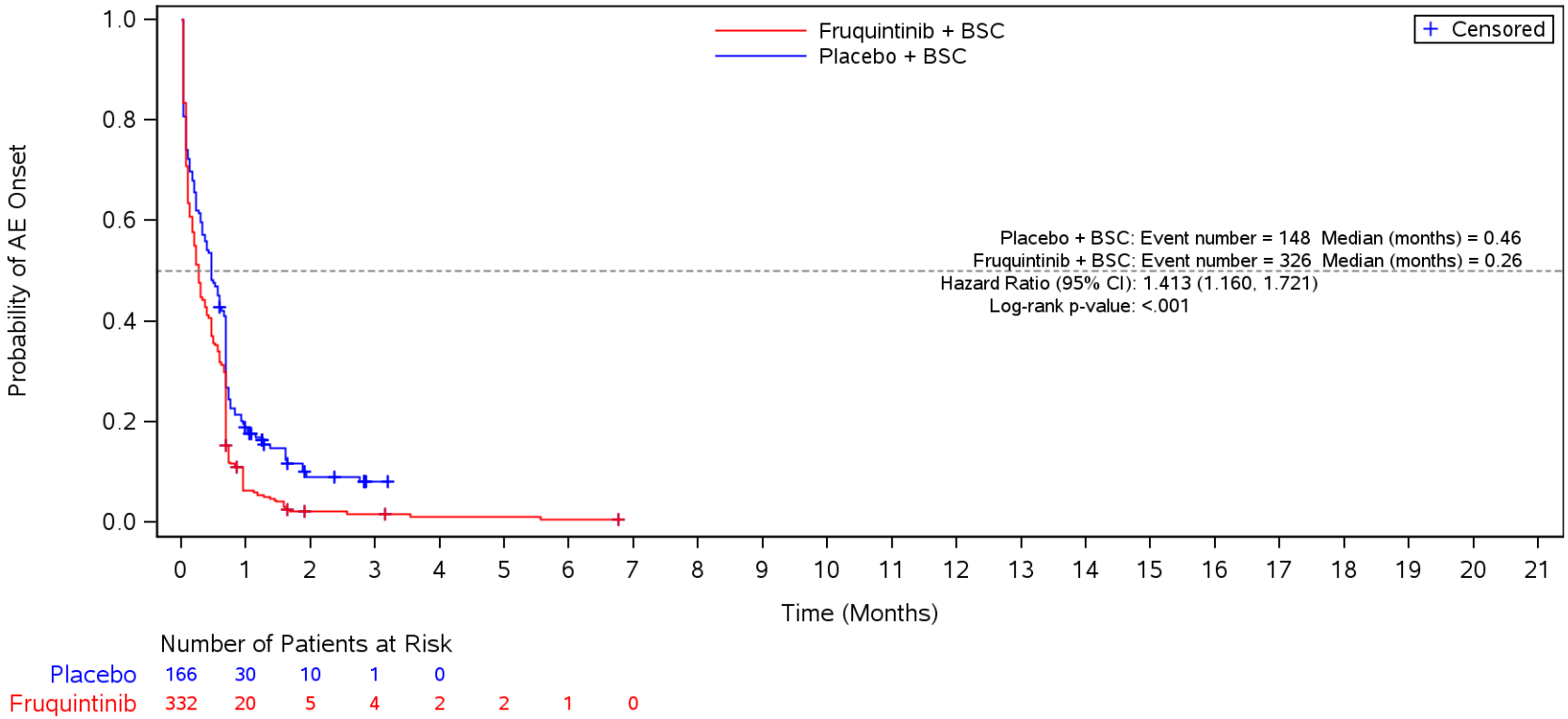
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≤ CTCAE Grade 2
<=3



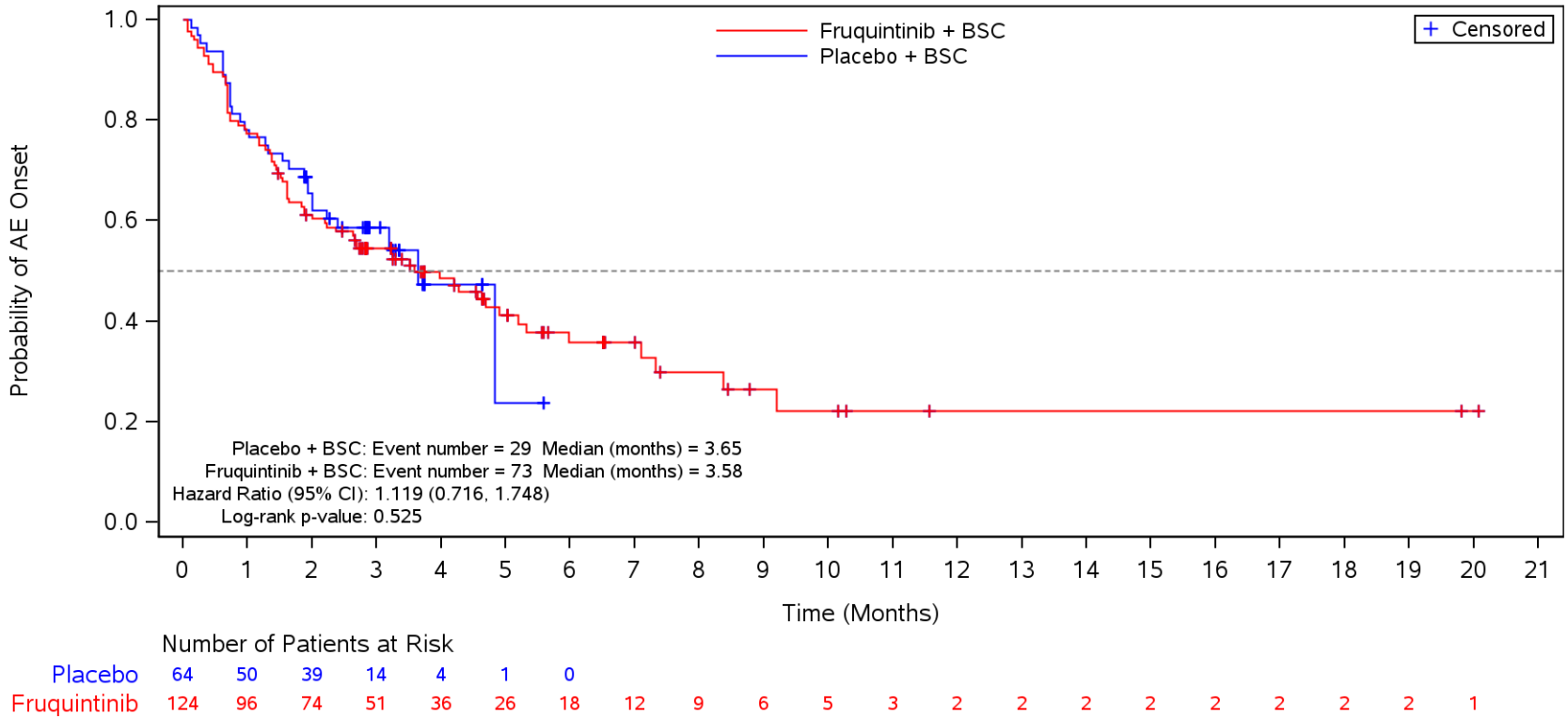
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≤ CTCAE Grade 2
>3



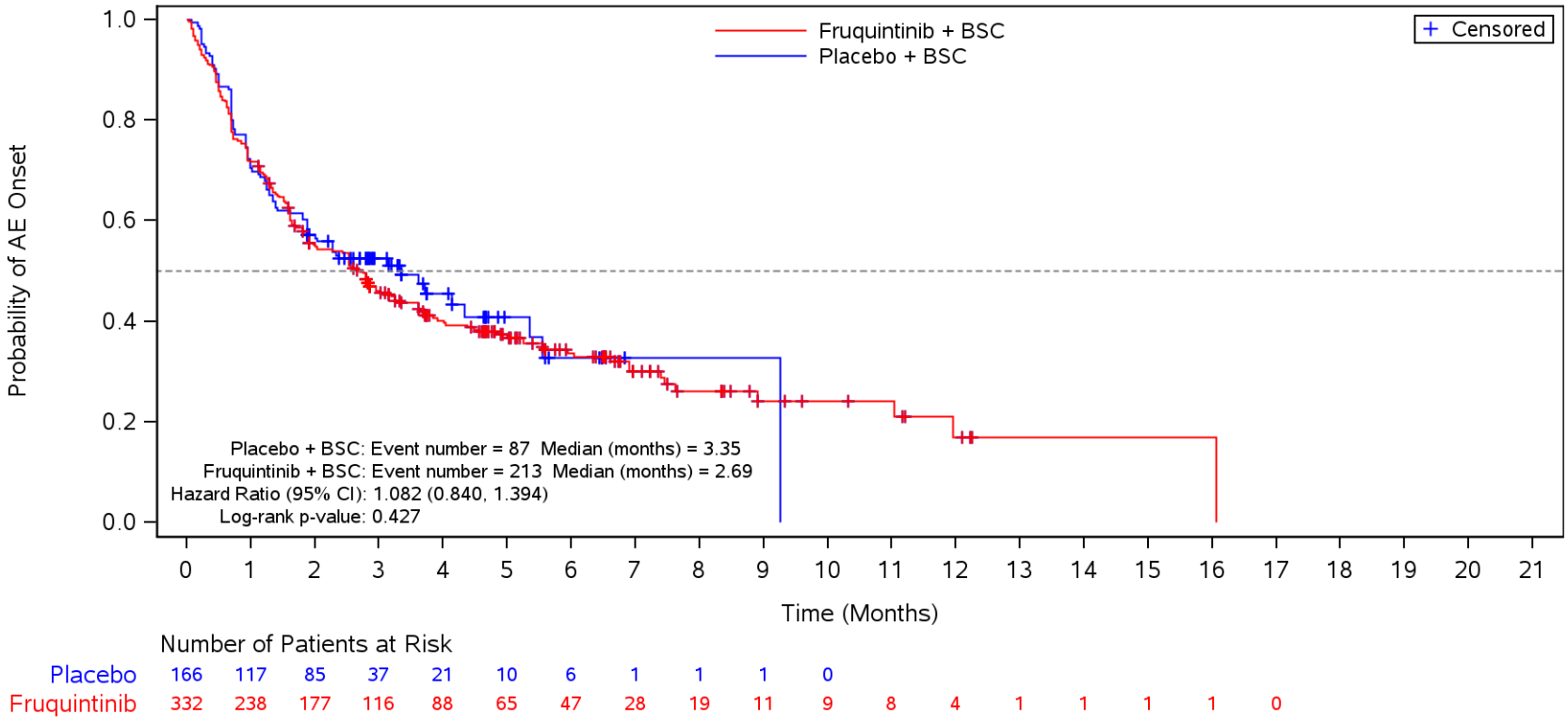
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3
<=3



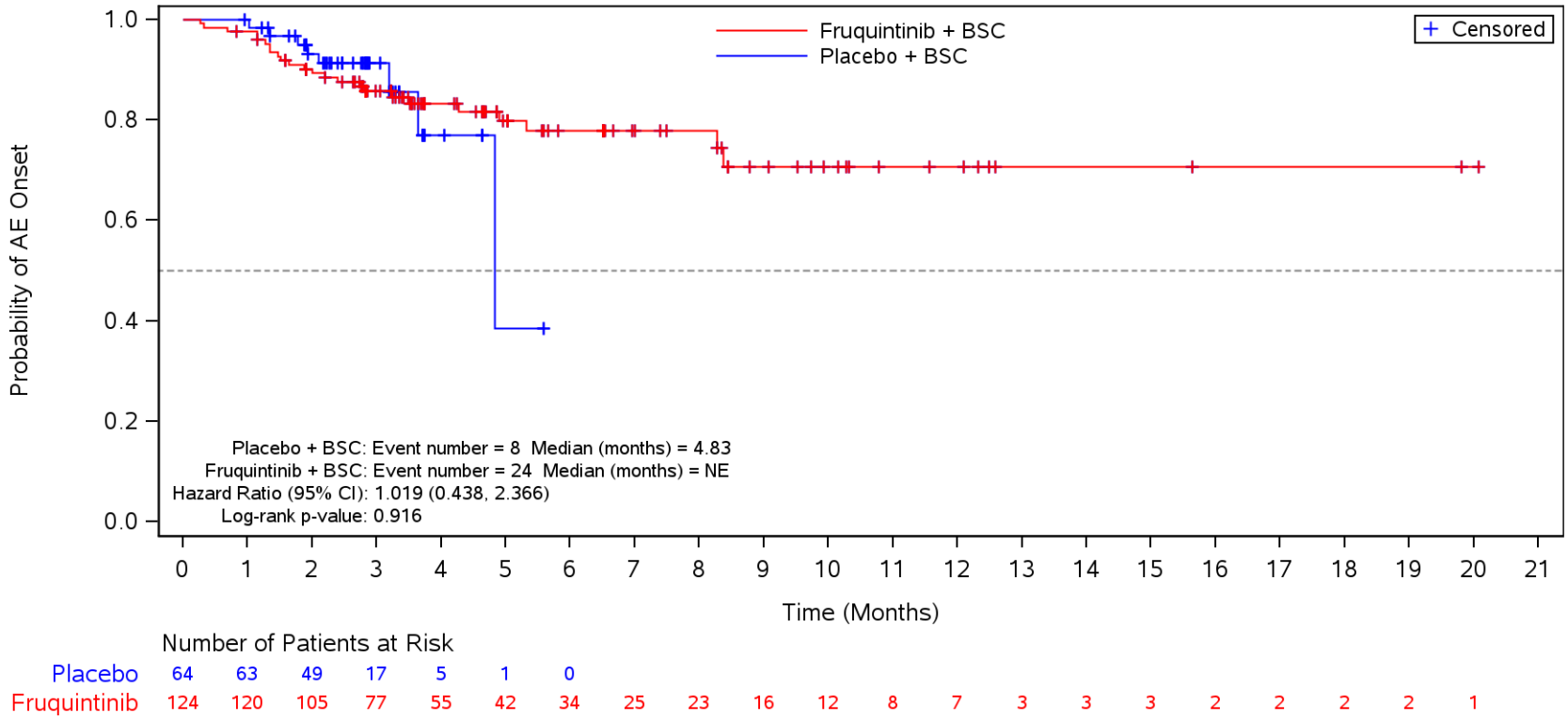
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3
>3



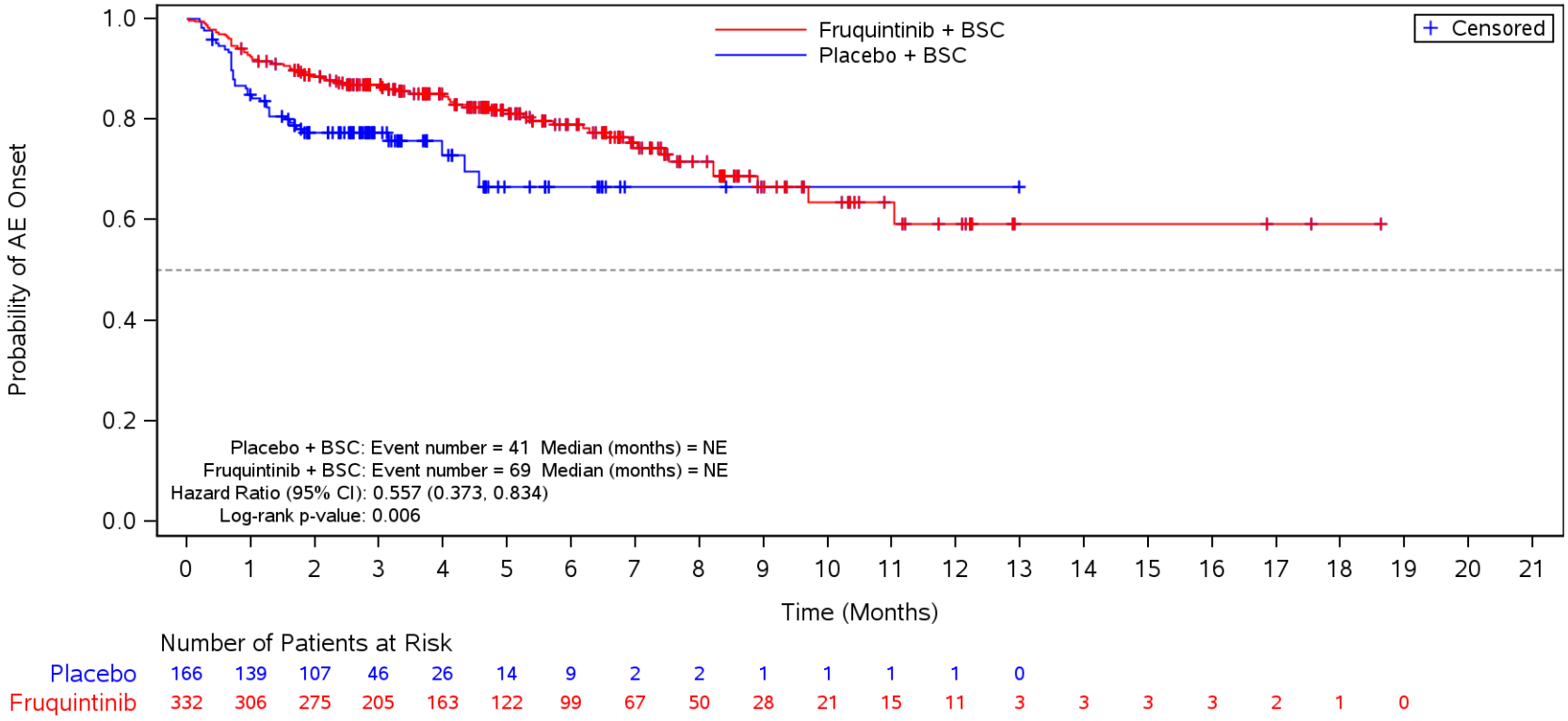
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Discontinuation due to TEAE
<=3



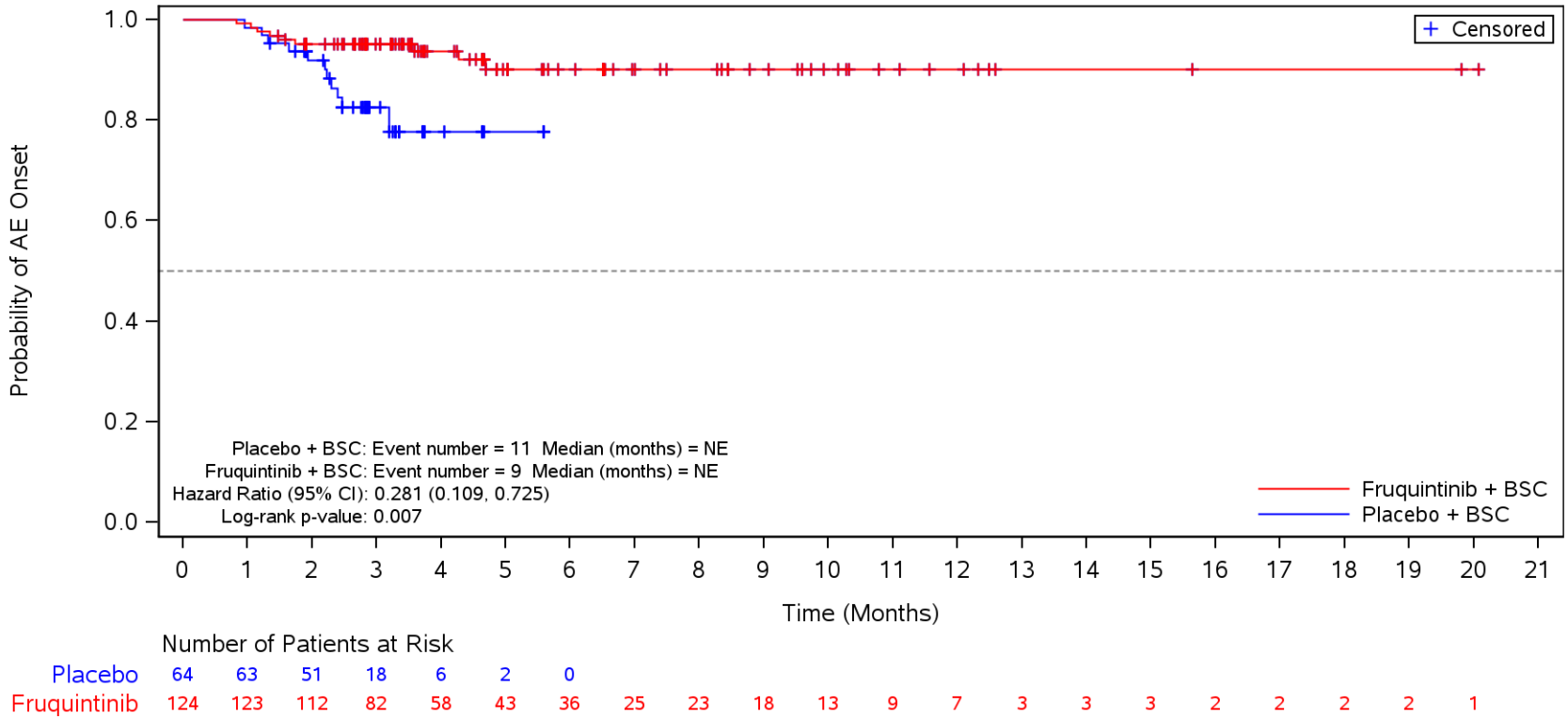
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Discontinuation due to TEAE
>3



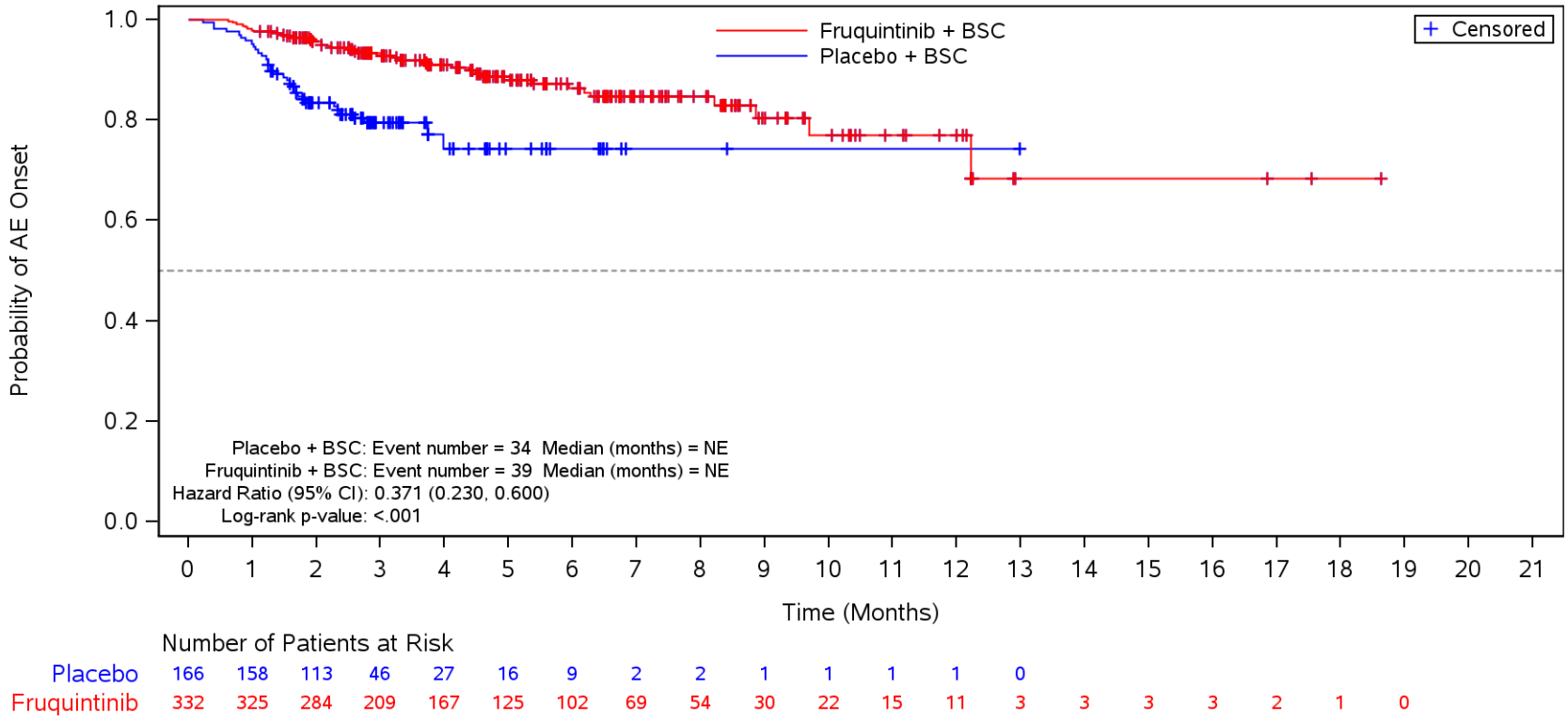
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Deaths (Grade 5 TEAEs)
<=3



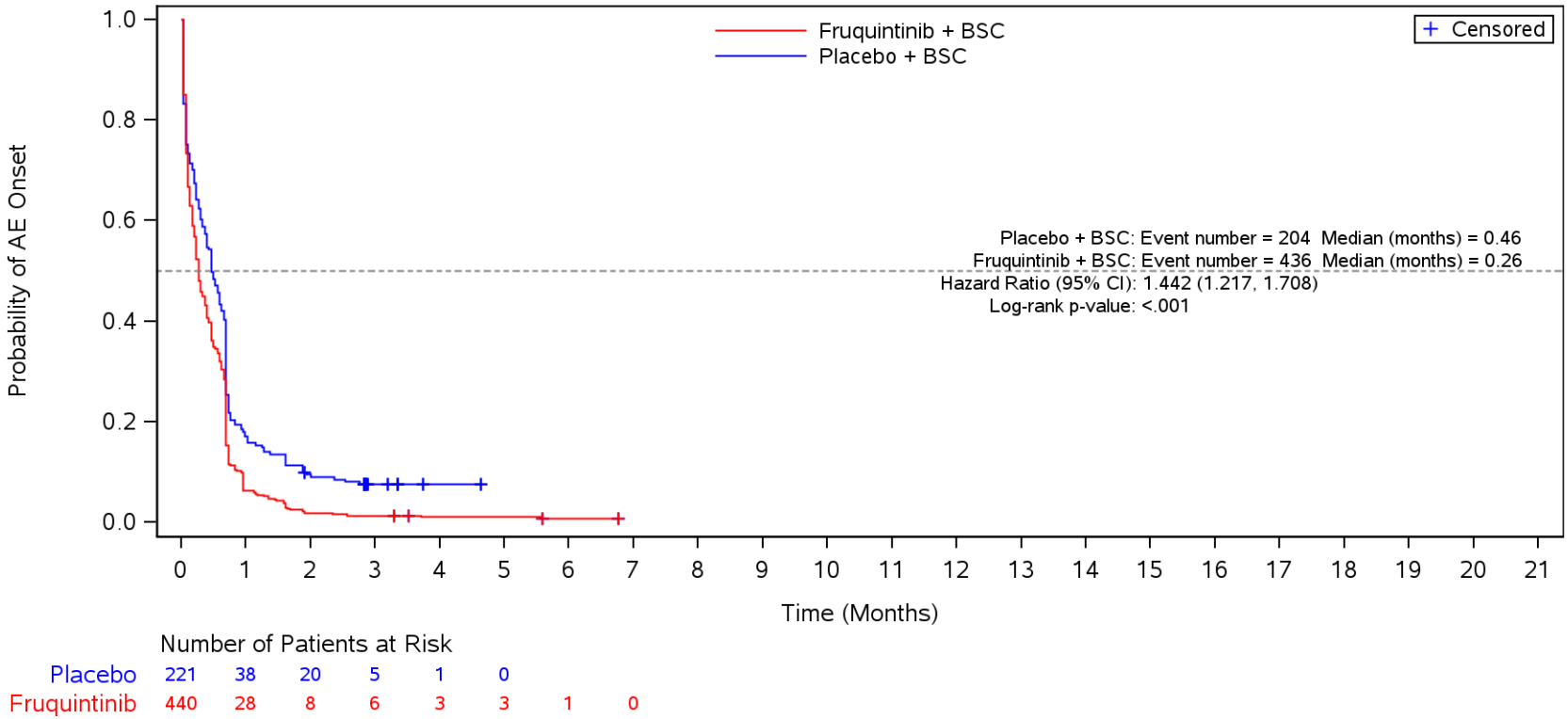
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
TEAE
Yes



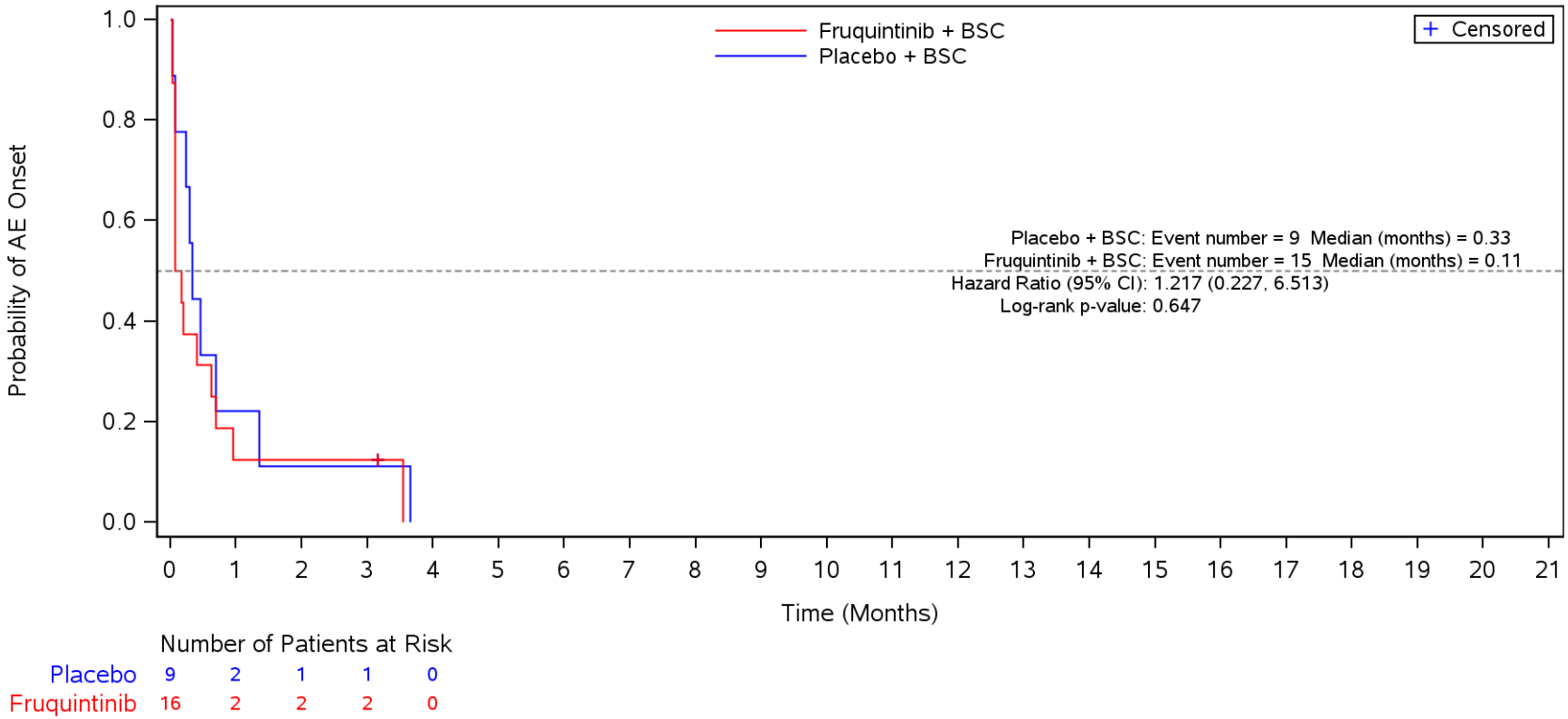
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
TEAE
Yes



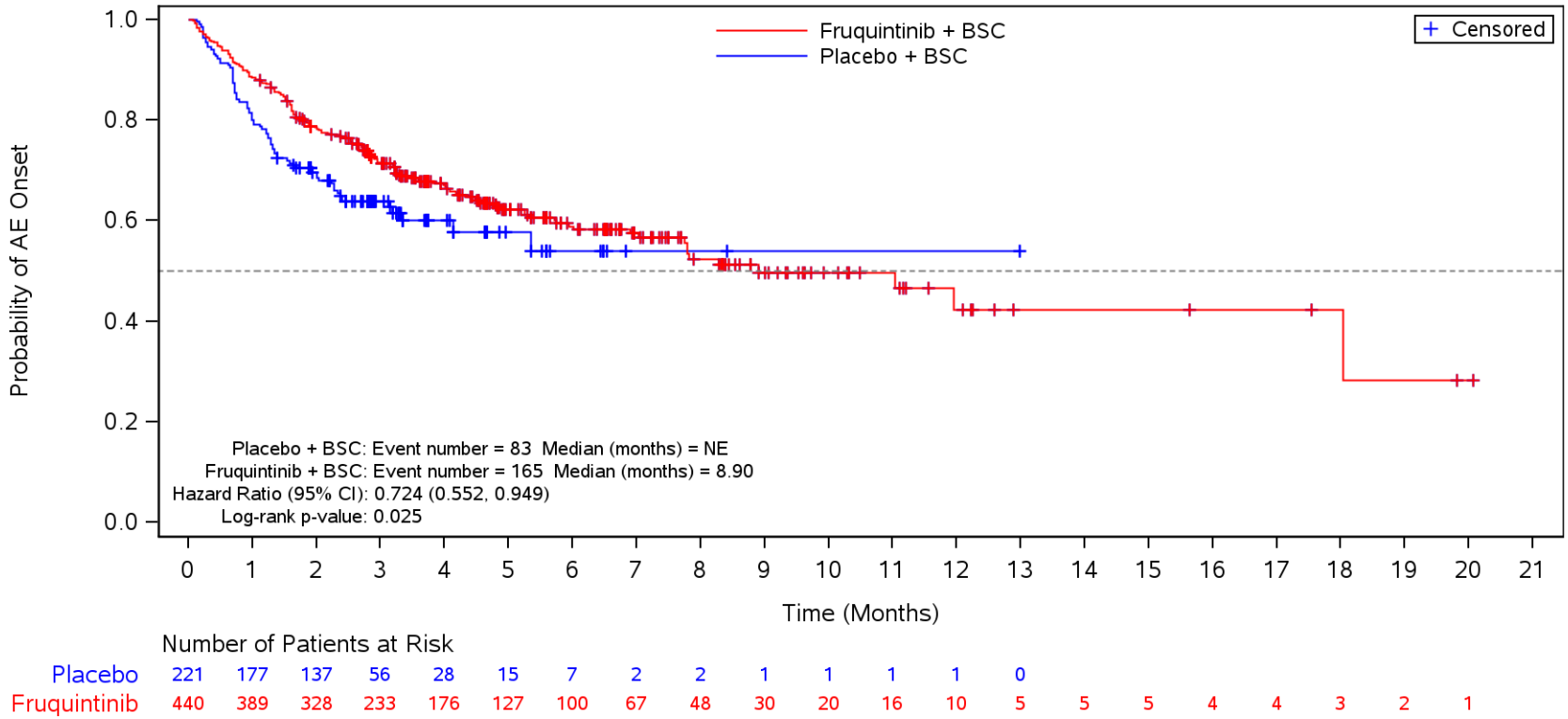
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
TEAE
No



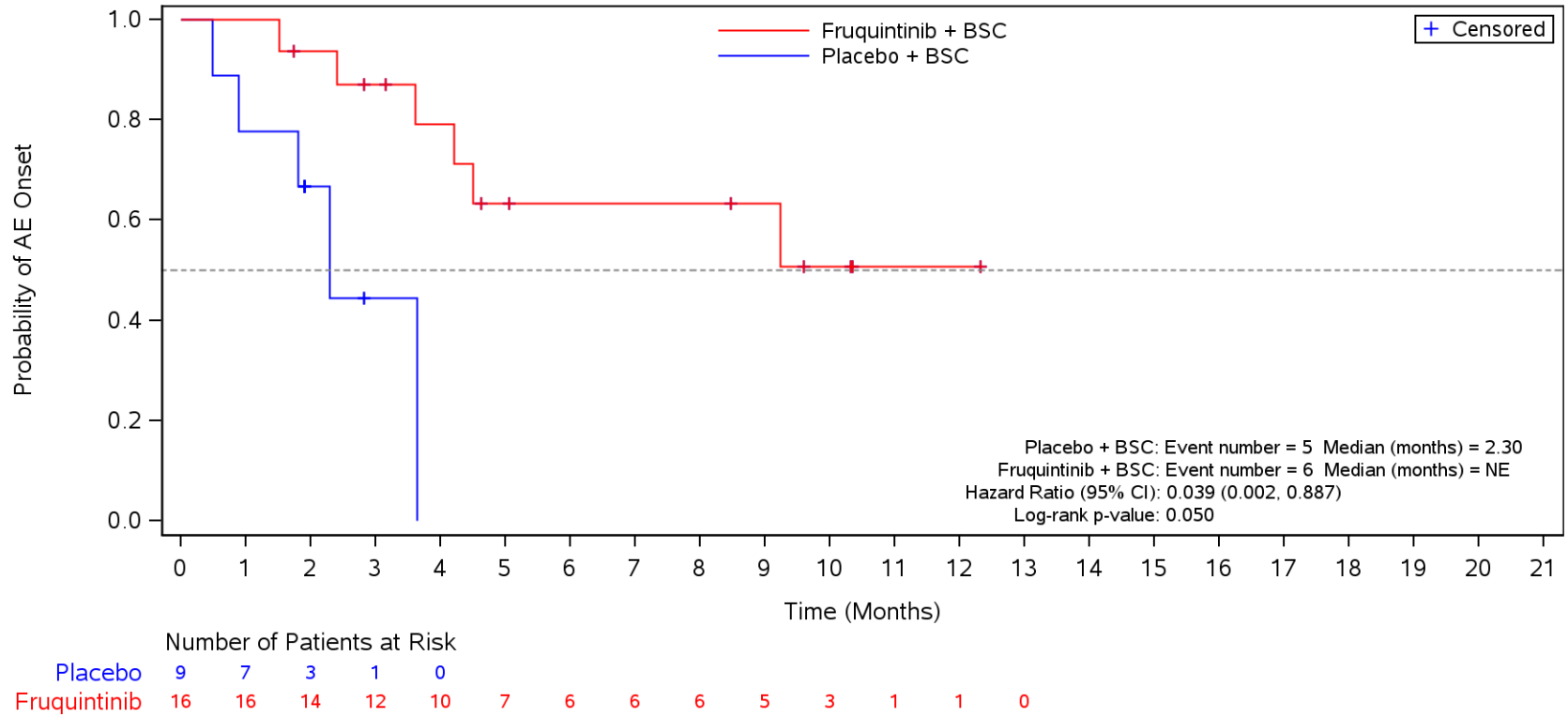
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
Serious TEAE
Yes



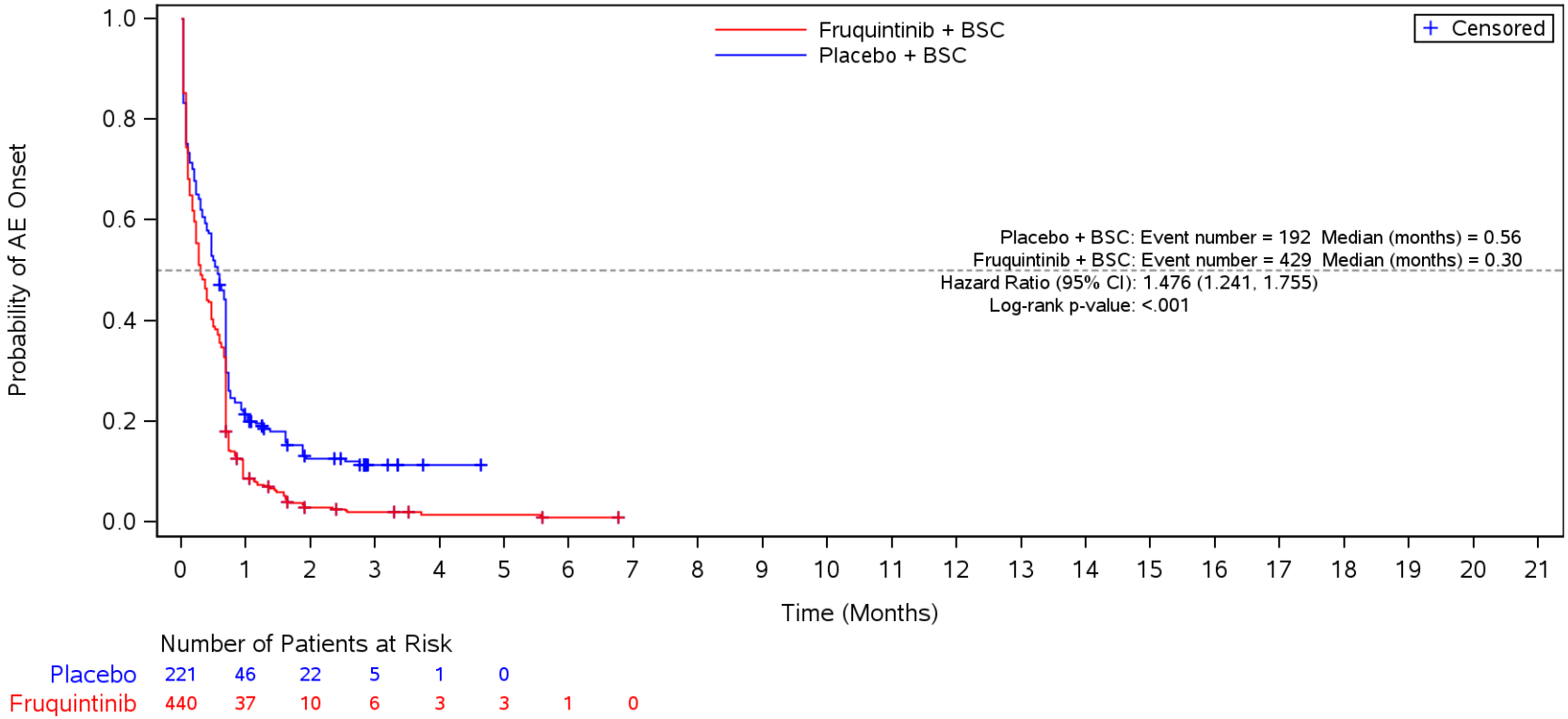
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
Serious TEAE
No



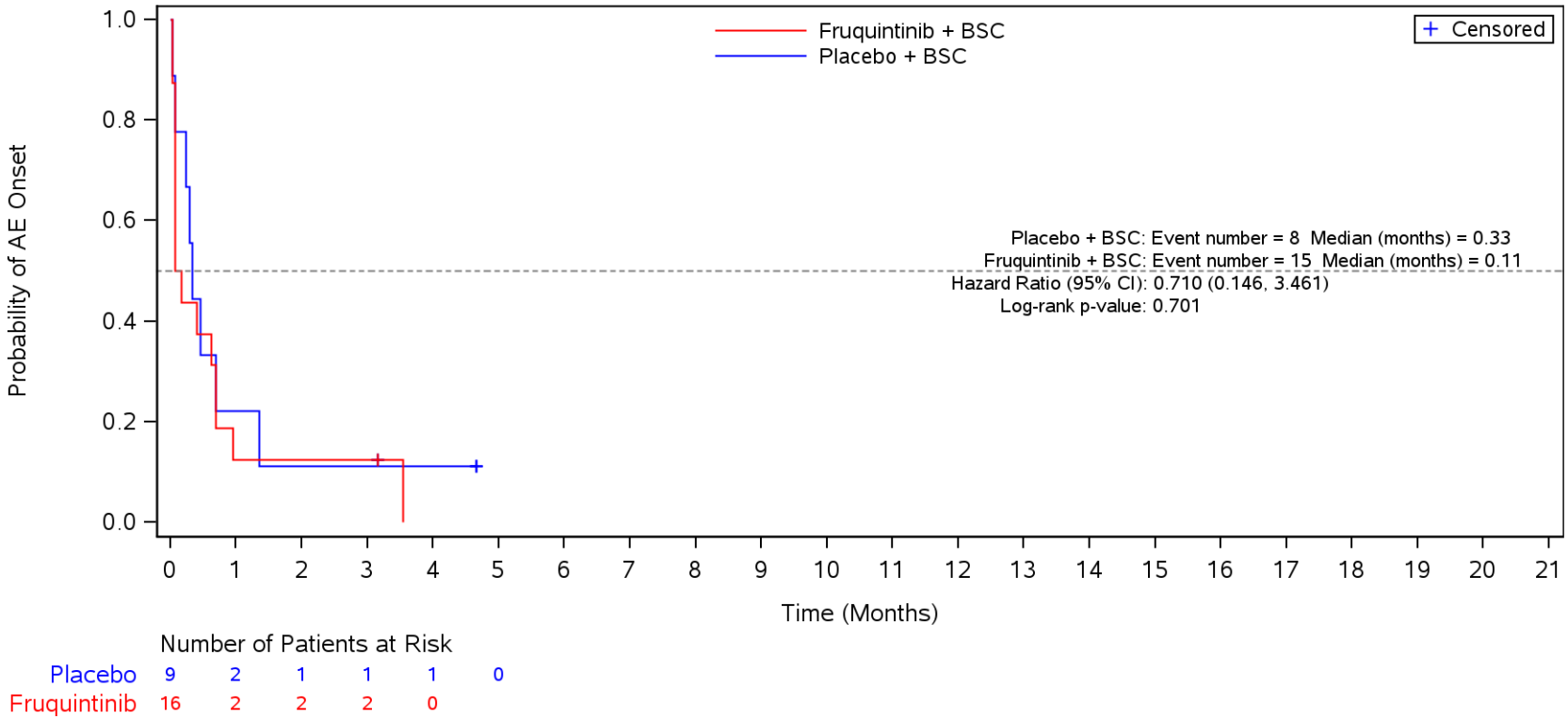
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
TEAE ≤ CTCAE Grade 2
Yes



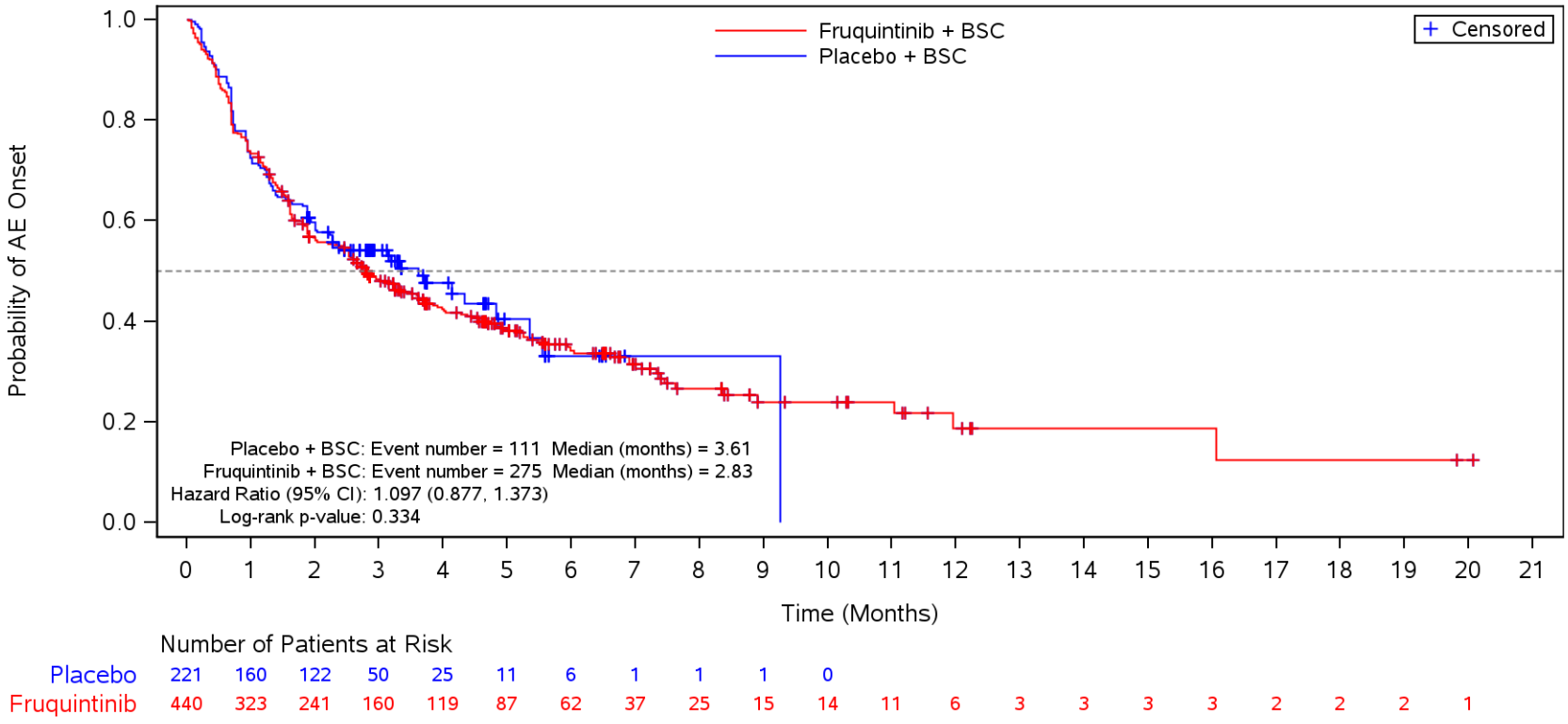
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
TEAE ≤ CTCAE Grade 2
No



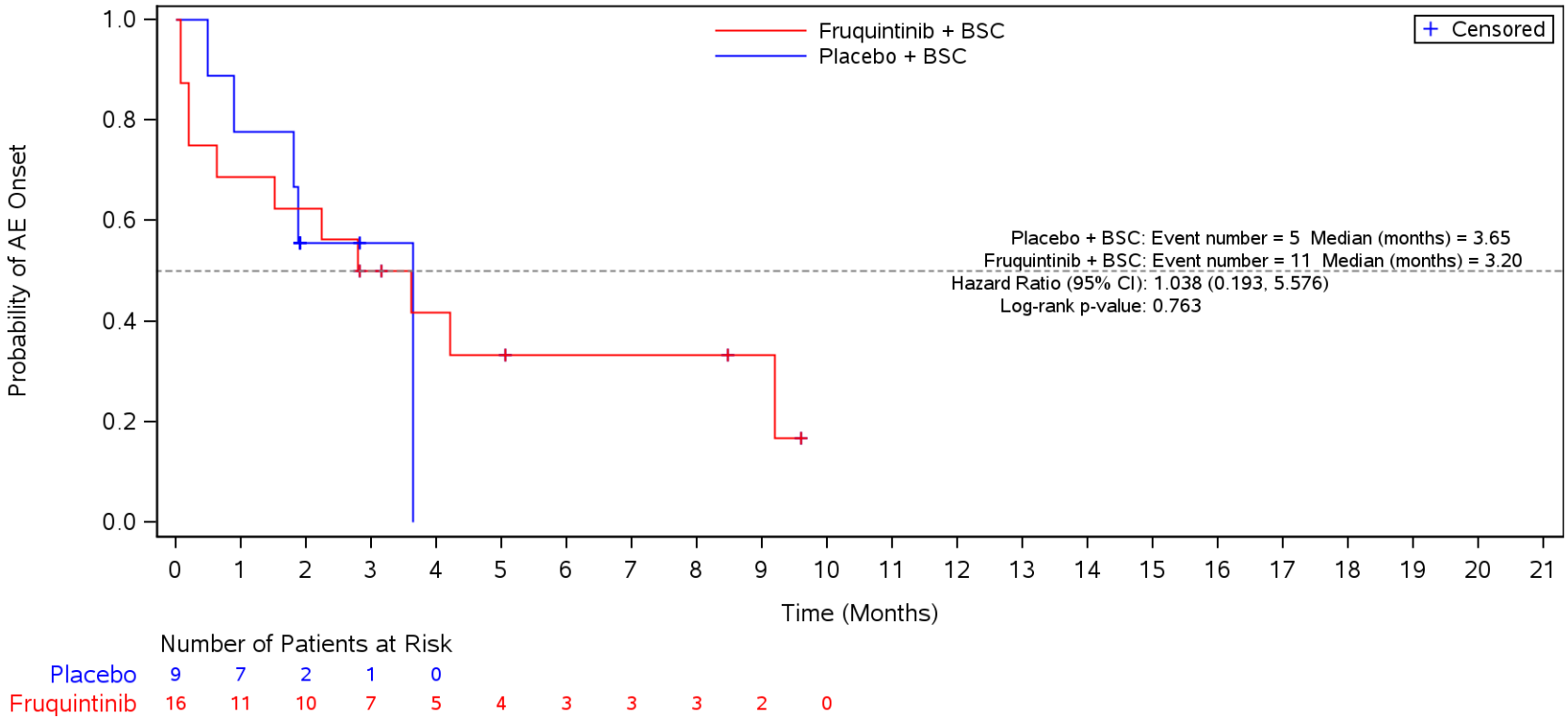
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3
Yes



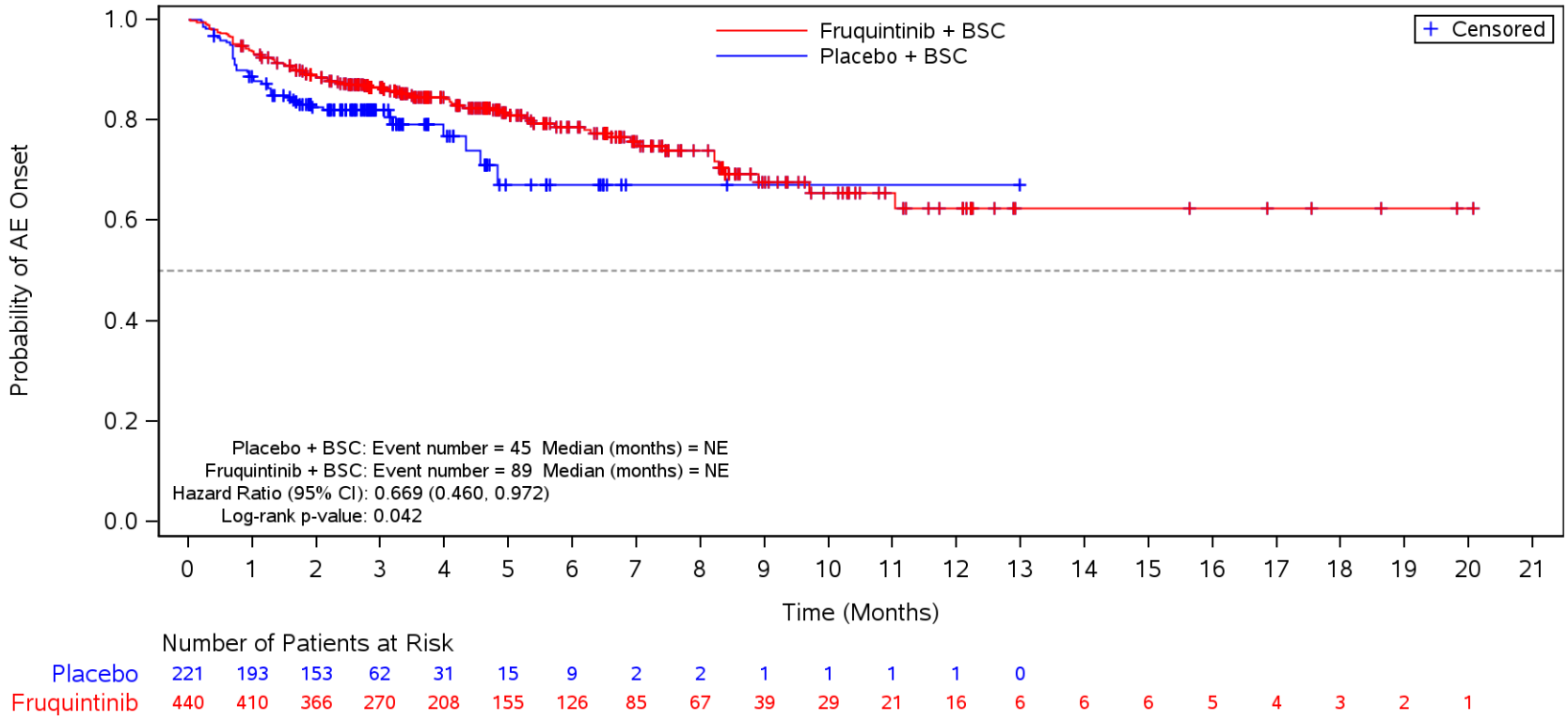
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3
No



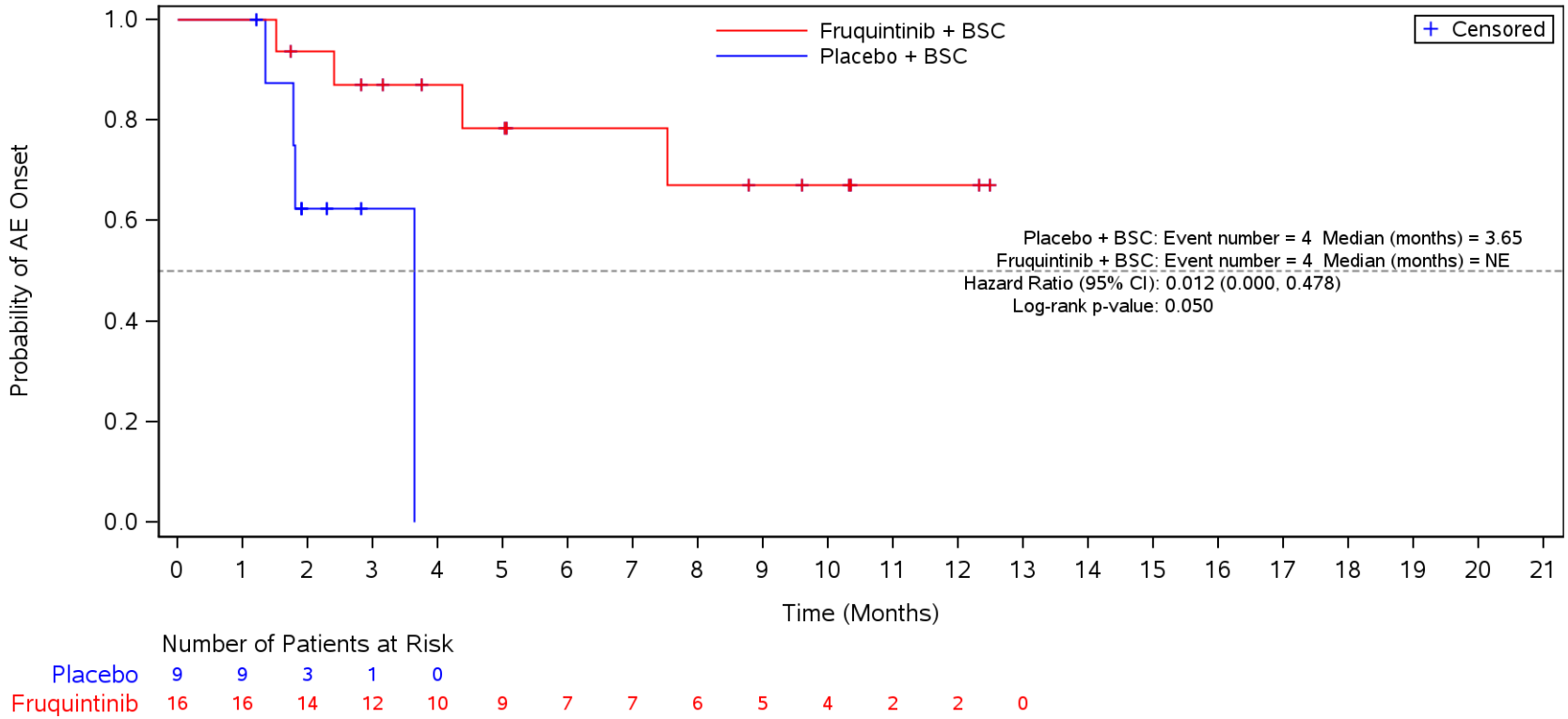
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
Discontinuation due to TEAE
Yes



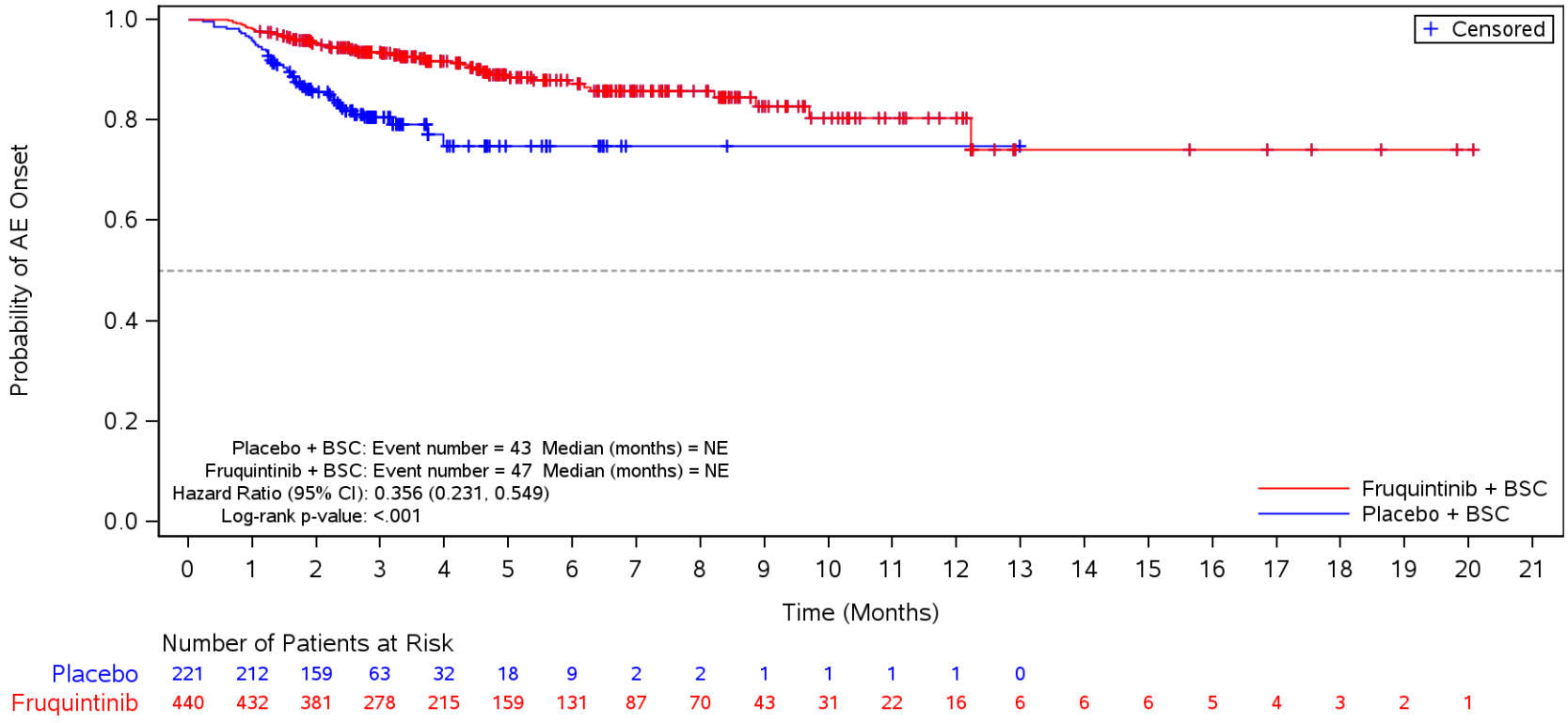
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
Discontinuation due to TEAE
No



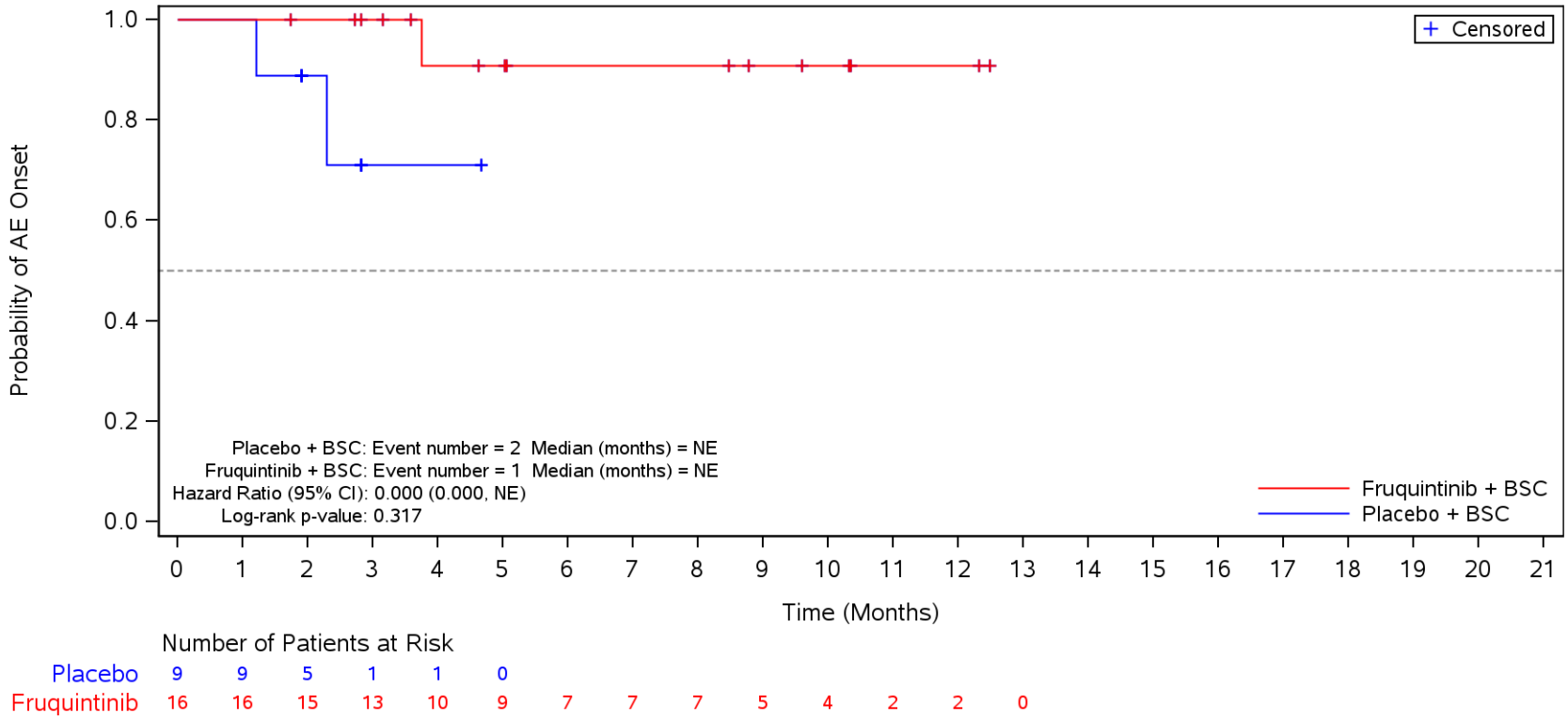
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior VEGFi
Safety Population
Deaths (Grade 5 TEAEs)
Yes



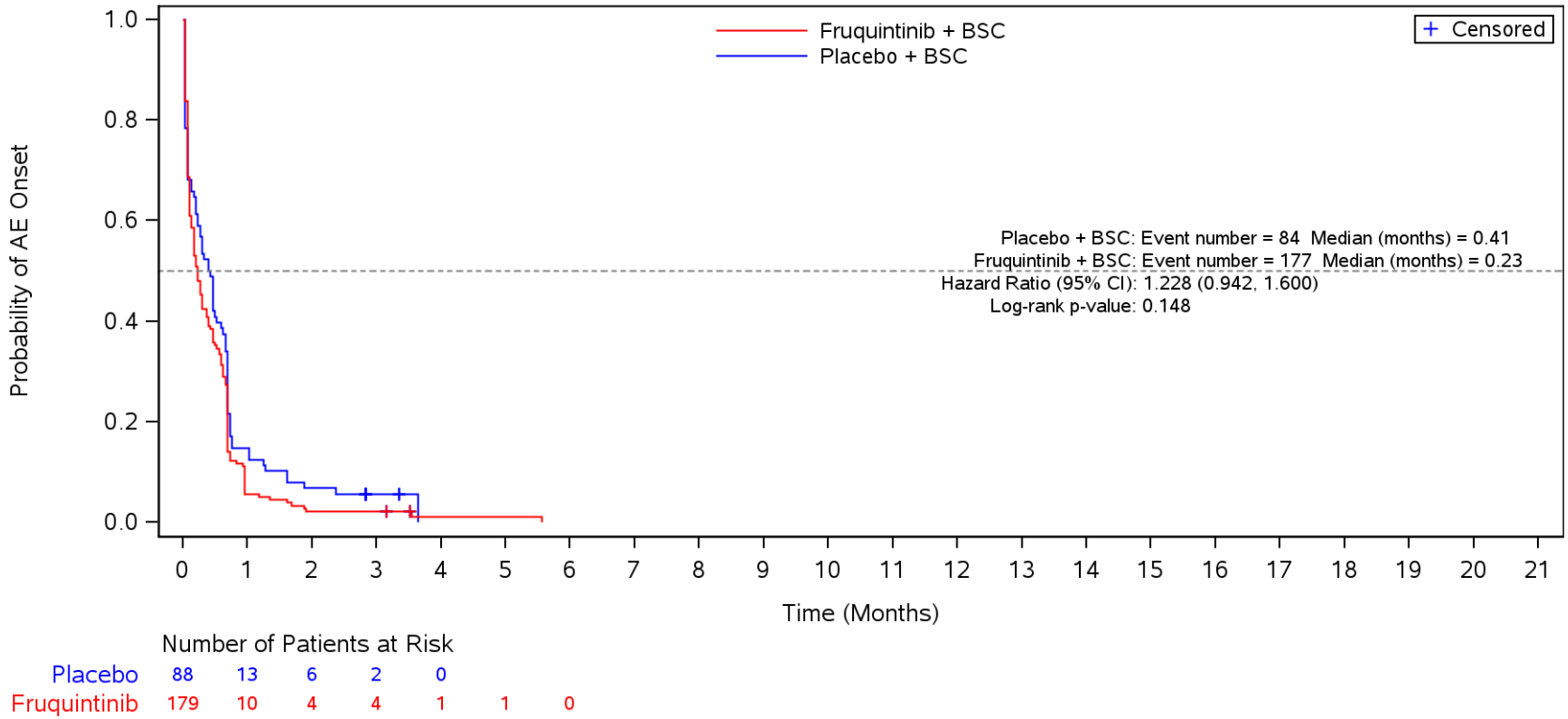
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
TEAE
Yes



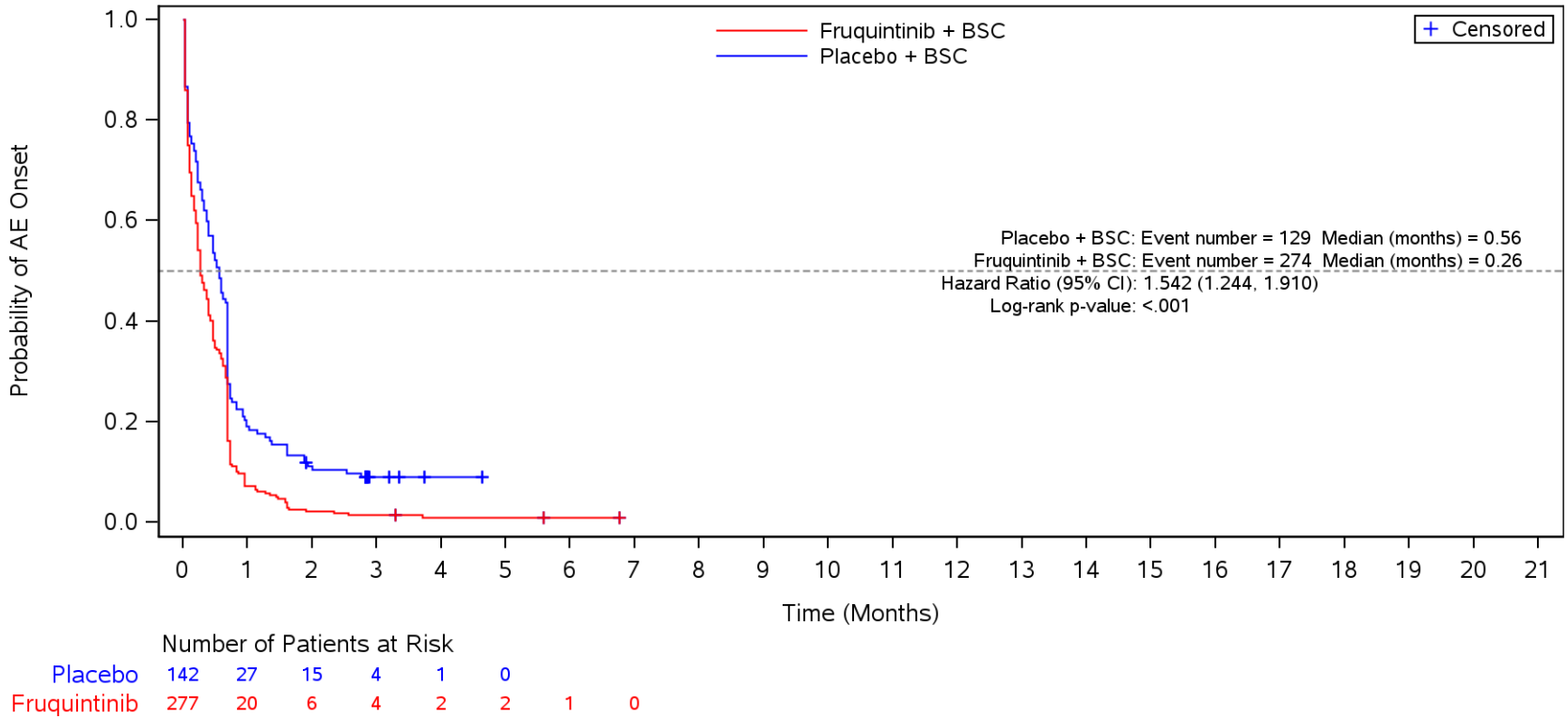
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
TEAE
Yes



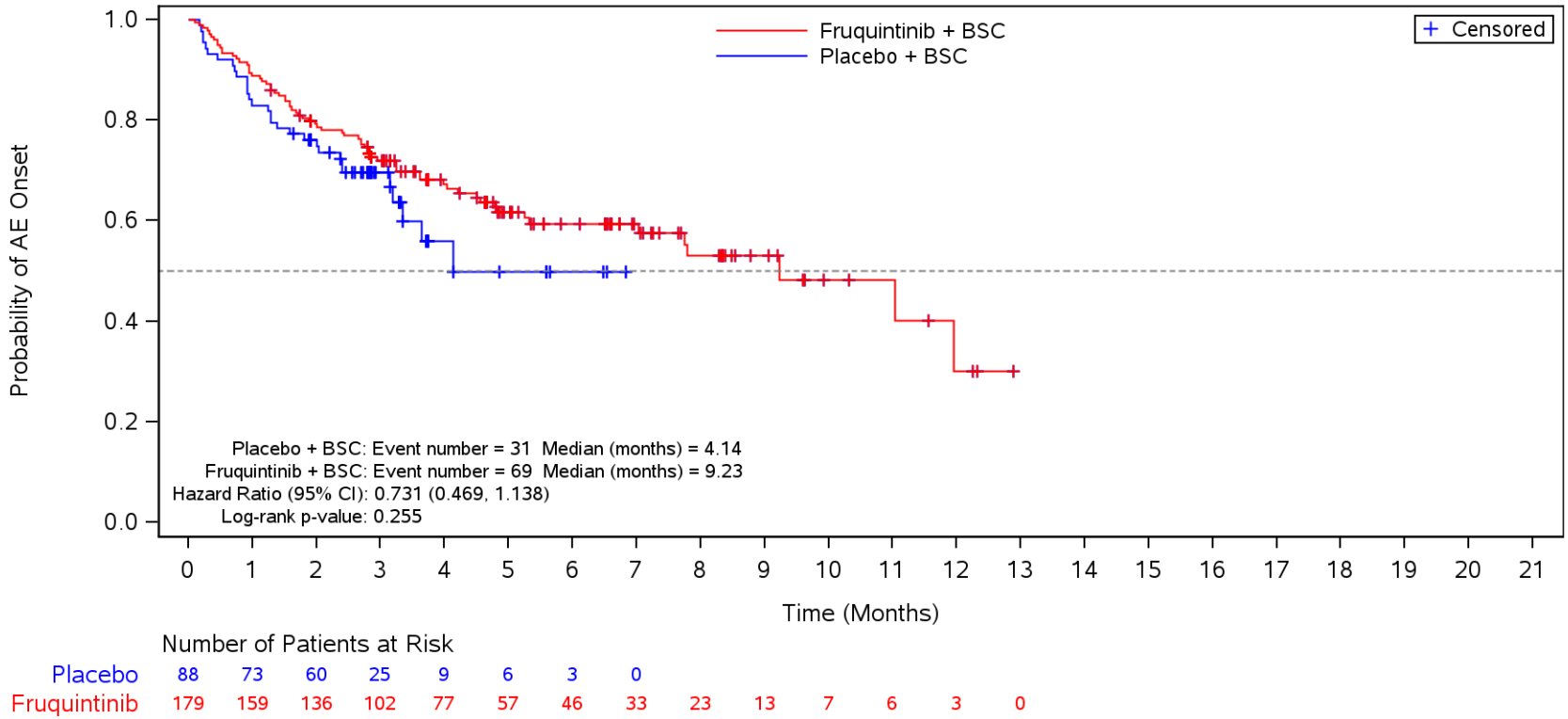
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
TEAE
No



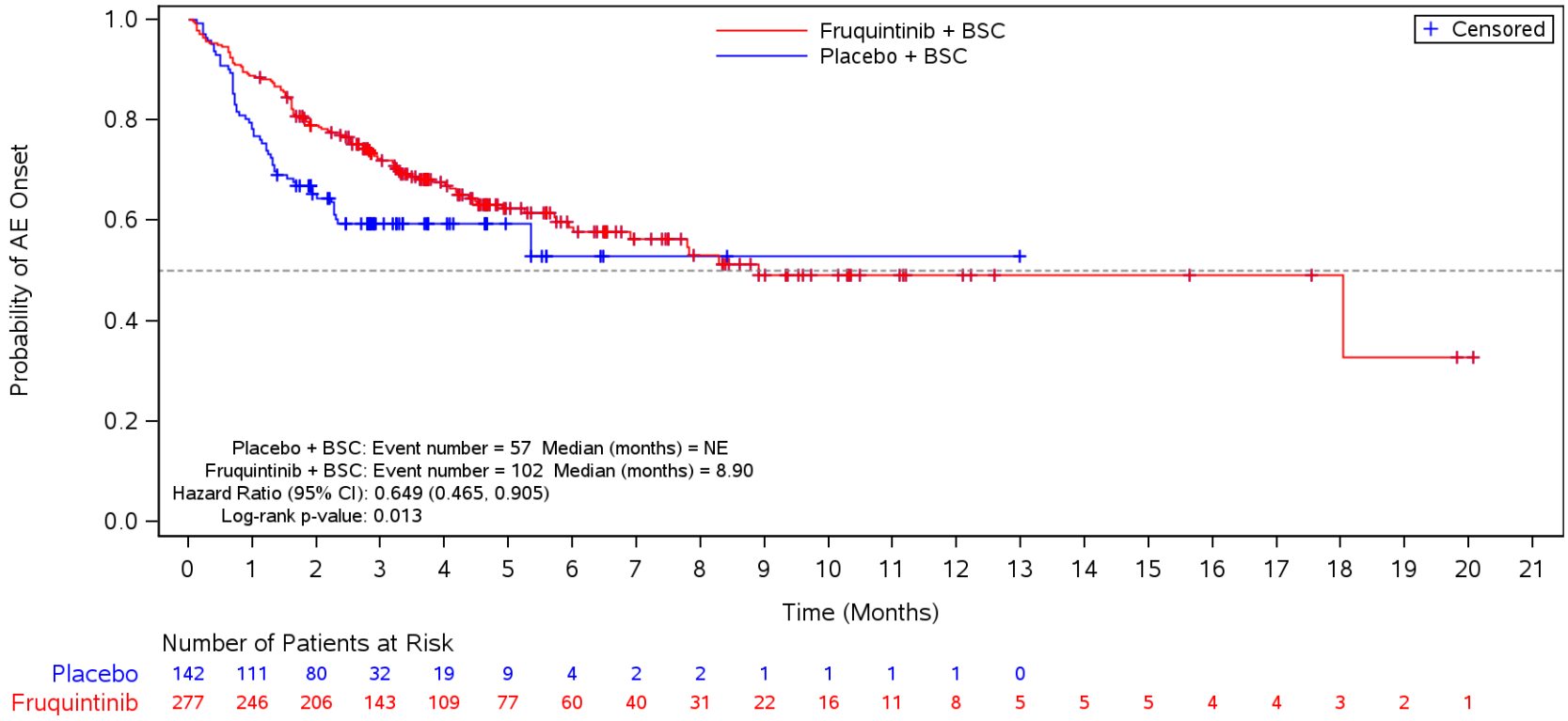
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
Serious TEAE
Yes



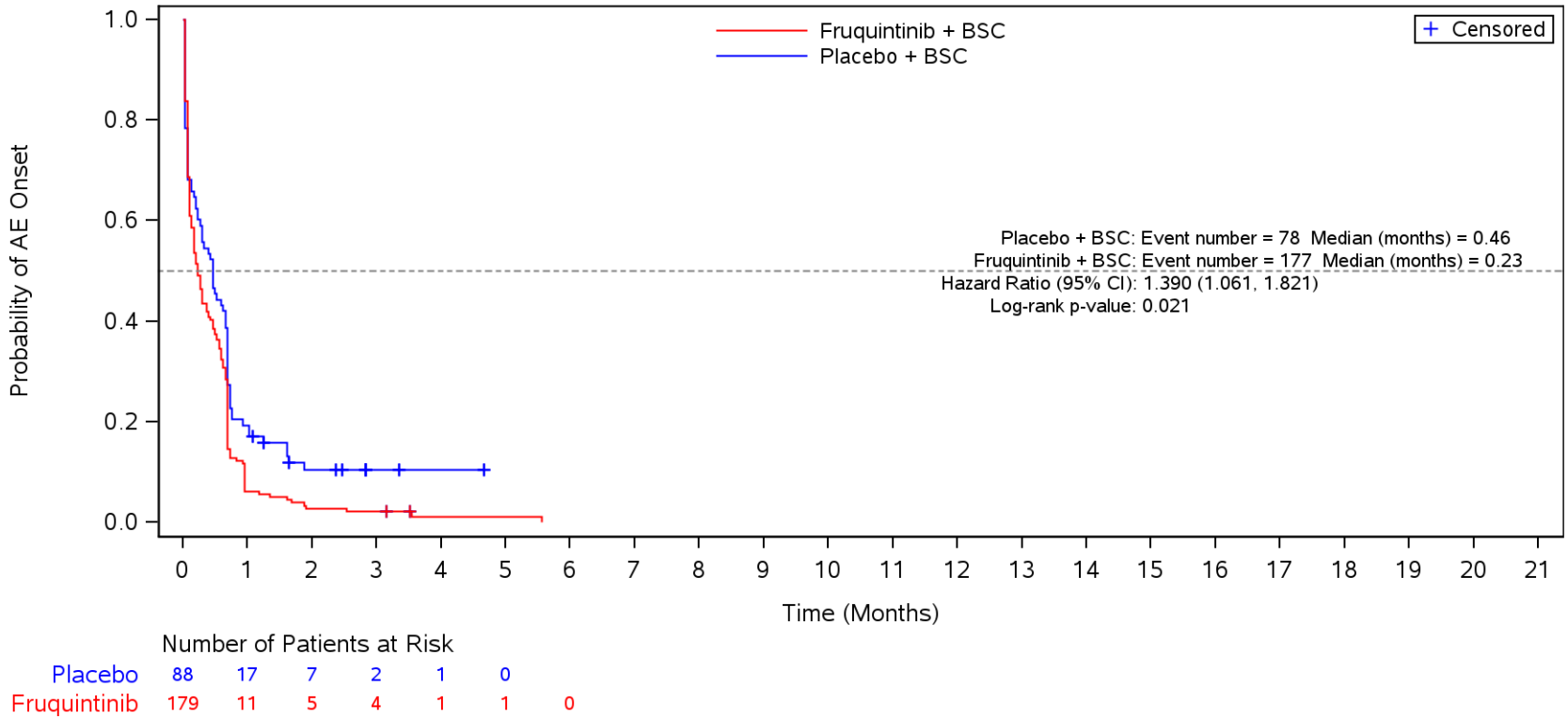
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
Serious TEAE
No



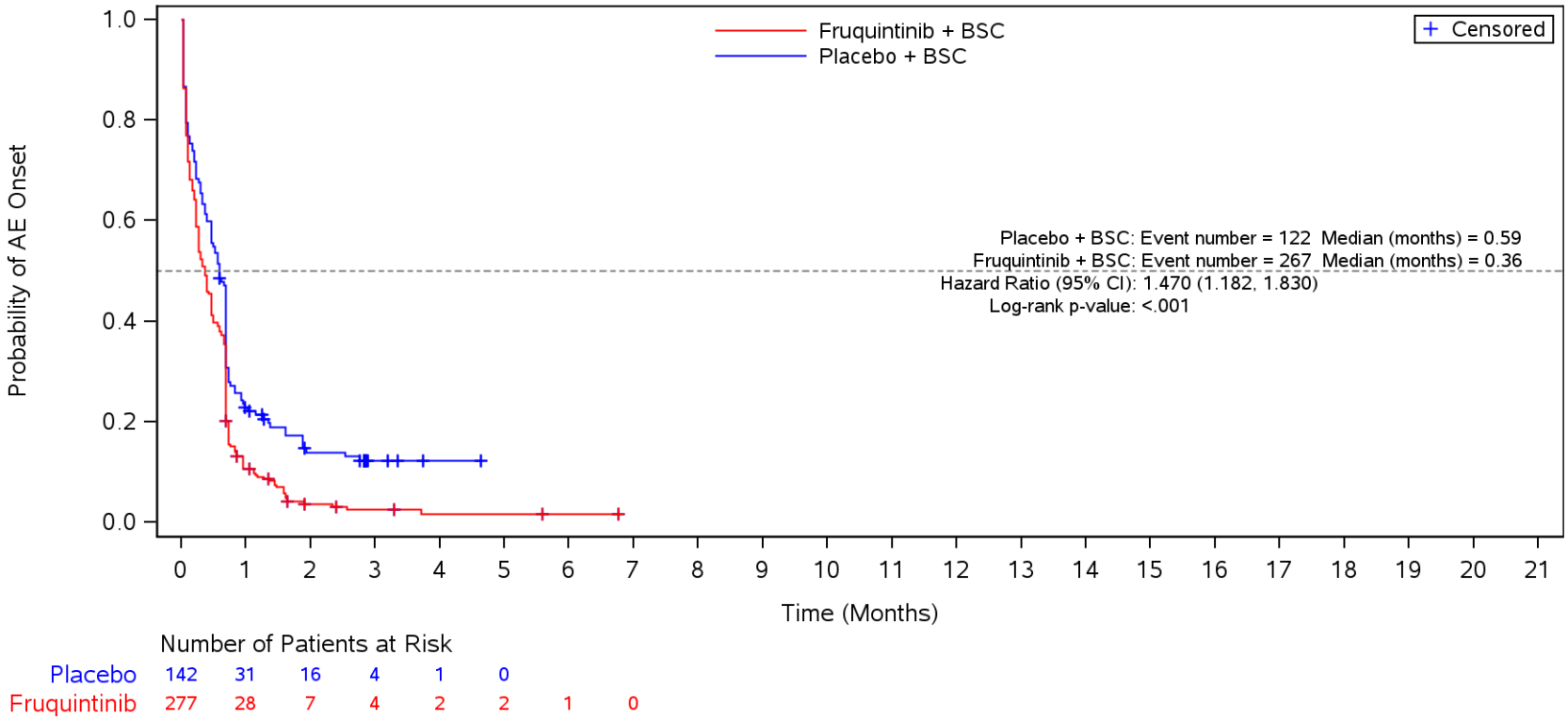
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
TEAE ≤ CTCAE Grade 2
Yes



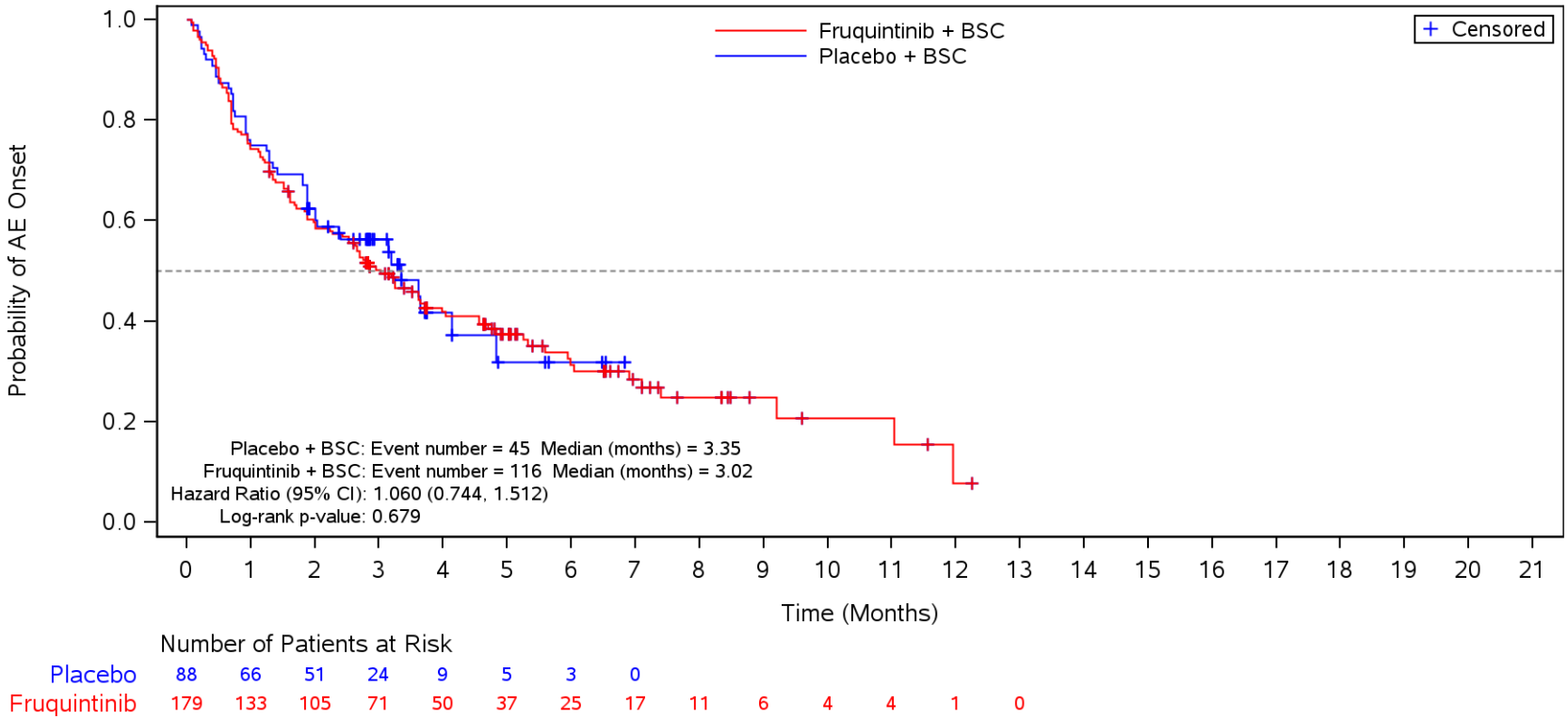
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
TEAE ≤ CTCAE Grade 2
No



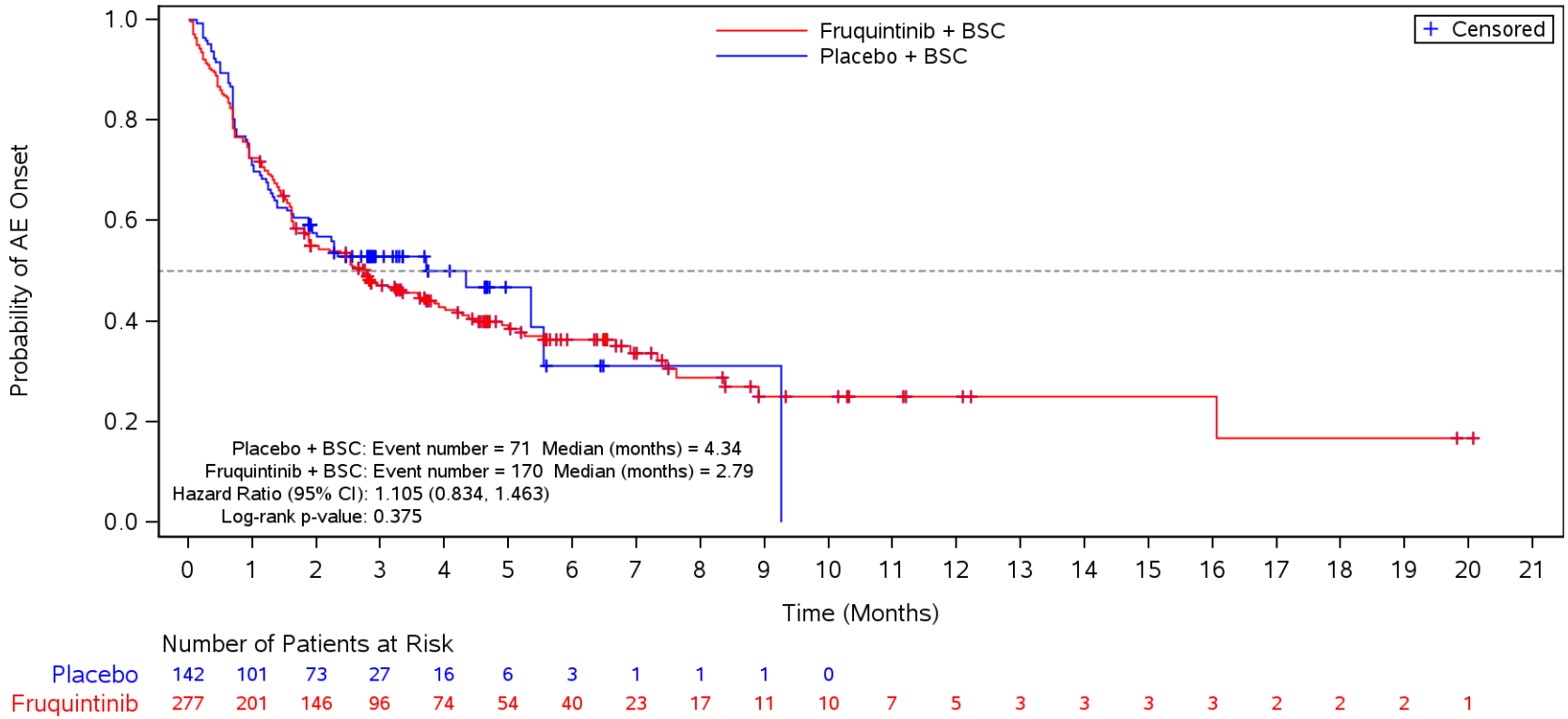
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3
Yes



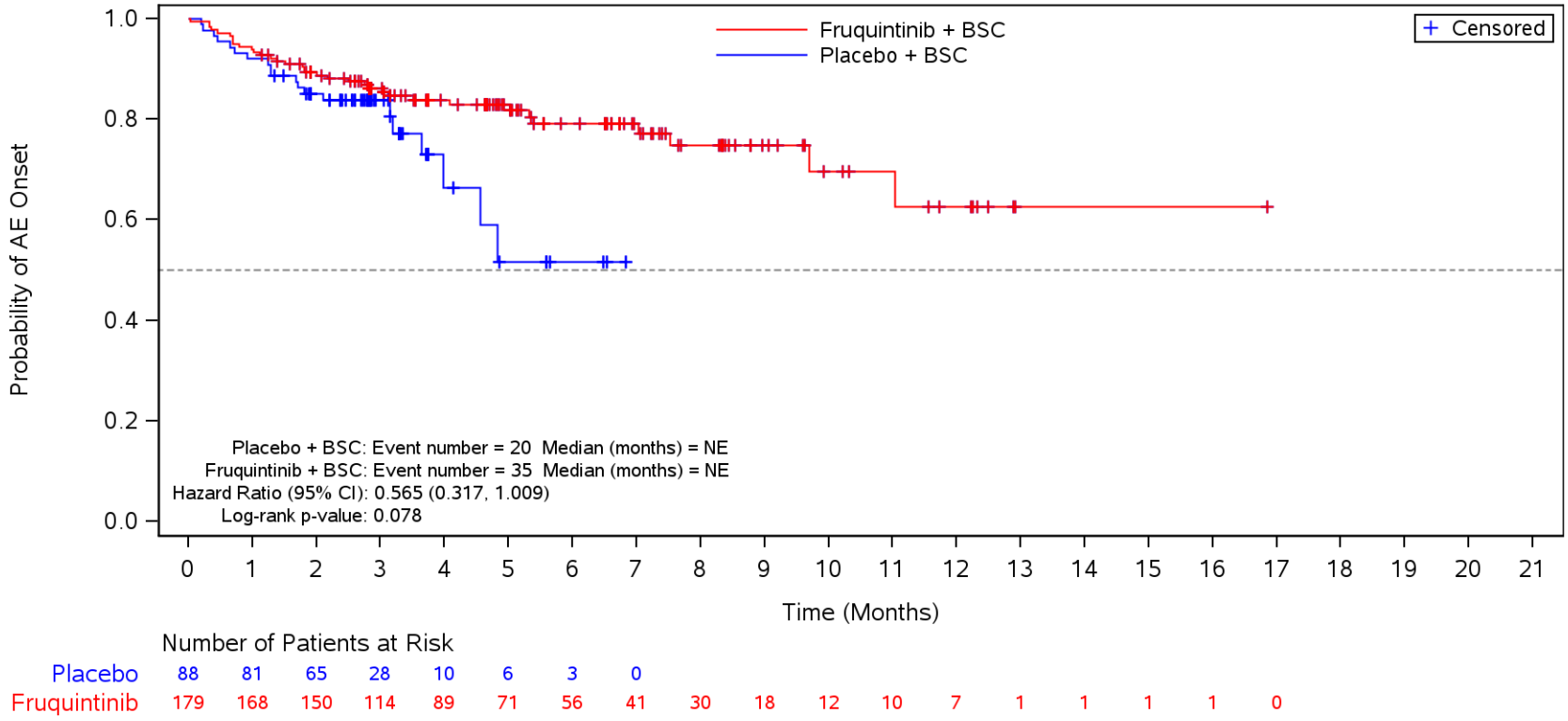
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3
No



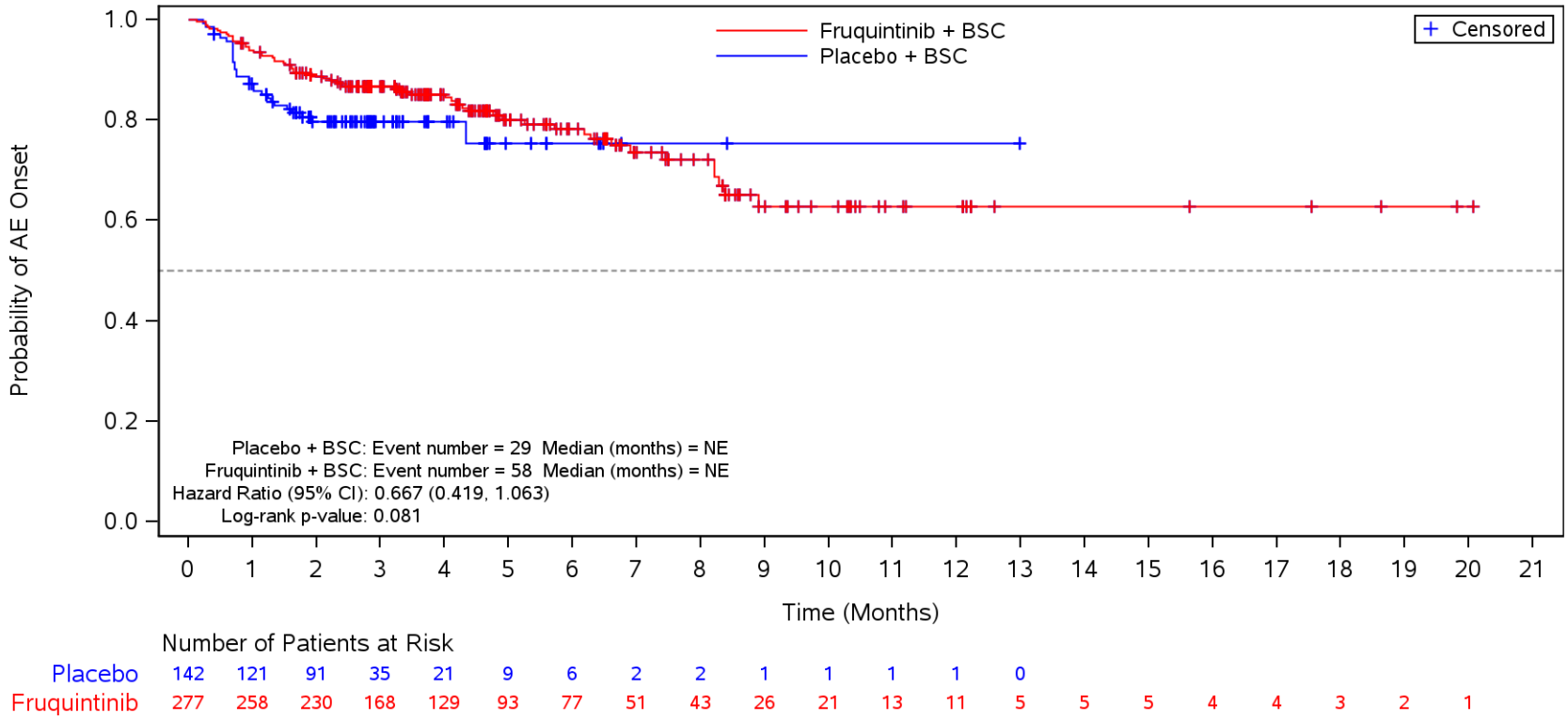
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
Discontinuation due to TEAE
Yes



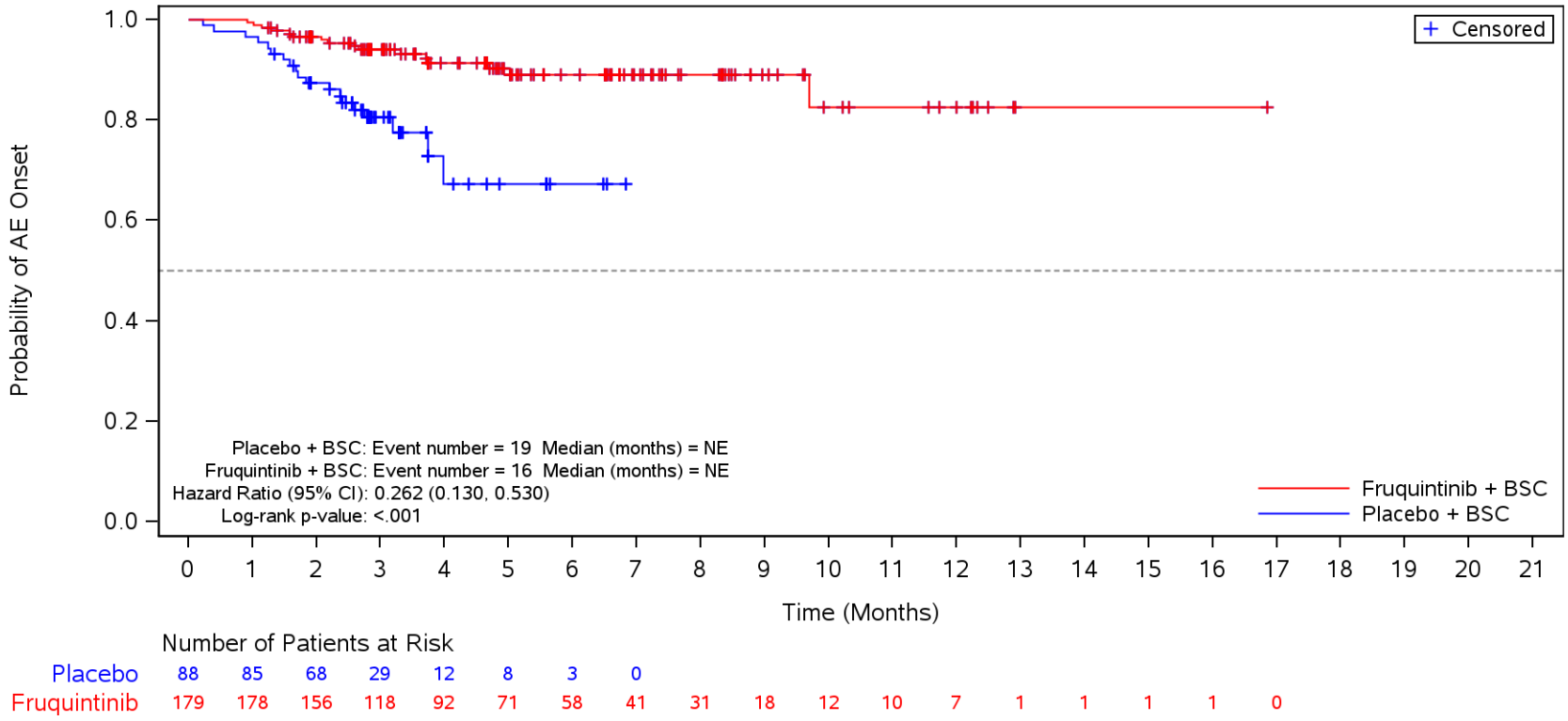
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
Discontinuation due to TEAE
No



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior EGFRi
Safety Population
Deaths (Grade 5 TEAEs)
Yes

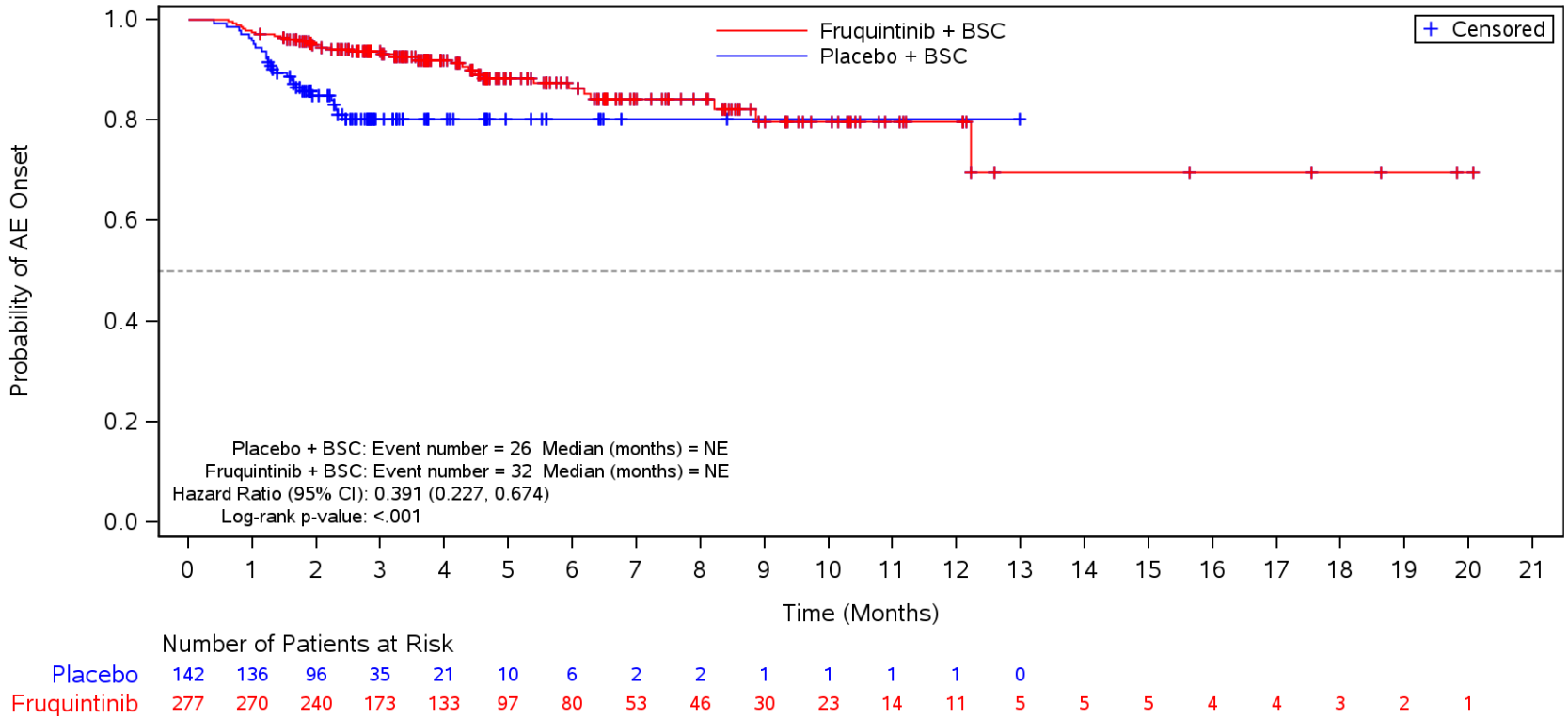


Number of Patients at Risk

Placebo	88	85	68	29	12	8	3	0										
Fruquintinib	179	178	156	118	92	71	58	41	31	18	12	10	7	1	1	1	1	0

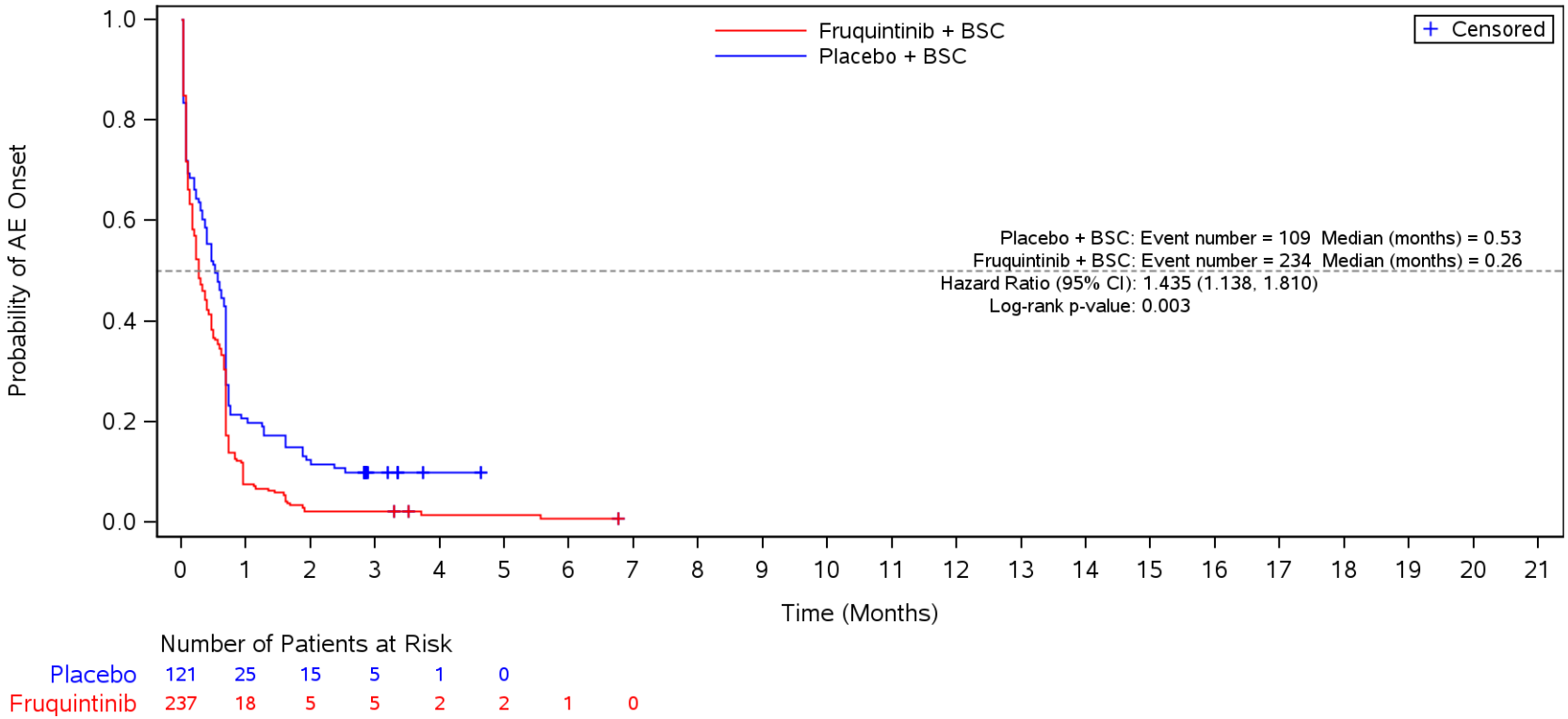
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE
TAS-102



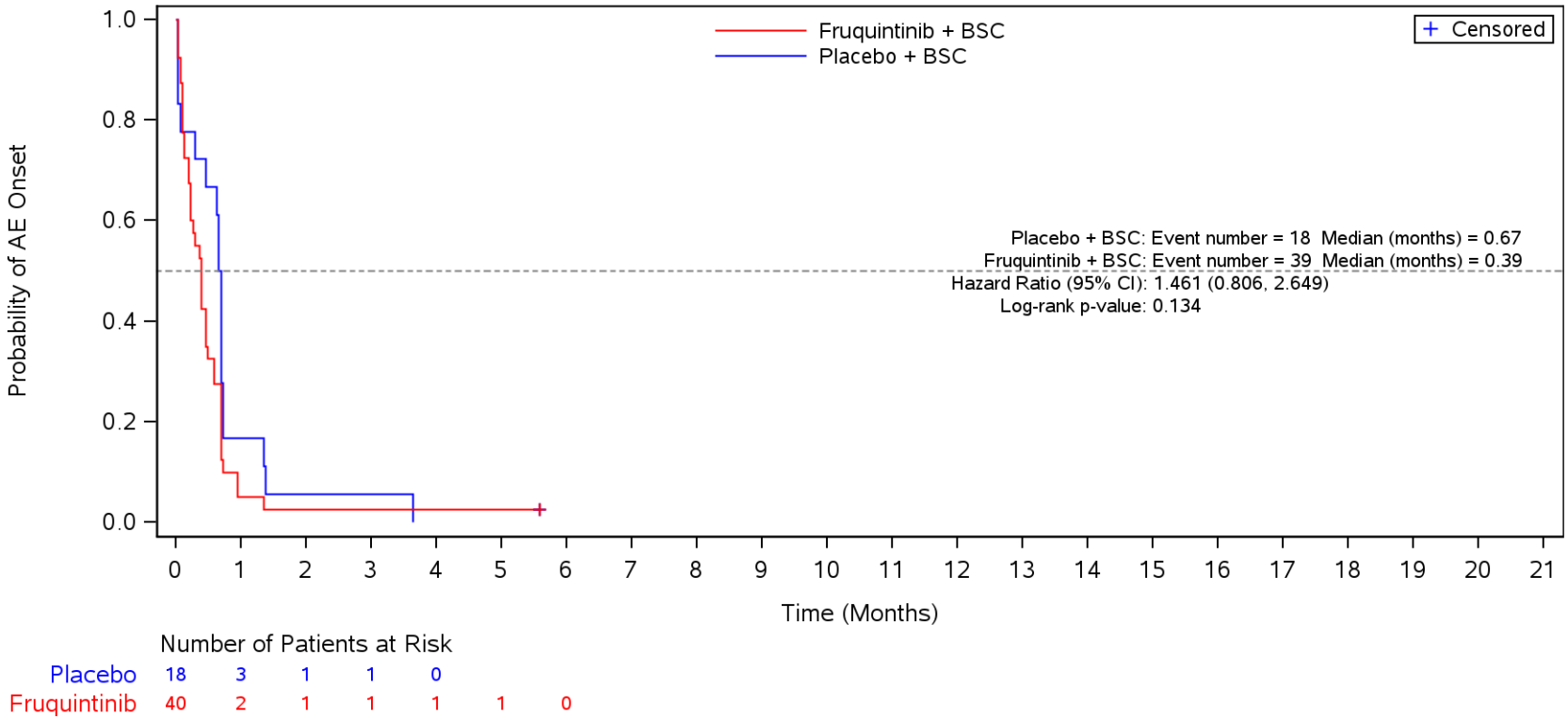
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE
TAS-102



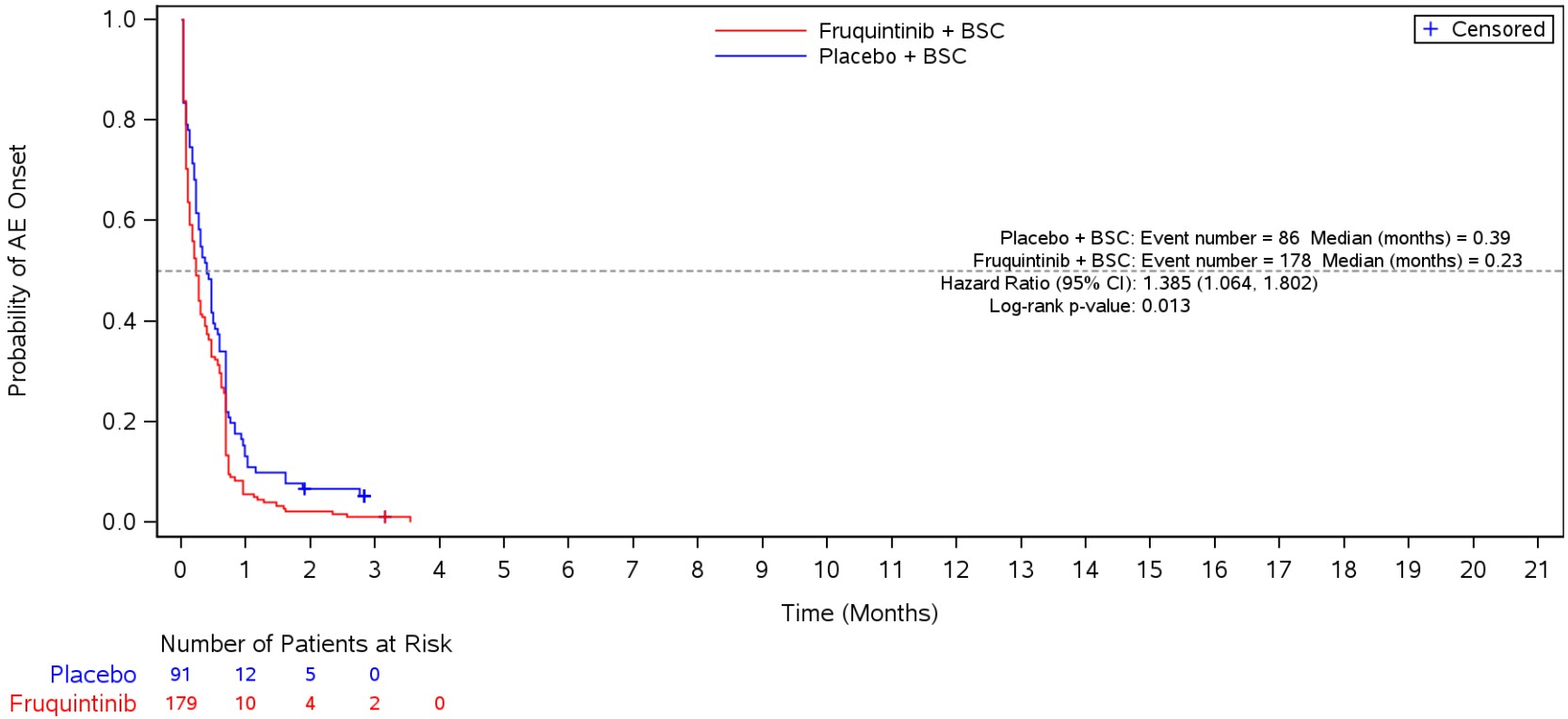
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE
Regorafenib



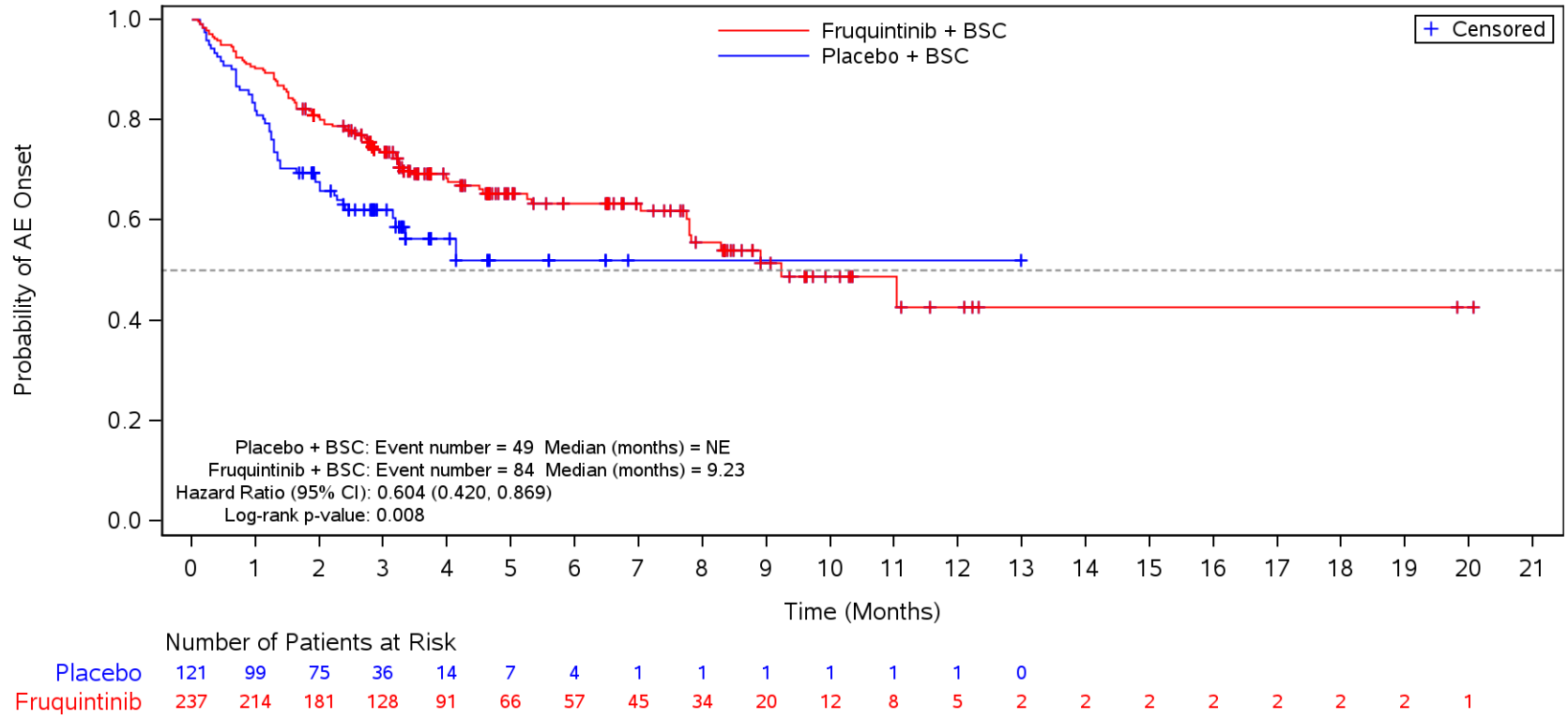
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE
TAS-102 and Regorafenib



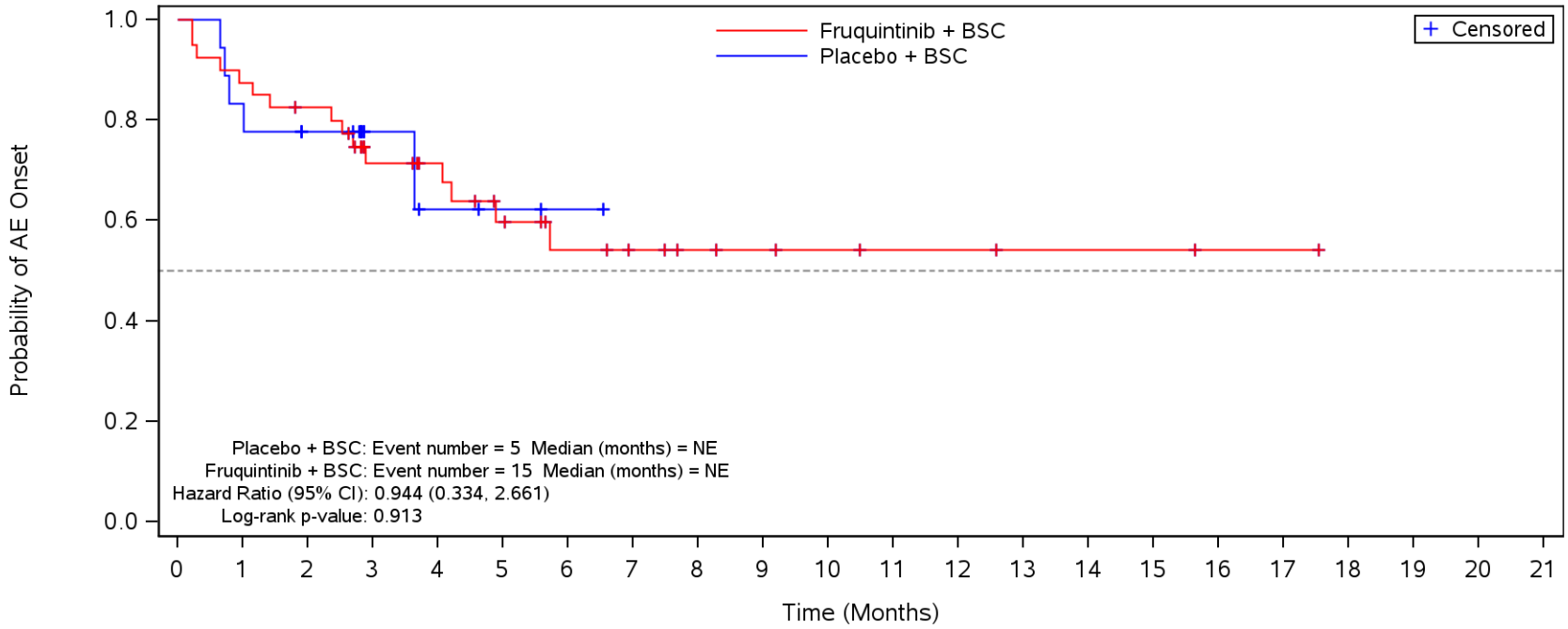
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
Serious TEAE
TAS-102



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
Serious TEAE
Regorafenib

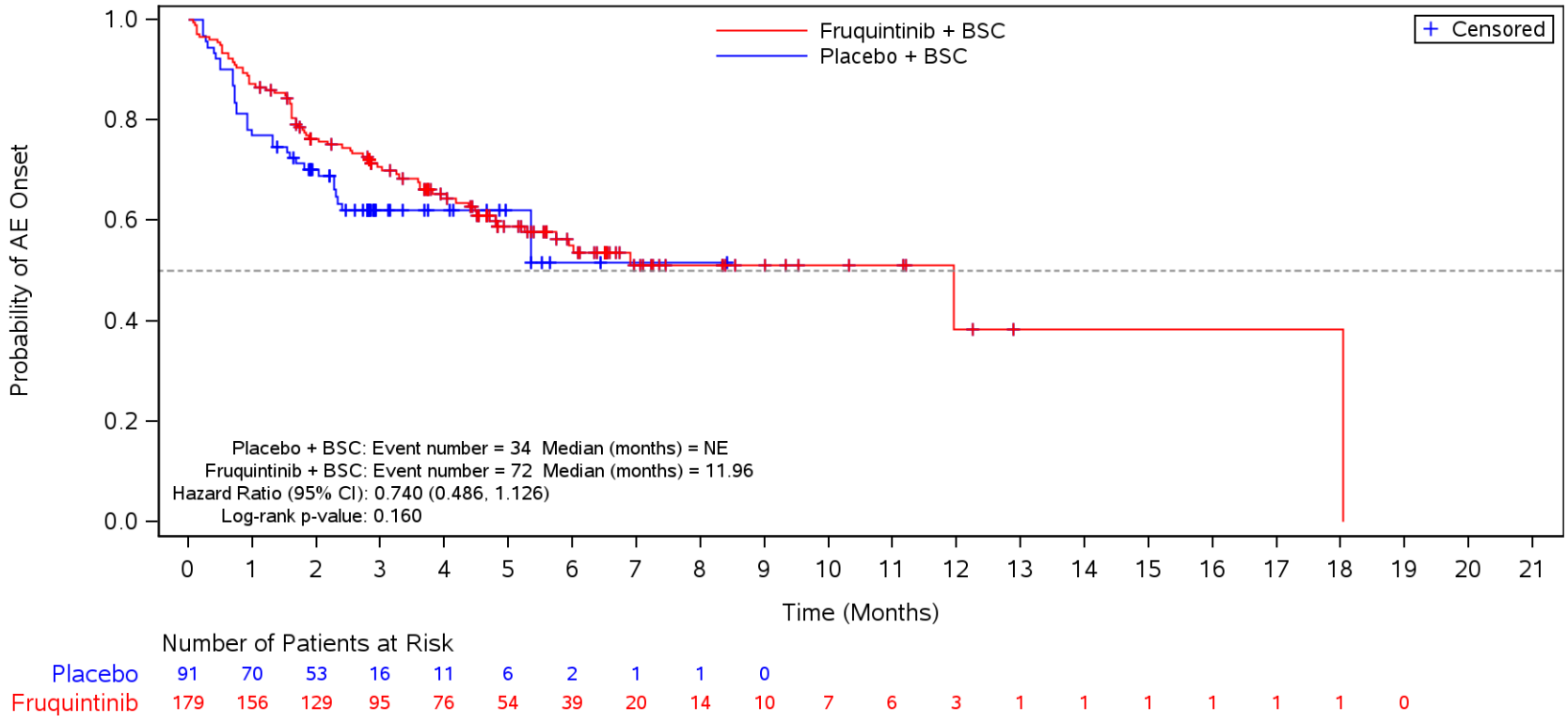


Number of Patients at Risk

Placebo	18	15	12	5	3	2	1	0											
Fruquintinib	40	35	32	22	19	14	10	8	6	5	4	3	3	2	2	2	1	1	0

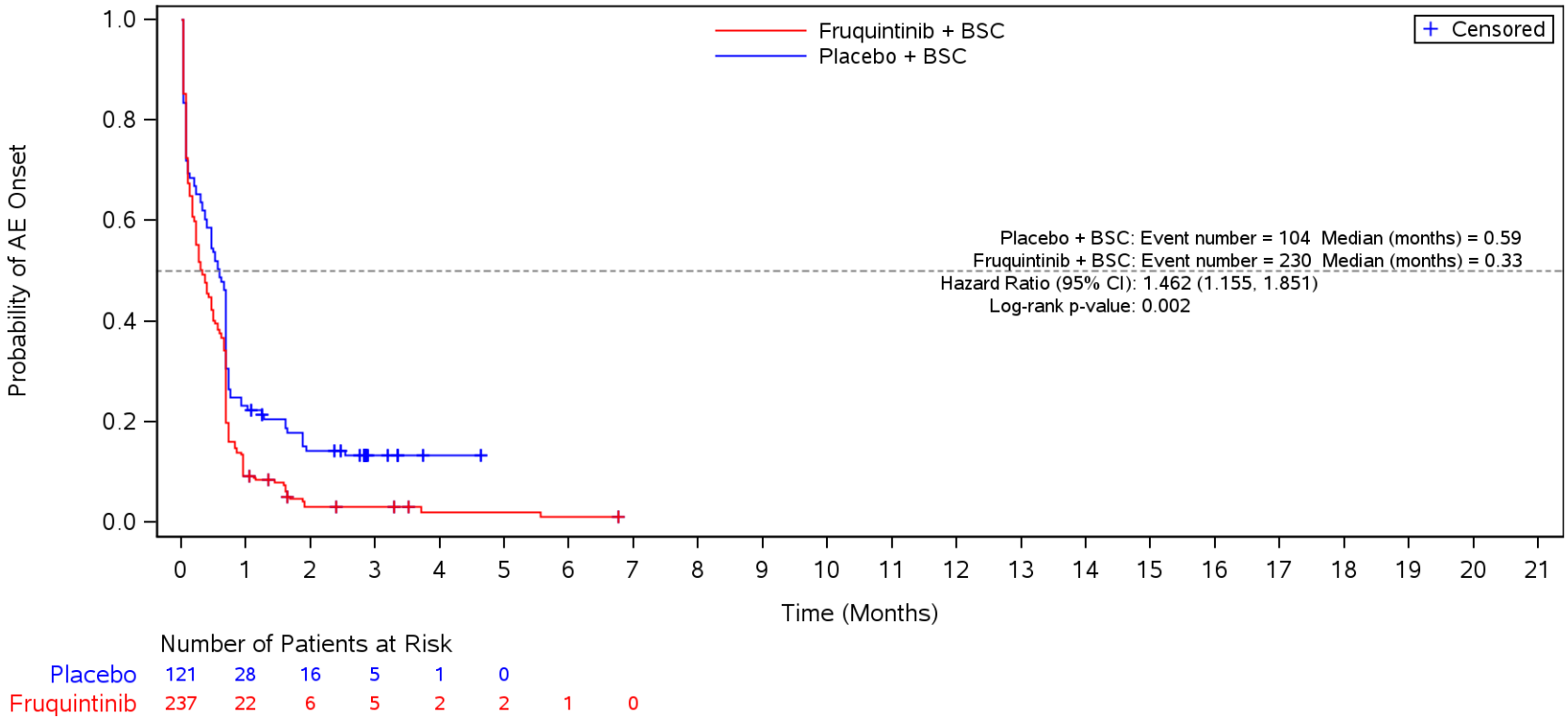
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
Serious TEAE
TAS-102 and Regorafenib



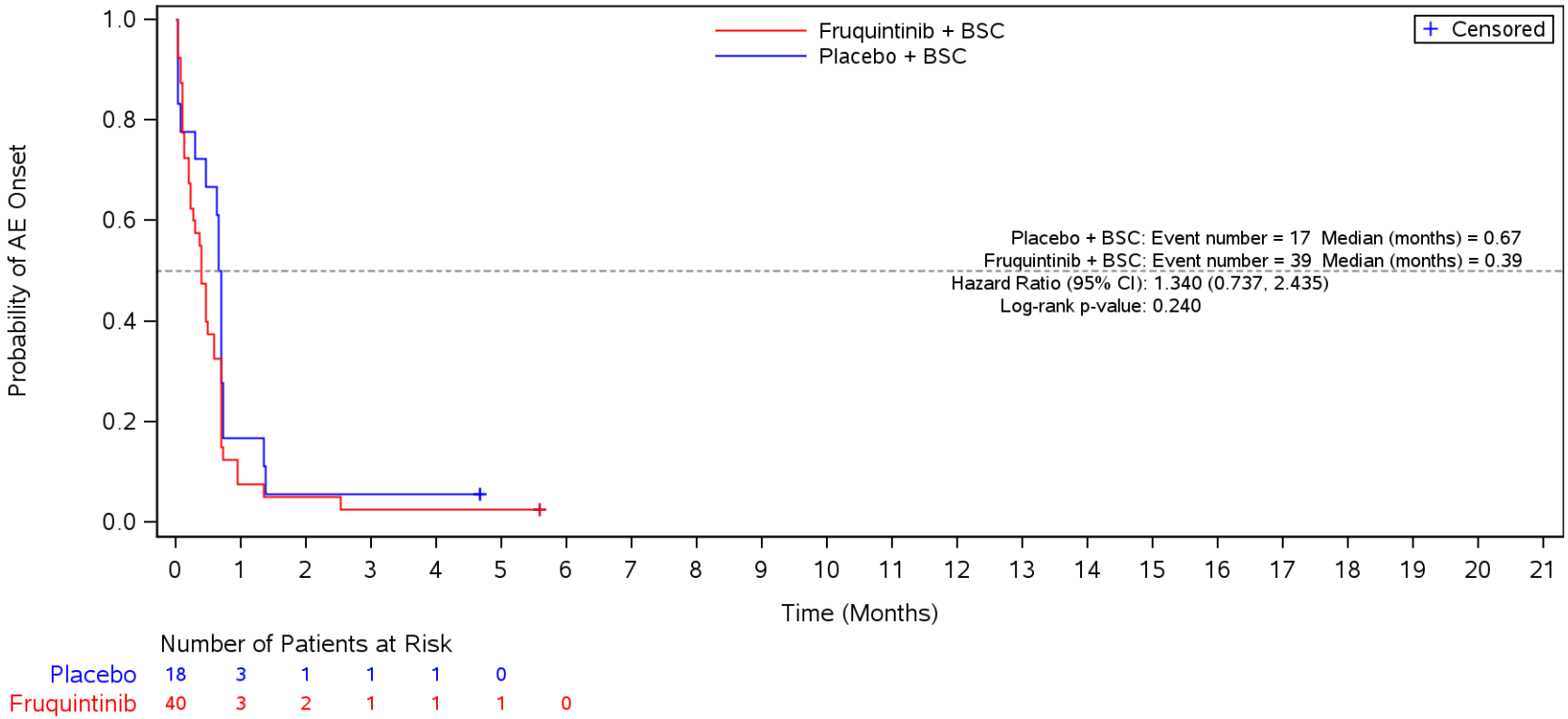
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≤ CTCAE Grade 2
TAS-102



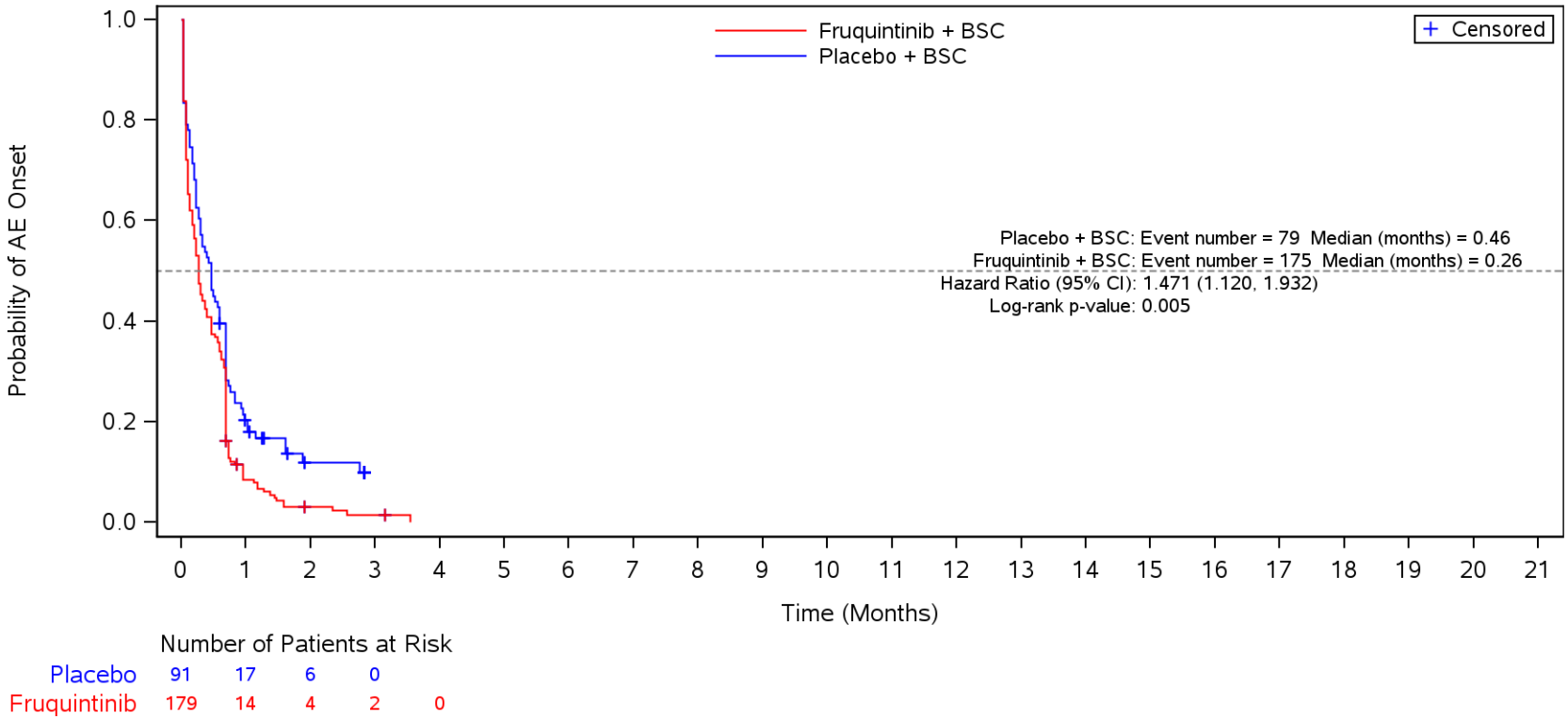
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≤ CTCAE Grade 2
Regorafenib



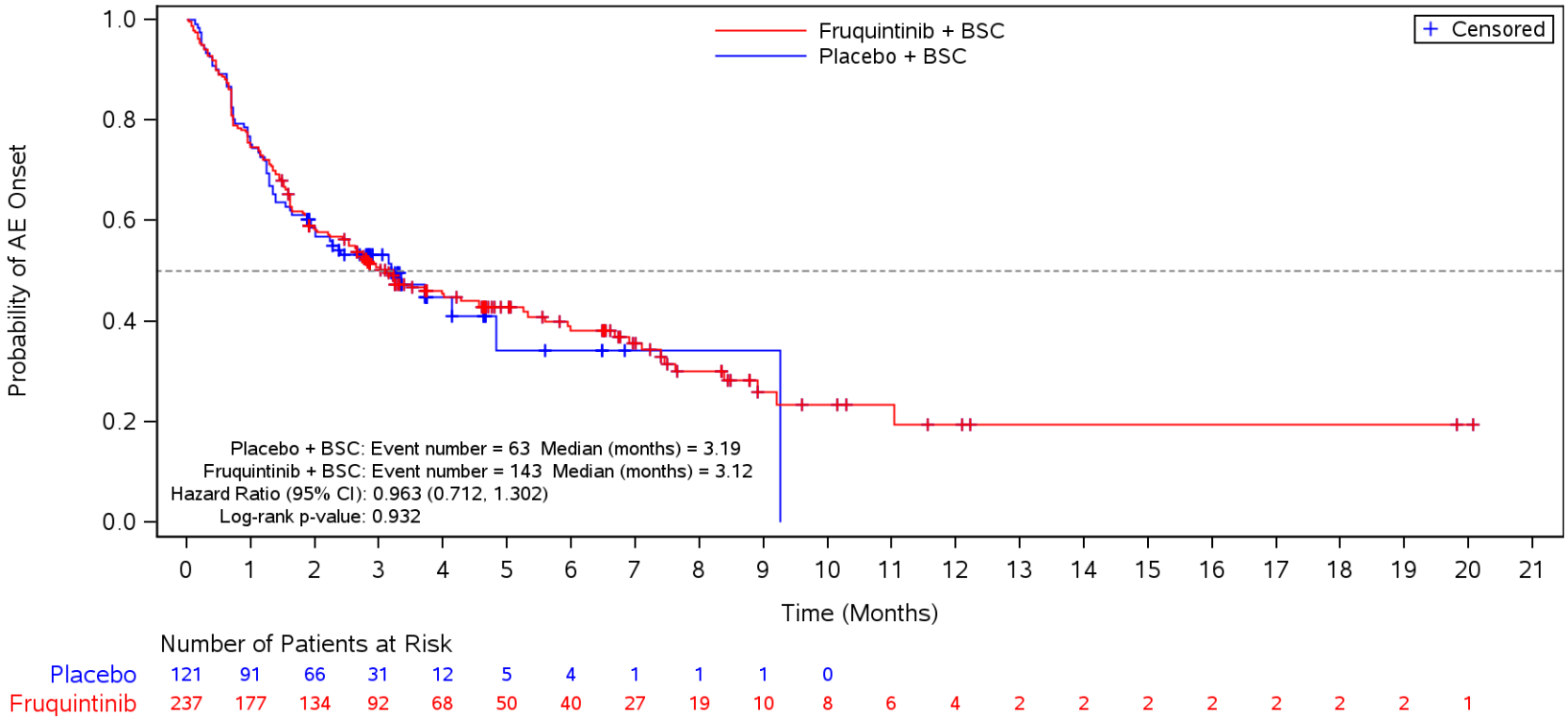
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≤ CTCAE Grade 2
TAS-102 and Regorafenib



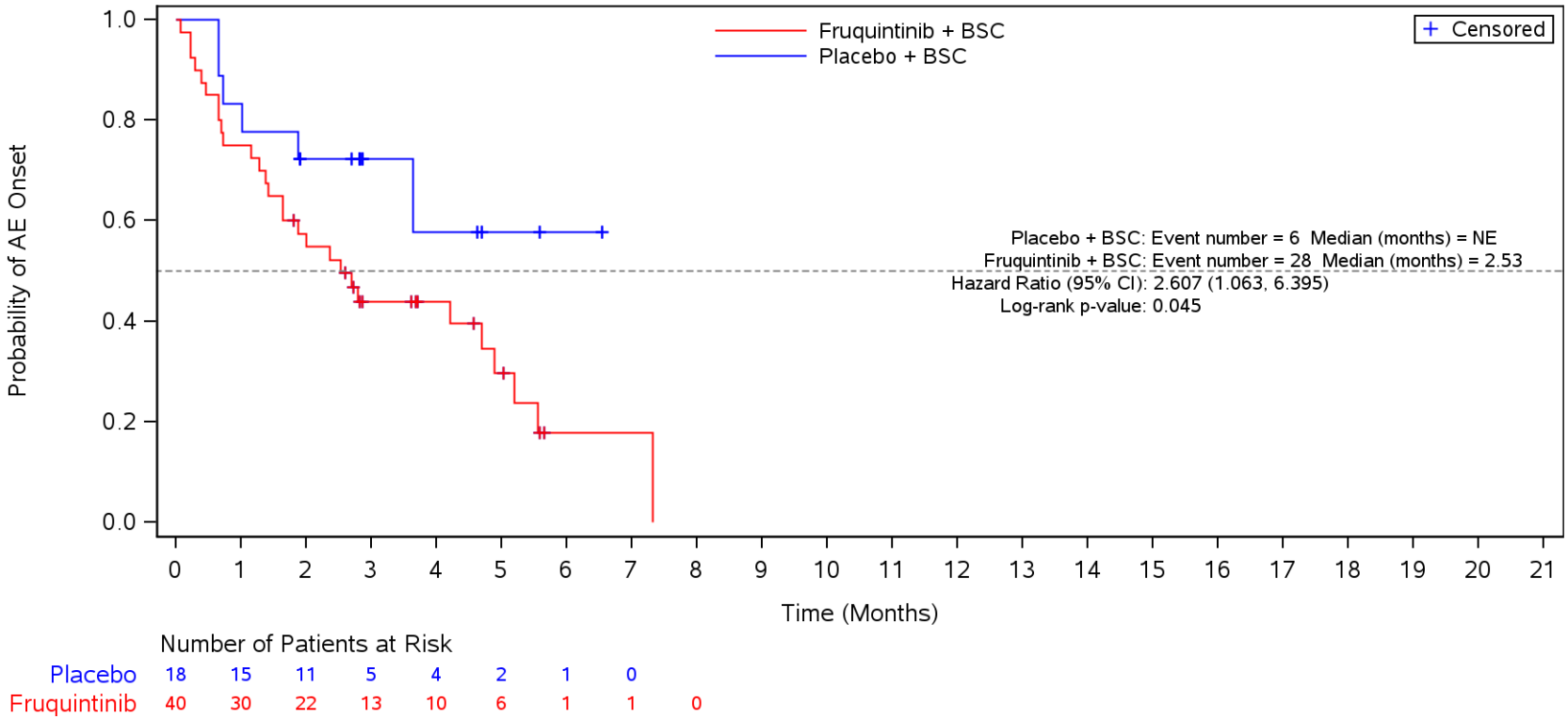
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3
TAS-102



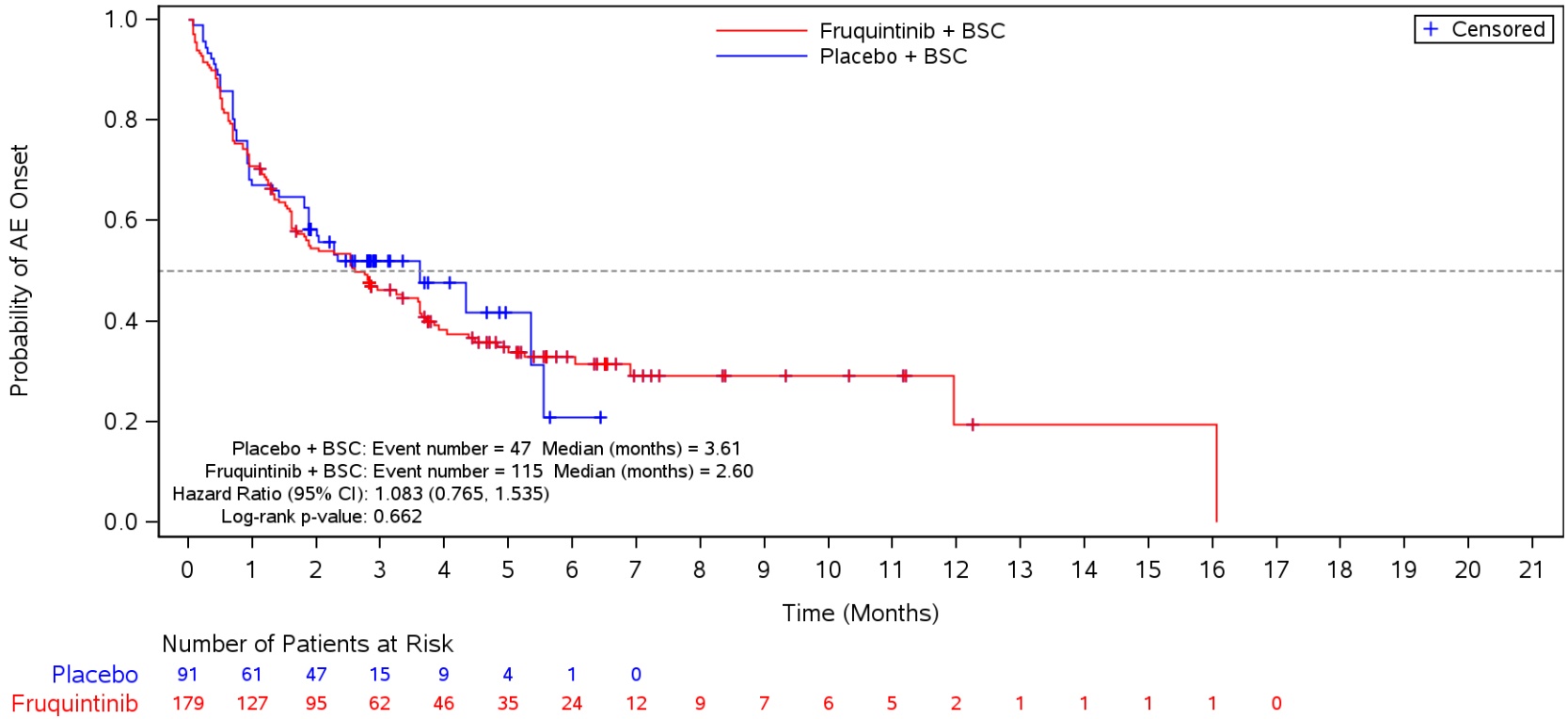
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3
Regorafenib



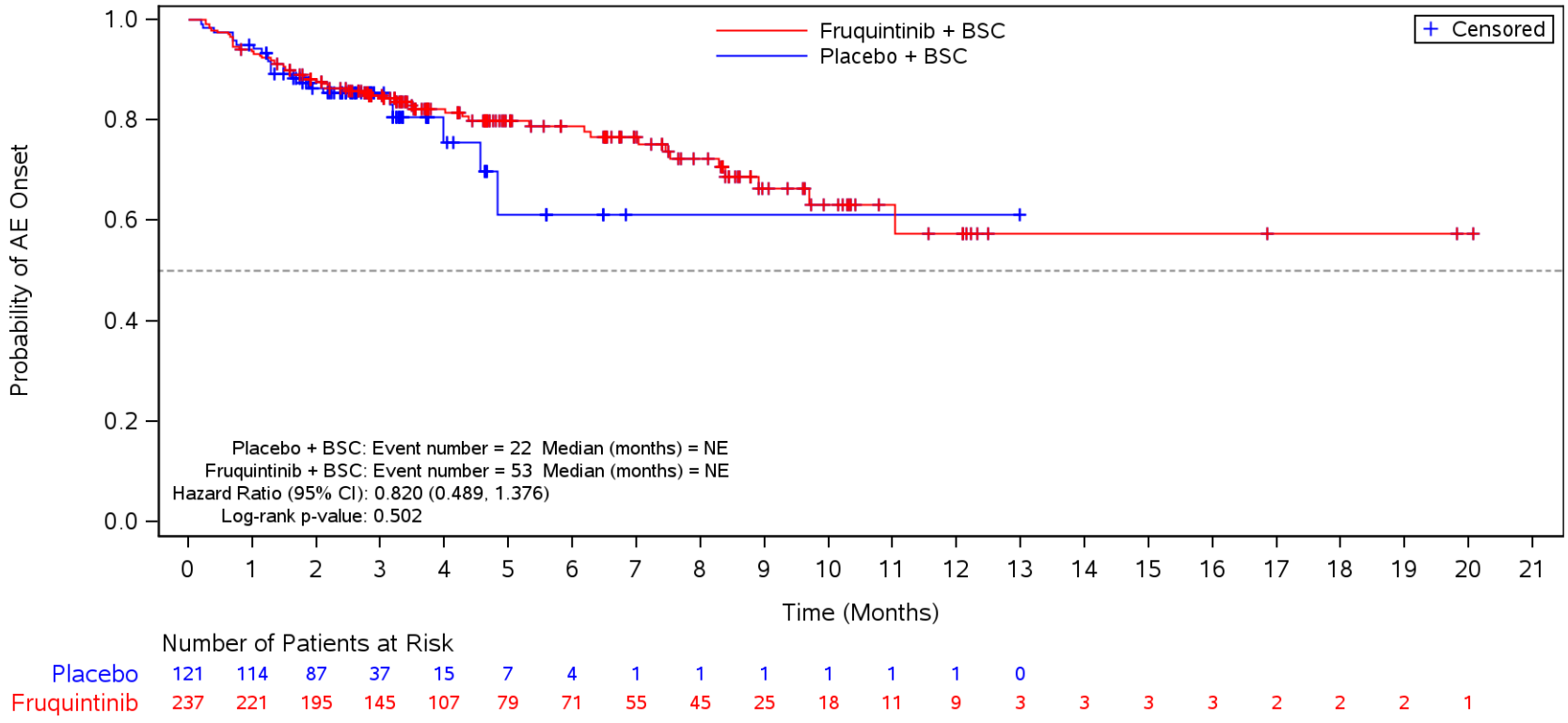
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3
TAS-102 and Regorafenib



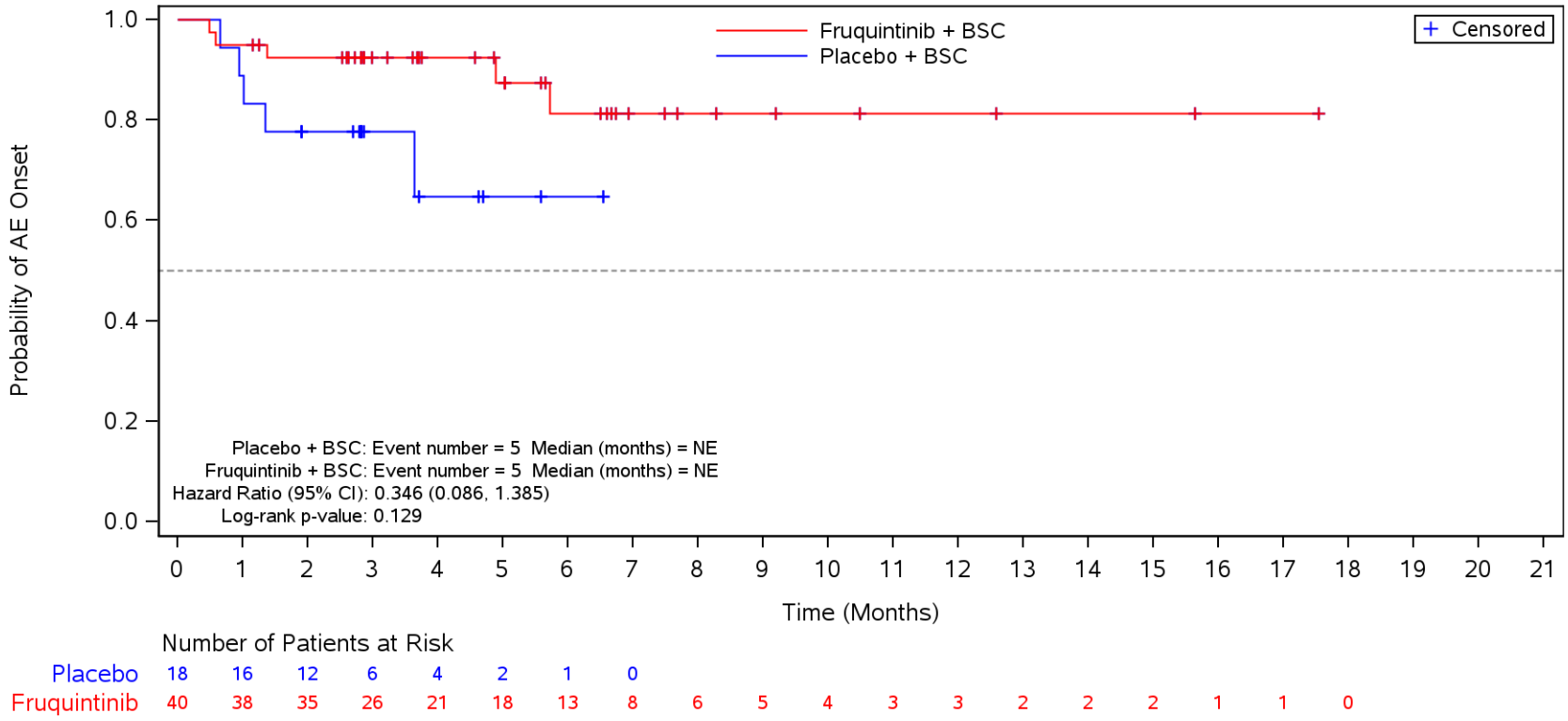
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
Discontinuation due to TEAE
TAS-102



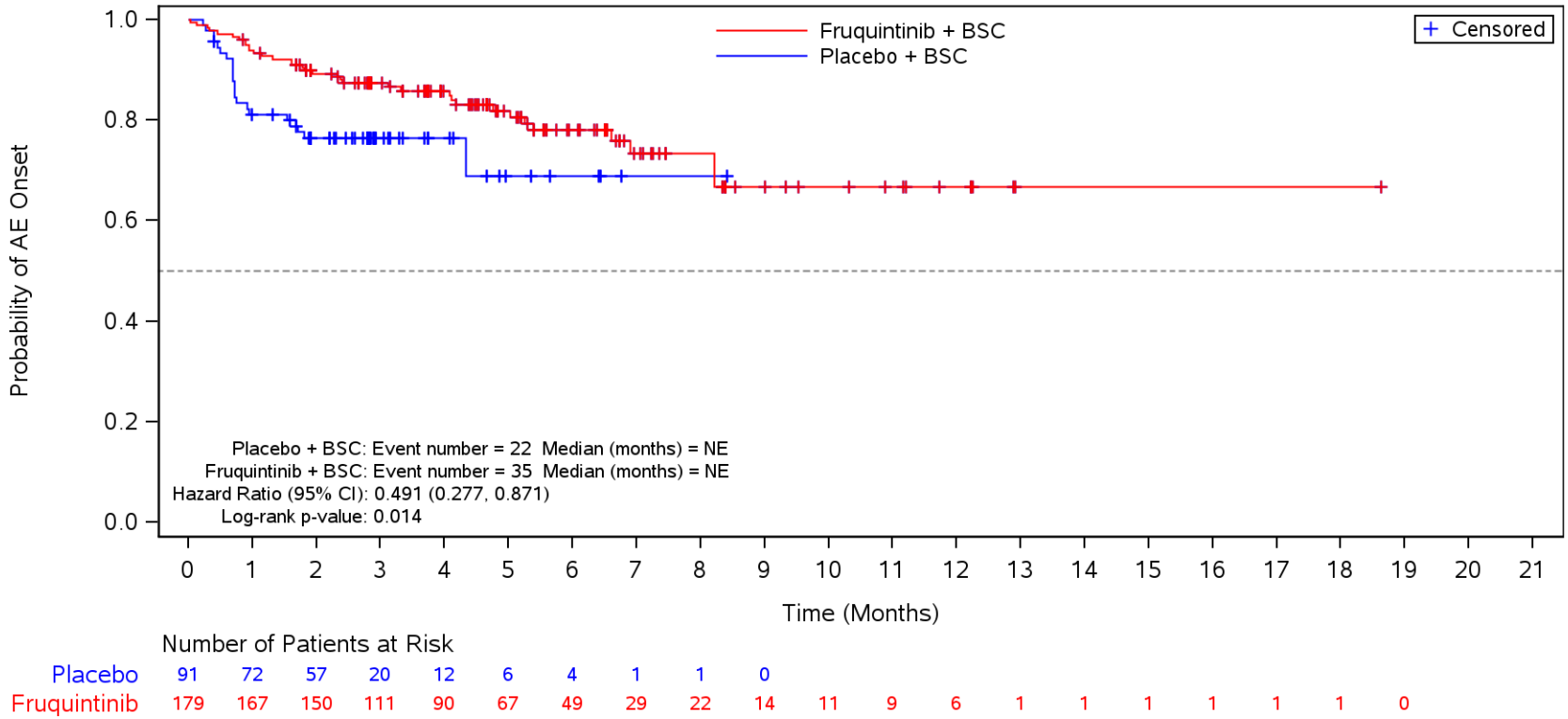
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
Discontinuation due to TEAE
Regorafenib



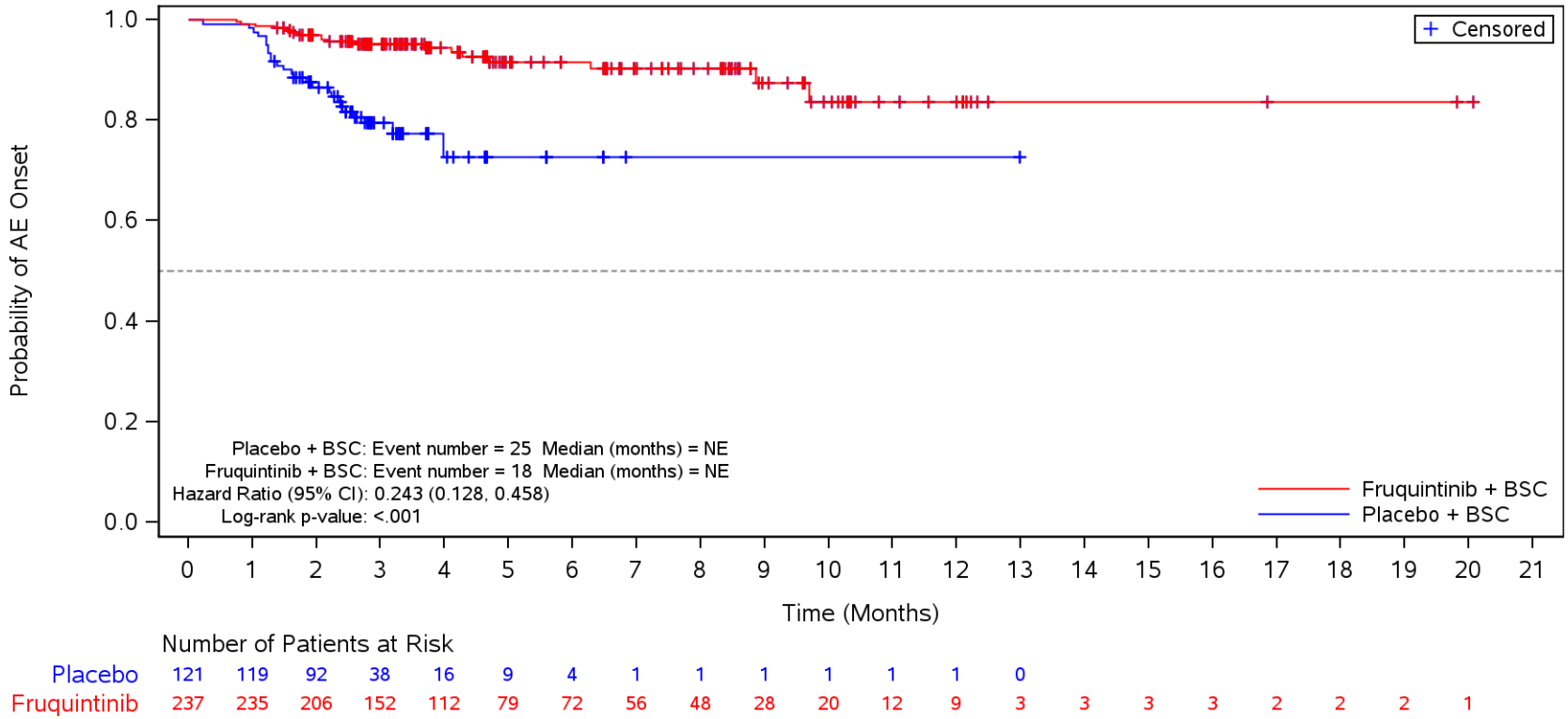
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
Discontinuation due to TEAE
TAS-102 and Regorafenib



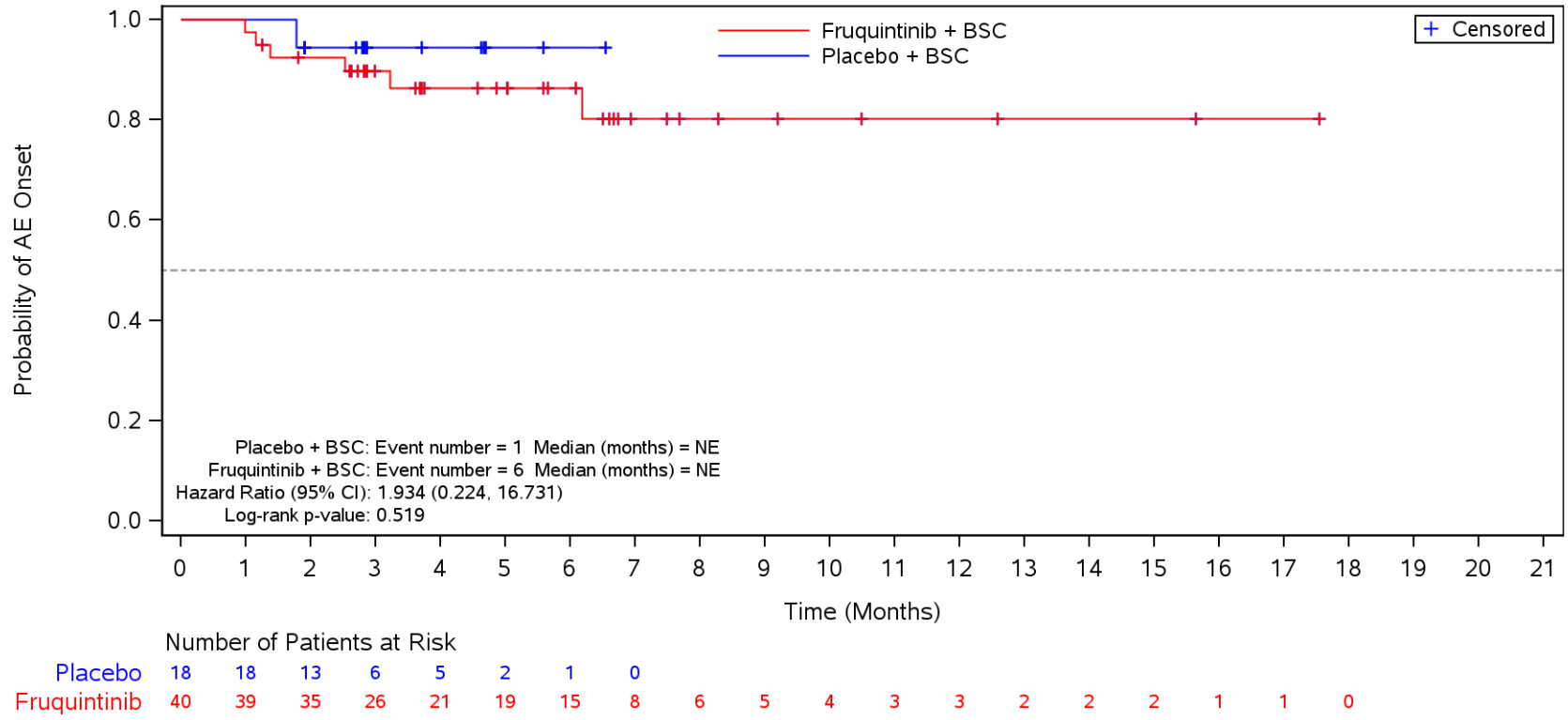
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
Deaths (Grade 5 TEAEs)
TAS-102



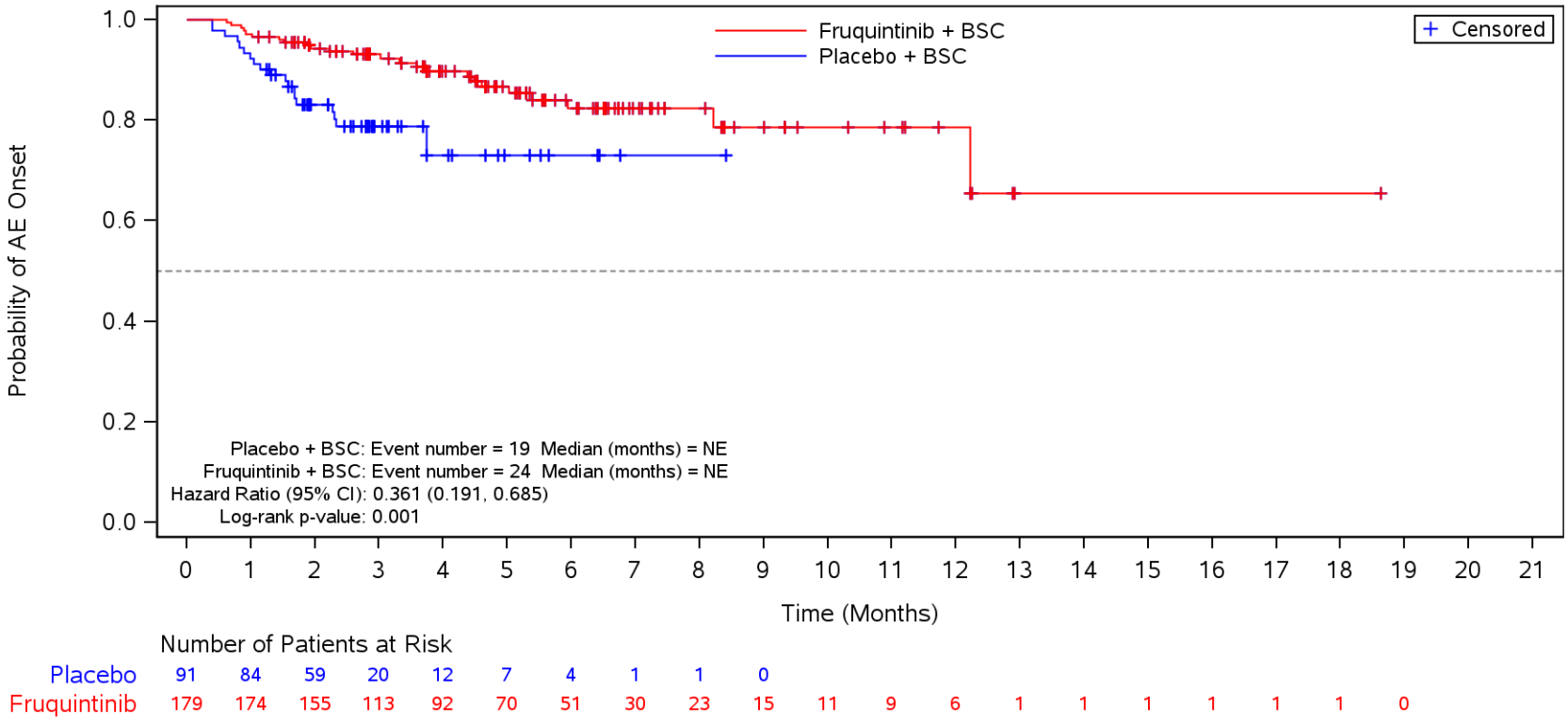
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior TAS-102 and/or Regorafenib
Safety Population
Deaths (Grade 5 TEAEs)
Regorafenib



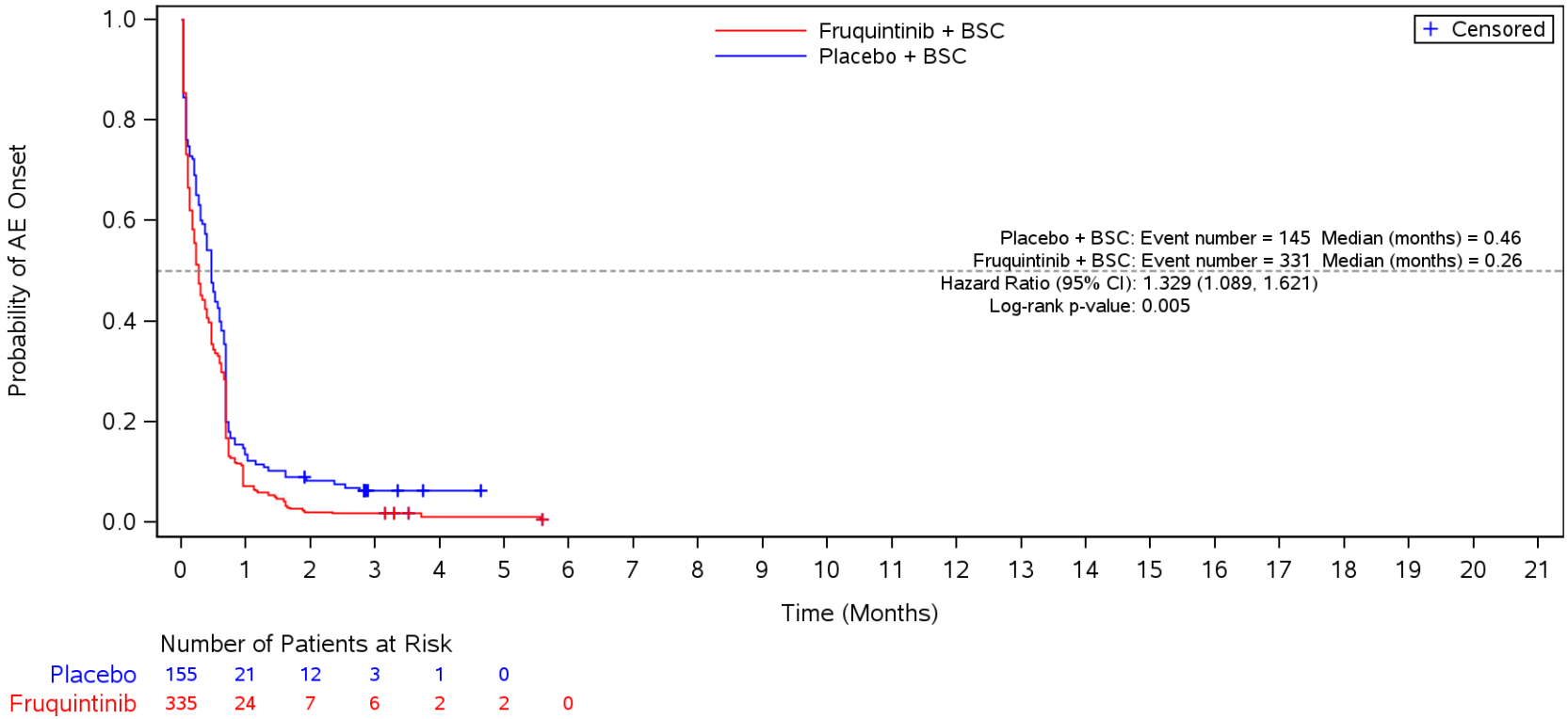
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
TEAE
Yes



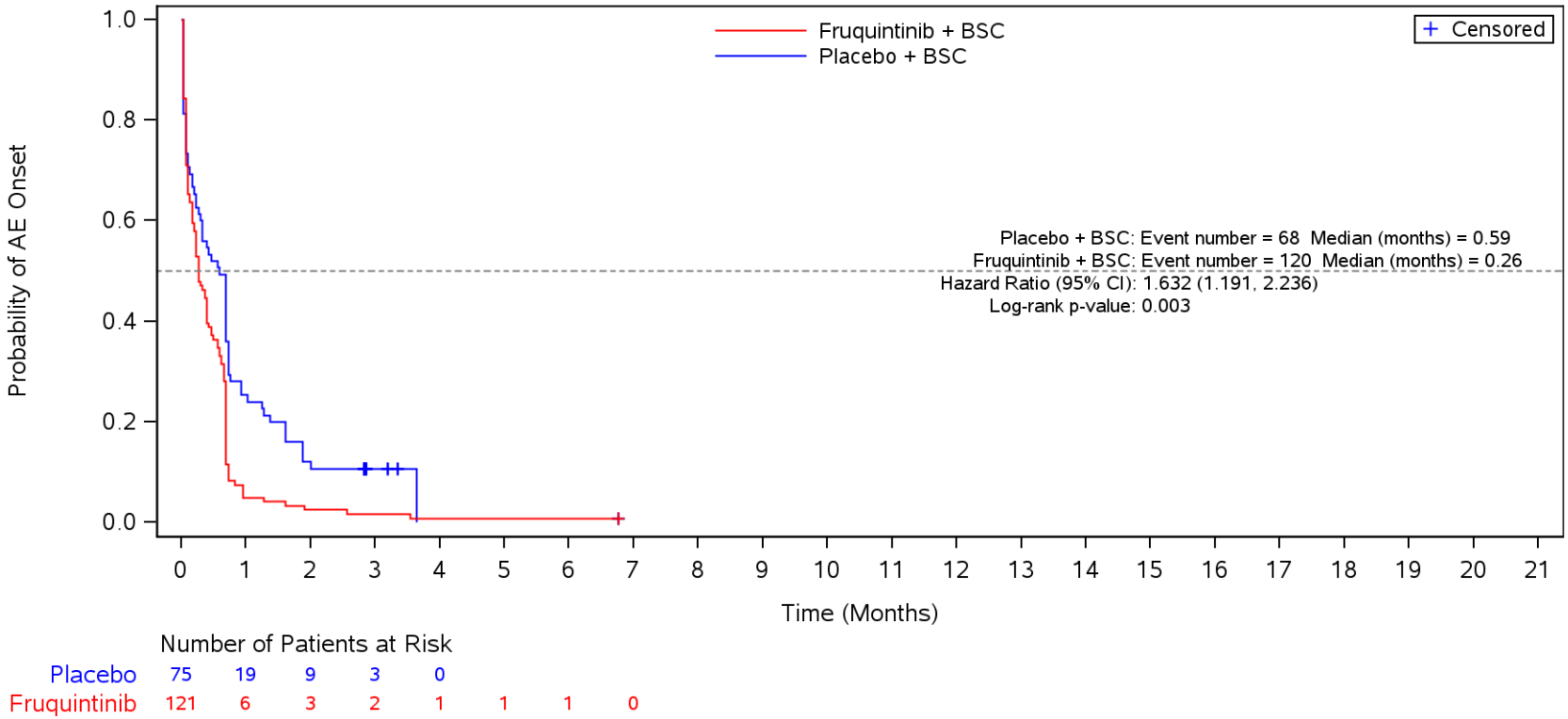
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
TEAE
Yes



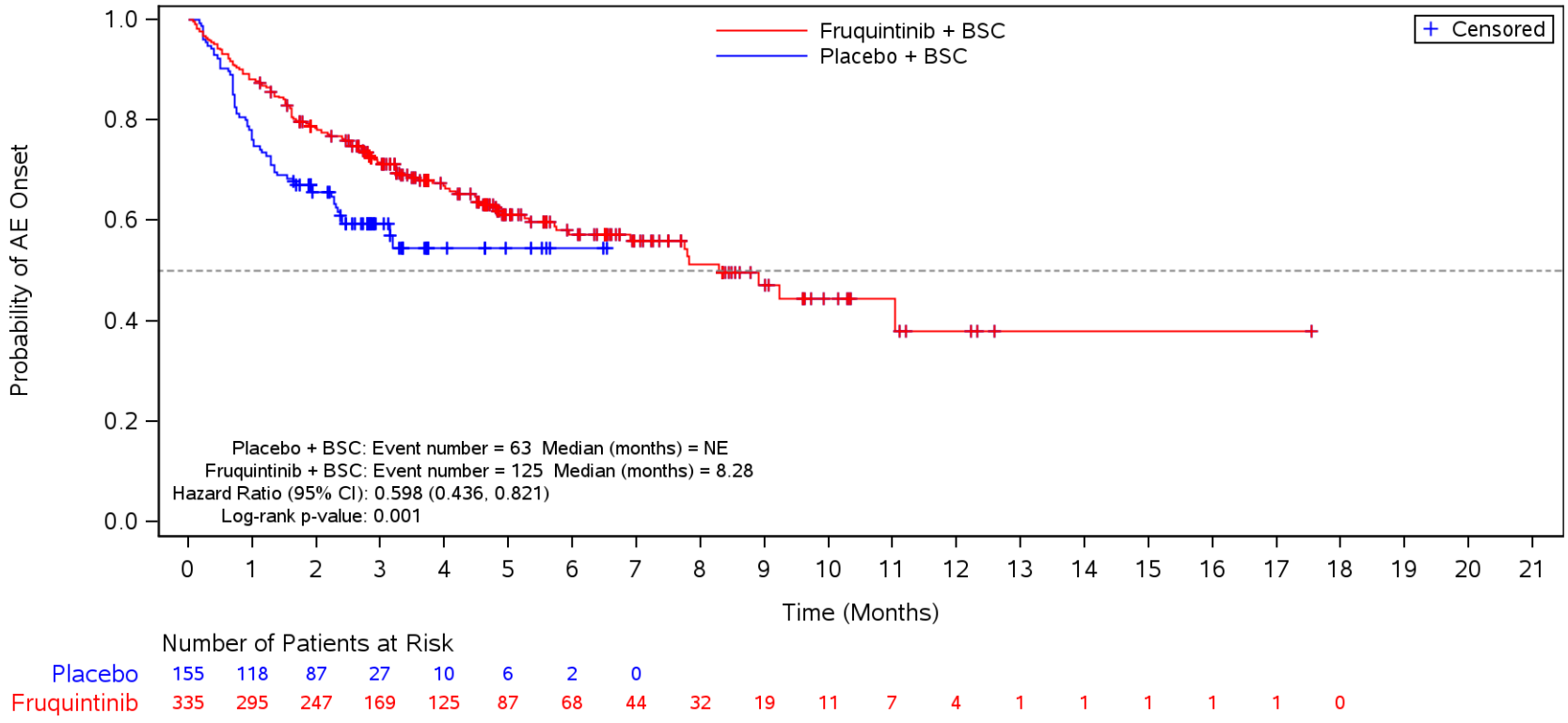
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
TEAE
No



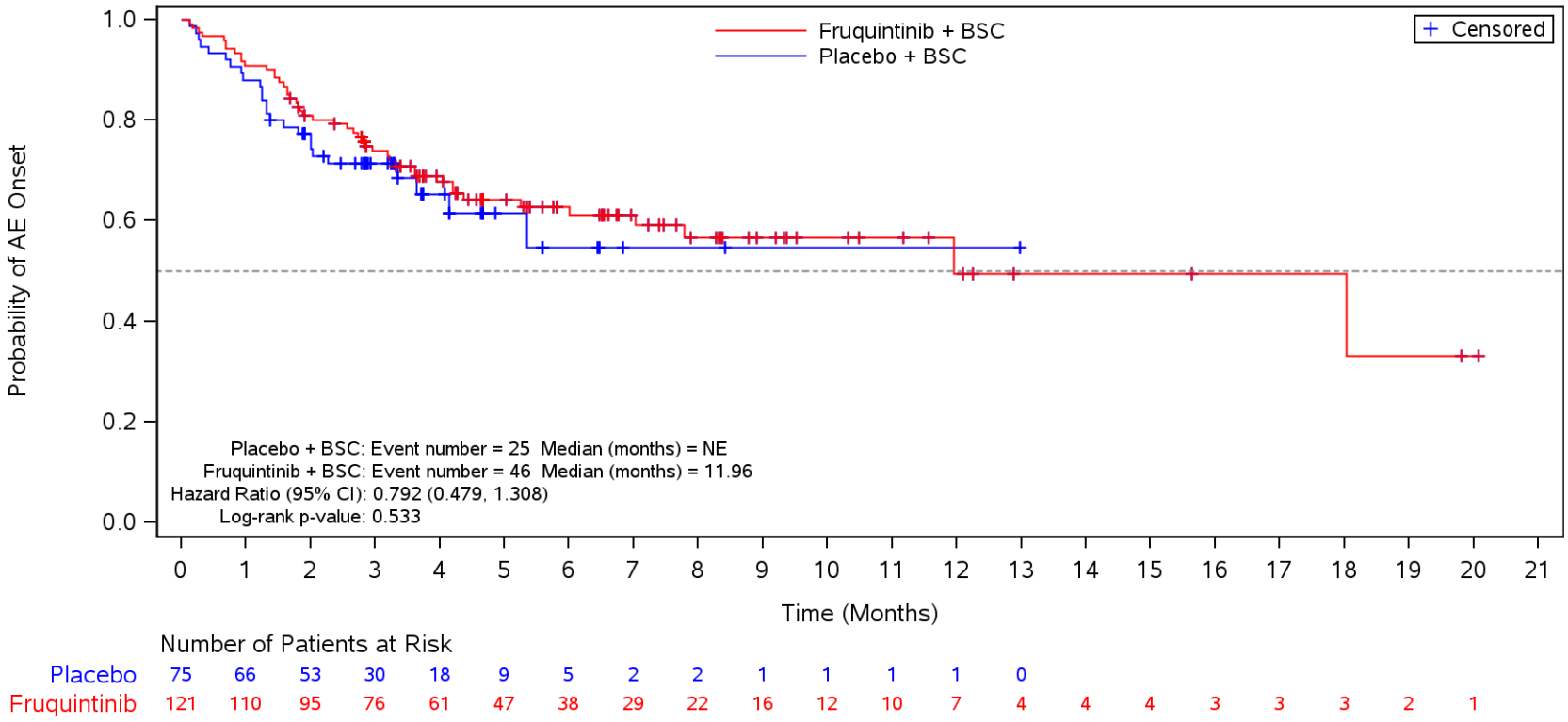
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
Serious TEAE
Yes



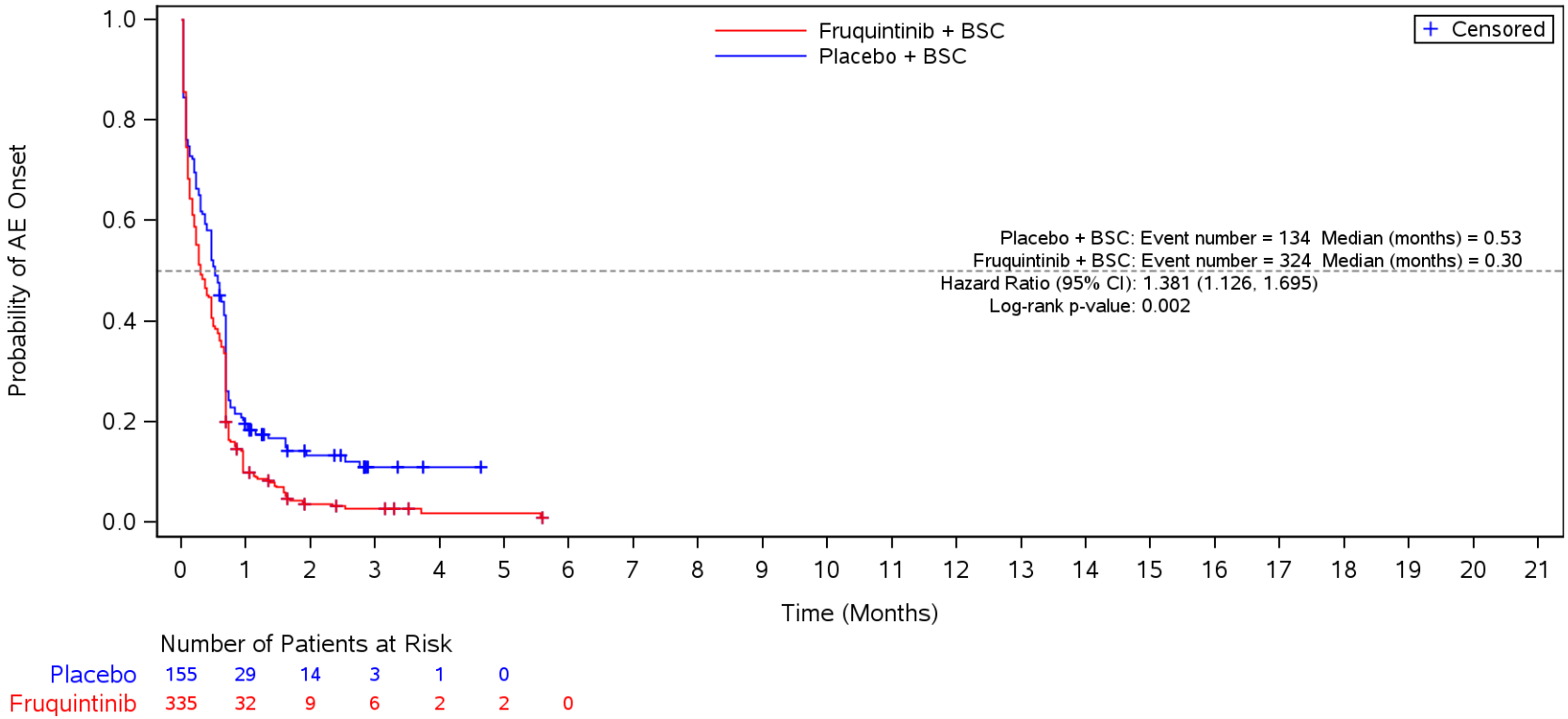
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
Serious TEAE
No



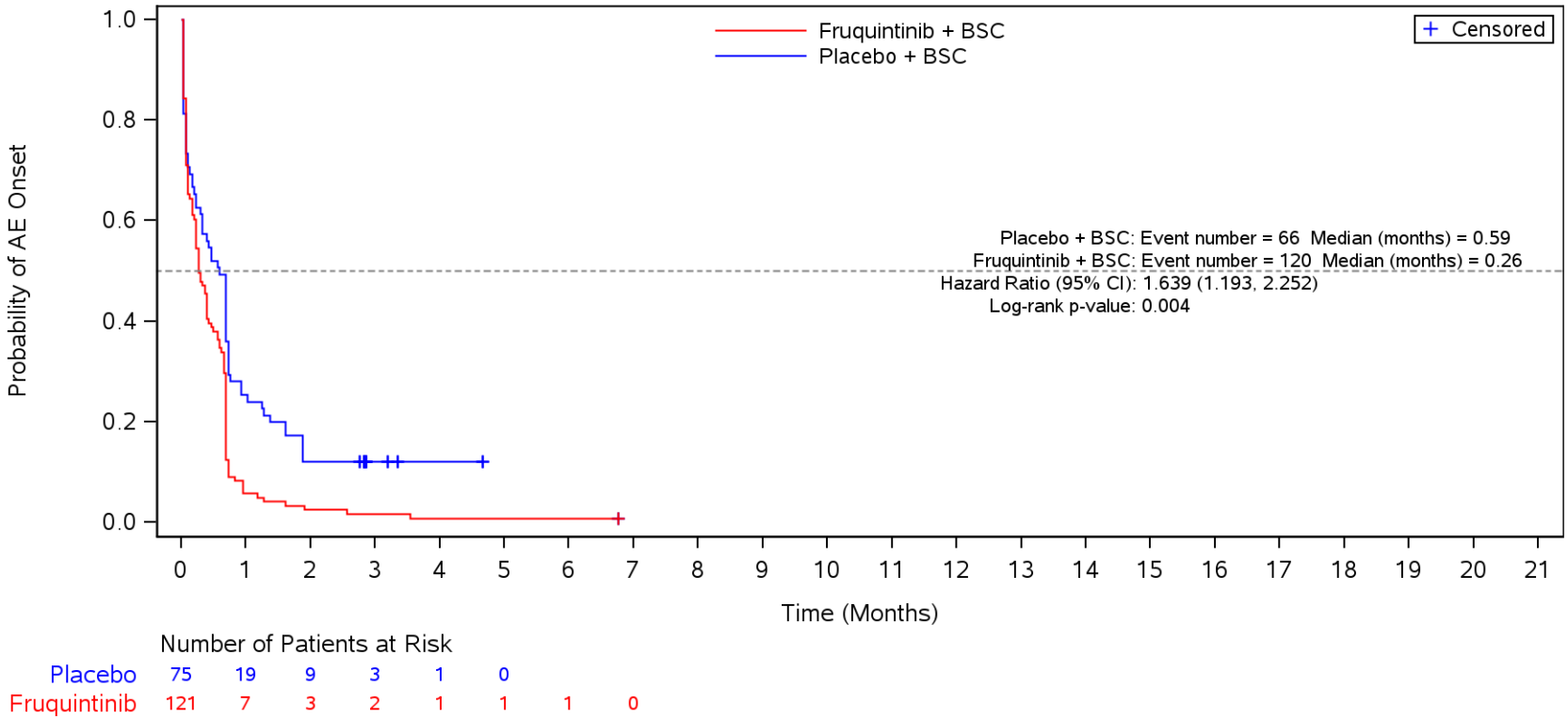
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
TEAE ≤ CTCAE Grade 2
Yes



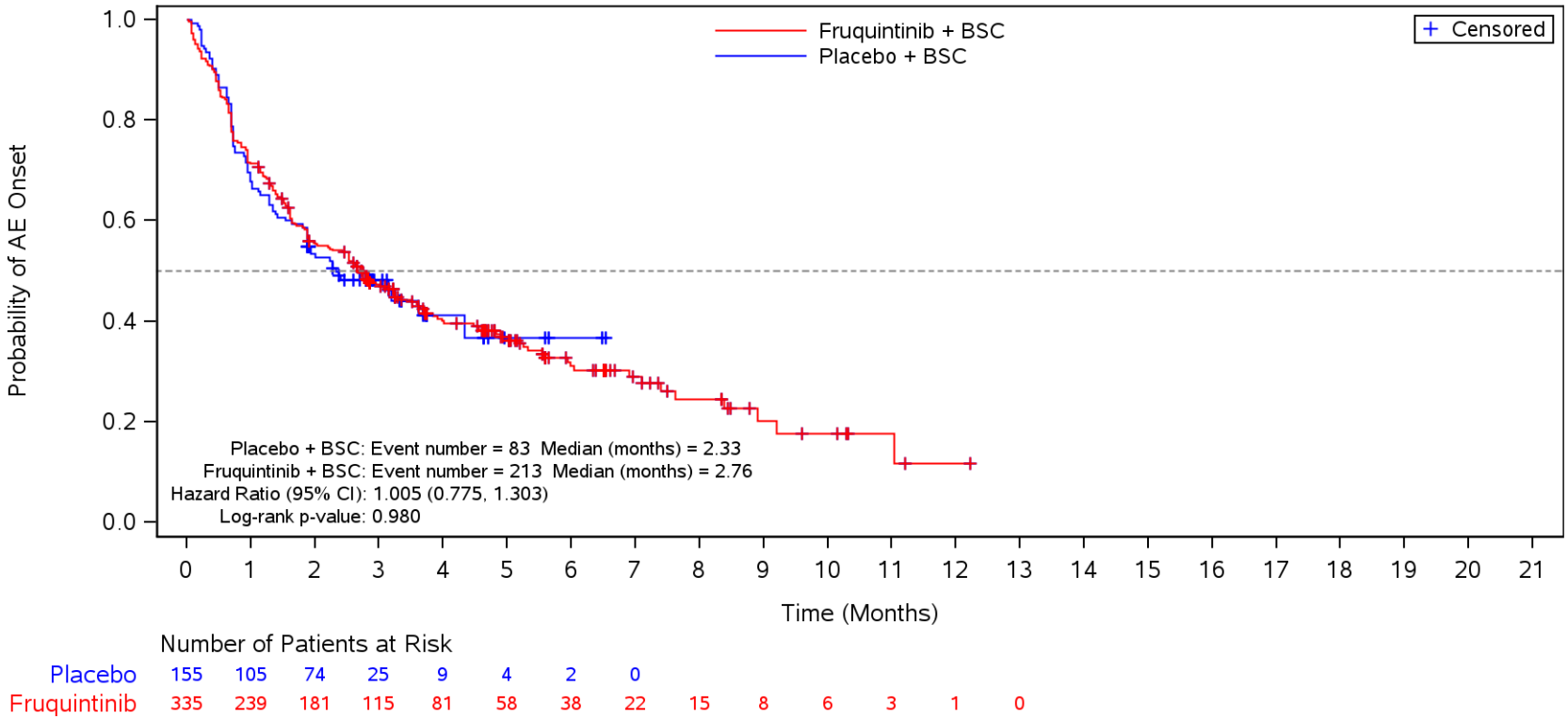
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
TEAE ≤ CTCAE Grade 2
No



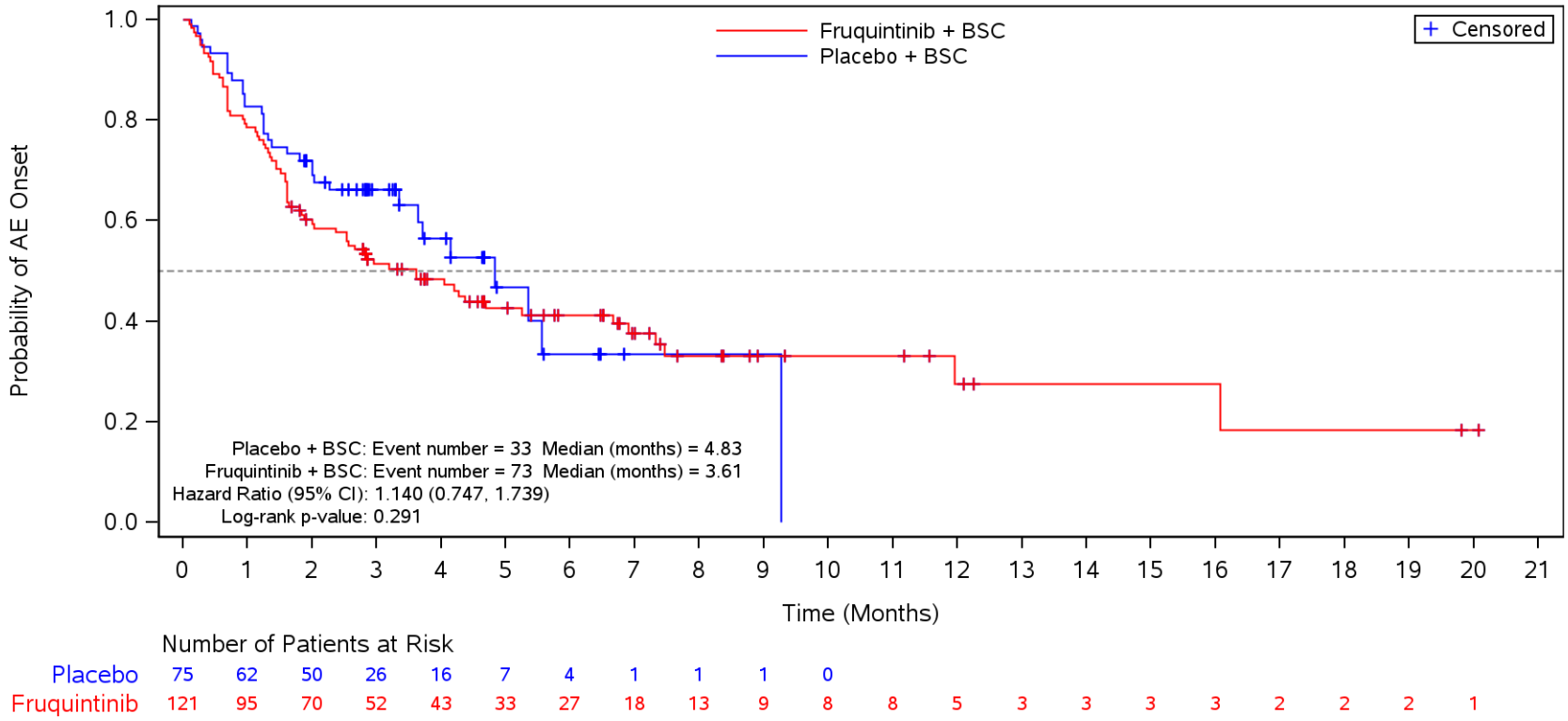
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3
Yes



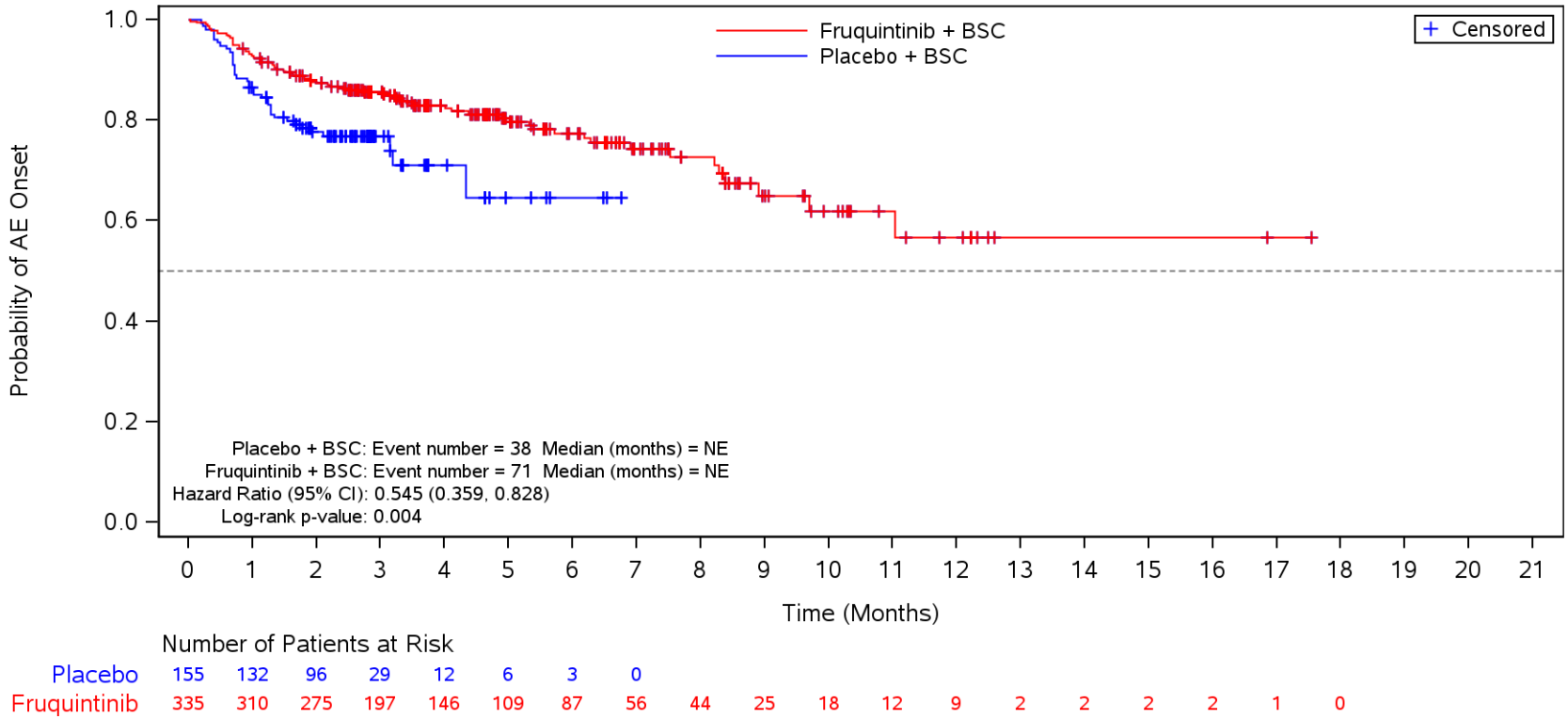
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3
No



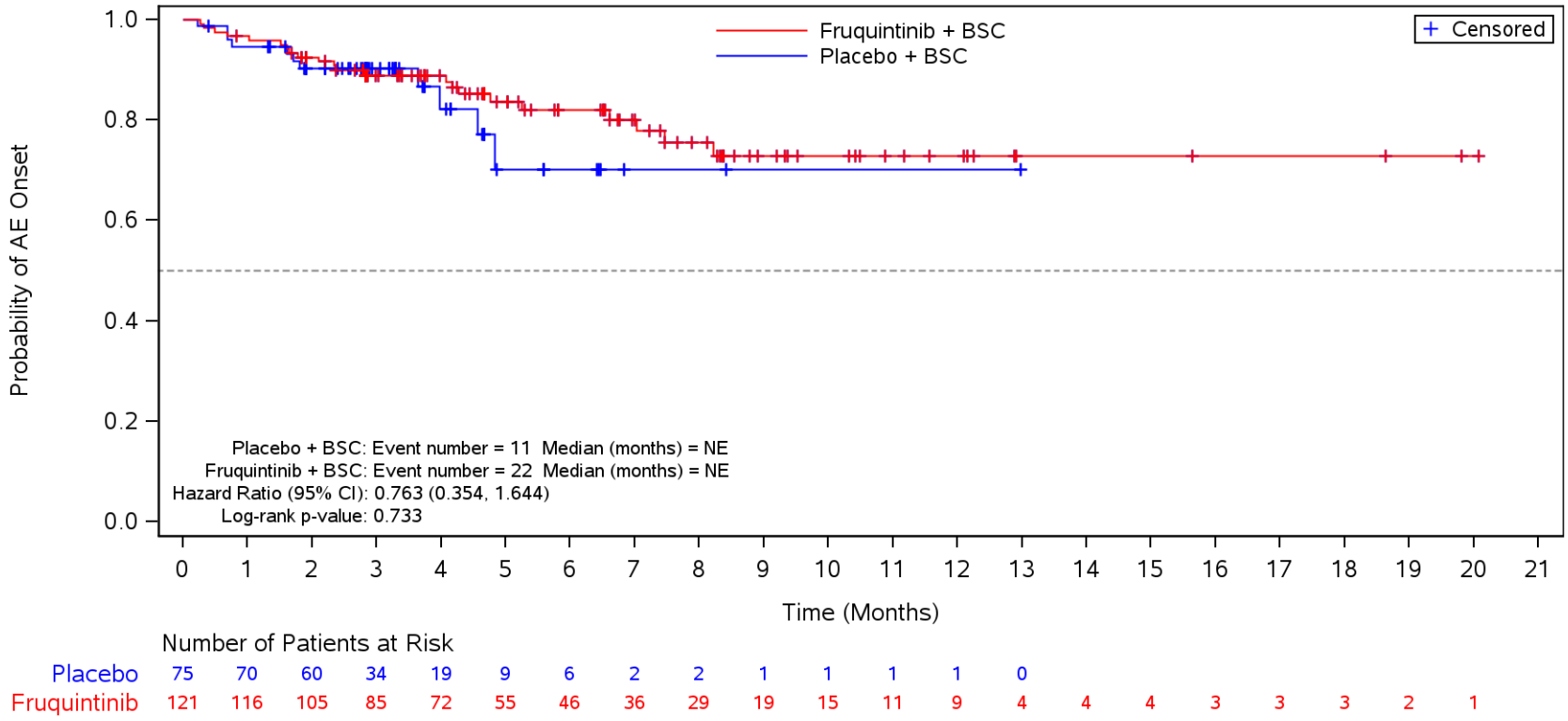
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
Discontinuation due to TEAE
Yes



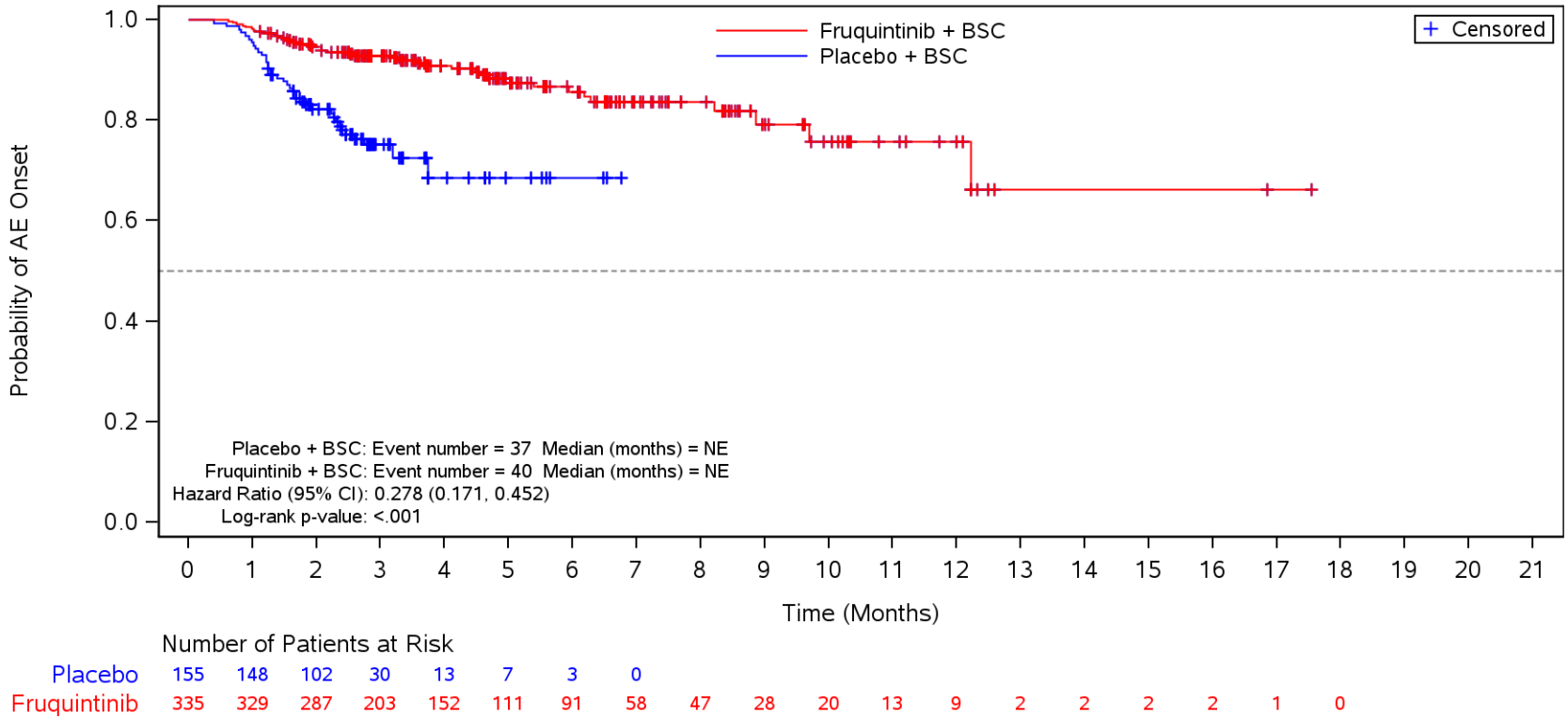
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
Discontinuation due to TEAE
No



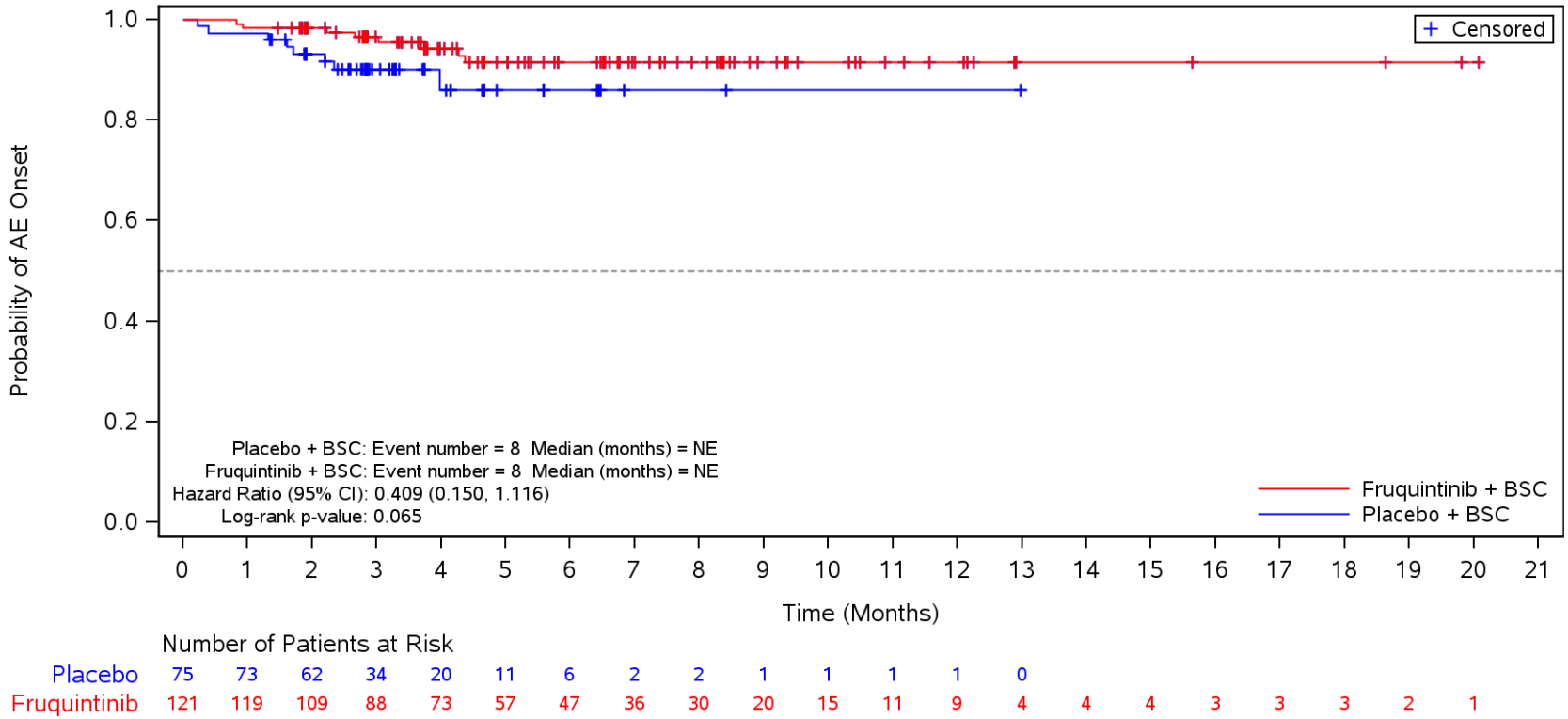
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Liver Metastases
Safety Population
Deaths (Grade 5 TEAEs)
Yes



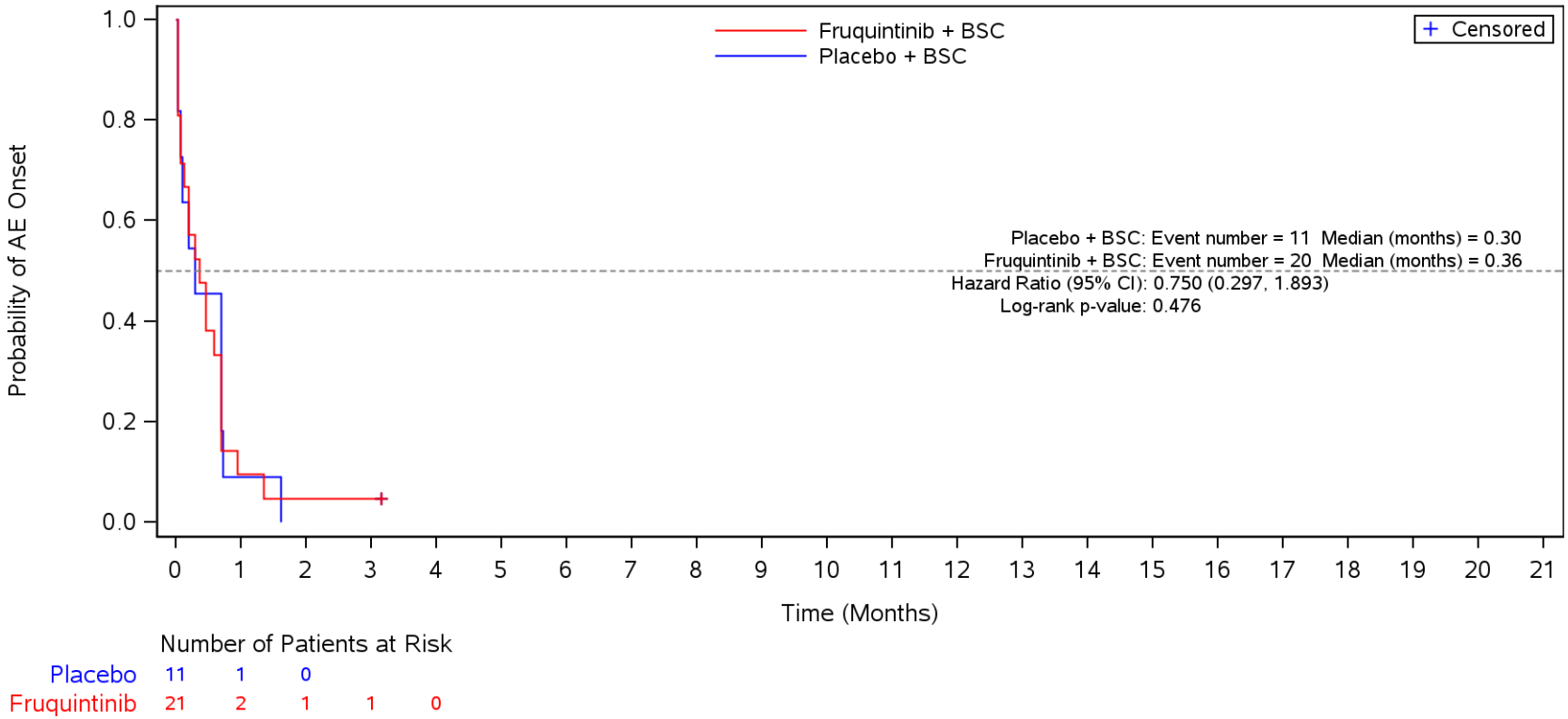
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE
Yes



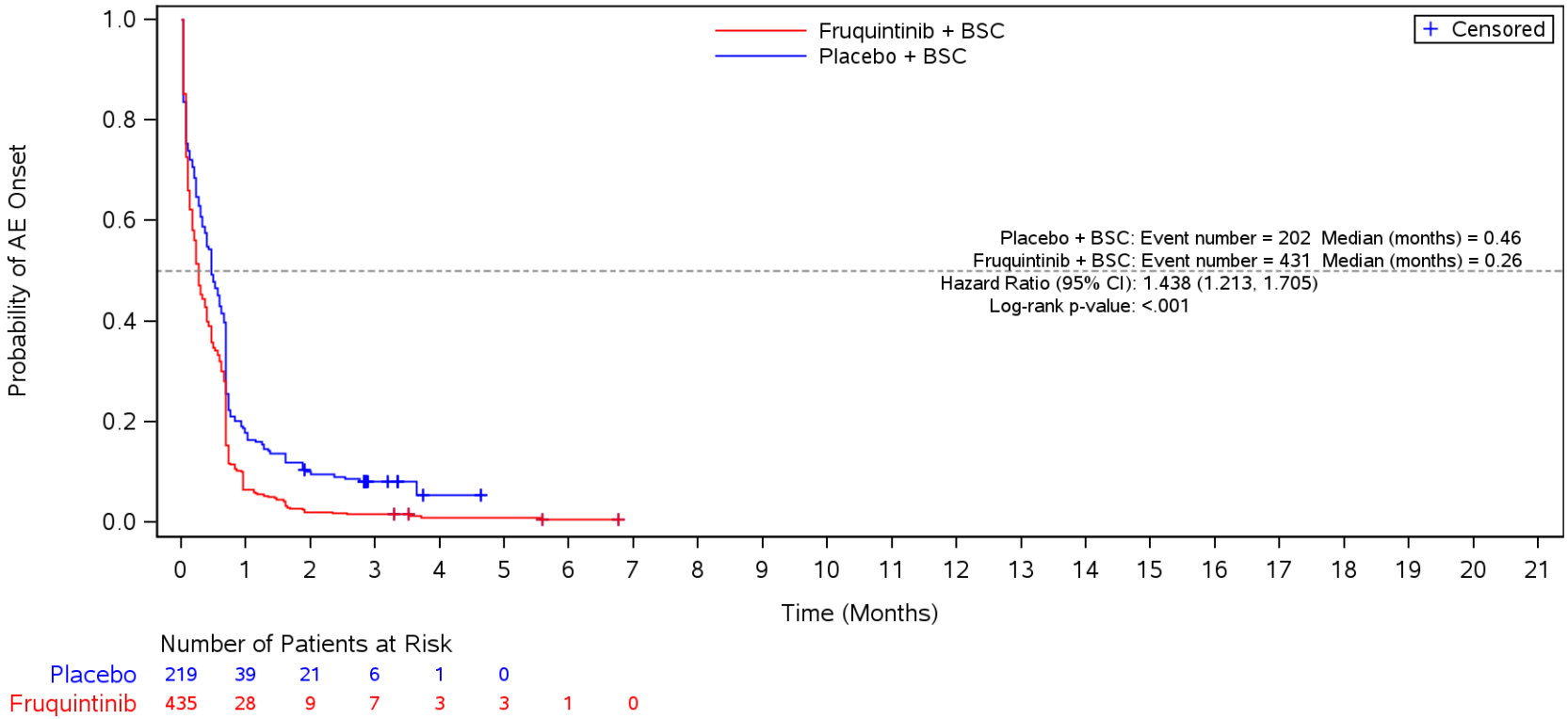
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE
Yes



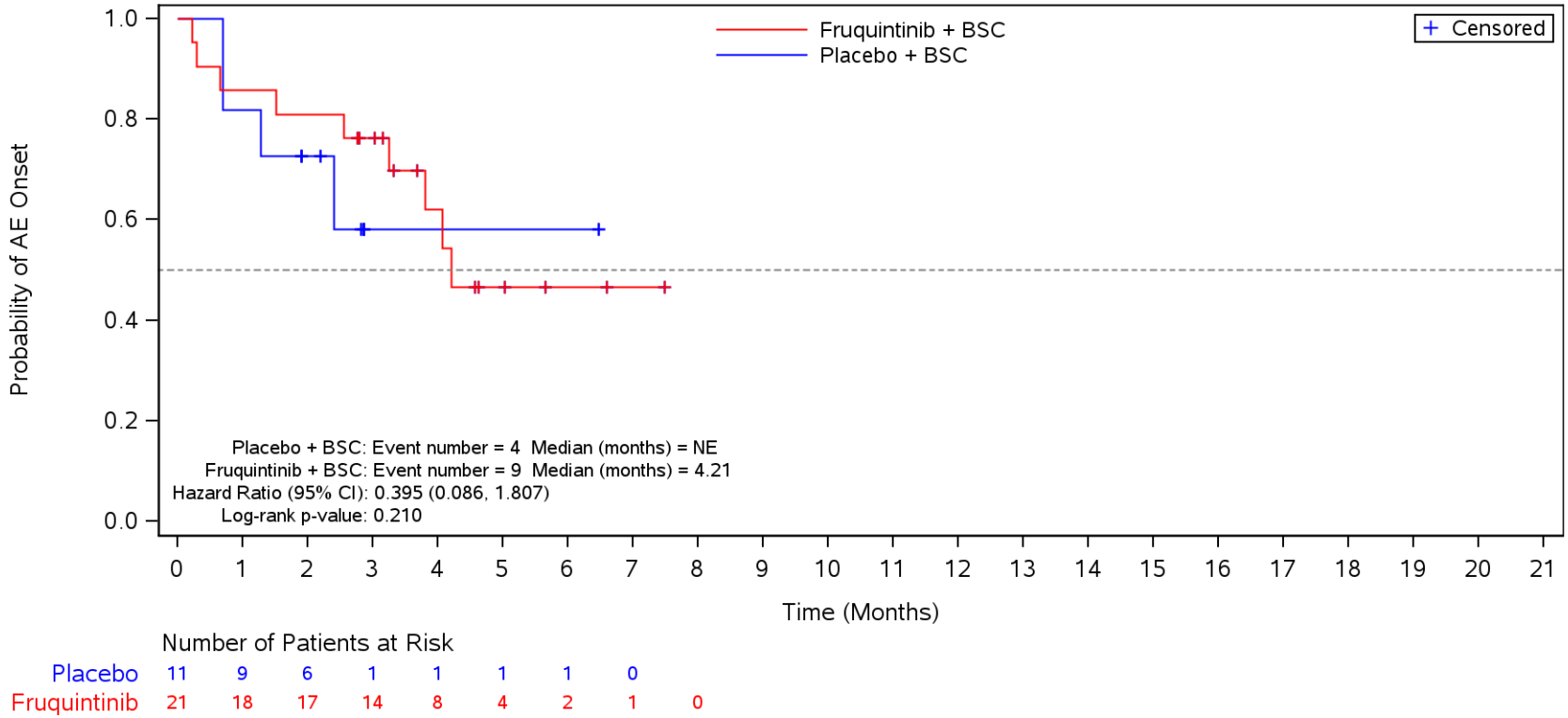
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE
No



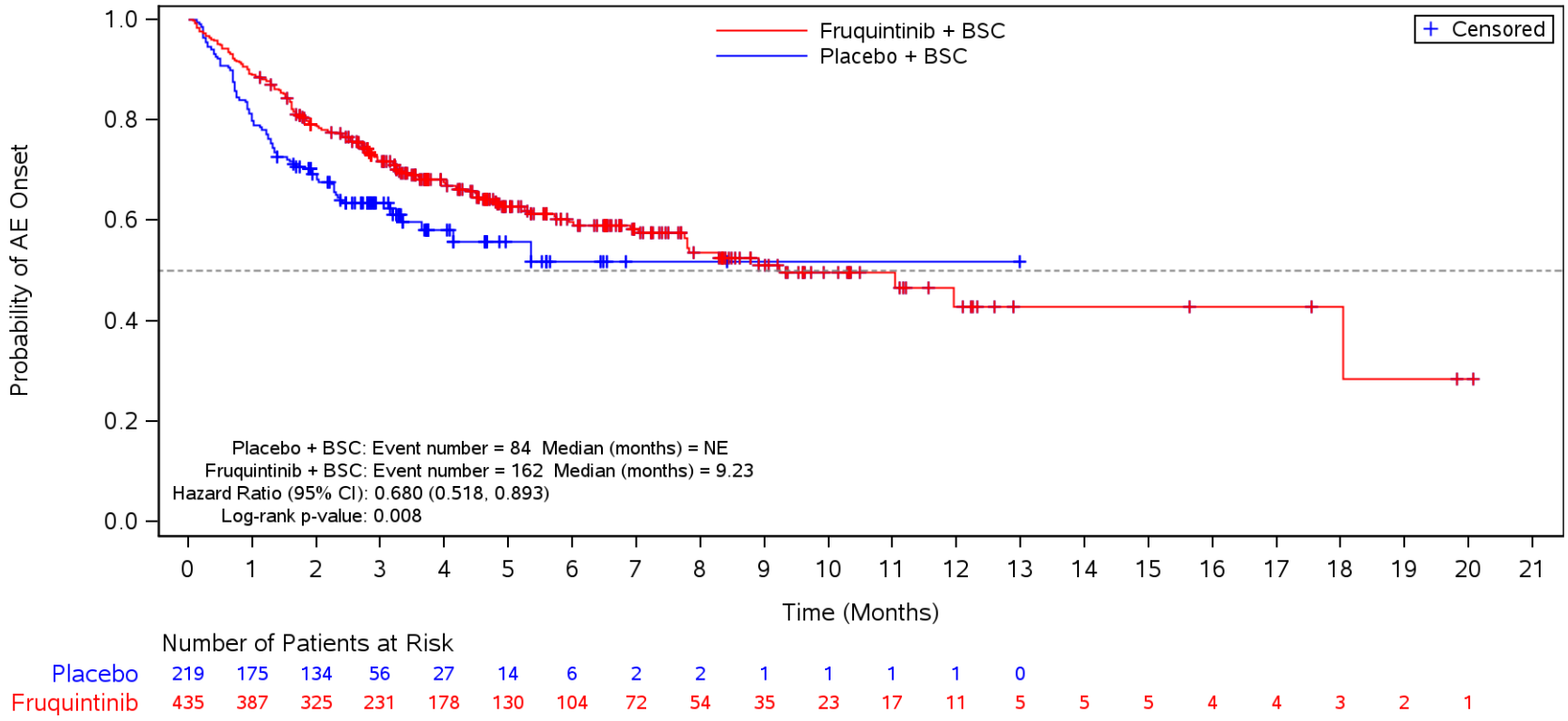
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
Serious TEAE
Yes



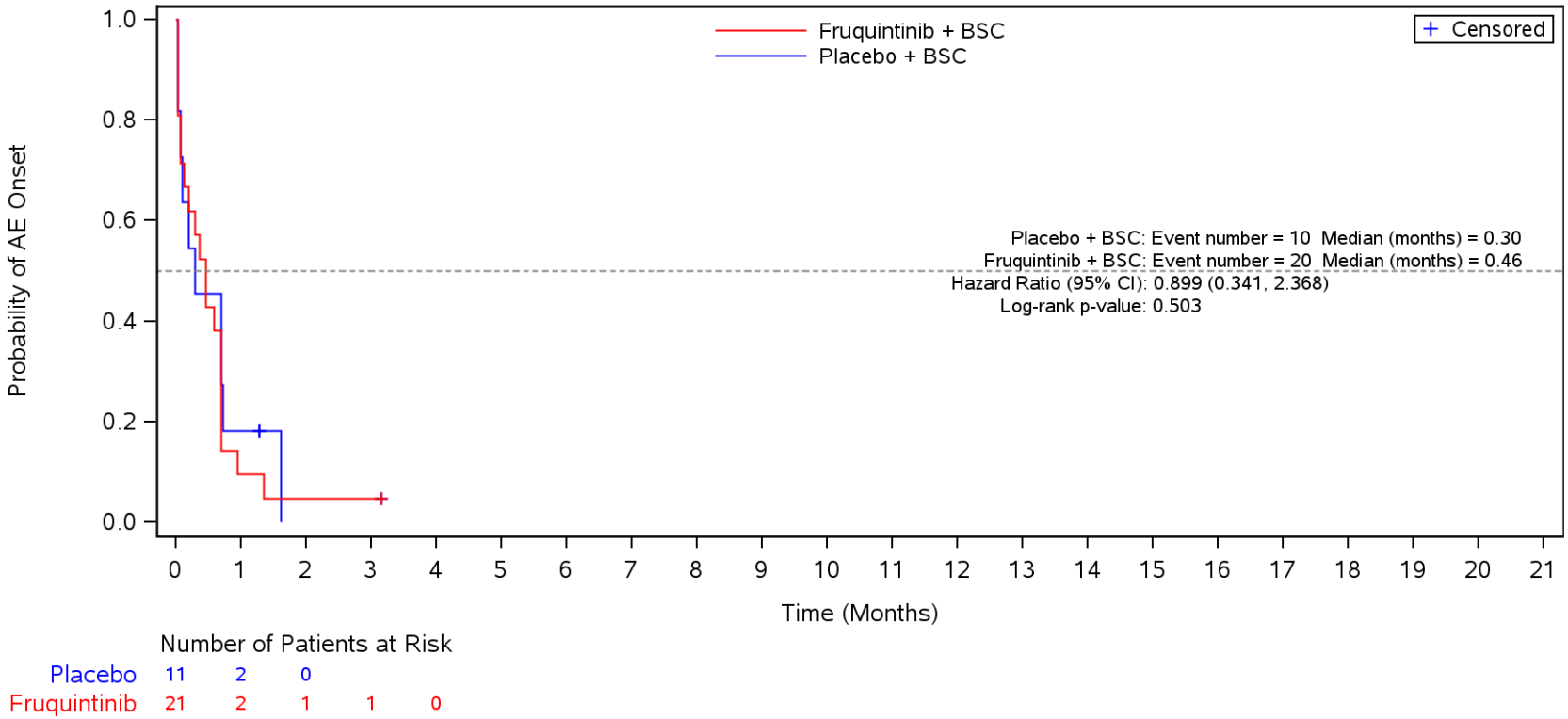
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
Serious TEAE
No



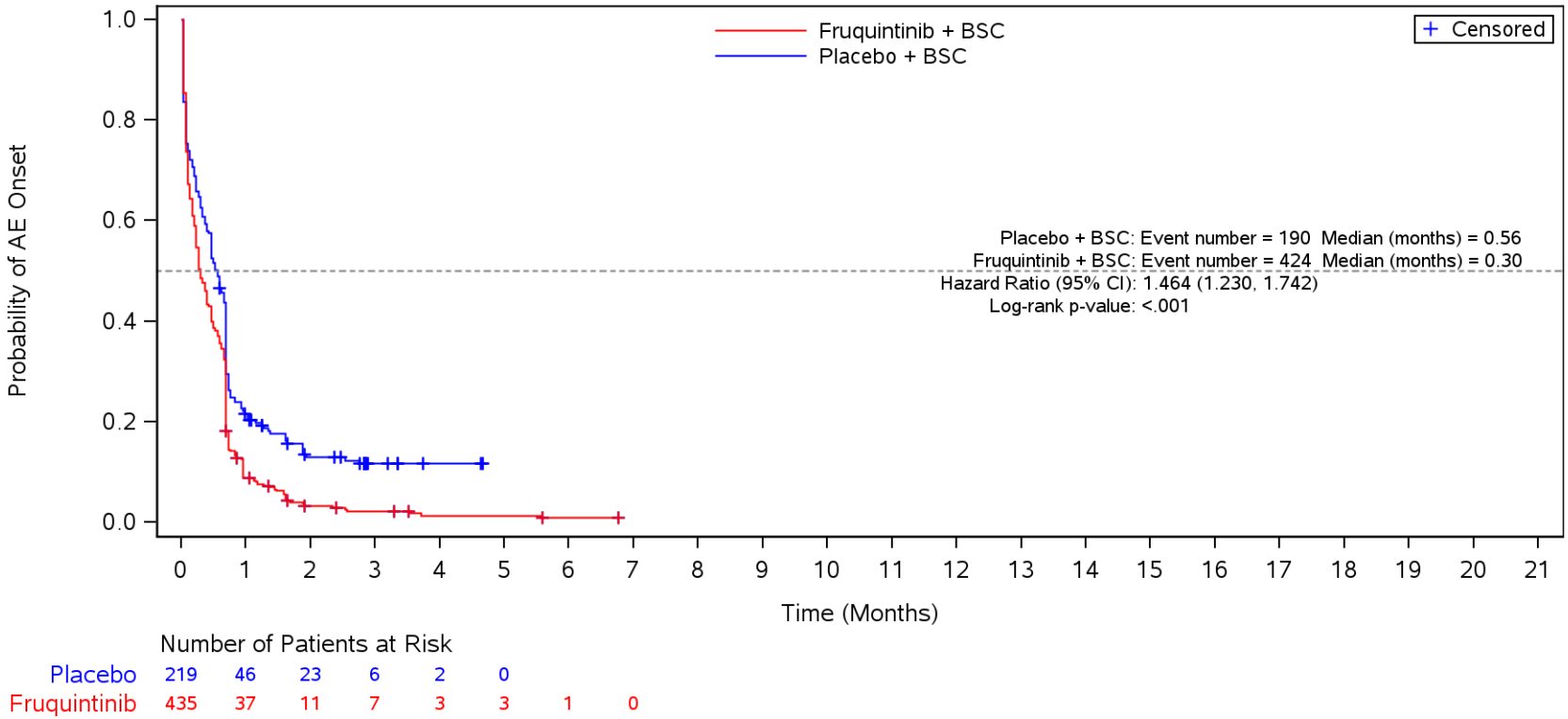
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≤ CTCAE Grade 2
Yes



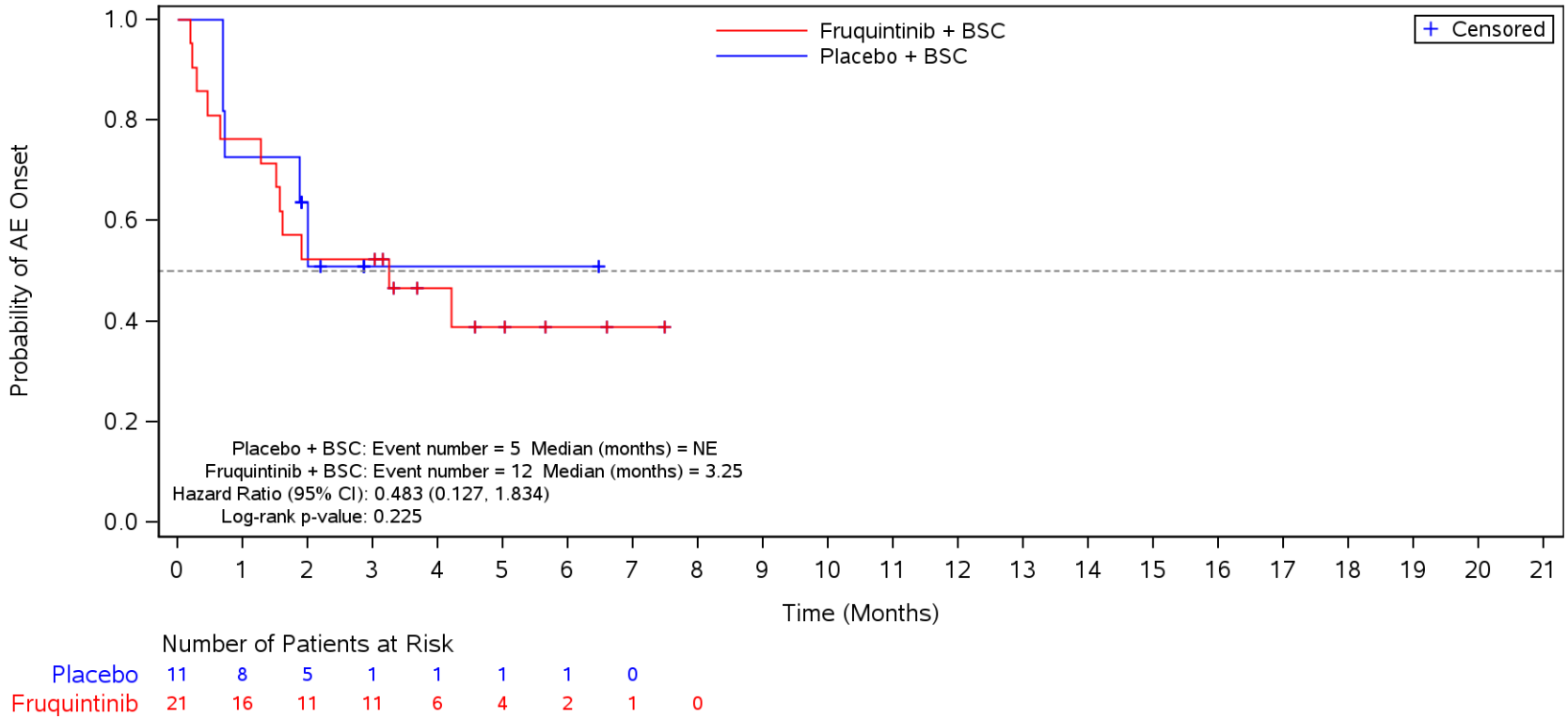
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≤ CTCAE Grade 2
No



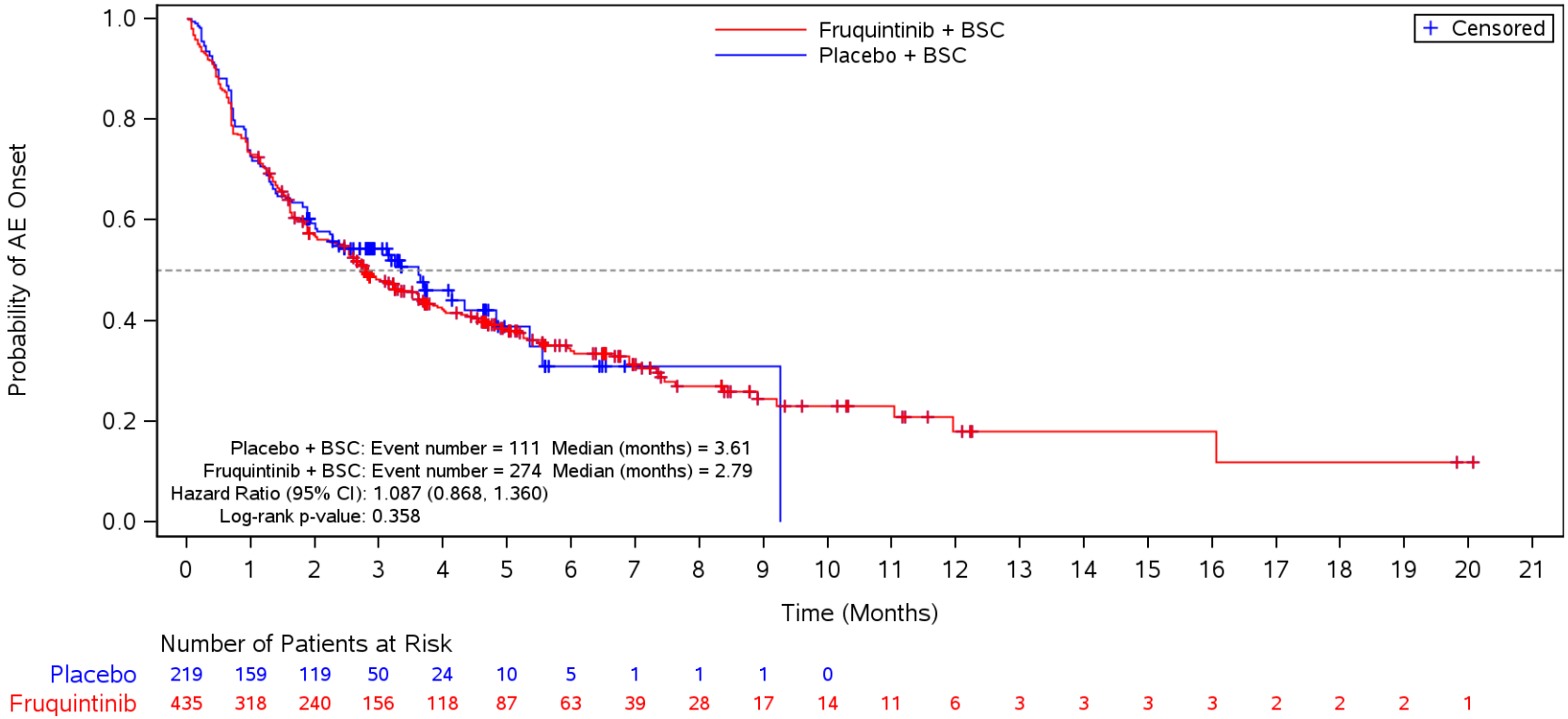
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3
Yes



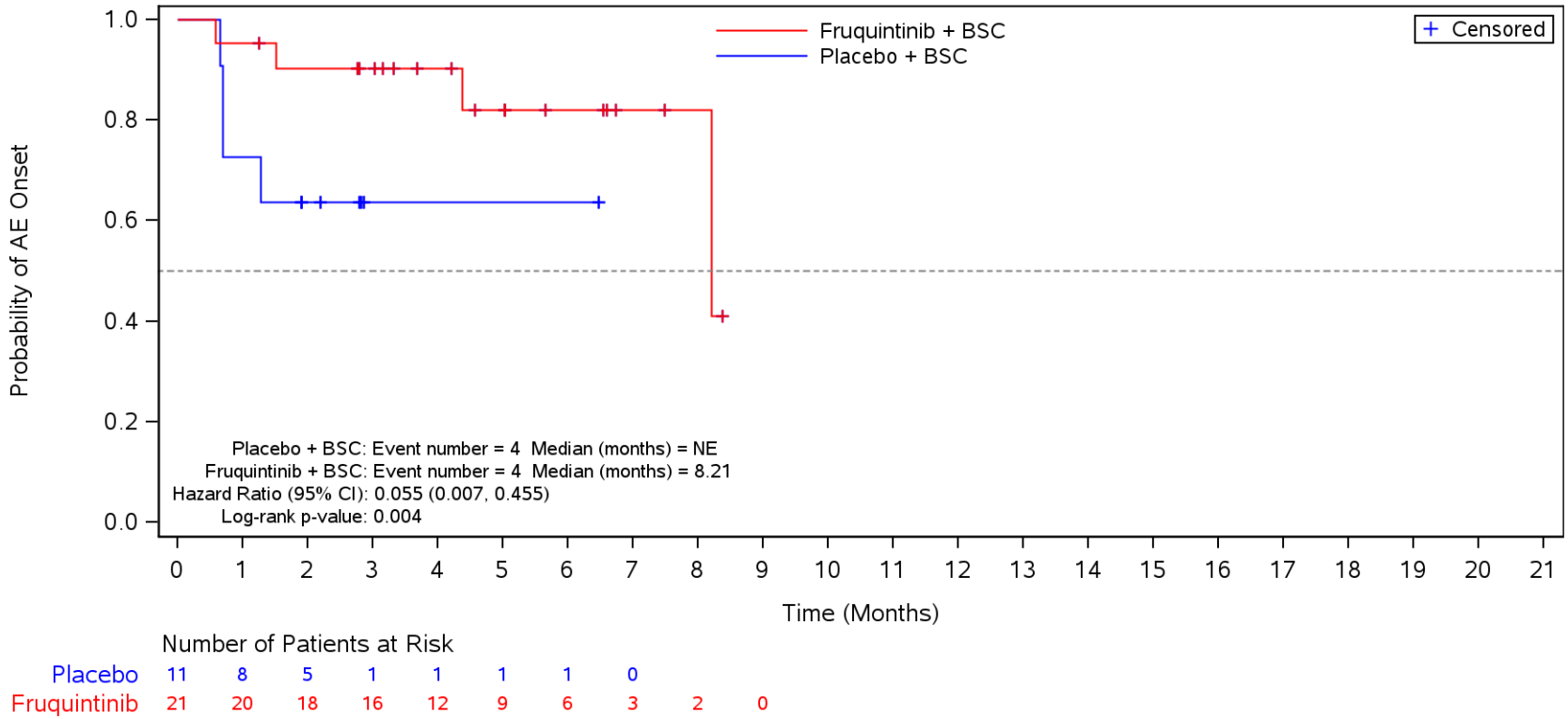
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3
No



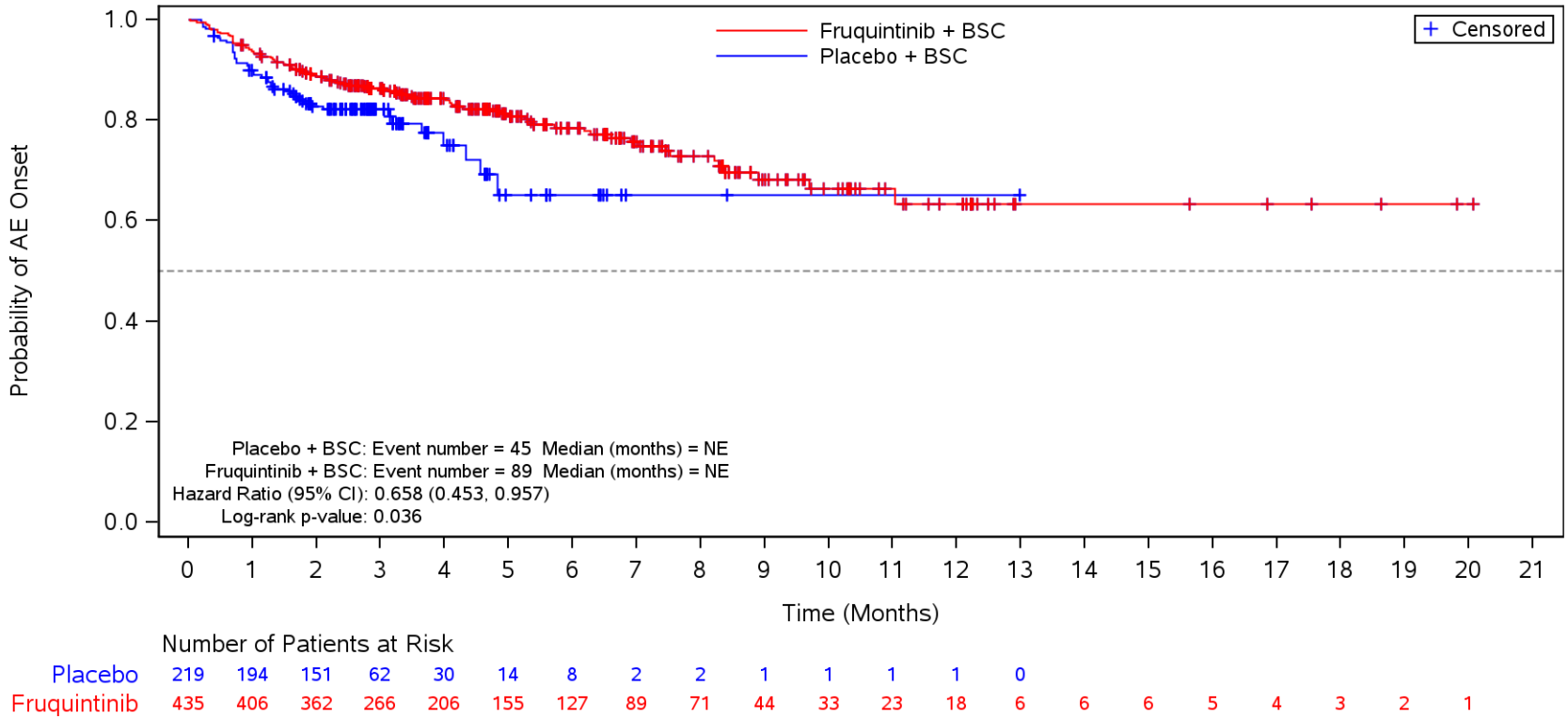
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
Discontinuation due to TEAE
Yes



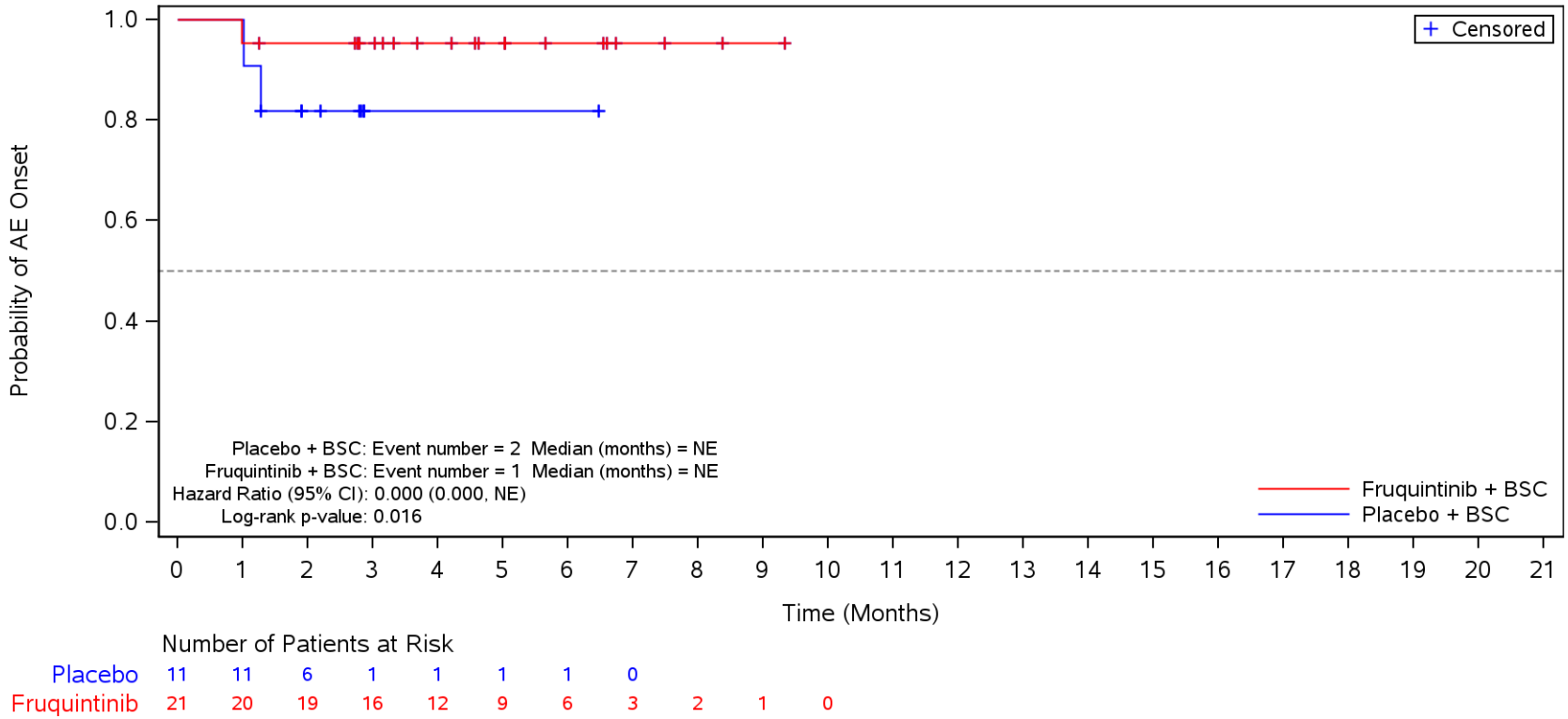
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
Discontinuation due to TEAE
No



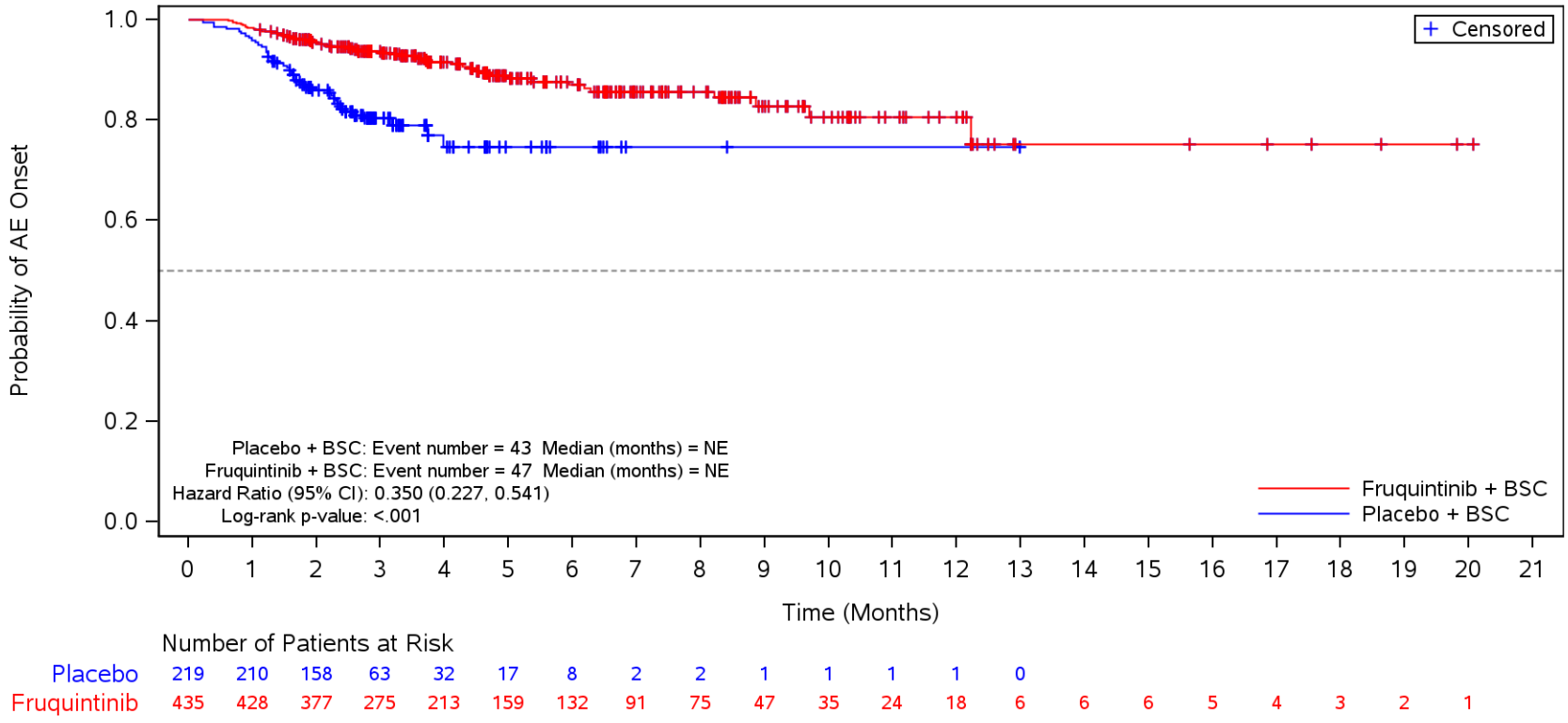
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
Deaths (Grade 5 TEAEs)
Yes



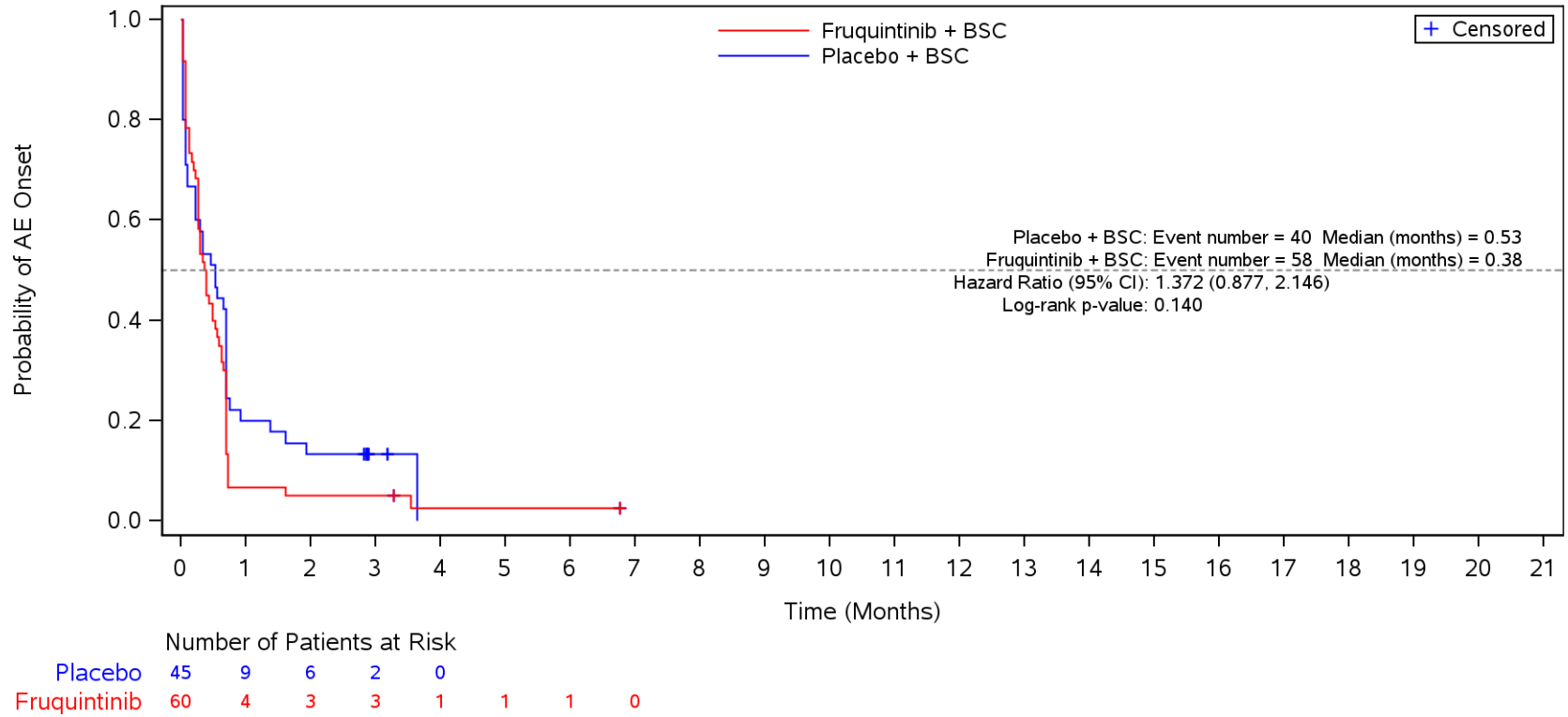
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE
Single



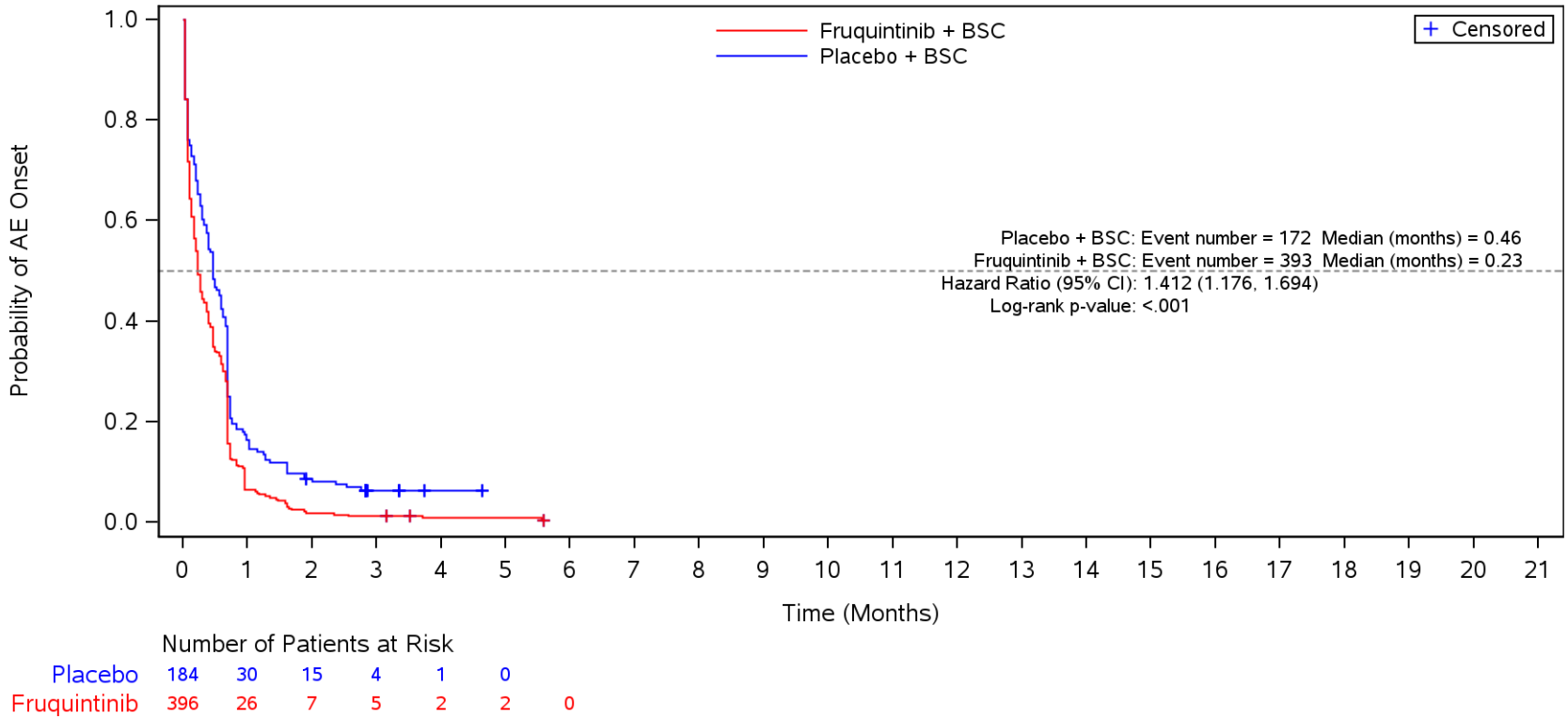
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE
Single



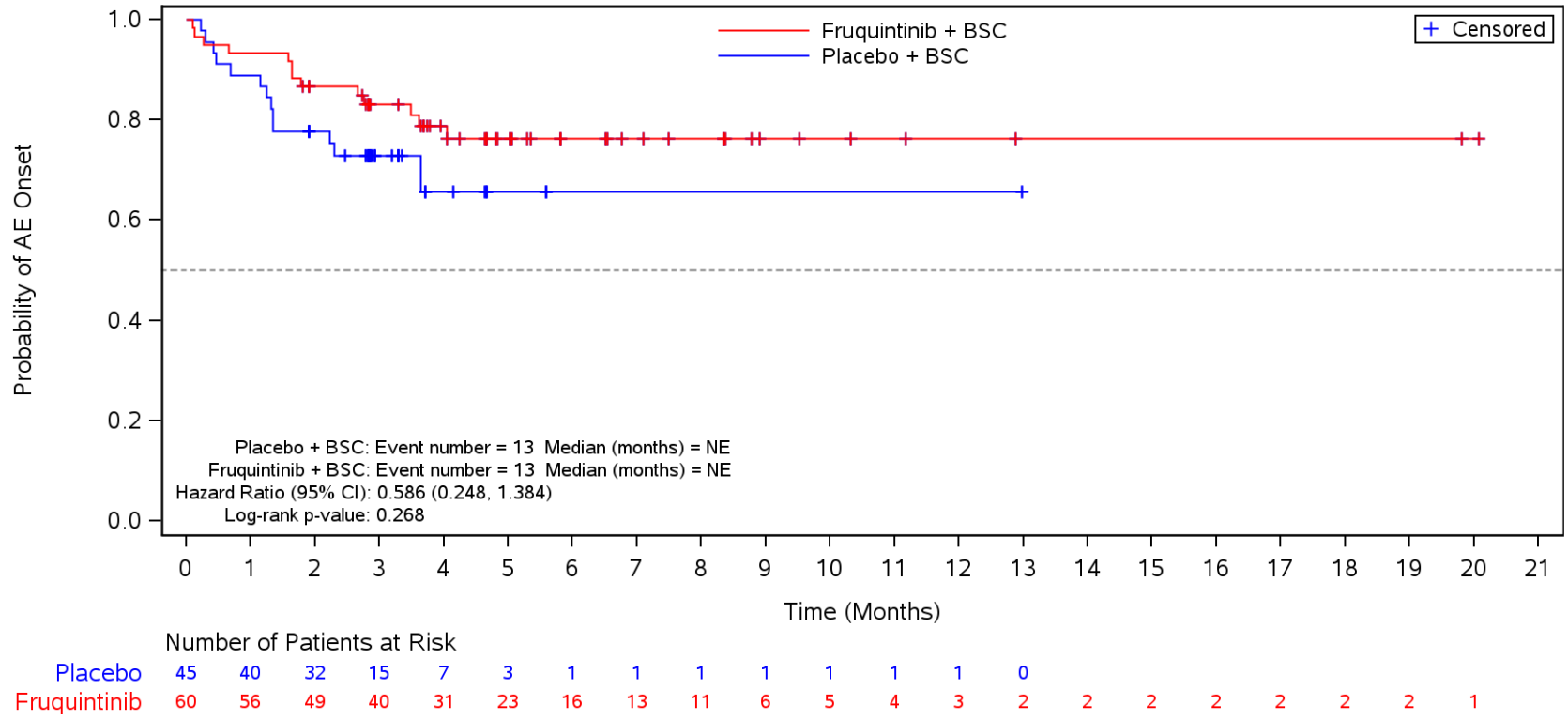
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE
Multiple



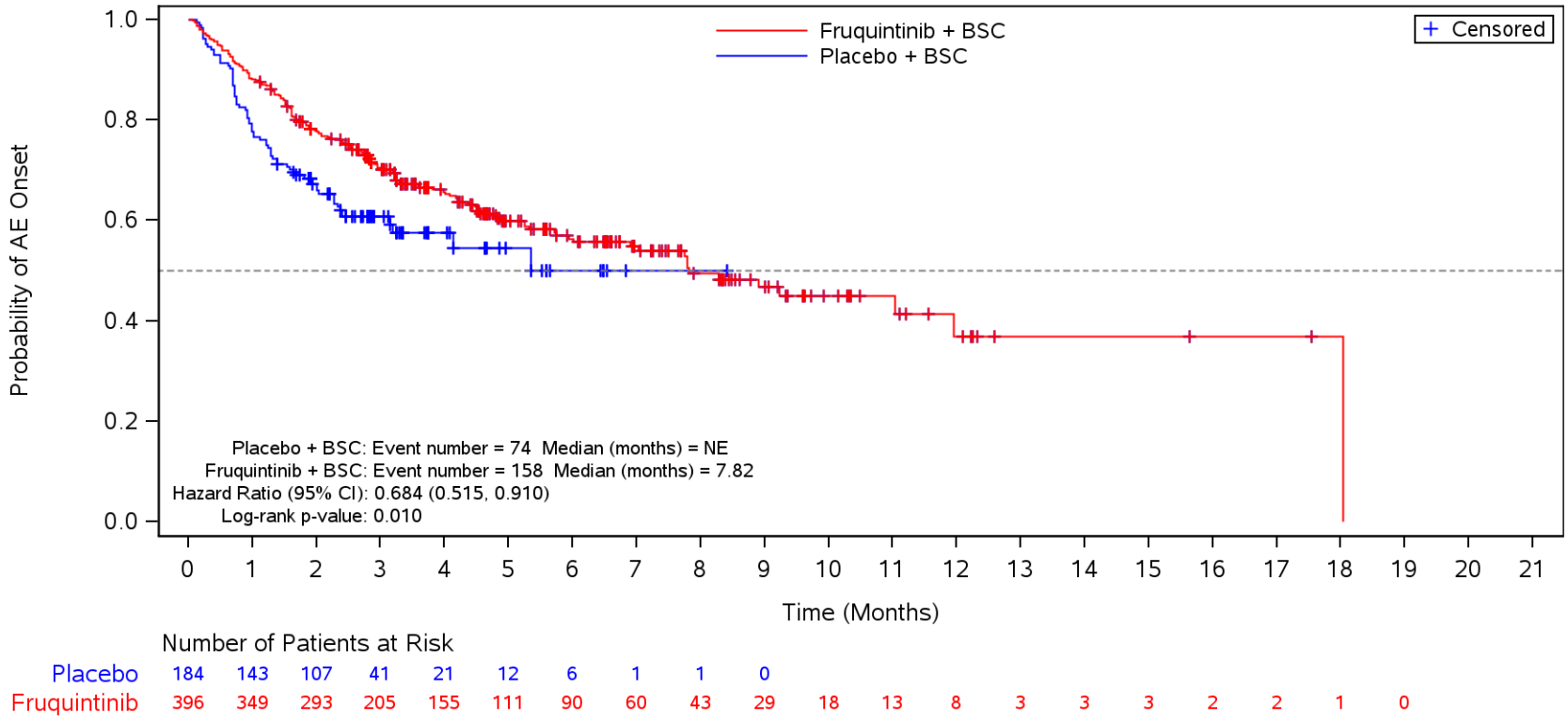
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Serious TEAE
Single



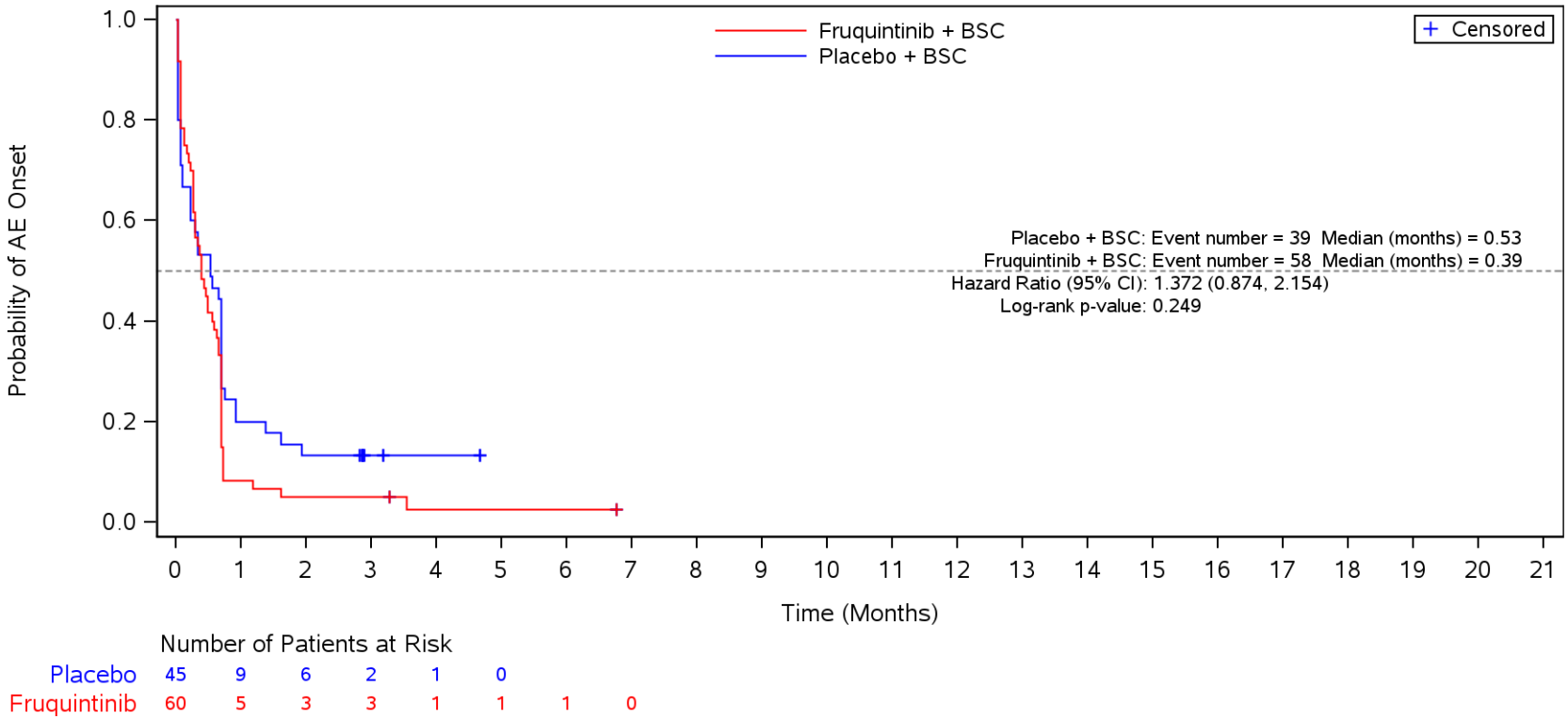
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Serious TEAE
Multiple



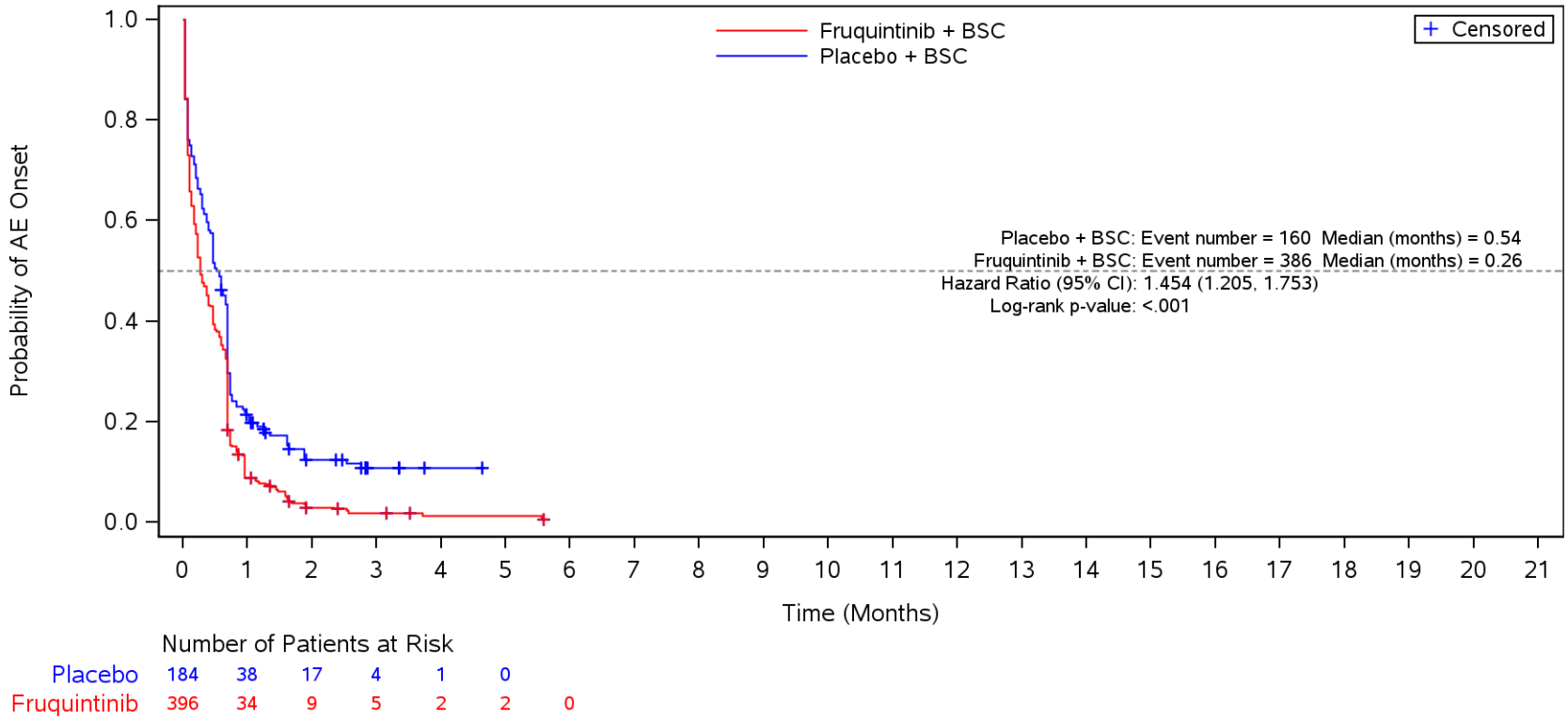
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≤ CTCAE Grade 2
Single



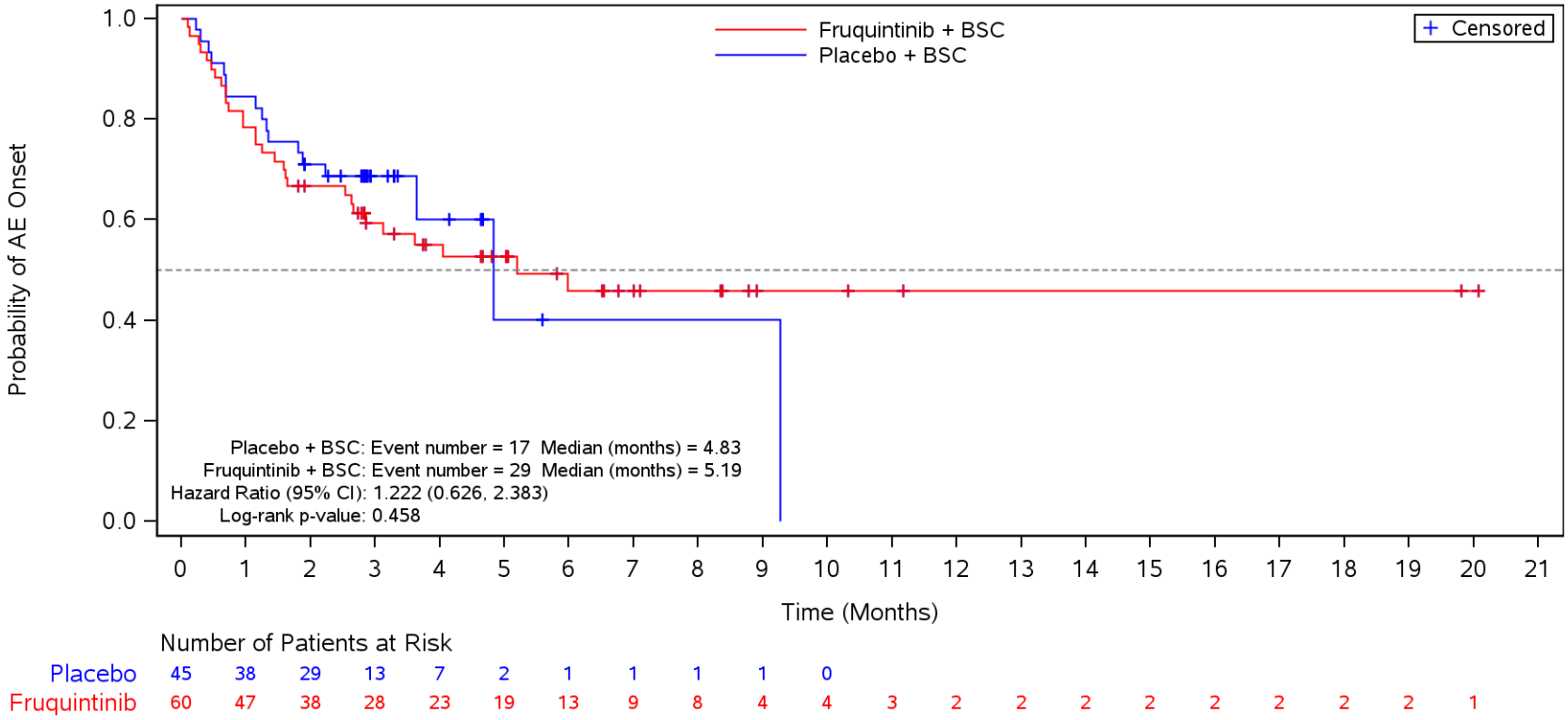
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≤ CTCAE Grade 2
Multiple



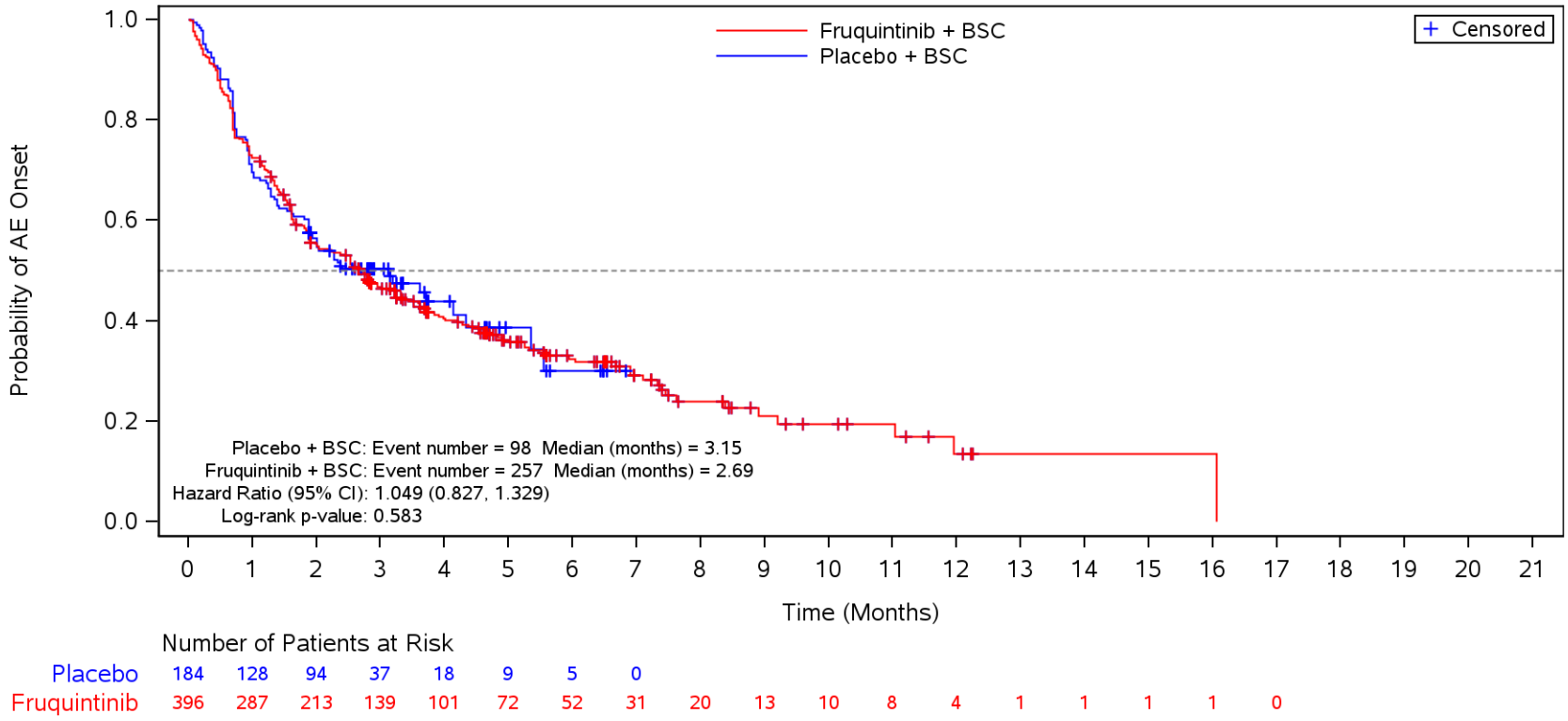
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3
Single



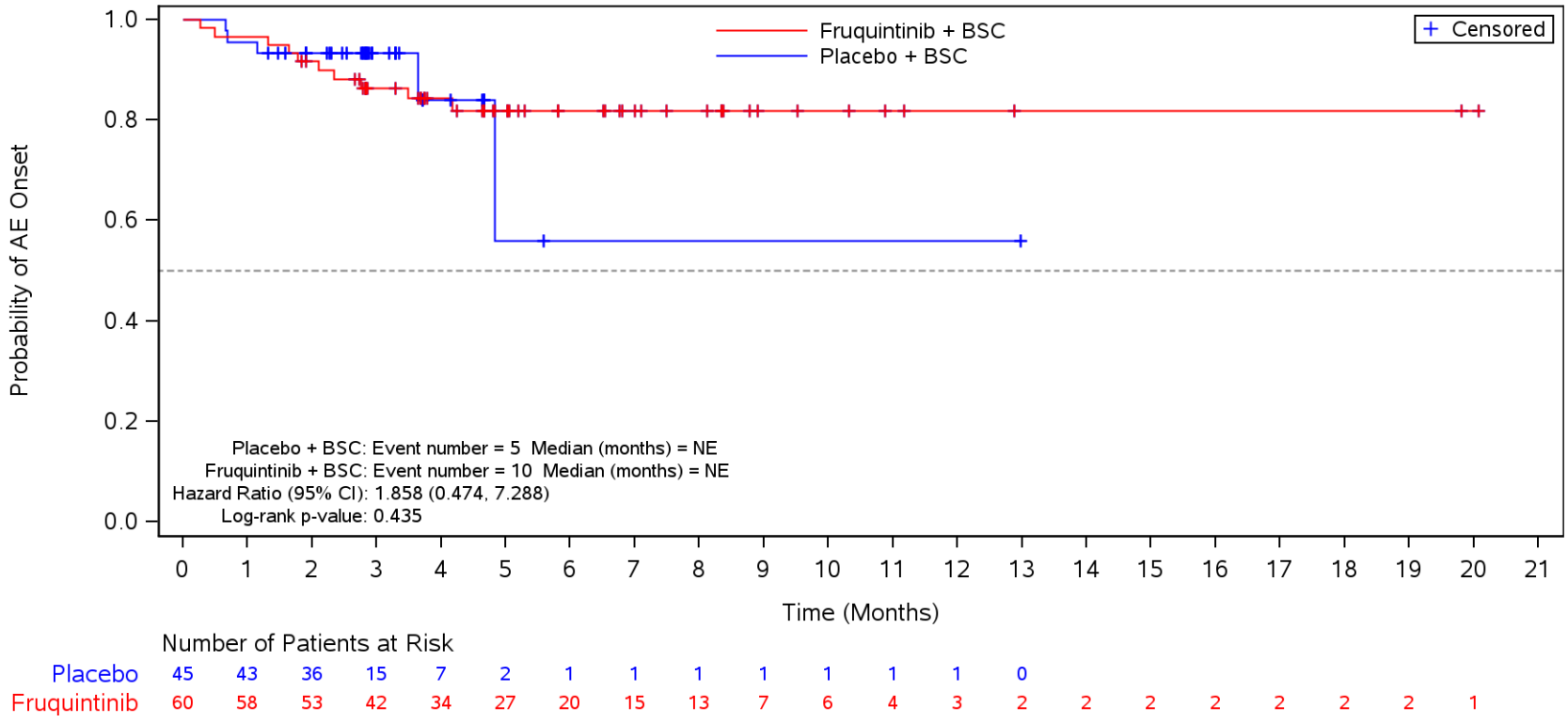
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3
Multiple



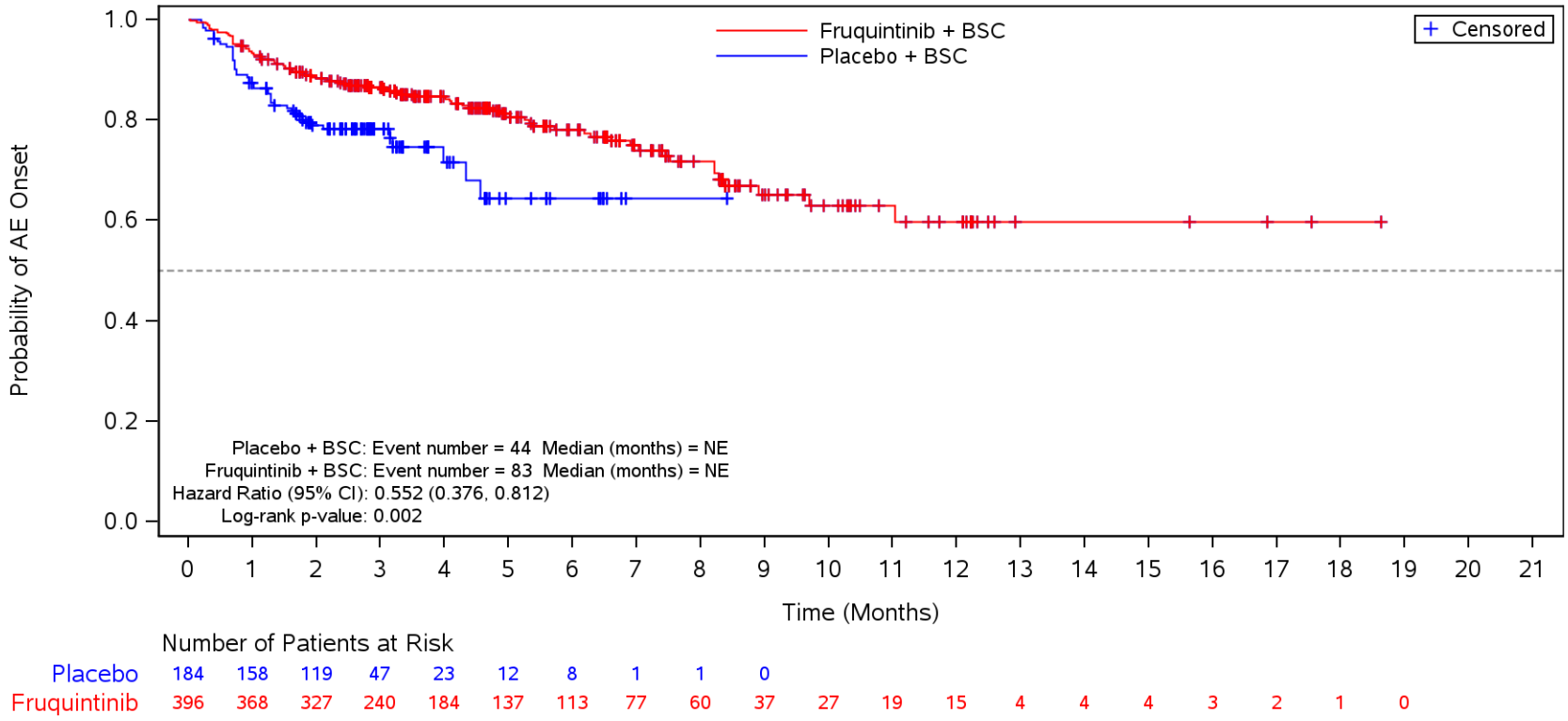
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Discontinuation due to TEAE
Single



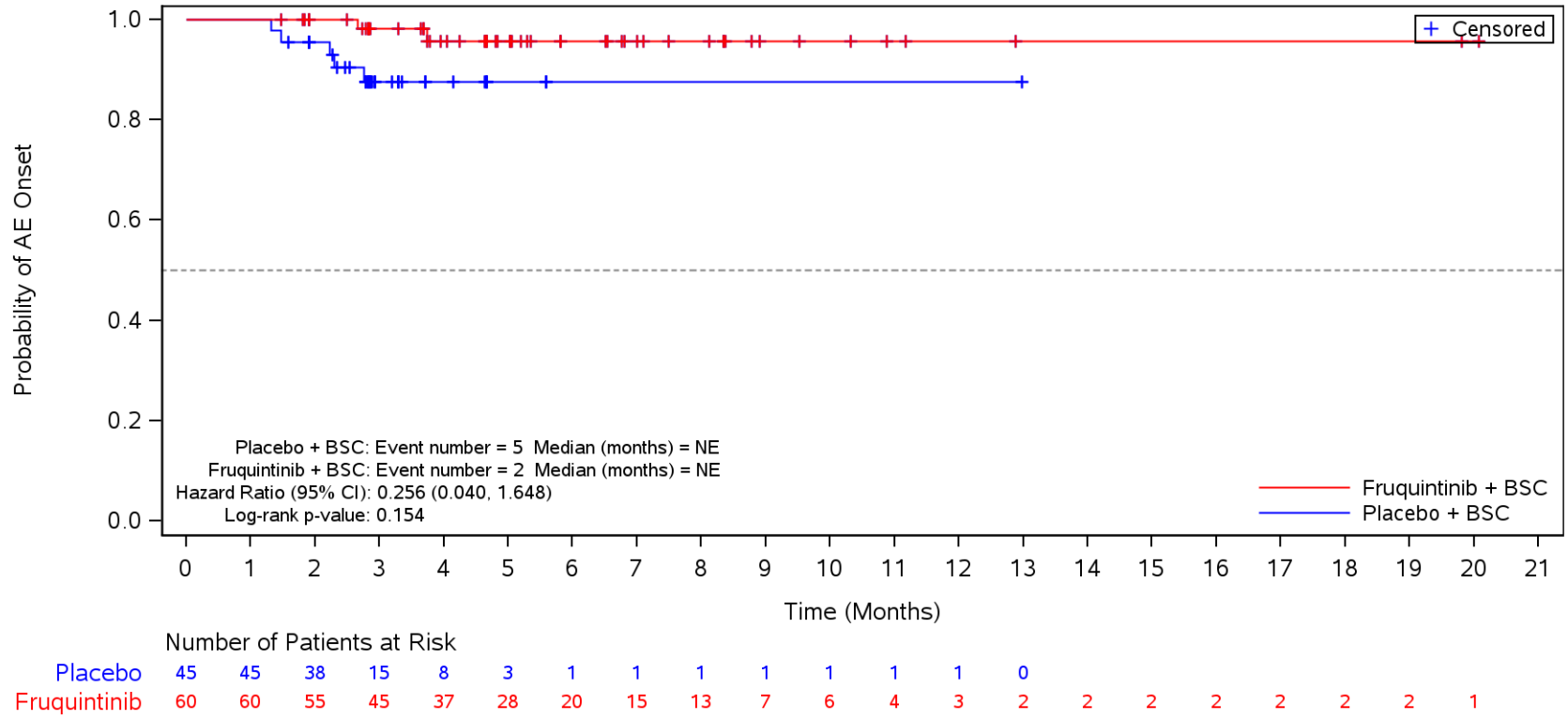
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Discontinuation due to TEAE
Multiple



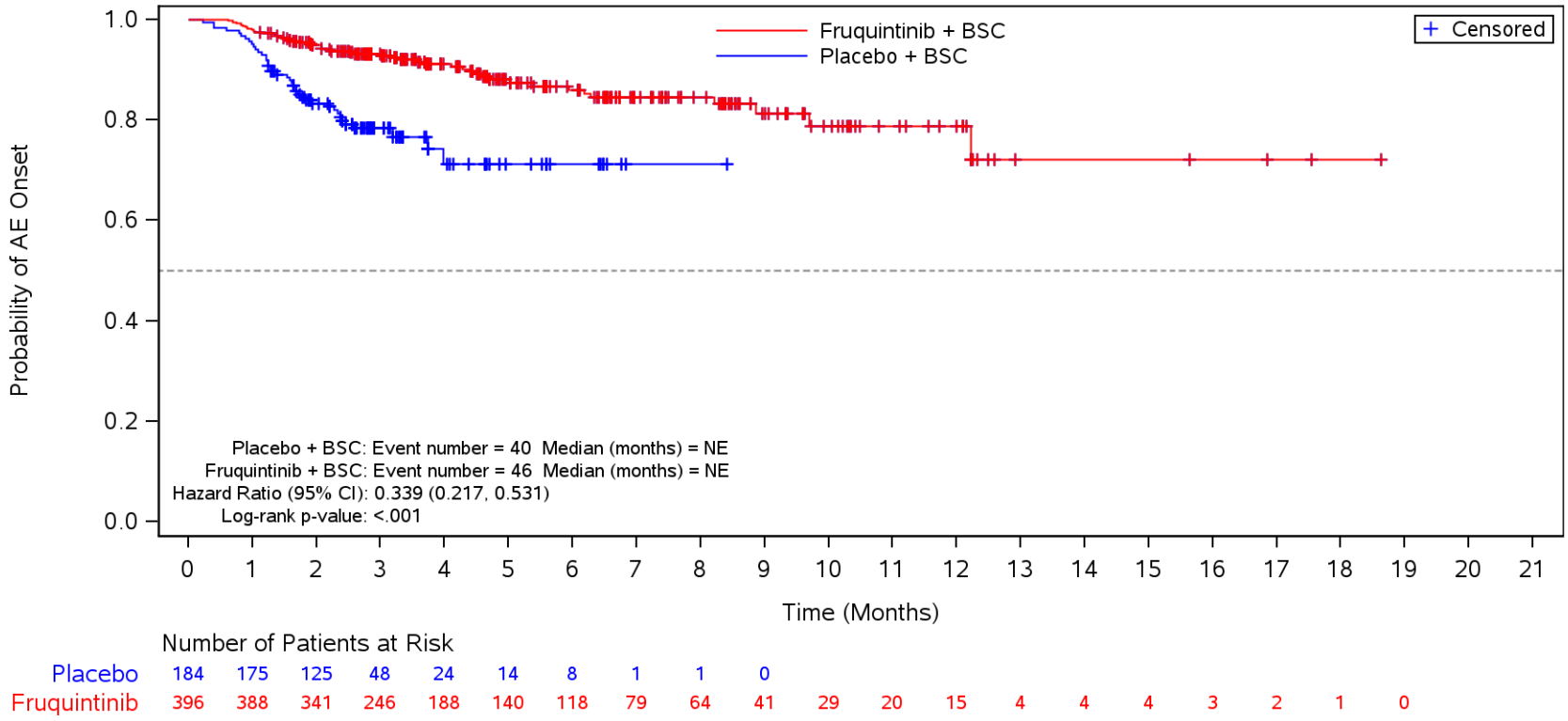
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Deaths (Grade 5 TEAEs)
Single



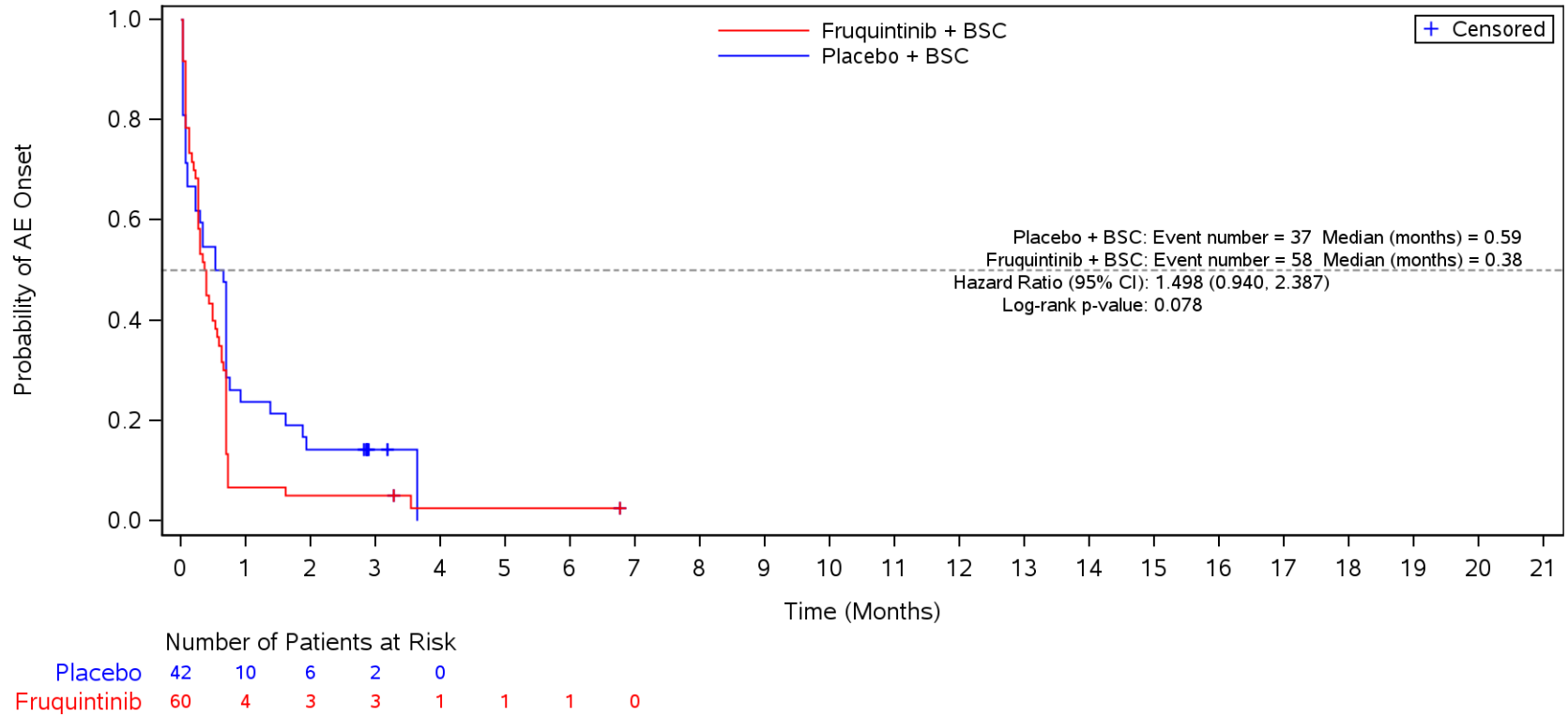
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
TEAE
Single



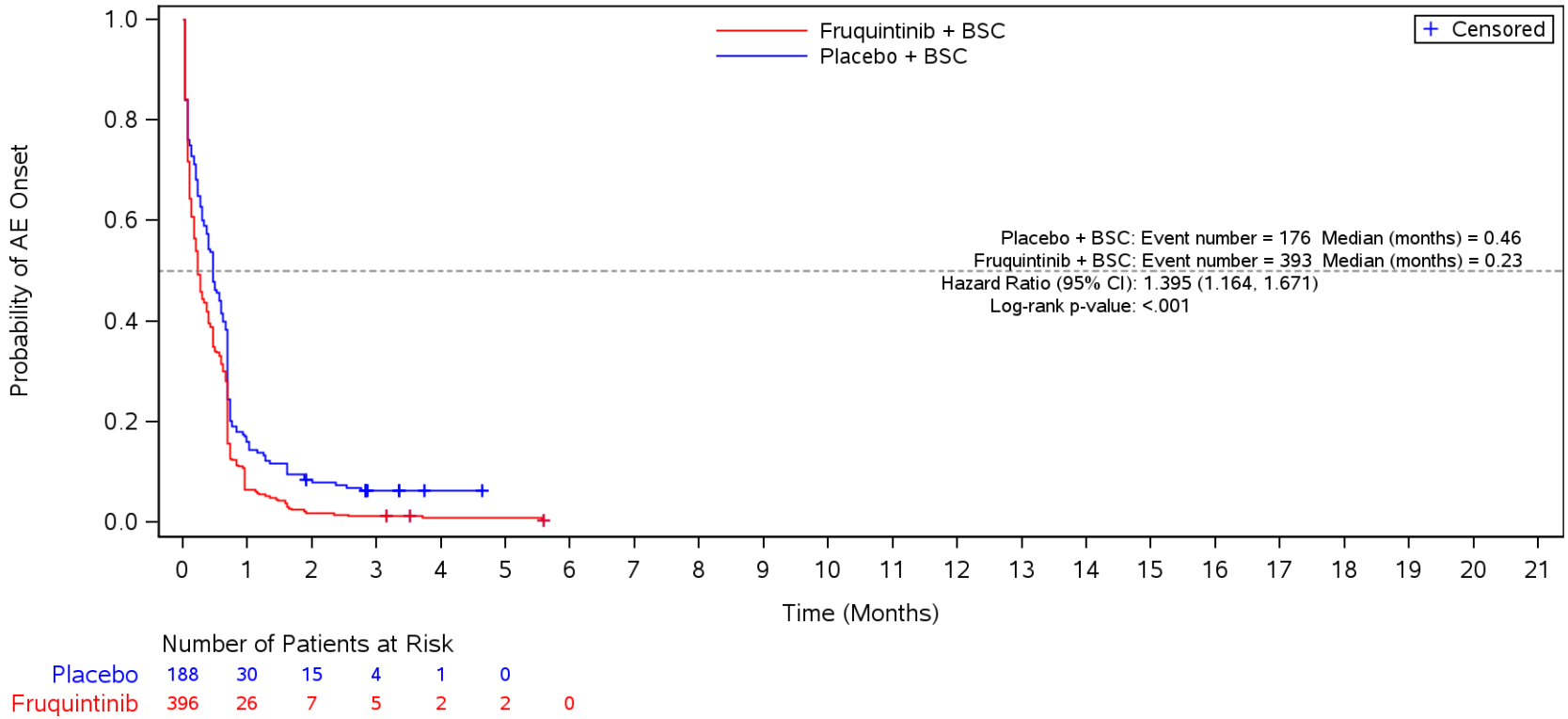
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
TEAE
Single



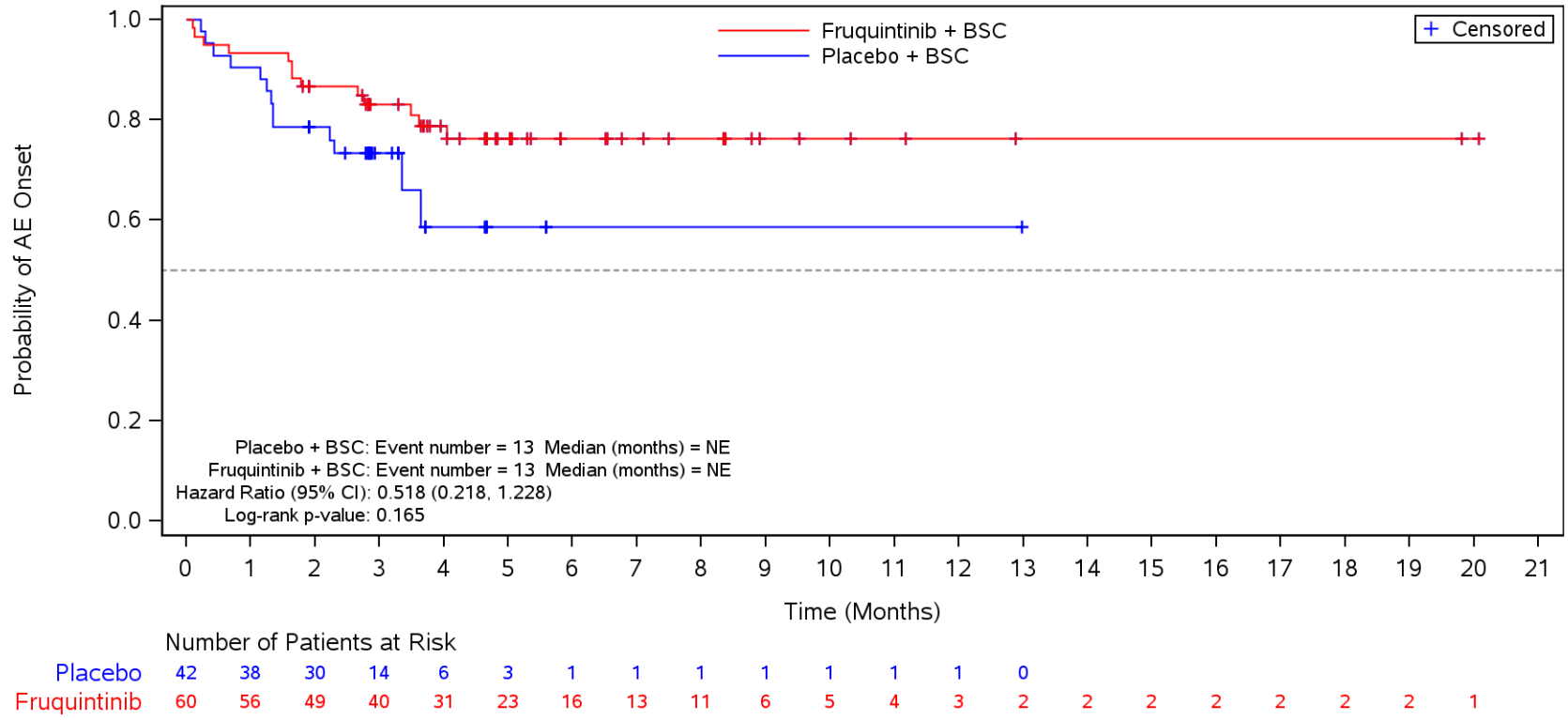
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
TEAE
Multiple



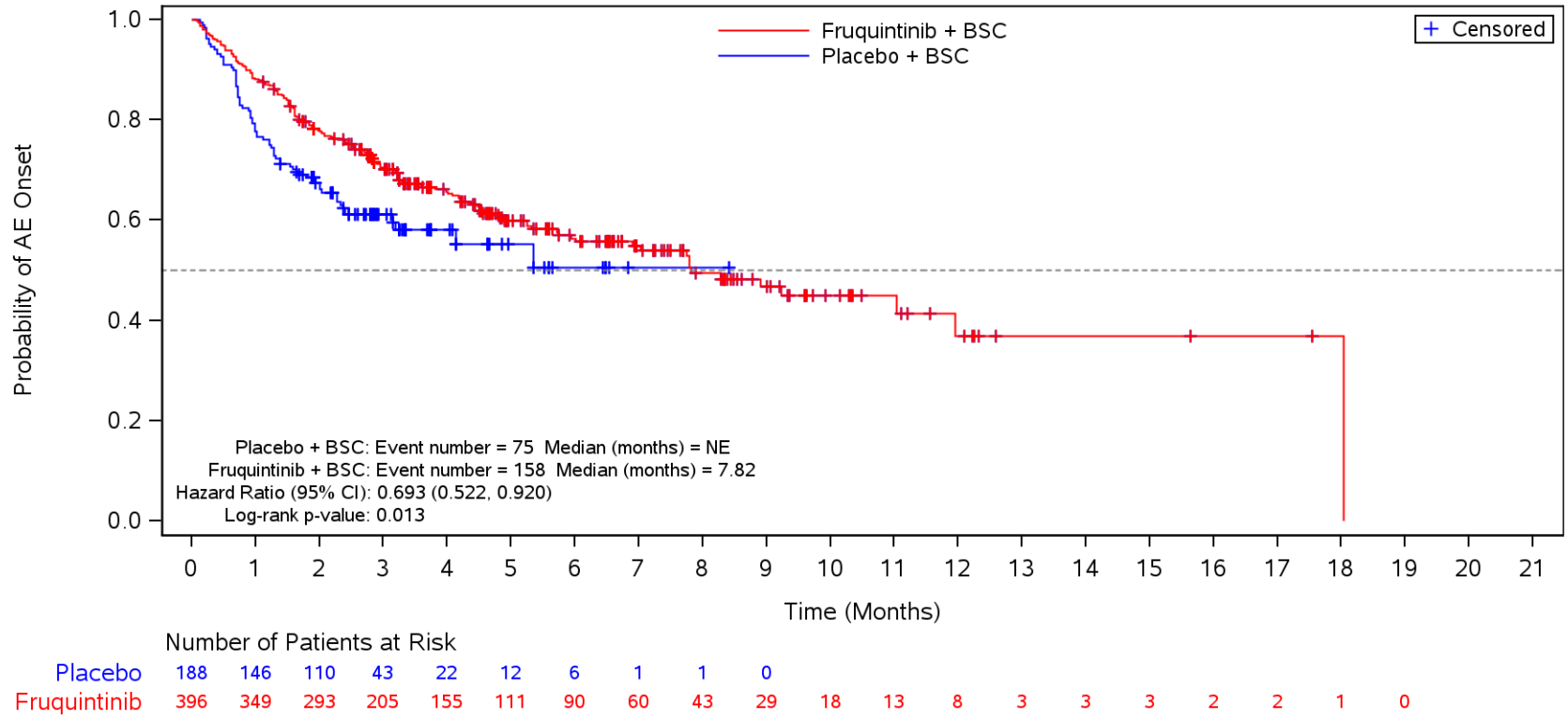
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
Serious TEAE
Single



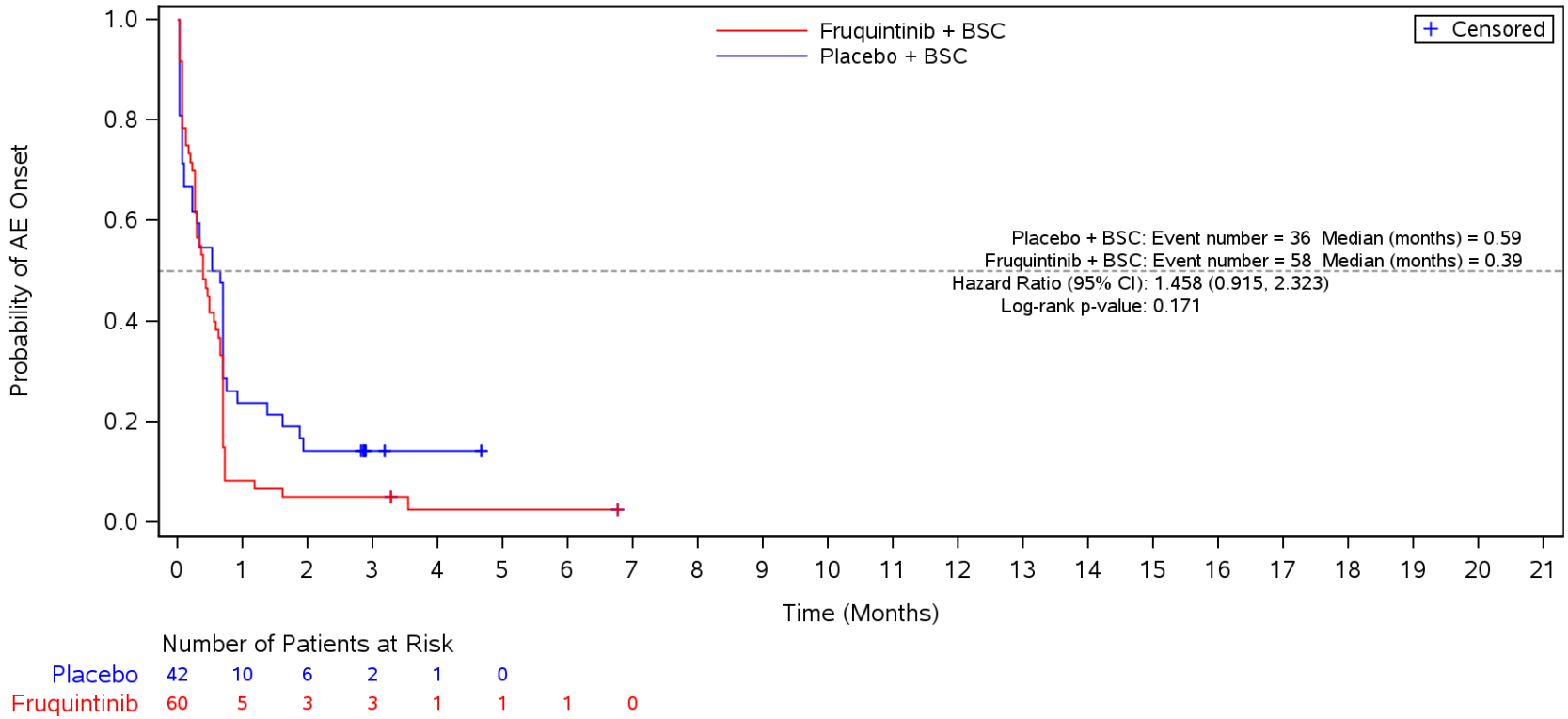
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
Serious TEAE
Multiple



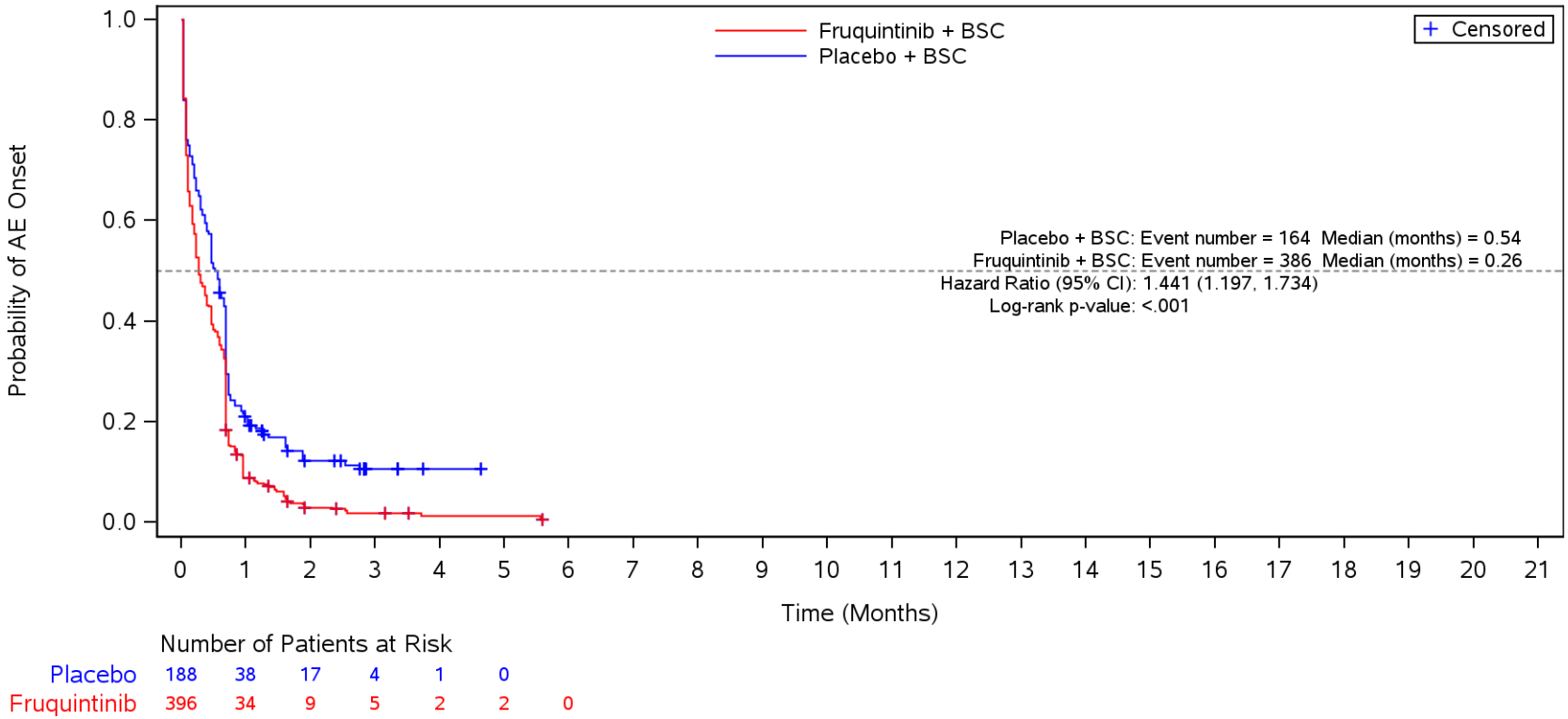
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
TEAE ≤ CTCAE Grade 2
Single



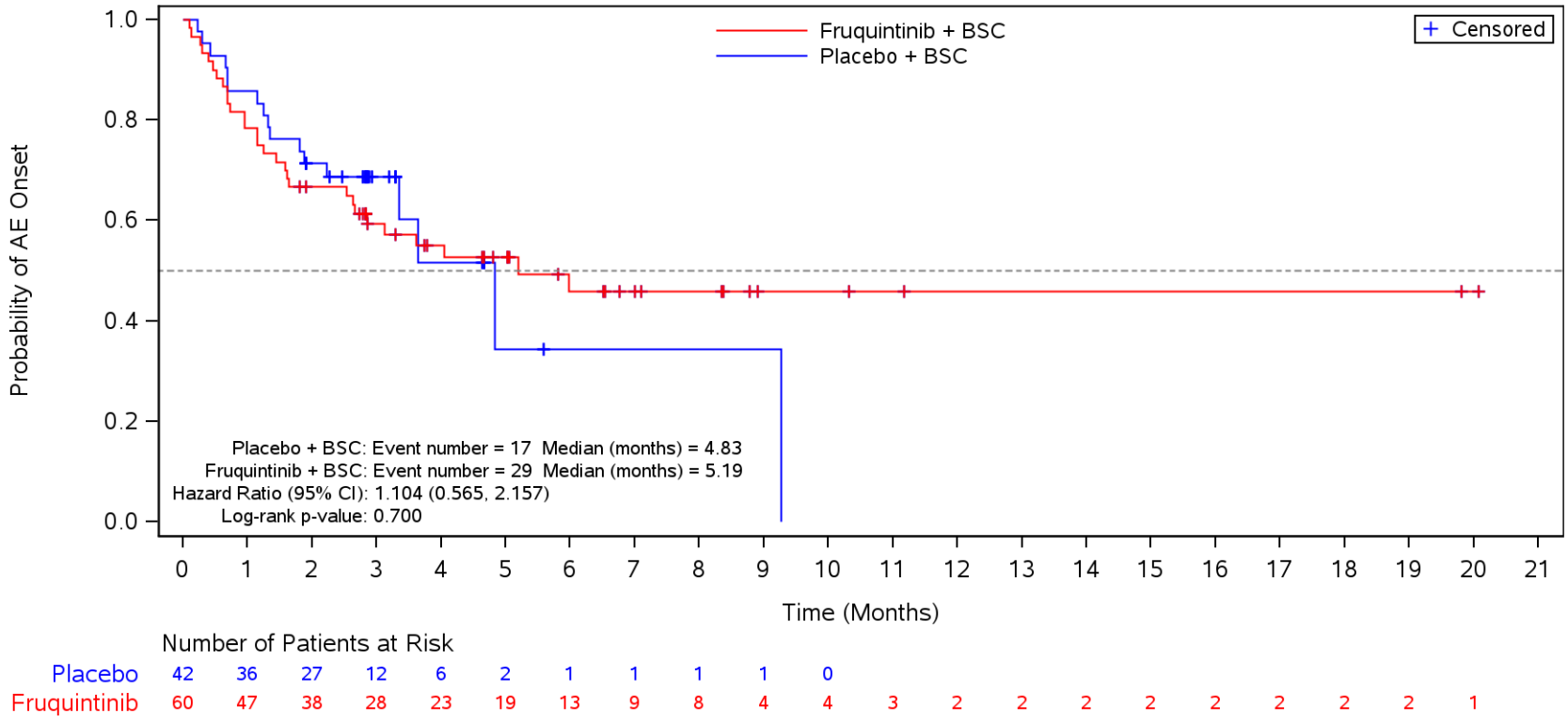
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
TEAE ≤ CTCAE Grade 2
Multiple



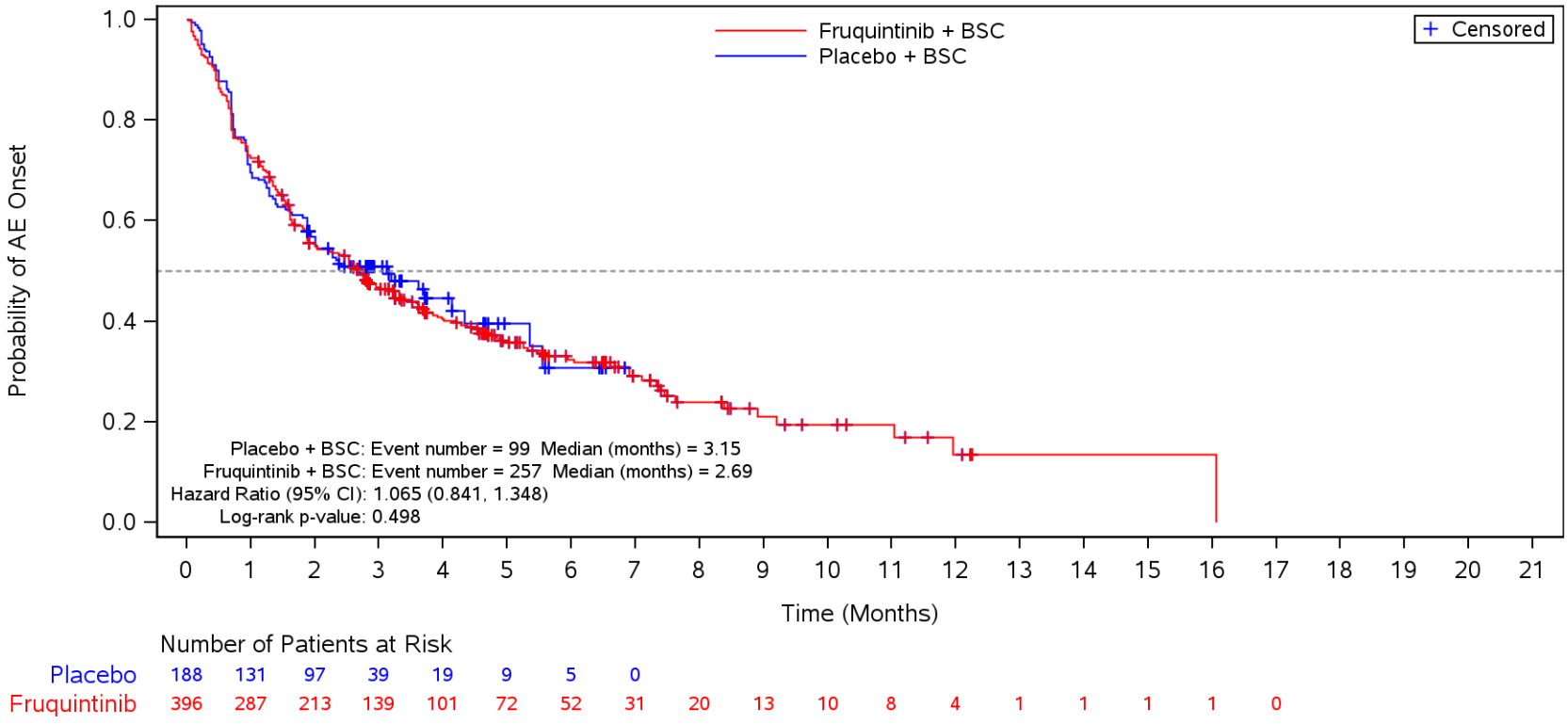
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3
Single



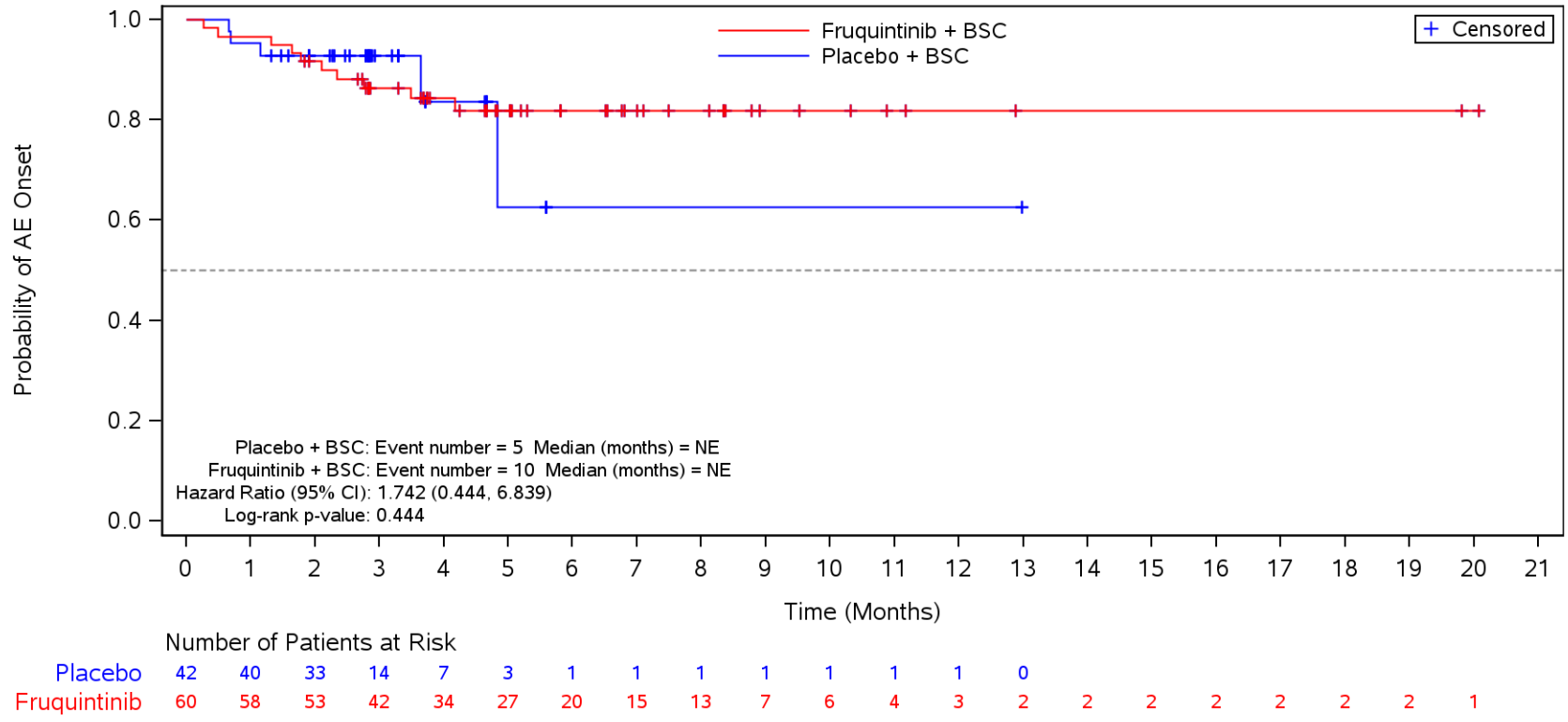
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3
Multiple



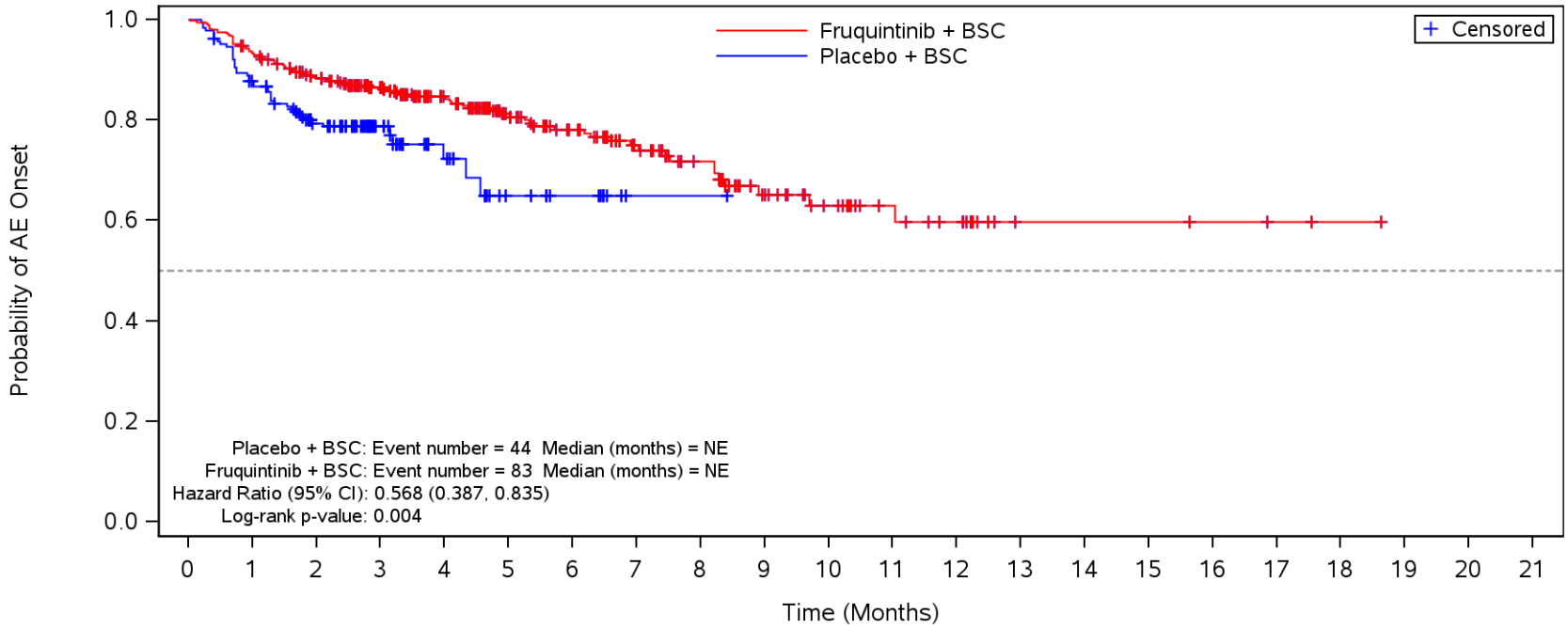
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
Discontinuation due to TEAE
Single



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
Discontinuation due to TEAE
Multiple

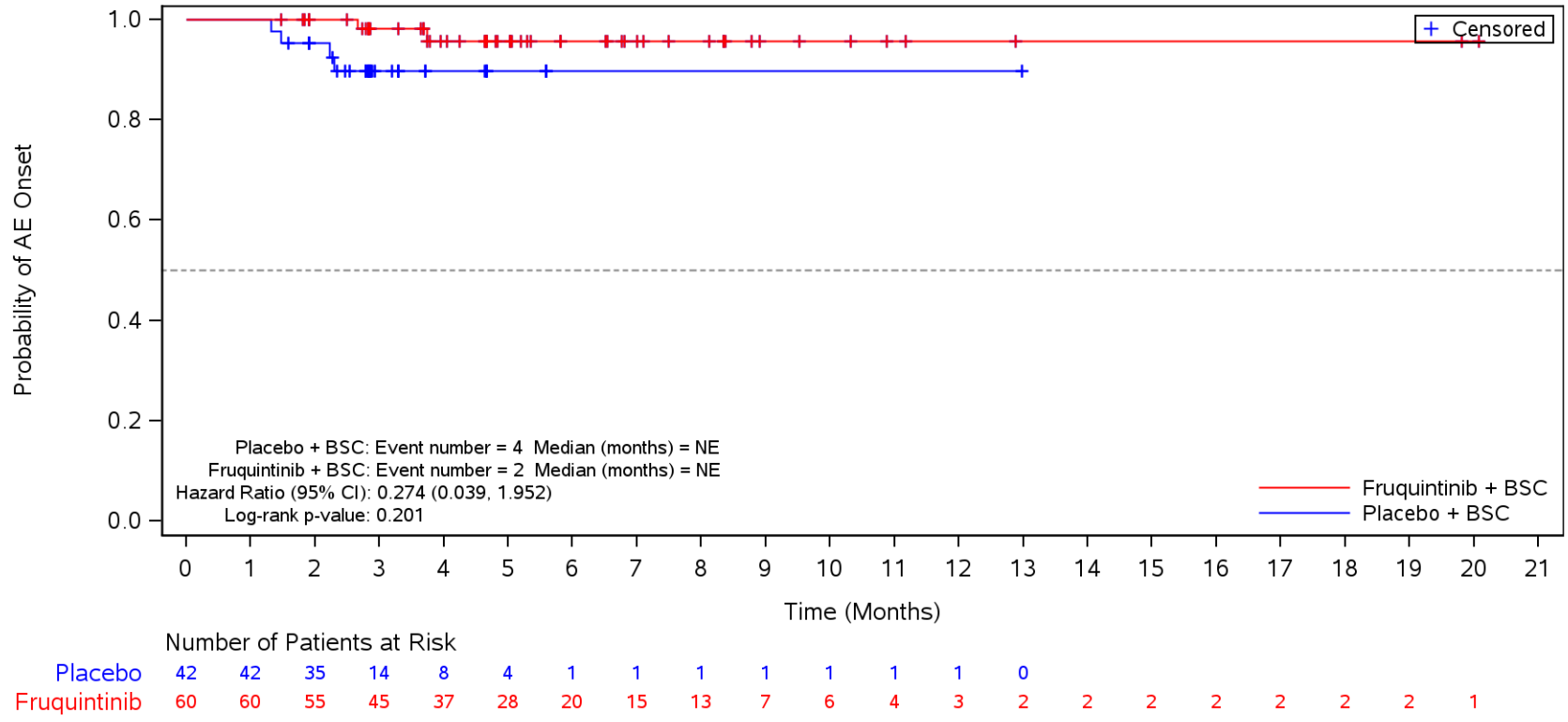


Number of Patients at Risk

Placebo	188	162	123	49	24	12	8	1	1	0										
Fruquintinib	396	368	327	240	184	137	113	77	60	37	27	19	15	4	4	4	3	2	1	0

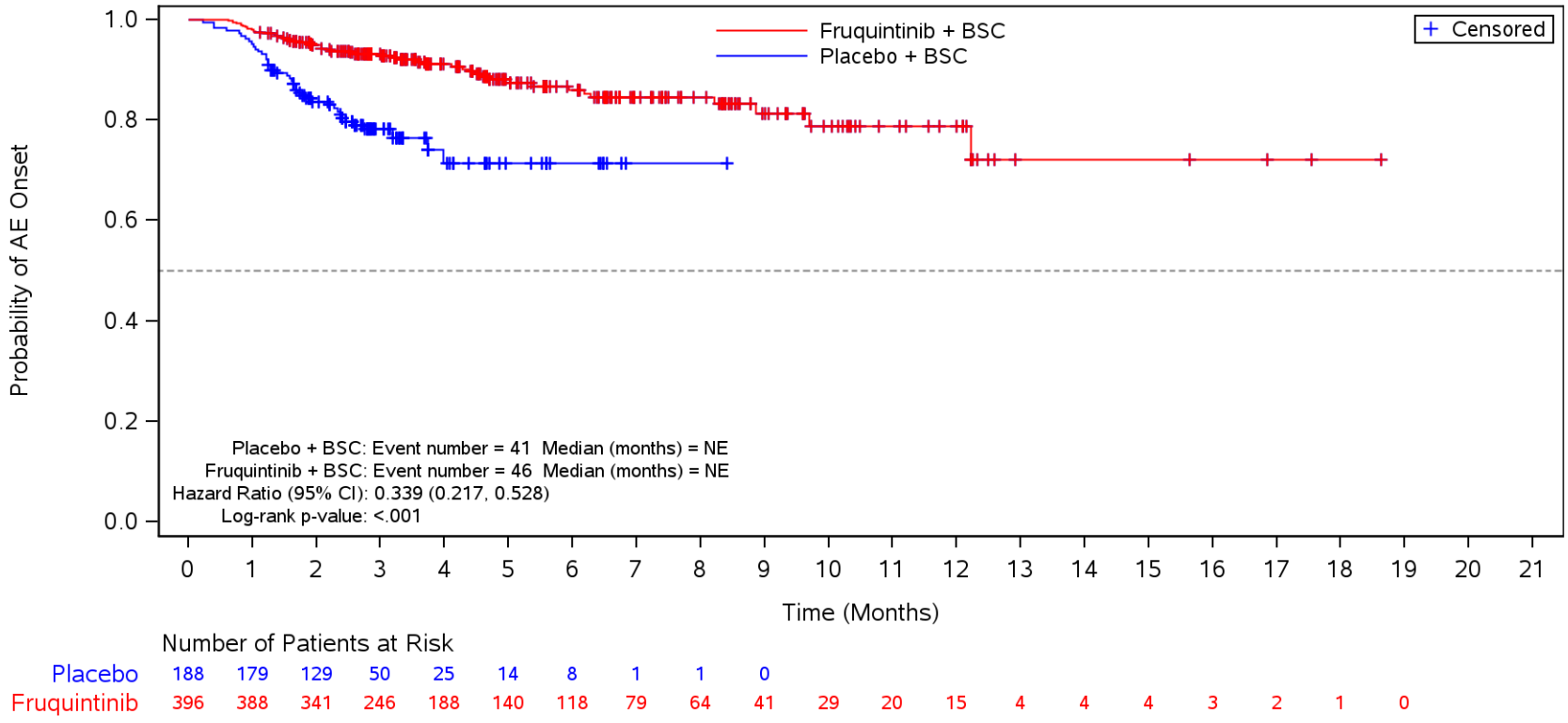
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Number of Metastatic Tumor Sites
Safety Population
Deaths (Grade 5 TEAEs)
Single



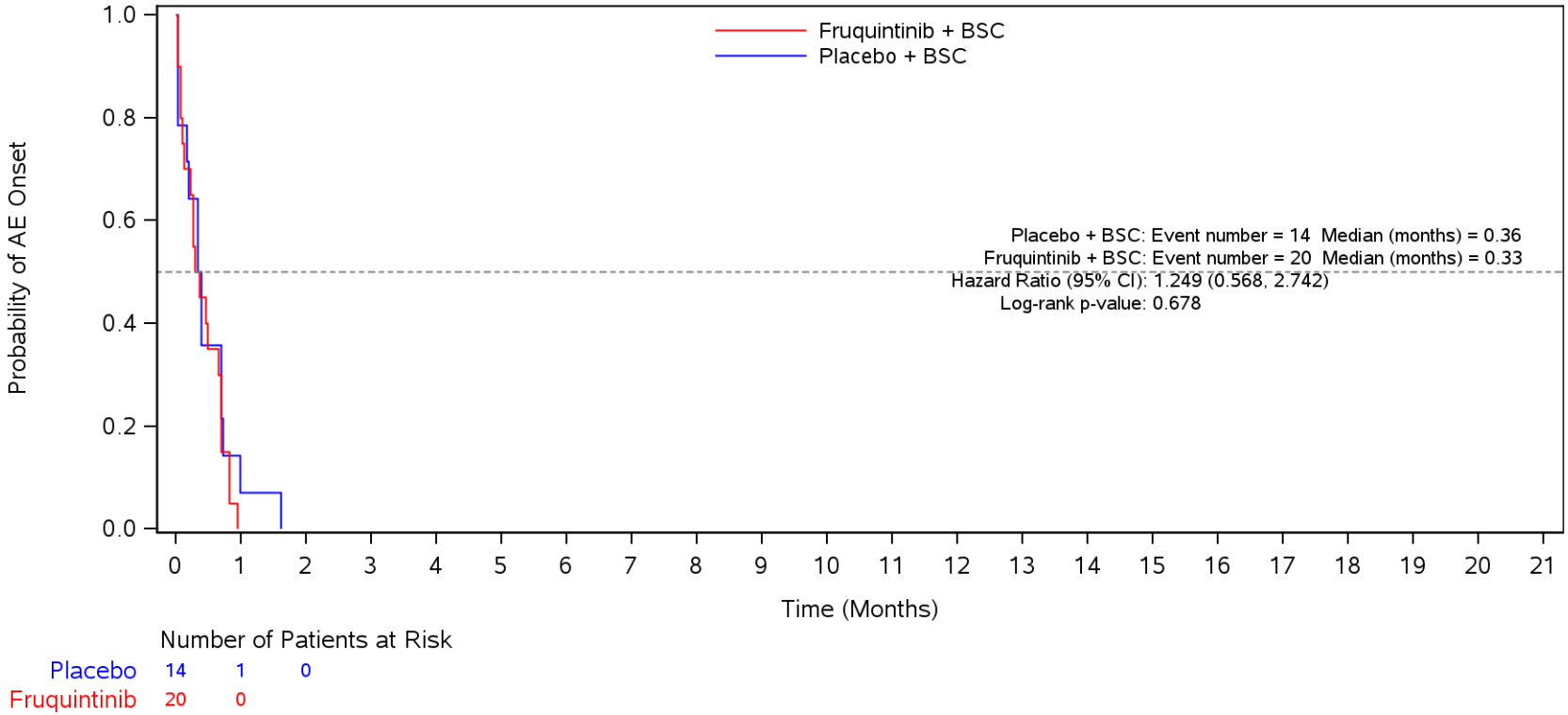
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE
< 18.5



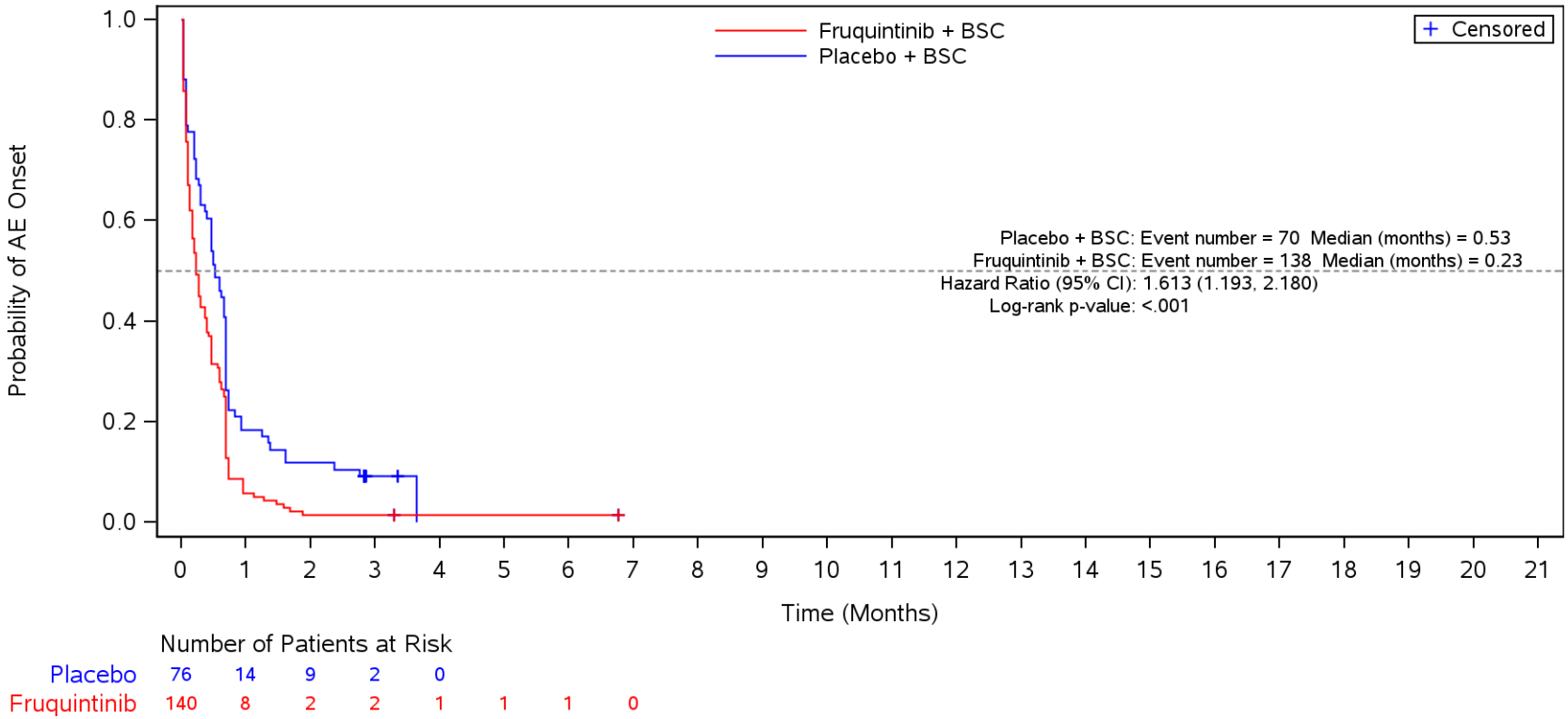
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE
< 18.5



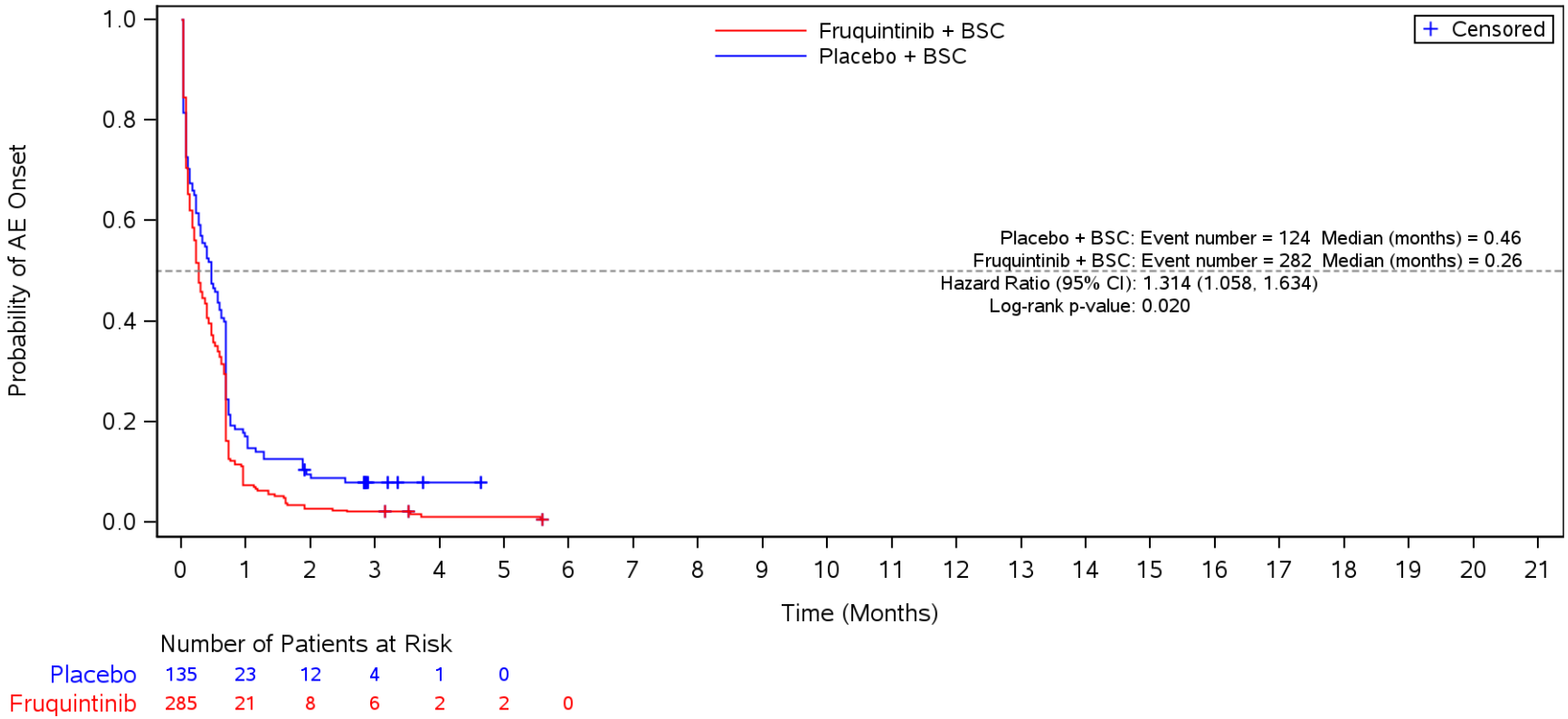
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE
>= 18.5 to < 24



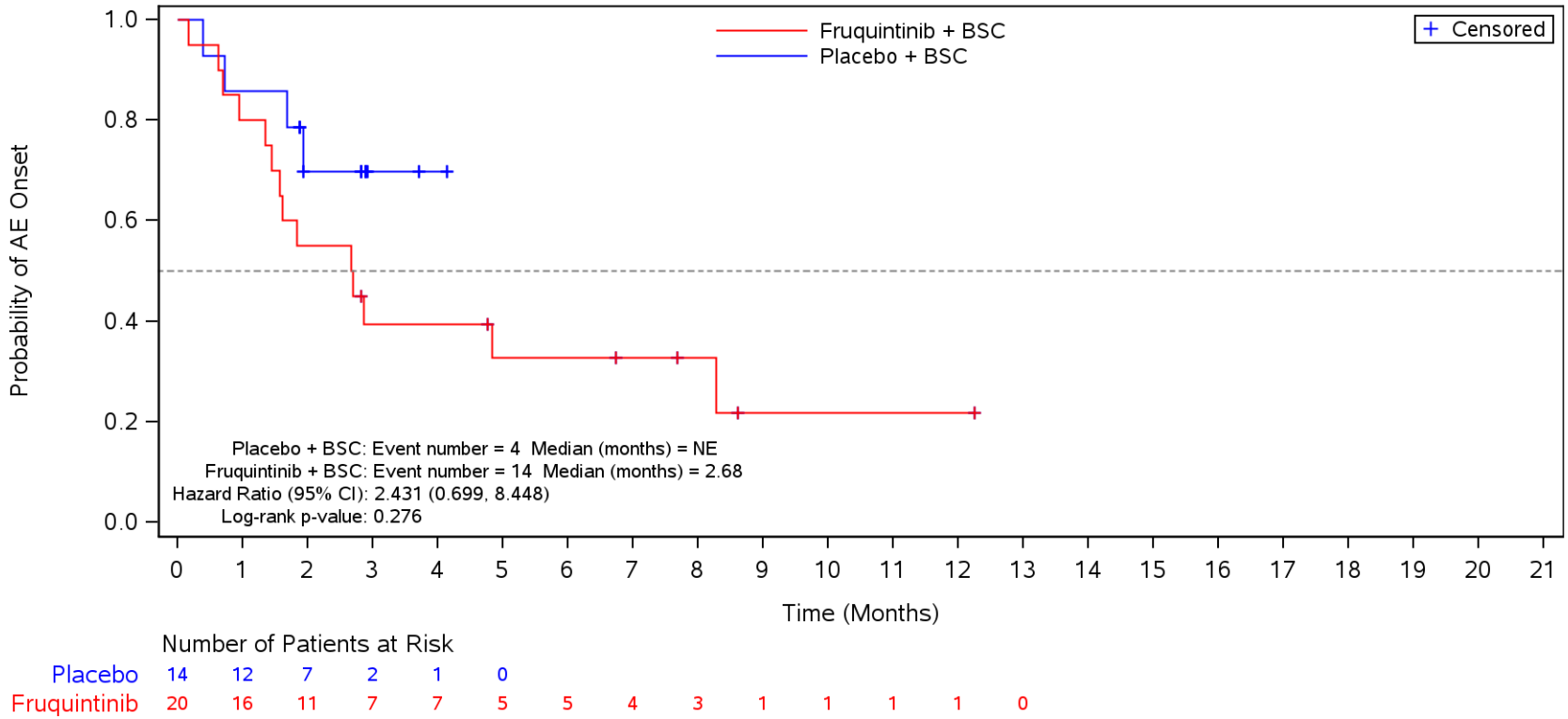
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE
>= 24



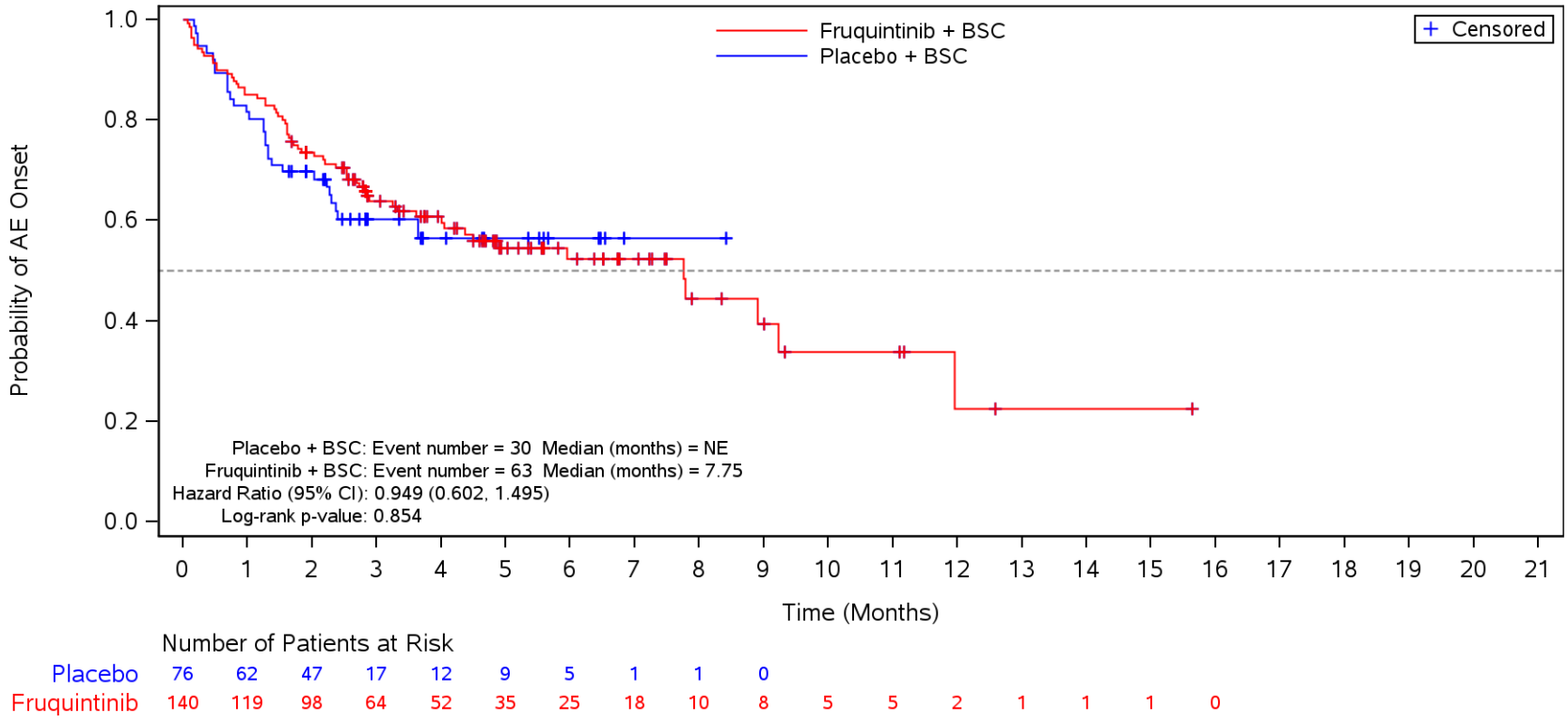
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
Serious TEAE
< 18.5



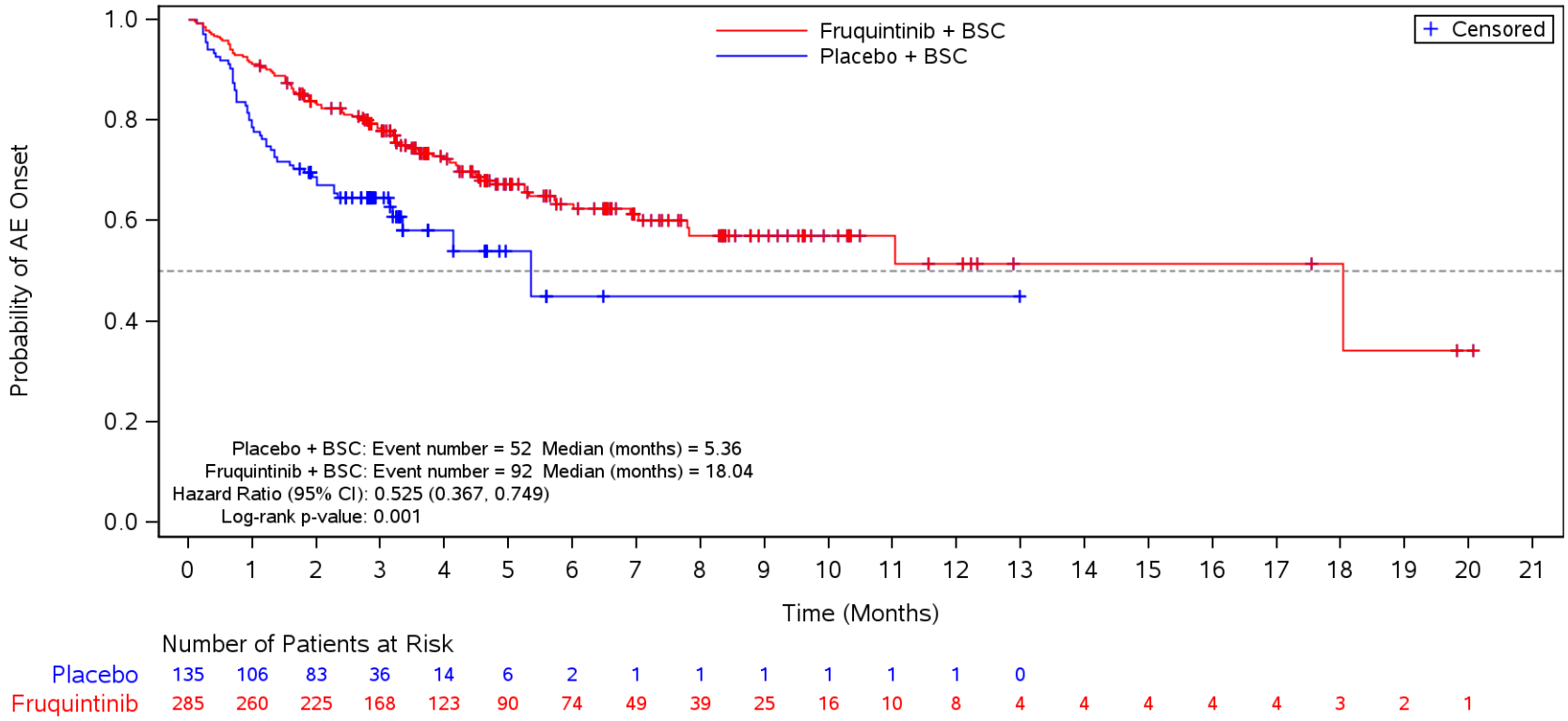
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
Serious TEAE
>= 18.5 to < 24



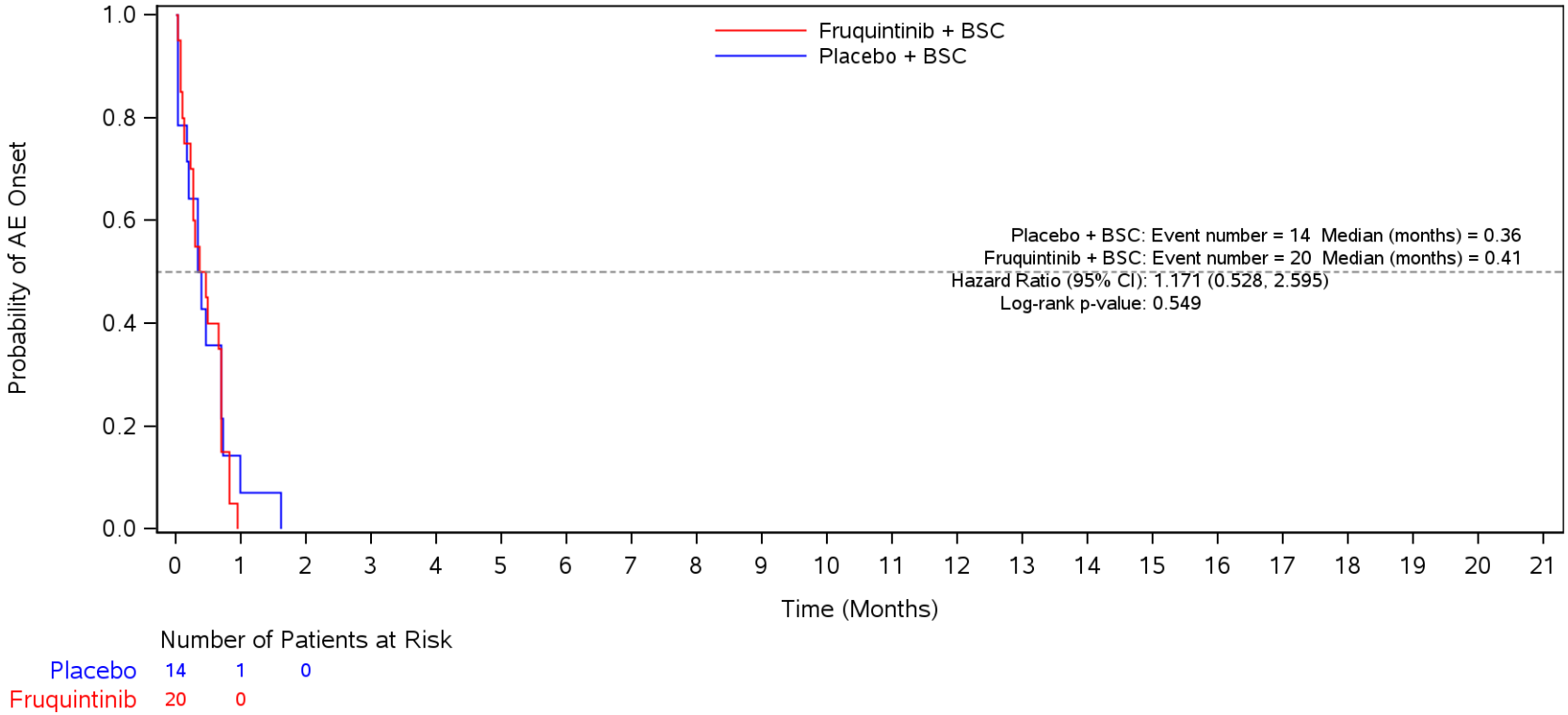
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
Serious TEAE
>= 24



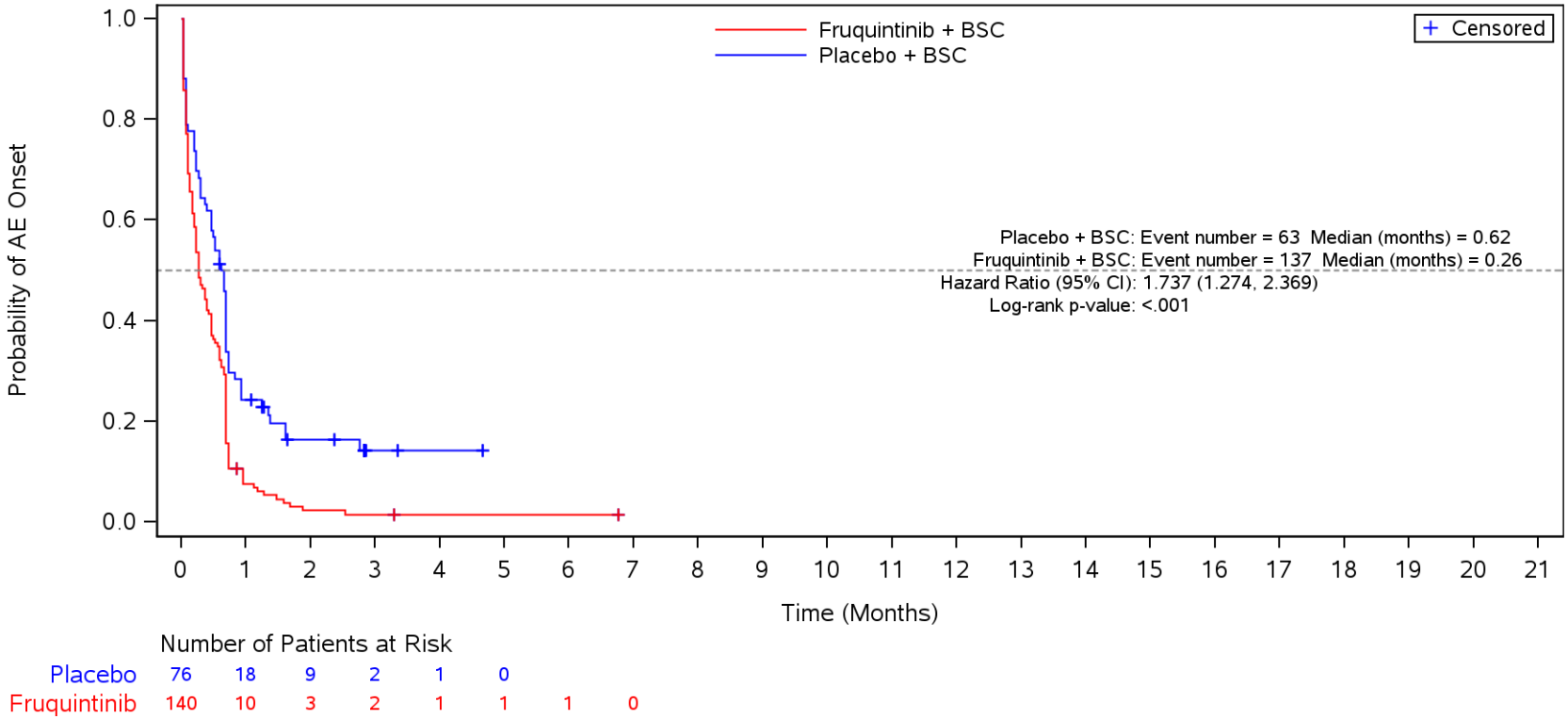
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE ≤ CTCAE Grade 2
< 18.5



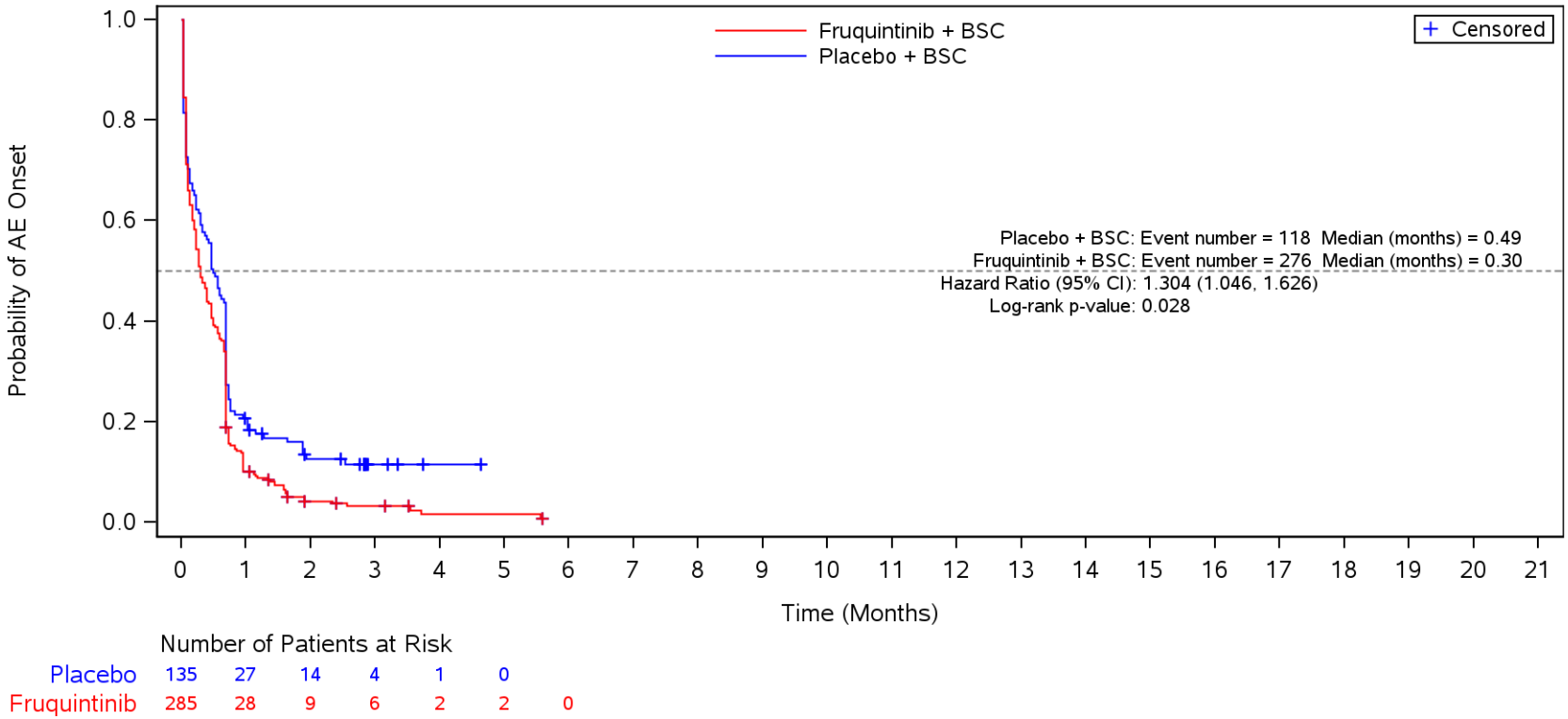
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE ≤ CTCAE Grade 2
>= 18.5 to < 24



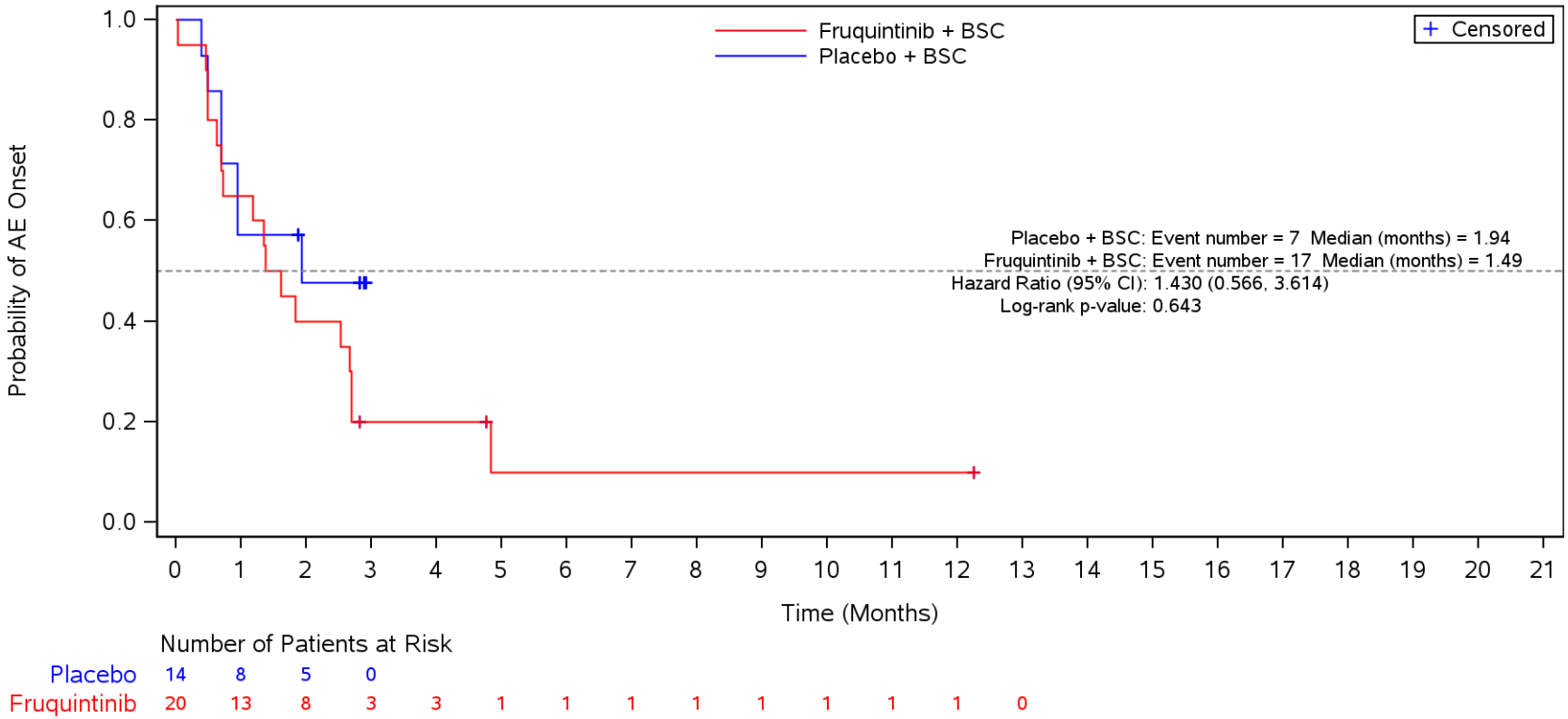
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE ≤ CTCAE Grade 2
>= 24



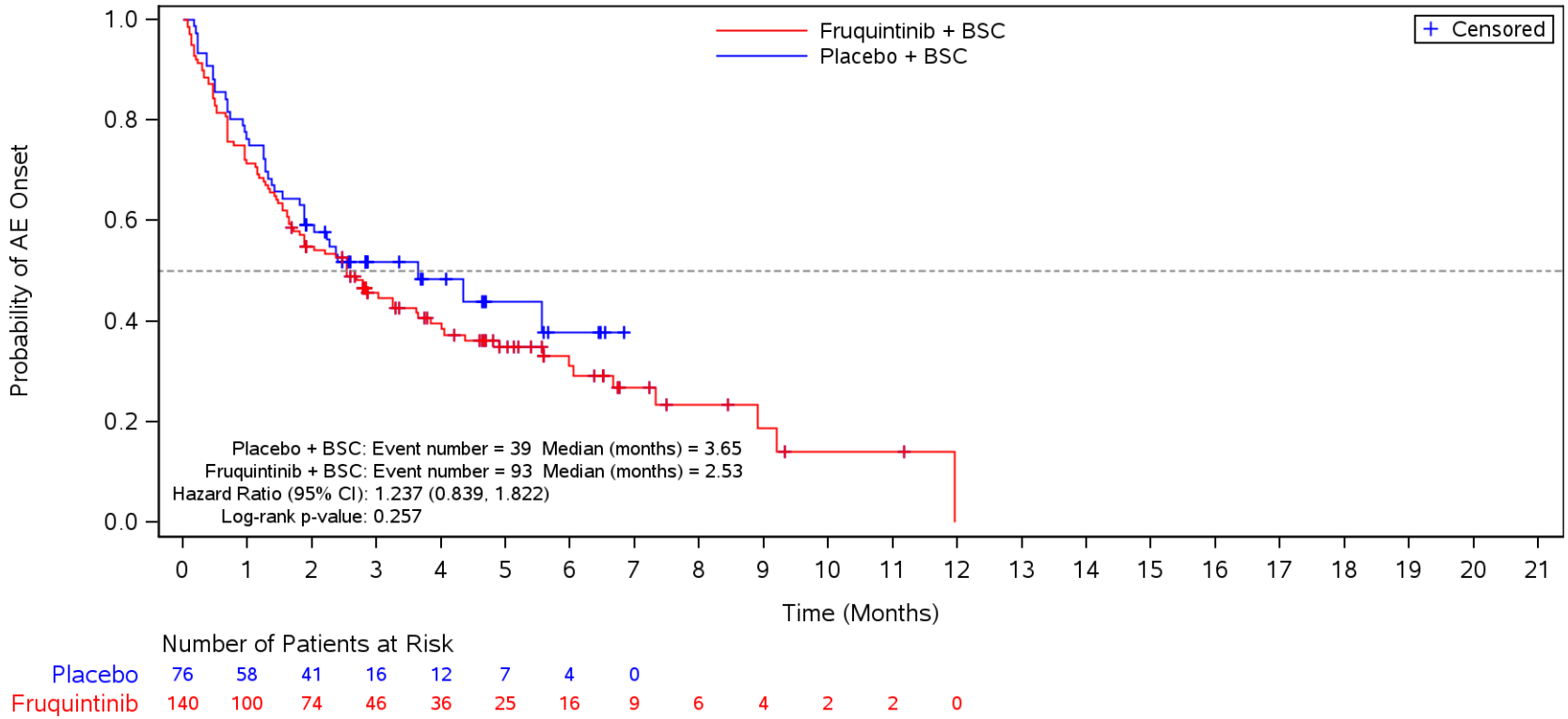
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3
< 18.5



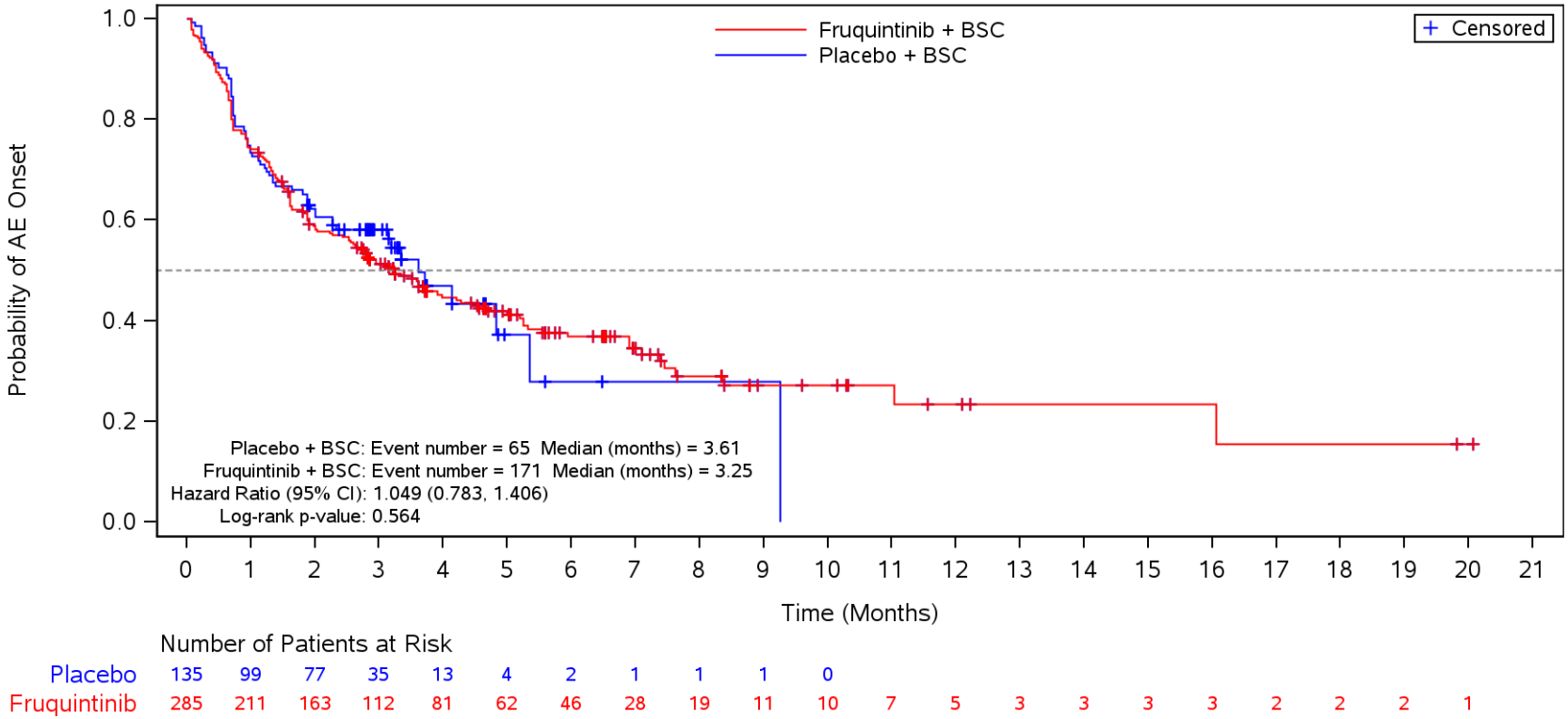
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3
>= 18.5 to < 24



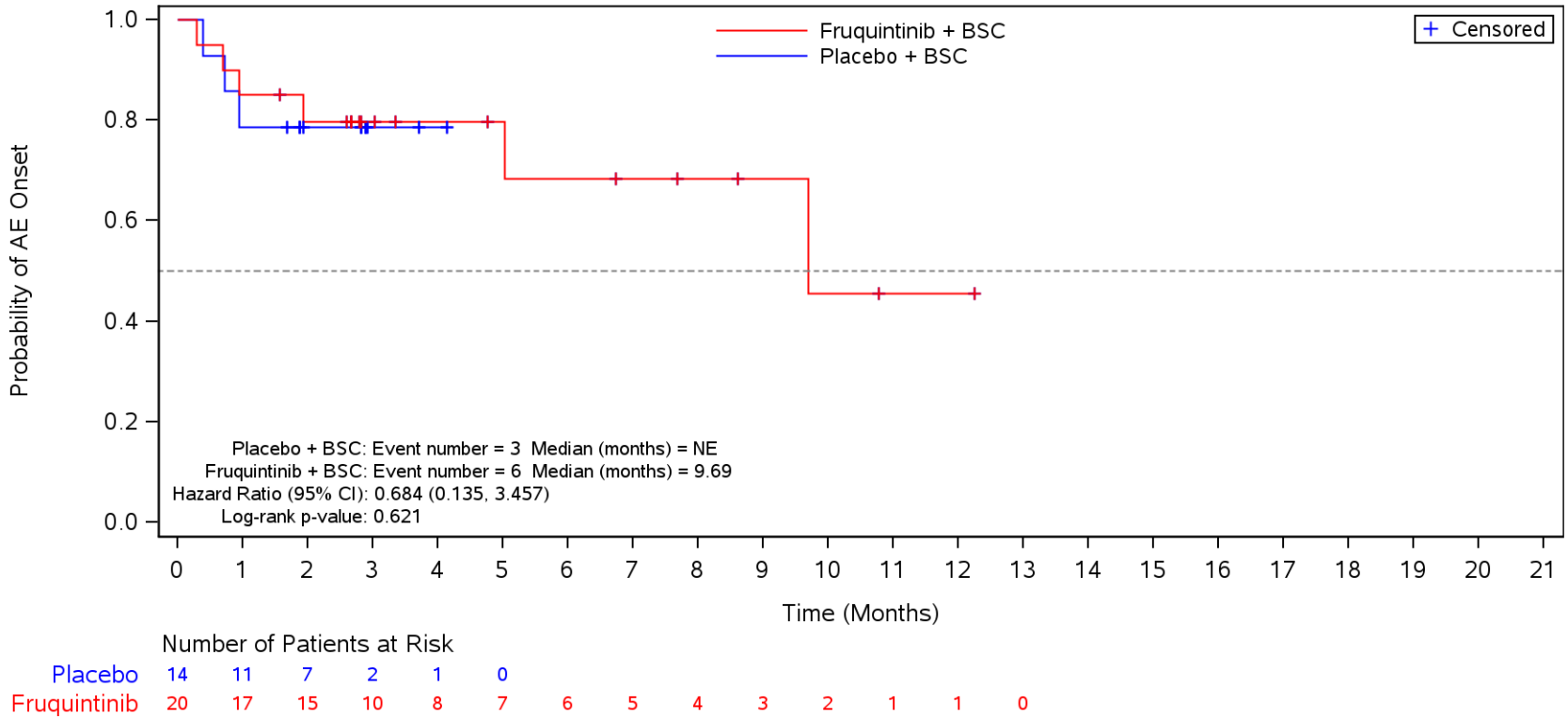
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3
>= 24



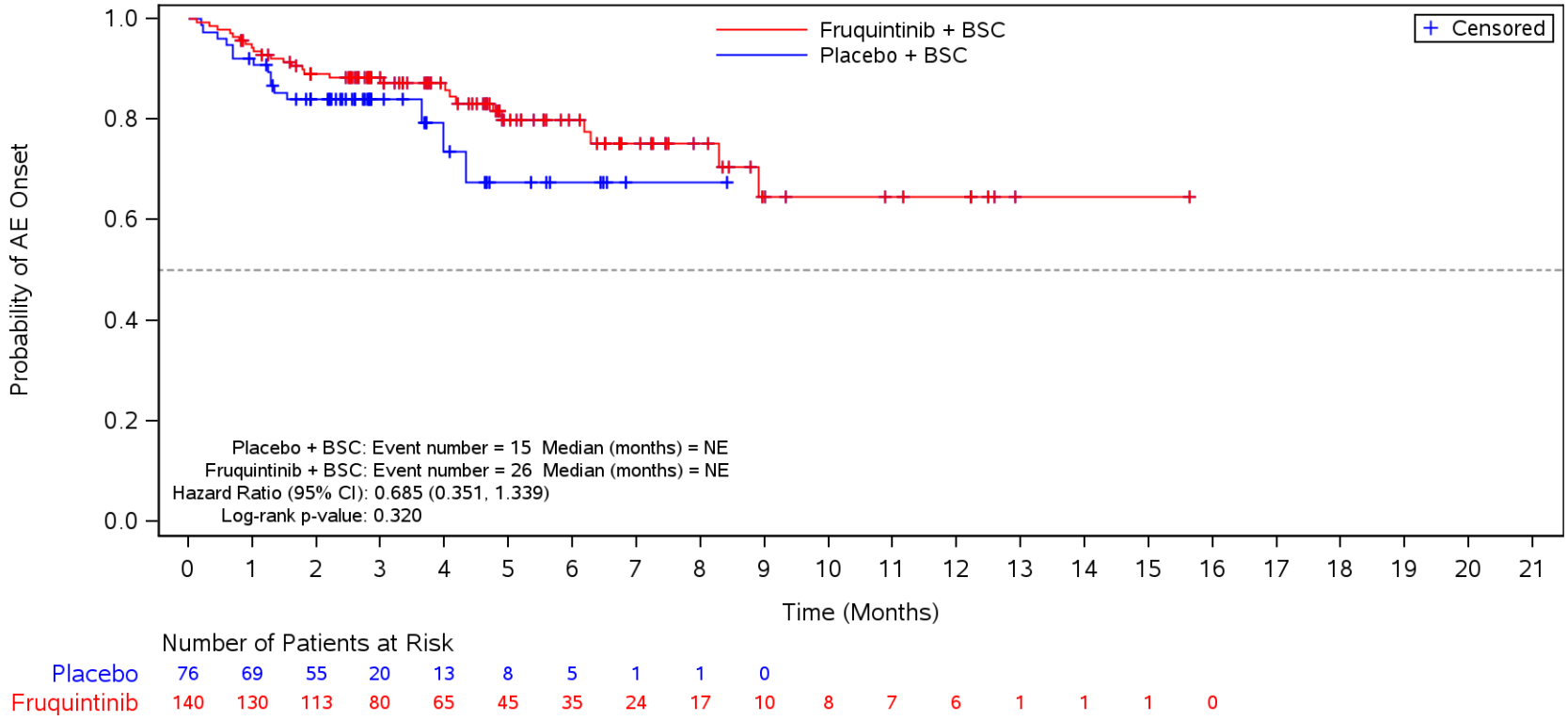
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
Discontinuation due to TEAE
< 18.5



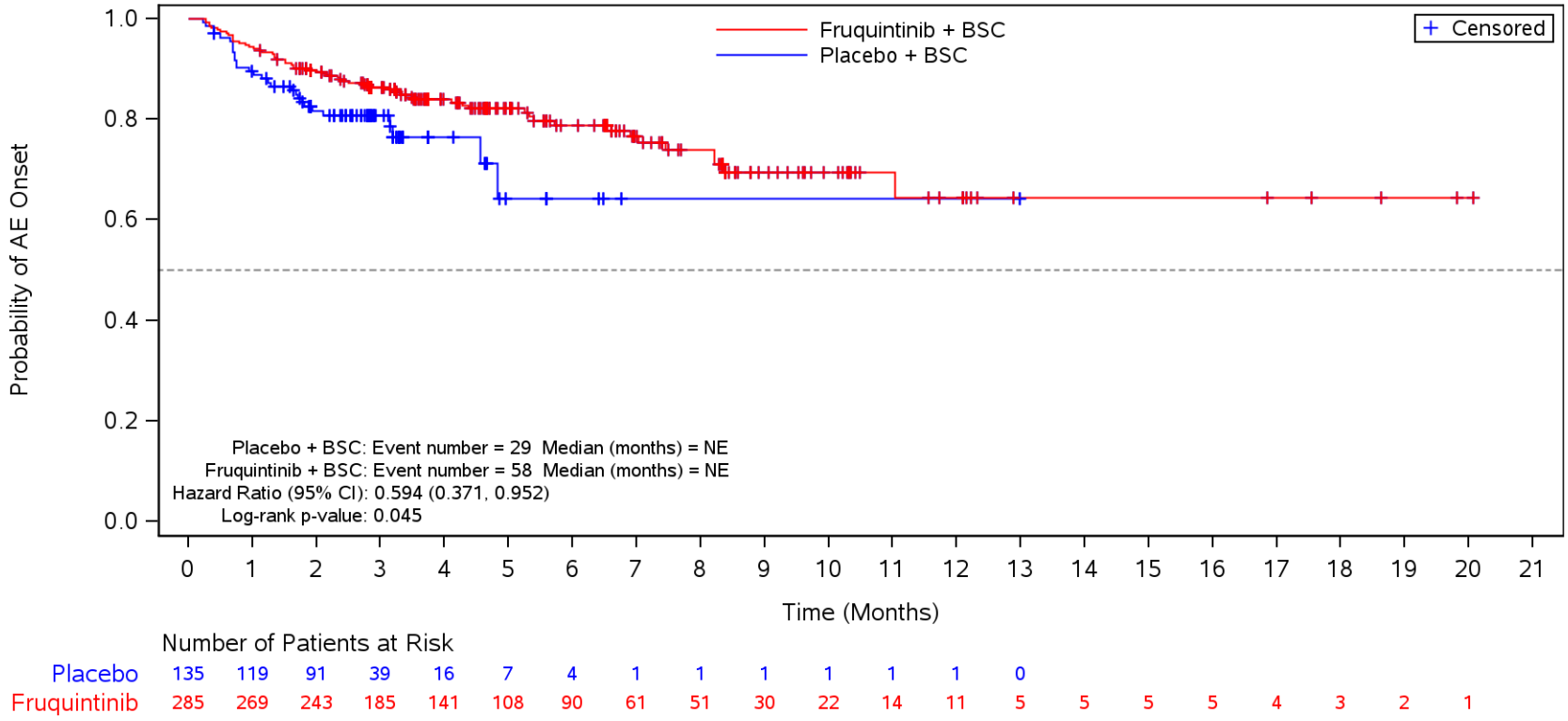
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
Discontinuation due to TEAE
>= 18.5 to < 24



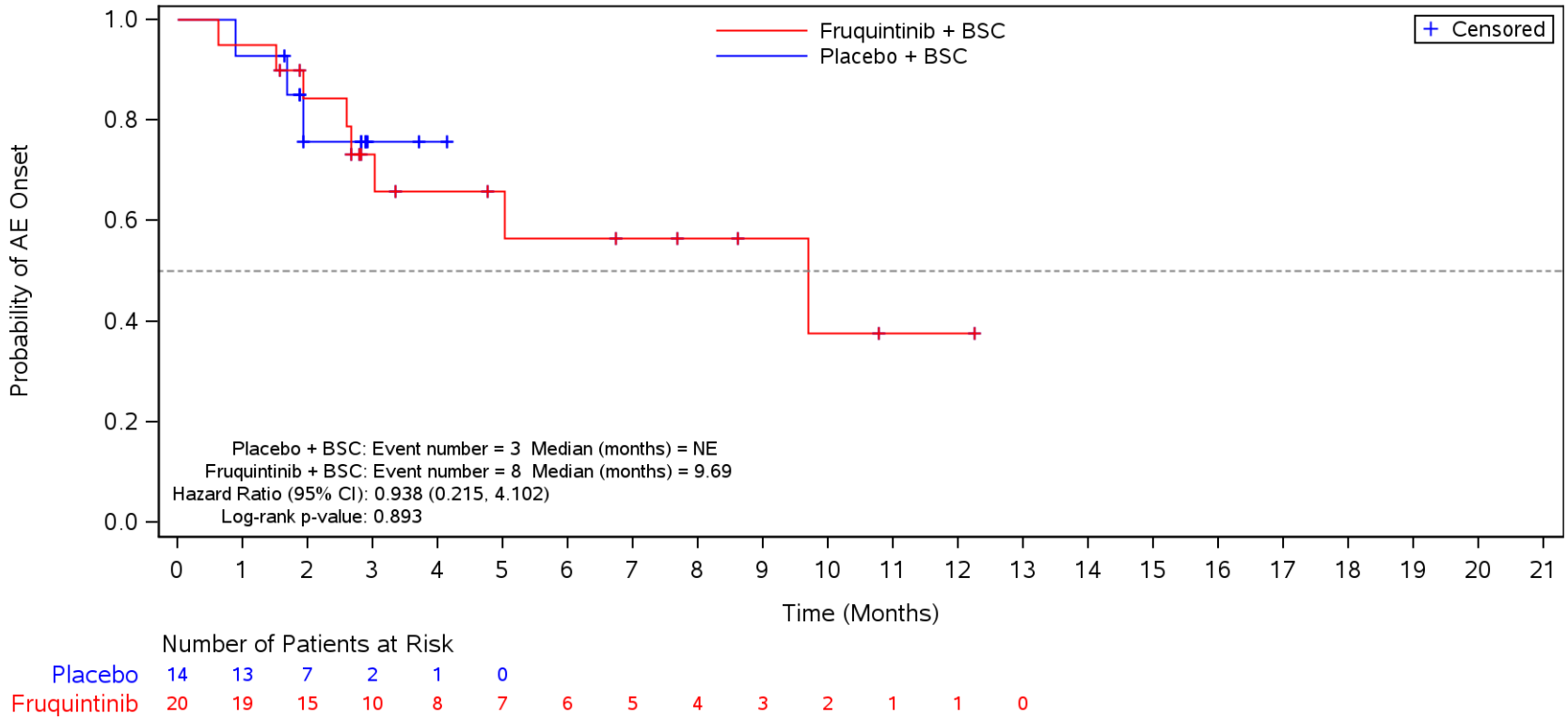
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
Discontinuation due to TEAE
>= 24



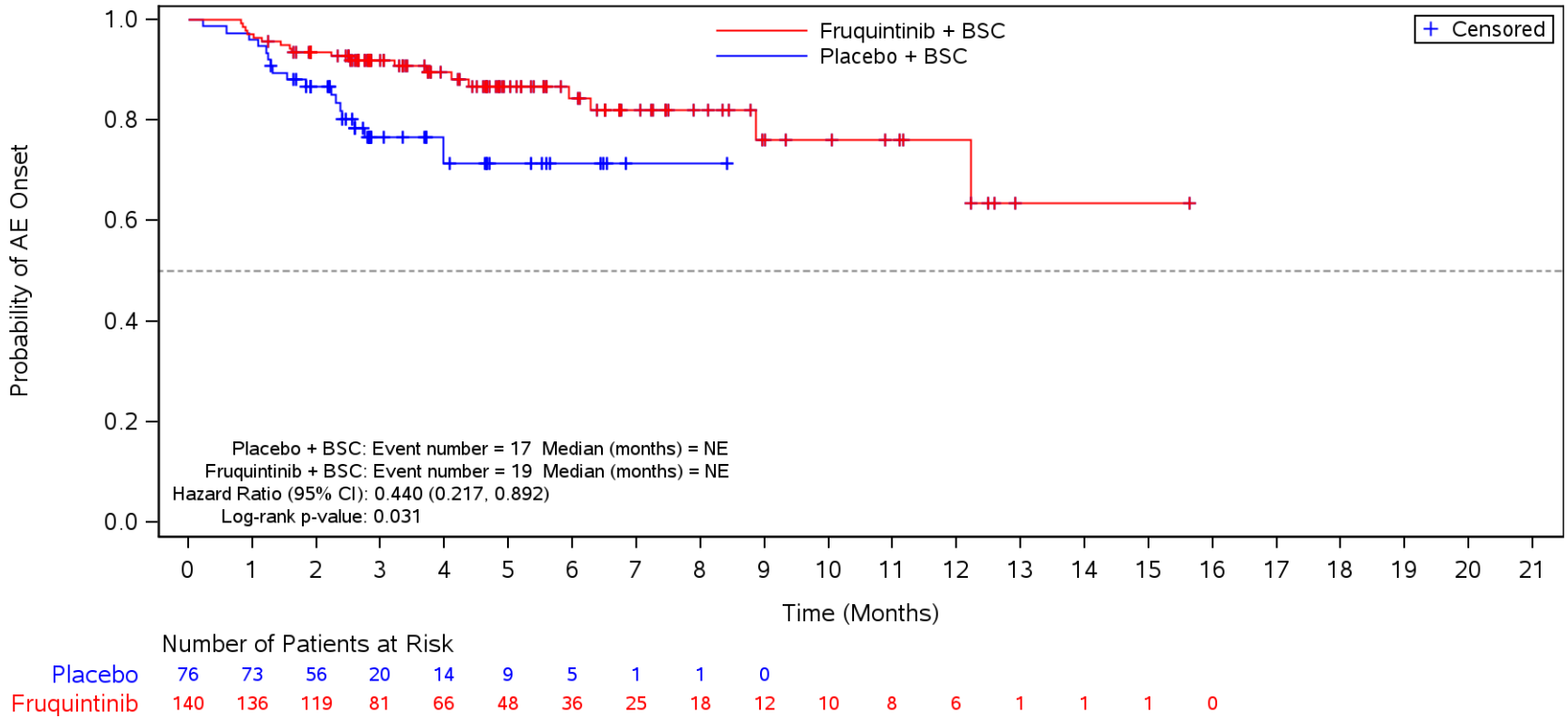
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
Deaths (Grade 5 TEAEs)
< 18.5



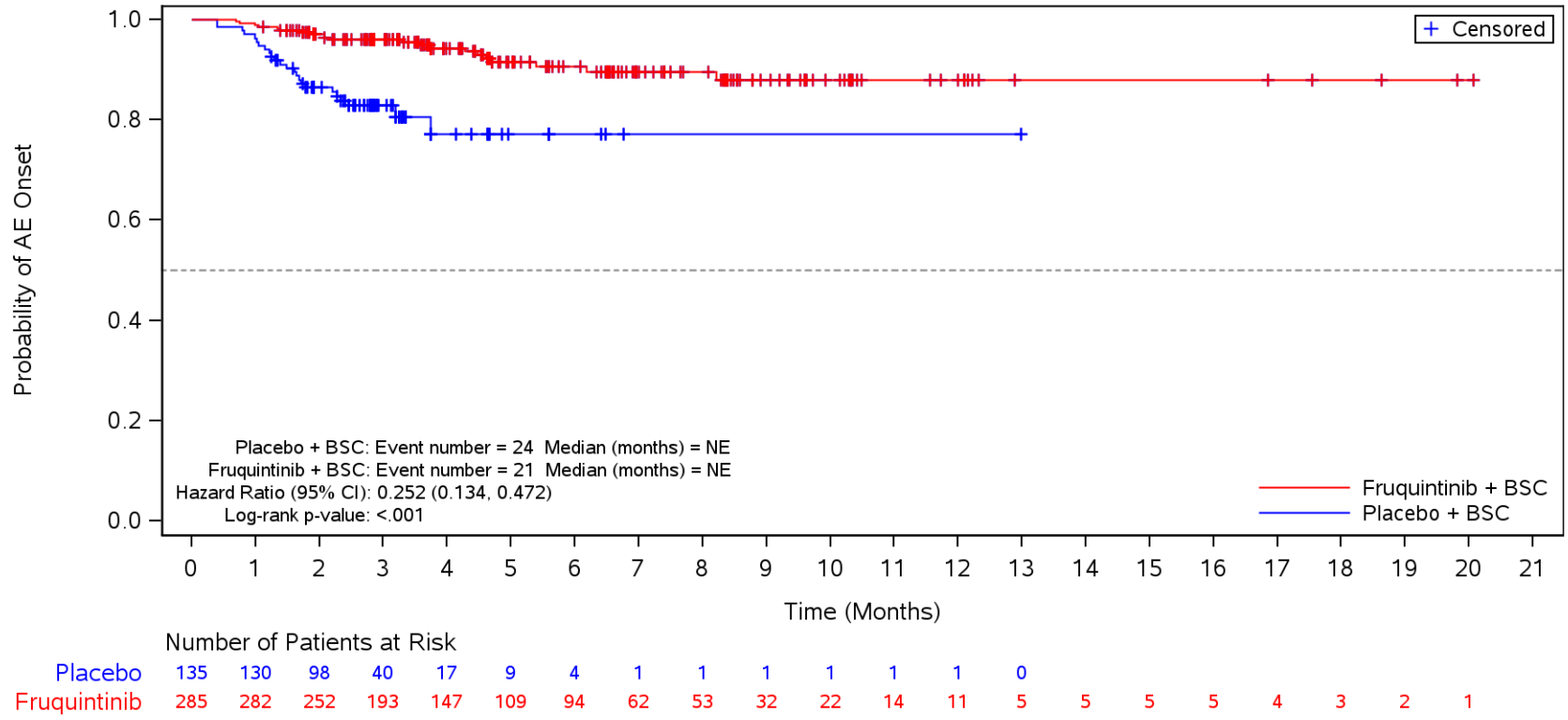
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.1.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE by Body Mass Index
Safety Population
Deaths (Grade 5 TEAEs)
>= 18.5 to < 24



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3A
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events
Safety Population
TEAE

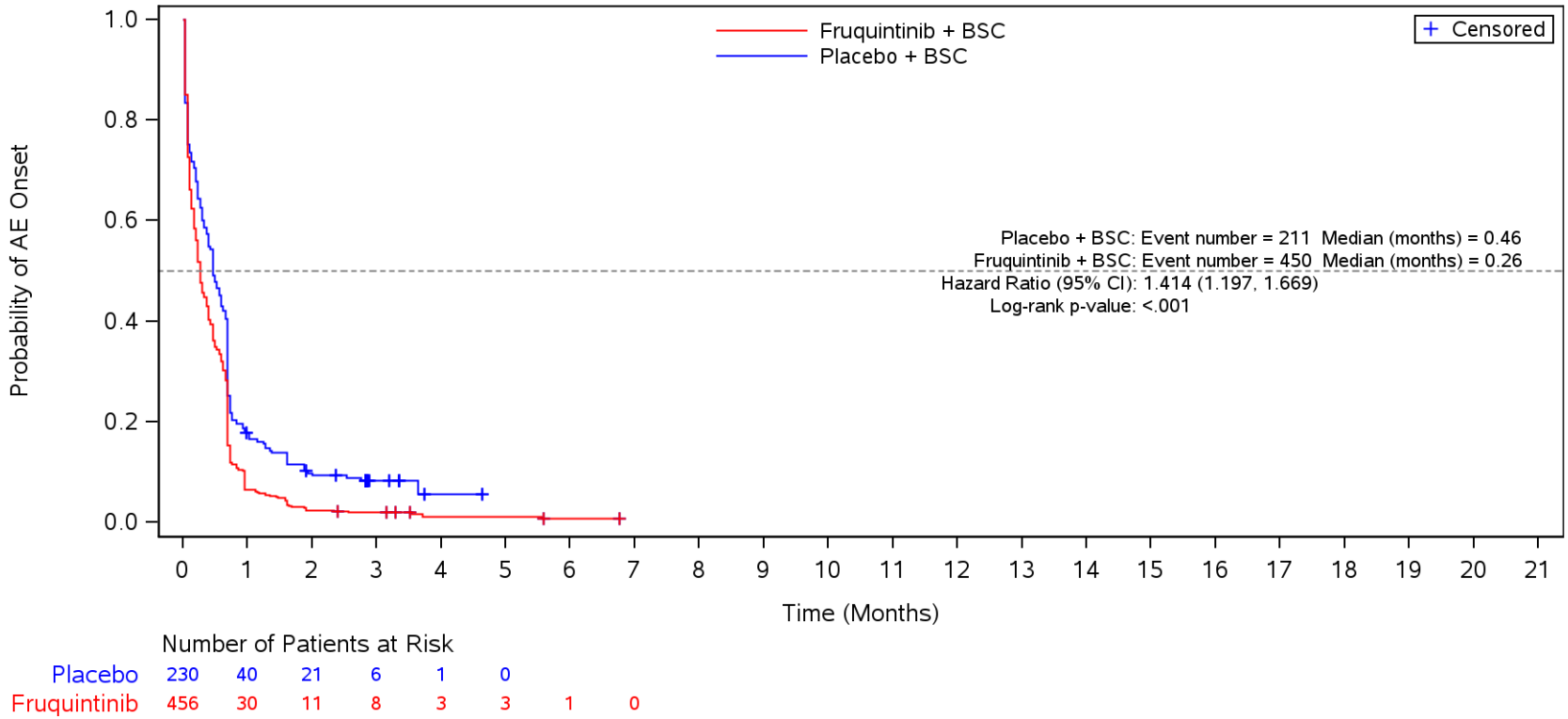


Number of Patients at Risk

Placebo	135	130	98	40	17	9	4	1	1	1	1	1	1	0							
Fruquintinib	285	282	252	193	147	109	94	62	53	32	22	14	11	5	5	5	5	4	3	2	1

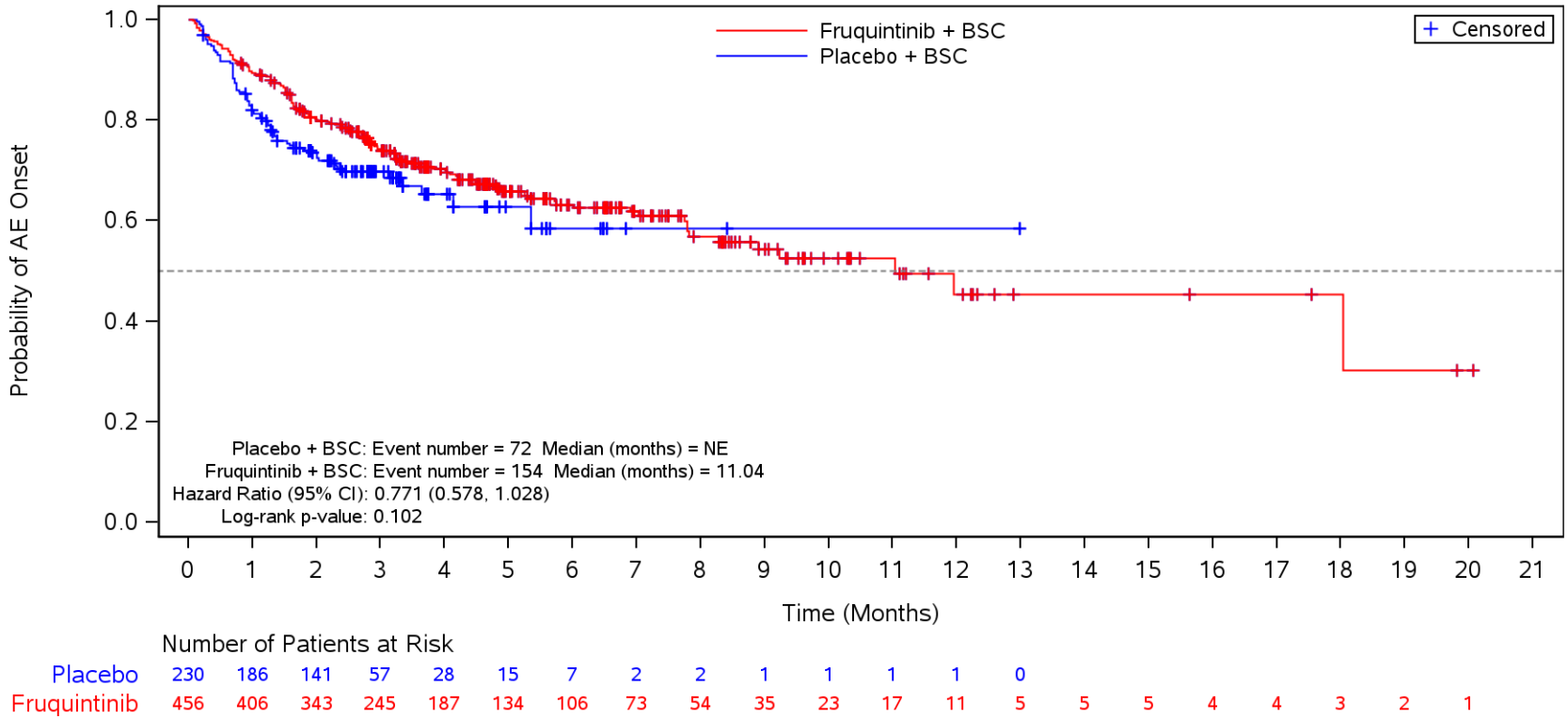
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3A
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events
Safety Population
TEAE



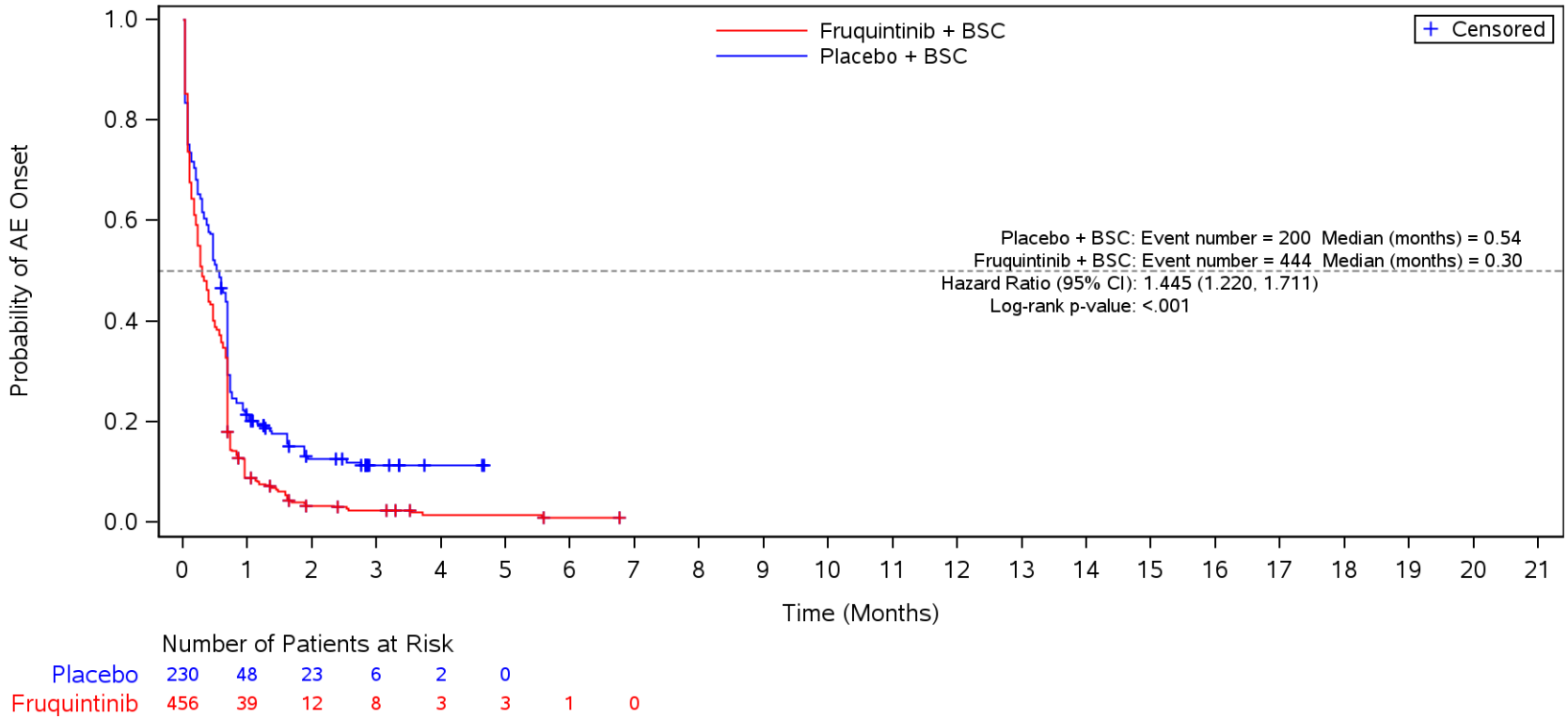
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3A
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events
Safety Population
Serious TEAE



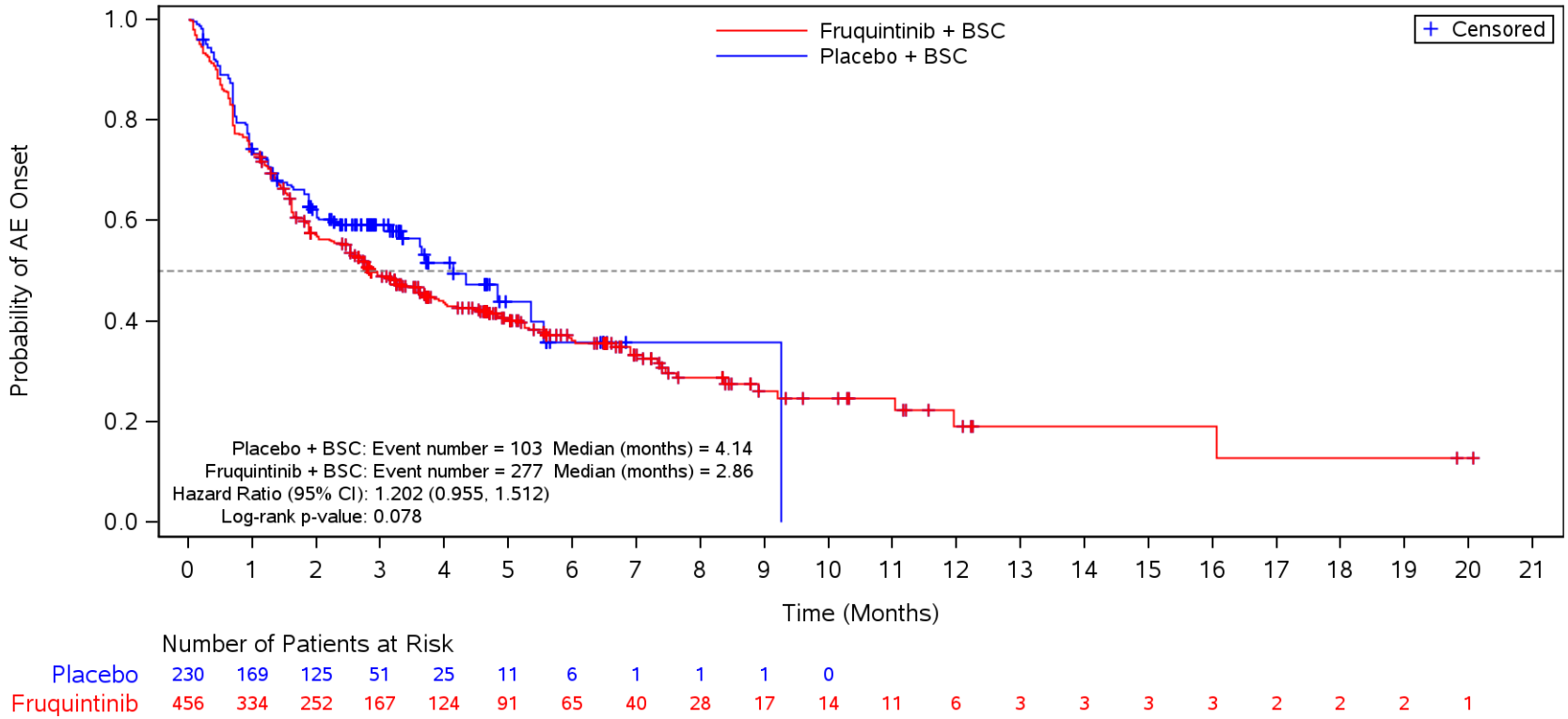
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3A
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events
Safety Population
TEAE ≤ CTCAE Grade 2



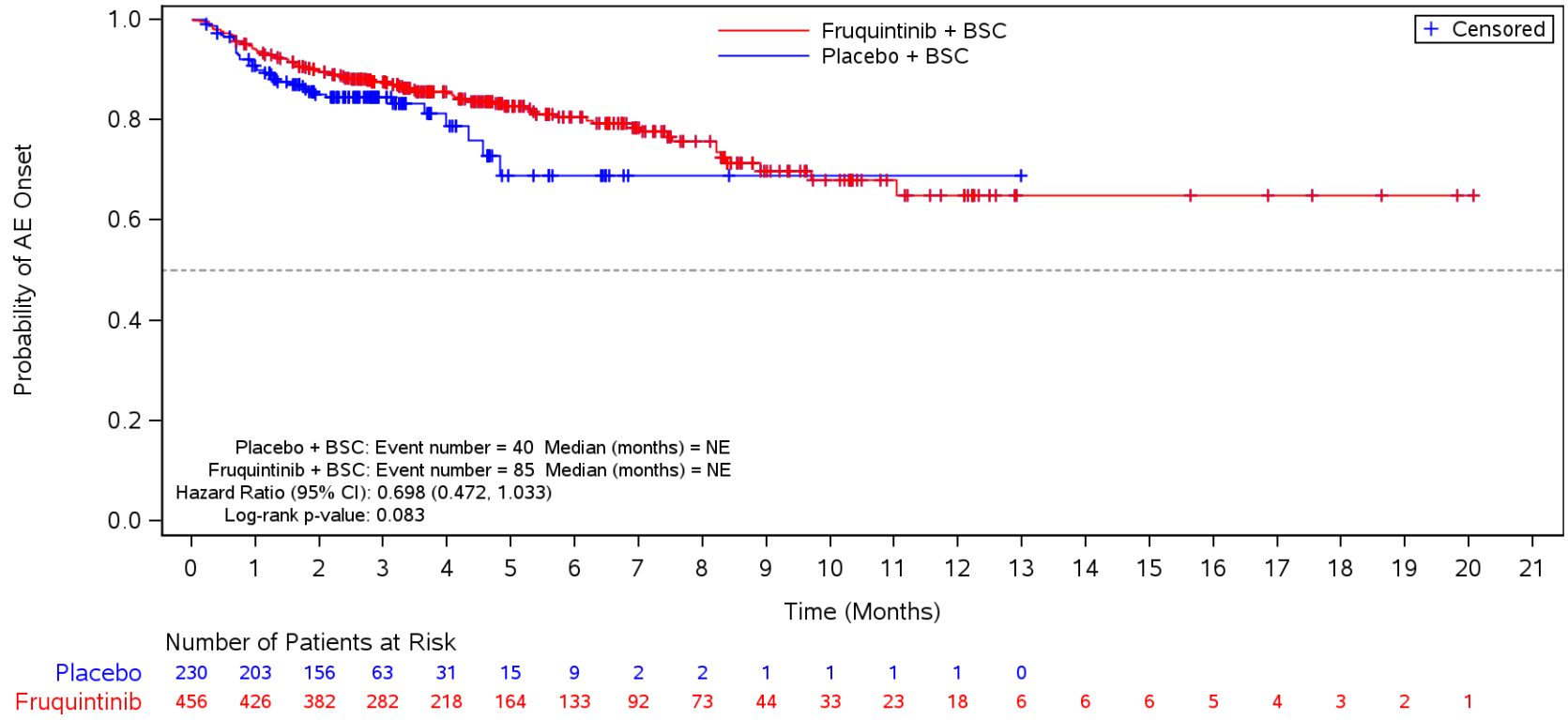
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3A
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events
Safety Population
TEAE ≥ CTCAE Grade 3



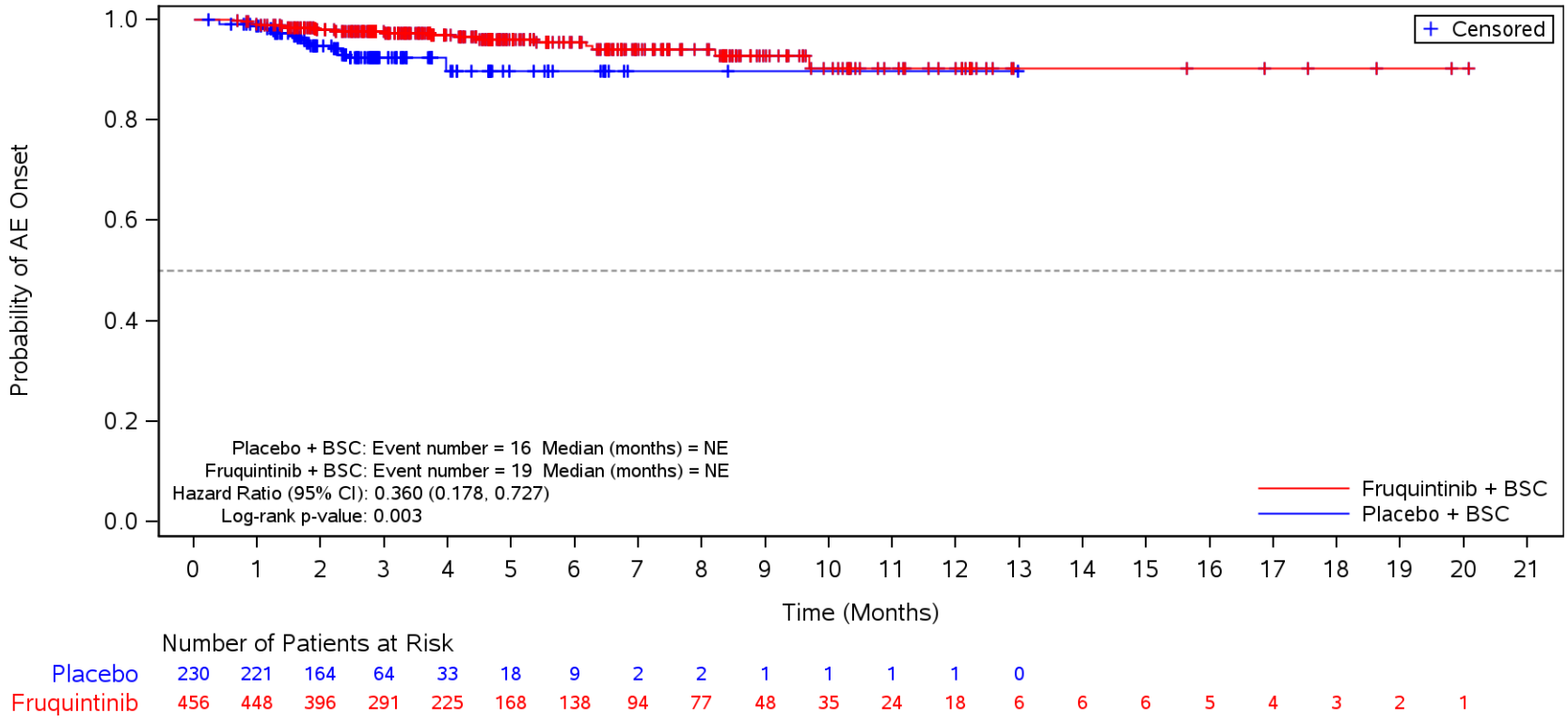
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3A
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events
Safety Population
Discontinuation due to TEAE



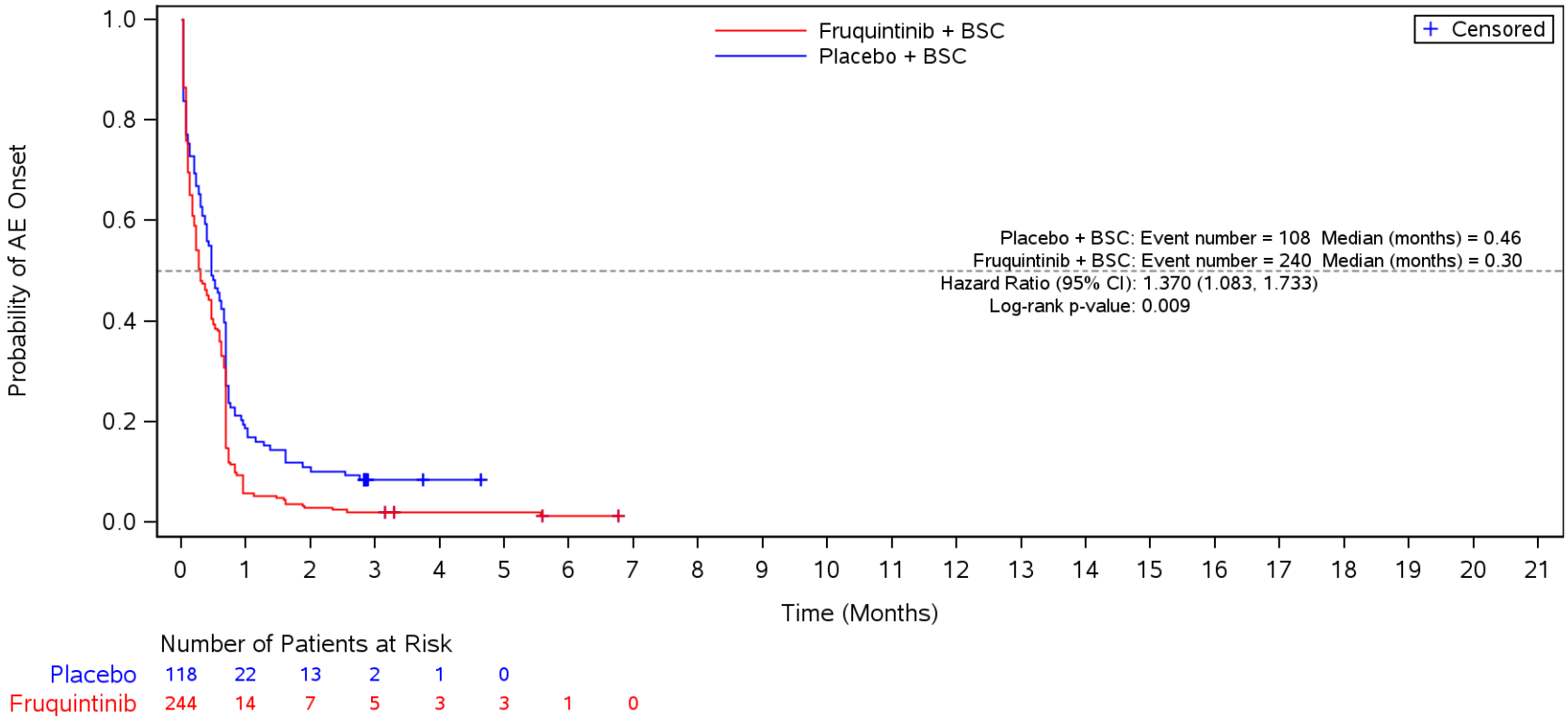
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
TEAE
<65 years



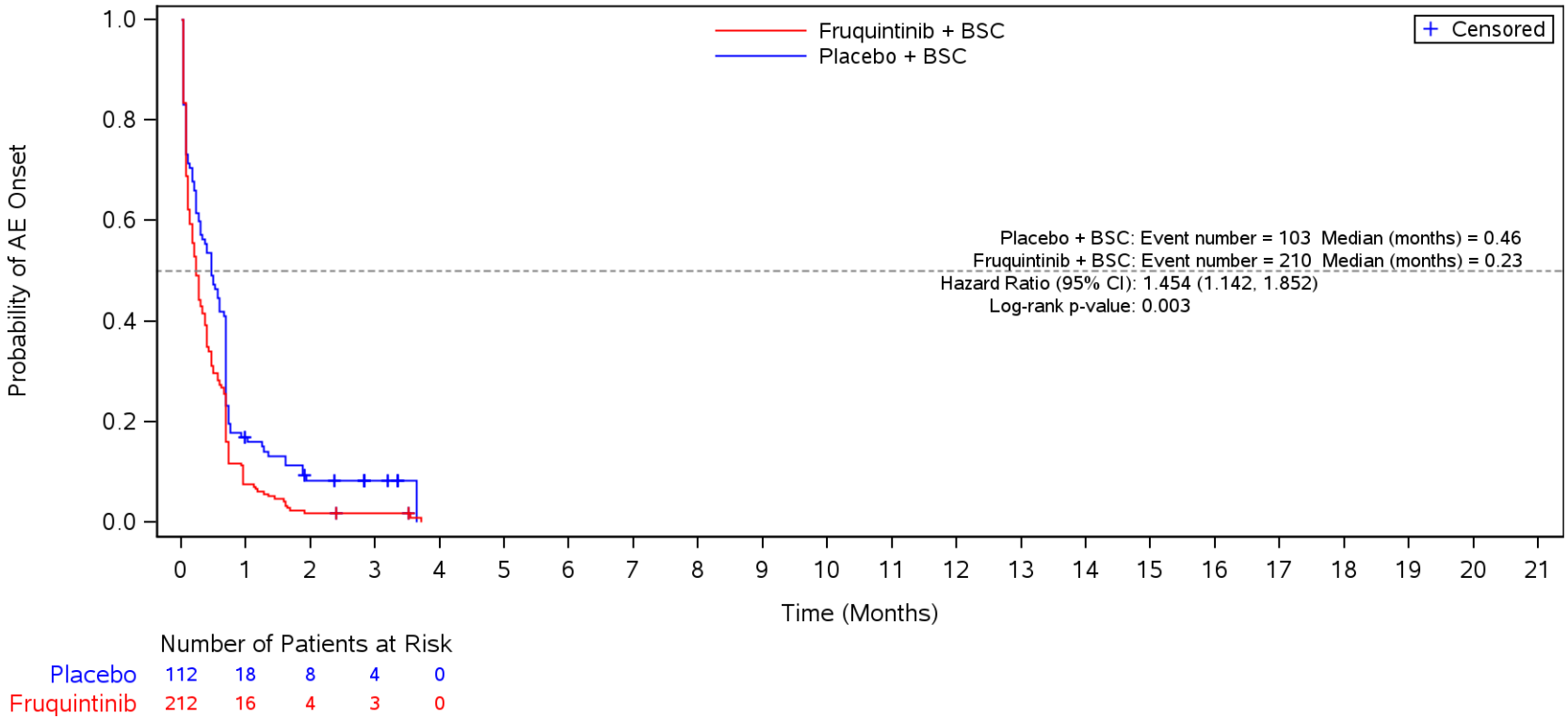
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
TEAE
<65 years



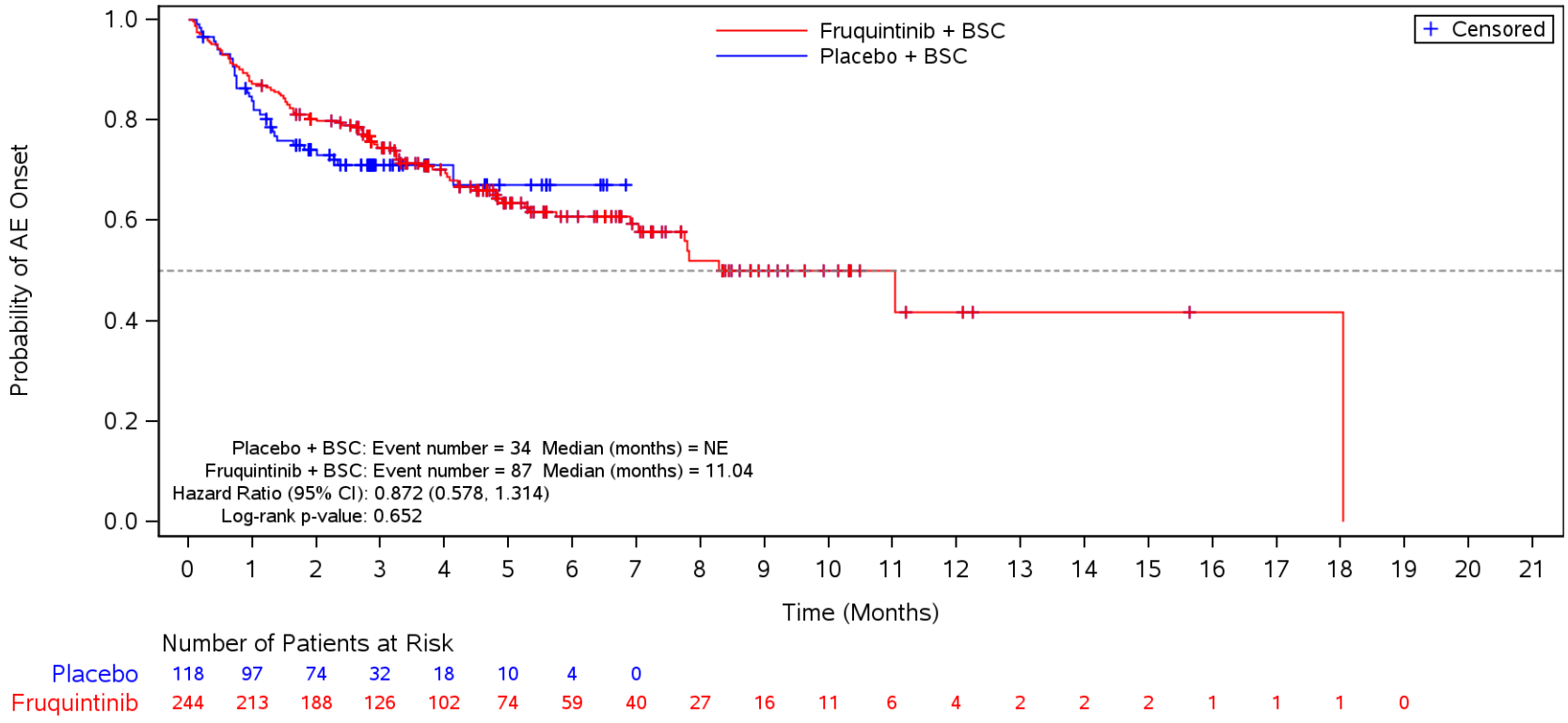
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
TEAE
>=65 years



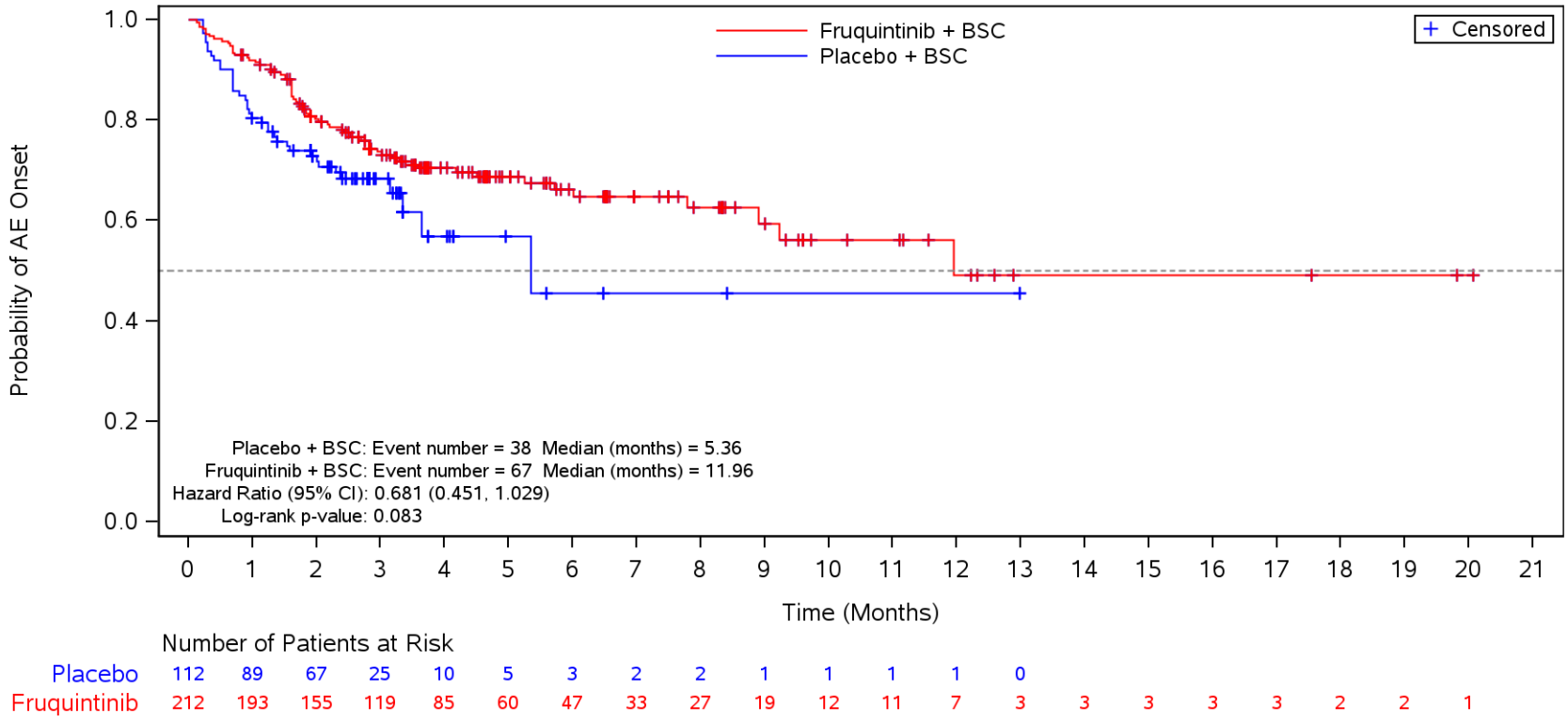
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
Serious TEAE
<65 years



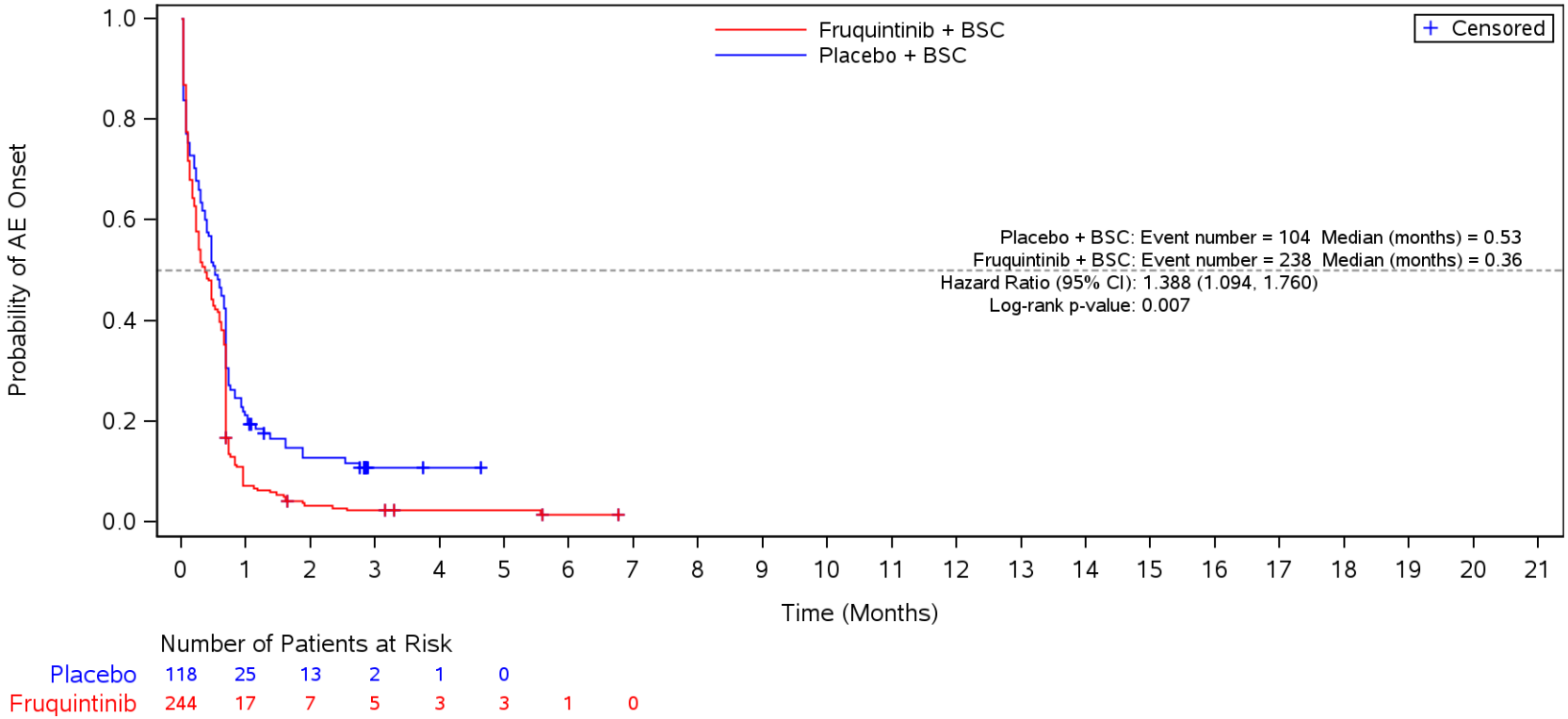
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
Serious TEAE
>=65 years



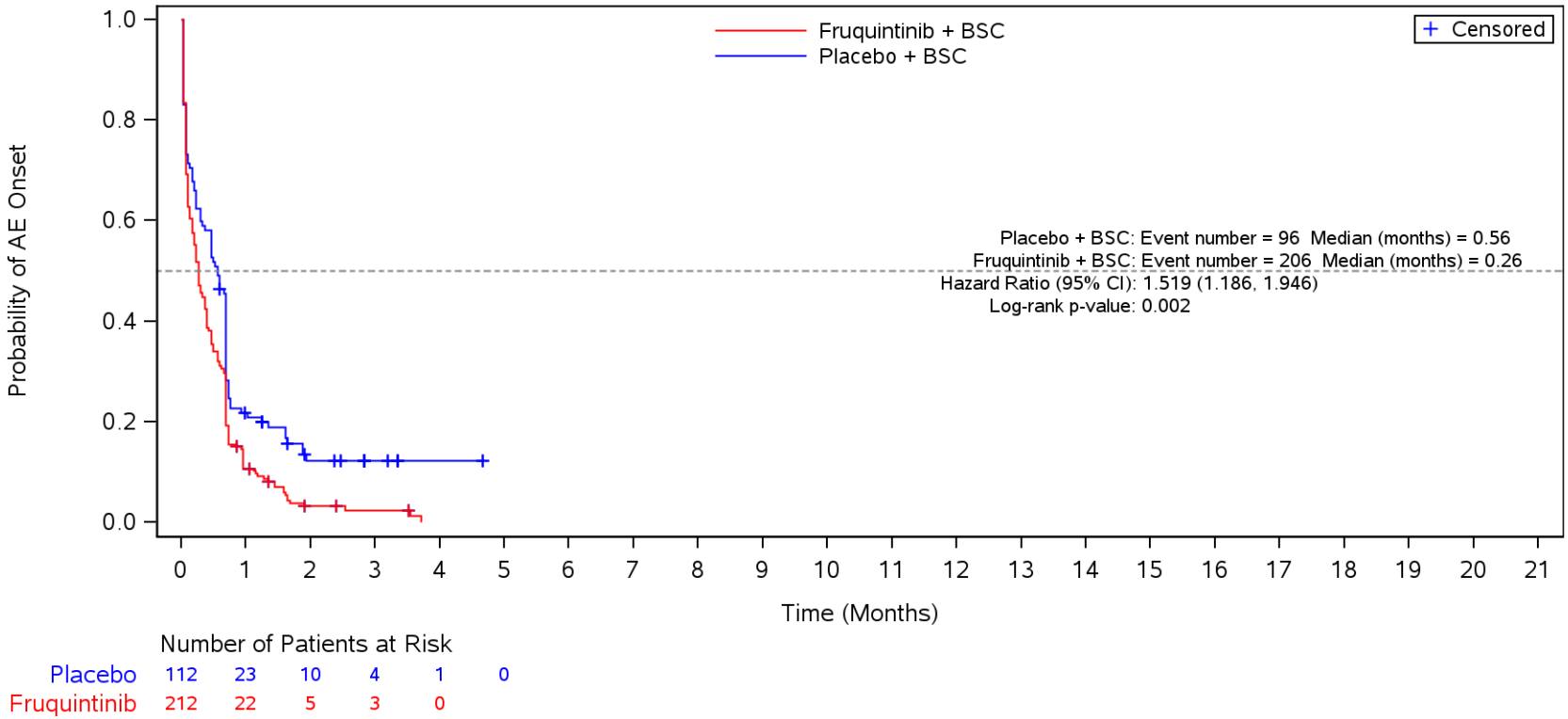
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
TEAE ≤ CTCAE Grade 2
<65 years



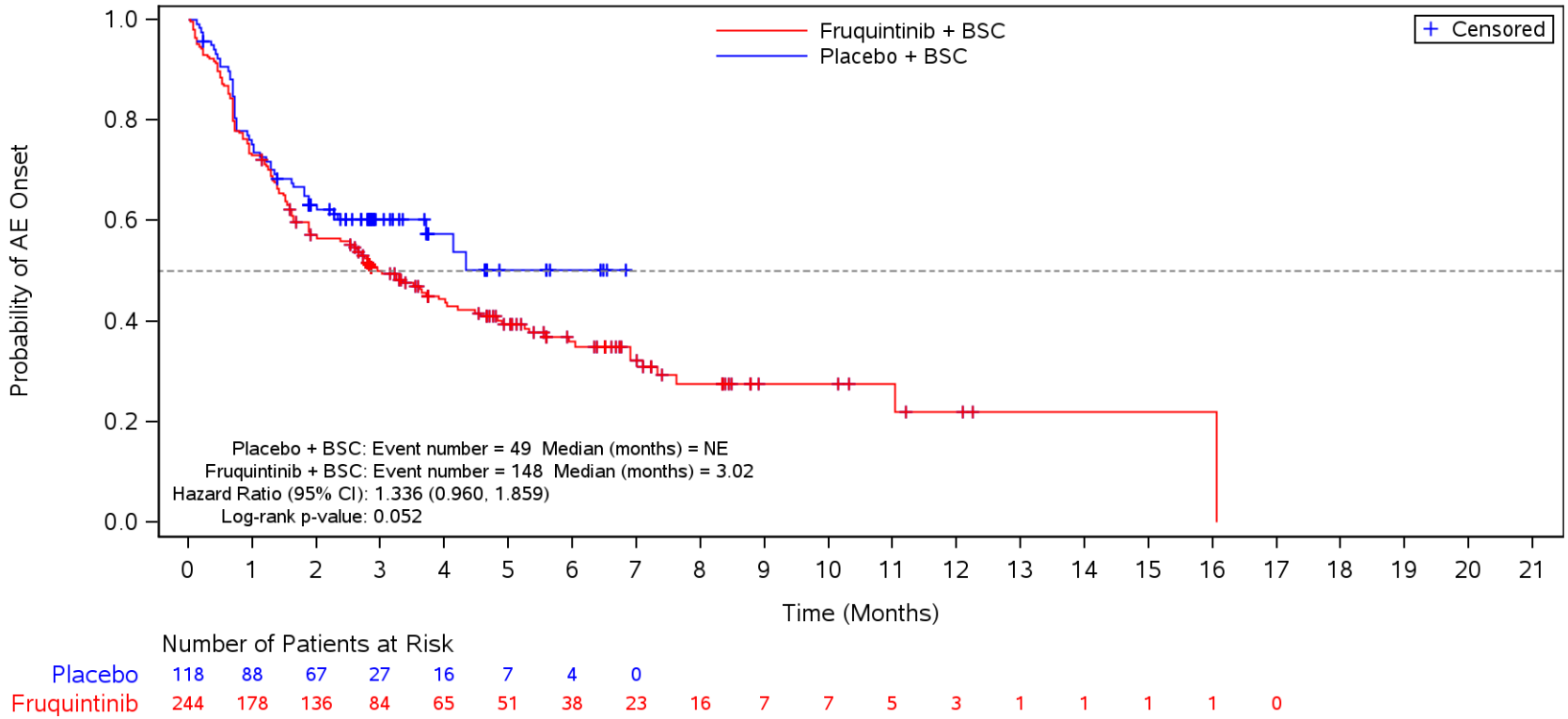
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
TEAE ≤ CTCAE Grade 2
>=65 years



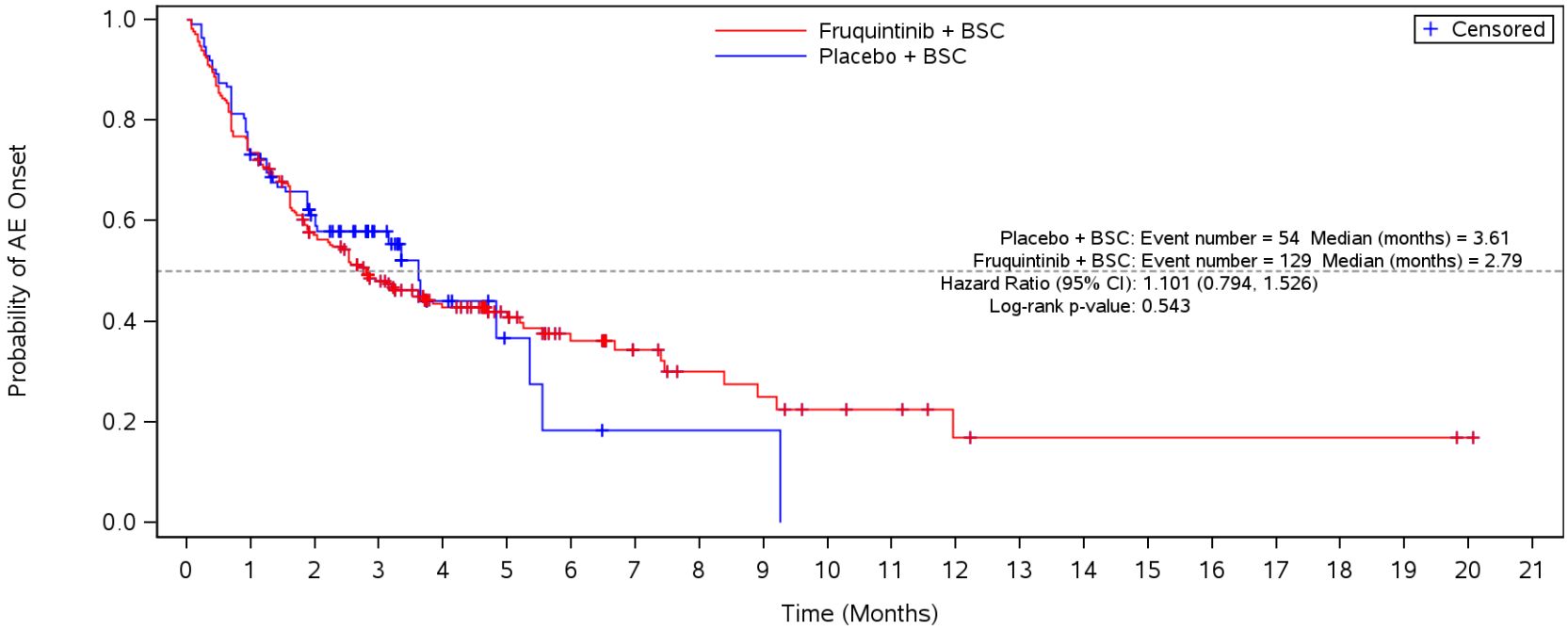
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
TEAE ≥ CTCAE Grade 3
<65 years



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
TEAE ≥ CTCAE Grade 3
>=65 years

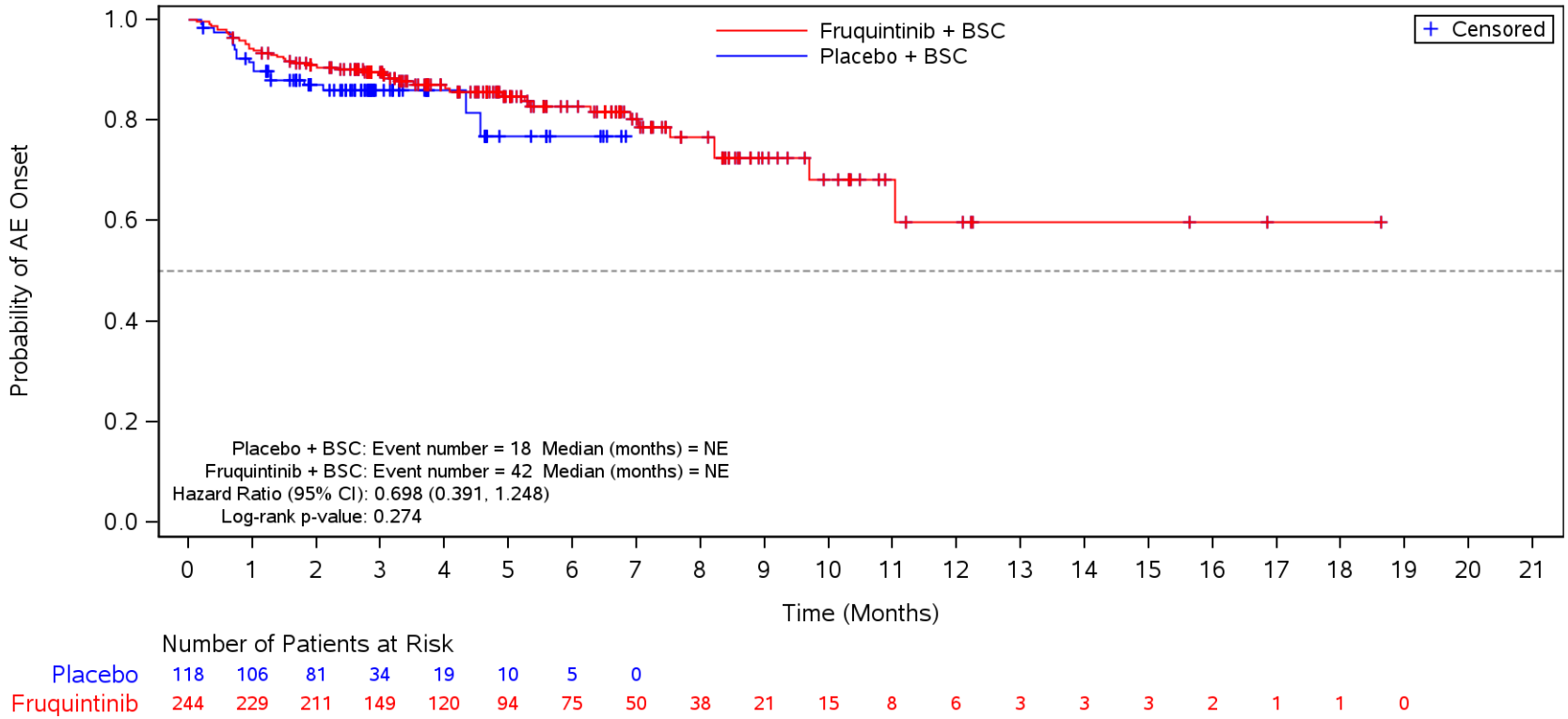


Number of Patients at Risk

Placebo	112	81	58	24	9	4	2	1	1	1	0										
Fruquintinib	212	156	116	83	59	40	27	17	12	10	7	6	3	2	2	2	2	2	2	2	1

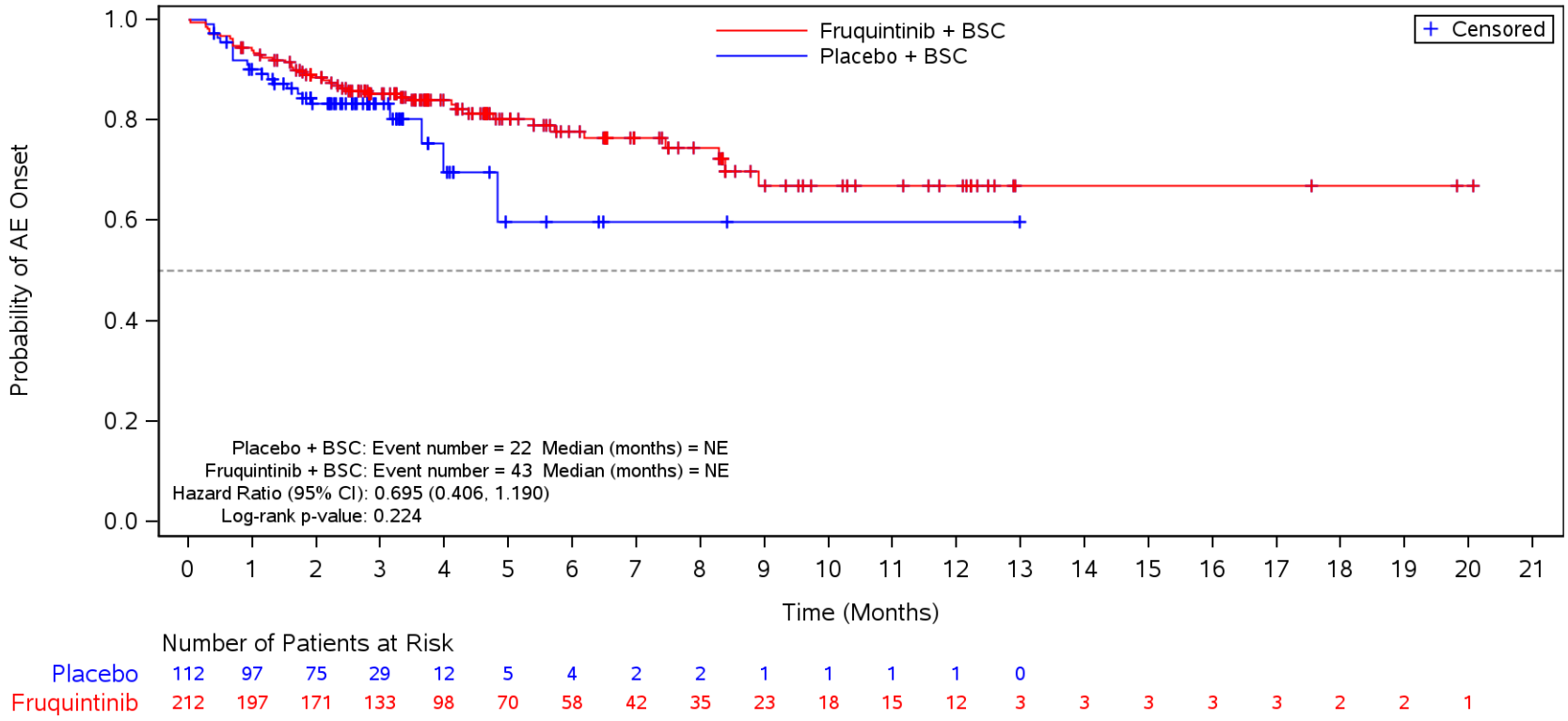
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
Discontinuation due to TEAE
<65 years



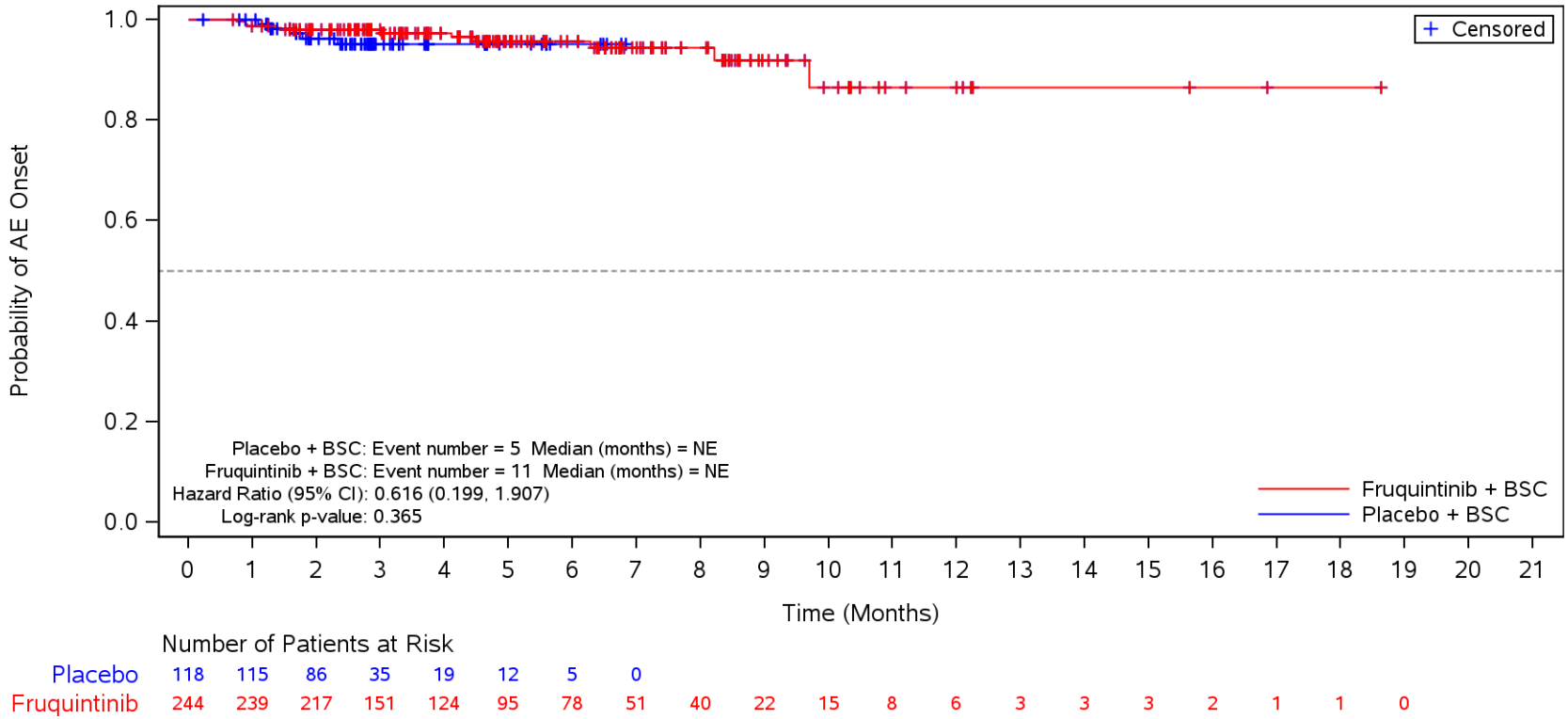
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
Discontinuation due to TEAE
>=65 years



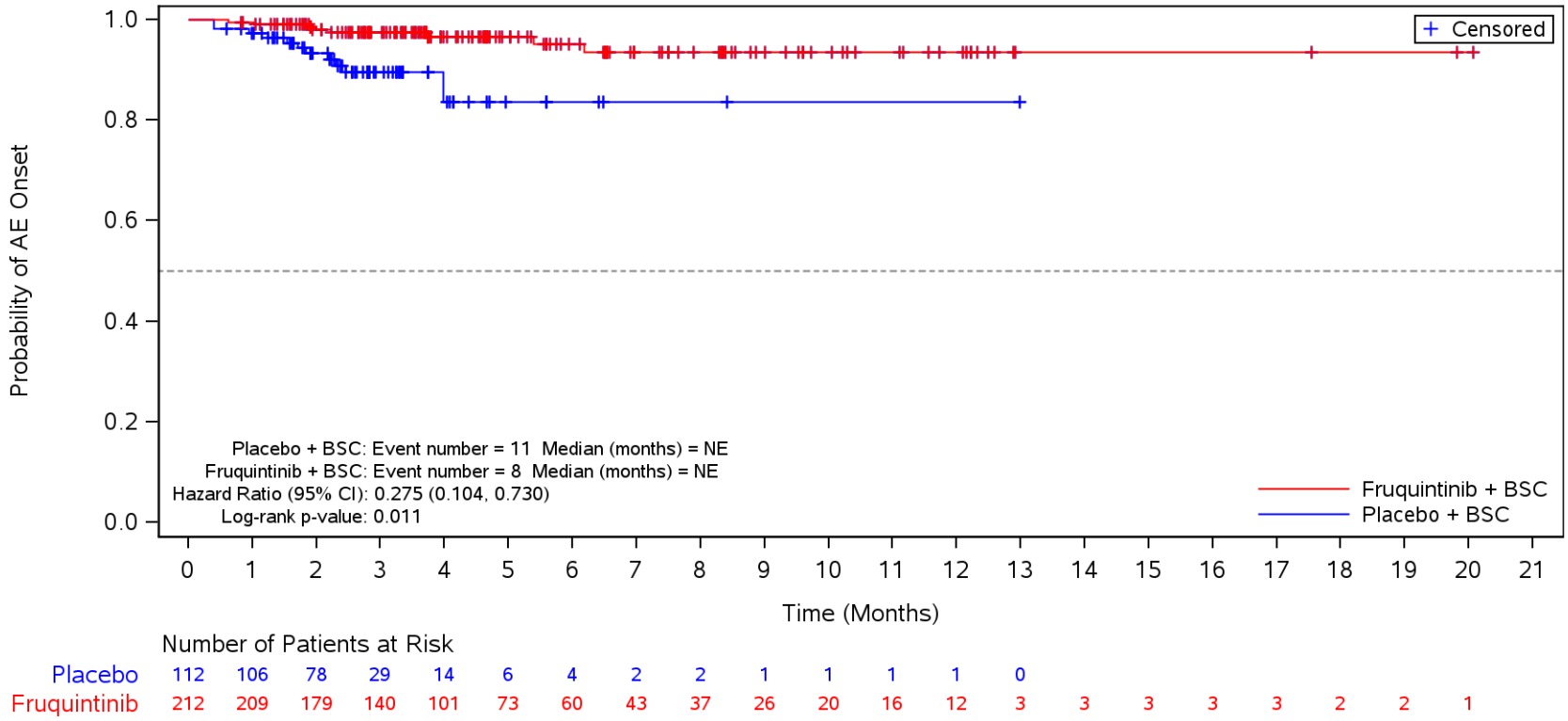
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3B
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Age
Safety Population
Deaths (Grade 5 TEAEs)
<65 years



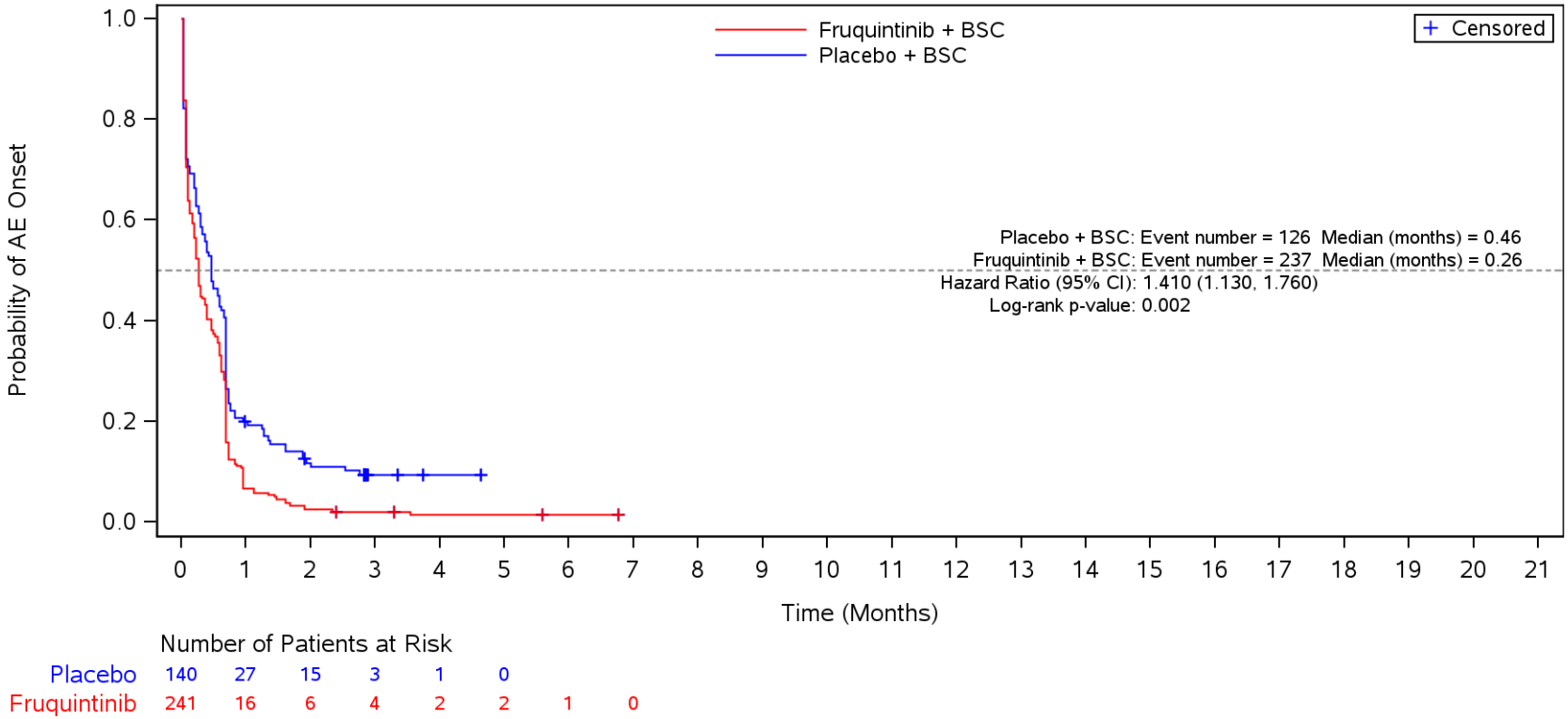
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
TEAE
Male



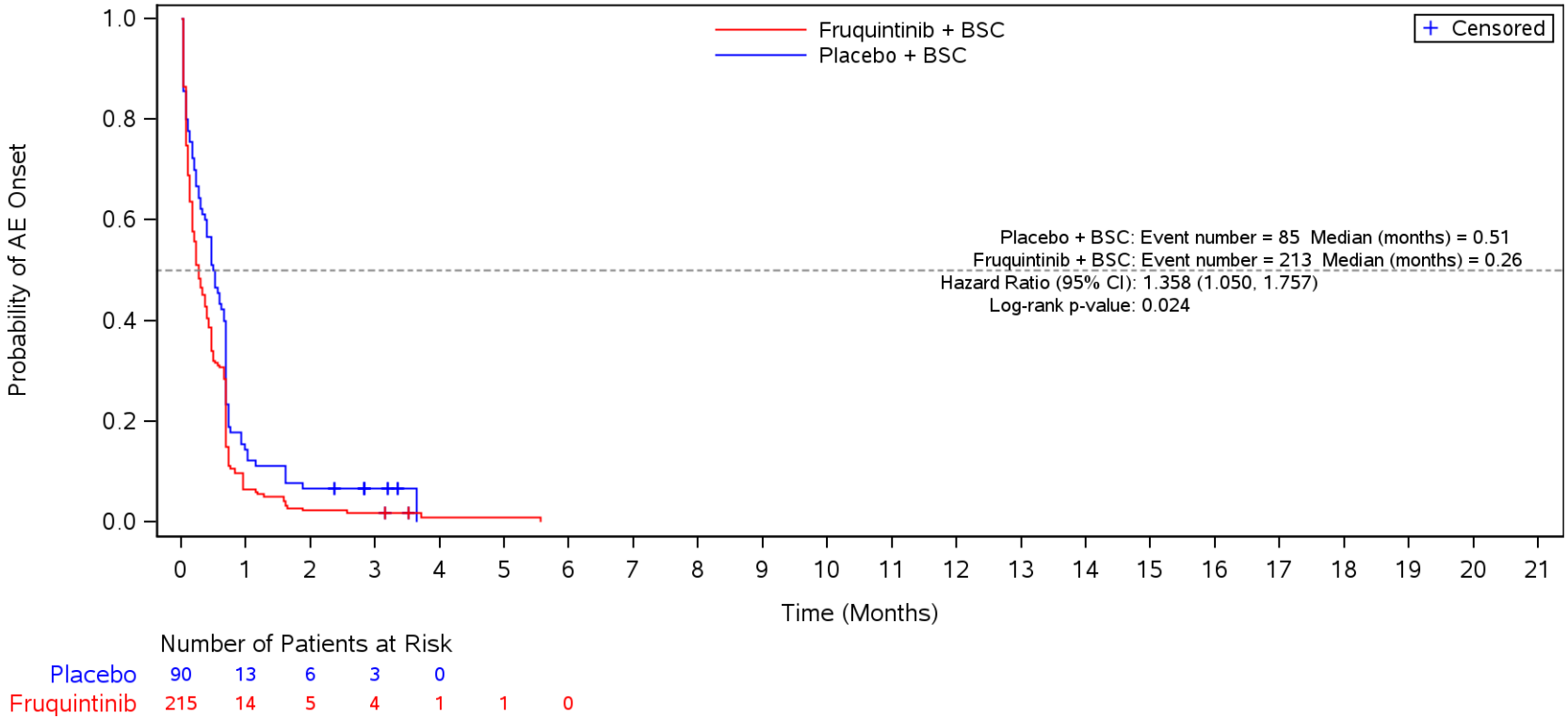
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
TEAE
Male



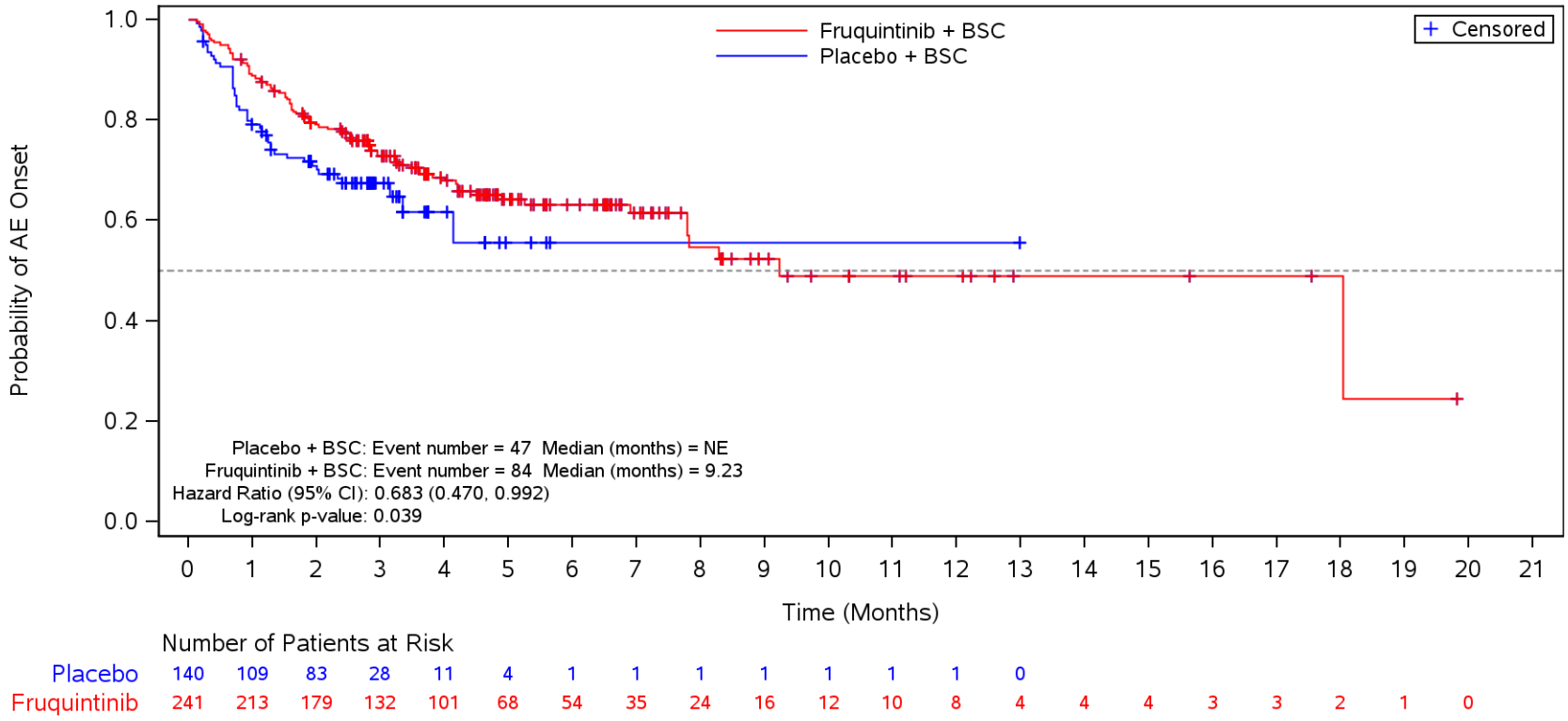
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
TEAE
Female



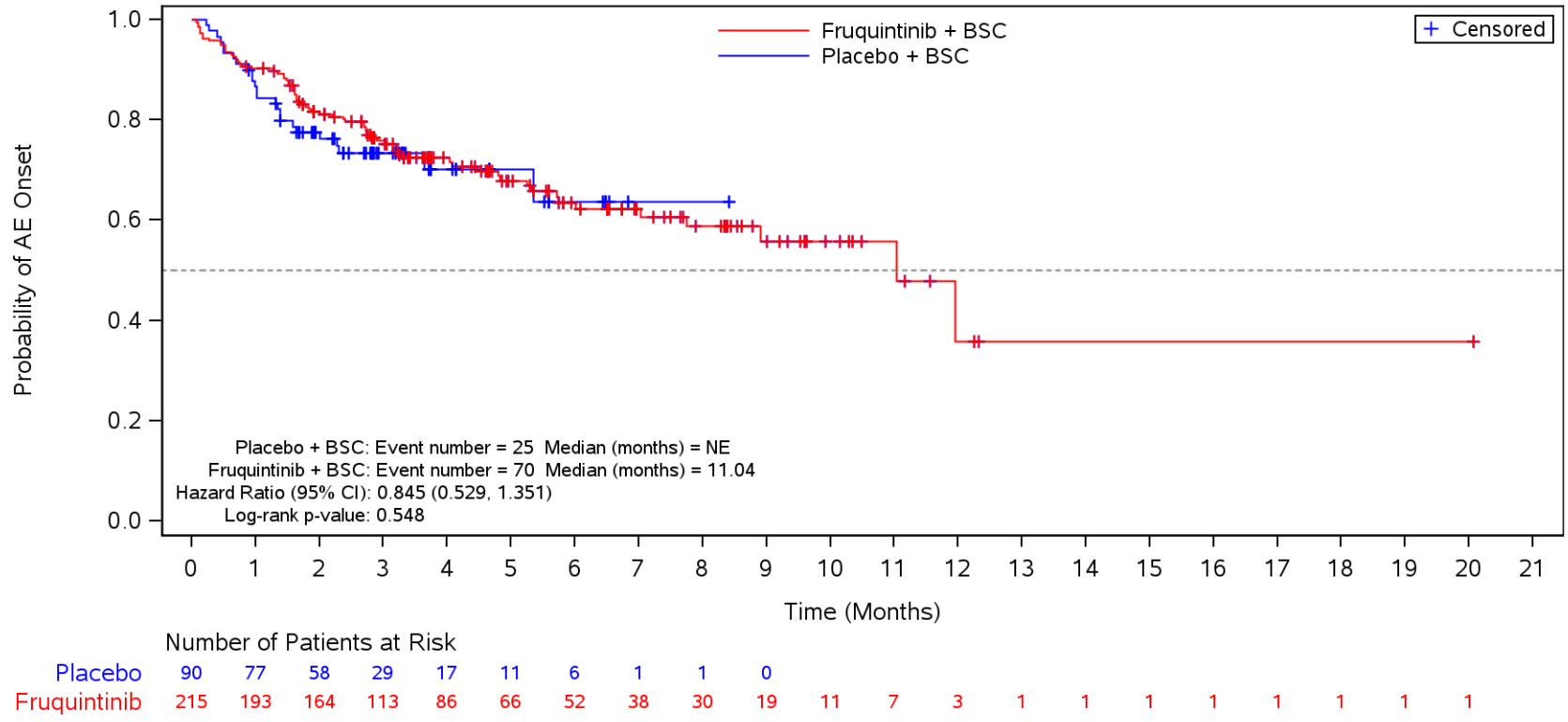
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
Serious TEAE
Male



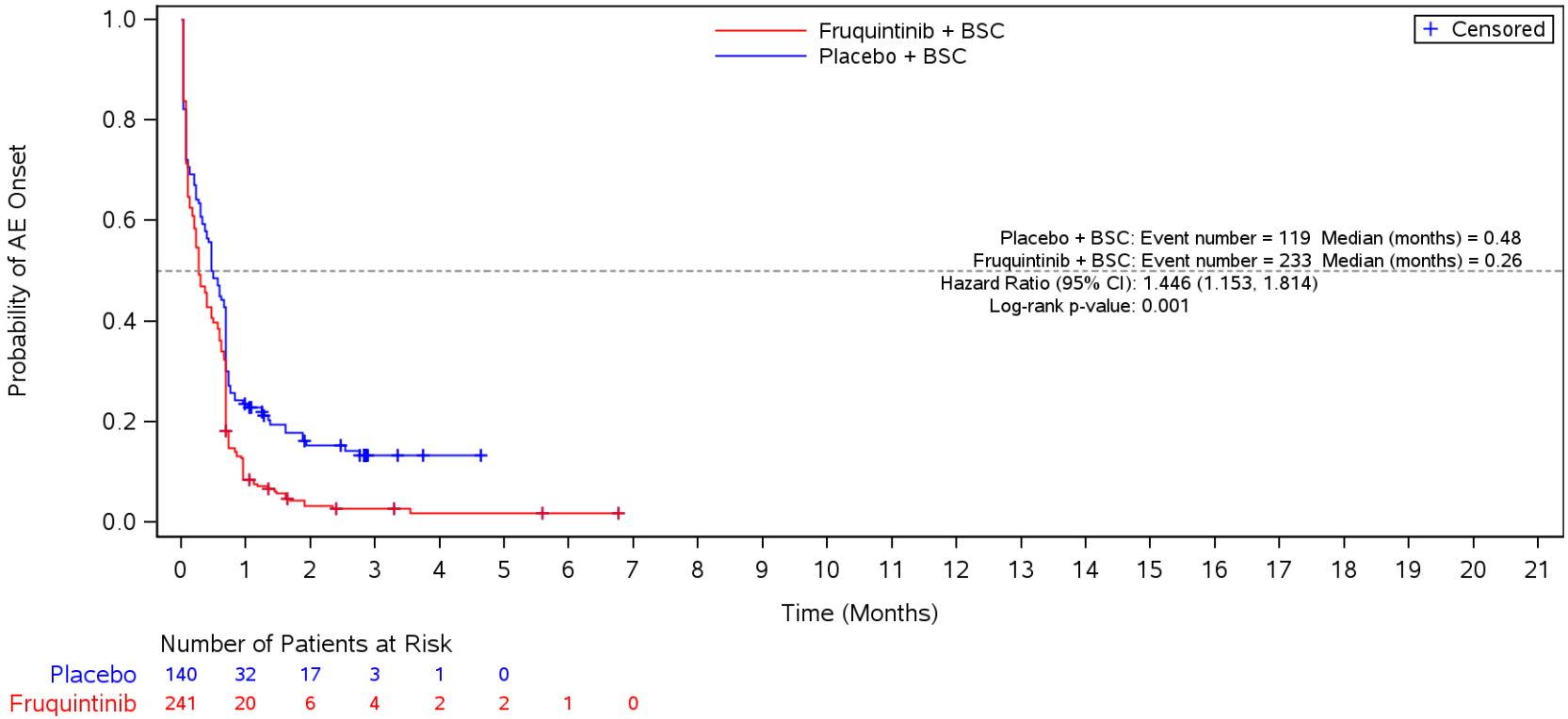
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
Serious TEAE
Female



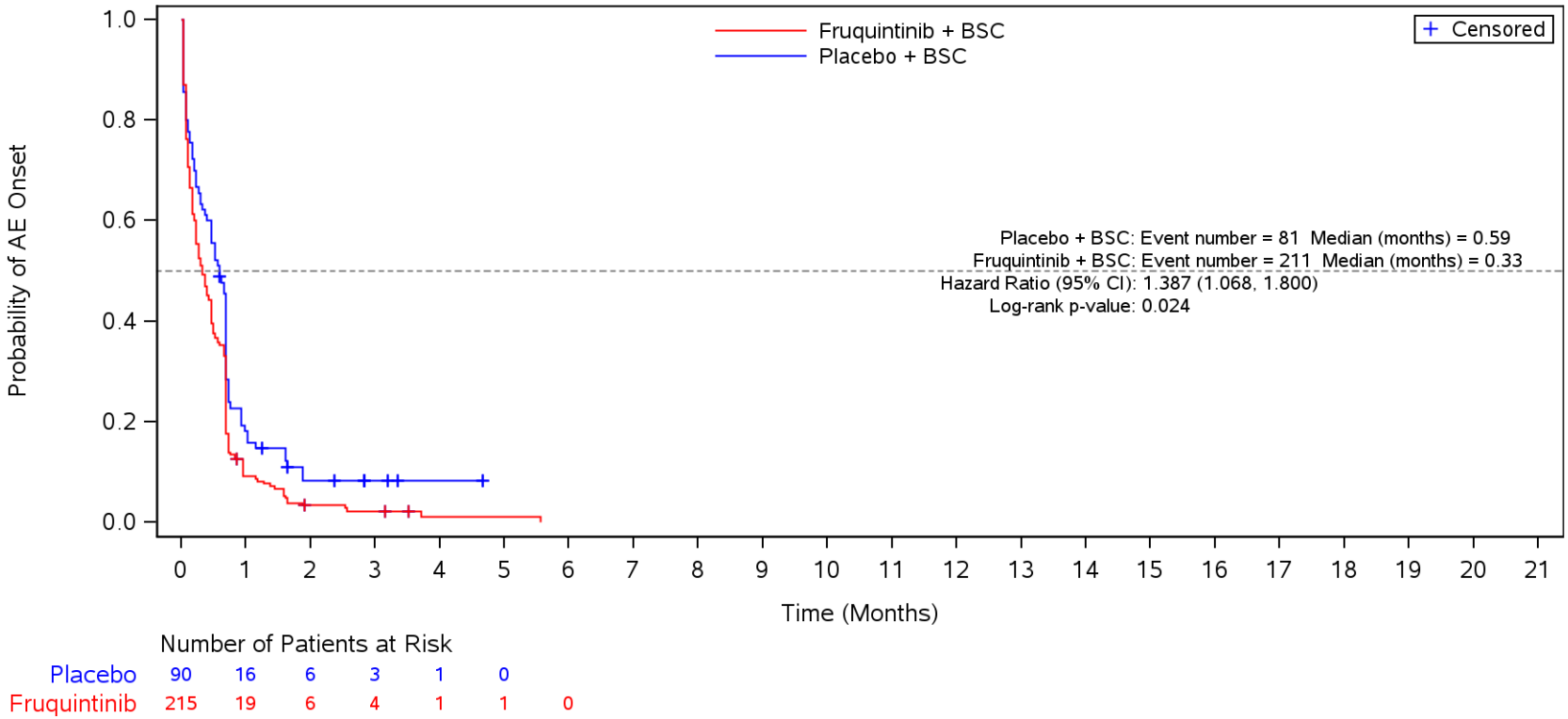
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
TEAE ≤ CTCAE Grade 2
Male



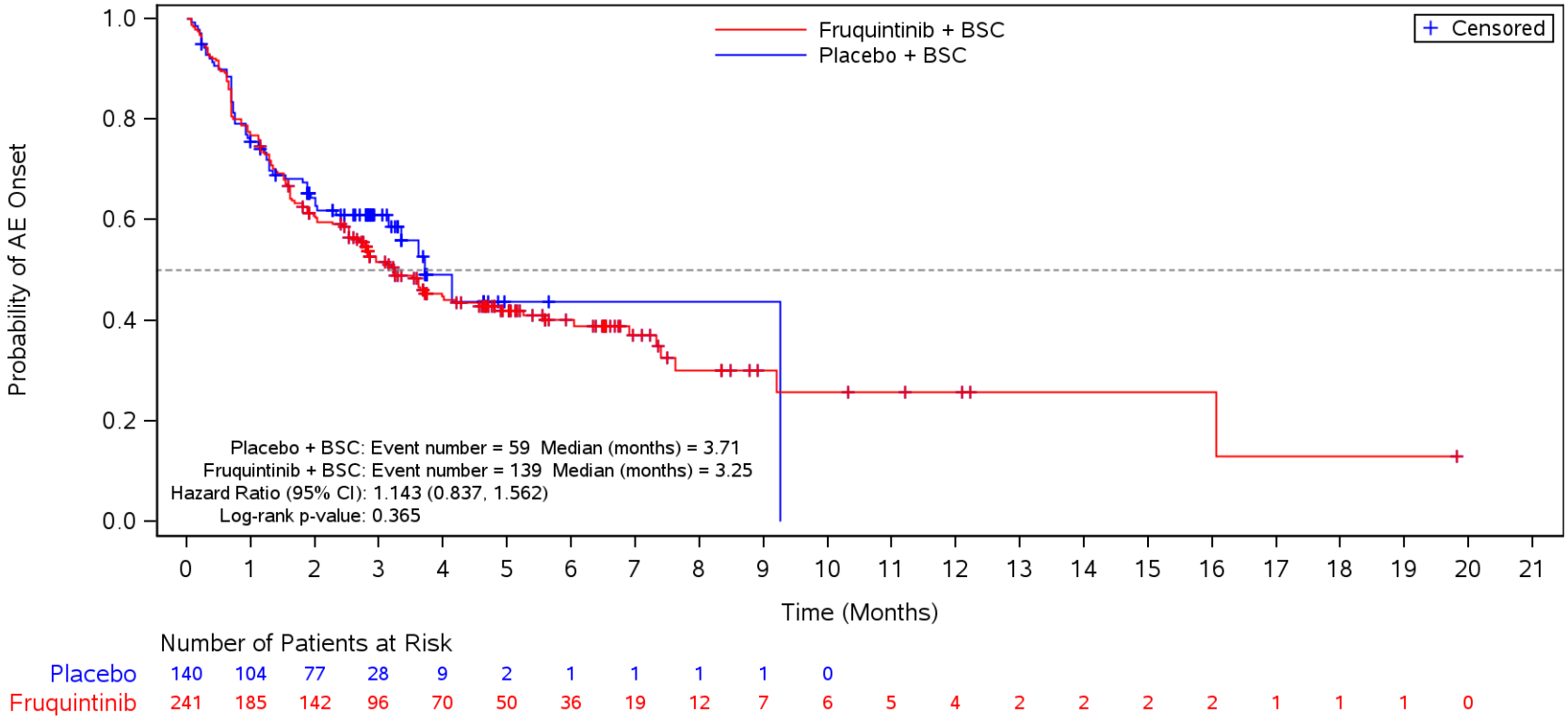
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
TEAE ≤ CTCAE Grade 2
Female



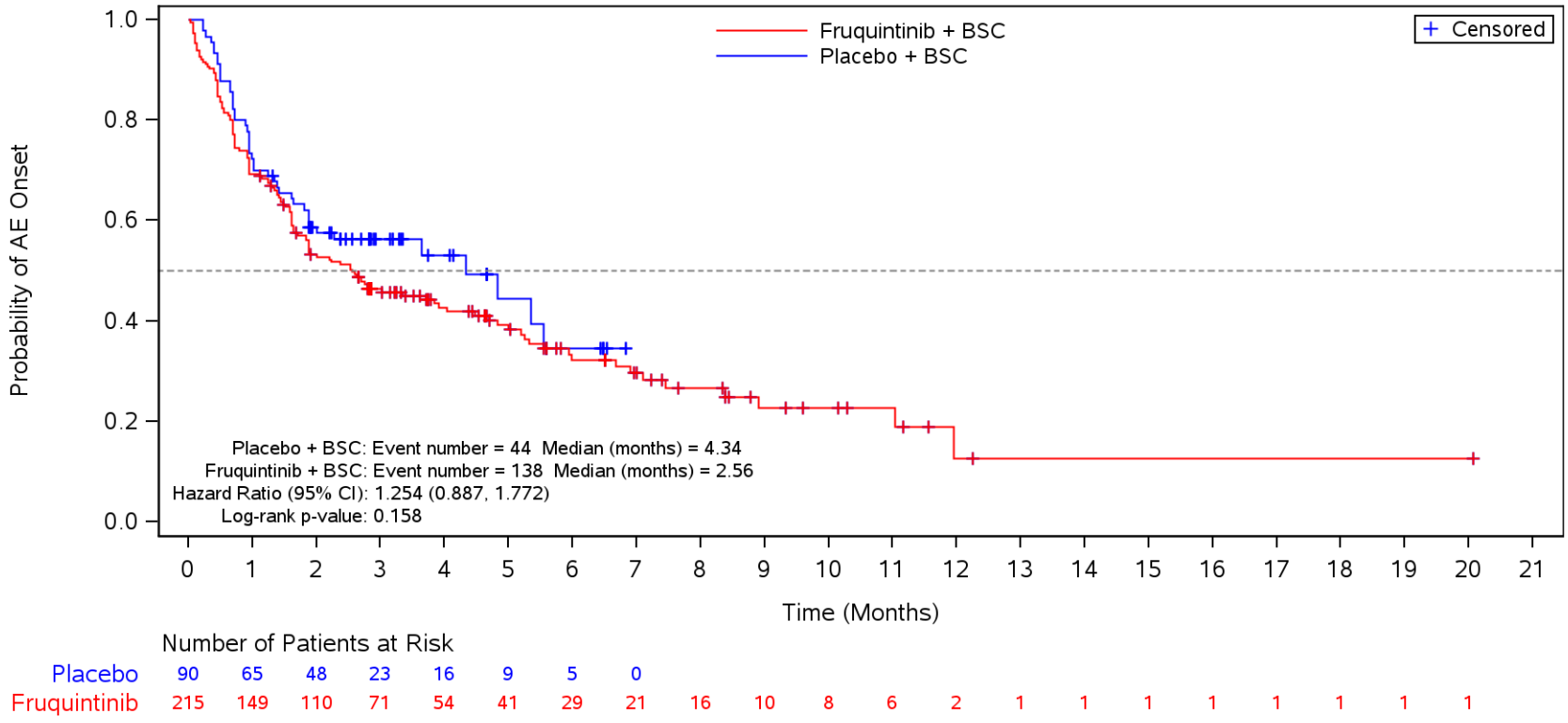
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
TEAE ≥ CTCAE Grade 3
Male



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
TEAE ≥ CTCAE Grade 3
Female

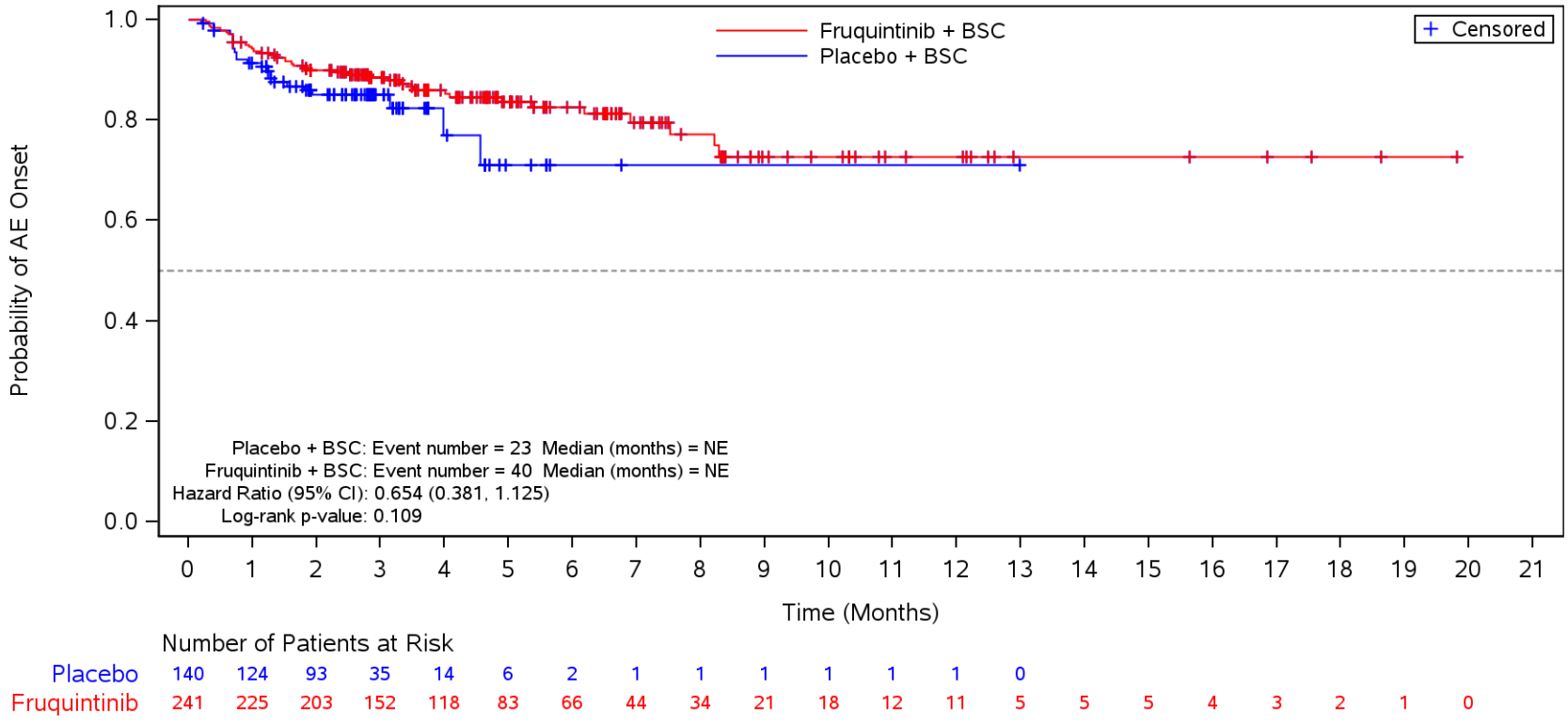


Number of Patients at Risk

Placebo	90	65	48	23	16	9	5	0													
Fruquintinib	215	149	110	71	54	41	29	21	16	10	8	6	2	1	1	1	1	1	1	1	1

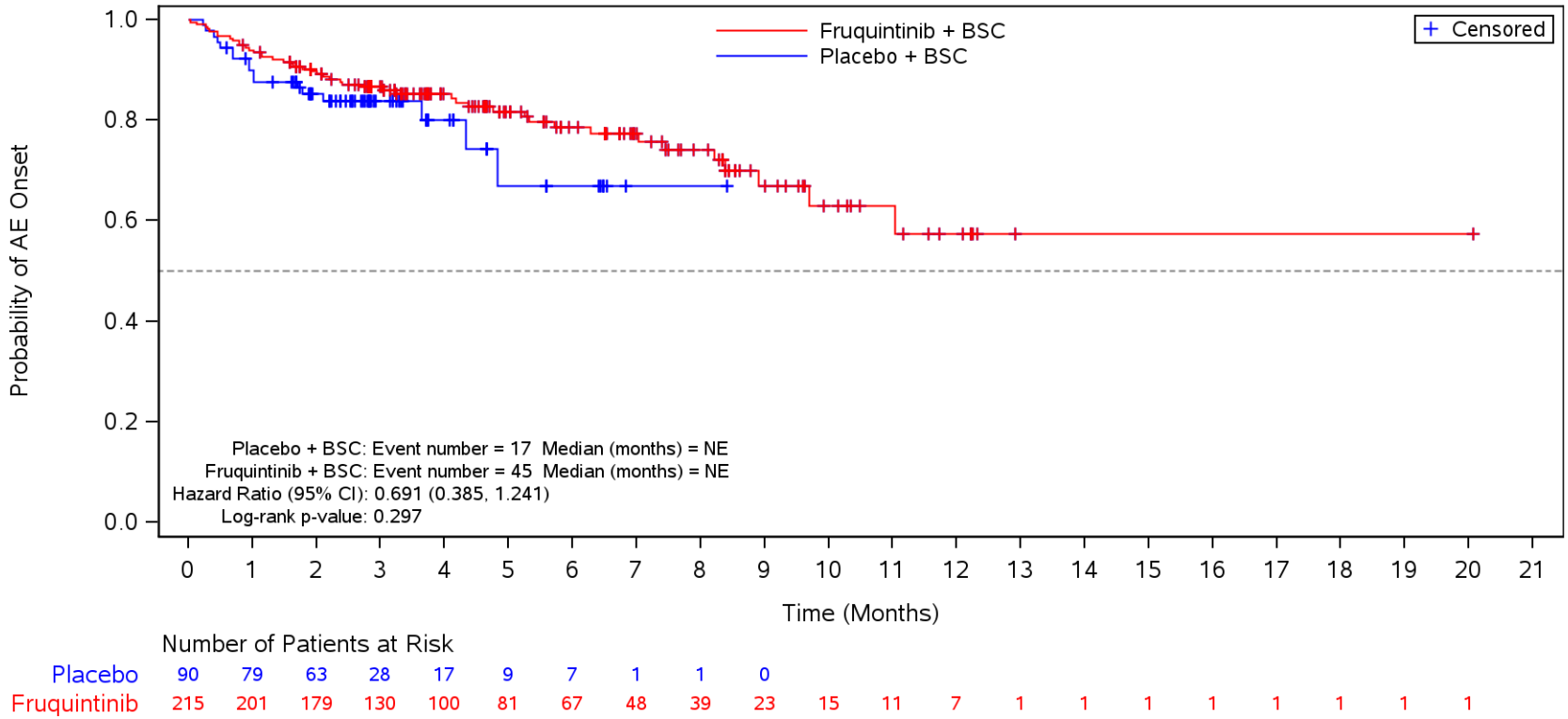
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
Discontinuation due to TEAE
Male



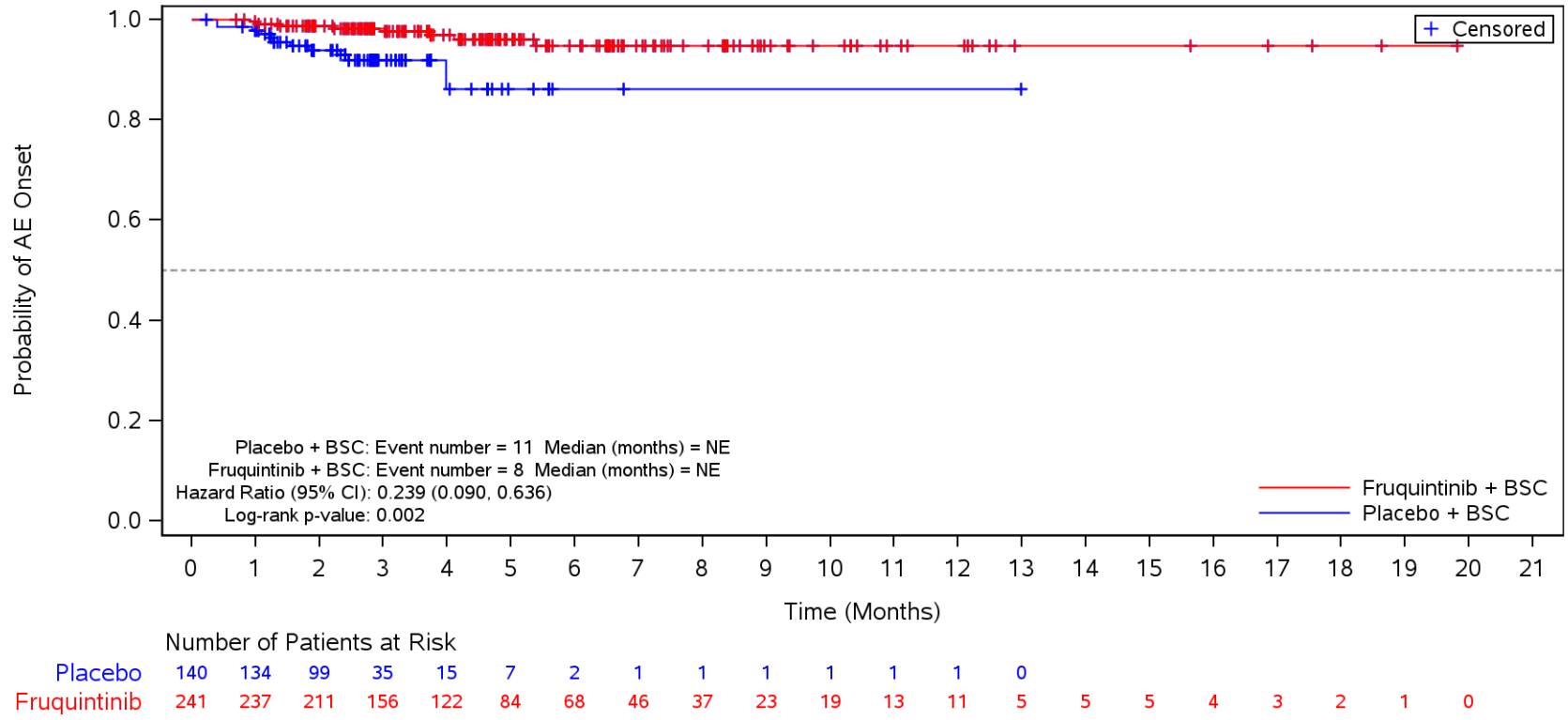
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
Discontinuation due to TEAE
Female



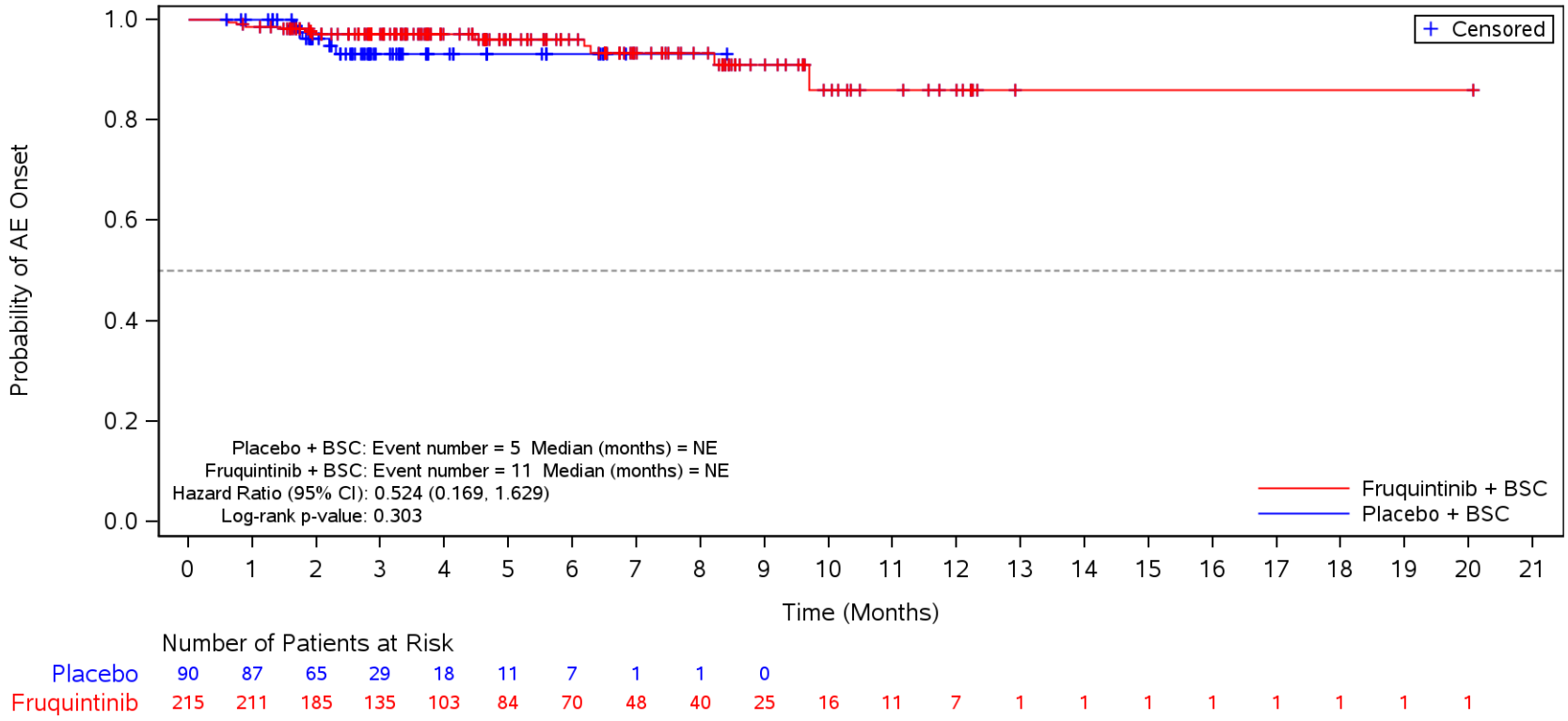
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3C
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Sex
Safety Population
Deaths (Grade 5 TEAEs)
Male



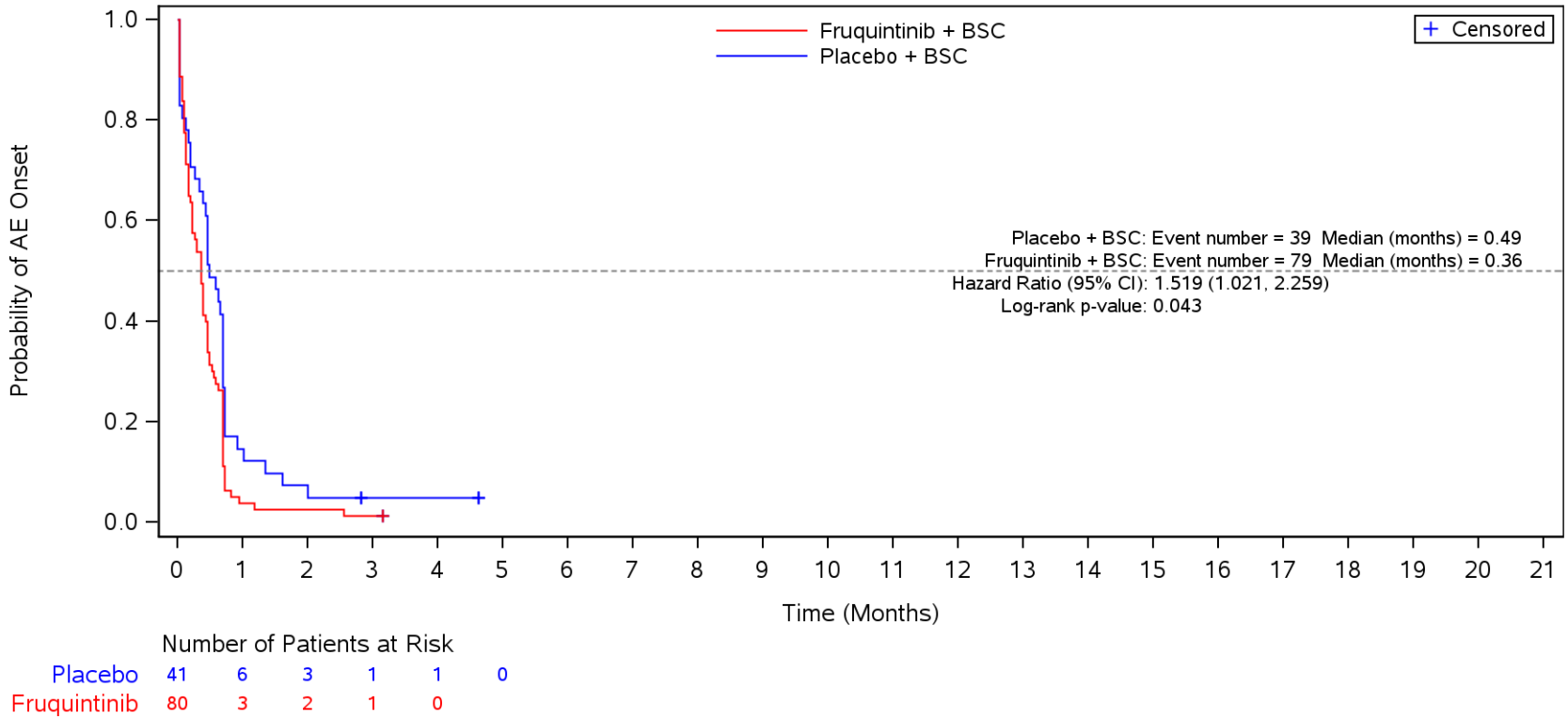
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE
North America



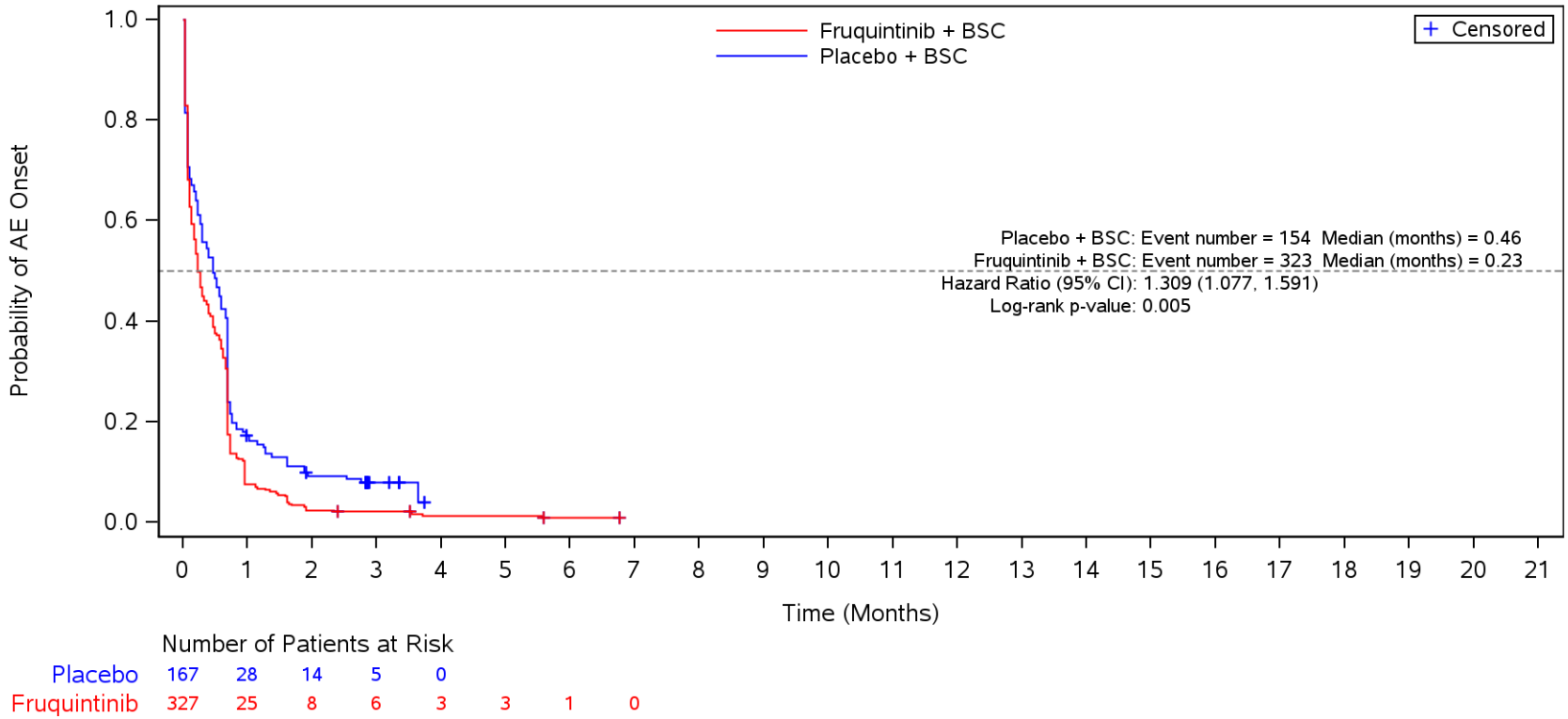
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE
North America



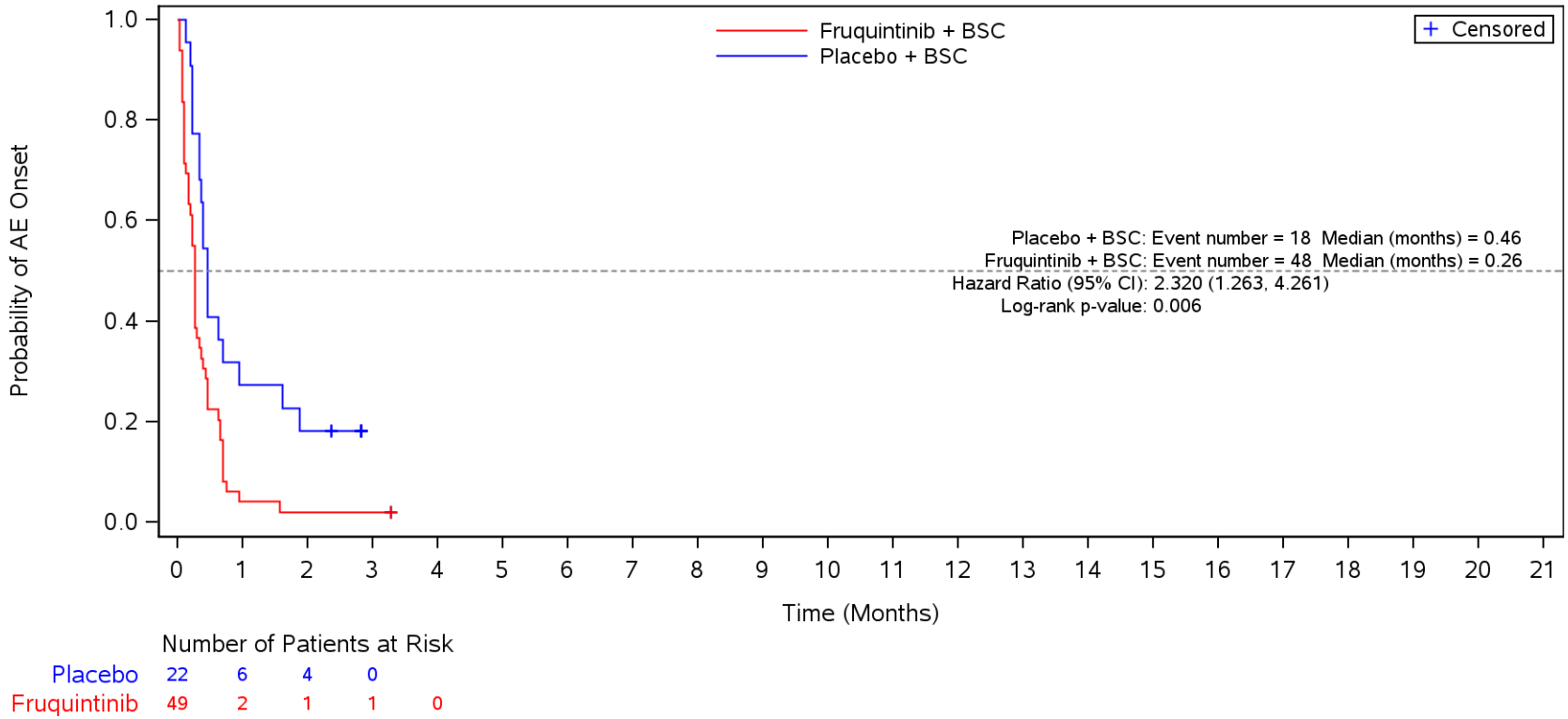
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE
Europe



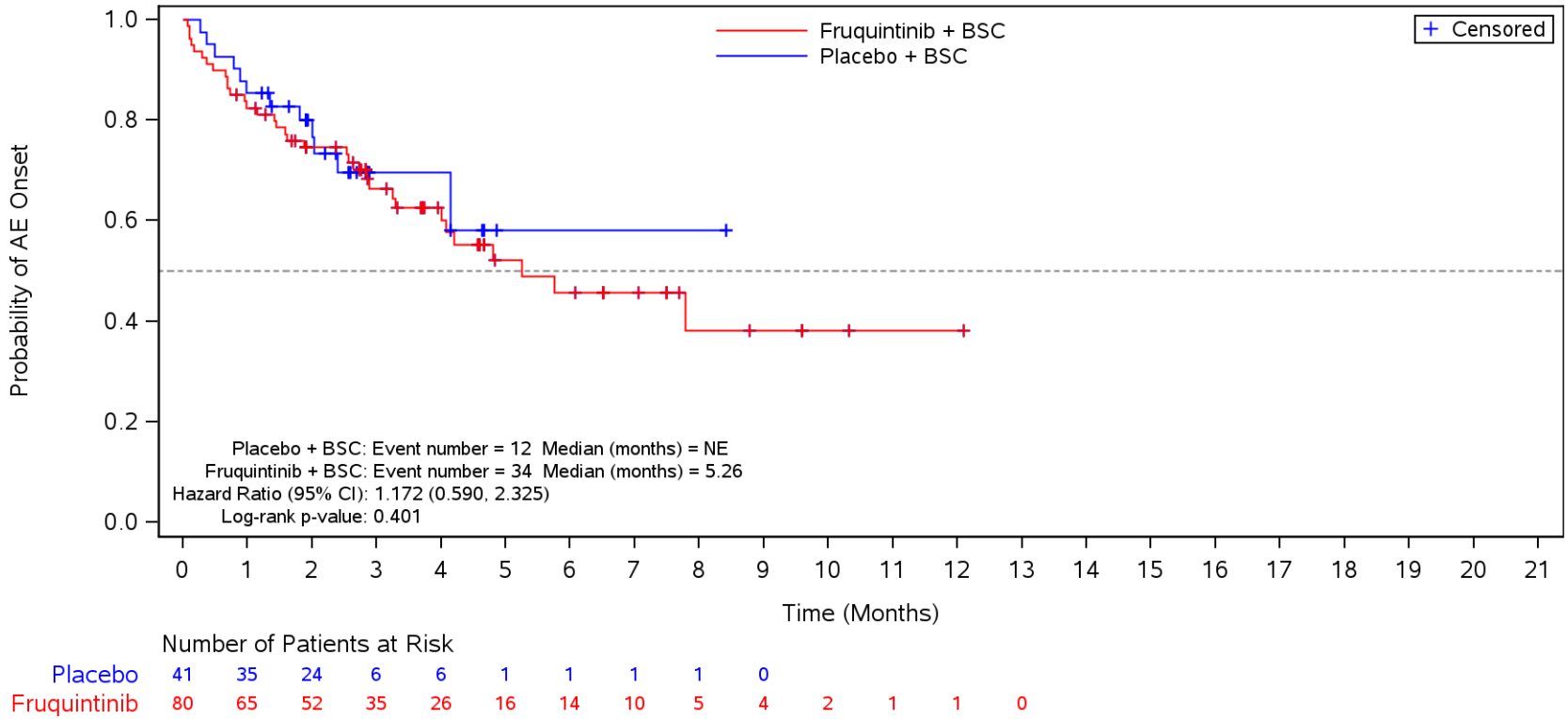
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE
Asia



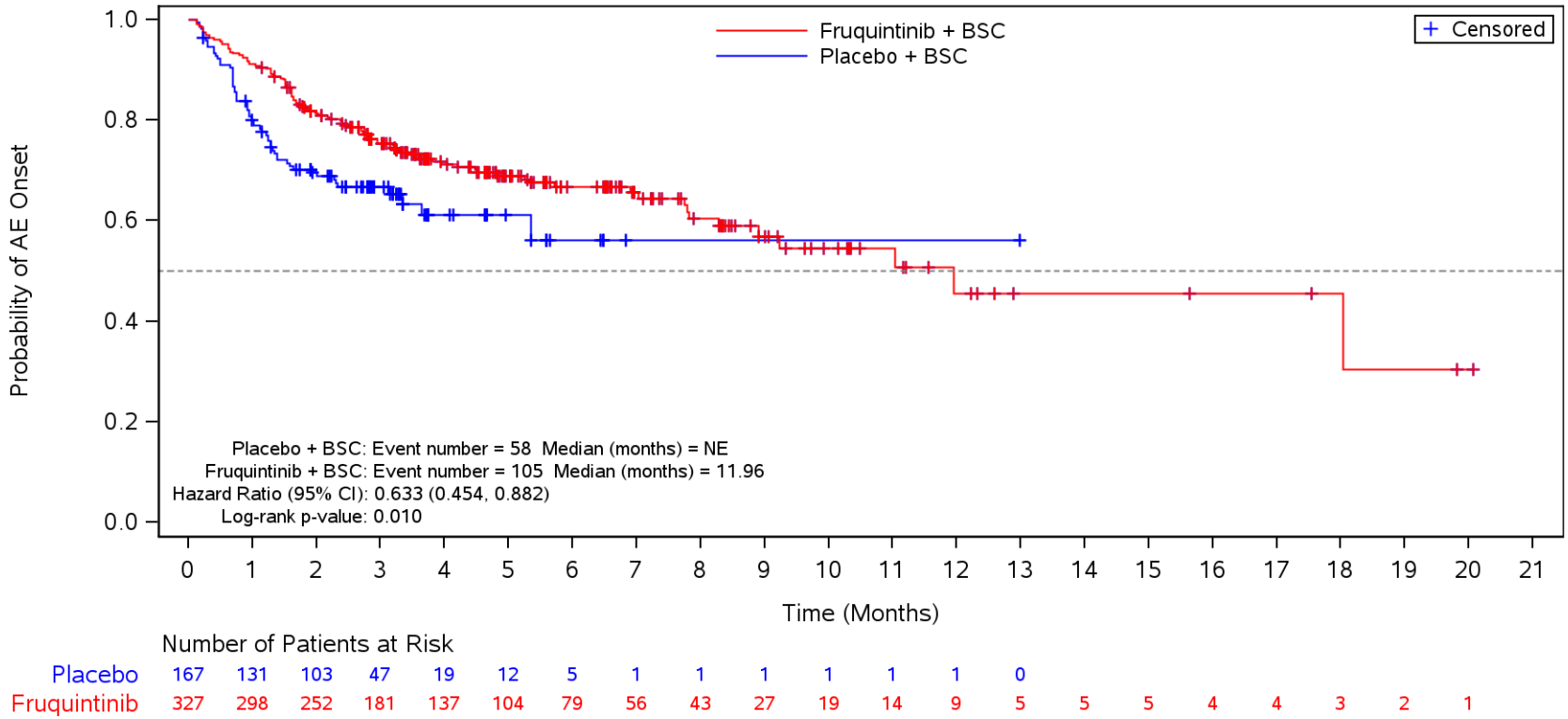
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
Serious TEAE
North America



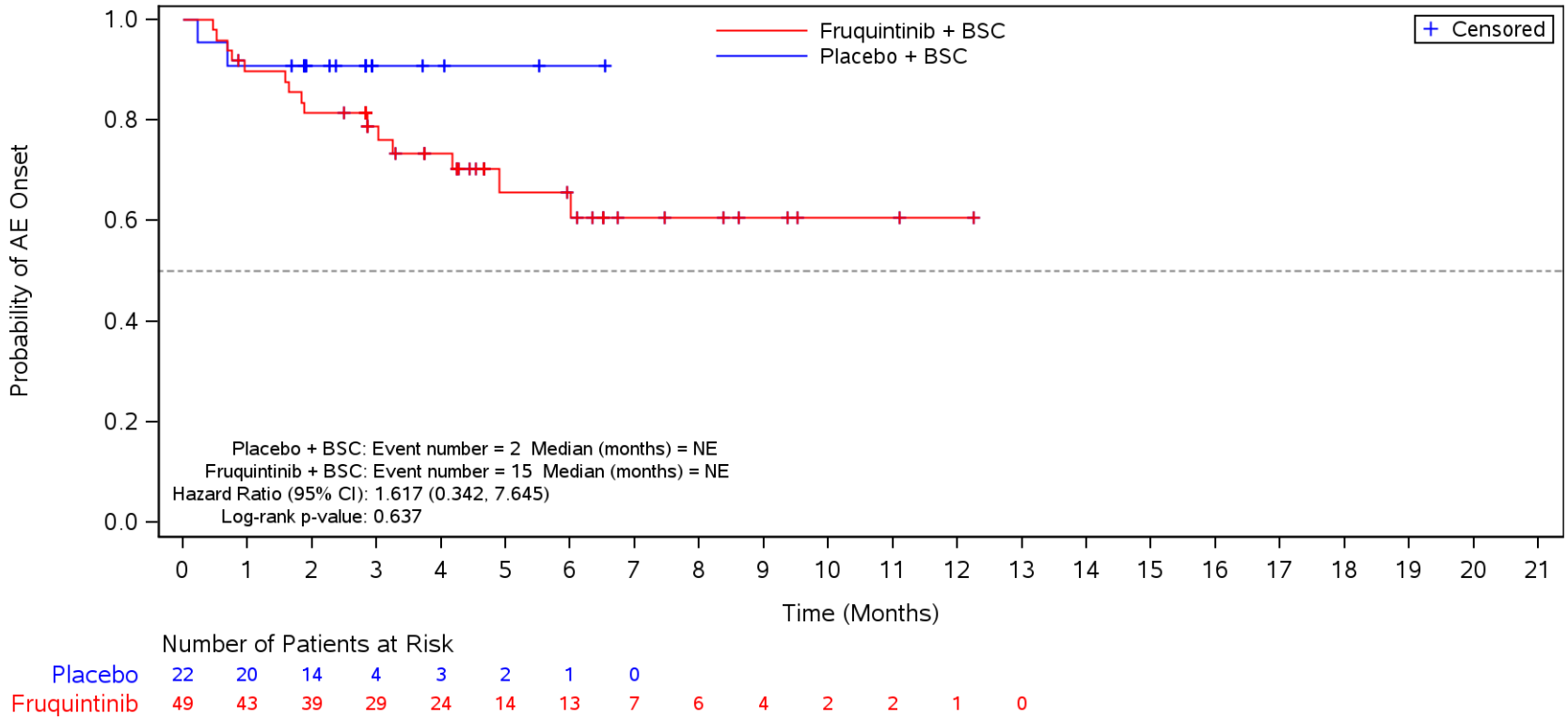
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
Serious TEAE
Europe



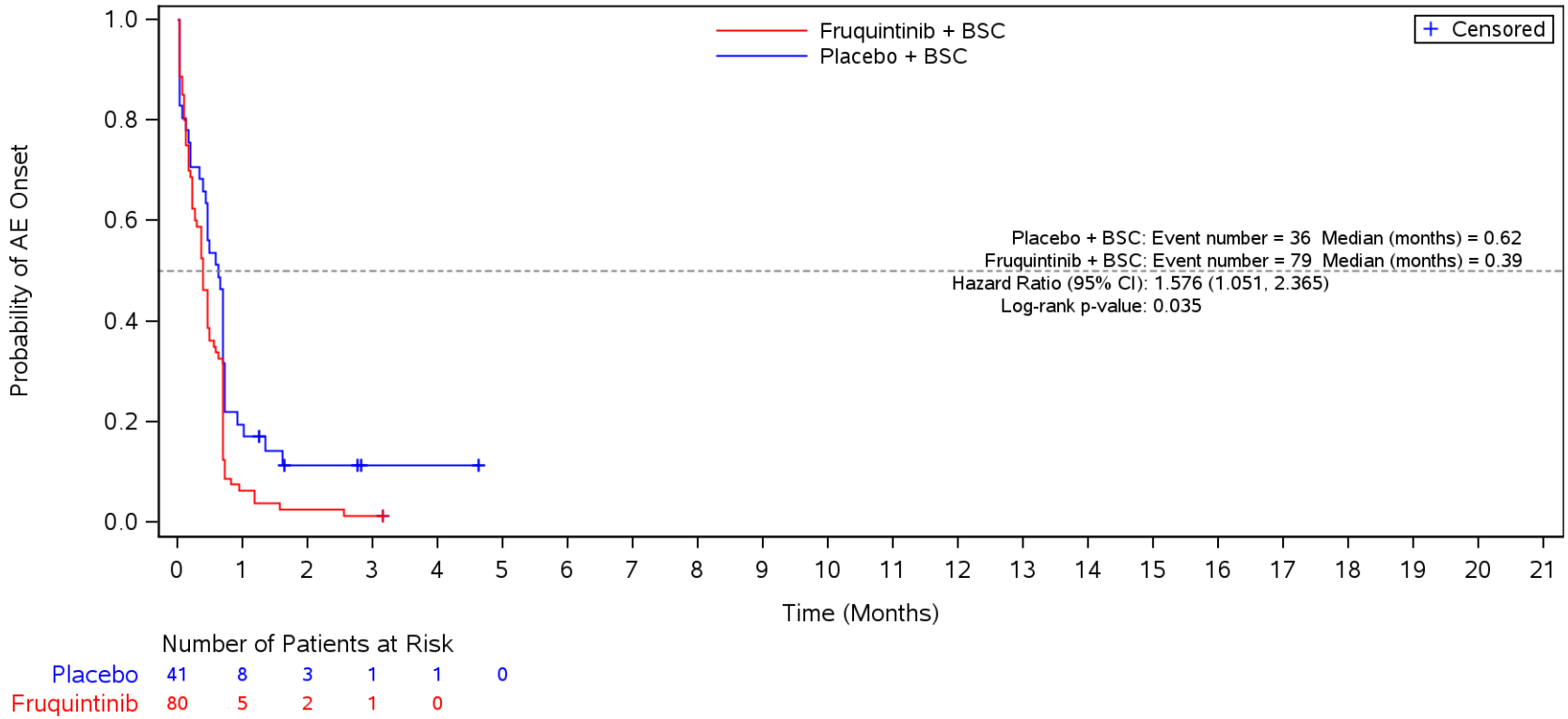
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
Serious TEAE
Asia



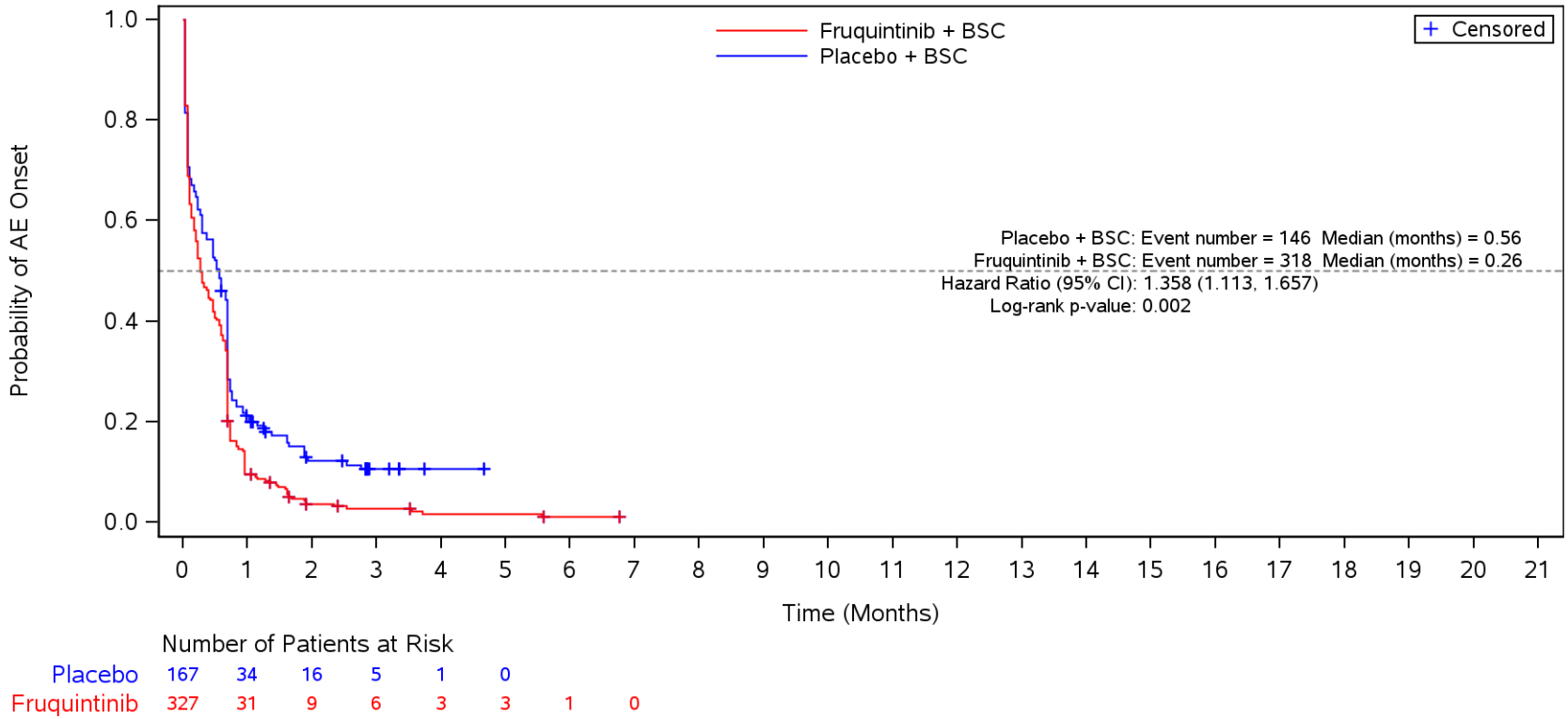
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE ≤ CTCAE Grade 2
North America



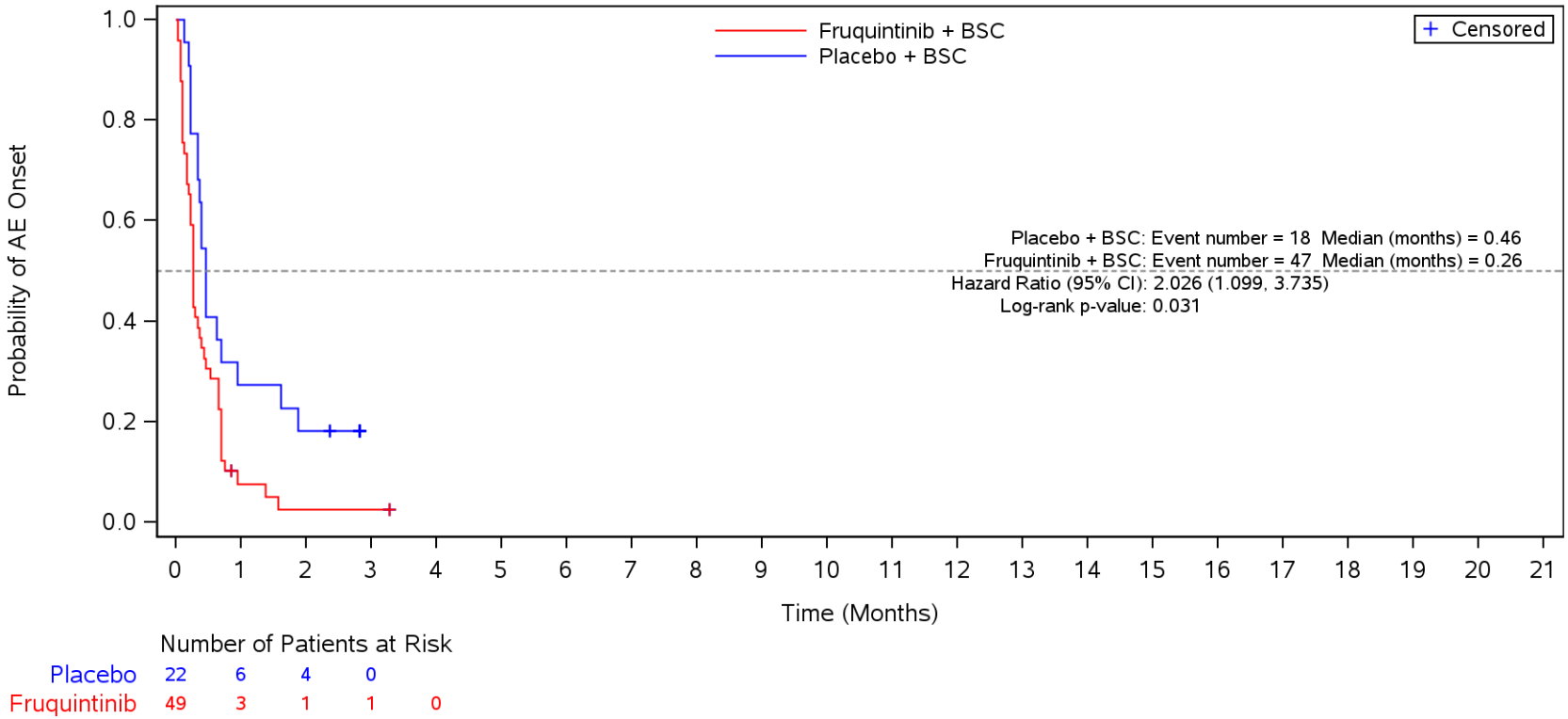
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE ≤ CTCAE Grade 2
Europe



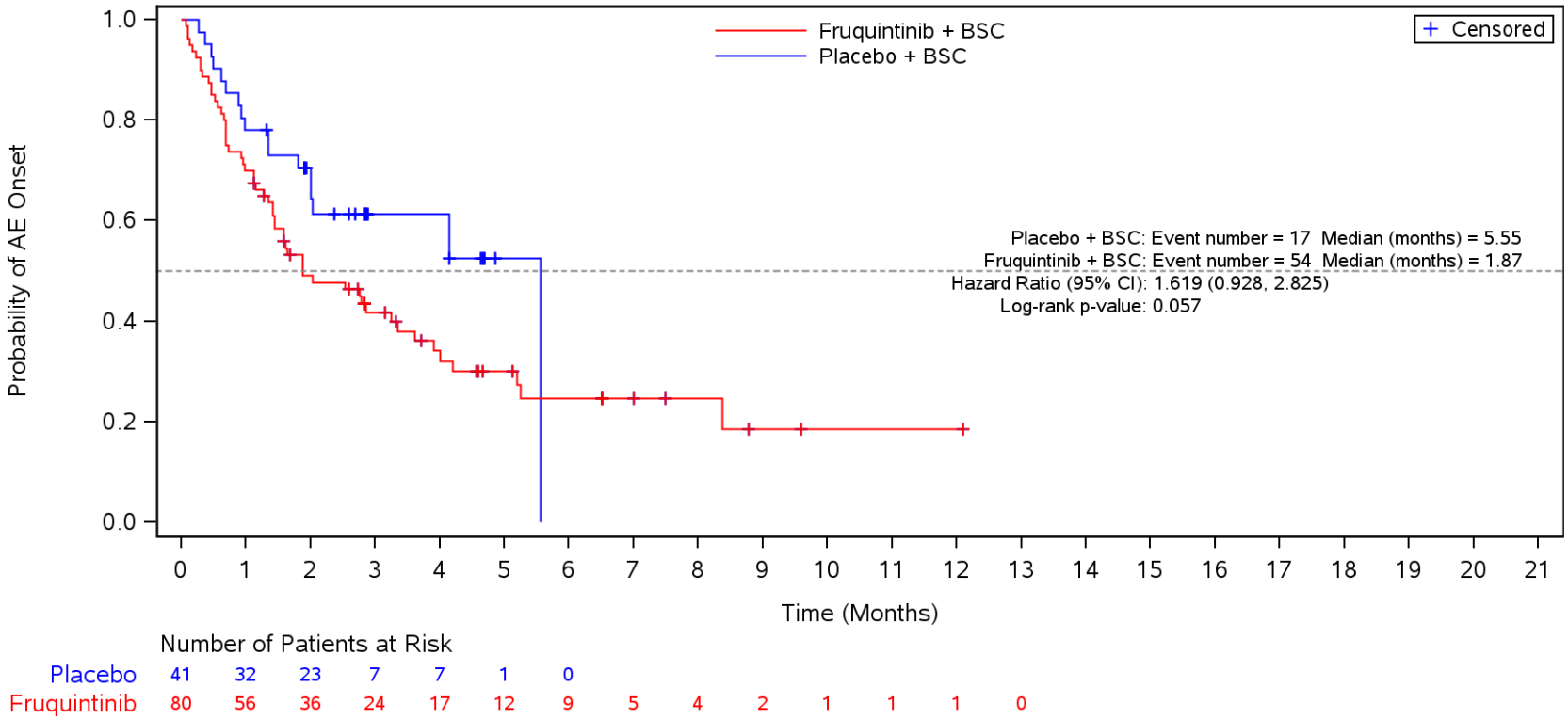
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE ≤ CTCAE Grade 2
Asia



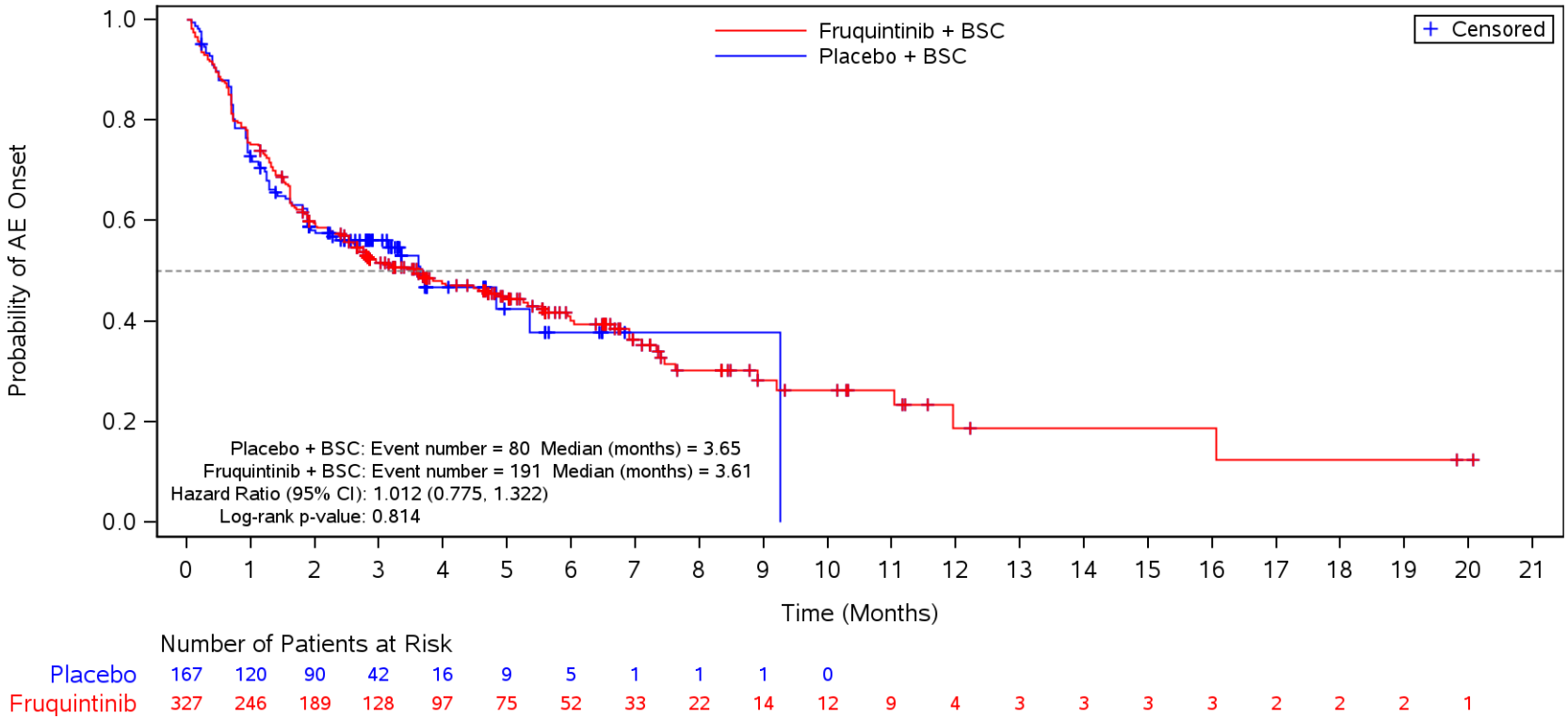
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE ≥ CTCAE Grade 3
North America



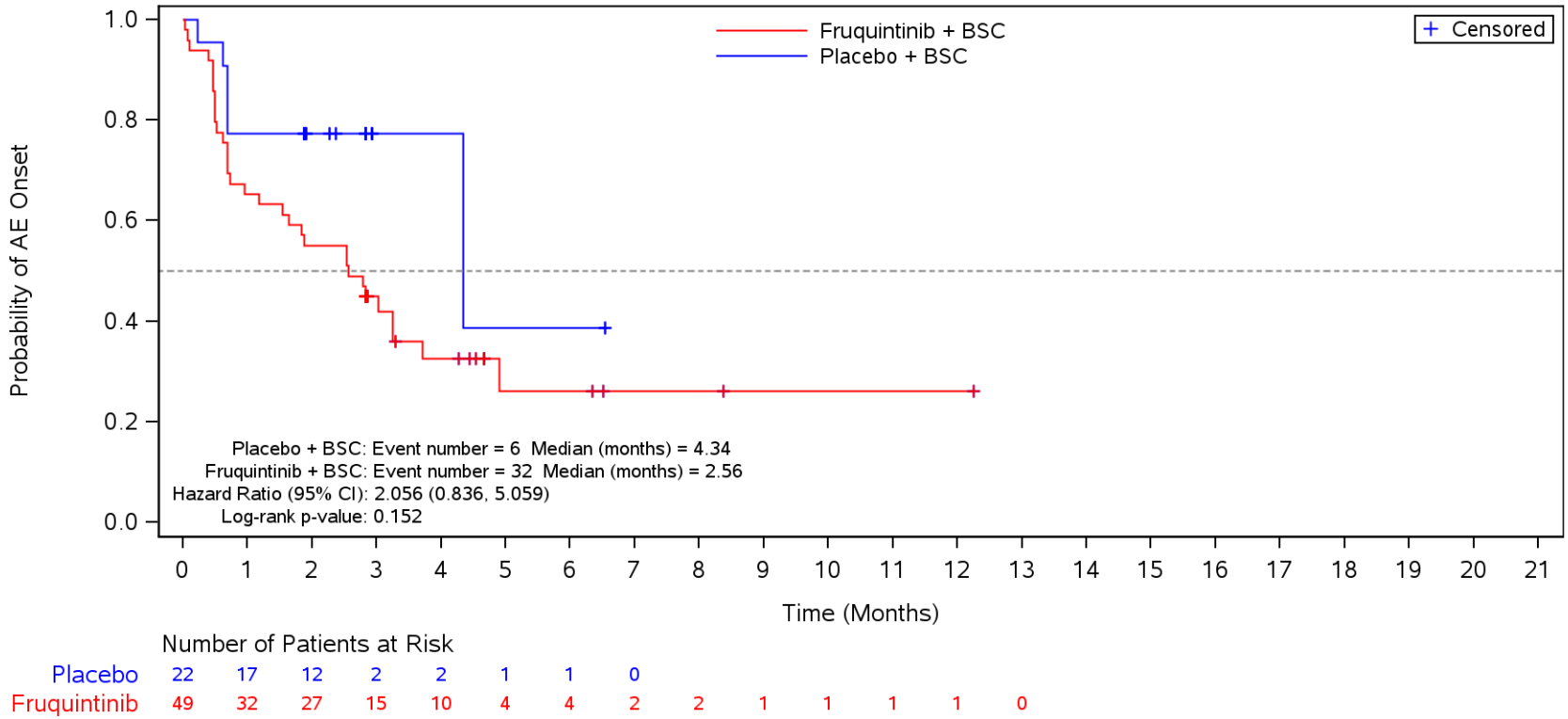
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE ≥ CTCAE Grade 3
Europe



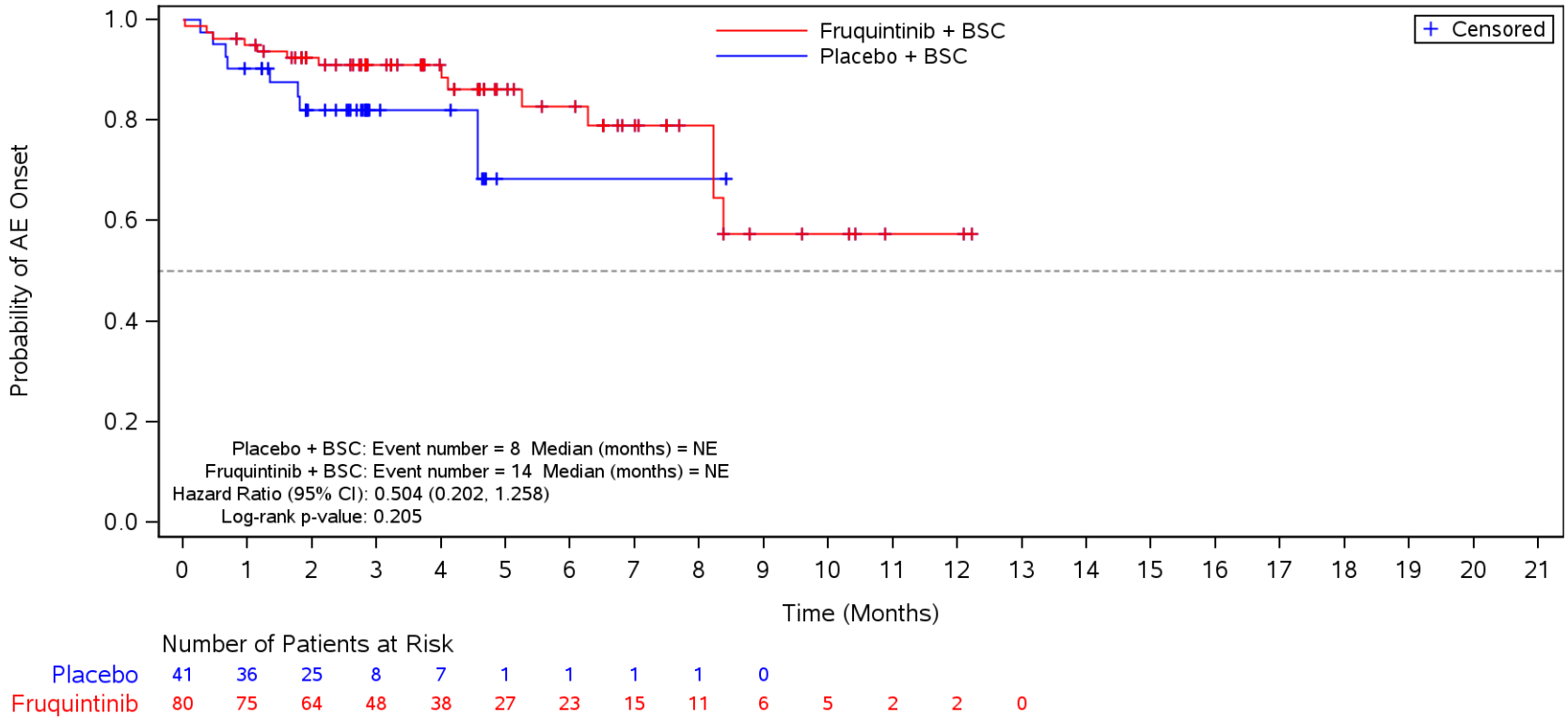
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
TEAE ≥ CTCAE Grade 3
Asia



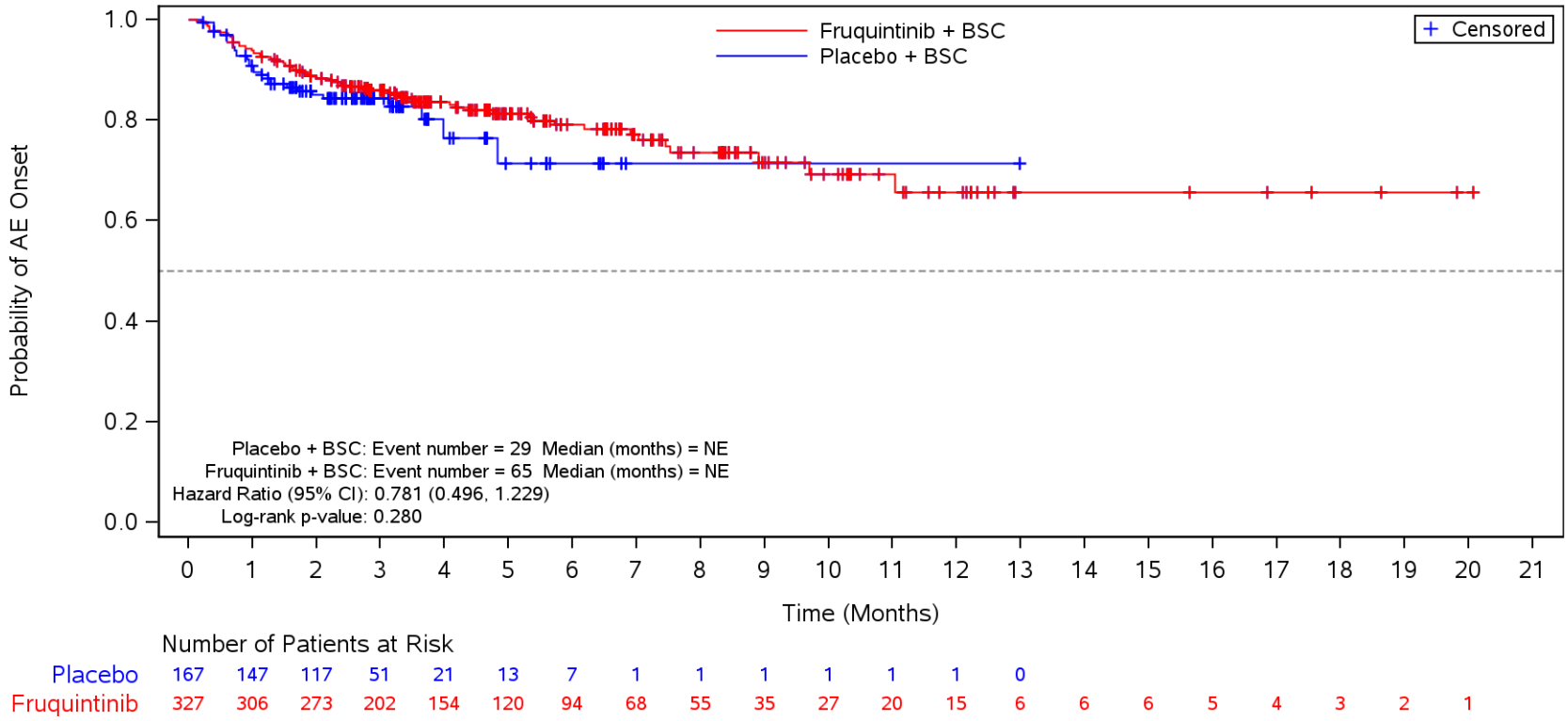
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
Discontinuation due to TEAE
North America



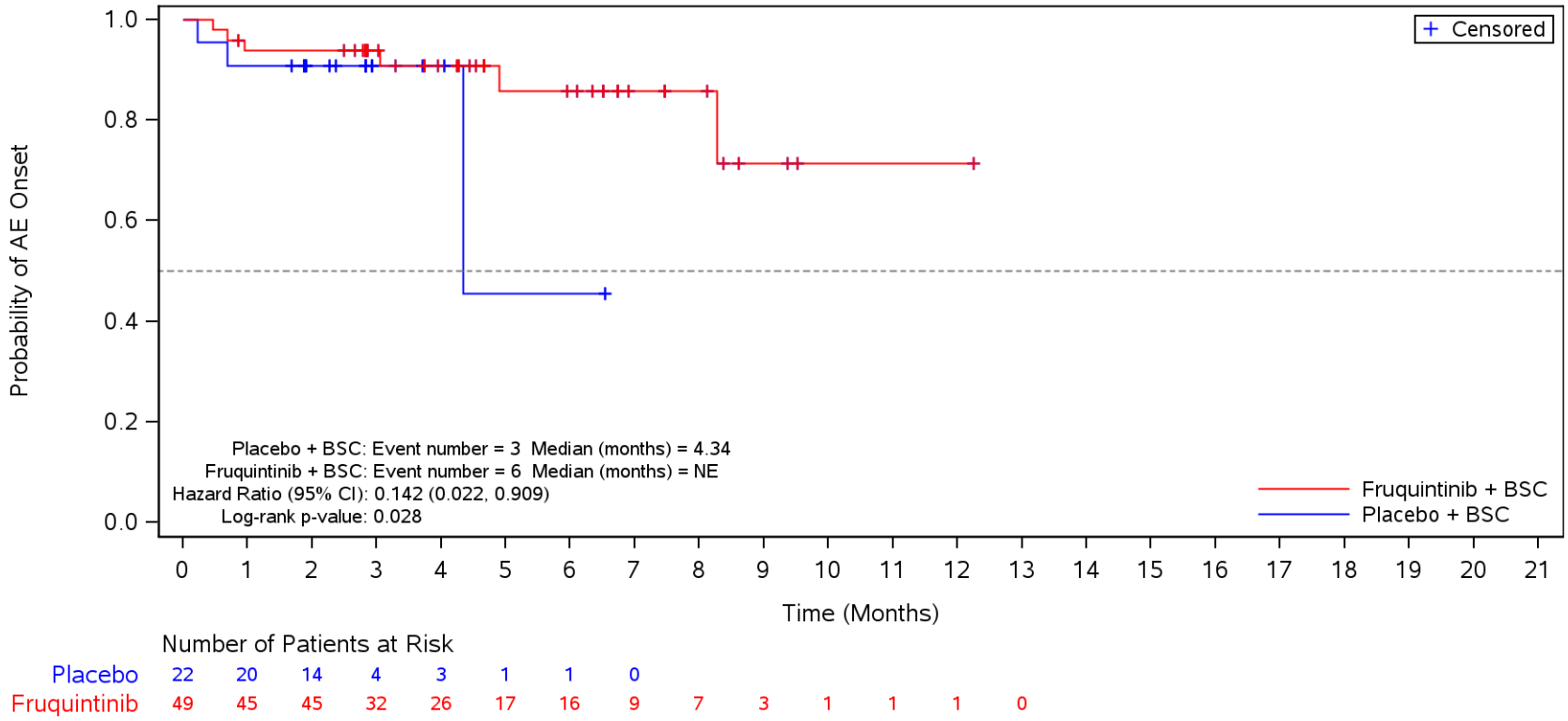
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
Discontinuation due to TEAE
Europe



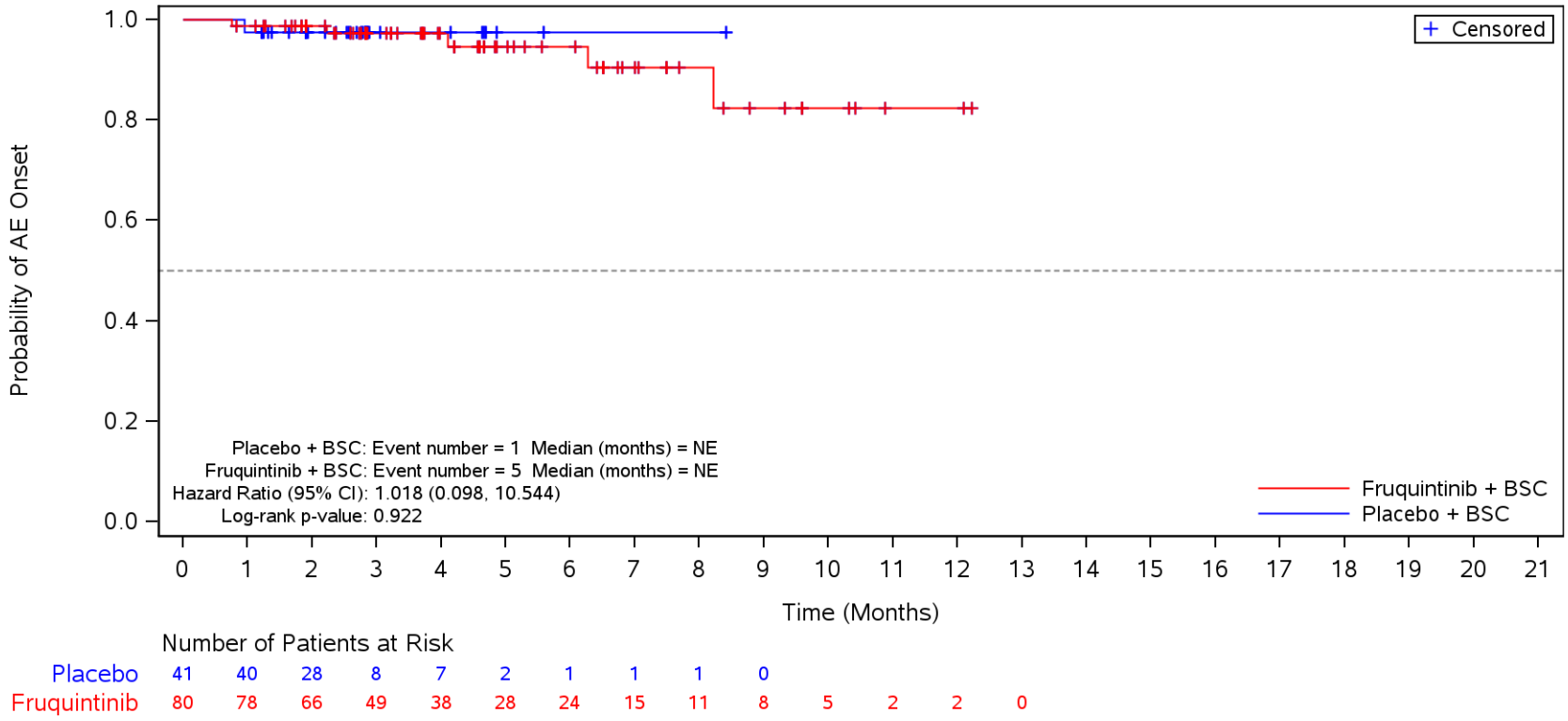
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
Discontinuation due to TEAE
Asia



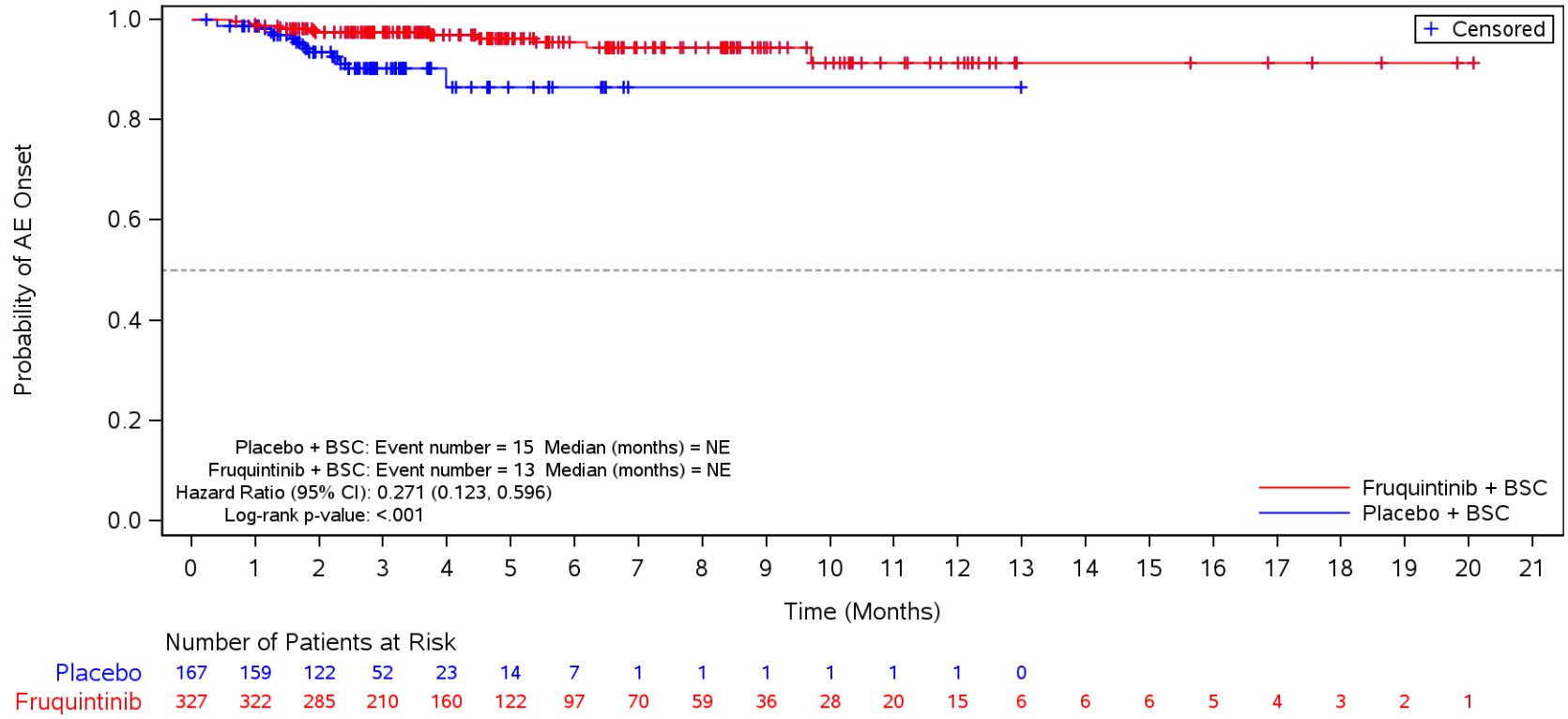
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
Deaths (Grade 5 TEAEs)
North America



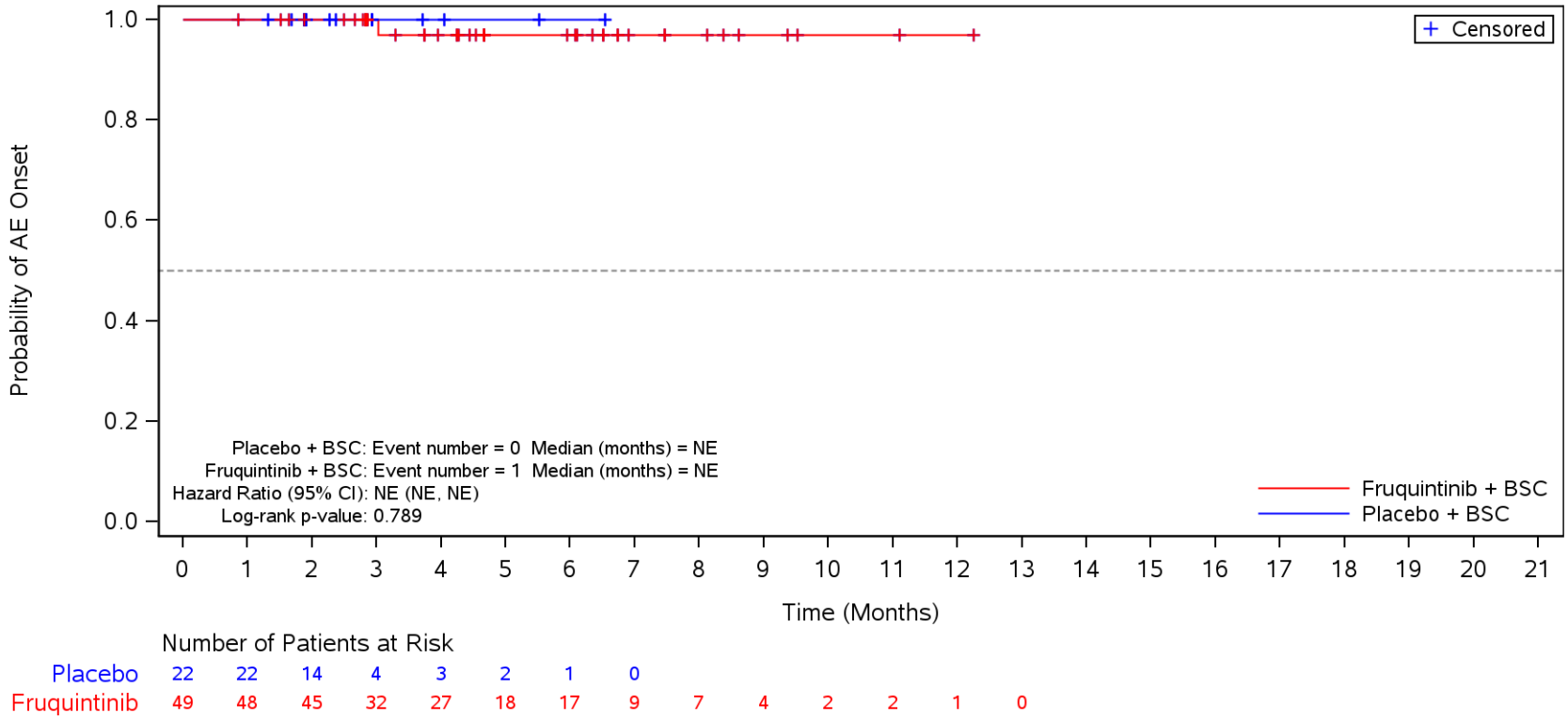
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3D
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Geographic Region
Safety Population
Deaths (Grade 5 TEAEs)
Europe



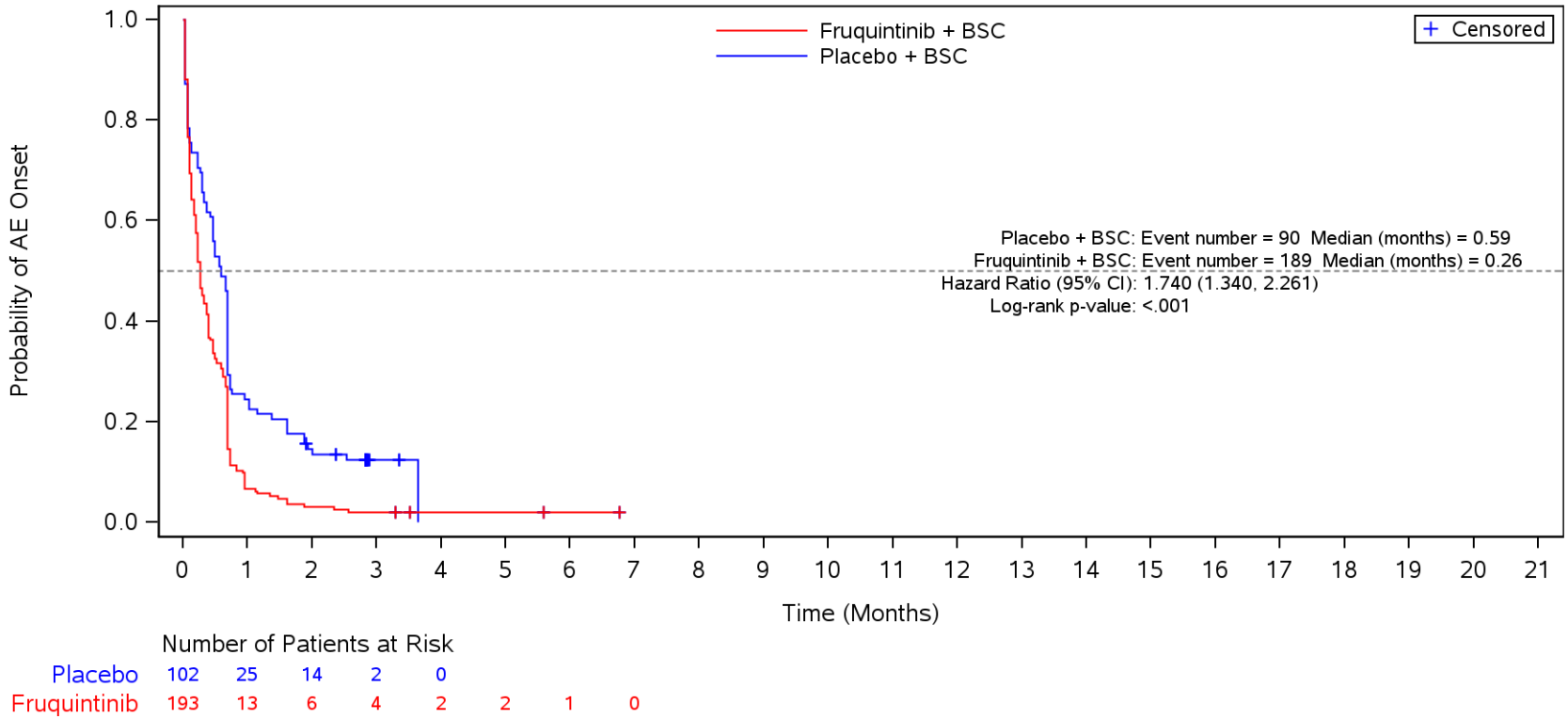
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
TEAE
ECOG: 0



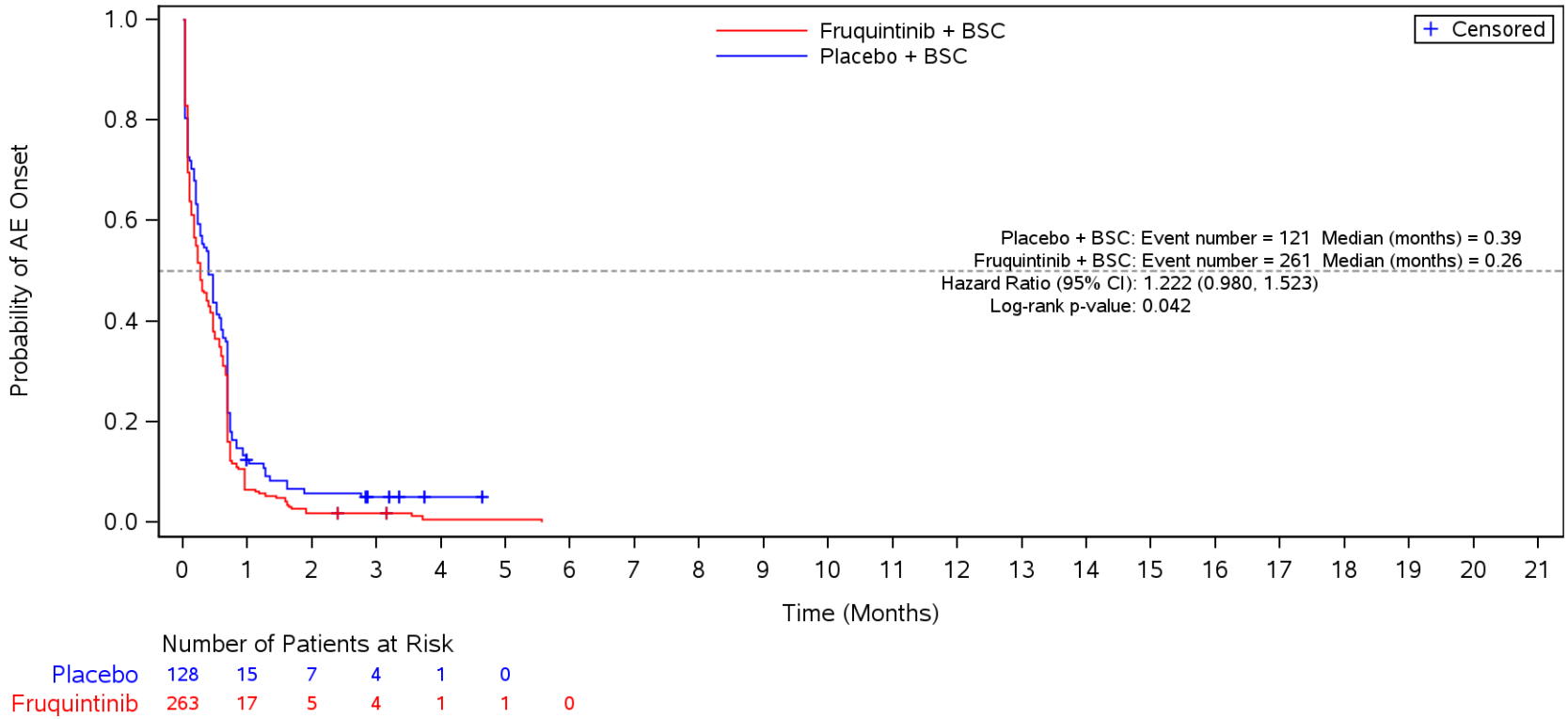
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
TEAE
ECOG: 0



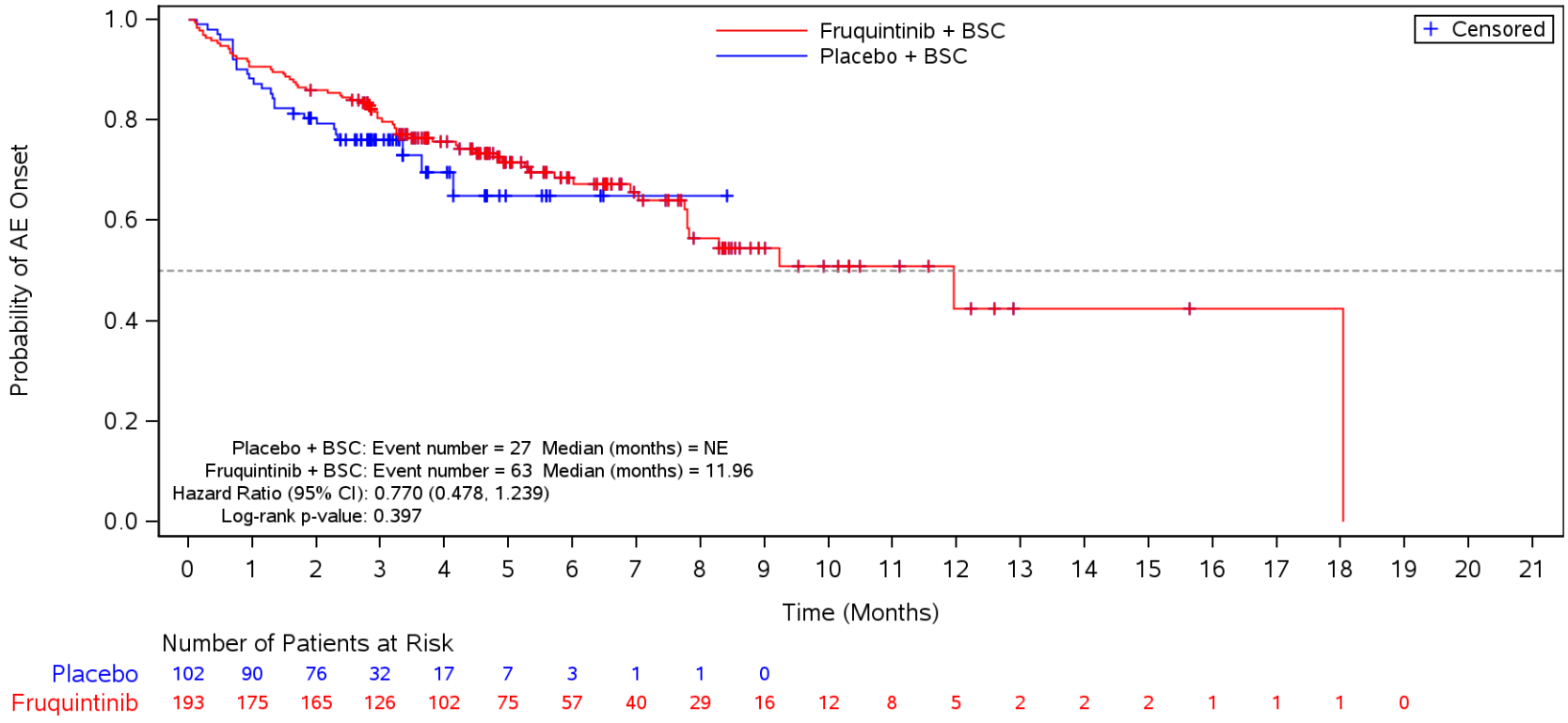
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
TEAE
ECOG: 1



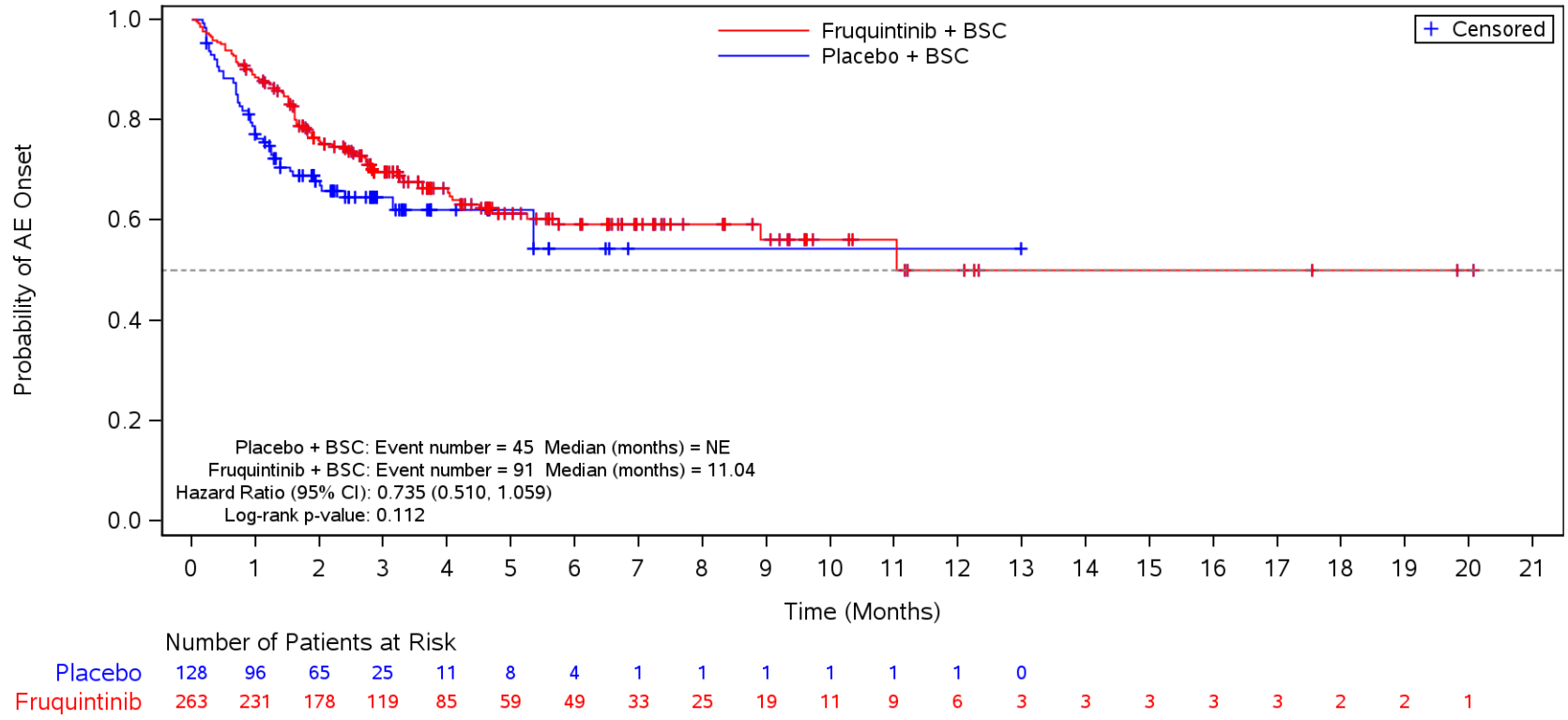
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
Serious TEAE
ECOG: 0



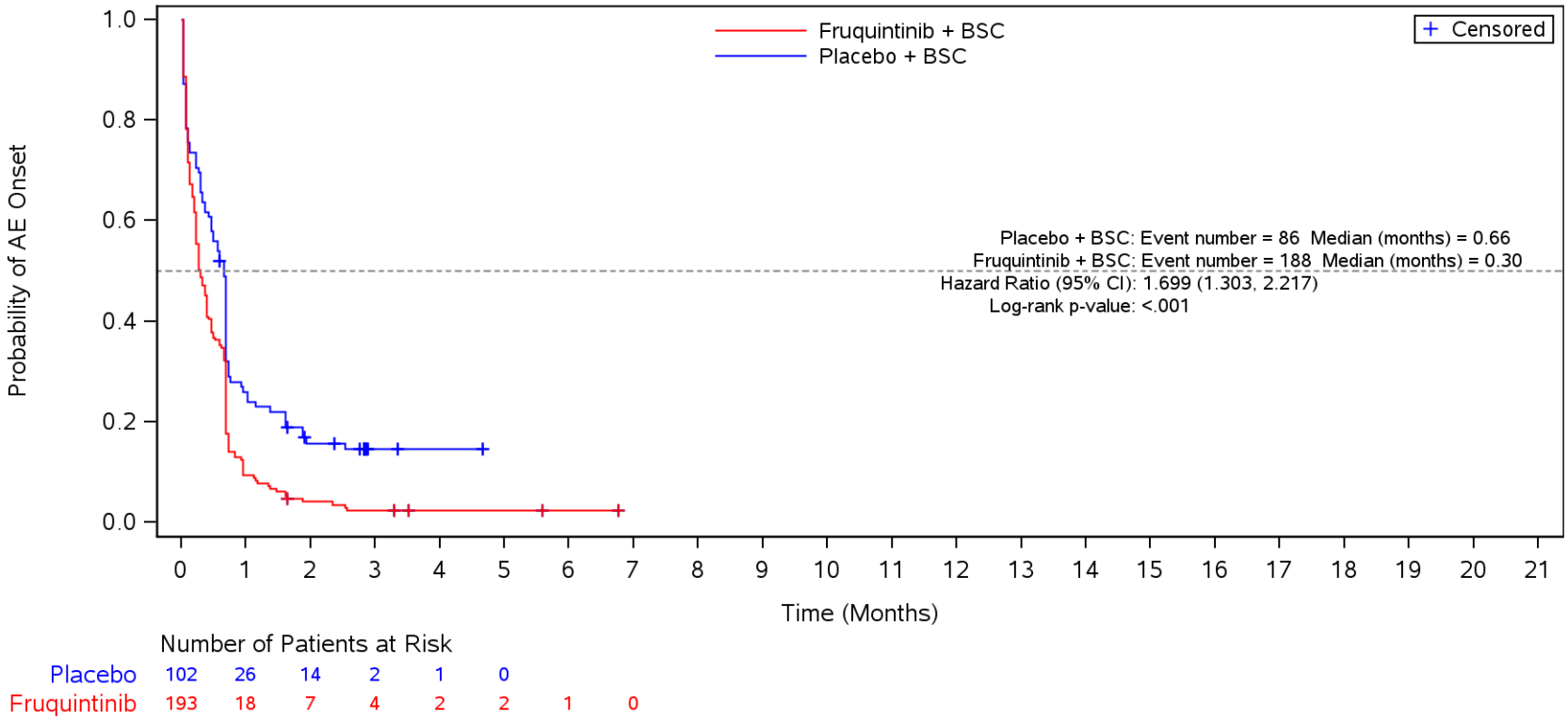
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
Serious TEAE
ECOG: 1



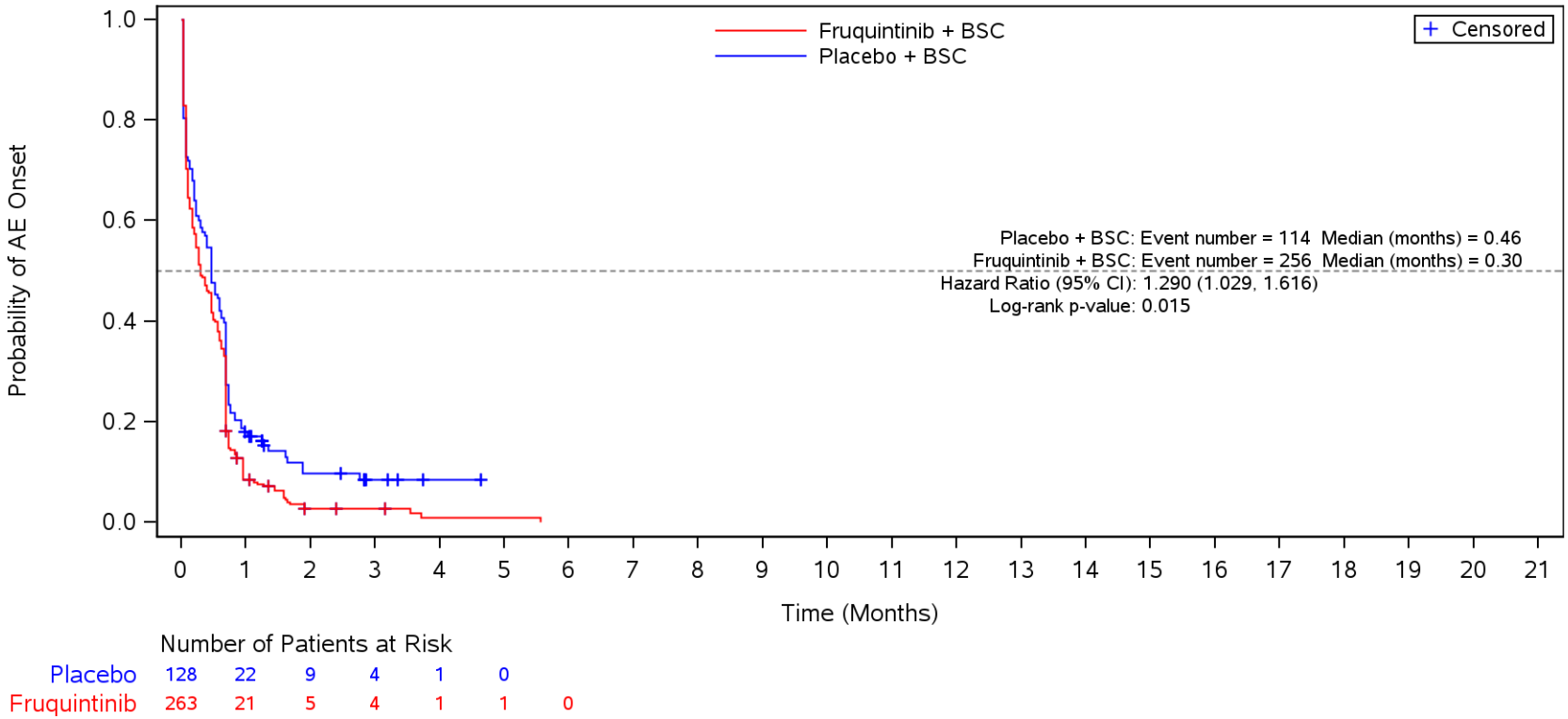
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
TEAE ≤ CTCAE Grade 2
ECOG: 0



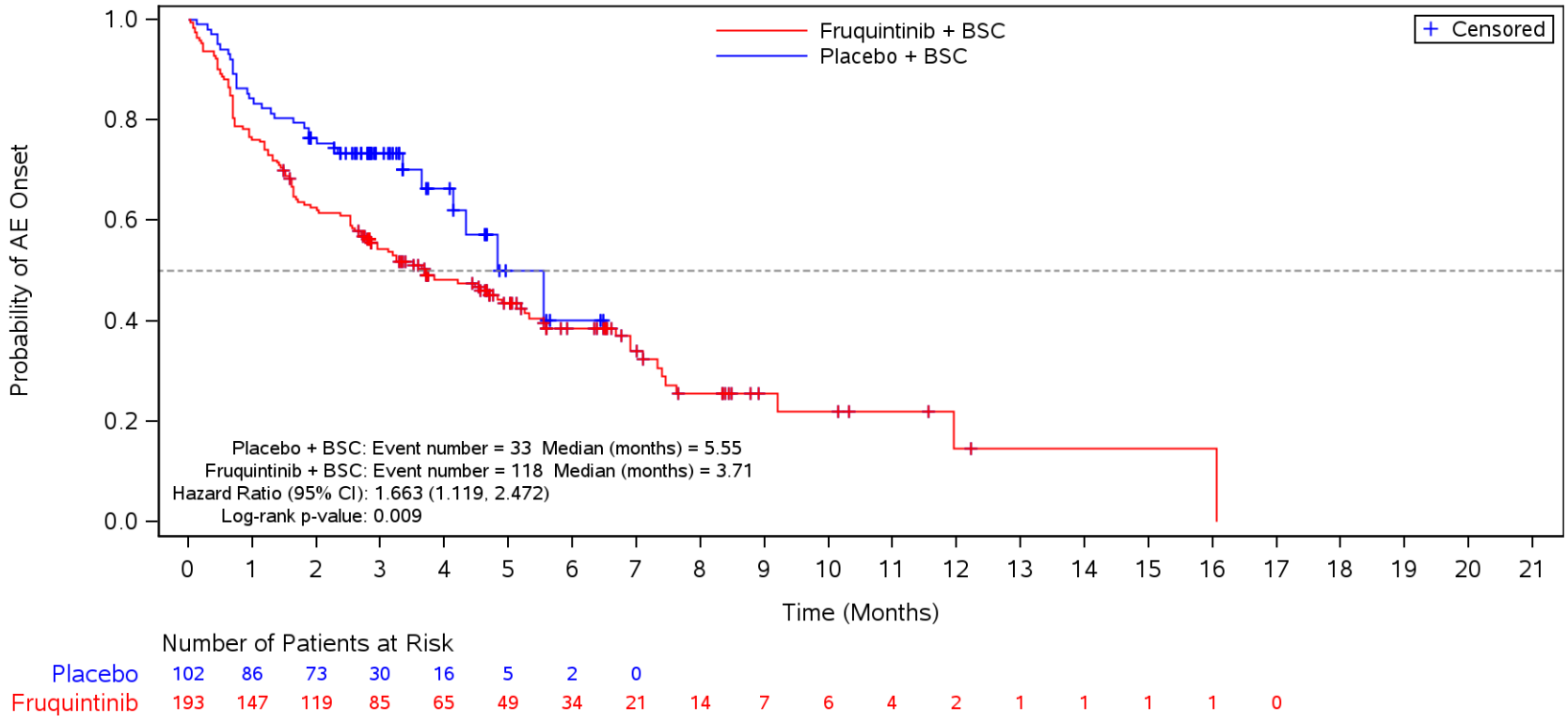
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
TEAE ≤ CTCAE Grade 2
ECOG: 1



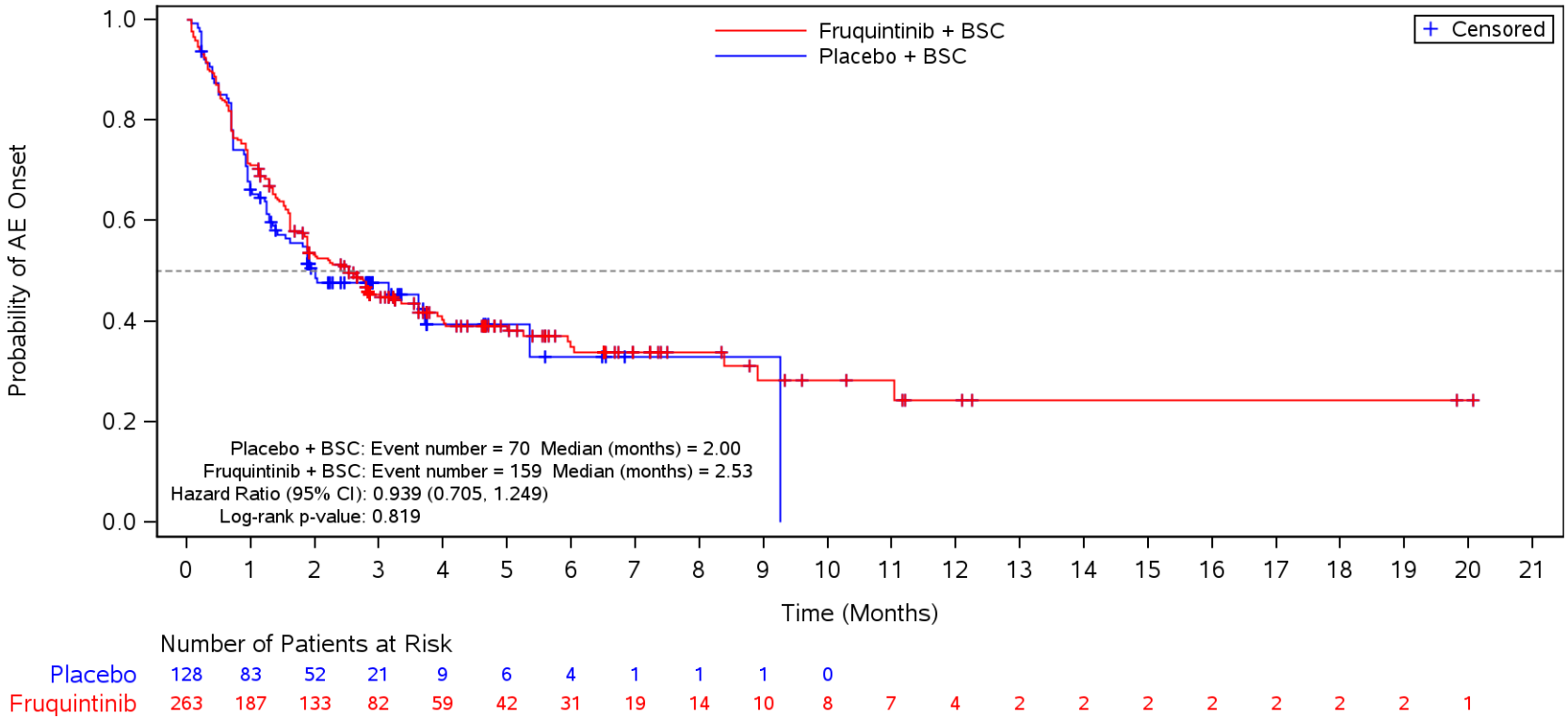
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3
ECOG: 0



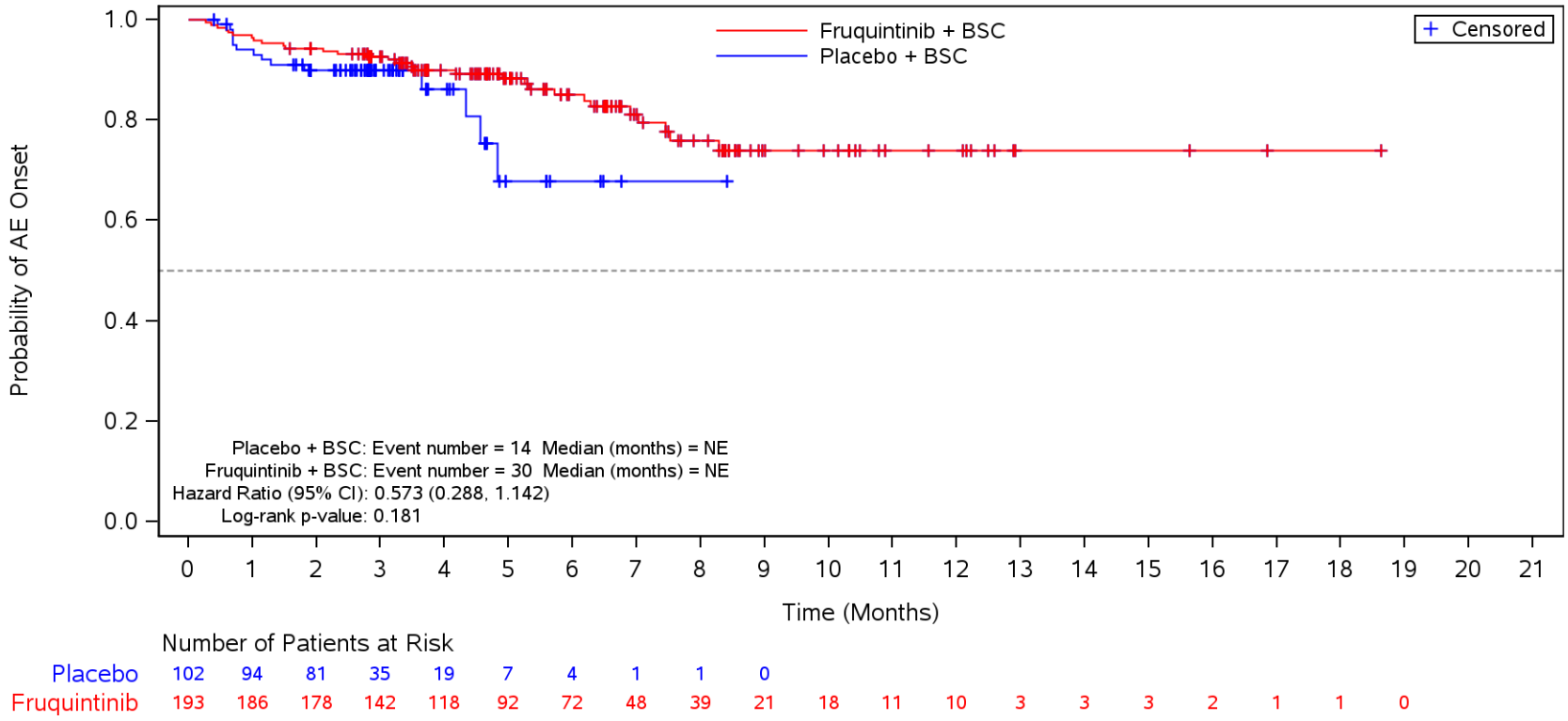
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
TEAE ≥ CTCAE Grade 3
ECOG: 1



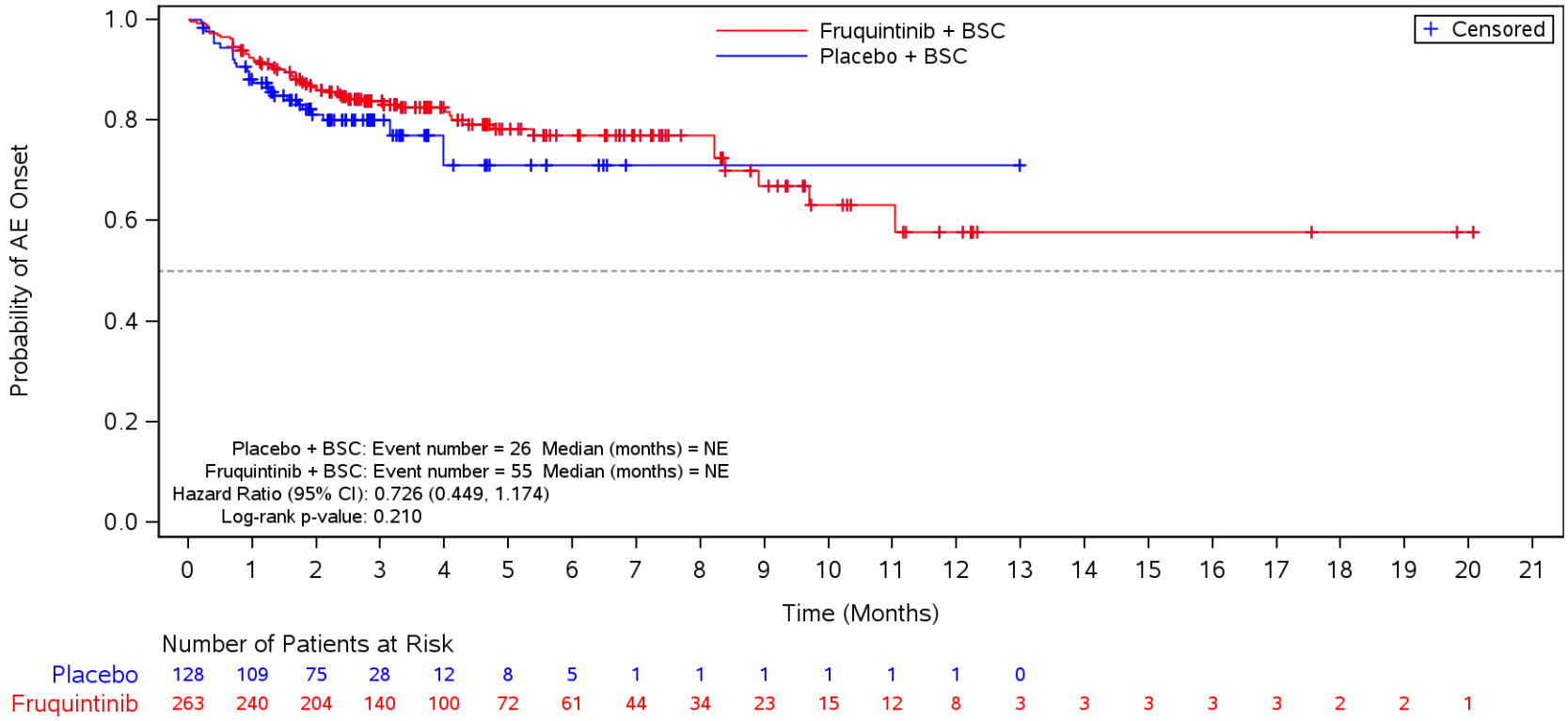
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
Discontinuation due to TEAE
ECOG: 0



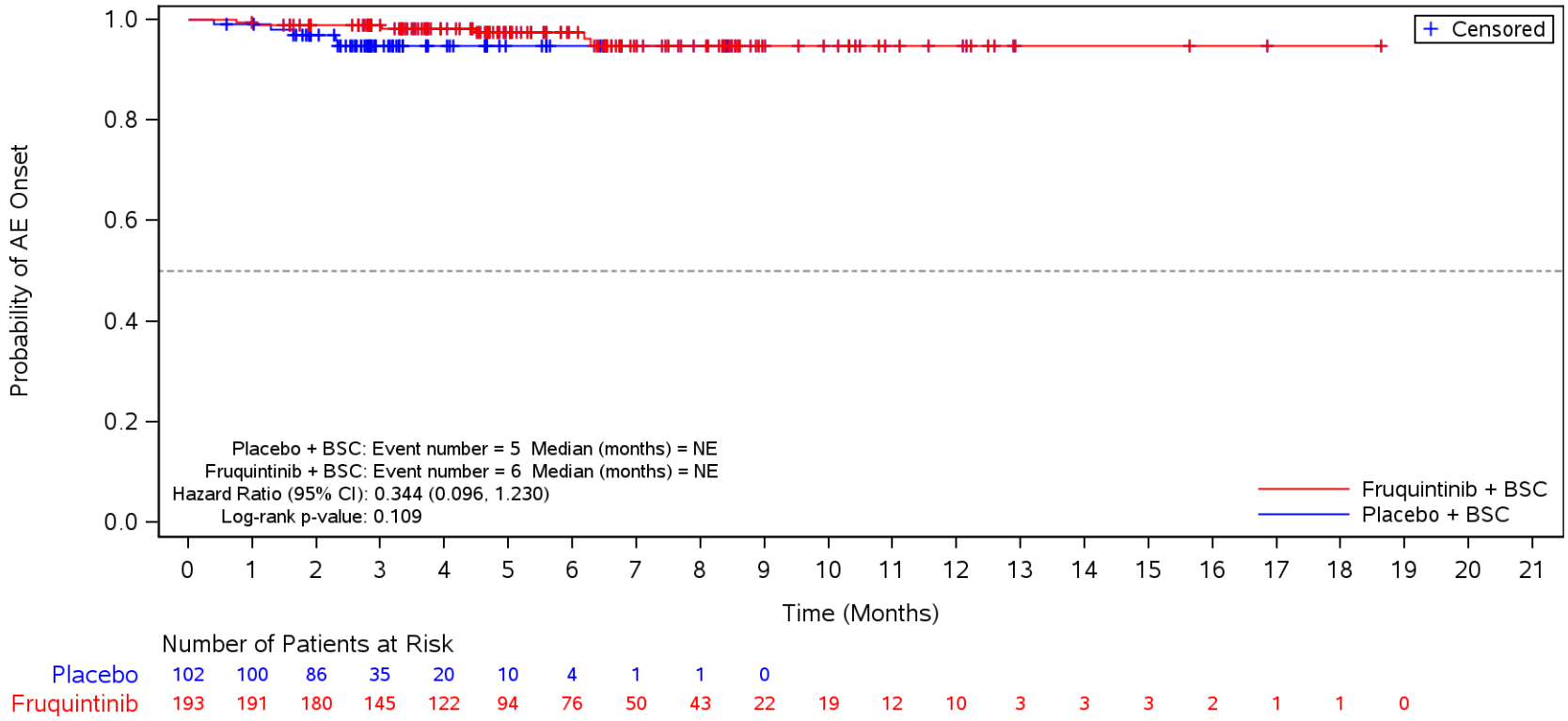
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
Discontinuation due to TEAE
ECOG: 1



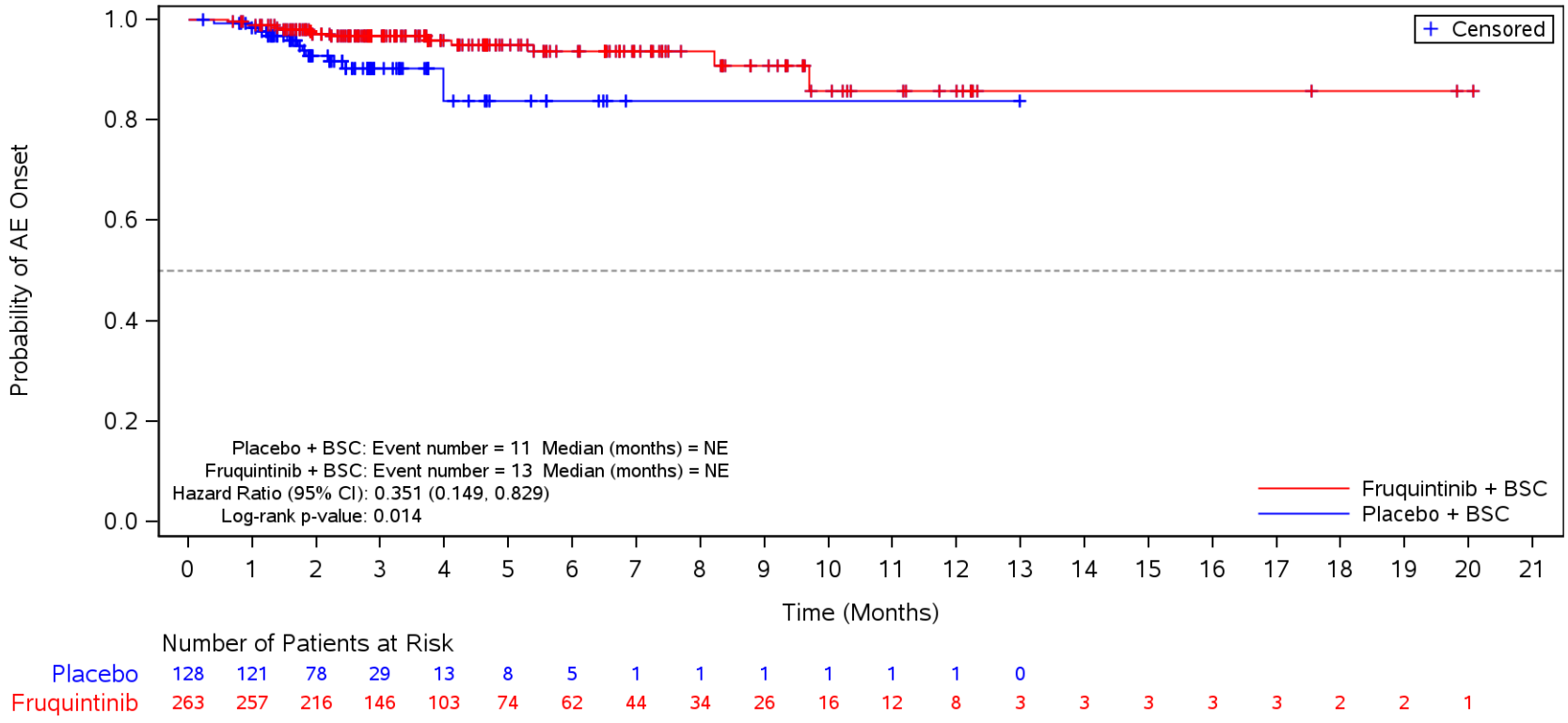
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3E
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by ECOG PS
Safety Population
Deaths (Grade 5 TEAEs)
ECOG: 0



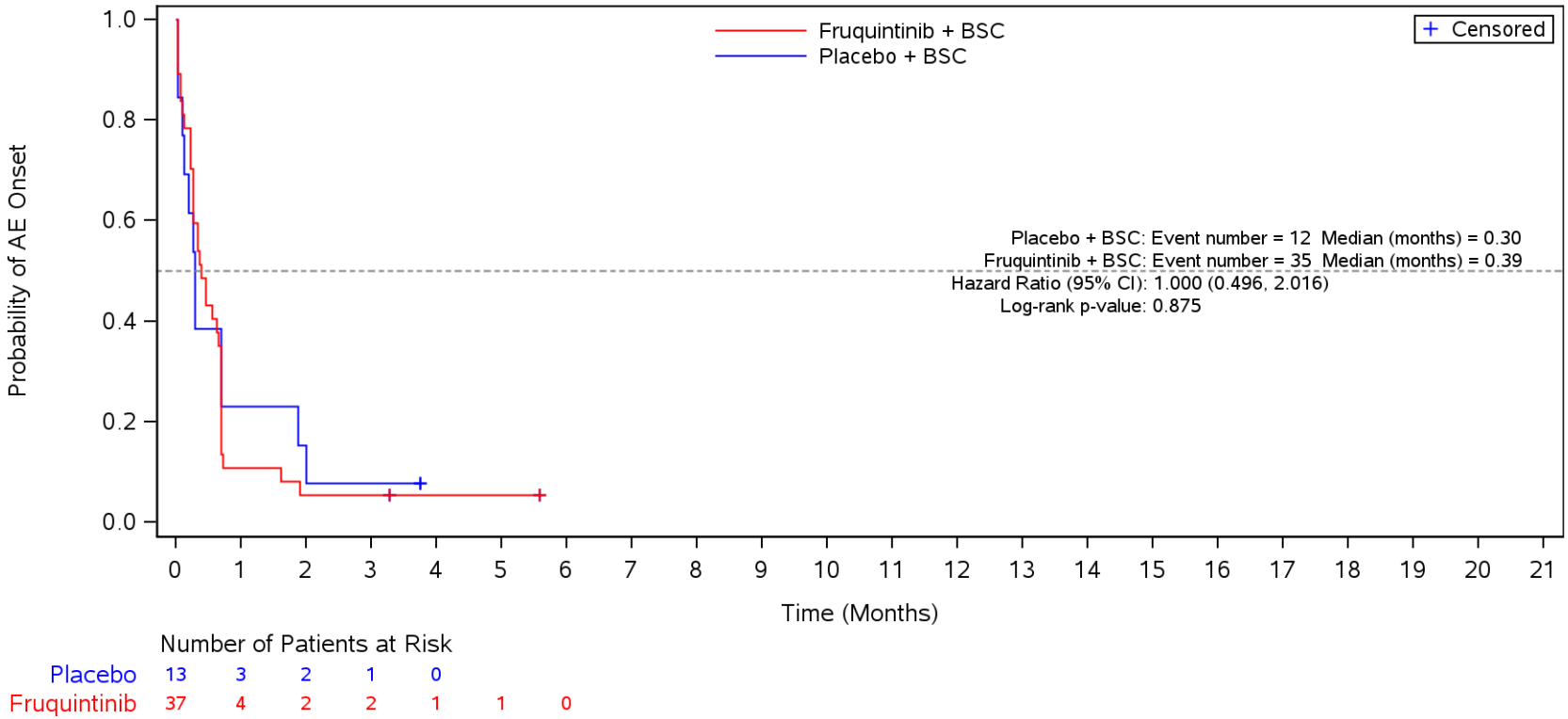
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
TEAE
<= 18 months



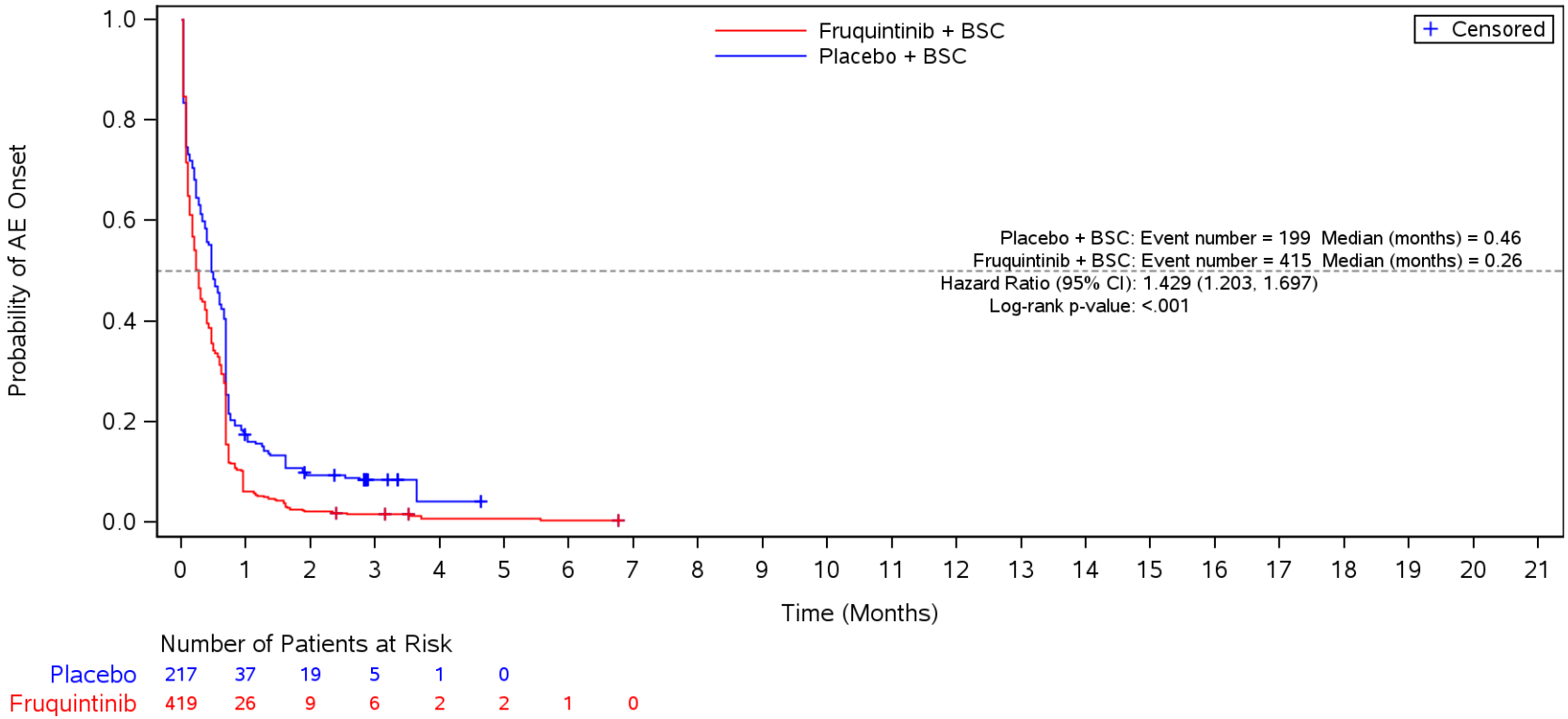
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
TEAE
<= 18 months



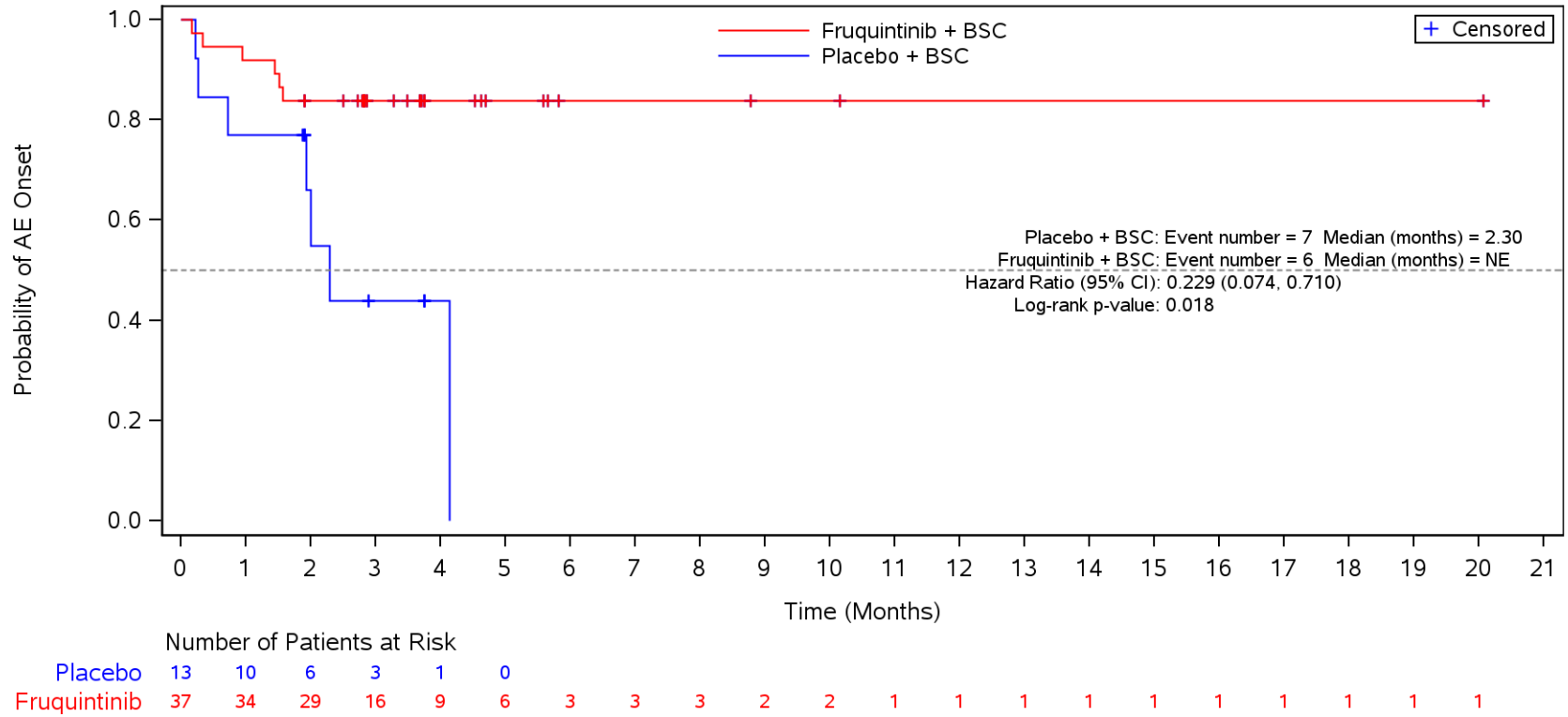
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
TEAE
> 18 months



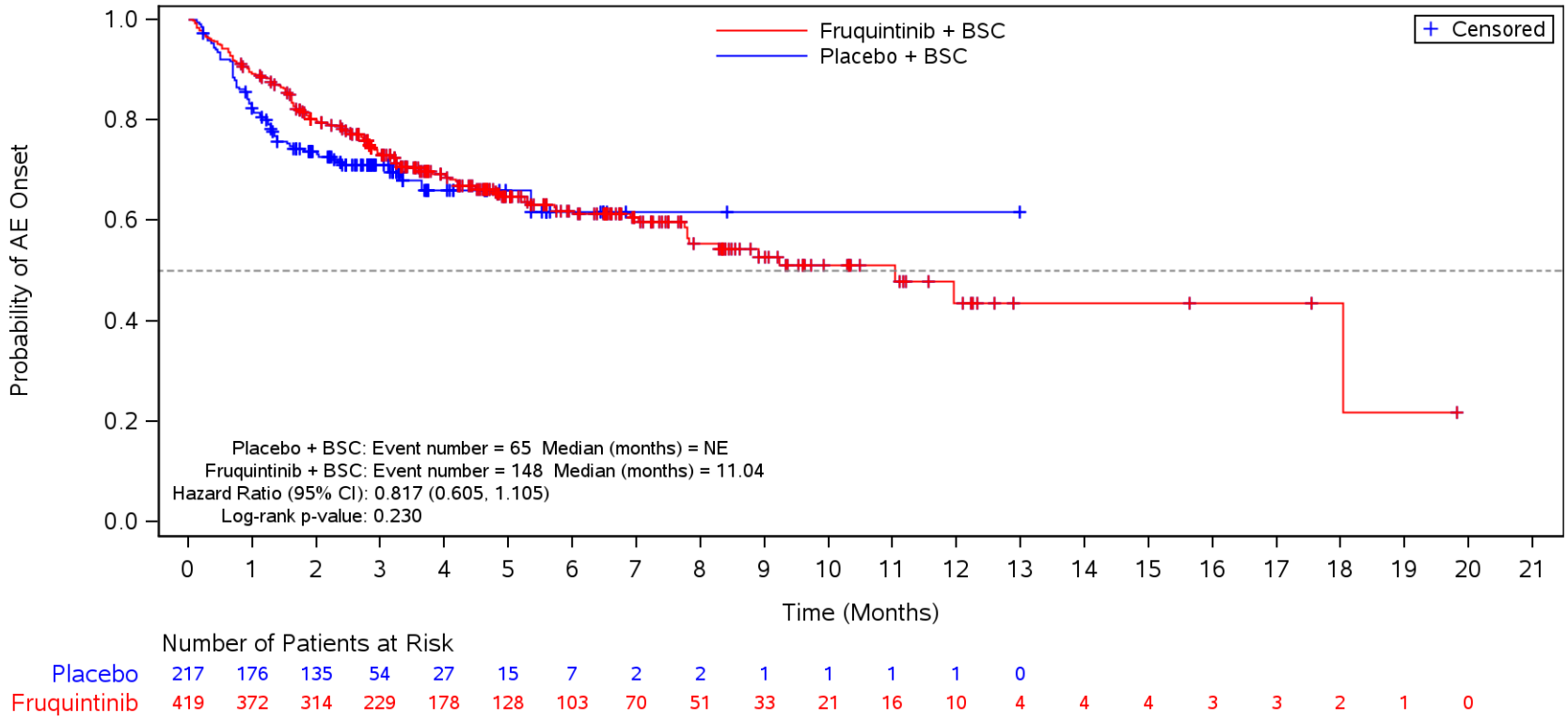
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
Serious TEAE
<= 18 months



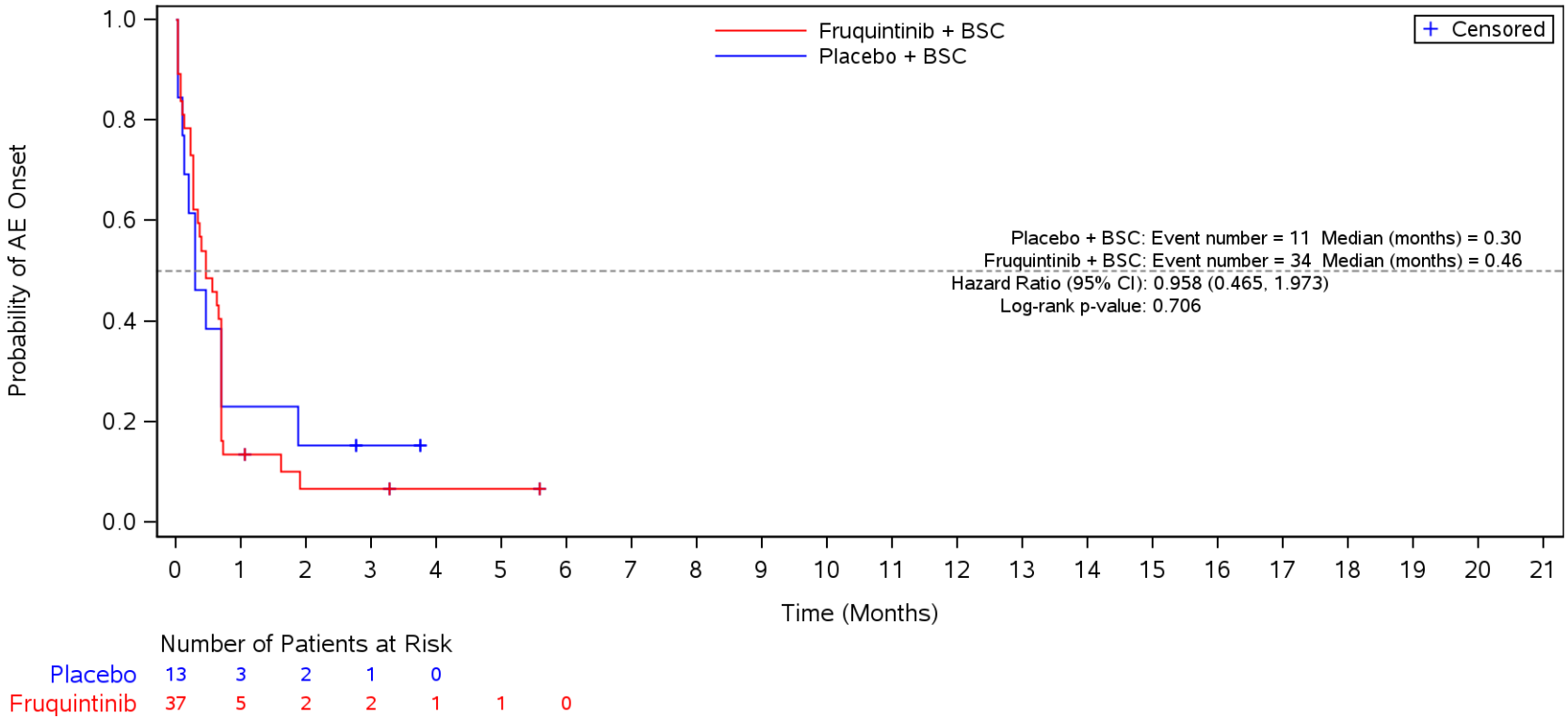
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
Serious TEAE
> 18 months



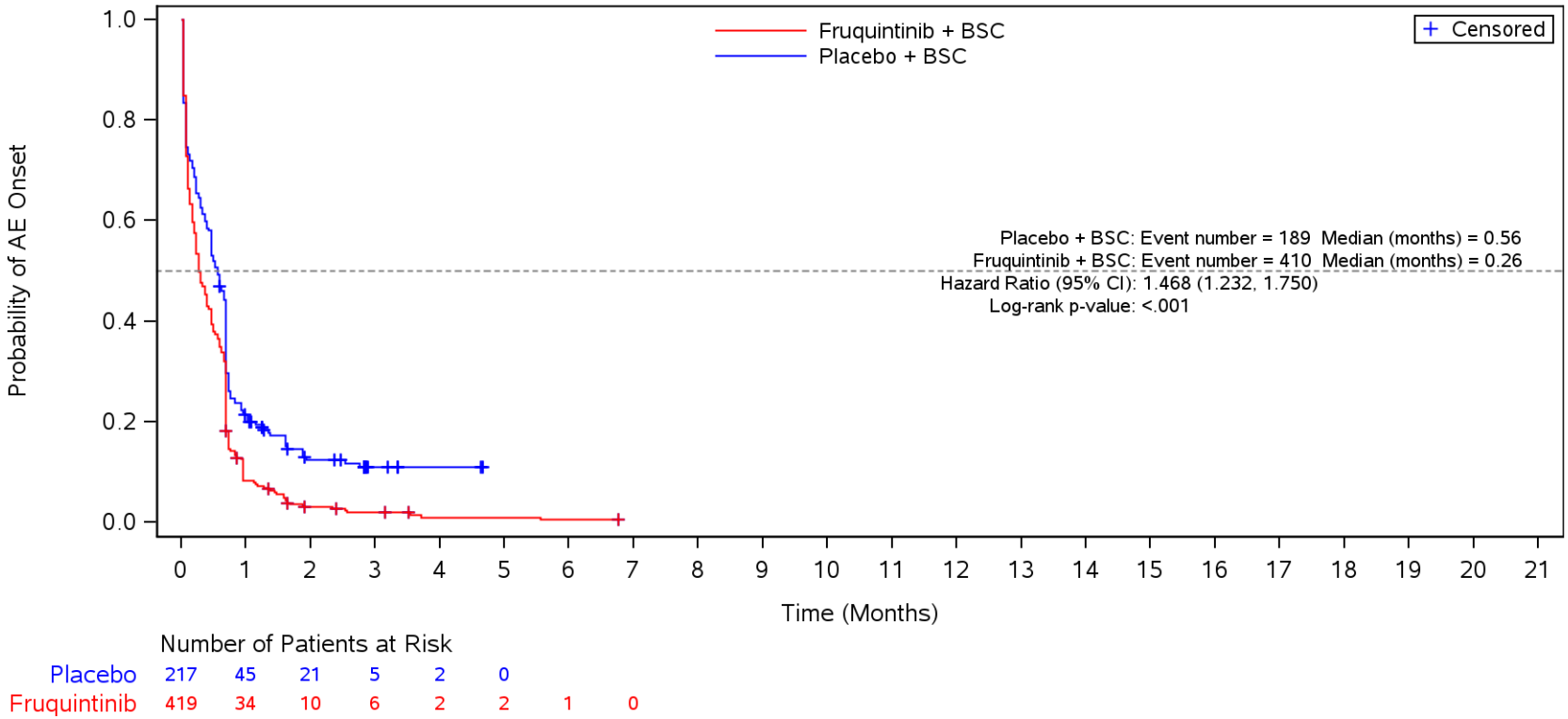
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
TEAE ≤ CTCAE Grade 2
<= 18 months



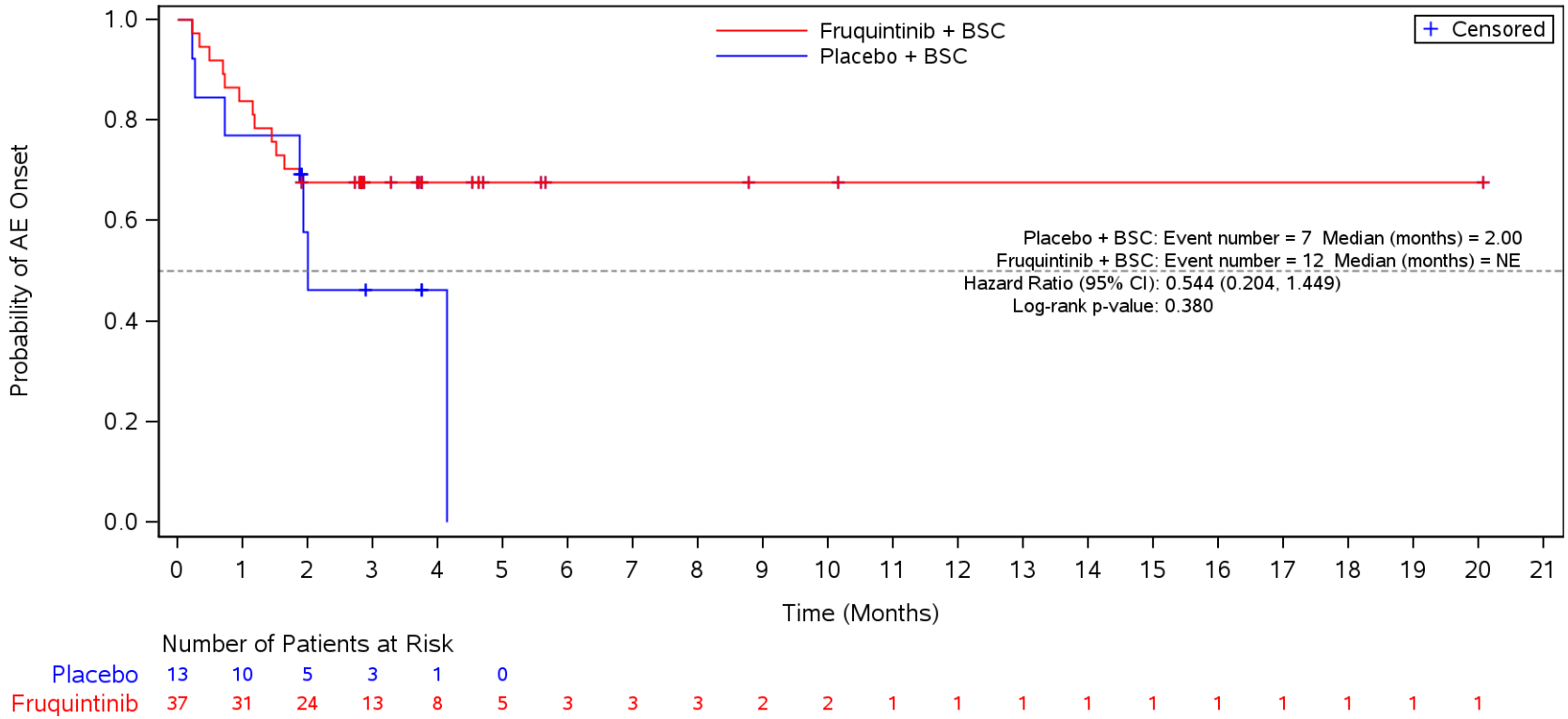
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
TEAE ≤ CTCAE Grade 2
> 18 months



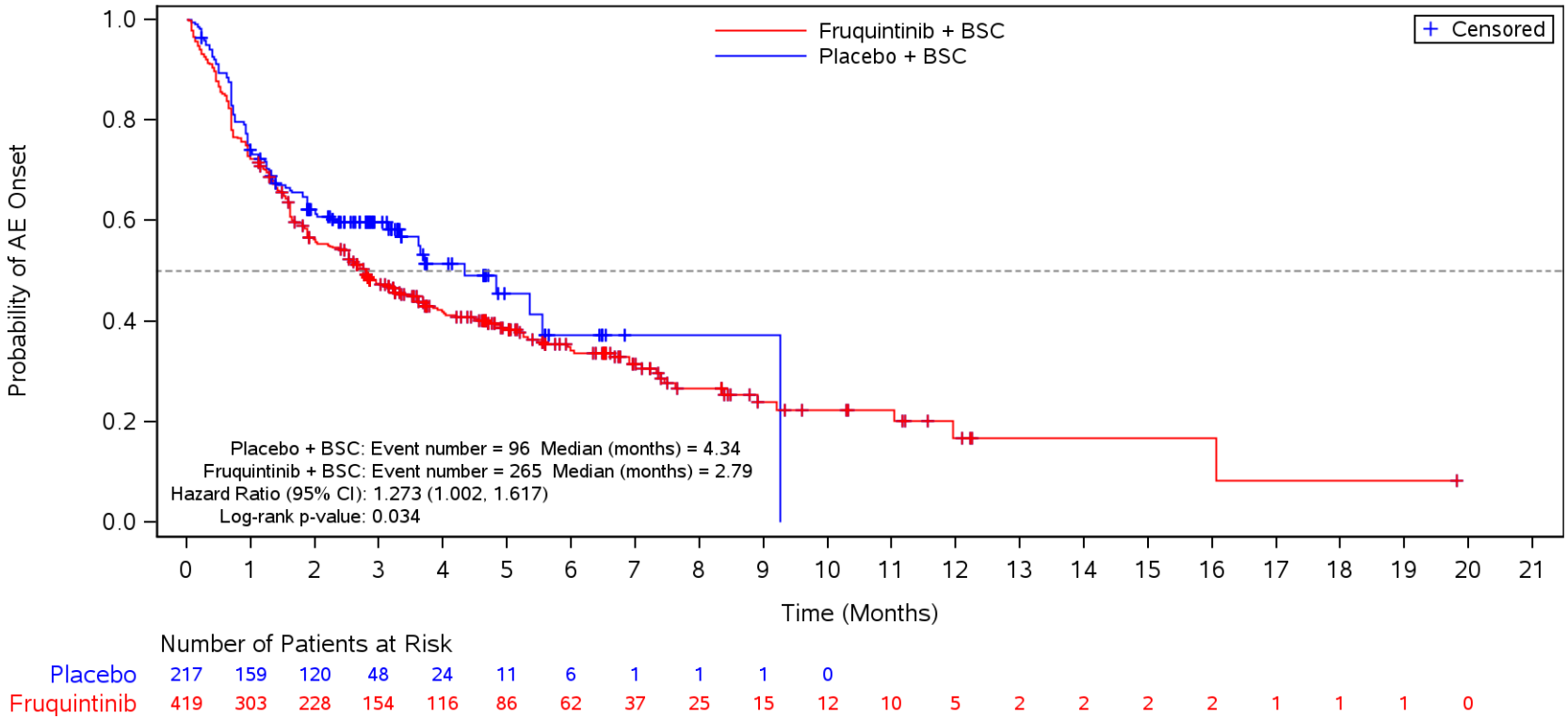
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3
<= 18 months



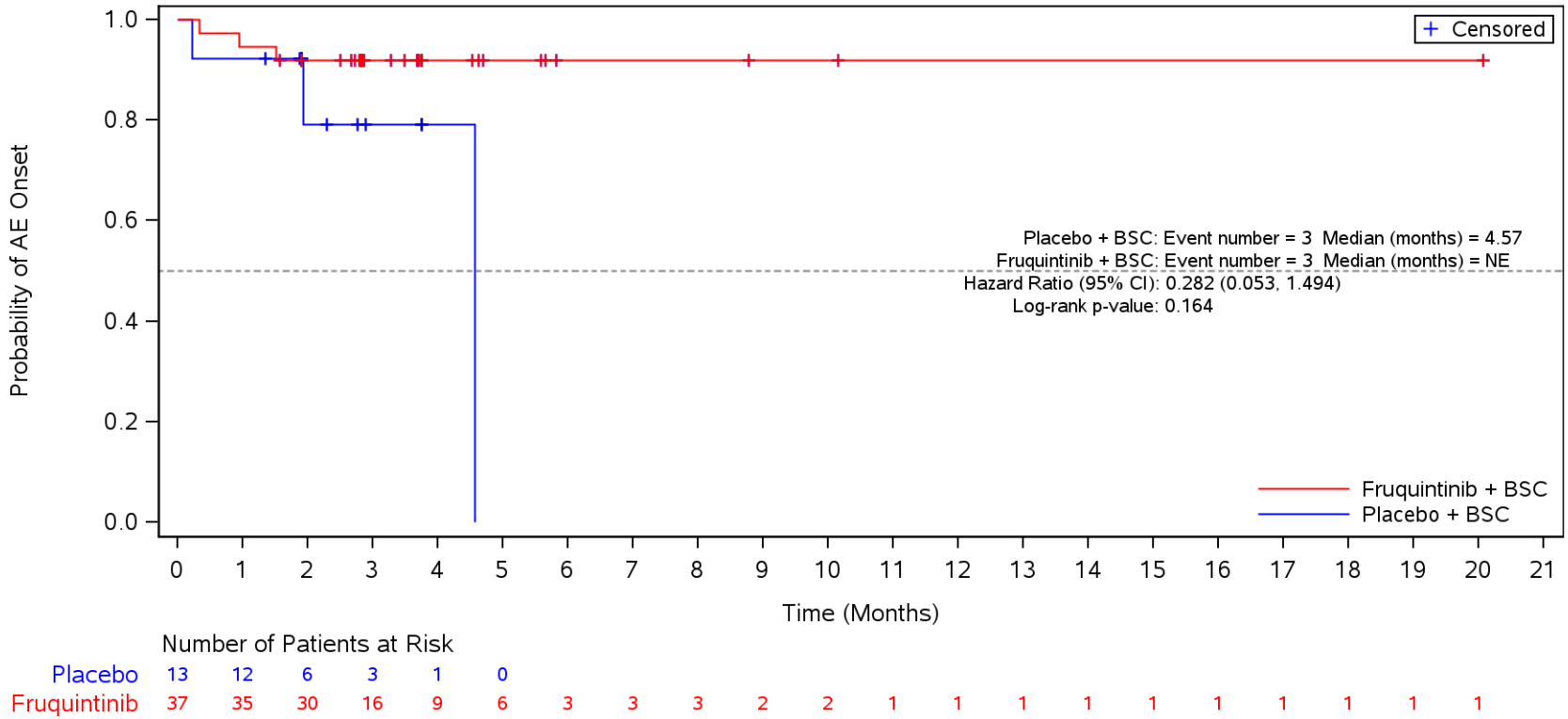
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3
> 18 months



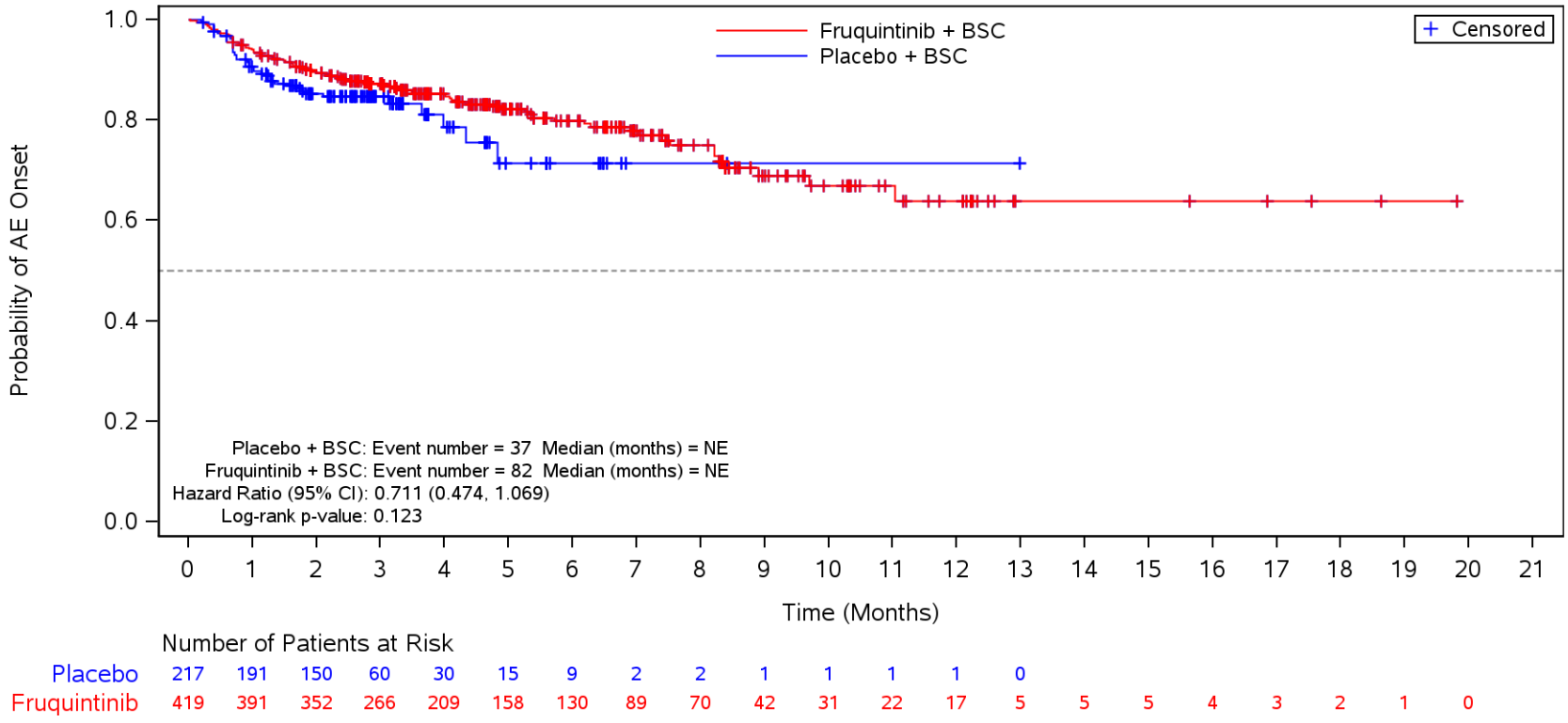
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
Discontinuation due to TEAE
<= 18 months



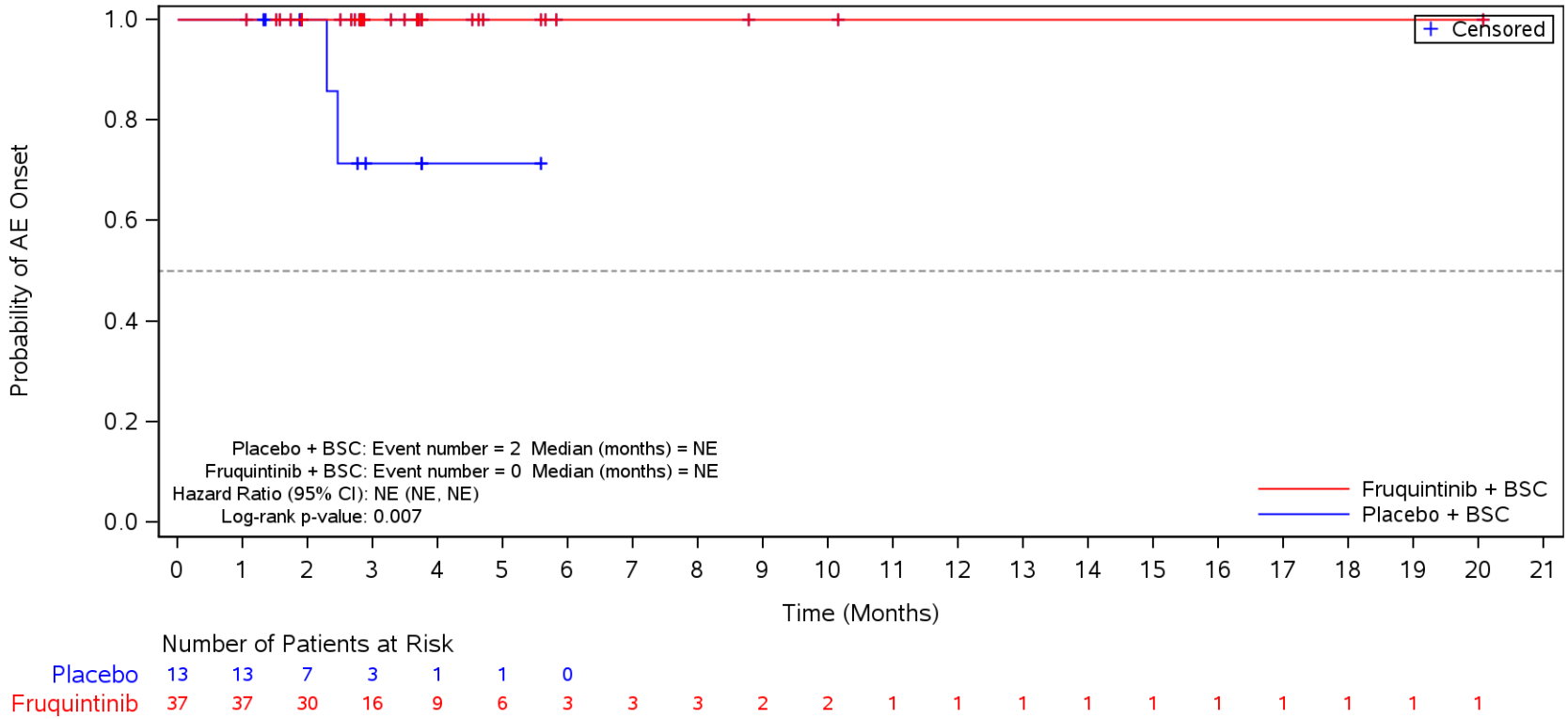
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
Discontinuation due to TEAE
> 18 months



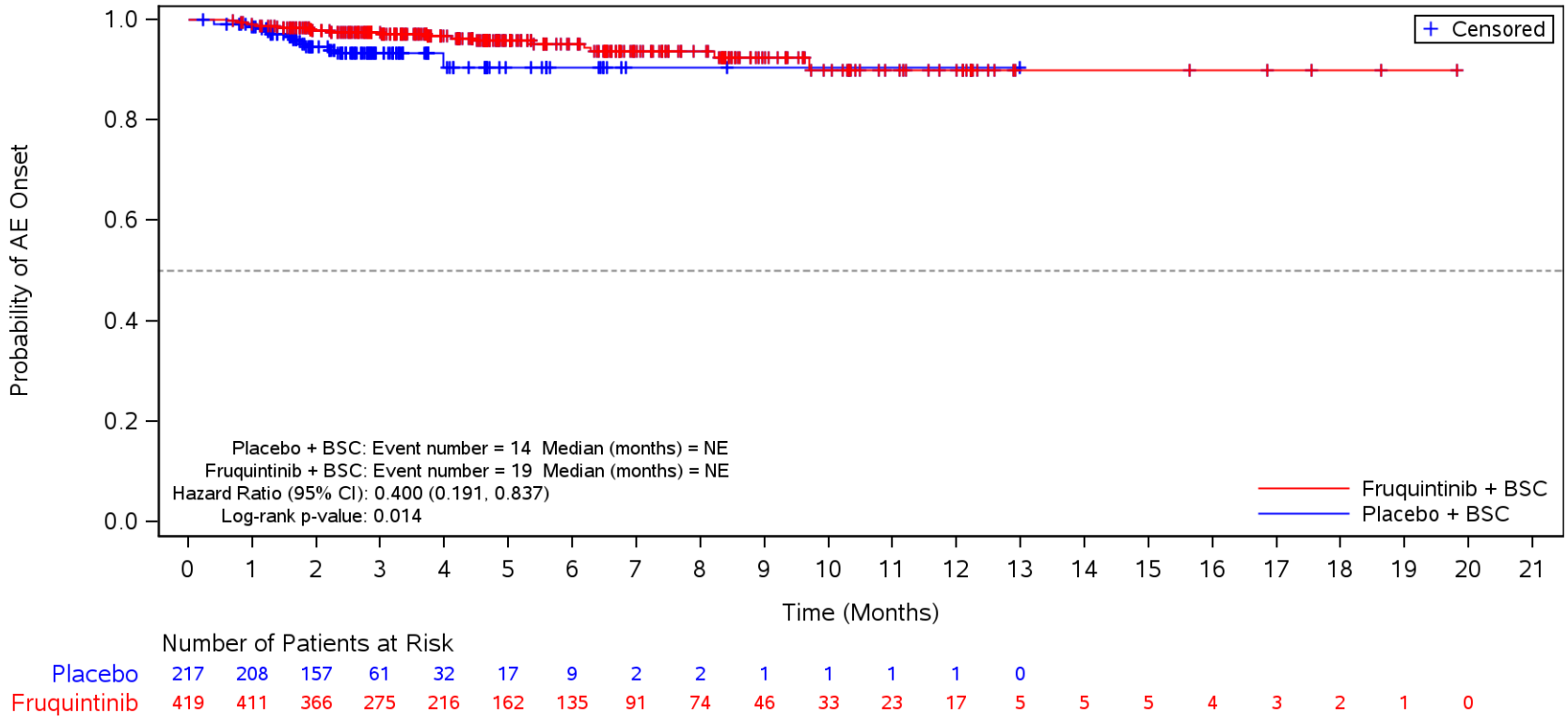
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3F
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Duration of Metastatic Disease
Safety Population
Deaths (Grade 5 TEAEs)
<= 18 months



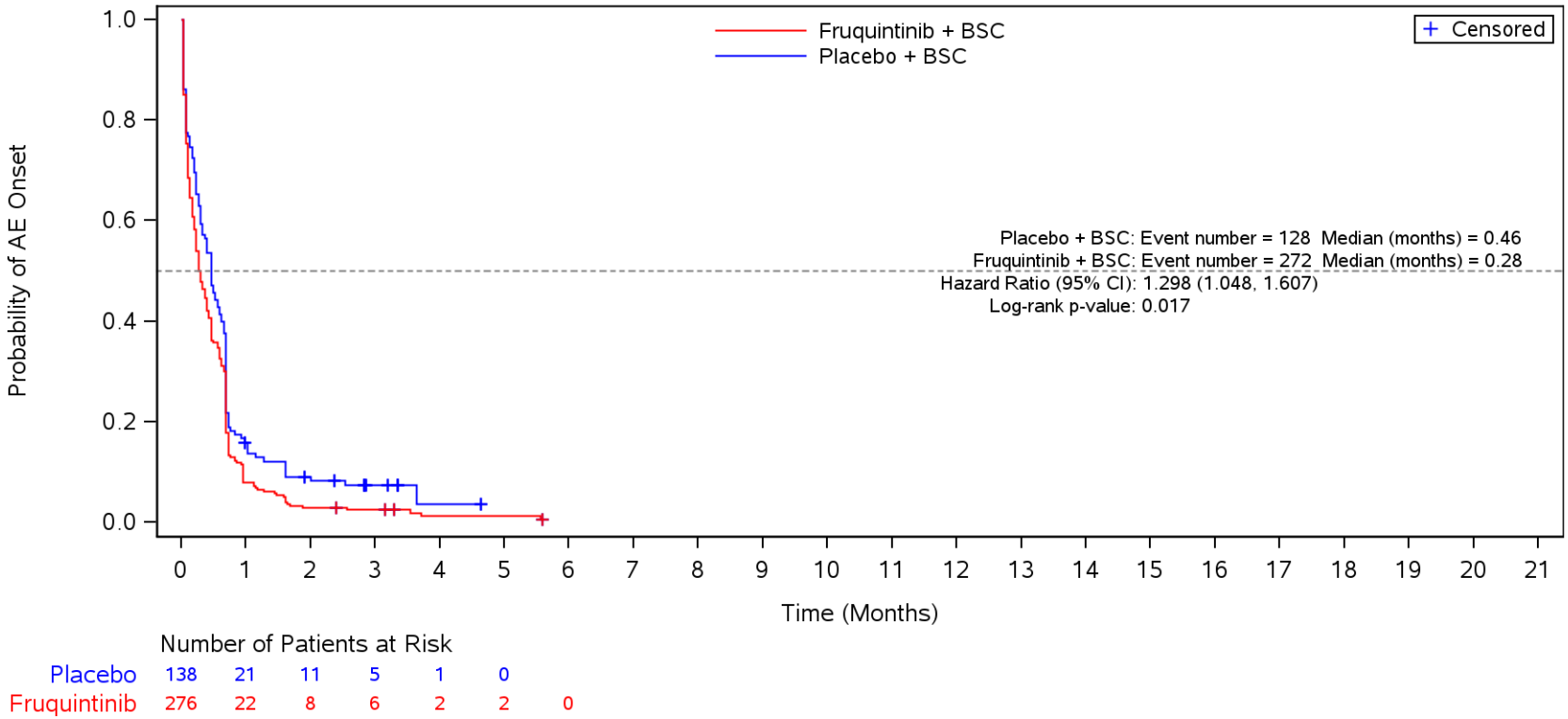
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE
Colon



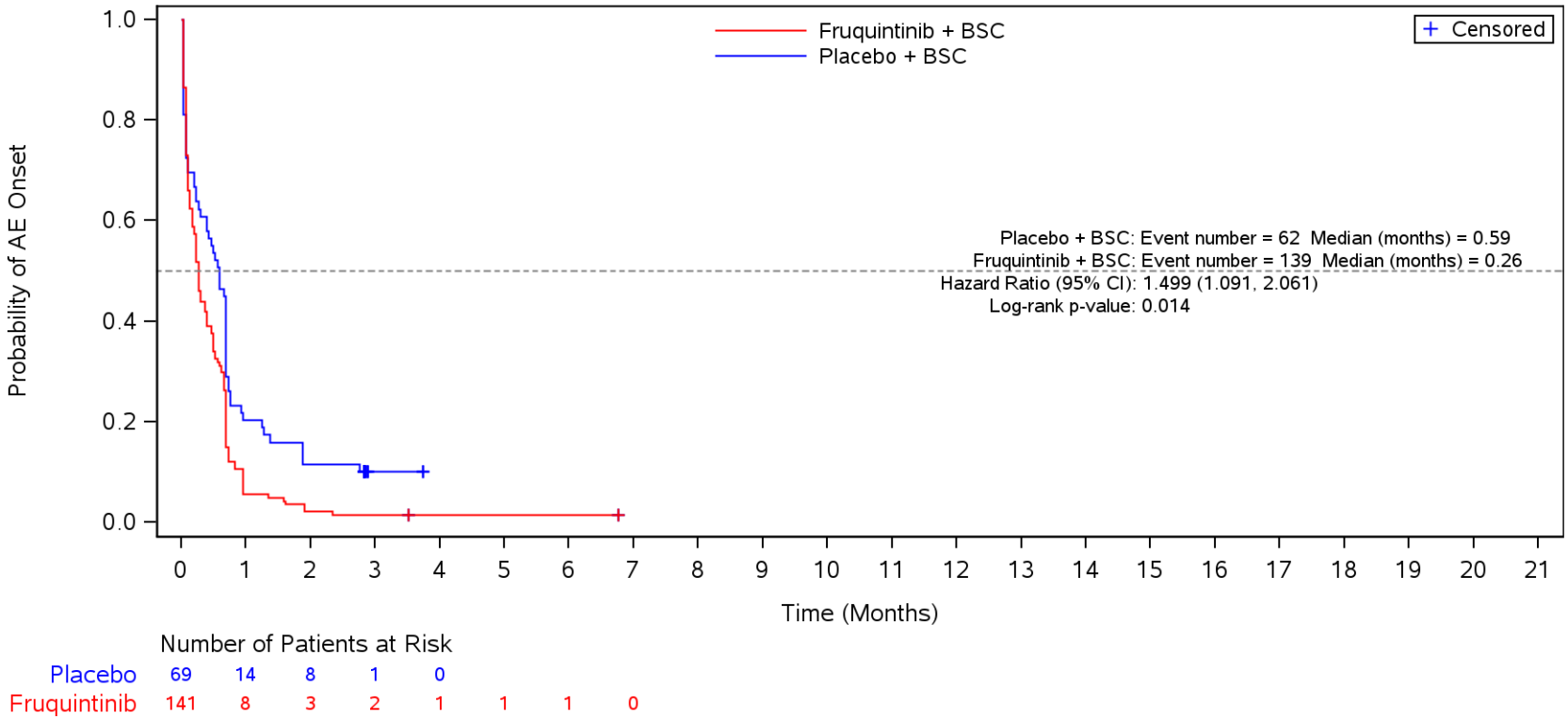
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE
Colon



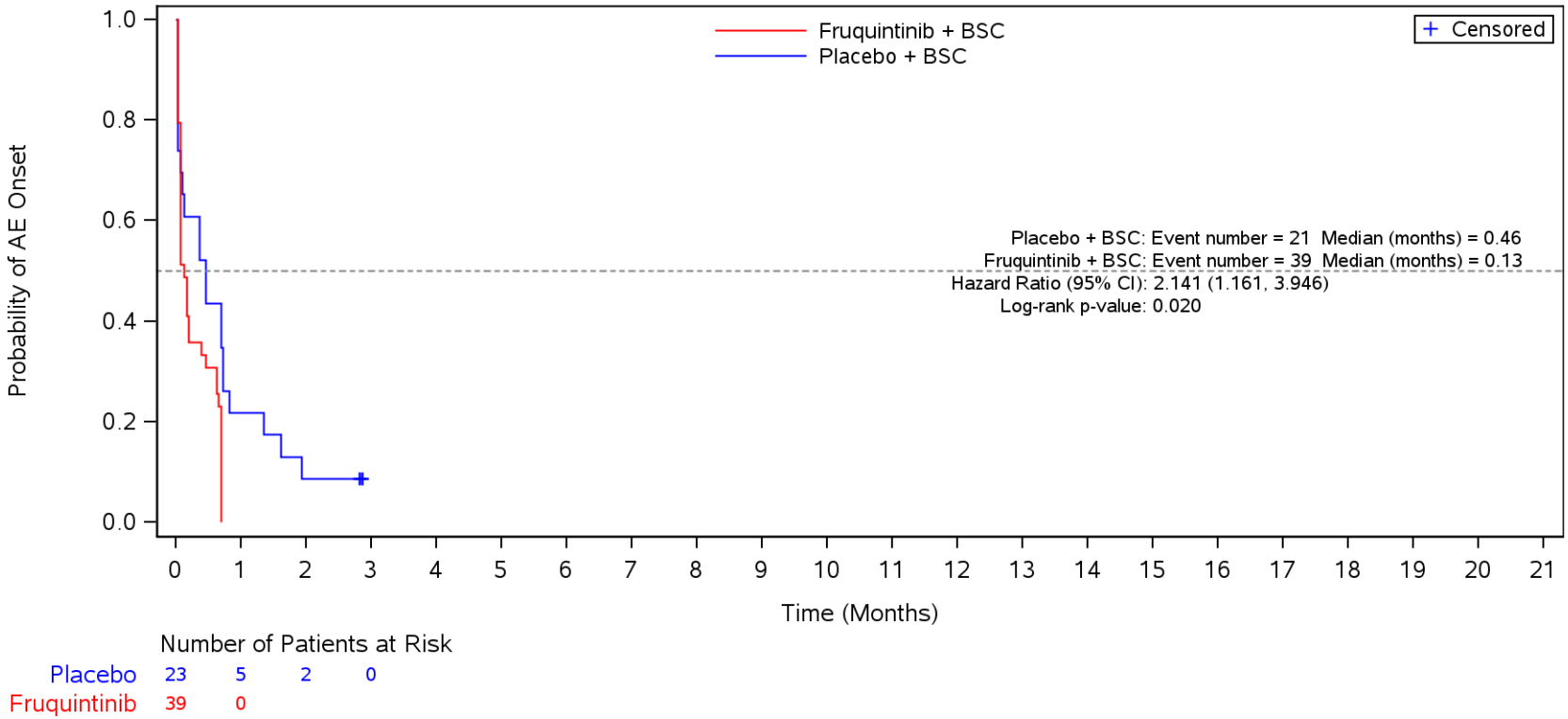
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE
Rectum



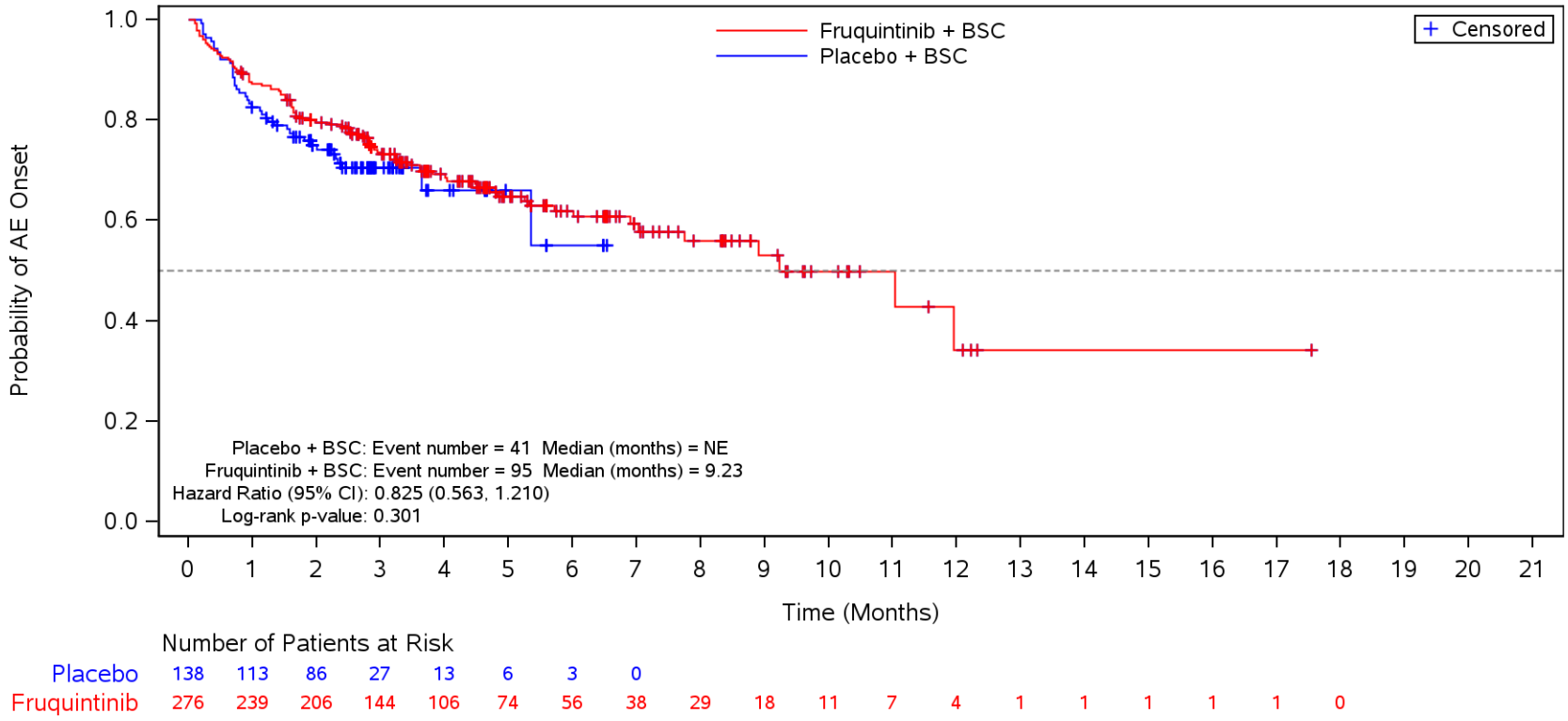
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE
Colon and Rectum



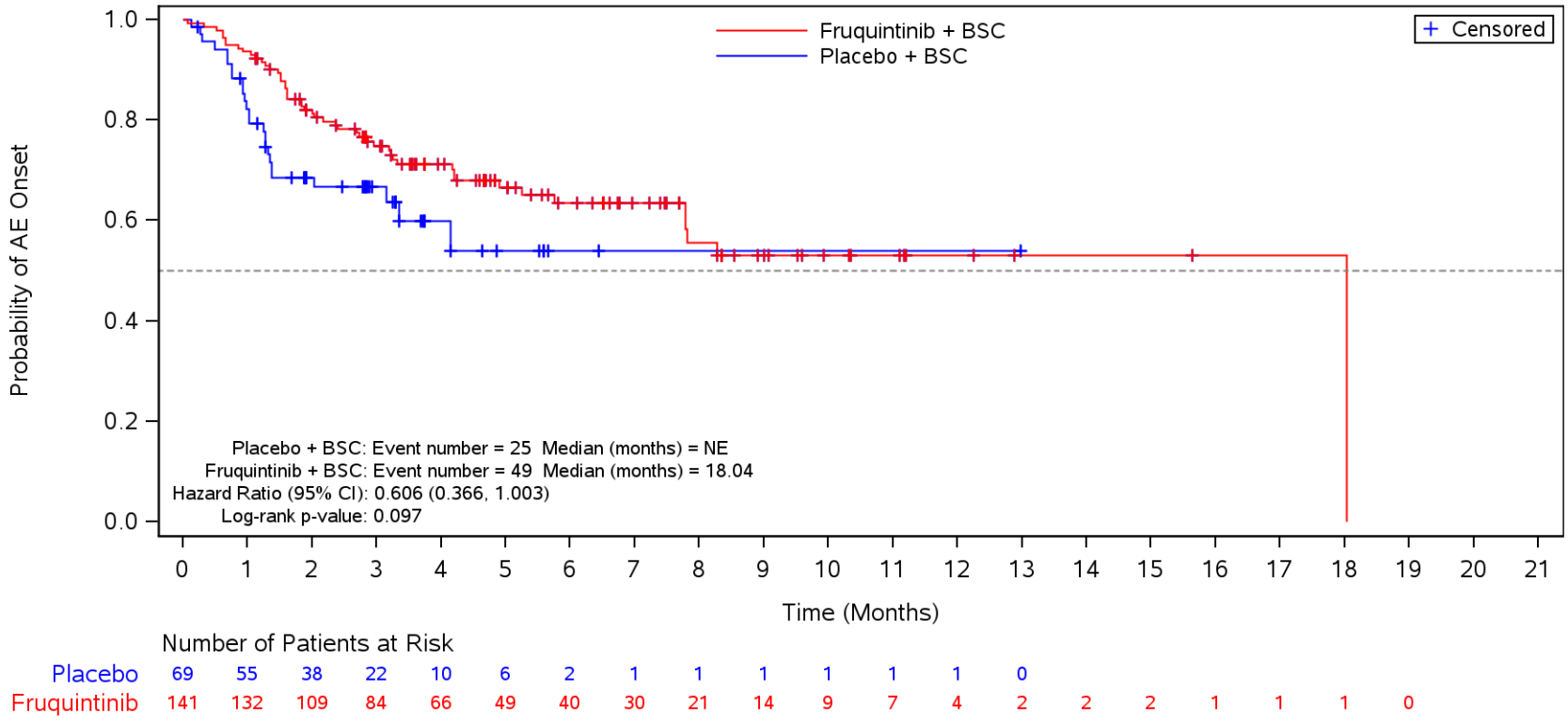
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
Serious TEAE
Colon



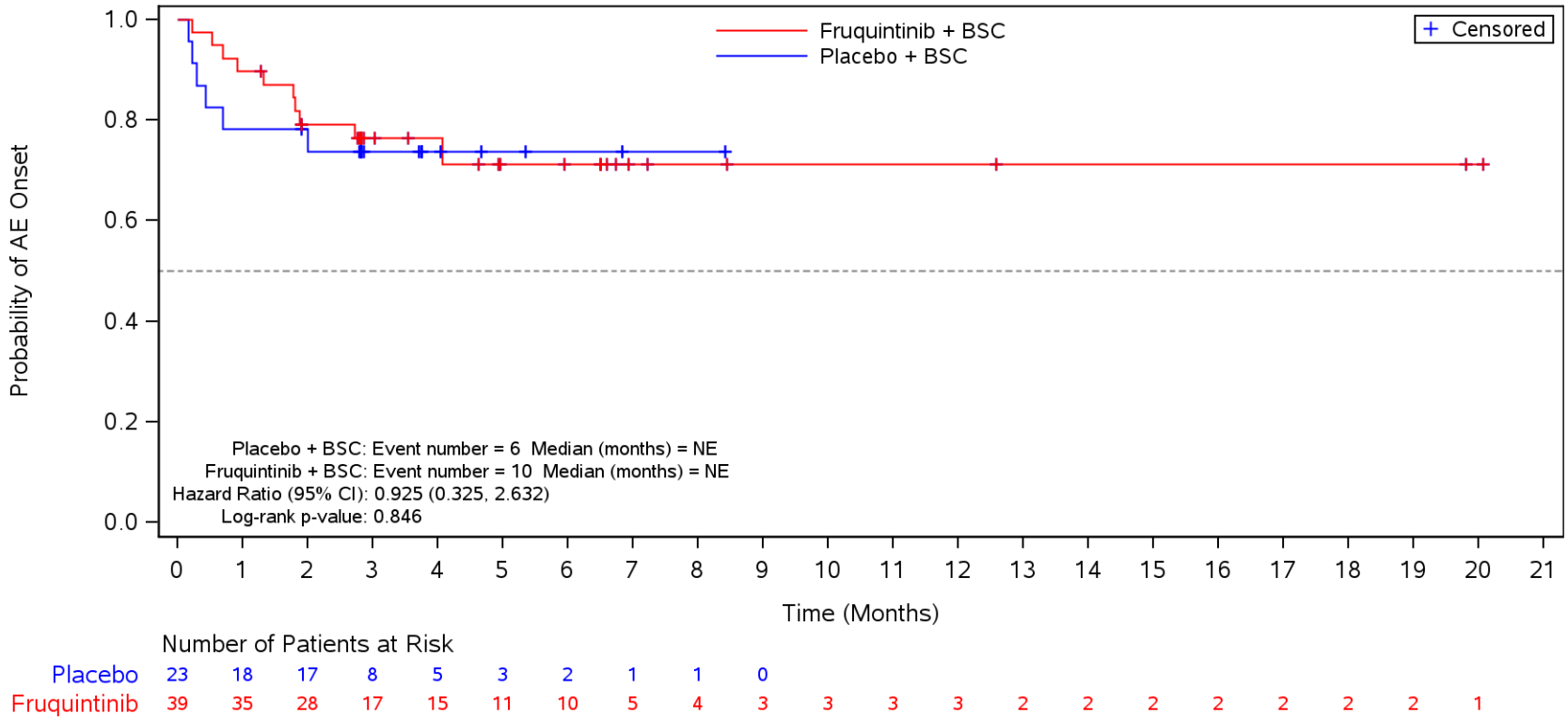
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
Serious TEAE
Rectum



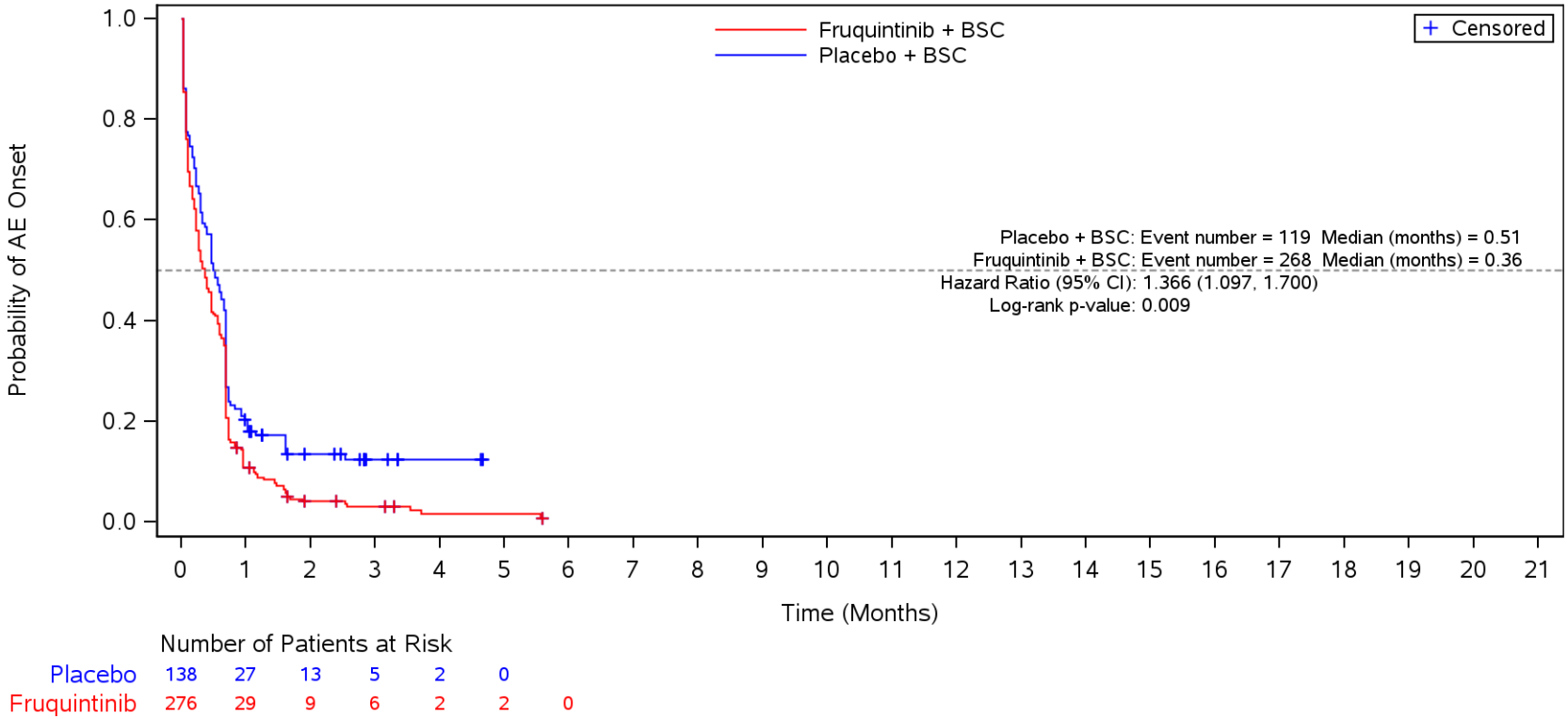
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
Serious TEAE
Colon and Rectum



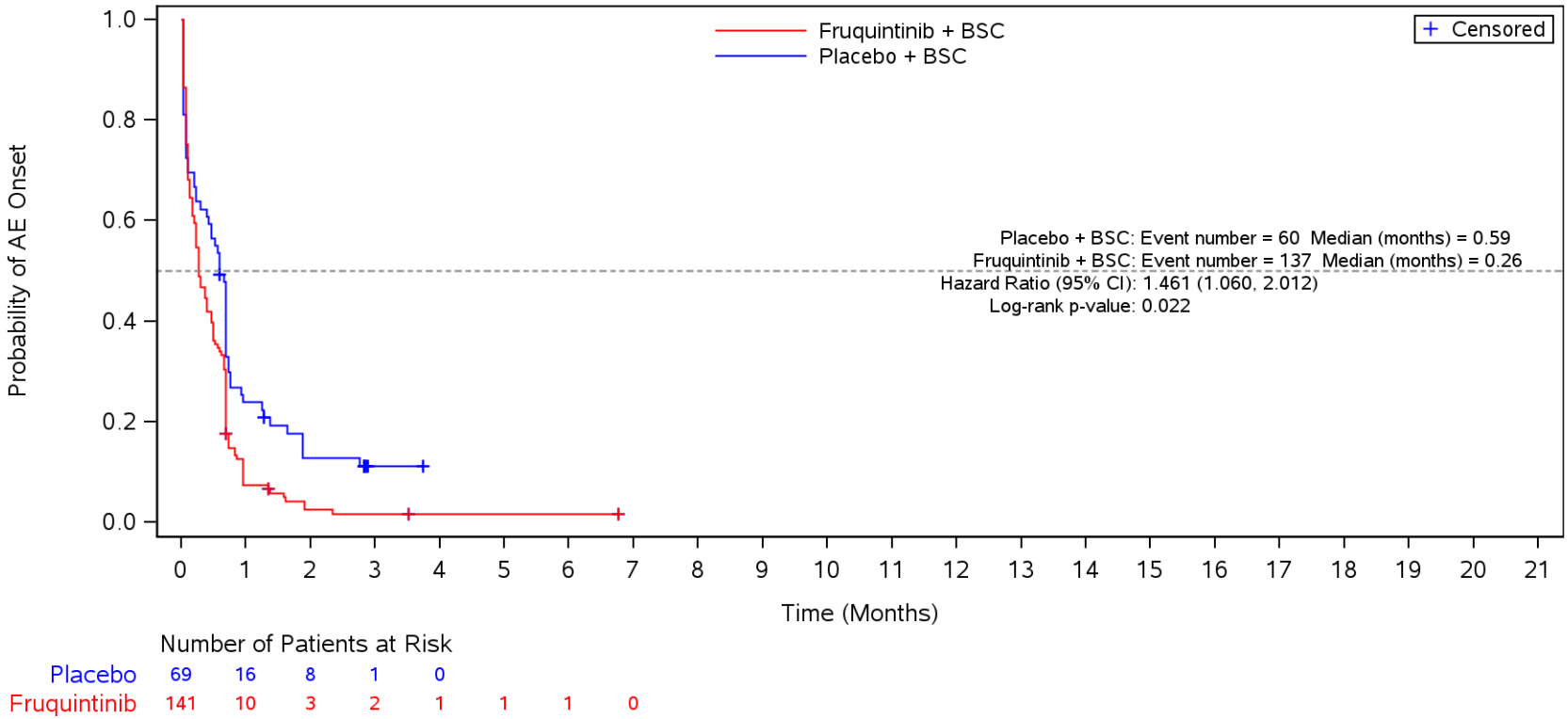
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≤ CTCAE Grade 2
Colon



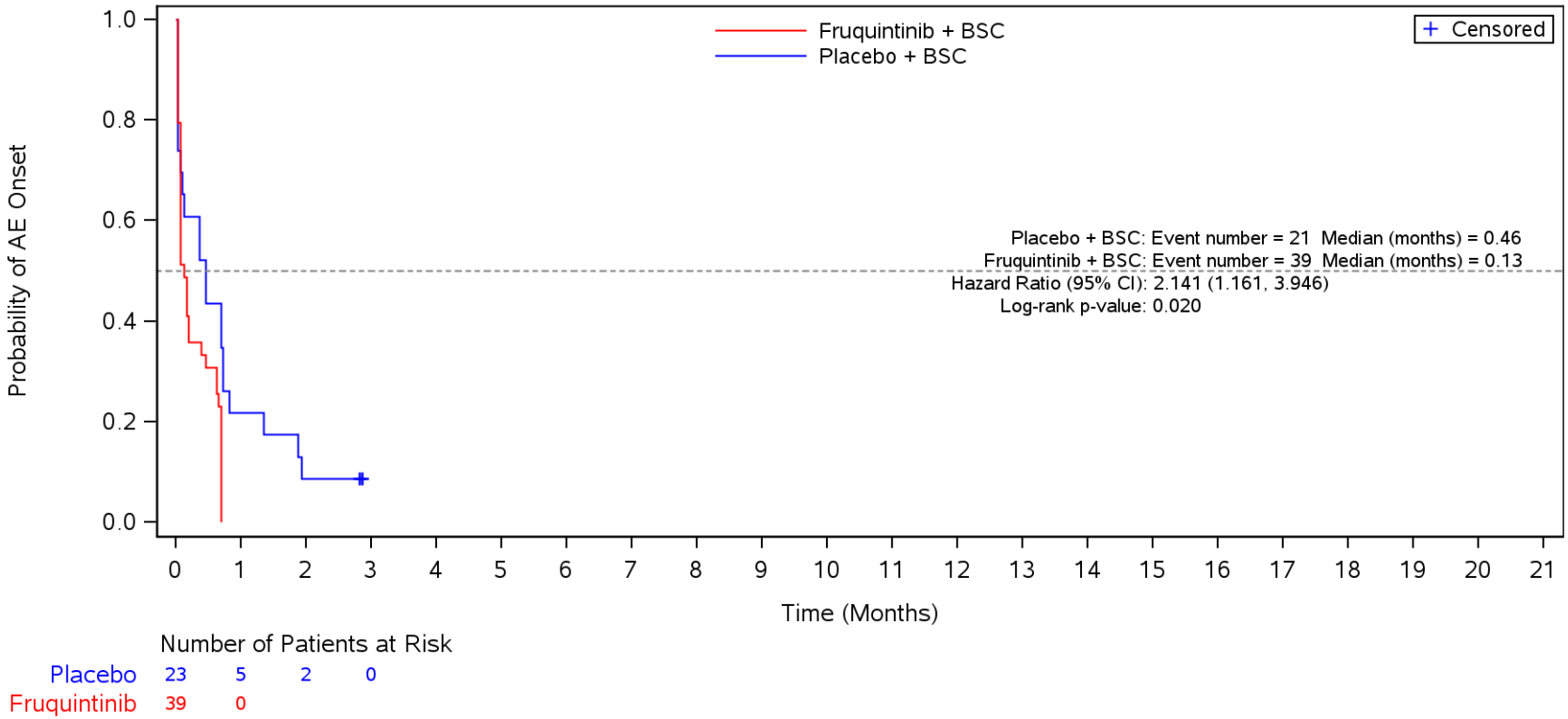
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≤ CTCAE Grade 2
Rectum



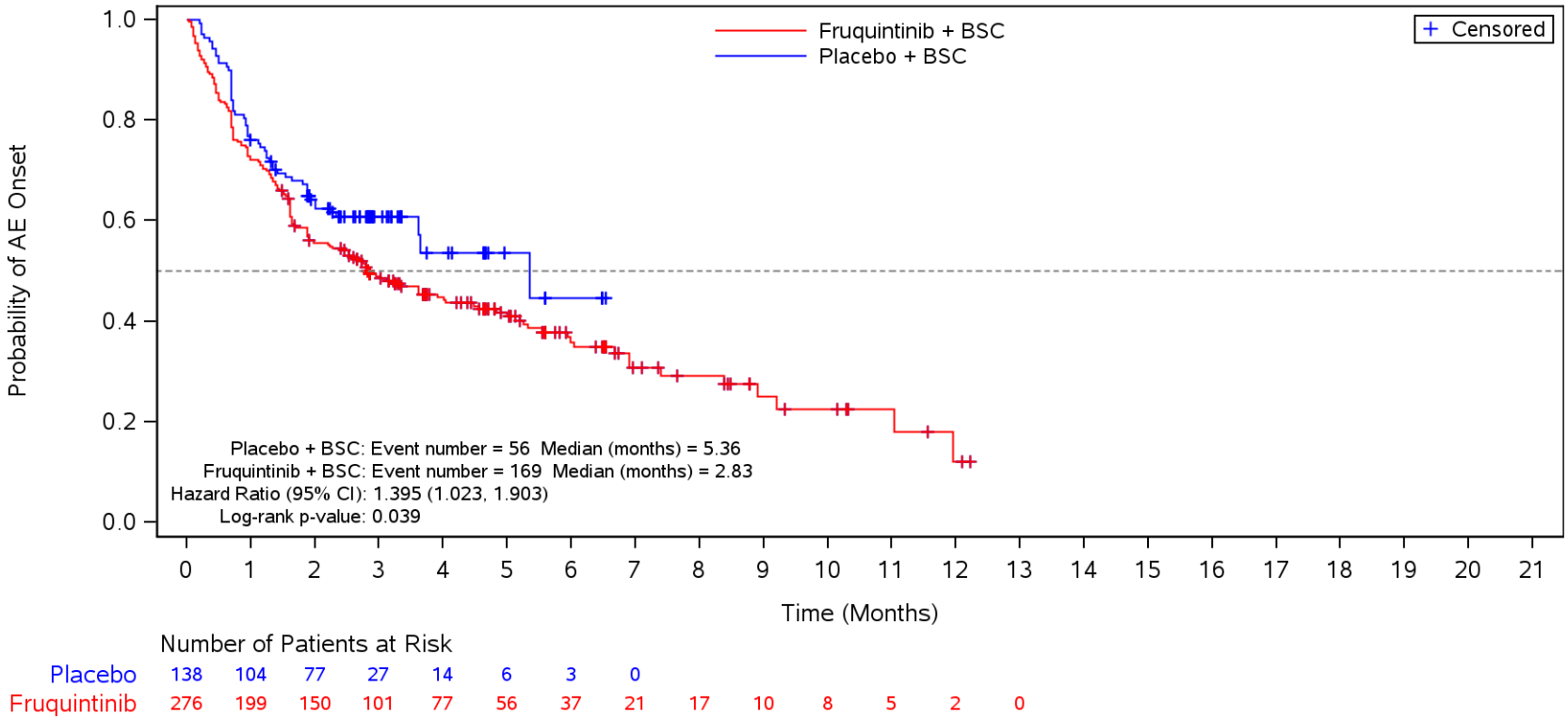
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≤ CTCAE Grade 2
Colon and Rectum



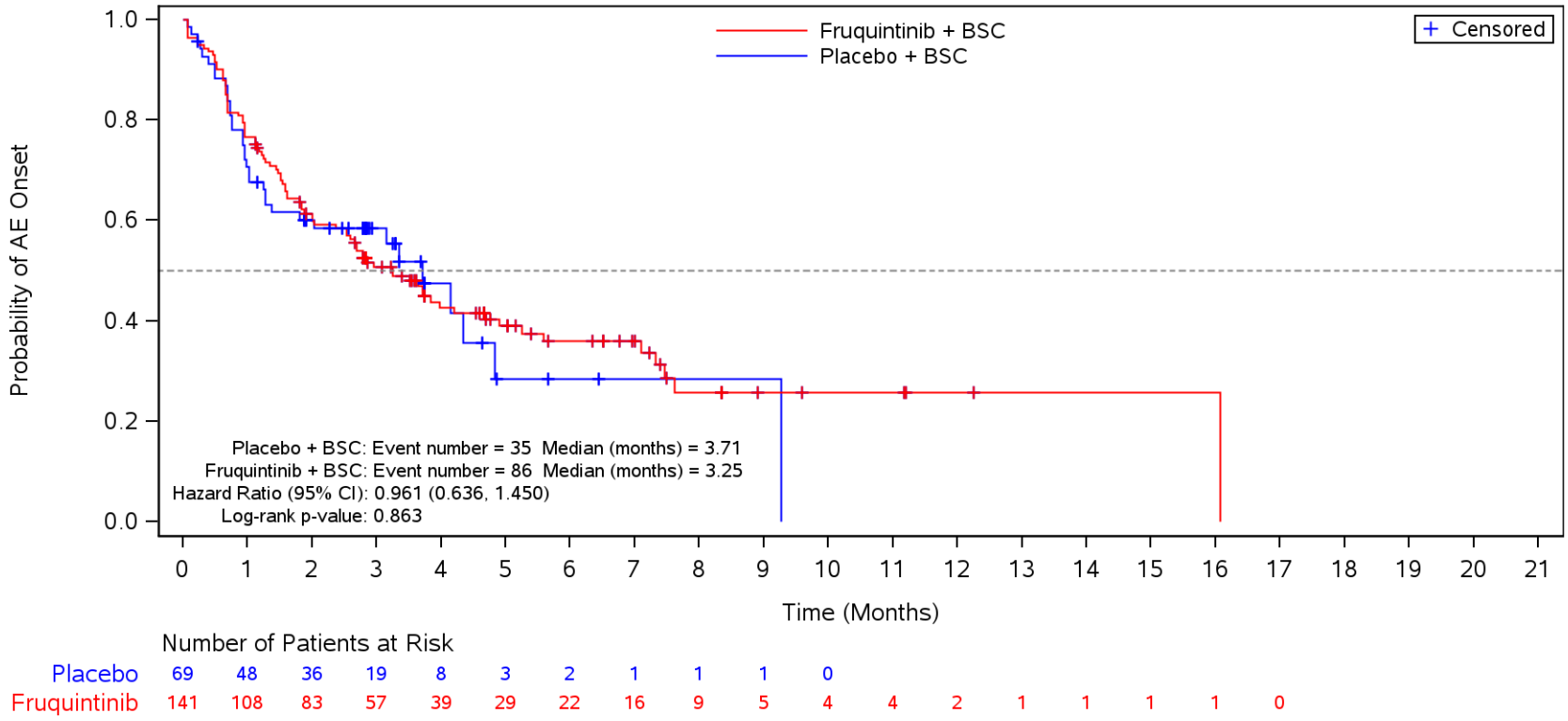
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3
Colon



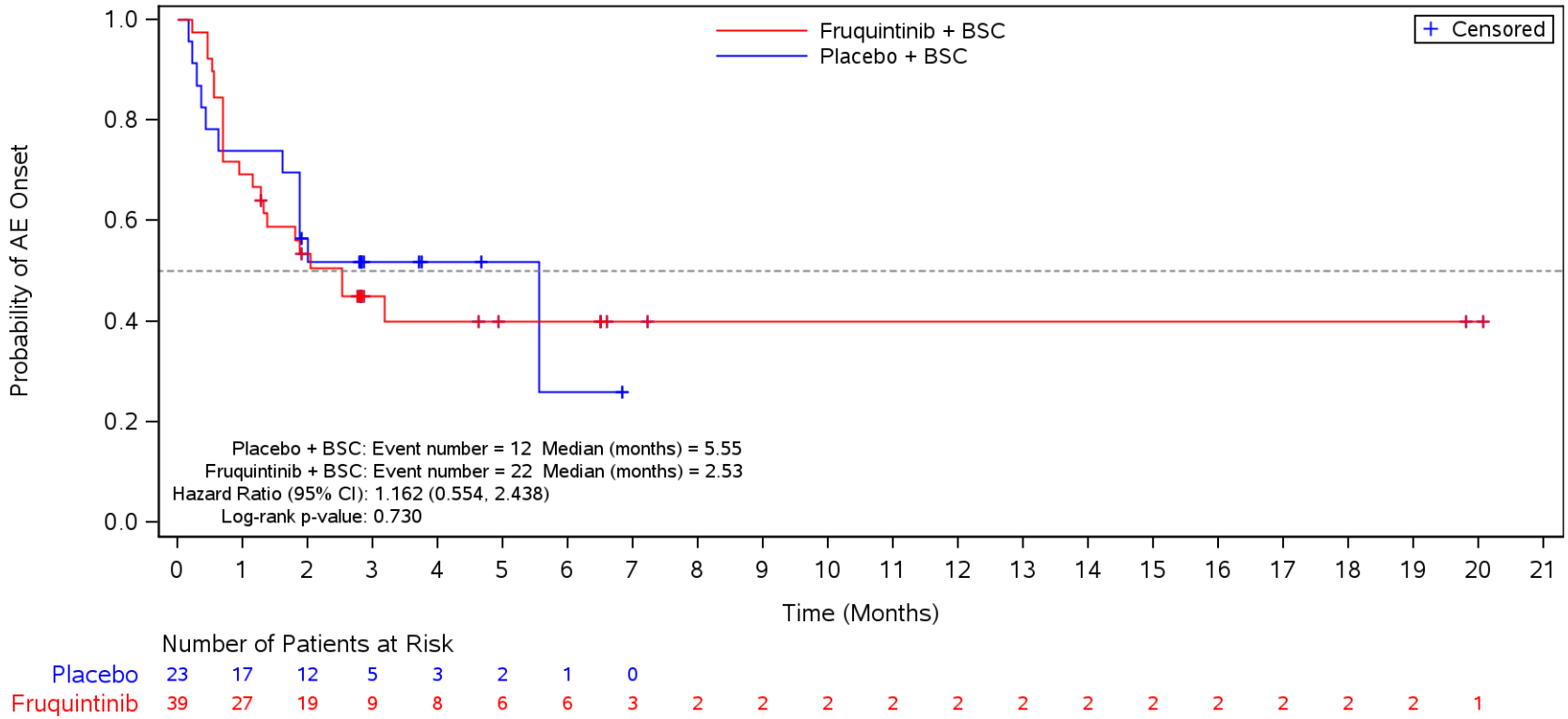
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3
Rectum



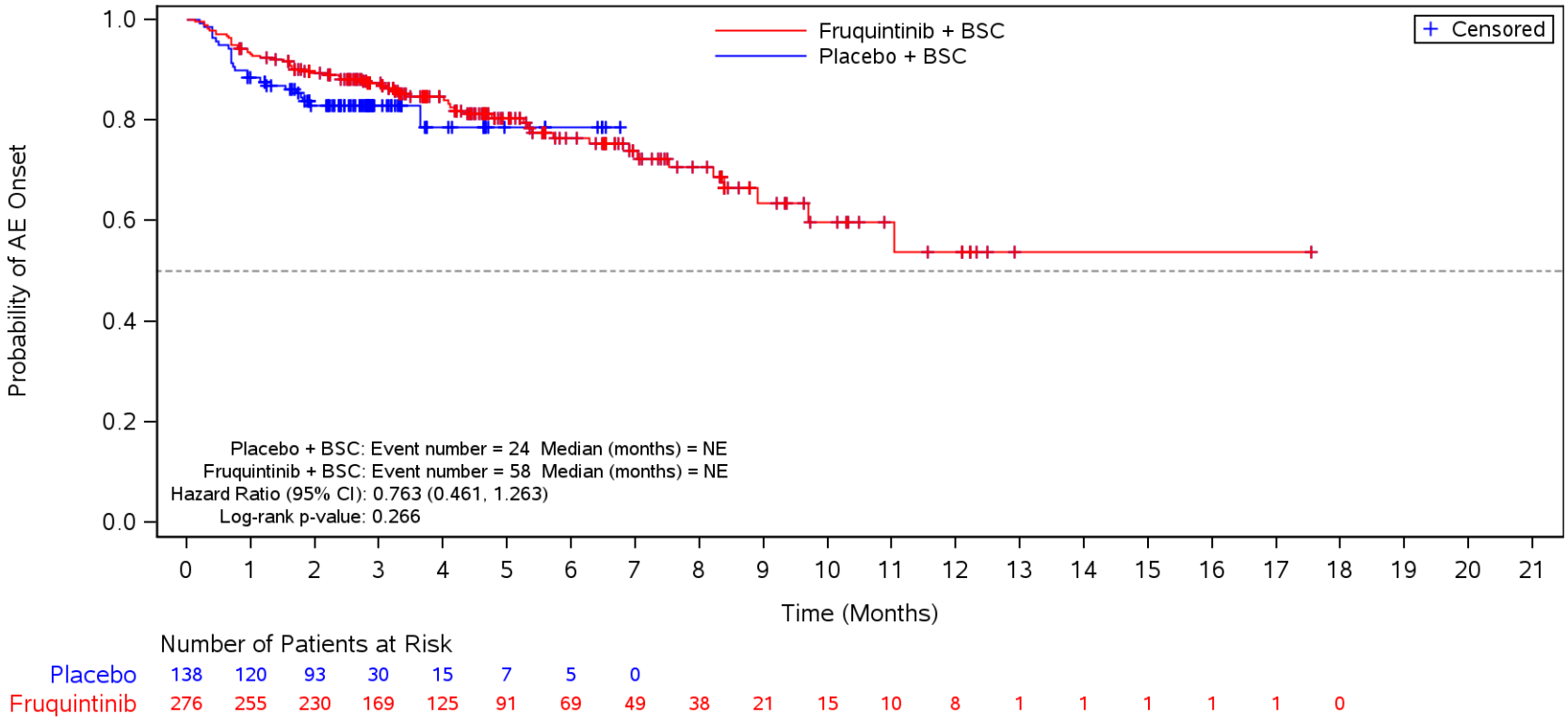
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
TEAE ≥ CTCAE Grade 3
Colon and Rectum



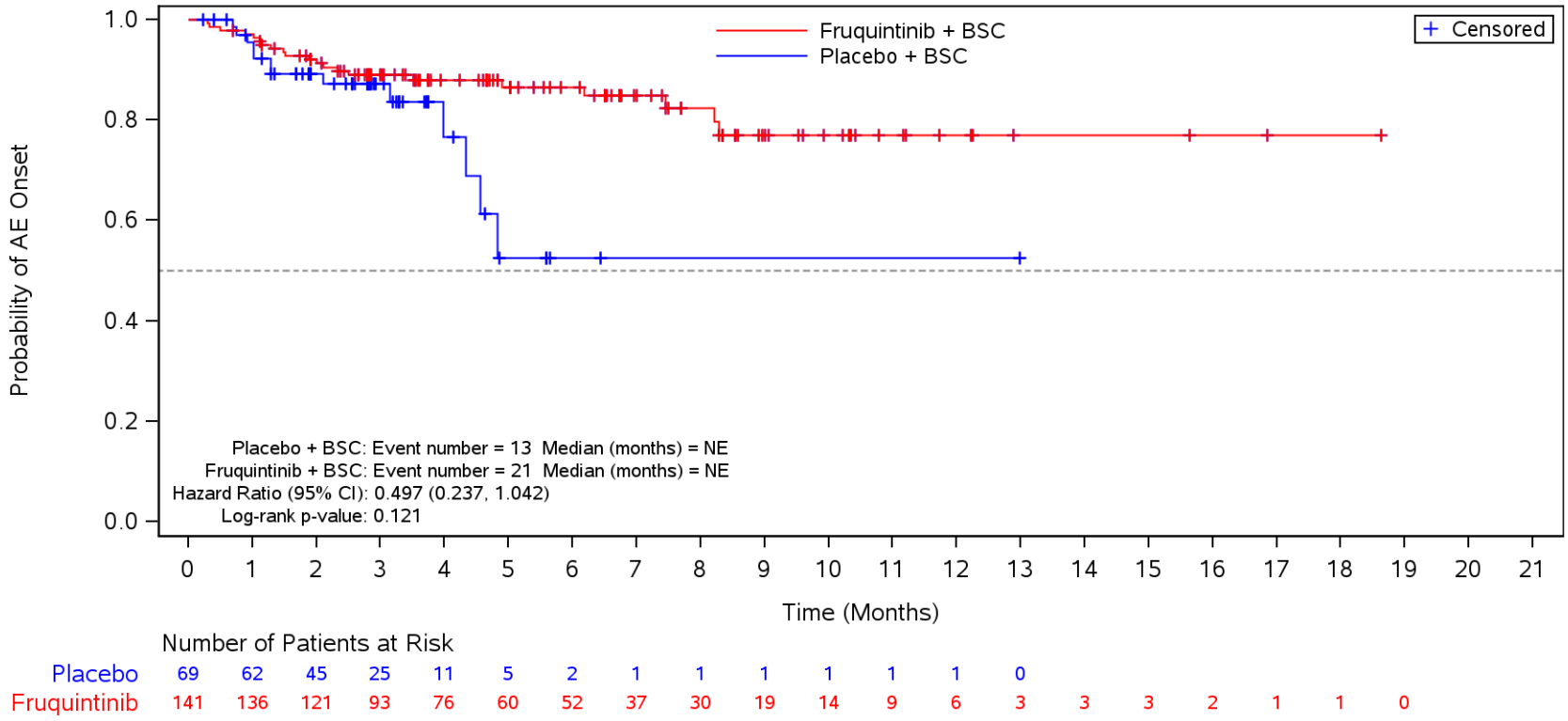
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
Discontinuation due to TEAE
Colon



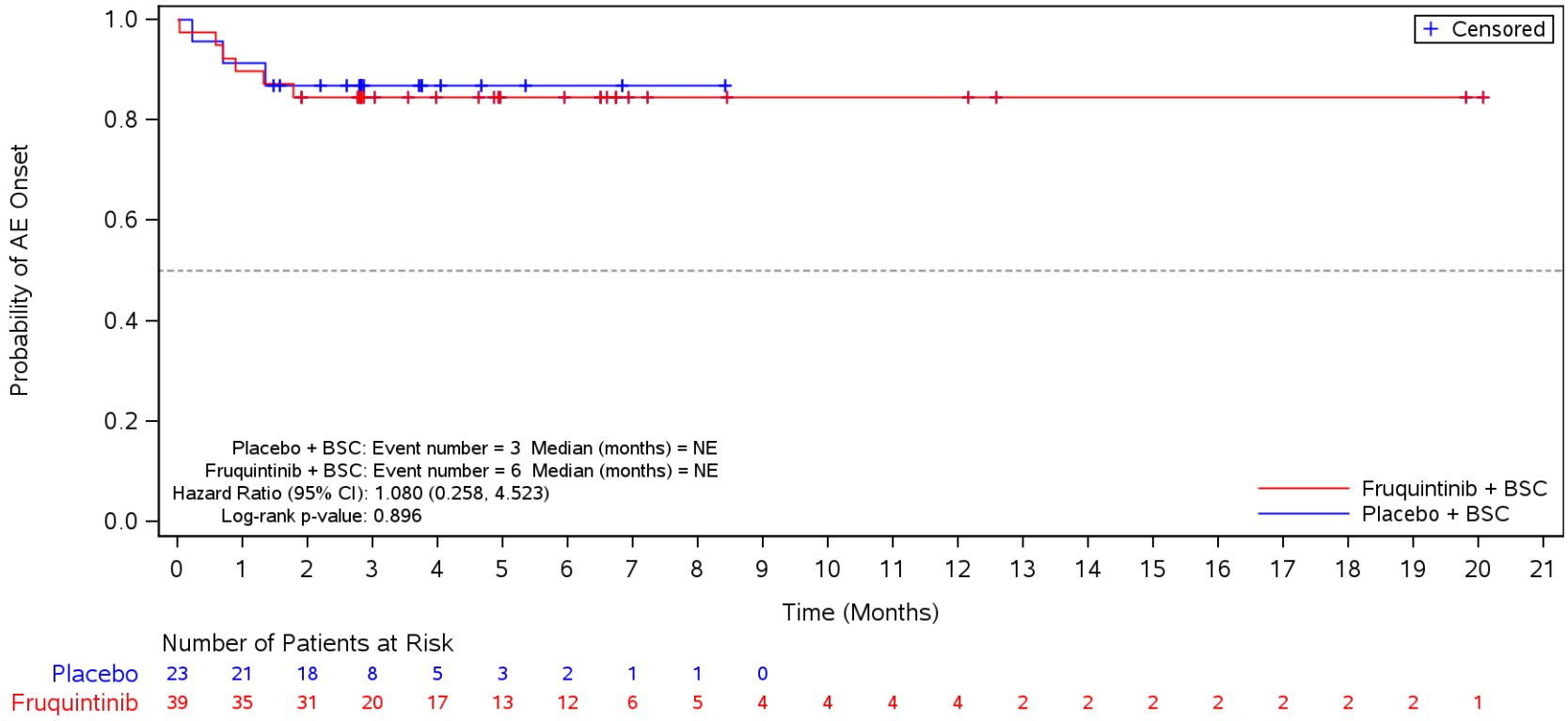
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
Discontinuation due to TEAE
Rectum



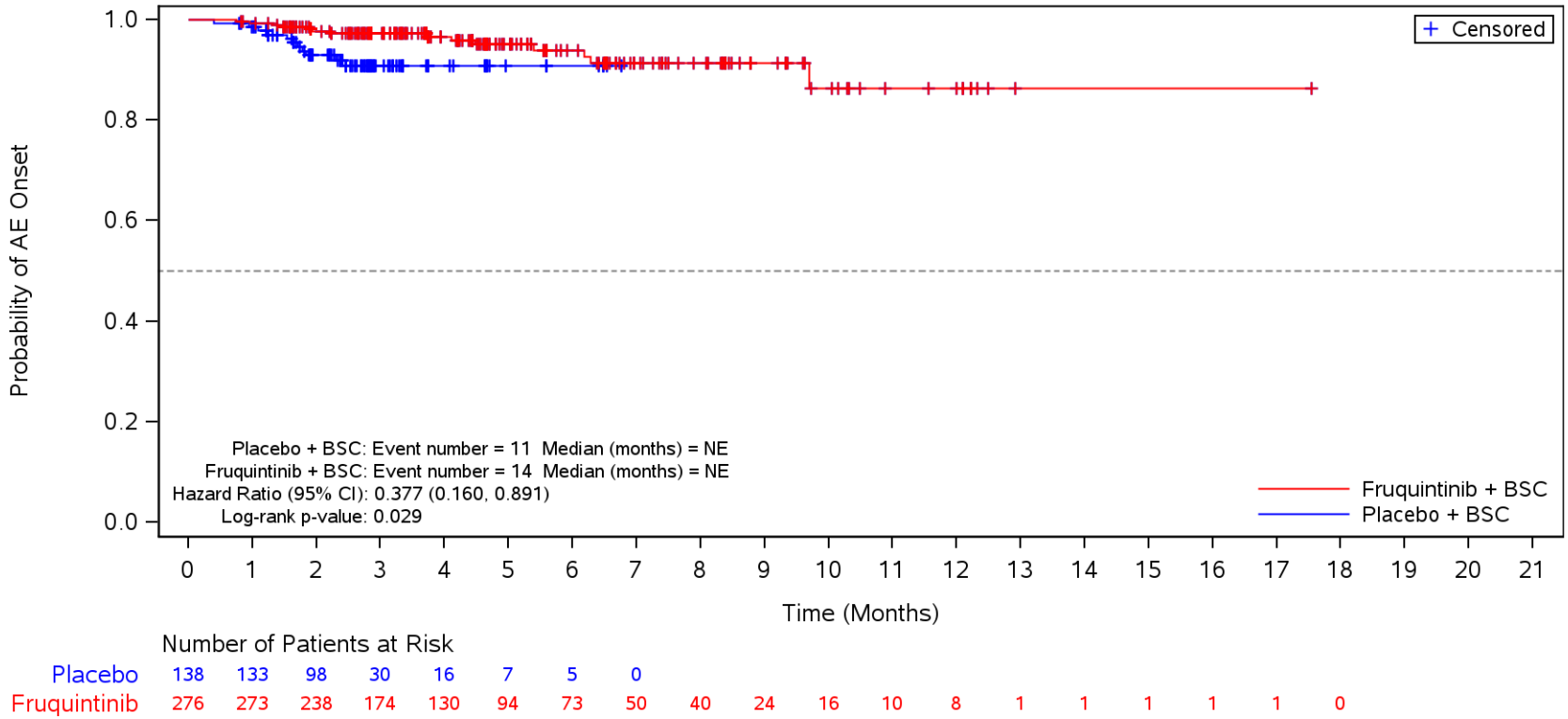
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
Discontinuation due to TEAE
Colon and Rectum



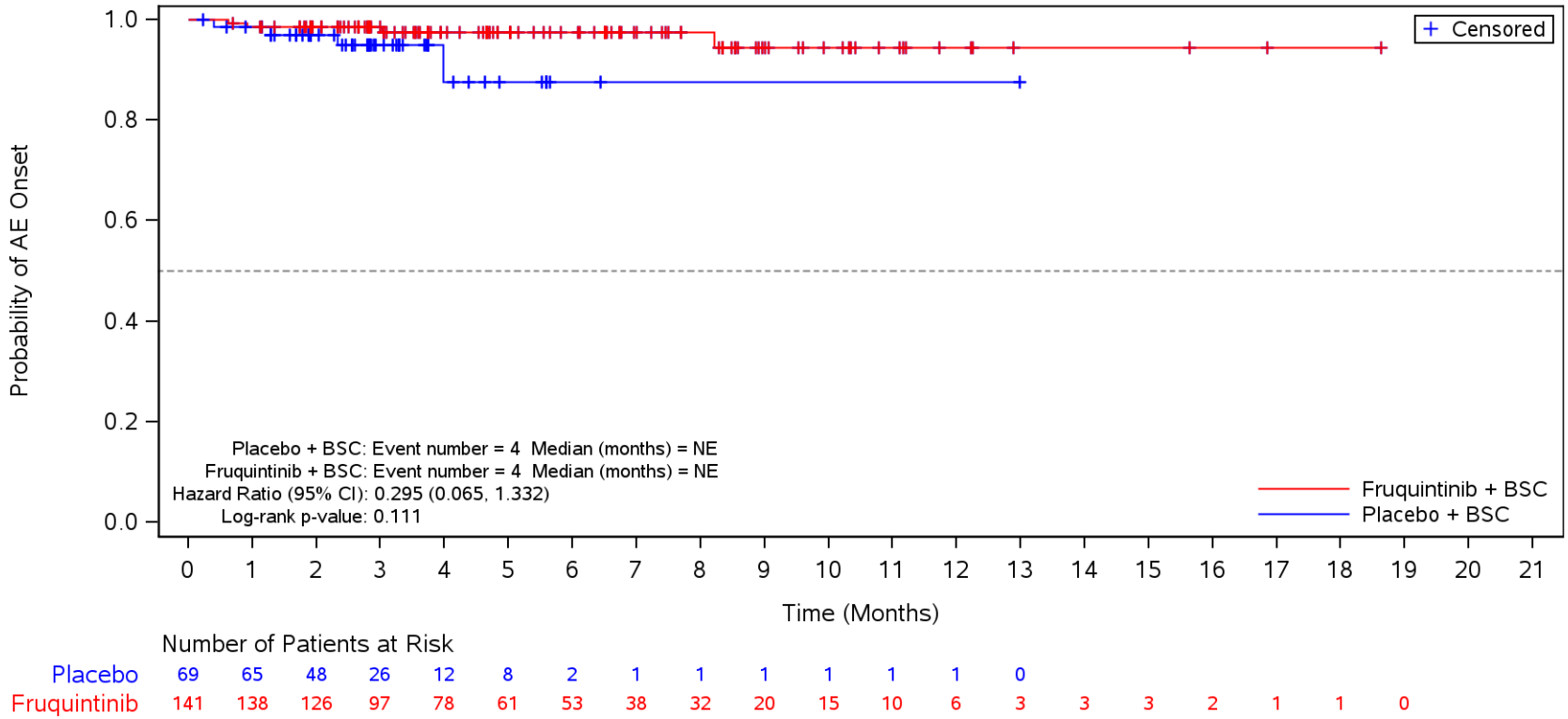
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
Deaths (Grade 5 TEAEs)
Colon



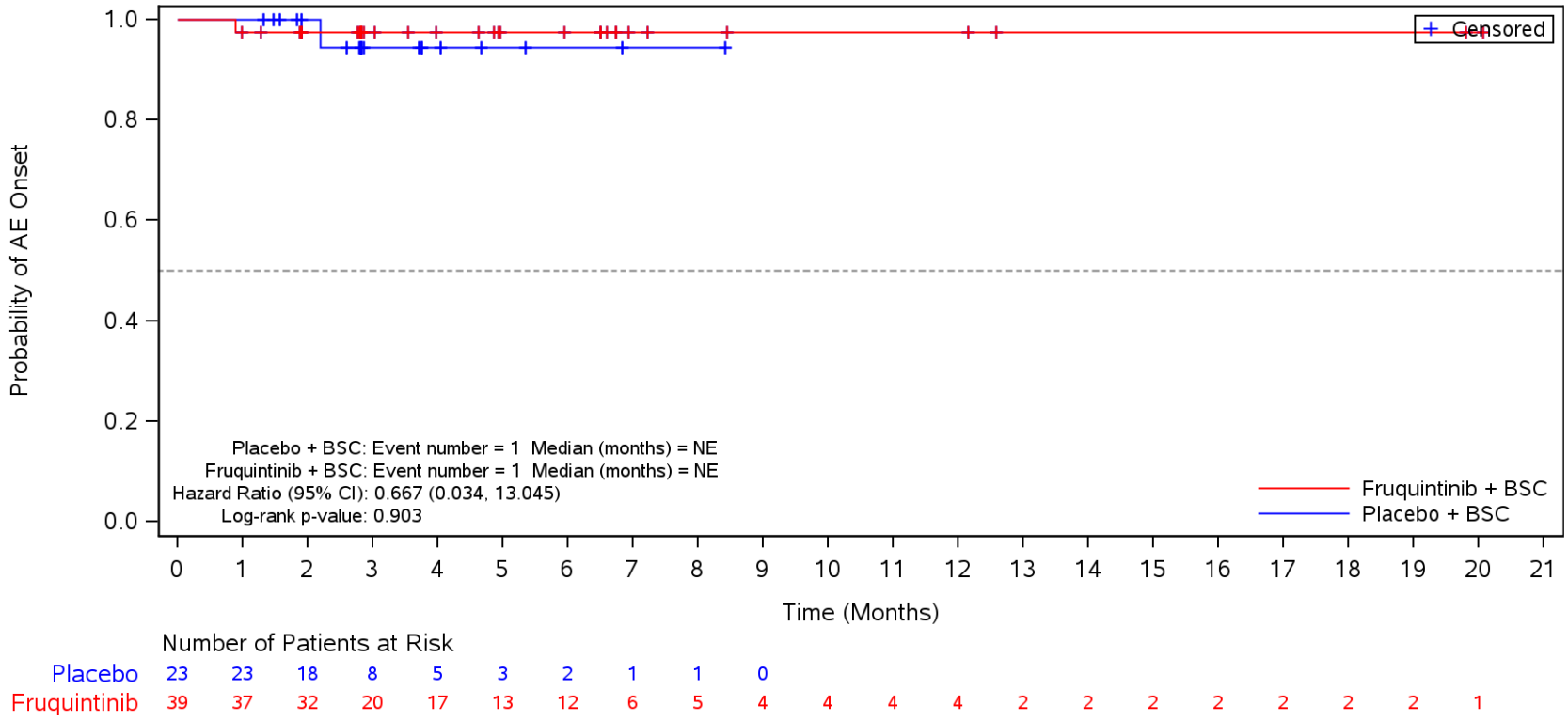
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3G
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Primary Tumor Site at 1st Diagnosis
Safety Population
Deaths (Grade 5 TEAEs)
Rectum



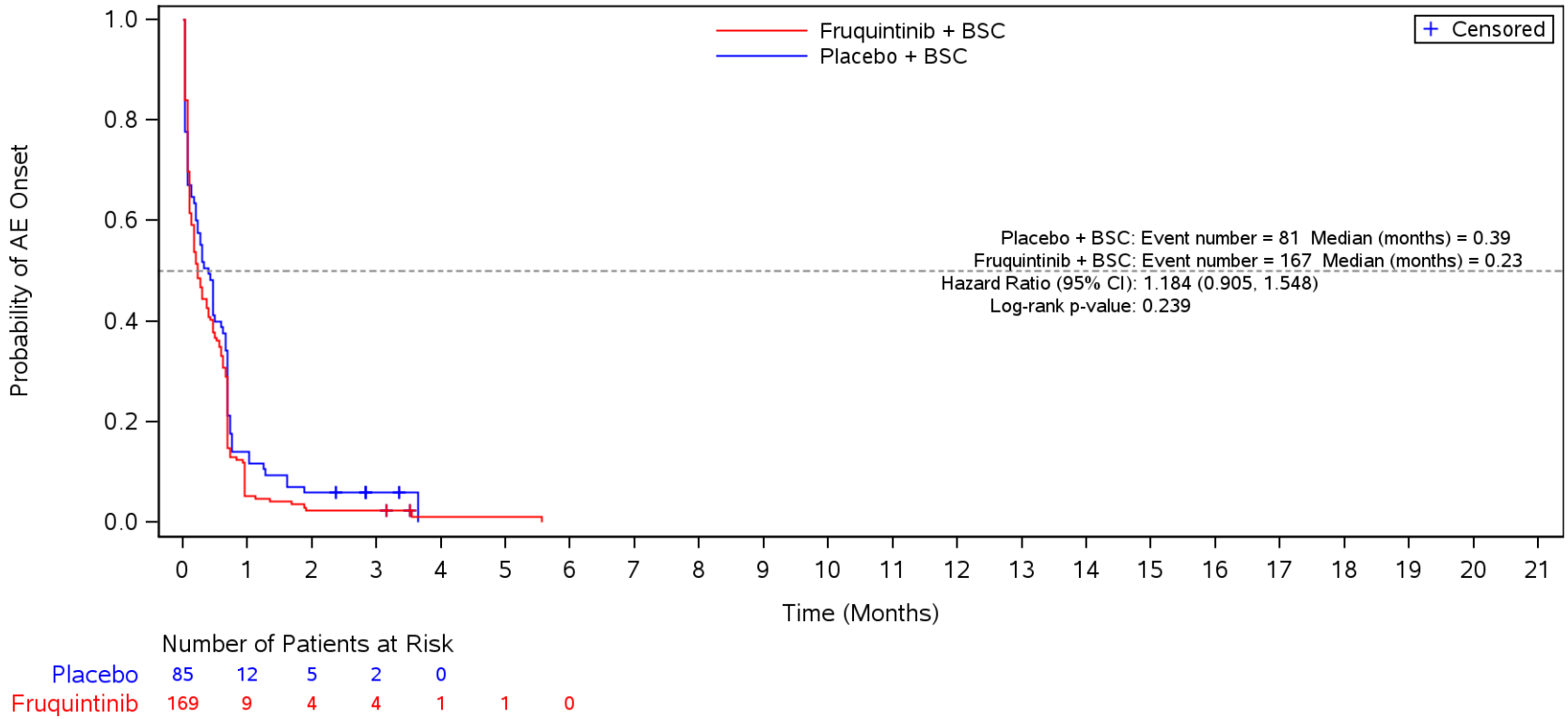
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
TEAE
WT (Wild Type)



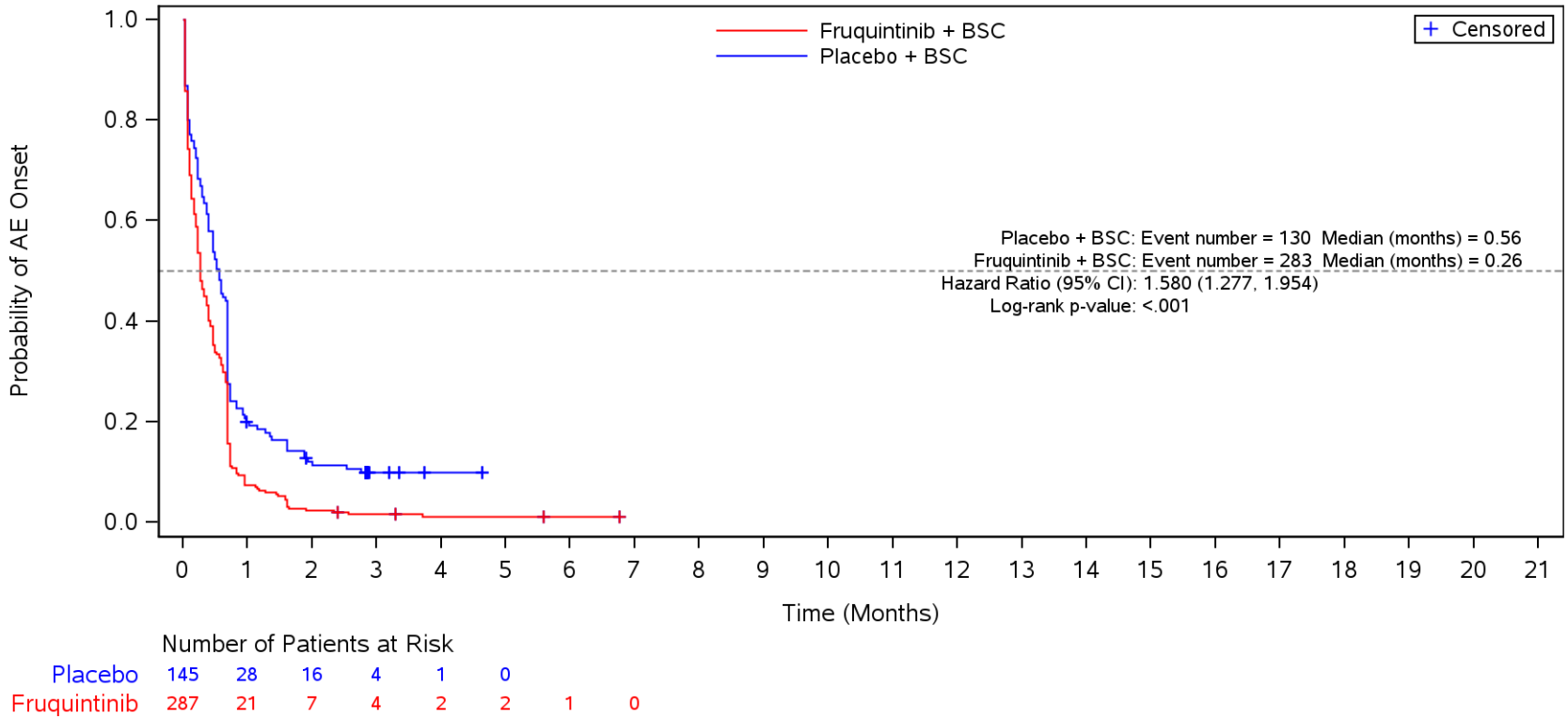
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
TEAE
WT (Wild Type)



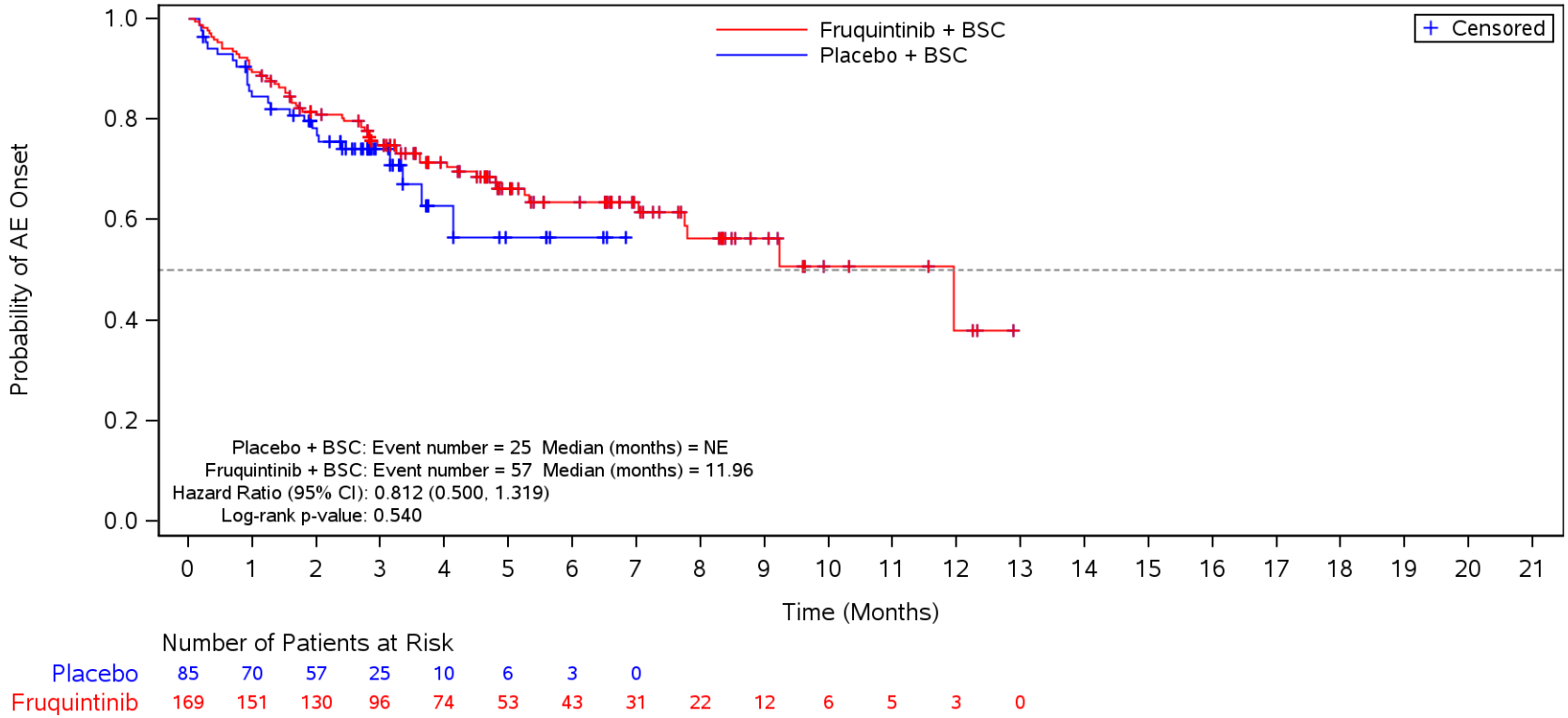
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
TEAE
Mutant



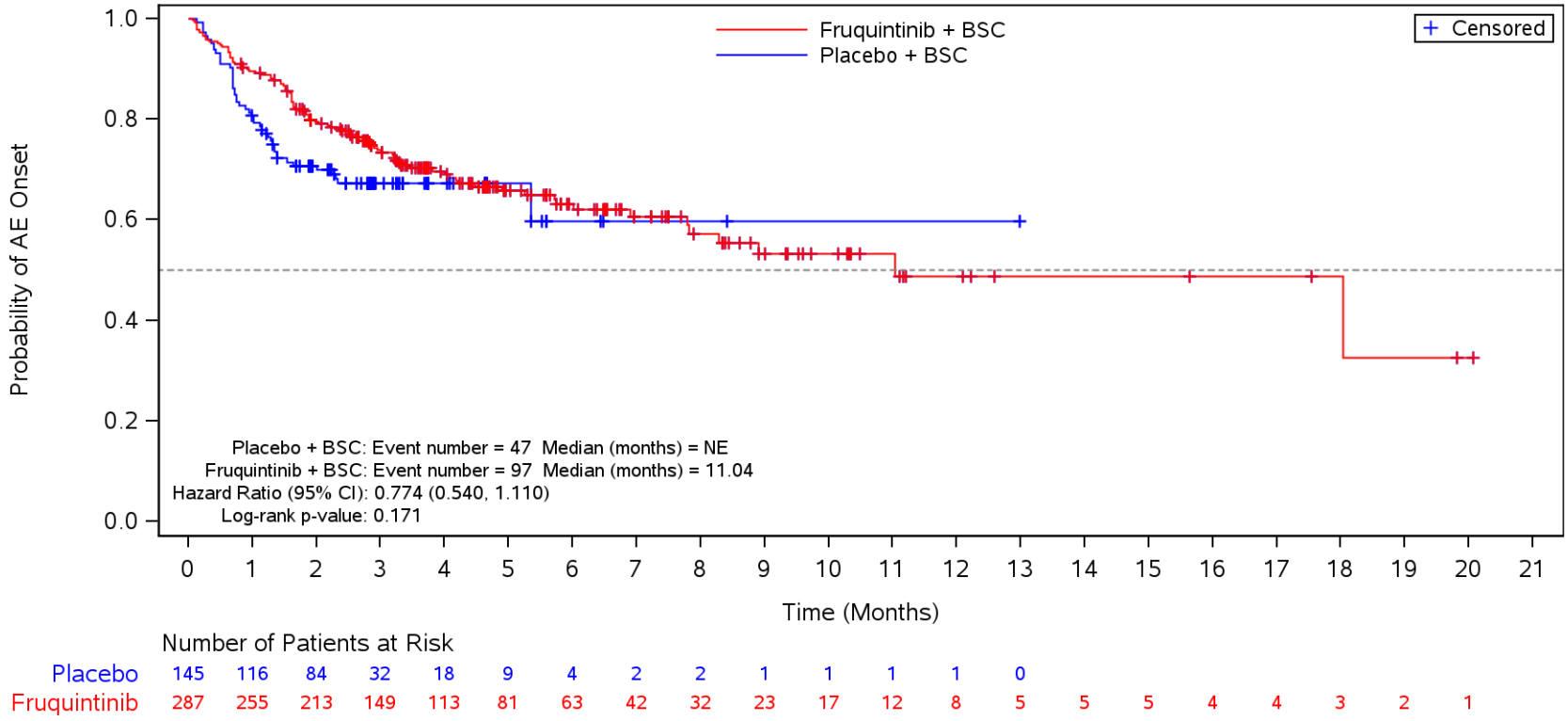
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
Serious TEAE
WT (Wild Type)



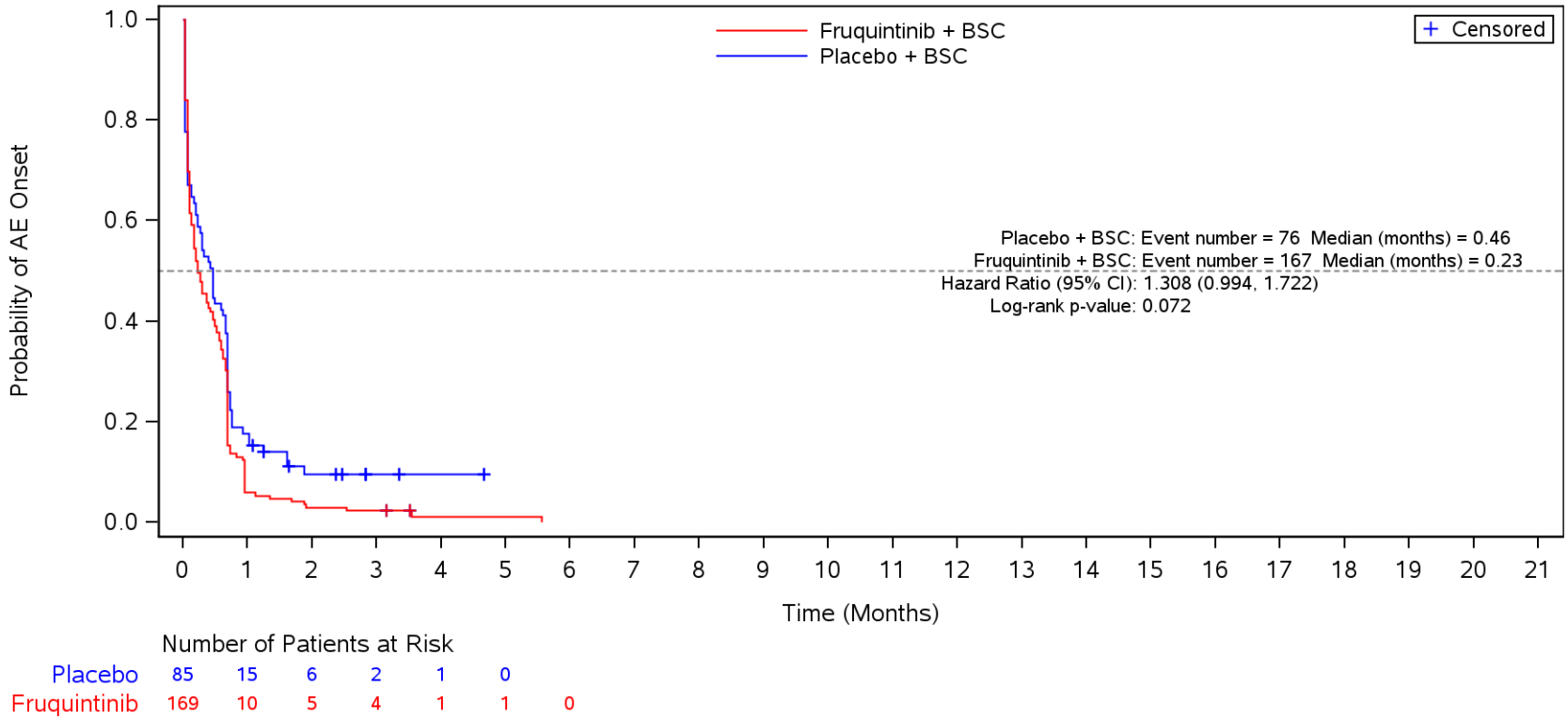
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
Serious TEAE
Mutant



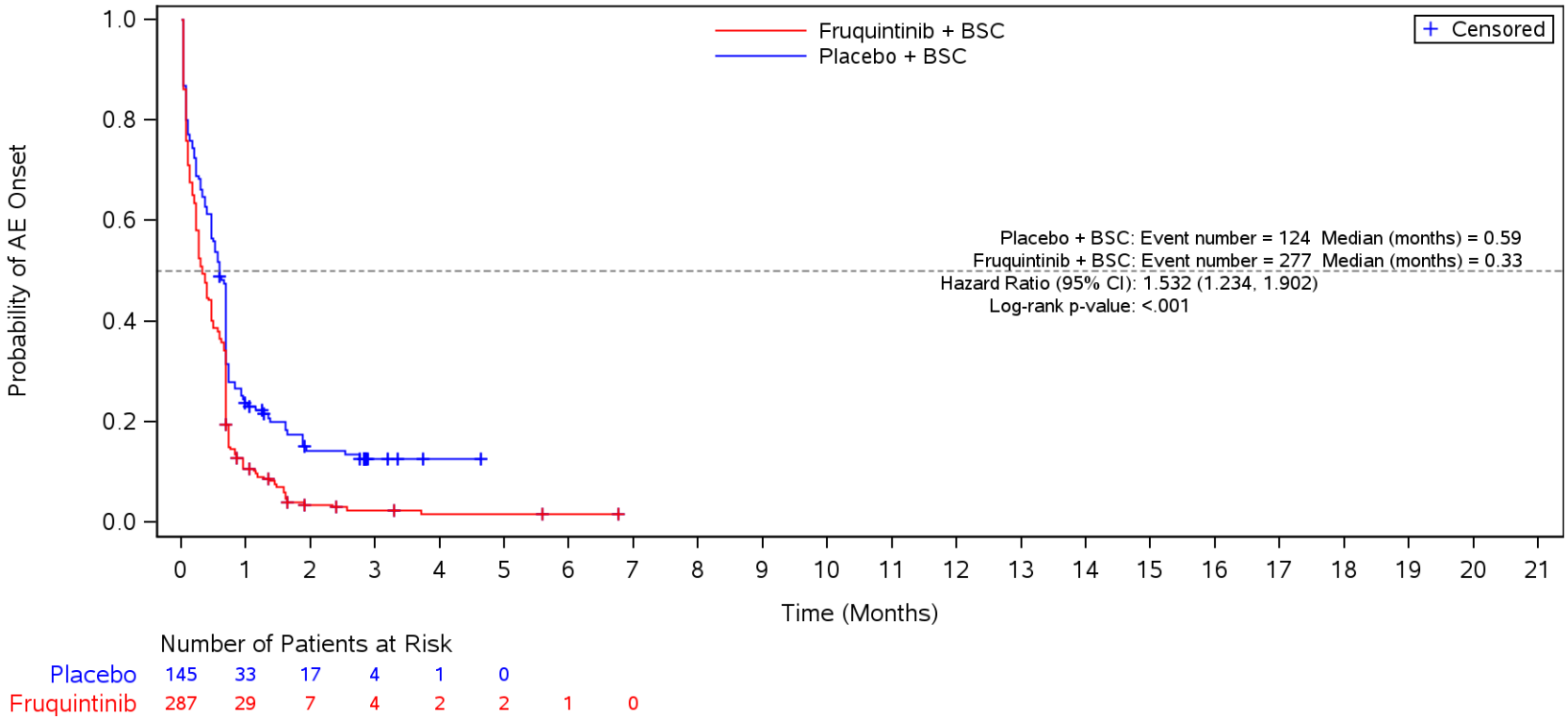
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
TEAE ≤ CTCAE Grade 2
WT (Wild Type)



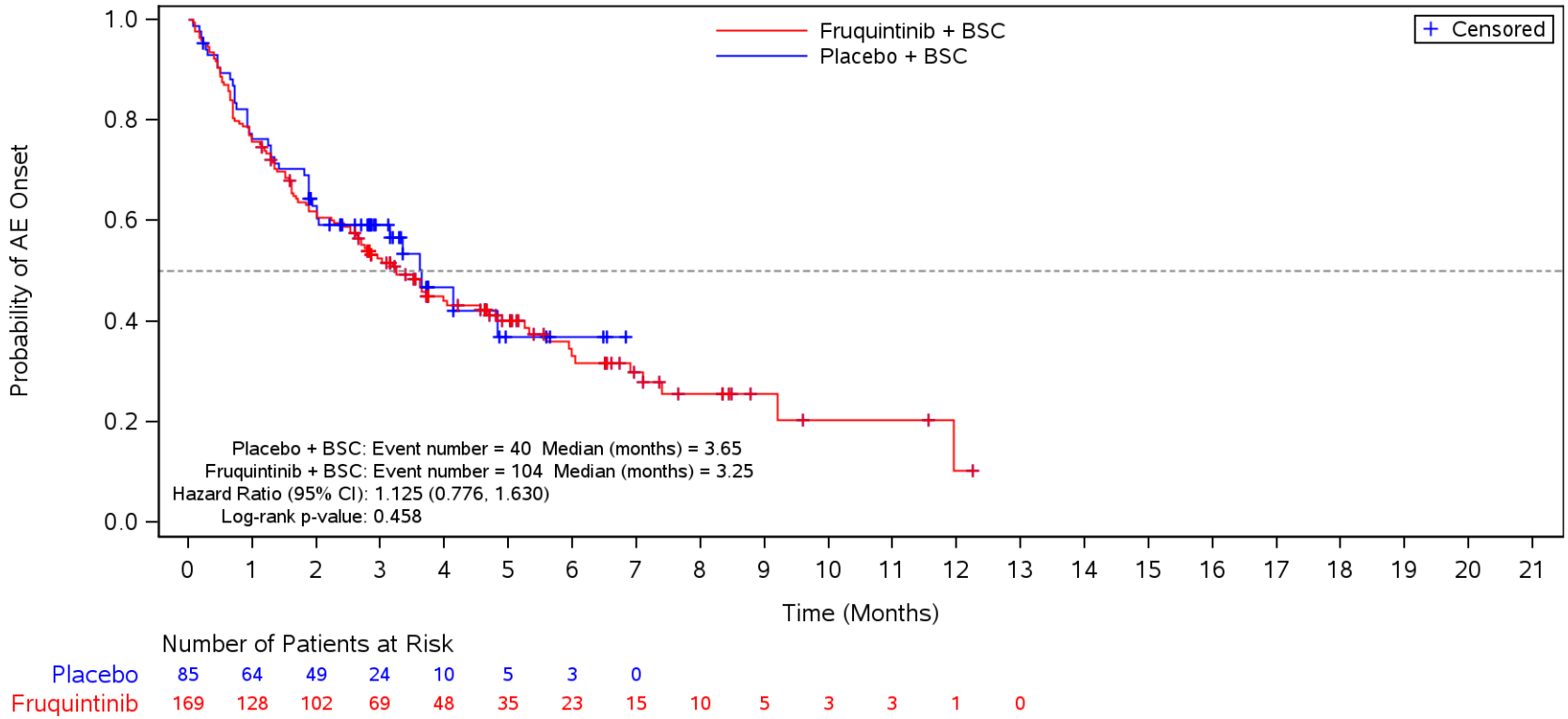
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
TEAE ≤ CTCAE Grade 2
Mutant



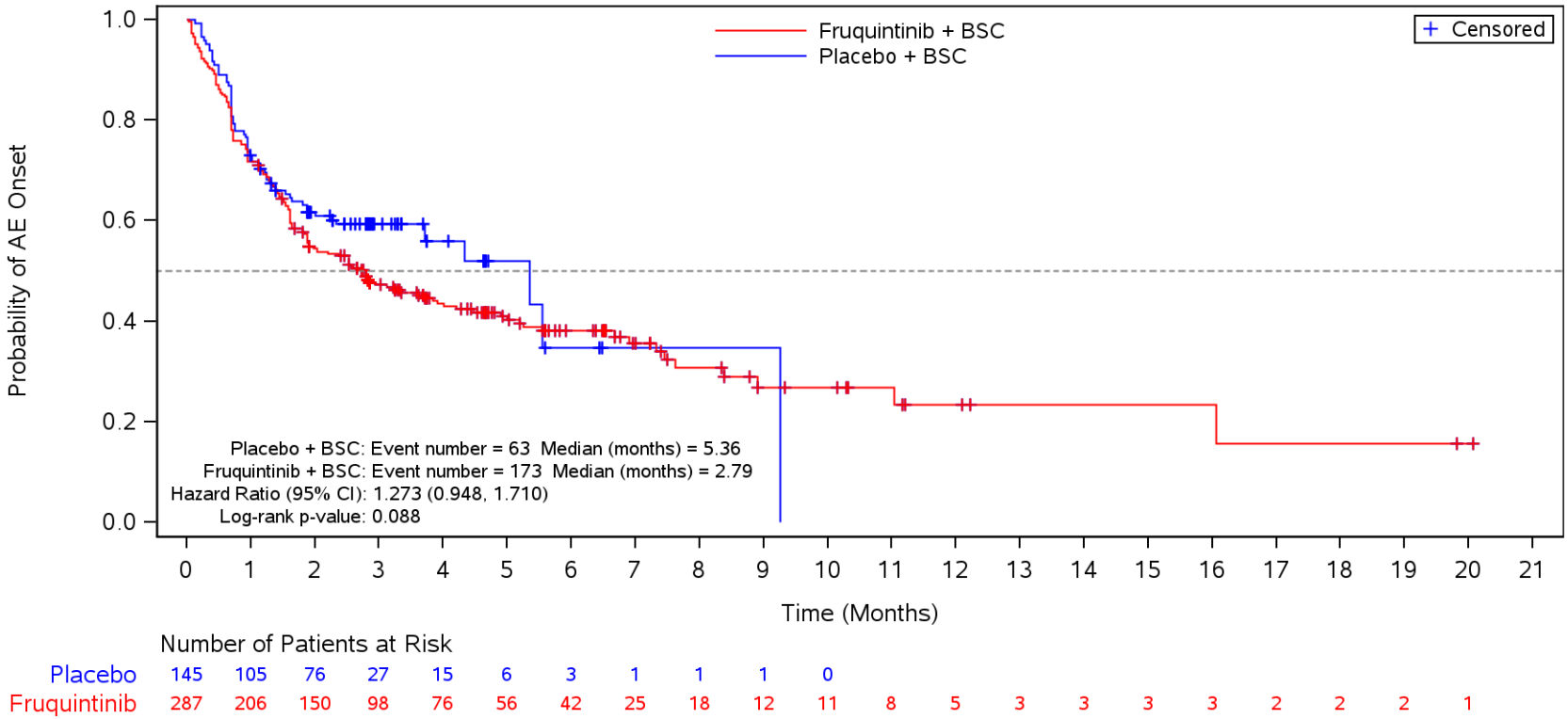
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3
WT (Wild Type)



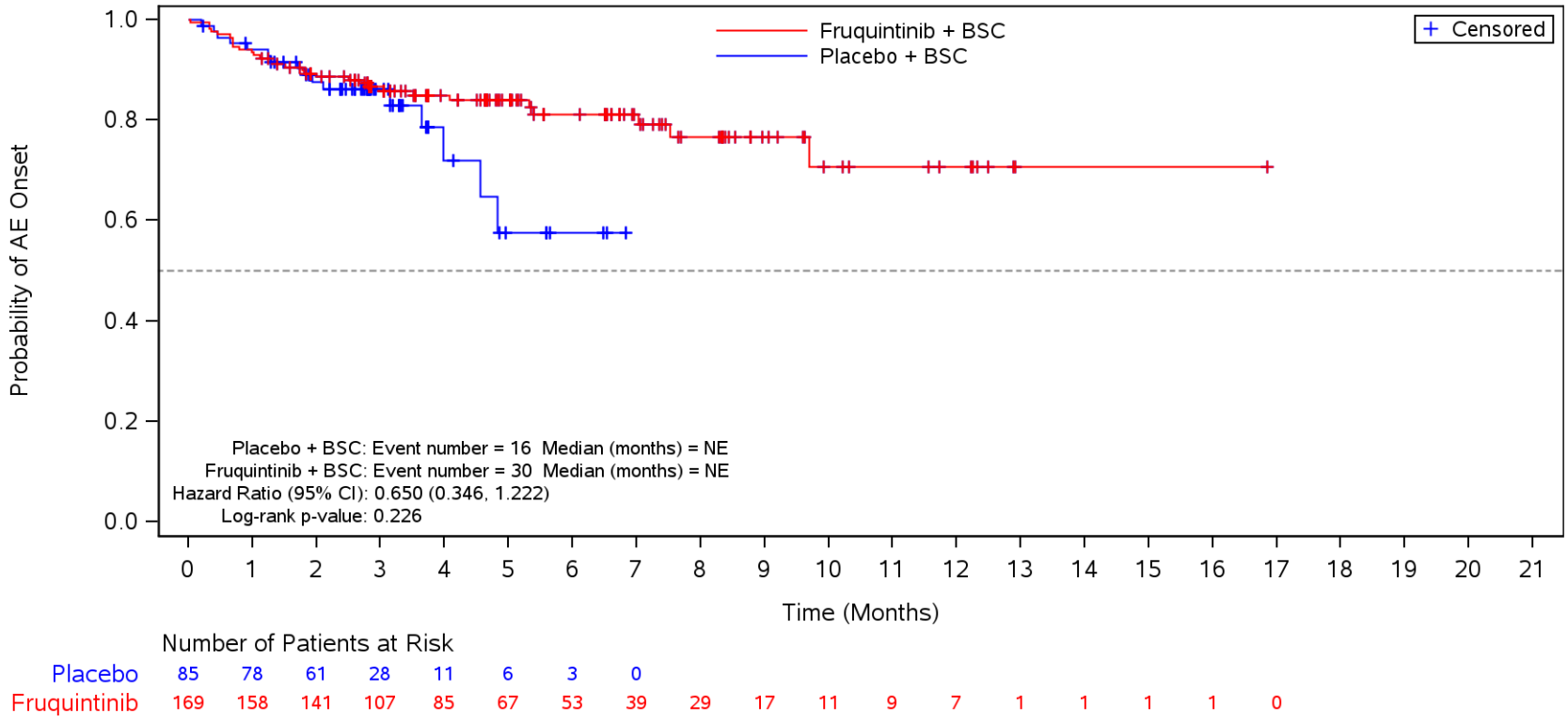
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
TEAE ≥ CTCAE Grade 3
Mutant



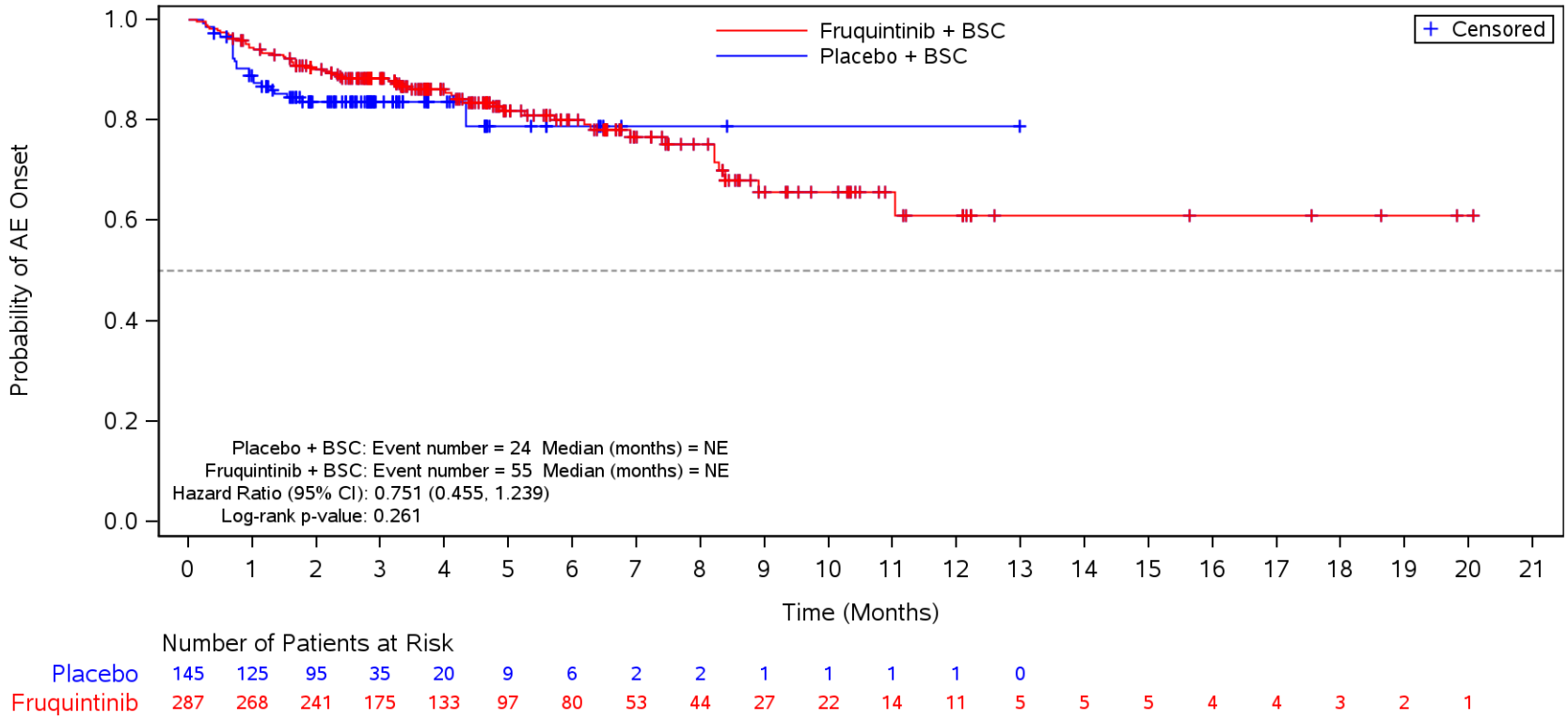
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
Discontinuation due to TEAE
WT (Wild Type)



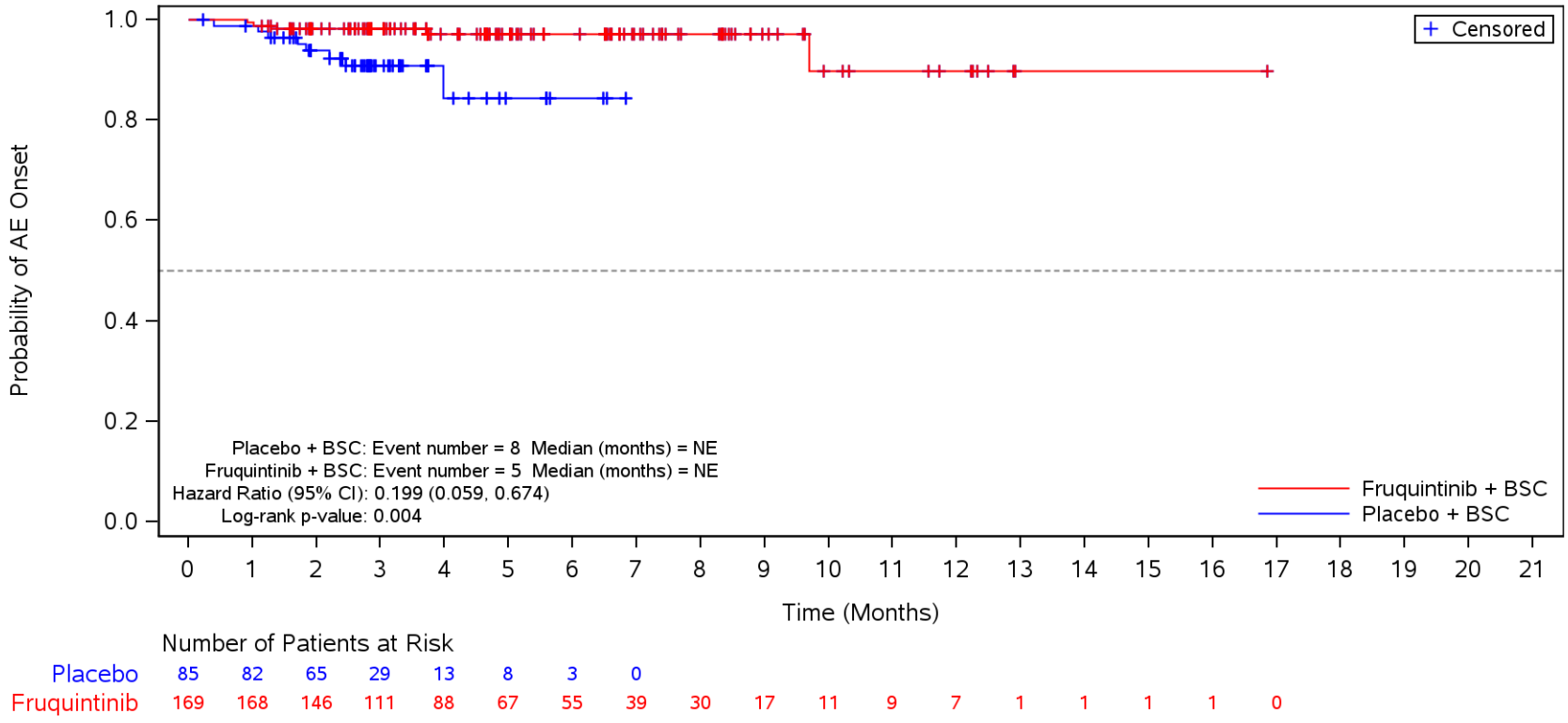
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
Discontinuation due to TEAE
Mutant



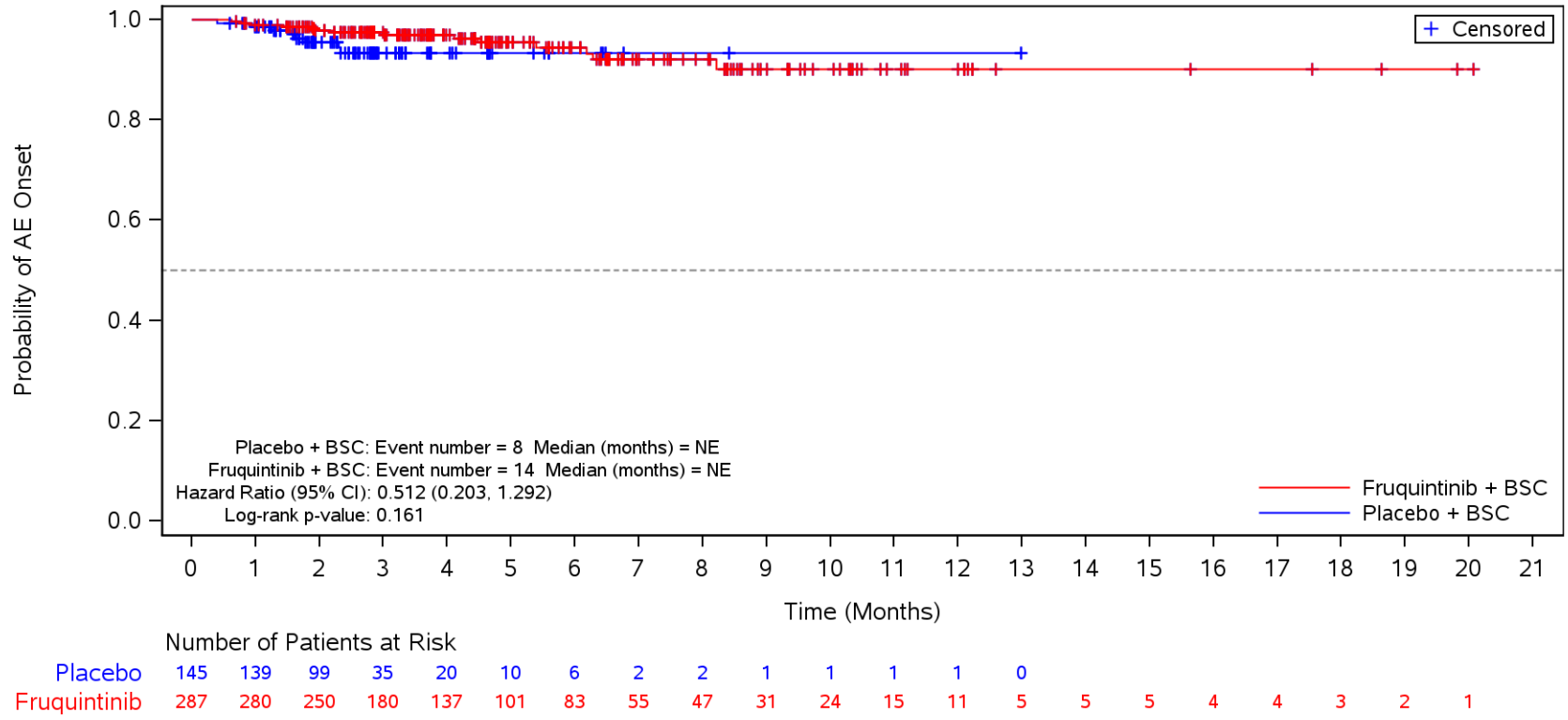
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3H
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by RAS Status
Safety Population
Deaths (Grade 5 TEAEs)
WT (Wild Type)



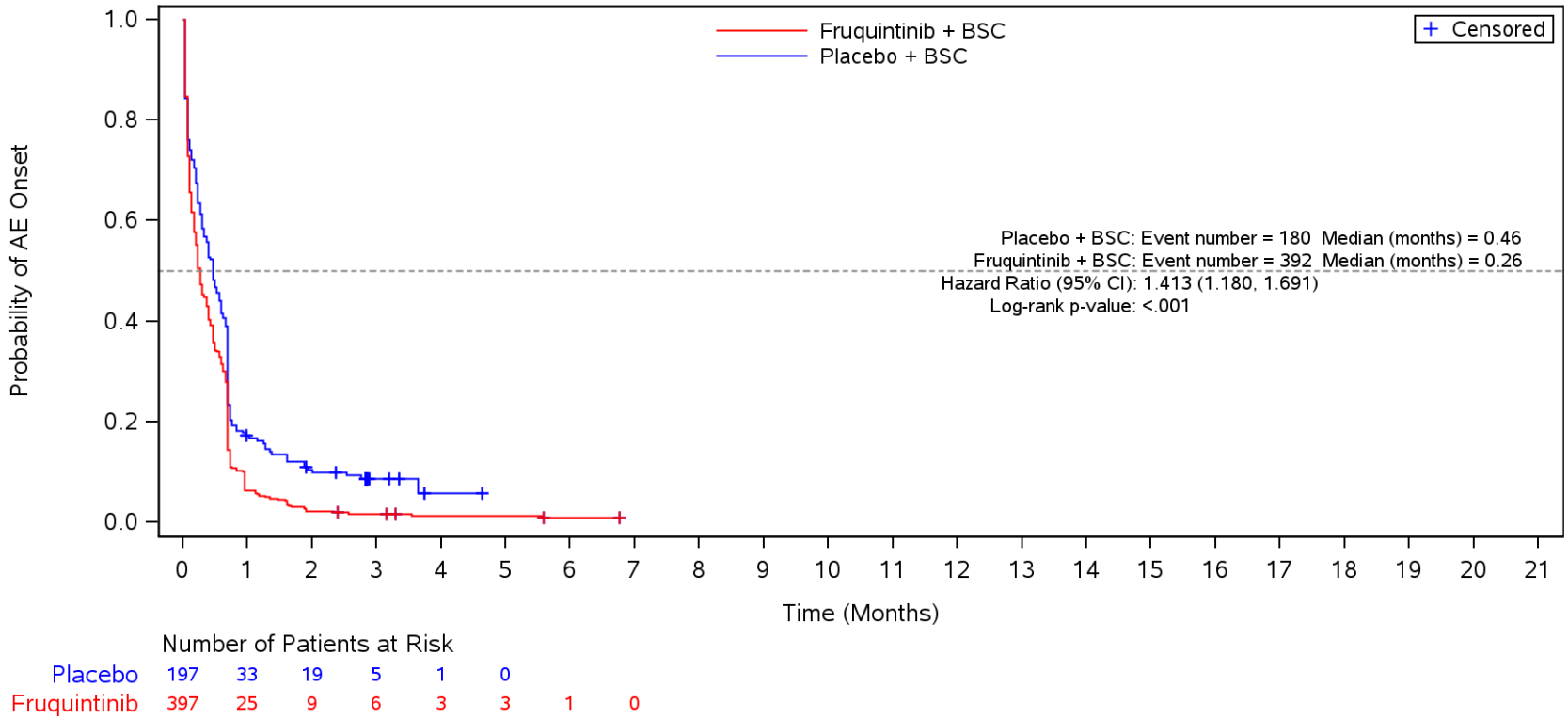
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE
WT (Wild Type)



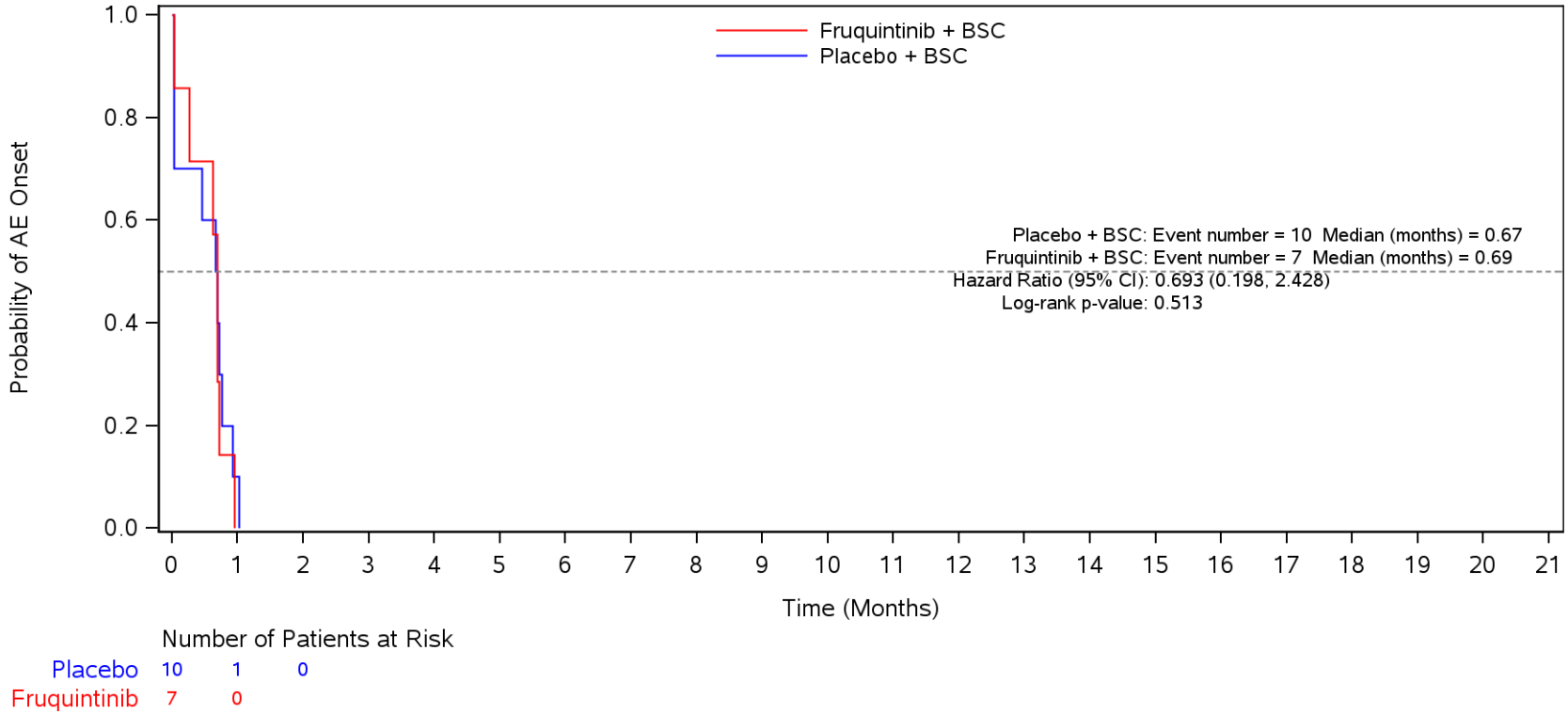
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE
WT (Wild Type)



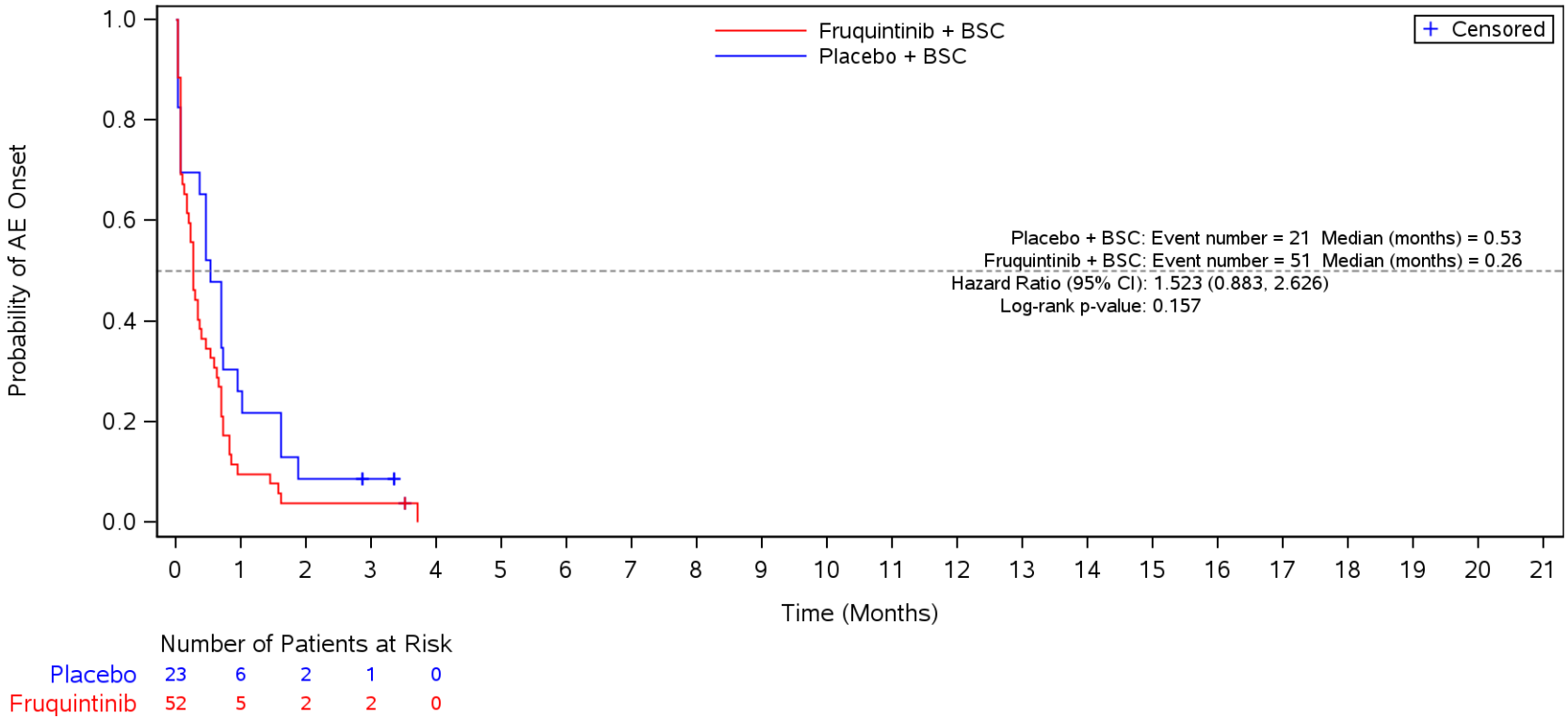
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE
V600 E Mutation



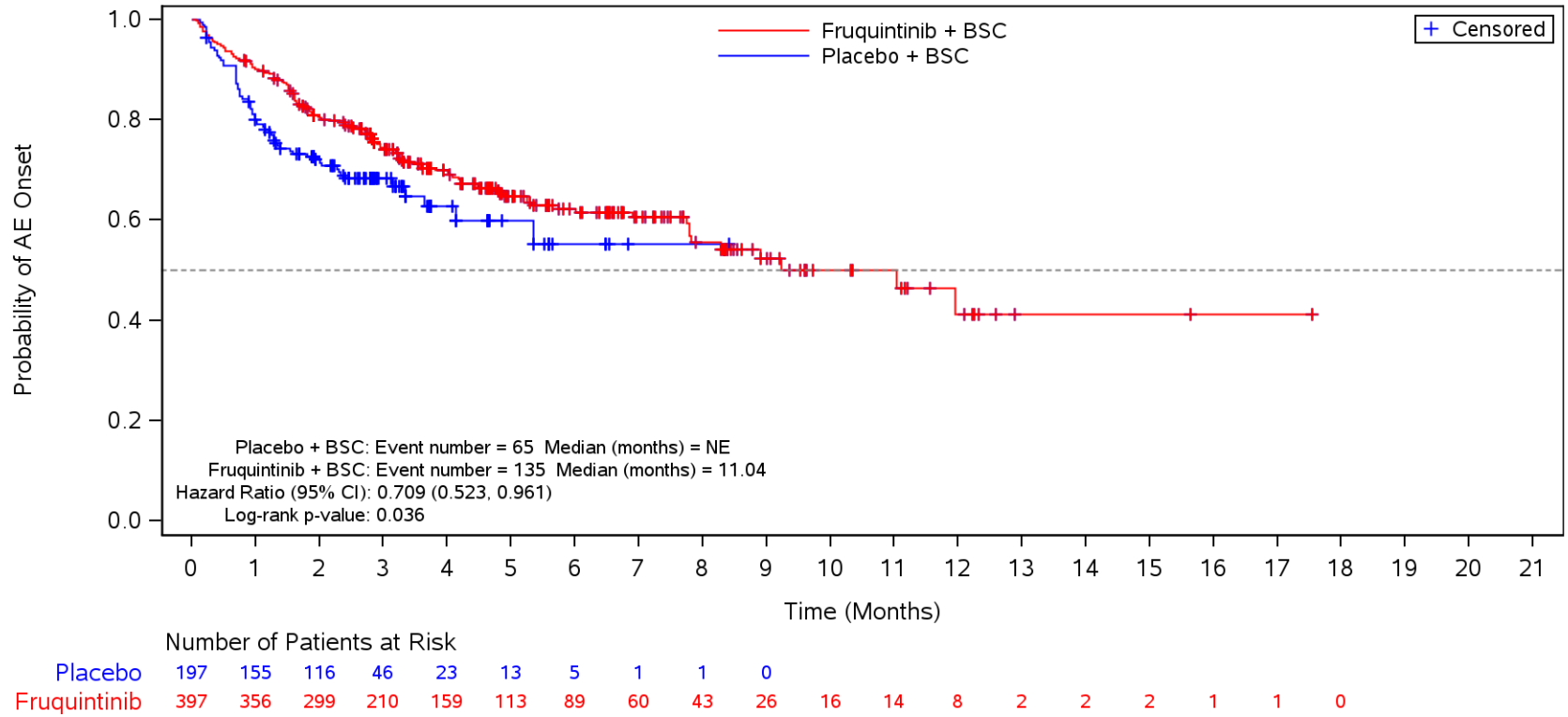
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE
Other



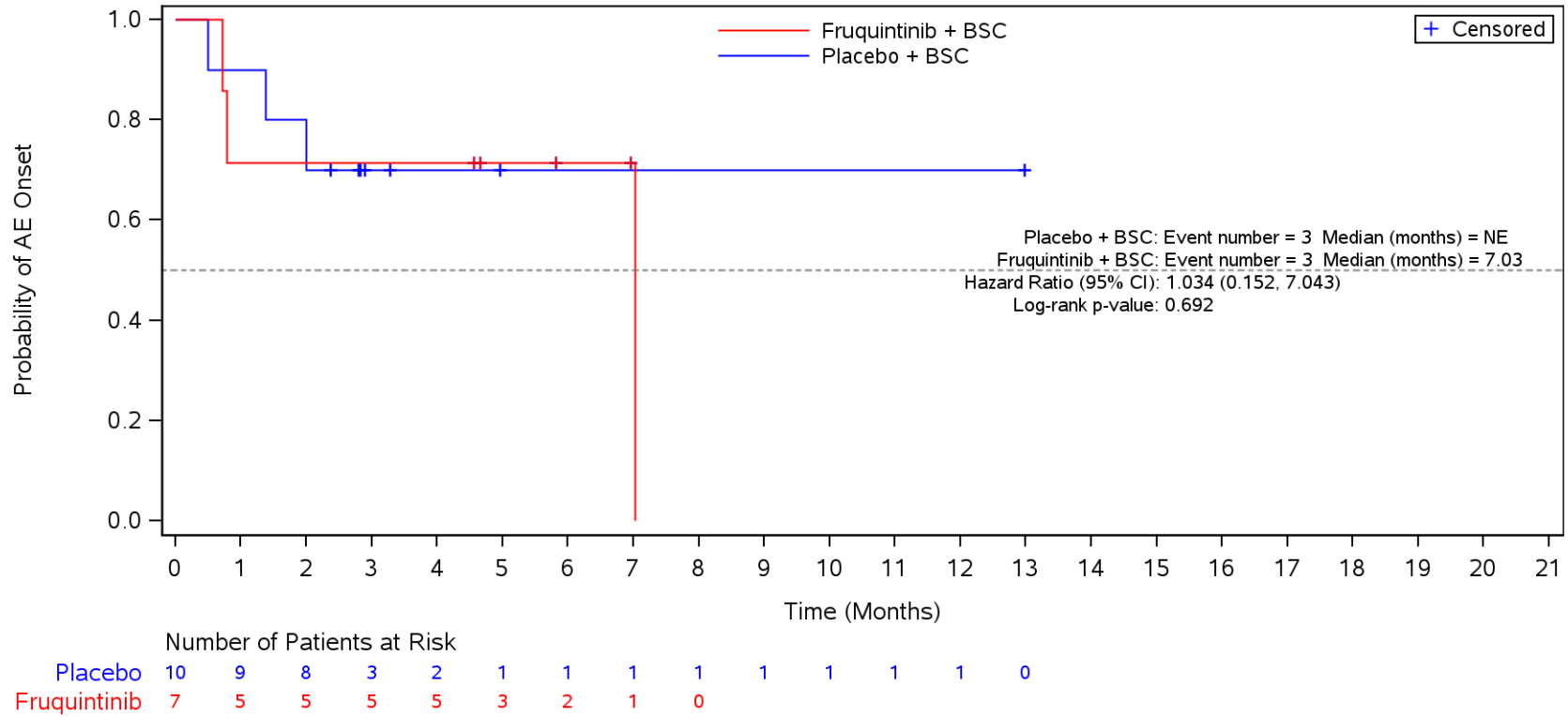
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
Serious TEAE
WT (Wild Type)



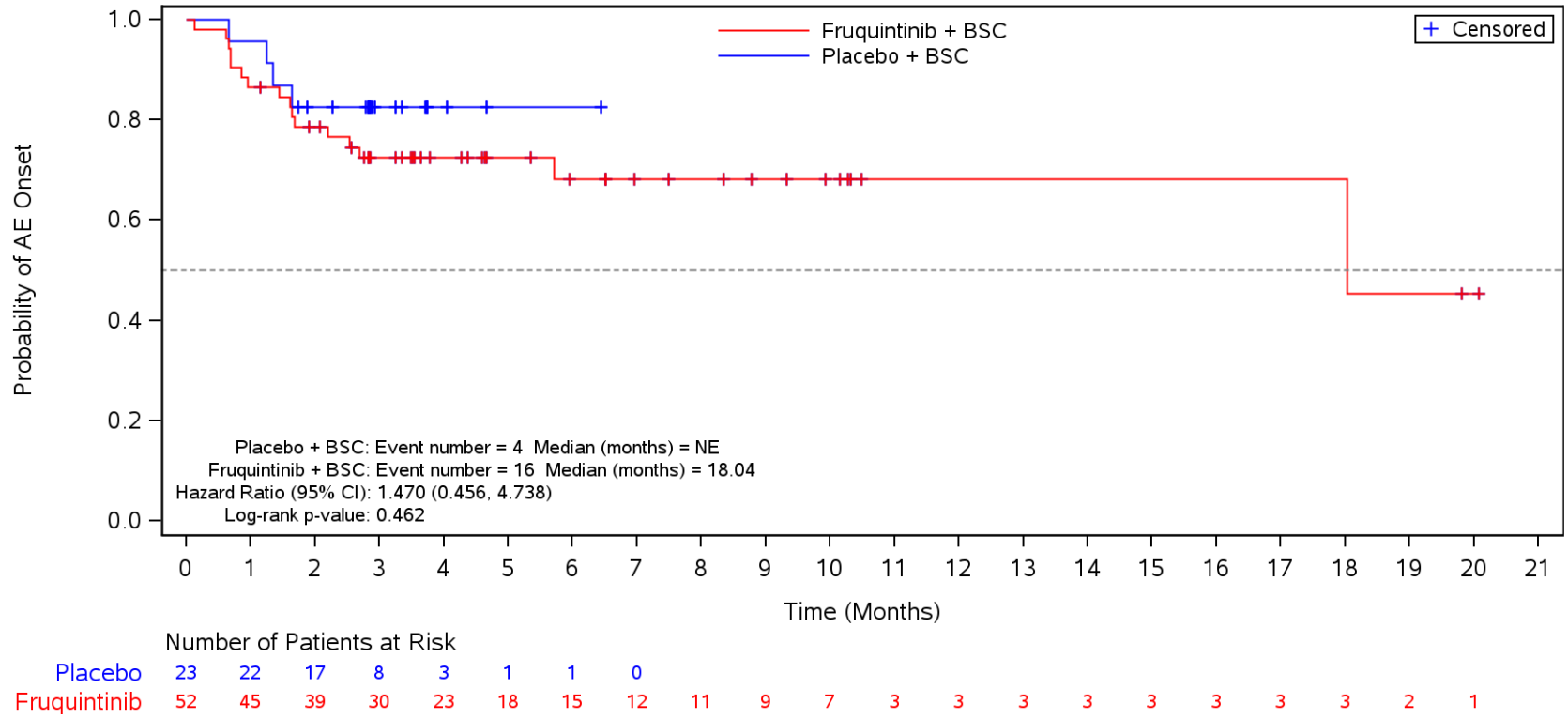
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
Serious TEAE
V600 E Mutation



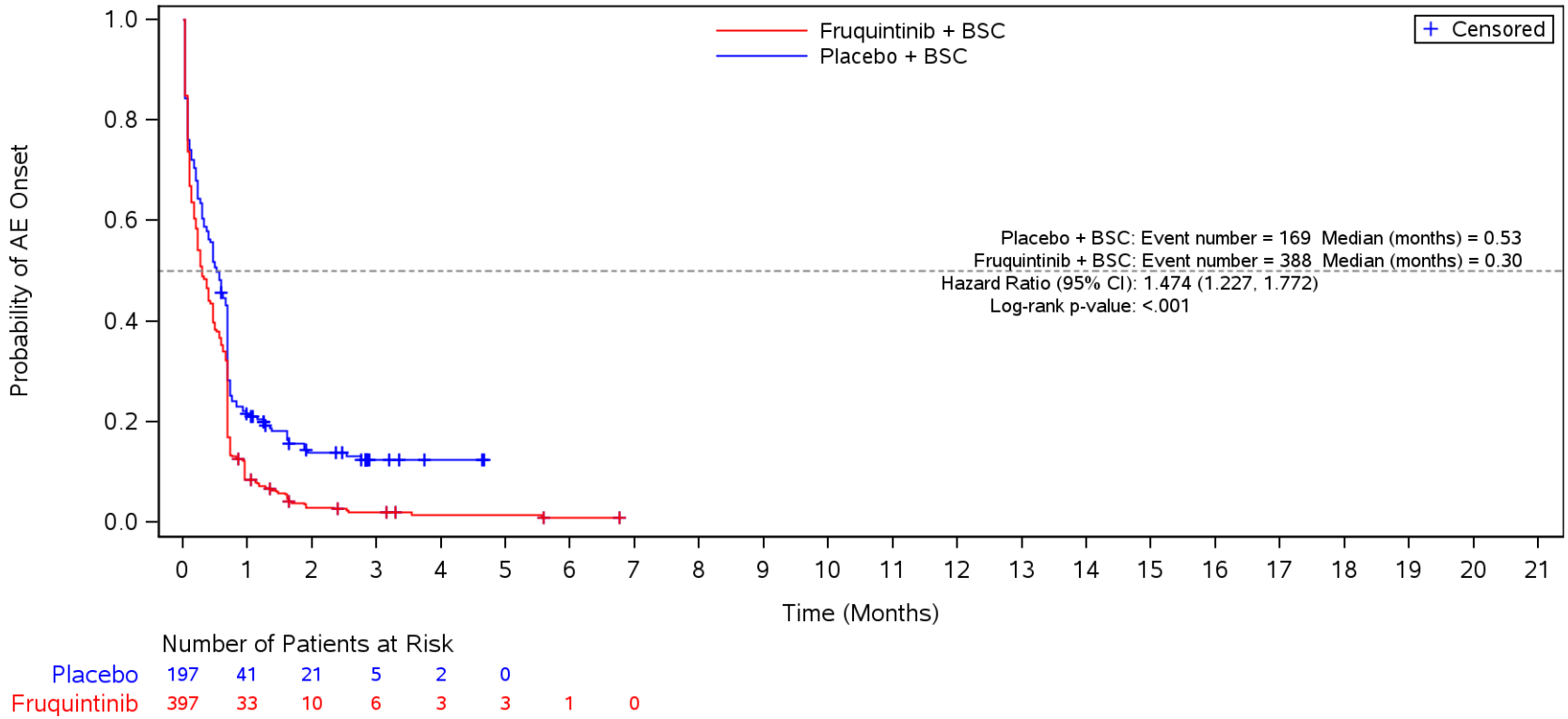
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
Serious TEAE
Other



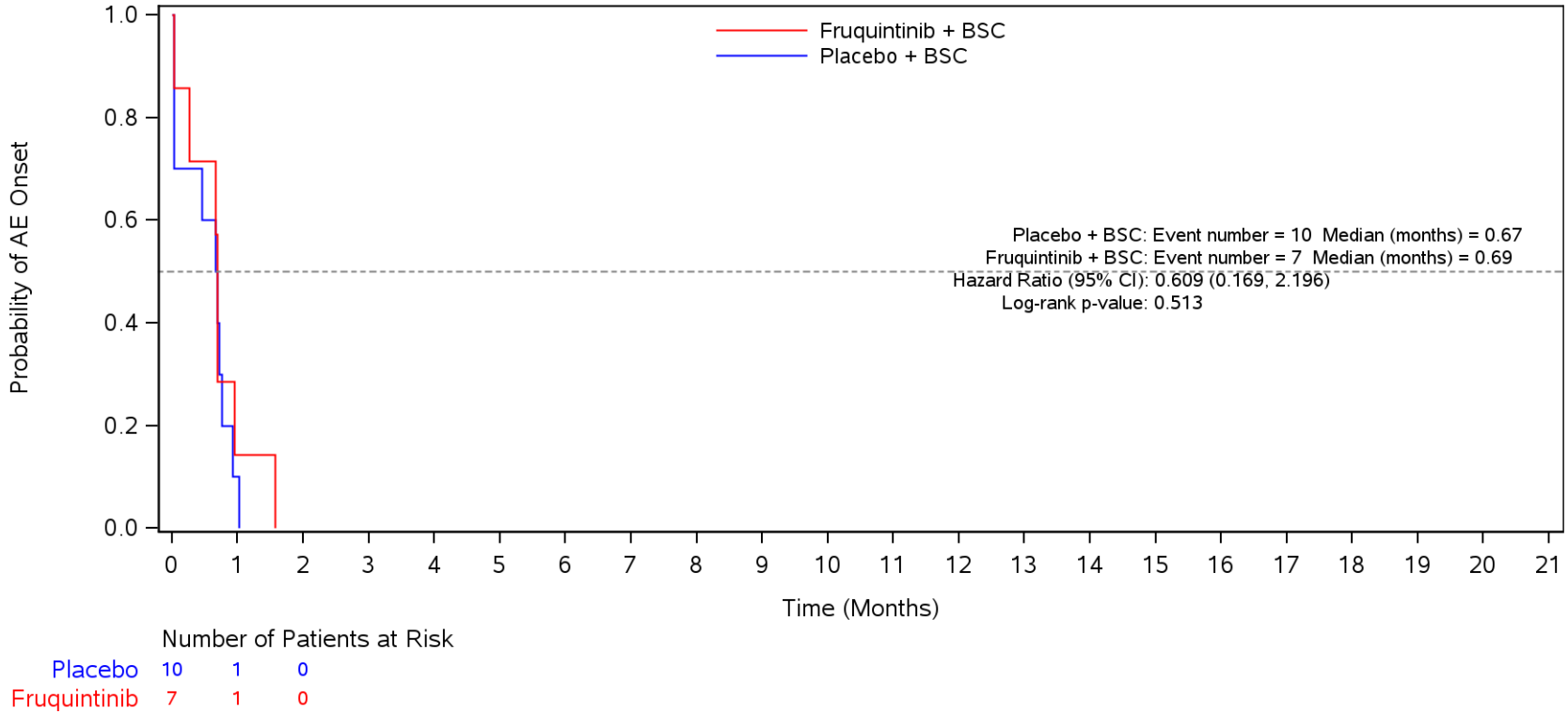
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE ≤ CTCAE Grade 2
WT (Wild Type)



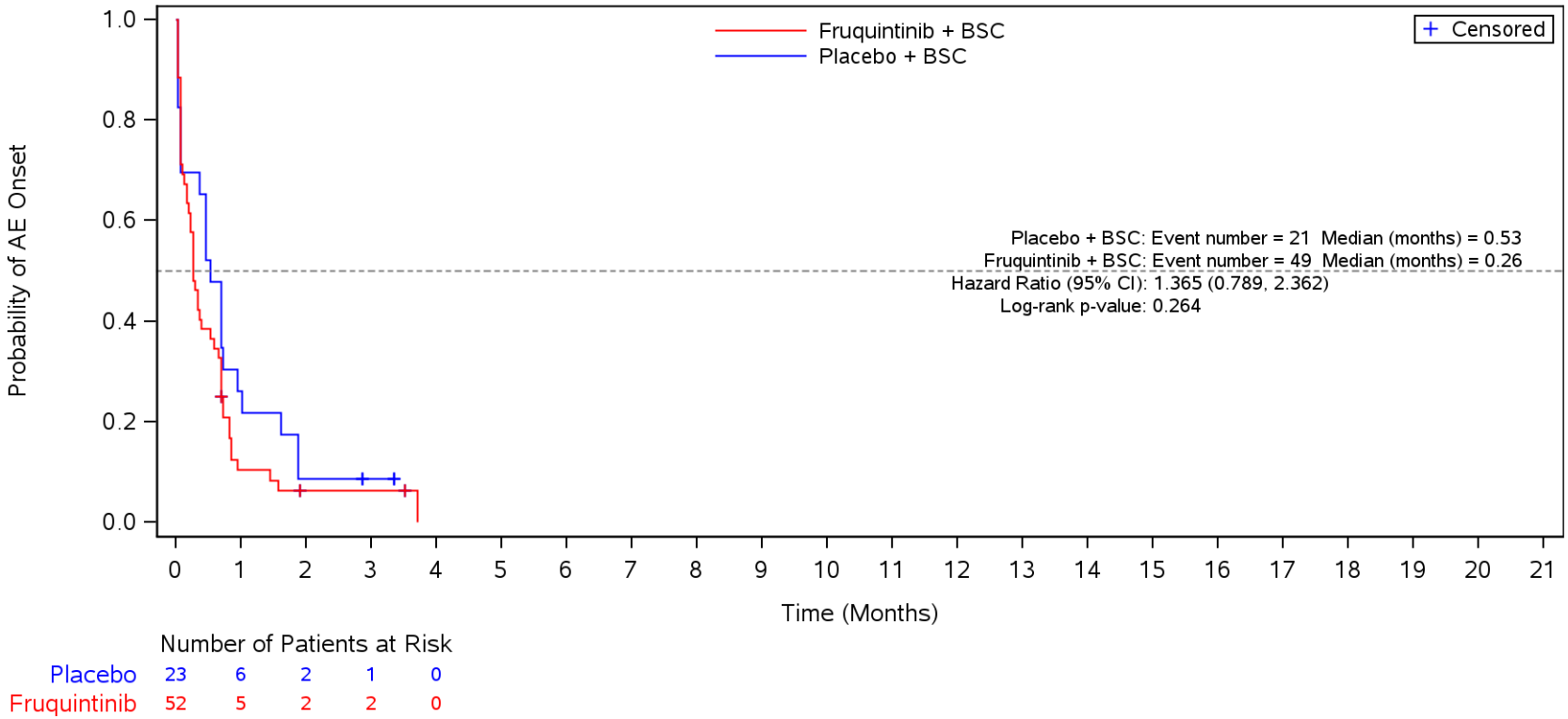
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE ≤ CTCAE Grade 2
V600 E Mutation



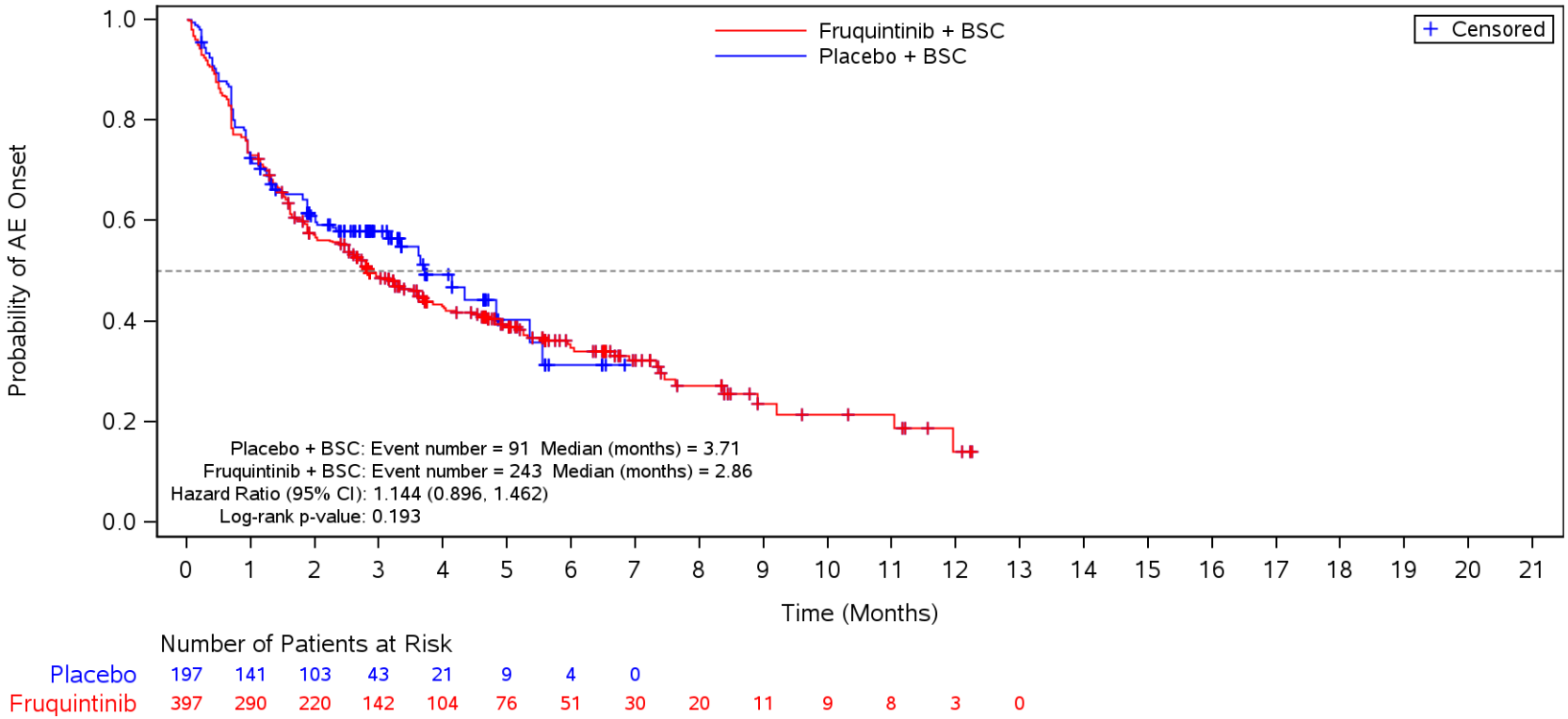
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE ≤ CTCAE Grade 2
Other



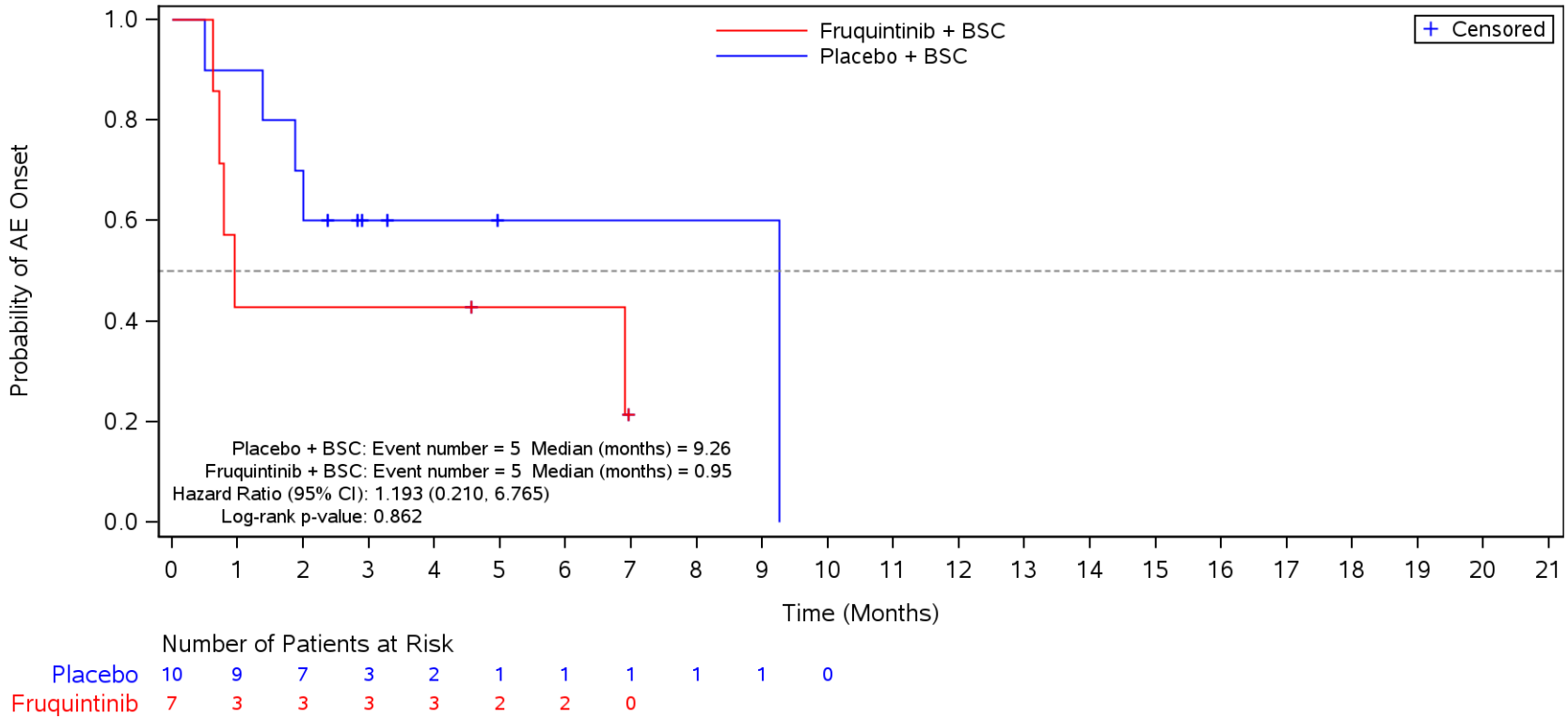
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3
WT (Wild Type)



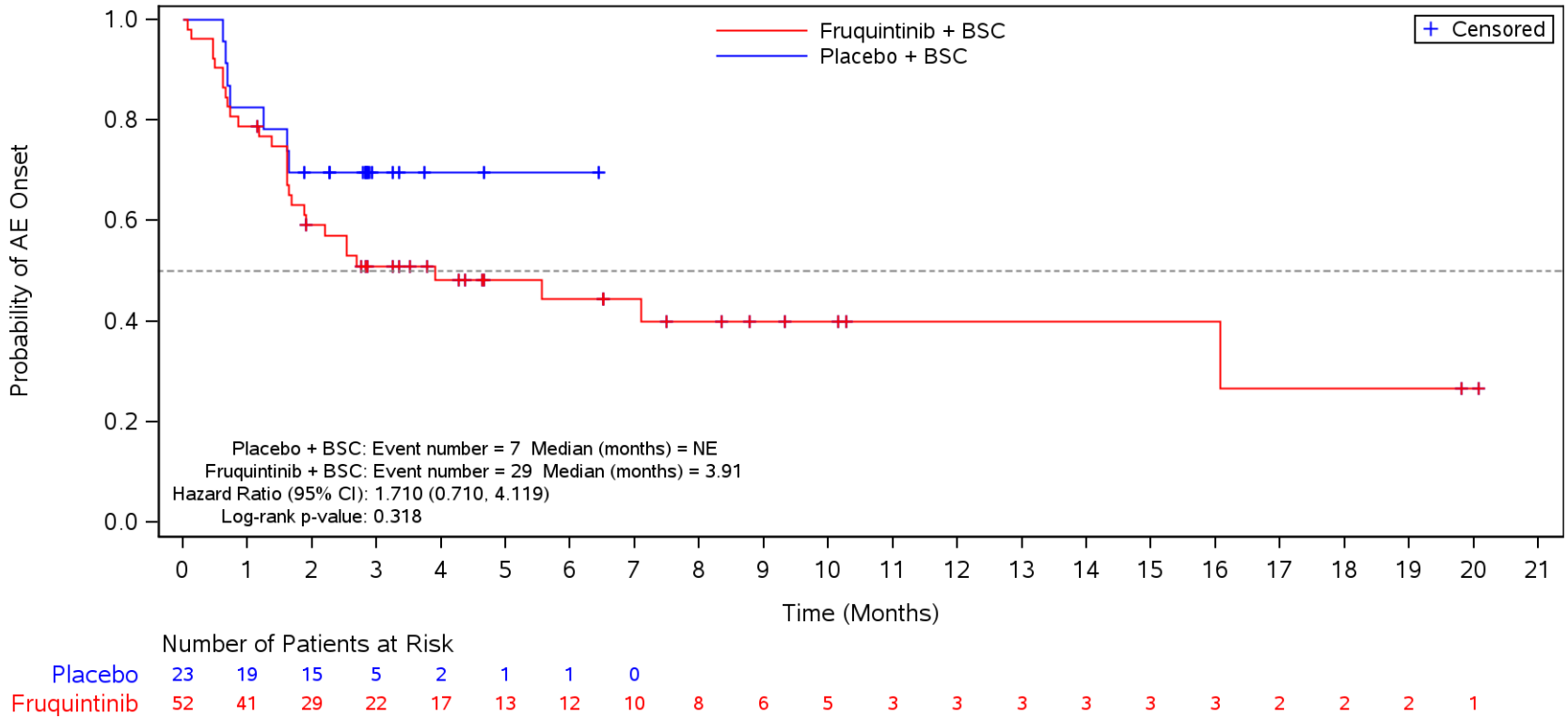
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3
V600 E Mutation



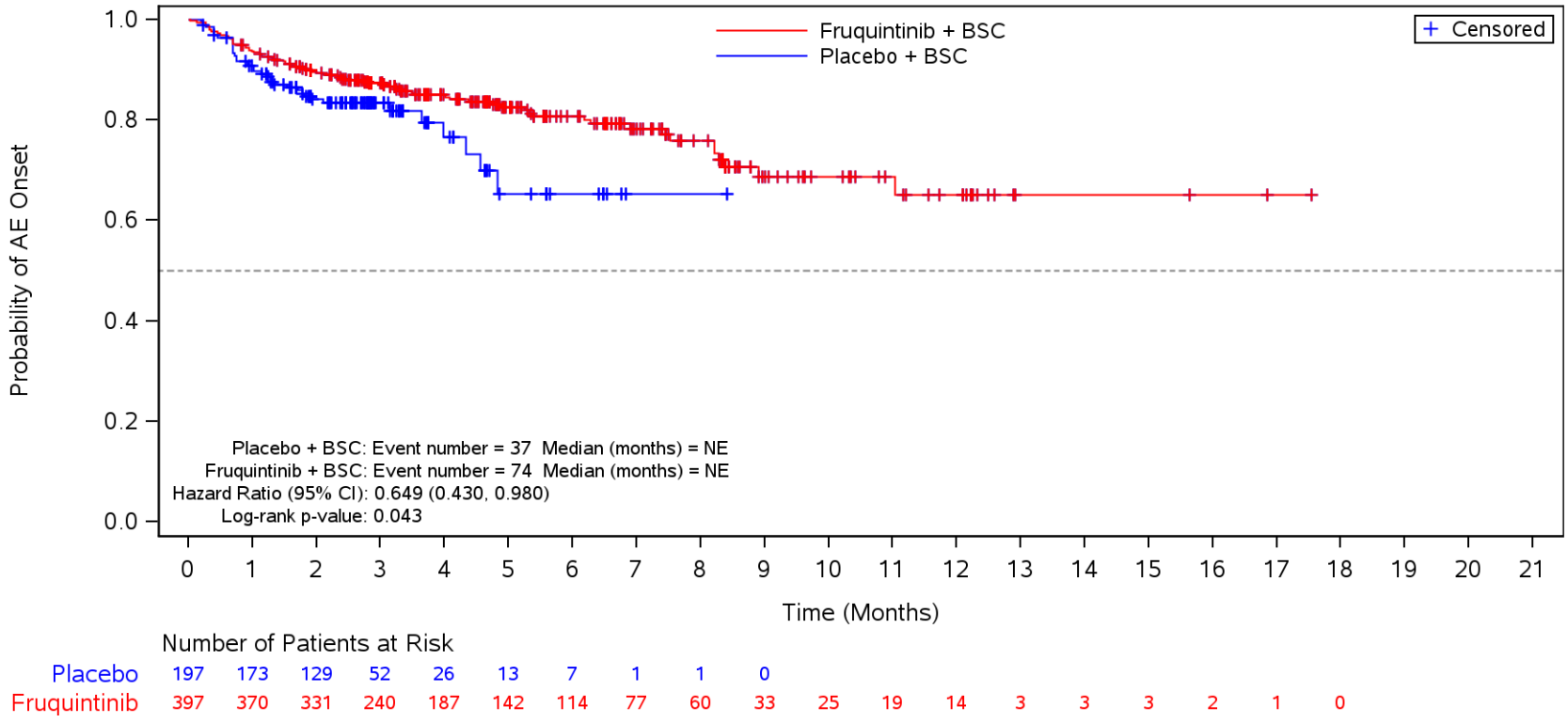
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
TEAE ≥ CTCAE Grade 3
Other



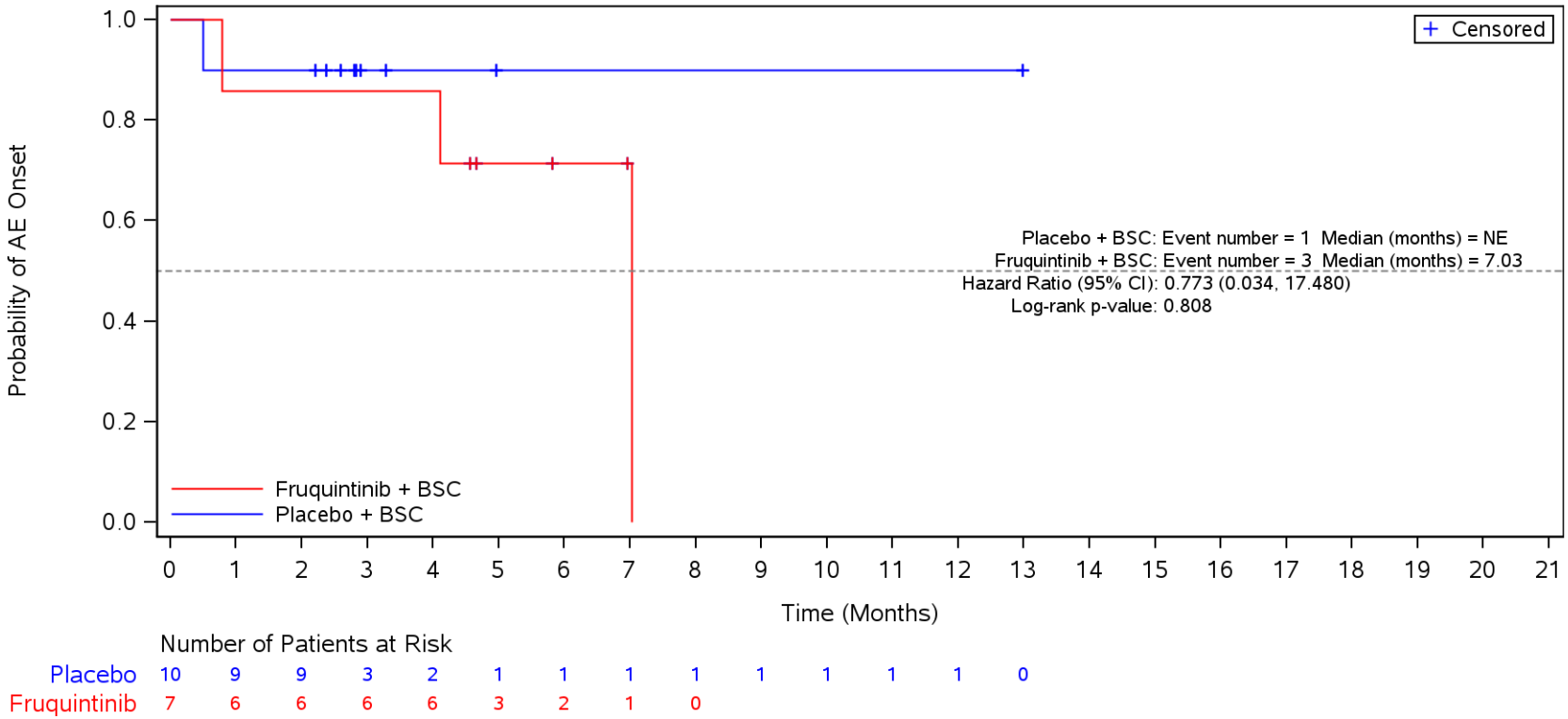
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
Discontinuation due to TEAE
WT (Wild Type)



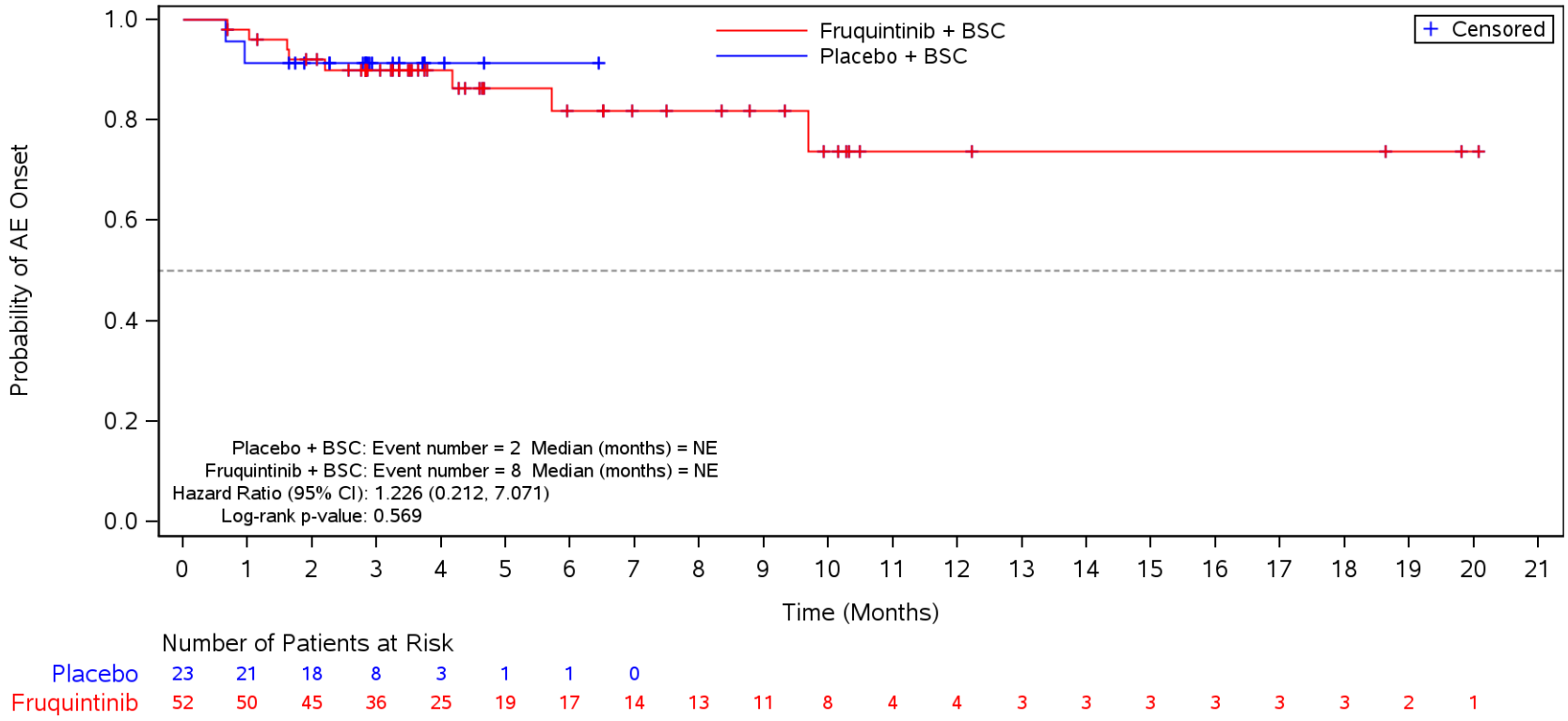
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
Discontinuation due to TEAE
V600 E Mutation



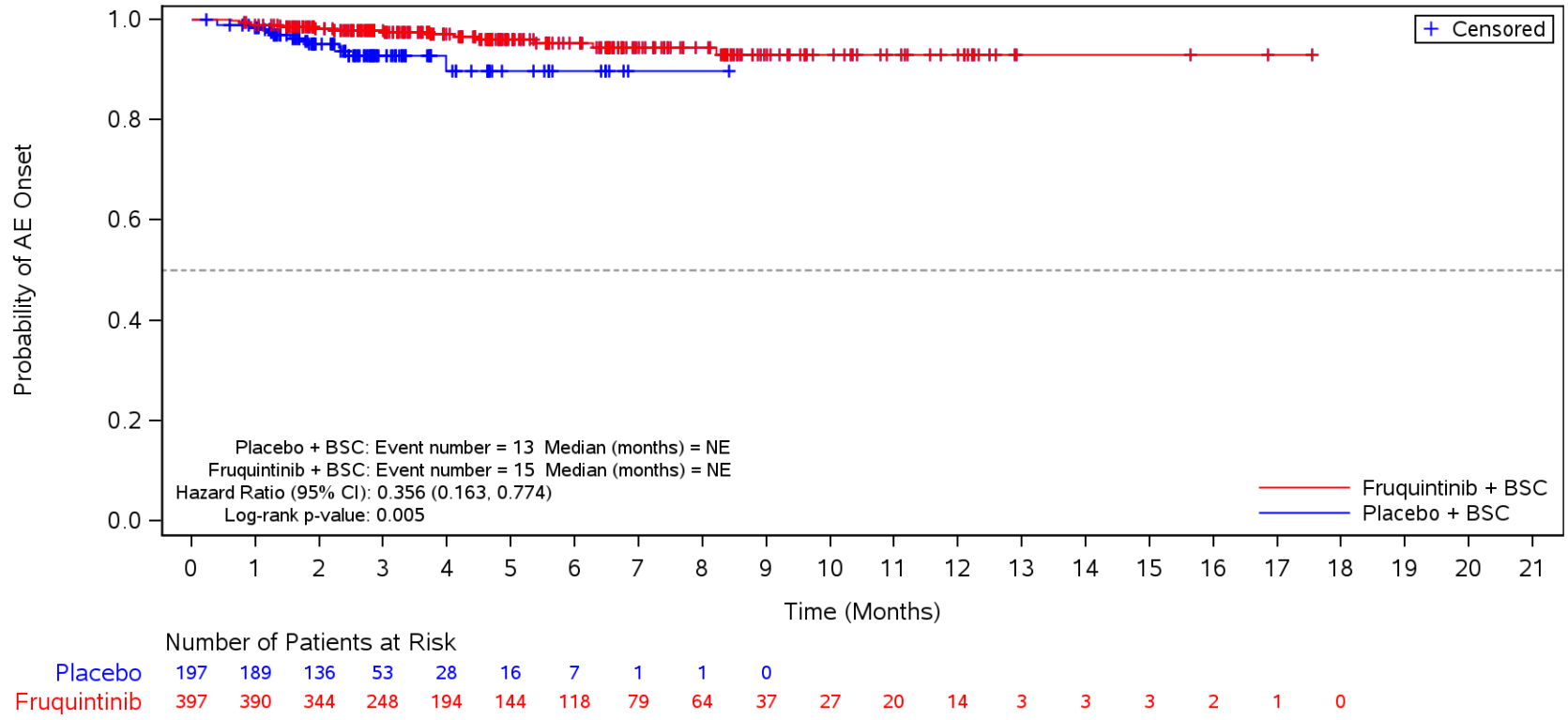
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
Discontinuation due to TEAE
Other



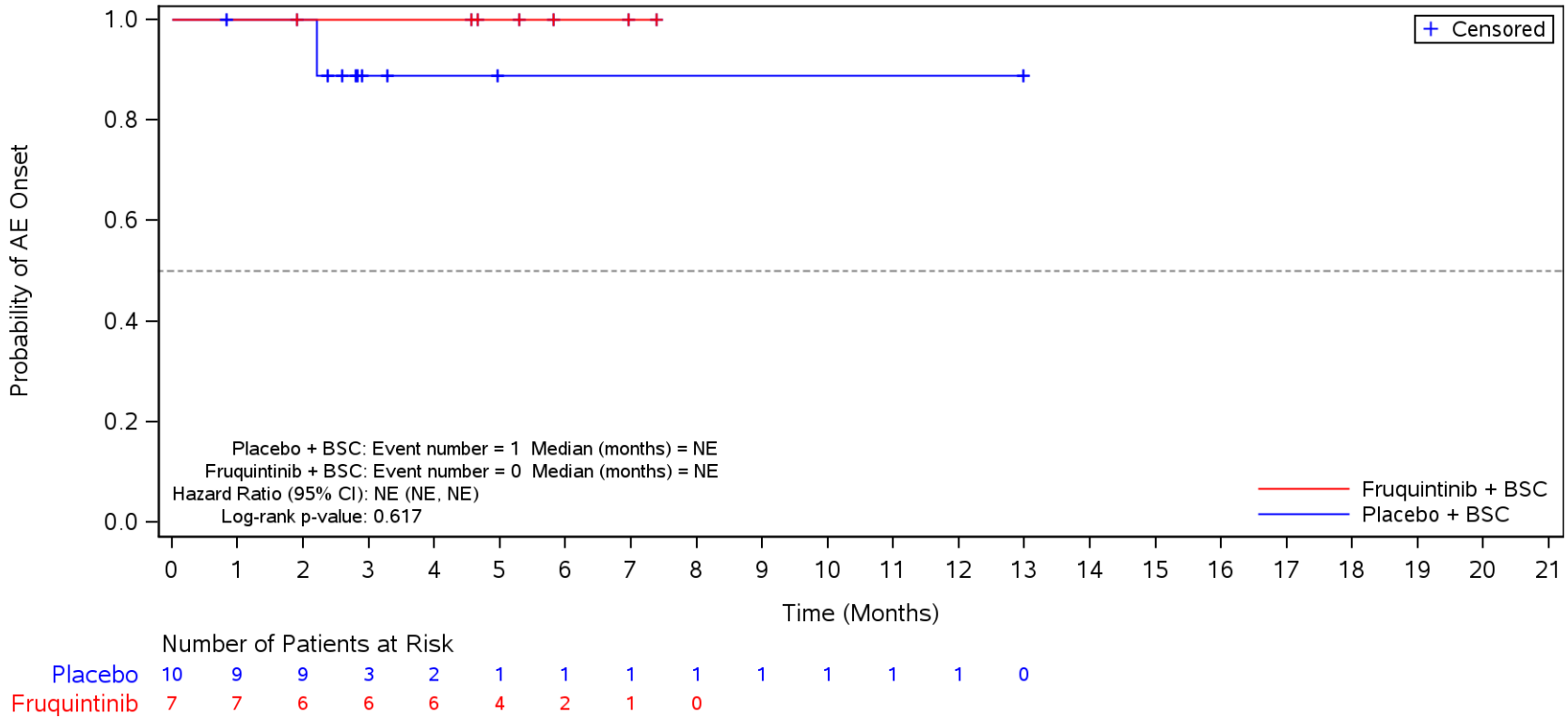
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
Deaths (Grade 5 TEAEs)
WT (Wild Type)



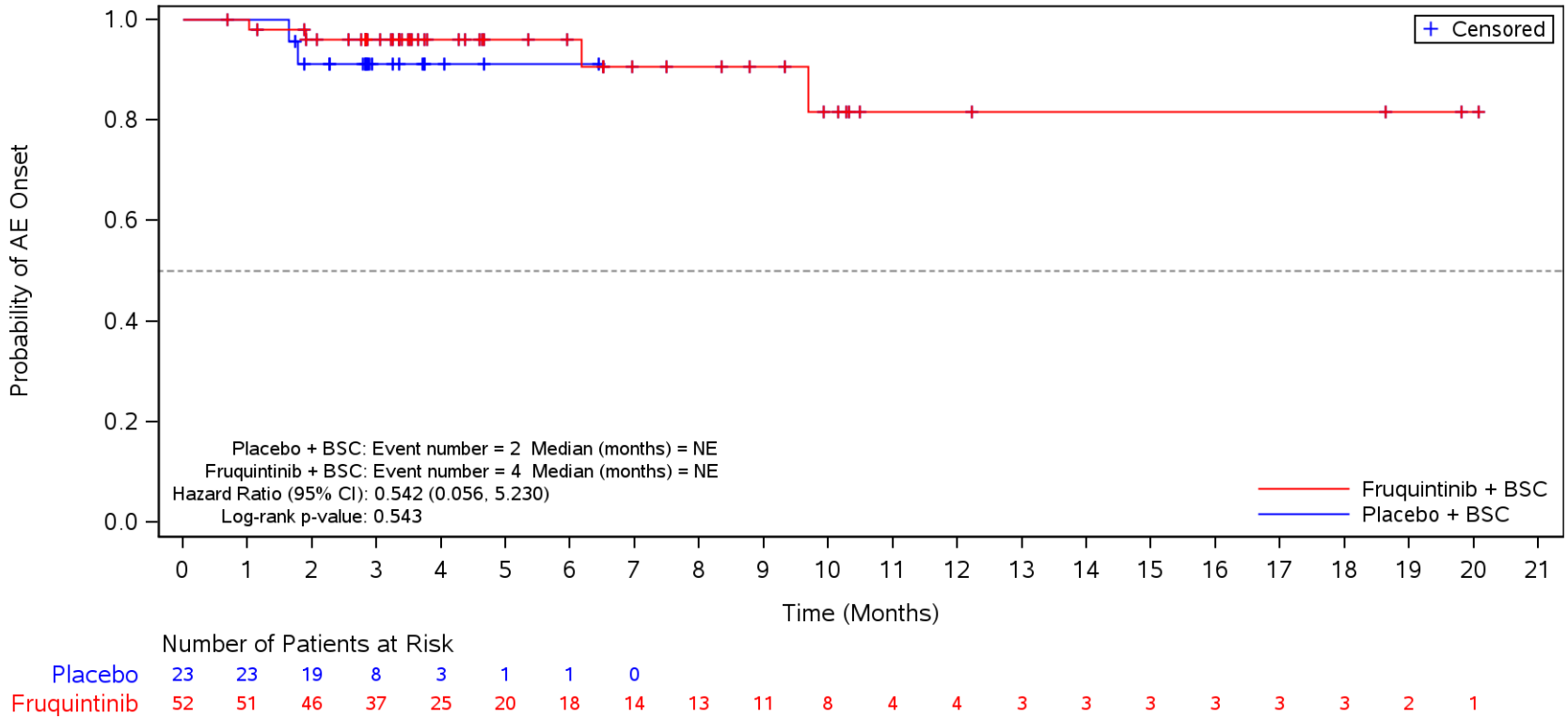
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3I
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by BRAF Status
Safety Population
Deaths (Grade 5 TEAEs)
V600 E Mutation



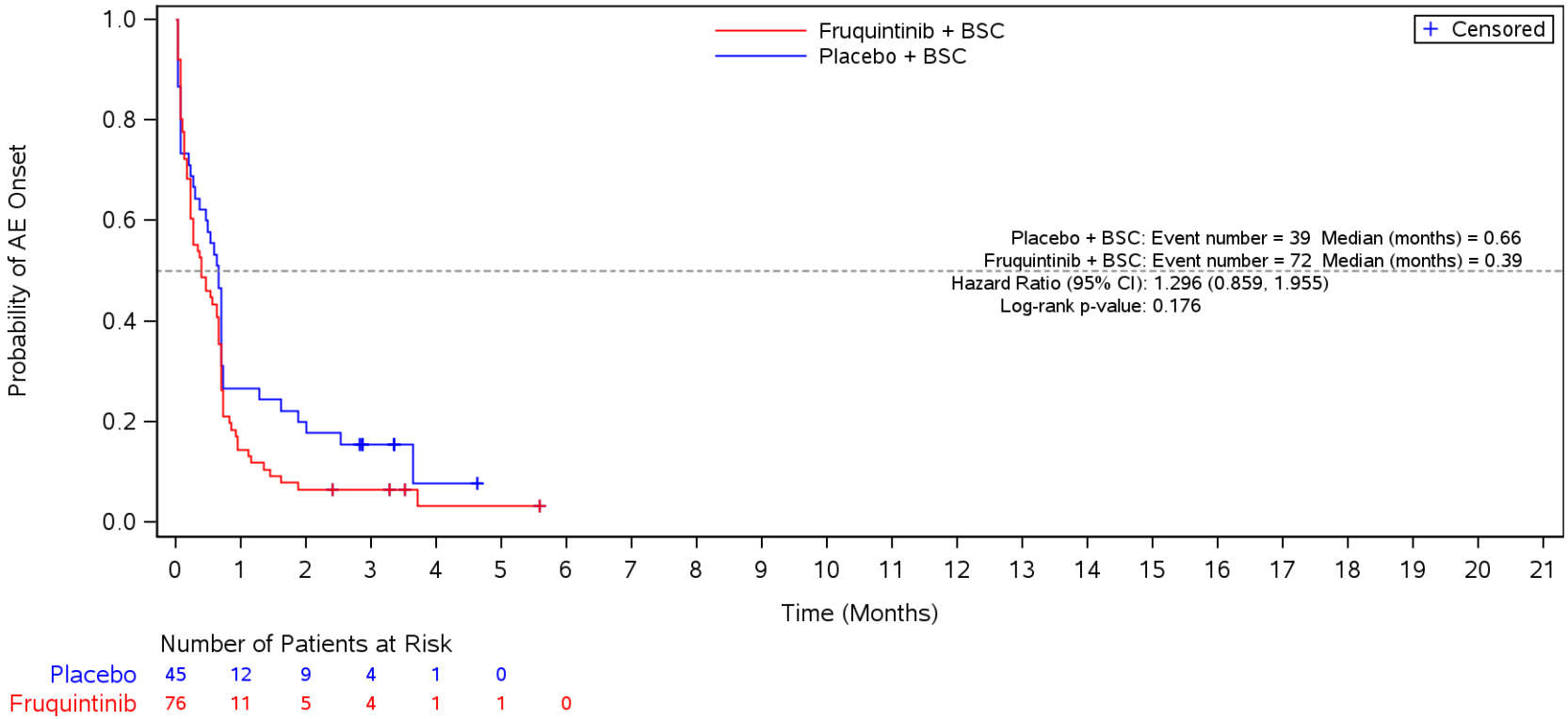
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE
<=3



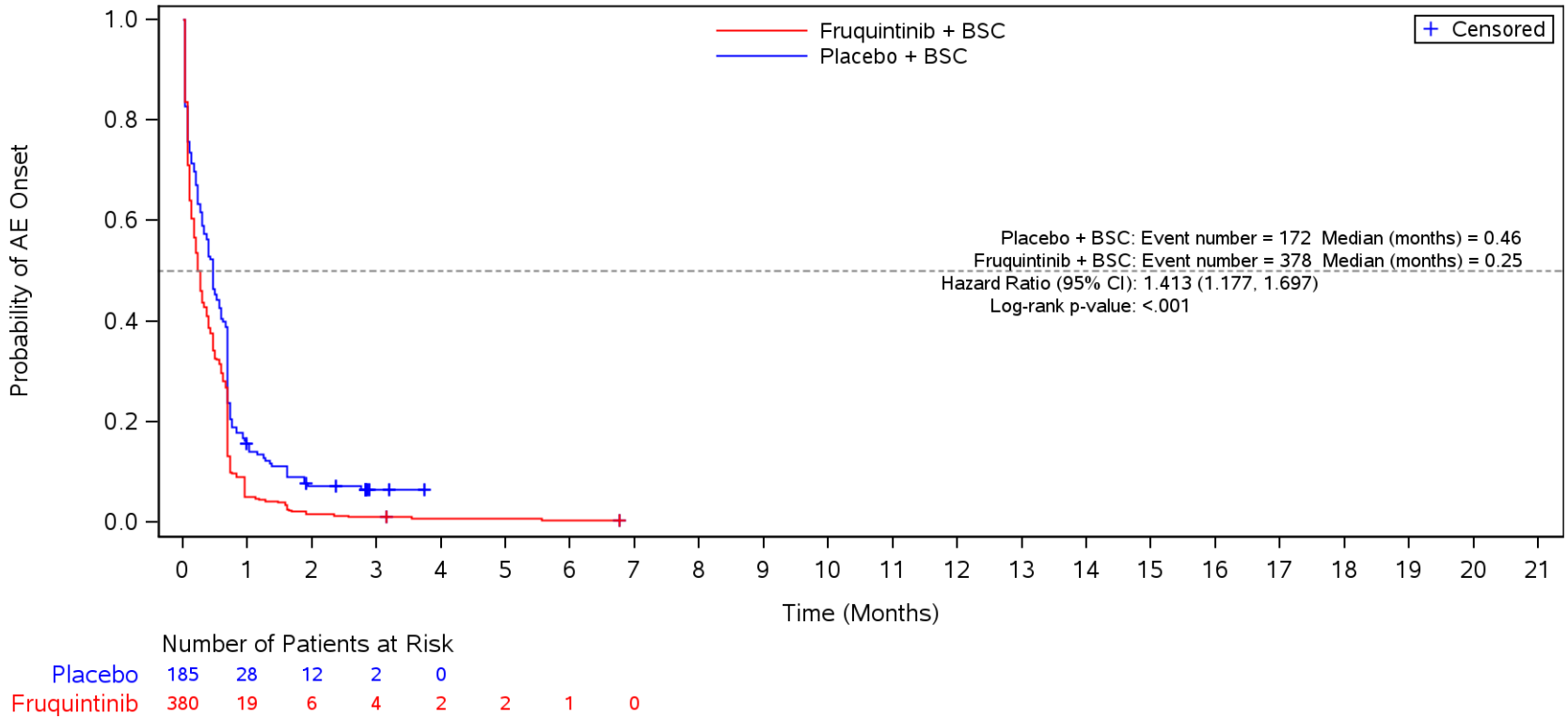
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE
<=3



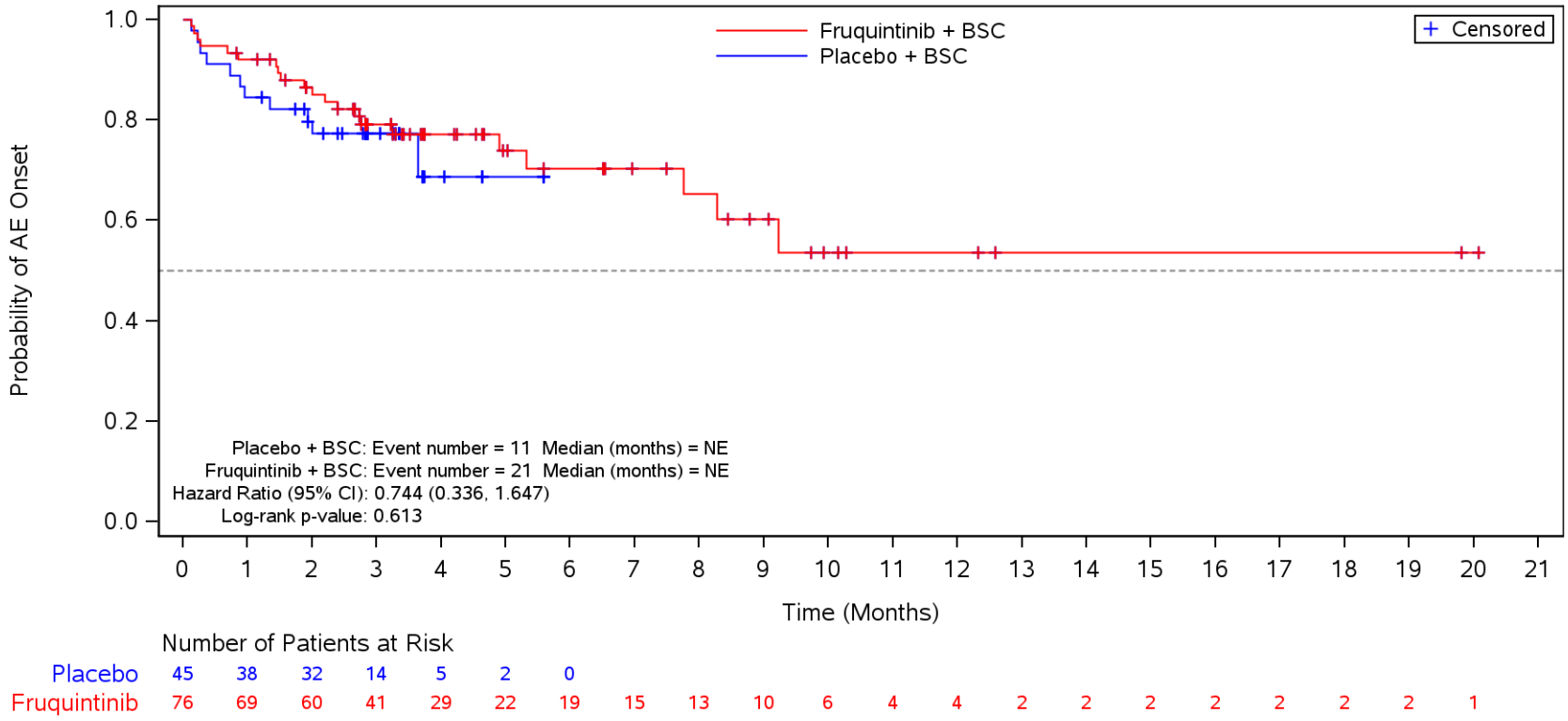
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE
>3



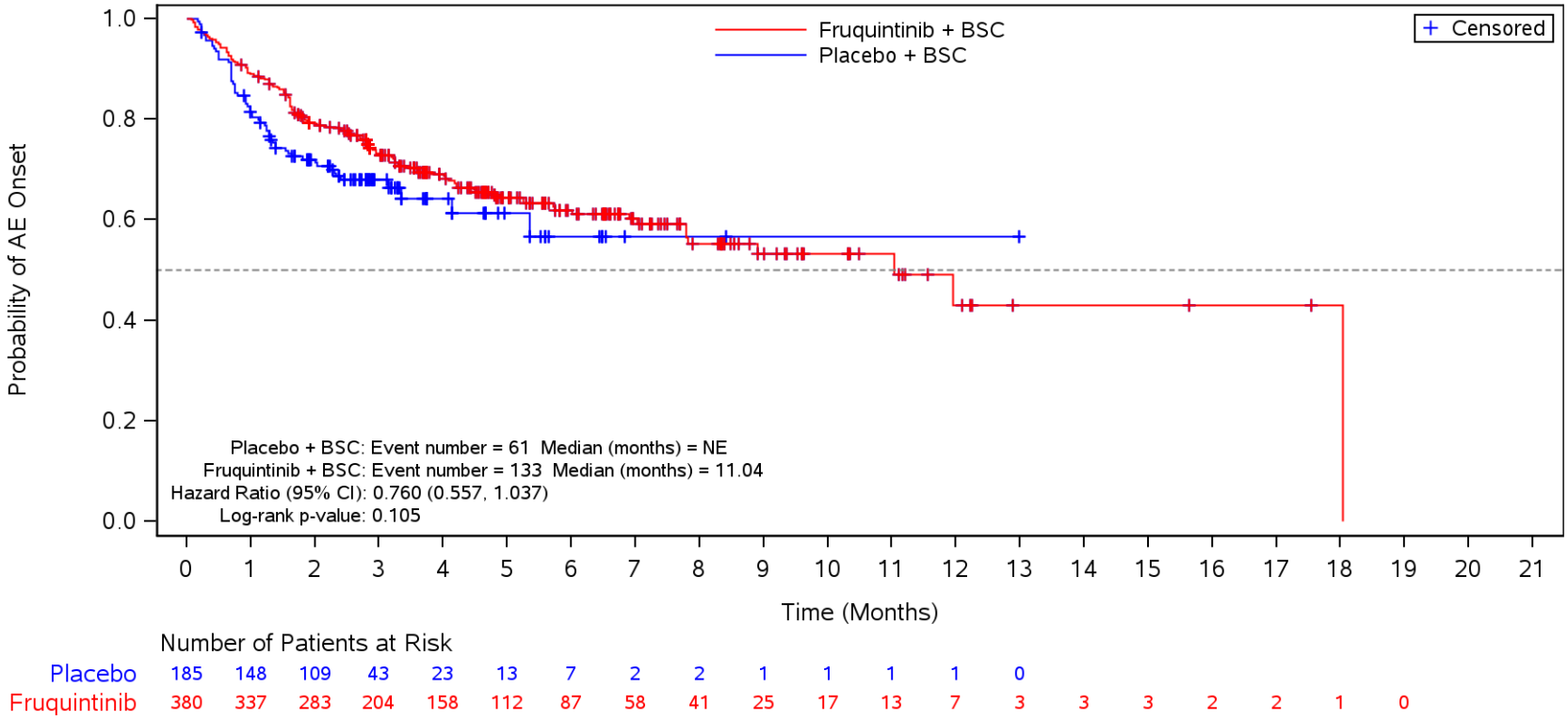
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
Serious TEAE
<=3



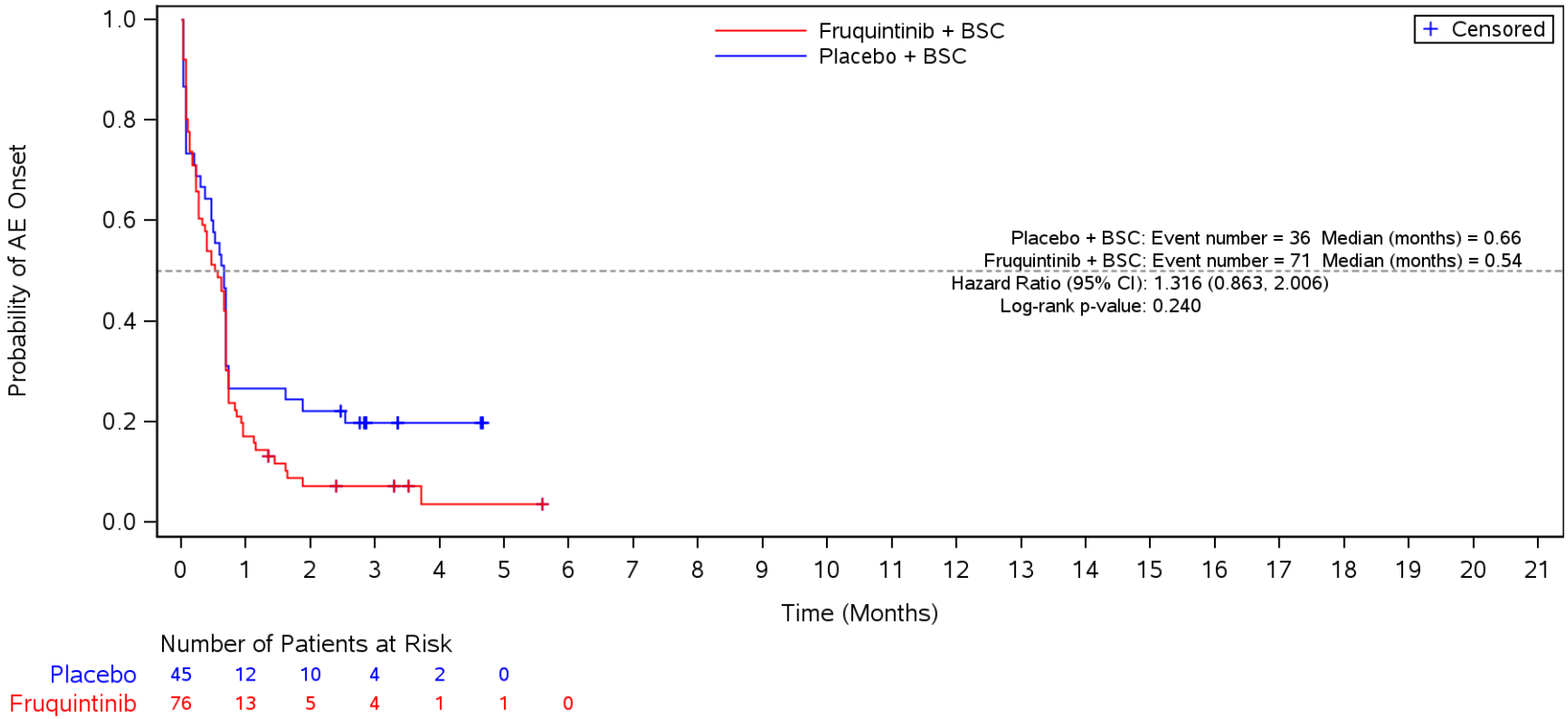
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
Serious TEAE
>3



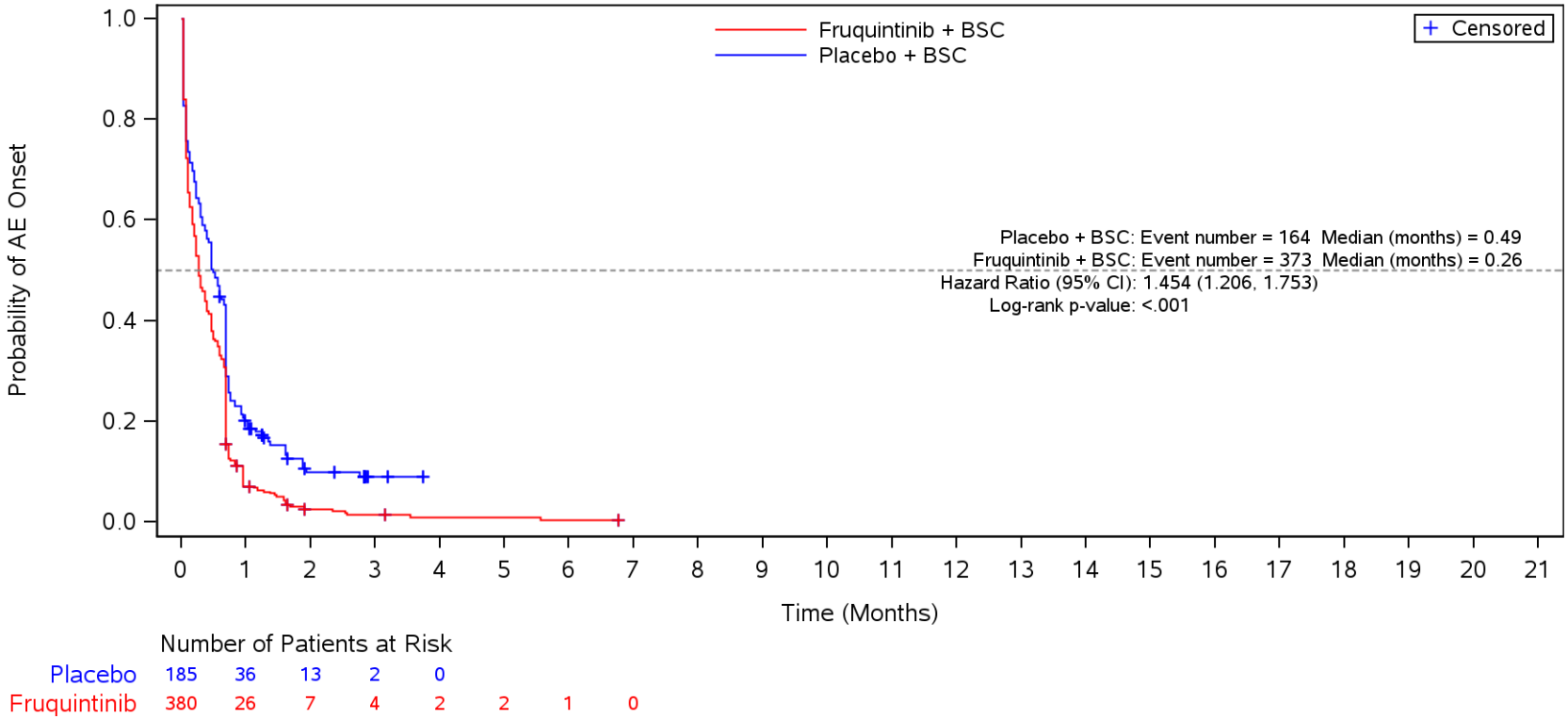
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≤ CTCAE Grade 2
<=3



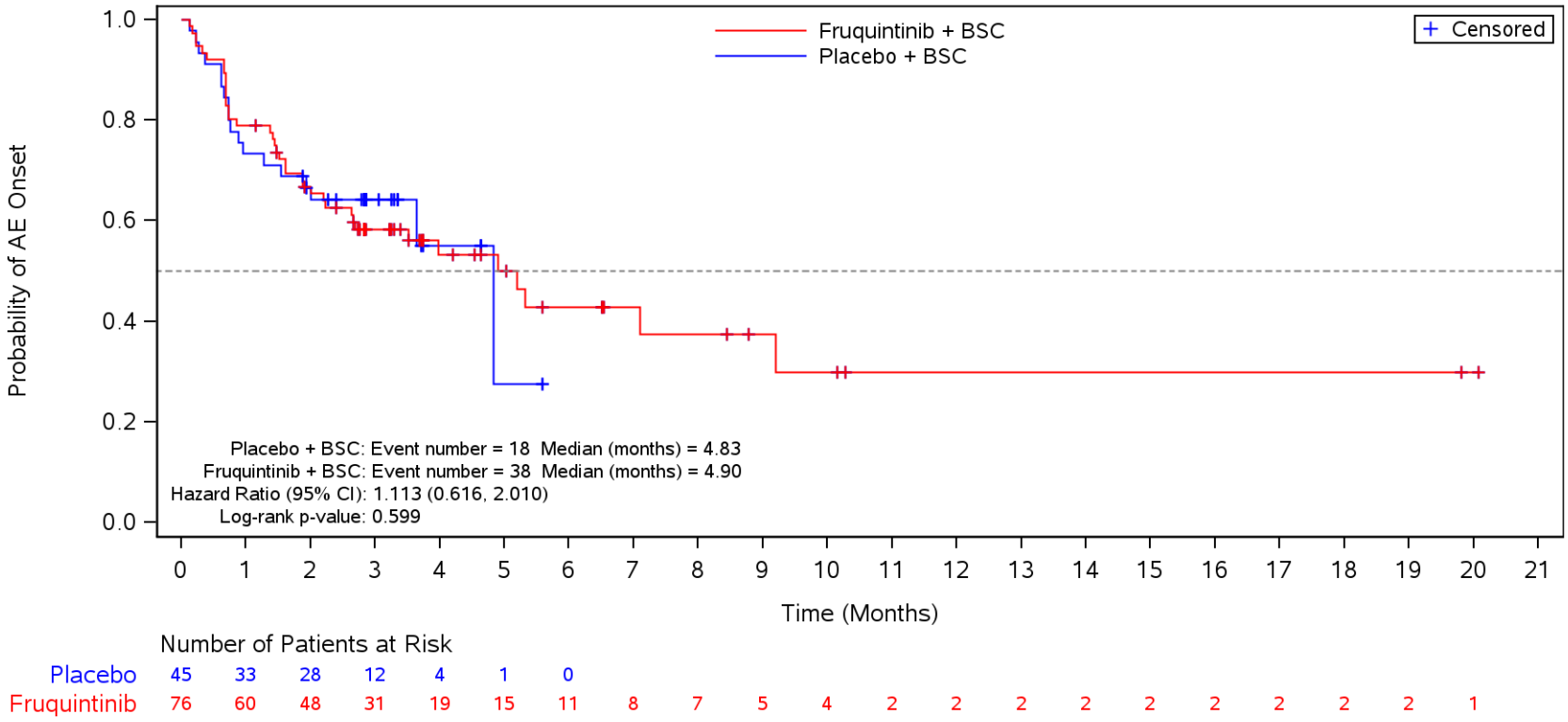
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≤ CTCAE Grade 2
>3



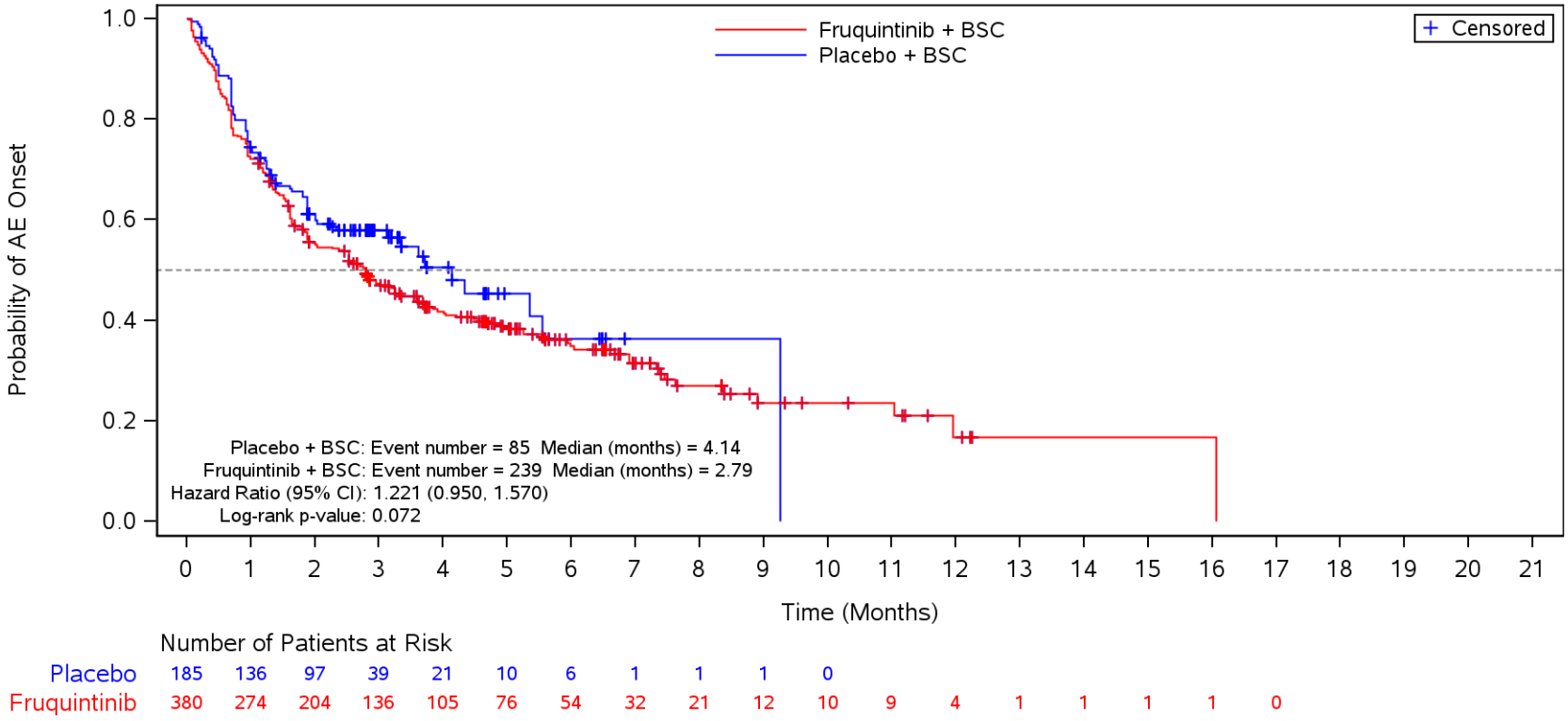
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3
<=3



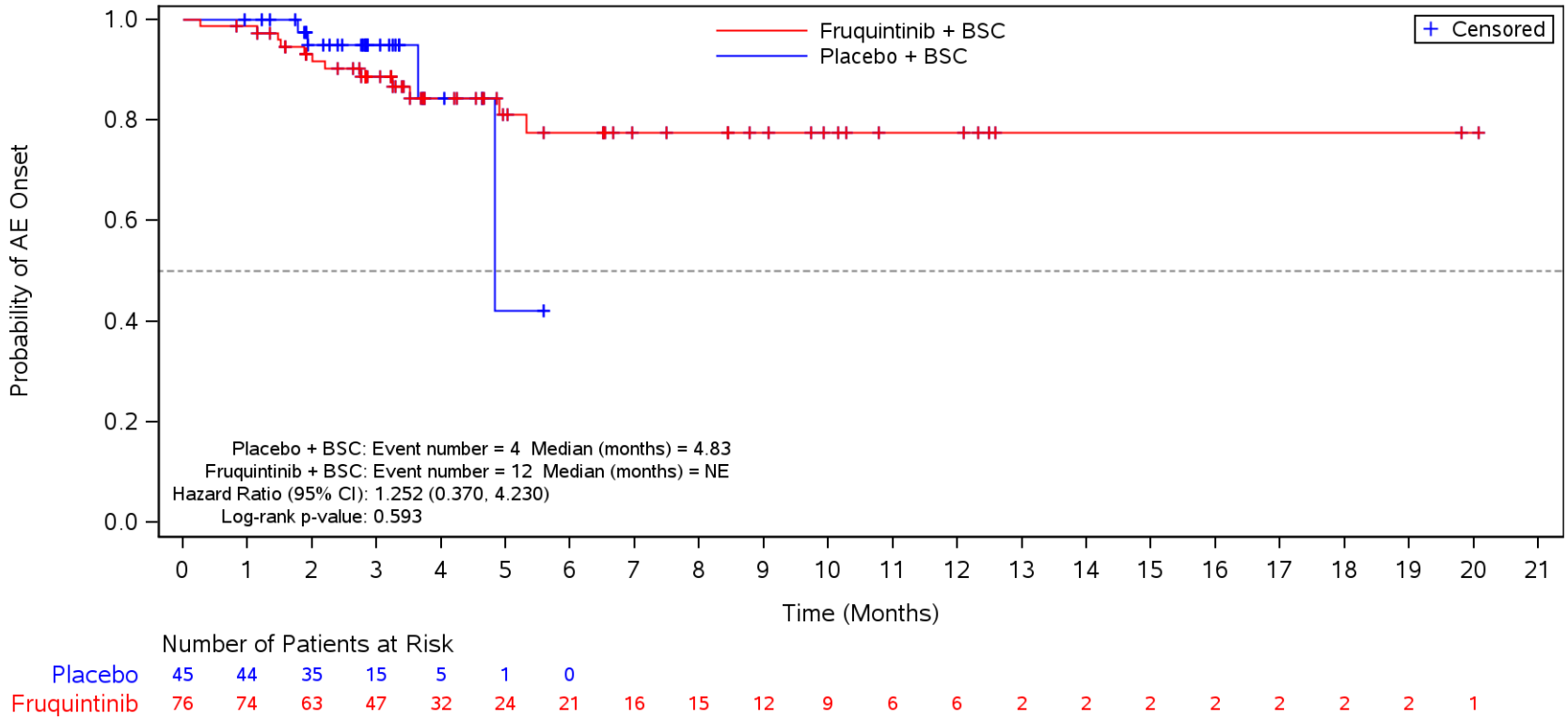
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
TEAE ≥ CTCAE Grade 3
>3



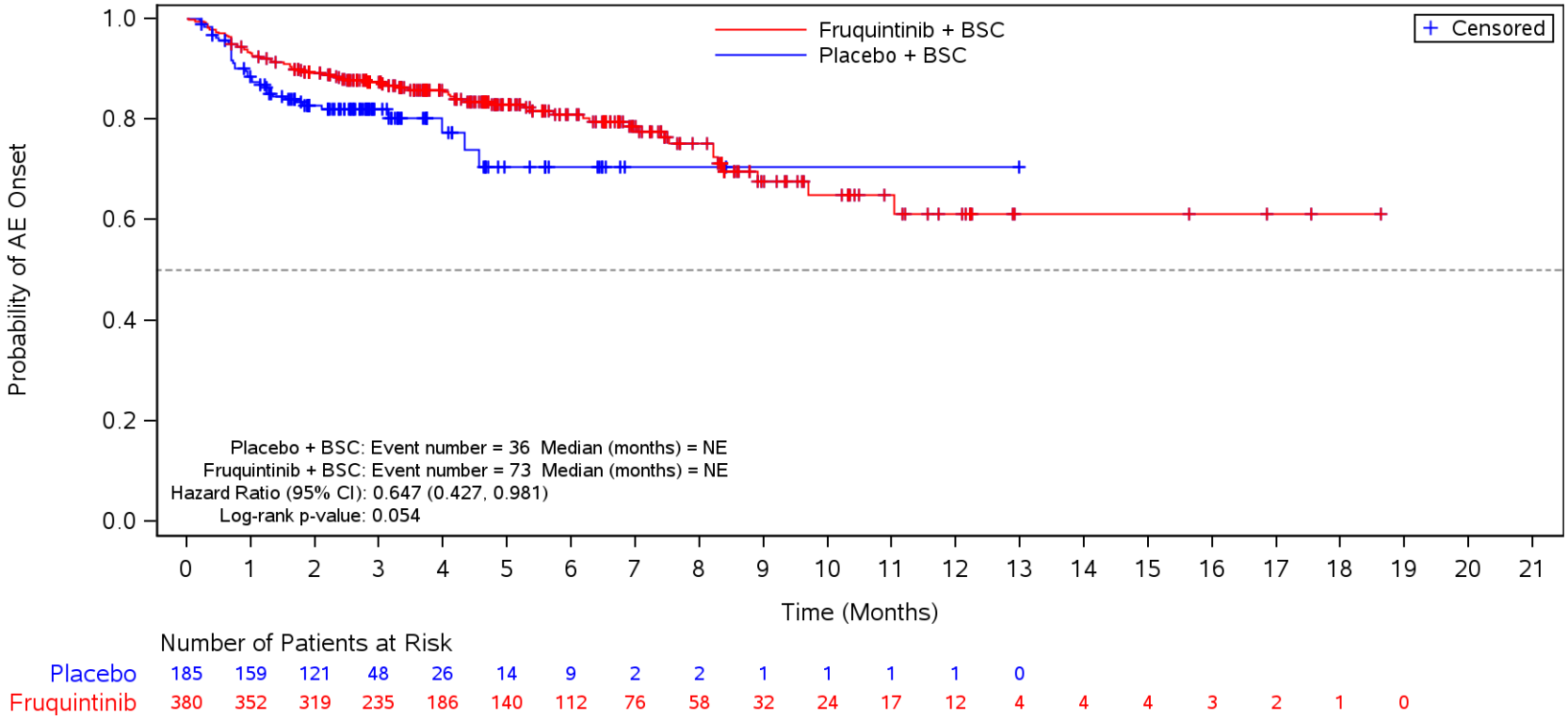
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
Discontinuation due to TEAE
<=3



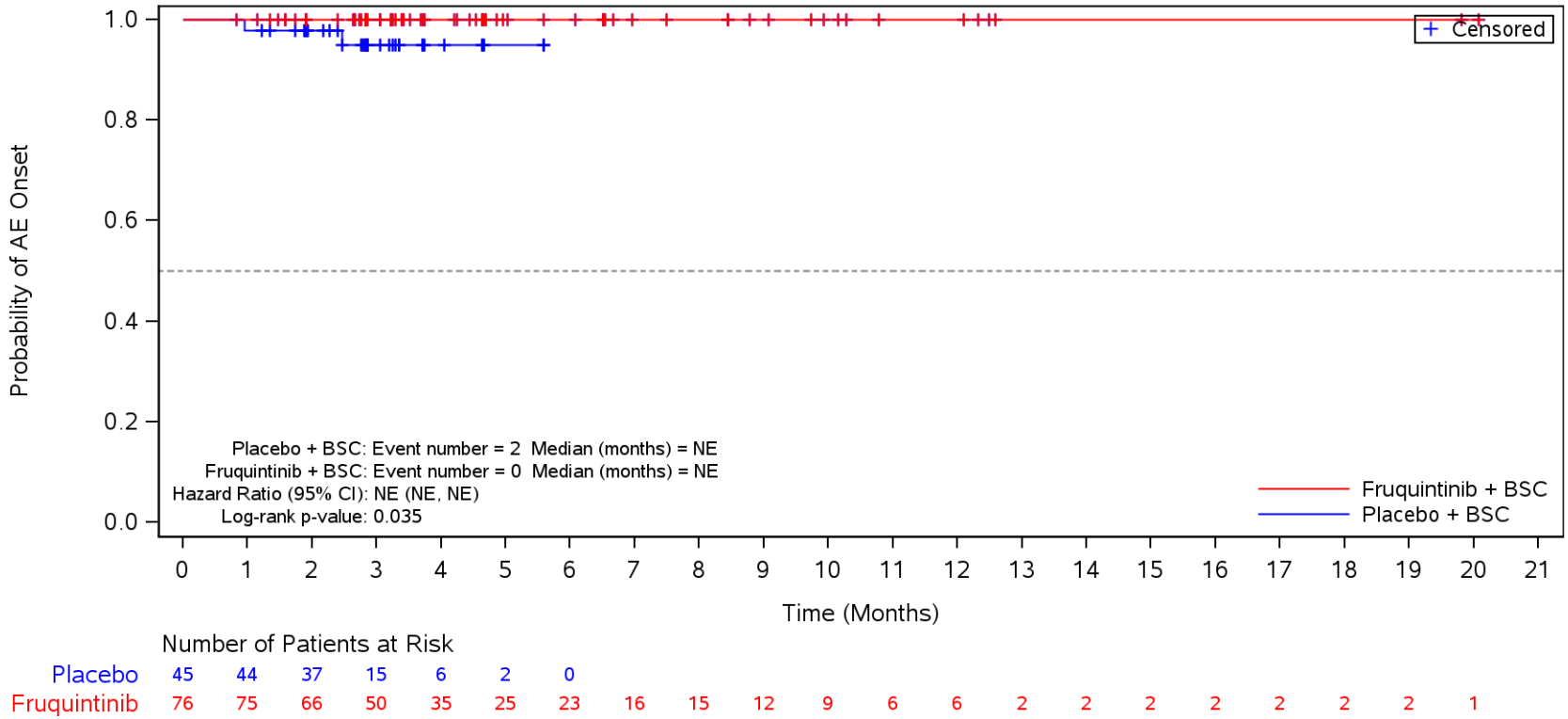
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
Discontinuation due to TEAE
>3



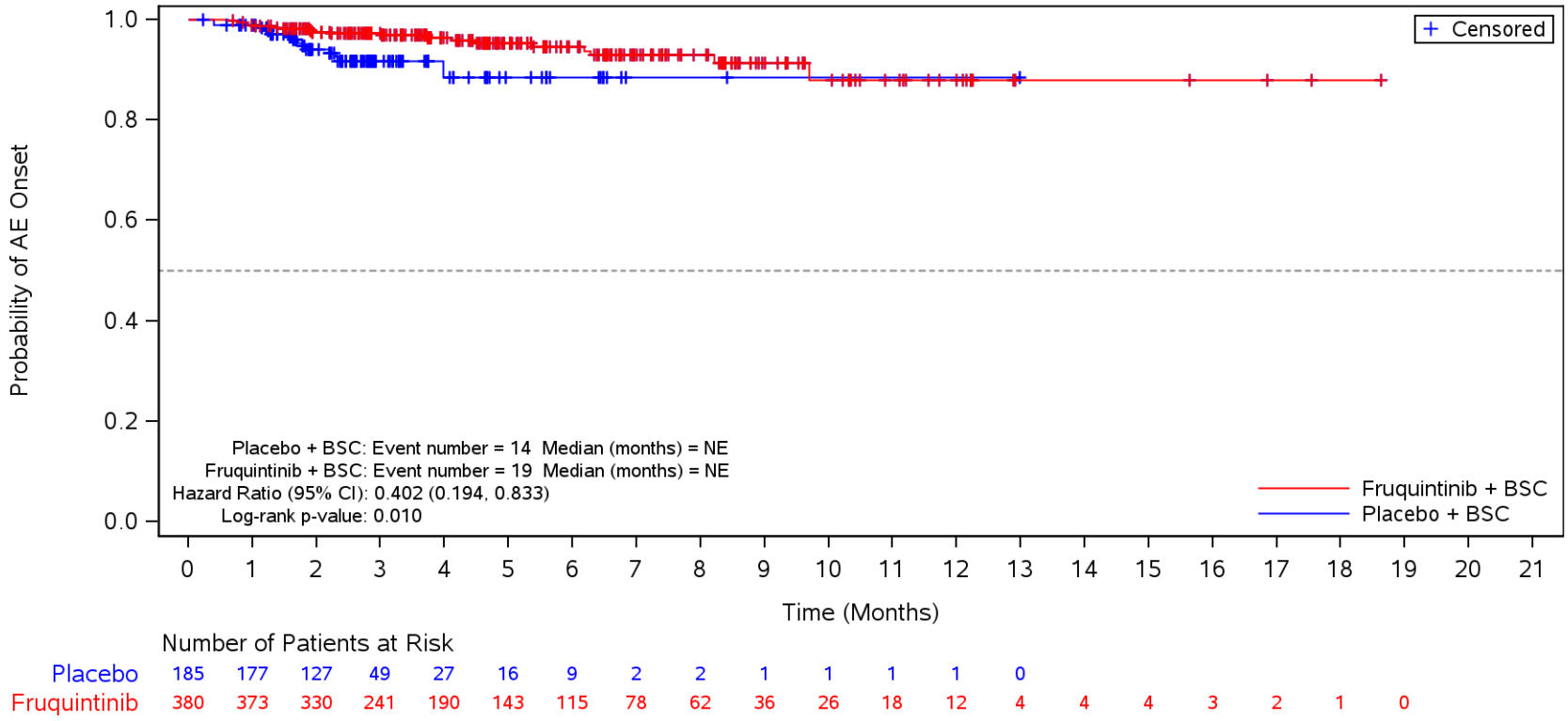
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3J
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines
Safety Population
Deaths (Grade 5 TEAEs)
<=3



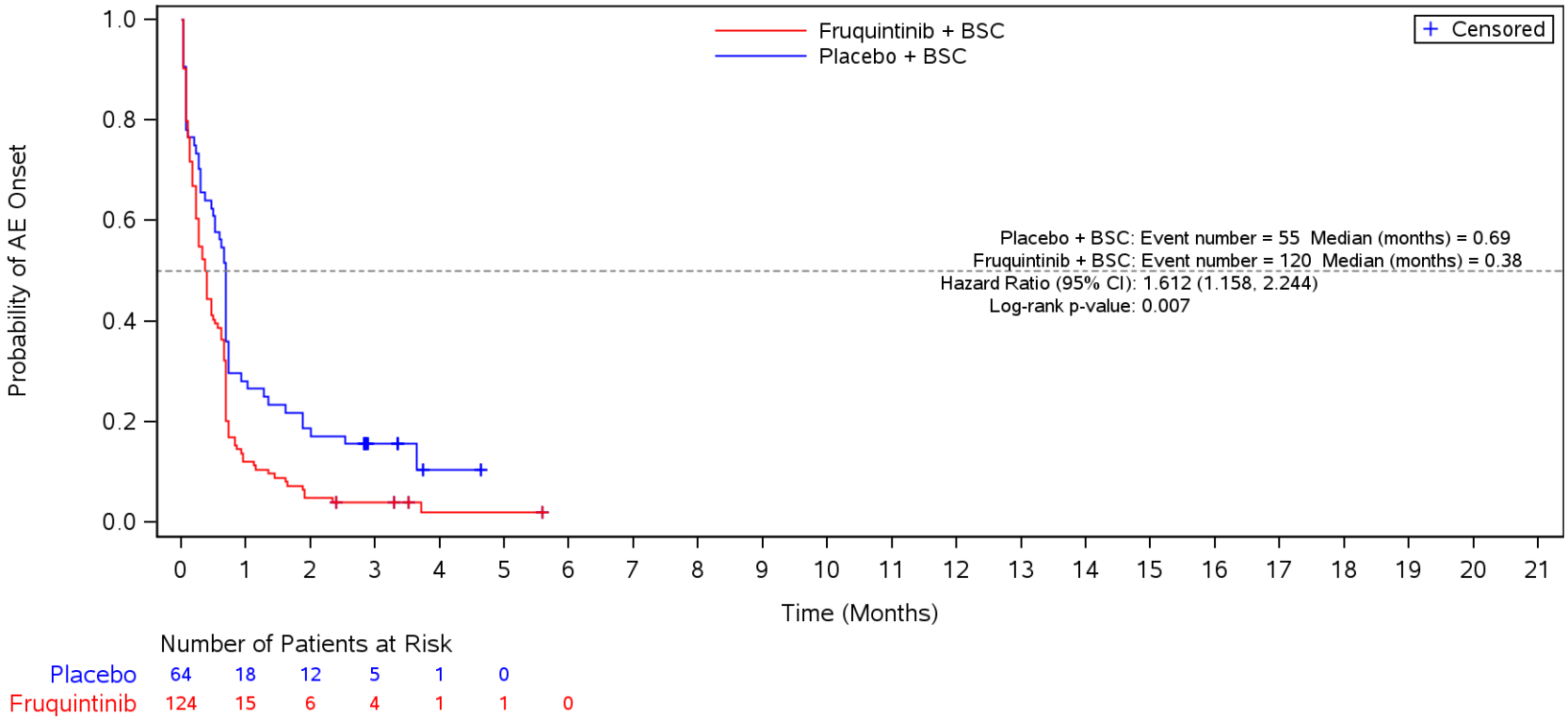
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE
<=3



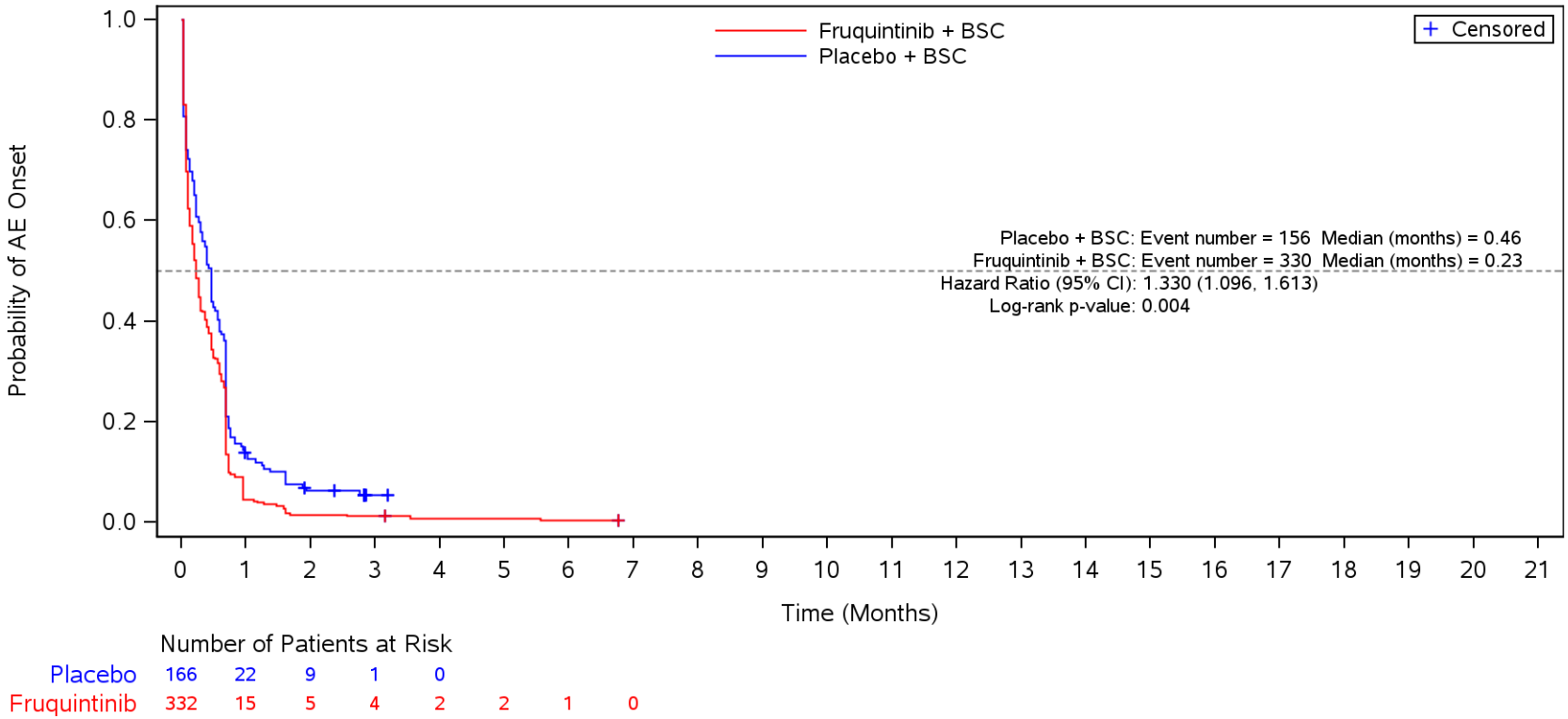
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE
<=3



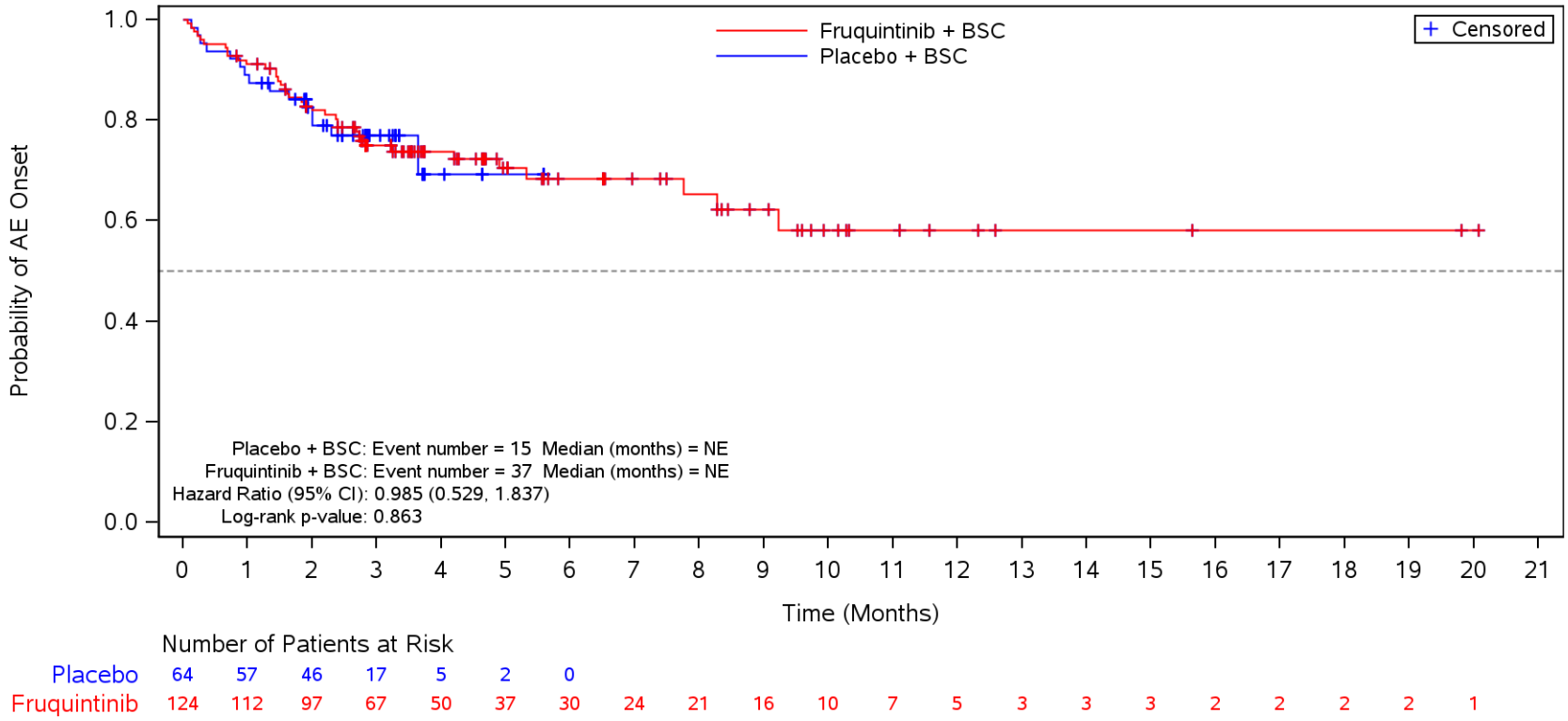
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE
>3



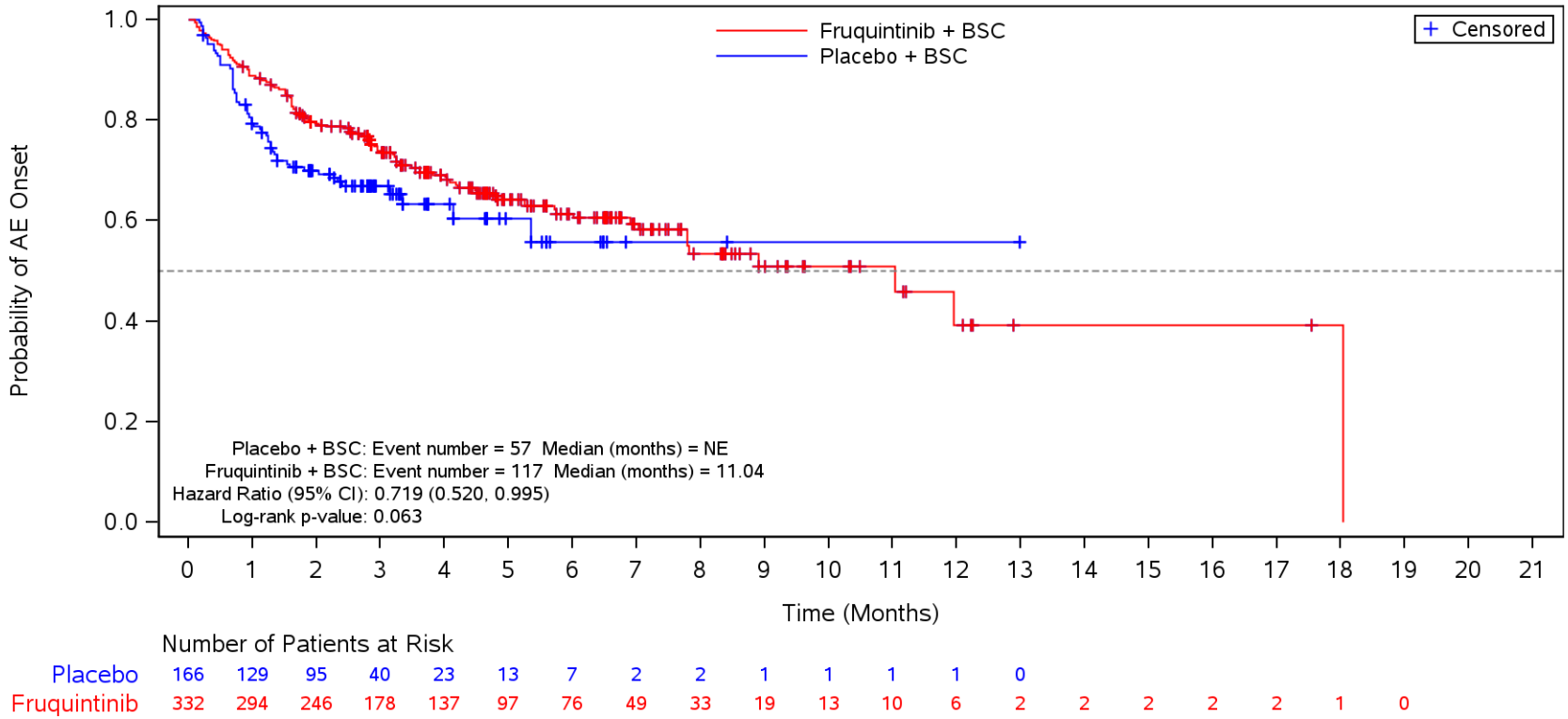
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Serious TEAE
<=3



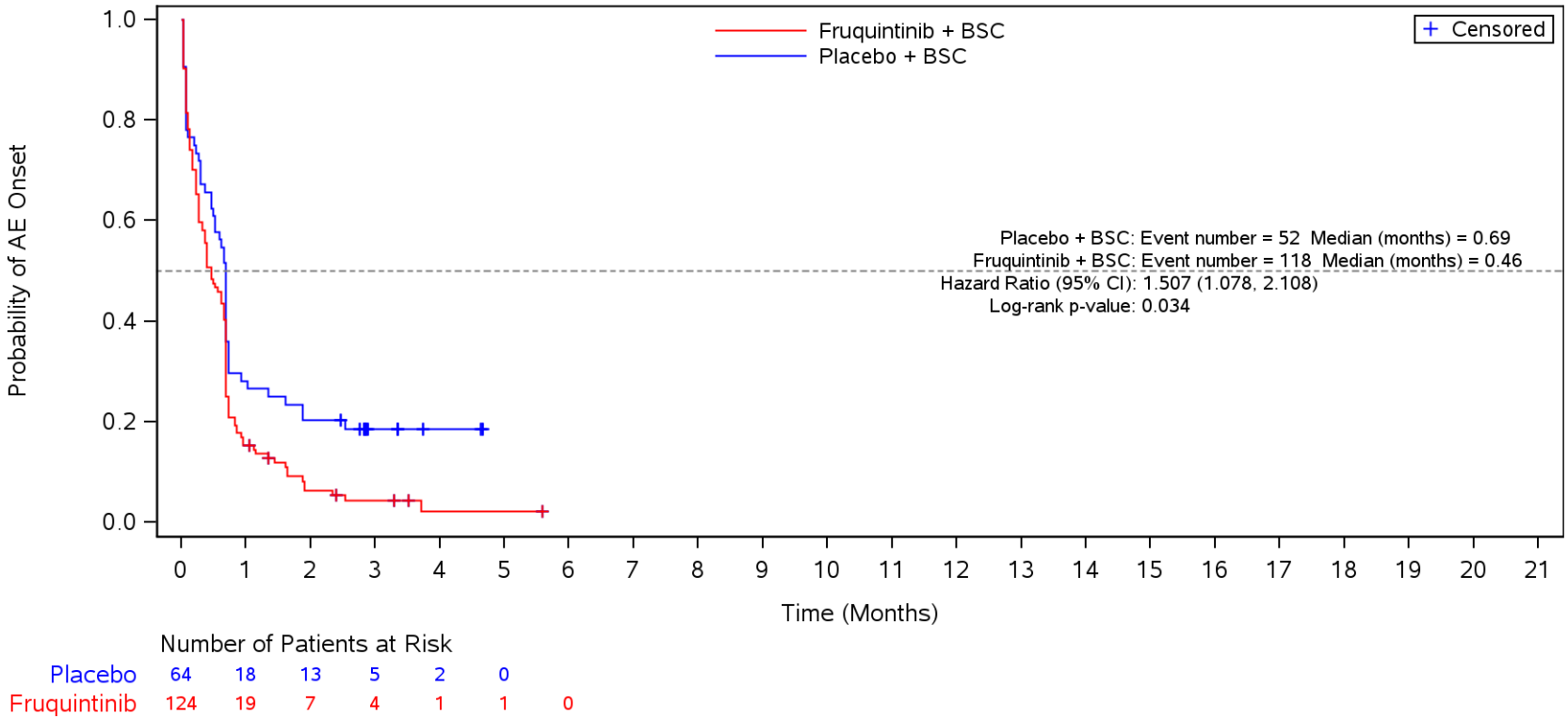
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Serious TEAE
>3



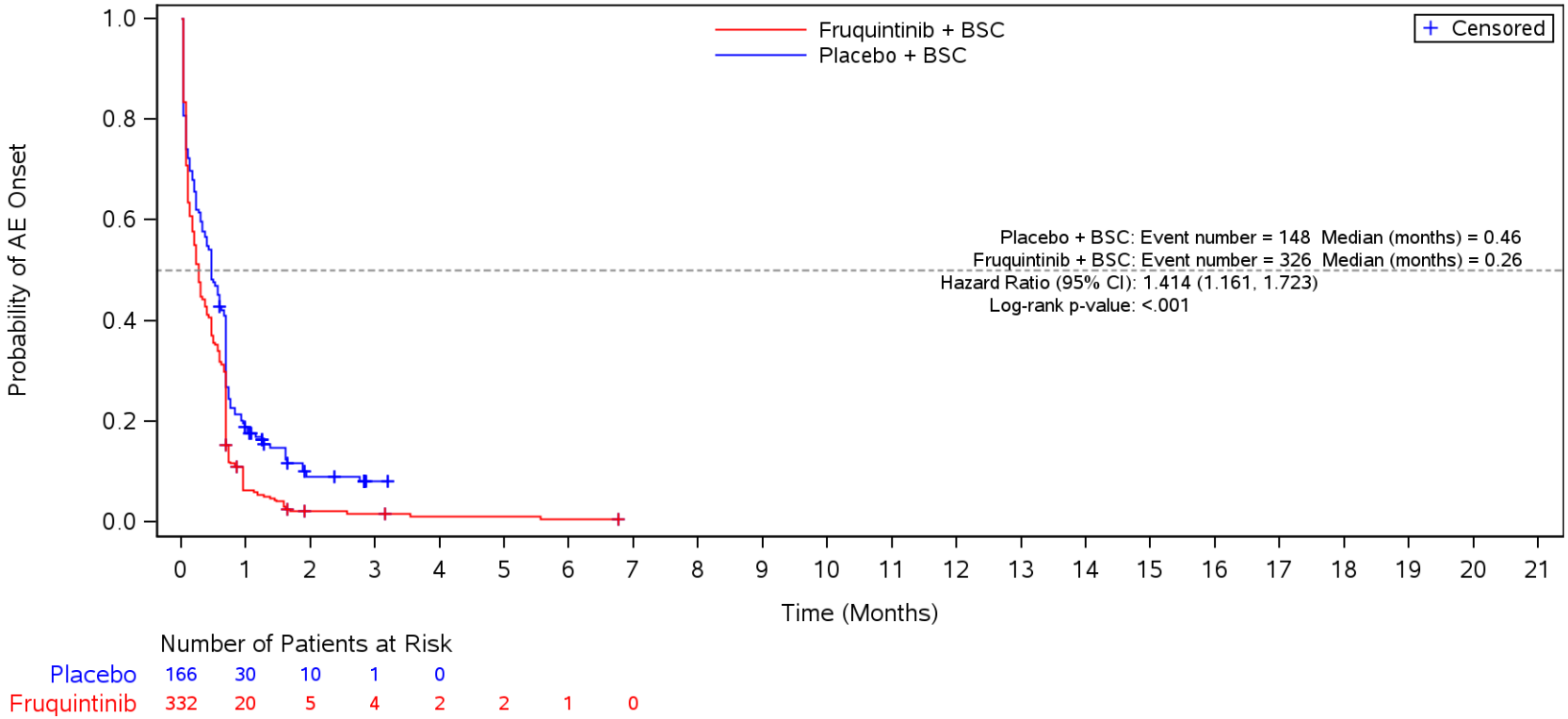
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≤ CTCAE Grade 2
<=3



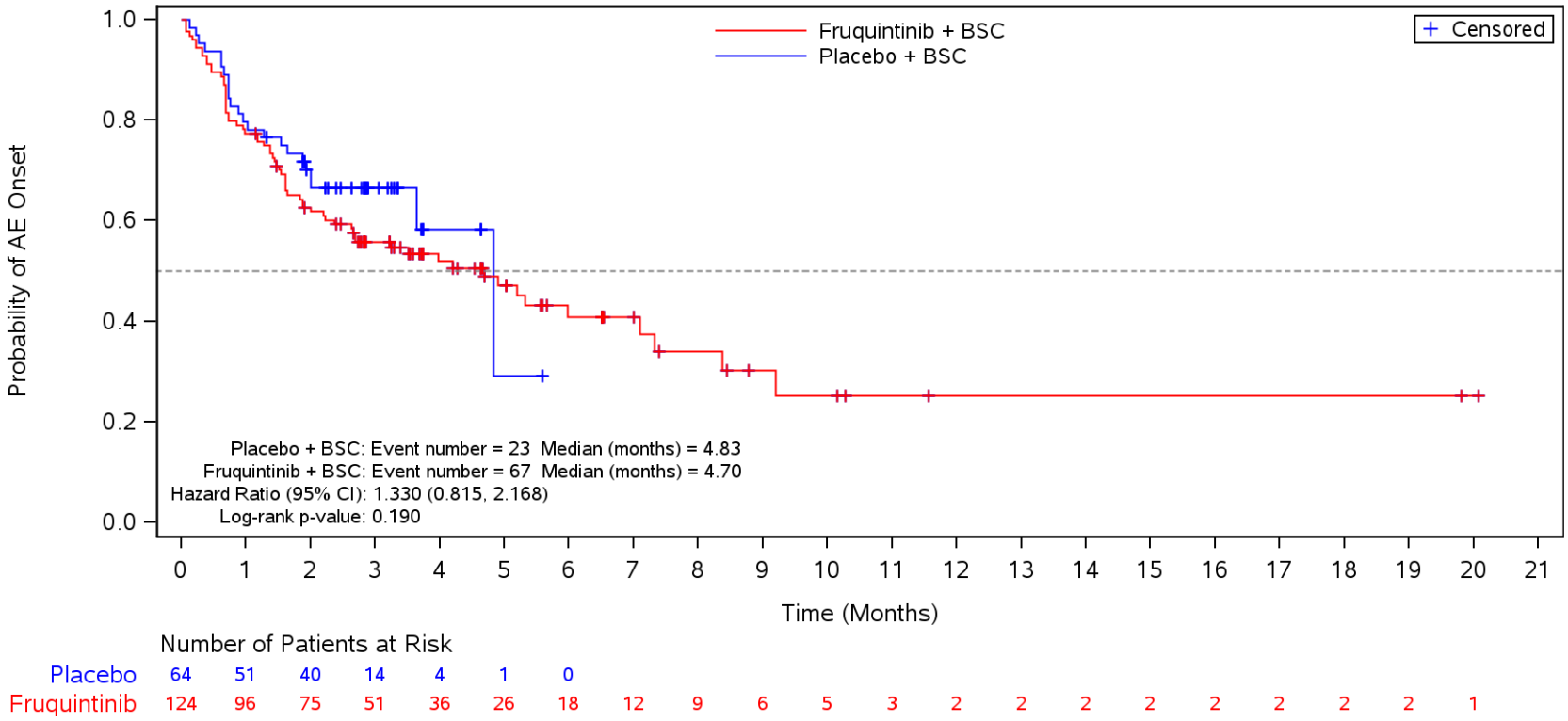
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≤ CTCAE Grade 2
>3



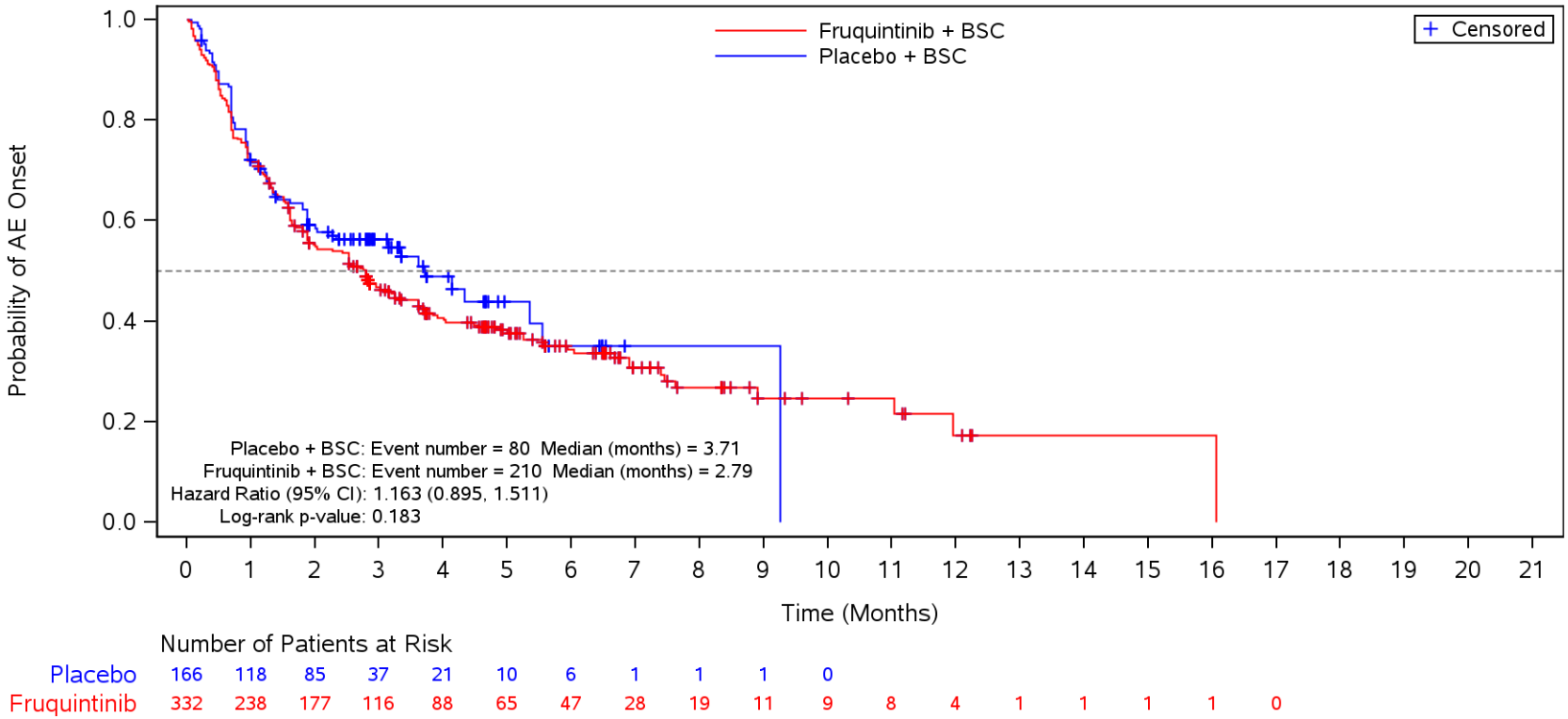
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3
<=3



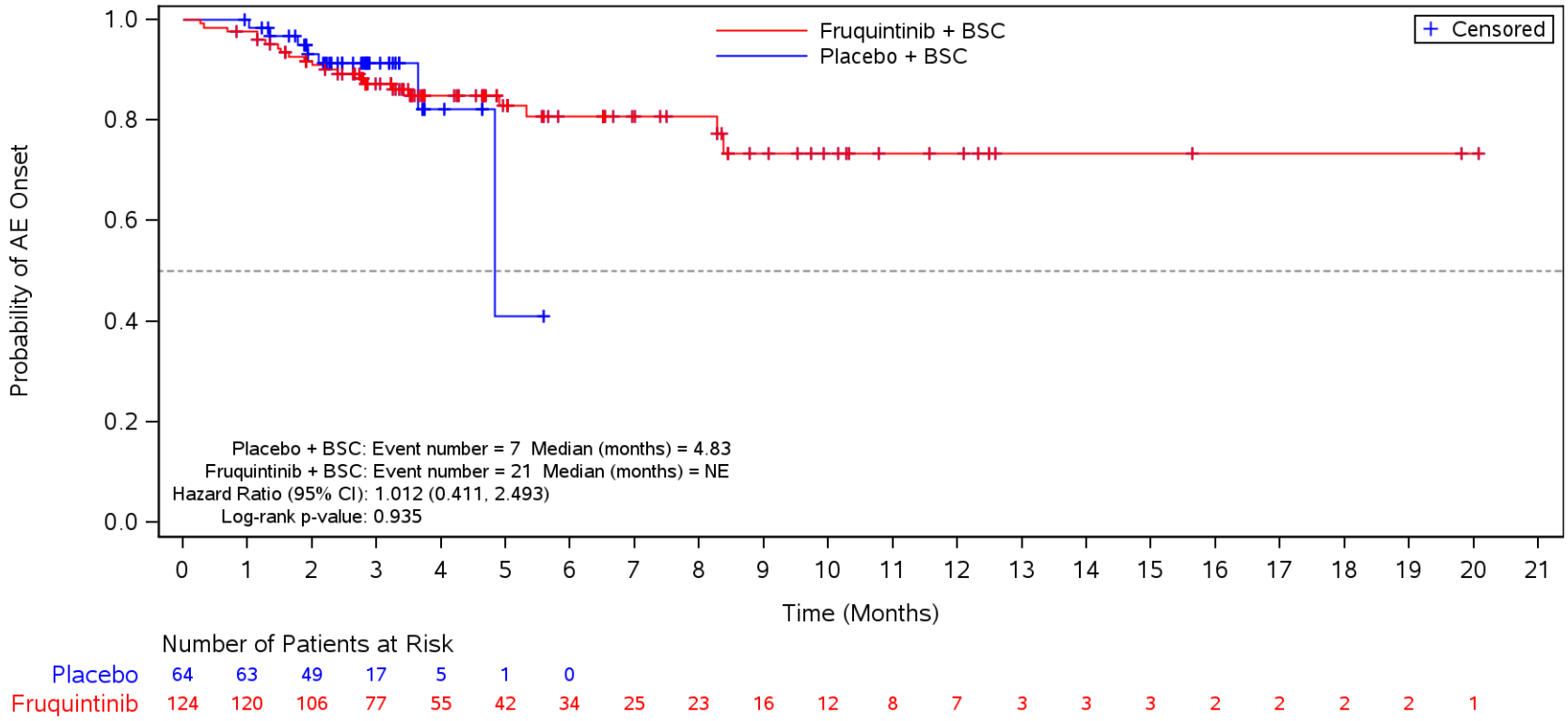
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
TEAE ≥ CTCAE Grade 3
>3



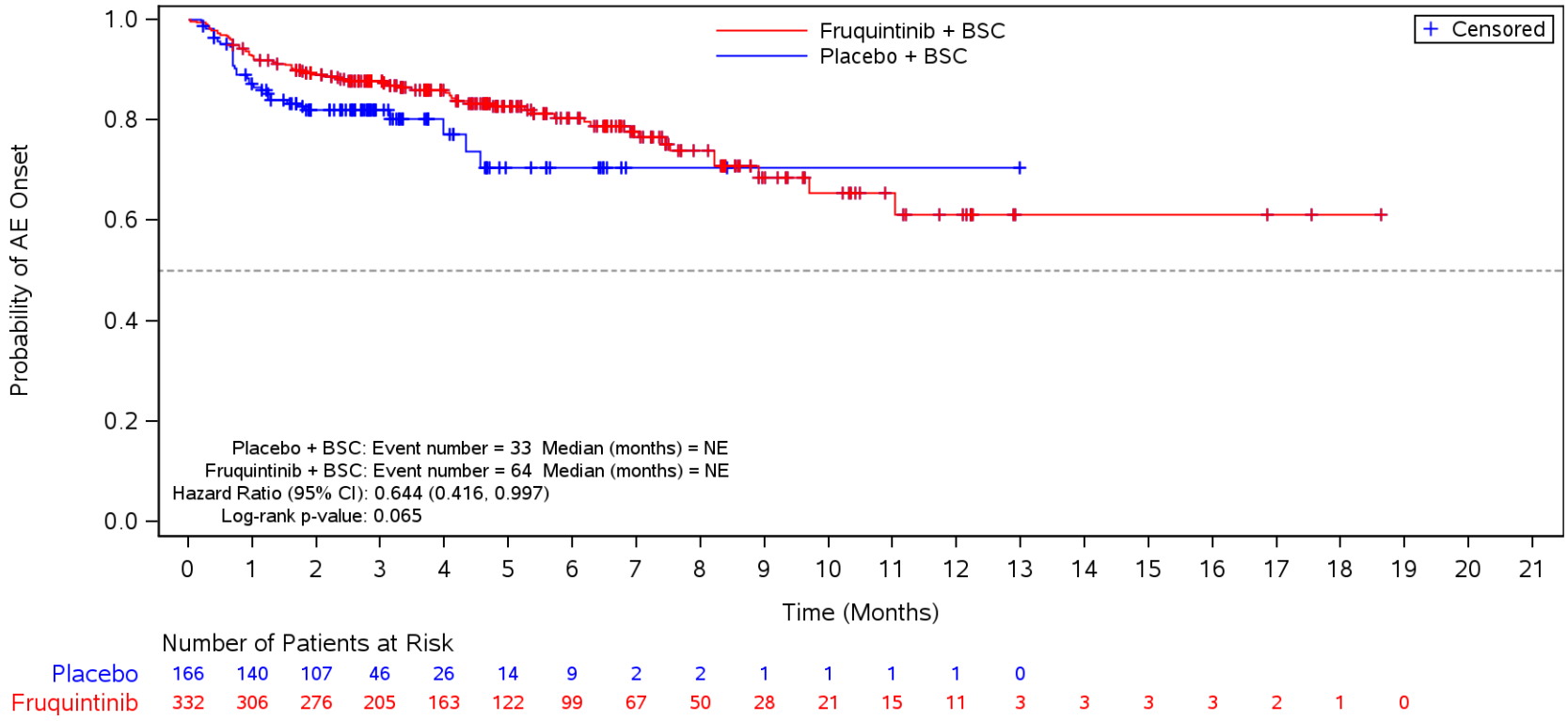
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Discontinuation due to TEAE
<=3



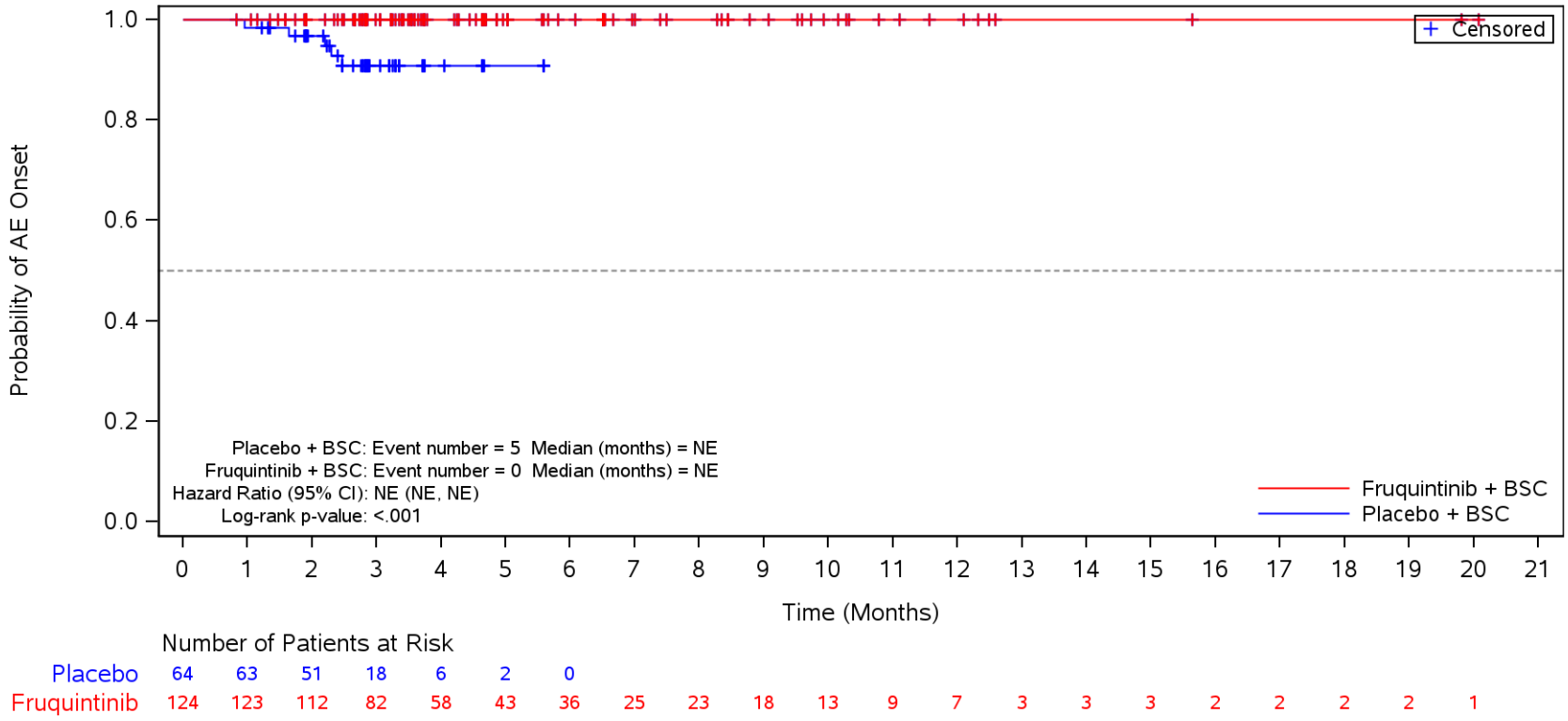
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Discontinuation due to TEAE
>3



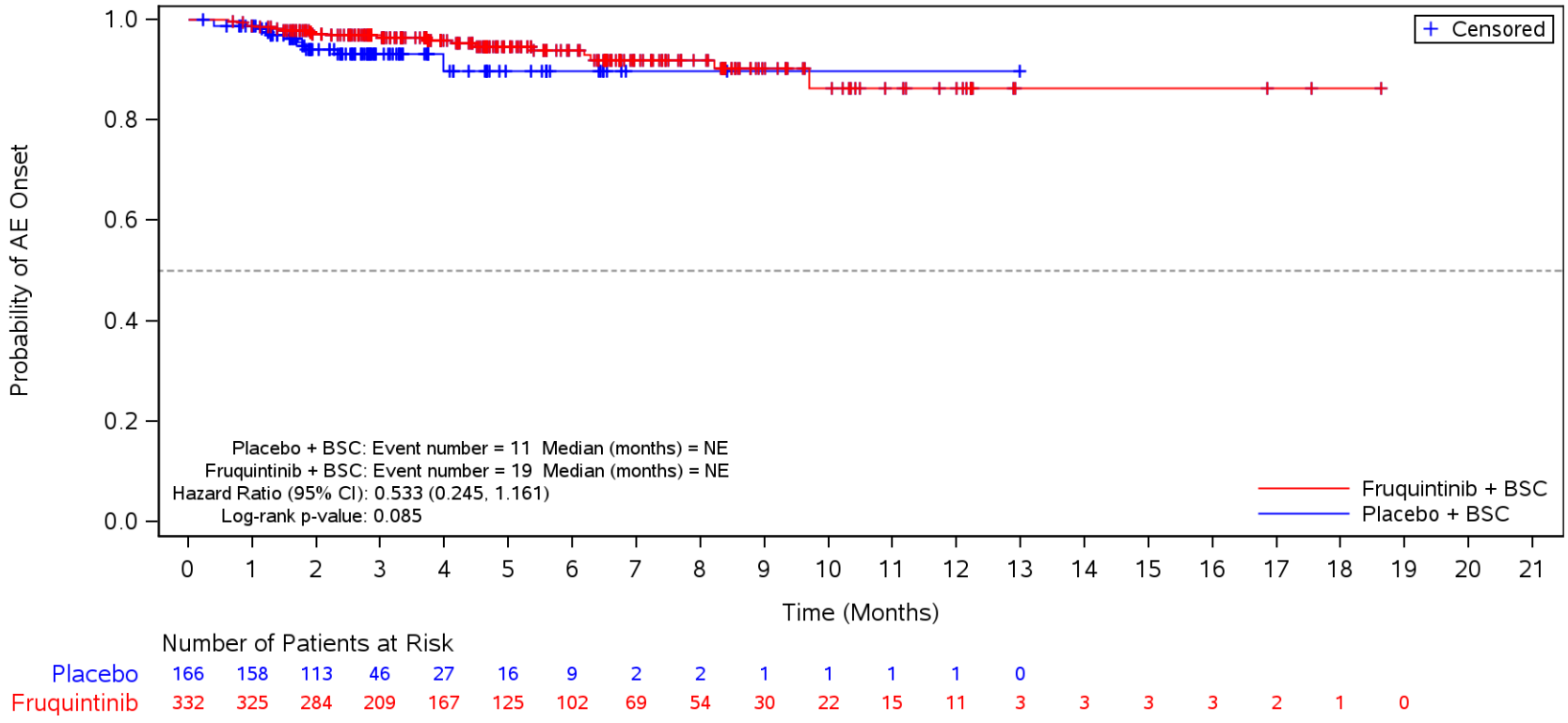
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3K
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Prior Chemotherapy Treatment Lines in Metastatic Disease
Safety Population
Deaths (Grade 5 TEAEs)
<=3



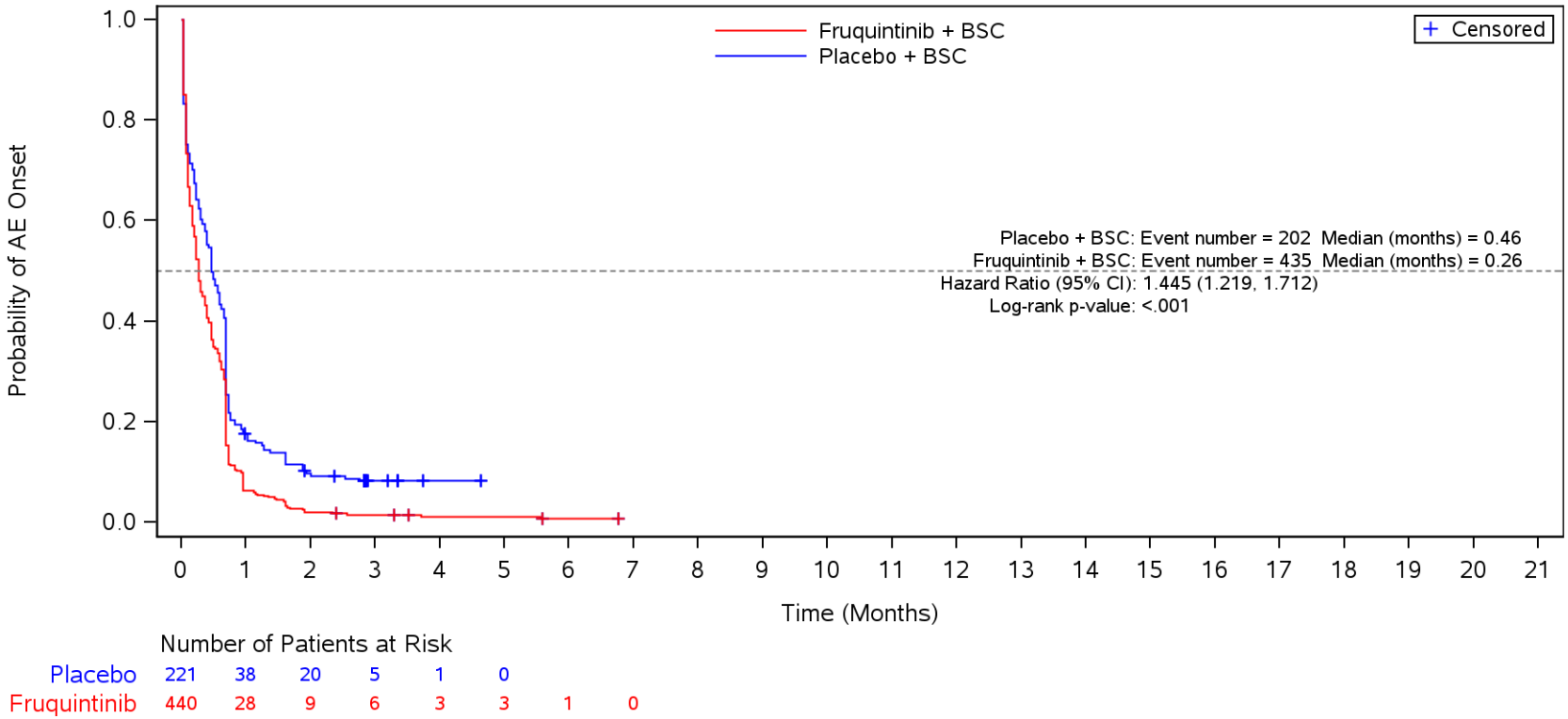
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
TEAE
Yes



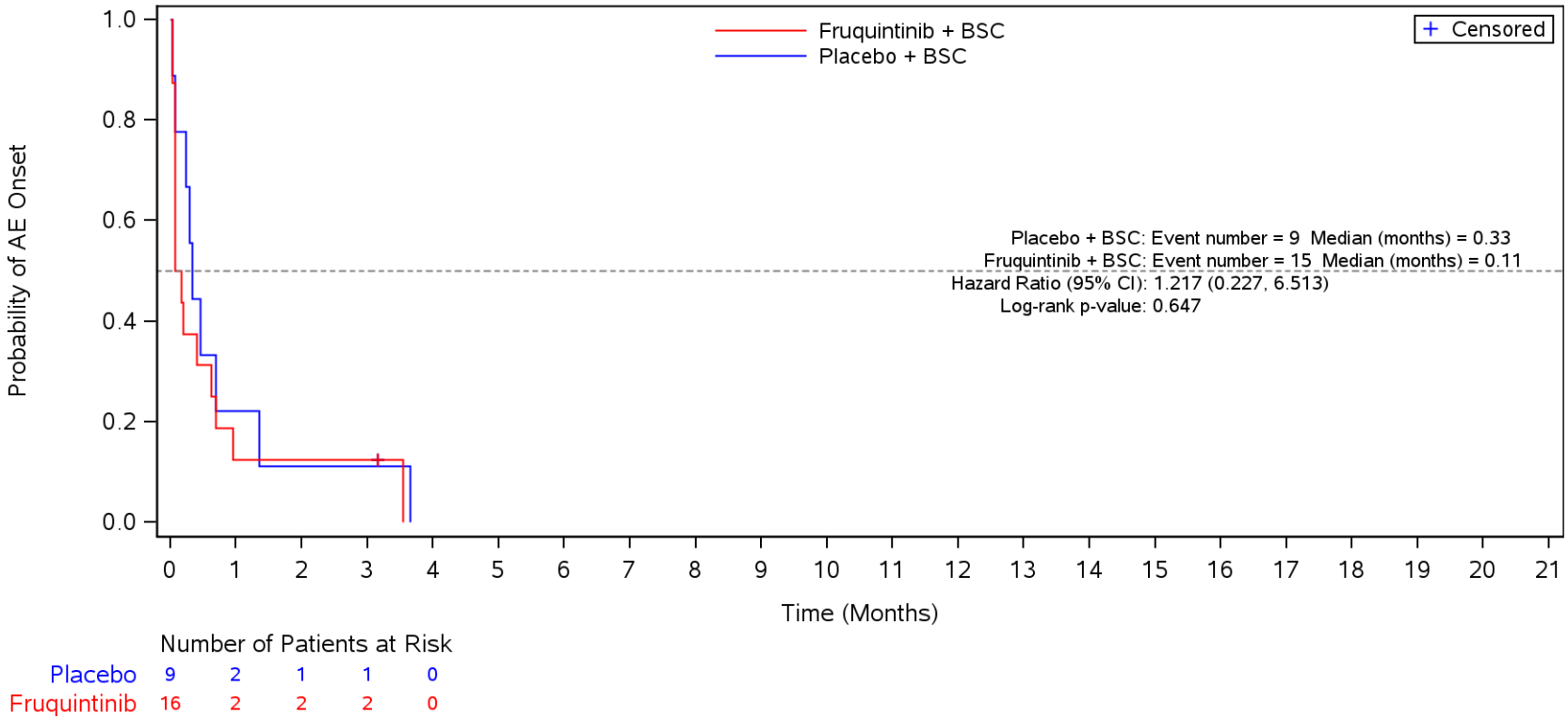
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
TEAE
Yes



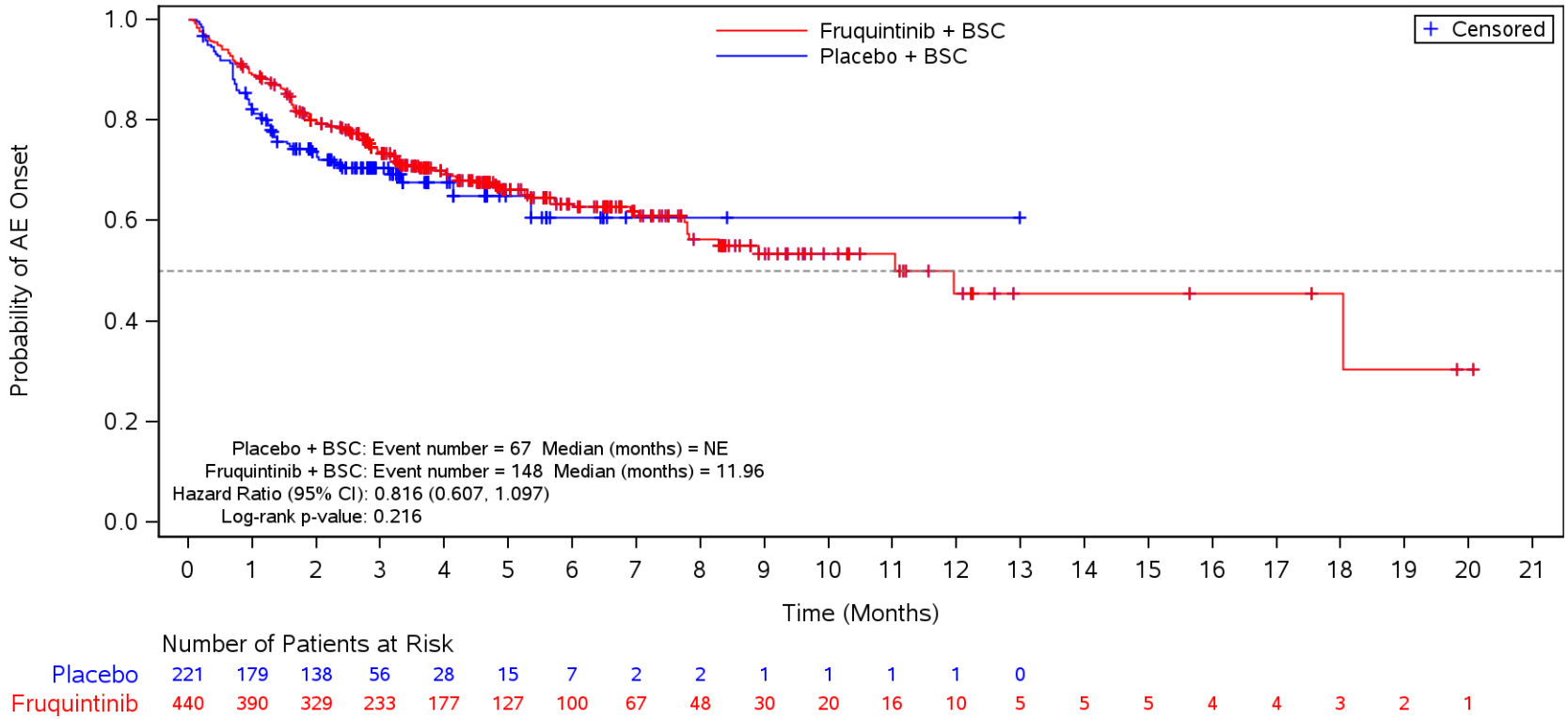
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
TEAE
No



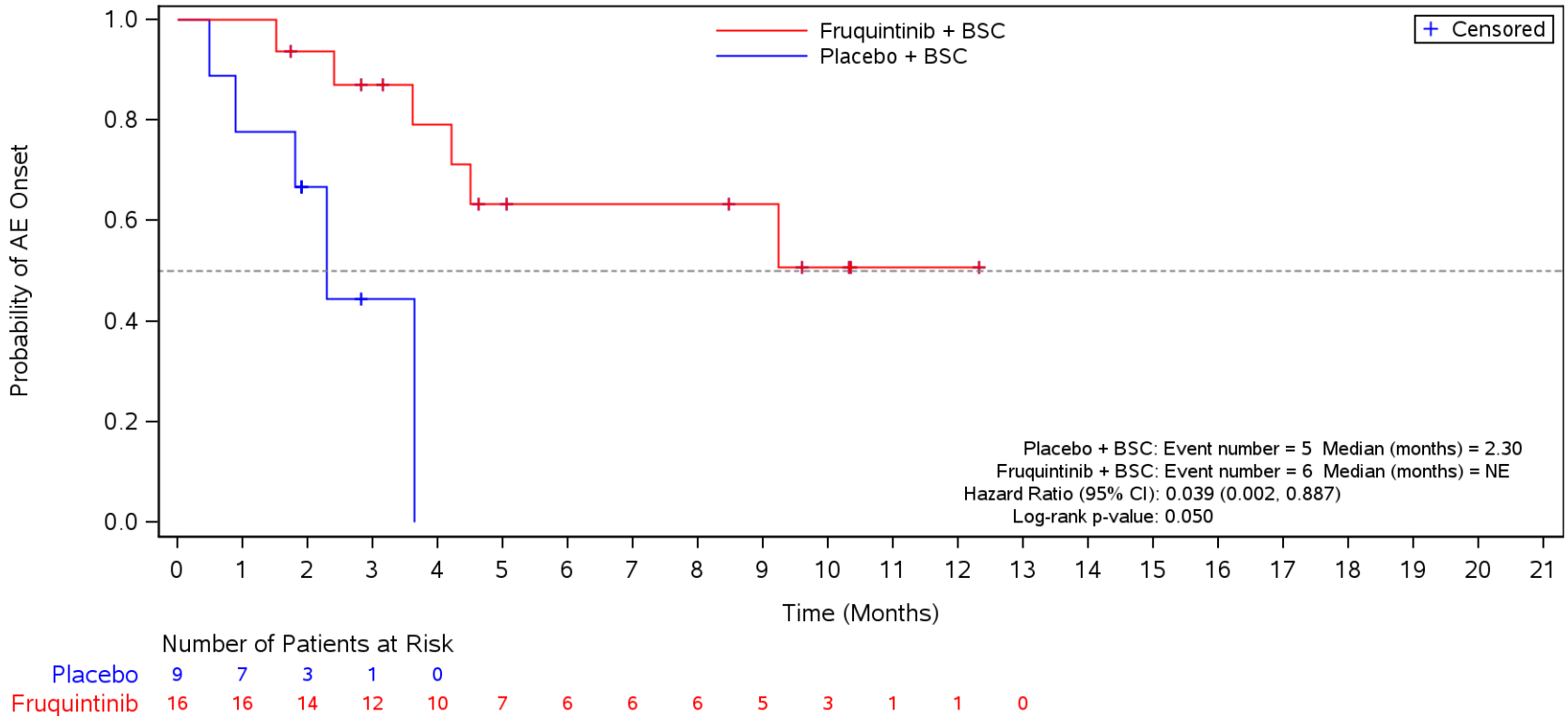
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
Serious TEAE
Yes



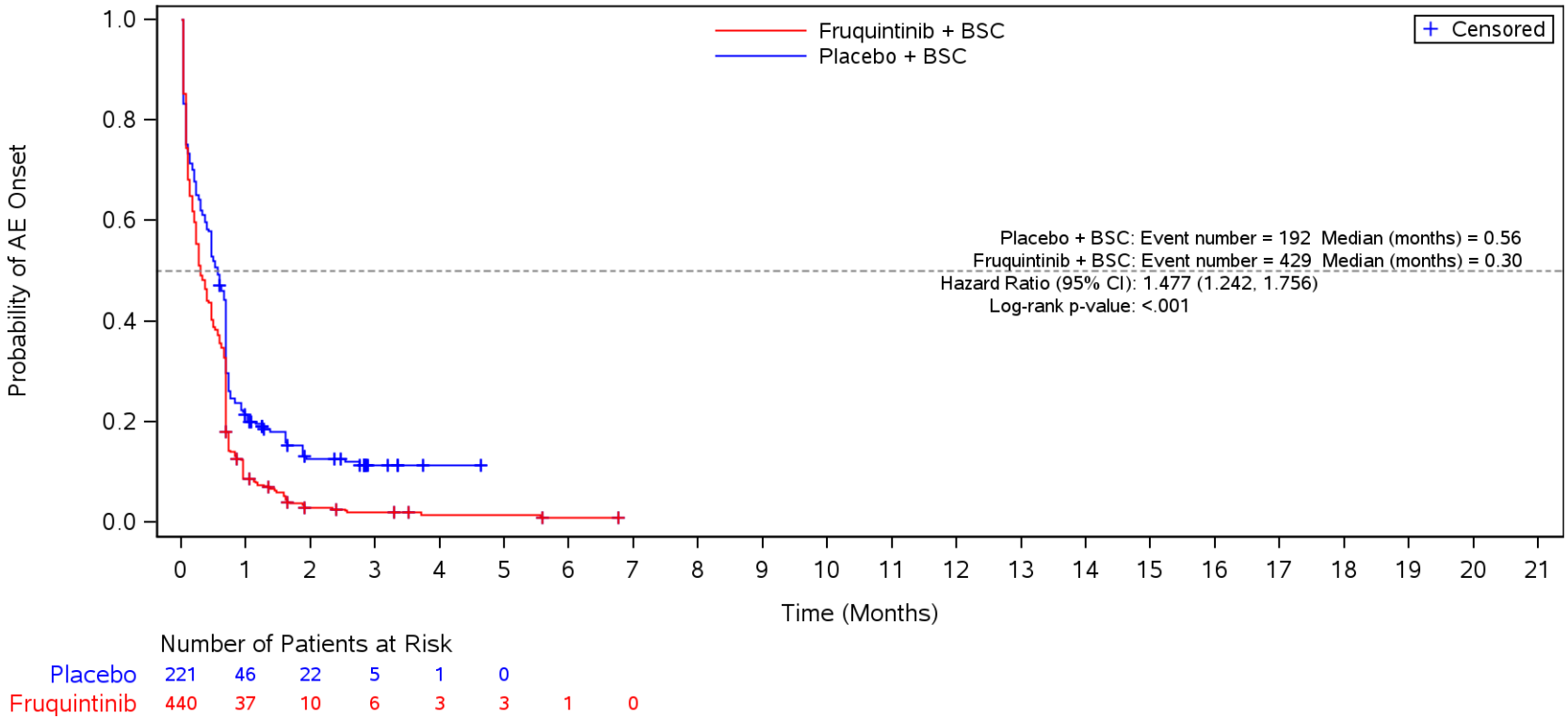
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
Serious TEAE
No



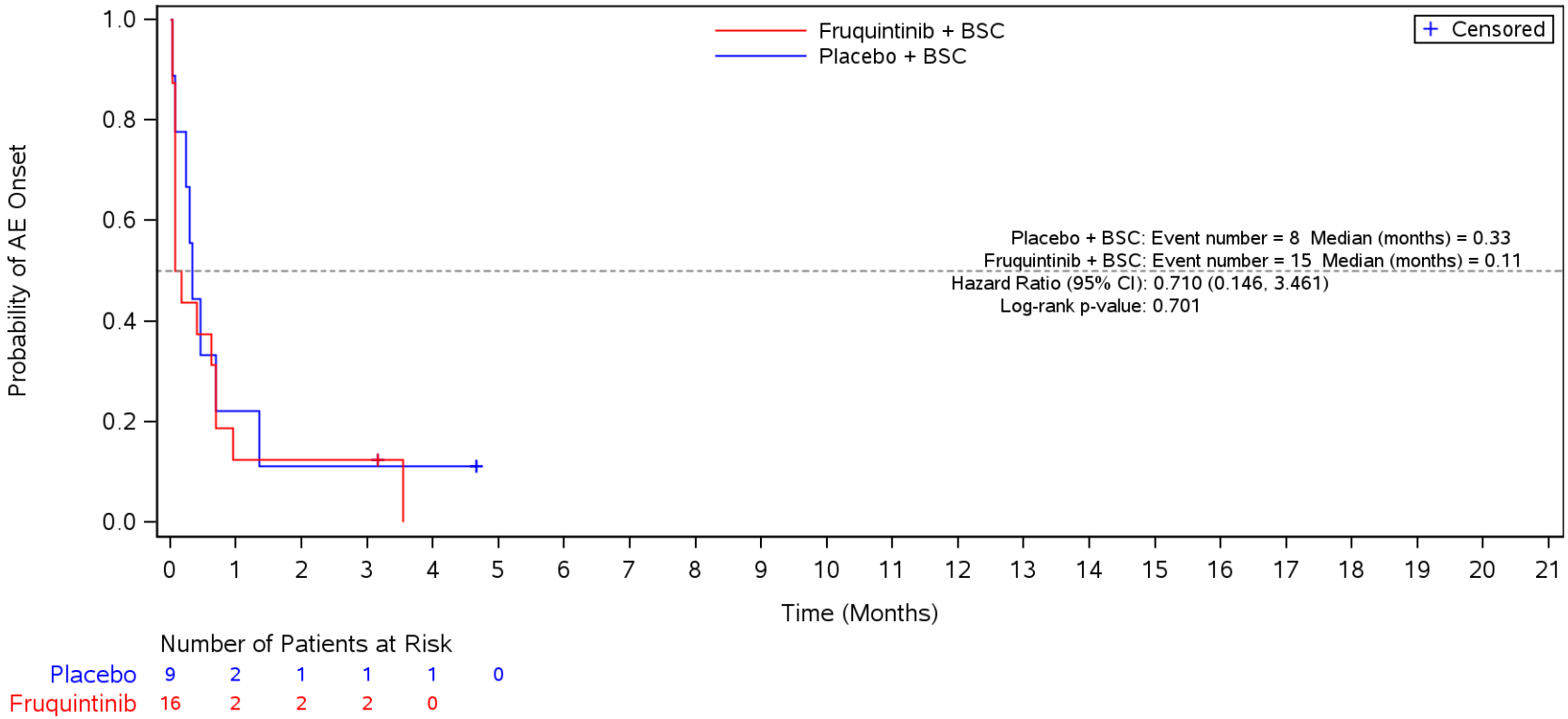
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
TEAE ≤ CTCAE Grade 2
Yes



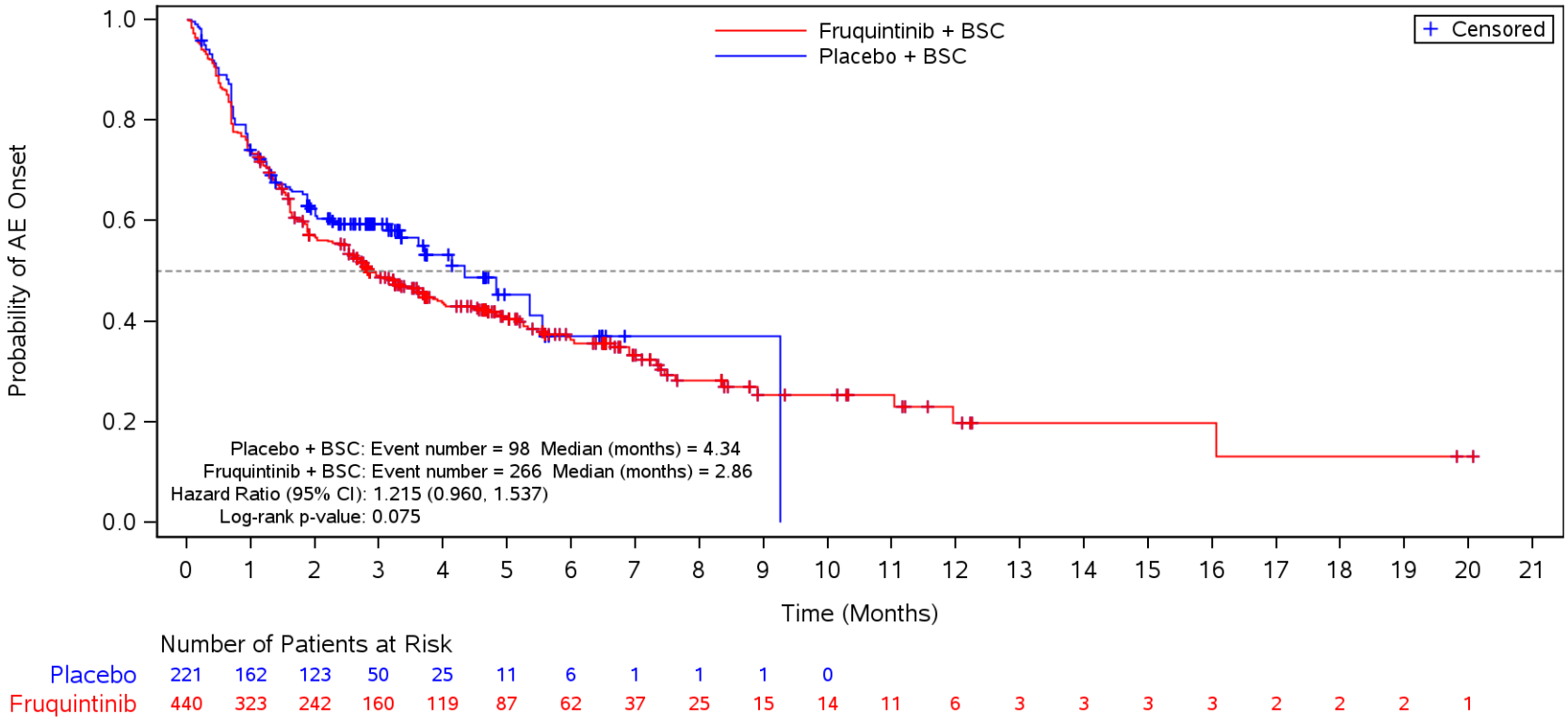
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
TEAE ≤ CTCAE Grade 2
No



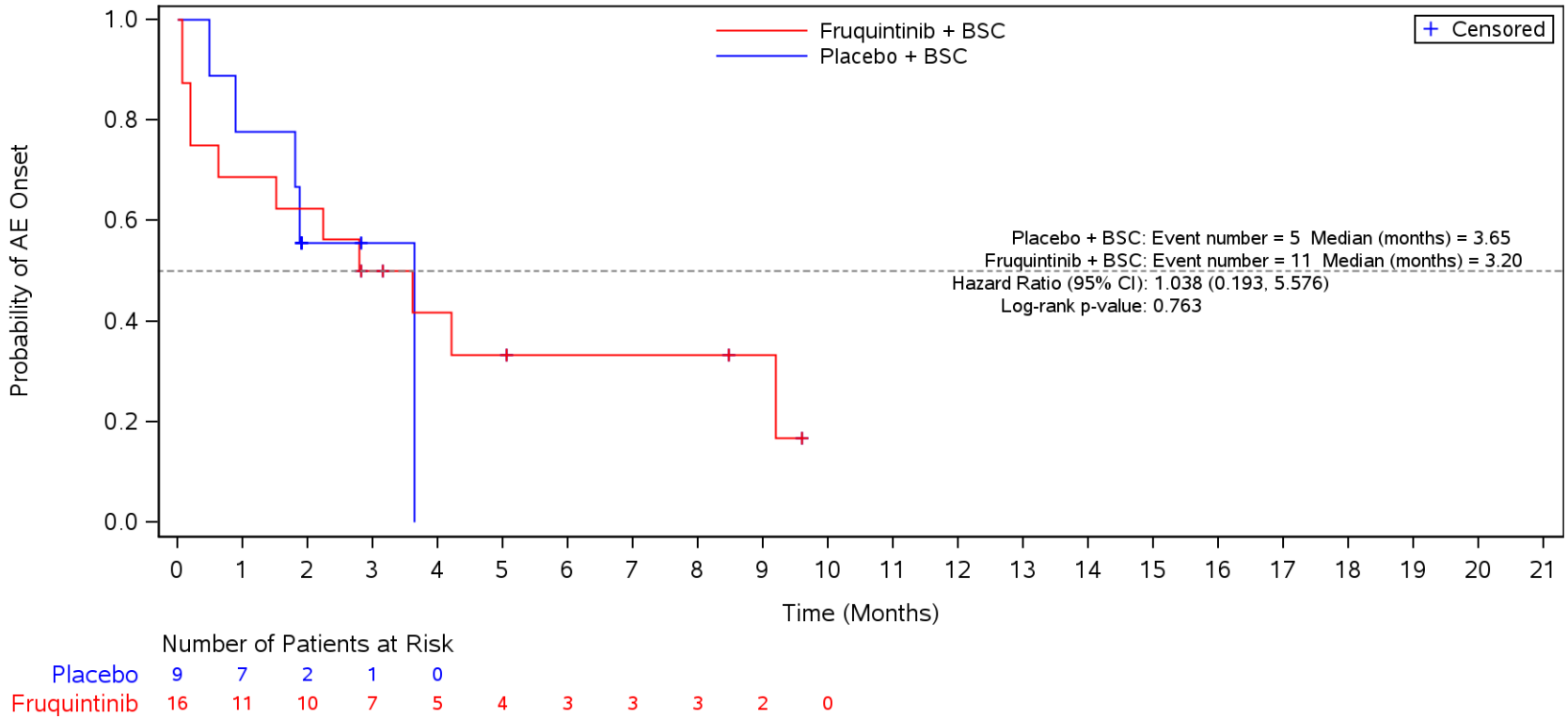
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3
Yes



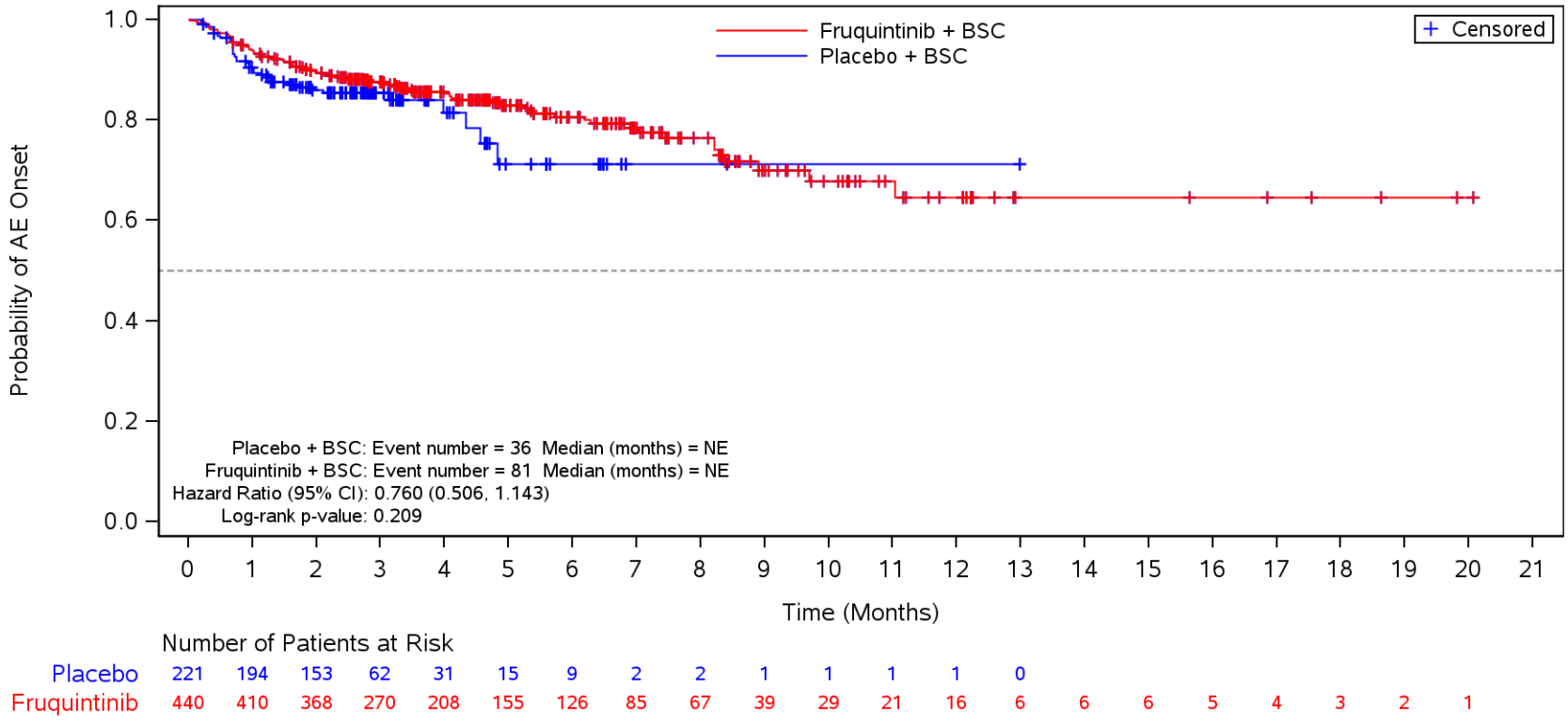
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
TEAE ≥ CTCAE Grade 3
No



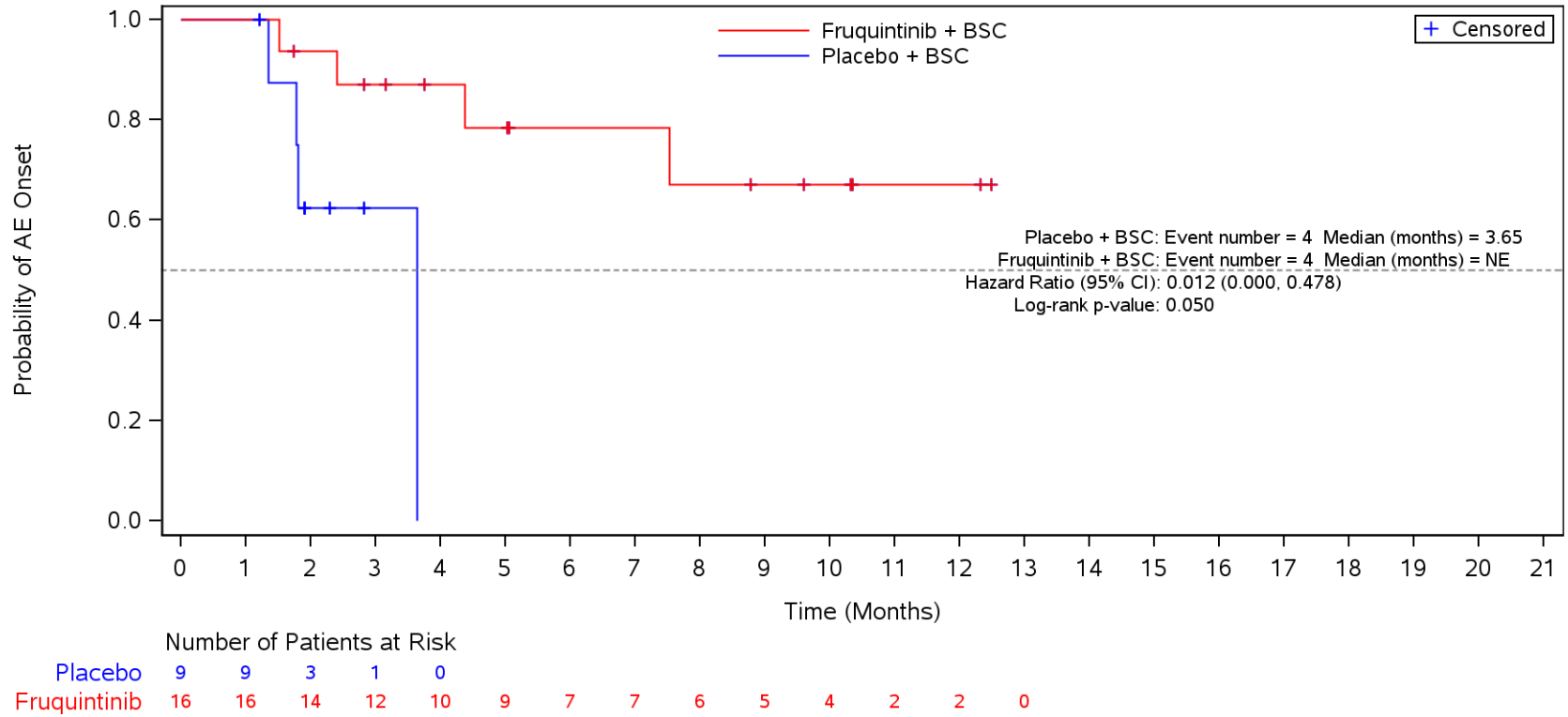
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
Discontinuation due to TEAE
Yes



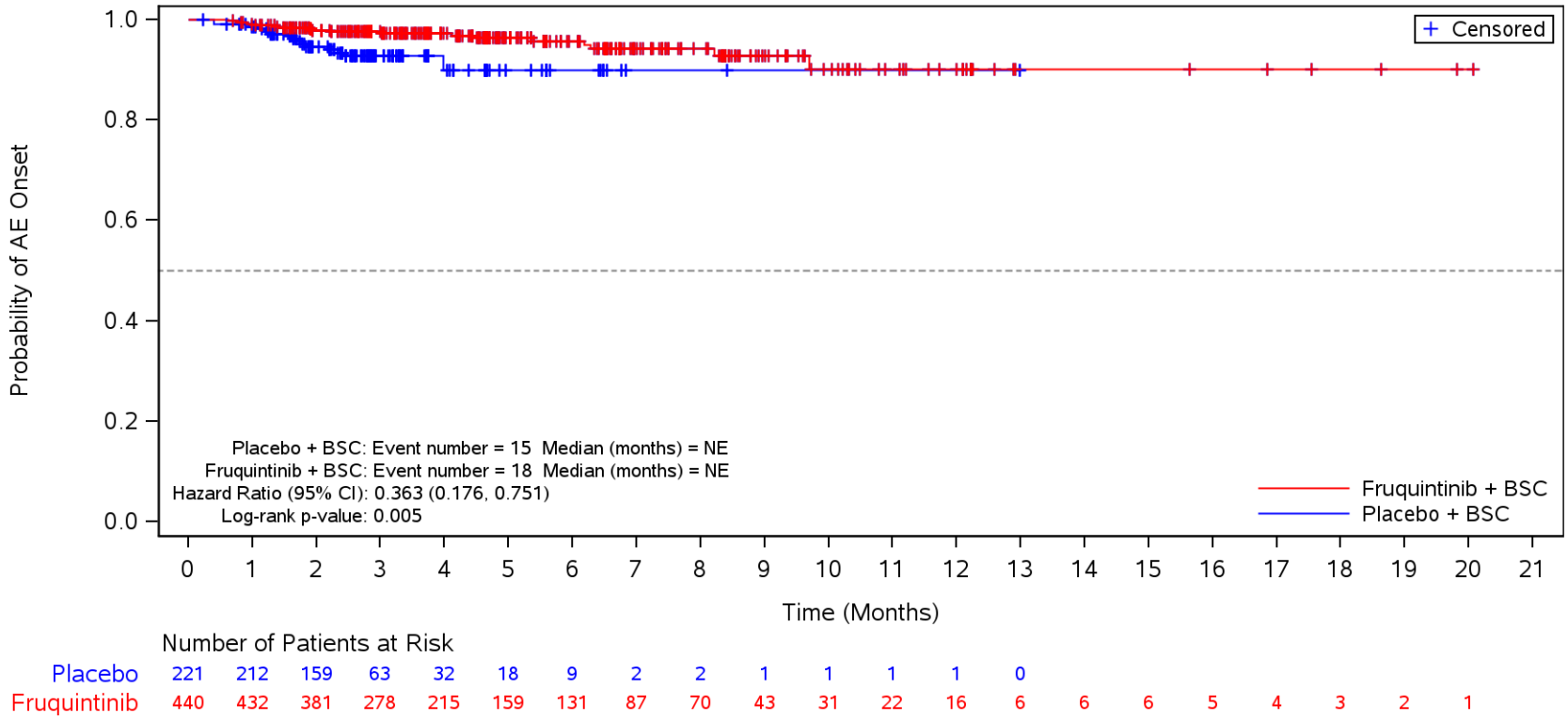
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
Discontinuation due to TEAE
No



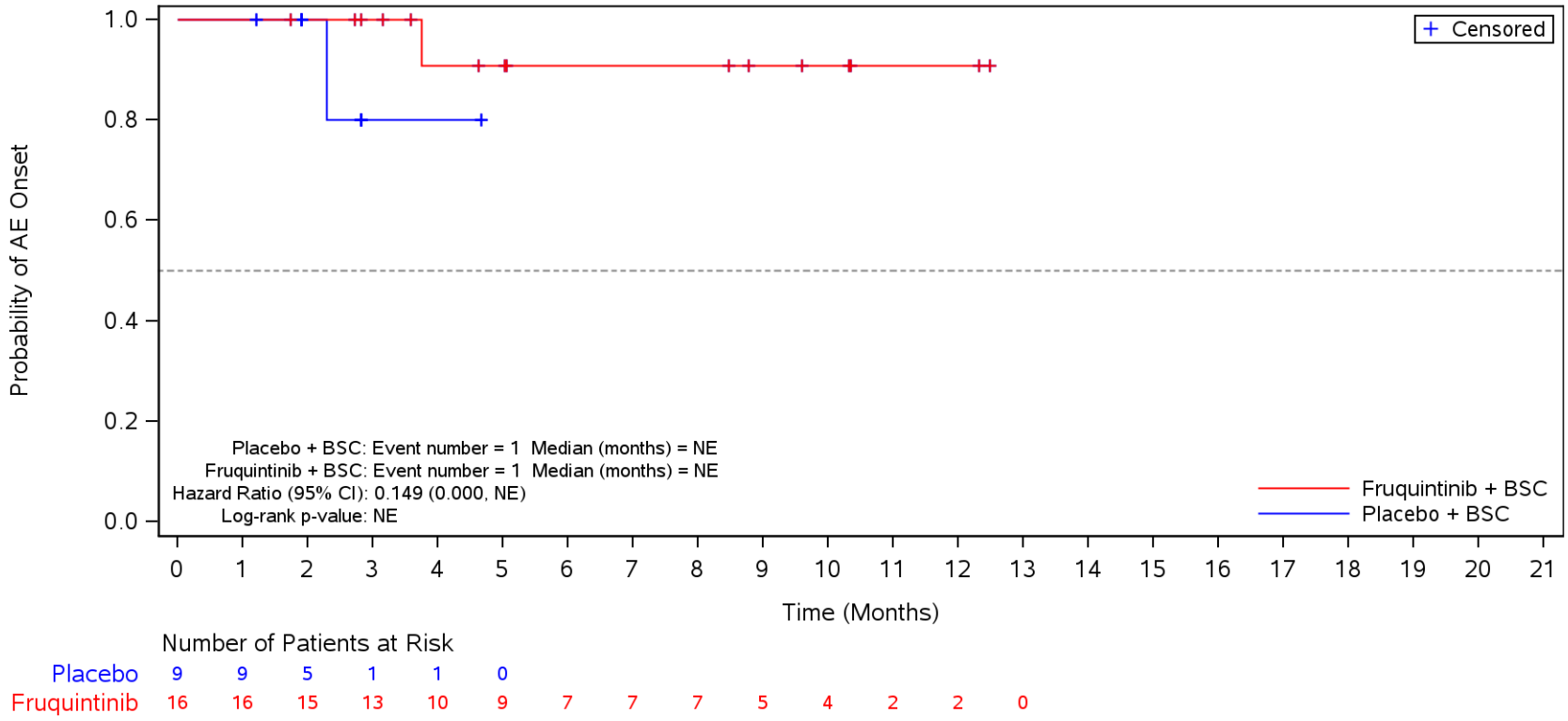
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3L
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior VEGFi
Safety Population
Deaths (Grade 5 TEAEs)
Yes



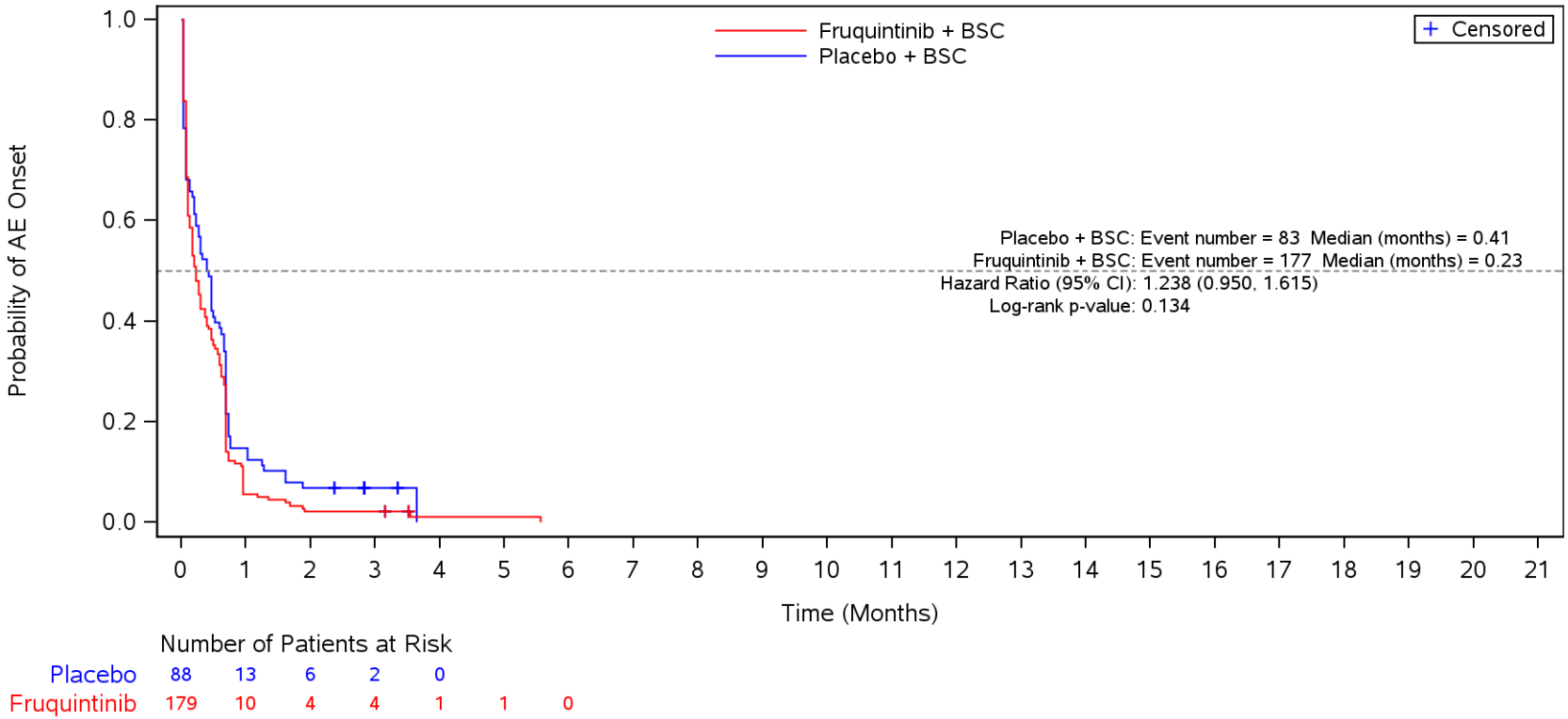
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
TEAE
Yes



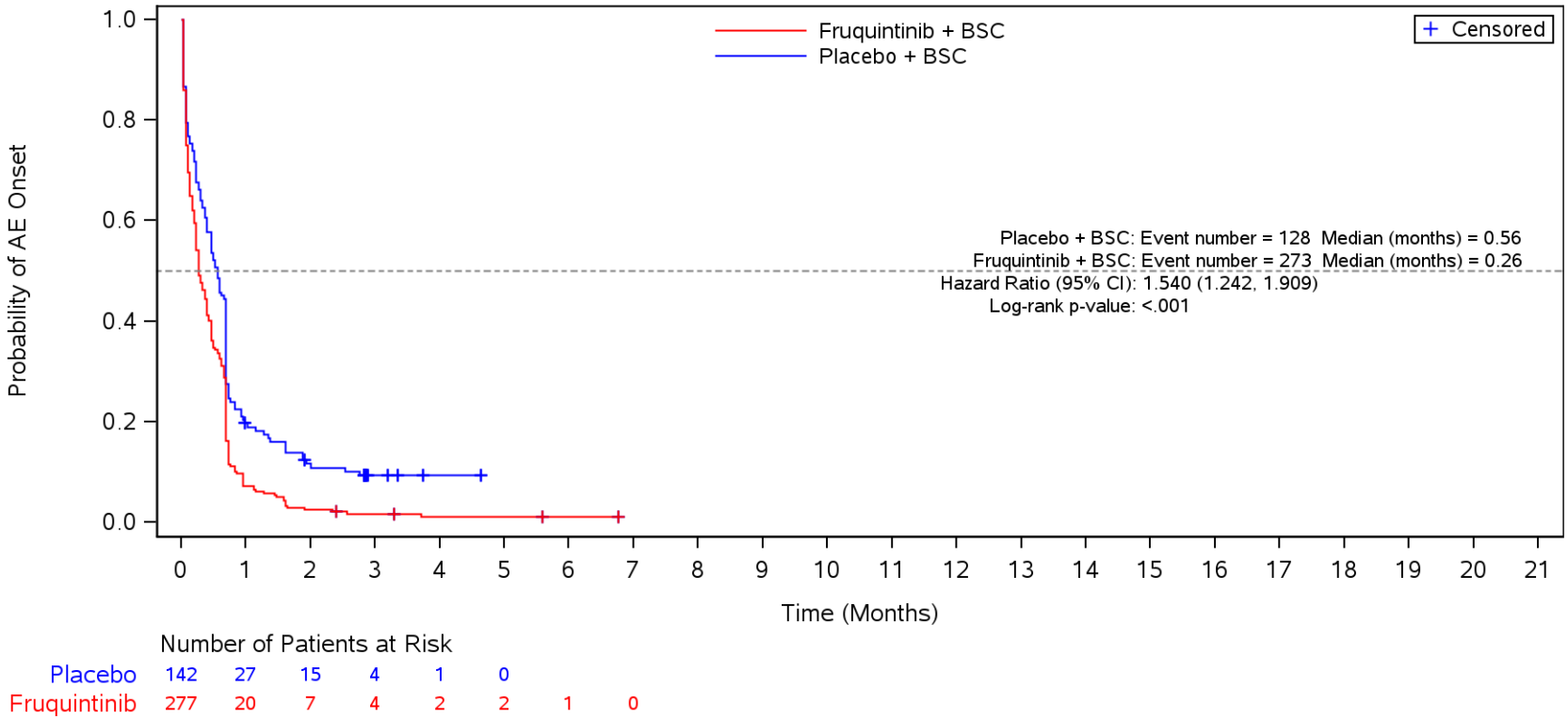
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
TEAE
Yes



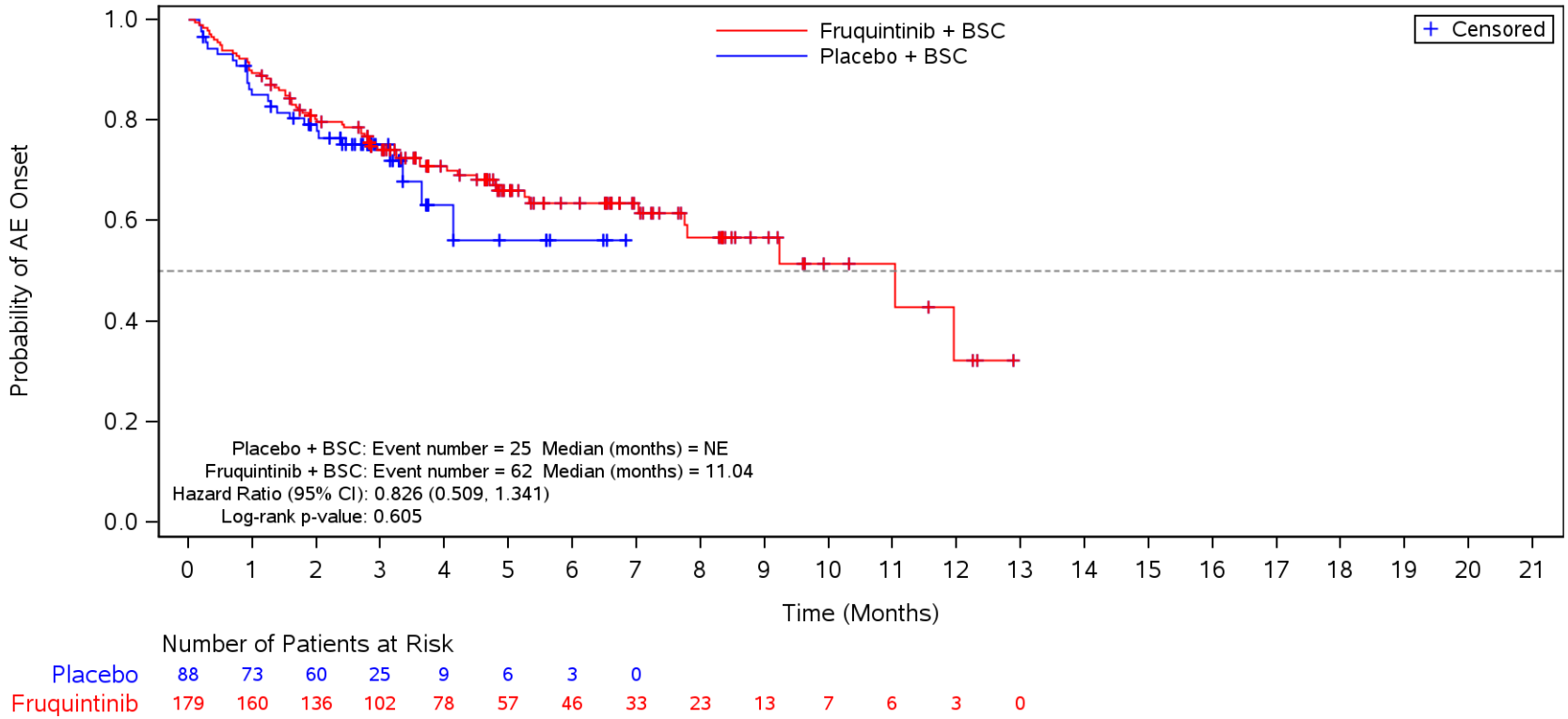
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
TEAE
No



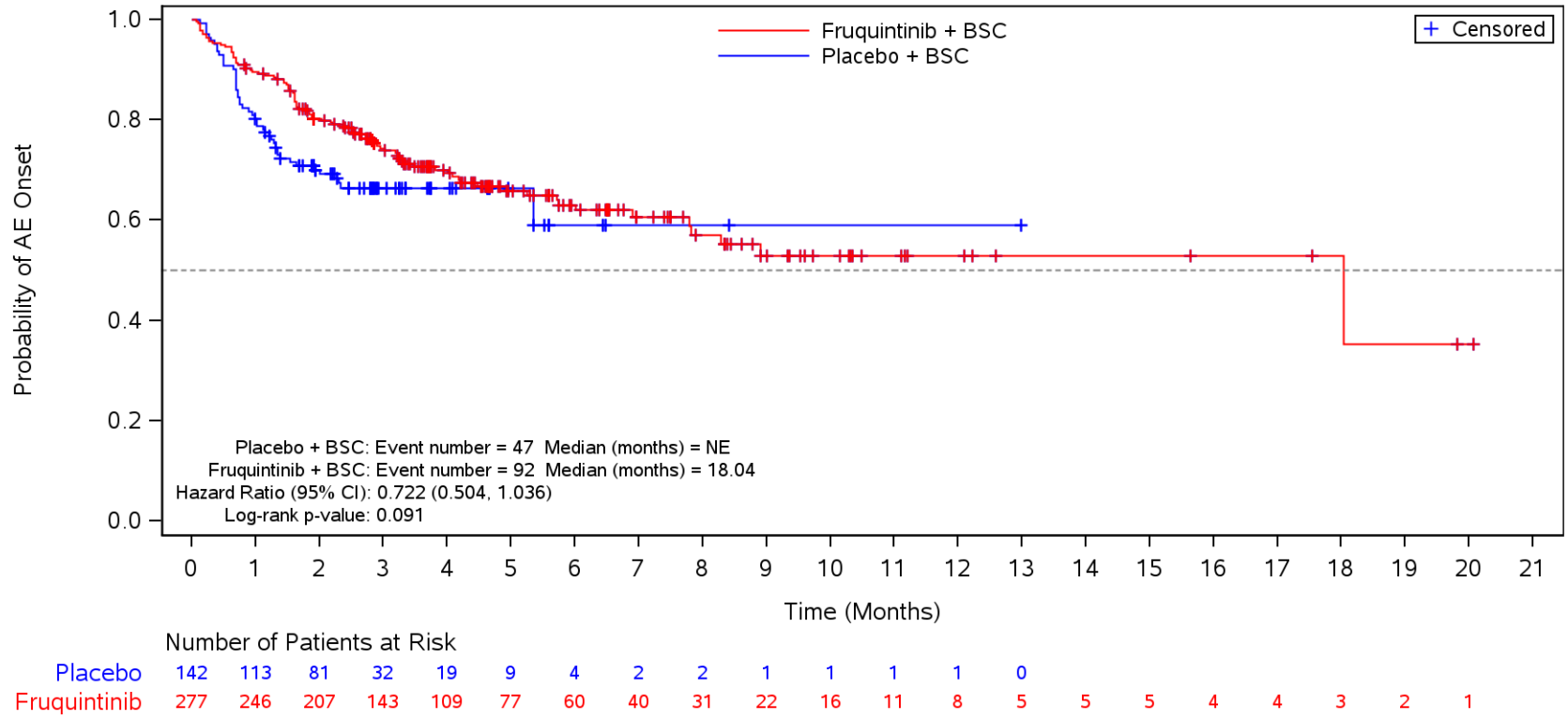
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
Serious TEAE
Yes



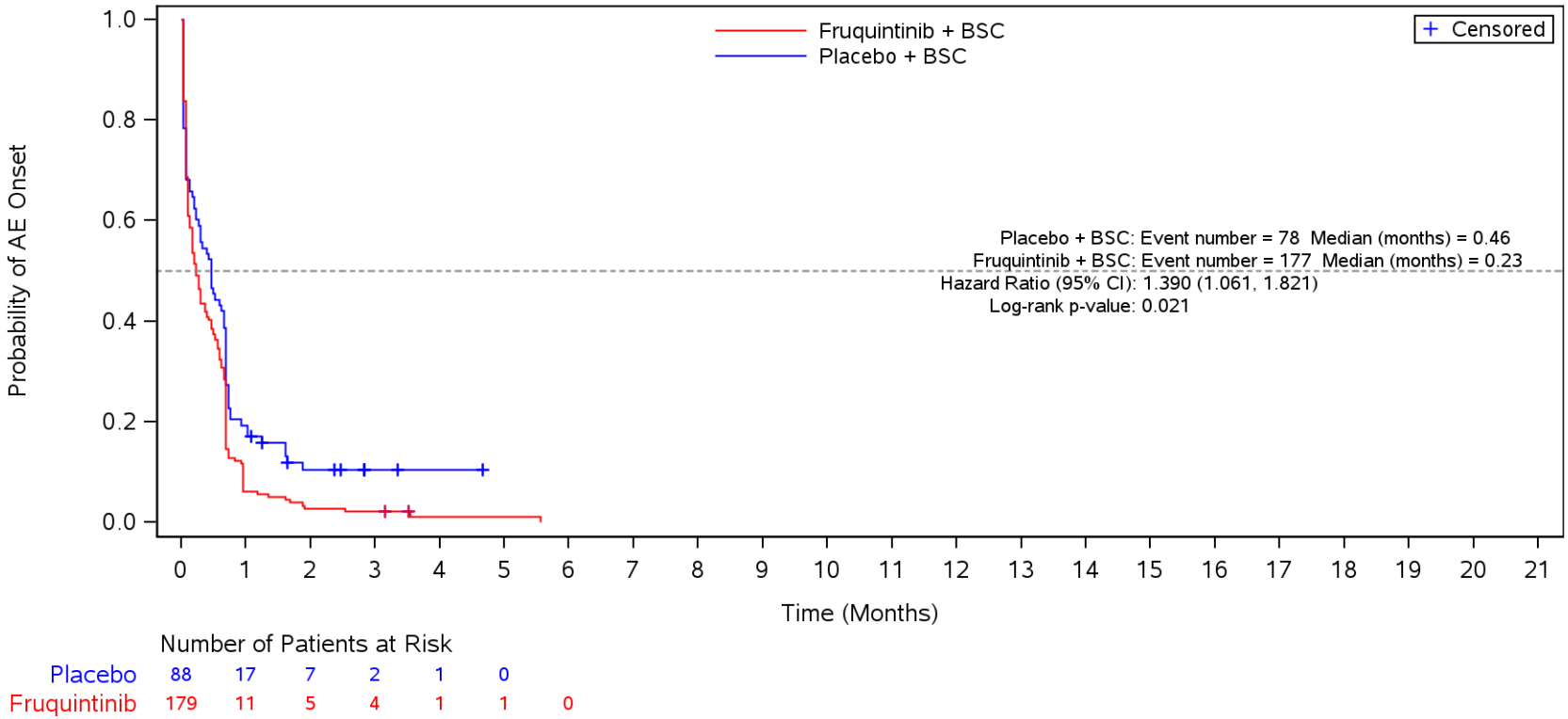
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
Serious TEAE
No



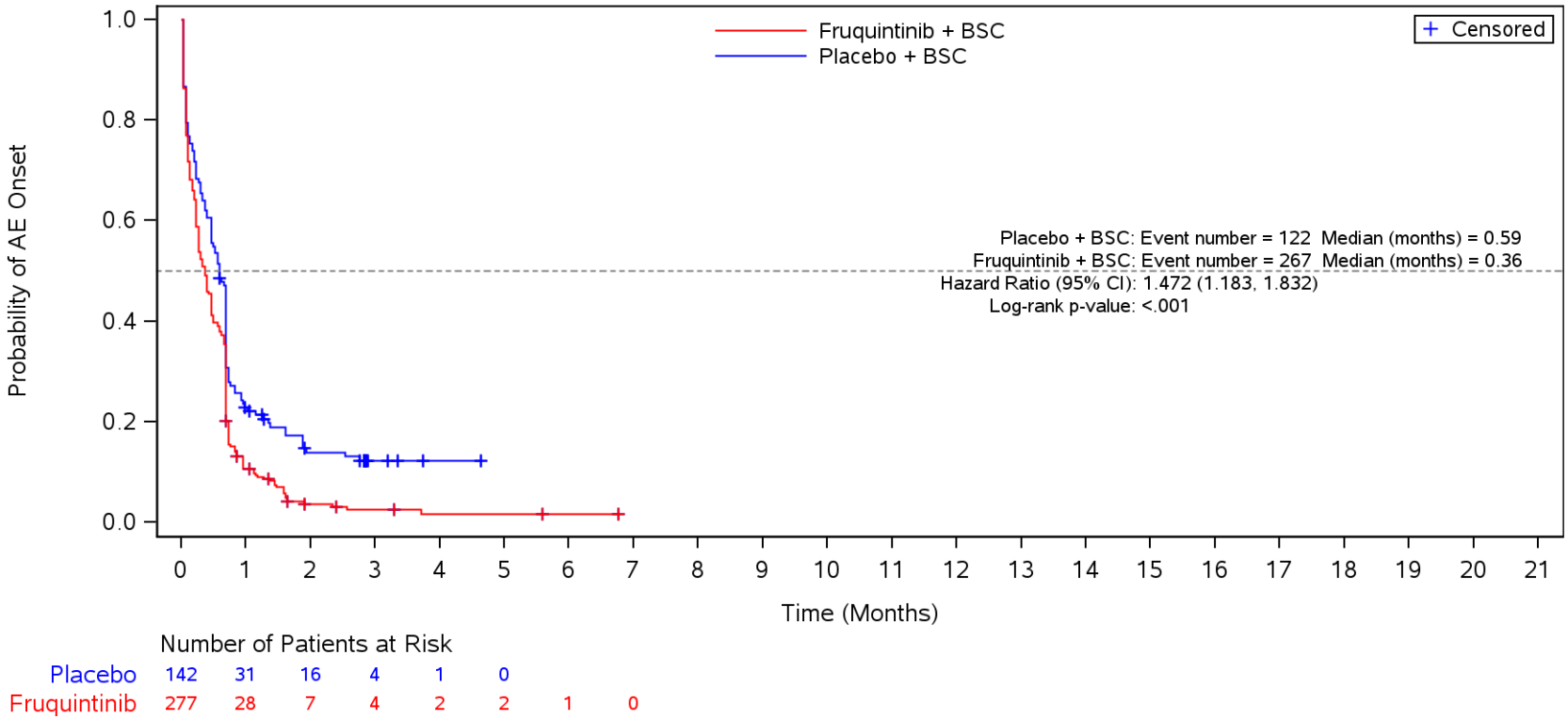
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
TEAE ≤ CTCAE Grade 2
Yes



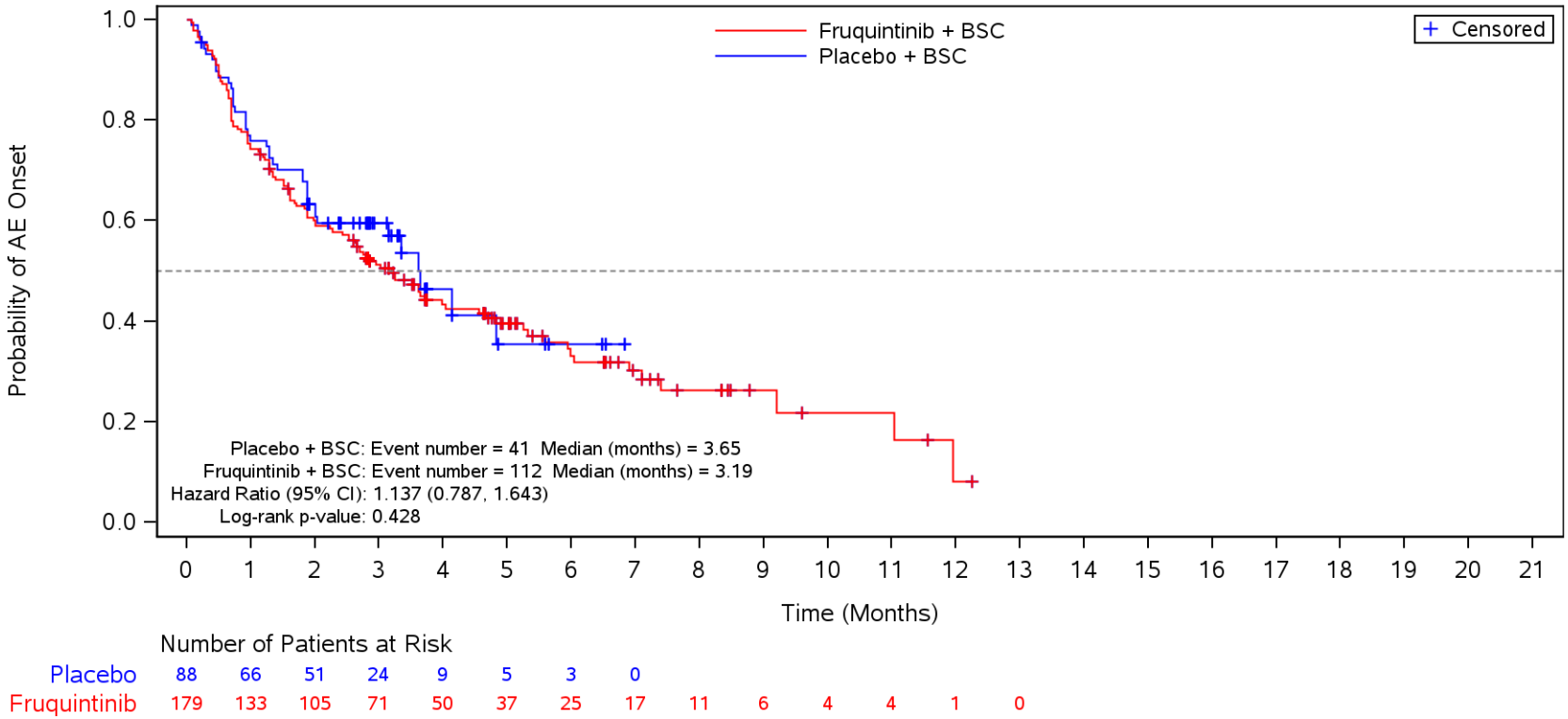
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
TEAE ≤ CTCAE Grade 2
No



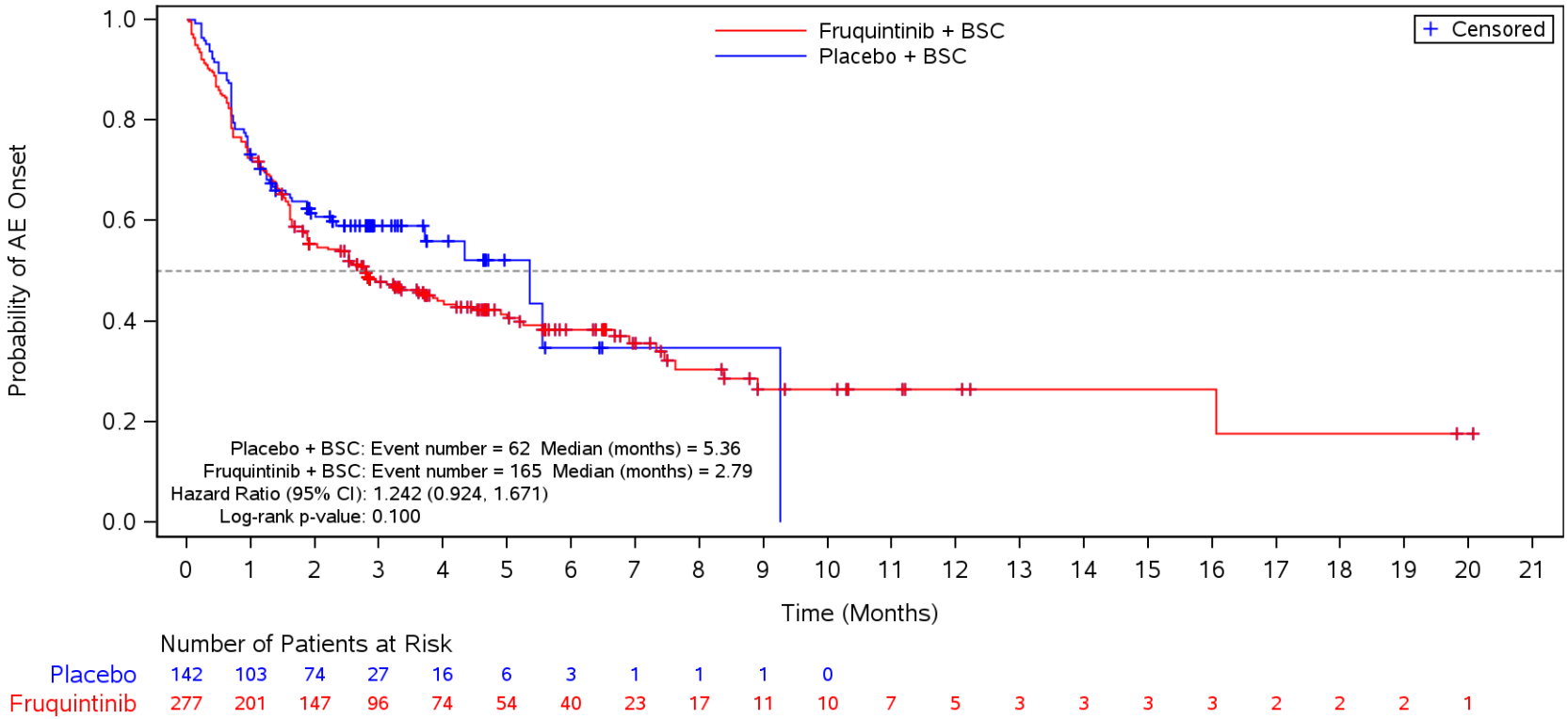
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3
Yes



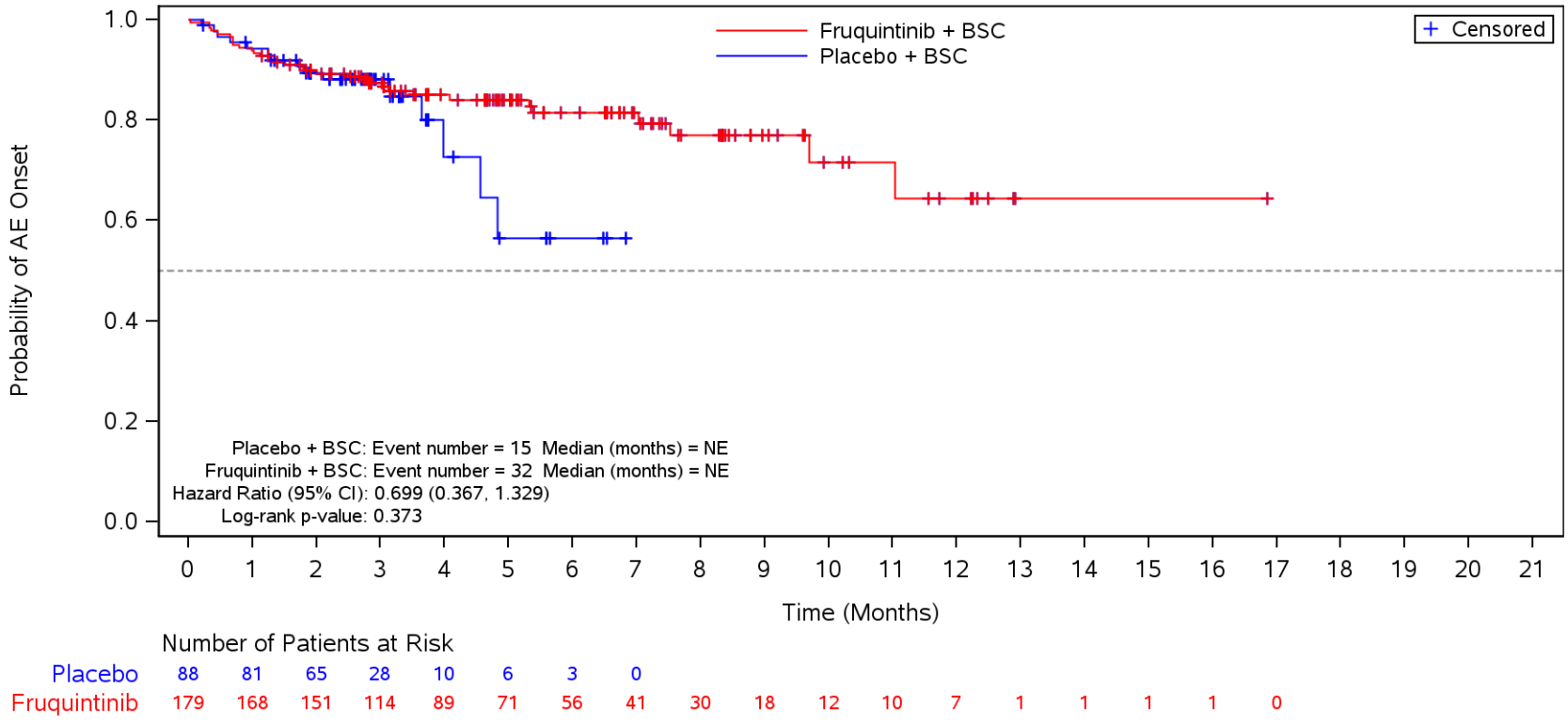
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
TEAE ≥ CTCAE Grade 3
No



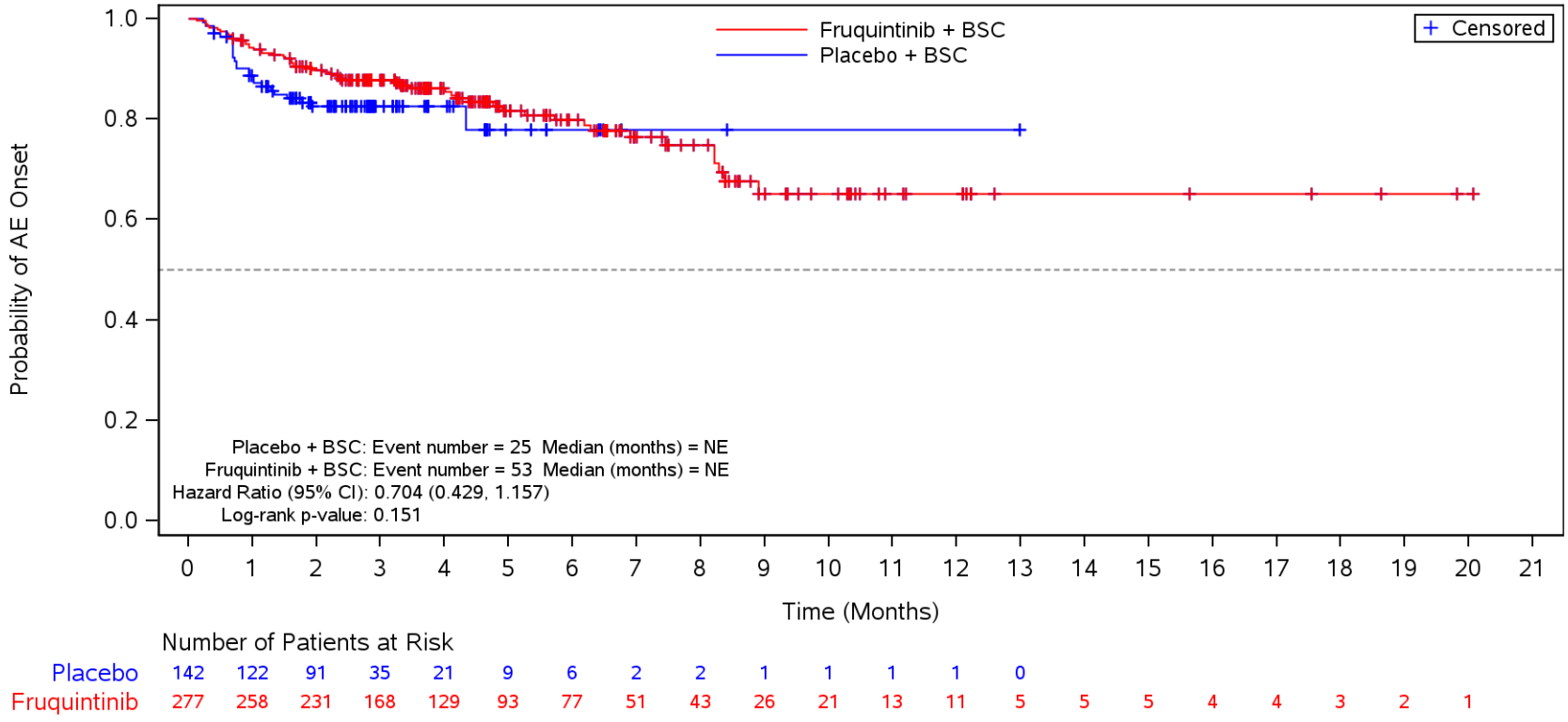
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
Discontinuation due to TEAE
Yes



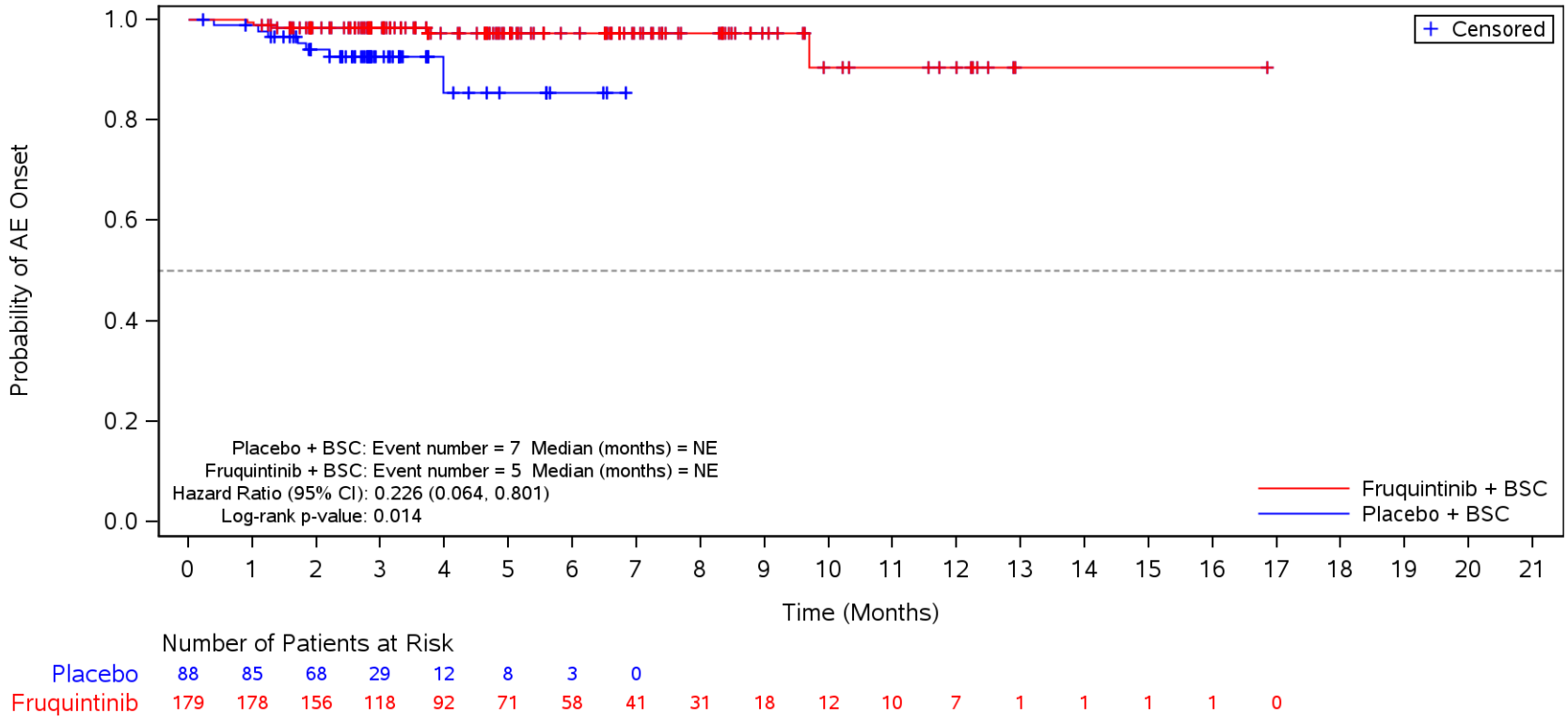
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
Discontinuation due to TEAE
No



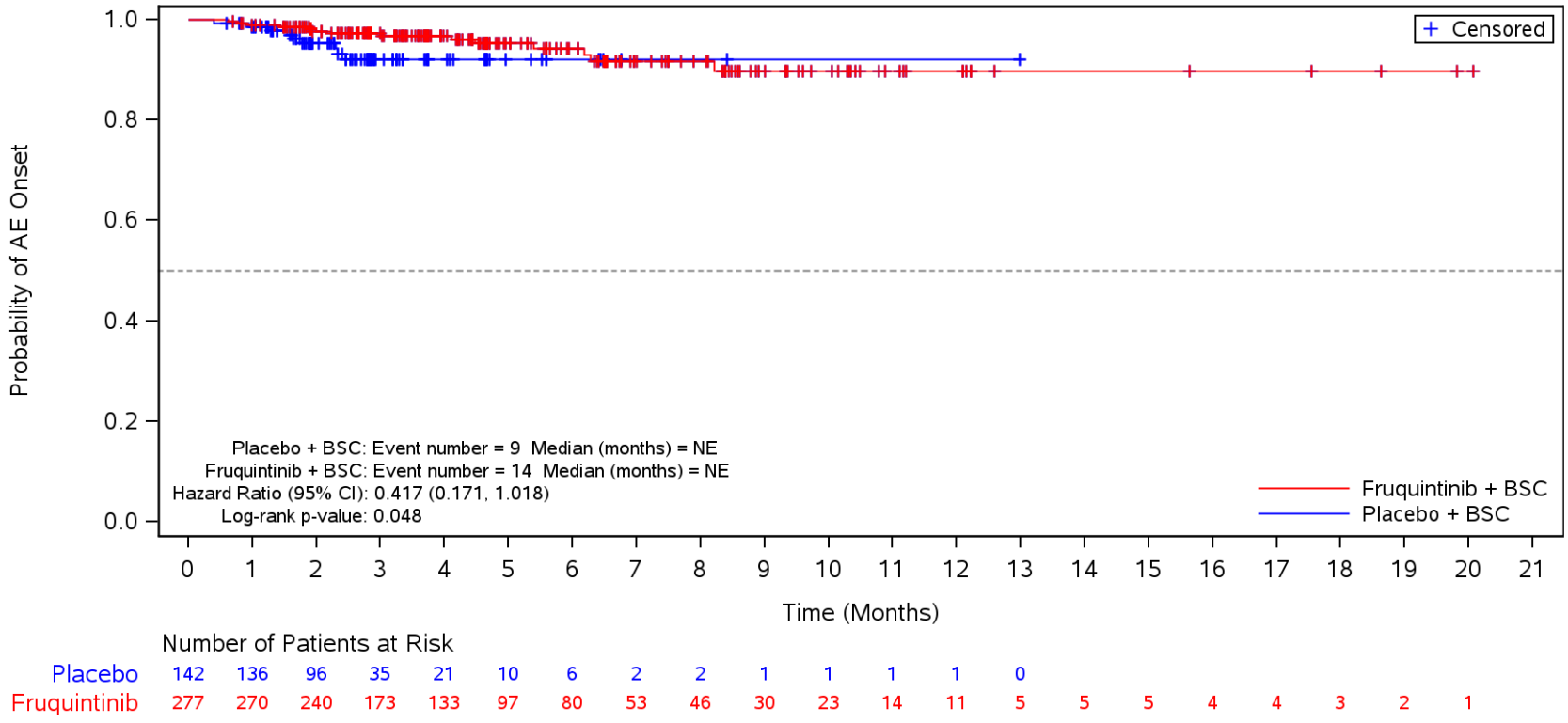
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3M
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior EGFRi
Safety Population
Deaths (Grade 5 TEAEs)
Yes



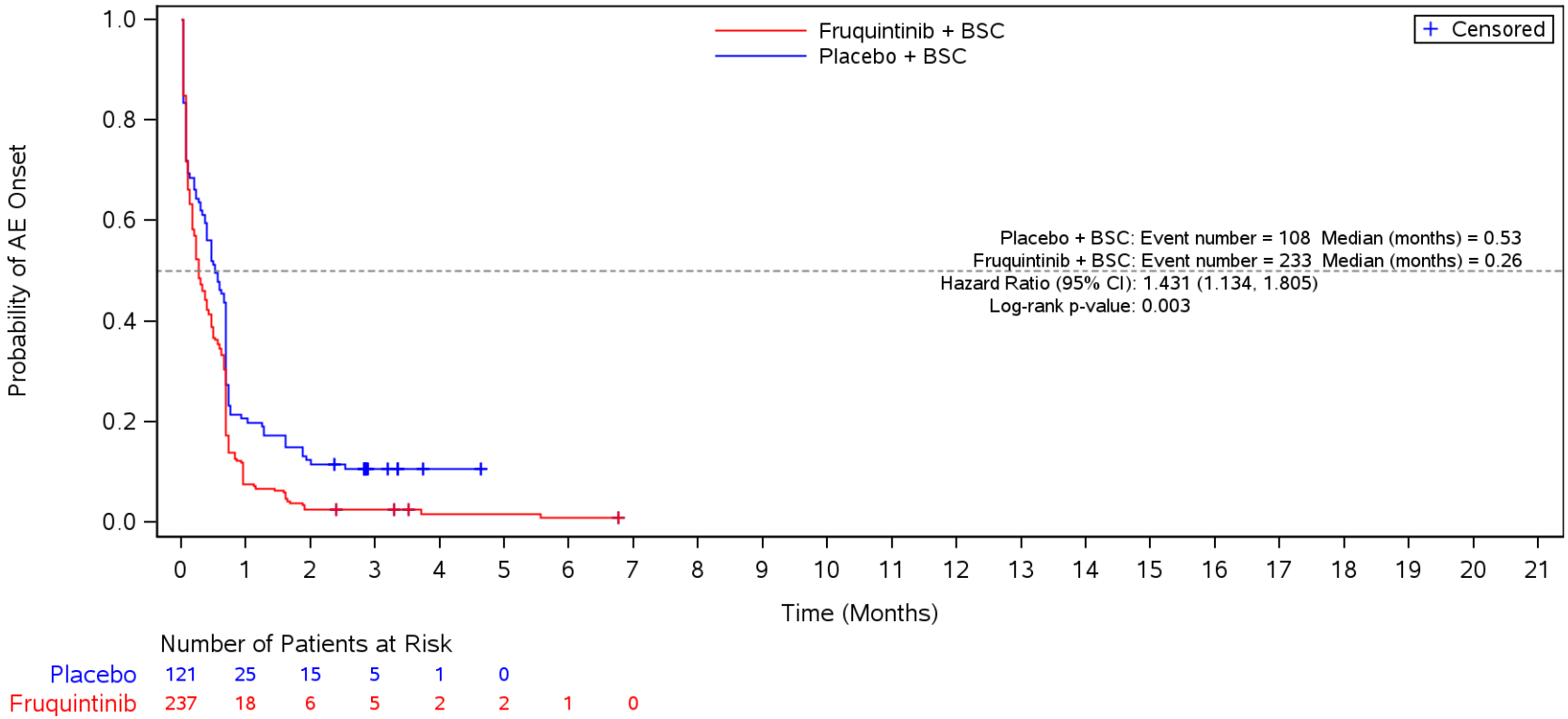
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE
TAS-102



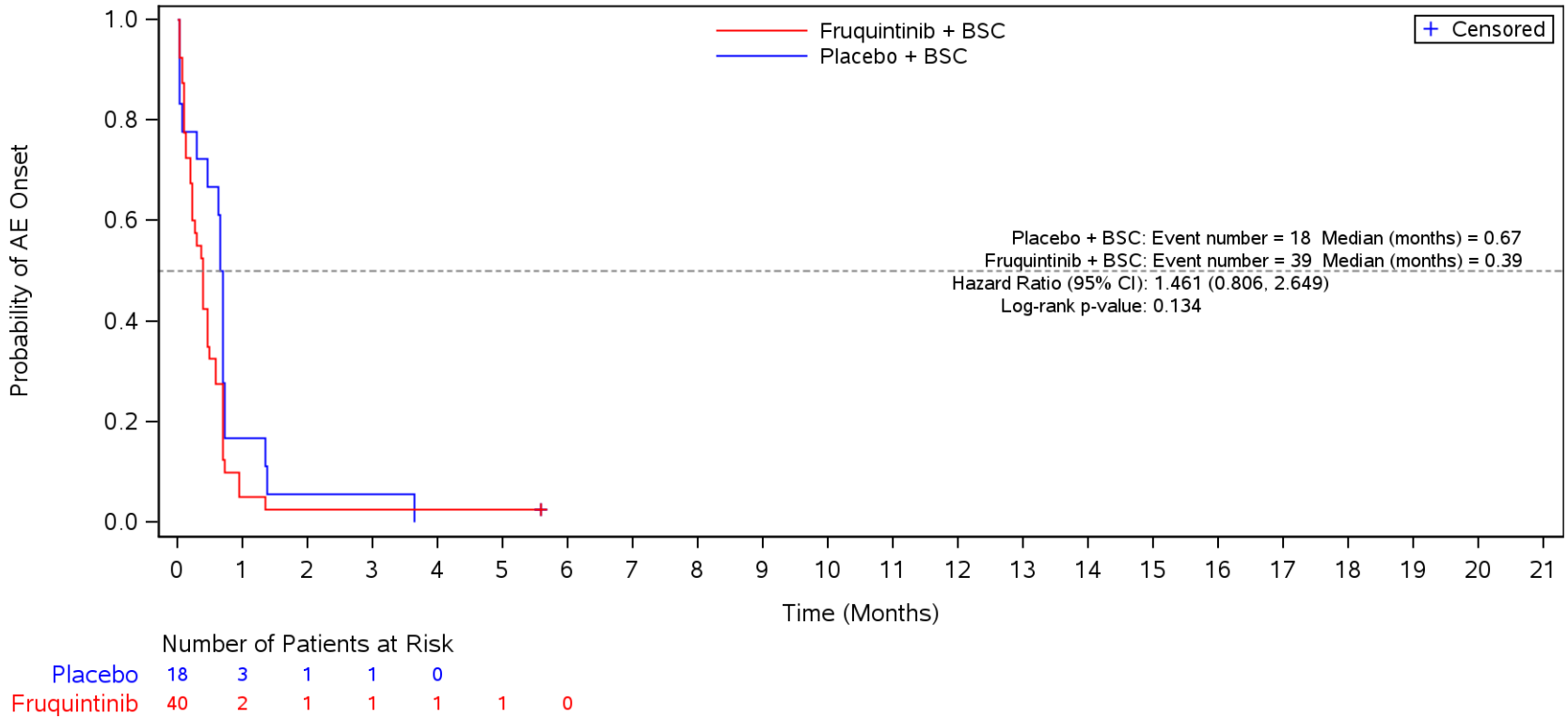
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE
TAS-102



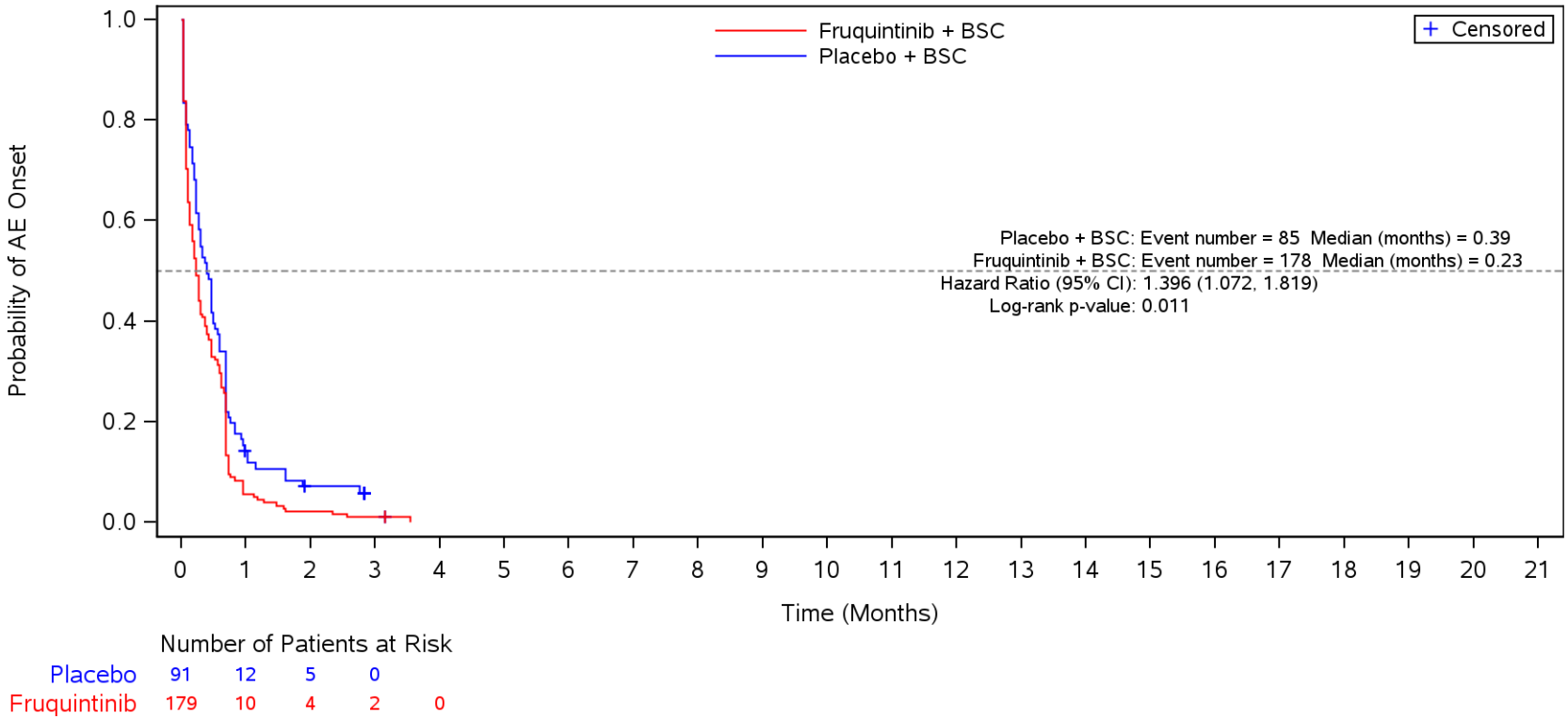
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE
Regorafenib



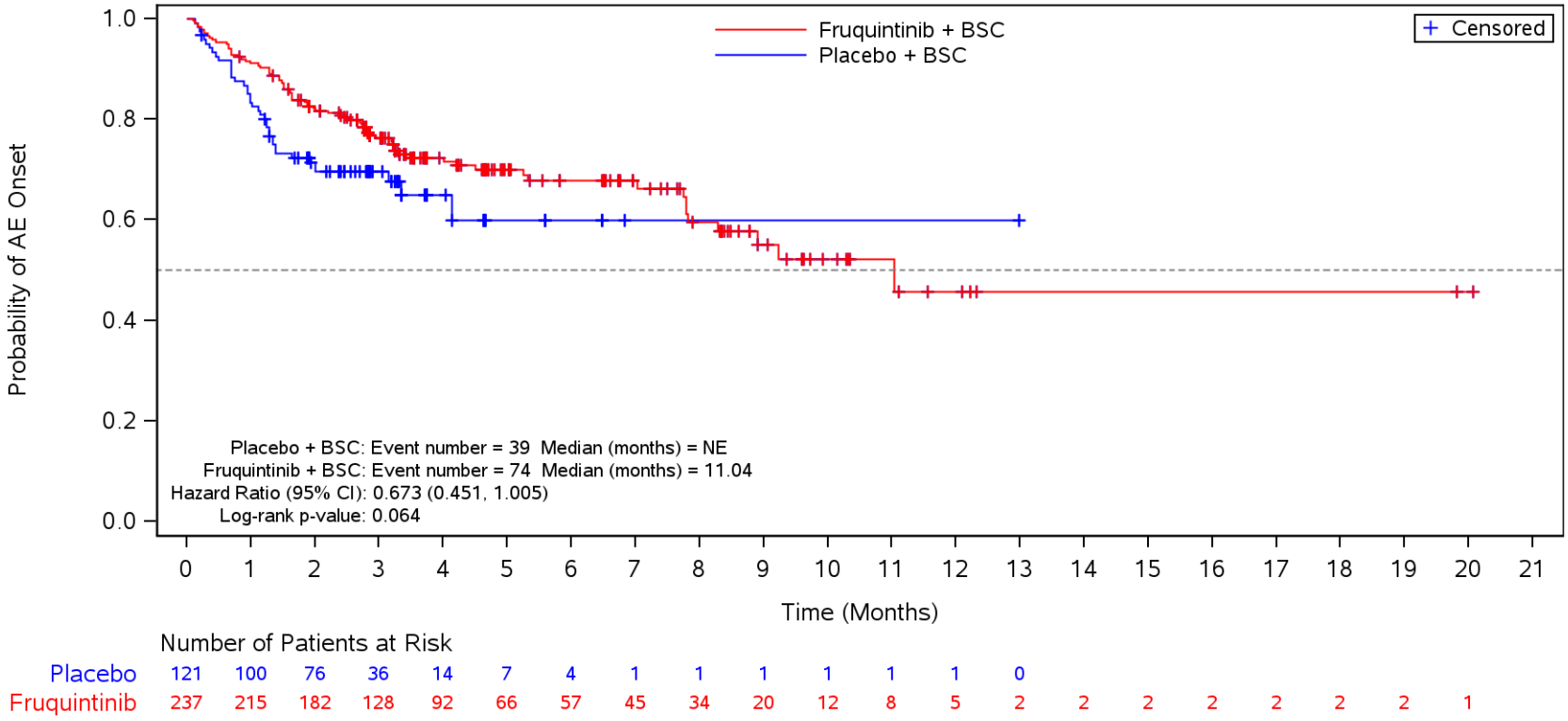
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE
TAS-102 and Regorafenib



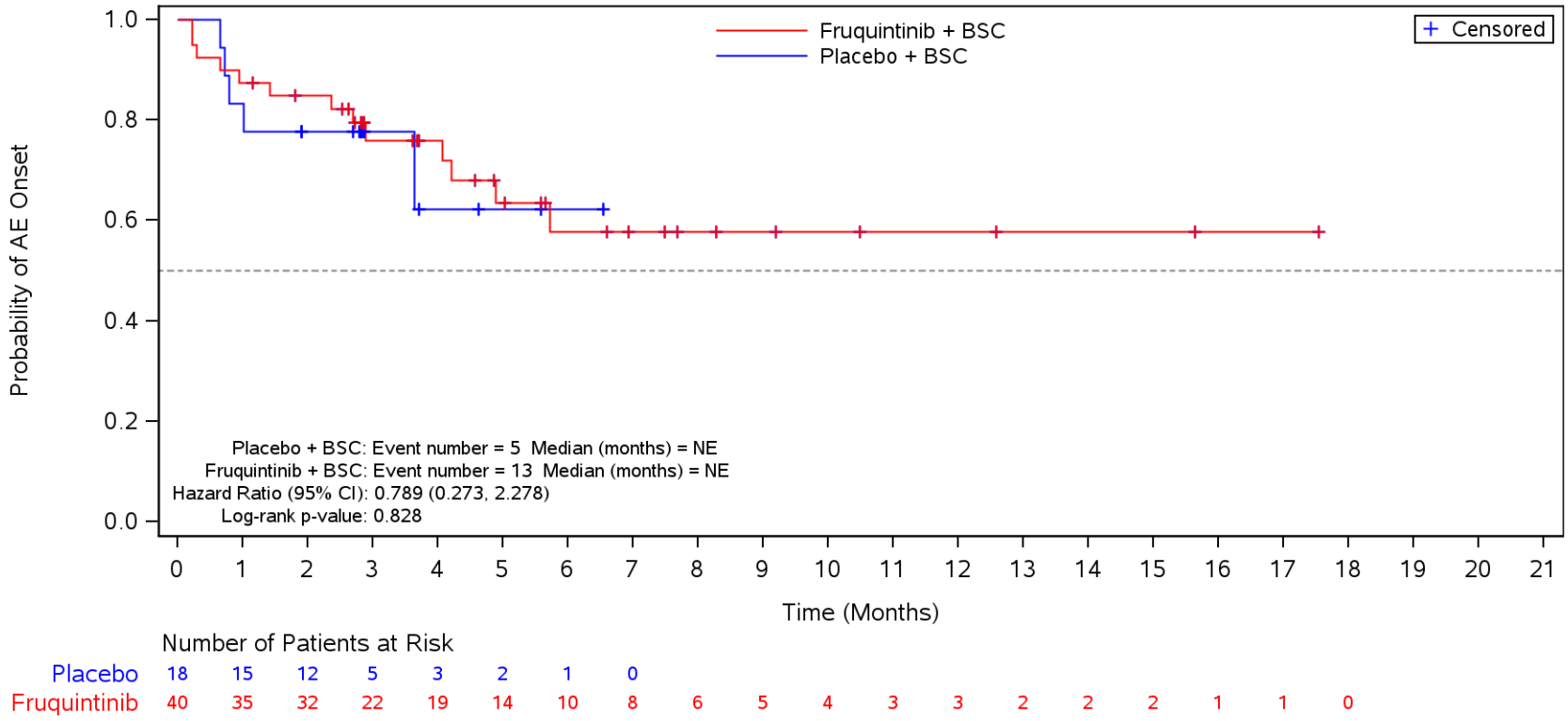
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
Serious TEAE
TAS-102



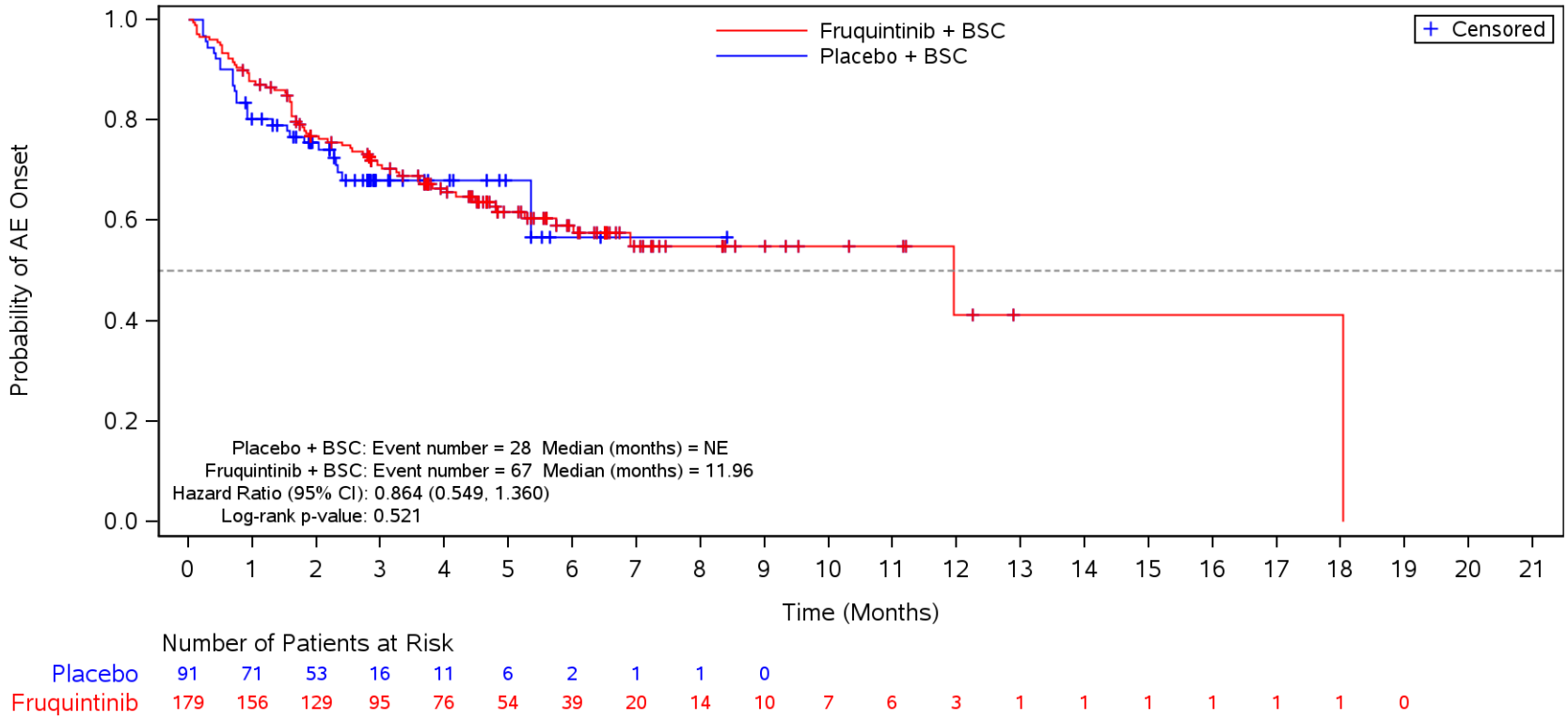
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
Serious TEAE
Regorafenib



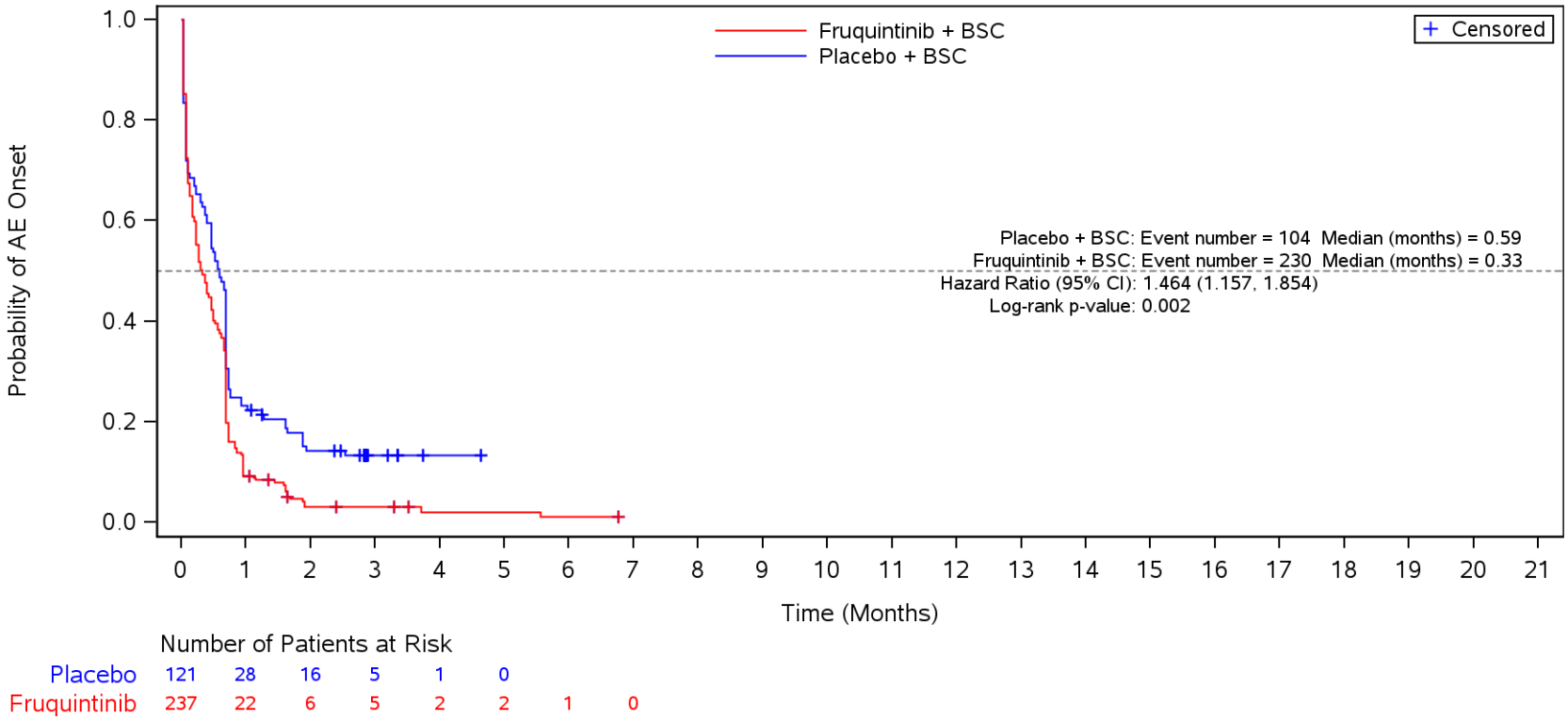
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
Serious TEAE
TAS-102 and Regorafenib



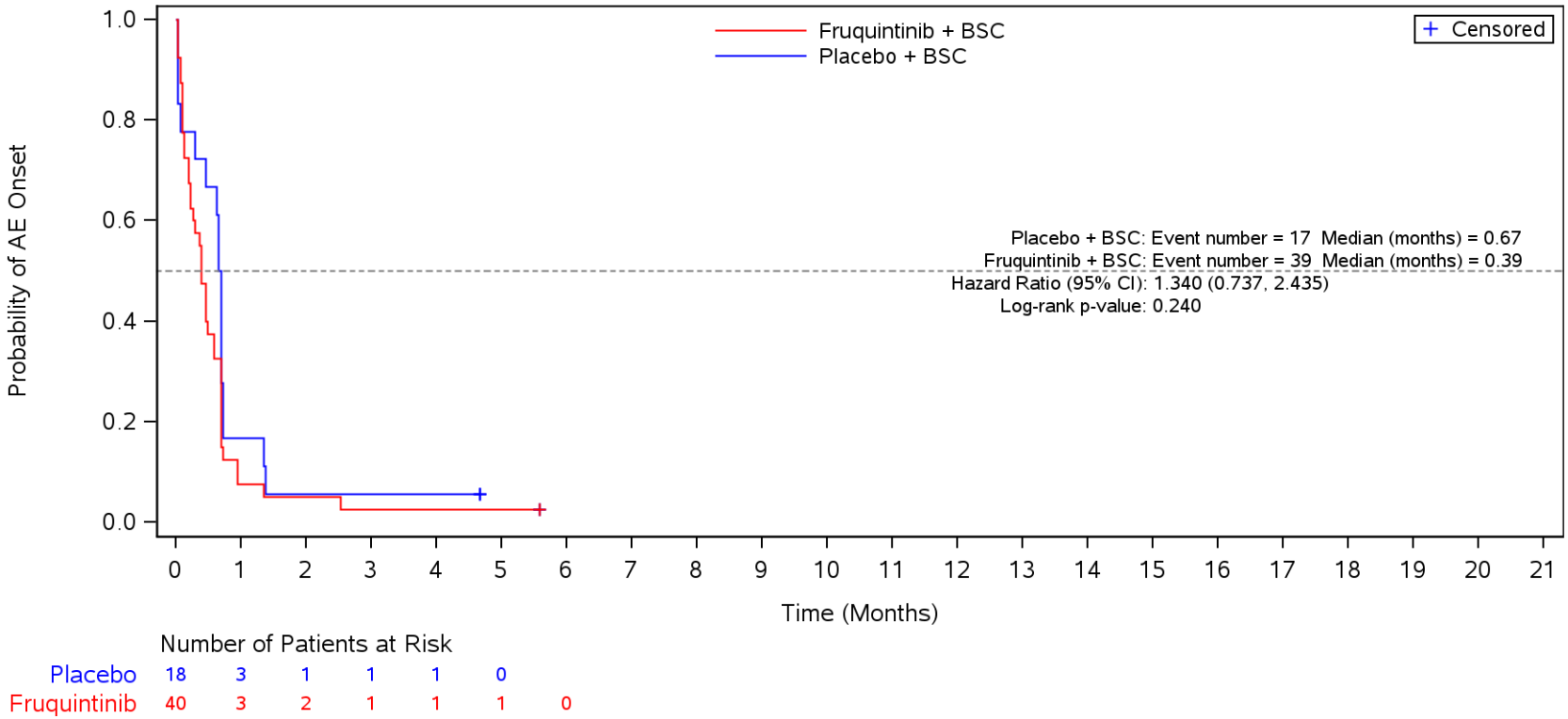
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≤ CTCAE Grade 2
TAS-102



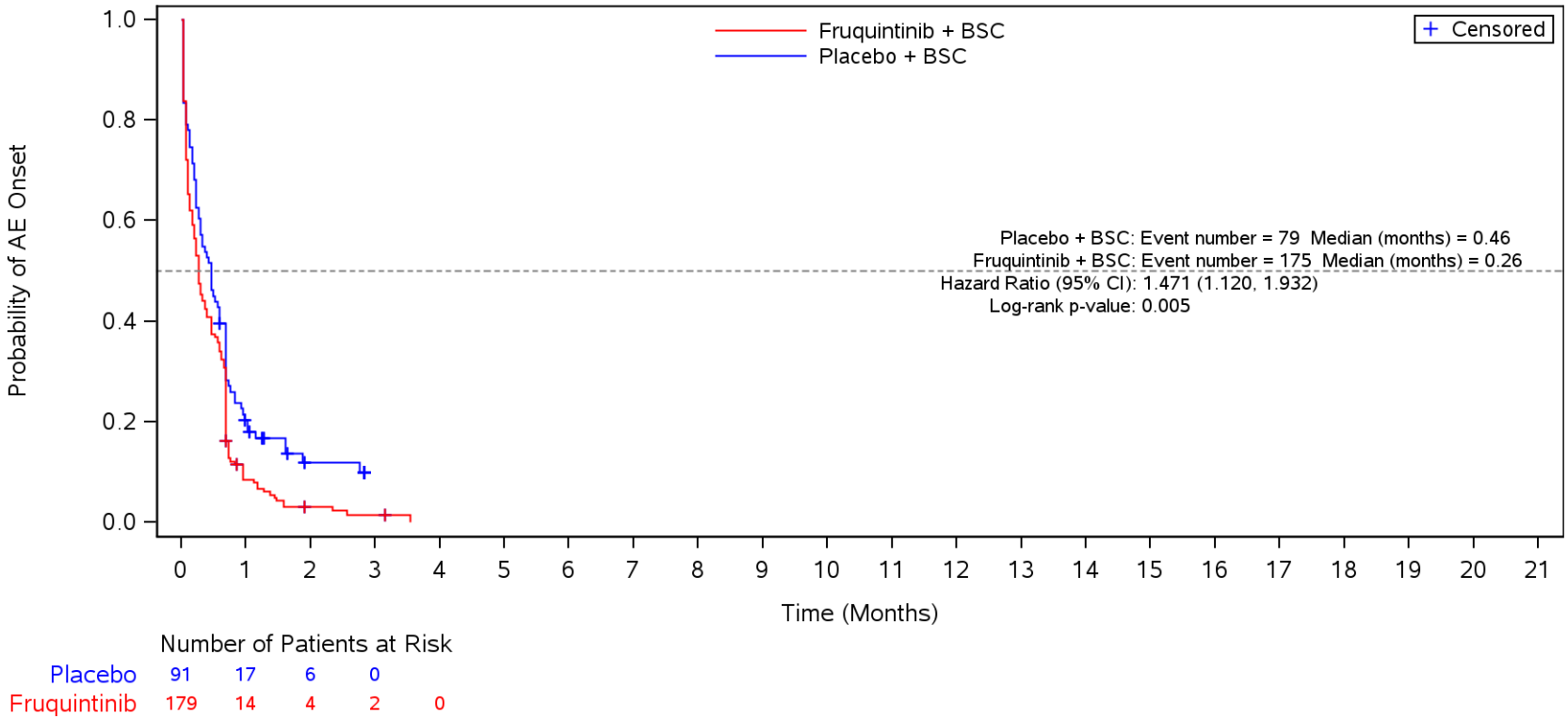
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≤ CTCAE Grade 2
Regorafenib



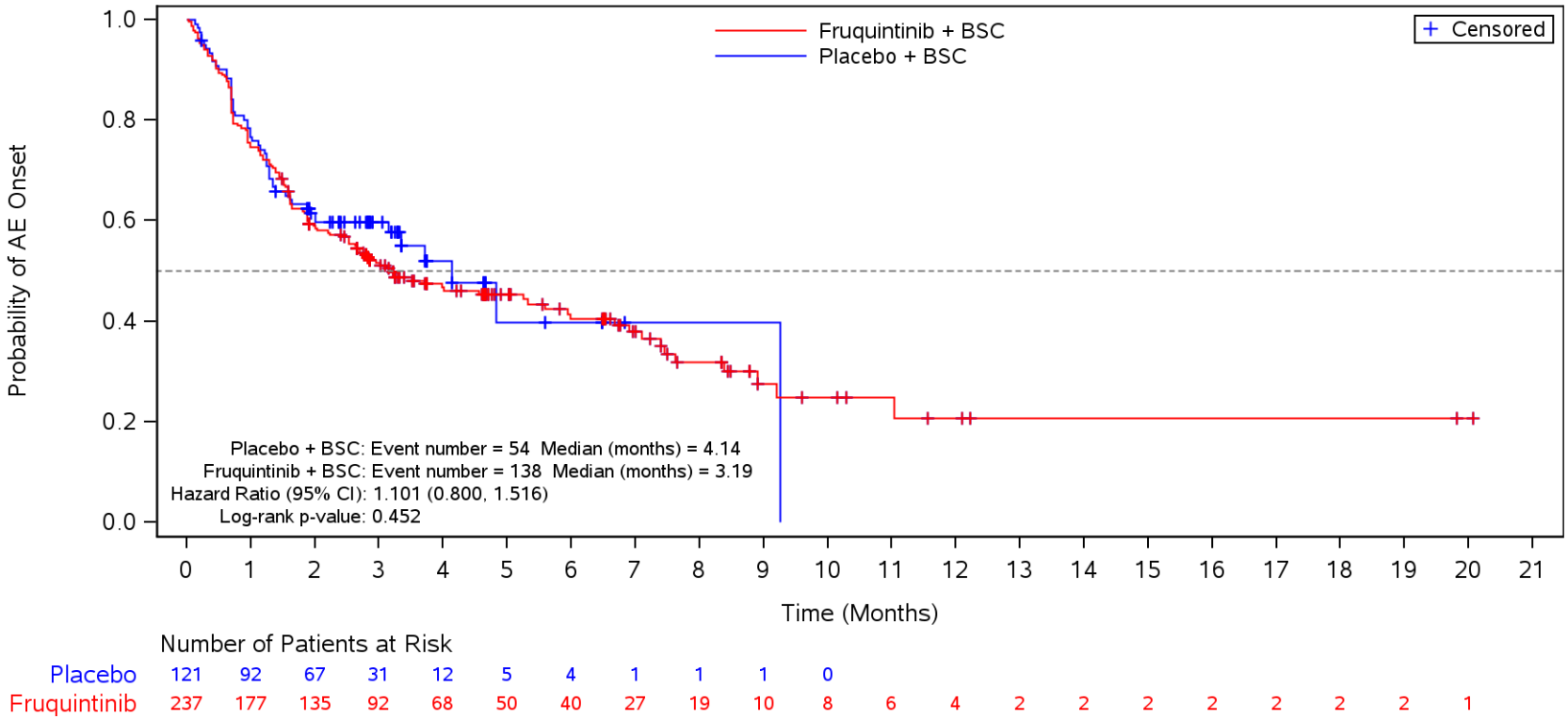
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≤ CTCAE Grade 2
TAS-102 and Regorafenib



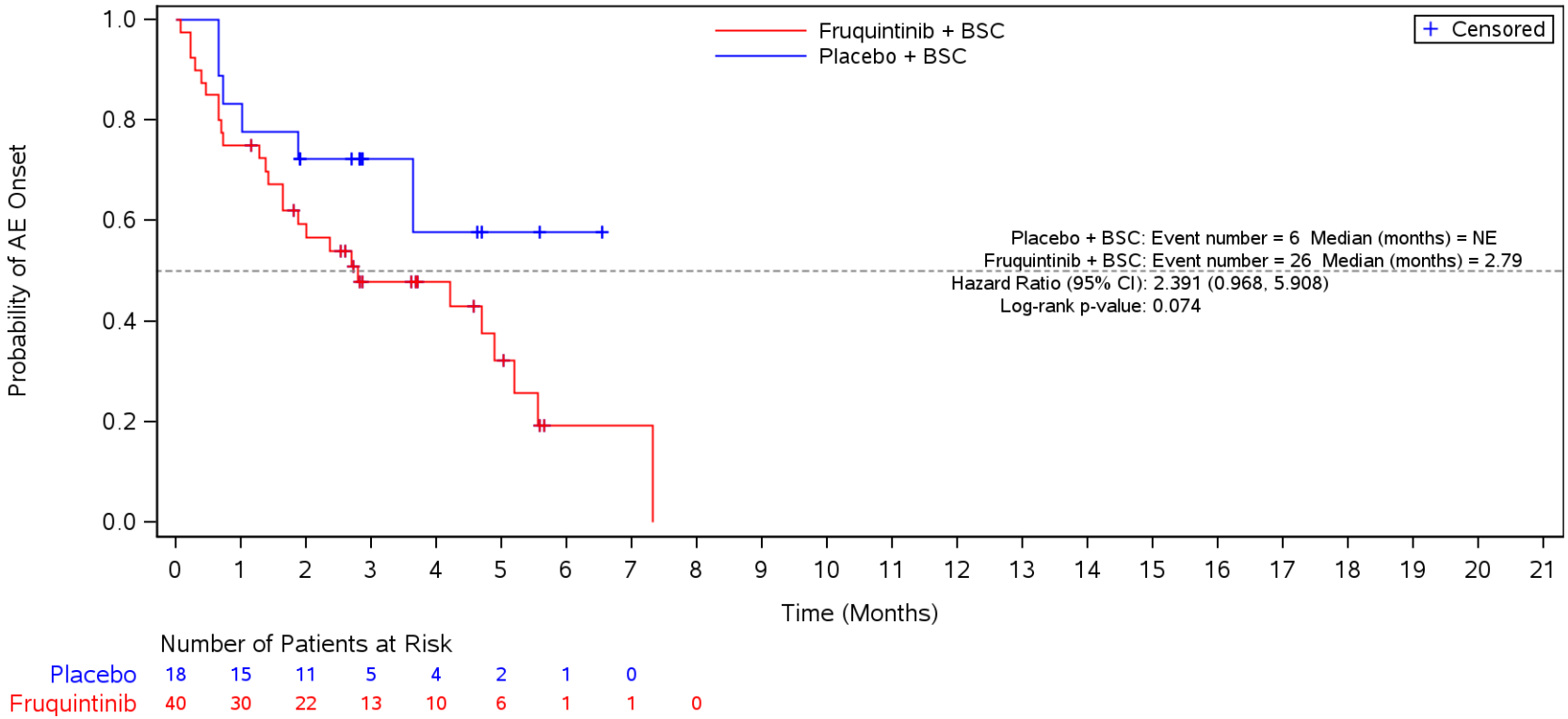
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3
TAS-102



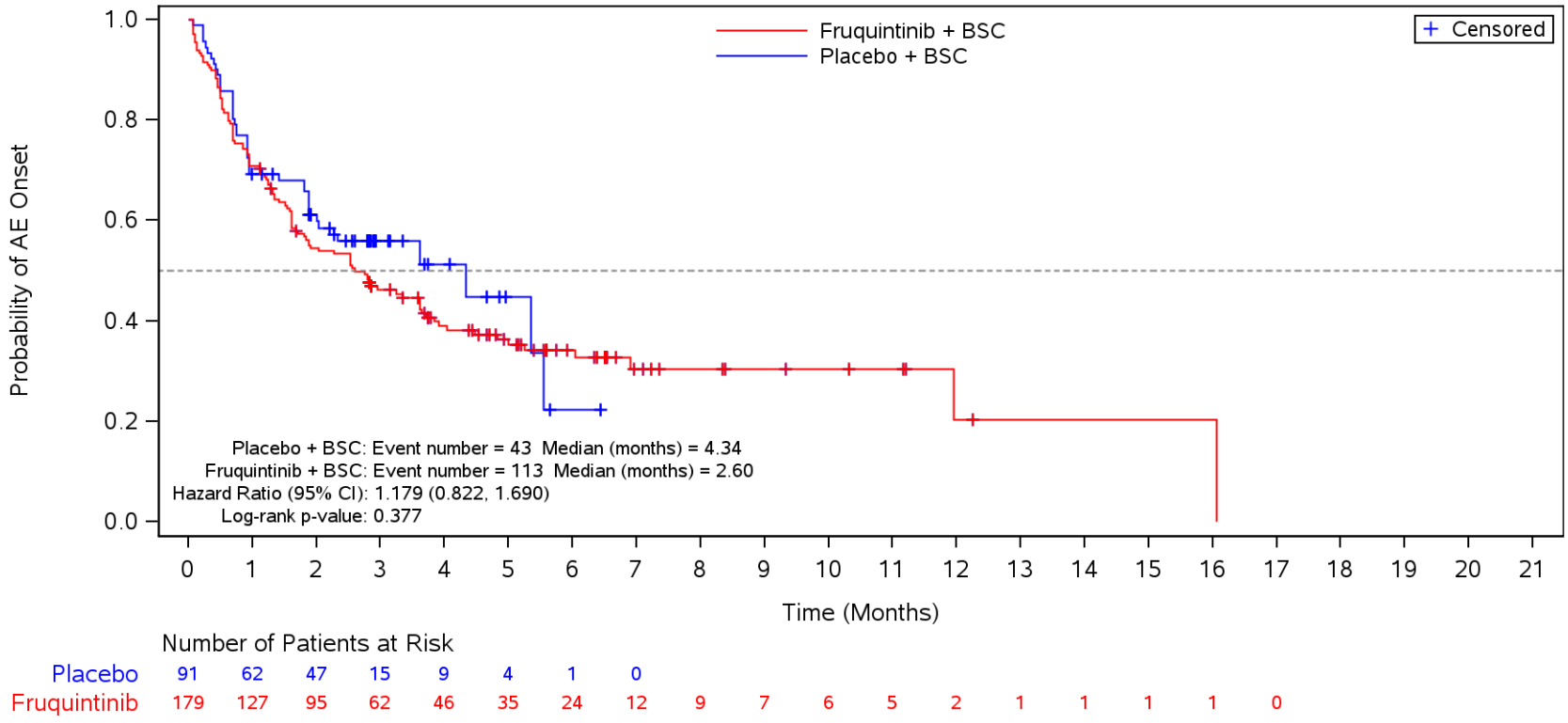
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3
Regorafenib



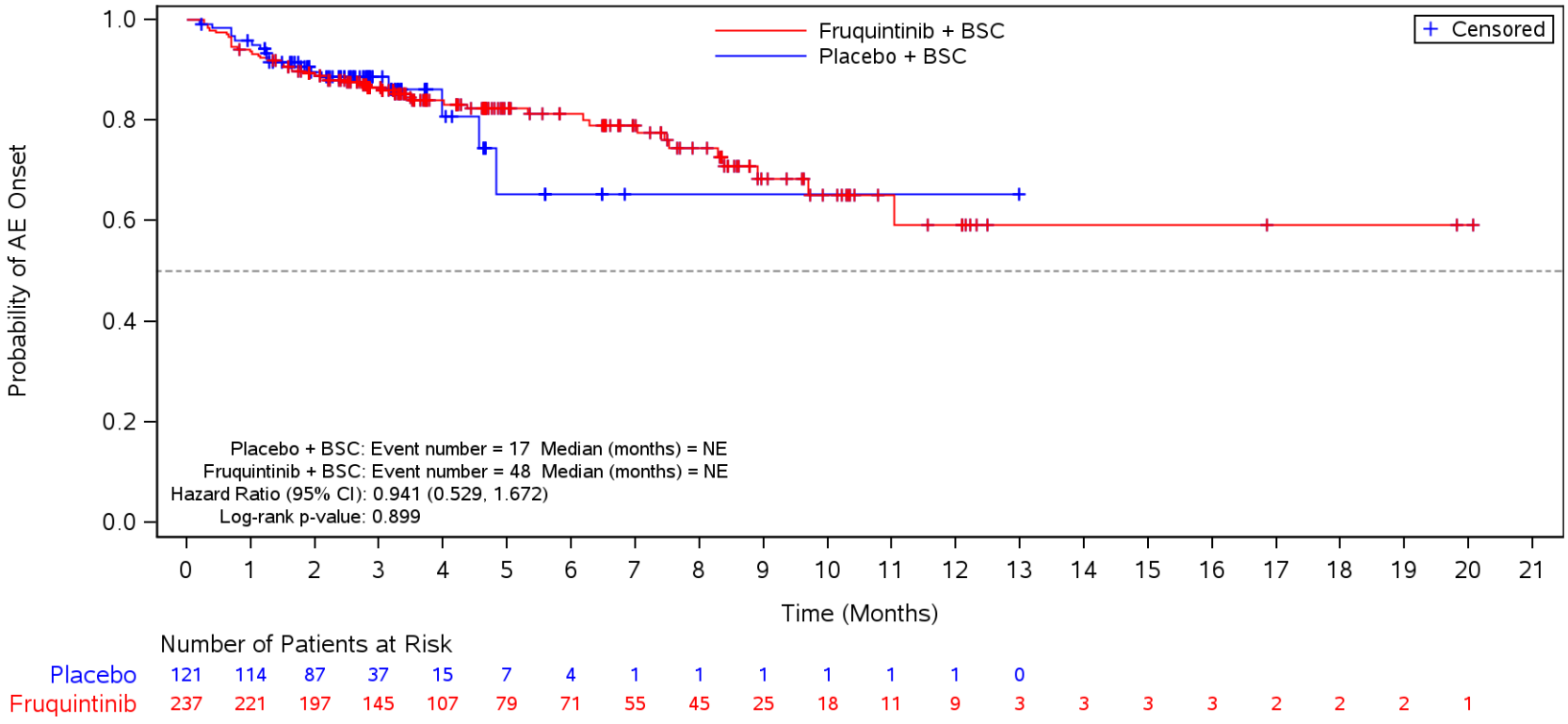
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
TEAE ≥ CTCAE Grade 3
TAS-102 and Regorafenib



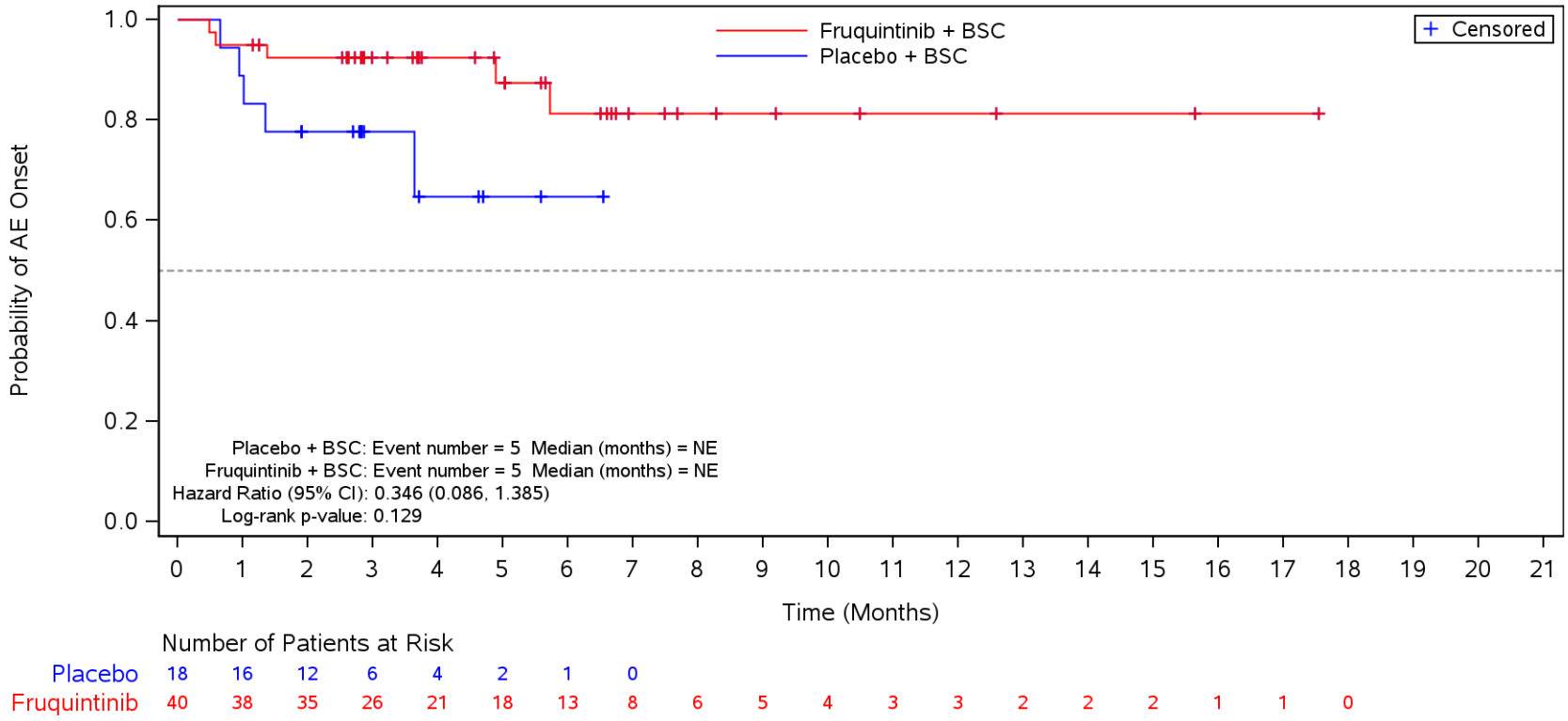
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
Discontinuation due to TEAE
TAS-102



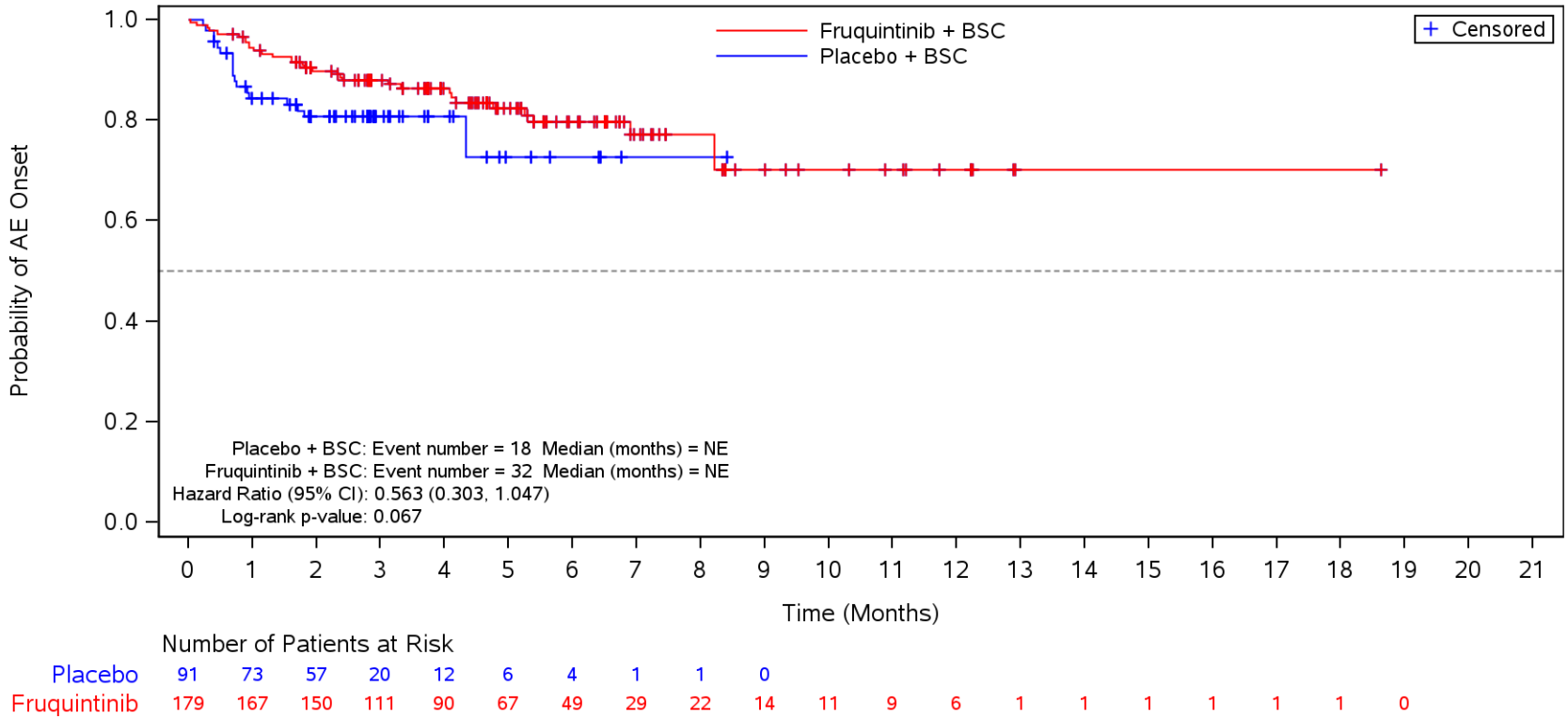
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
Discontinuation due to TEAE
Regorafenib



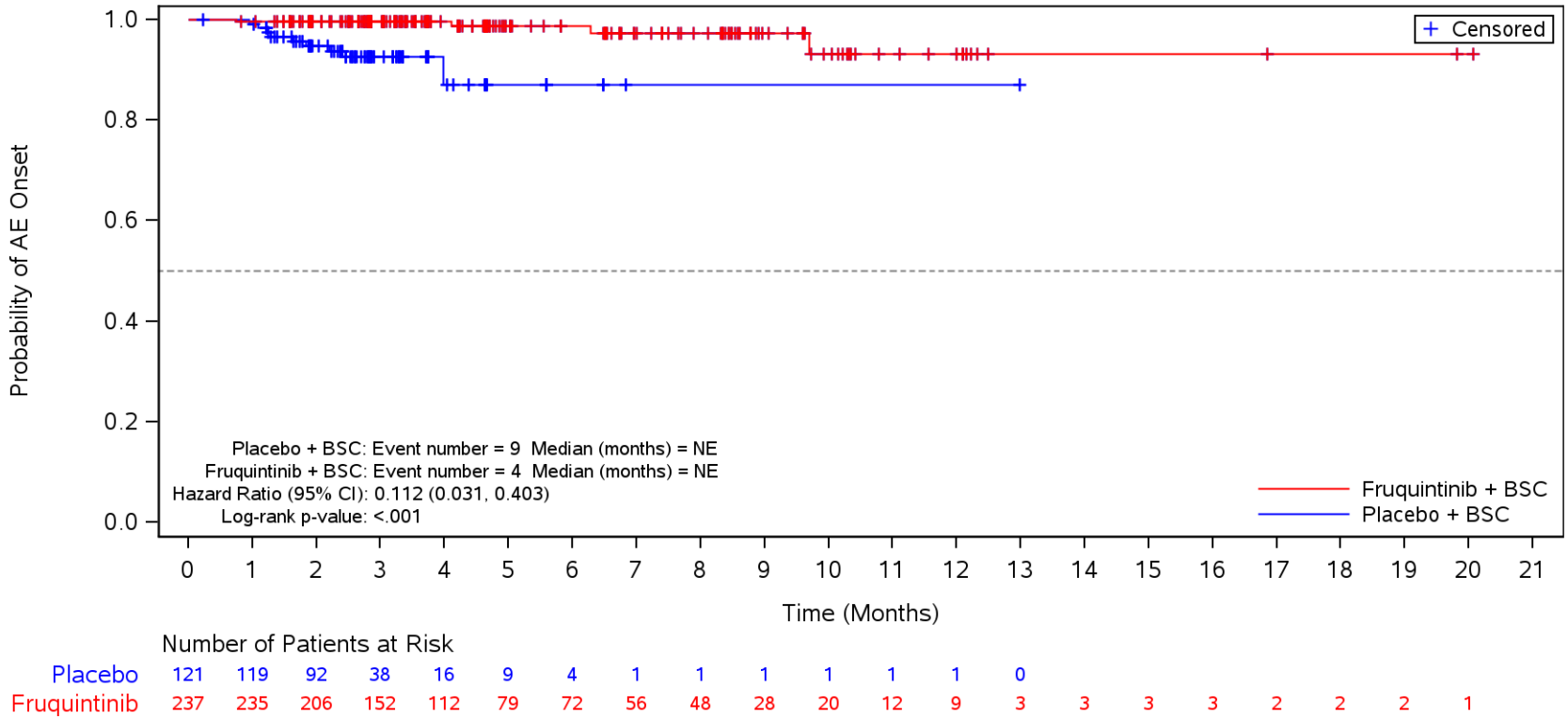
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
Discontinuation due to TEAE
TAS-102 and Regorafenib



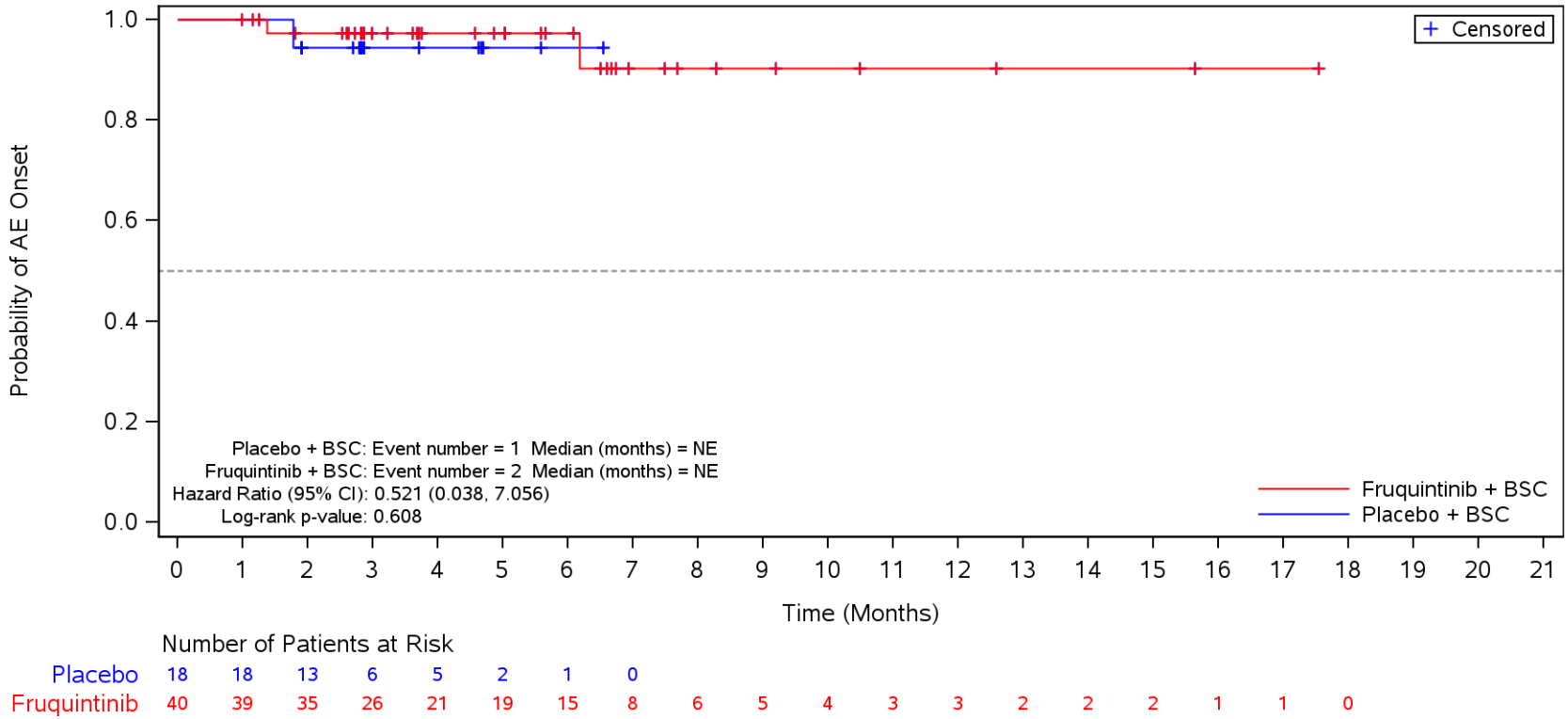
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
Deaths (Grade 5 TEAEs)
TAS-102



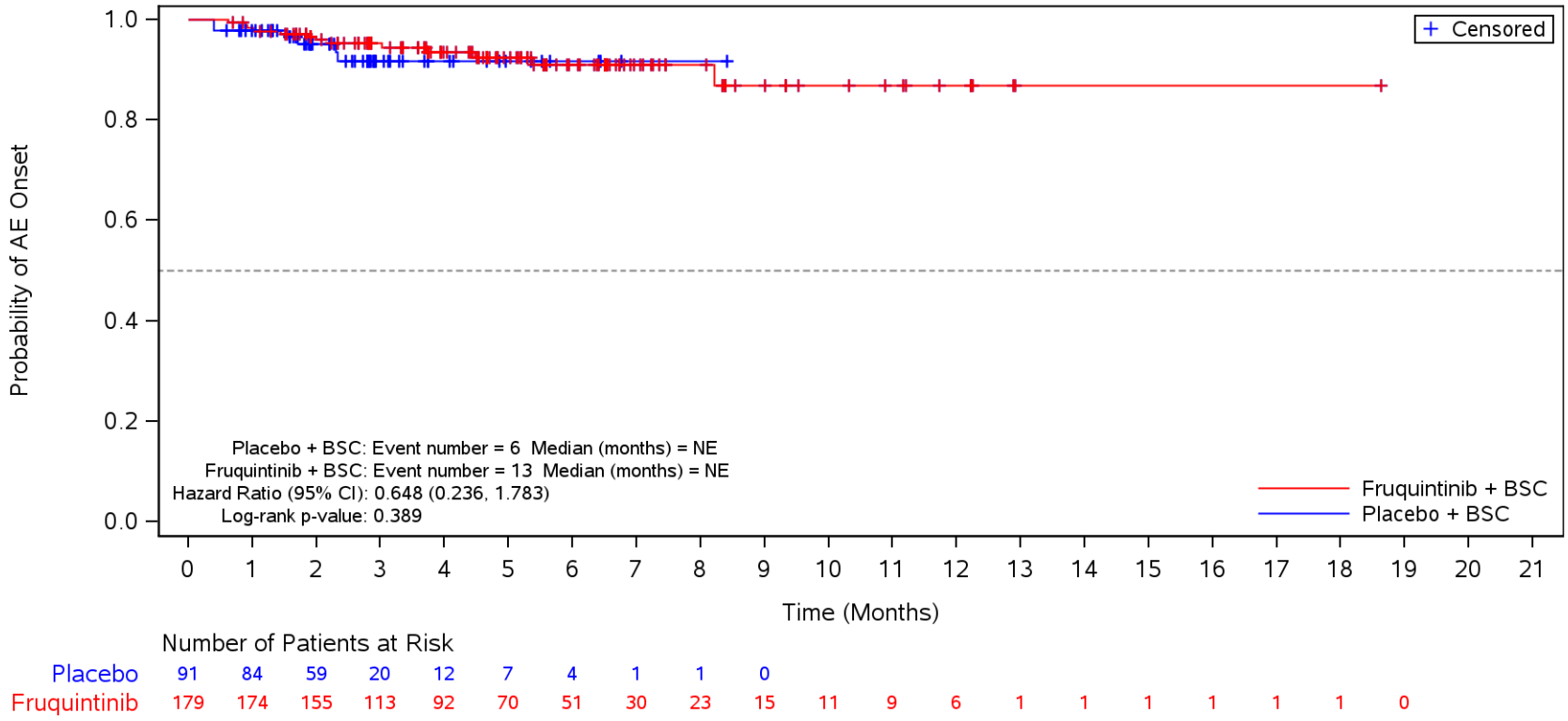
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3N
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior TAS-102 and/or Regorafenib
Safety Population
Deaths (Grade 5 TEAEs)
Regorafenib



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
TEAE
Yes

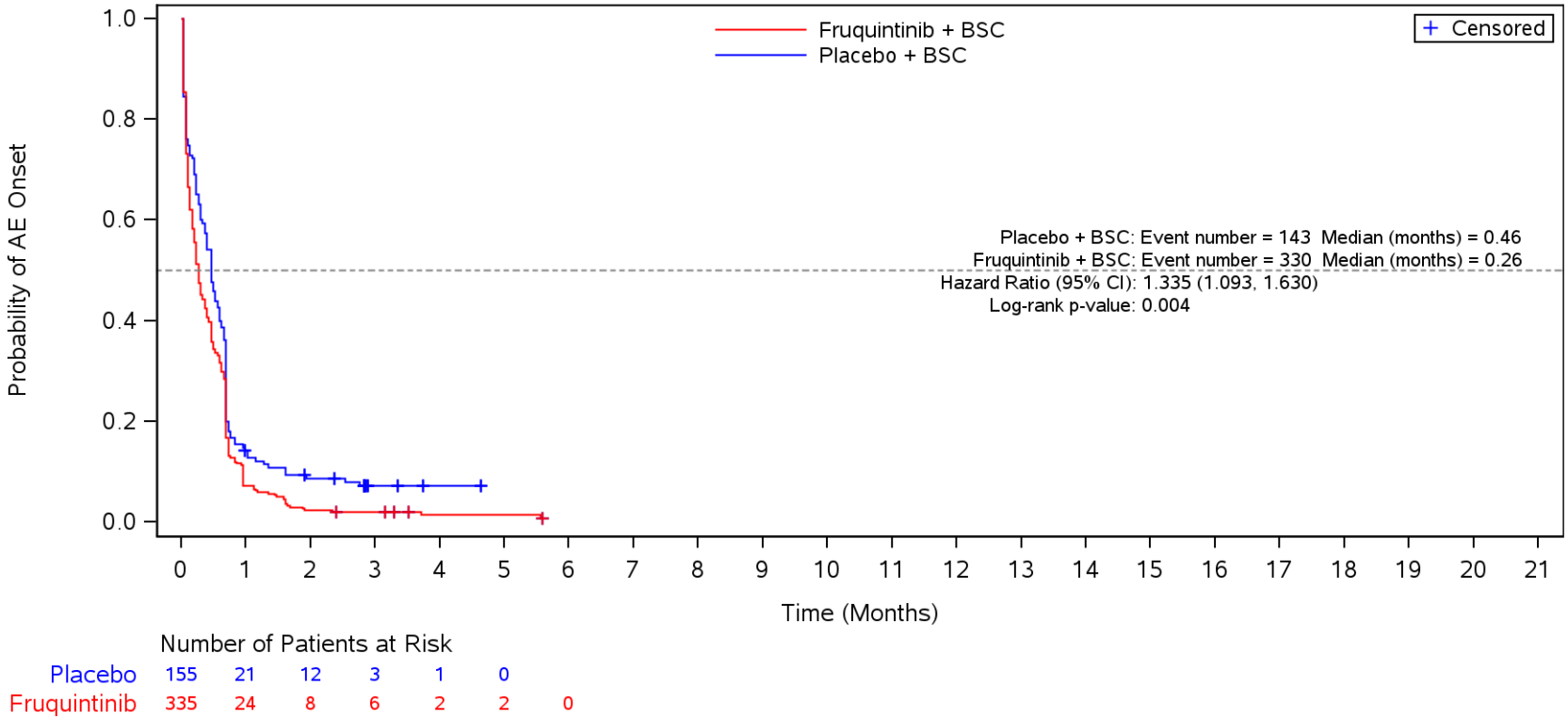


Number of Patients at Risk

Placebo	91	84	59	20	12	7	4	1	1	0										
Fruquintinib	179	174	155	113	92	70	51	30	23	15	11	9	6	1	1	1	1	1	1	0

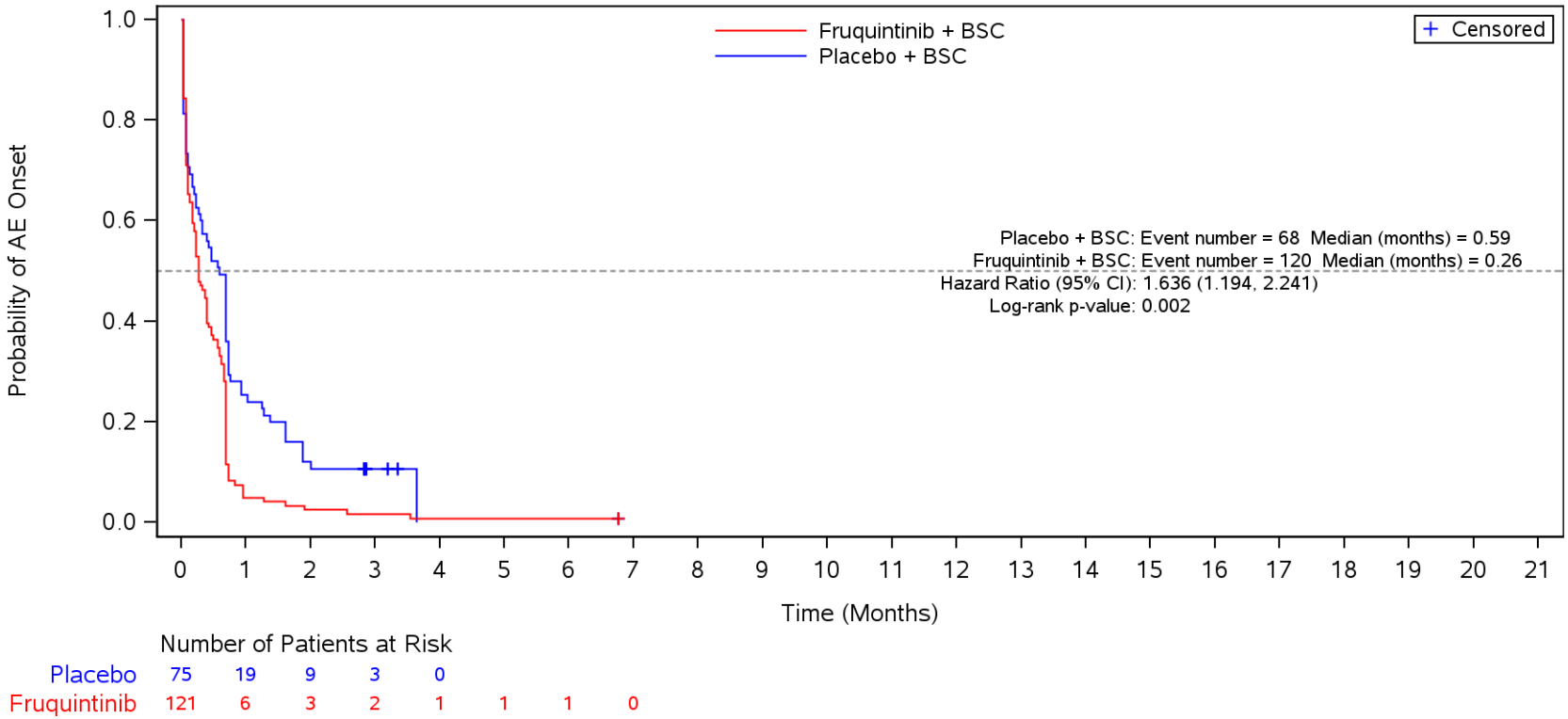
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
TEAE
Yes



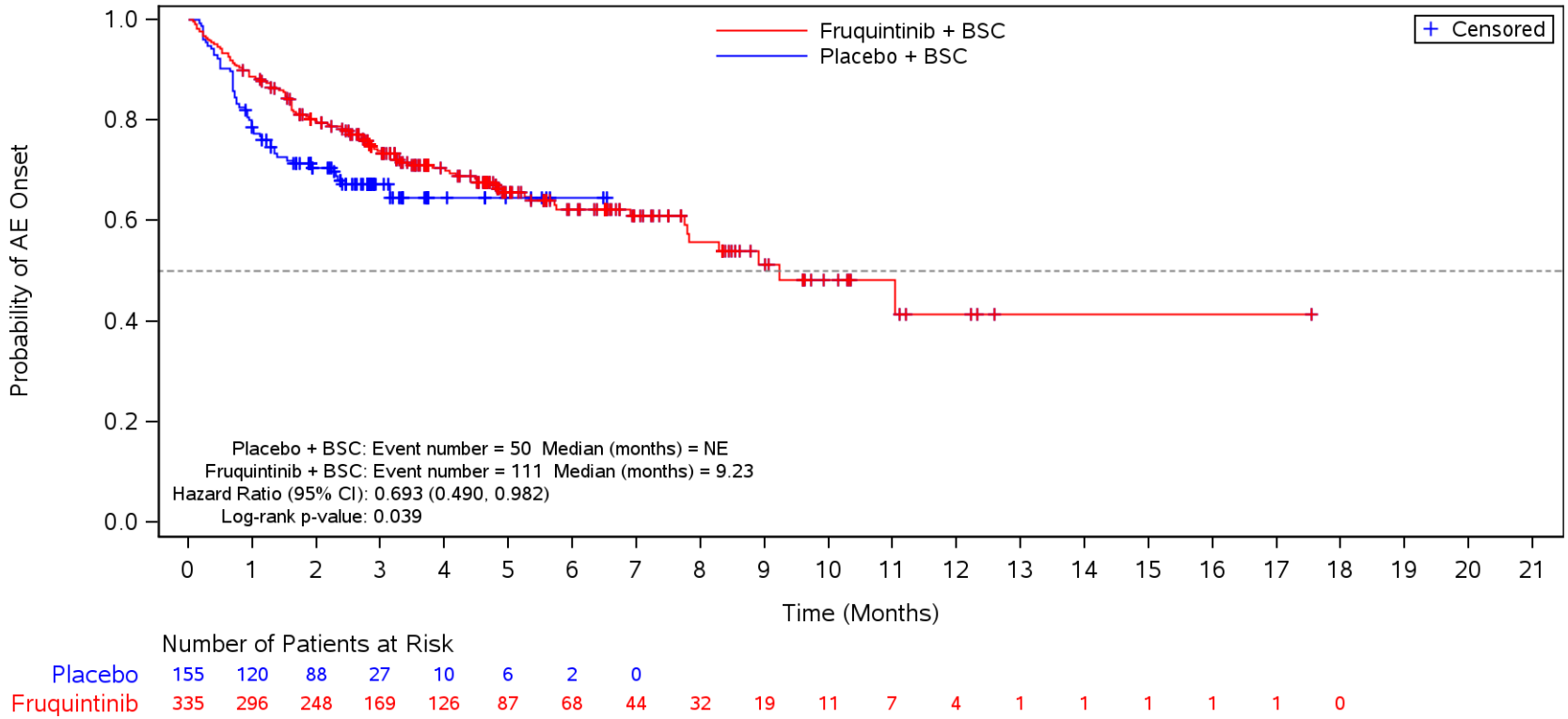
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
TEAE
No



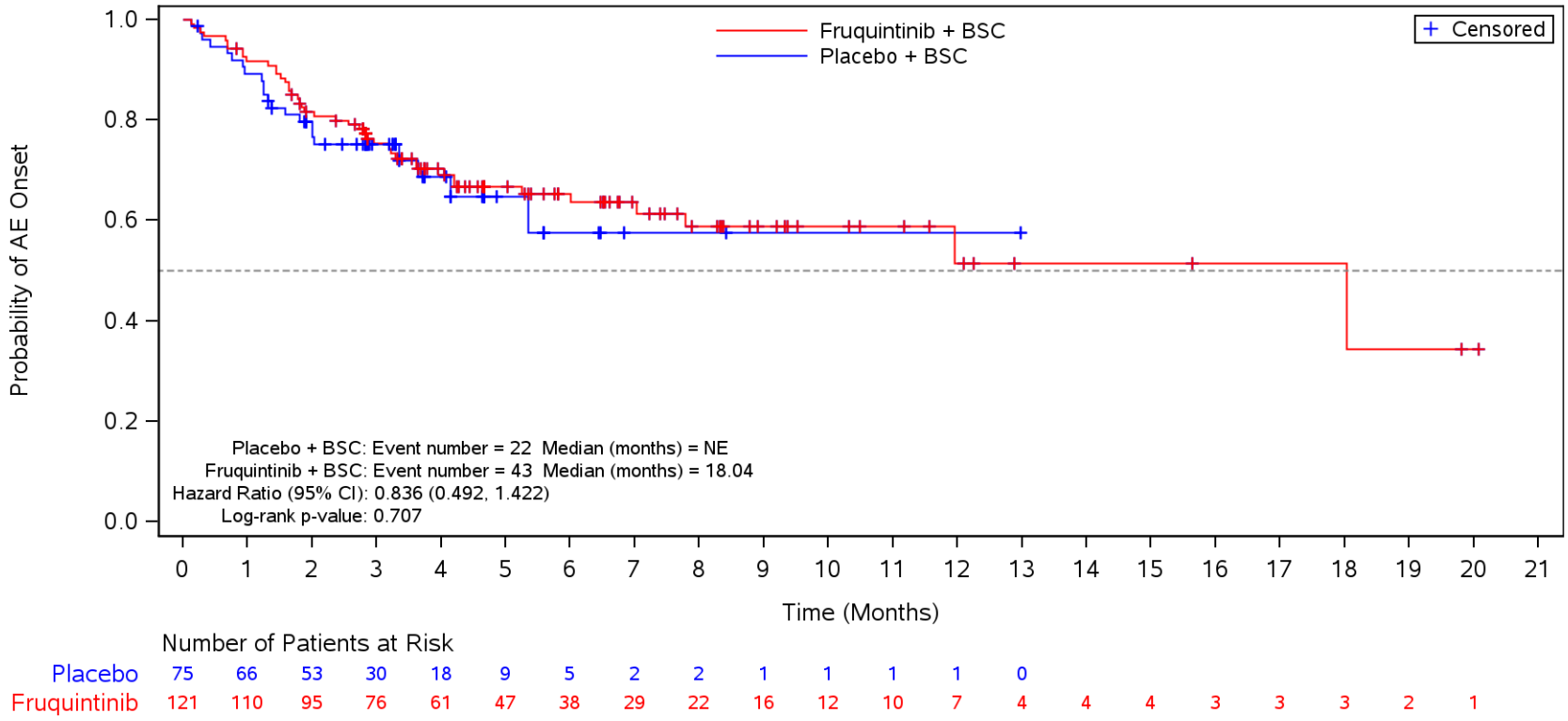
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
Serious TEAE
Yes



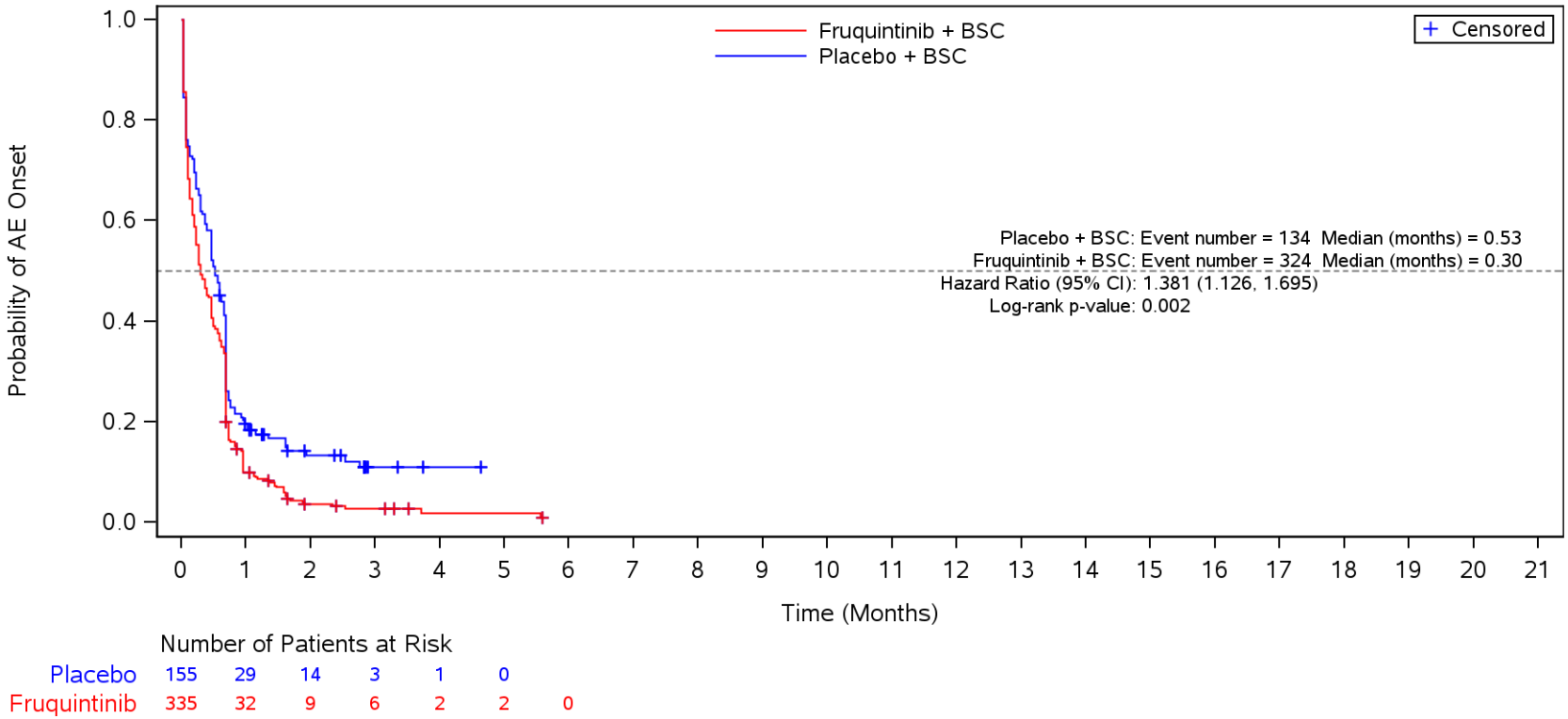
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
Serious TEAE
No



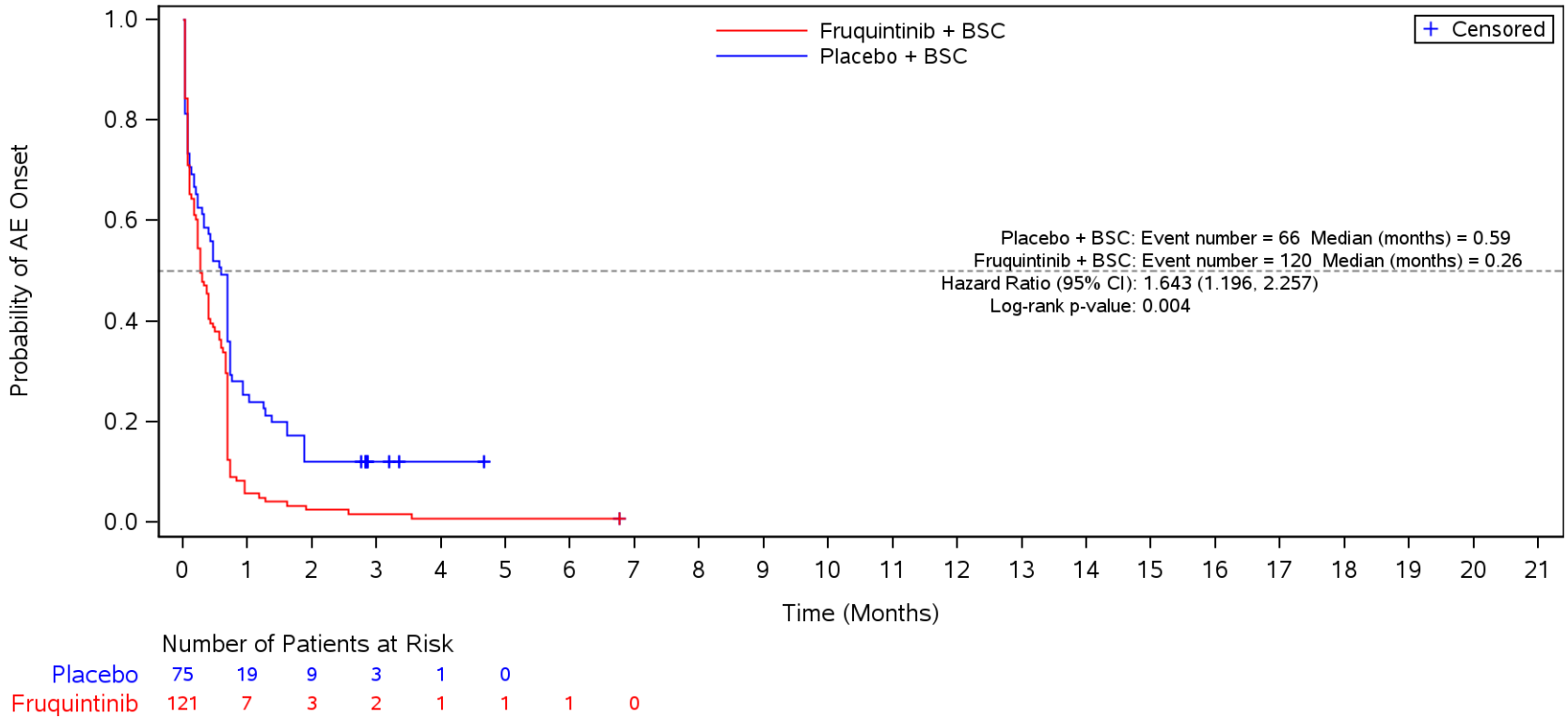
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
TEAE ≤ CTCAE Grade 2
Yes



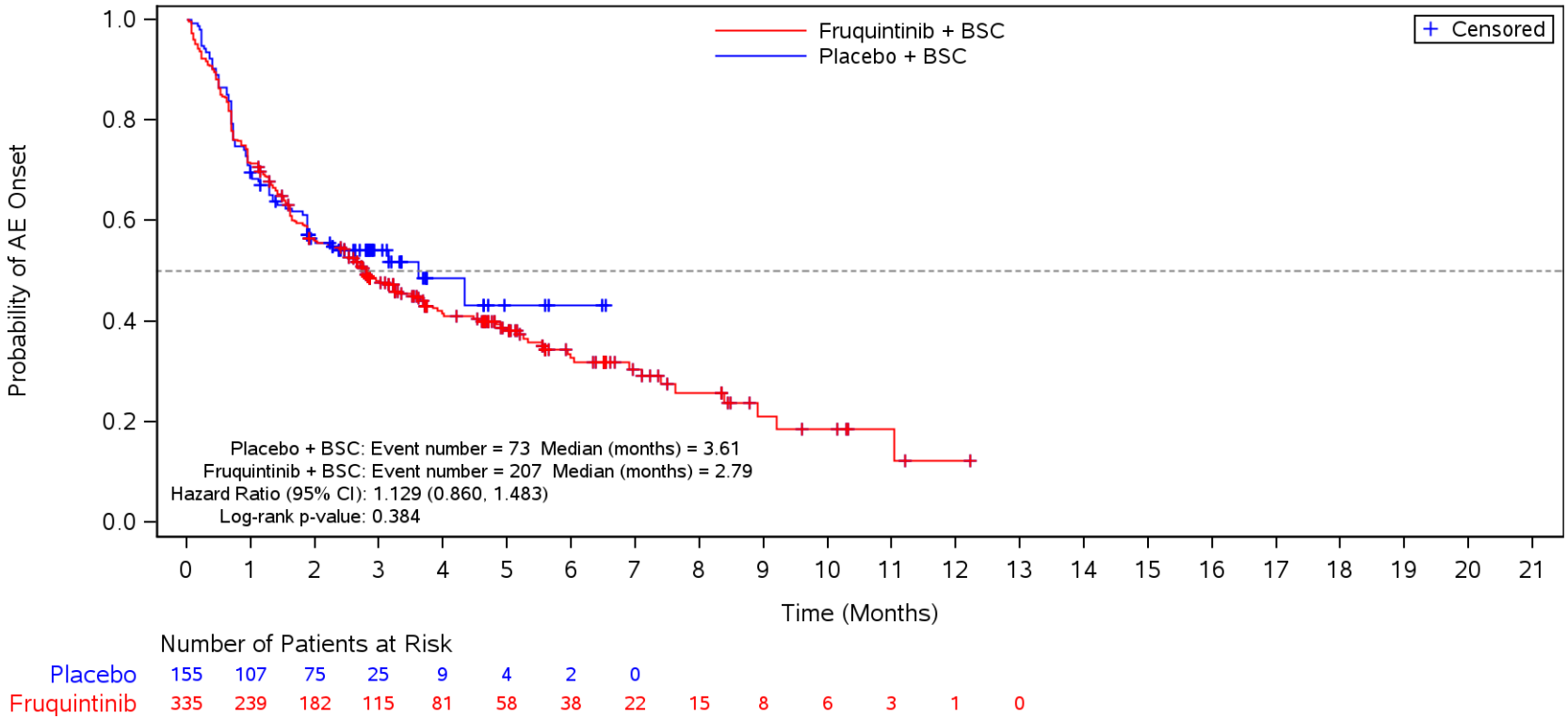
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
TEAE ≤ CTCAE Grade 2
No



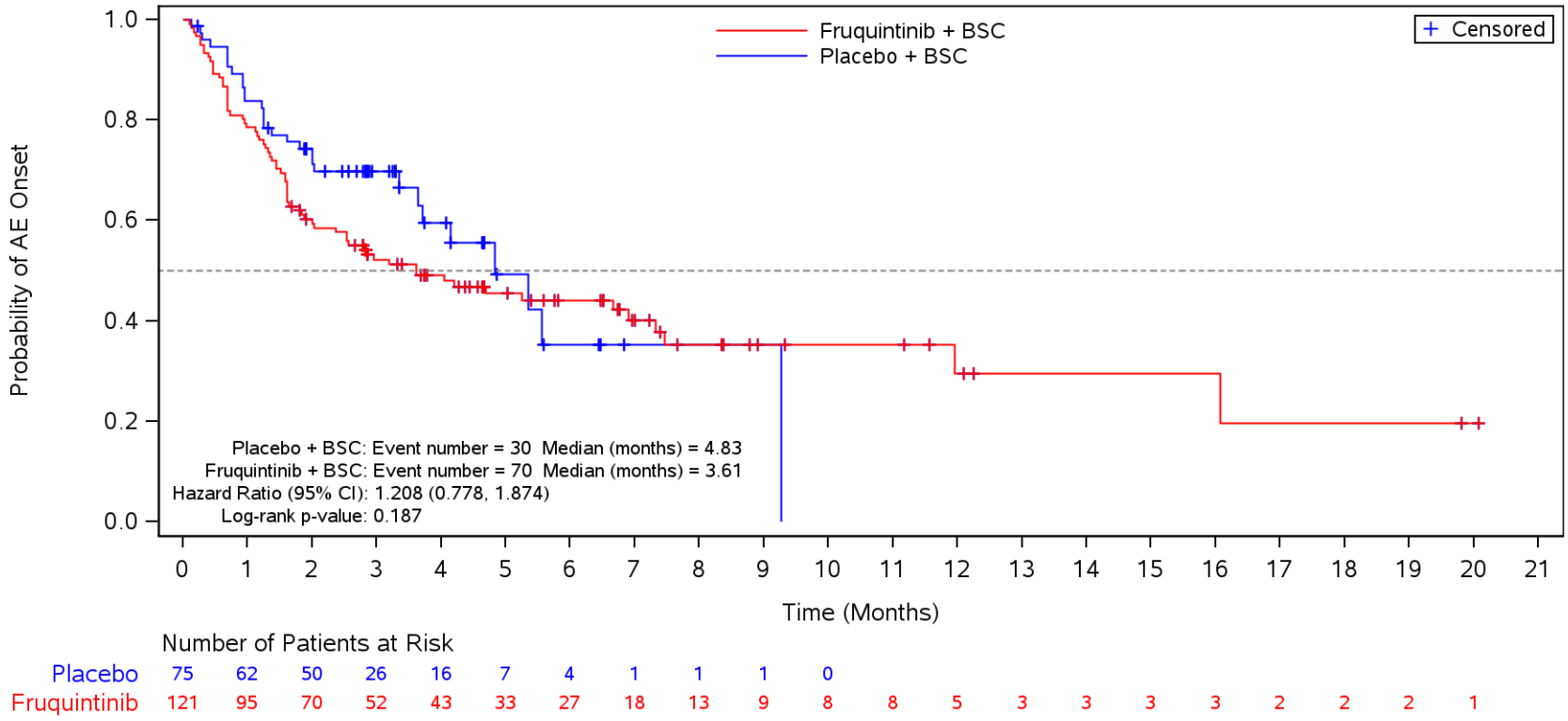
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3
Yes



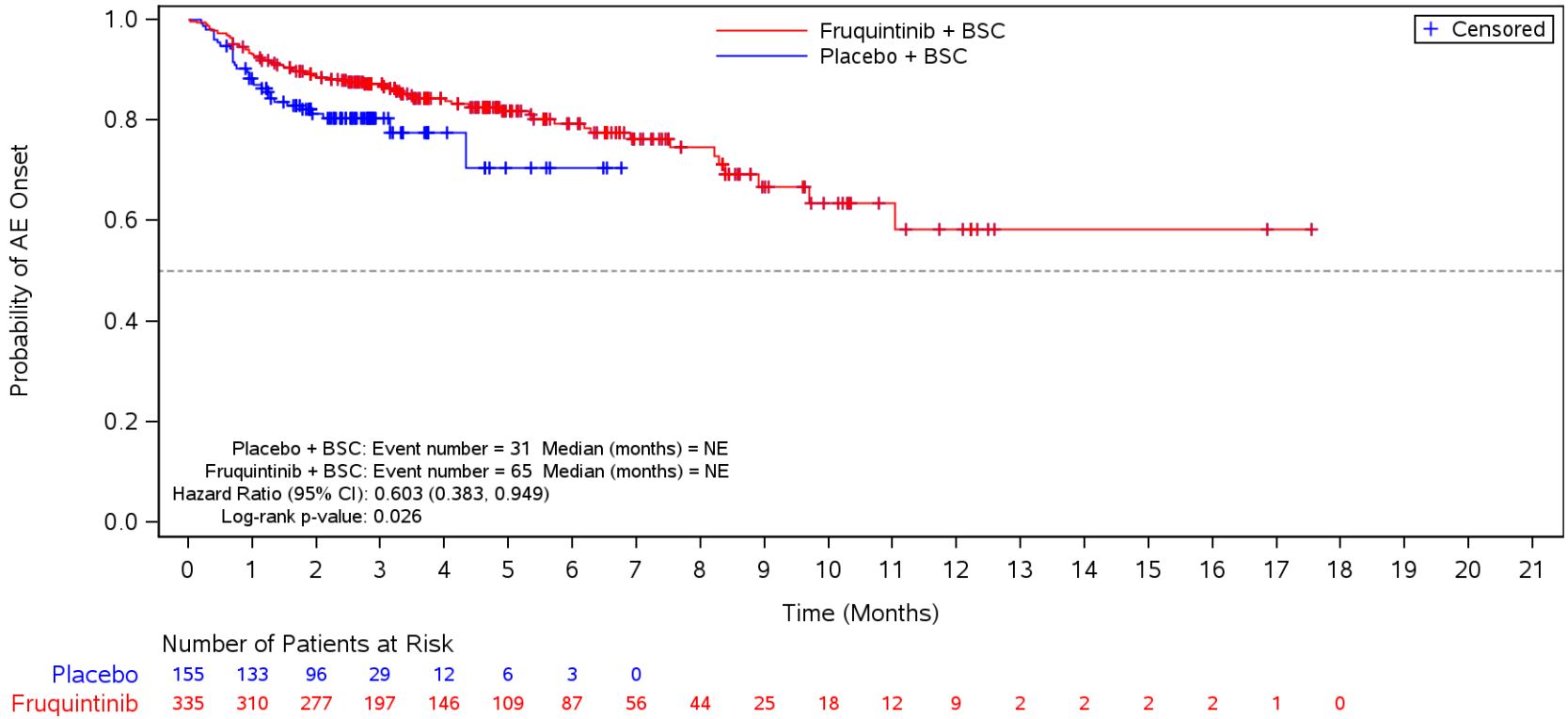
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
TEAE ≥ CTCAE Grade 3
No



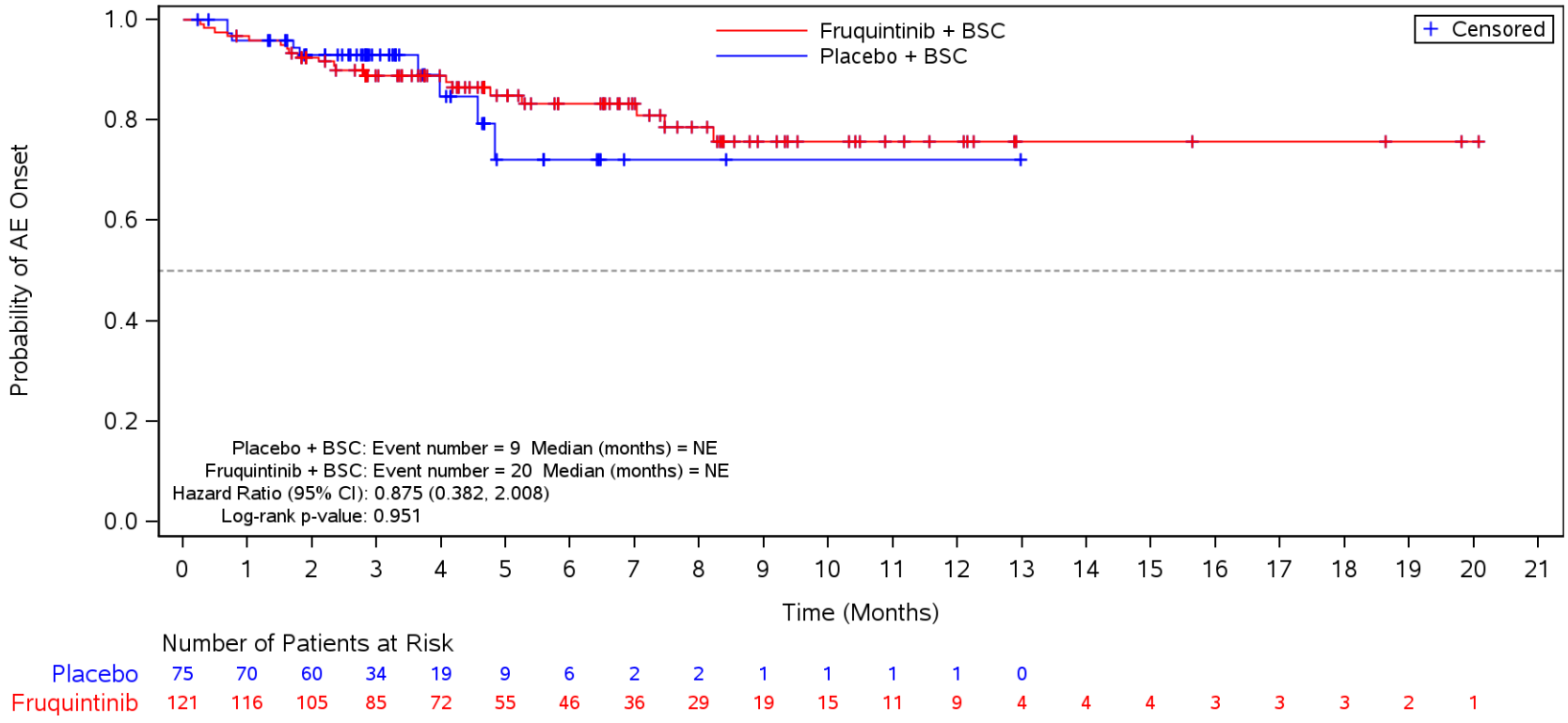
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
Discontinuation due to TEAE
Yes



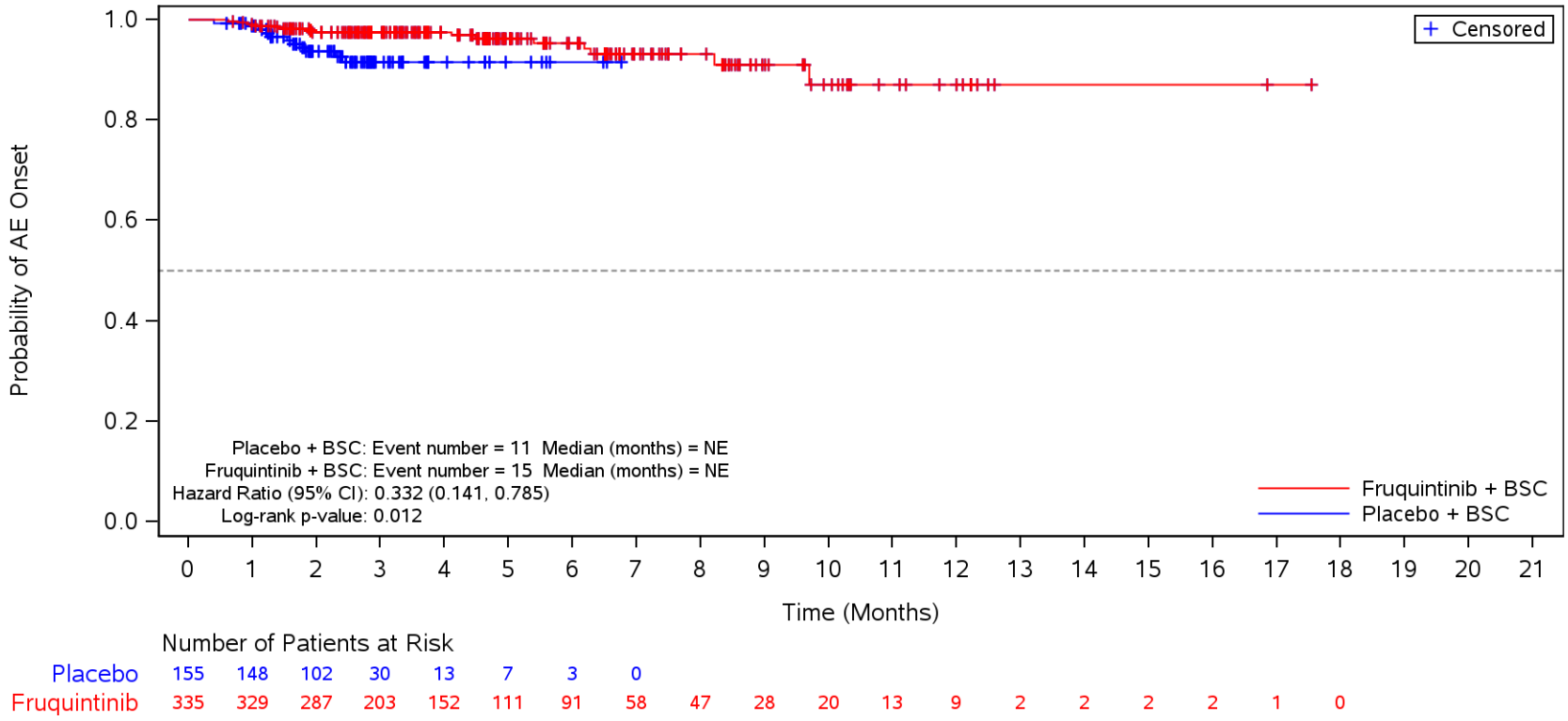
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
Discontinuation due to TEAE
No



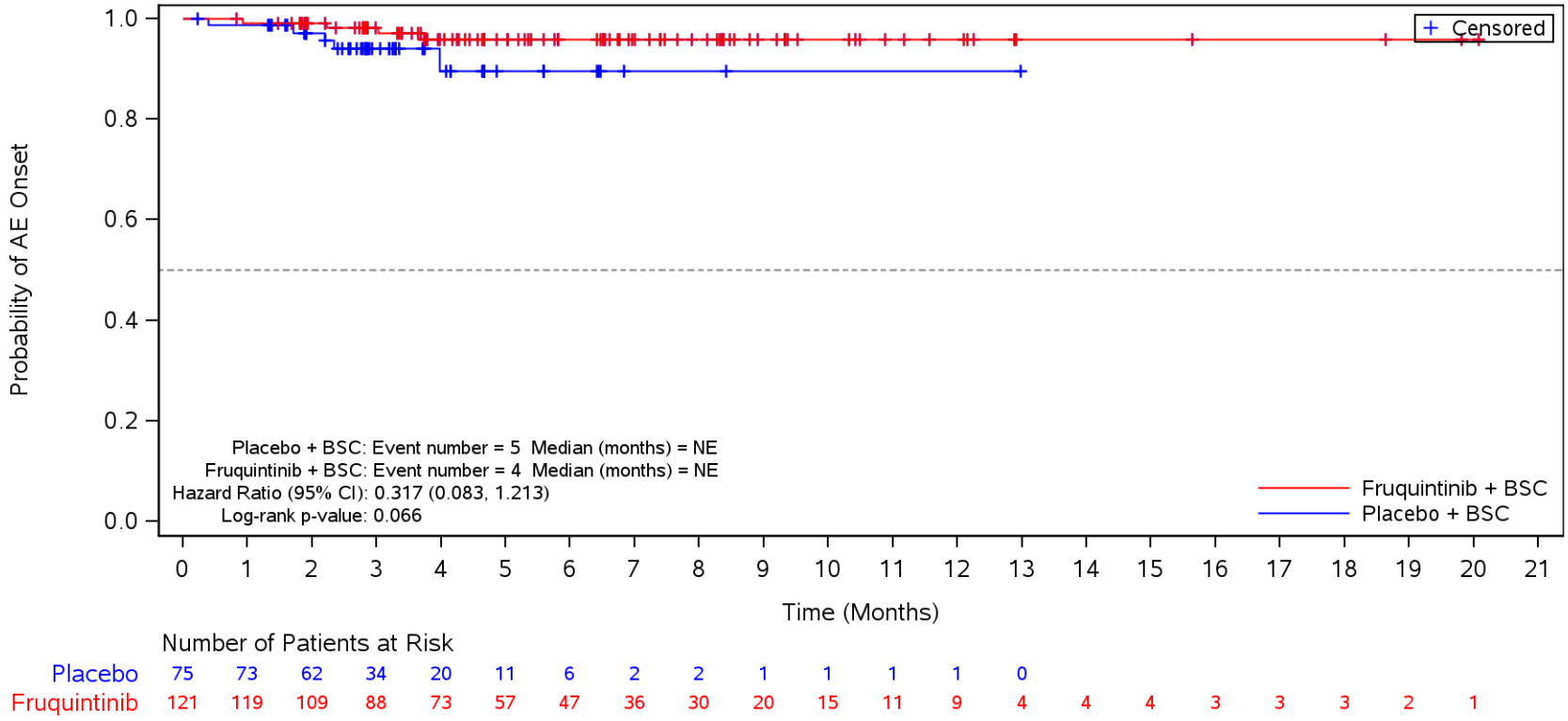
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3O
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Liver Metastases
Safety Population
Deaths (Grade 5 TEAEs)
Yes



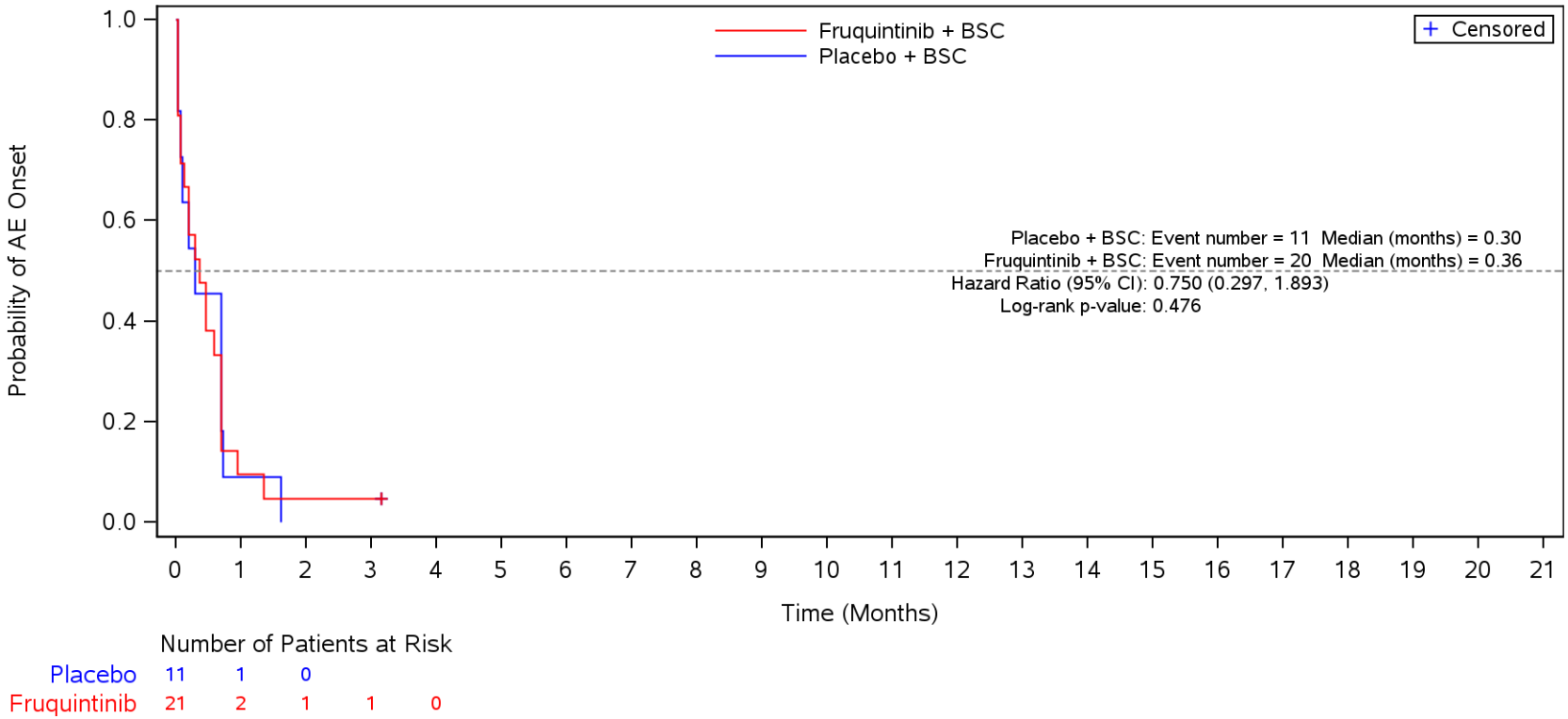
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE
Yes



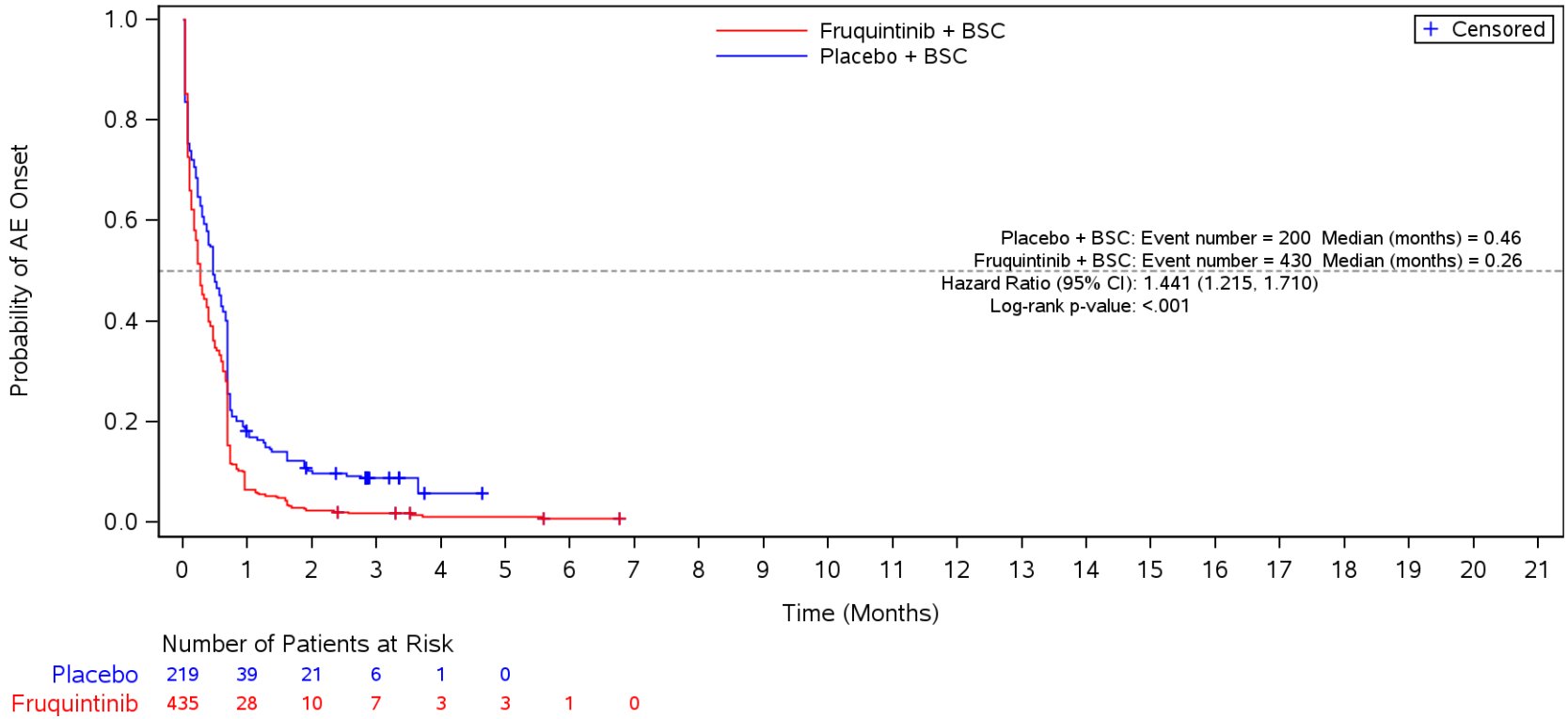
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE
Yes



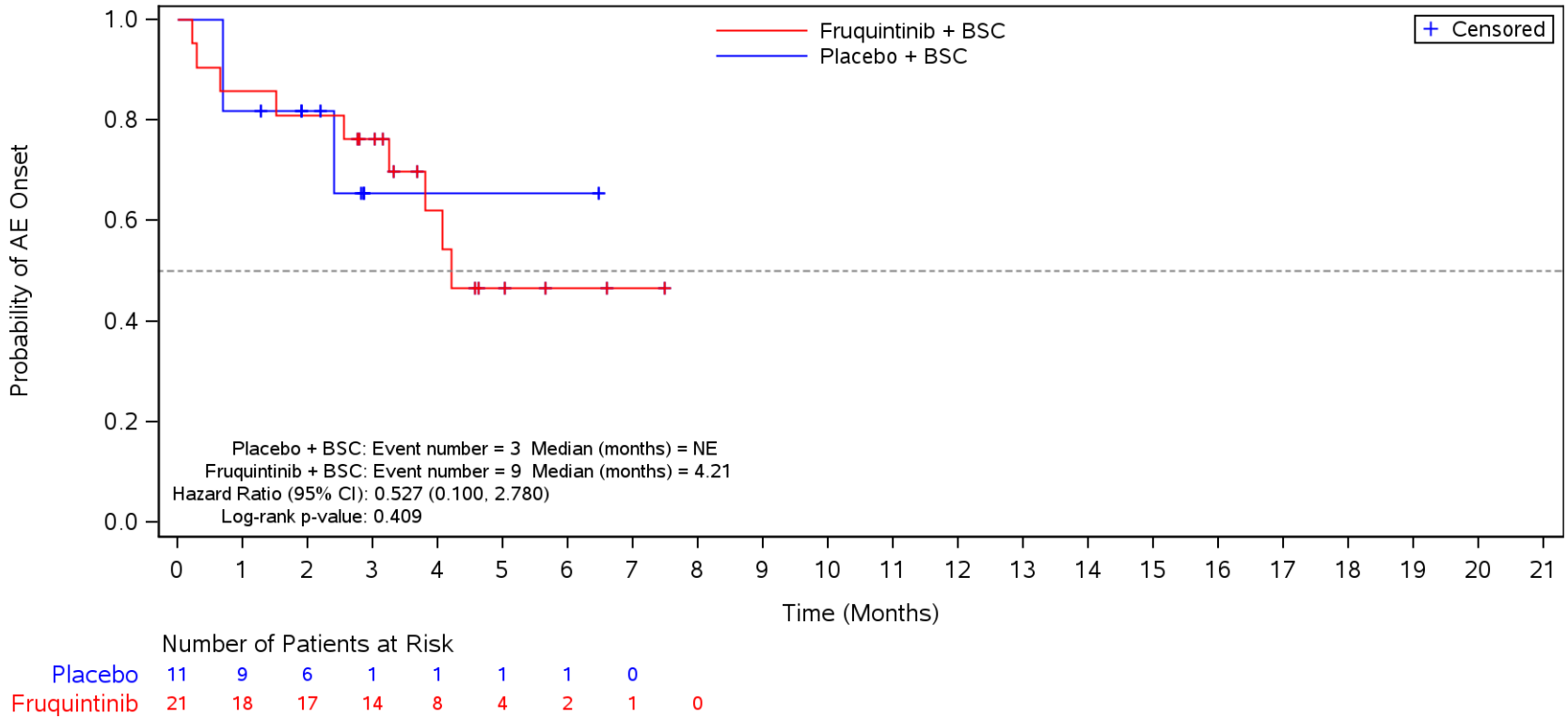
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE
No



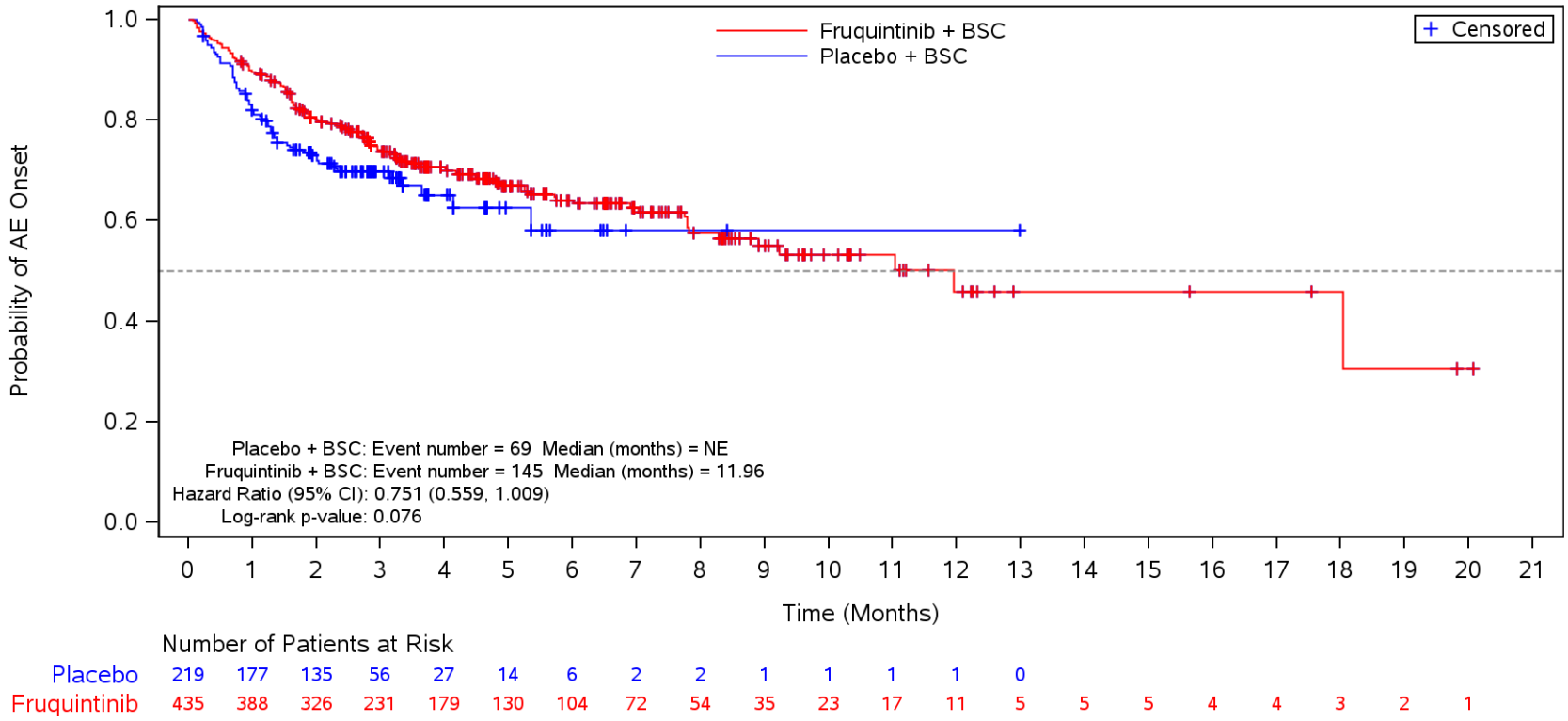
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
Serious TEAE
Yes



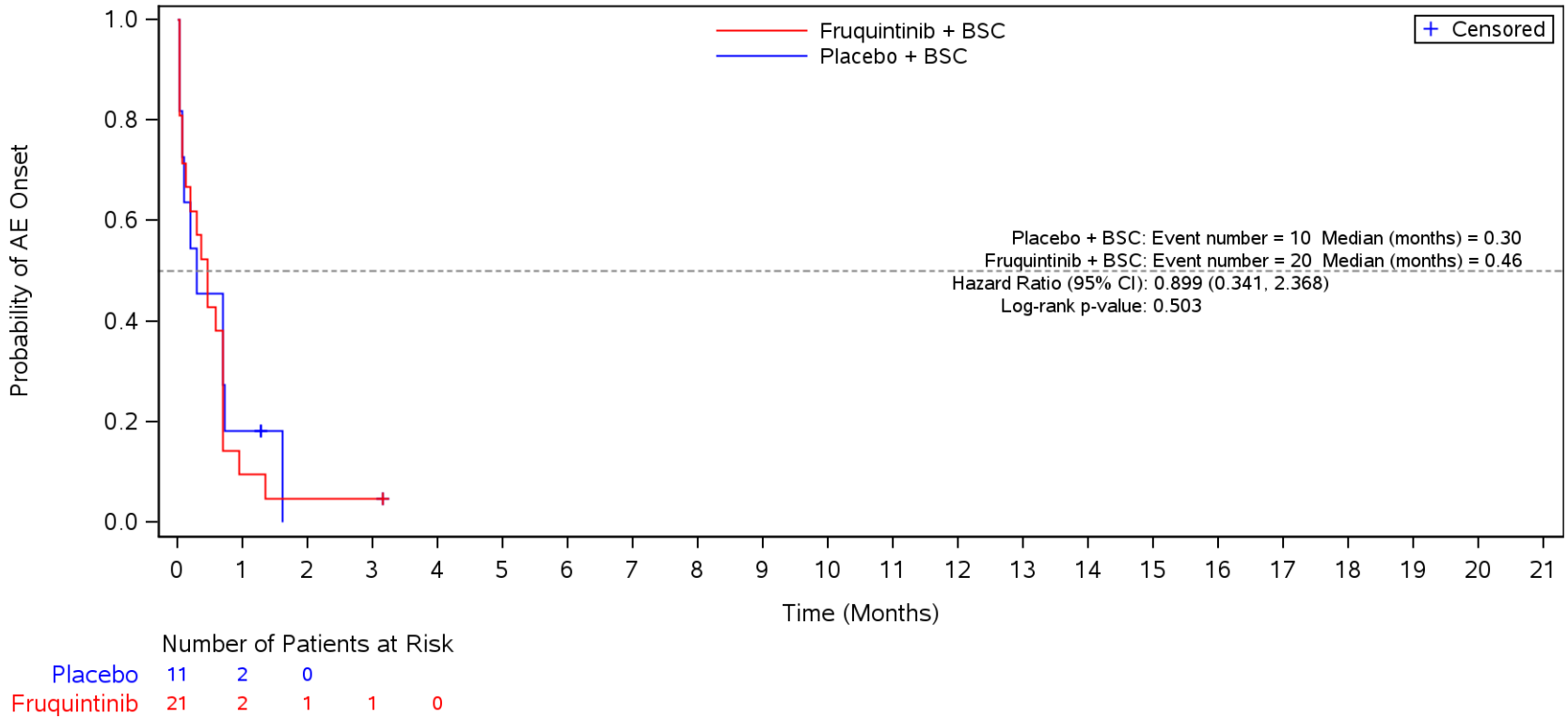
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
Serious TEAE
No



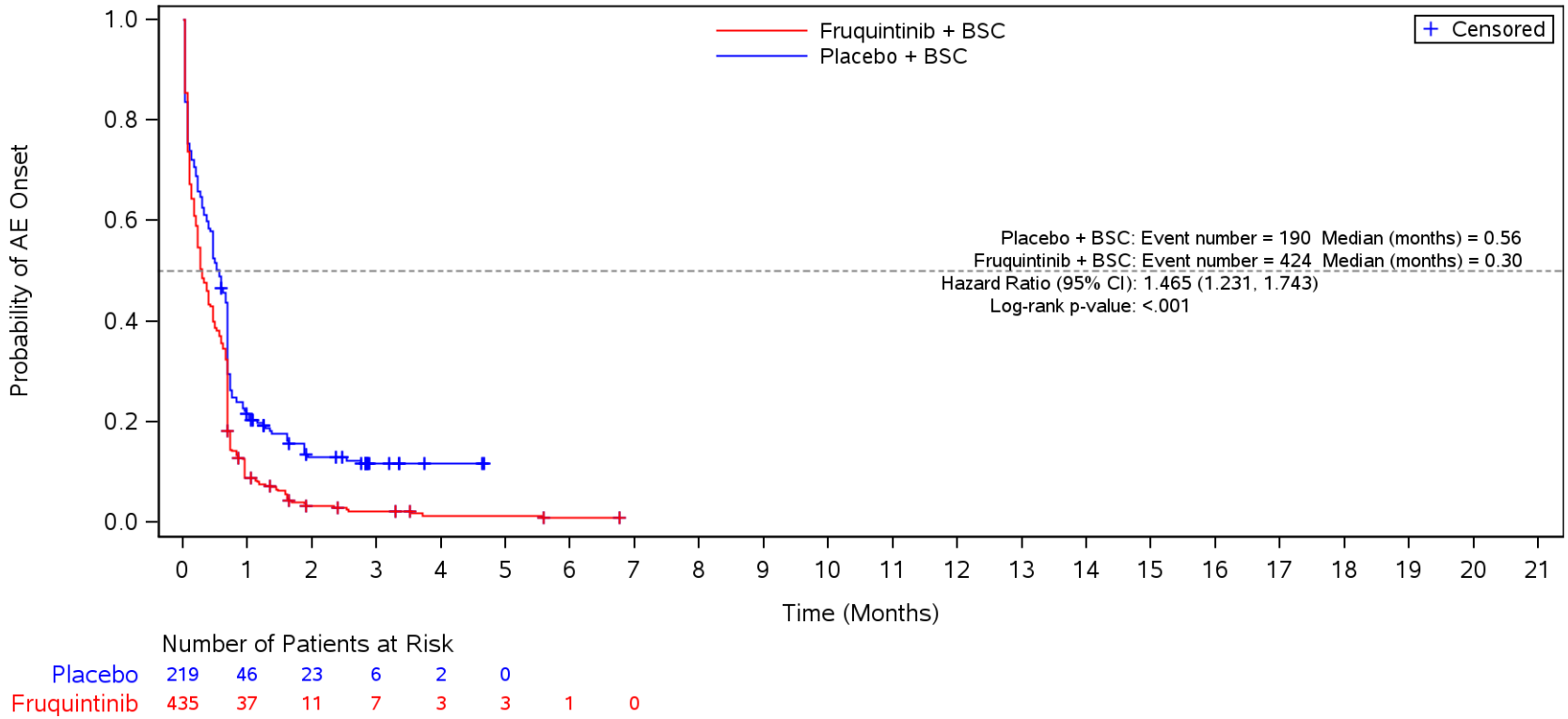
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≤ CTCAE Grade 2
Yes



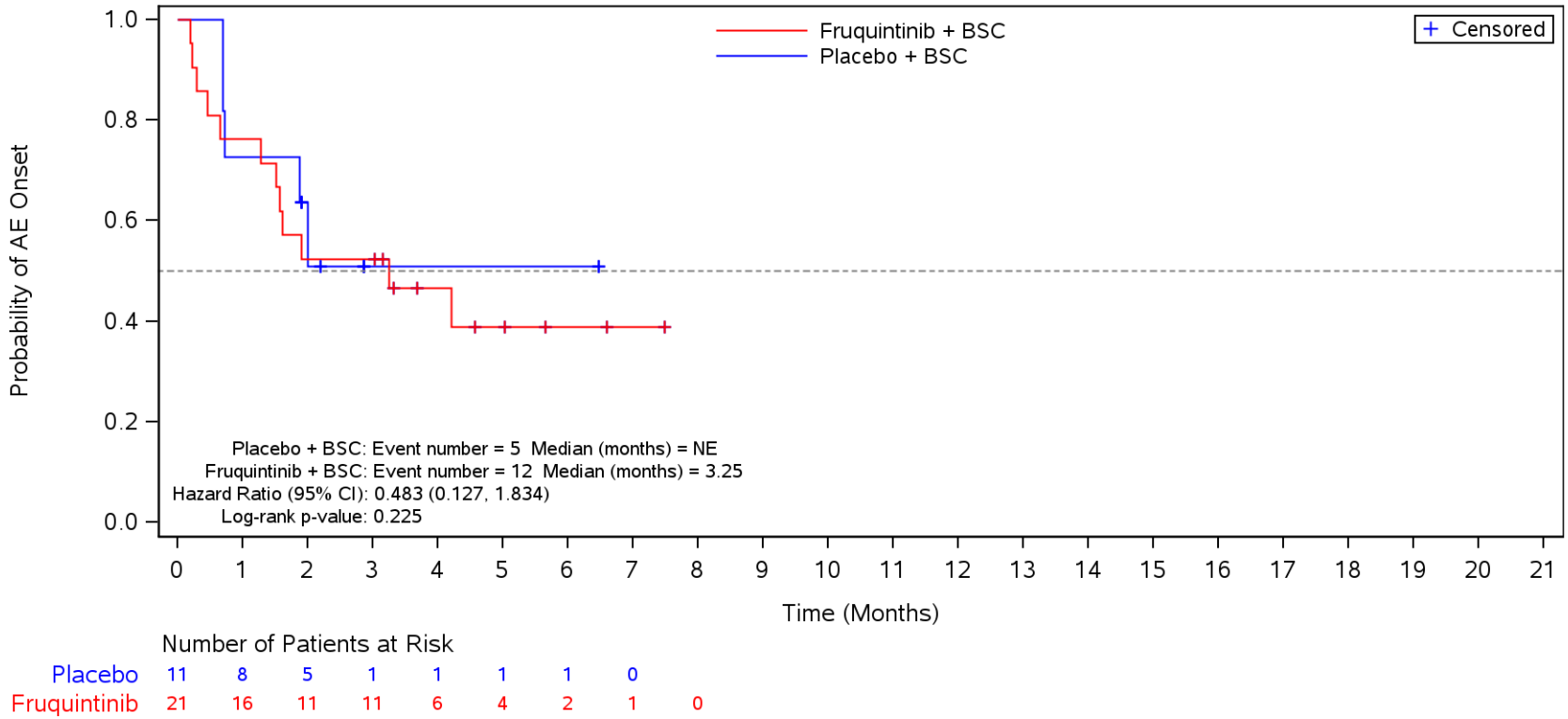
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≤ CTCAE Grade 2
No



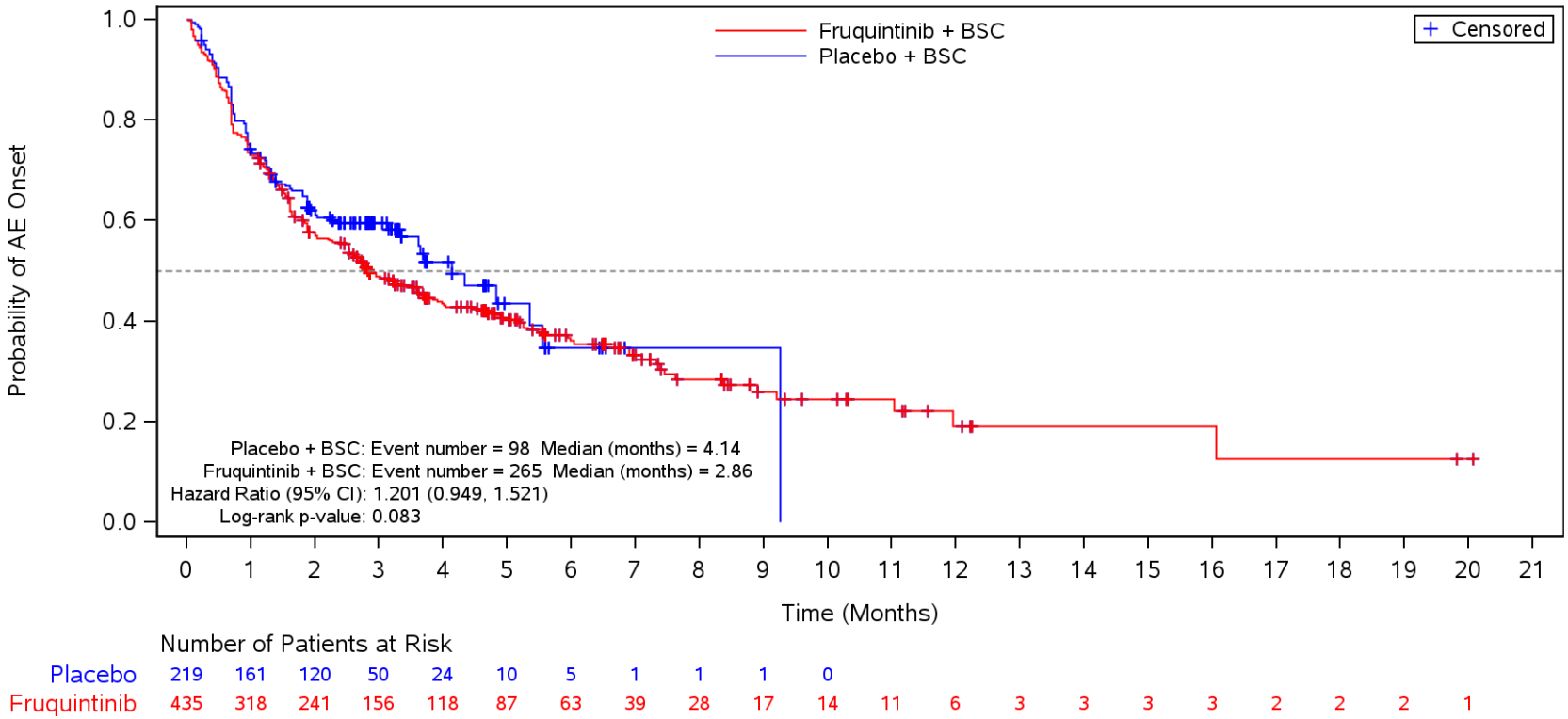
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3
Yes



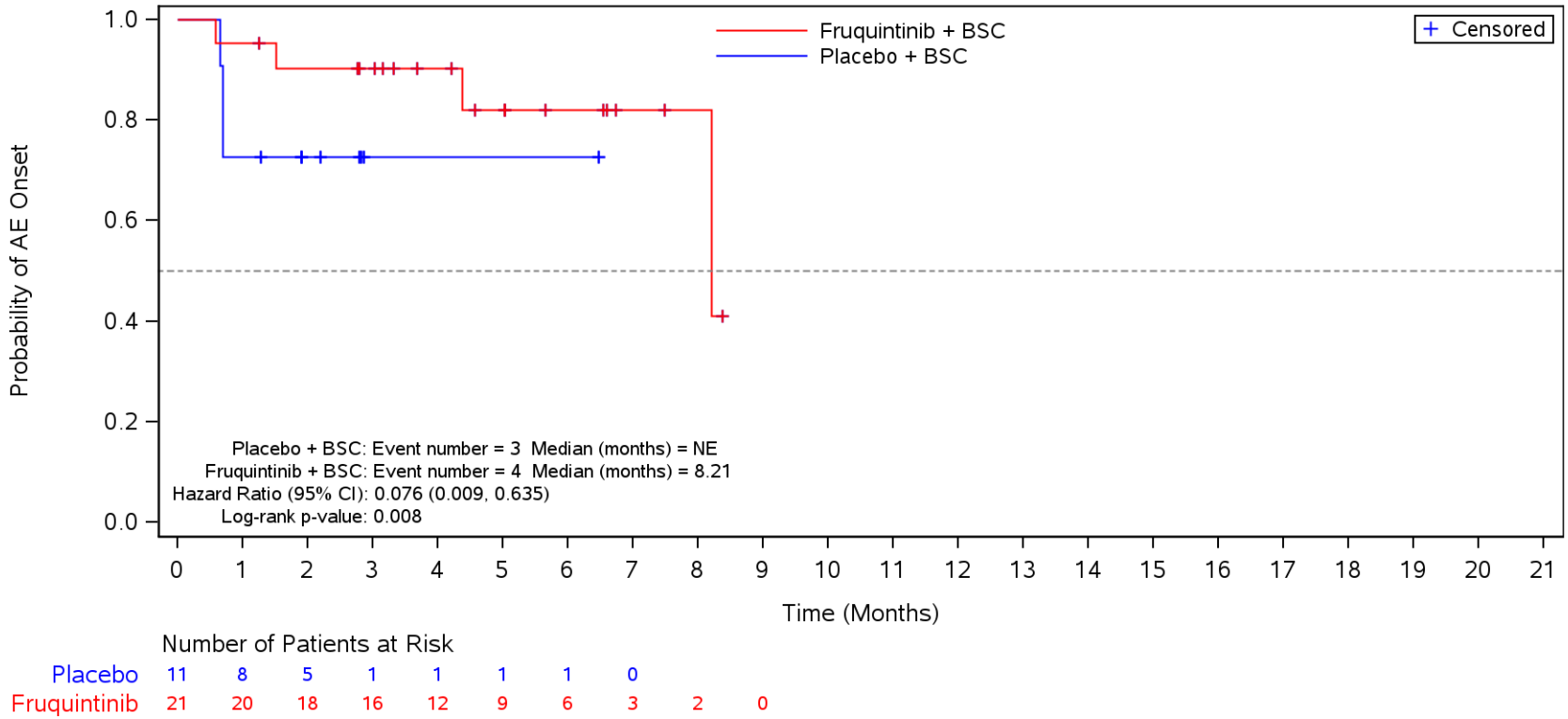
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
TEAE ≥ CTCAE Grade 3
No



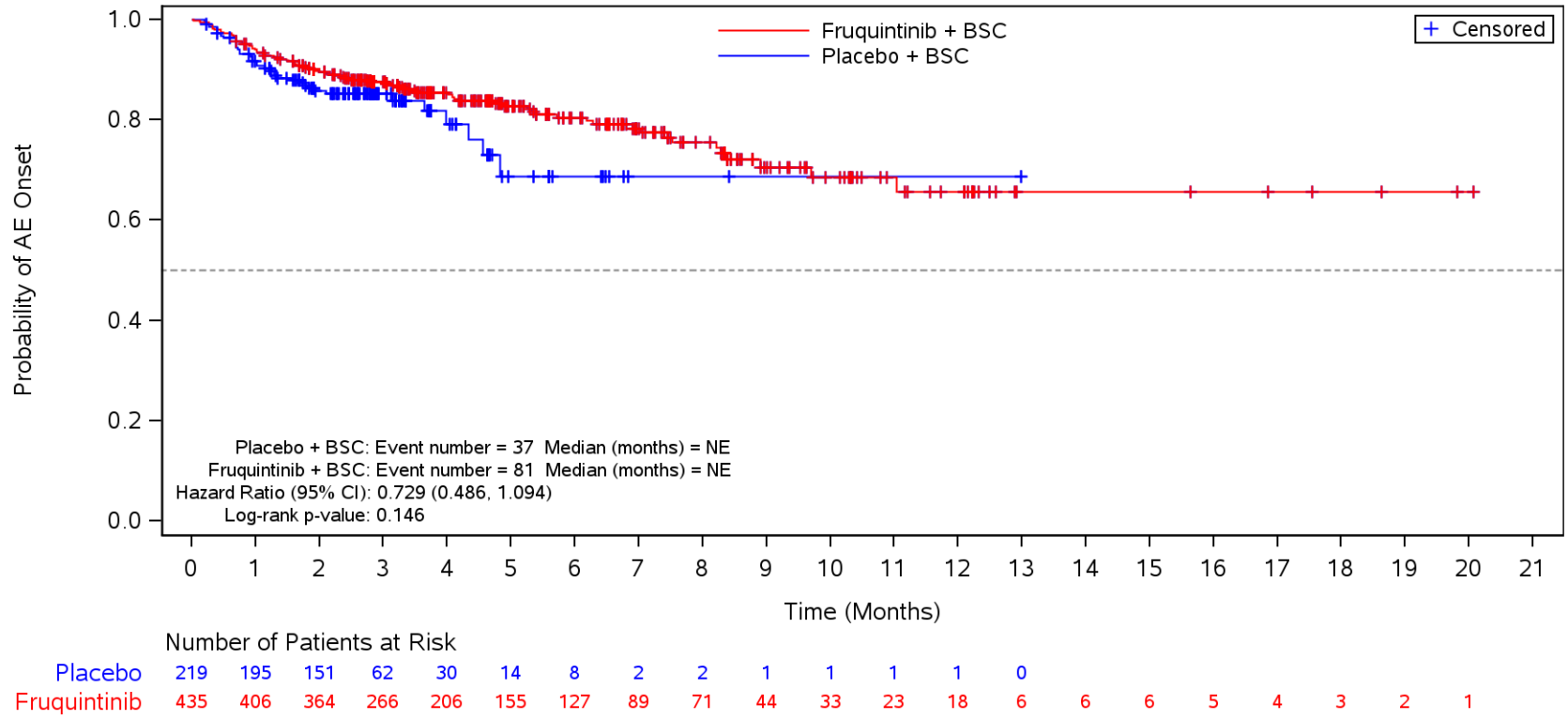
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
Discontinuation due to TEAE
Yes



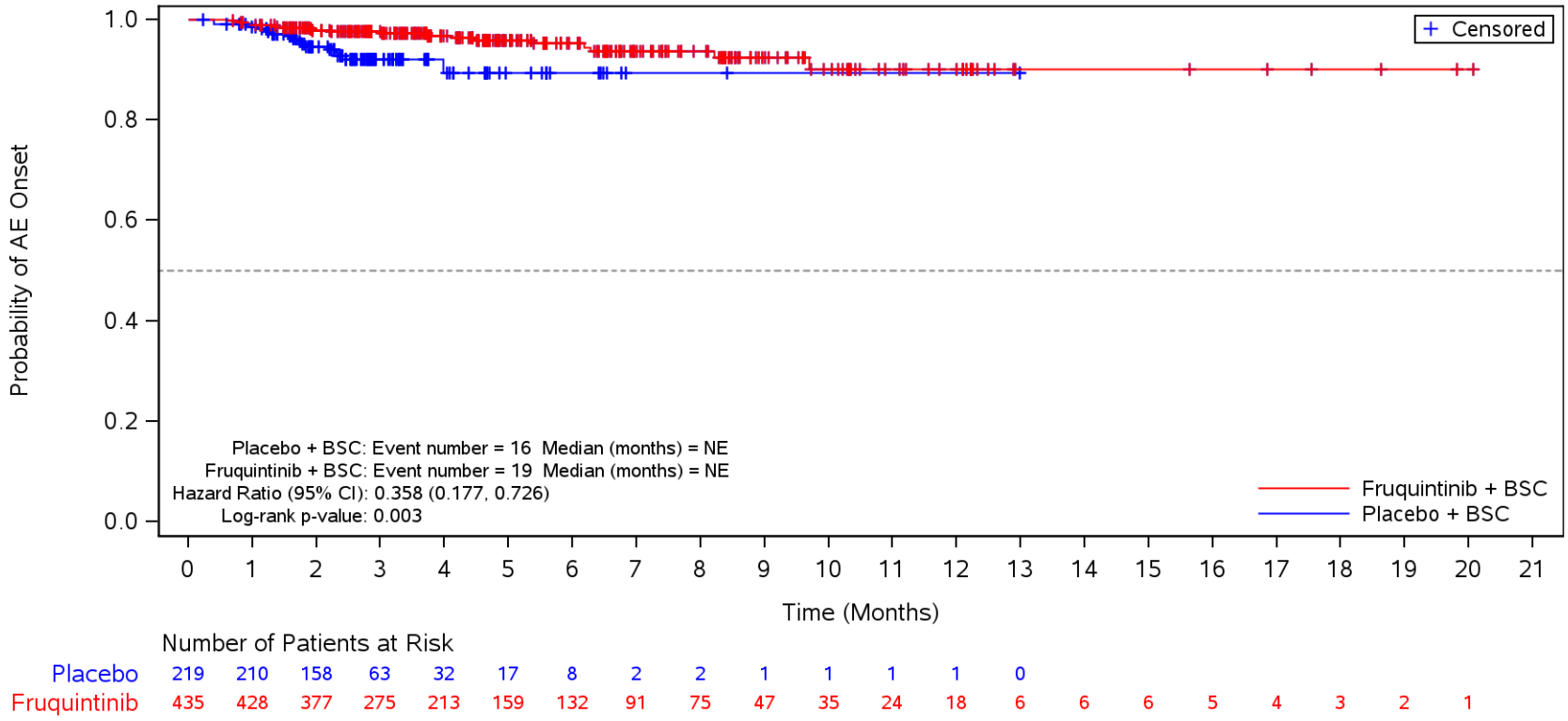
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3P
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Prior Treatment with Immune Checkpoint Inhibitors for MSI-H/dMMR
Safety Population
Discontinuation due to TEAE
No



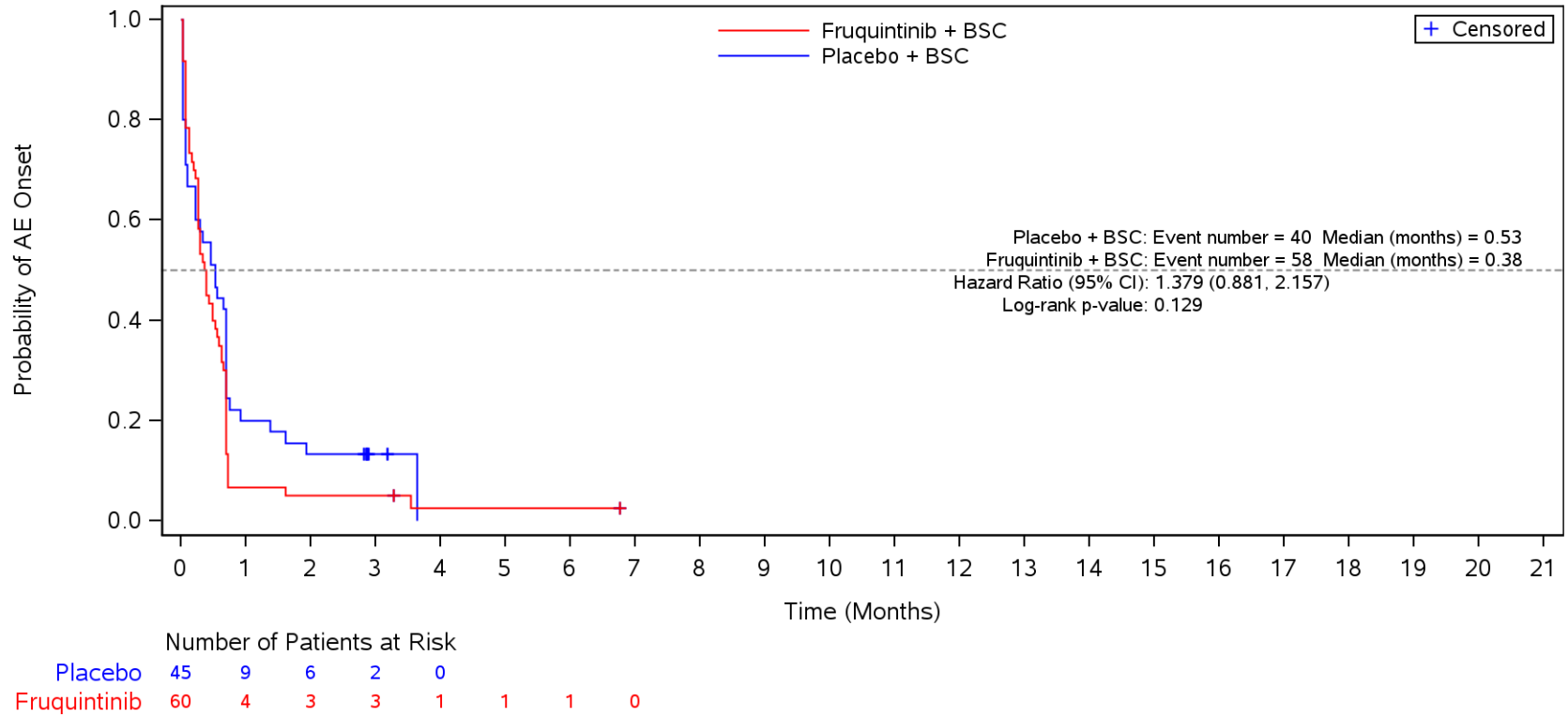
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE
Single



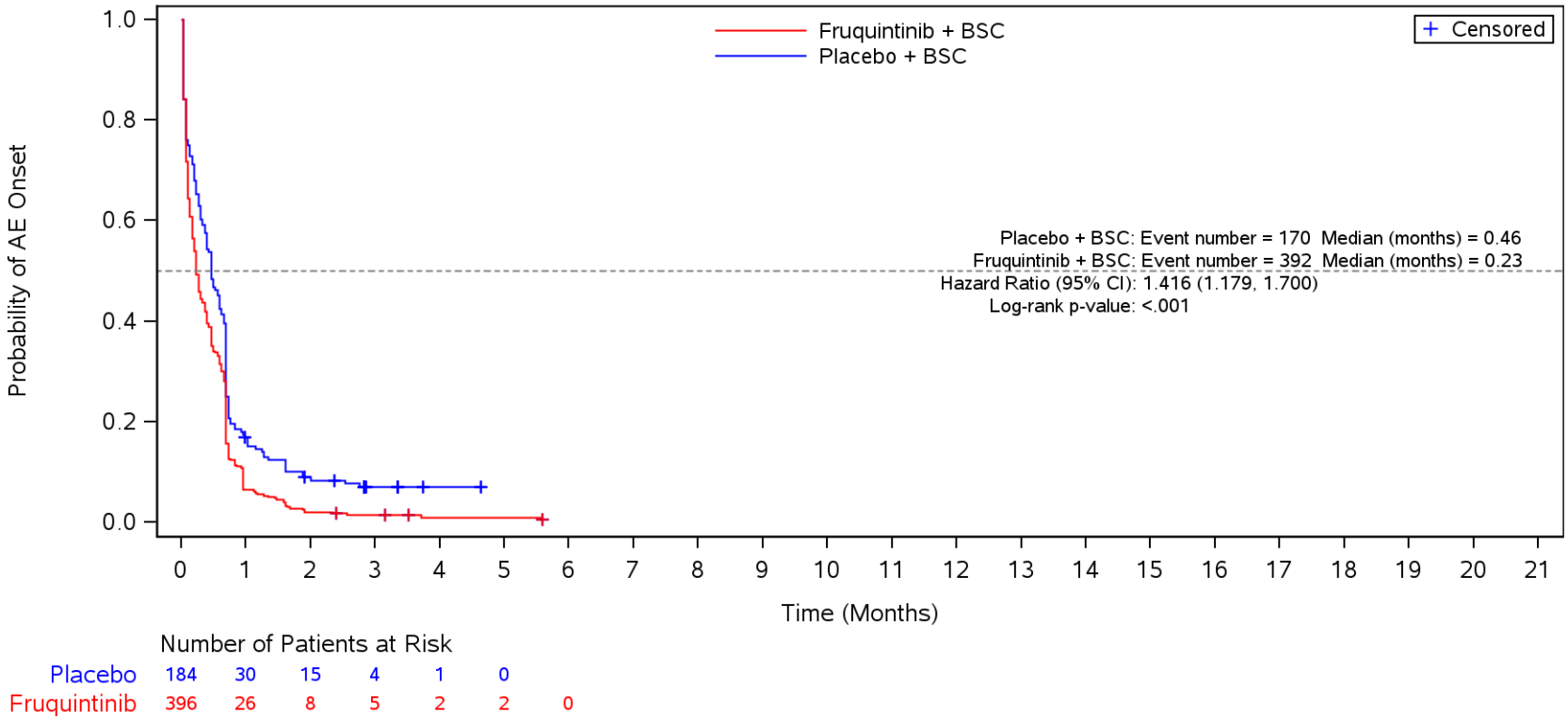
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE
Single



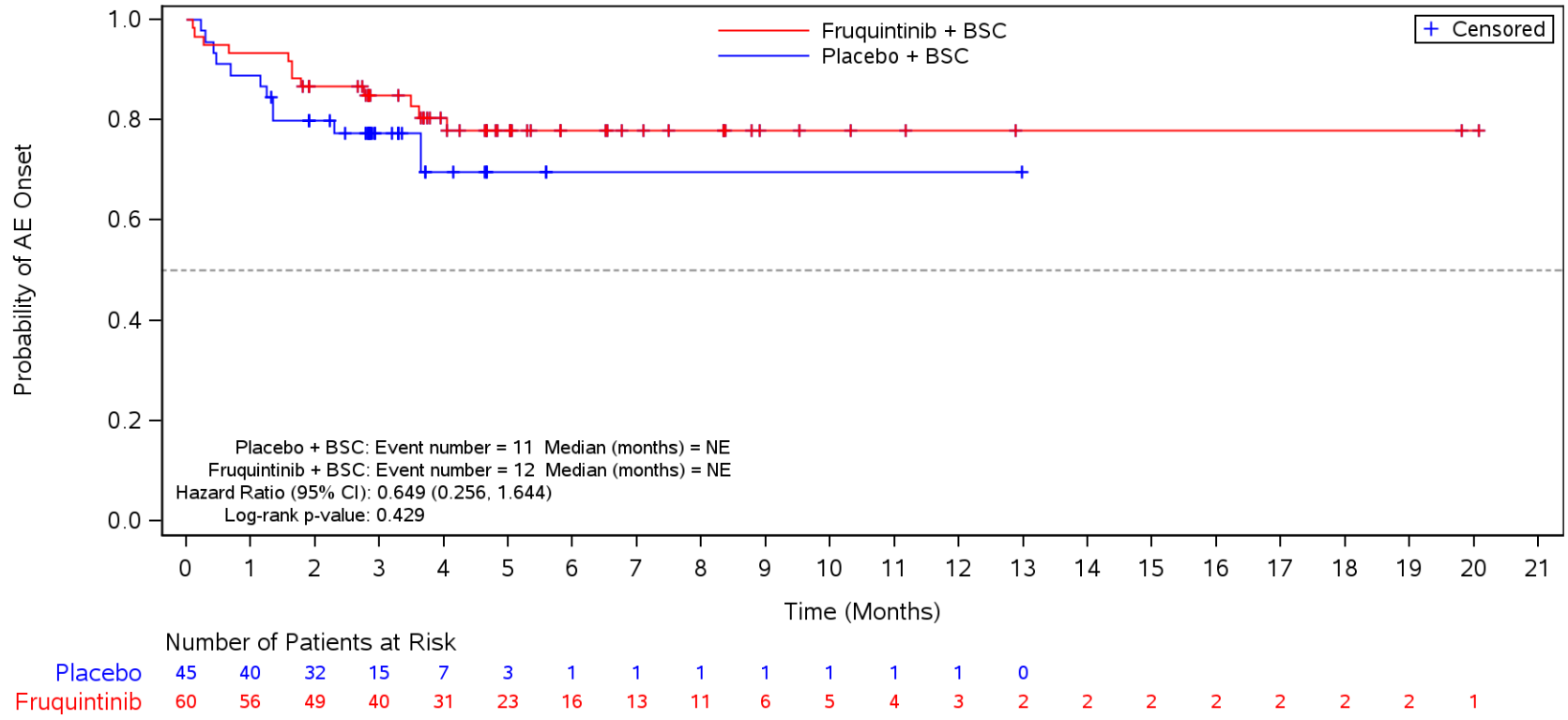
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE
Multiple



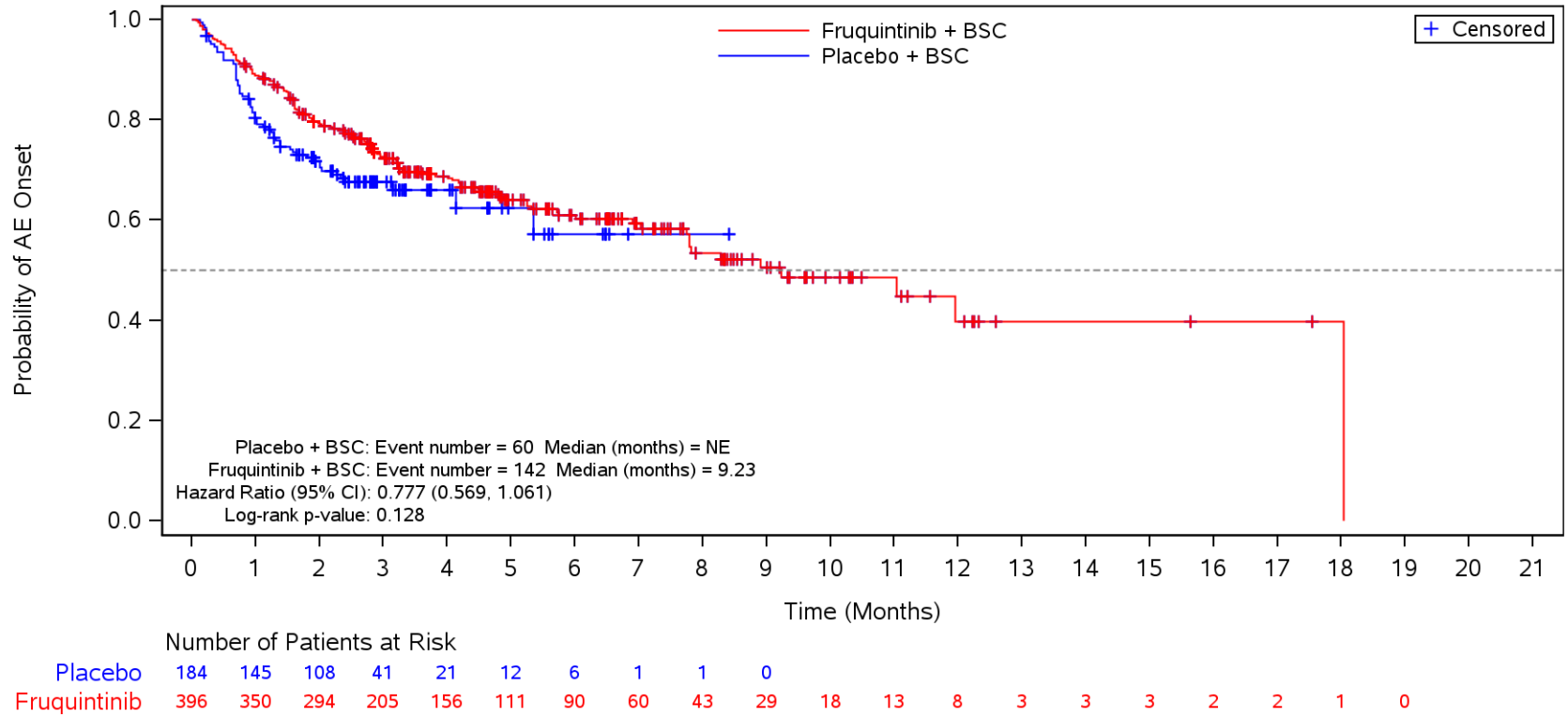
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Serious TEAE
Single



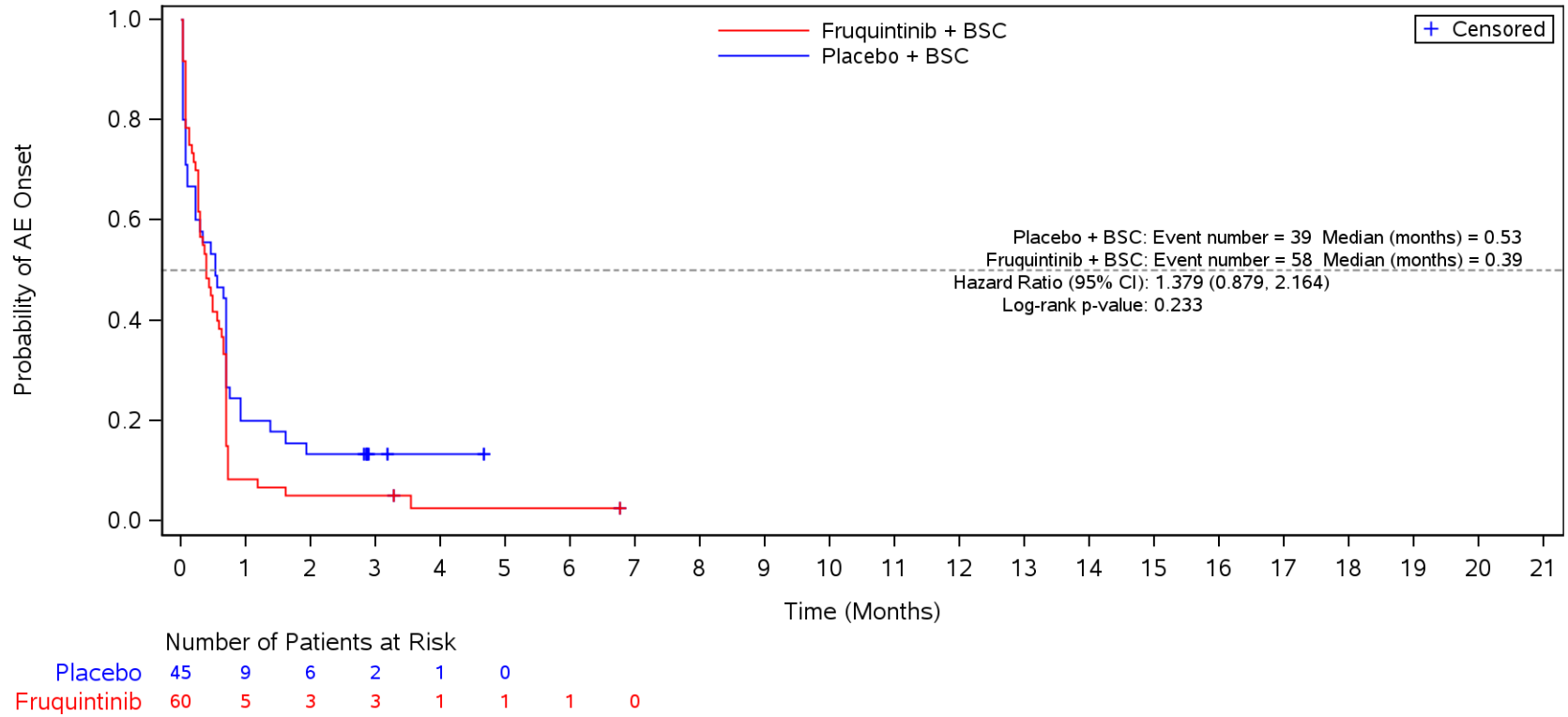
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Serious TEAE
Multiple



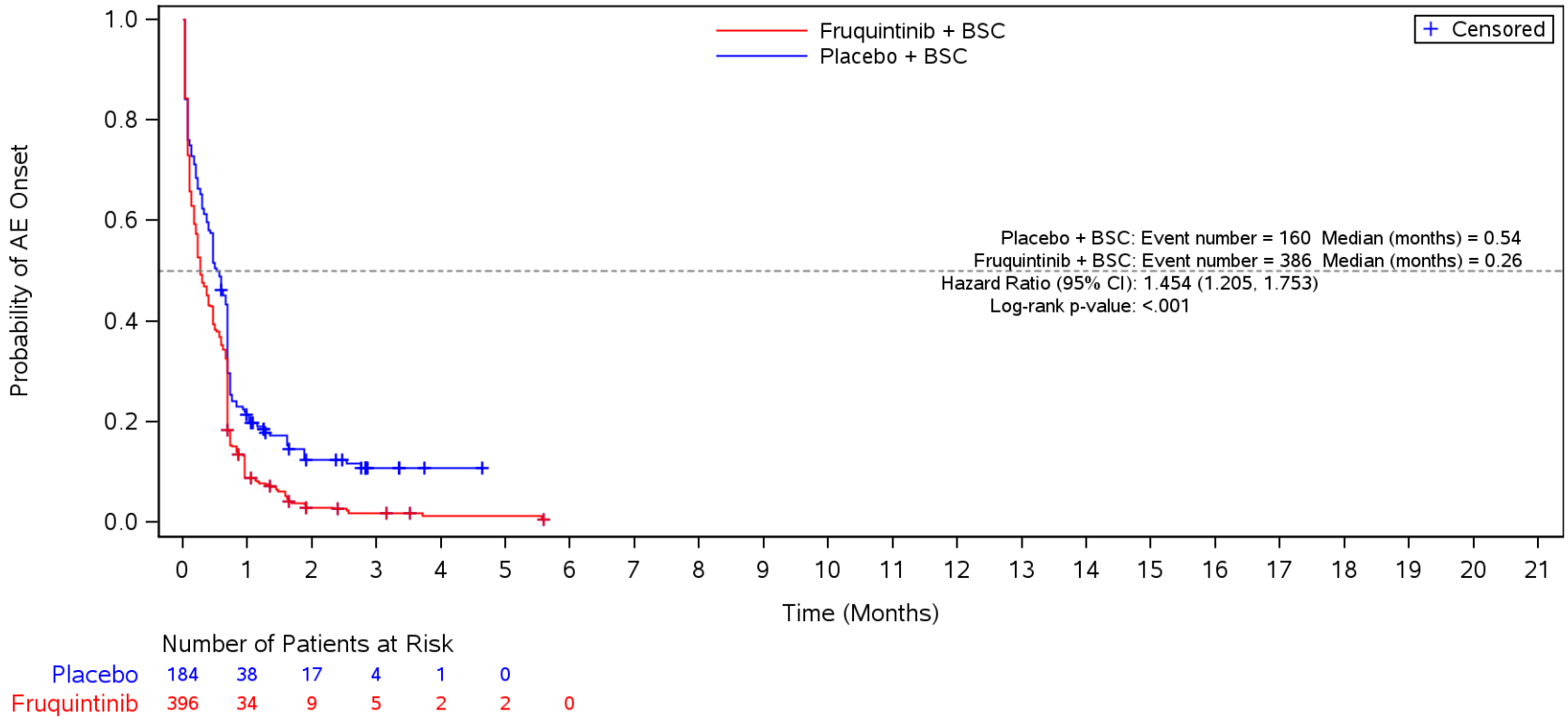
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≤ CTCAE Grade 2
Single



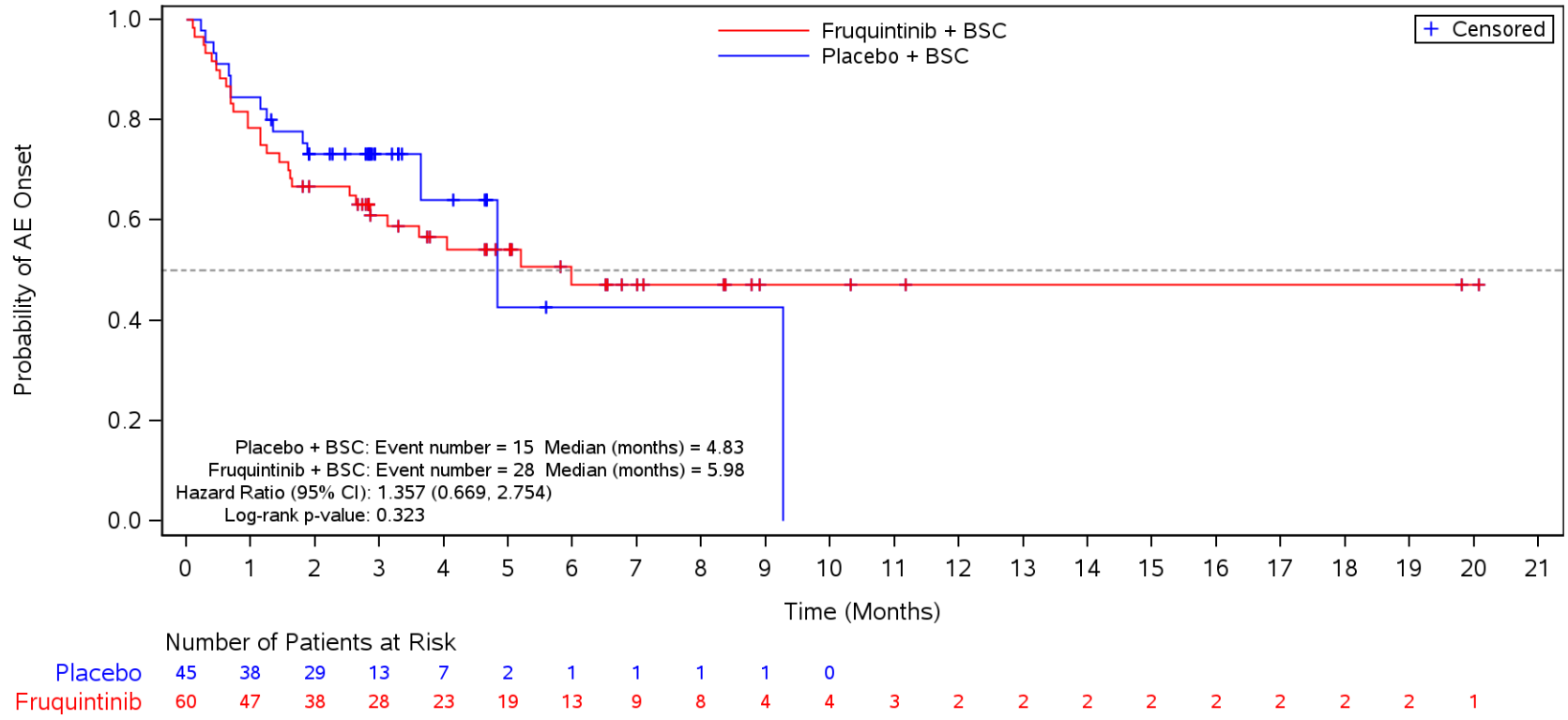
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≤ CTCAE Grade 2
Multiple



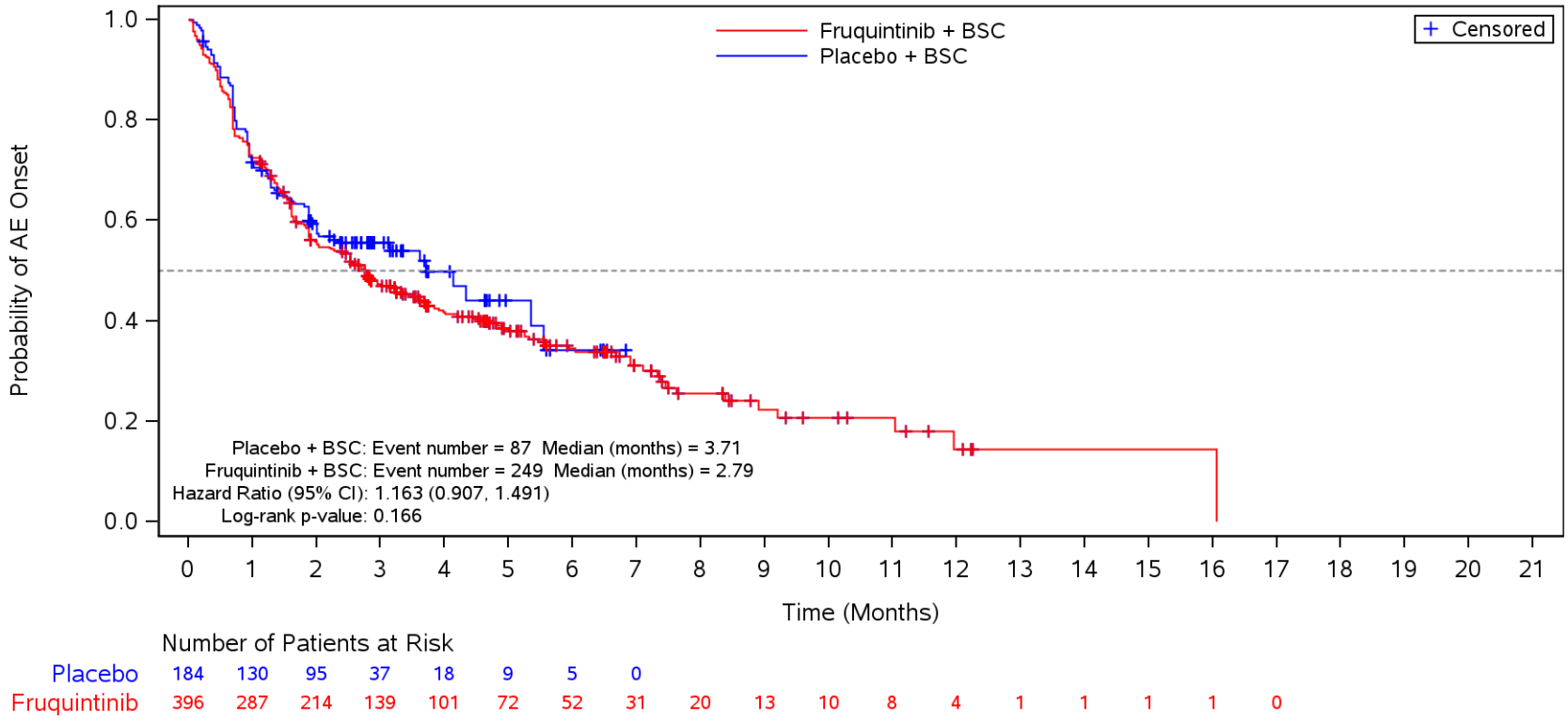
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3
Single



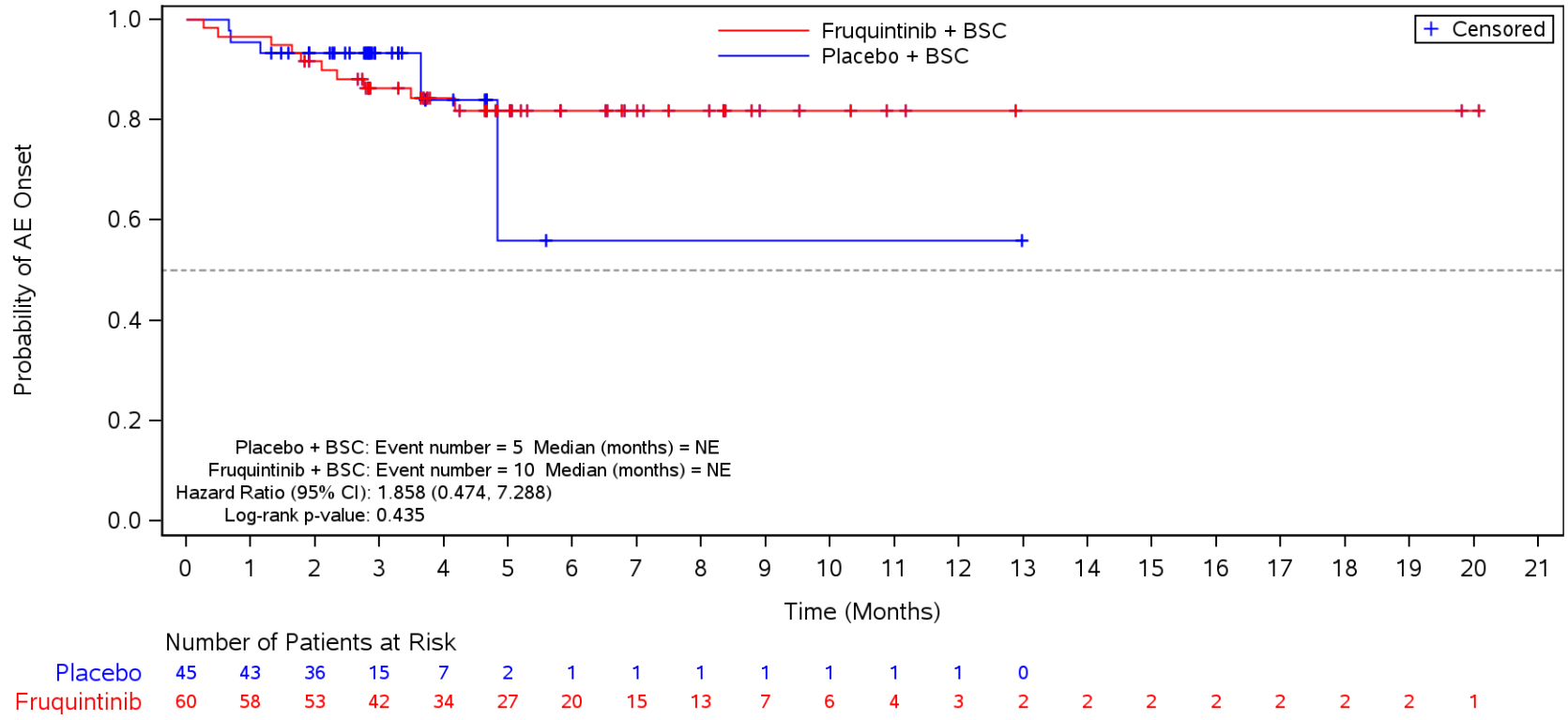
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
TEAE ≥ CTCAE Grade 3
Multiple



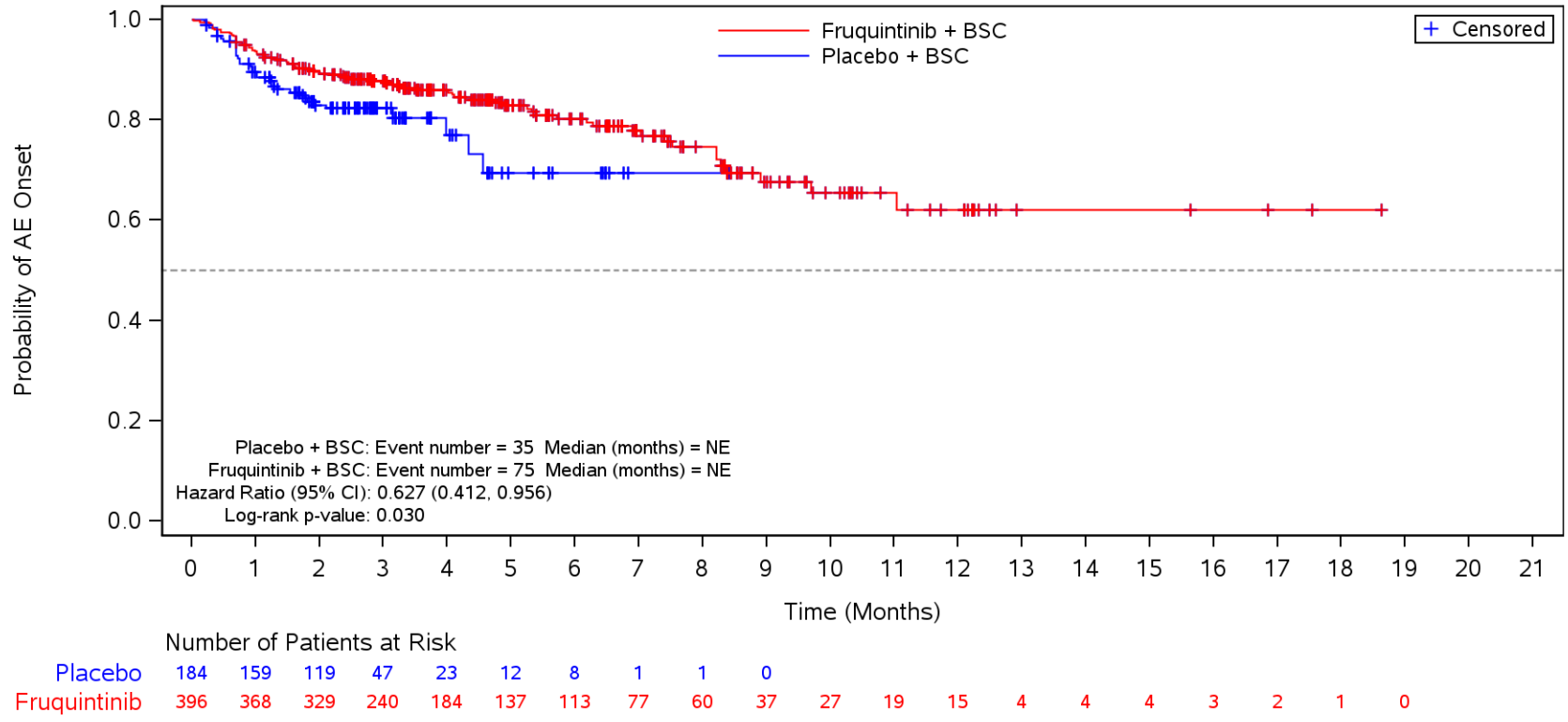
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Discontinuation due to TEAE
Single



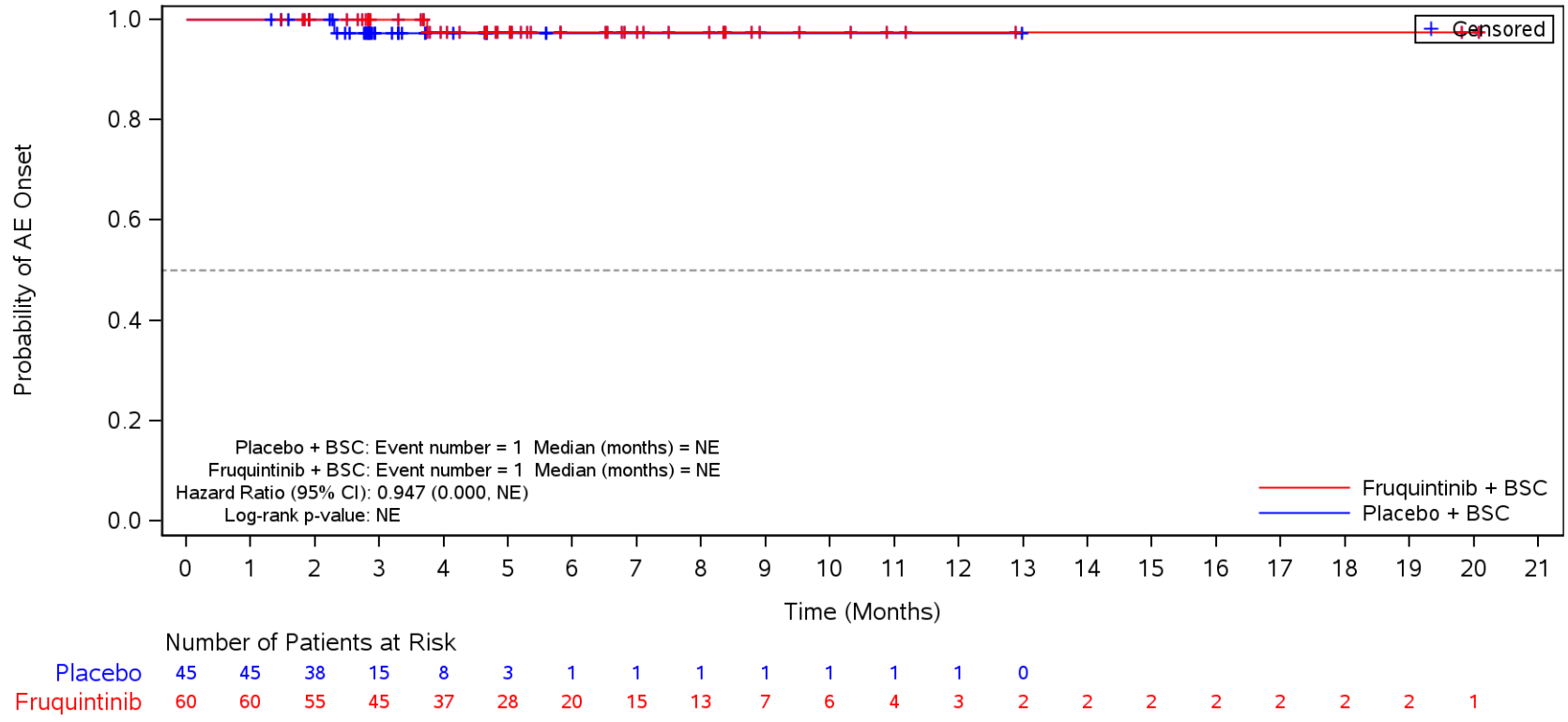
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Discontinuation due to TEAE
Multiple



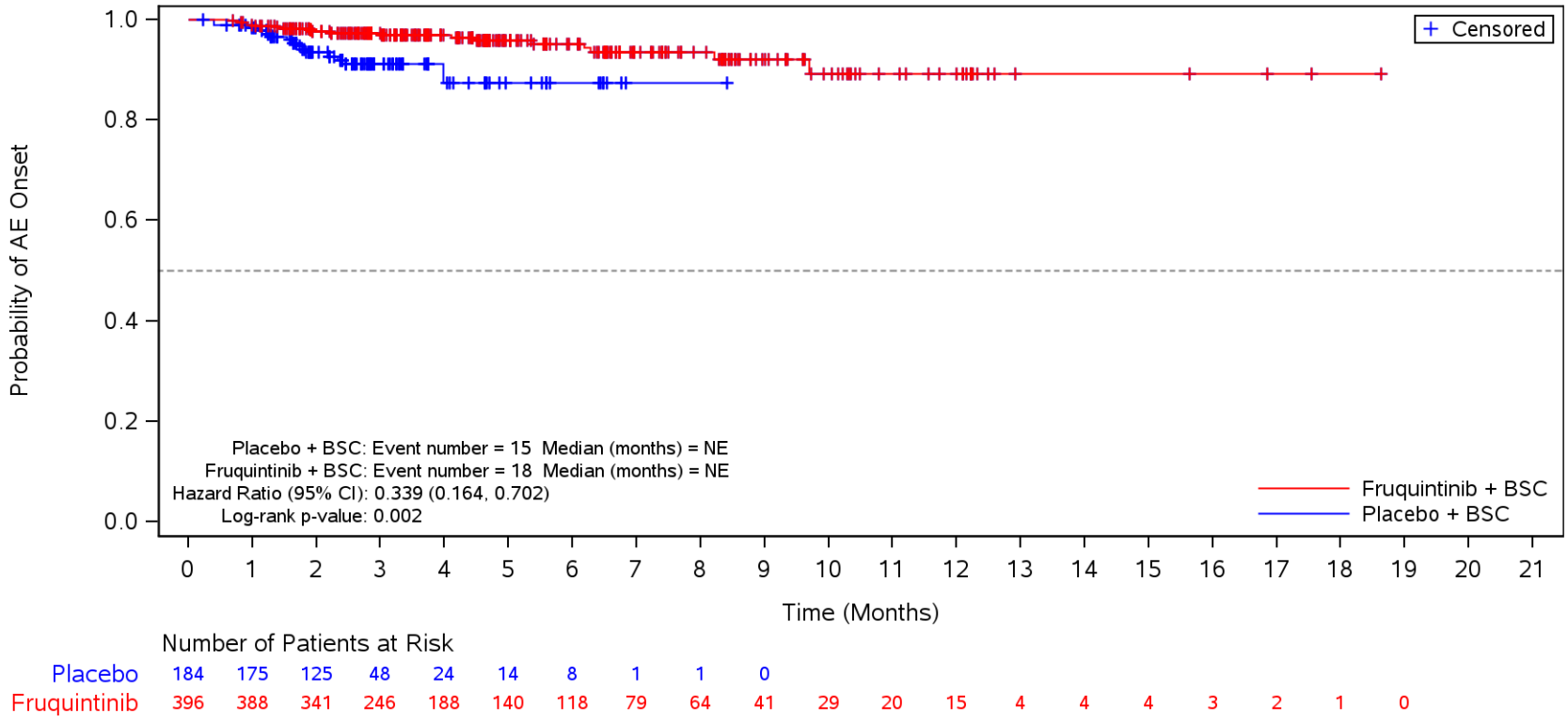
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3Q
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites Other than Colon or Rectum
Safety Population
Deaths (Grade 5 TEAEs)
Single



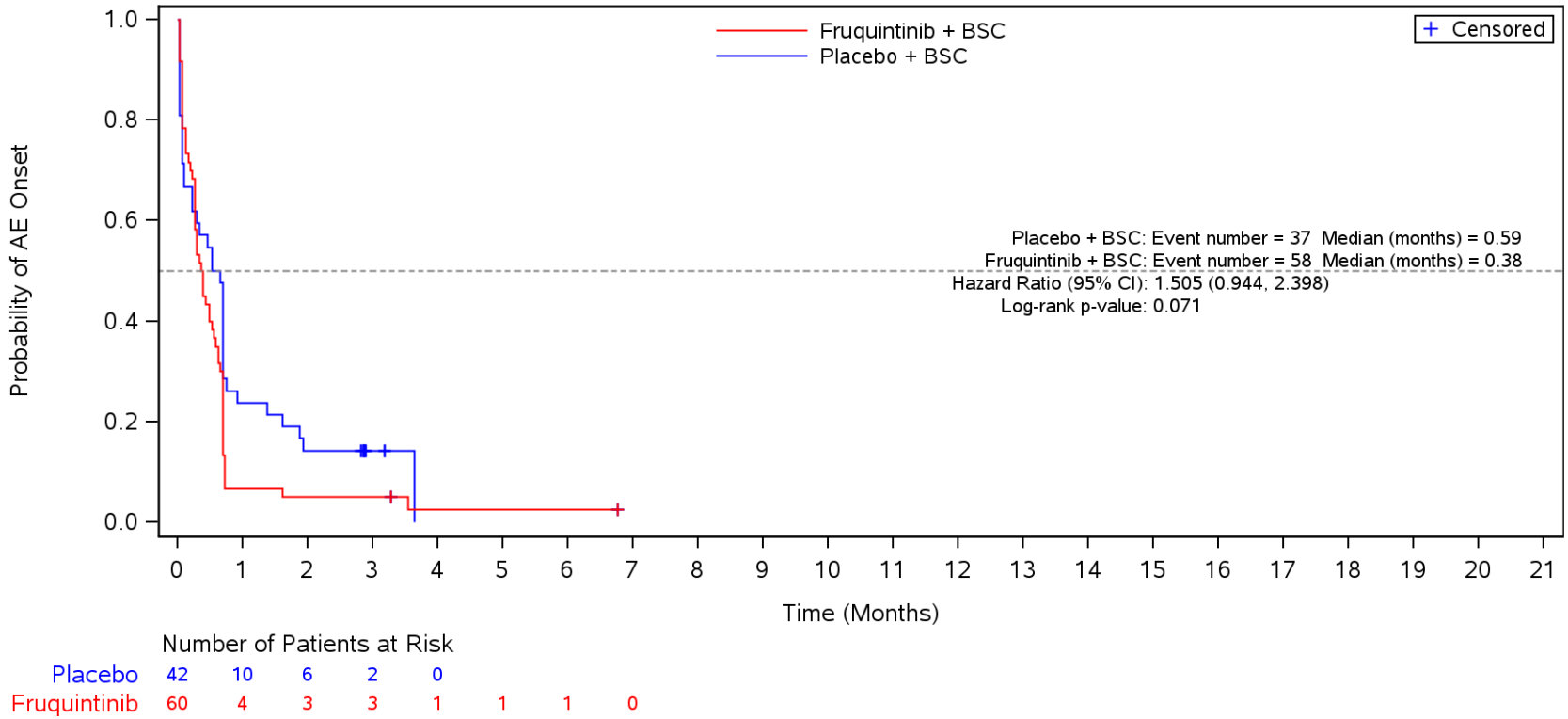
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
TEAE
Single



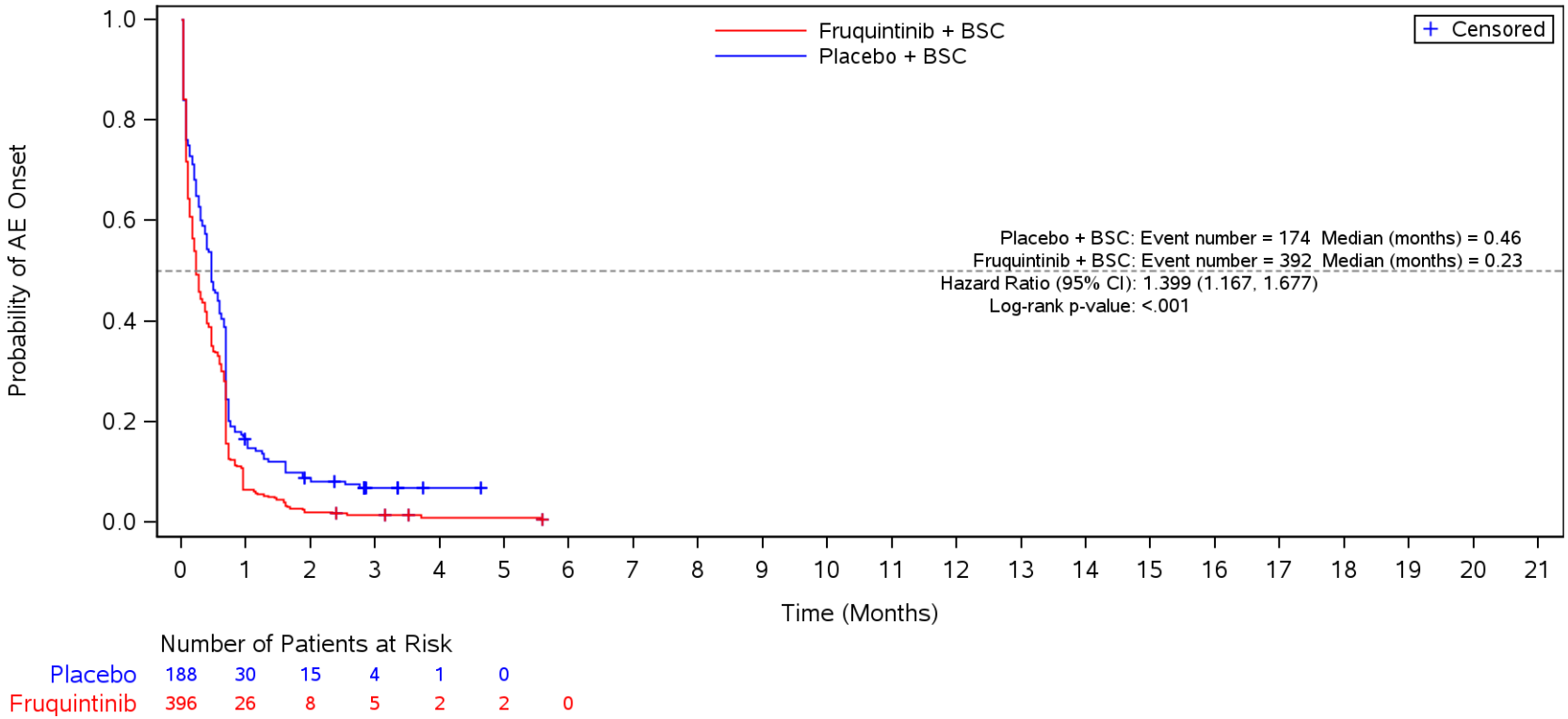
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
TEAE
Single



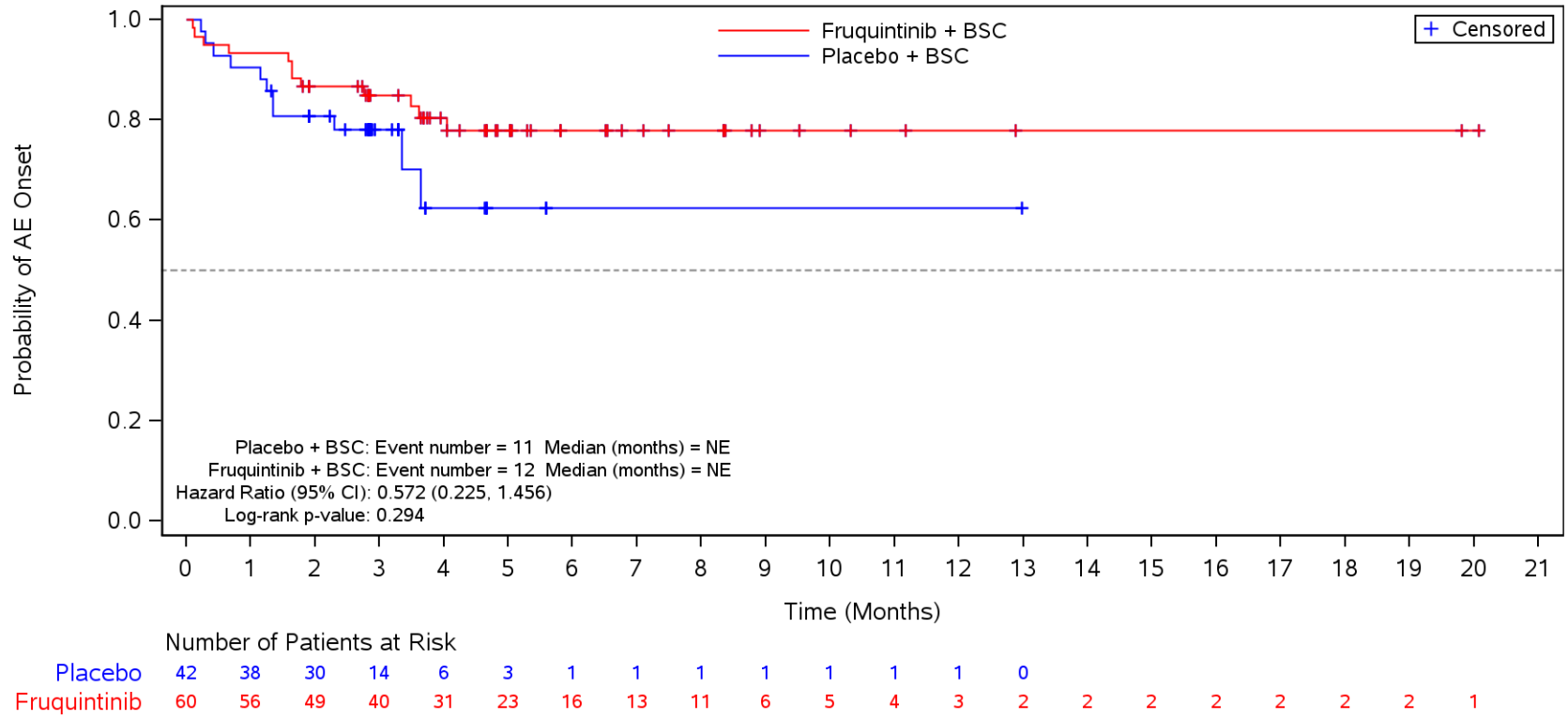
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
TEAE
Multiple



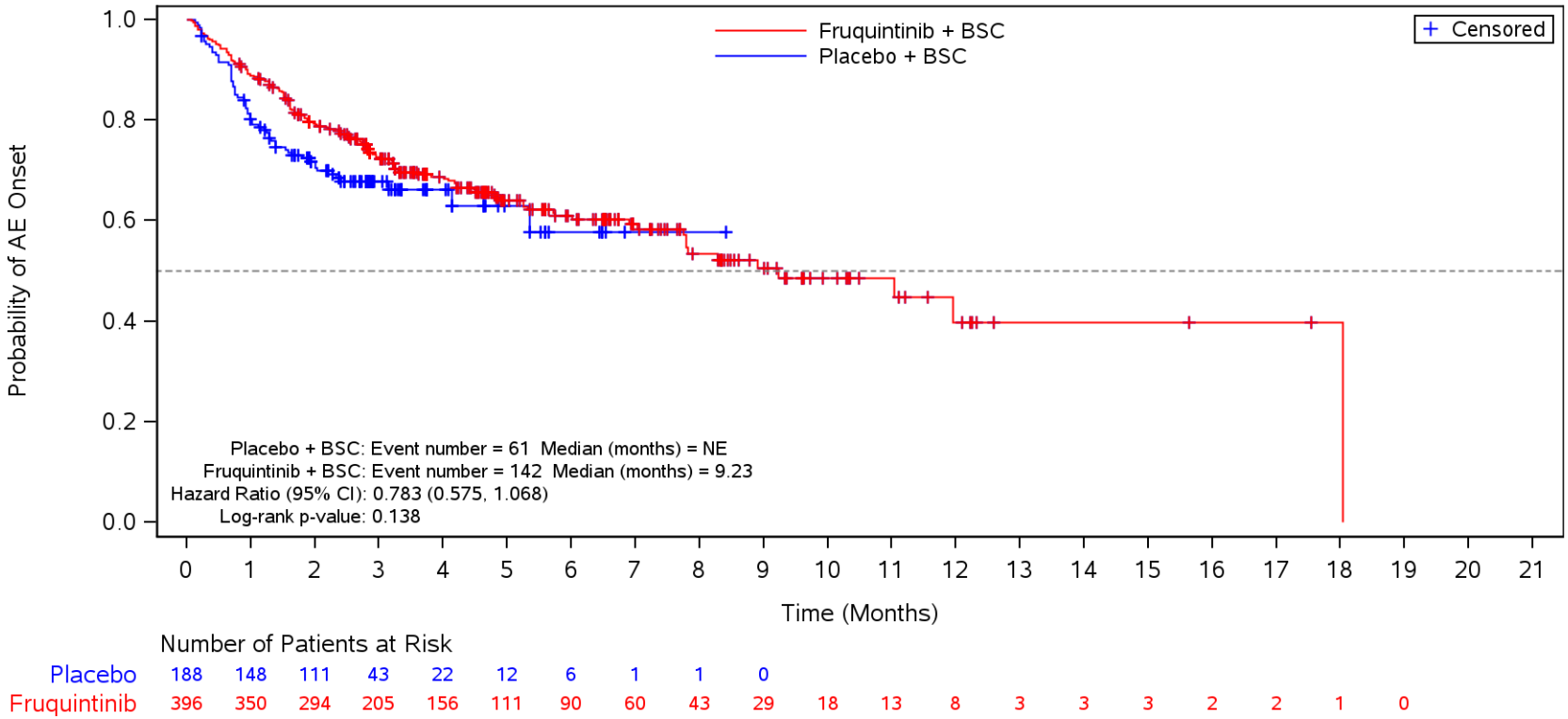
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
Serious TEAE
Single



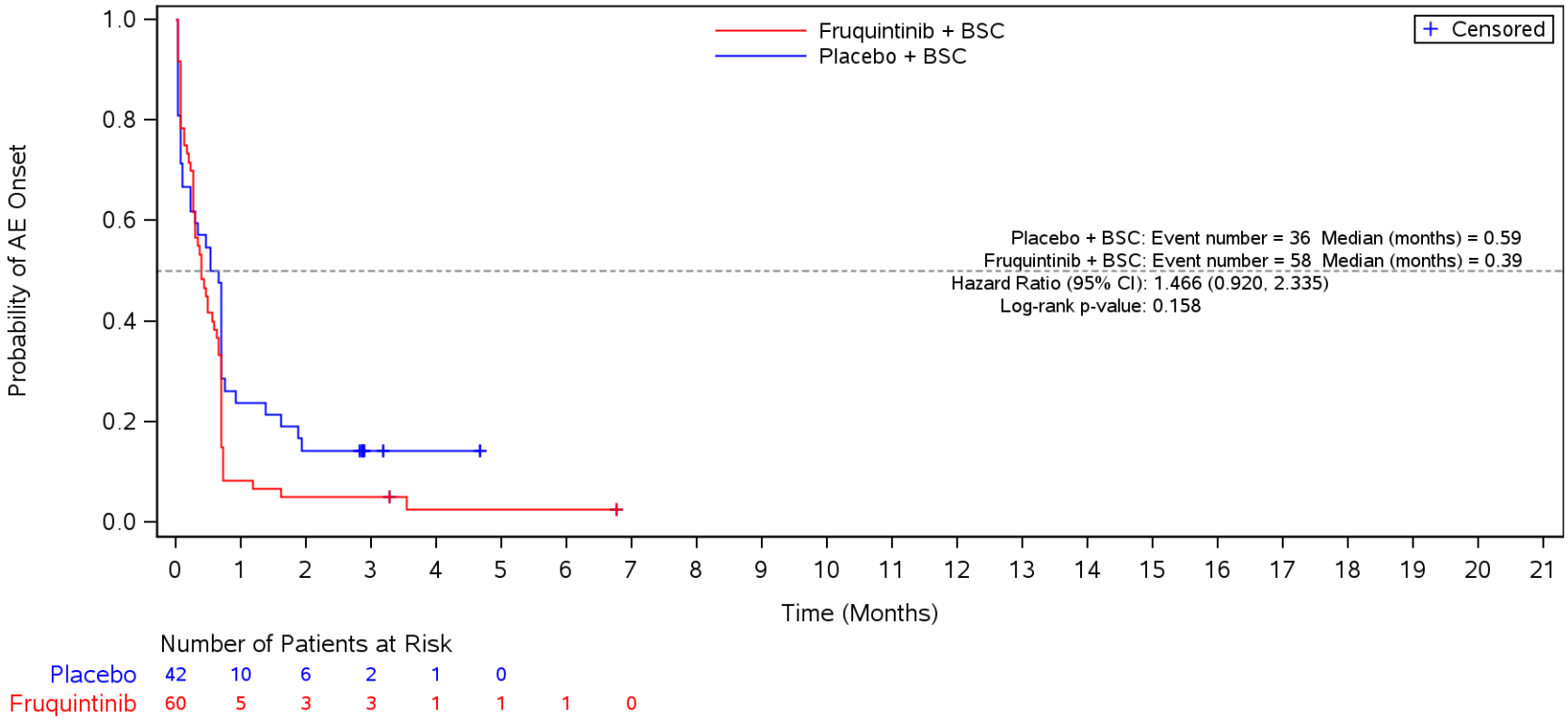
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
Serious TEAE
Multiple



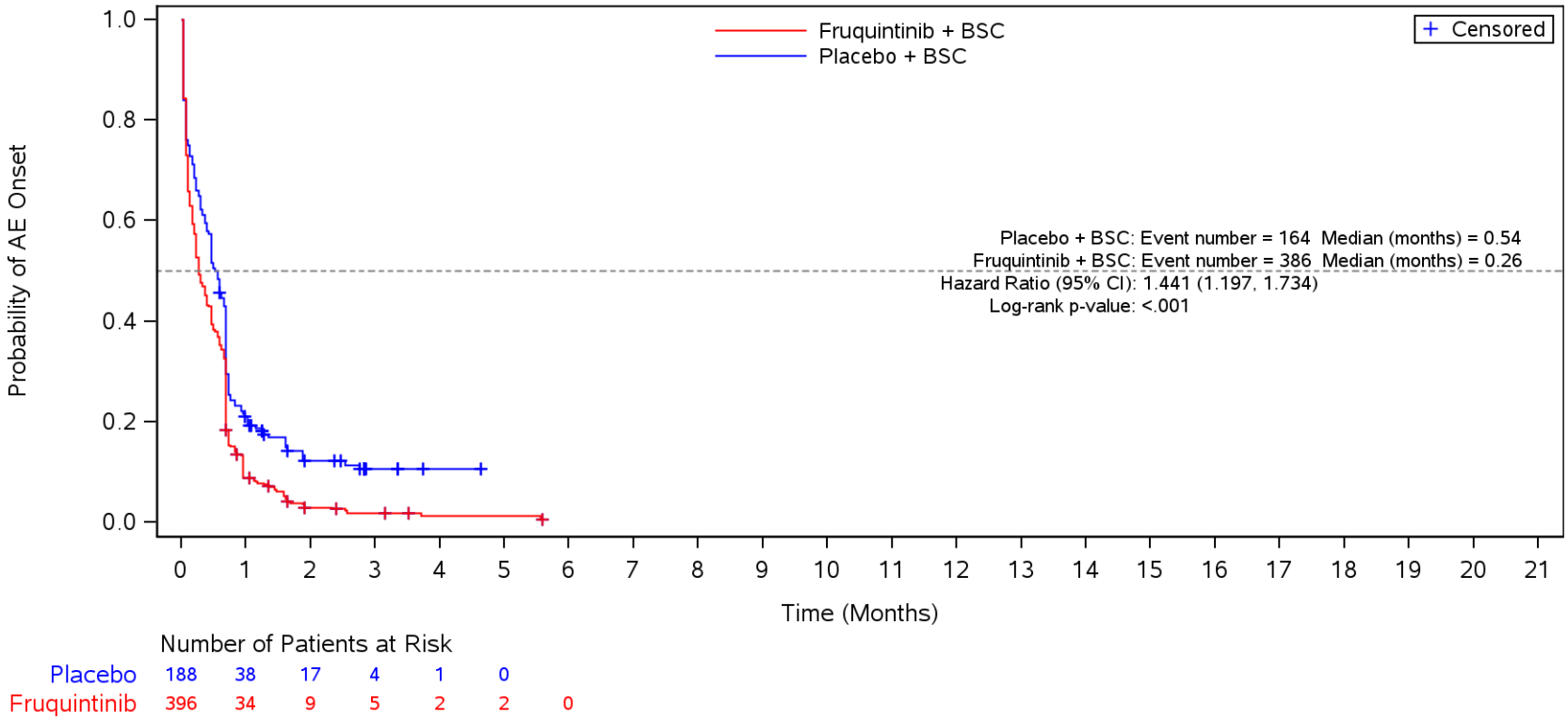
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
TEAE ≤ CTCAE Grade 2
Single



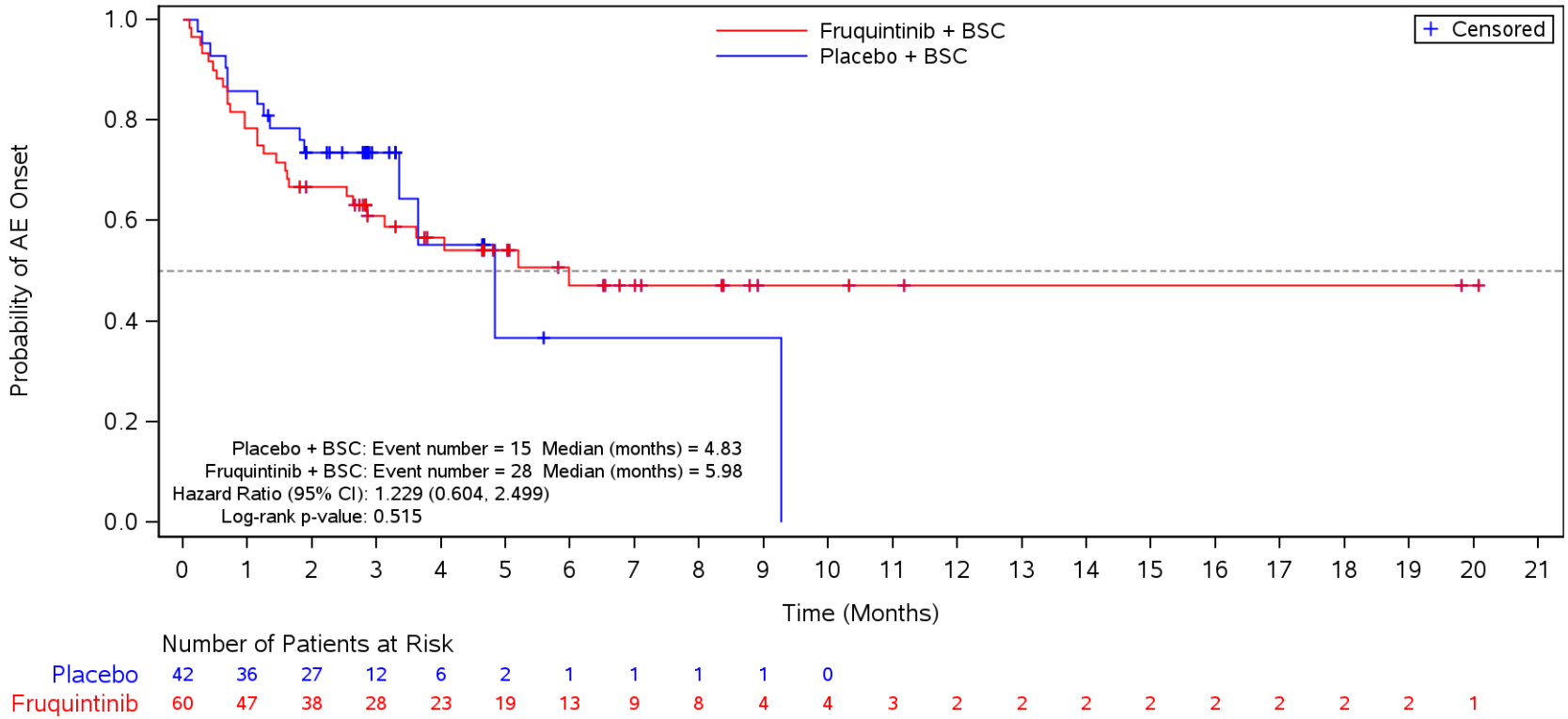
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
TEAE ≤ CTCAE Grade 2
Multiple



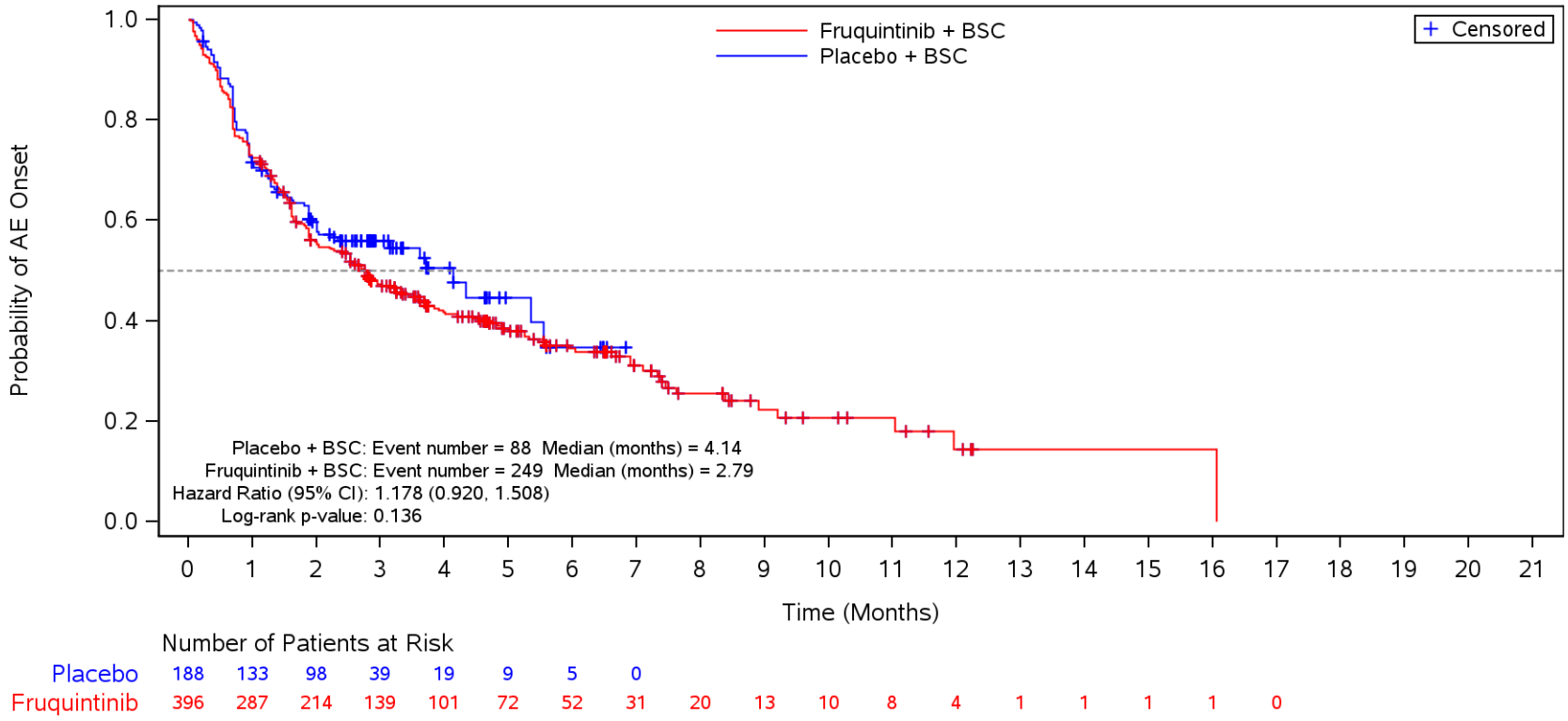
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3
Single



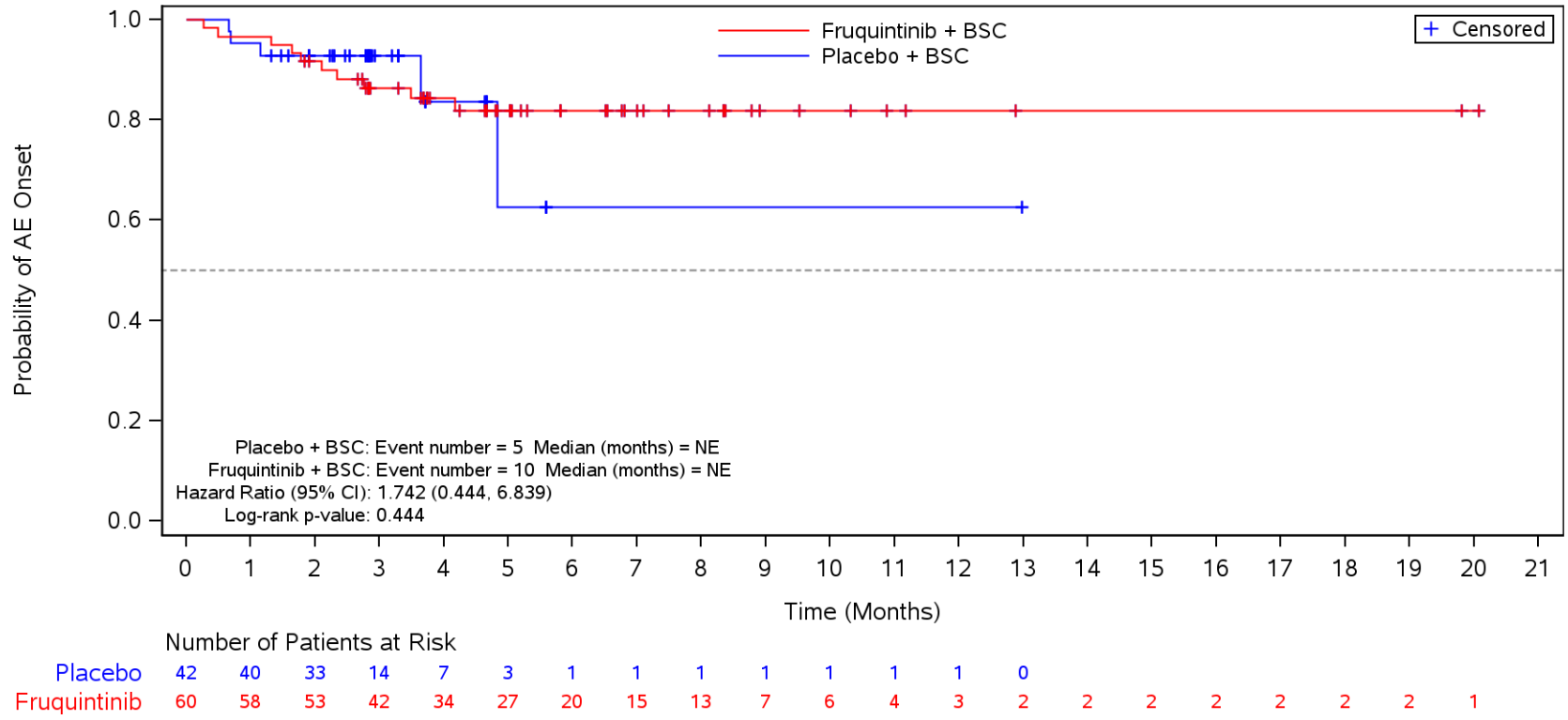
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
TEAE ≥ CTCAE Grade 3
Multiple



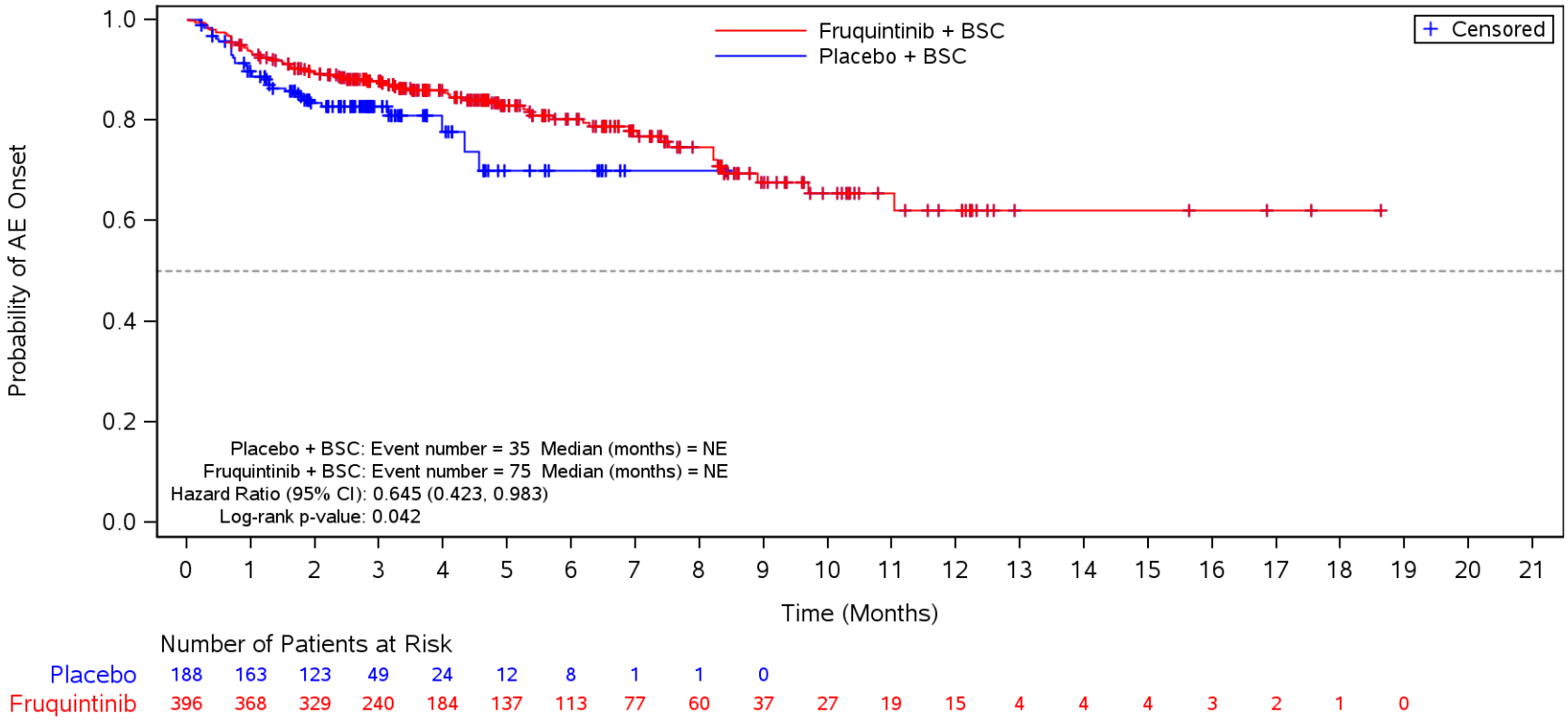
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
Discontinuation due to TEAE
Single



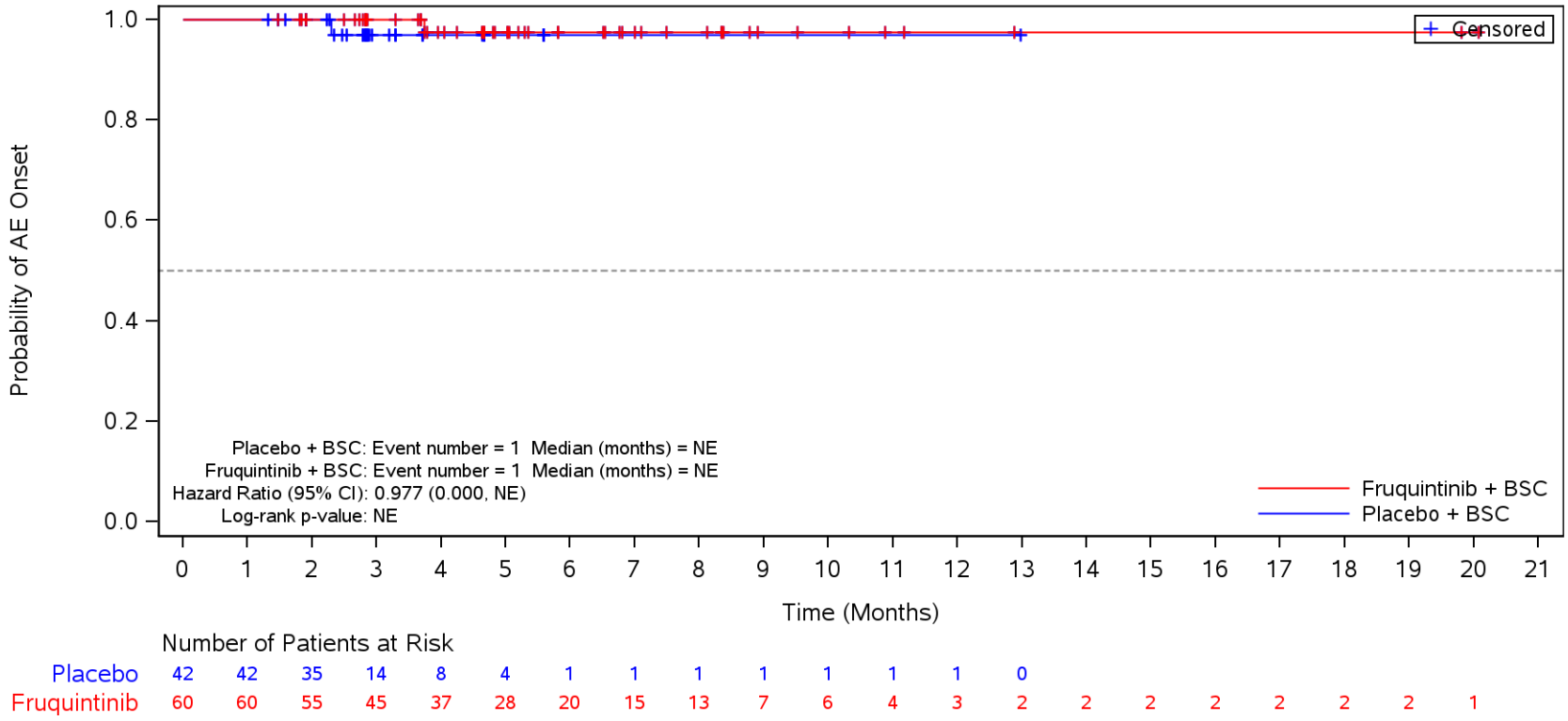
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
Discontinuation due to TEAE
Multiple



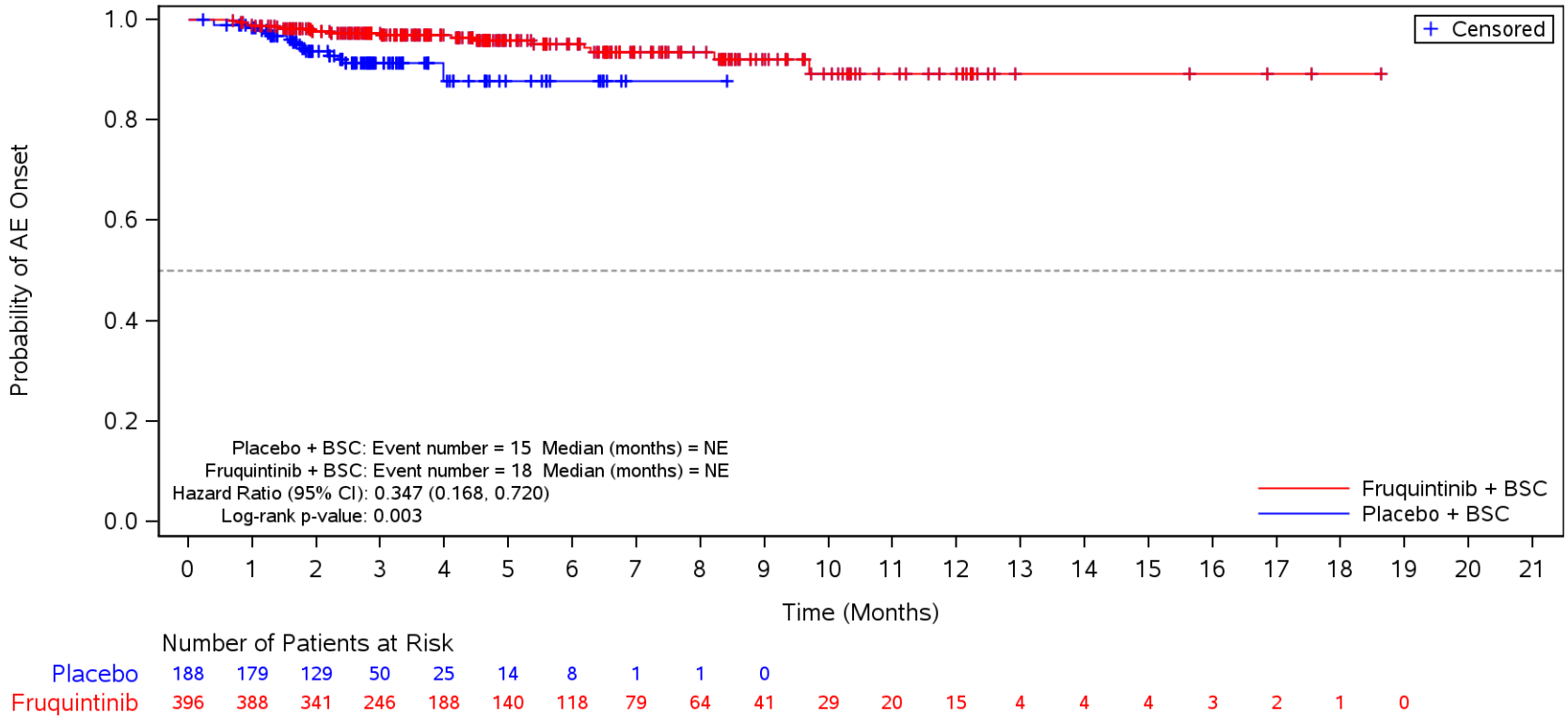
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3R
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Number of Metastatic Tumor Sites
Safety Population
Deaths (Grade 5 TEAEs)
Single



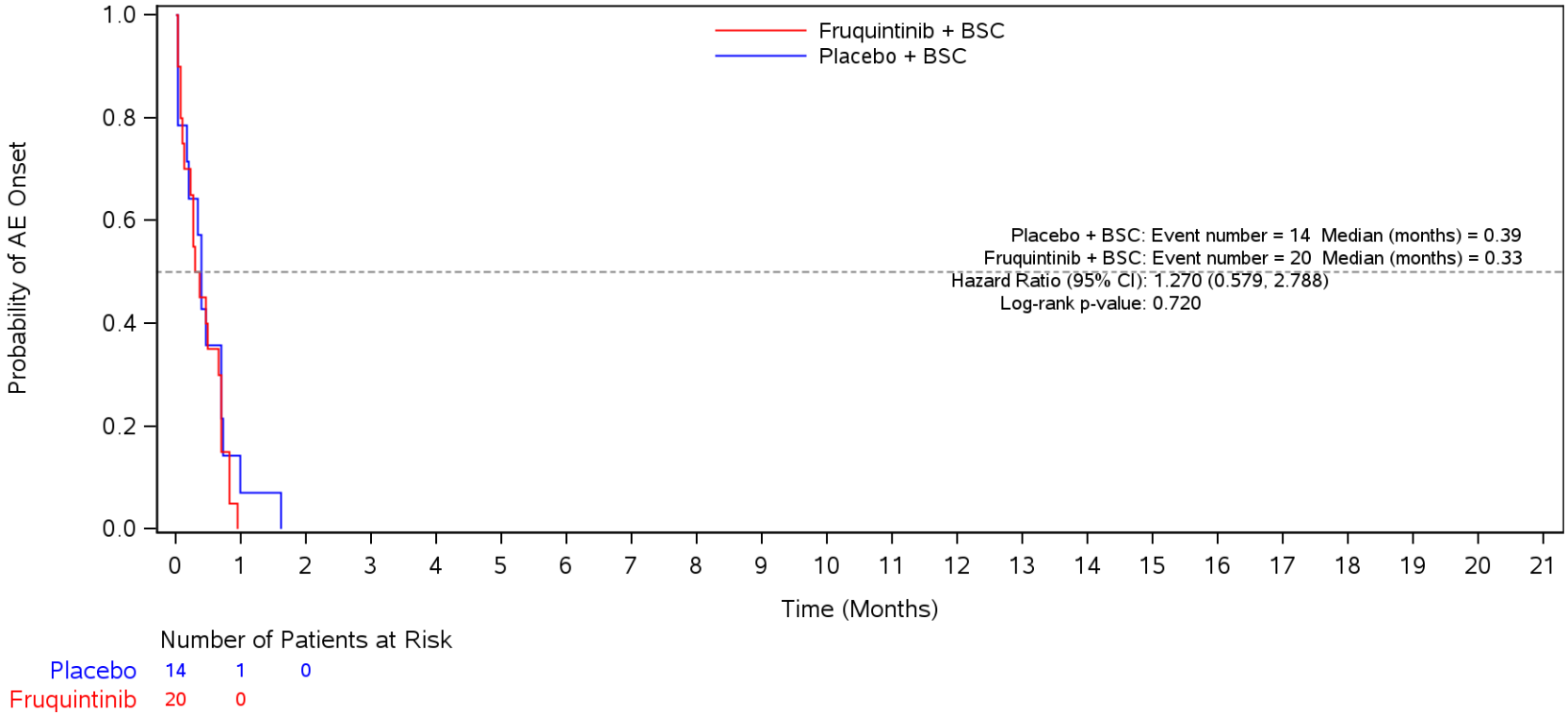
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE
< 18.5



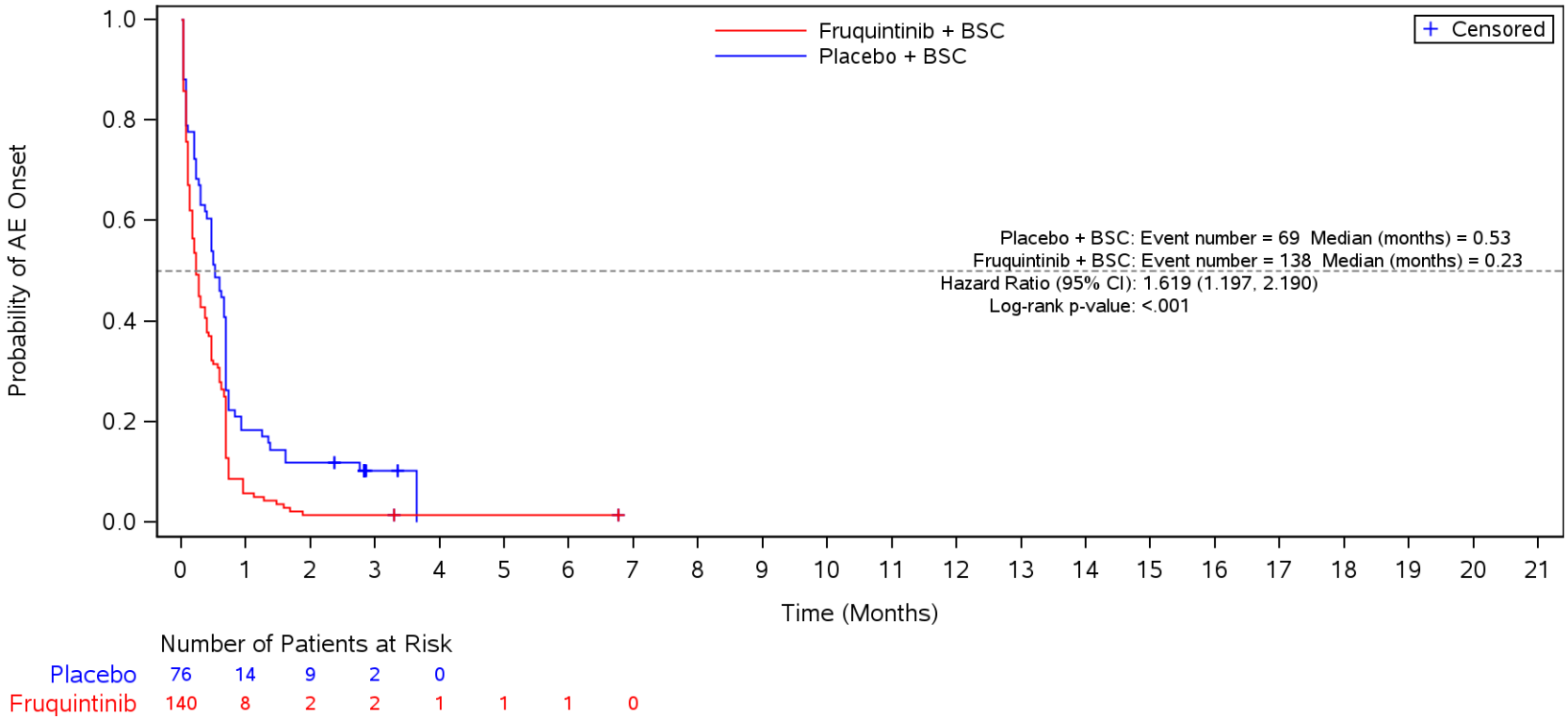
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE
< 18.5



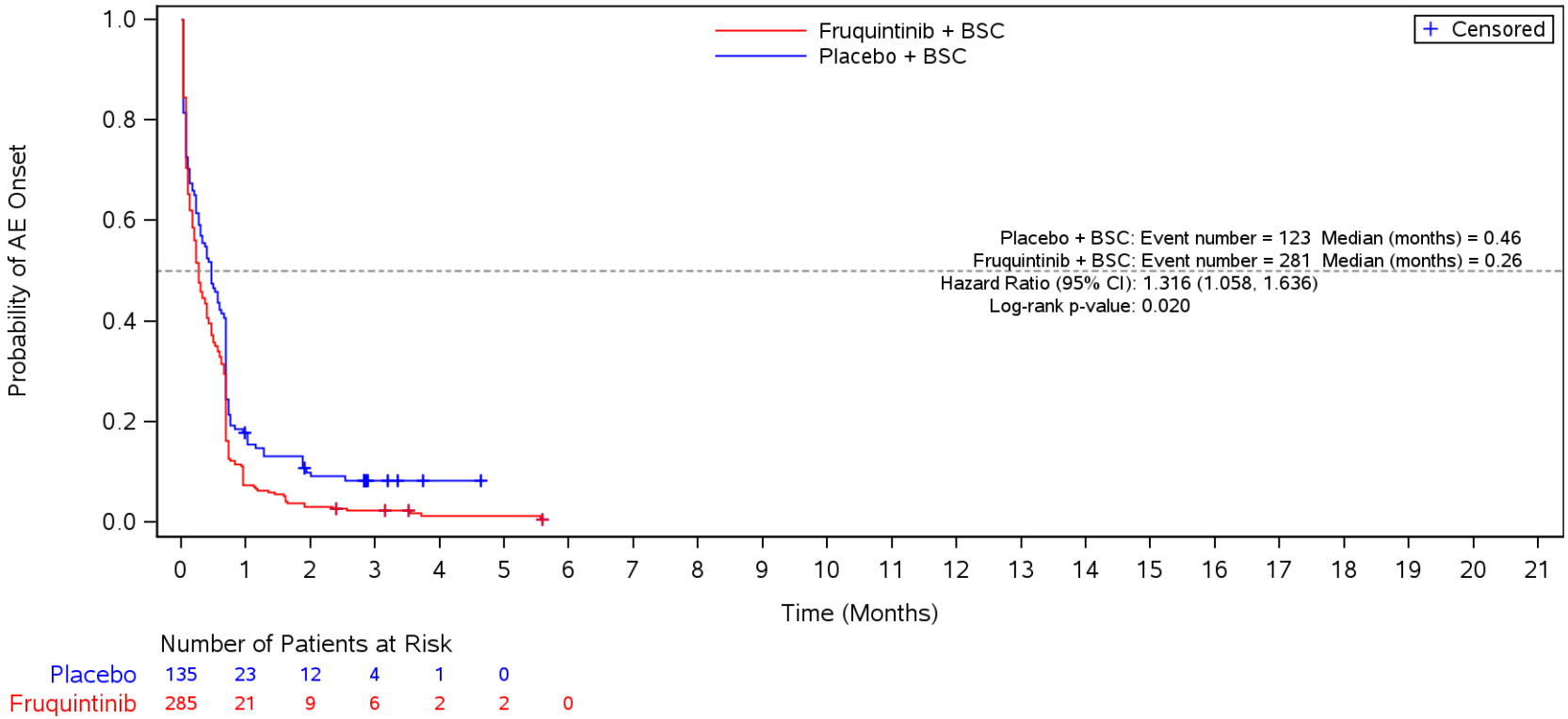
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE
>= 18.5 to < 24



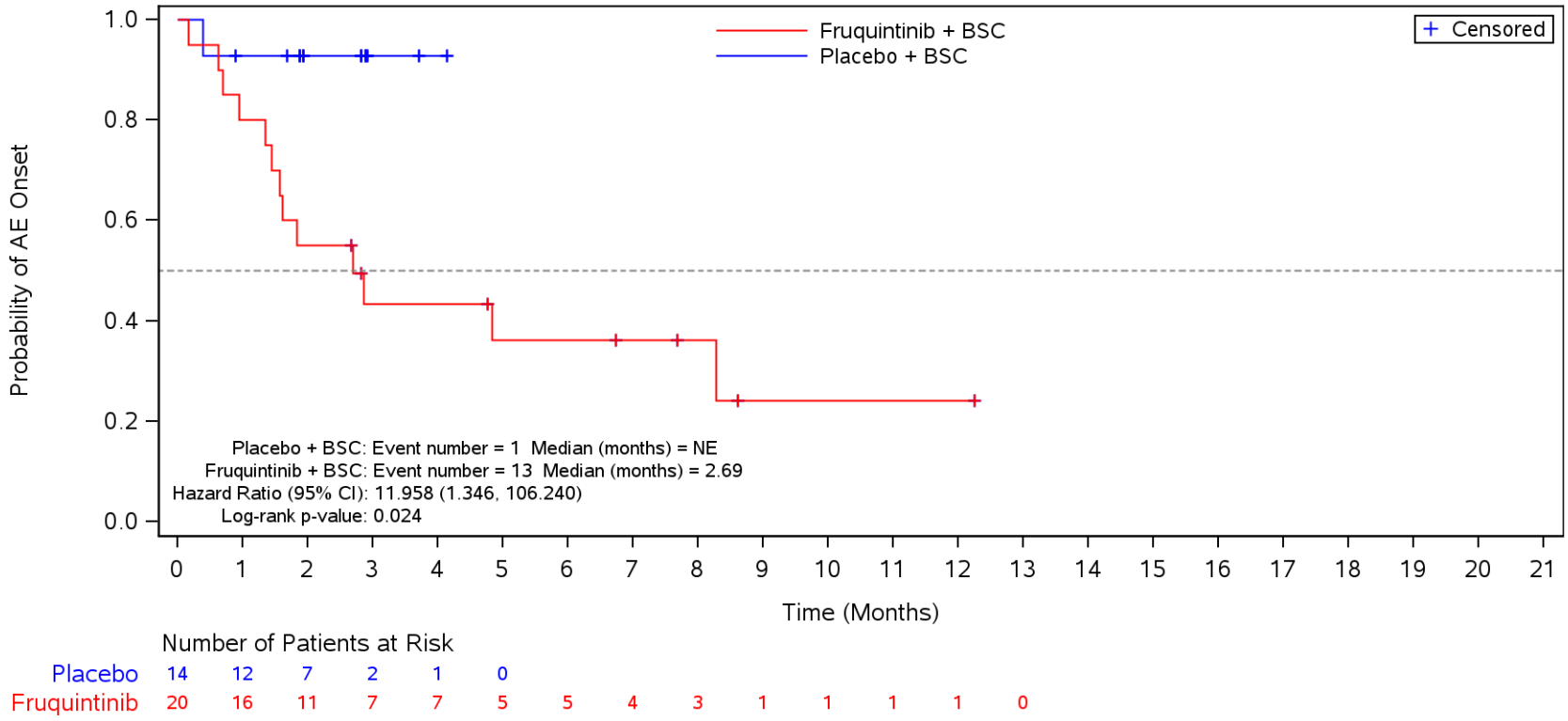
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE
>= 24



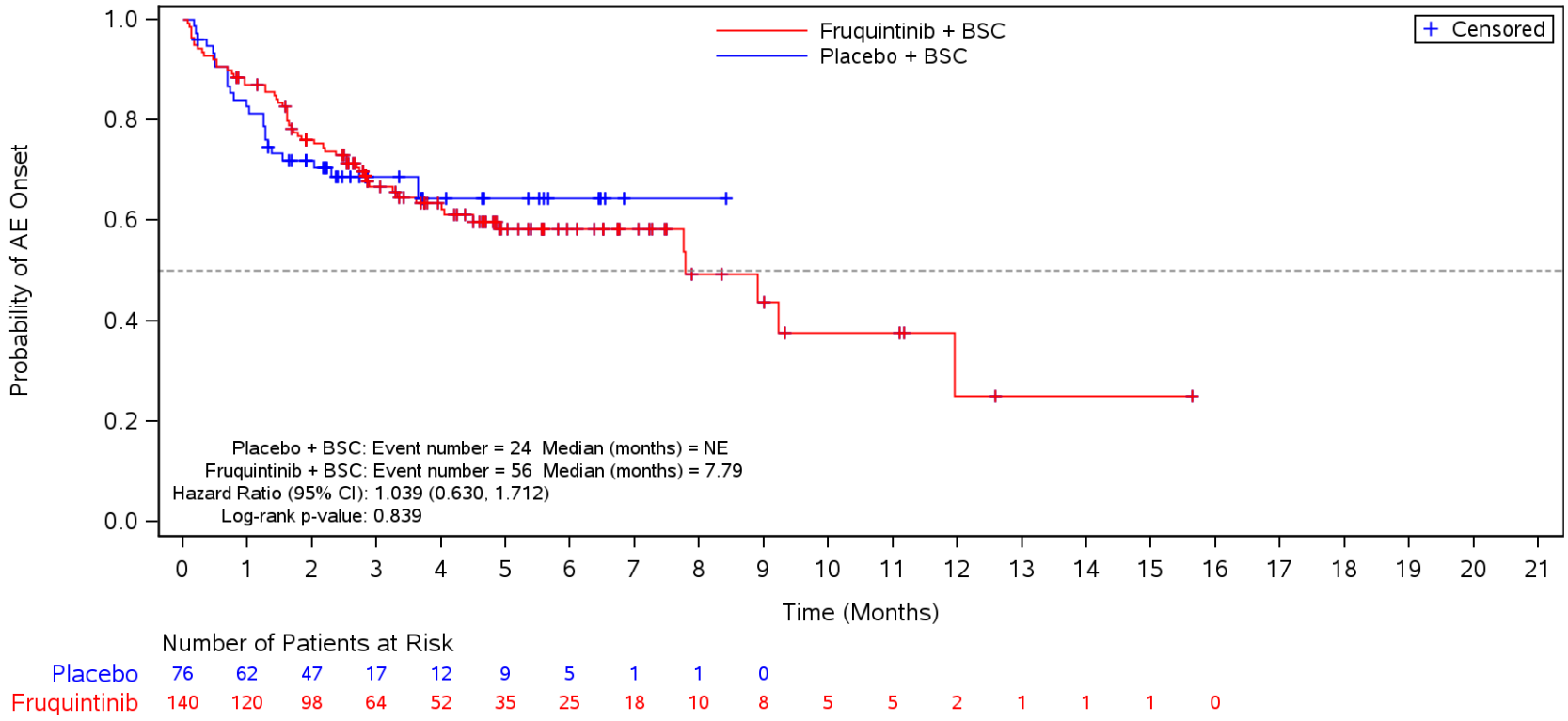
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
Serious TEAE
< 18.5



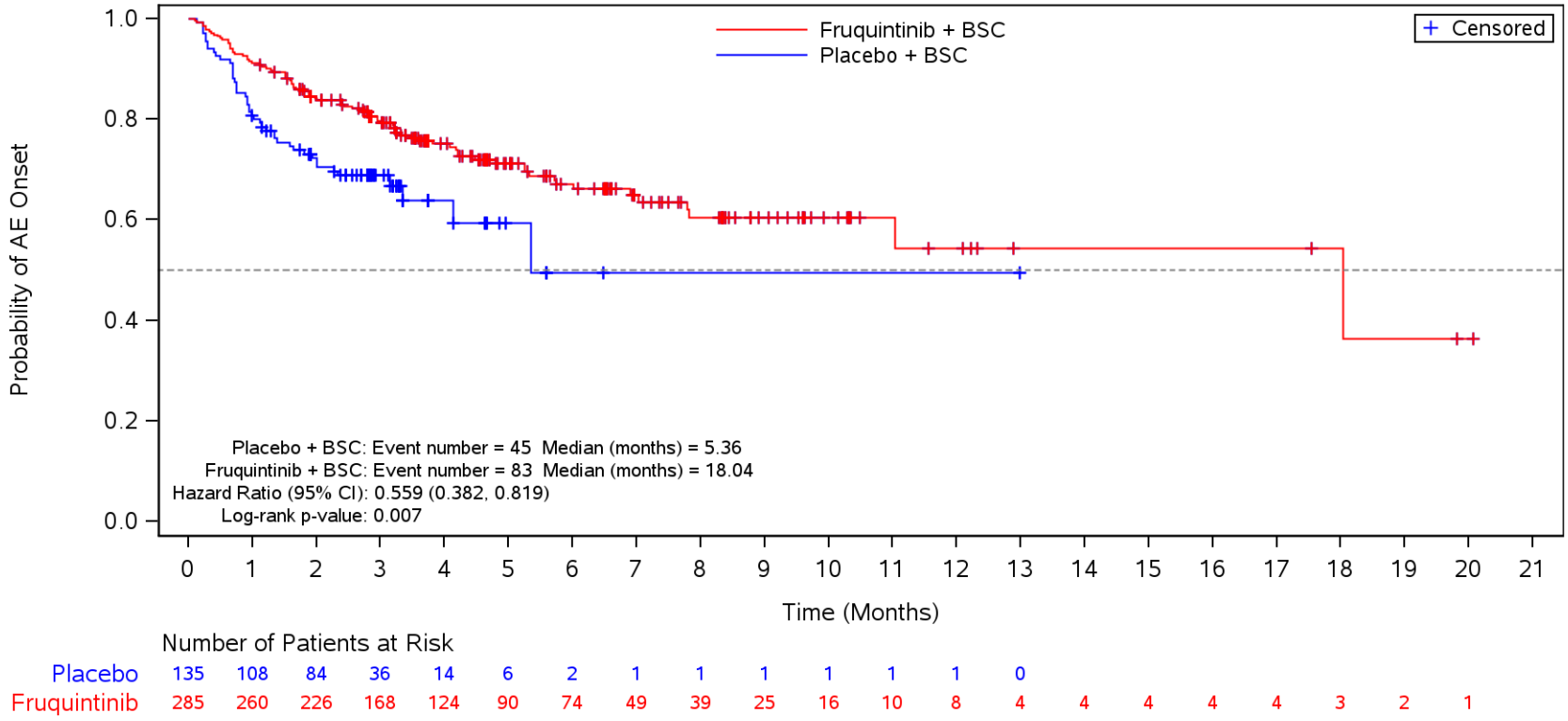
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
Serious TEAE
>= 18.5 to < 24



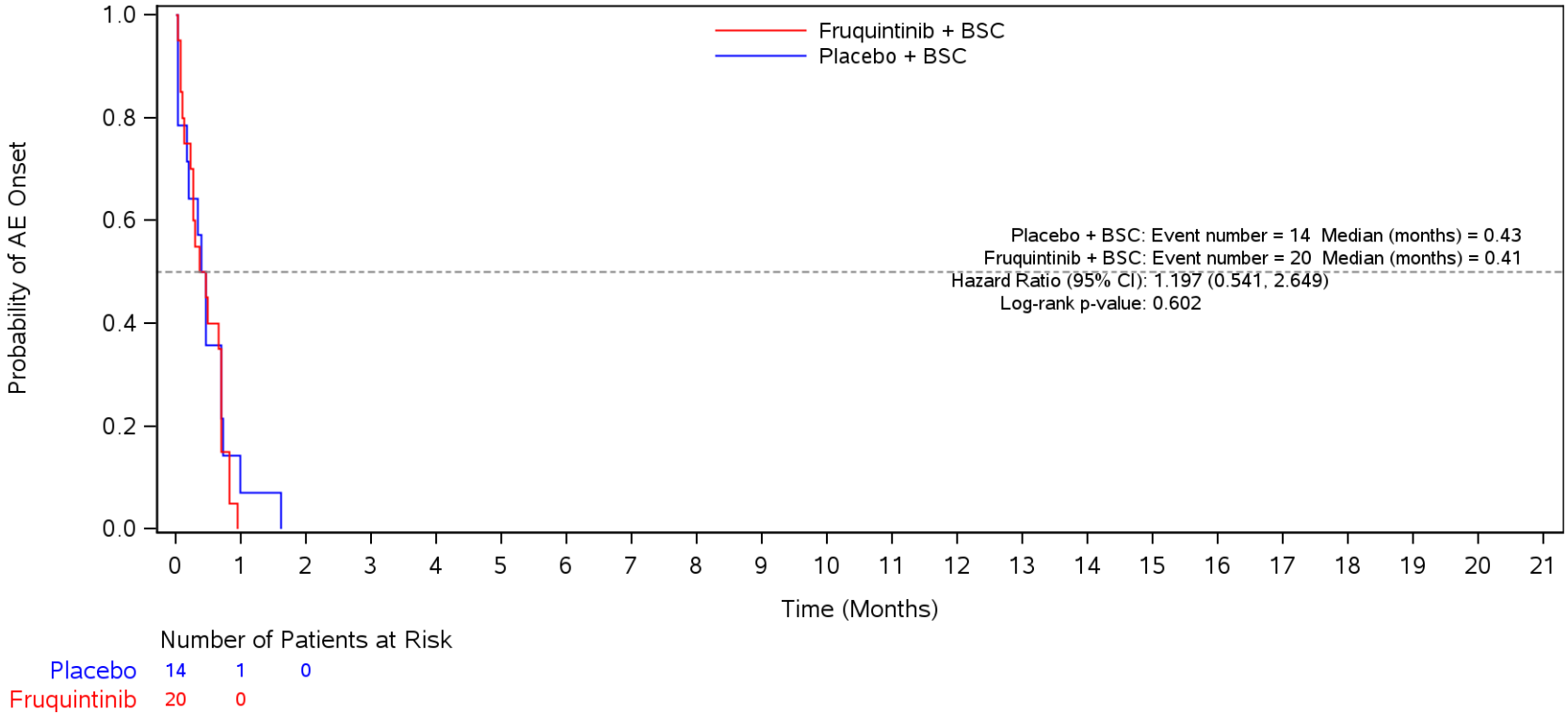
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
Serious TEAE
>= 24



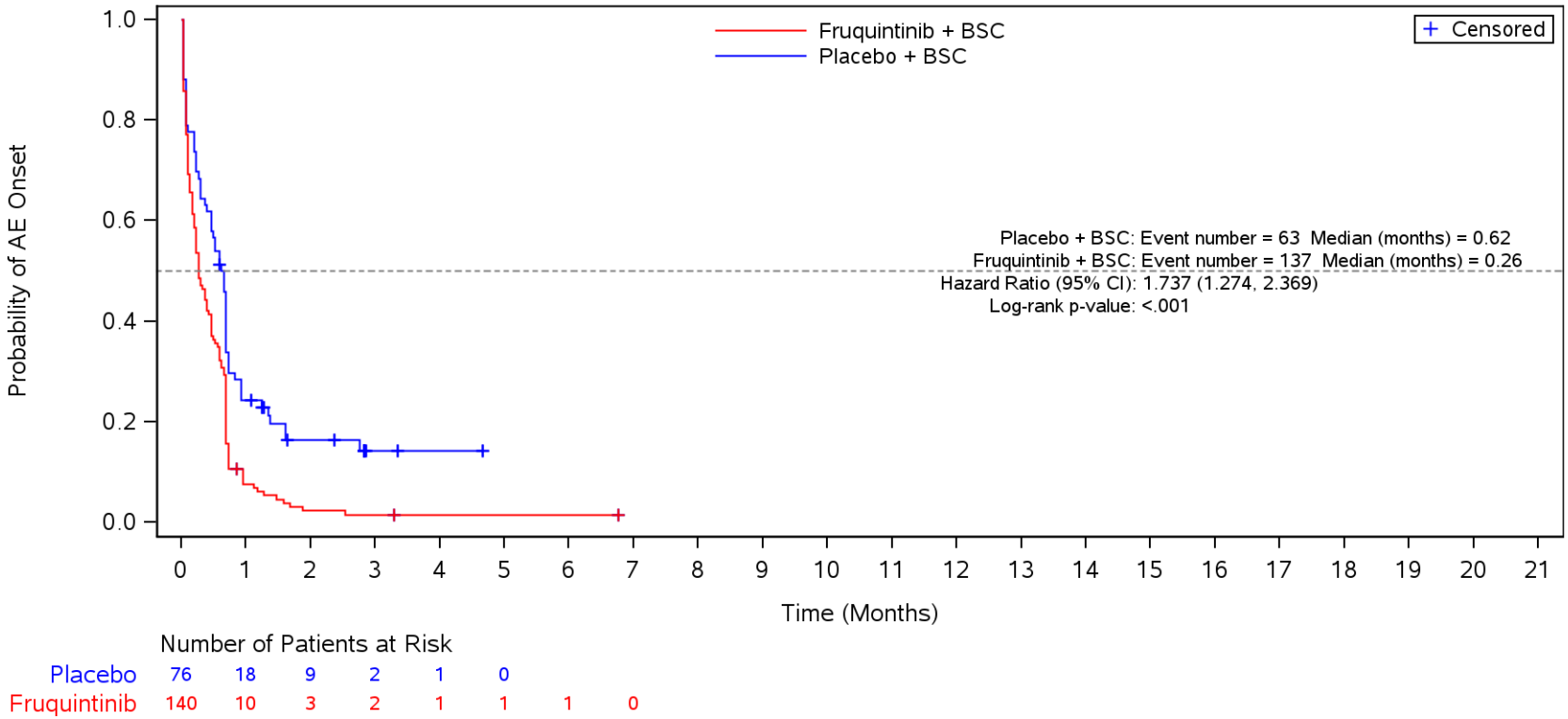
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE ≤ CTCAE Grade 2
< 18.5



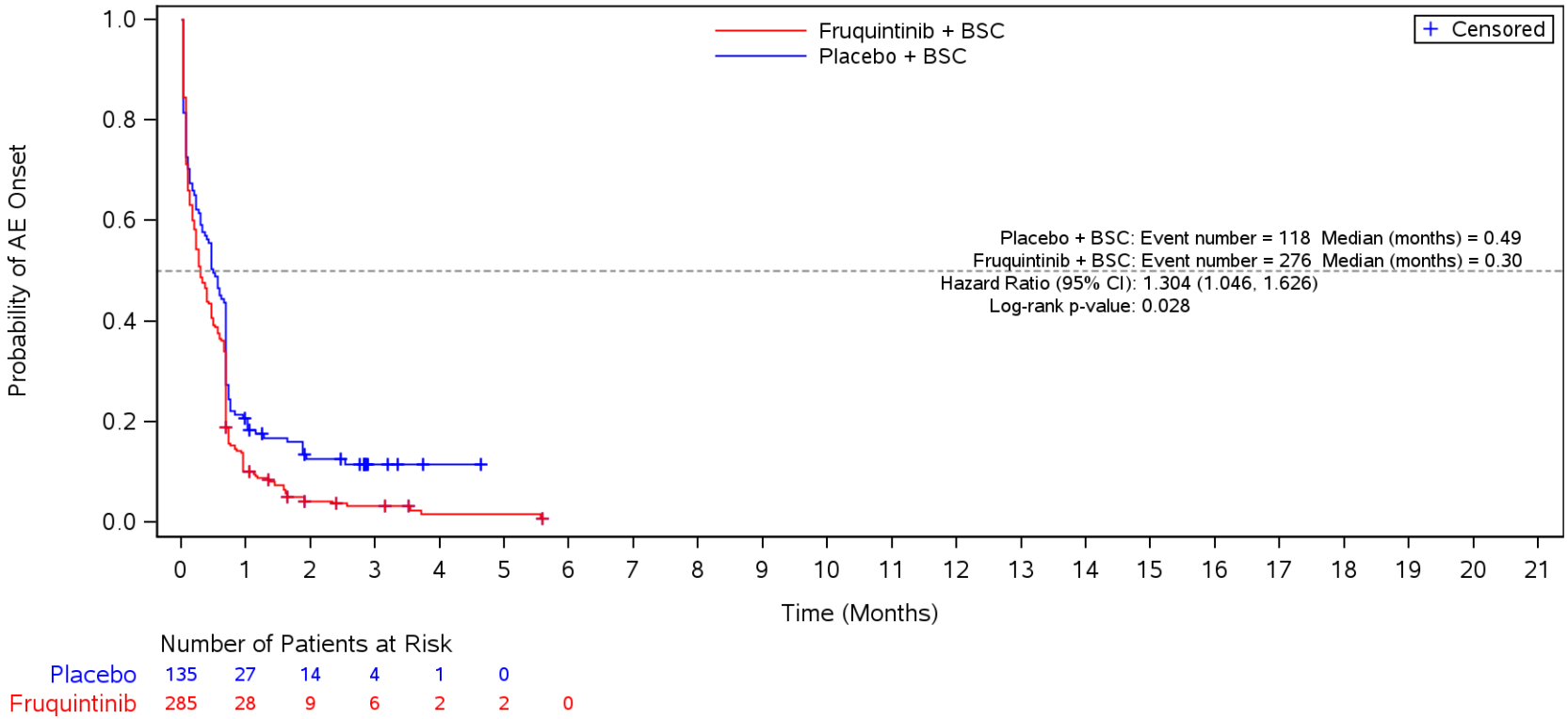
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE ≤ CTCAE Grade 2
>= 18.5 to < 24



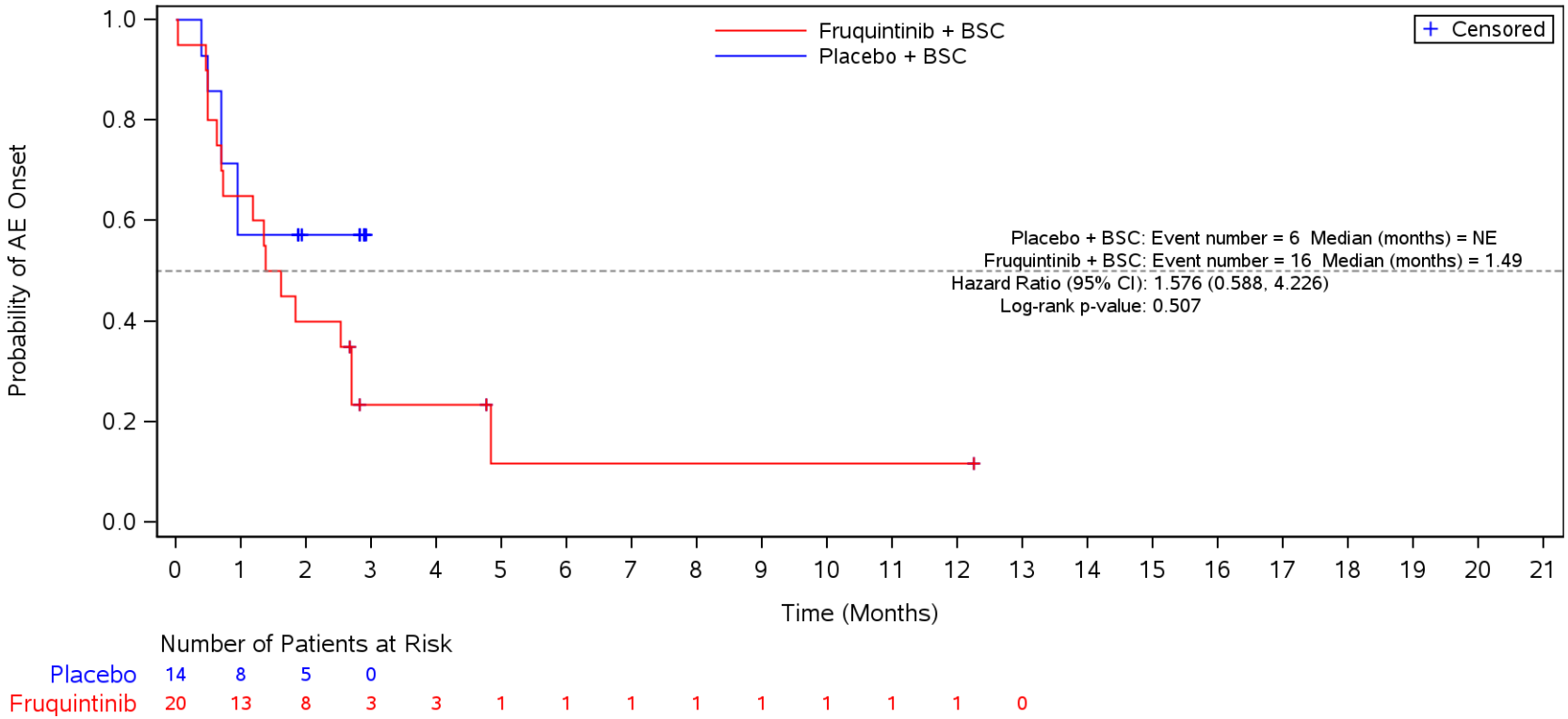
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE ≤ CTCAE Grade 2
>= 24



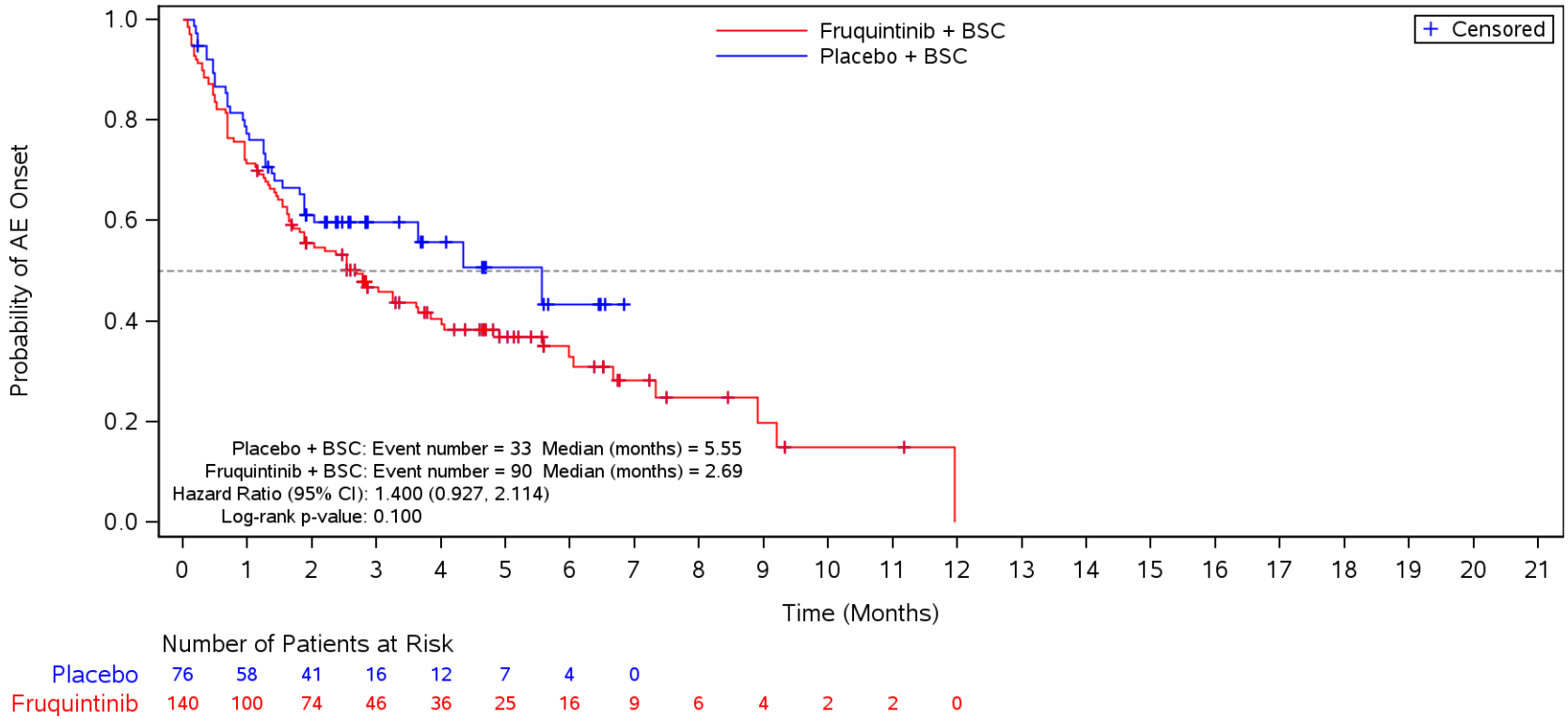
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3
< 18.5



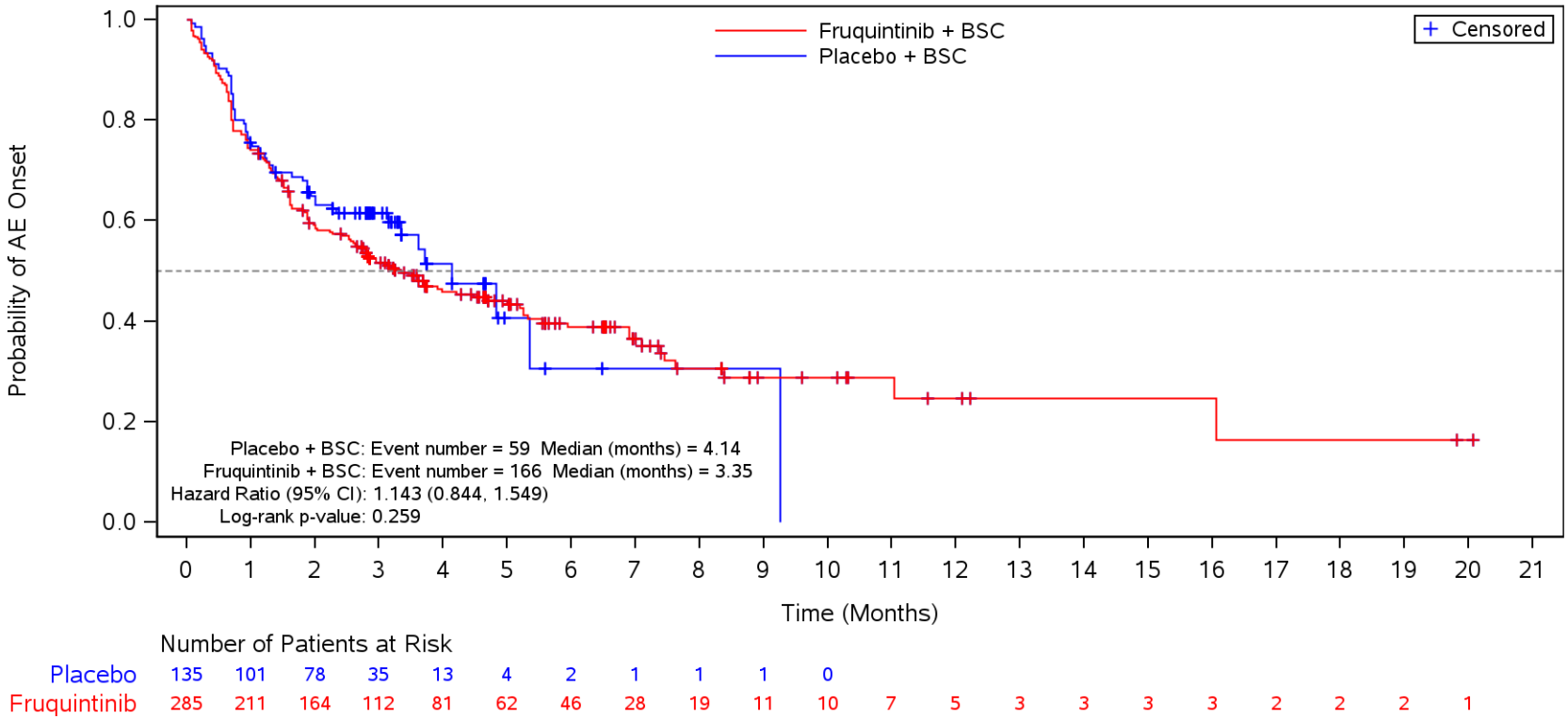
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3
>= 18.5 to < 24



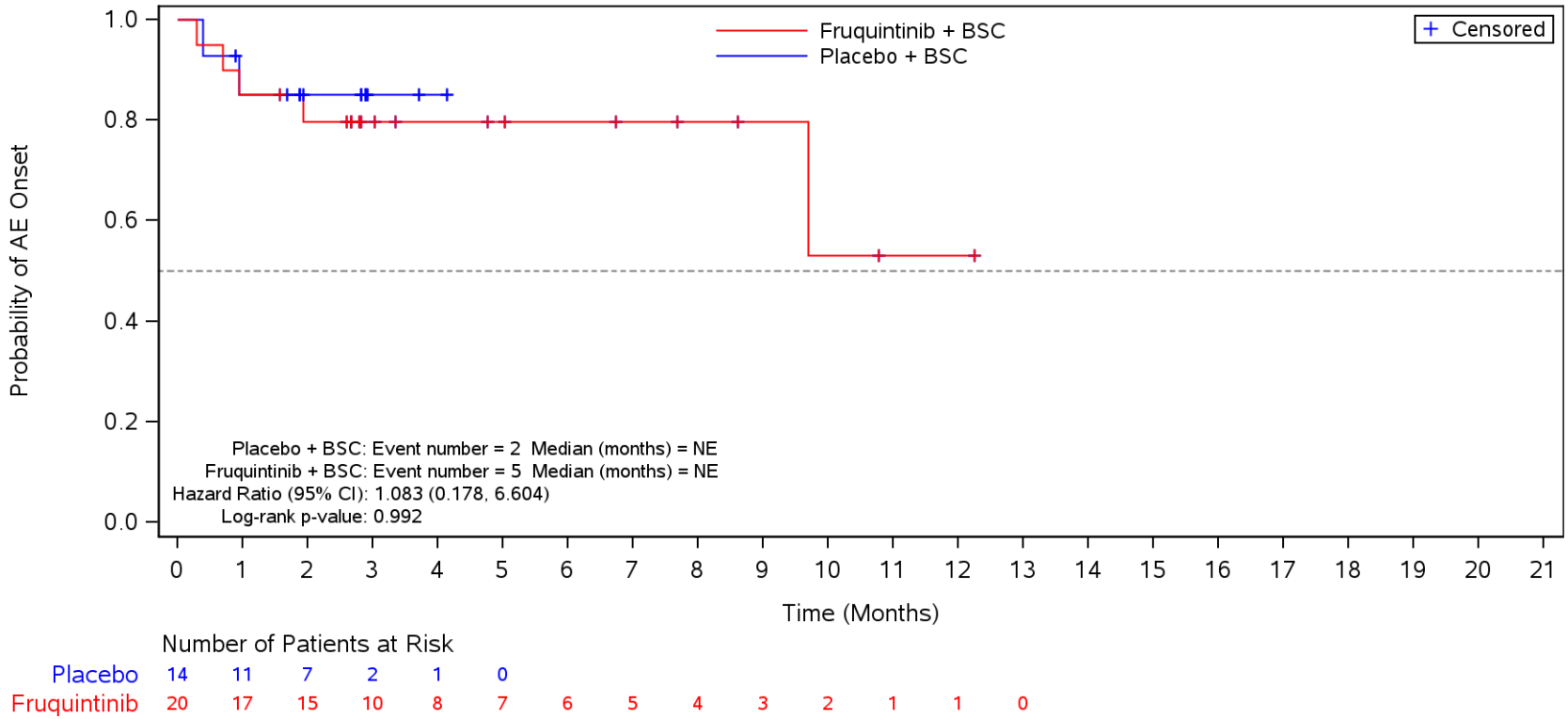
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
TEAE ≥ CTCAE Grade 3
>= 24



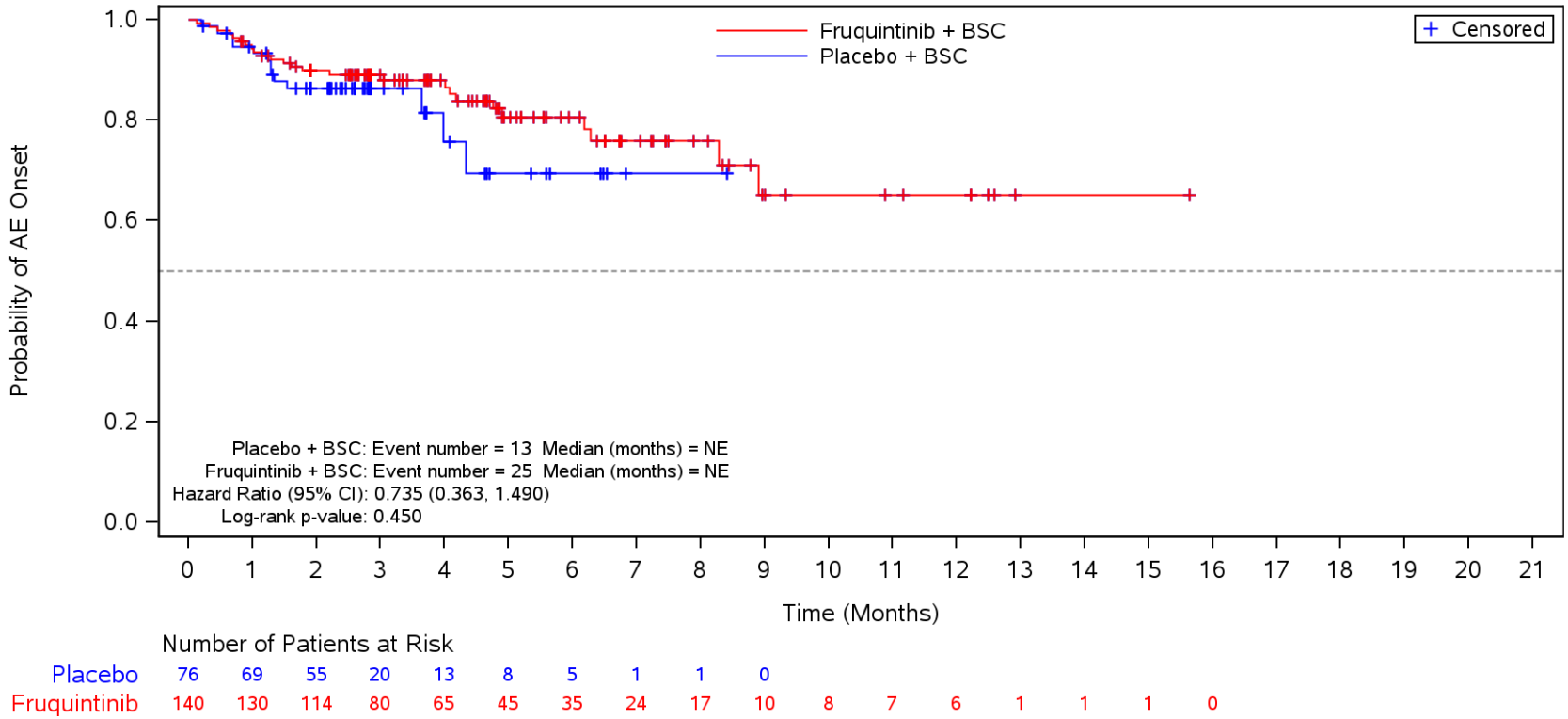
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
Discontinuation due to TEAE
< 18.5



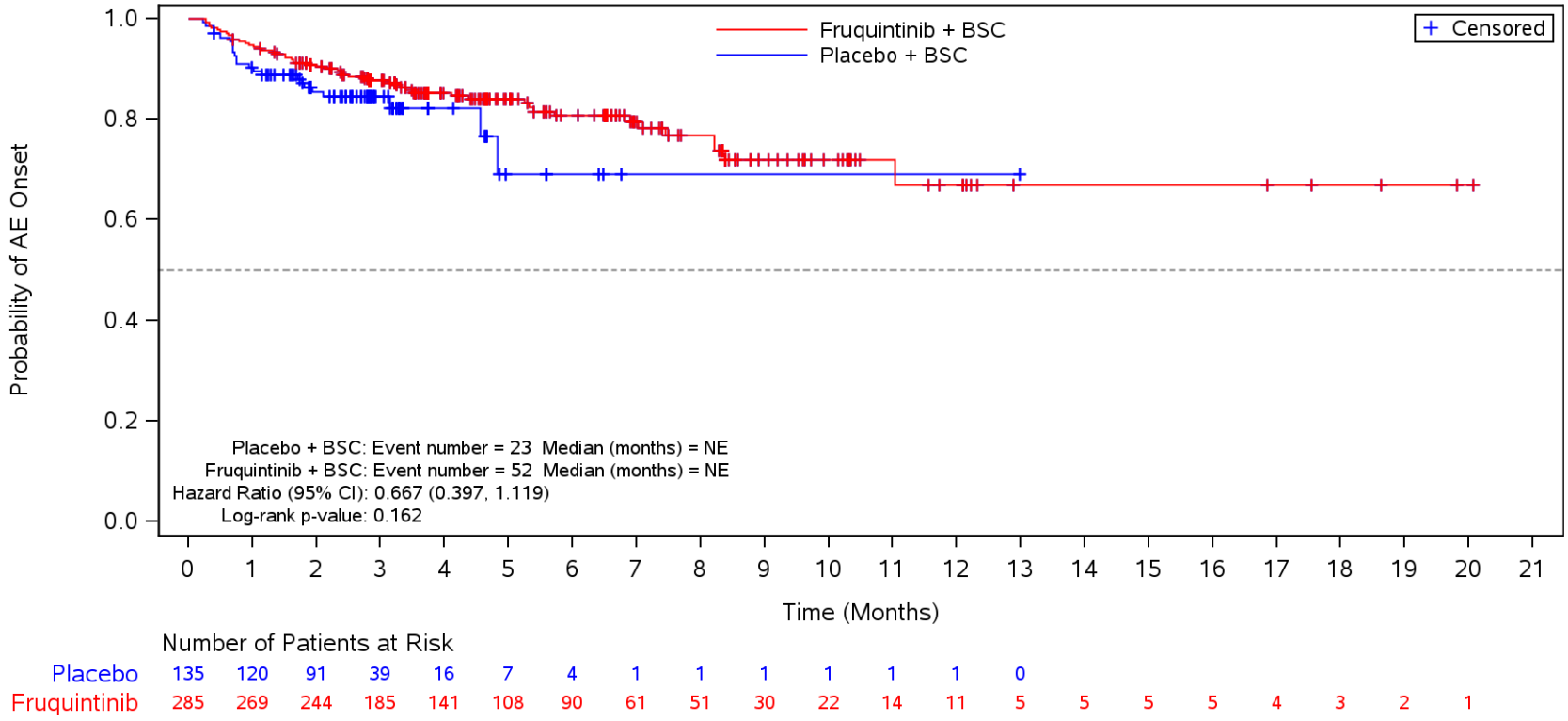
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
Discontinuation due to TEAE
>= 18.5 to < 24



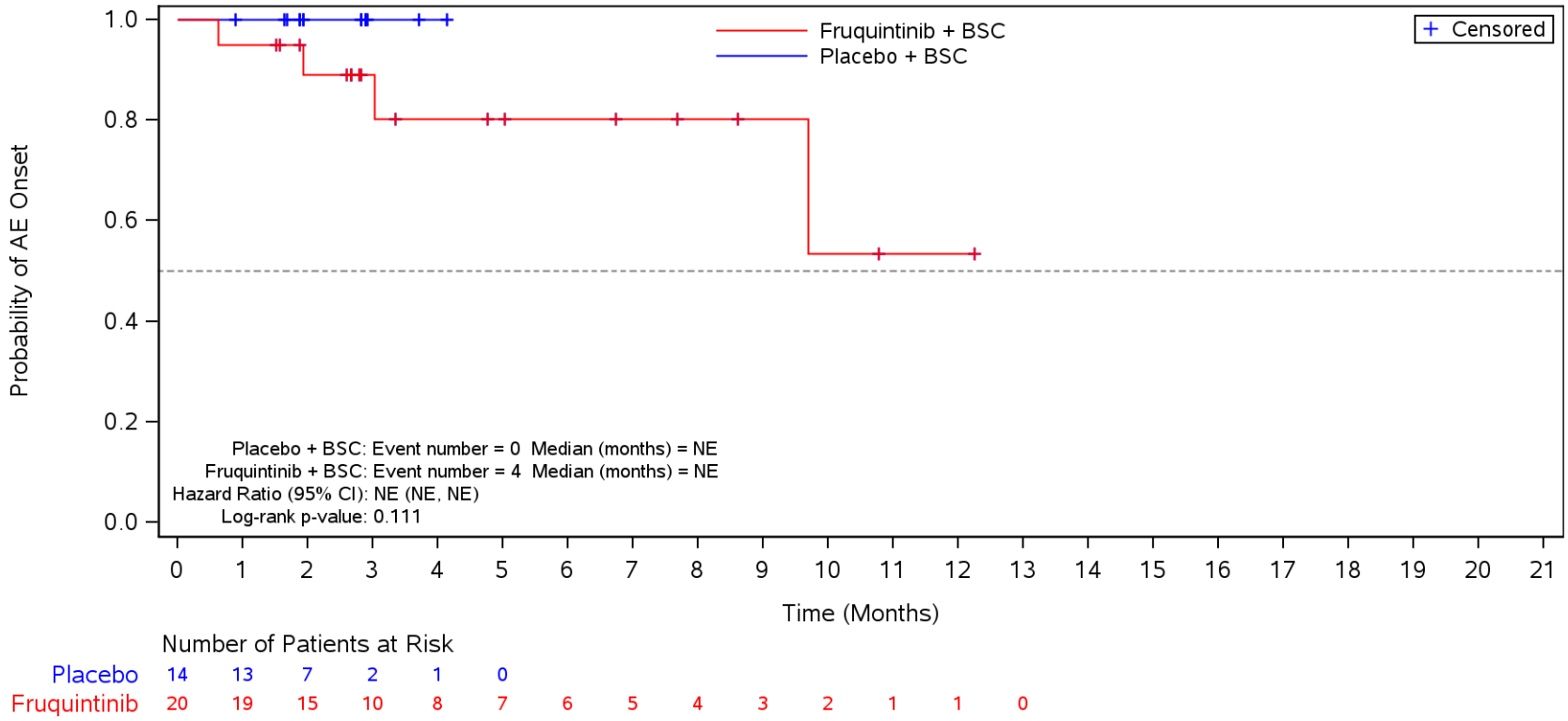
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
Discontinuation due to TEAE
>= 24



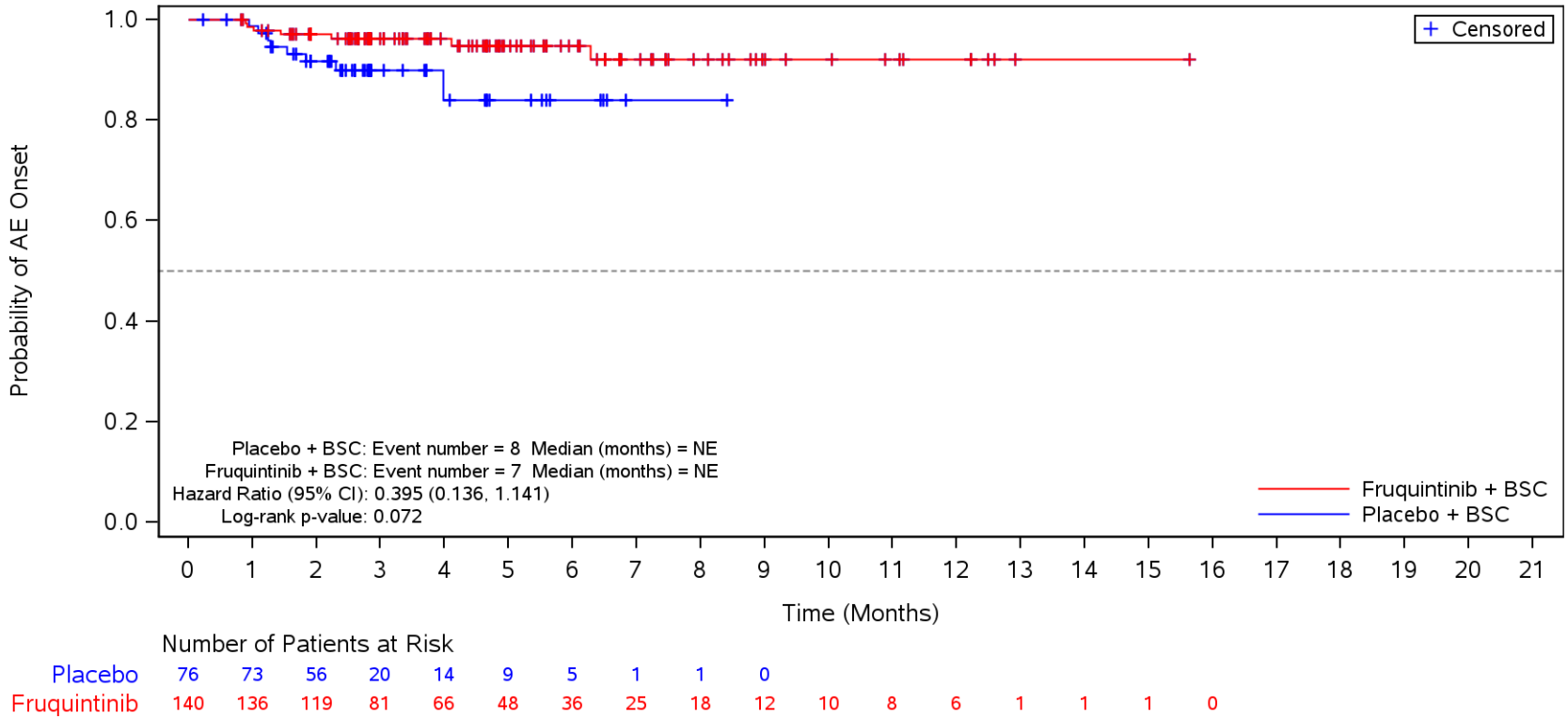
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
Deaths (Grade 5 TEAEs)
< 18.5



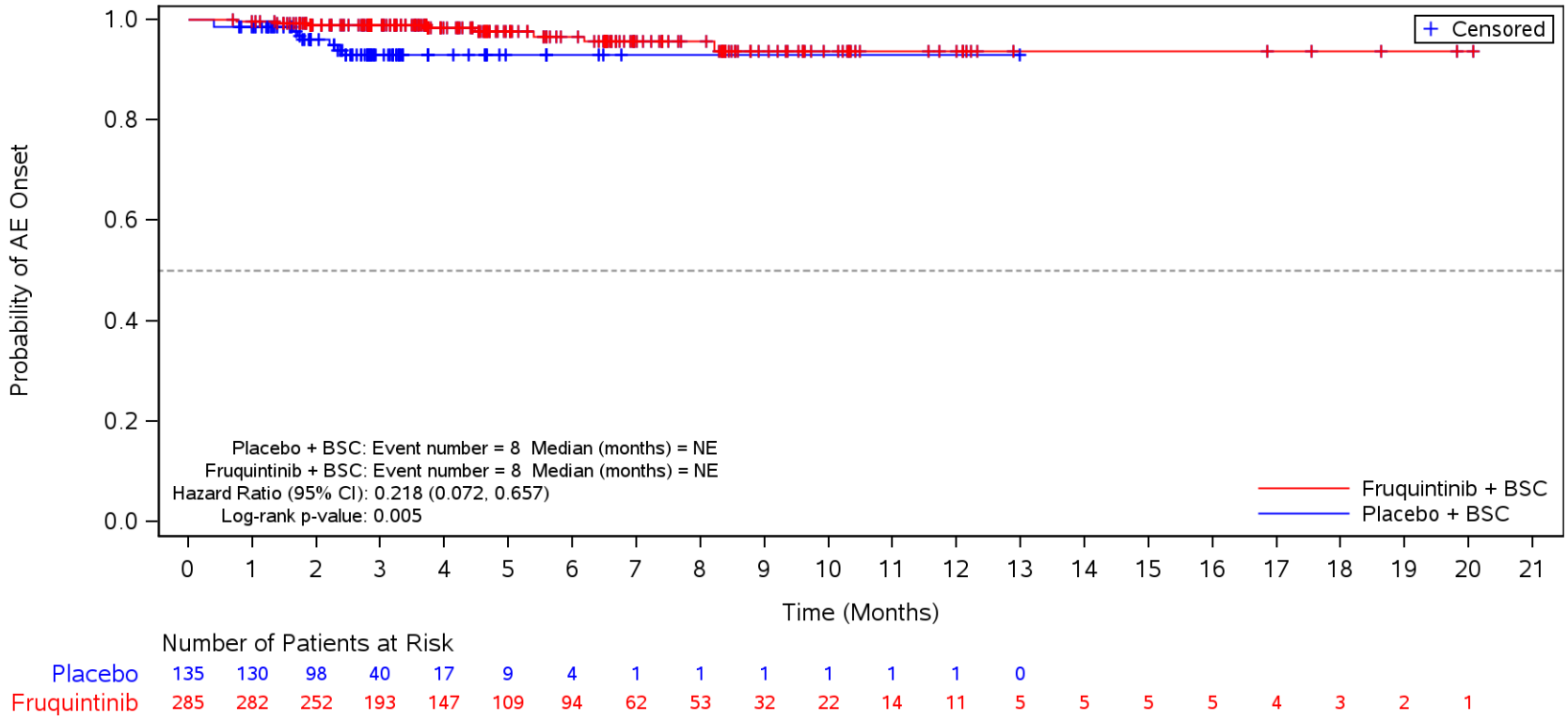
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.5.2.3S
Kaplan-Meier Plot for Time to Onset of Overall TEAE Excluding Disease Related Events by Body Mass Index
Safety Population
Deaths (Grade 5 TEAEs)
>= 18.5 to < 24



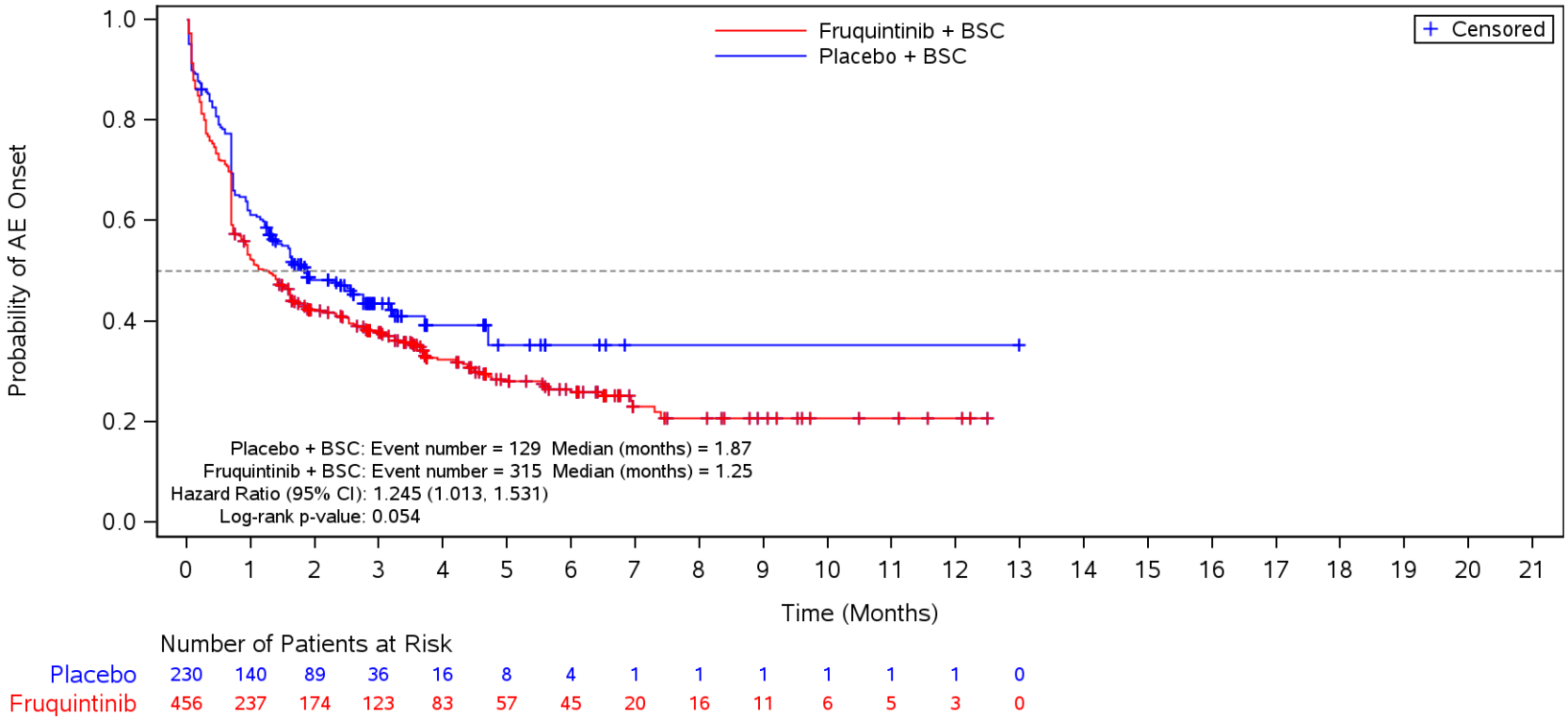
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**



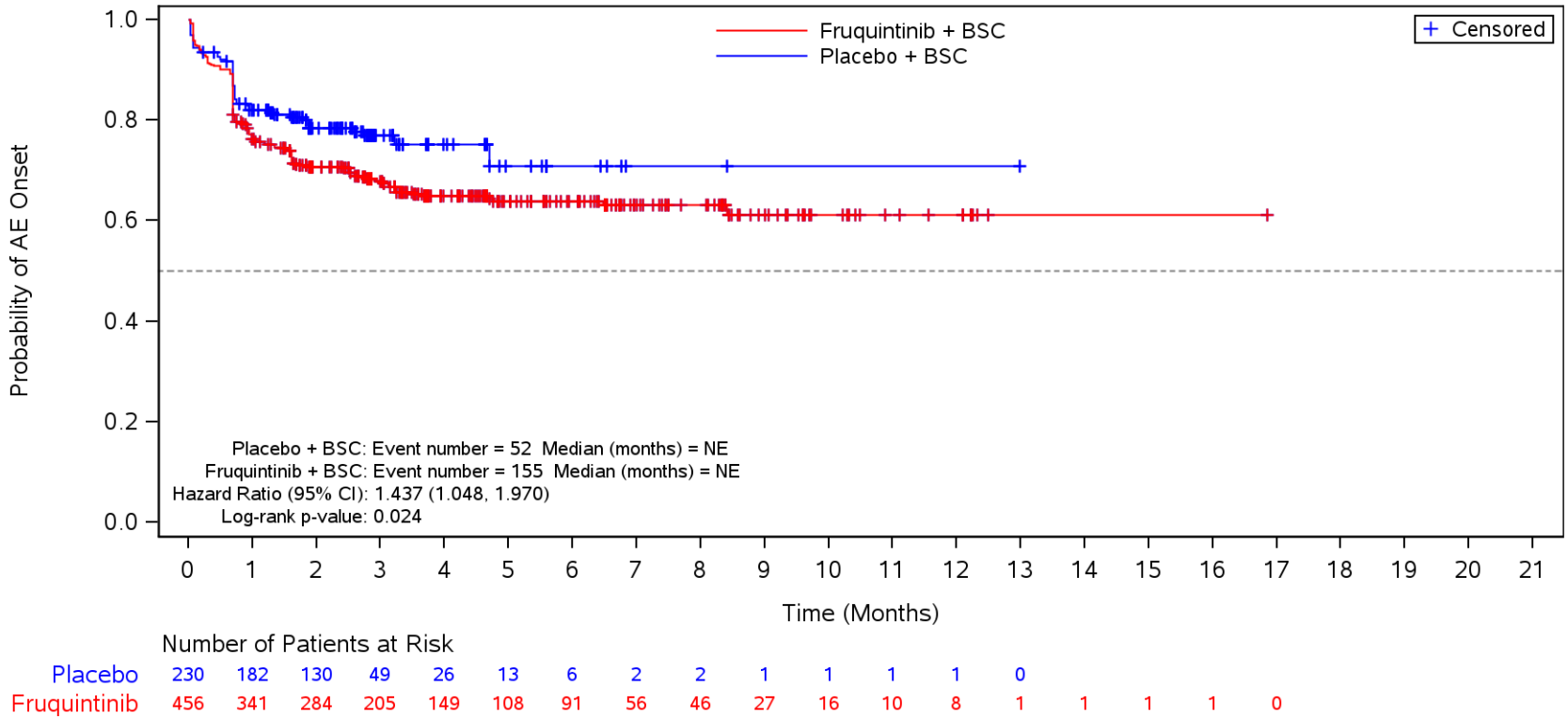
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**



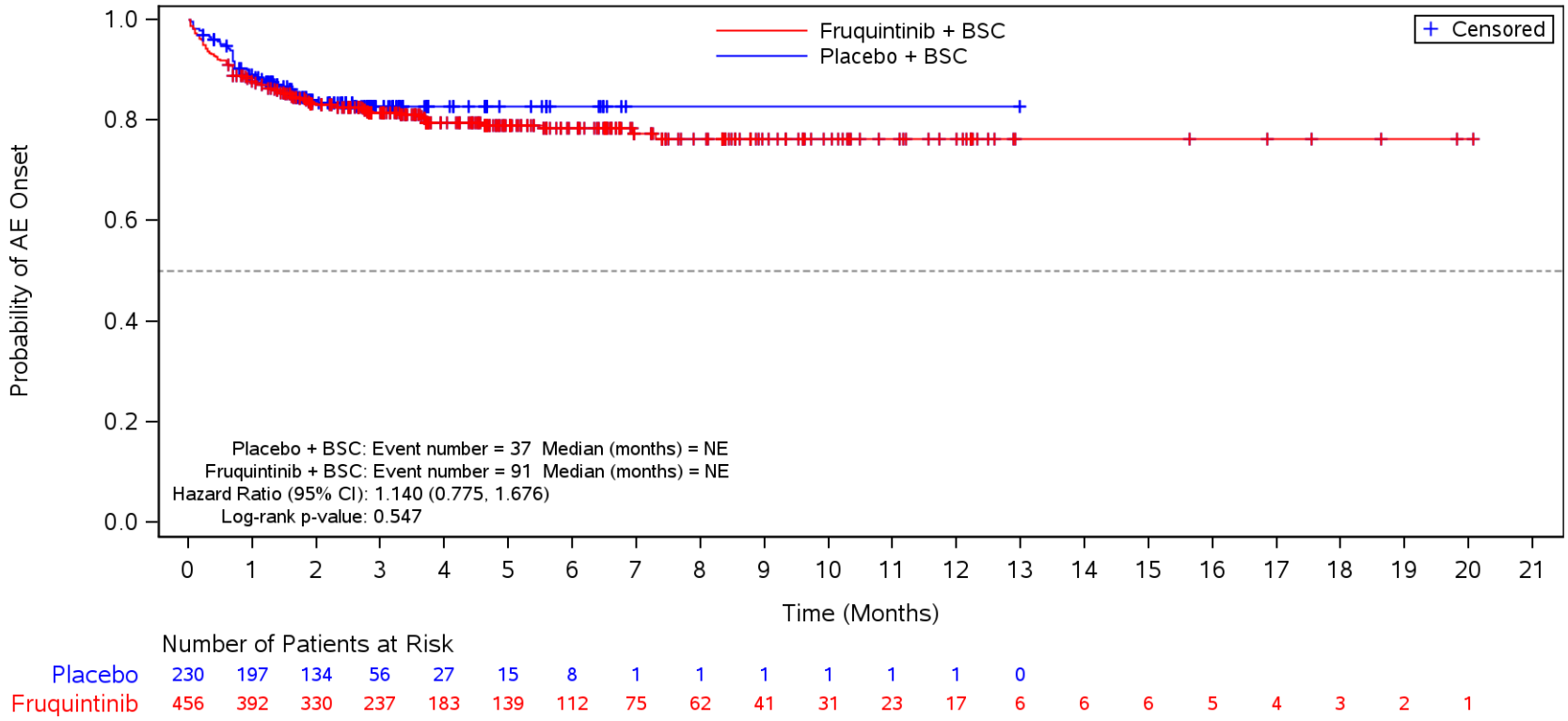
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**



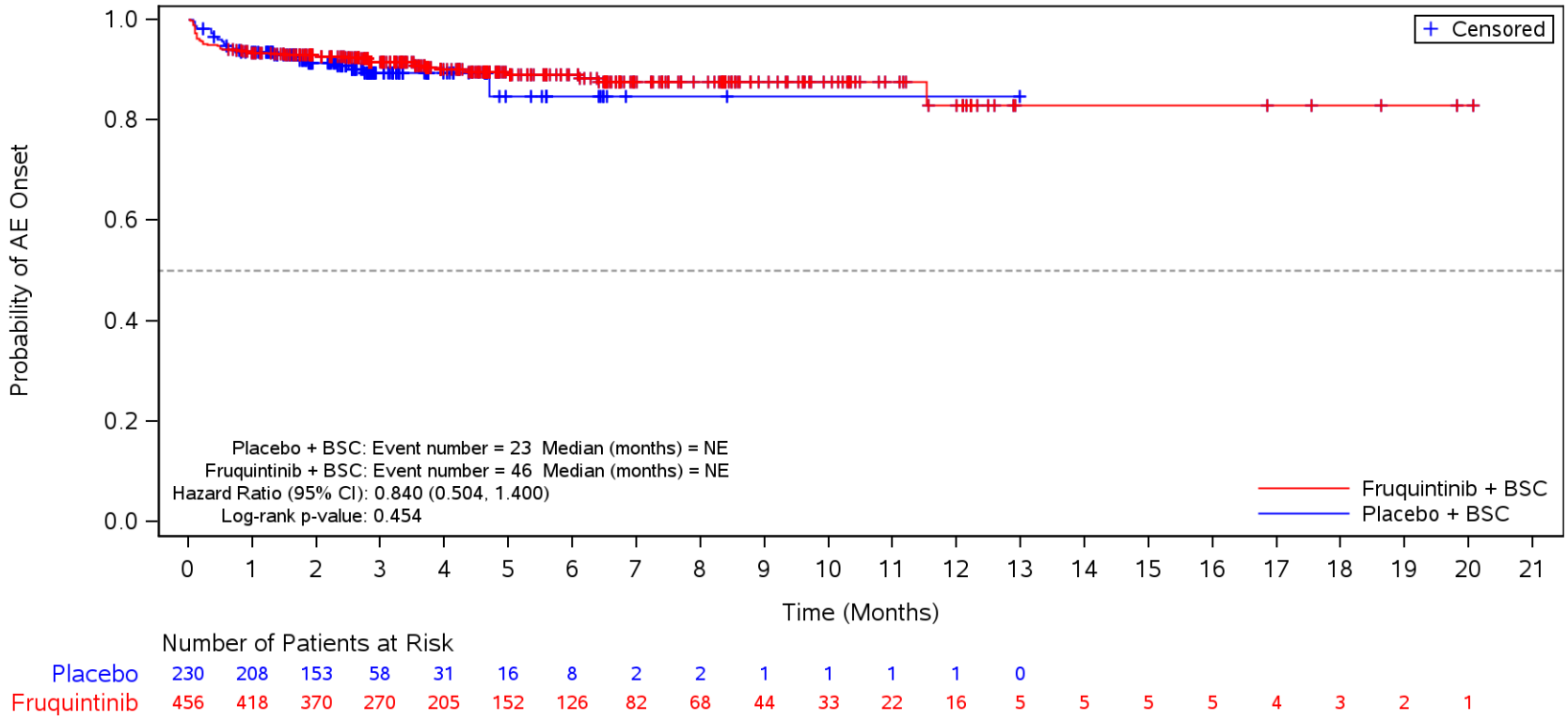
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**



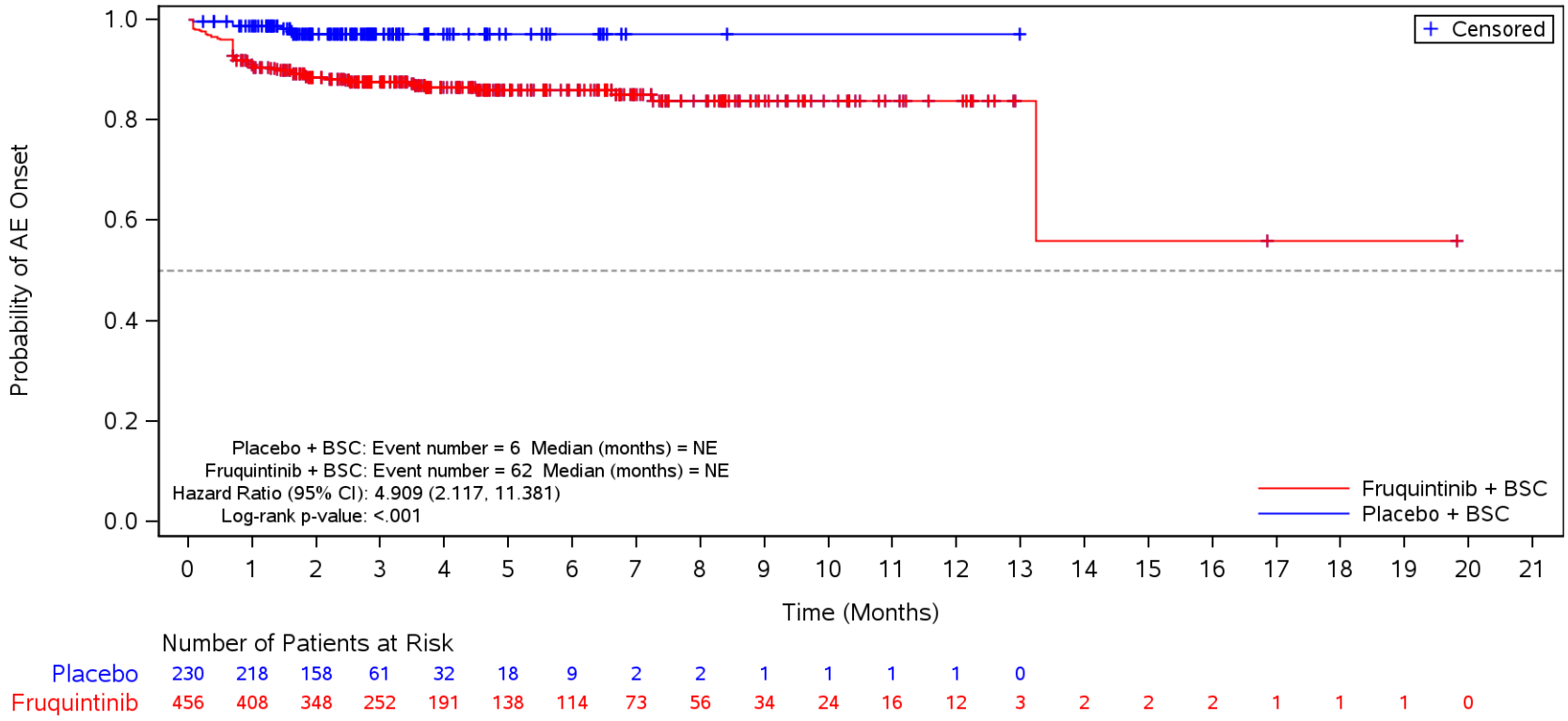
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**



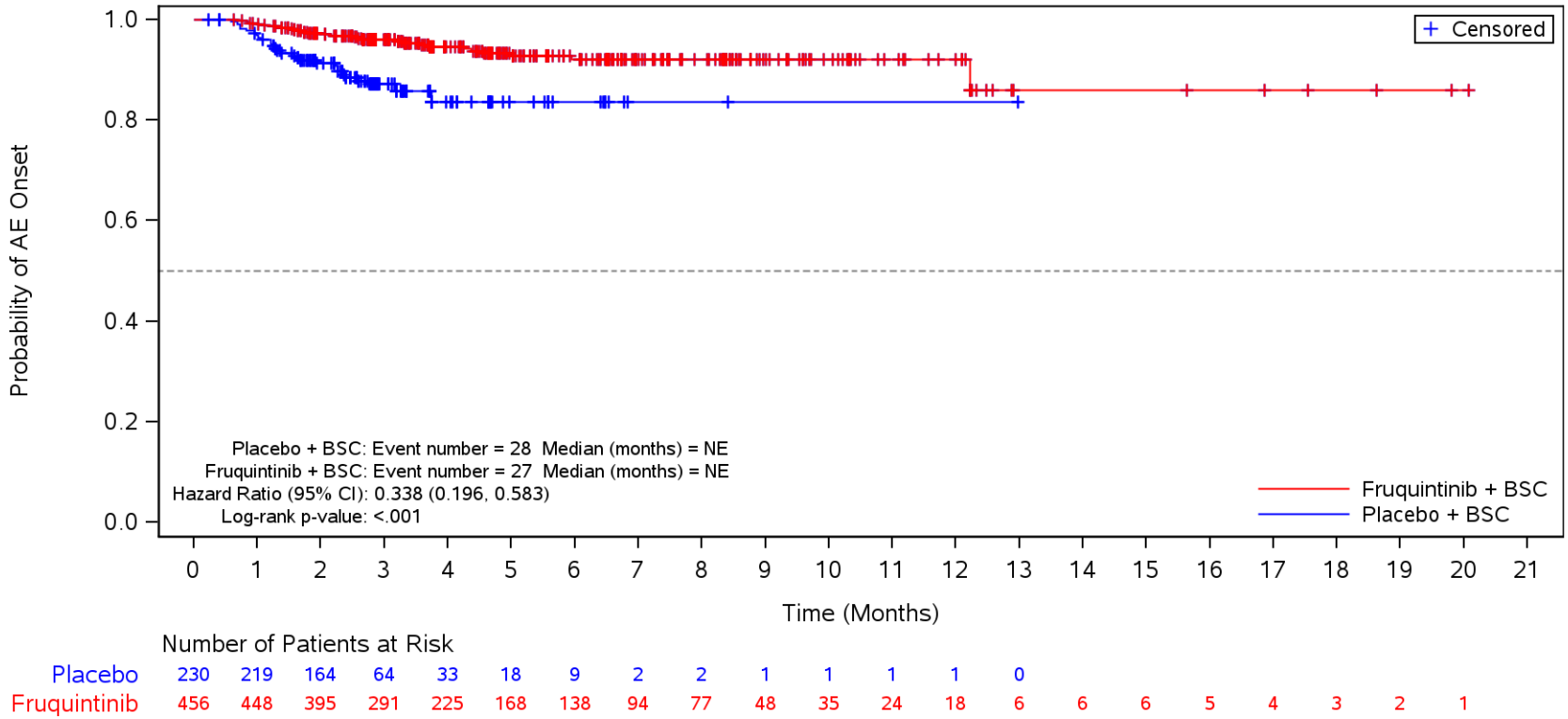
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**



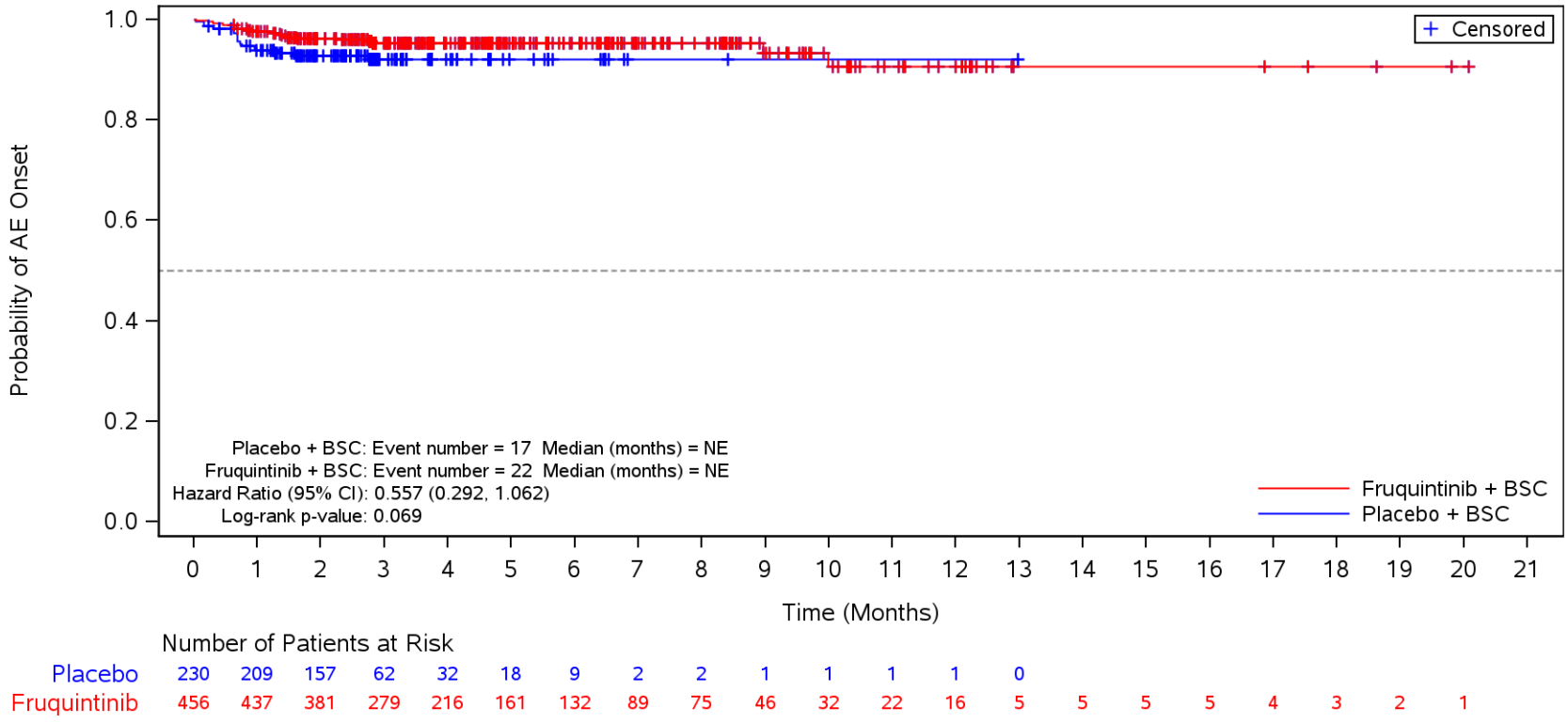
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**



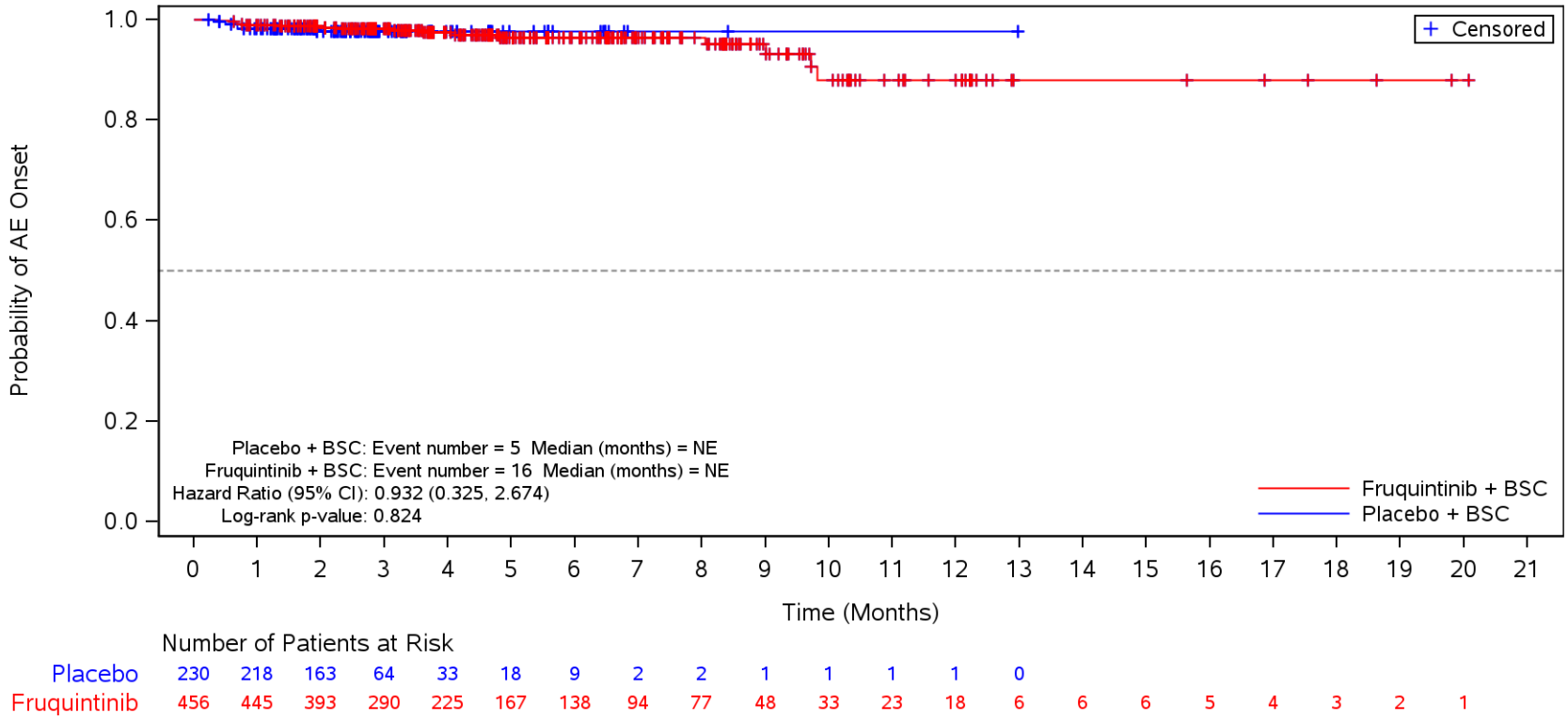
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**



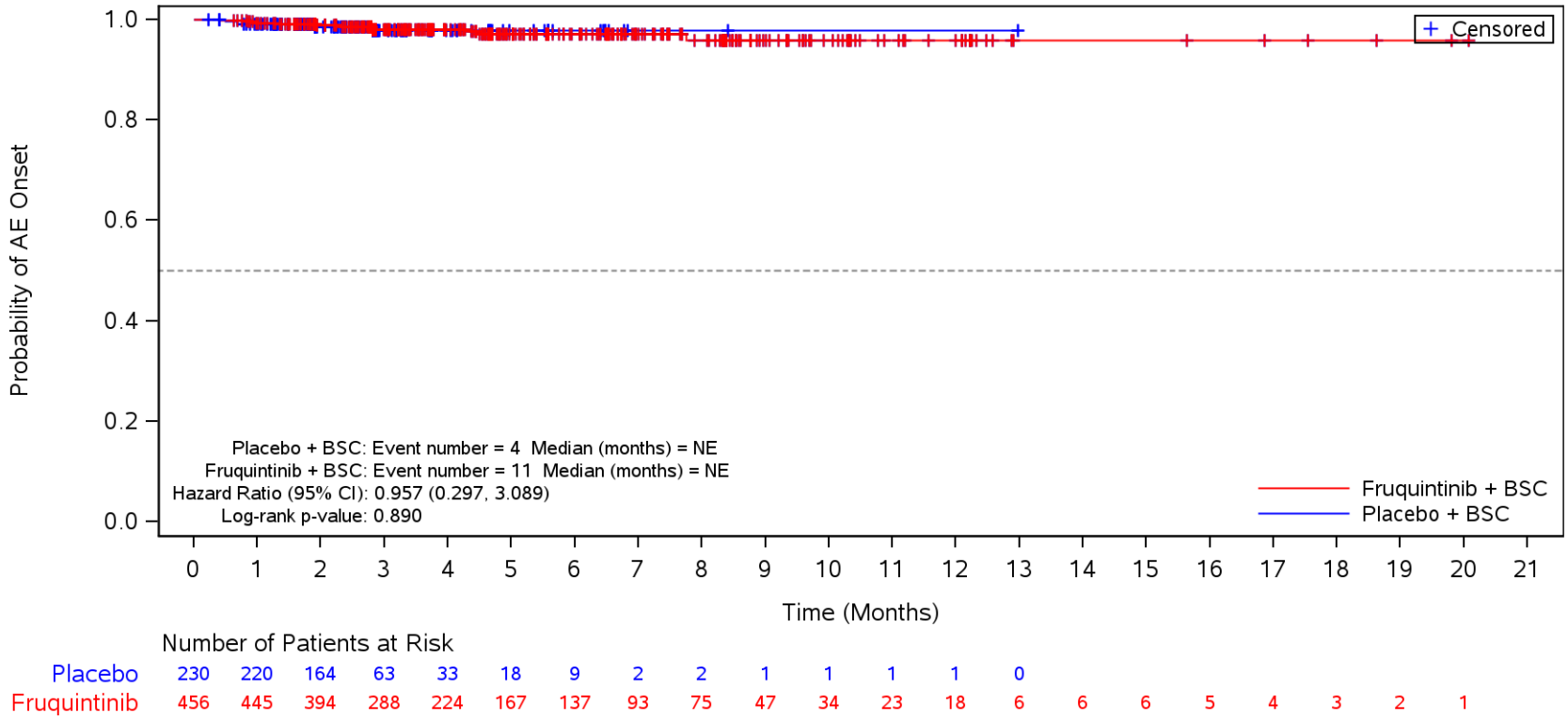
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**



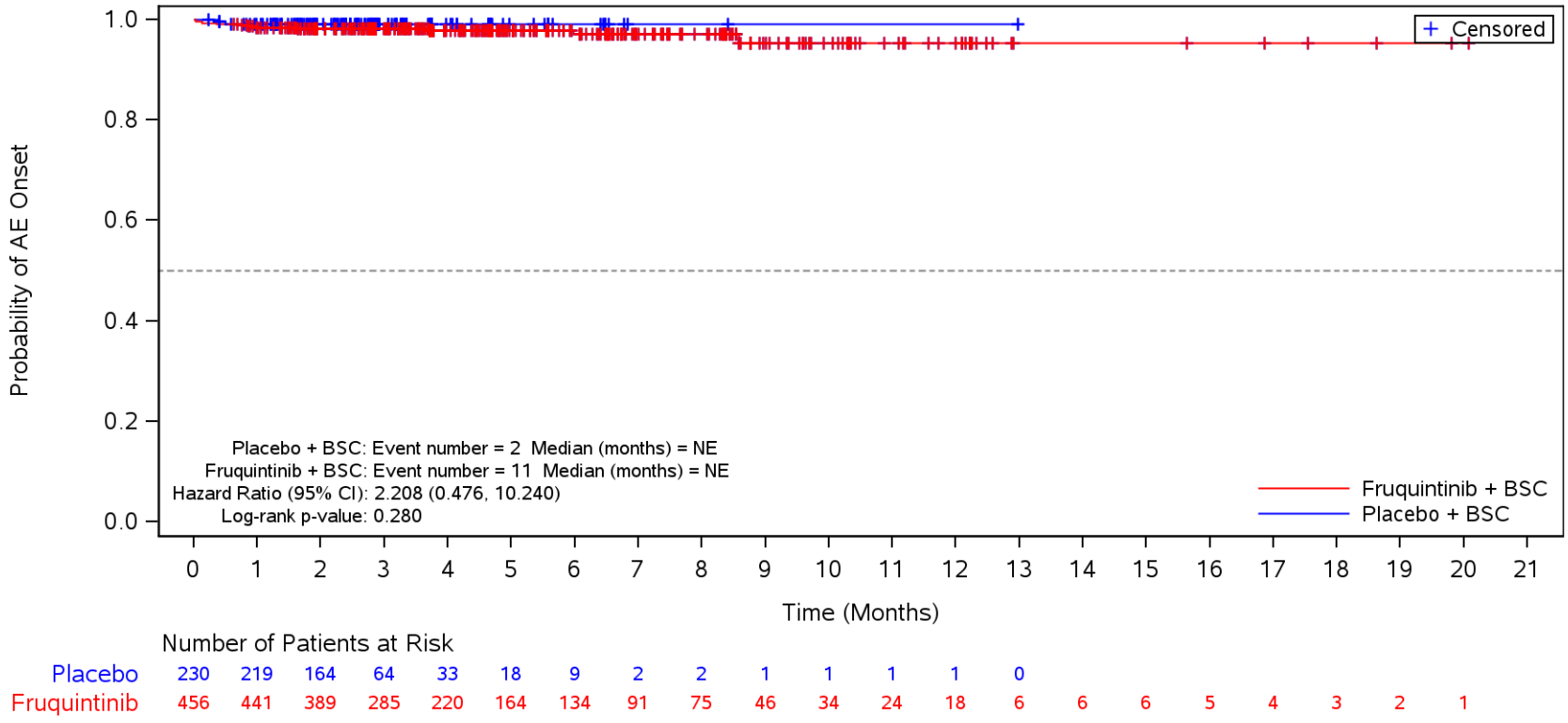
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Condition aggravated**



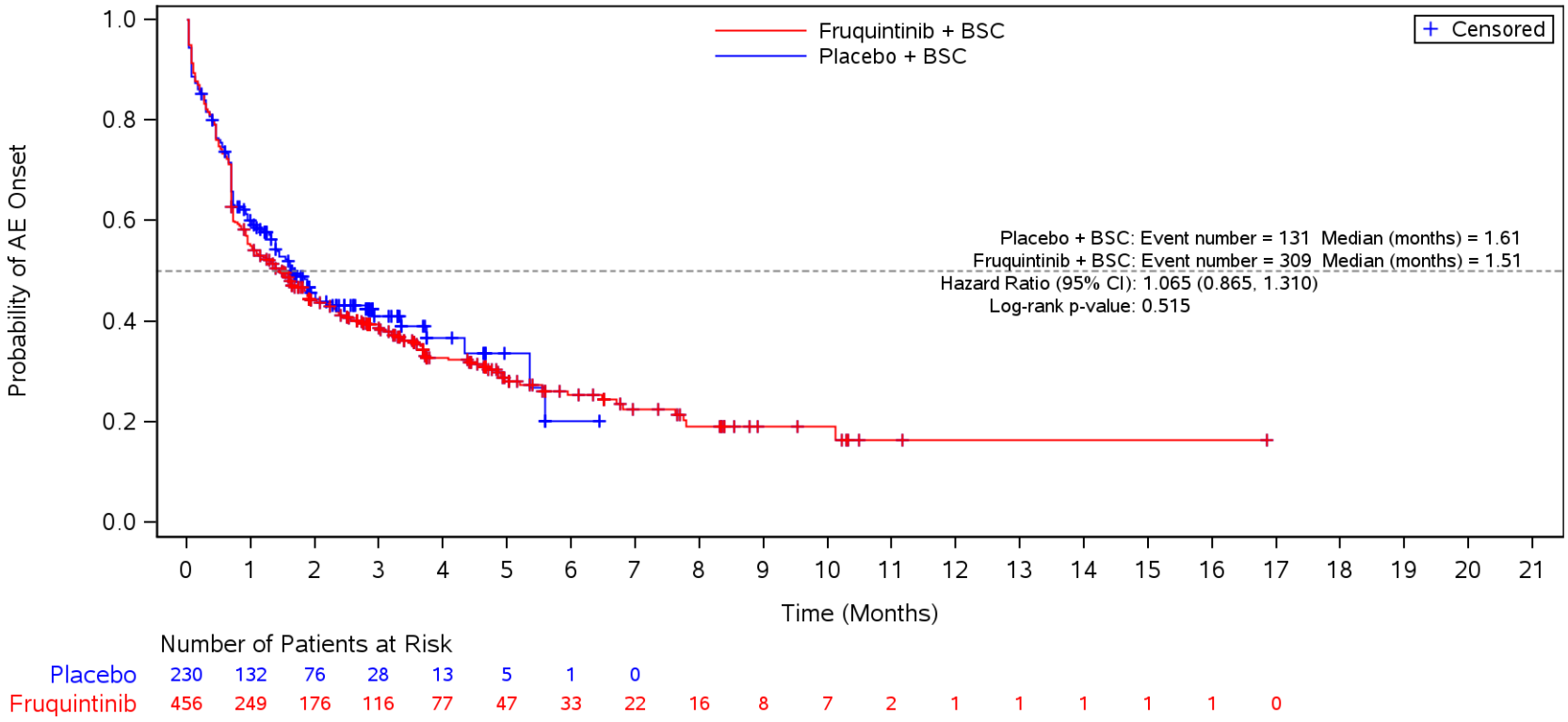
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**



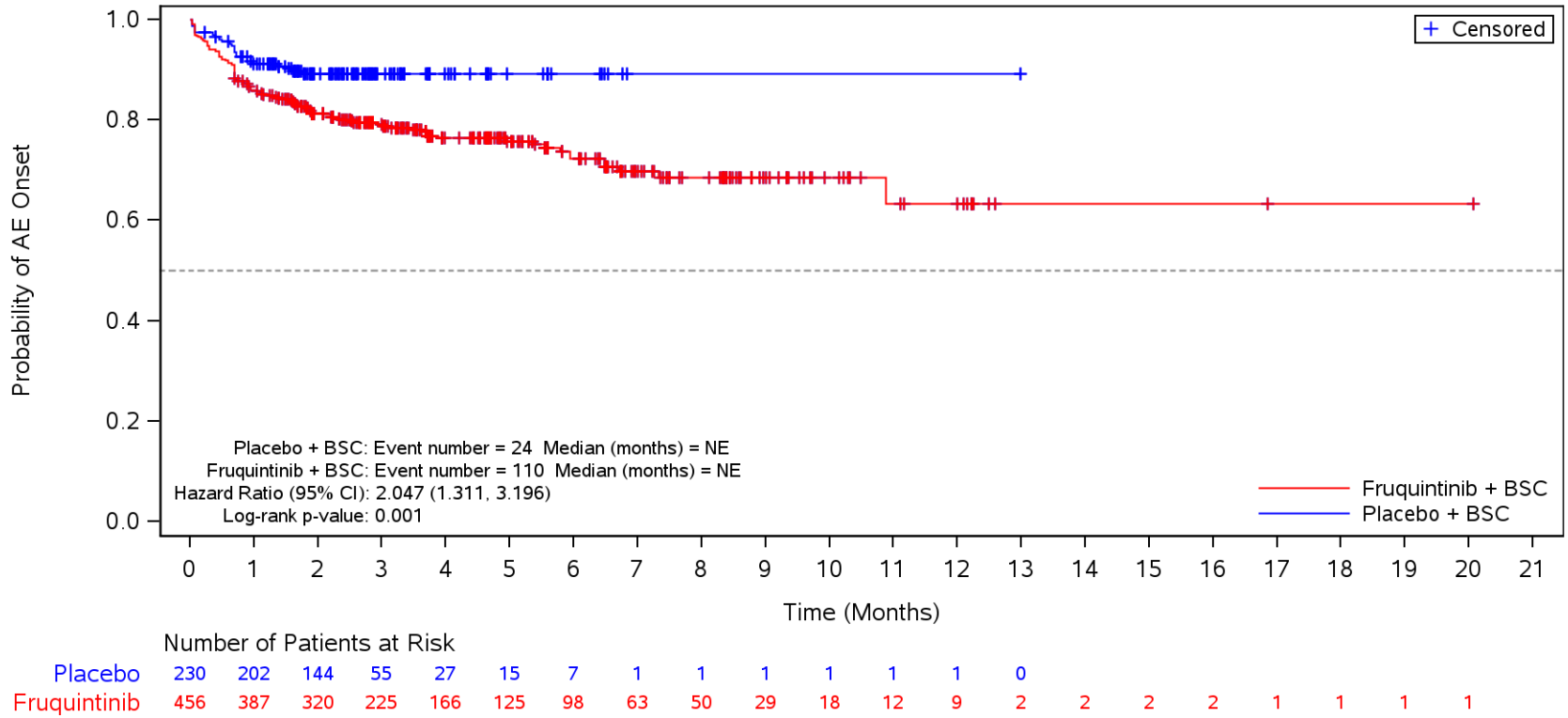
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**



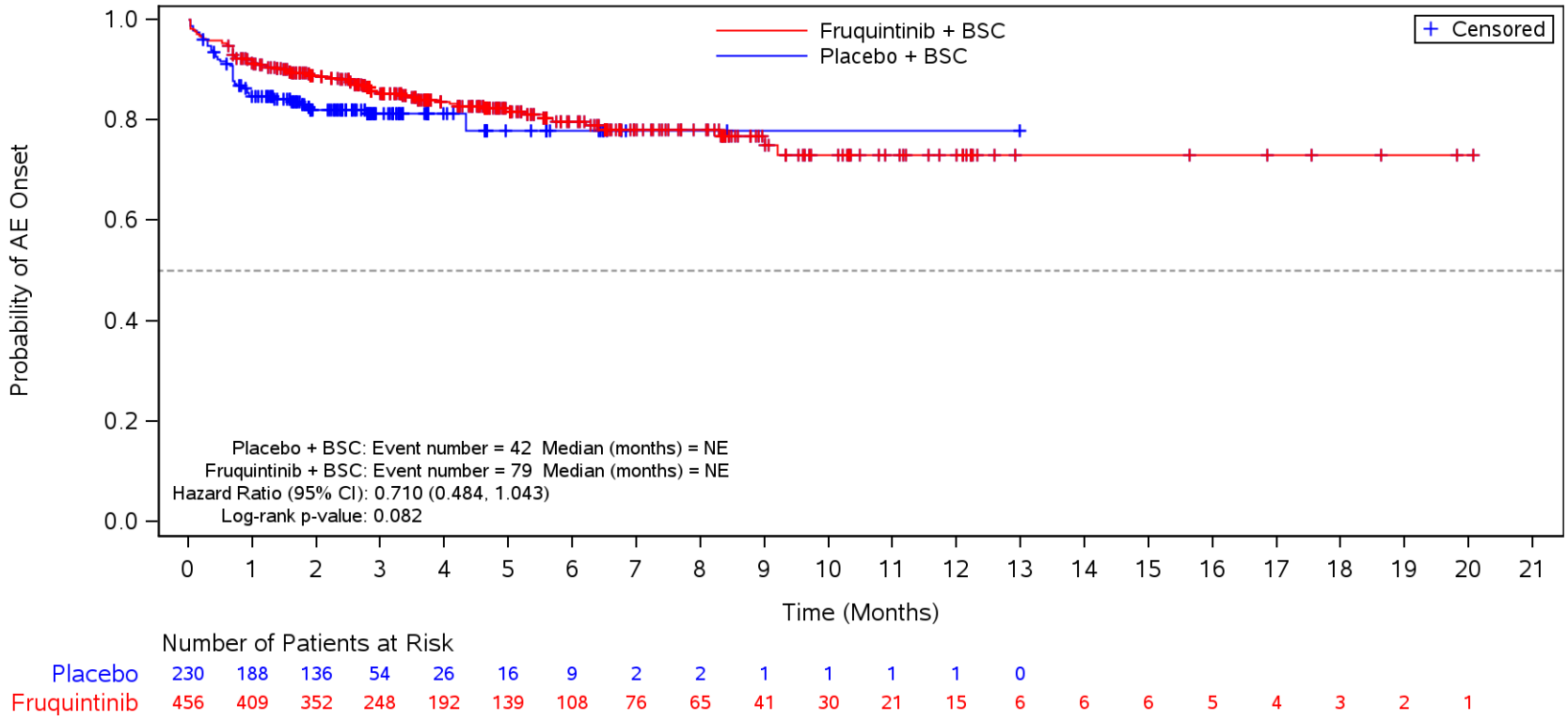
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**



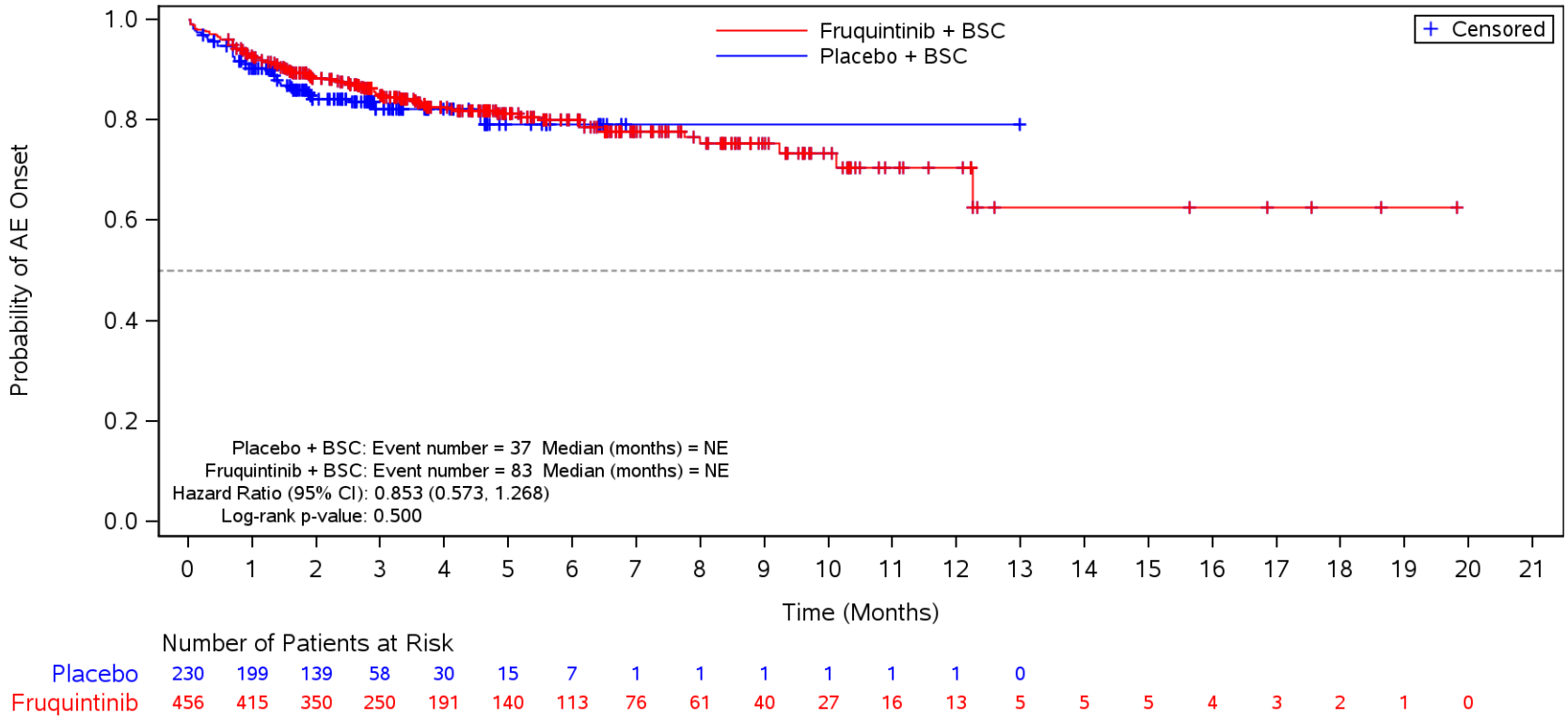
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**



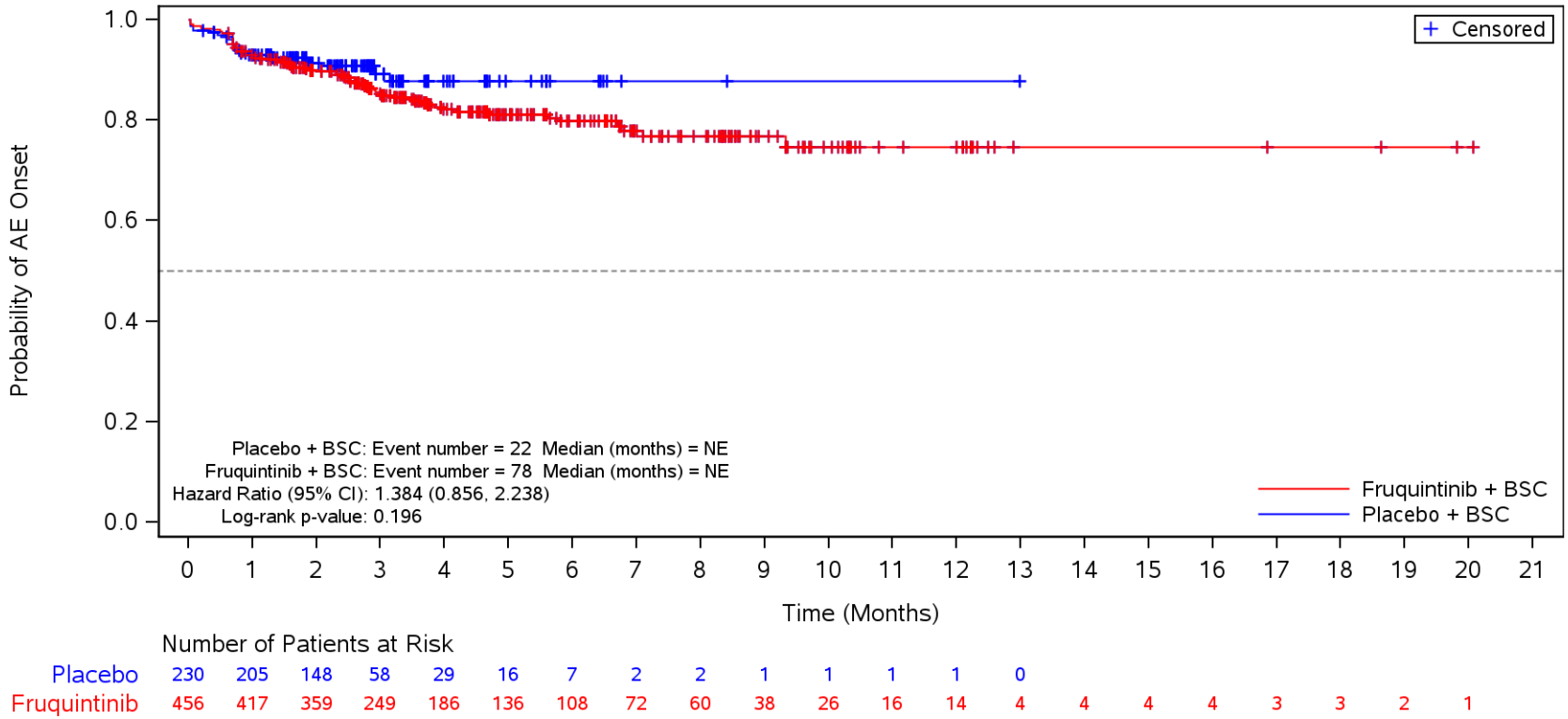
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**



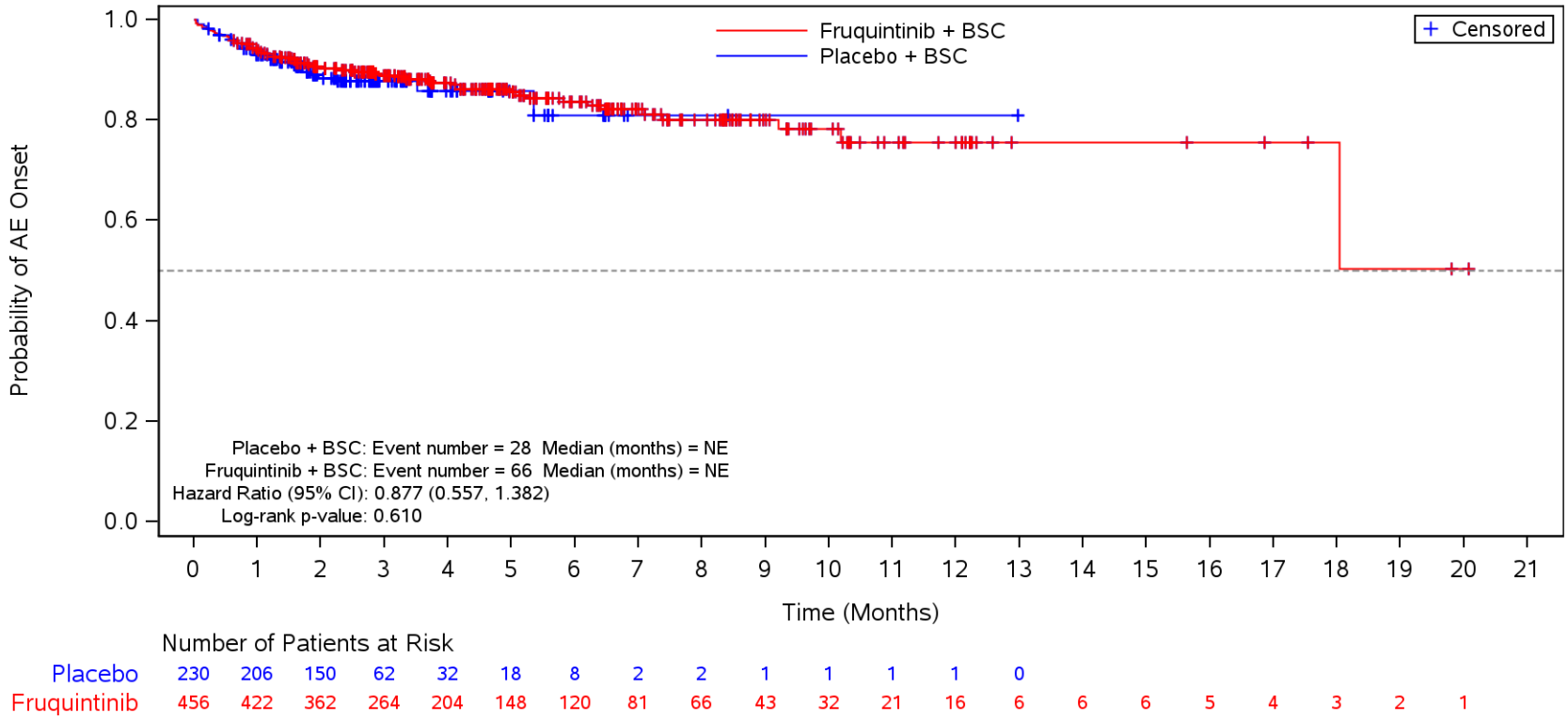
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**



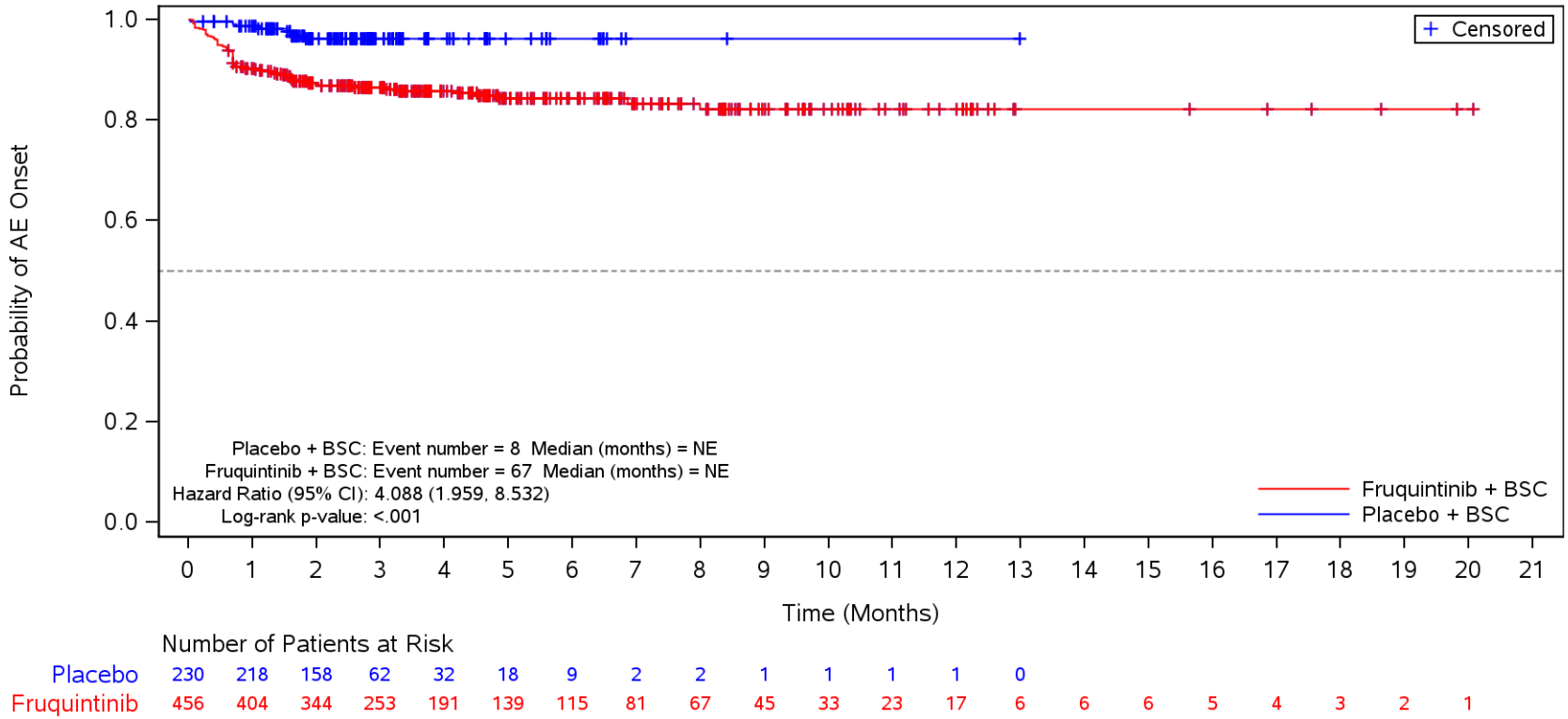
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**



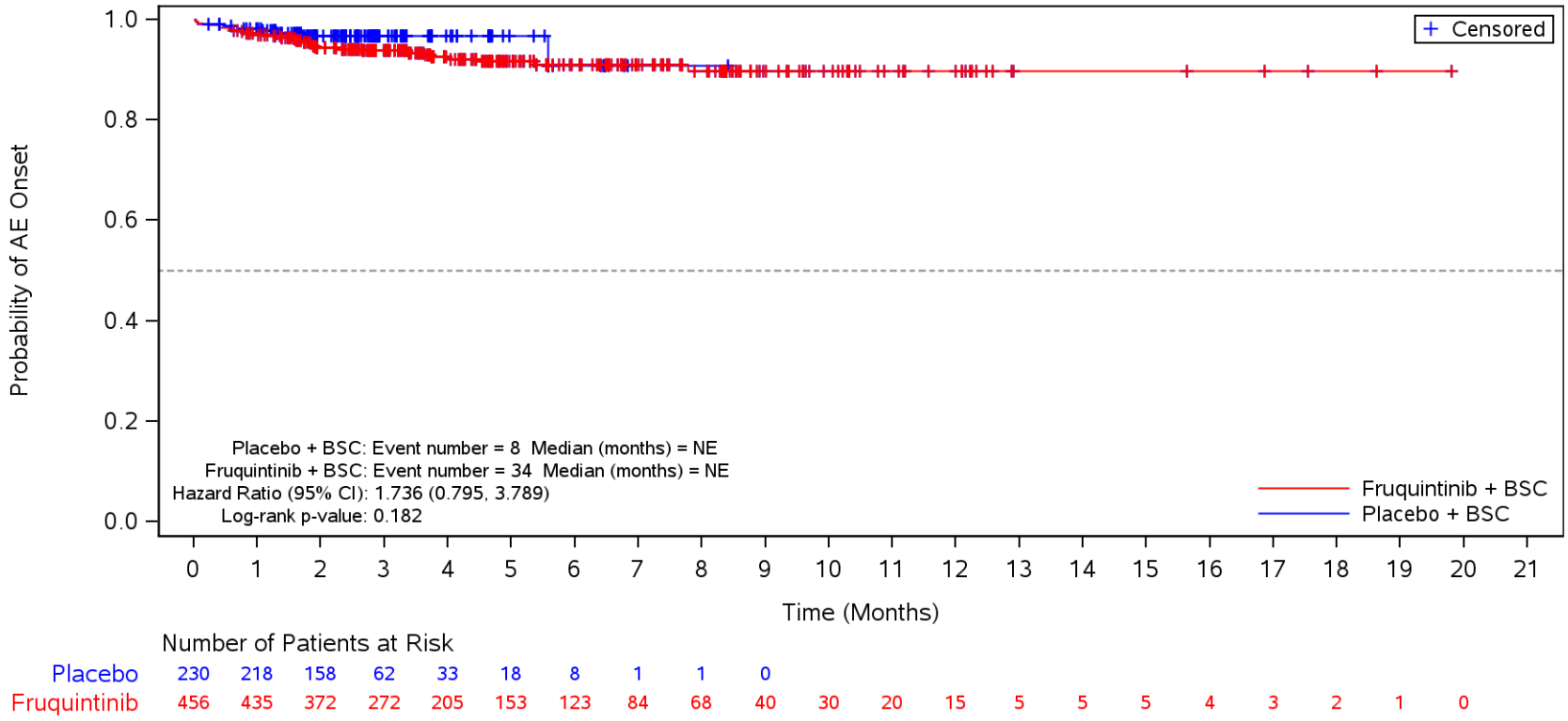
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**



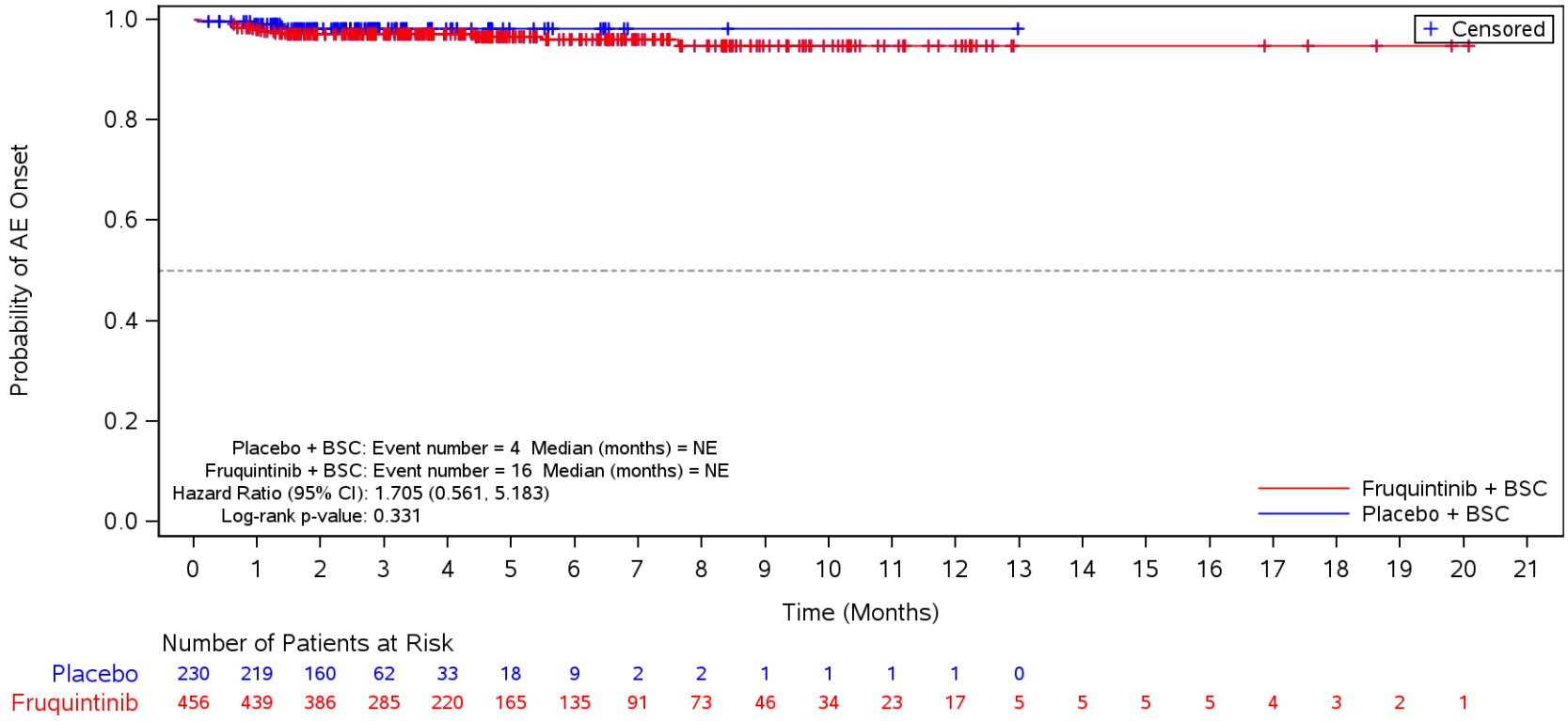
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**



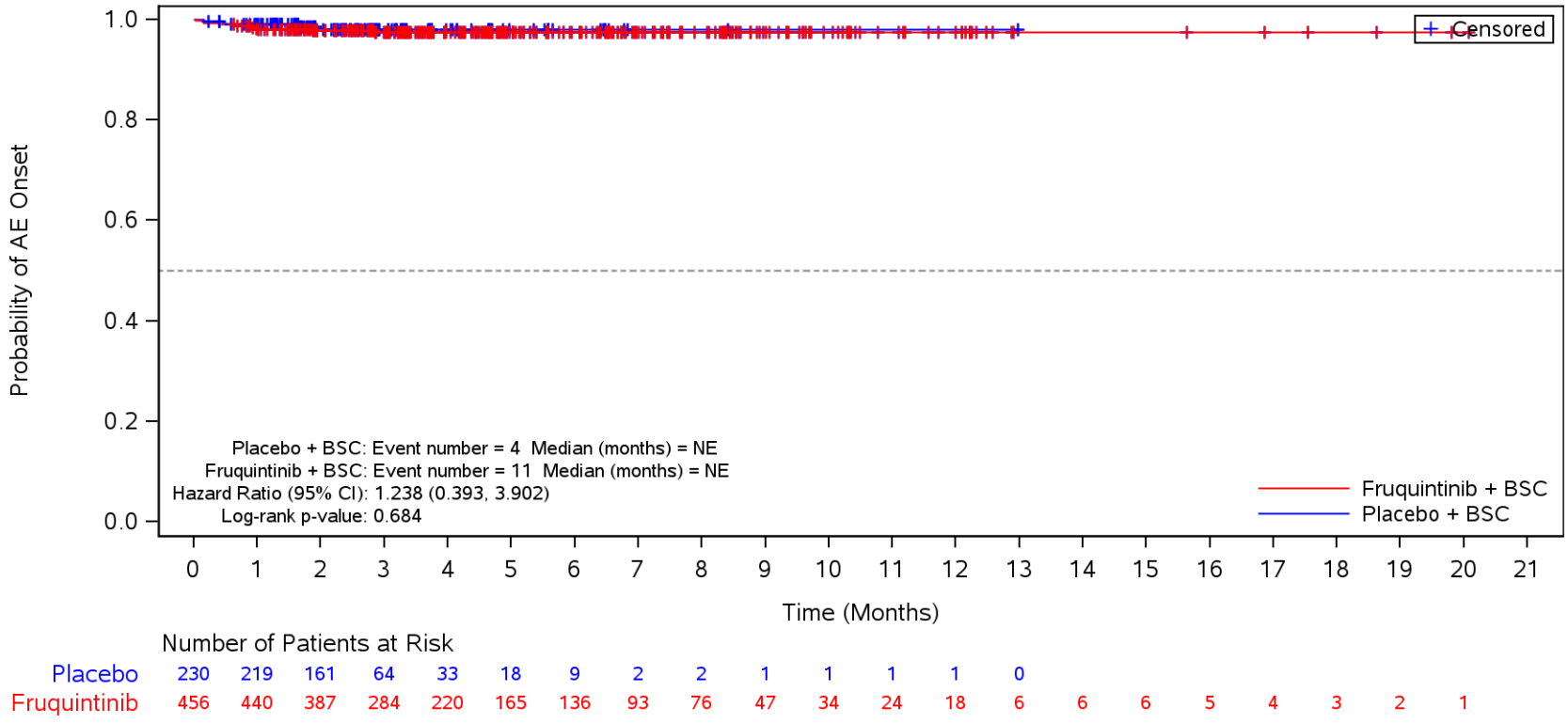
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**



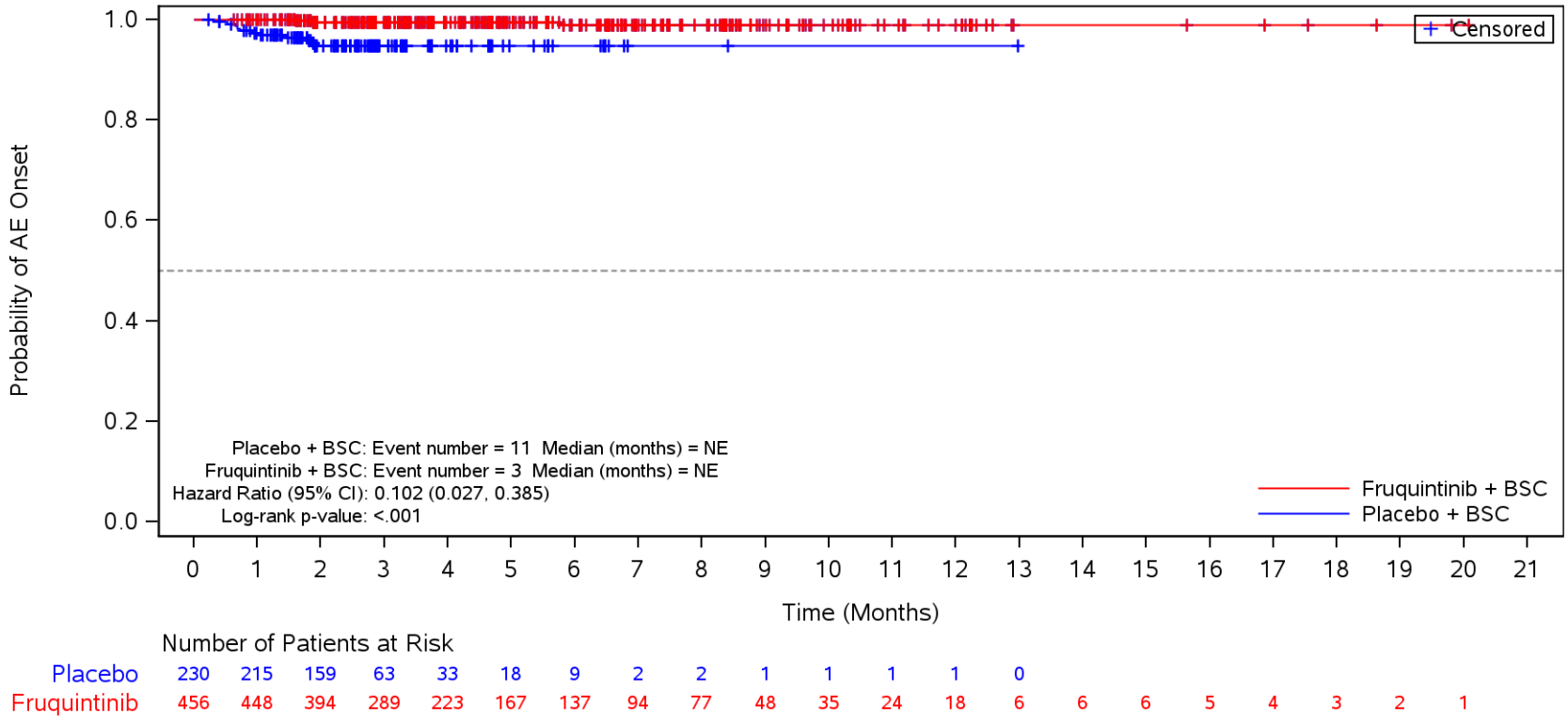
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**



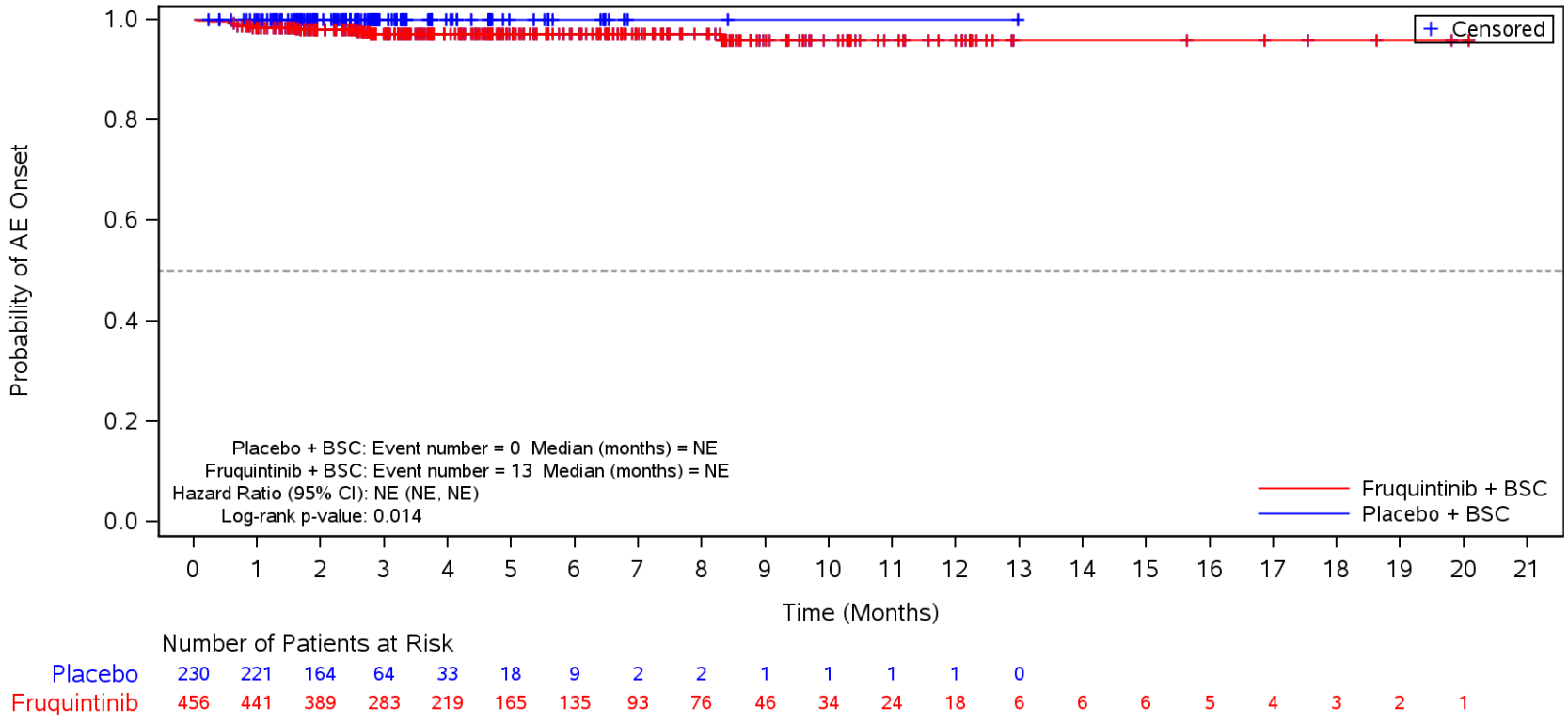
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**



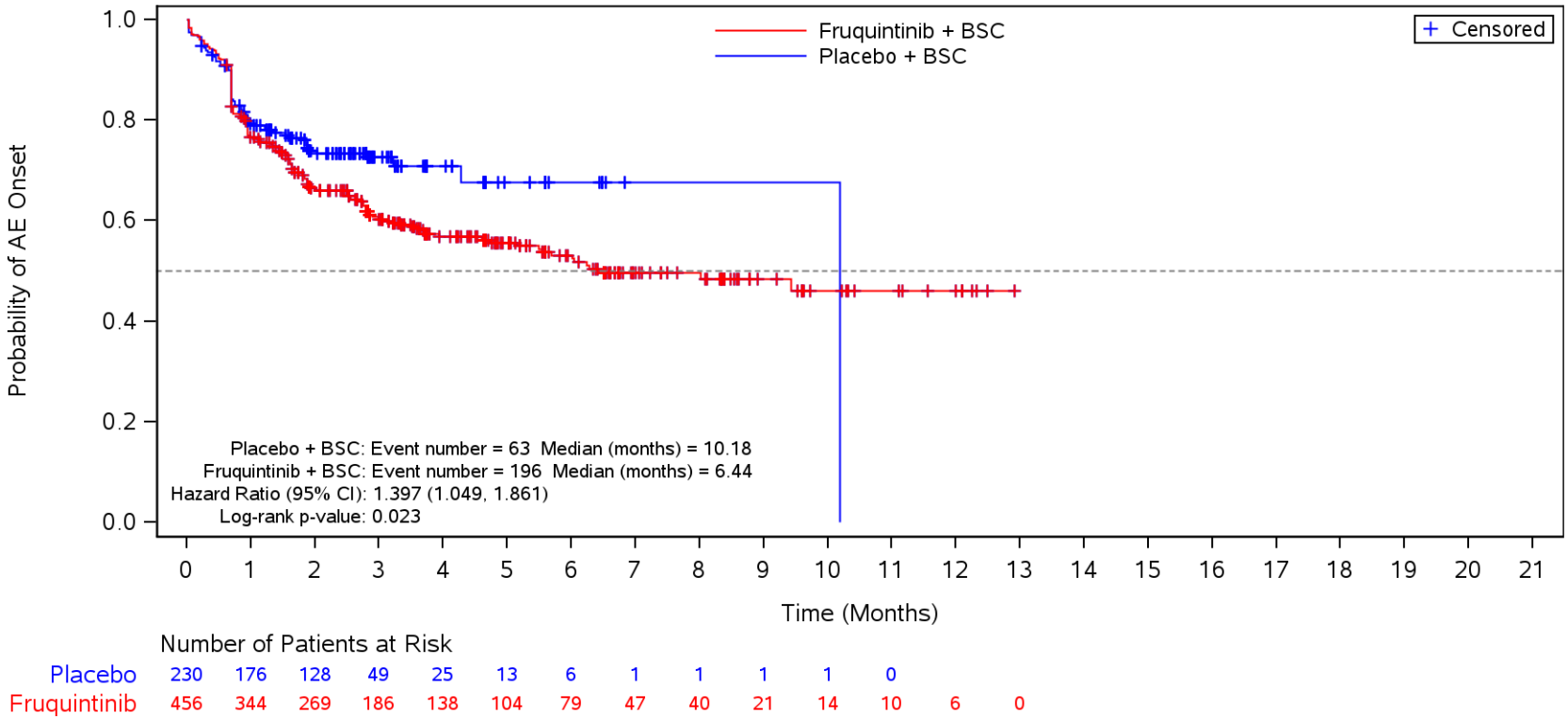
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**



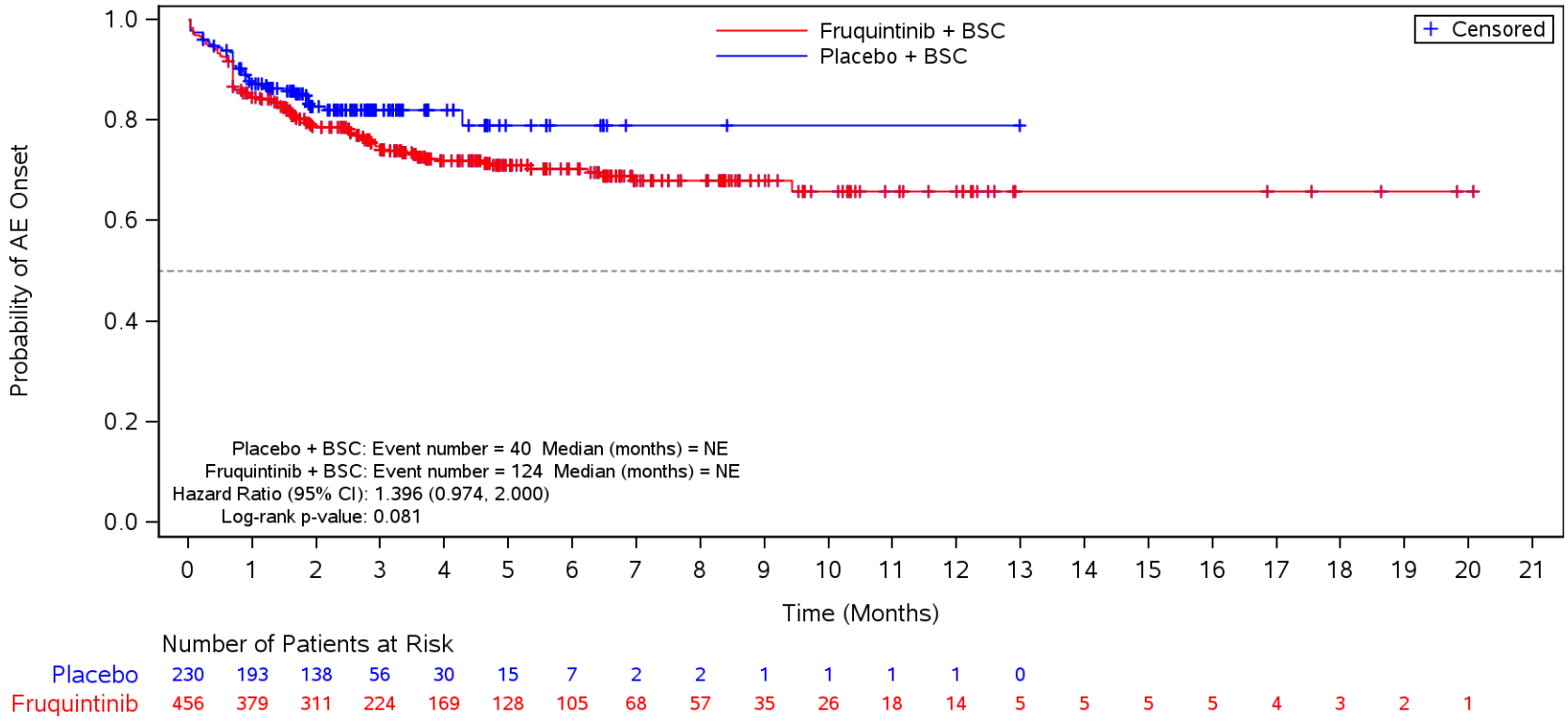
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**



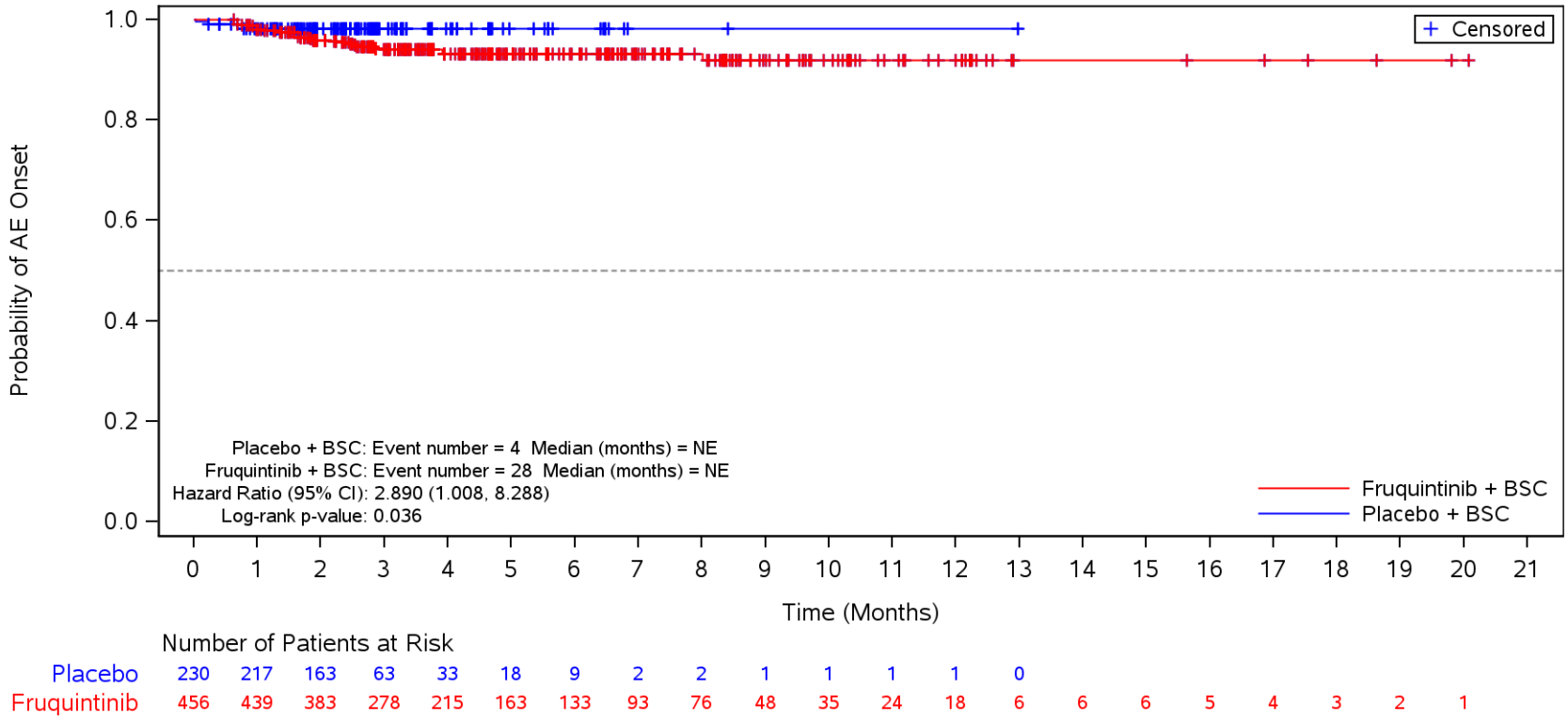
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**



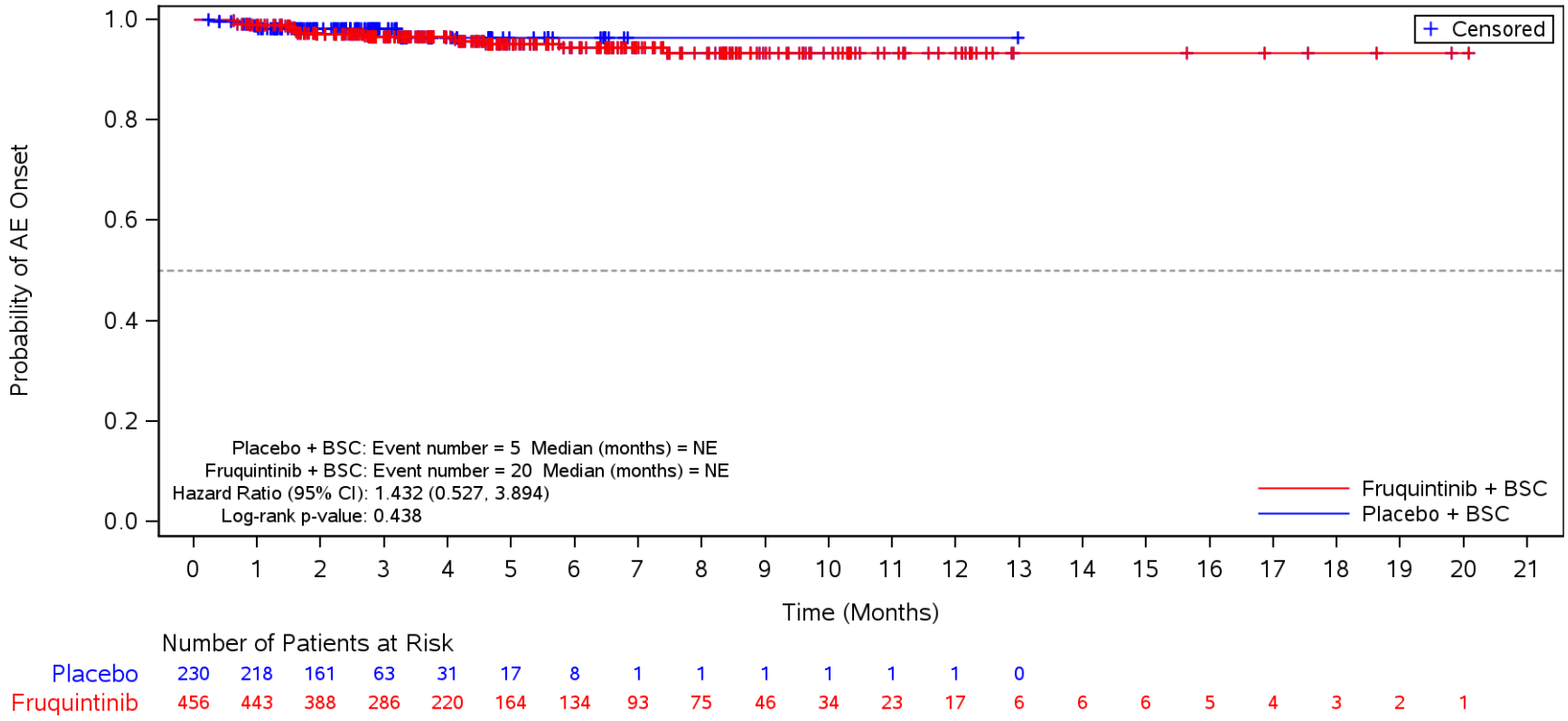
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**



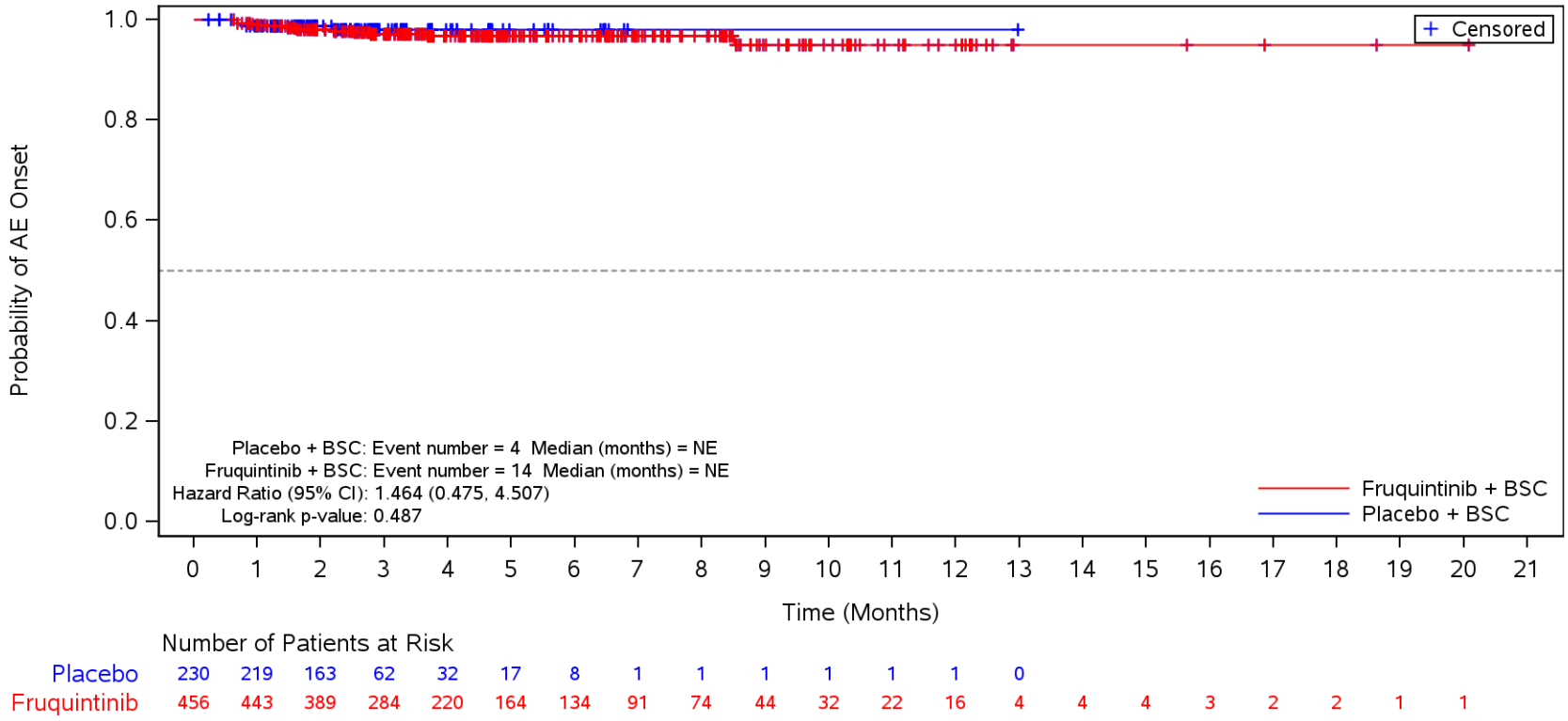
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**



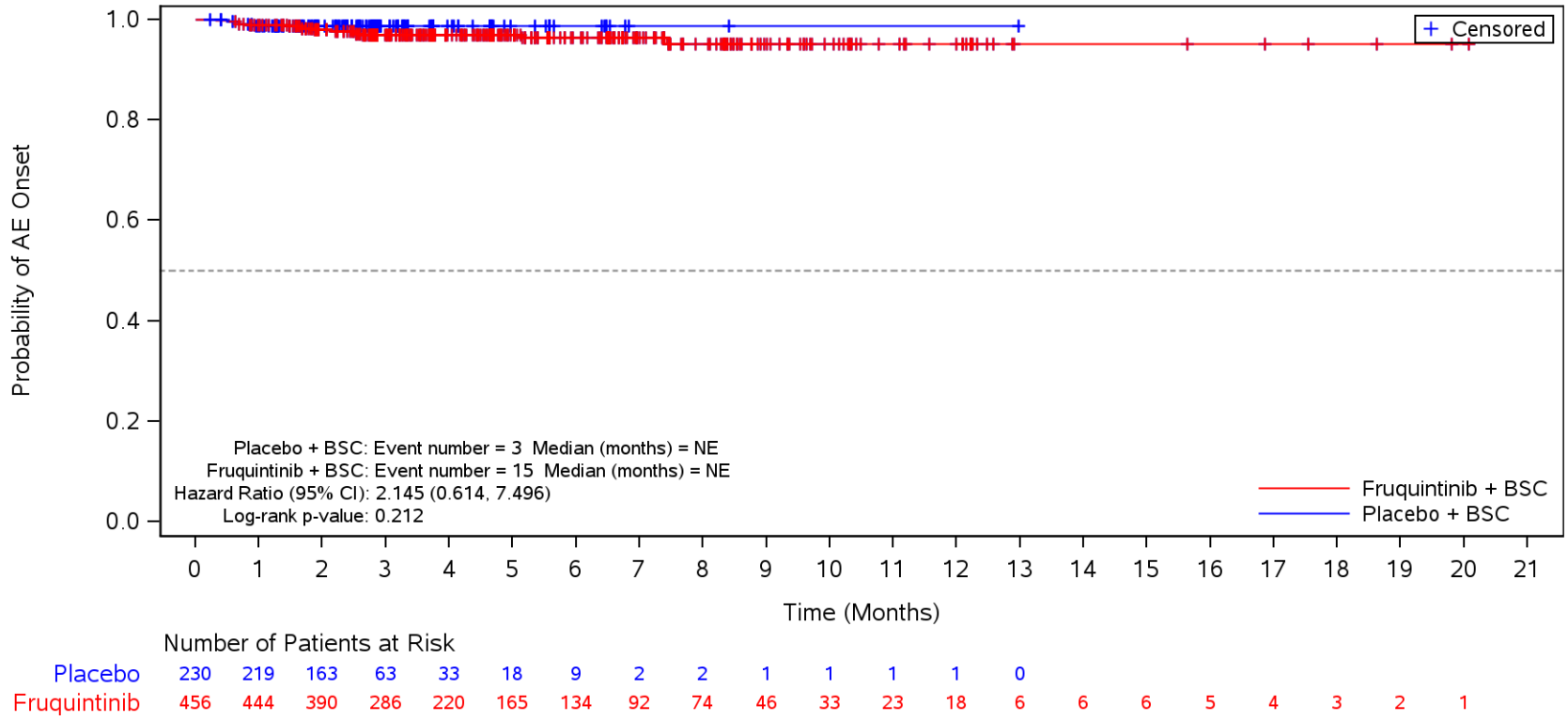
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**



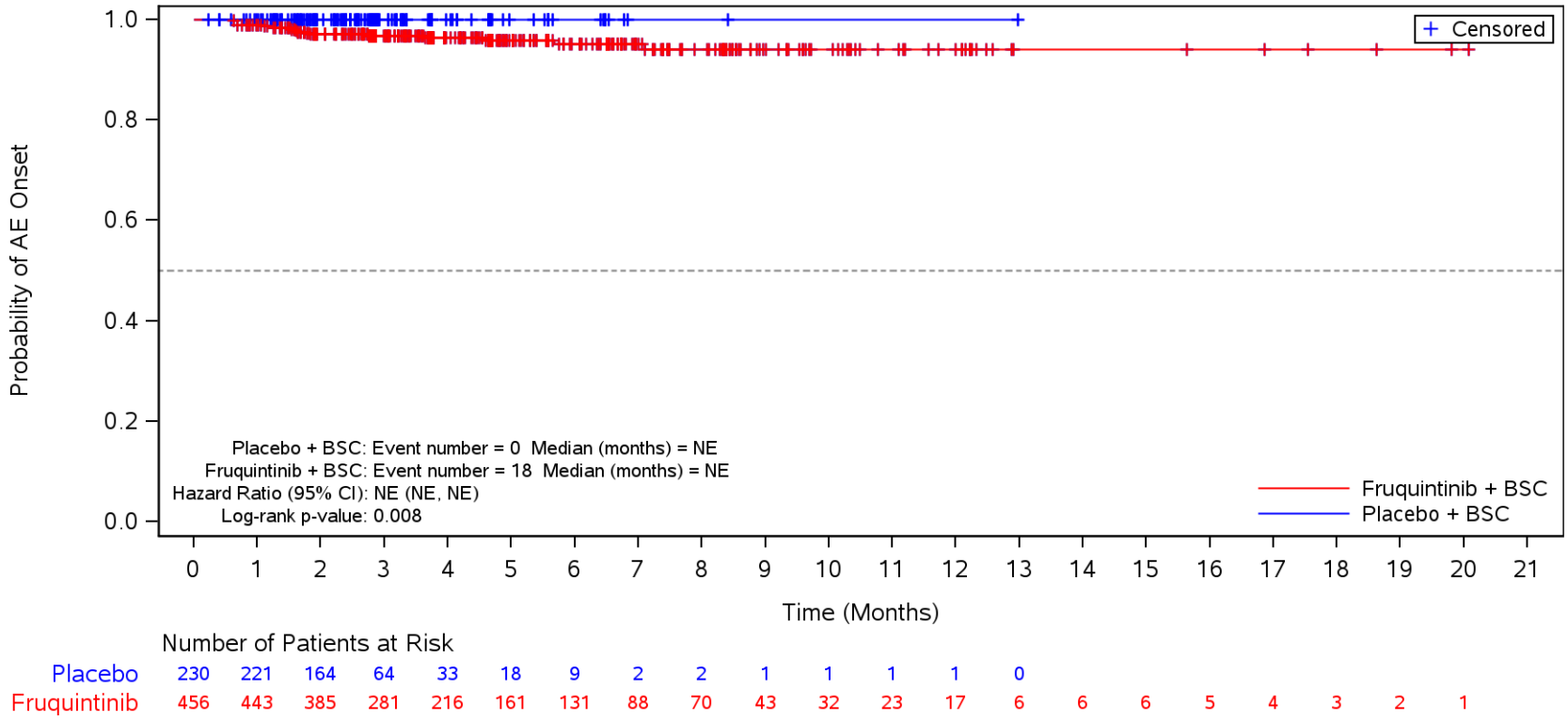
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**



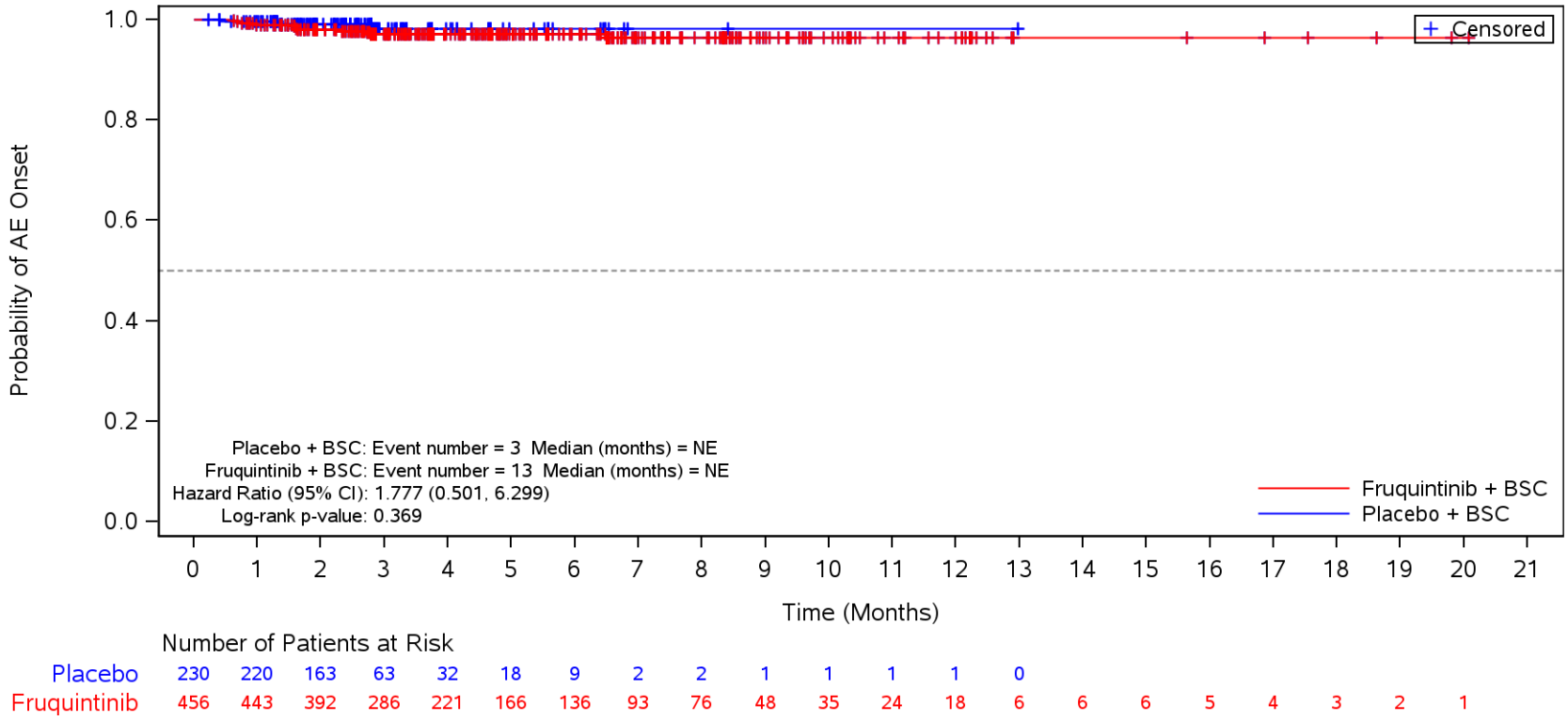
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**



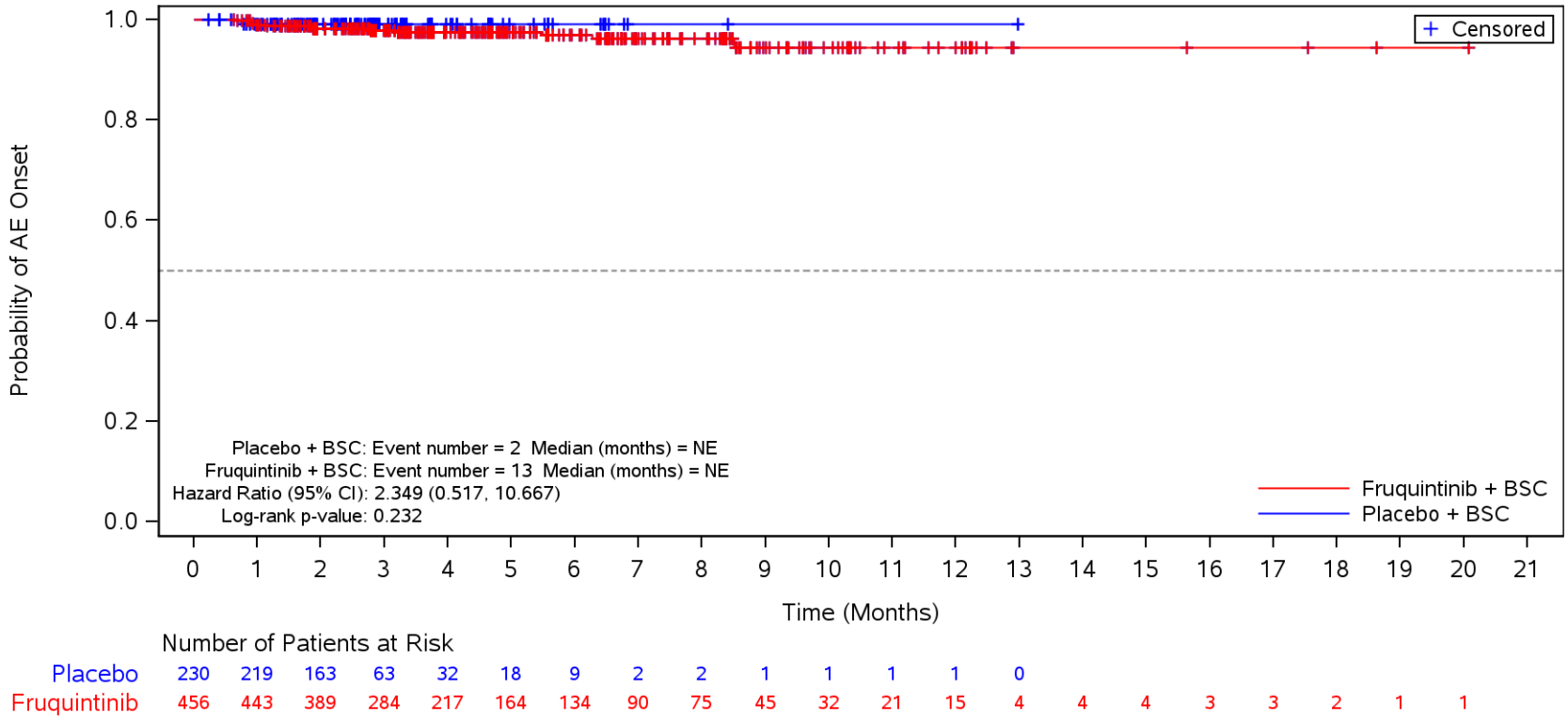
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**



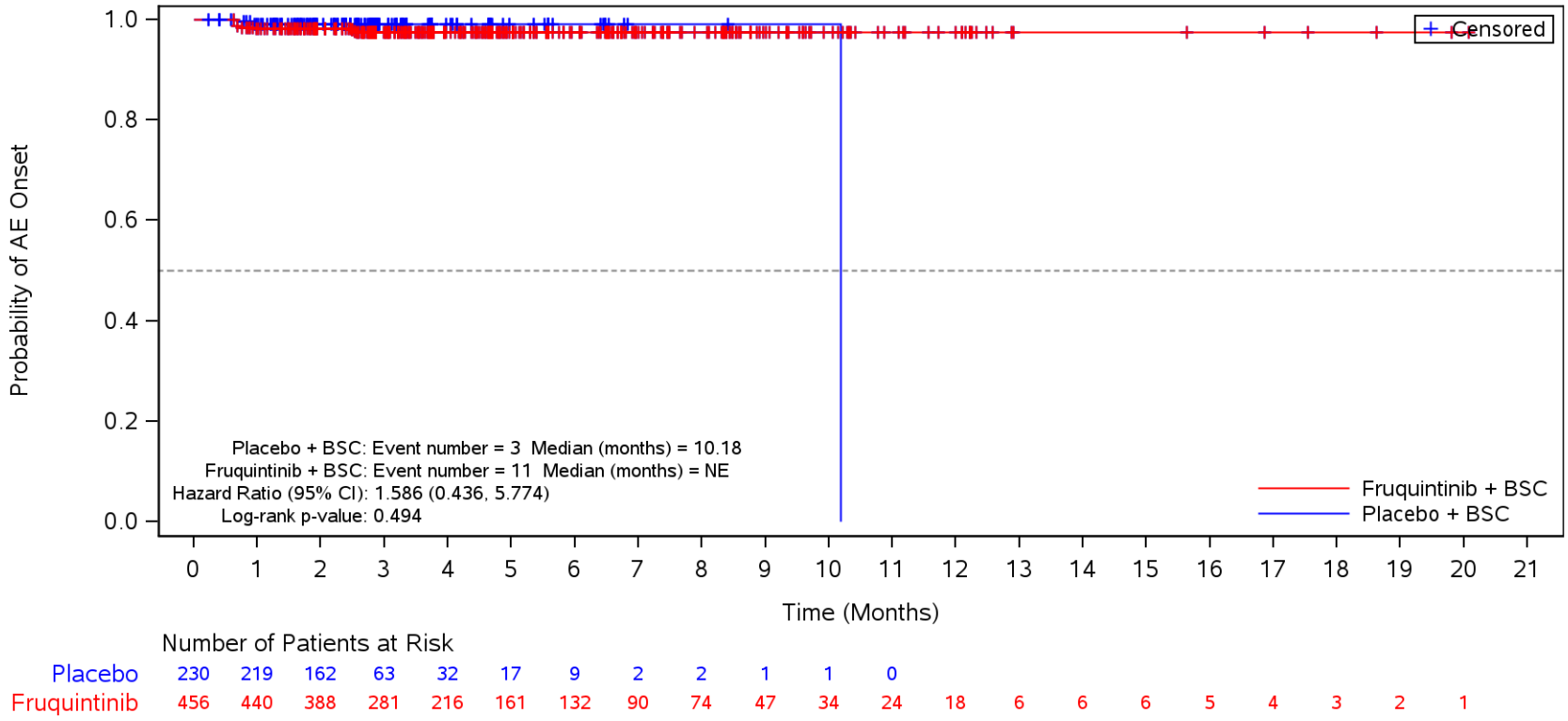
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**



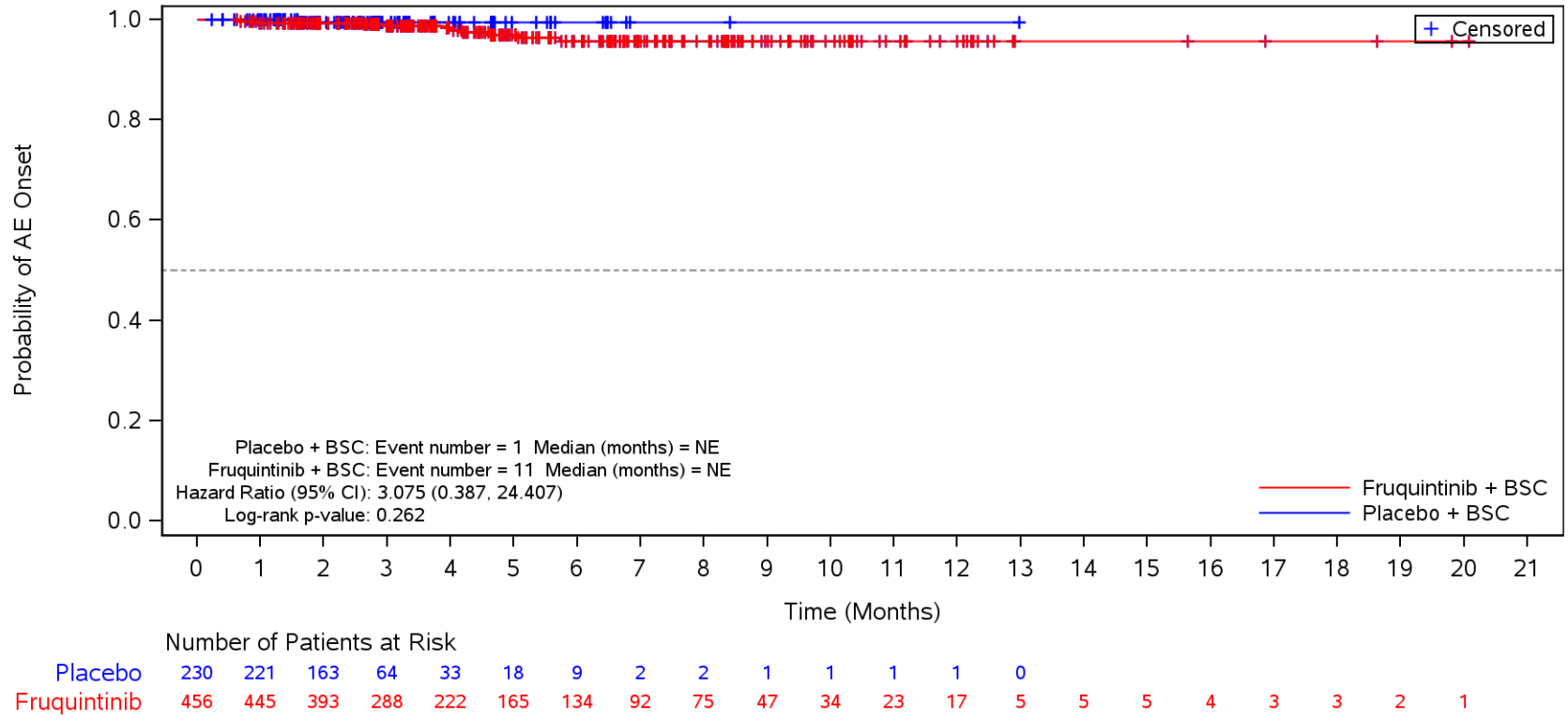
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**



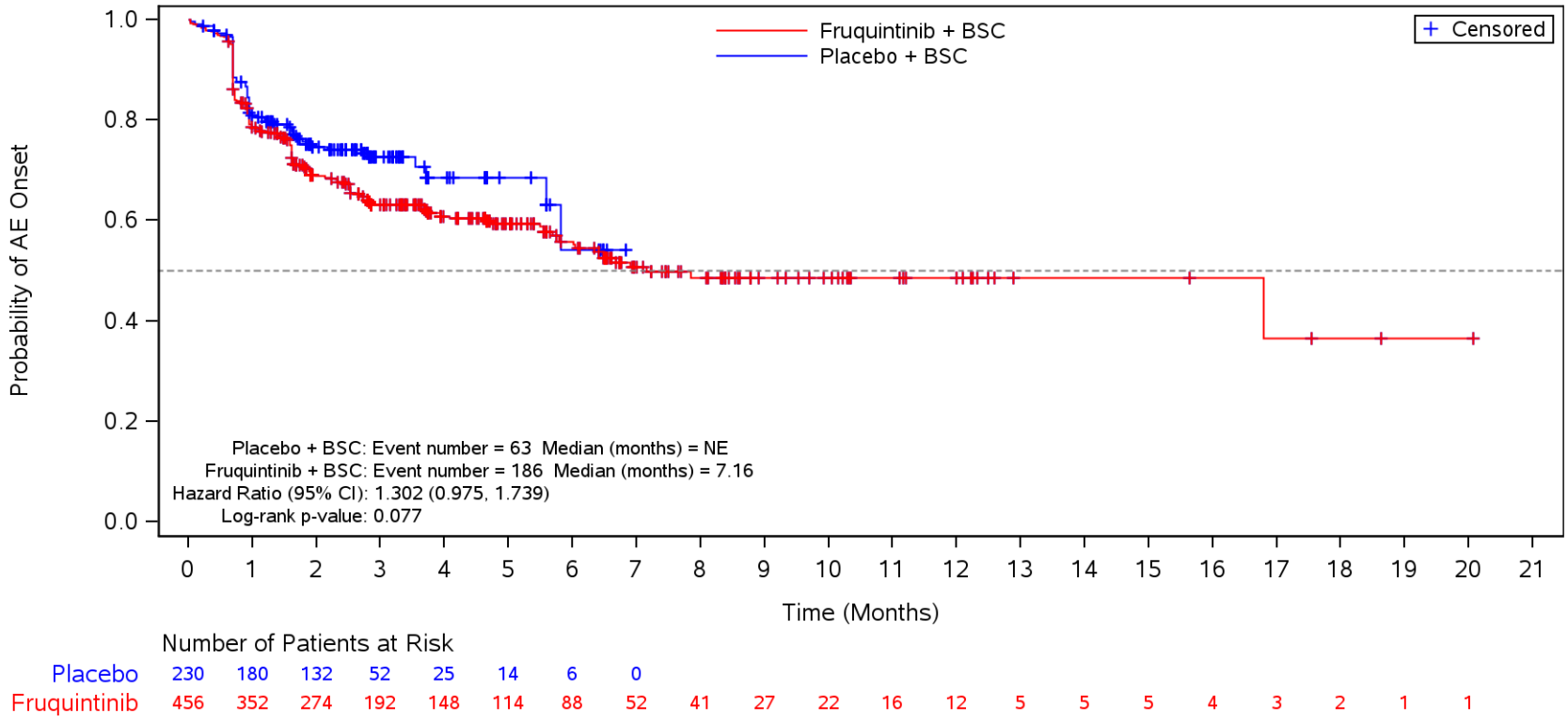
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**



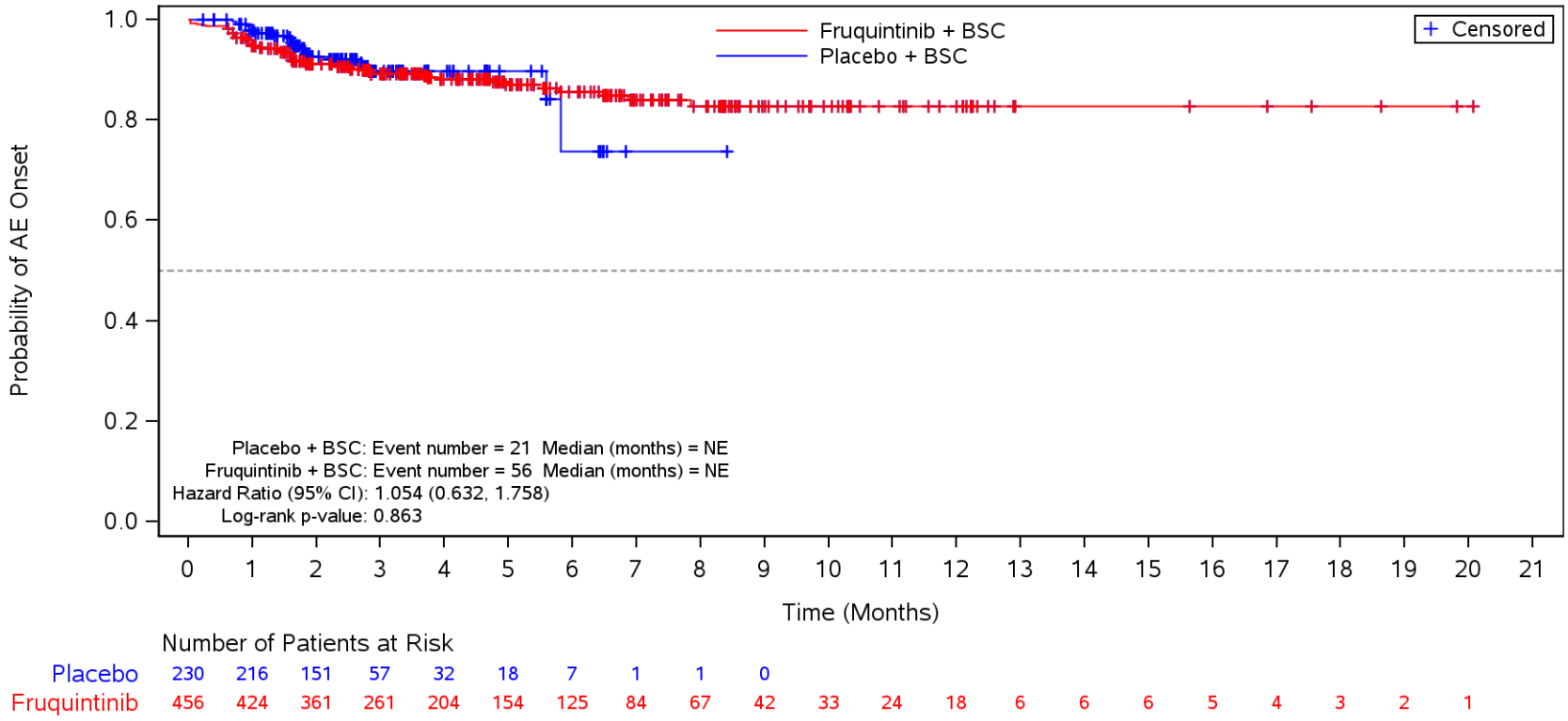
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations**



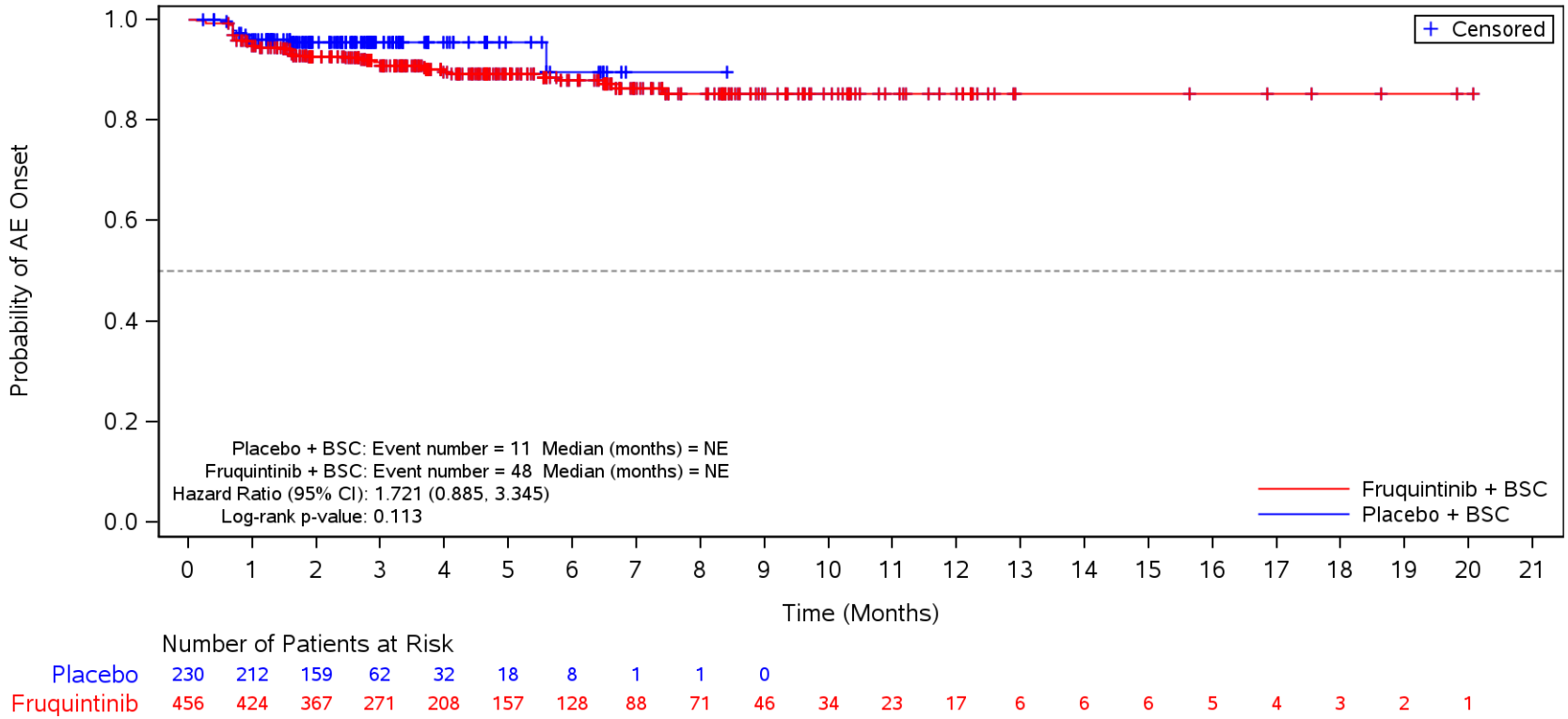
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**



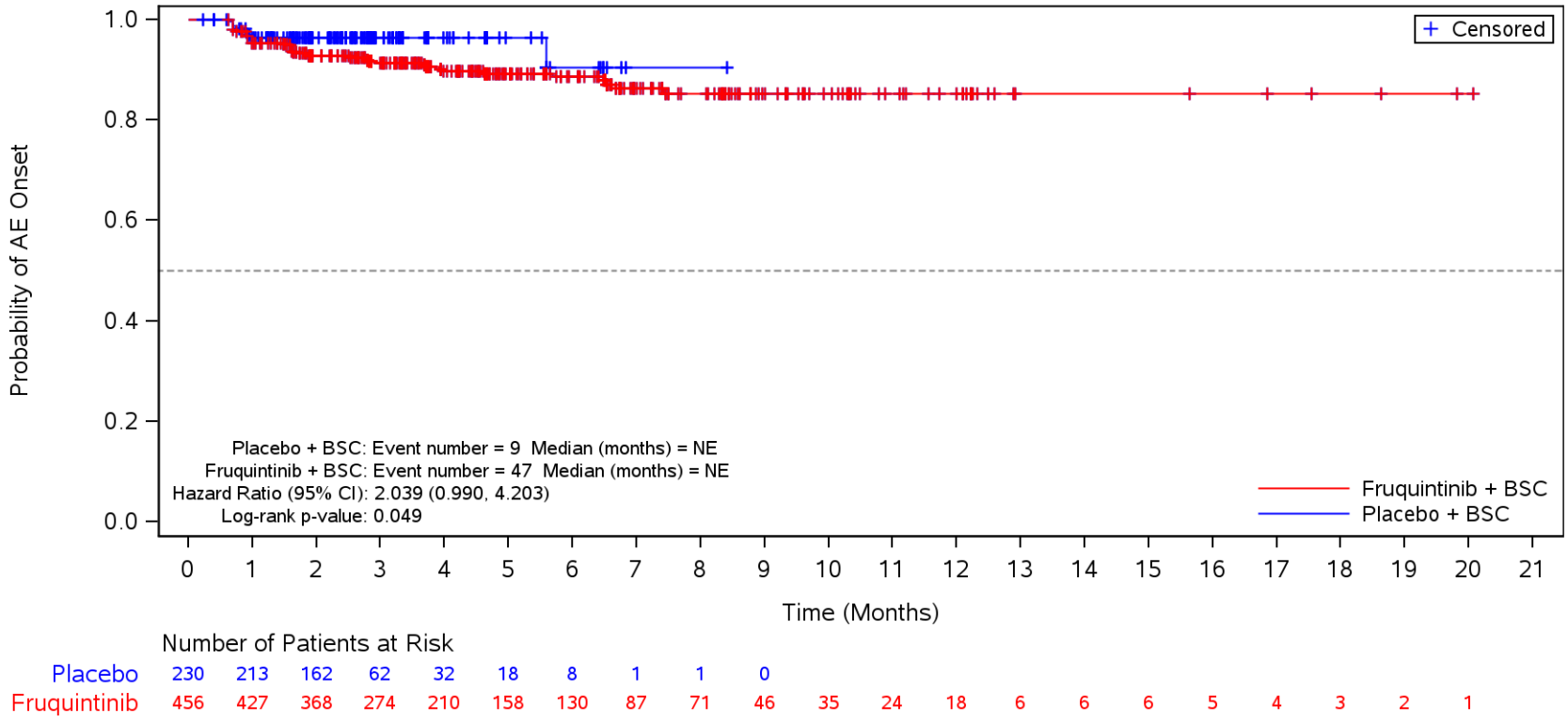
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**



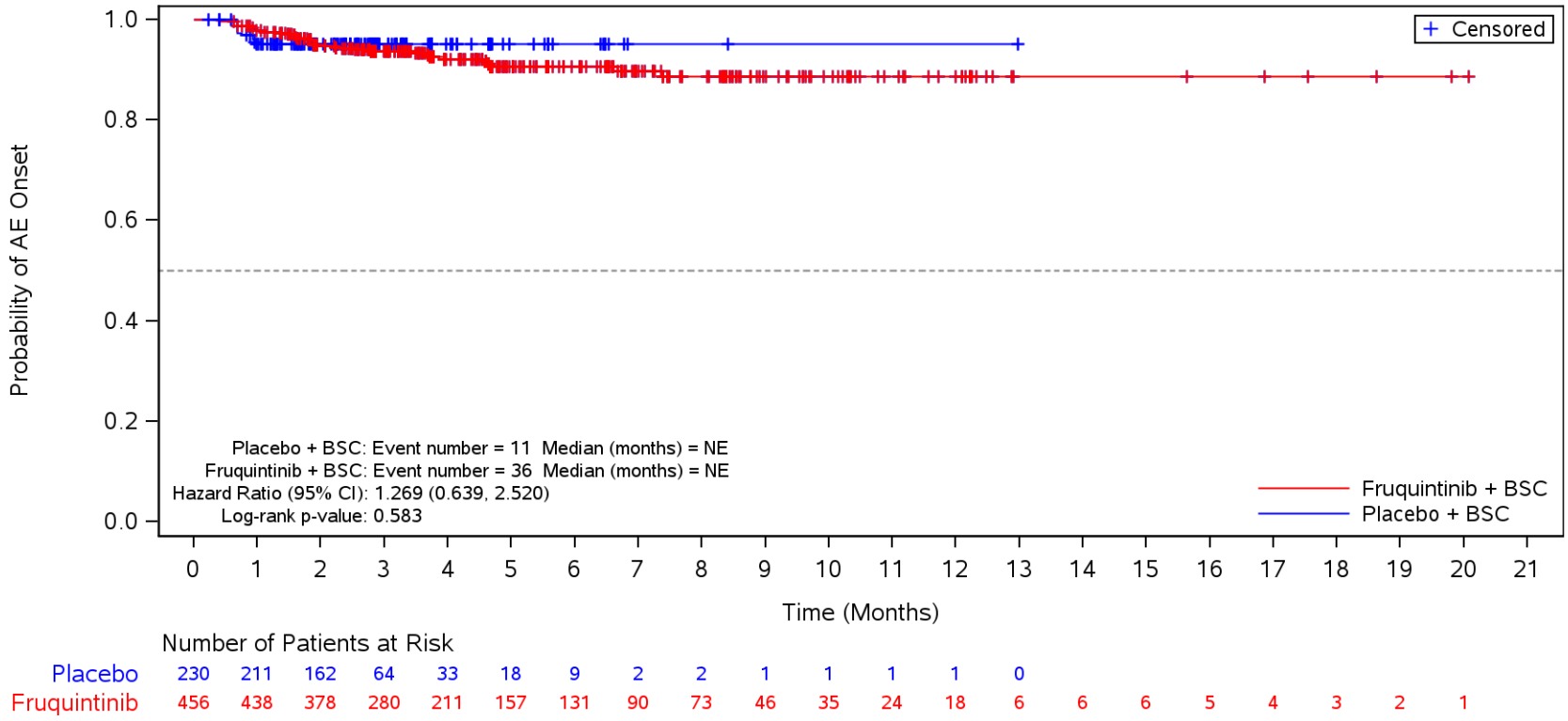
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**



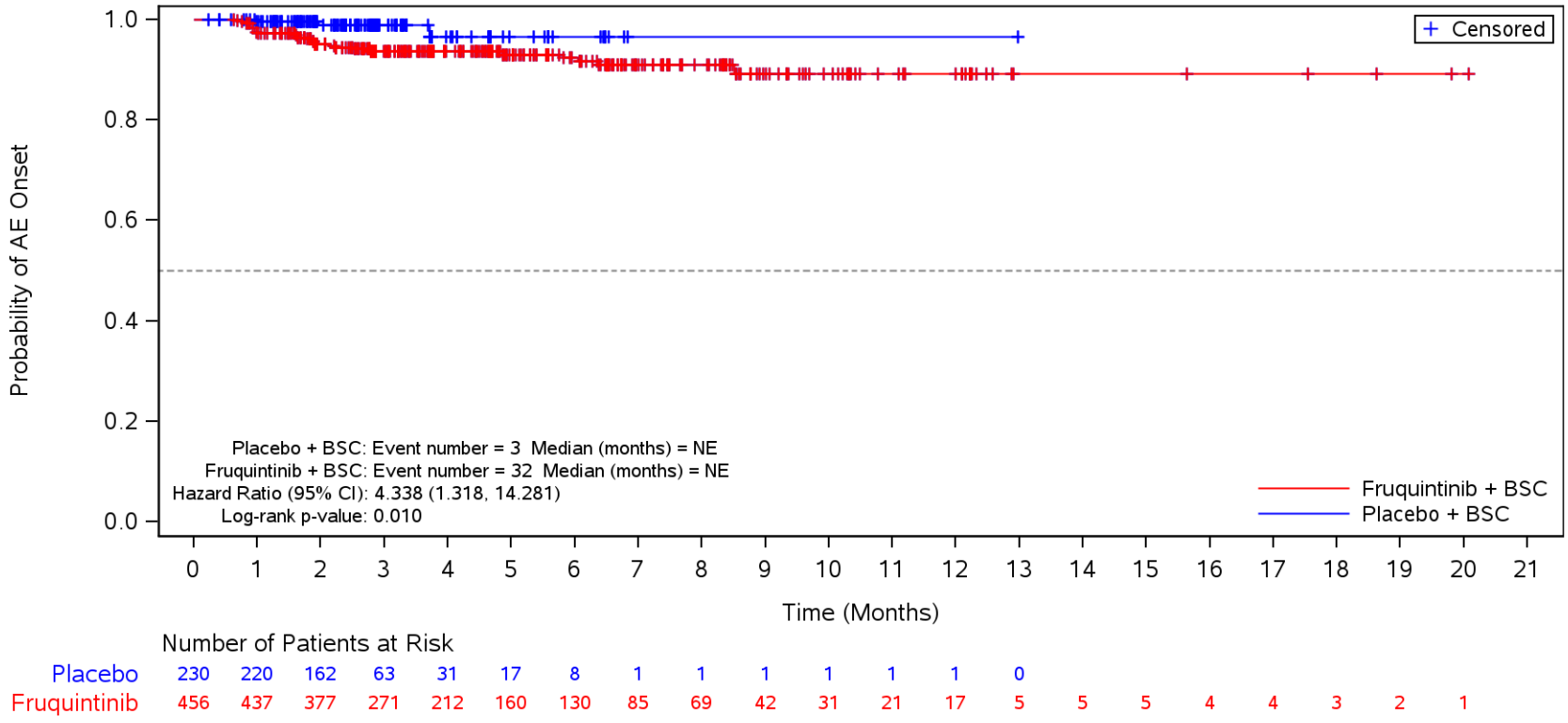
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**



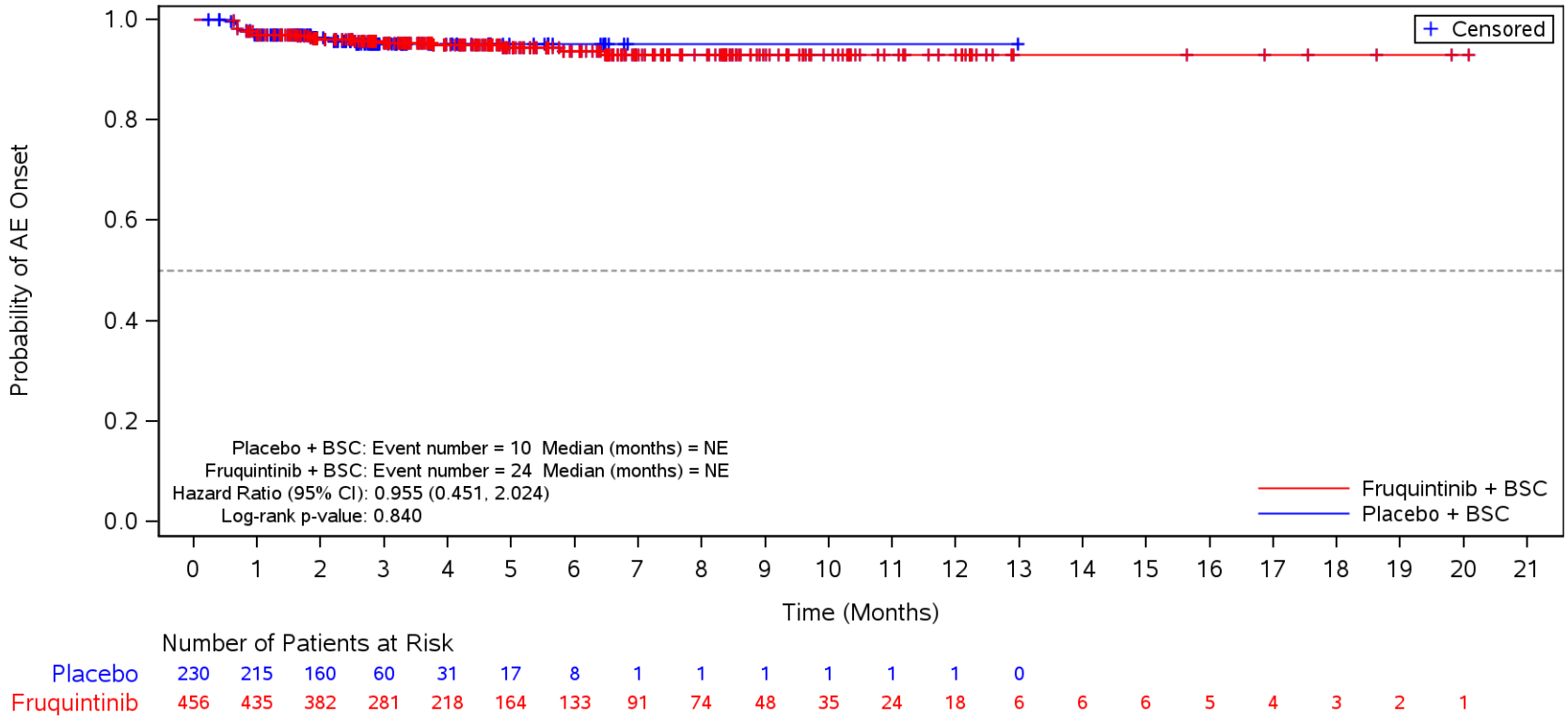
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**



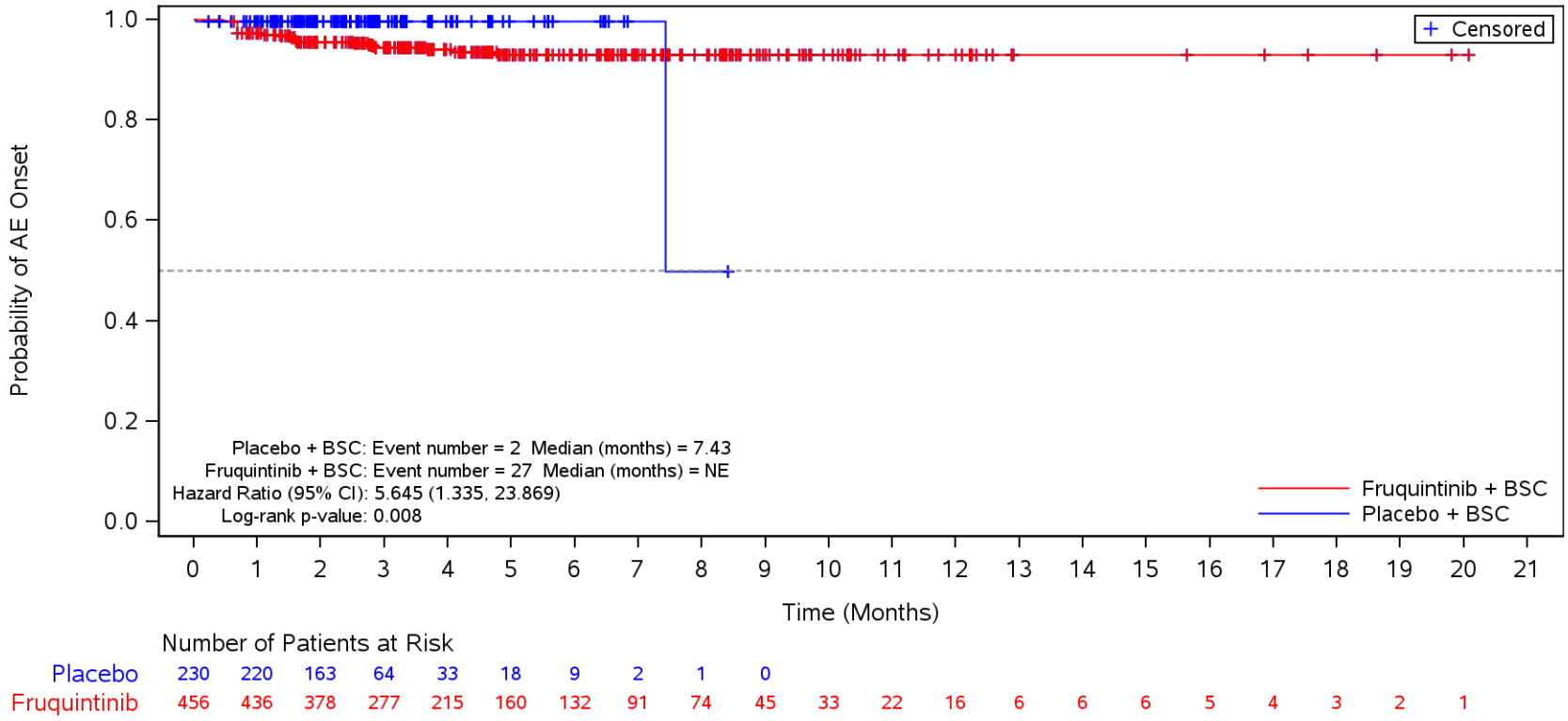
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**



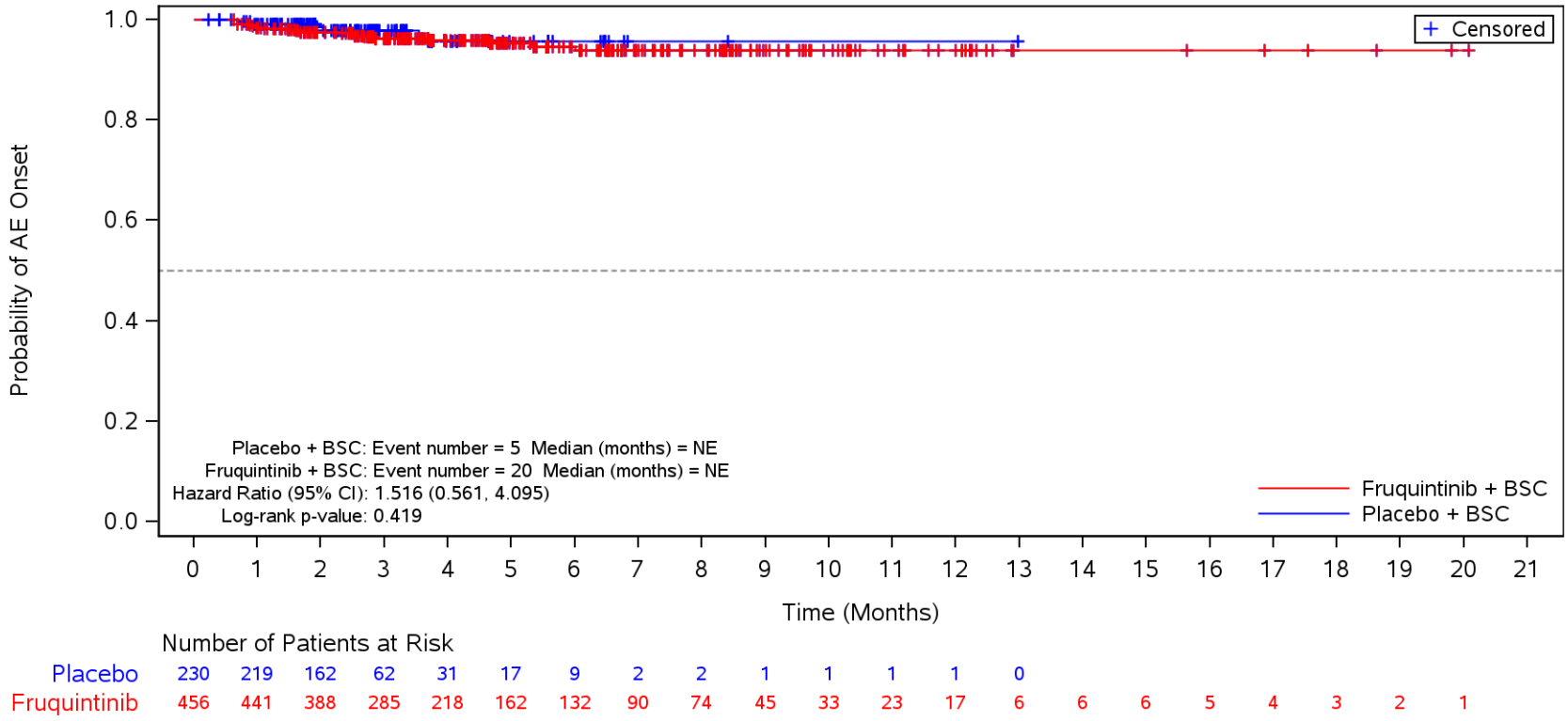
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**



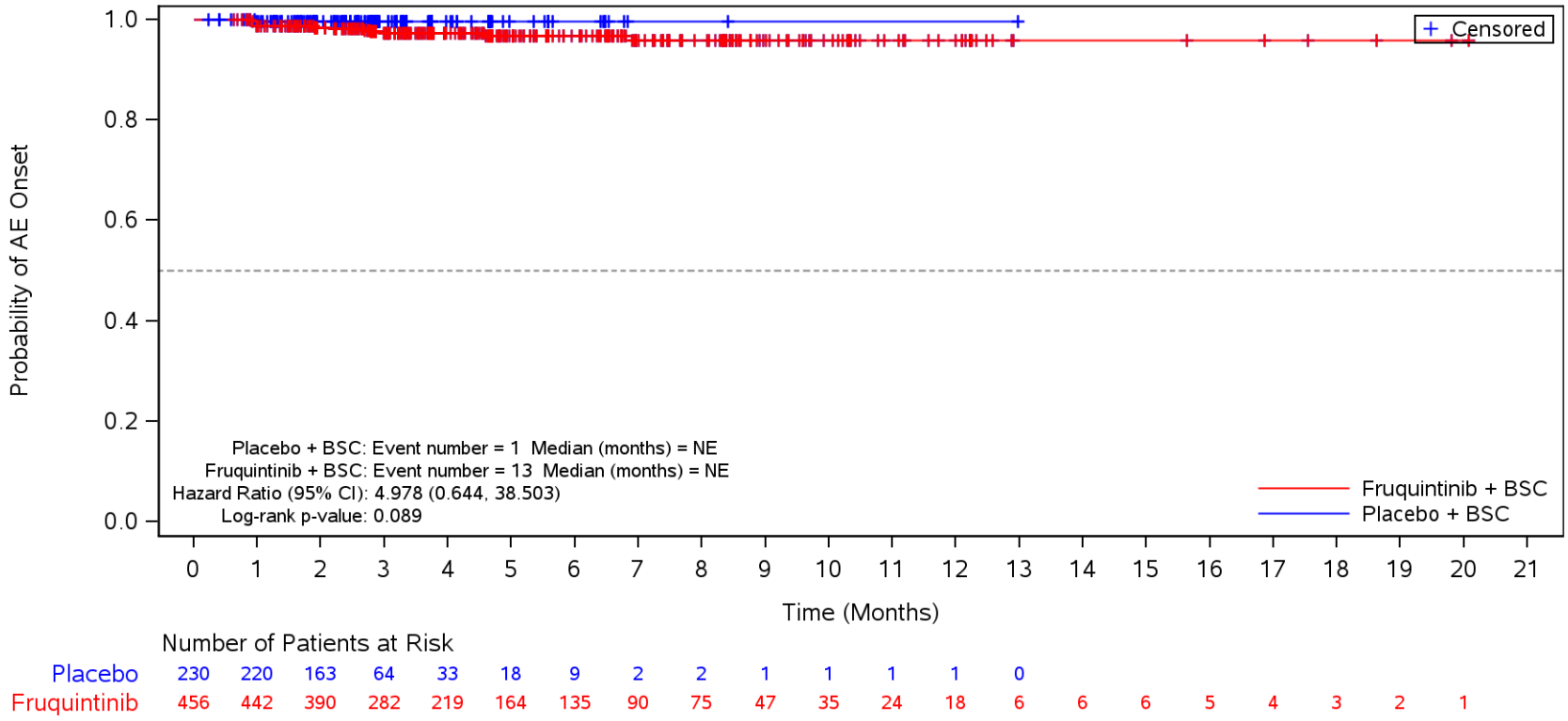
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**



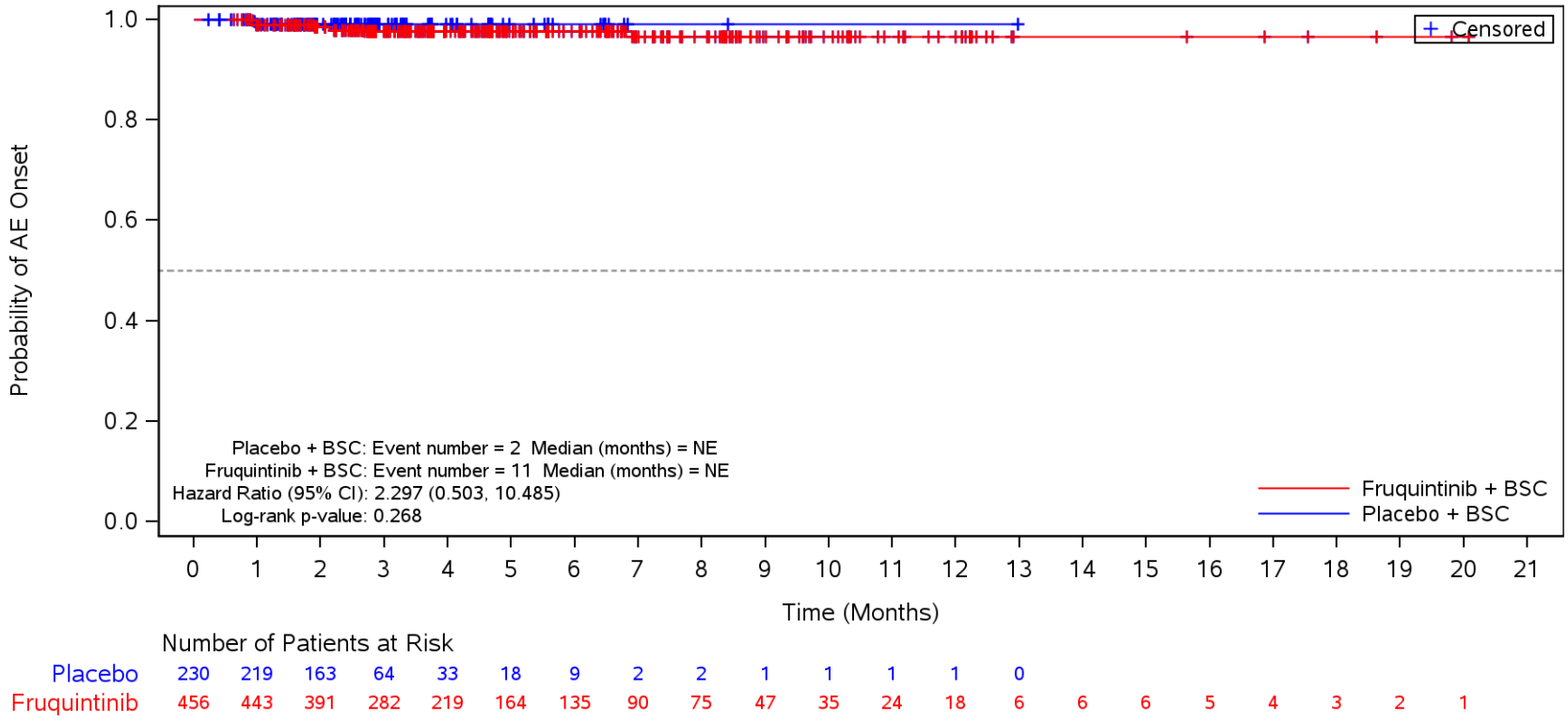
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**



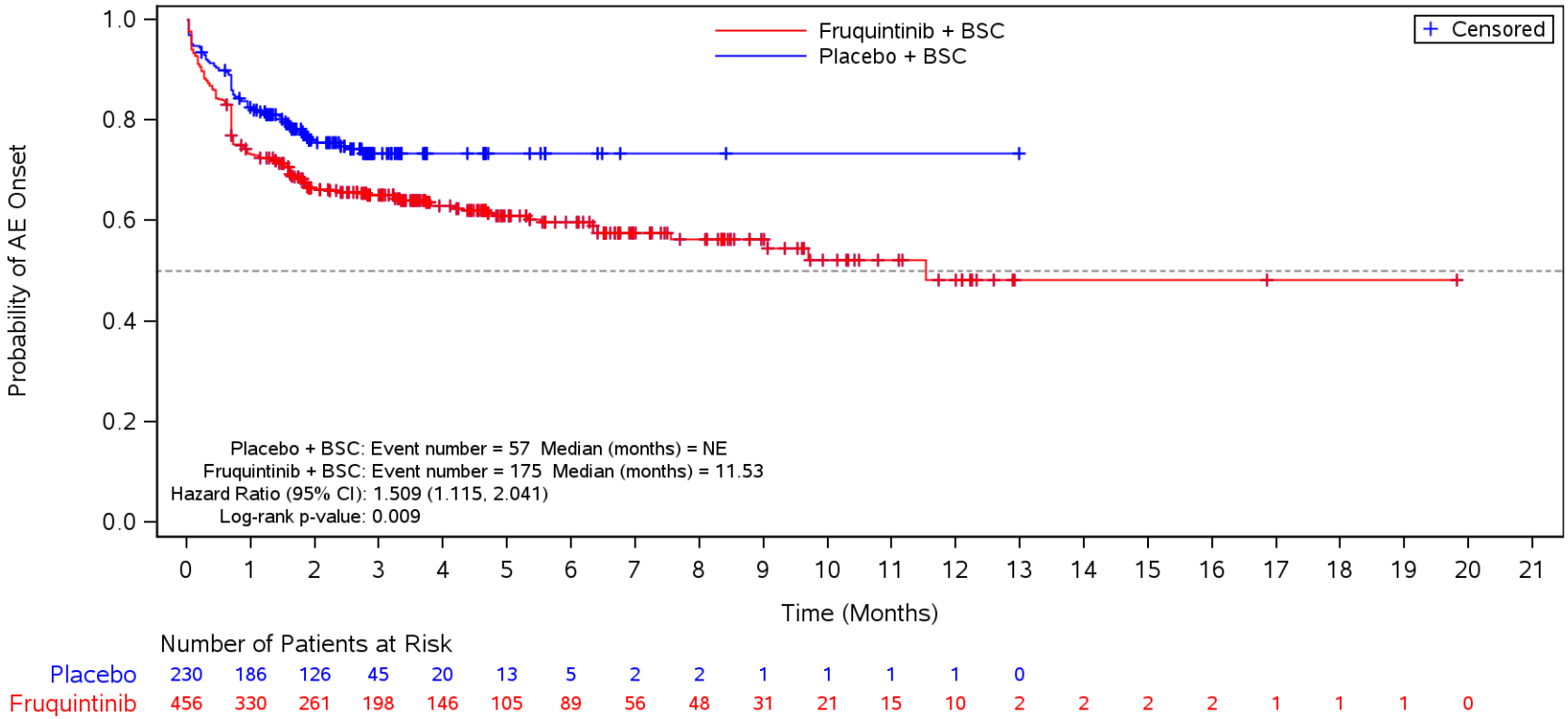
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**



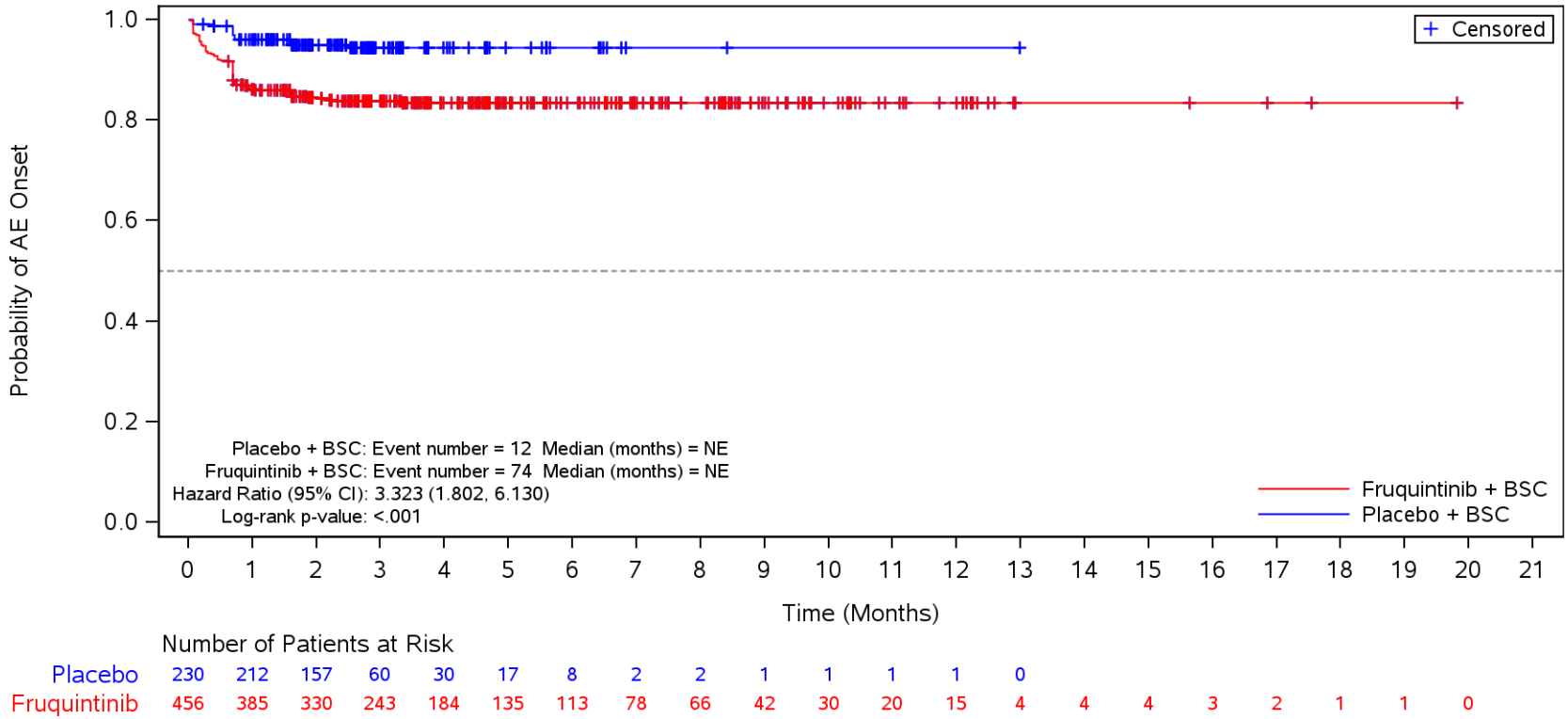
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**



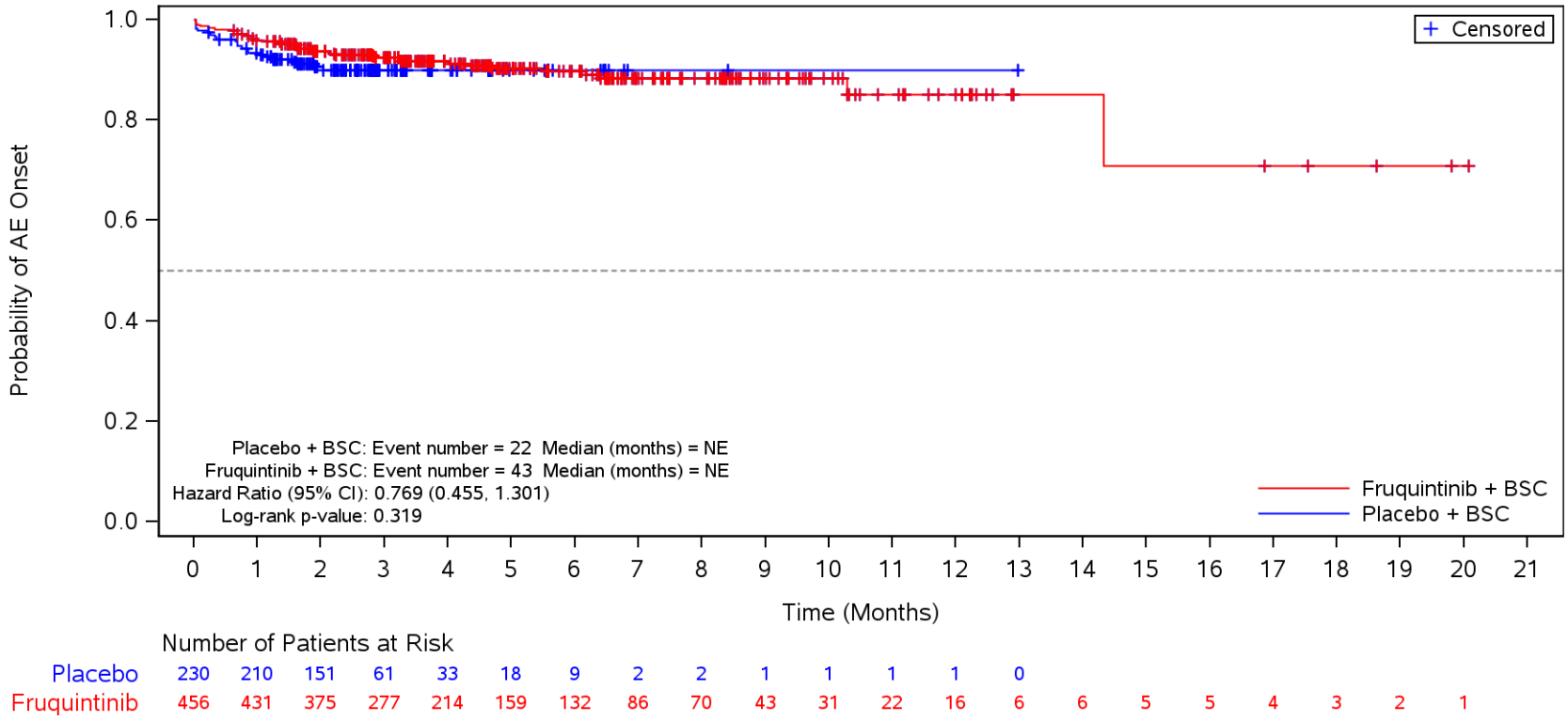
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**



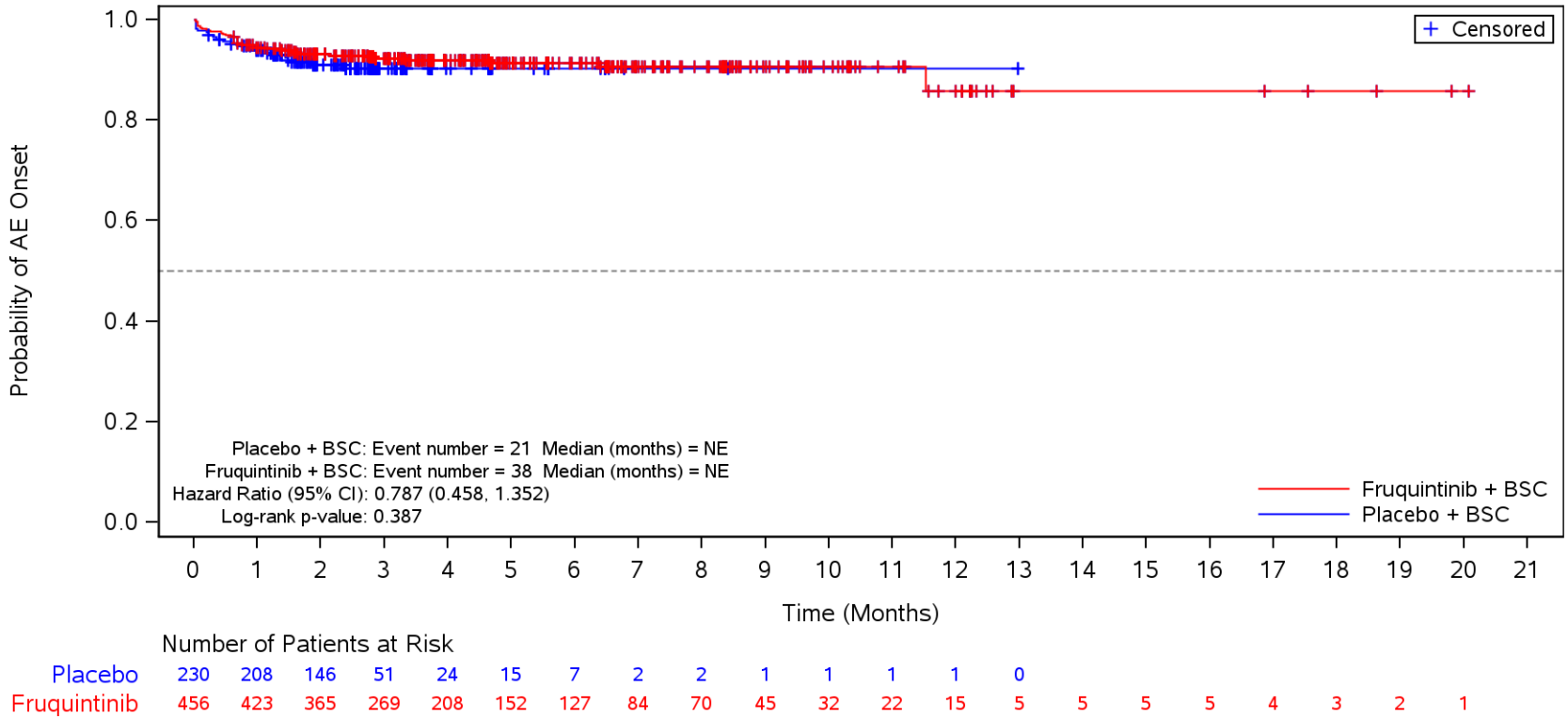
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**



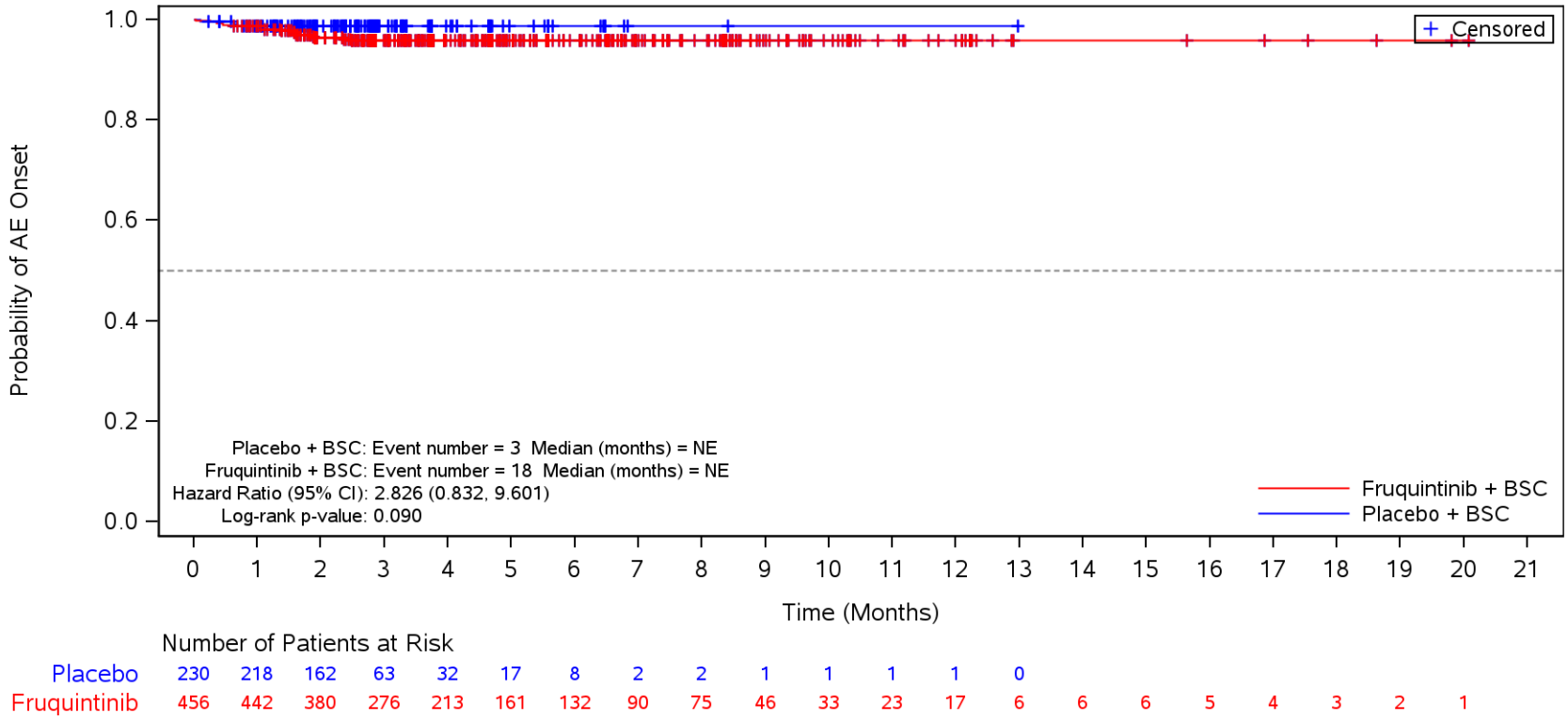
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**



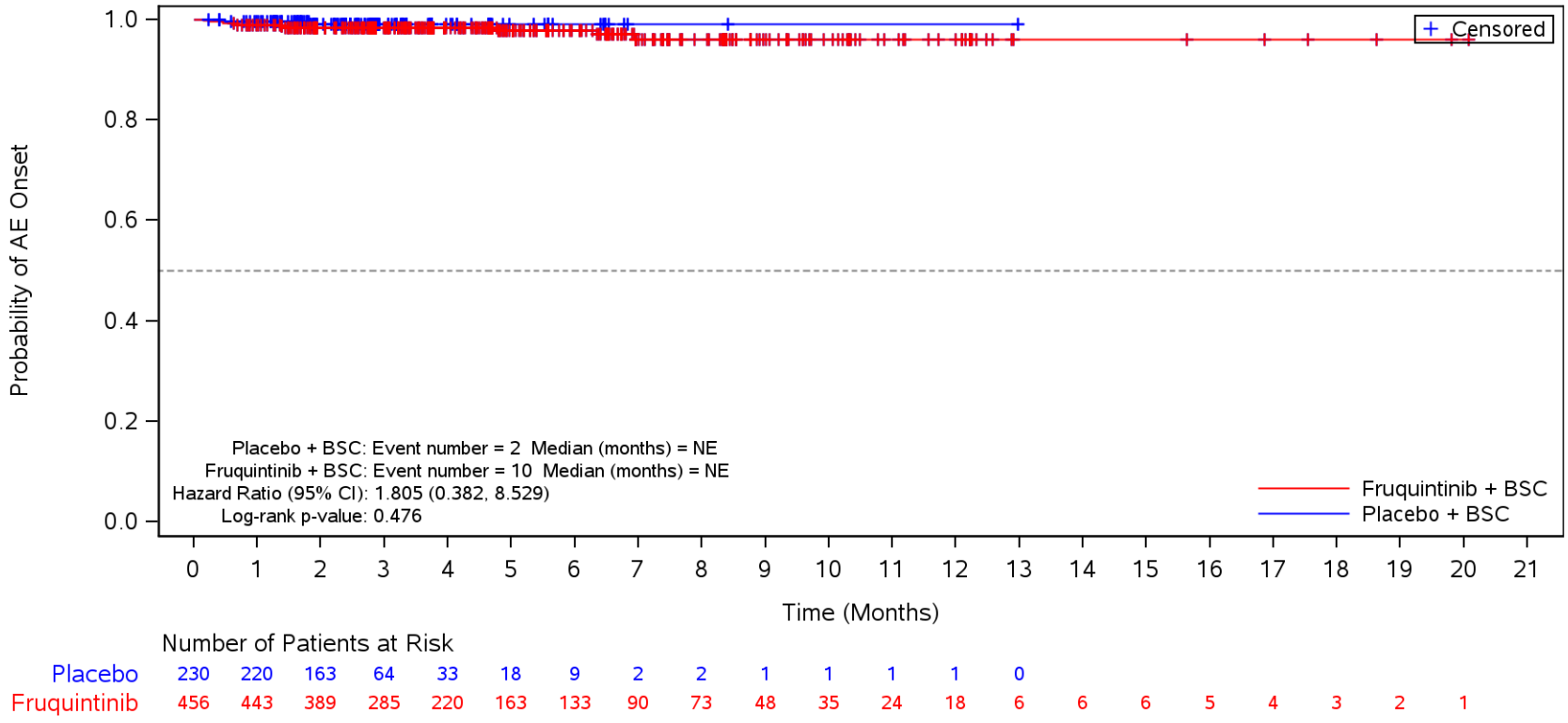
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**



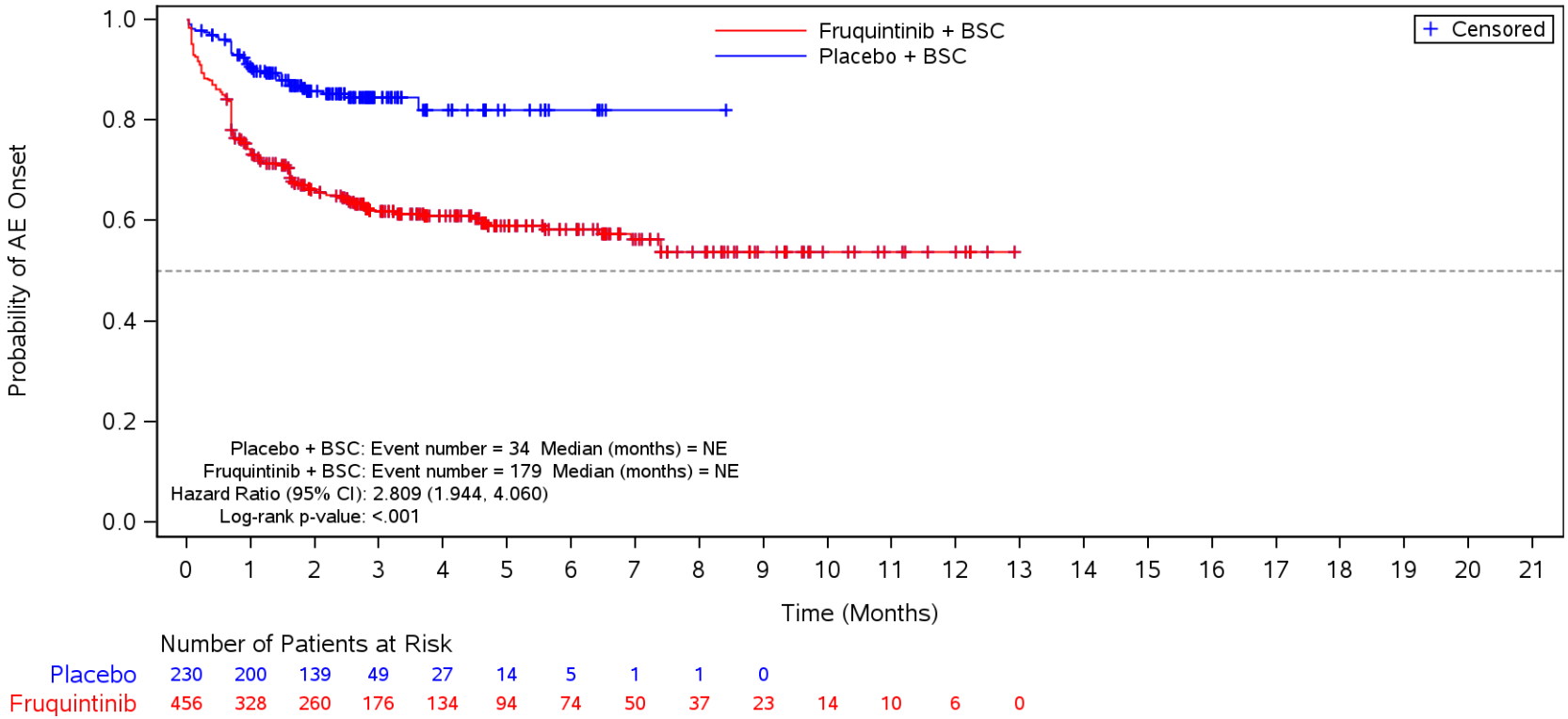
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**



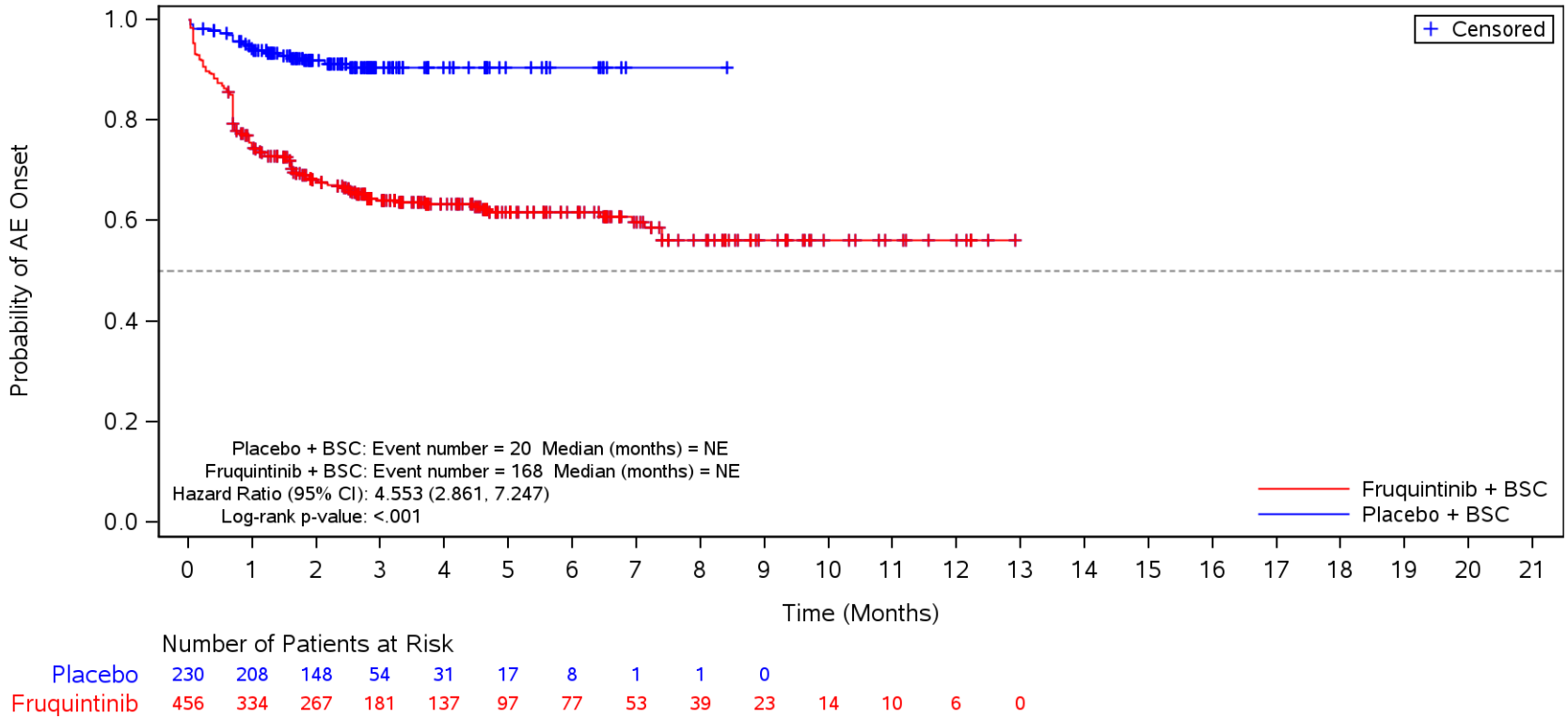
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Vascular disorders**



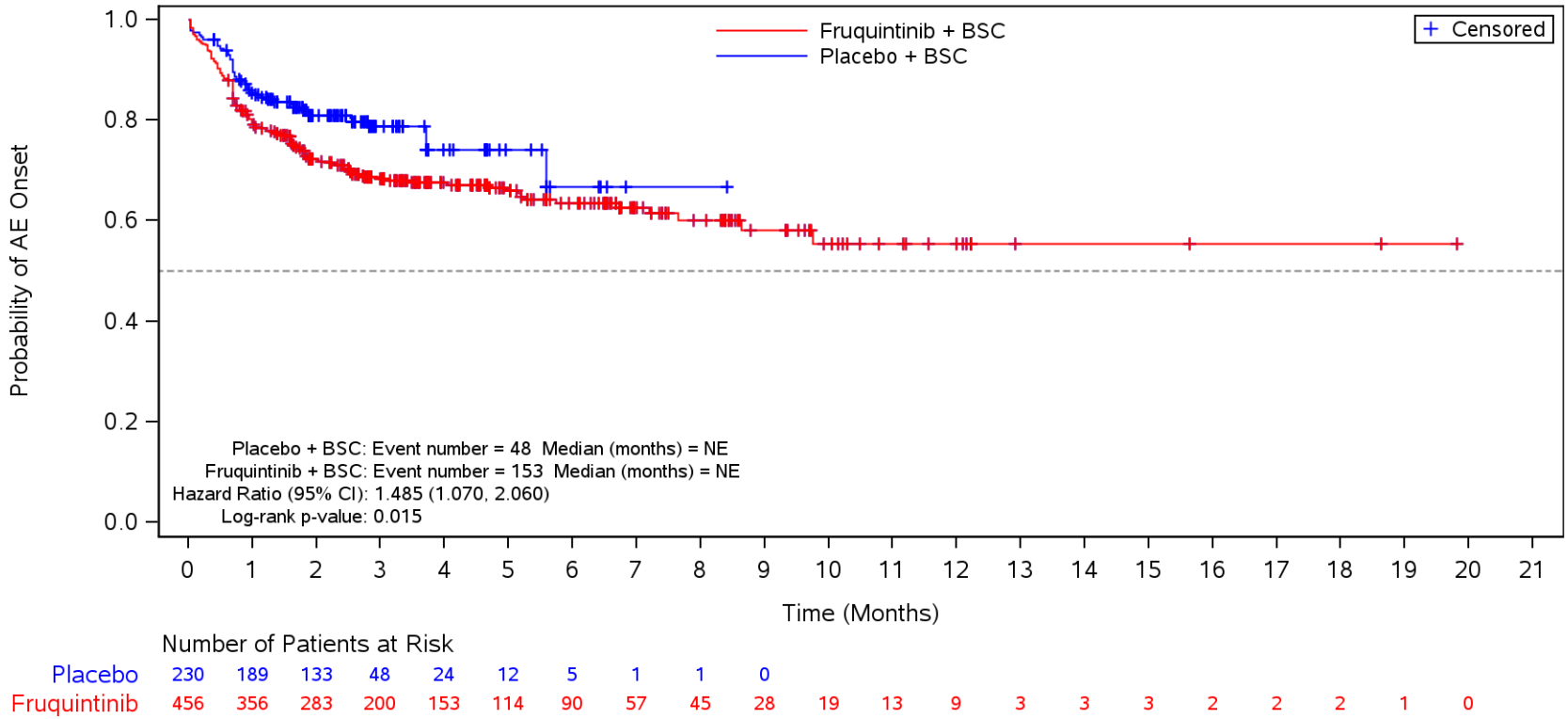
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**



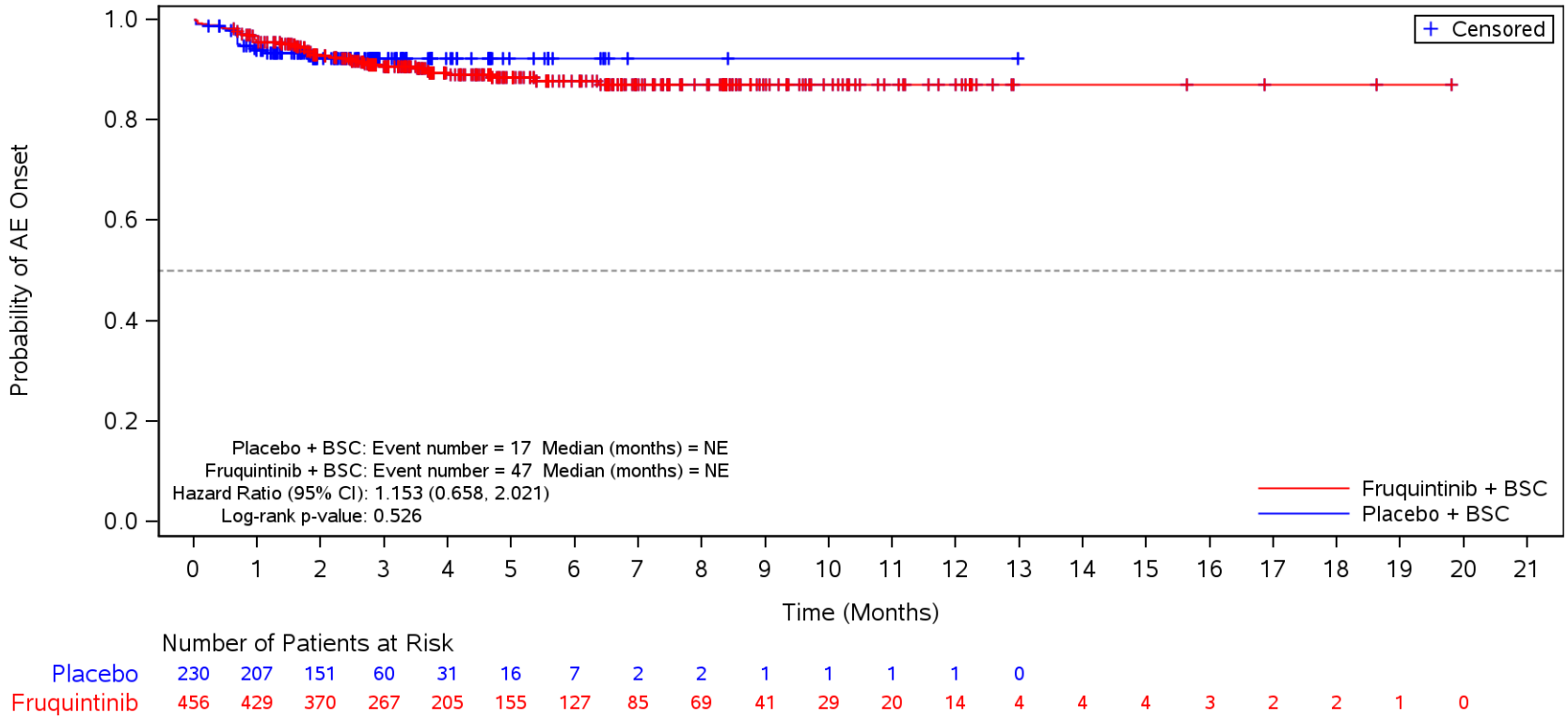
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**



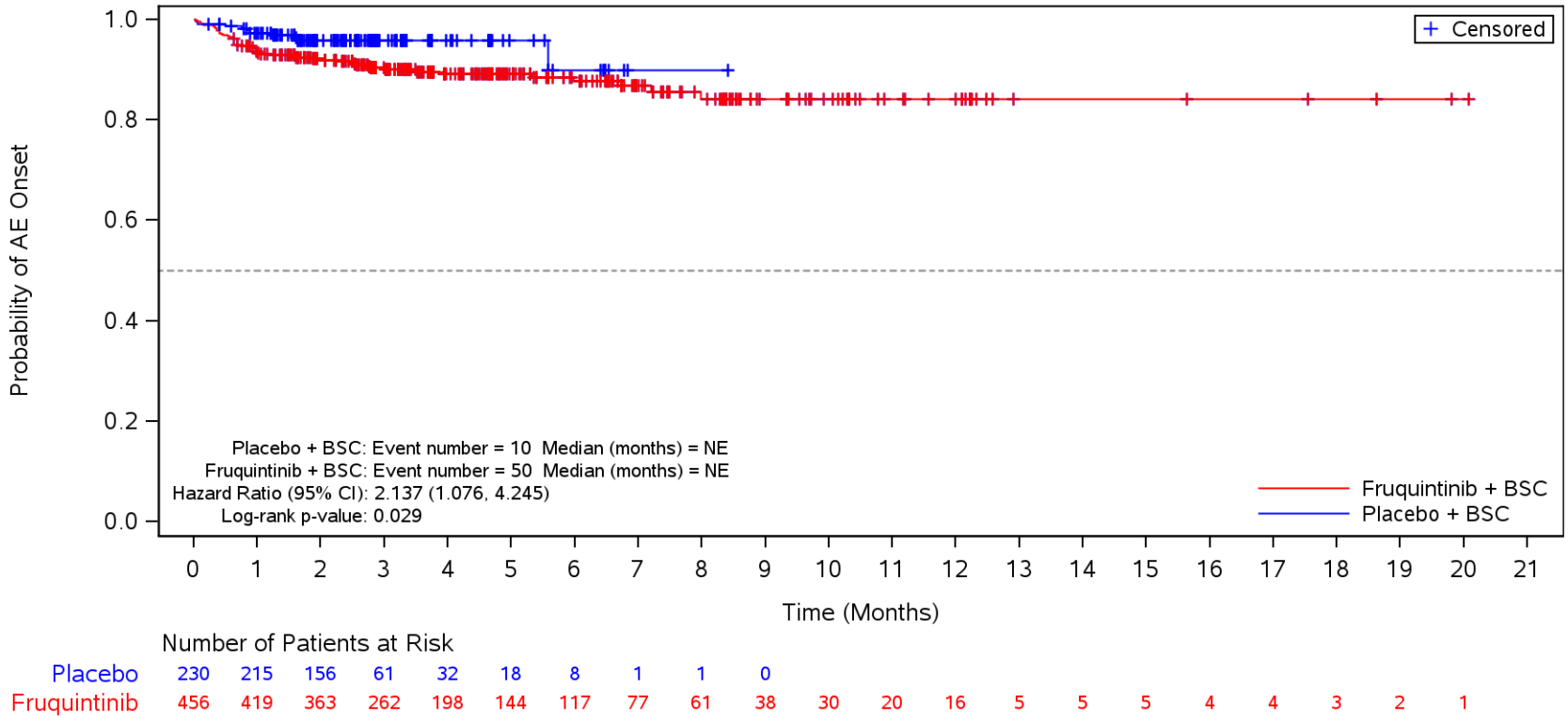
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**



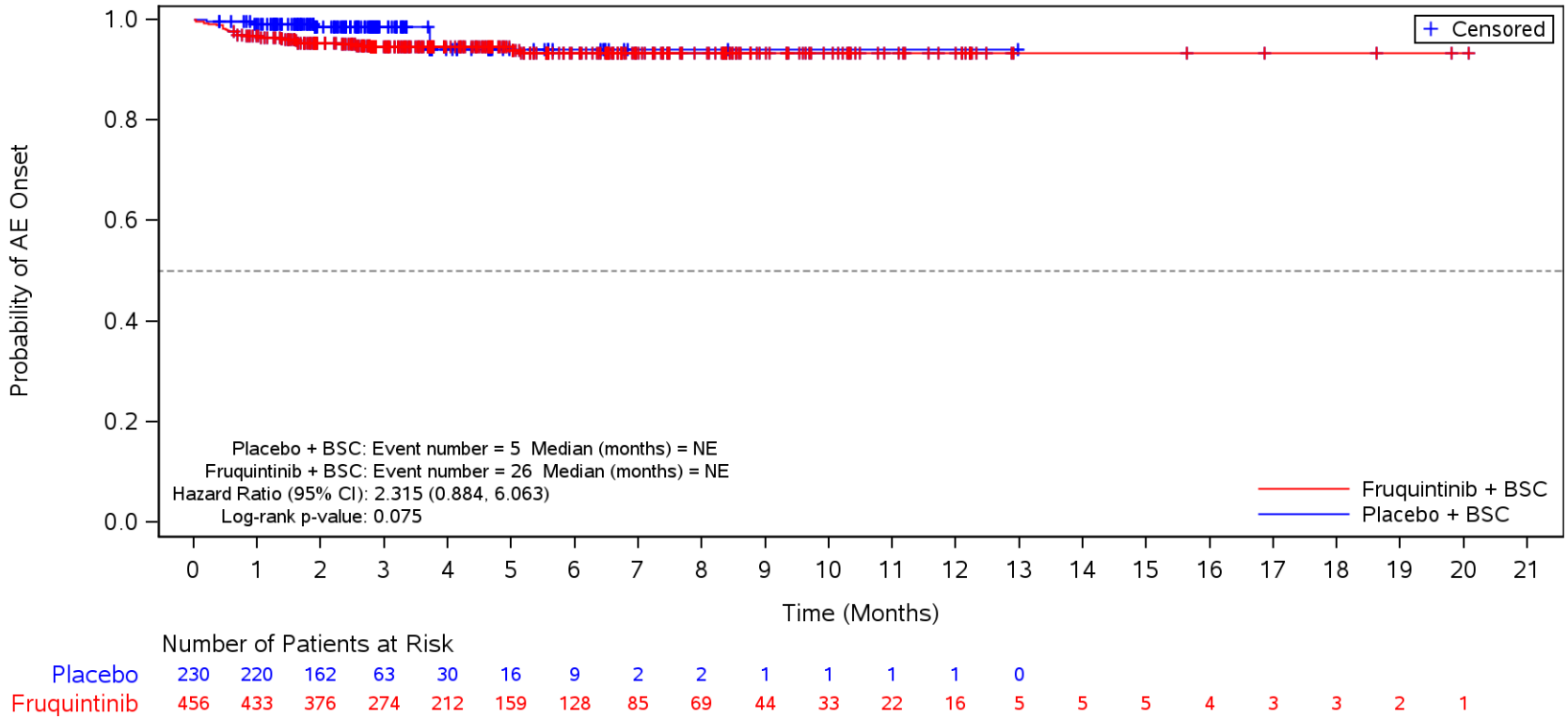
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**



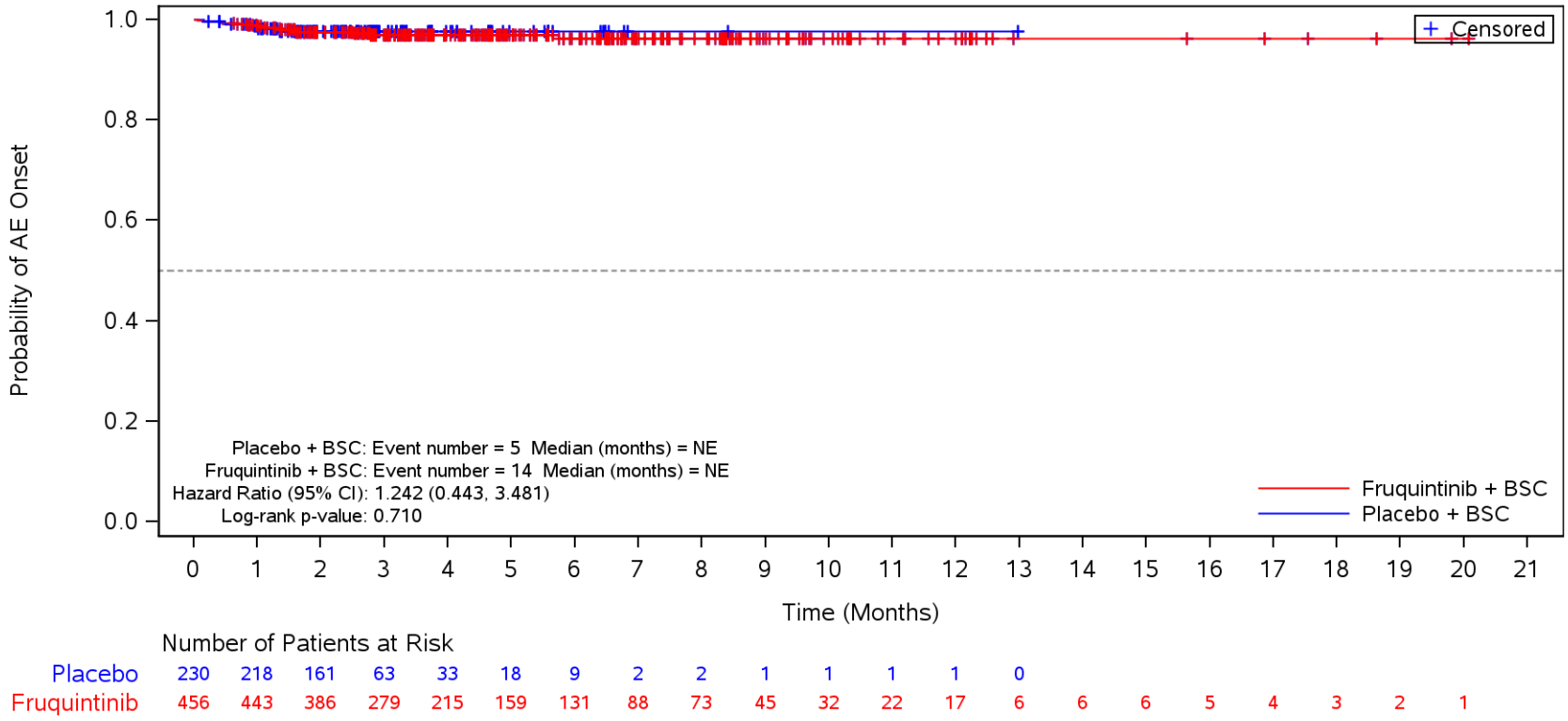
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**



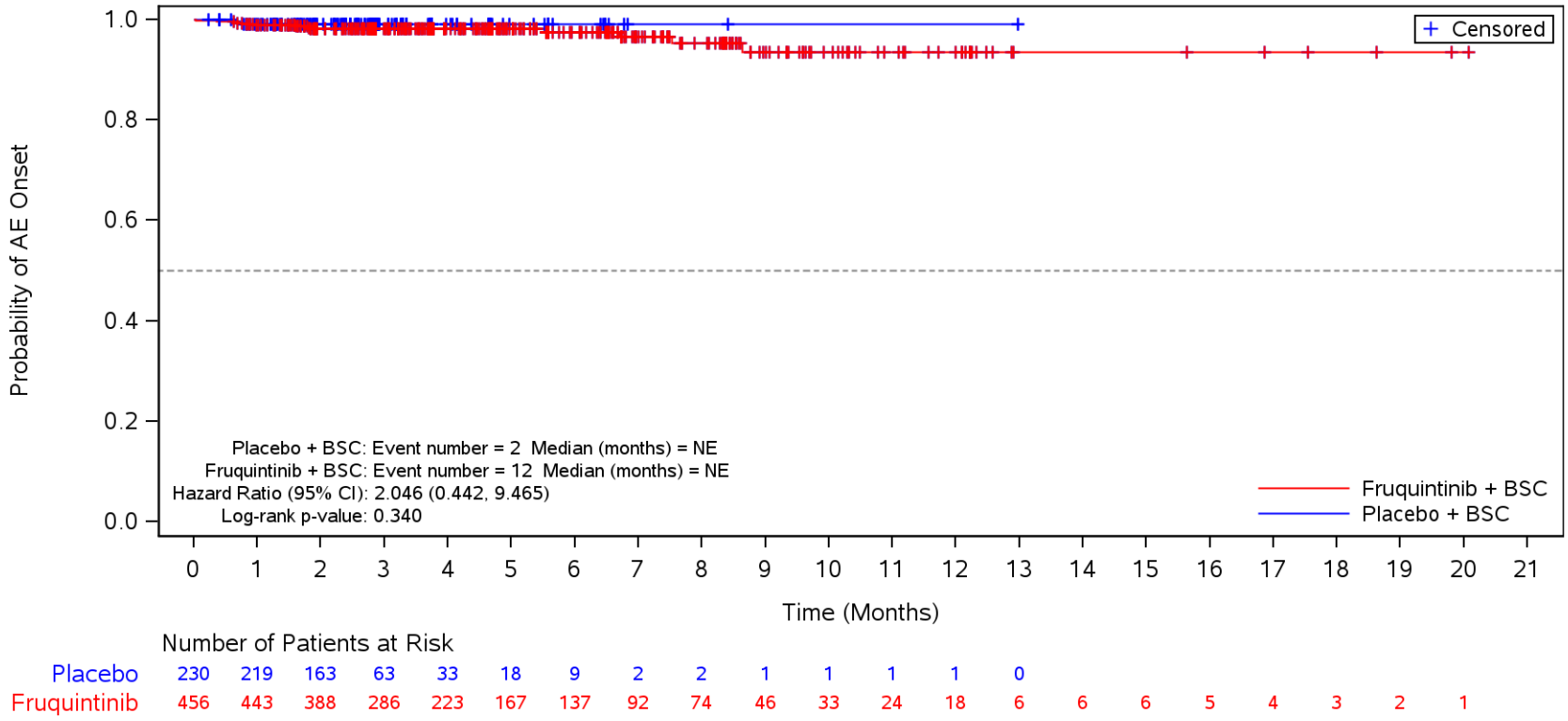
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**



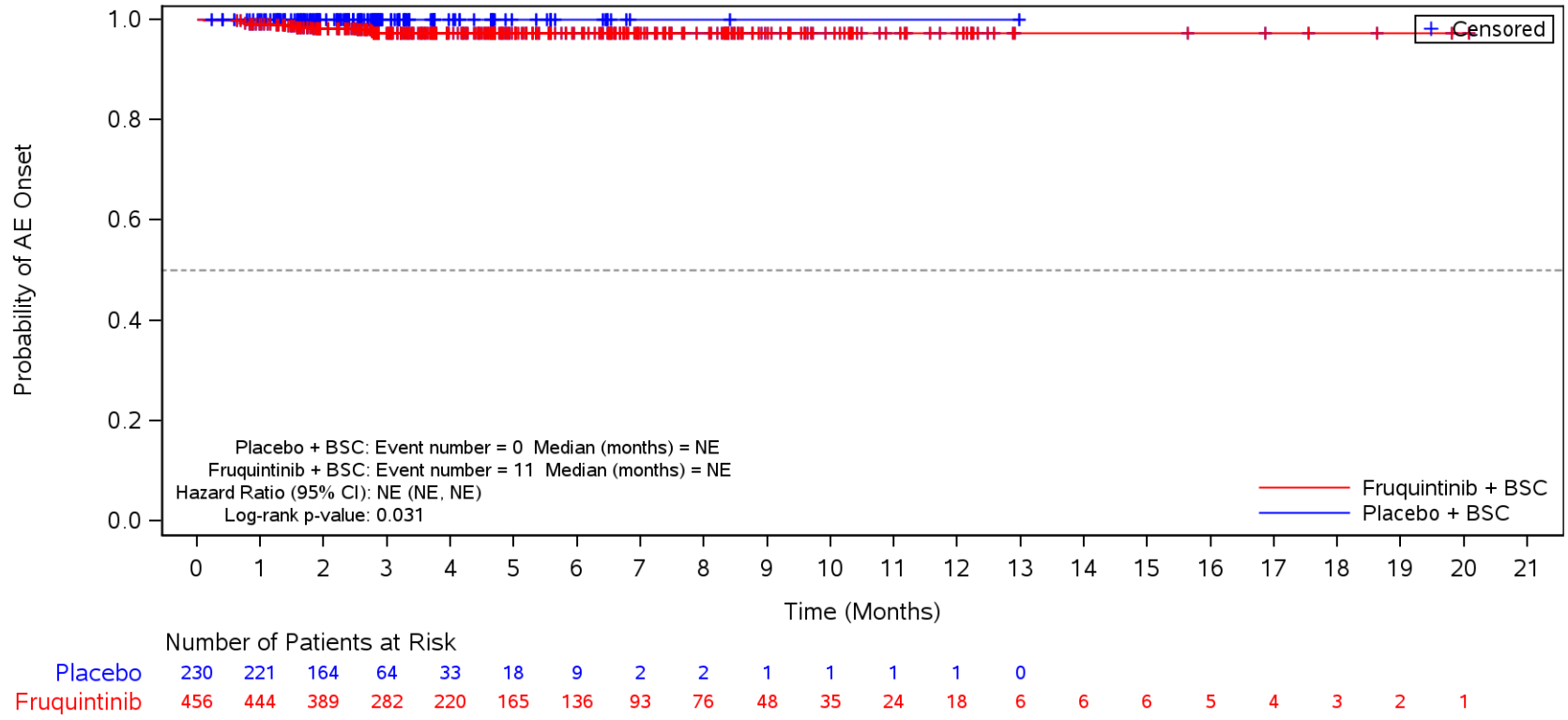
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**



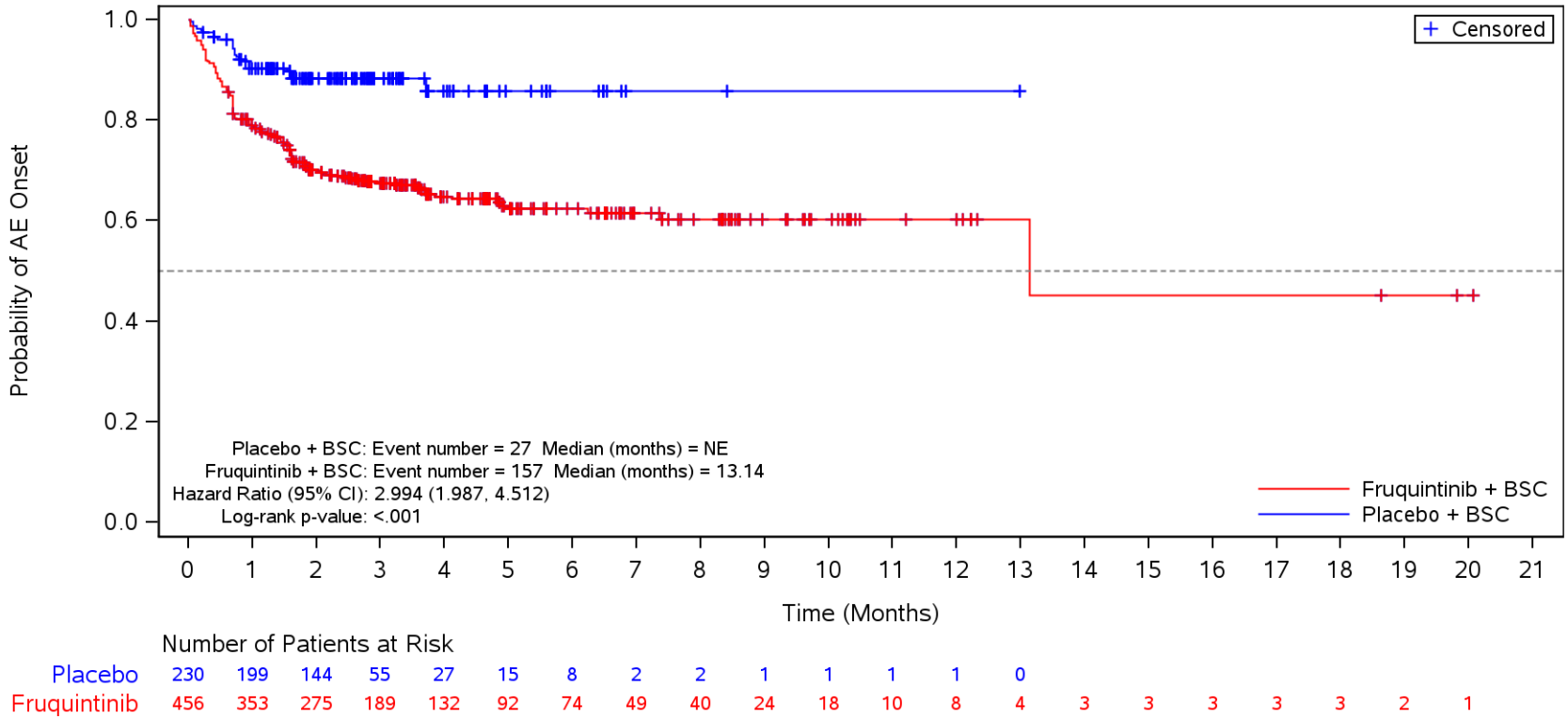
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**



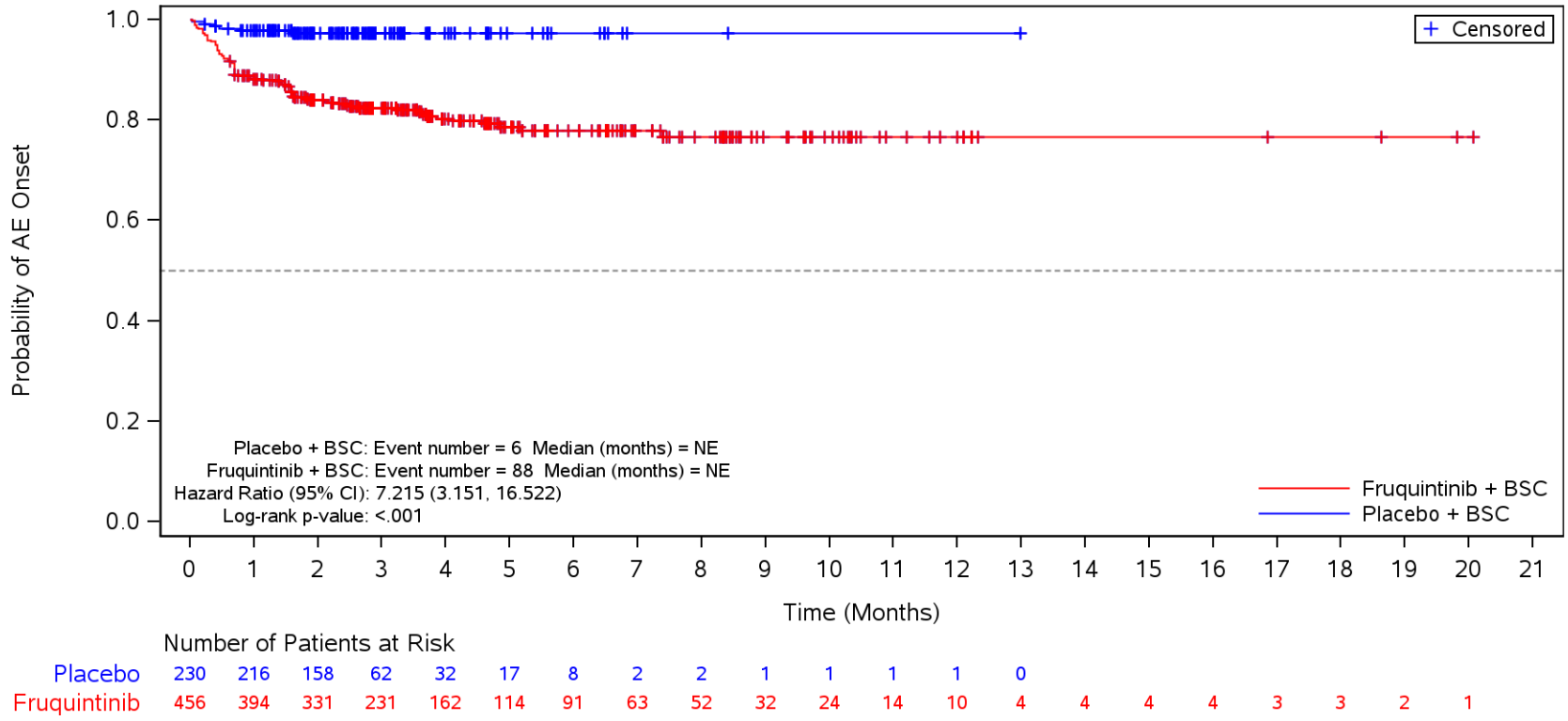
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**



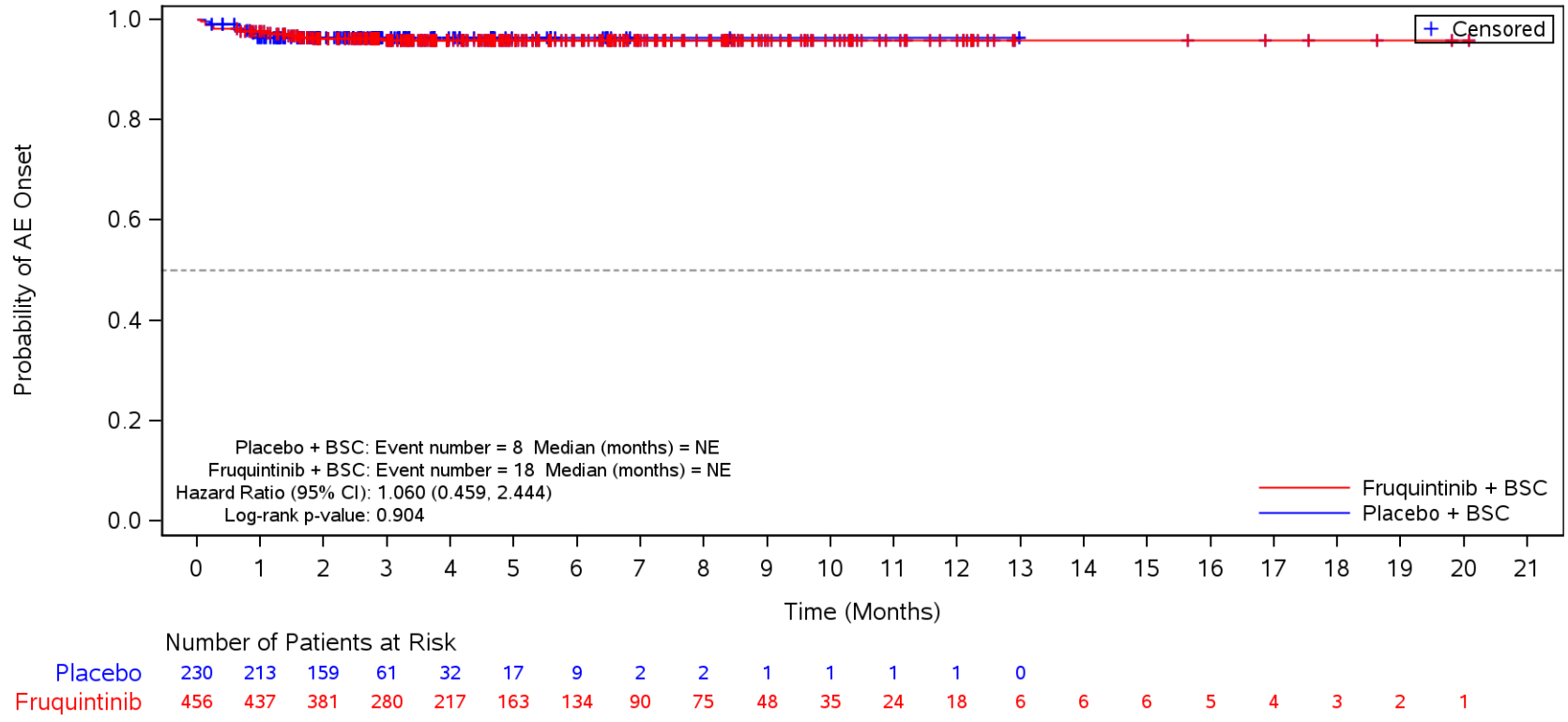
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**



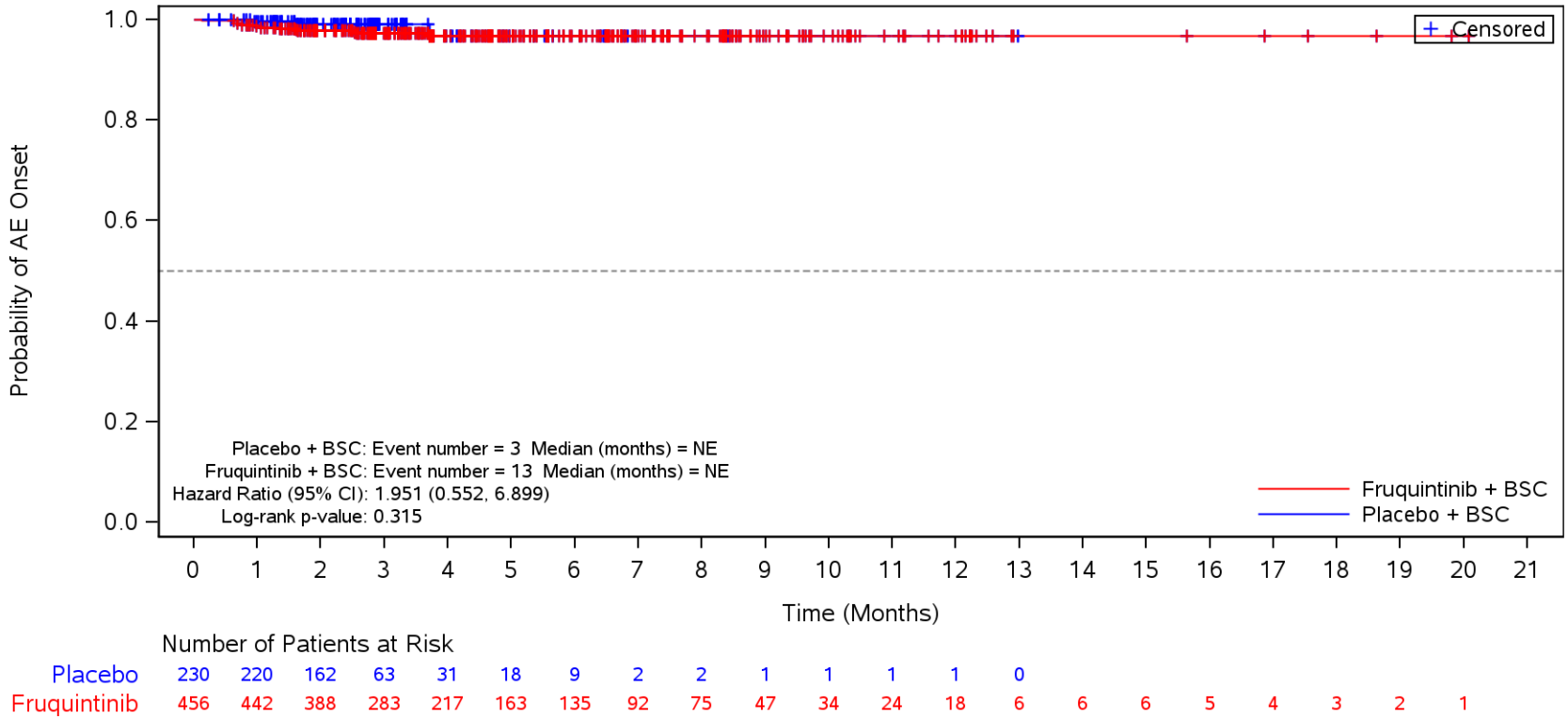
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**



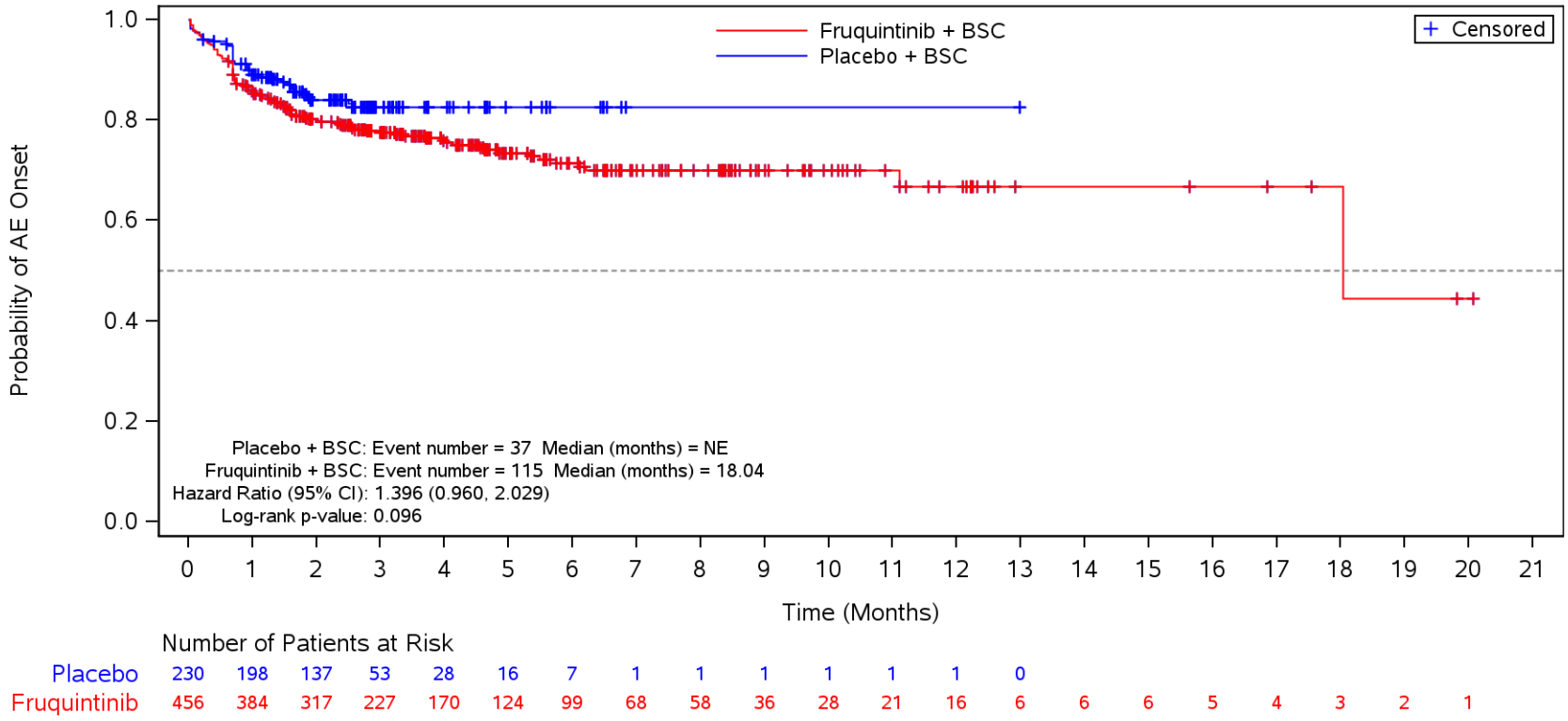
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**



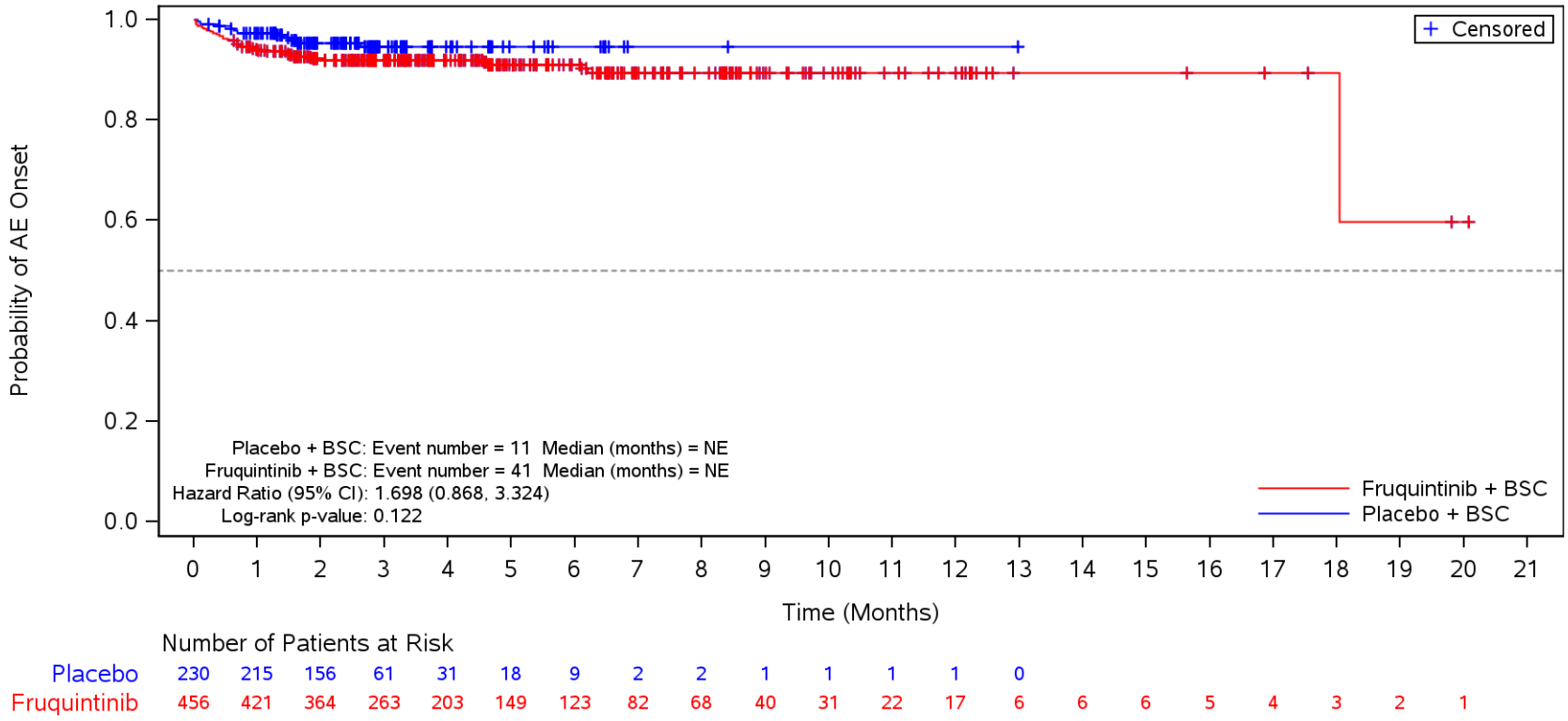
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Nervous system disorders**



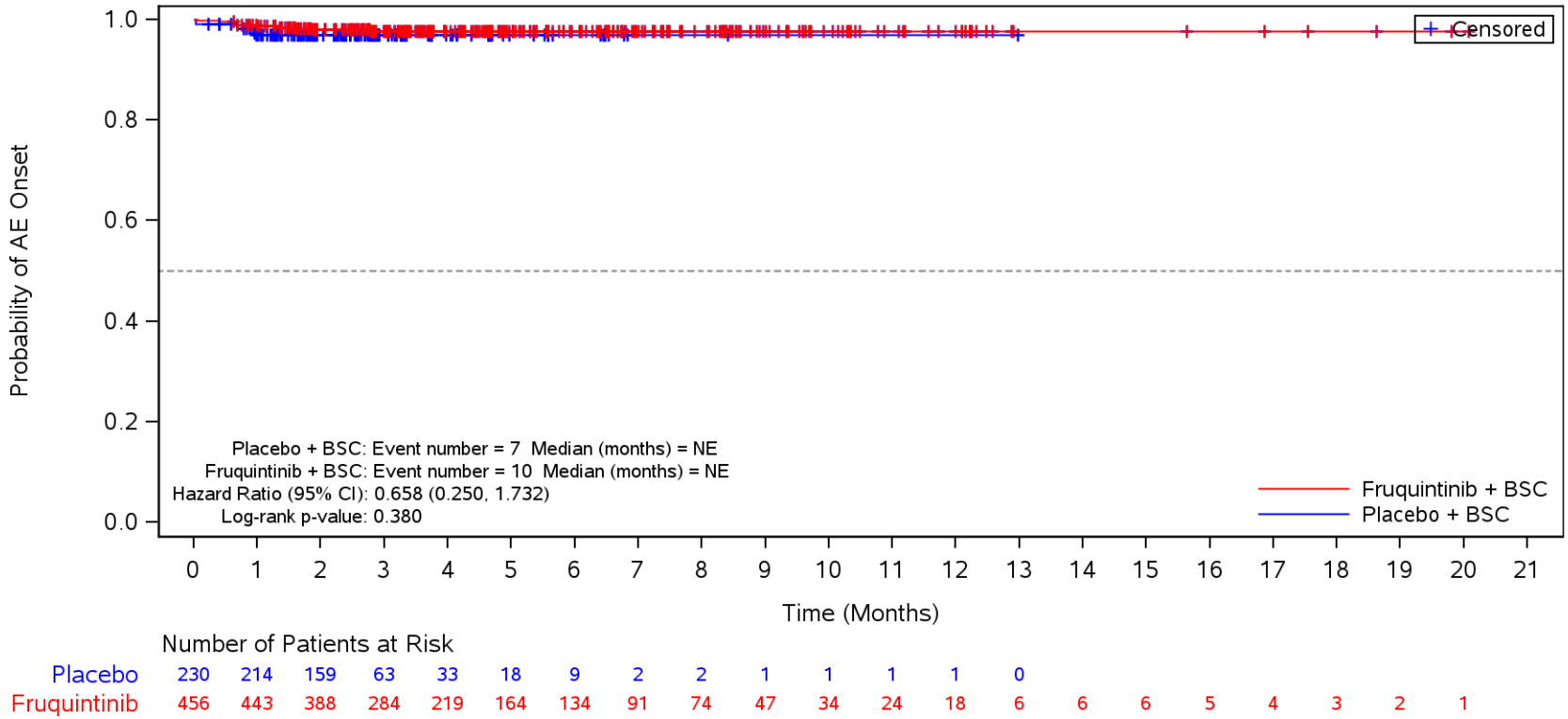
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**



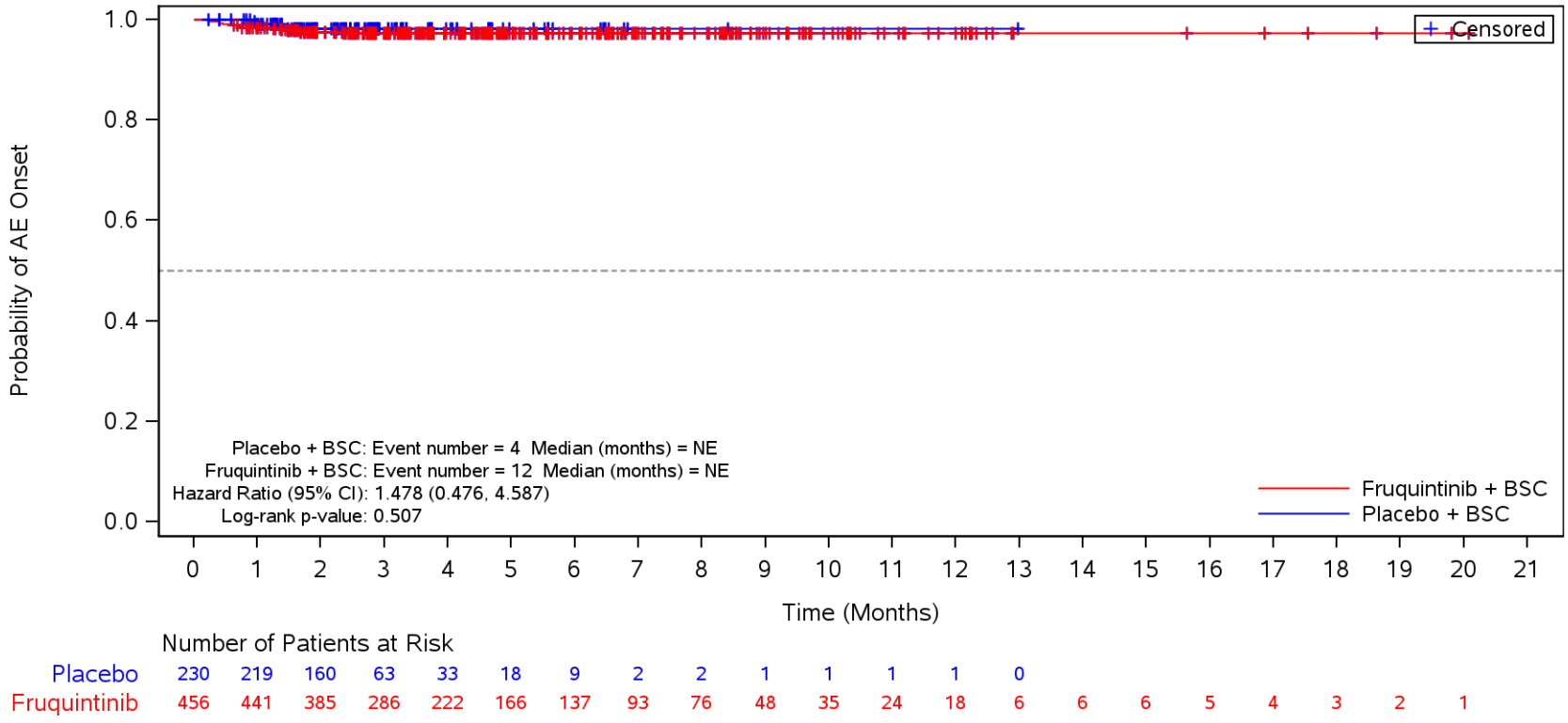
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**



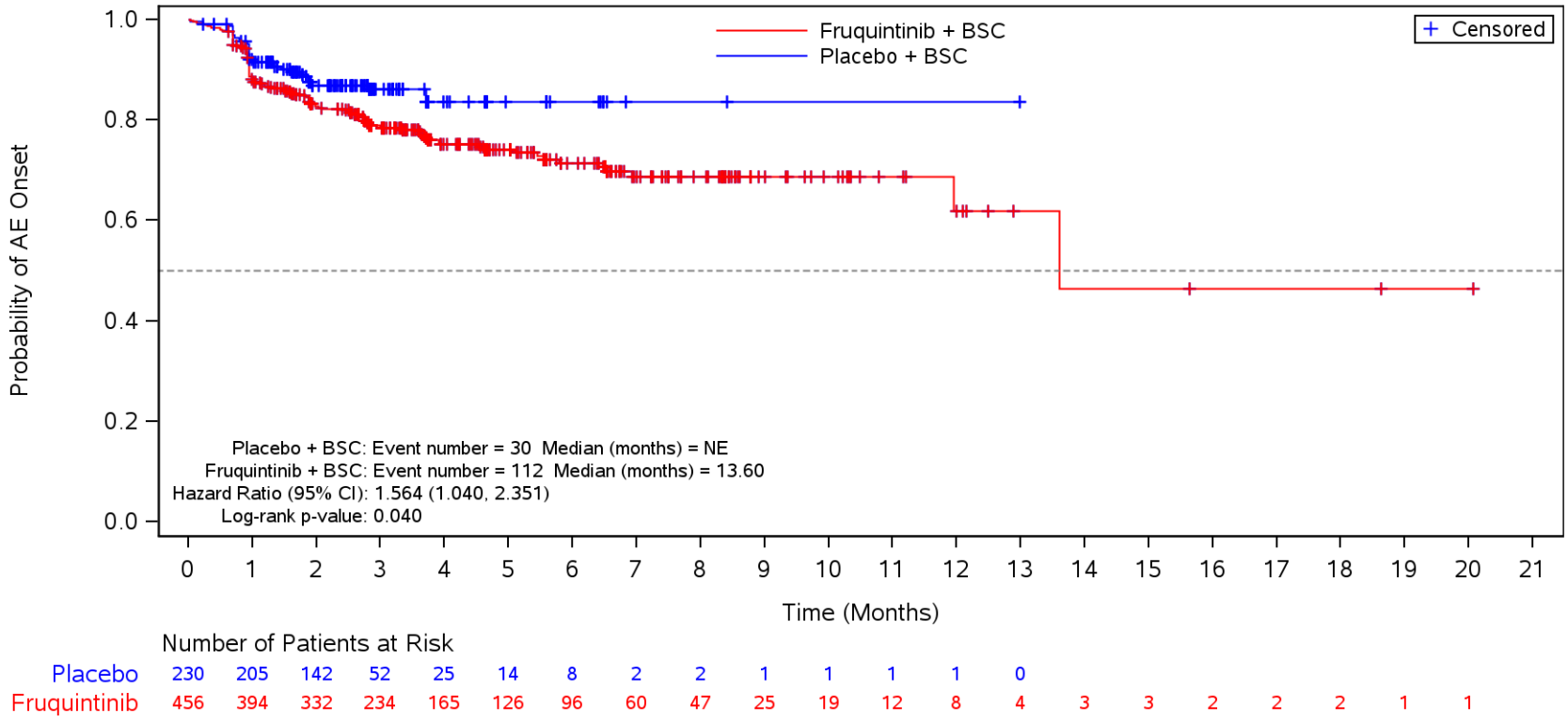
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**



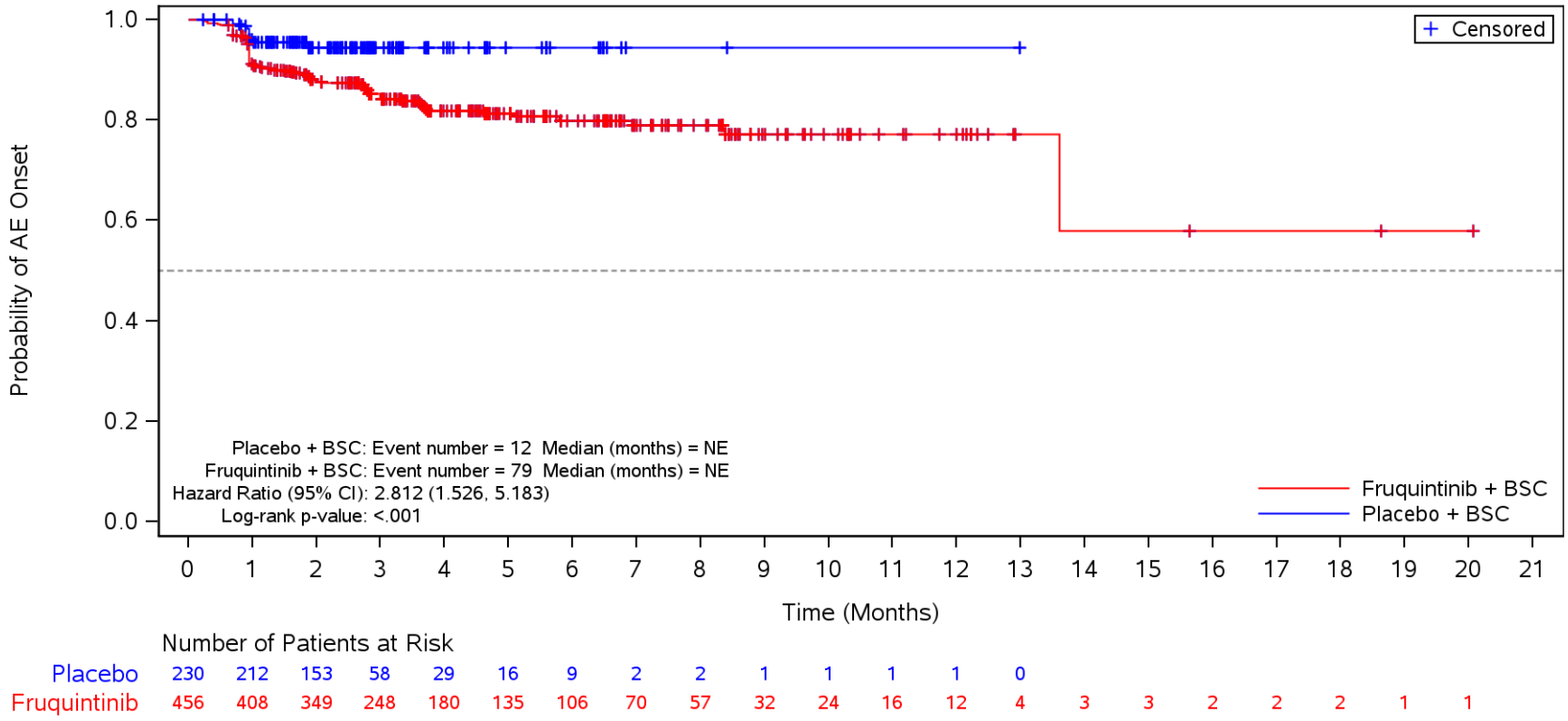
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Renal and urinary disorders**



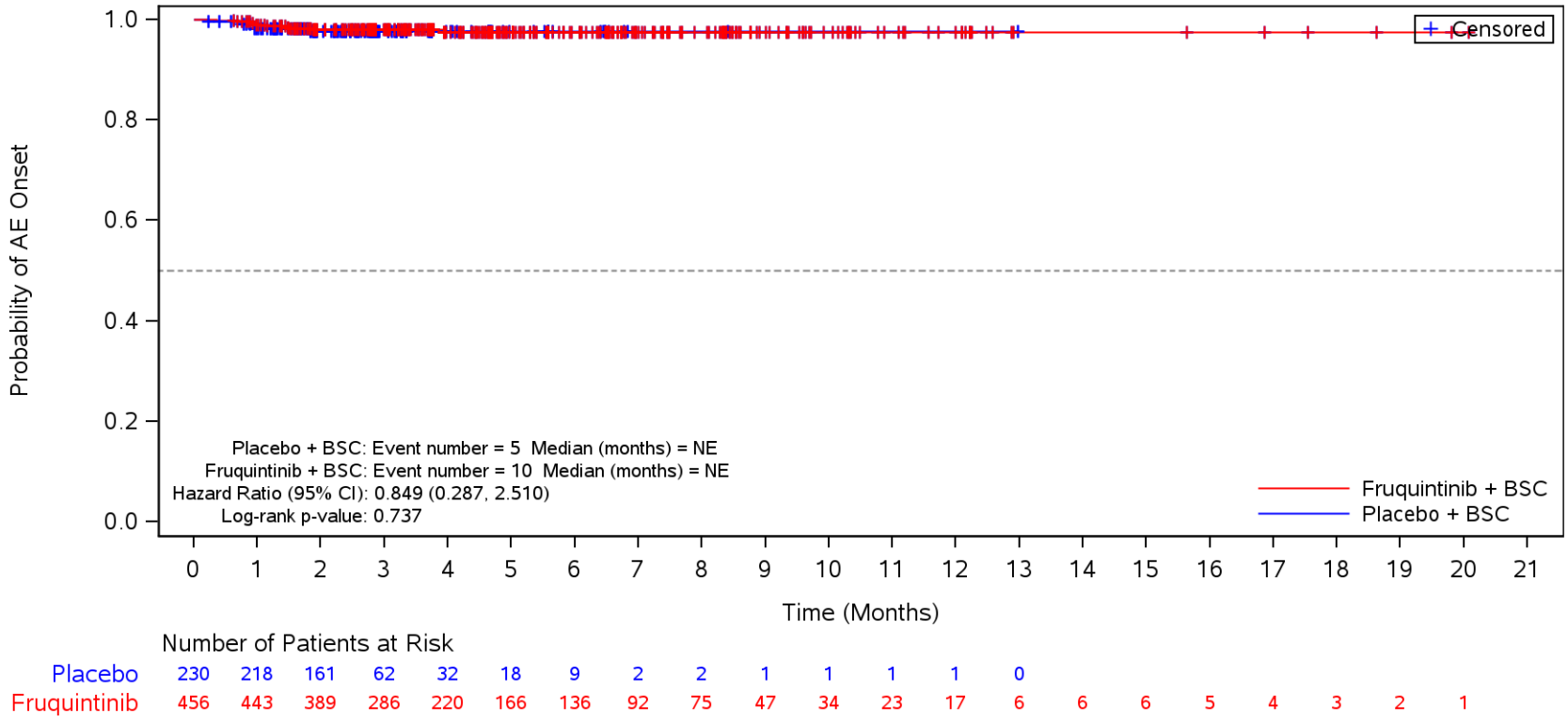
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**



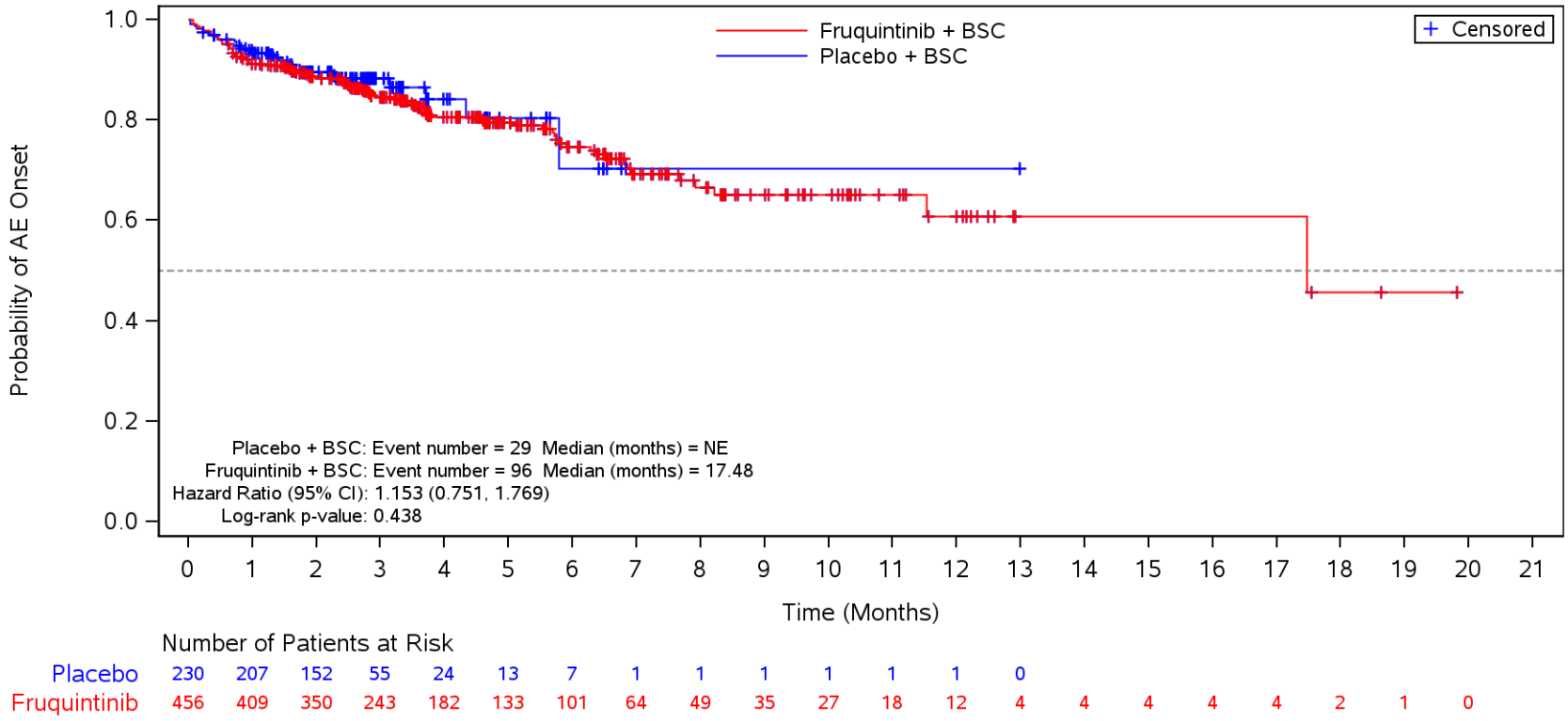
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**



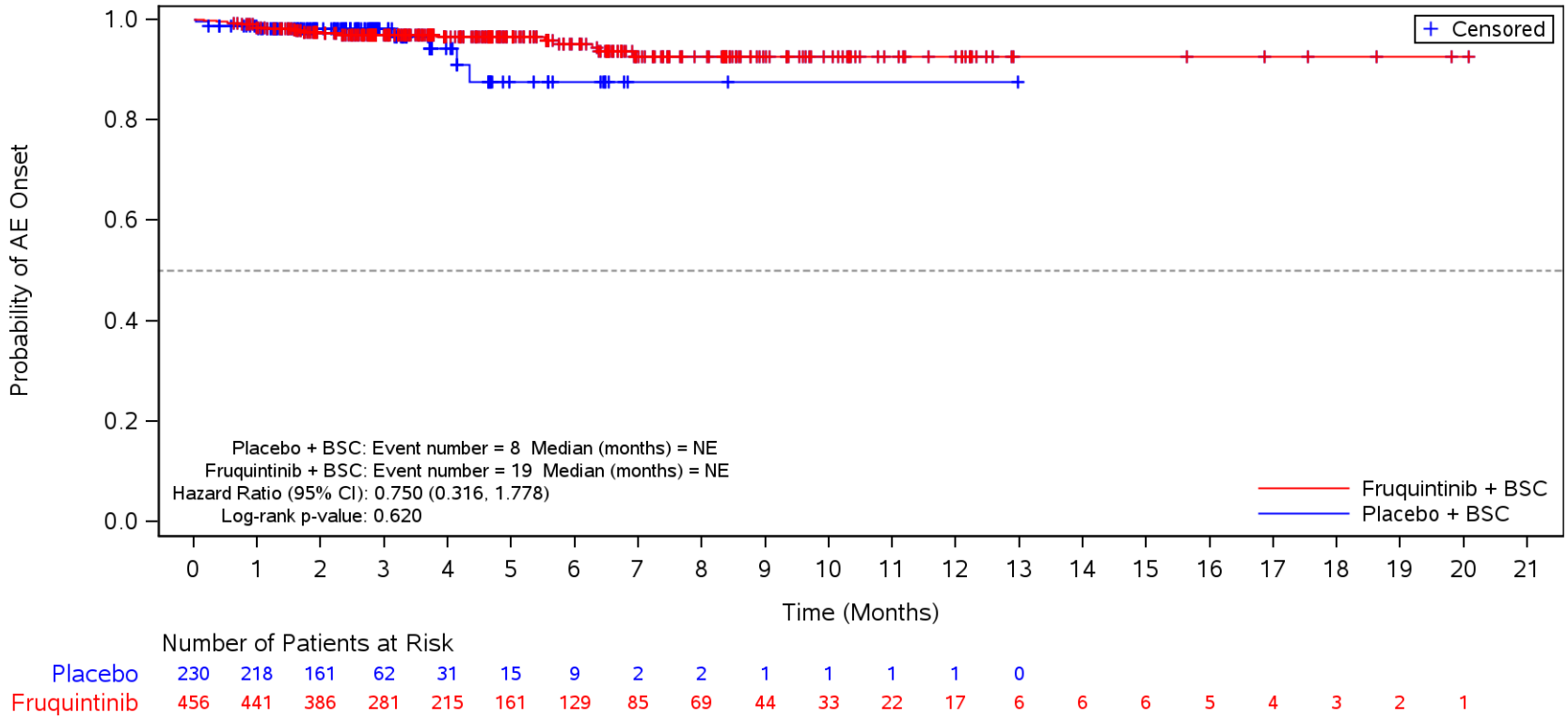
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Infections and infestations**



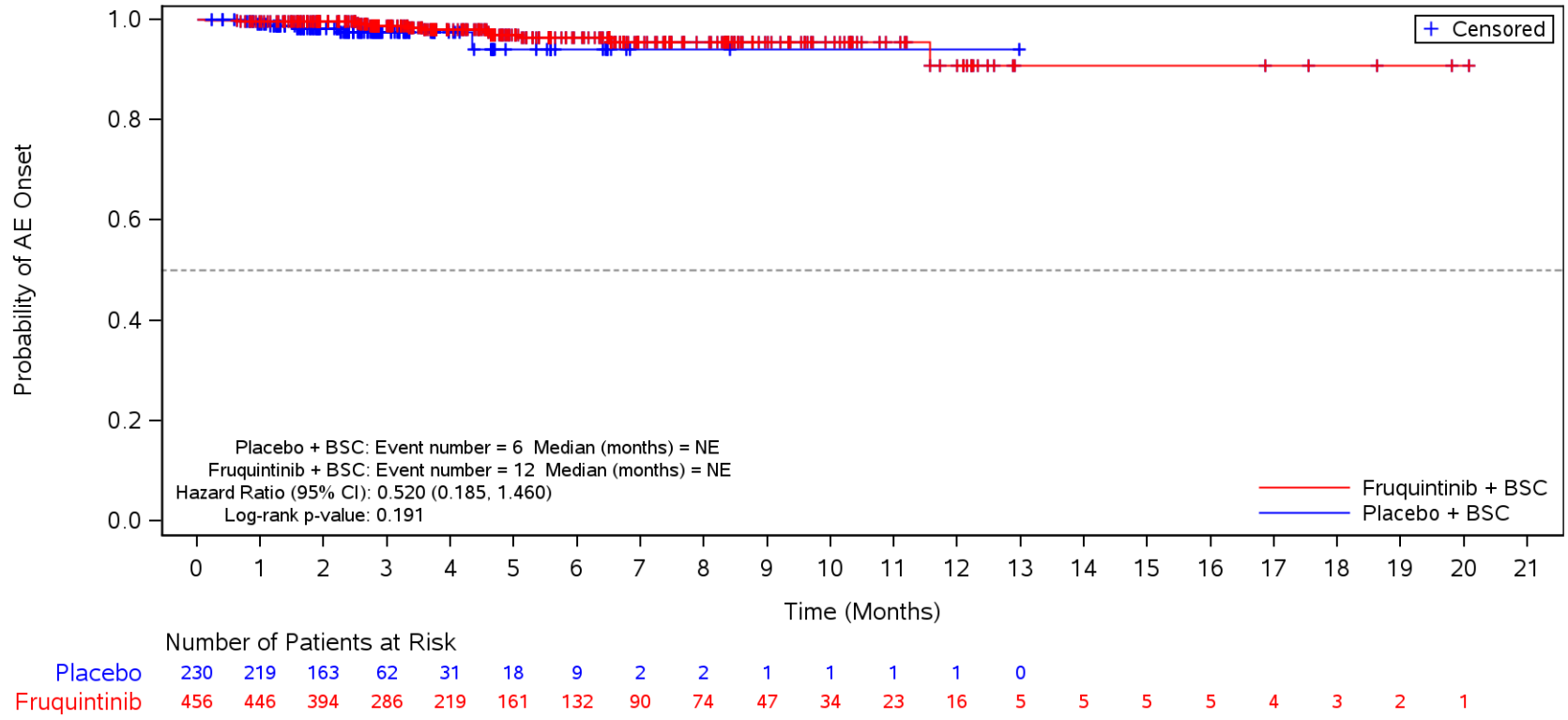
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**



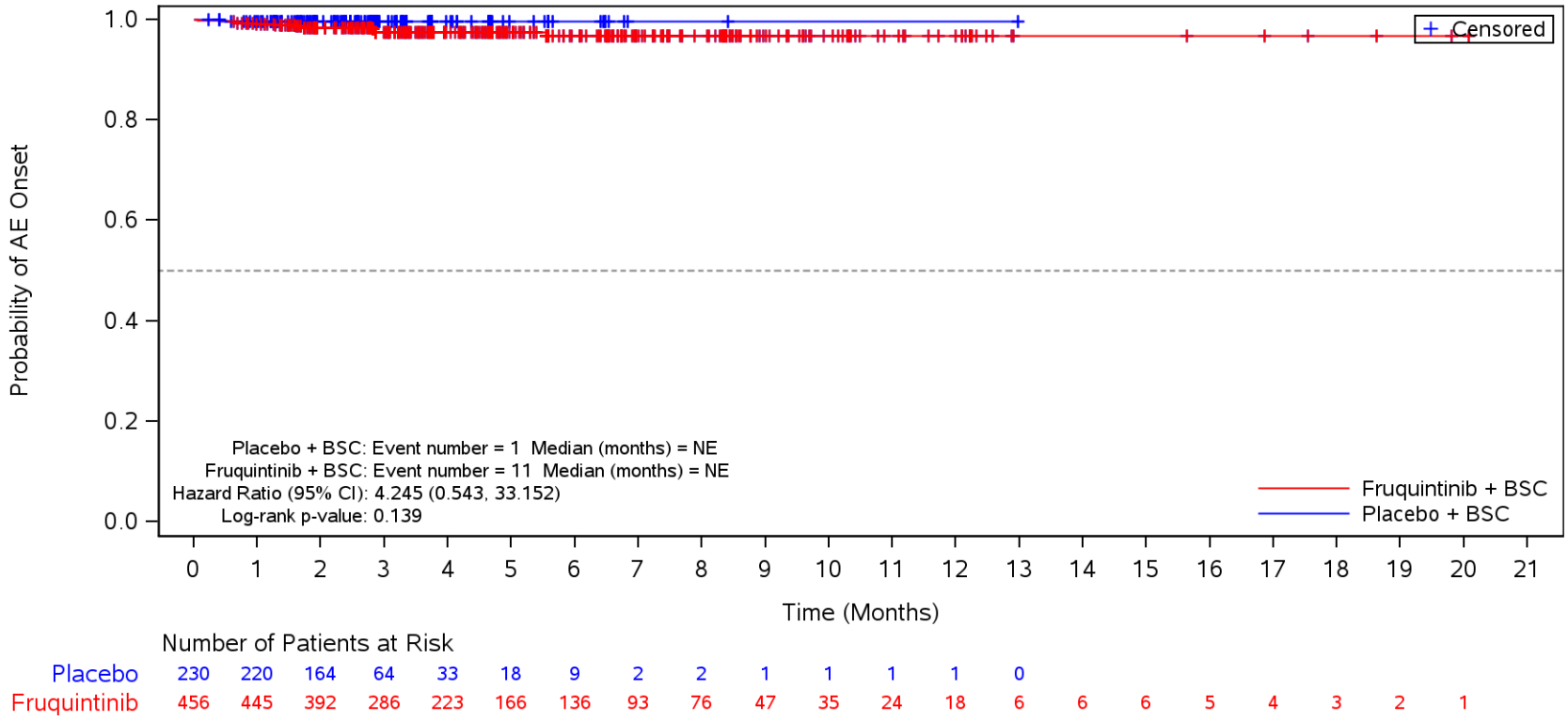
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**



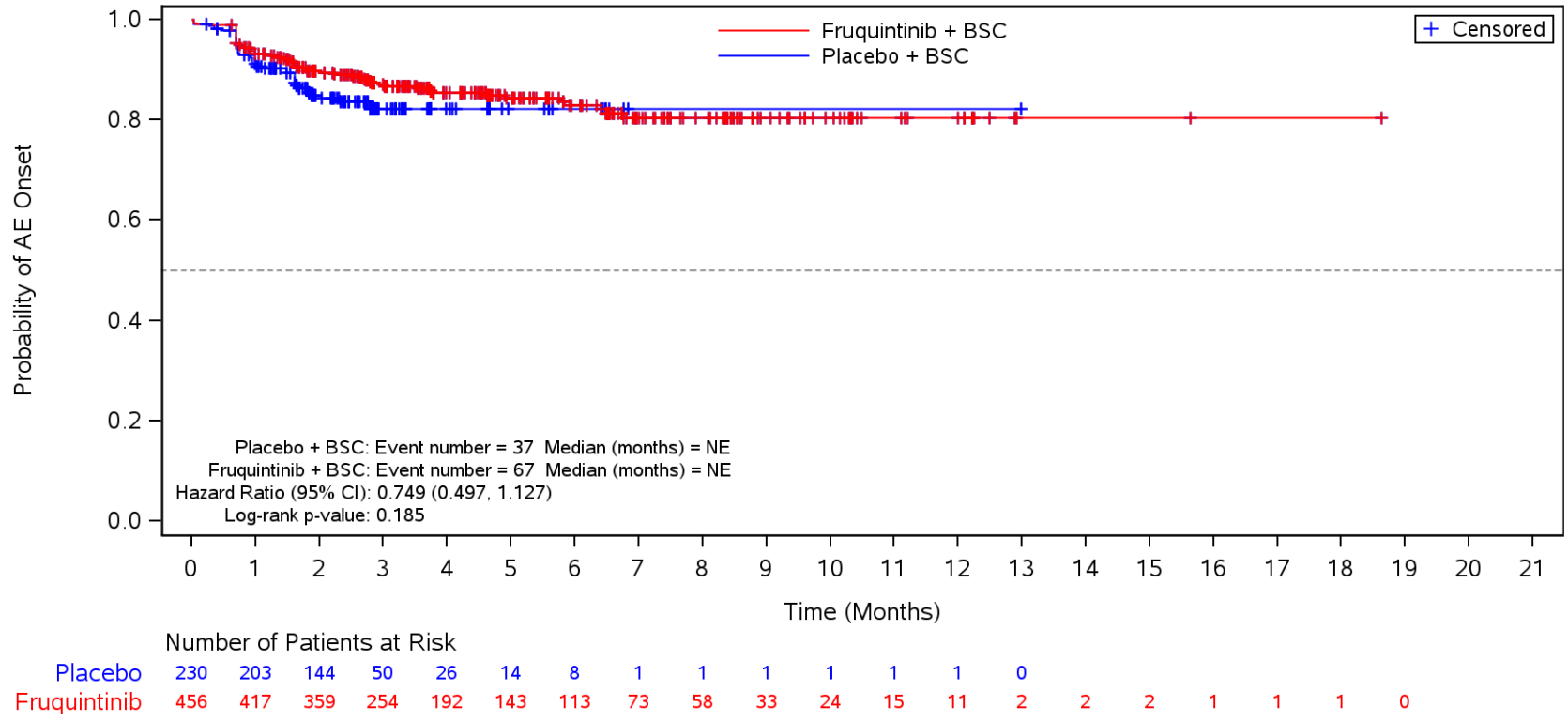
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**



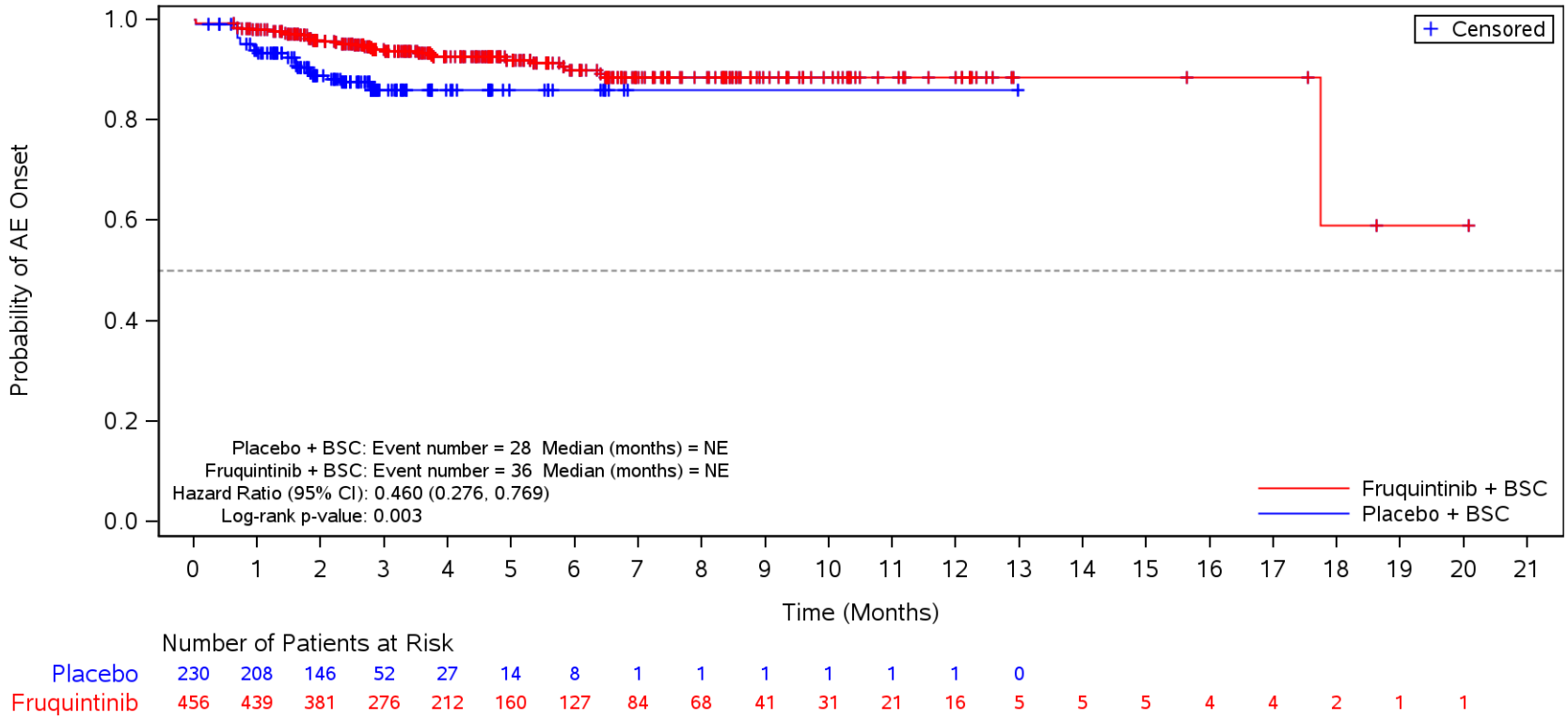
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**



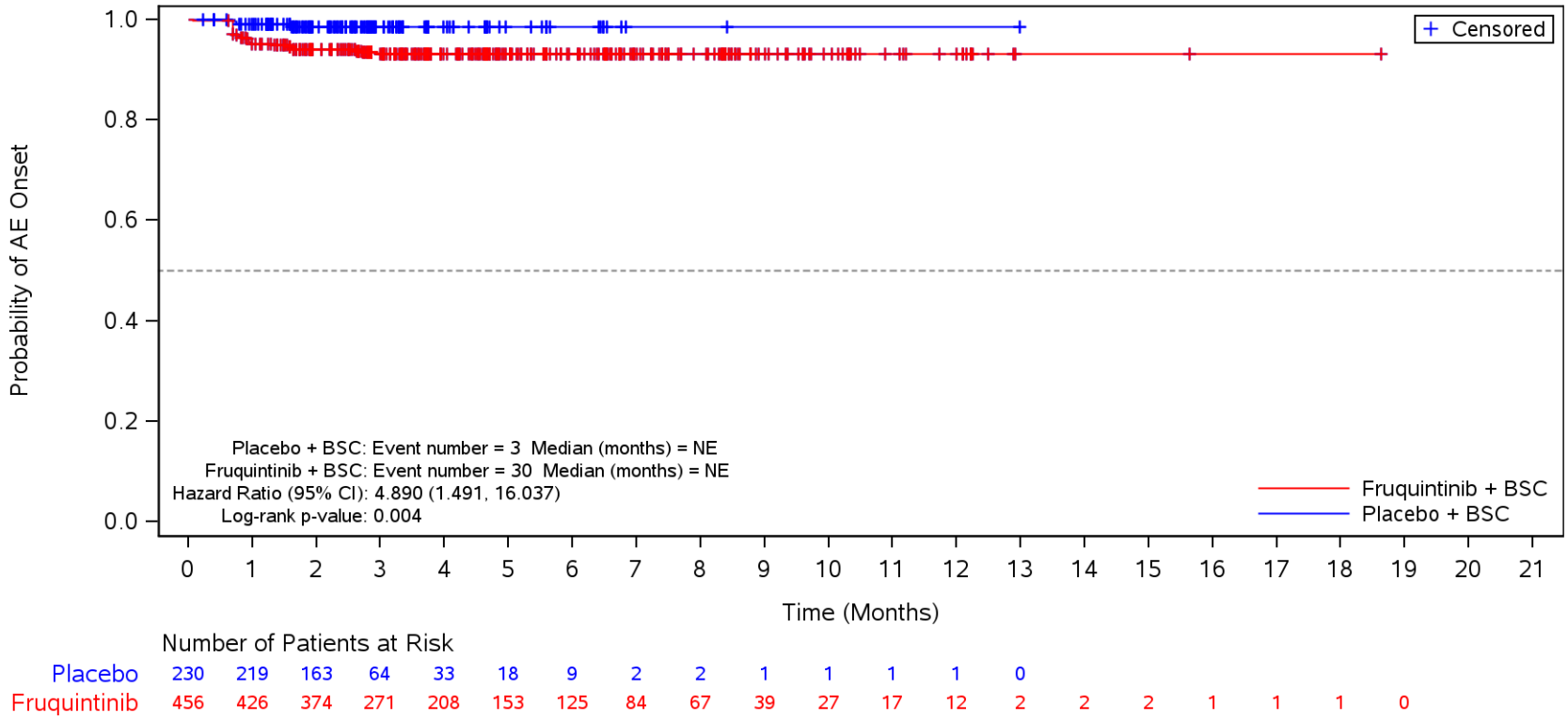
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**



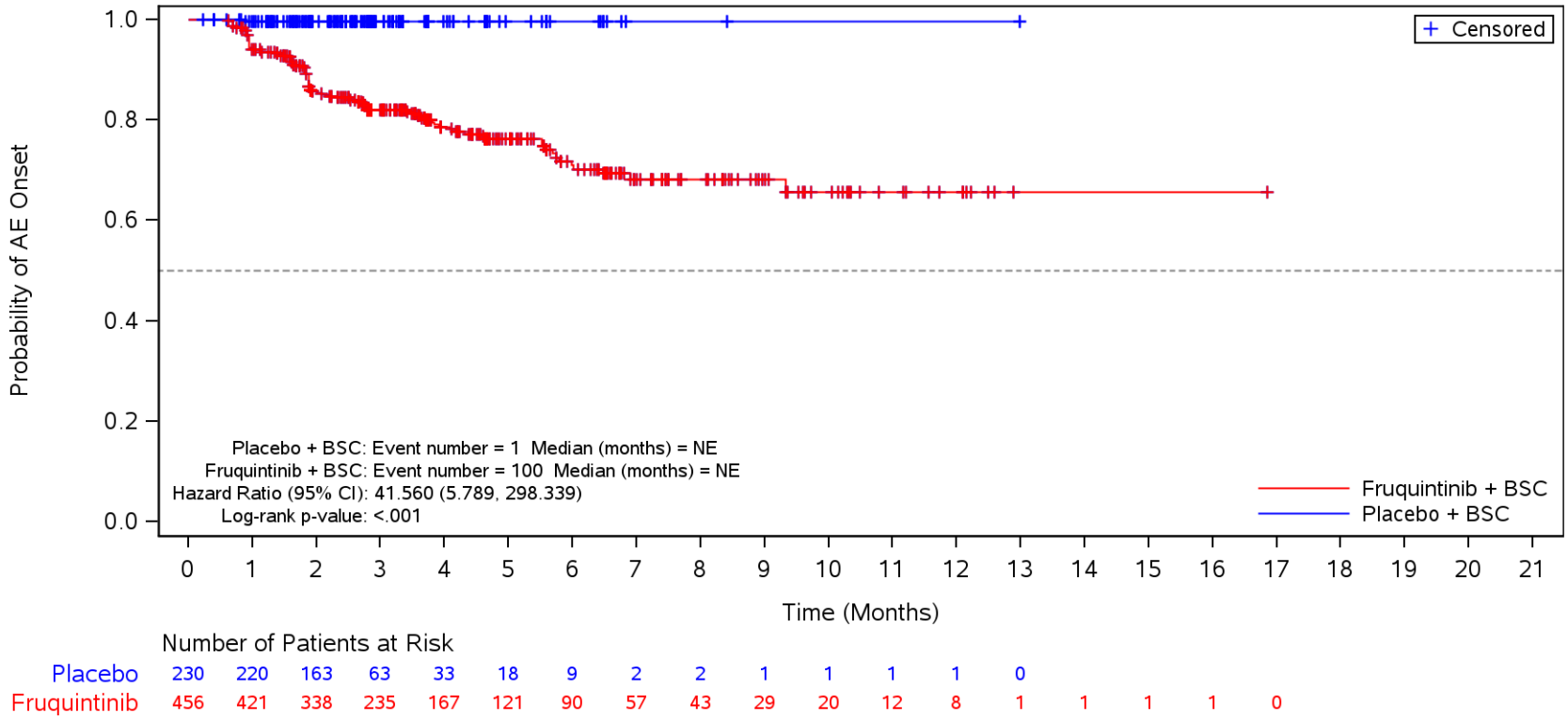
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**



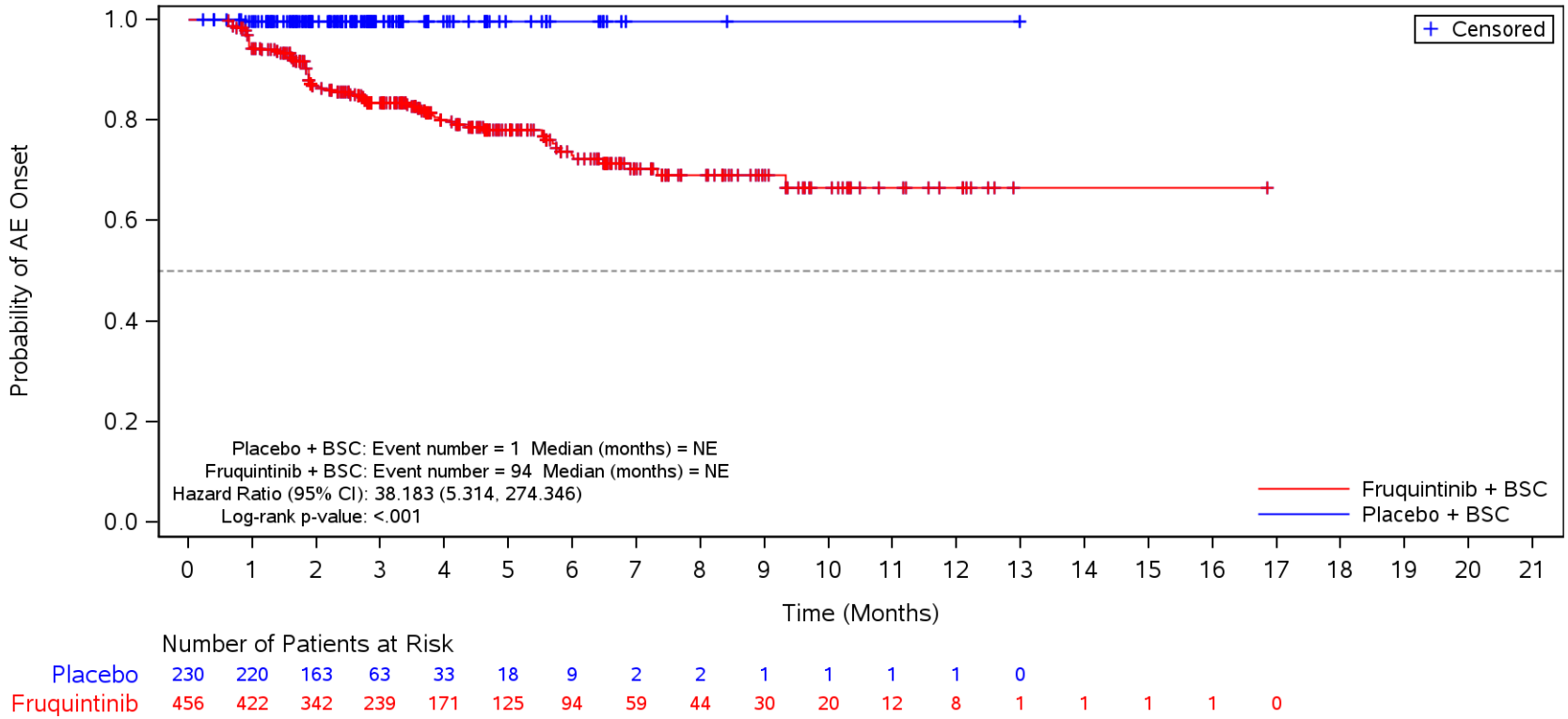
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Endocrine disorders**



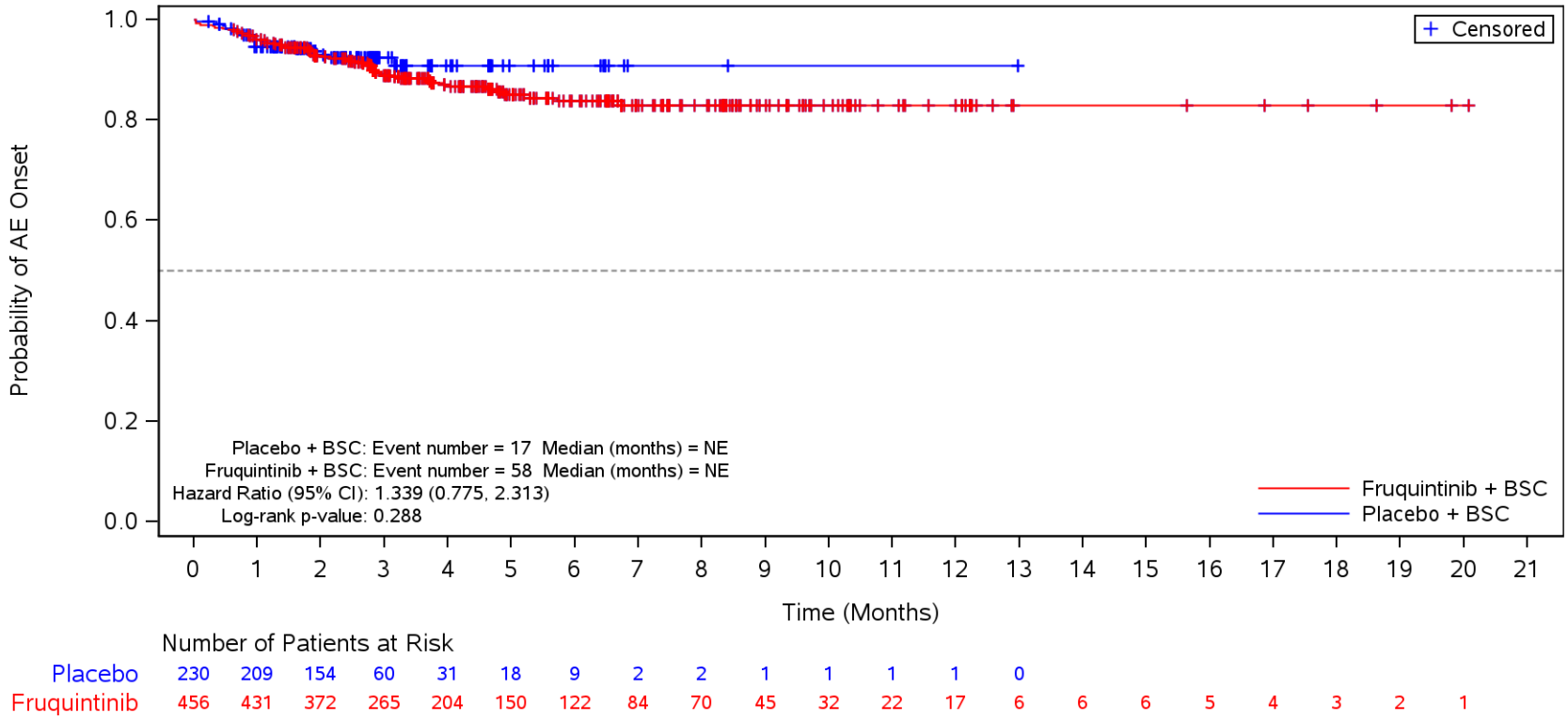
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**



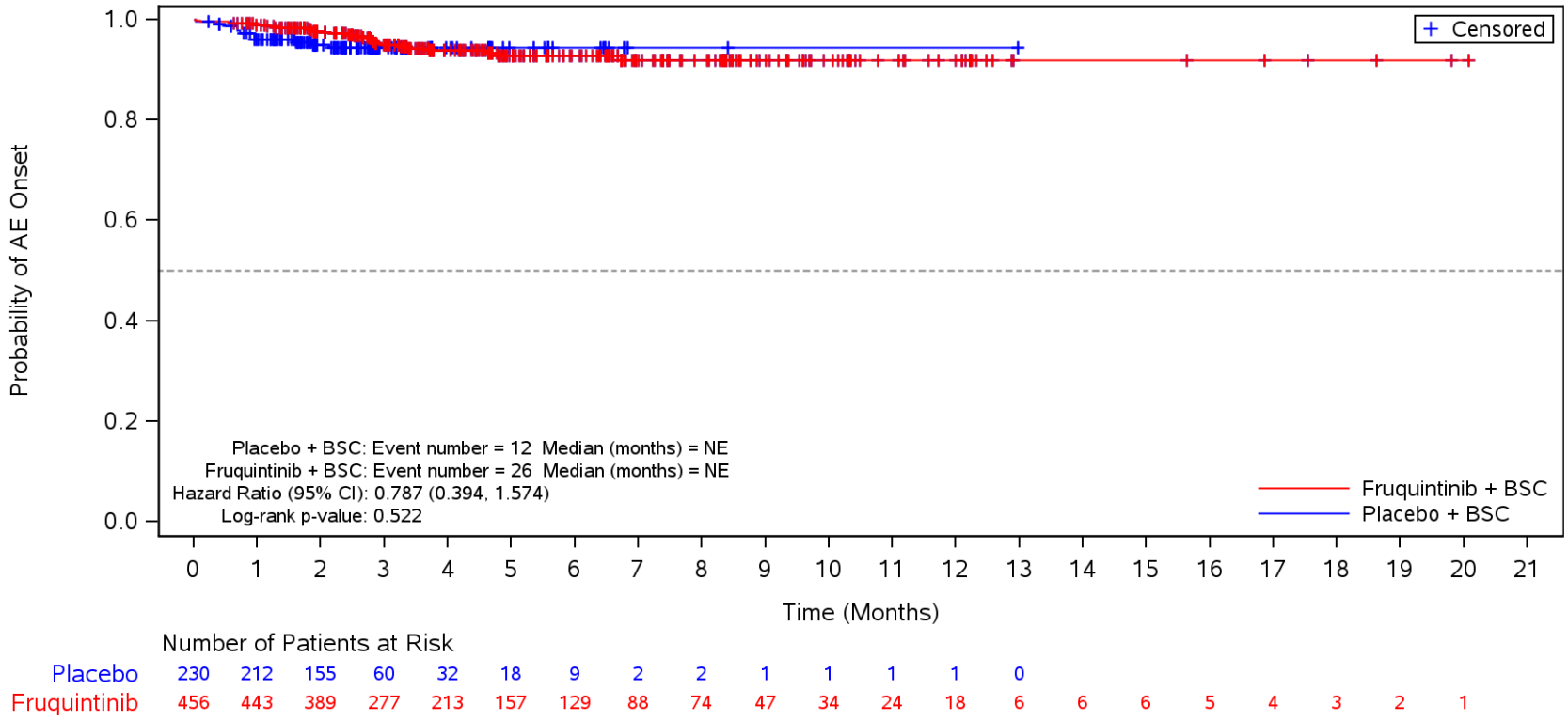
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Psychiatric disorders**



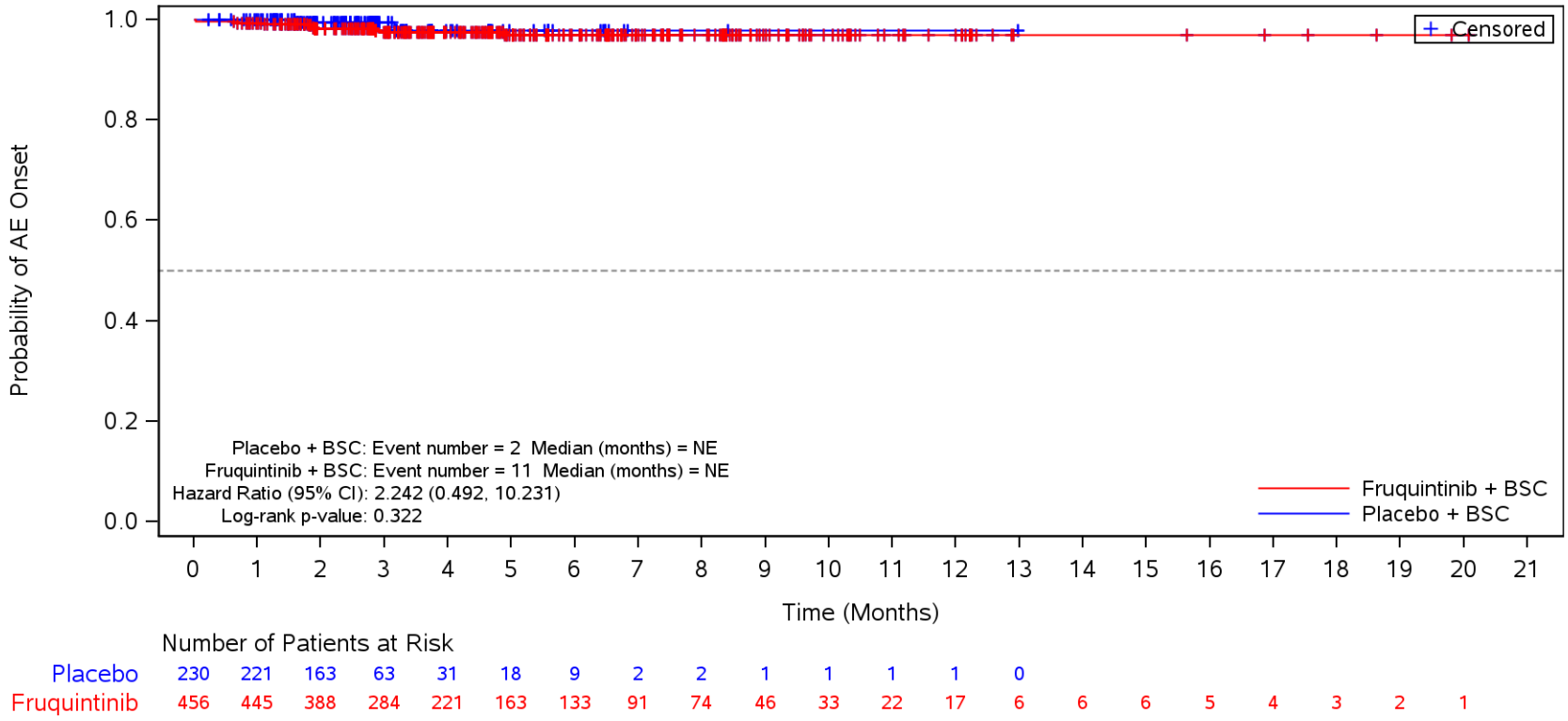
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**



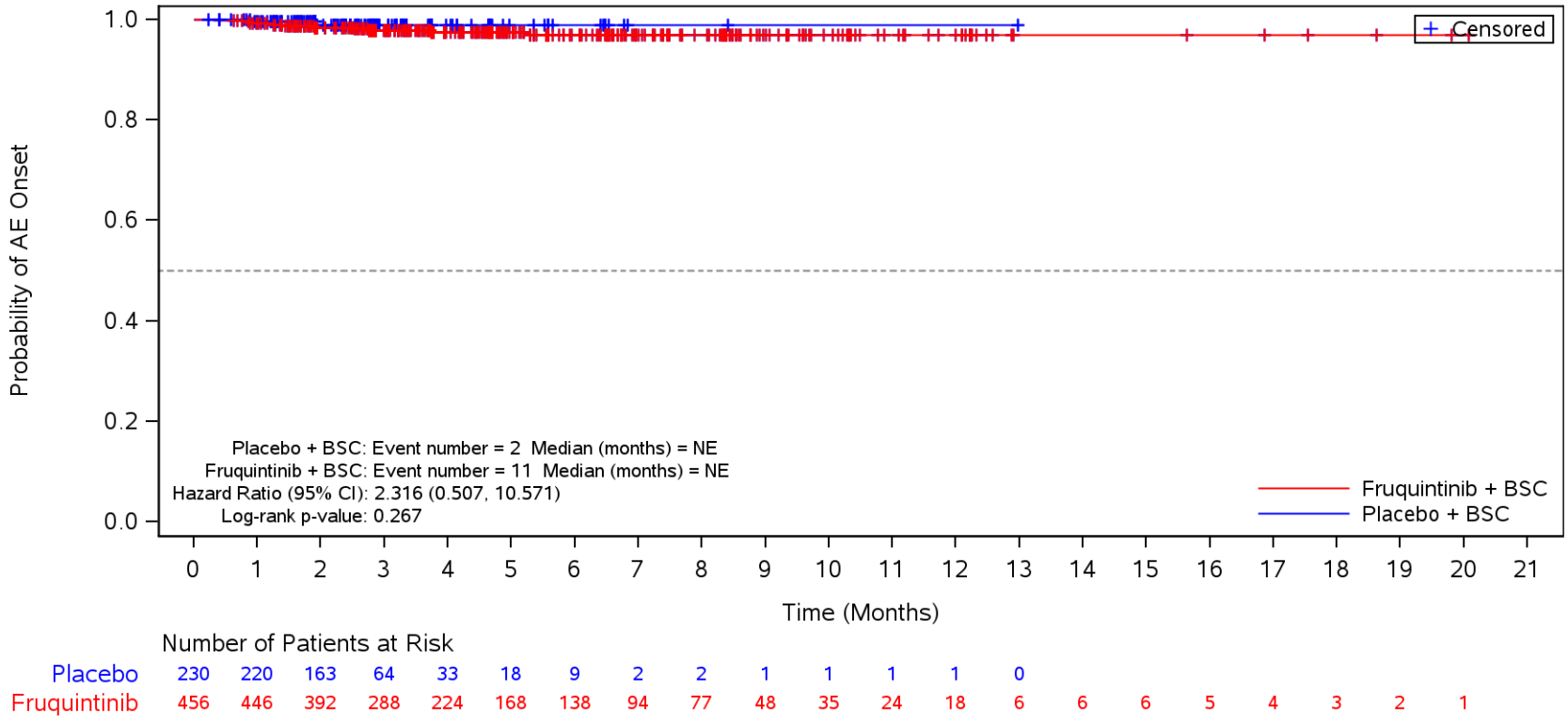
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**



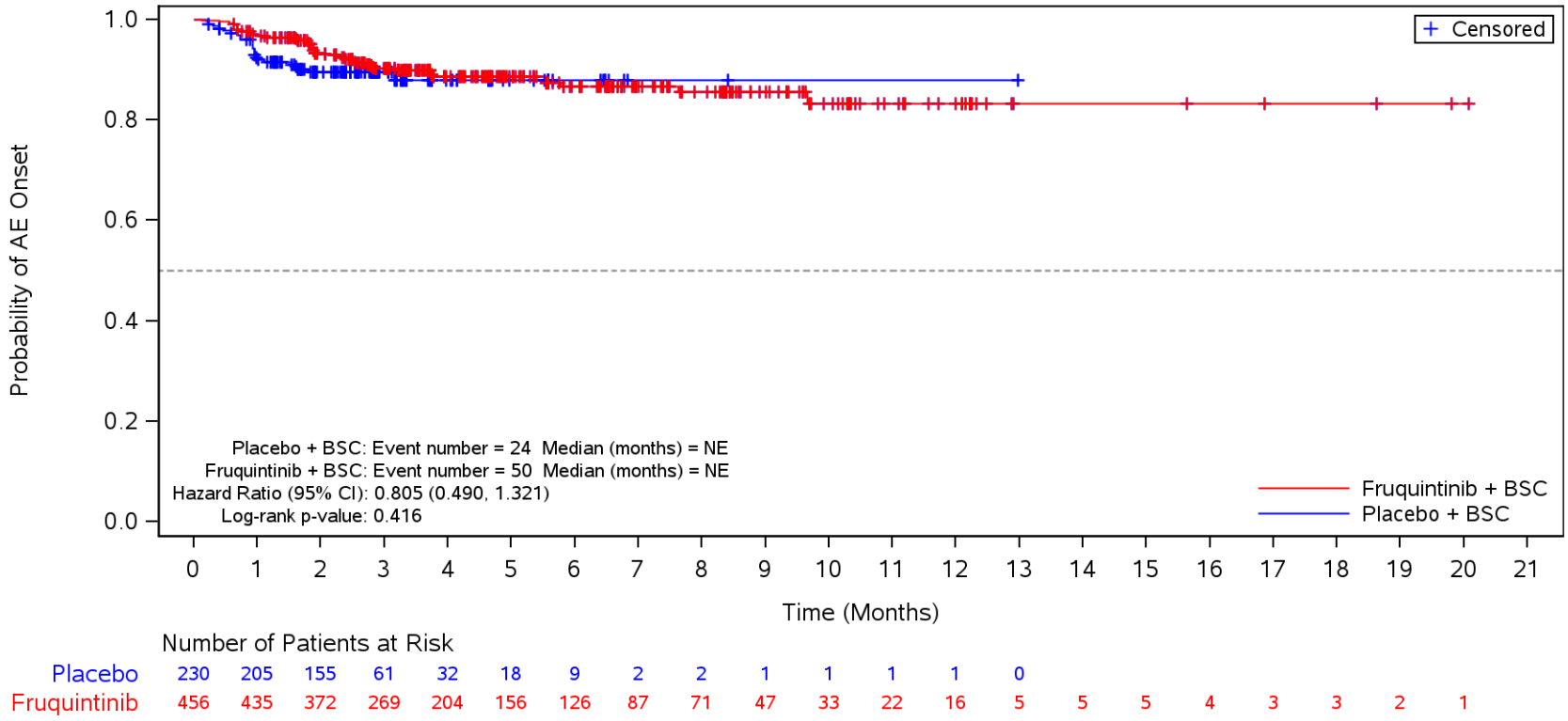
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**



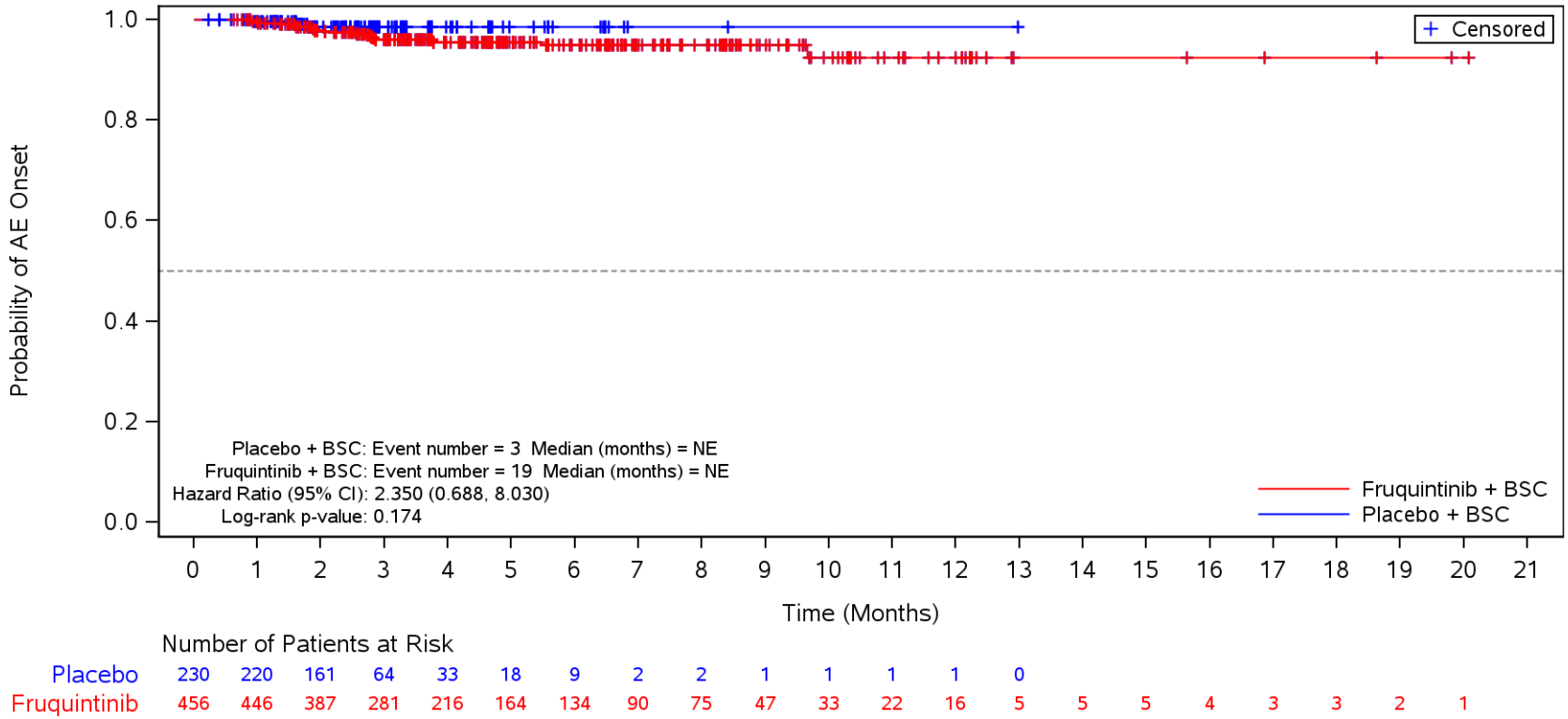
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**



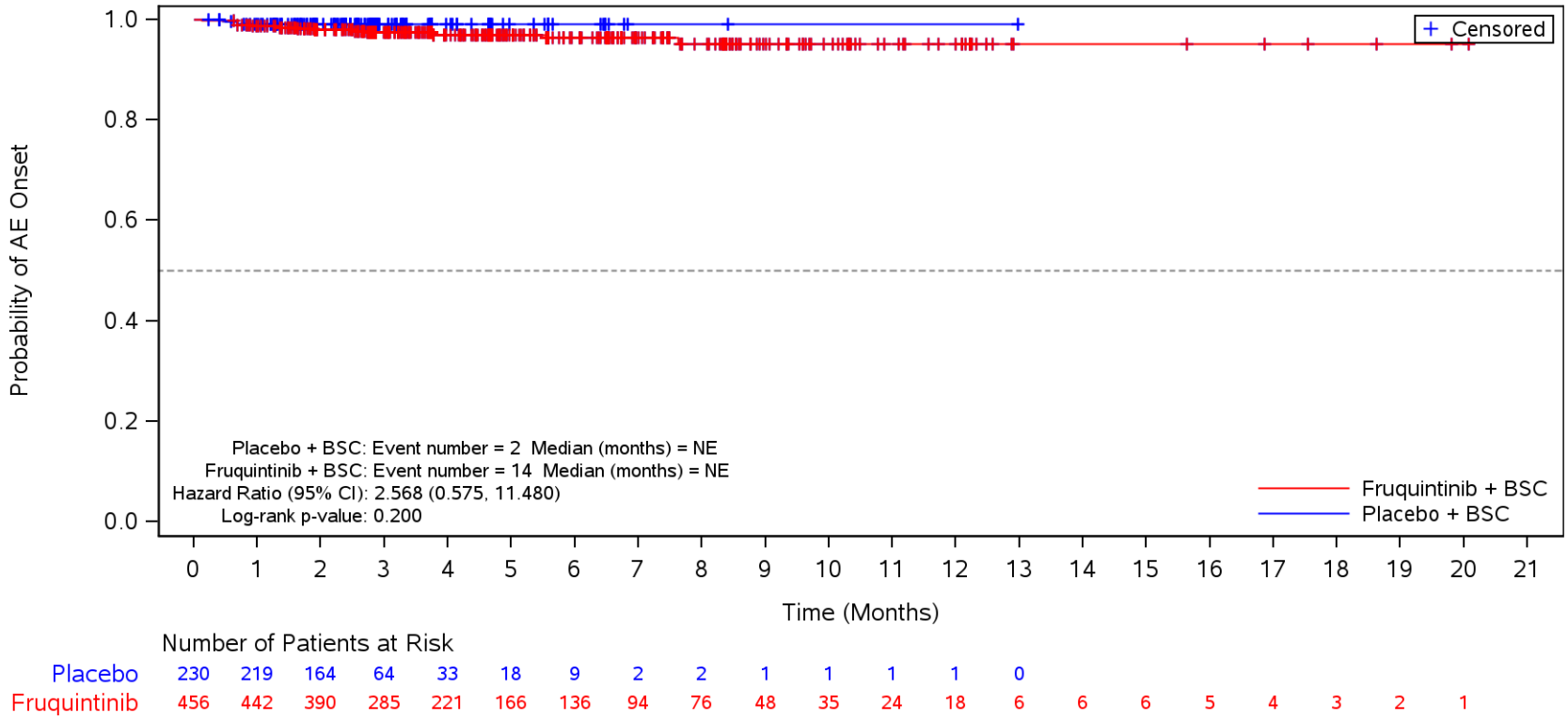
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3A
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hypertransaminasaemia**



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
<65 years

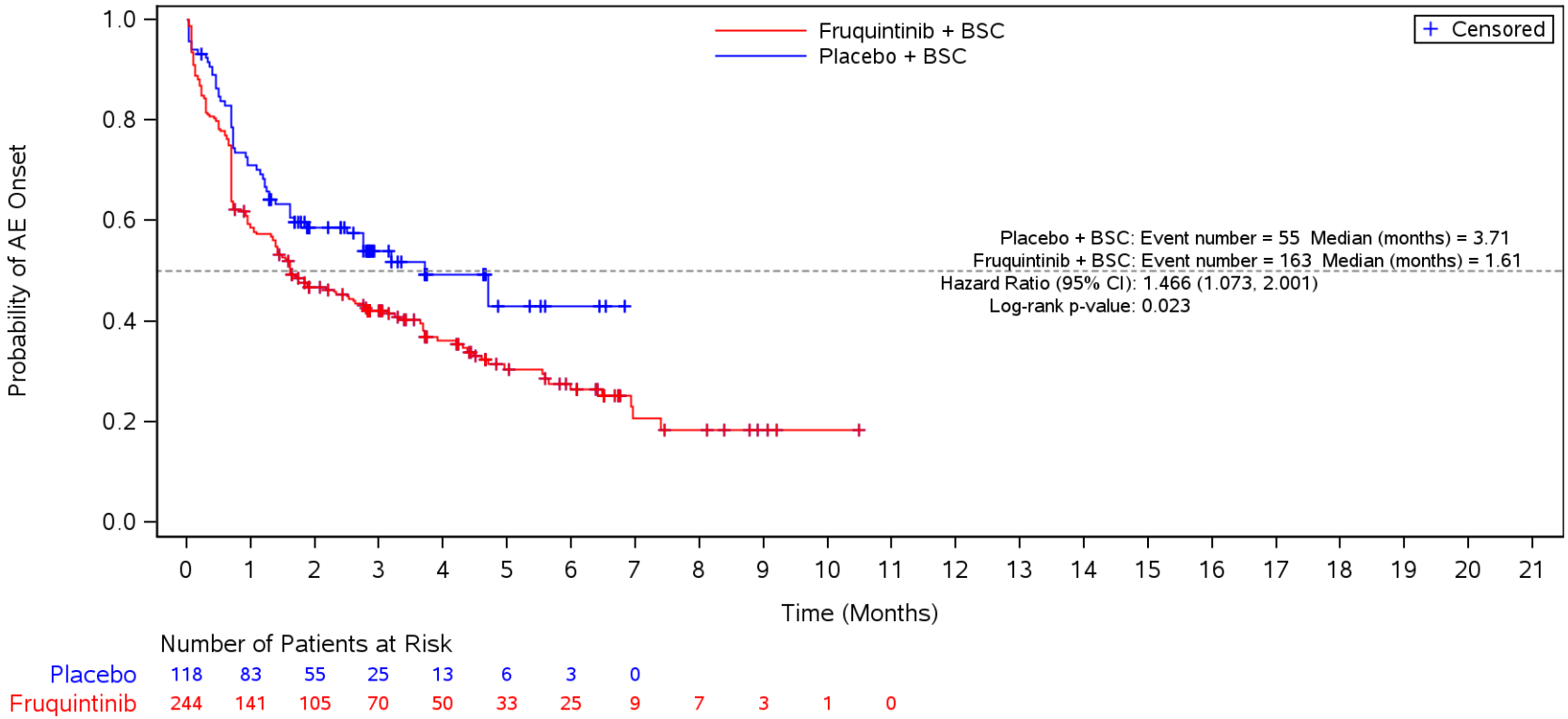


Number of Patients at Risk

Placebo	230	219	164	64	33	18	9	2	2	1	1	1	1	0							
Fruquintinib	456	442	390	285	221	166	136	94	76	48	35	24	18	6	6	6	5	4	3	2	1

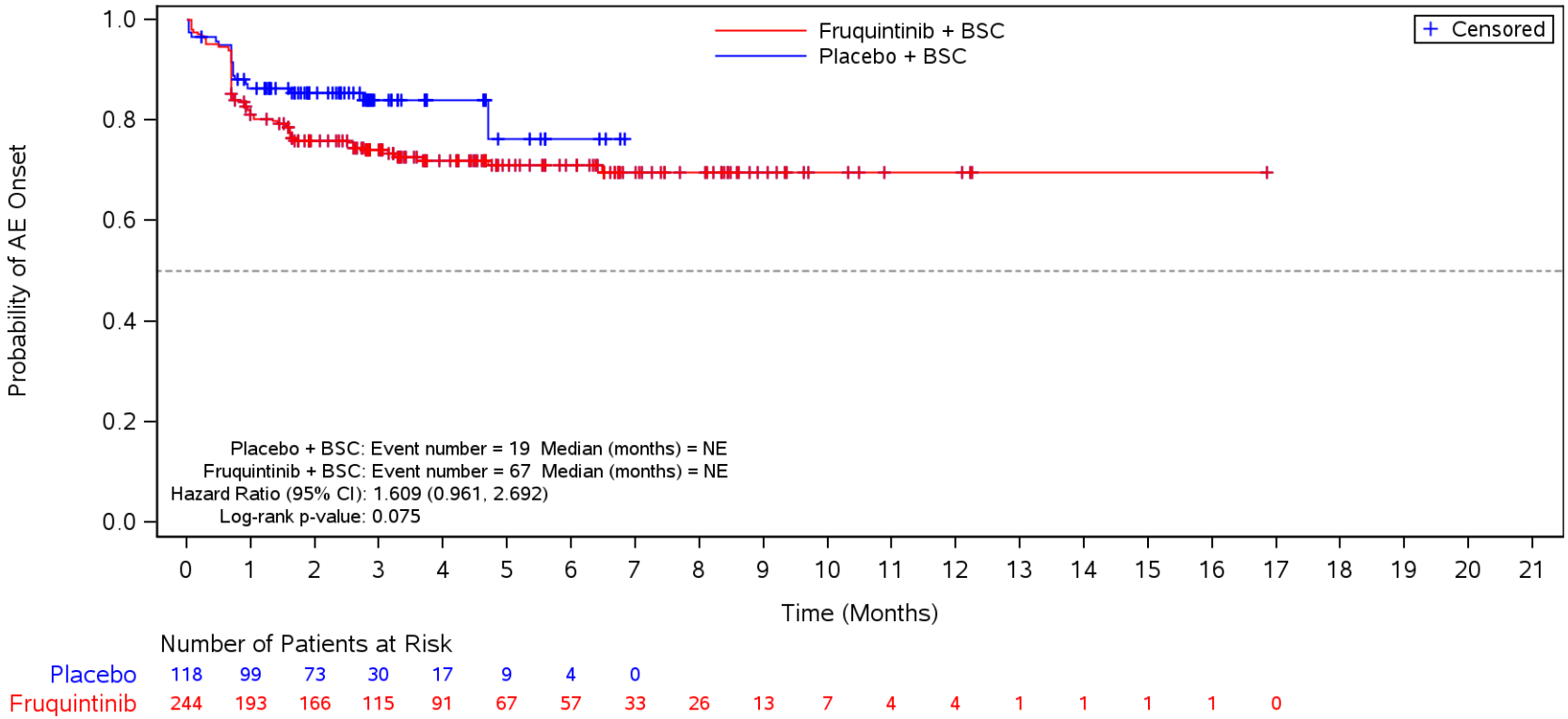
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
<65 years



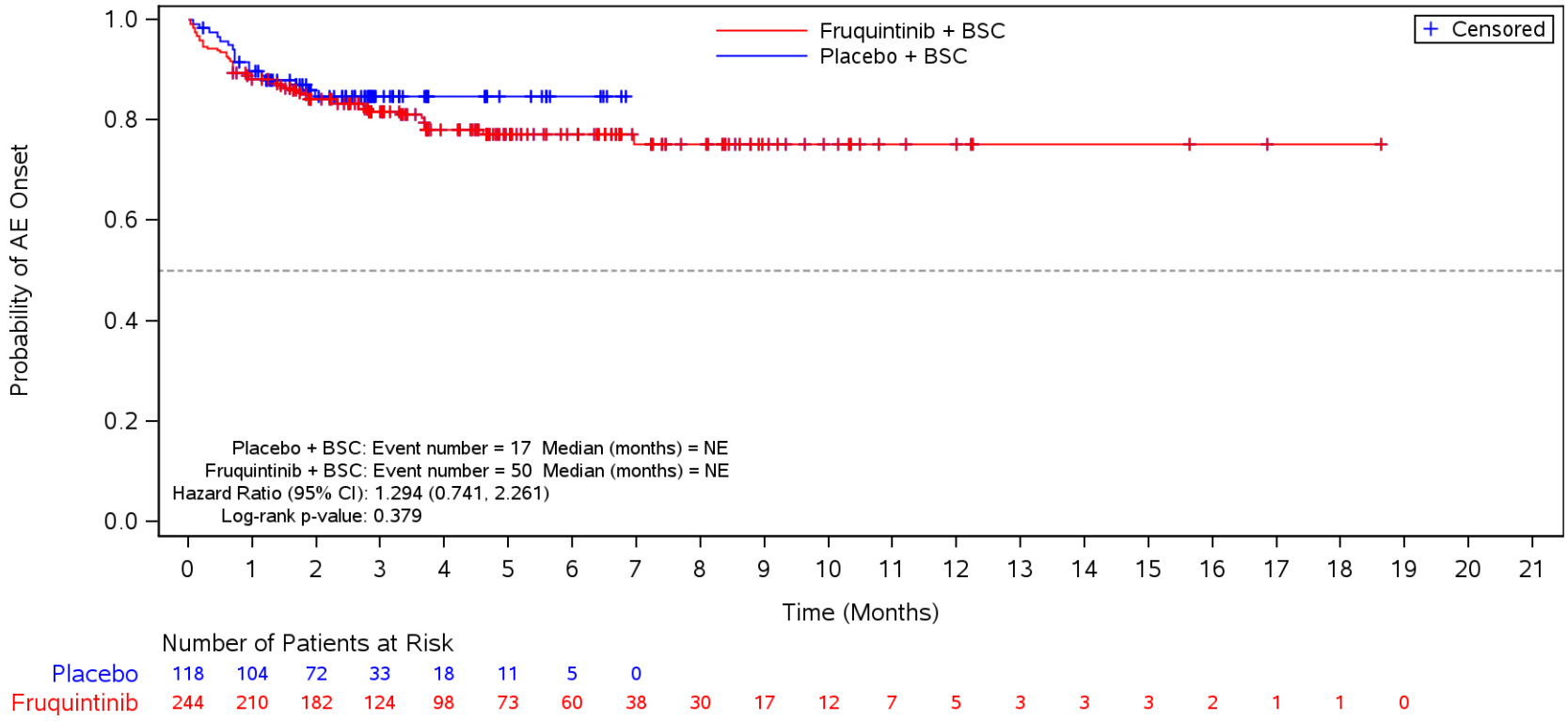
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
<65 years



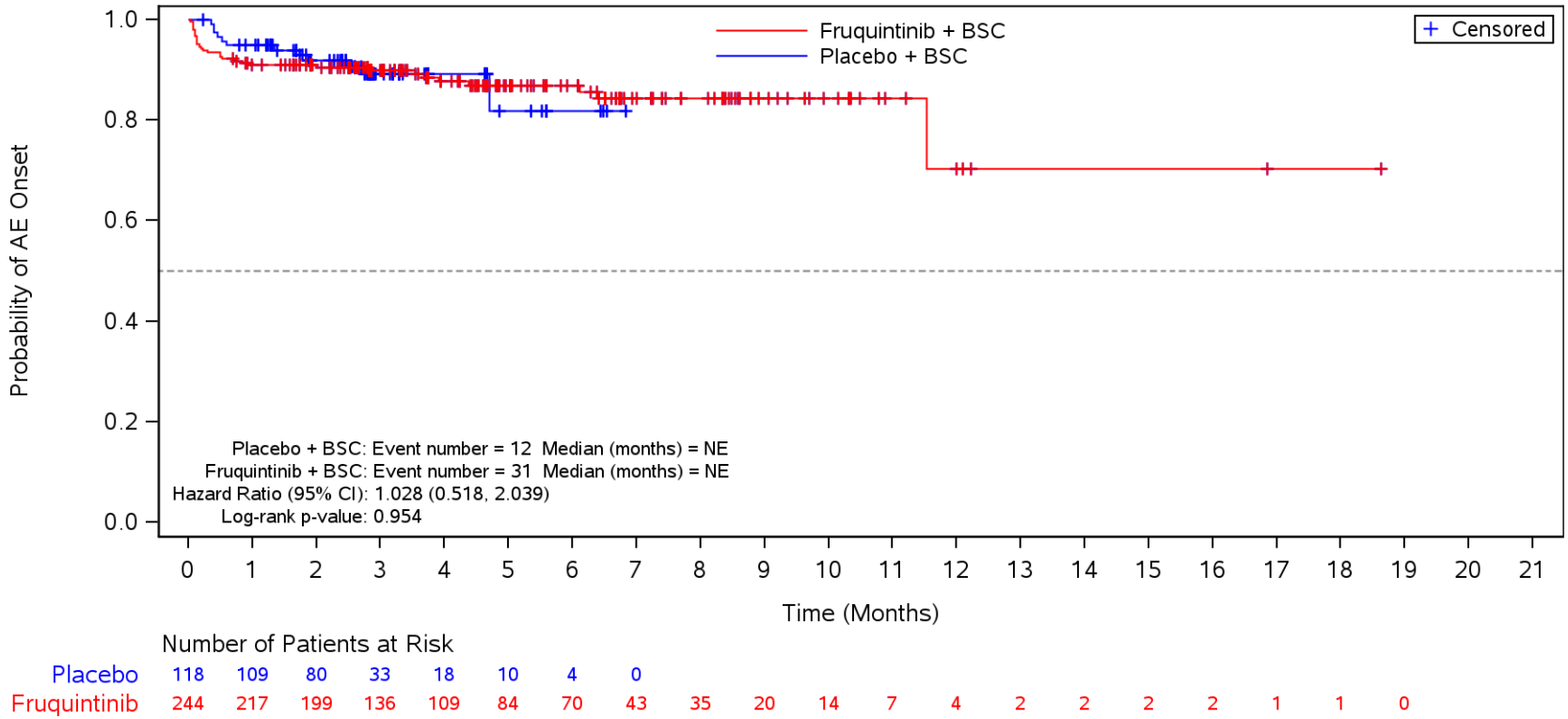
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
<65 years



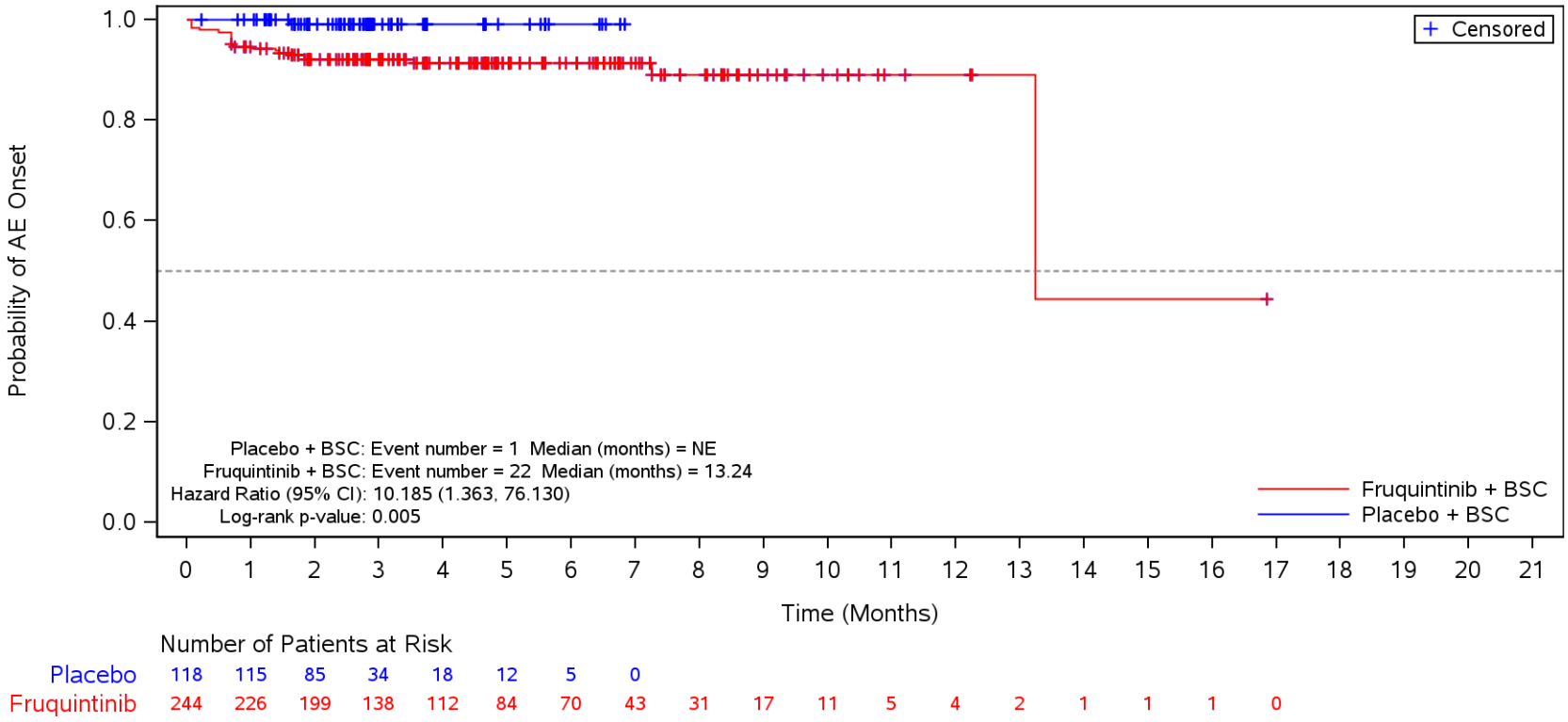
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
<65 years



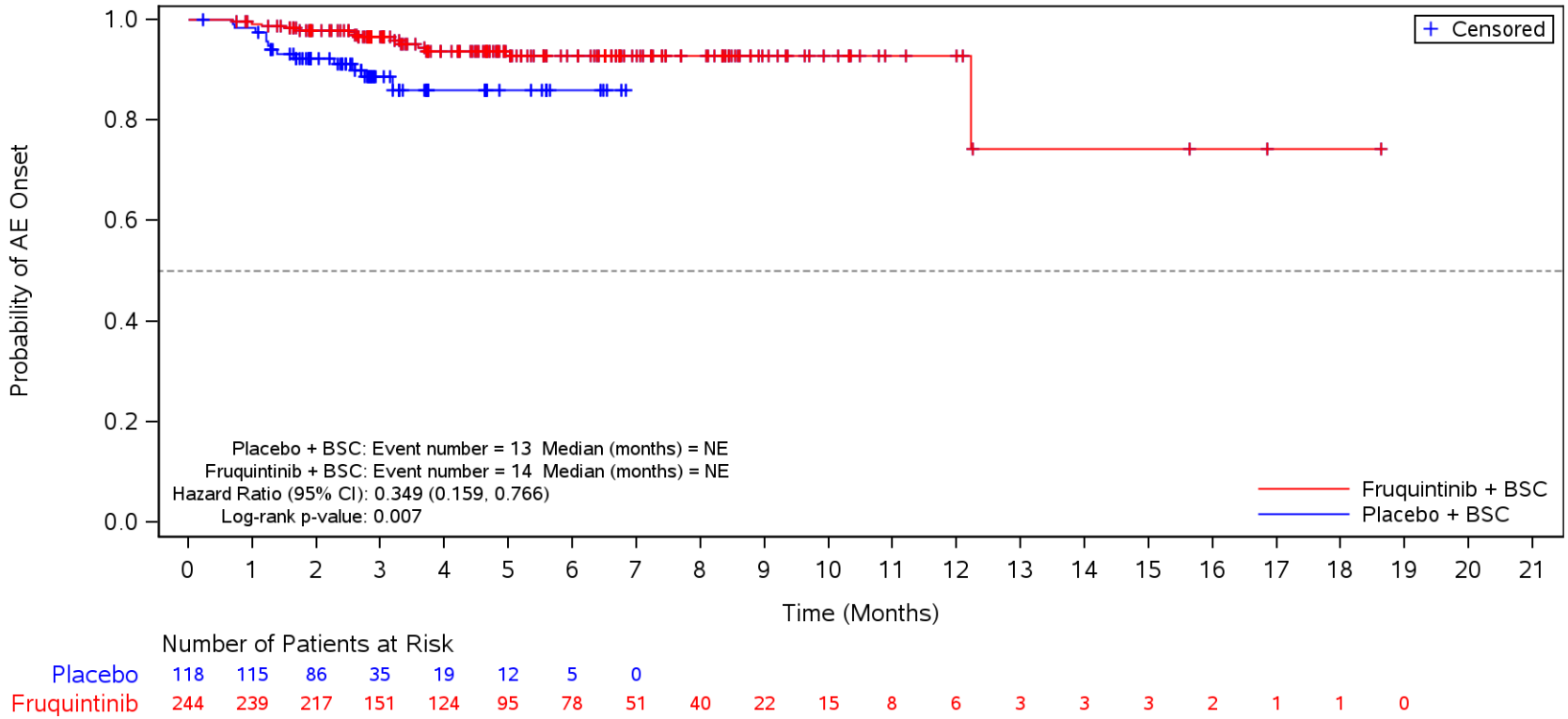
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
<65 years



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
<65 years

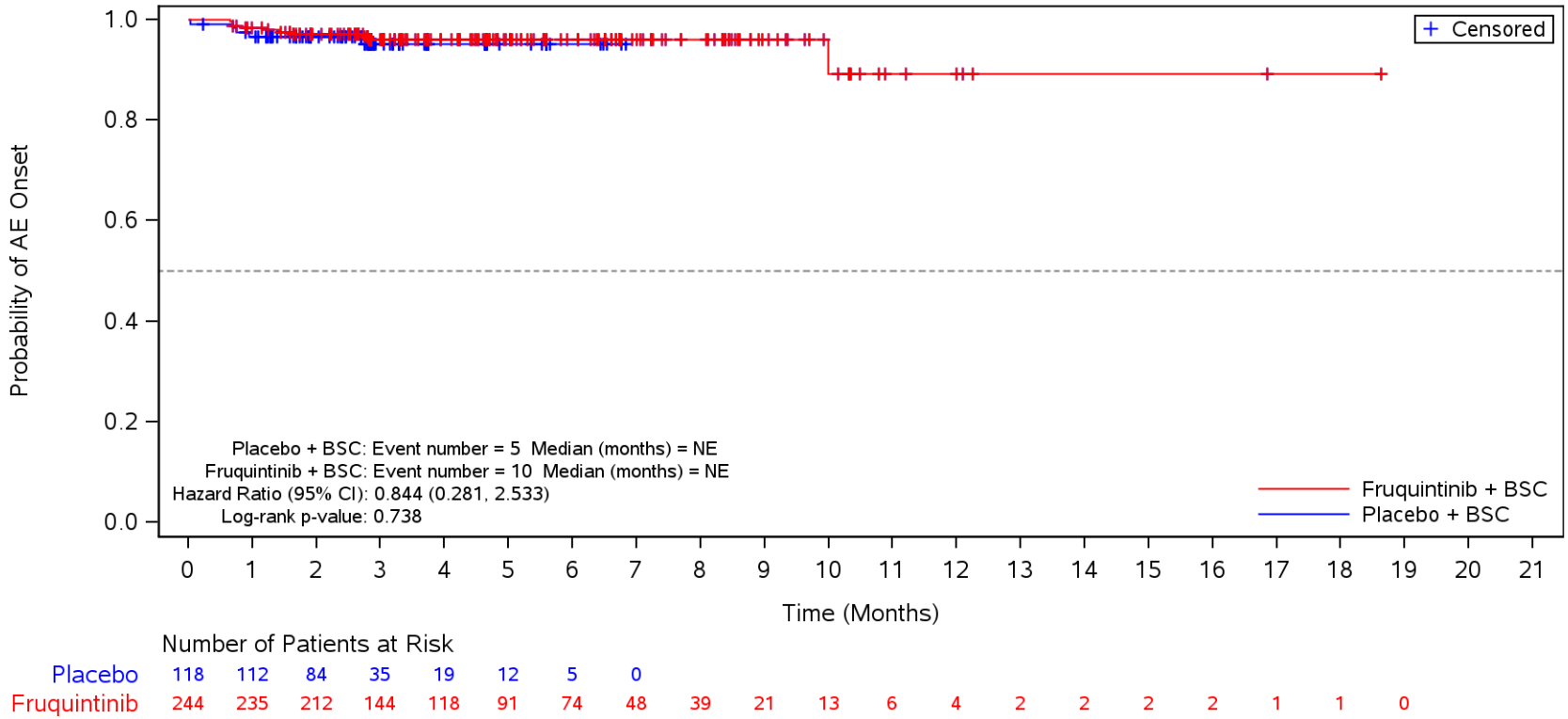


Number of Patients at Risk

Placebo	118	115	86	35	19	12	5	0												
Fruquintinib	244	239	217	151	124	95	78	51	40	22	15	8	6	3	3	3	2	1	1	0

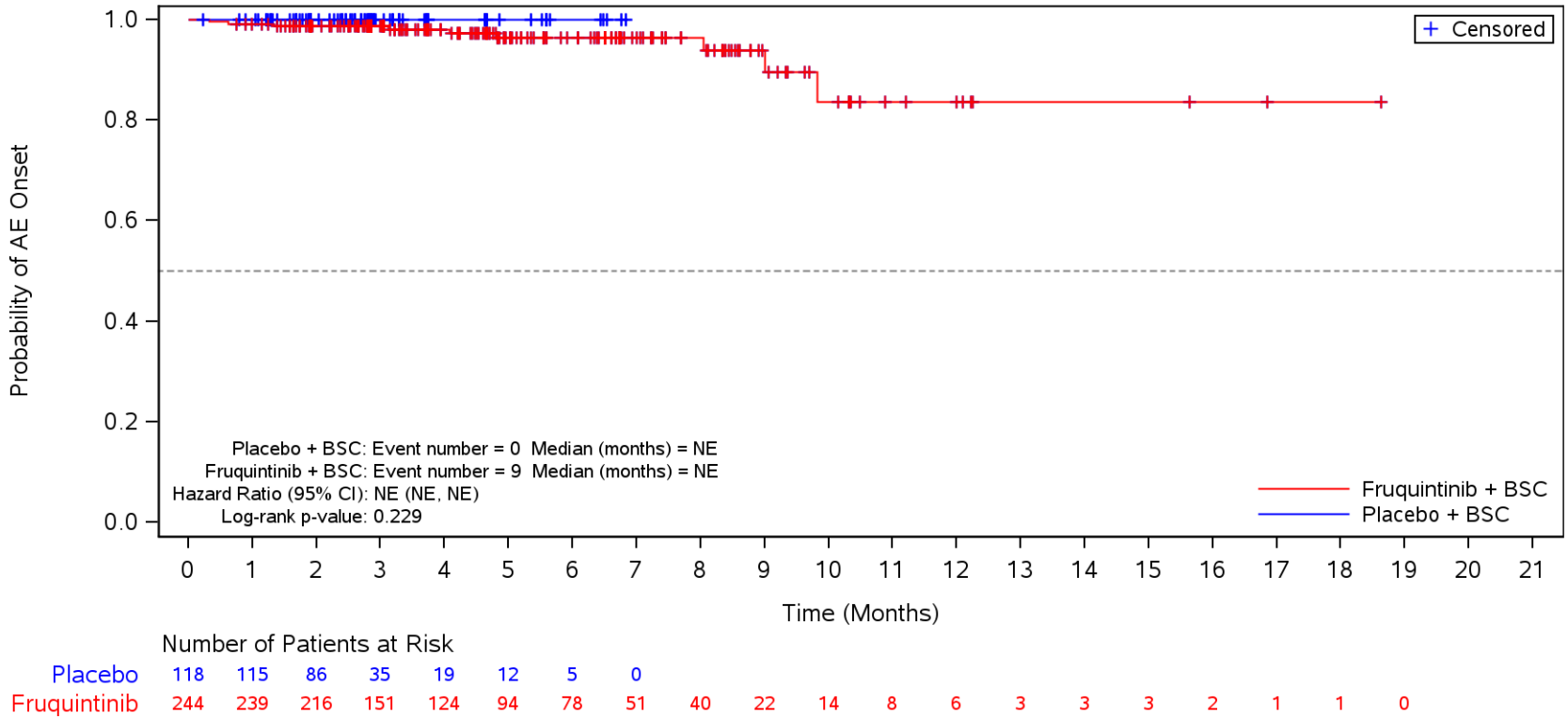
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
<65 years



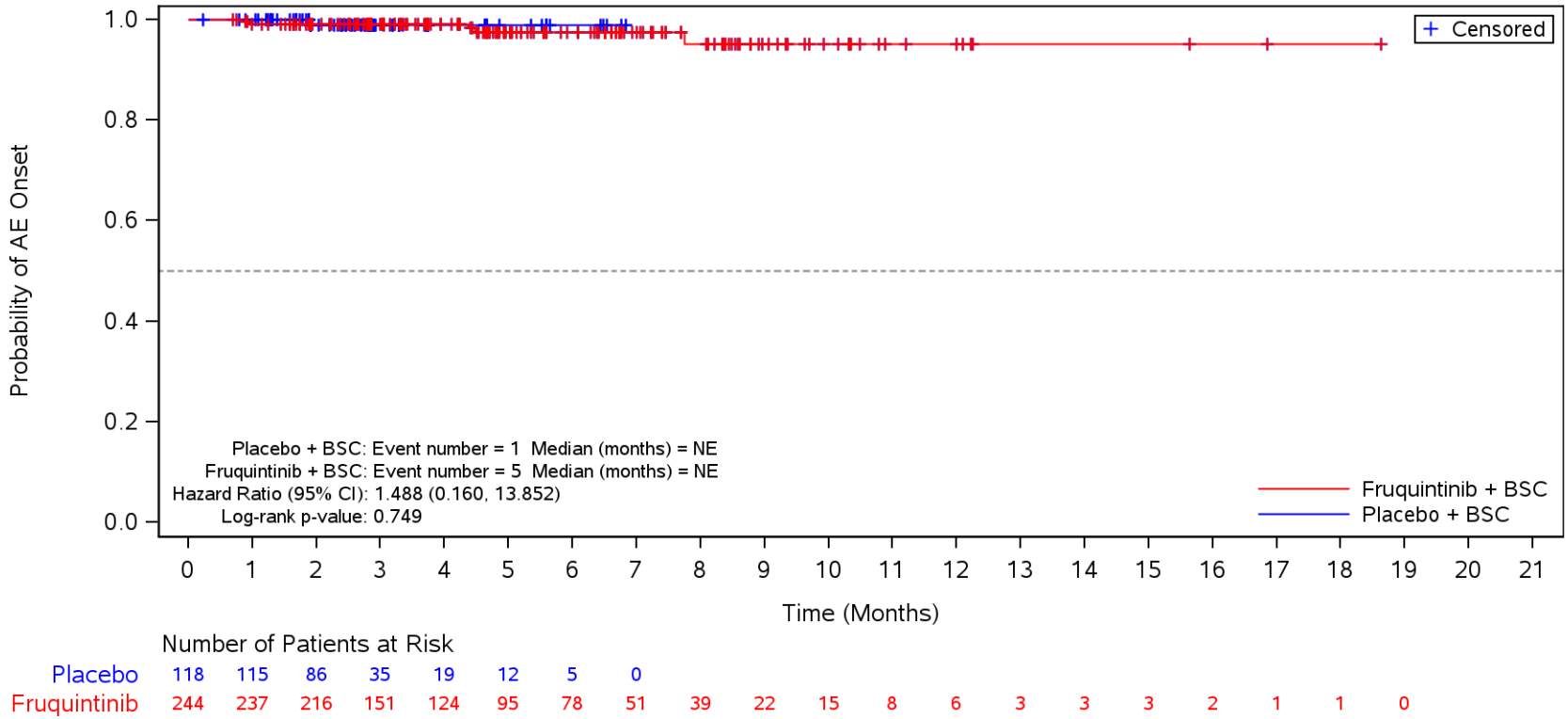
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**
<65 years



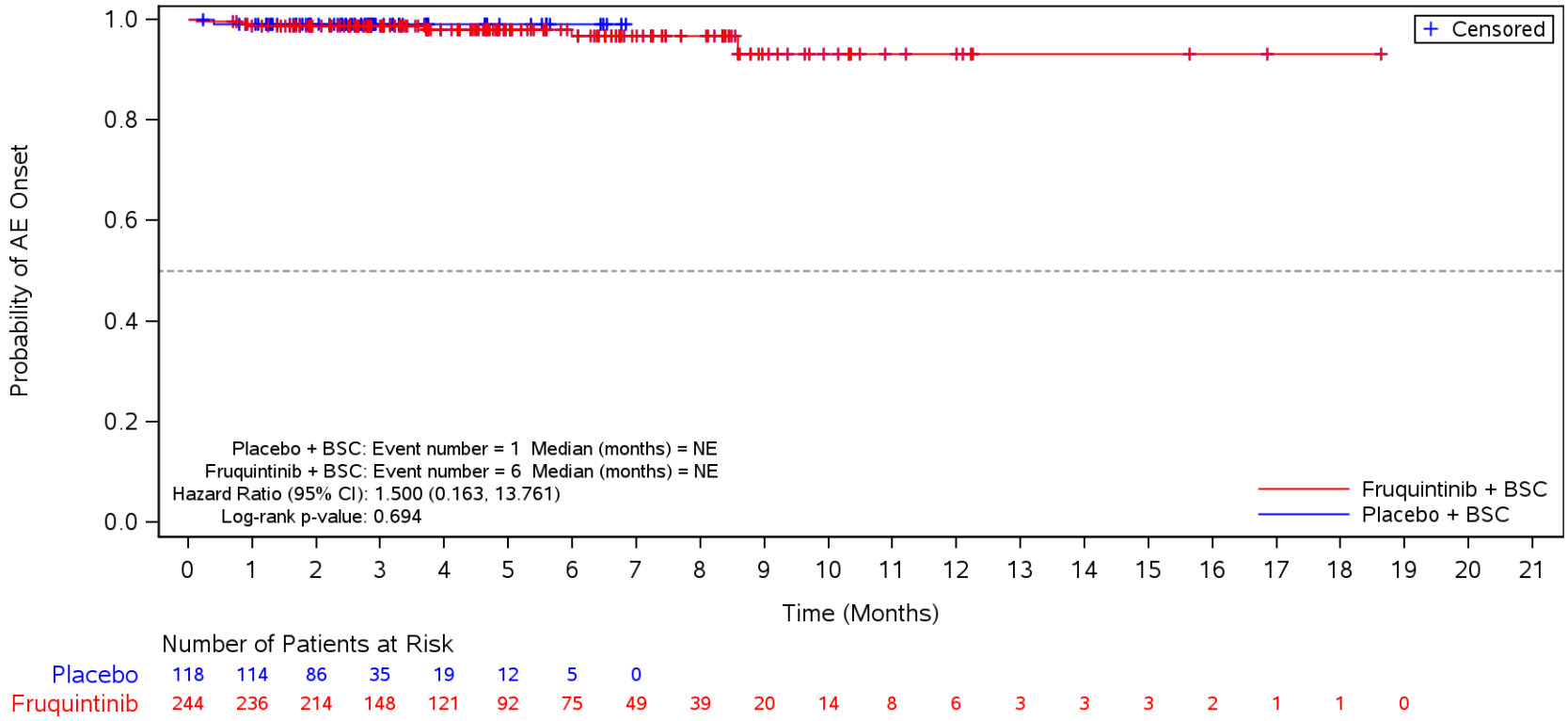
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Condition aggravated**
<65 years



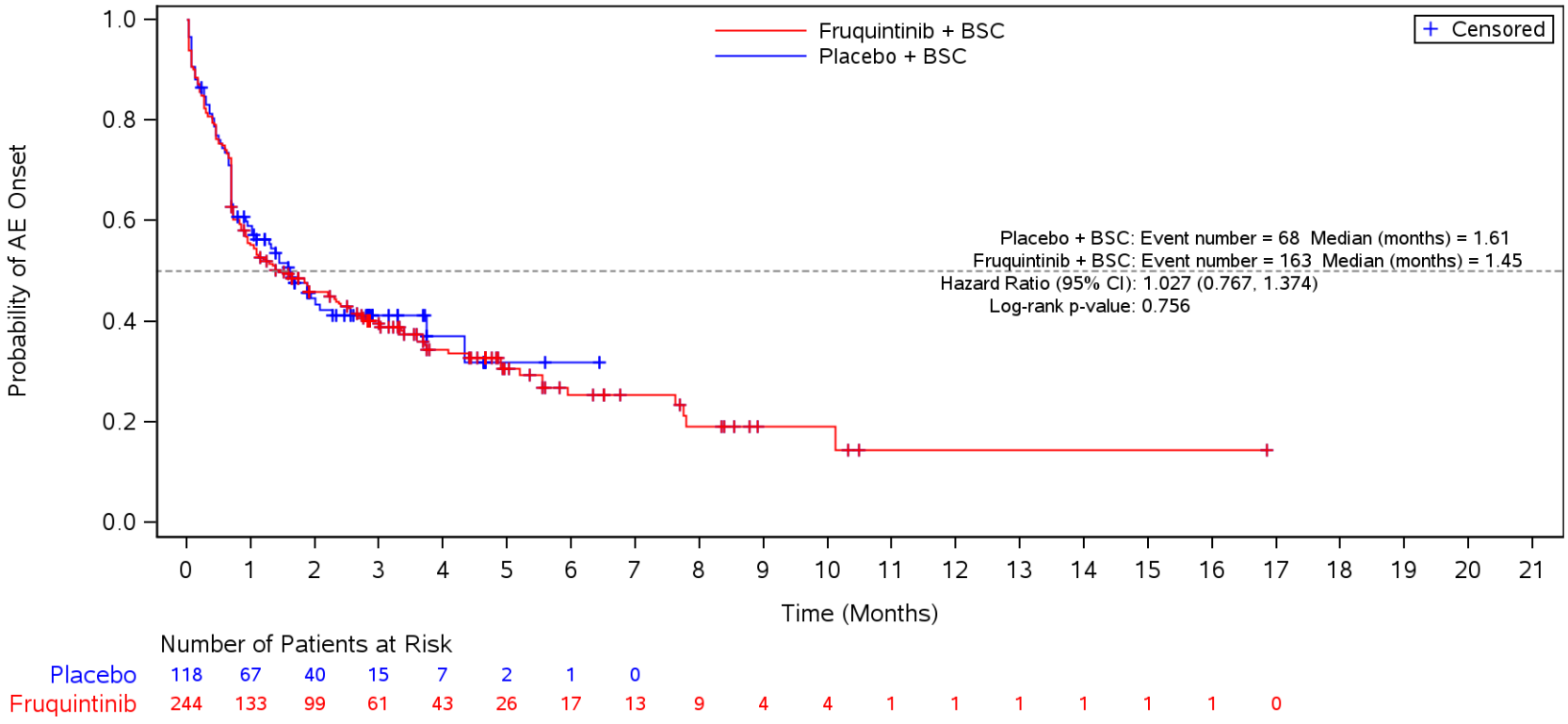
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**
<65 years



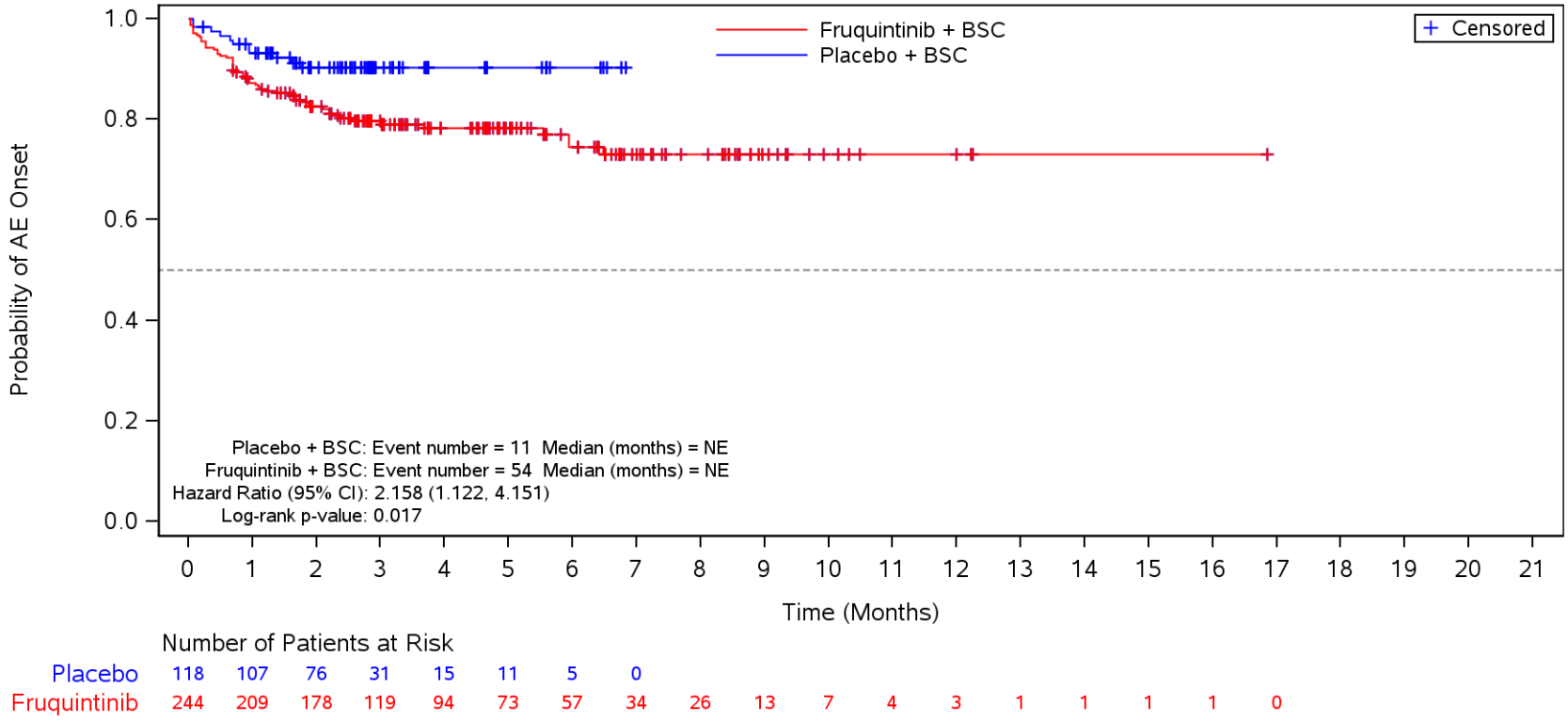
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
<65 years



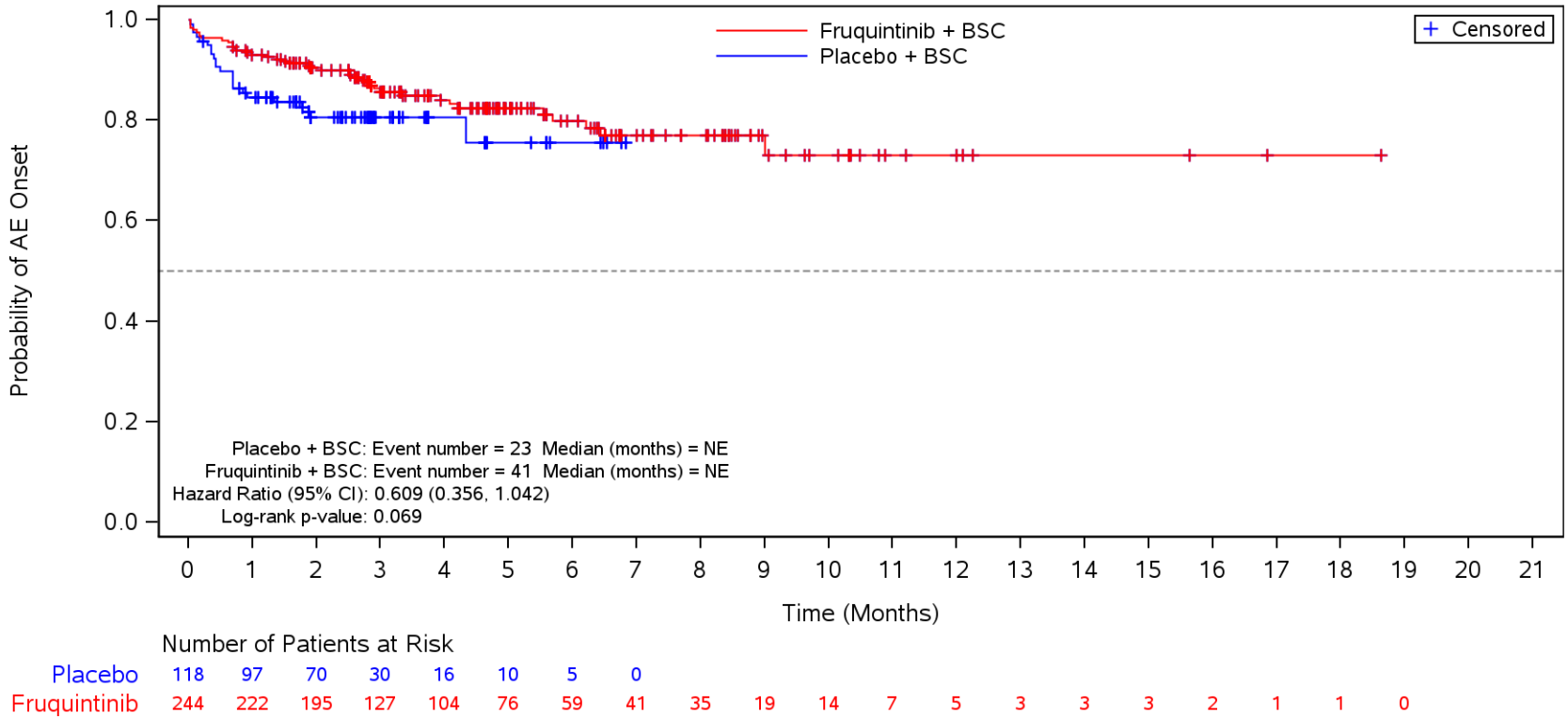
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
<65 years



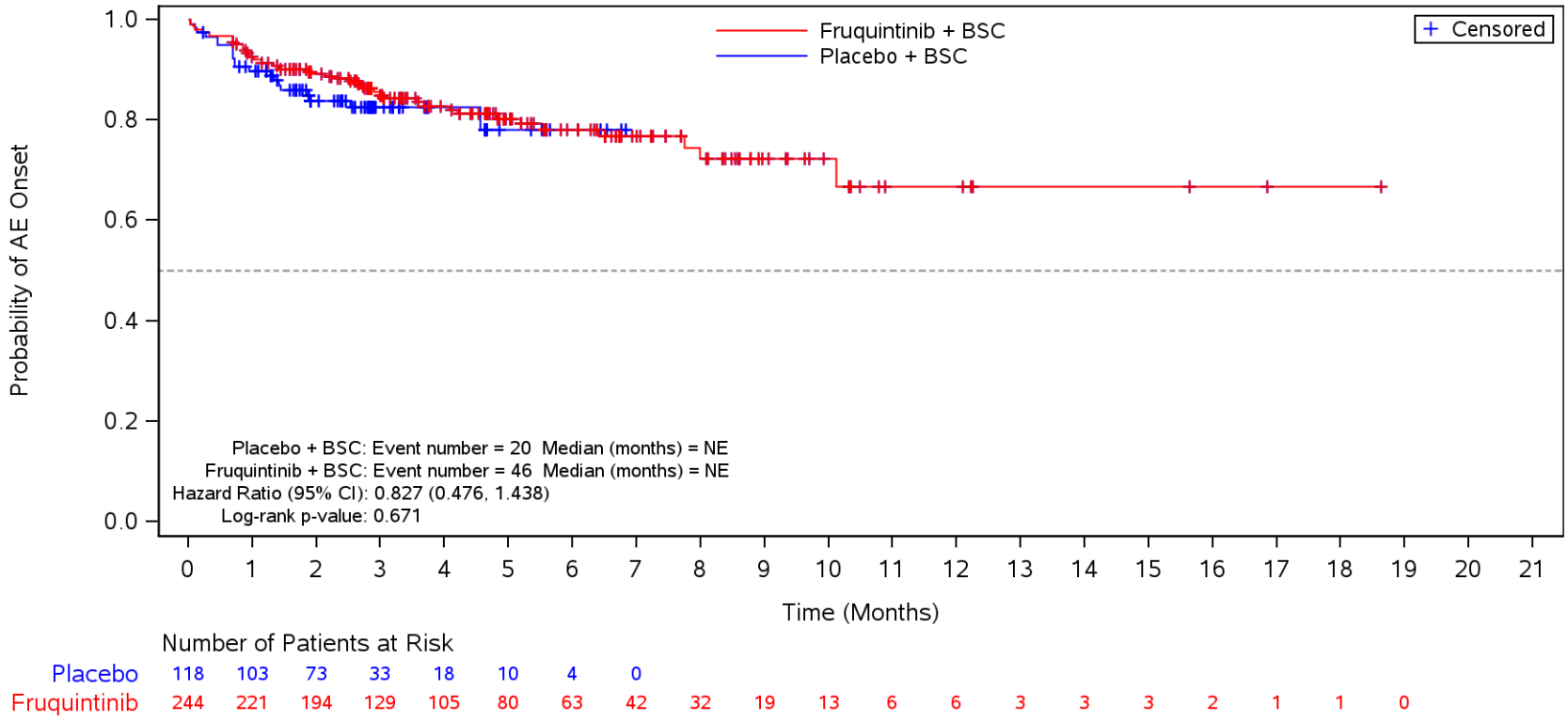
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
<65 years



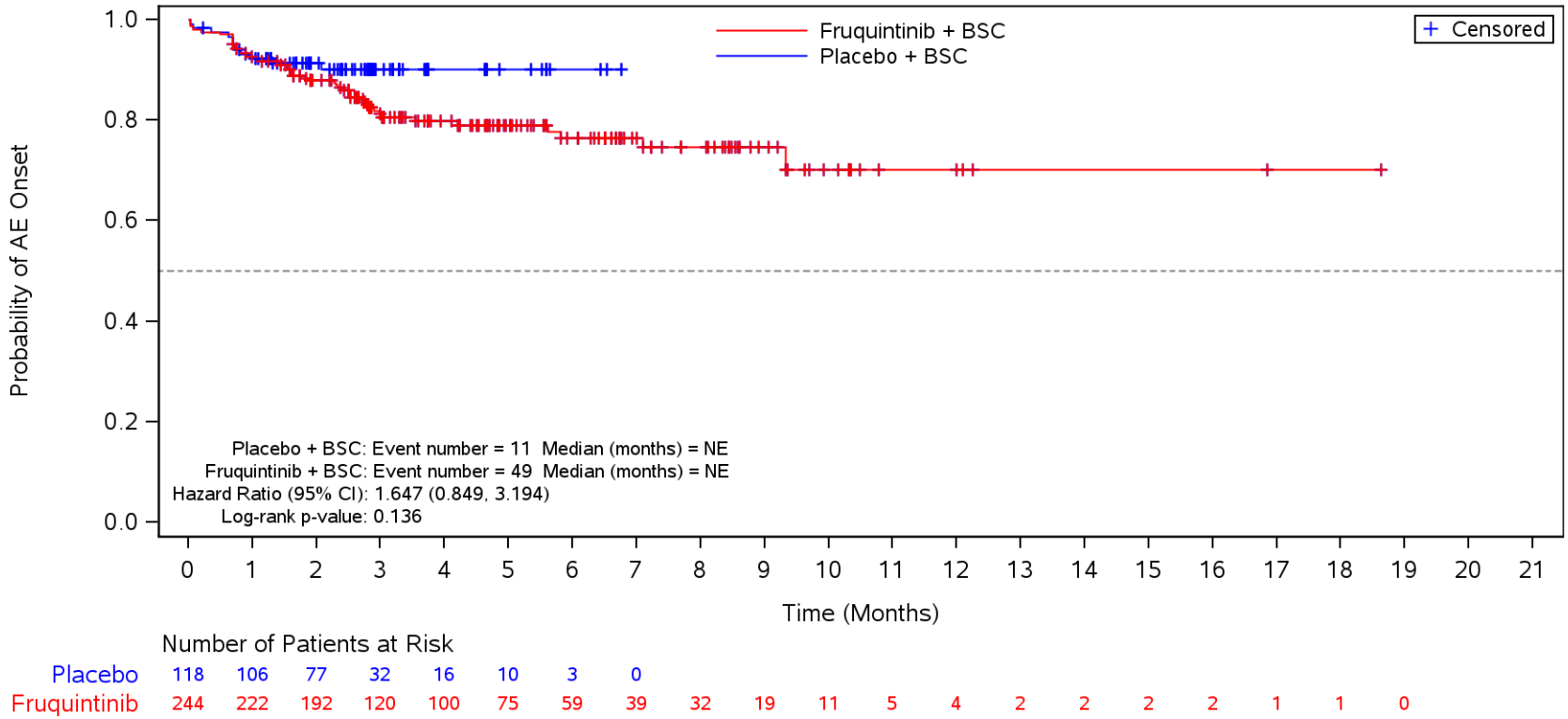
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
<65 years



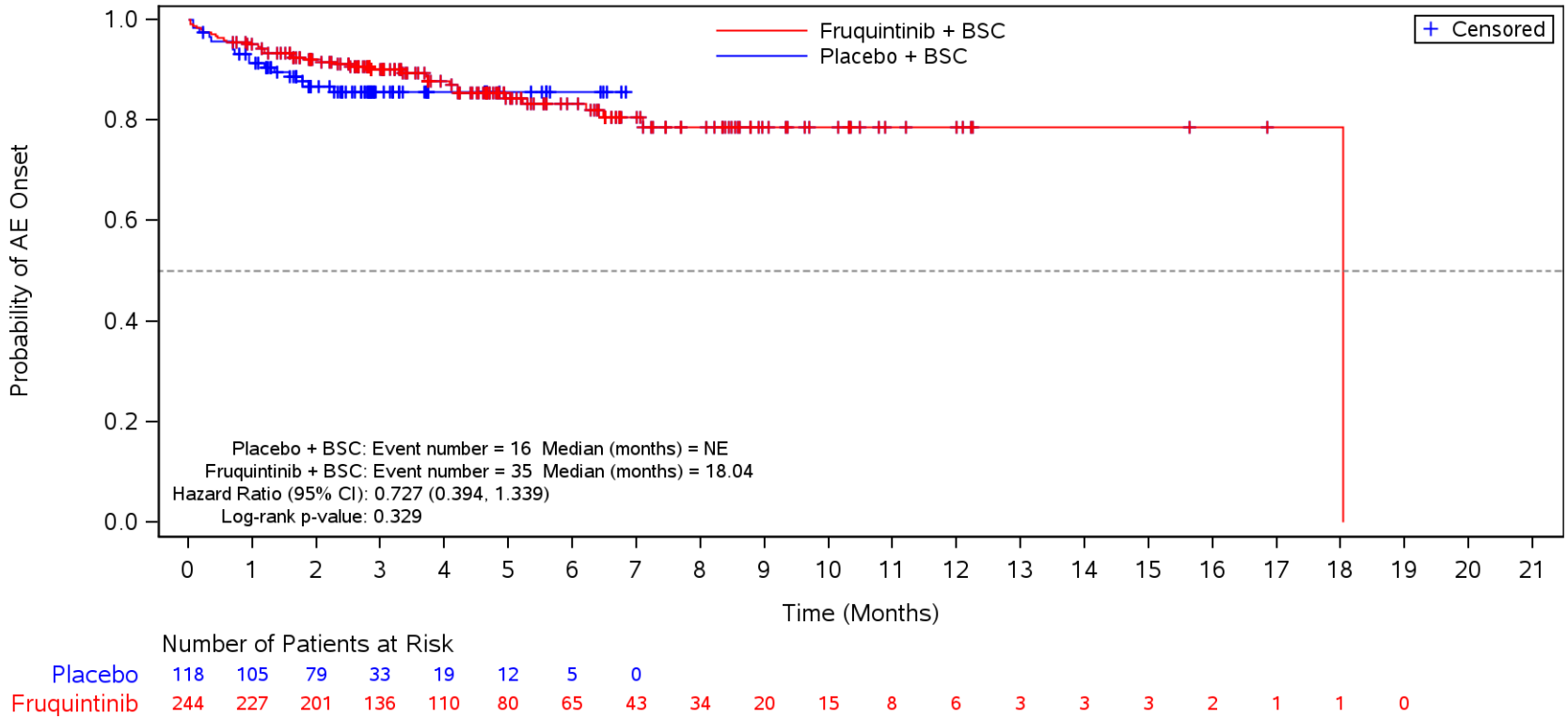
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
<65 years



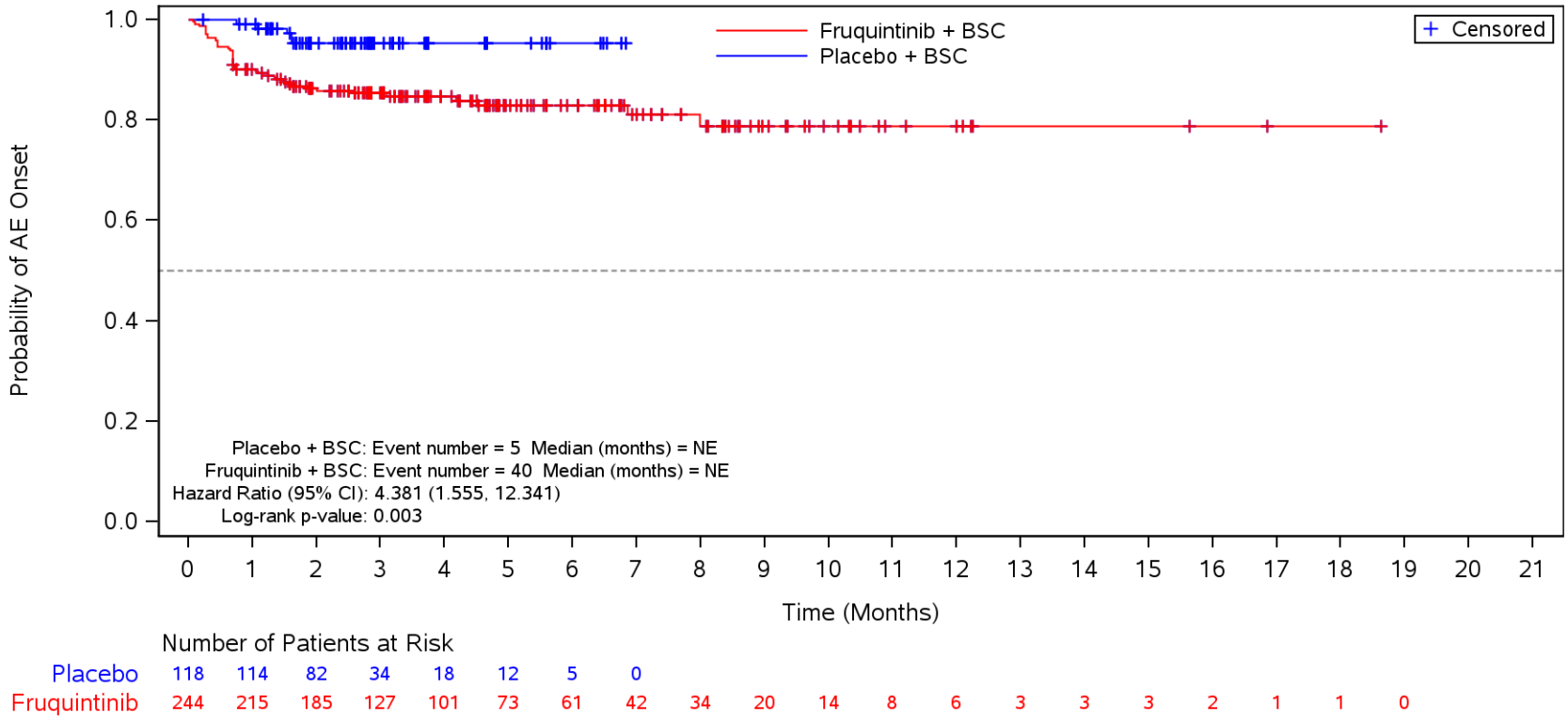
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
<65 years



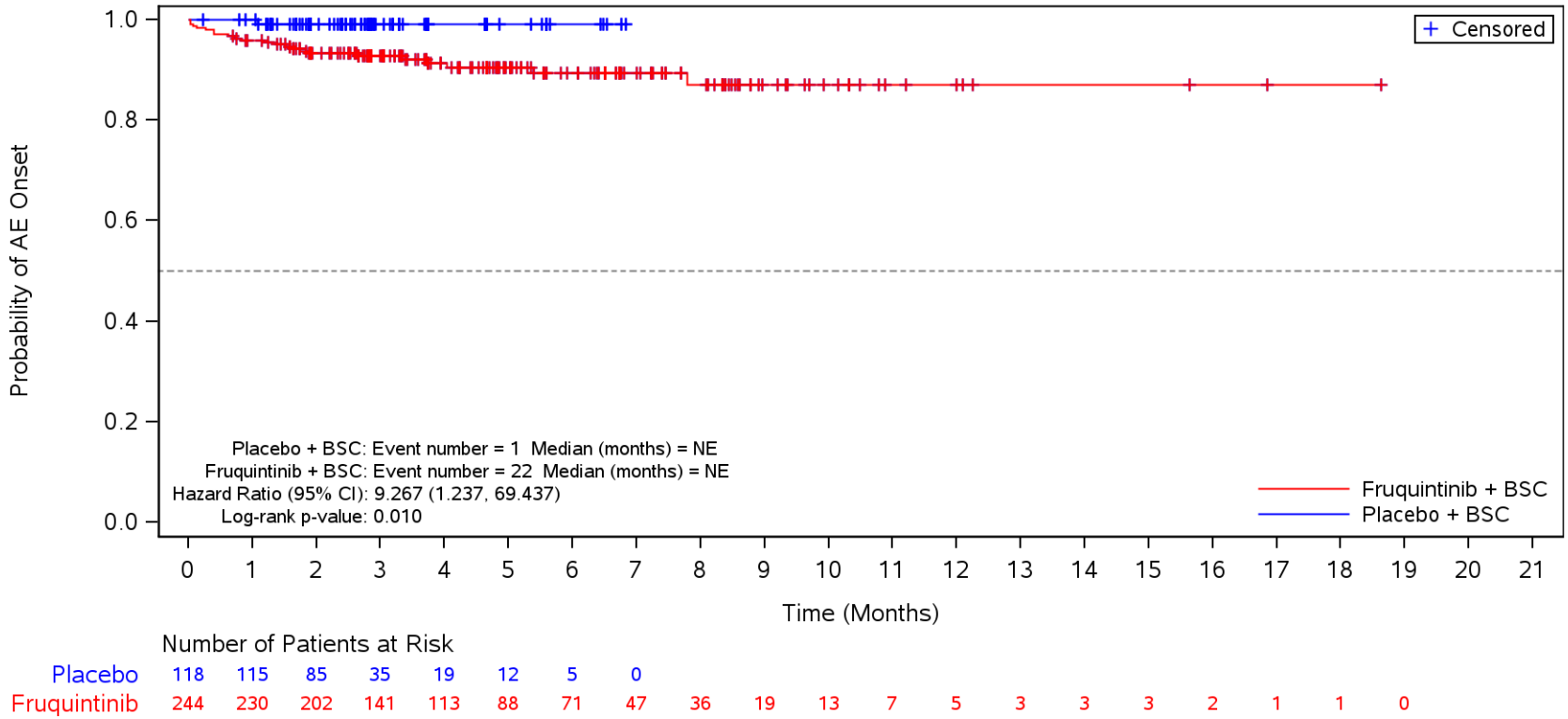
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
<65 years



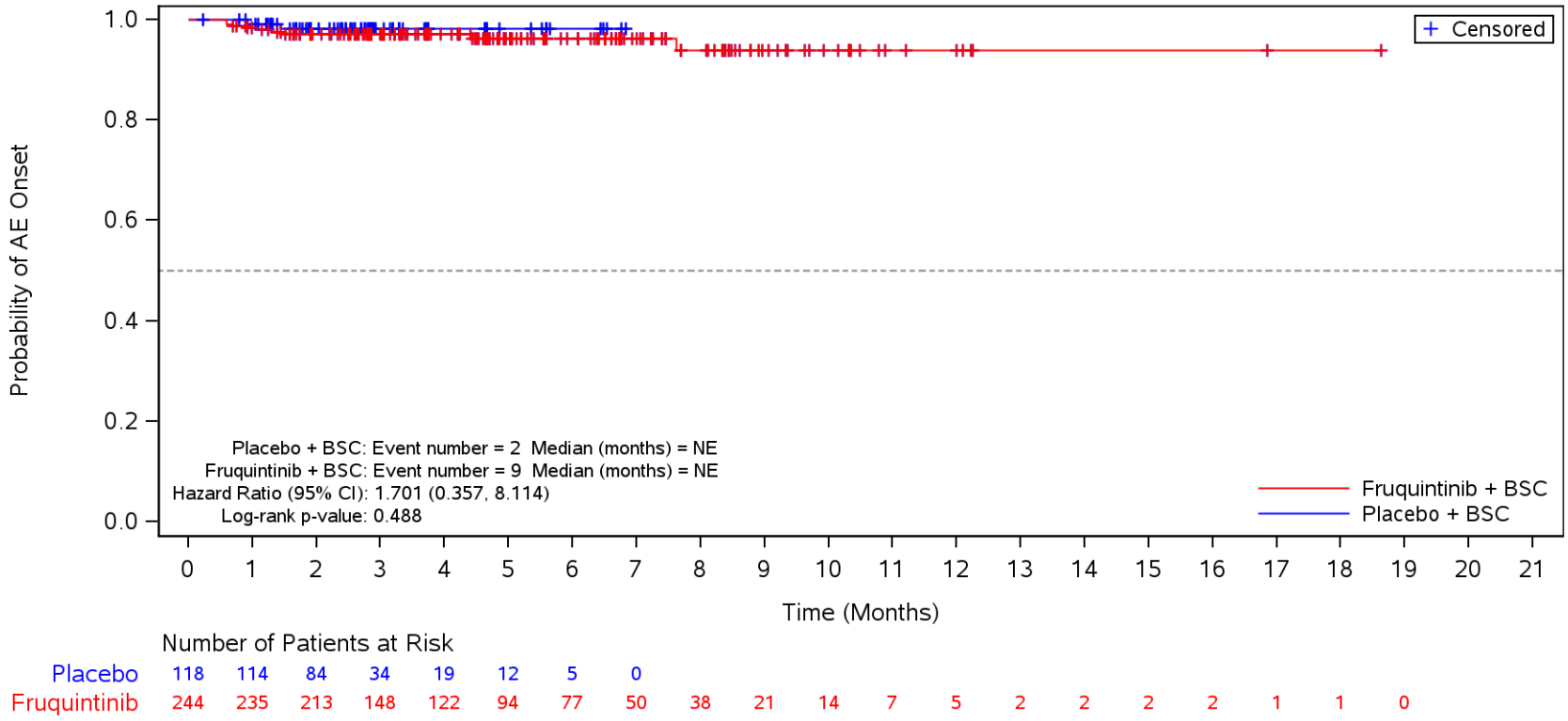
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
<65 years



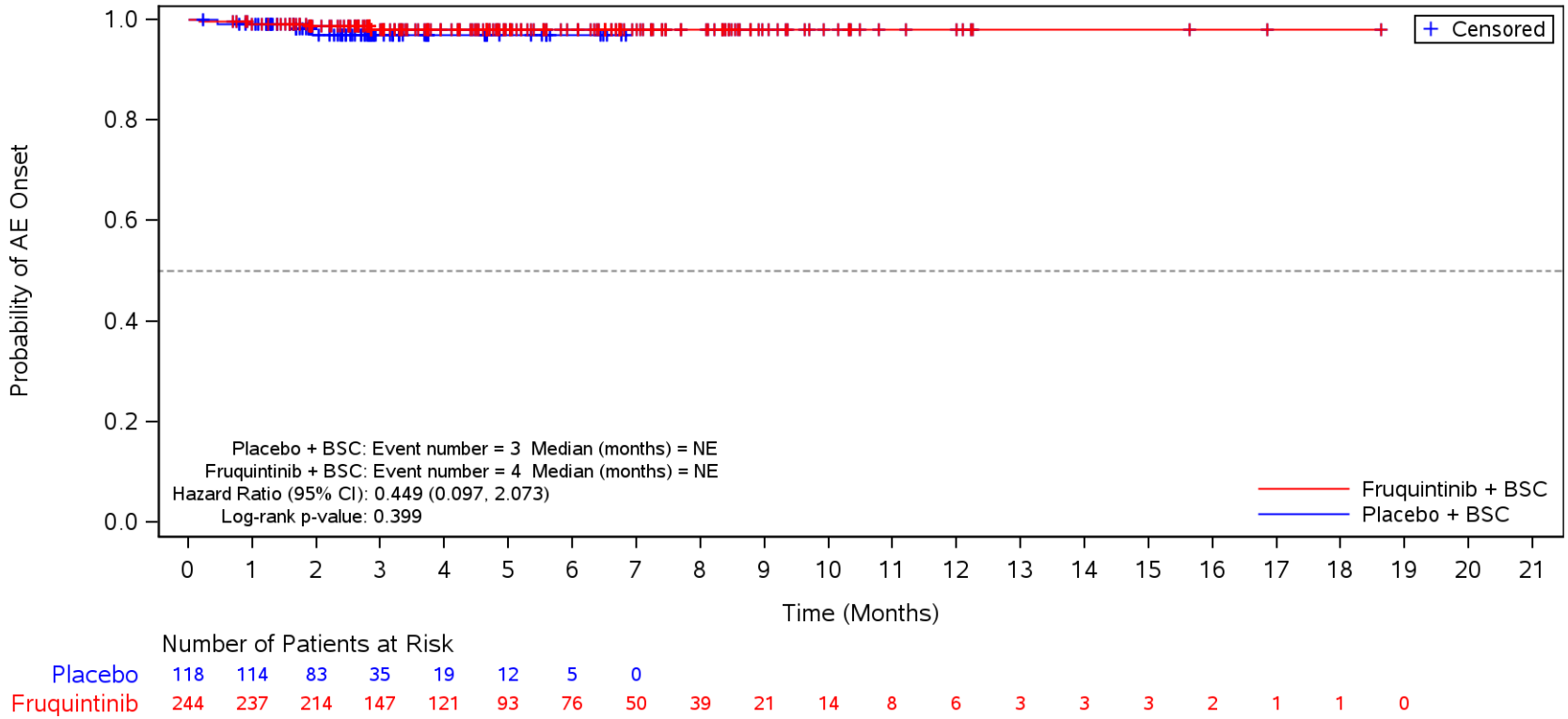
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
<65 years



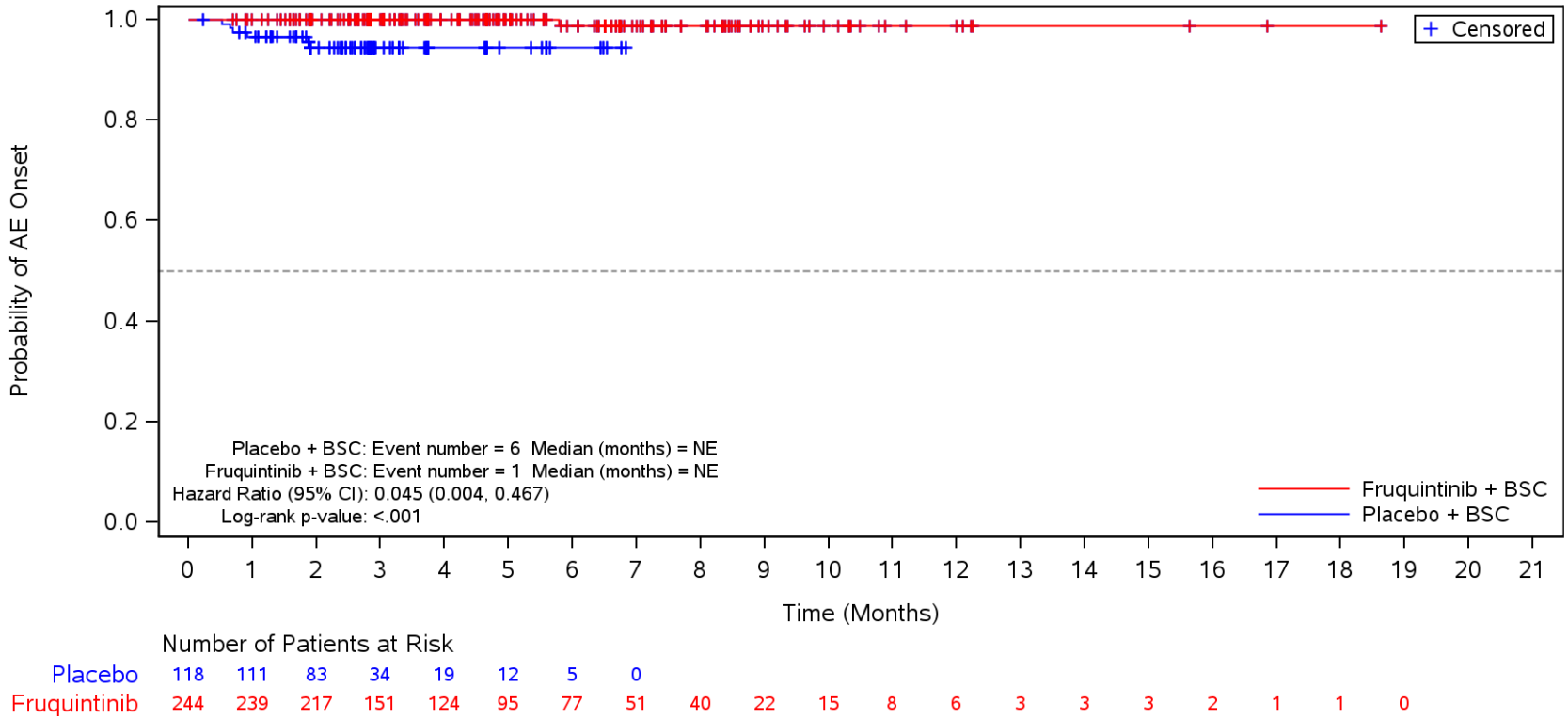
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
<65 years



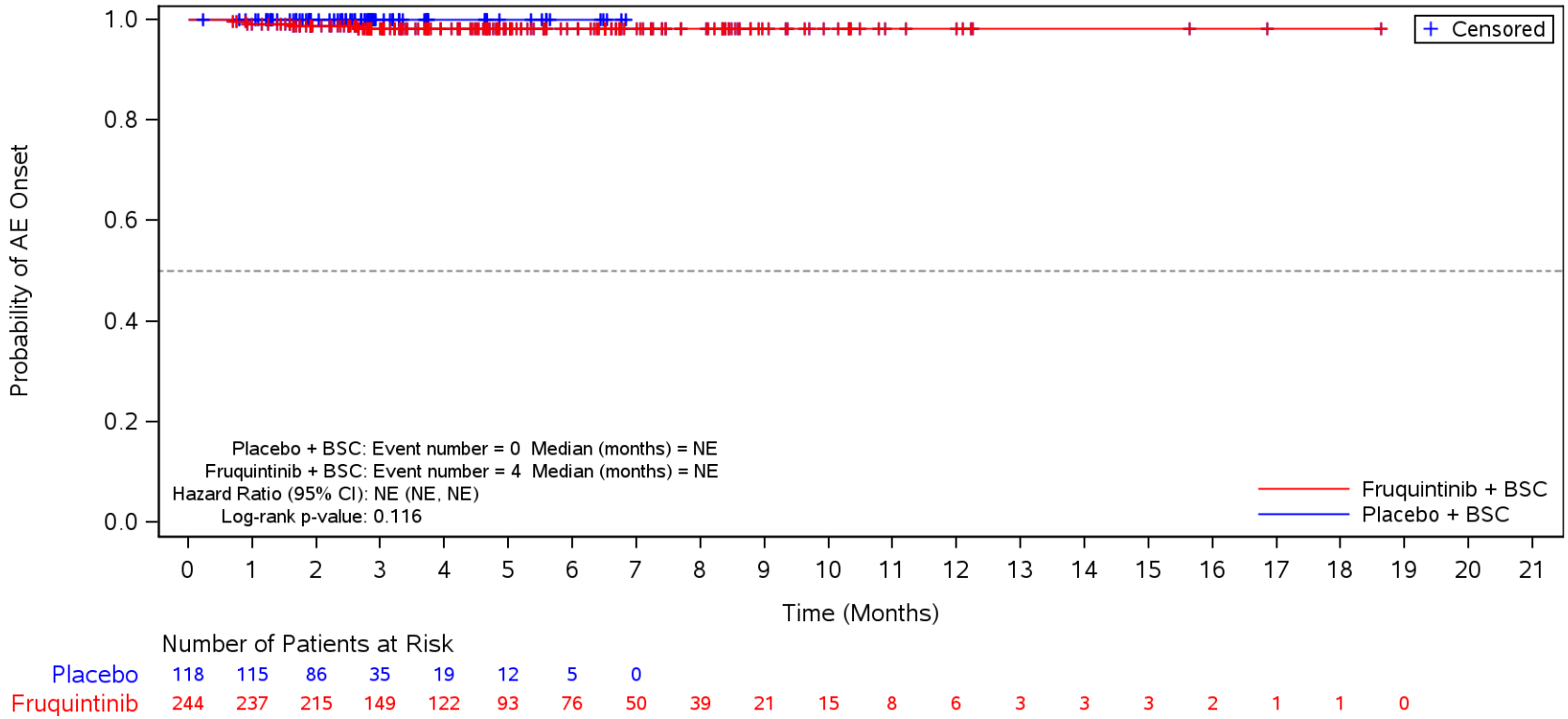
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
<65 years



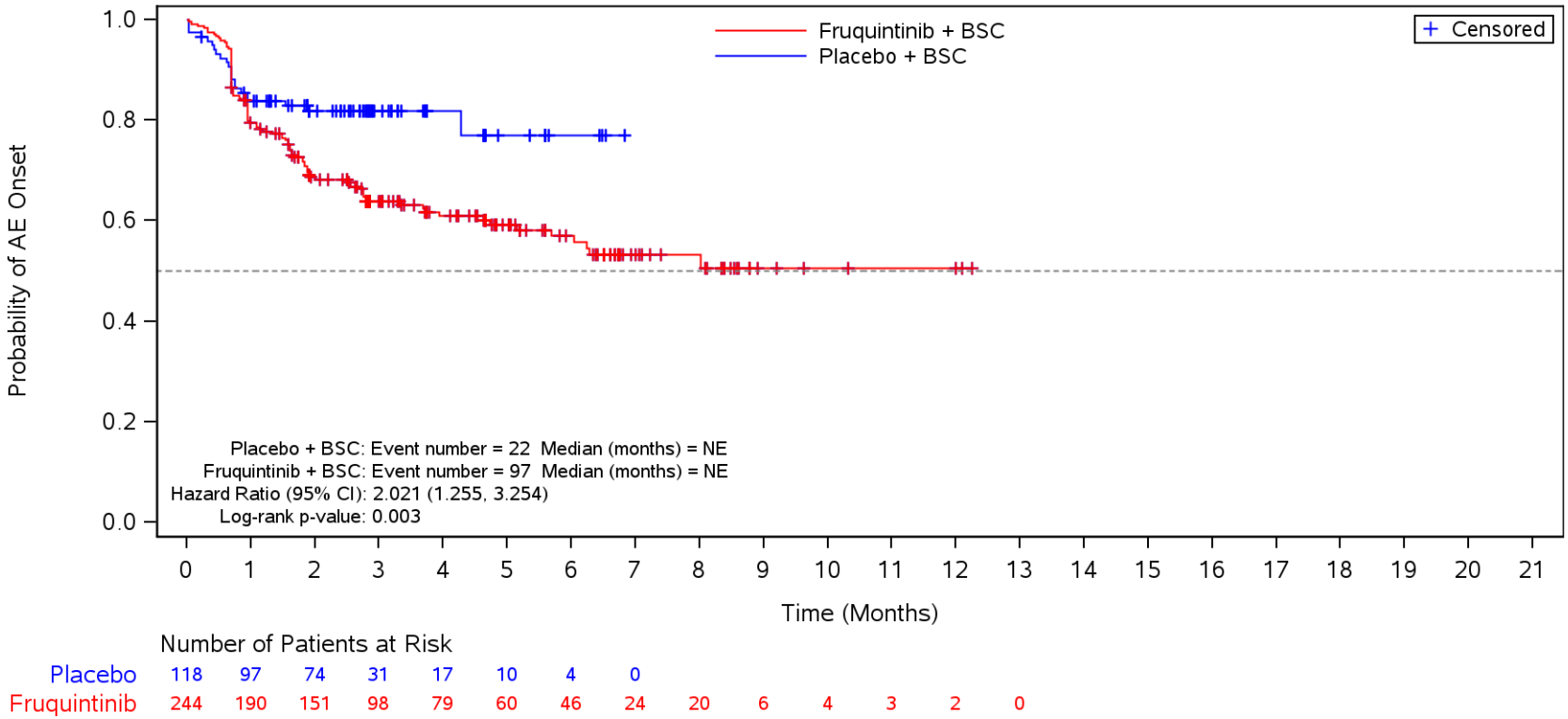
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**
<65 years



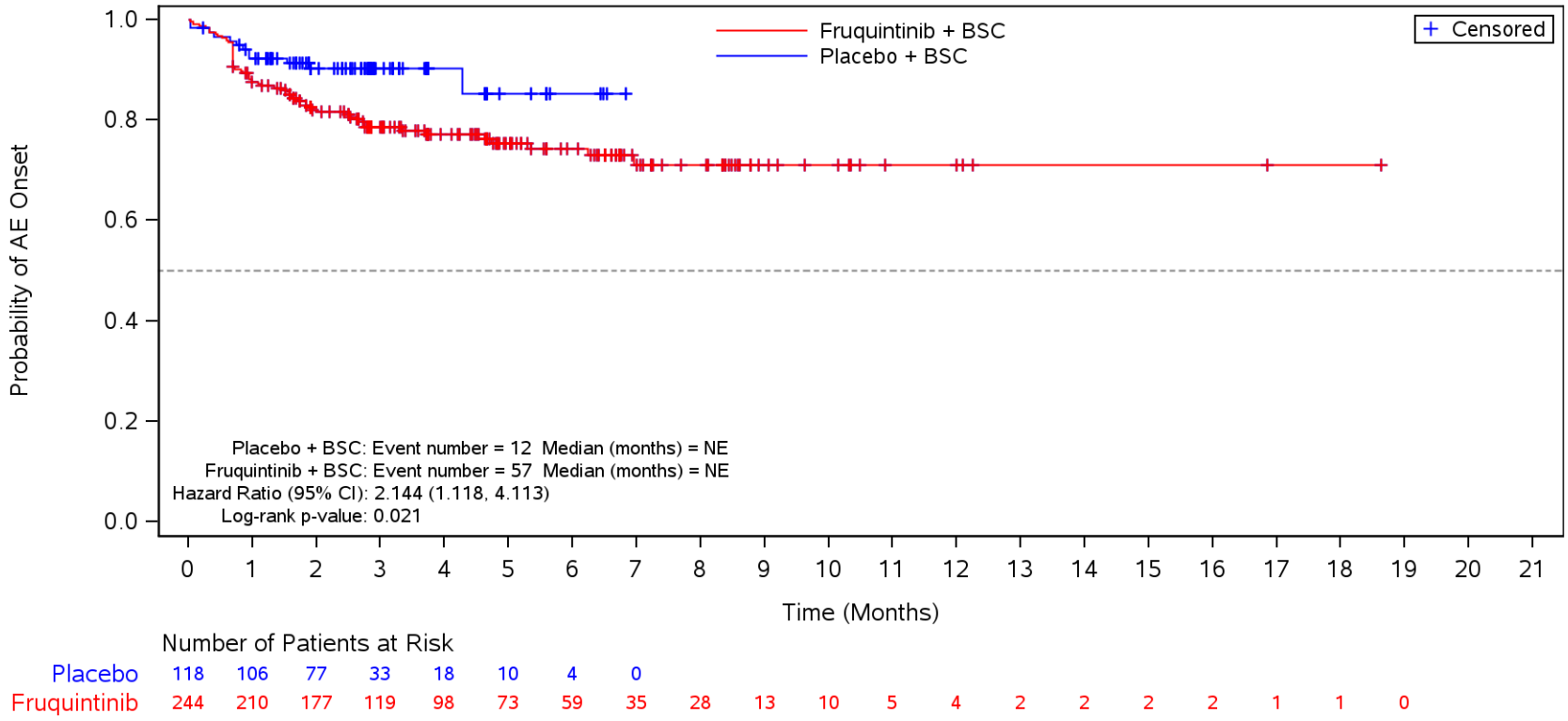
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
<65 years



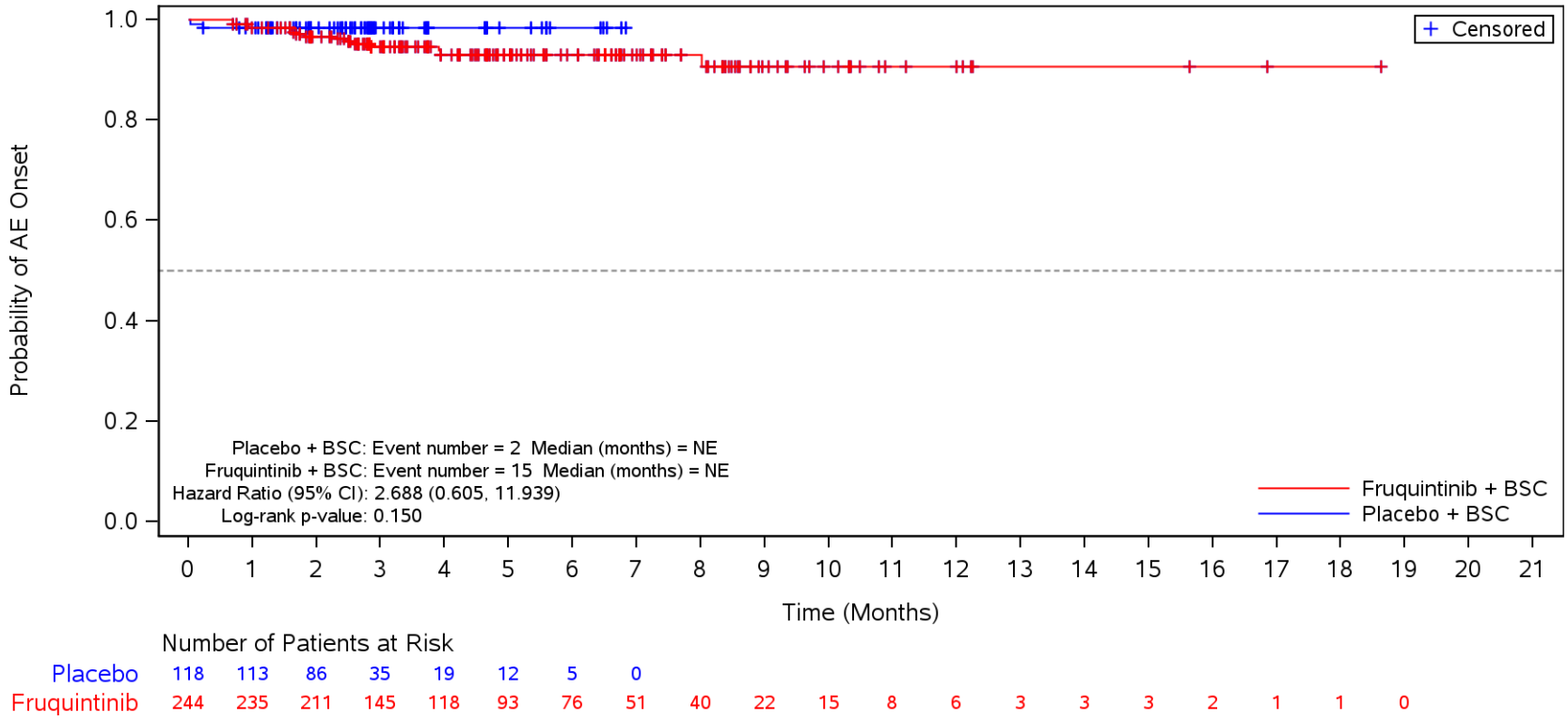
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
<65 years



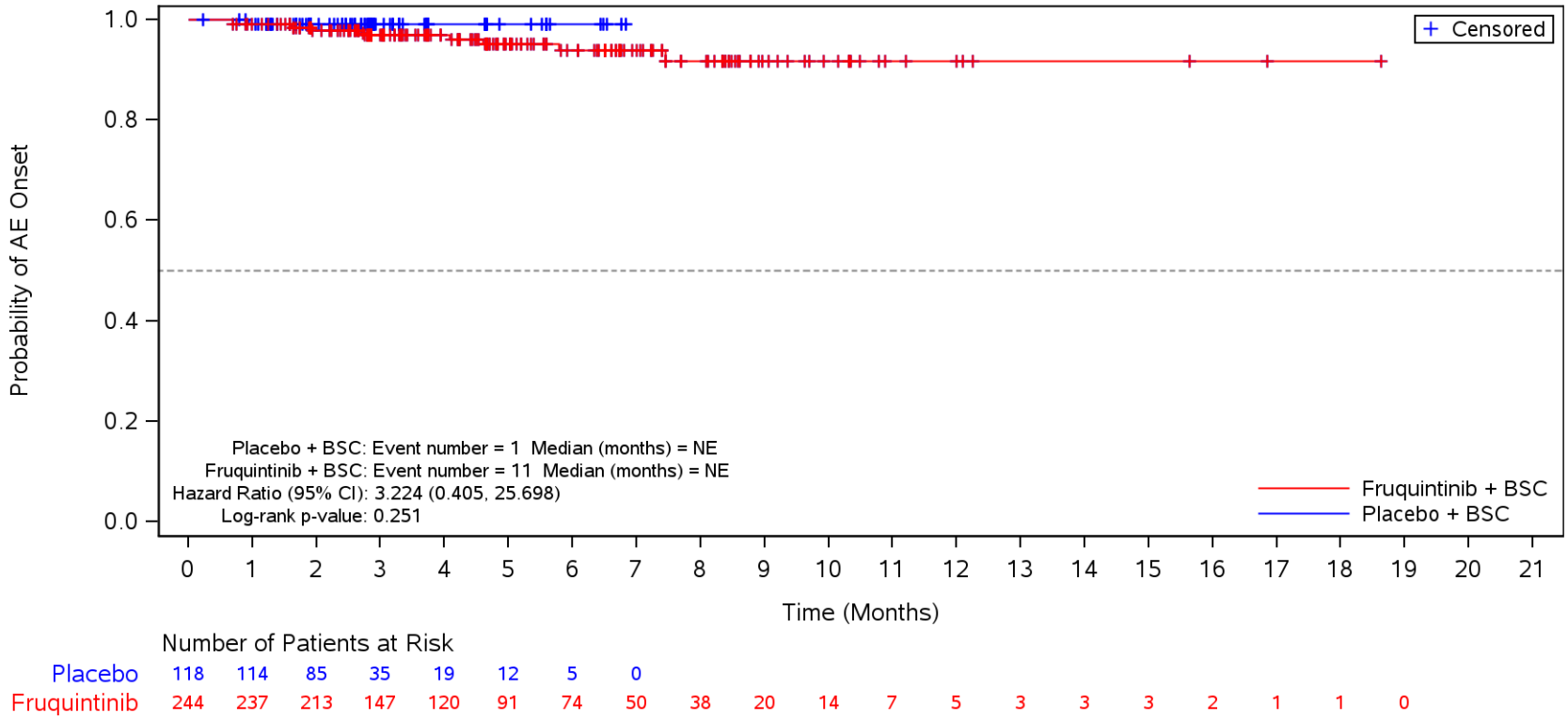
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
<65 years



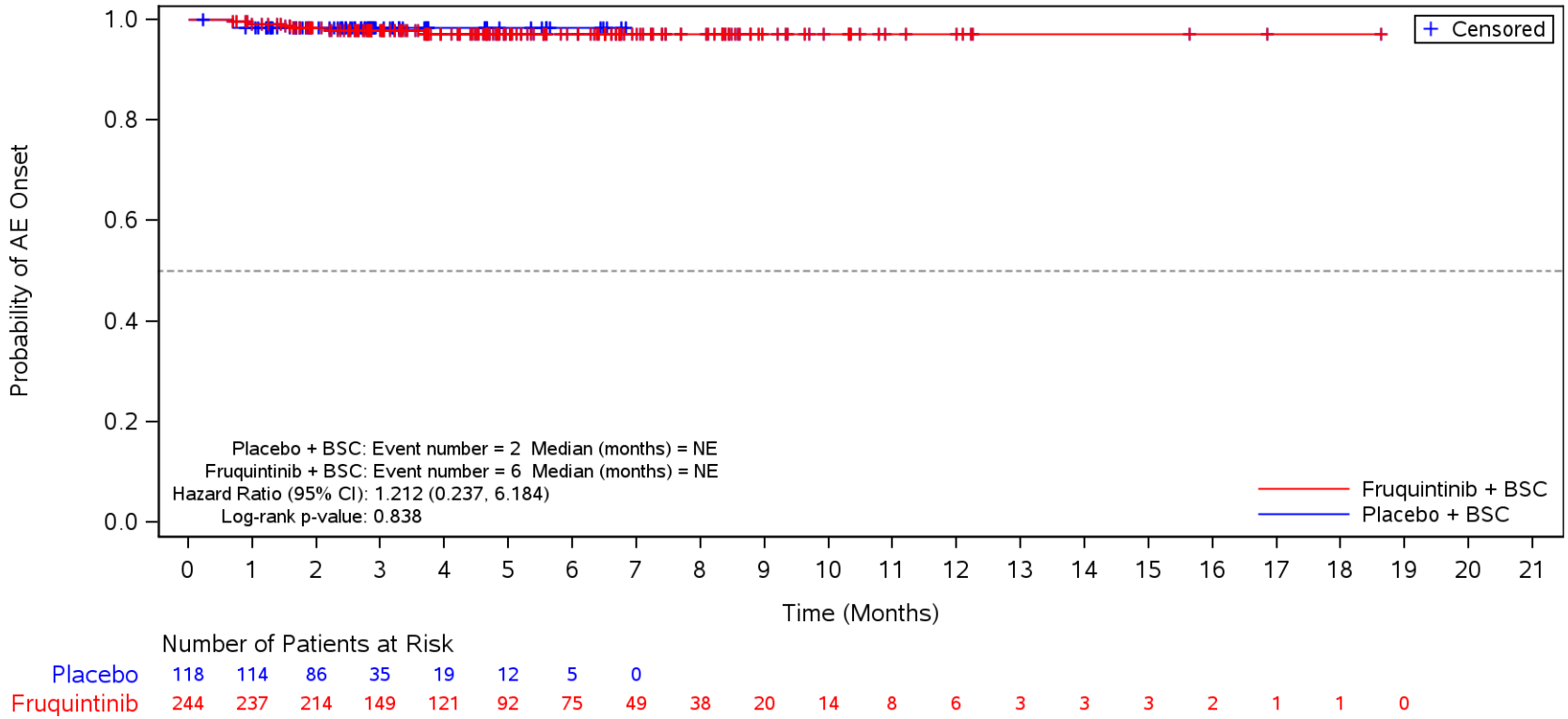
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
<65 years



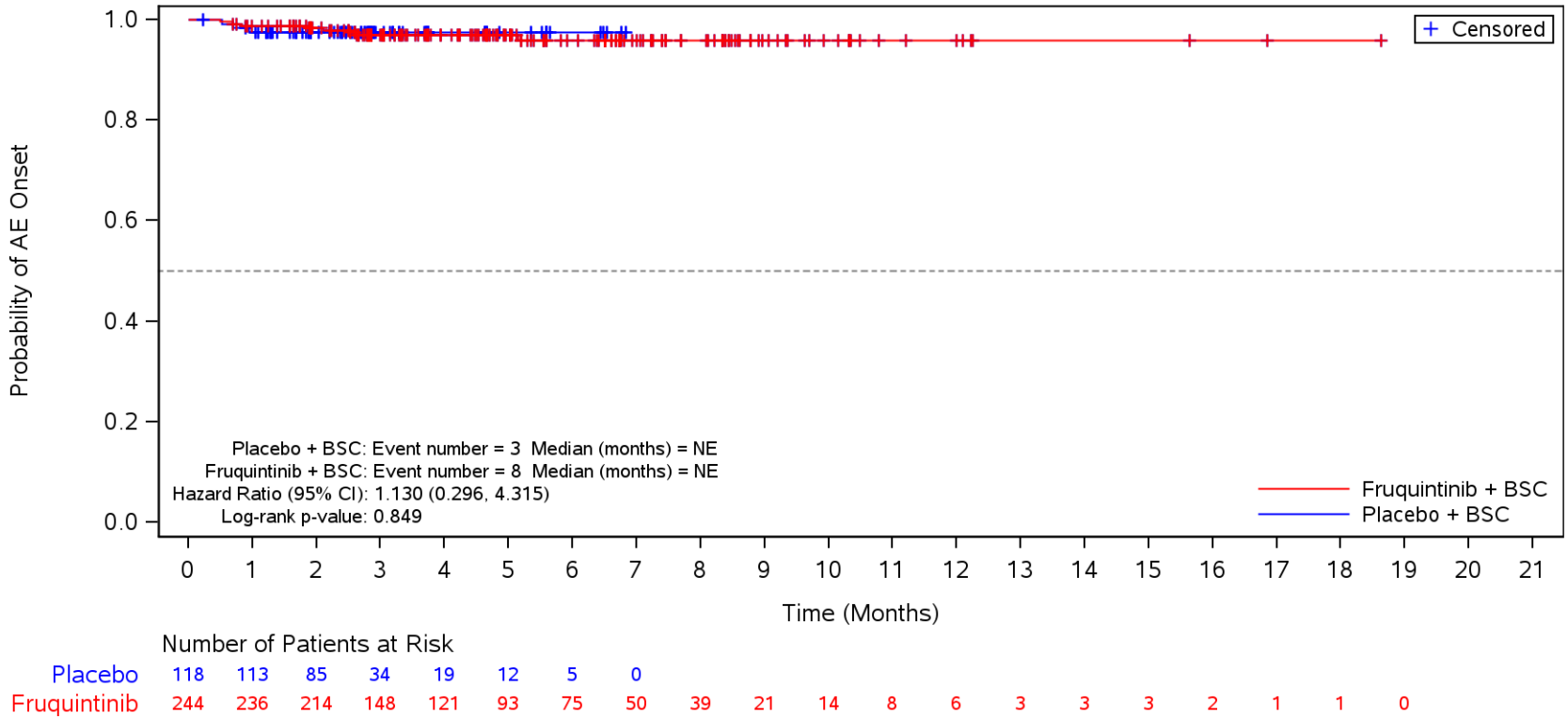
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
<65 years



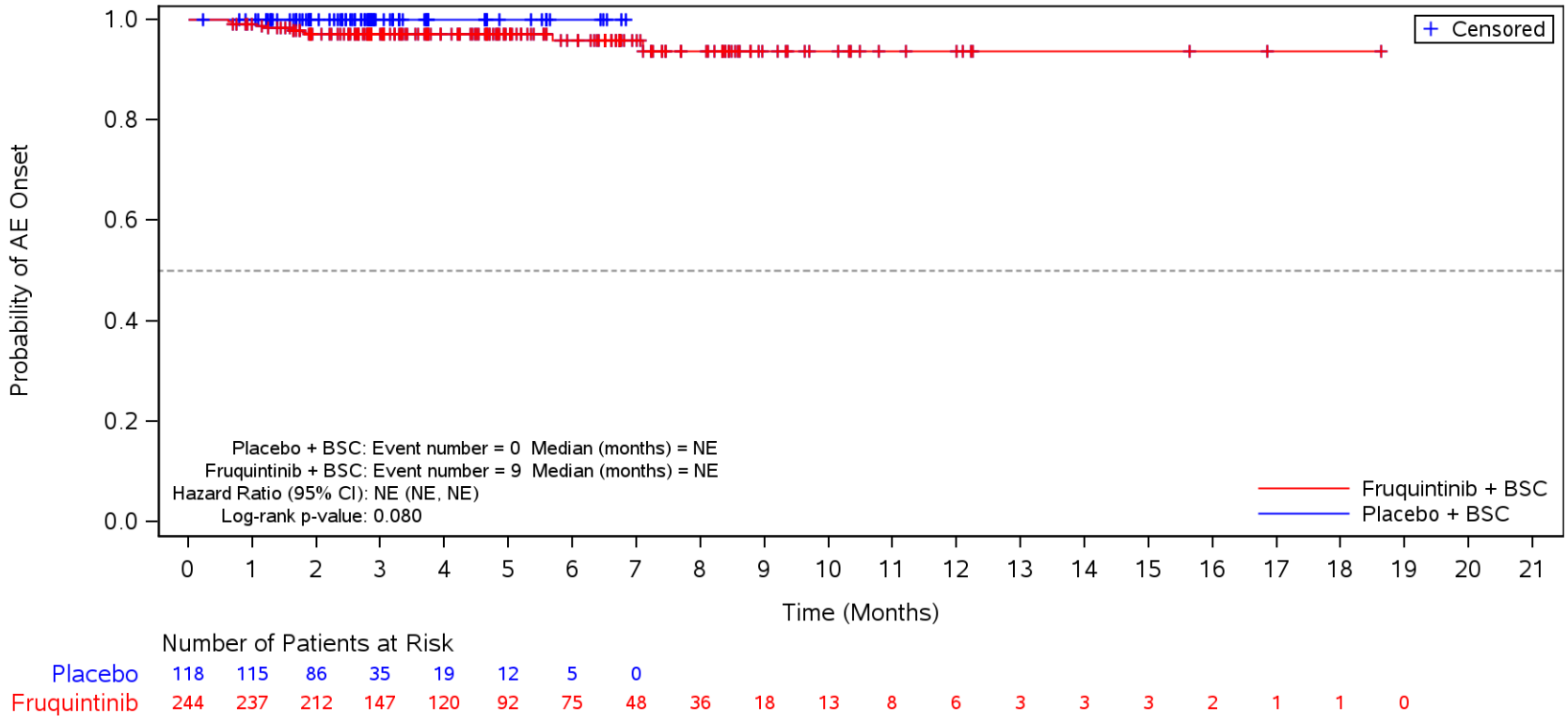
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
<65 years



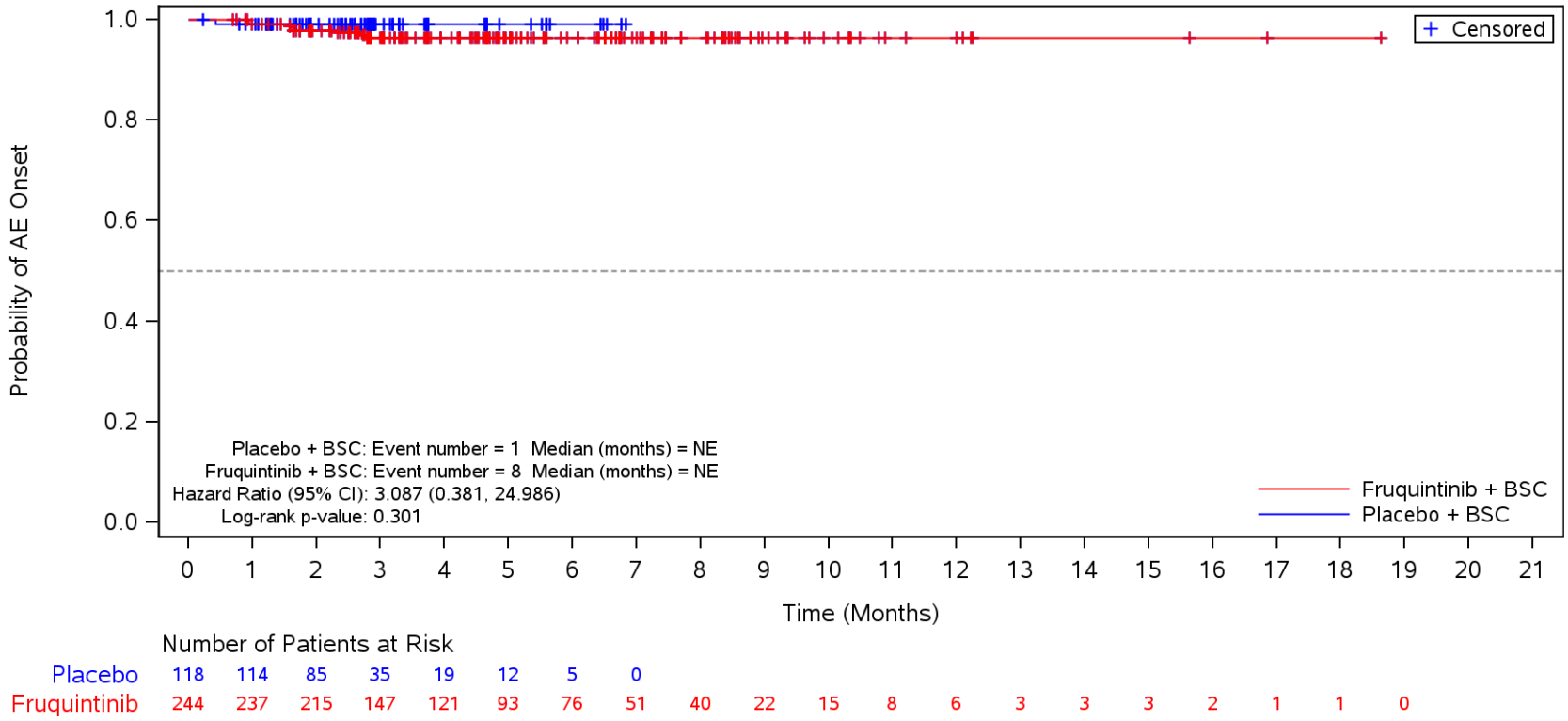
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
<65 years



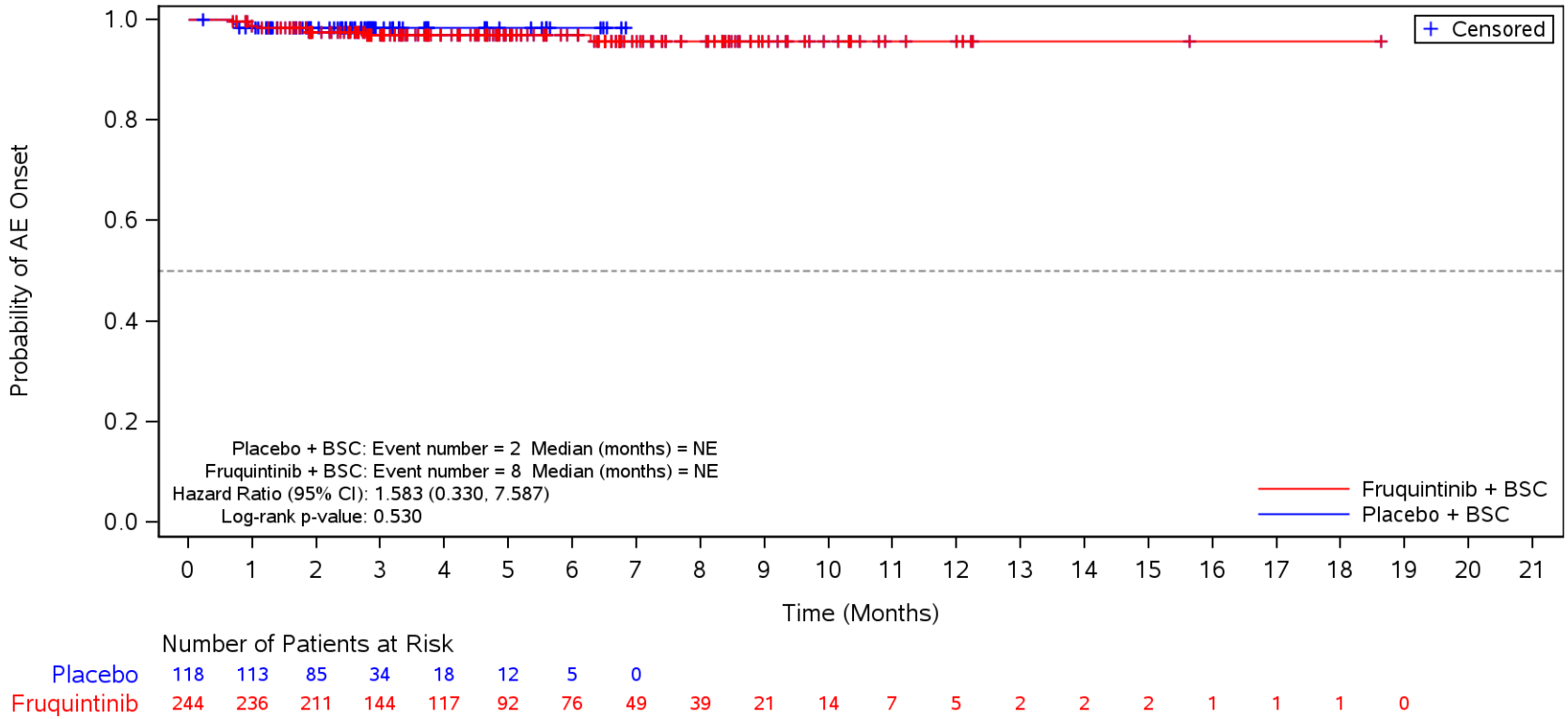
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
<65 years



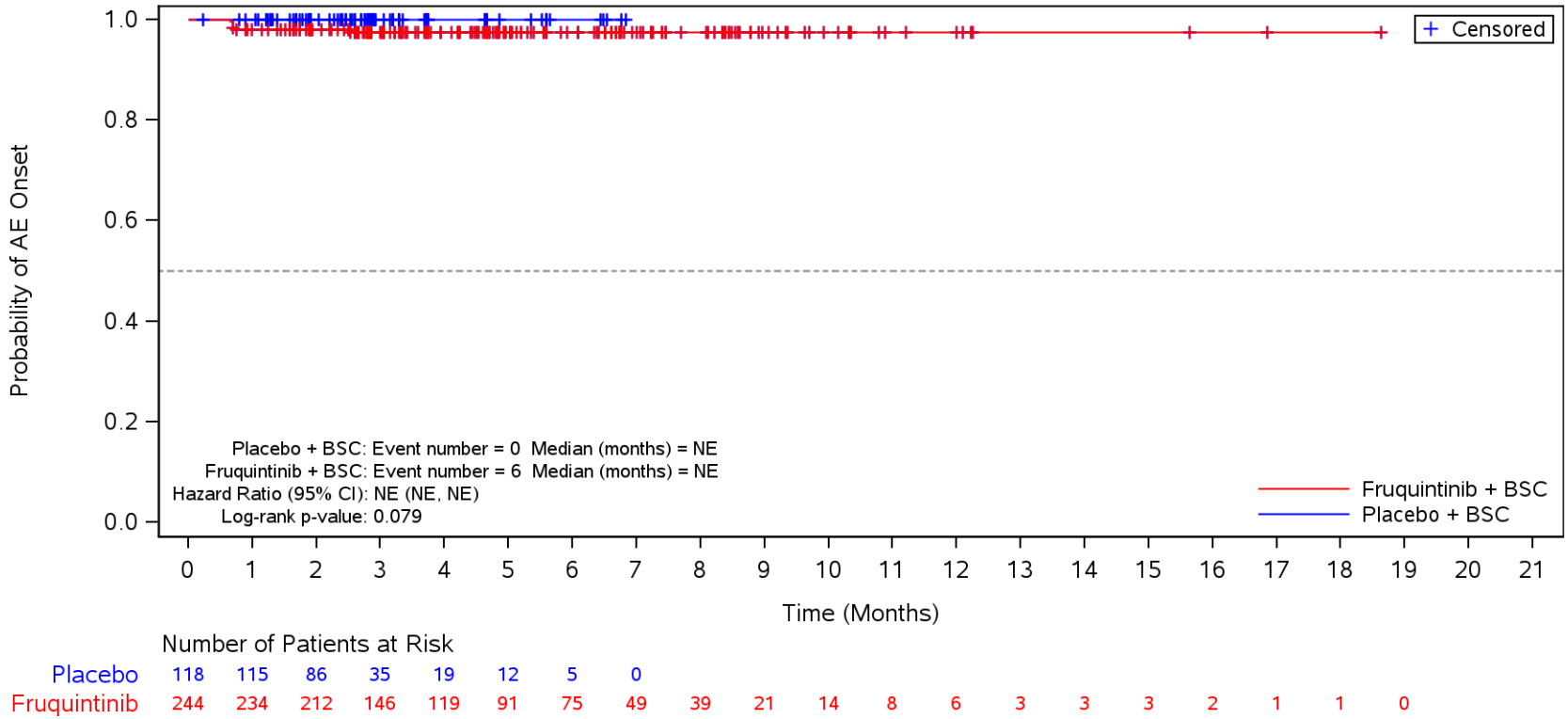
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**
<65 years



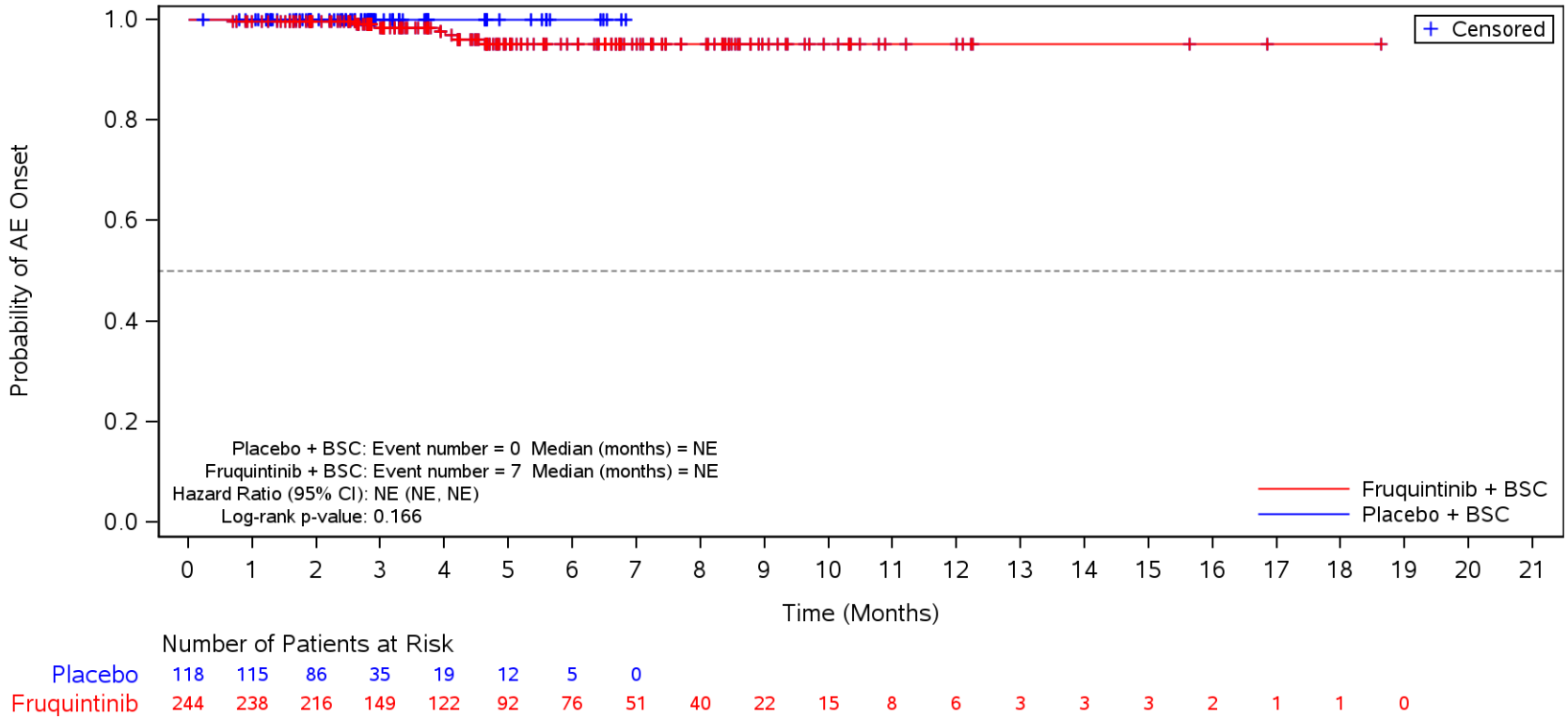
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
<65 years



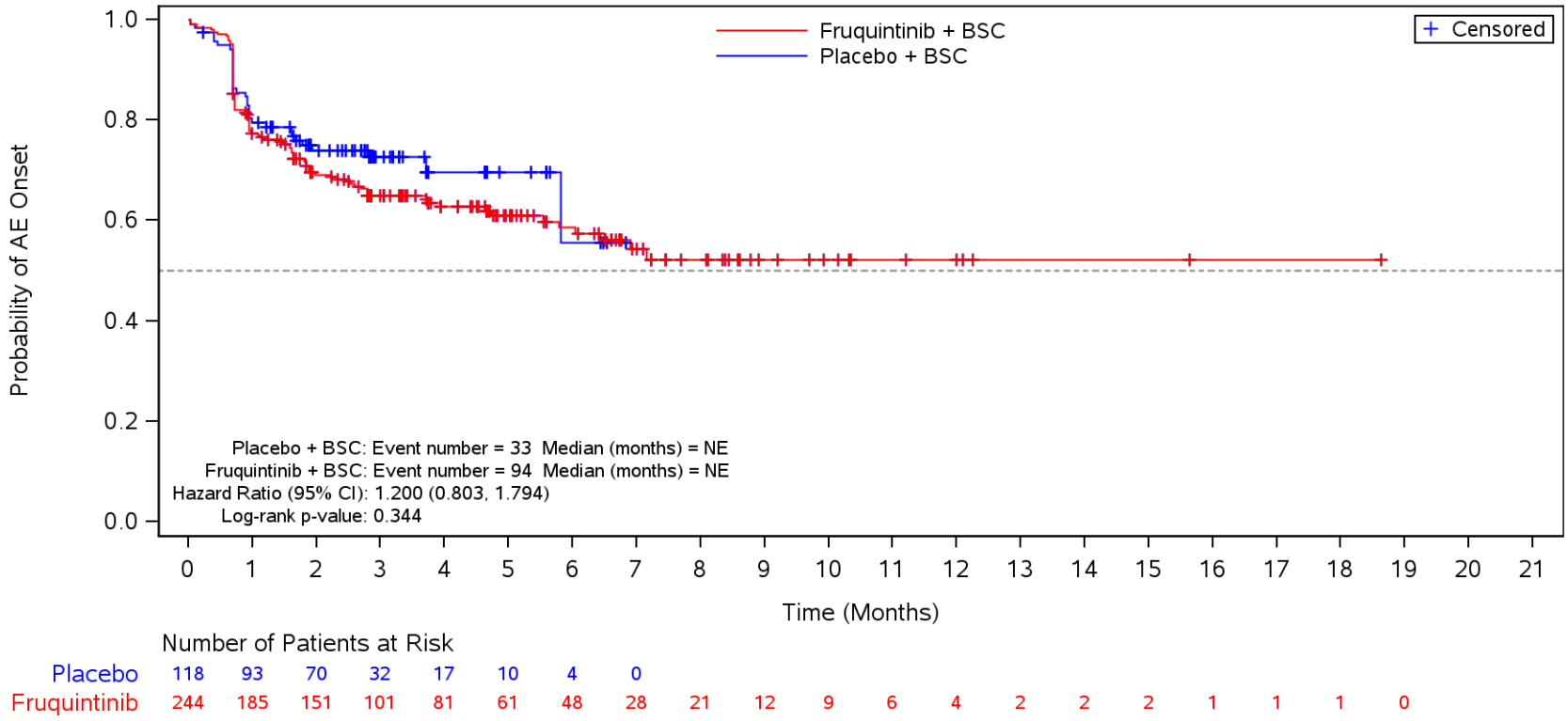
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
<65 years



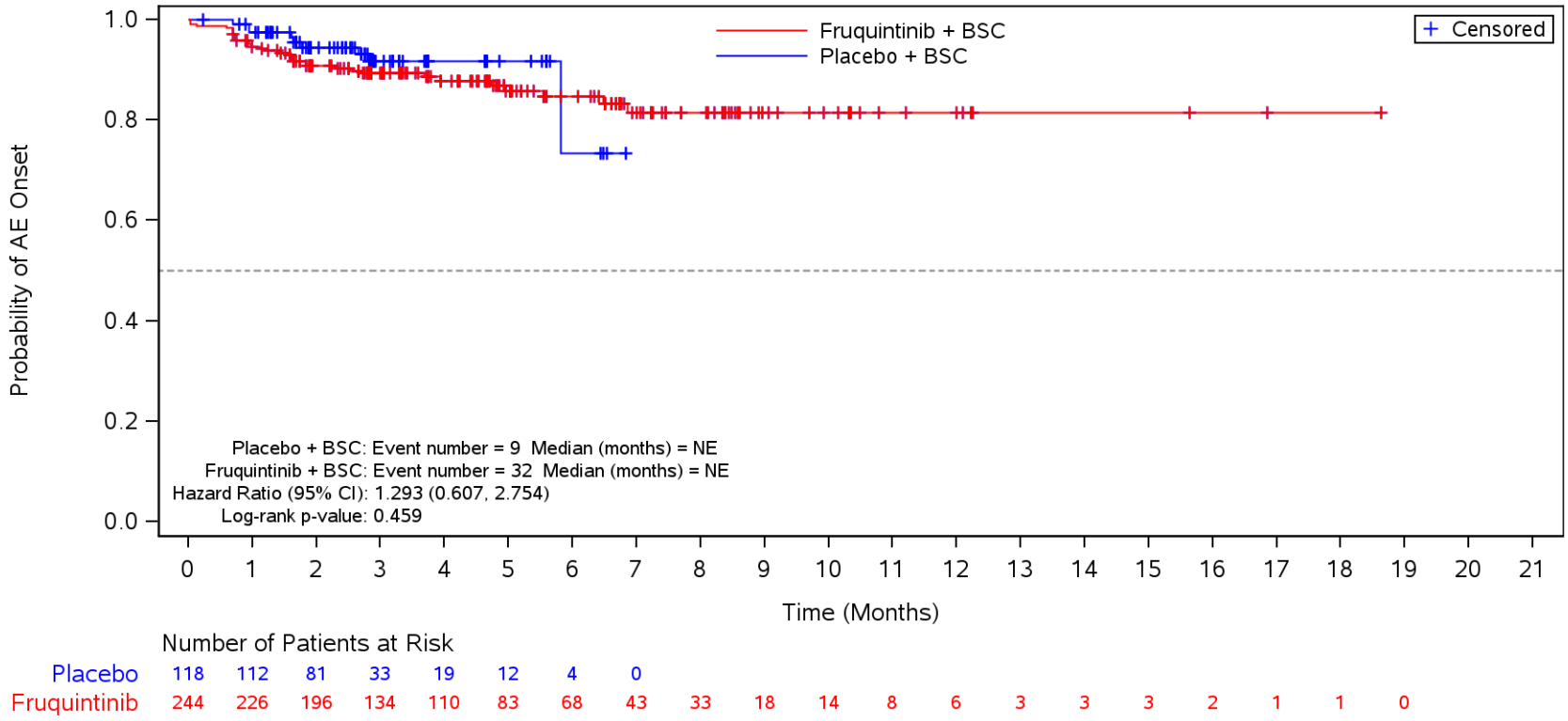
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations**
<65 years



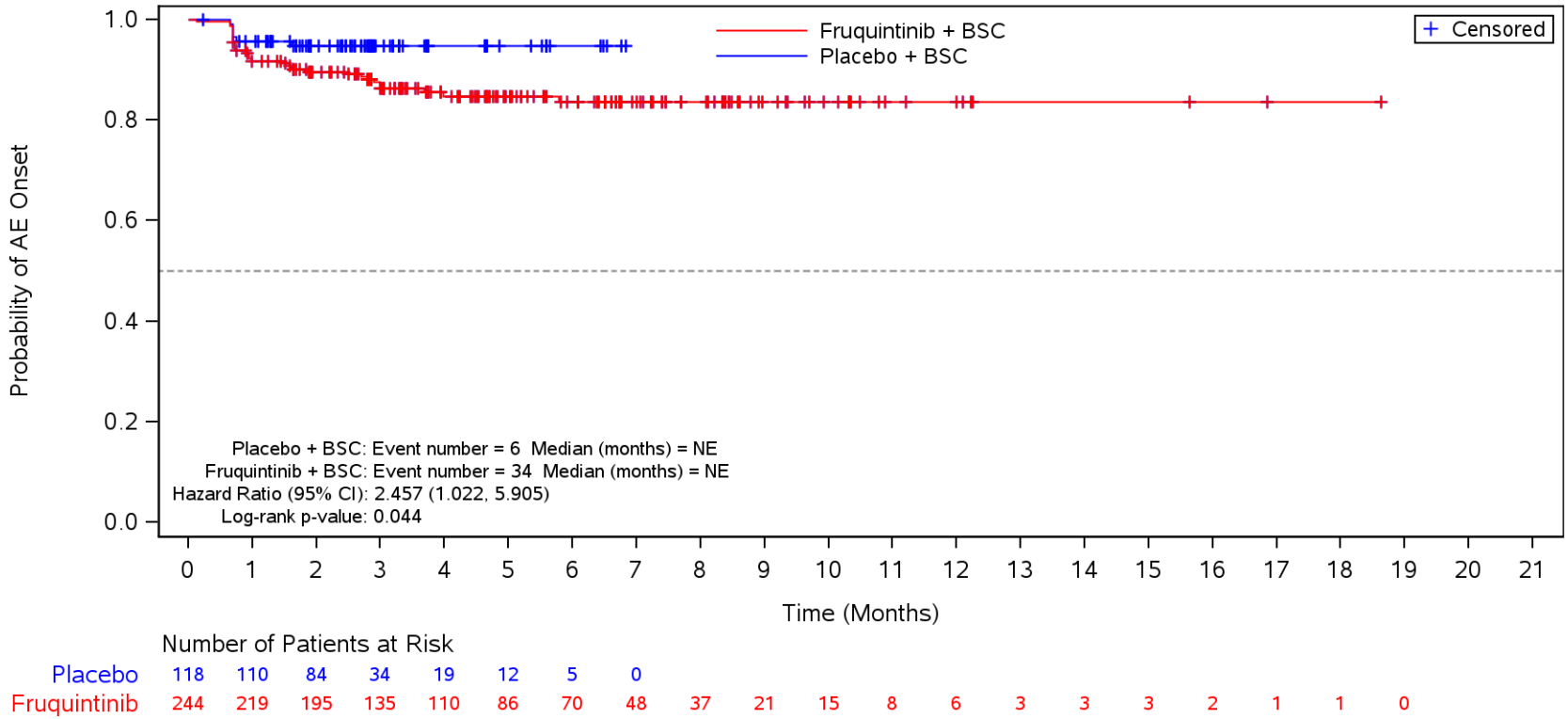
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
<65 years



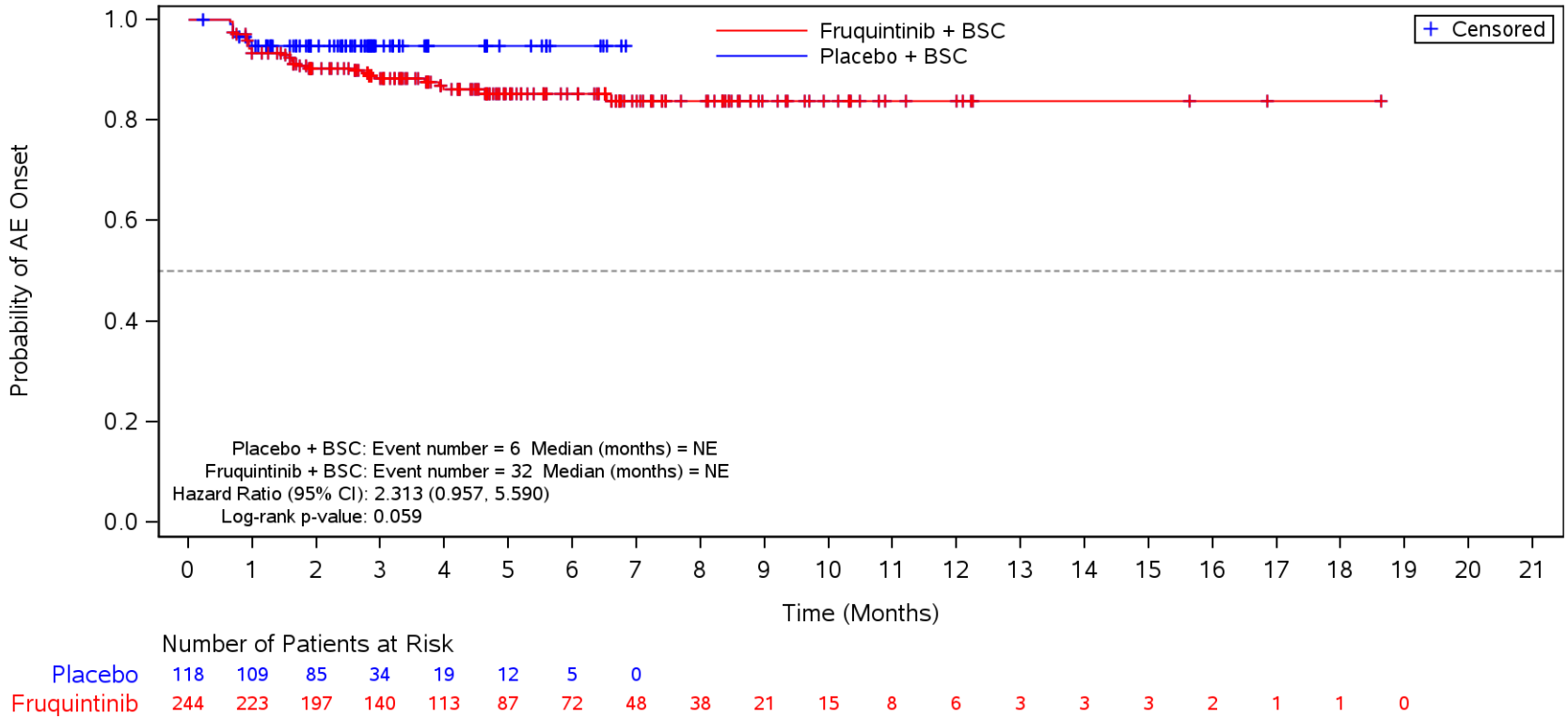
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
<65 years



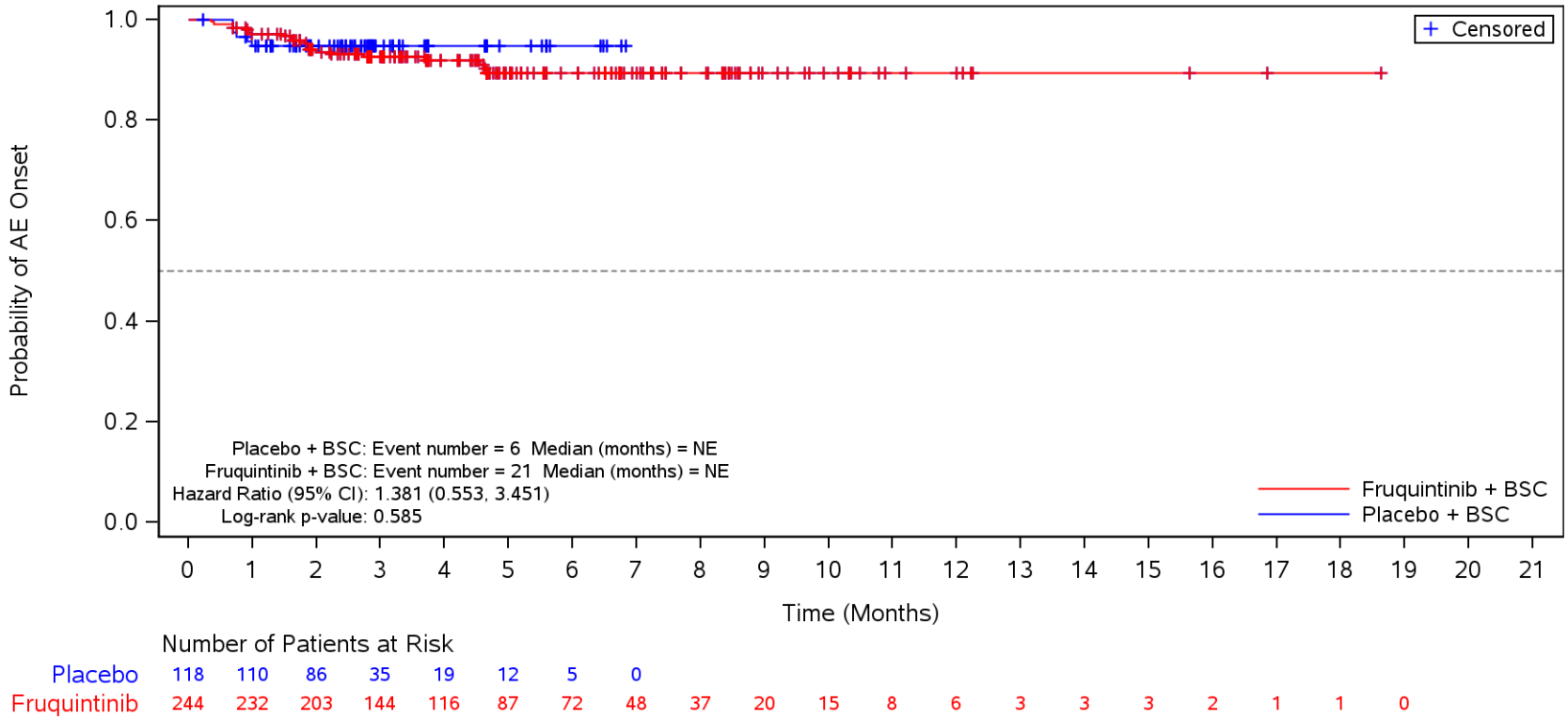
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
<65 years



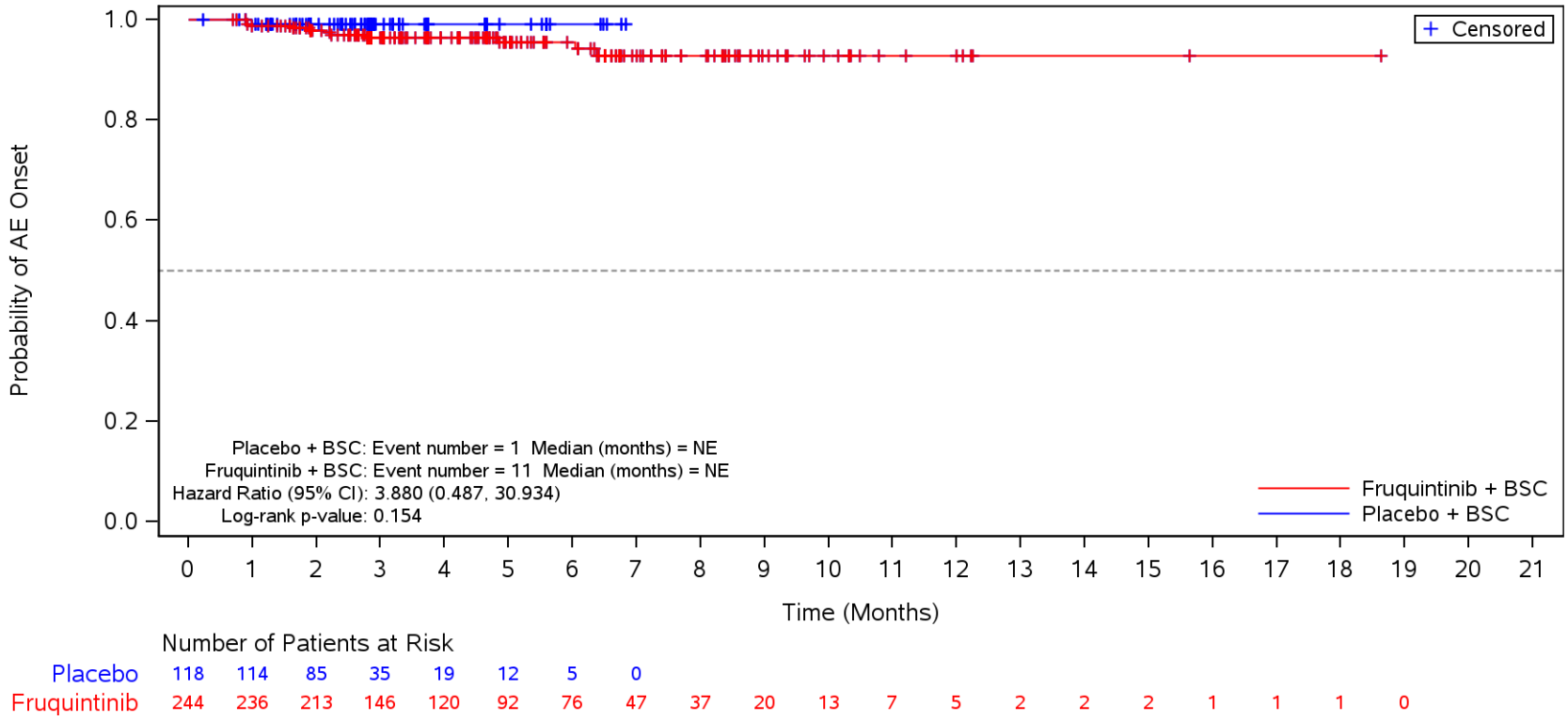
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
<65 years



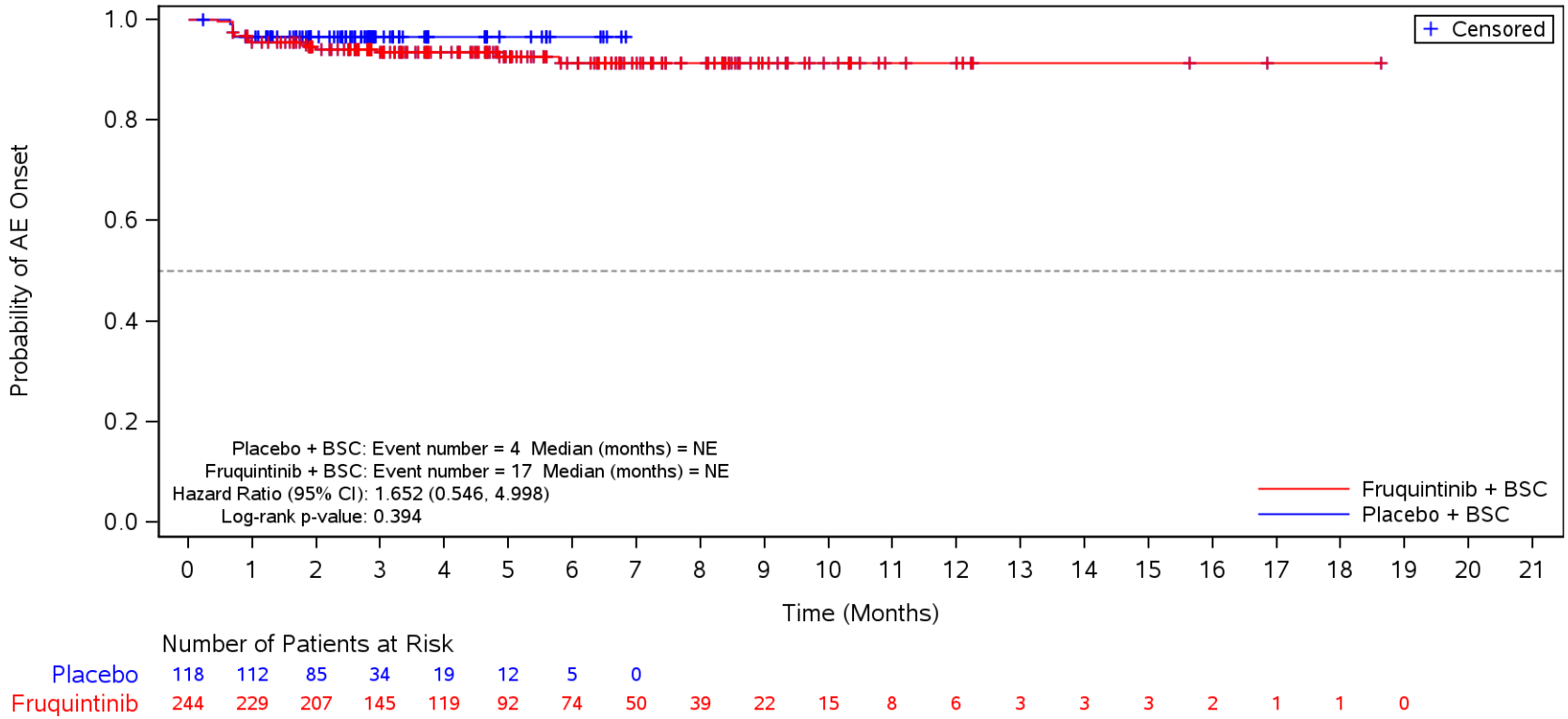
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
<65 years



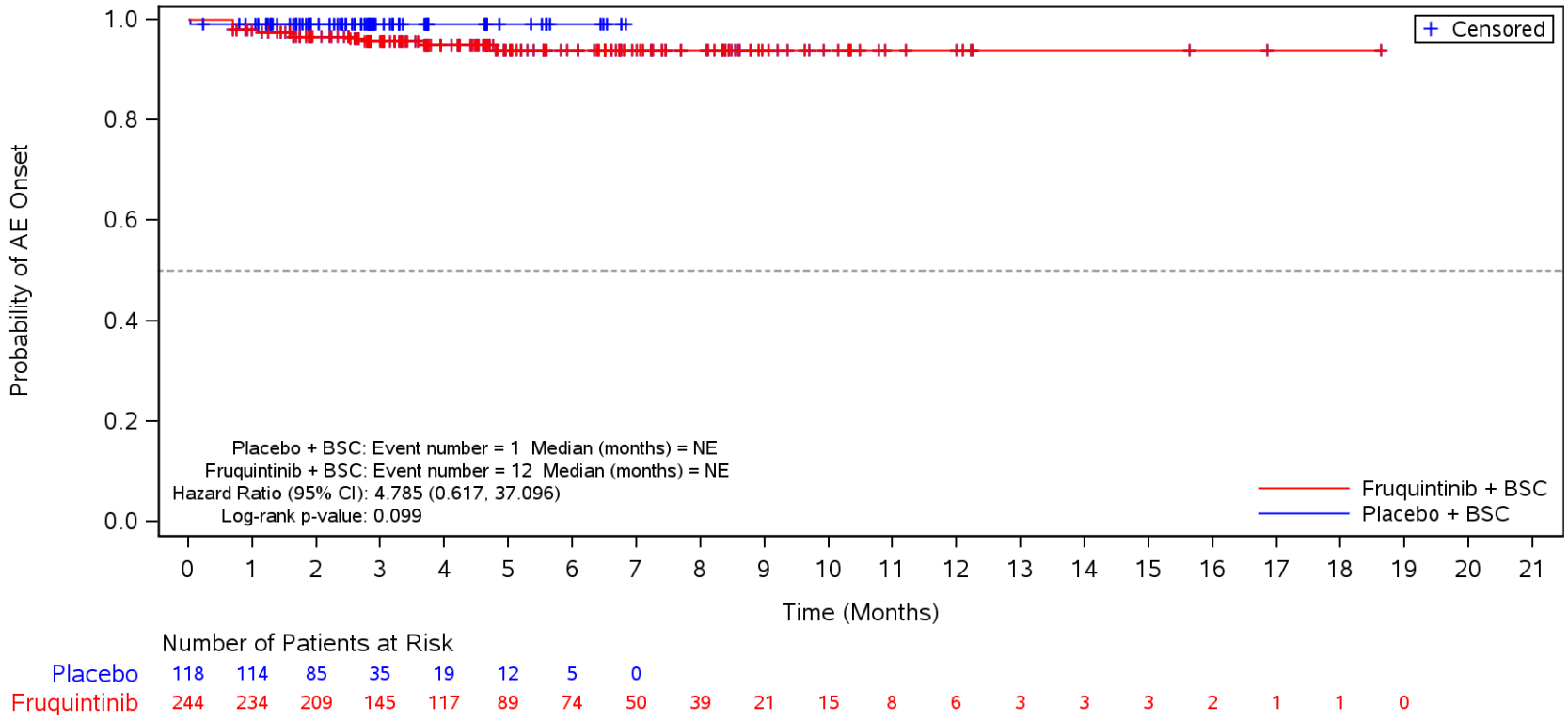
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
<65 years



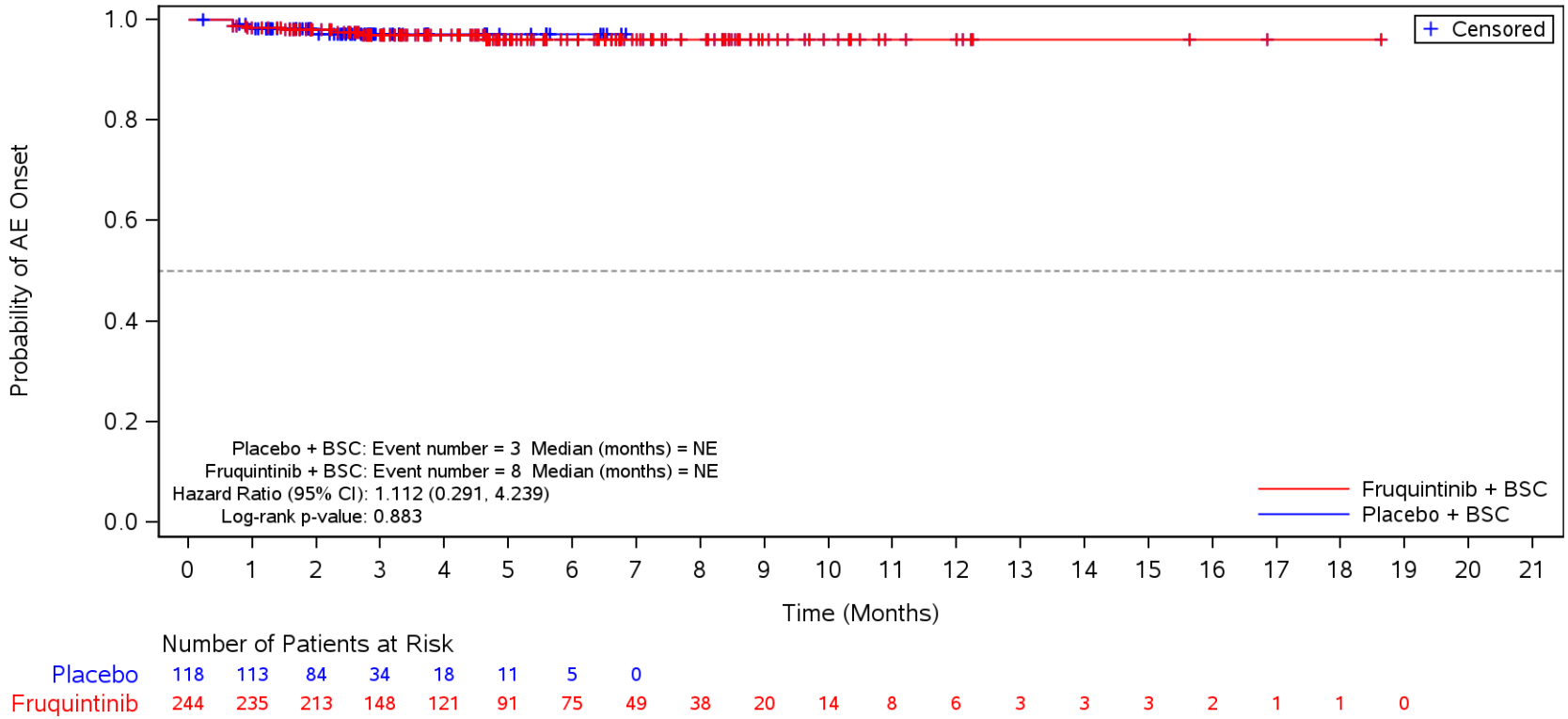
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
<65 years



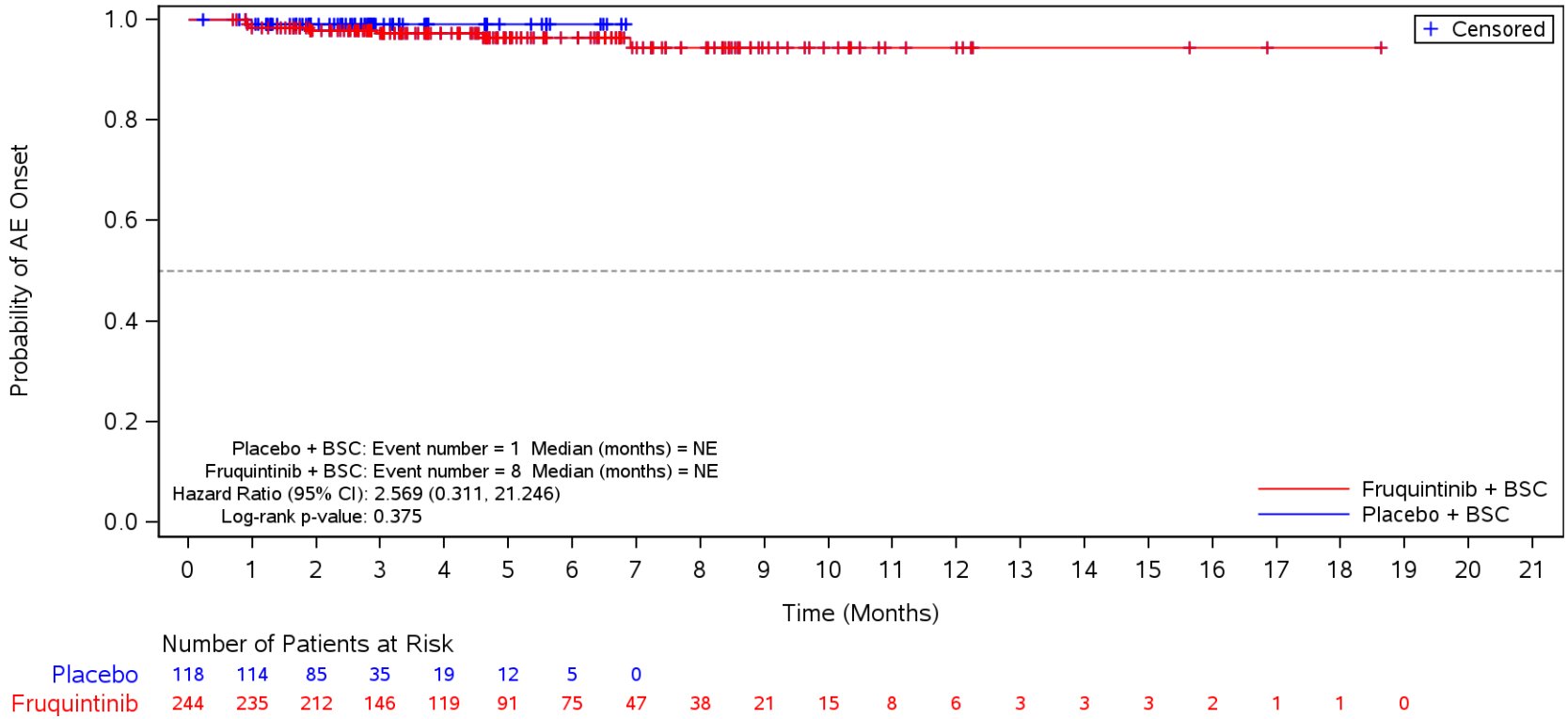
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
<65 years



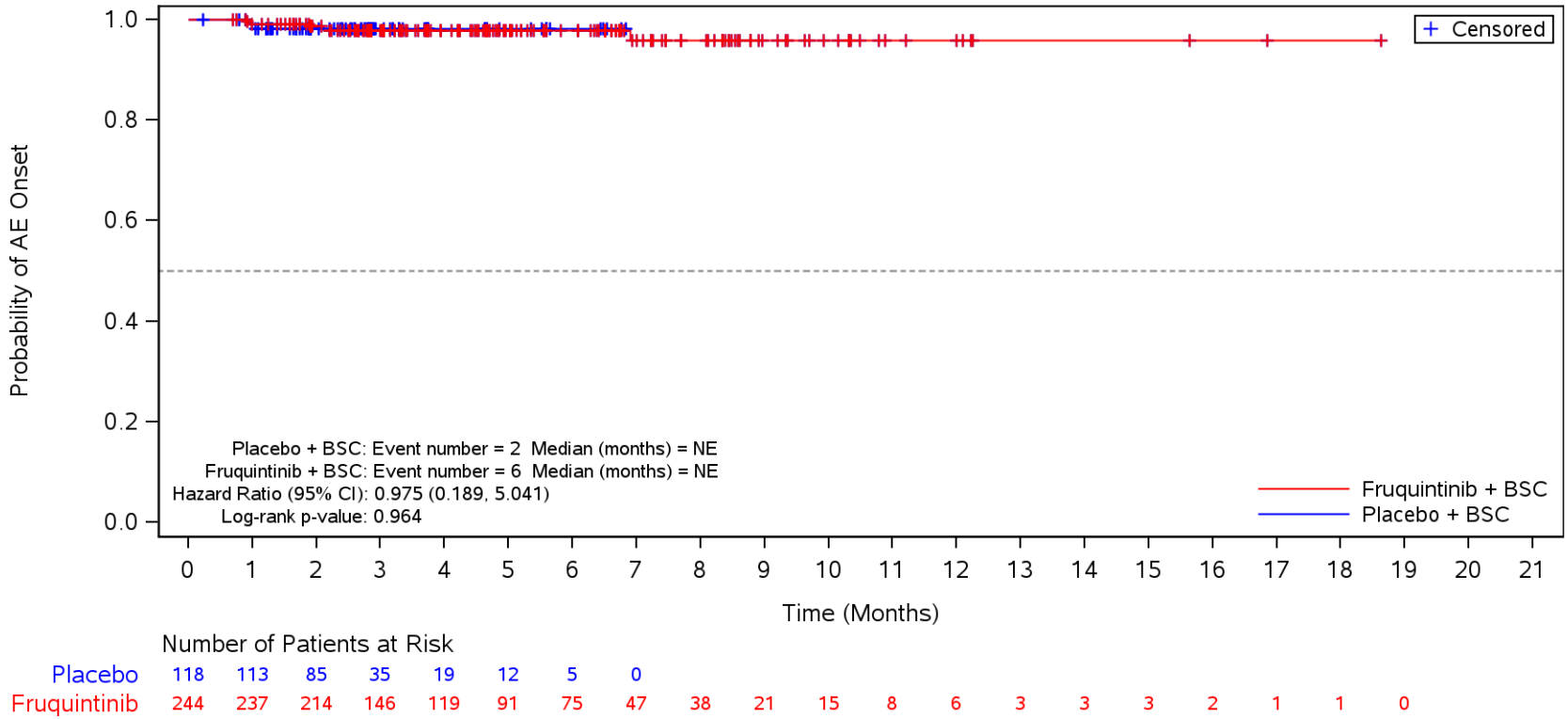
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
<65 years



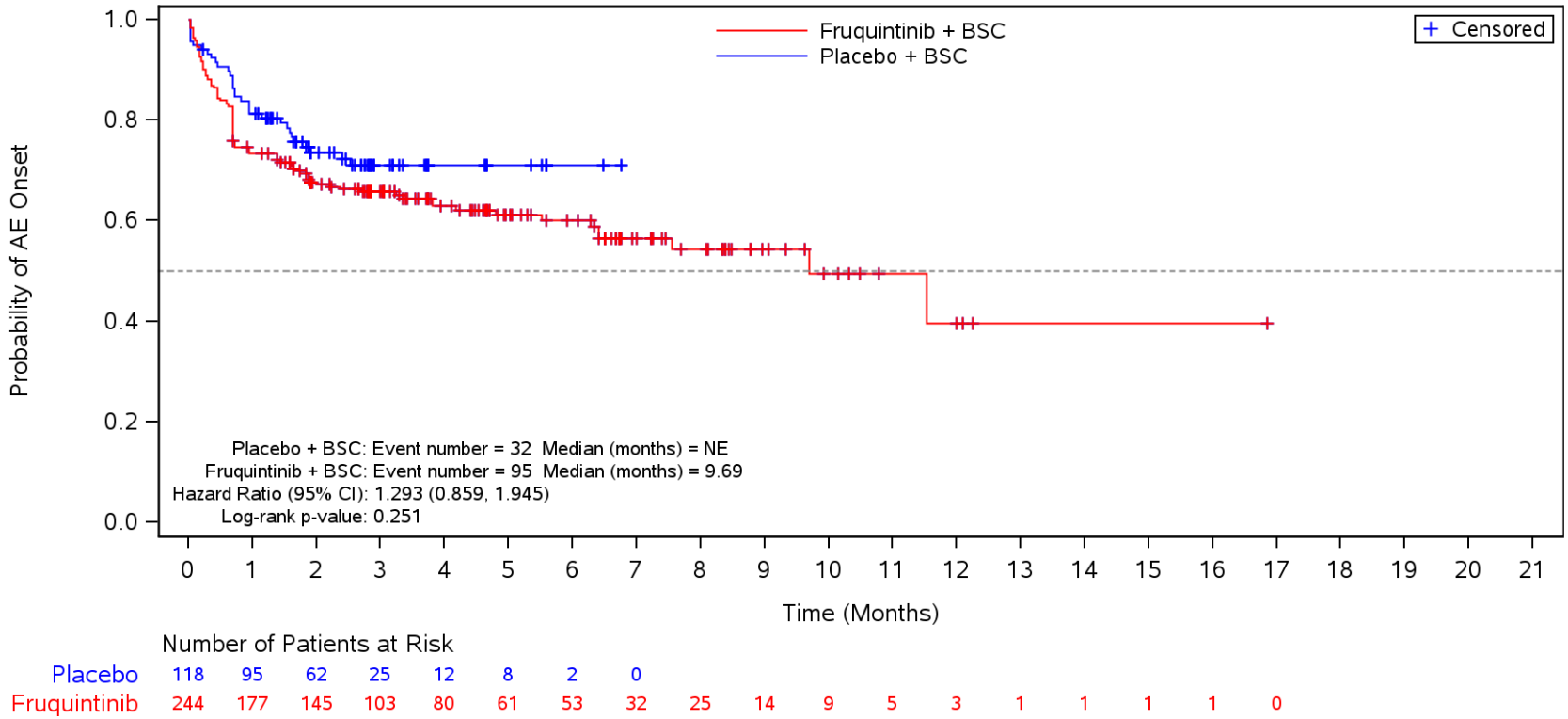
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
<65 years



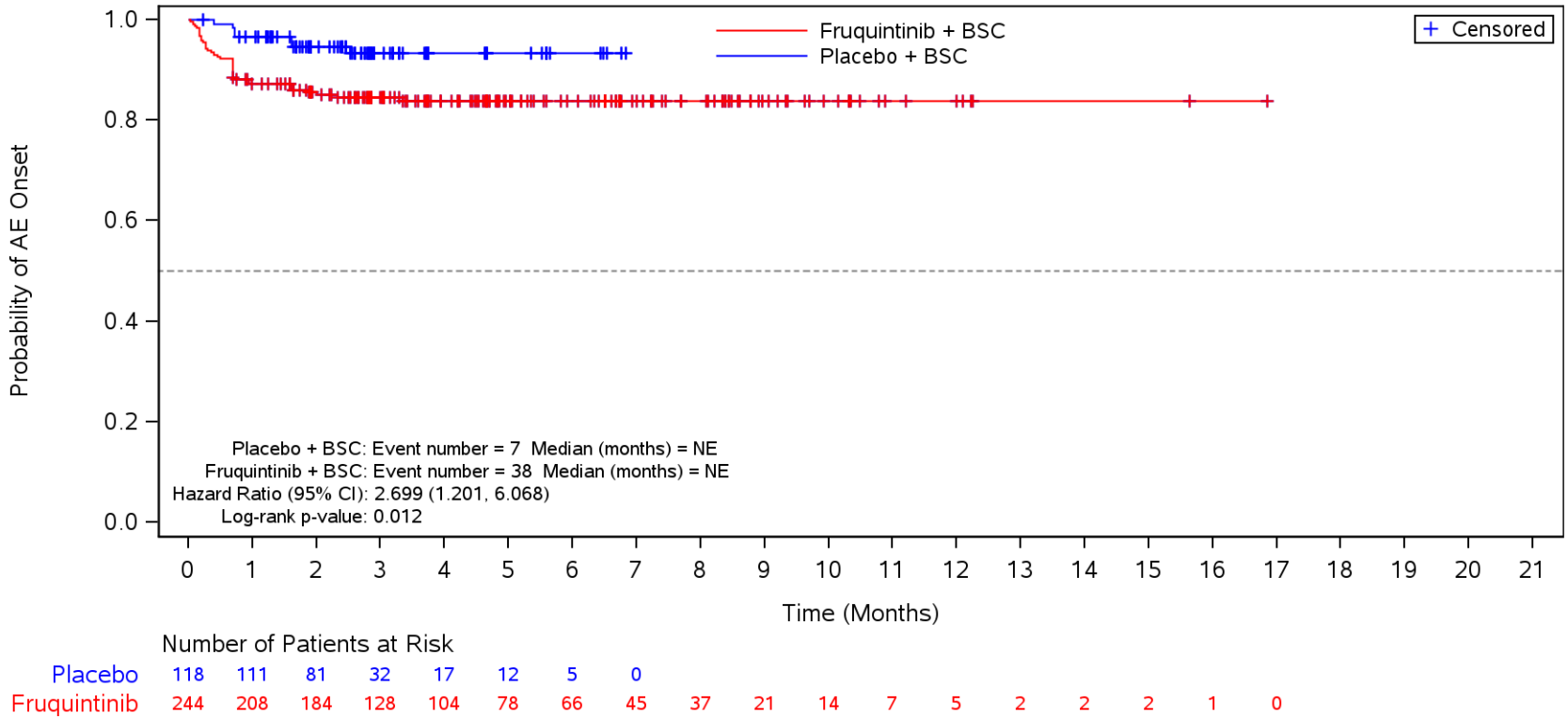
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
<65 years



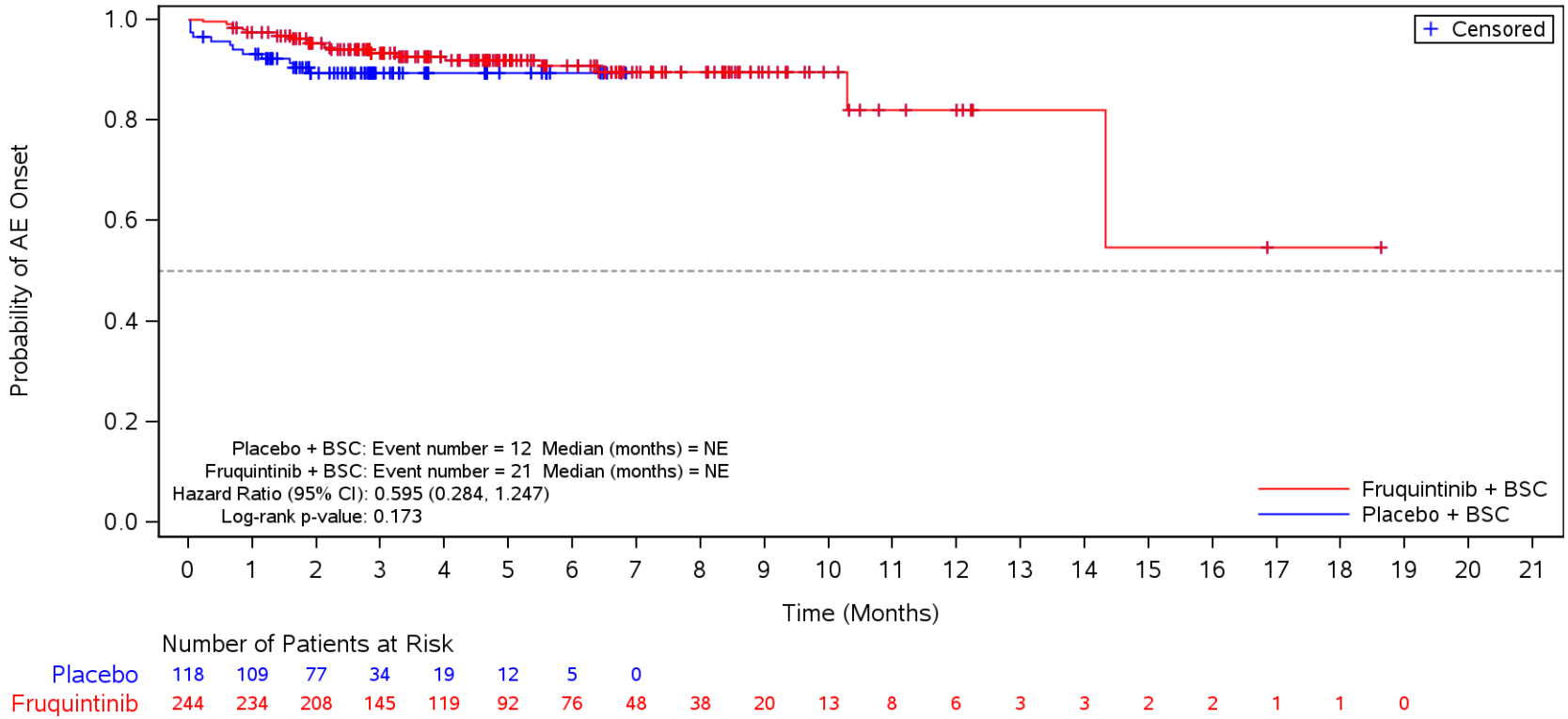
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
<65 years



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
<65 years

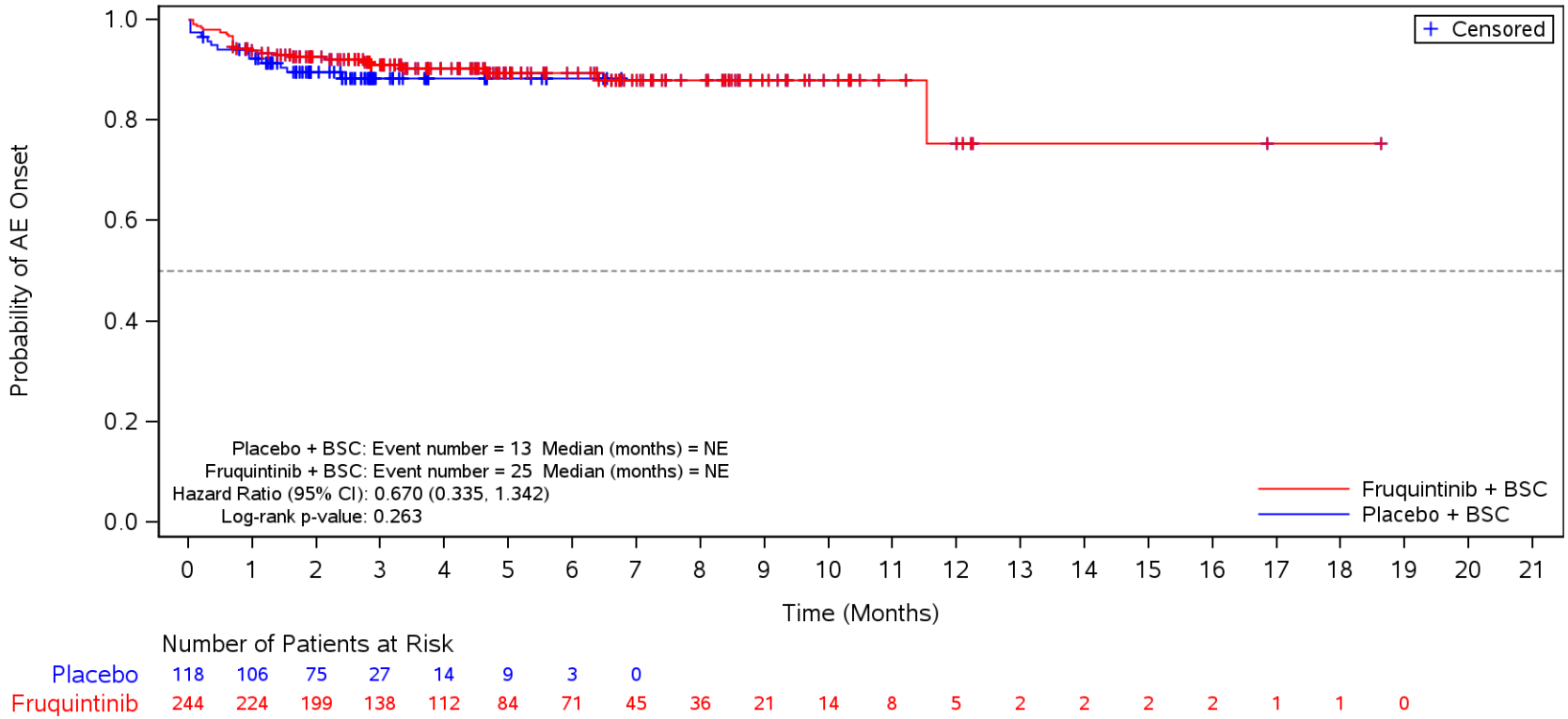


Number of Patients at Risk

Placebo	118	109	77	34	19	12	5	0												
Fruquintinib	244	234	208	145	119	92	76	48	38	20	13	8	6	3	3	2	2	1	1	0

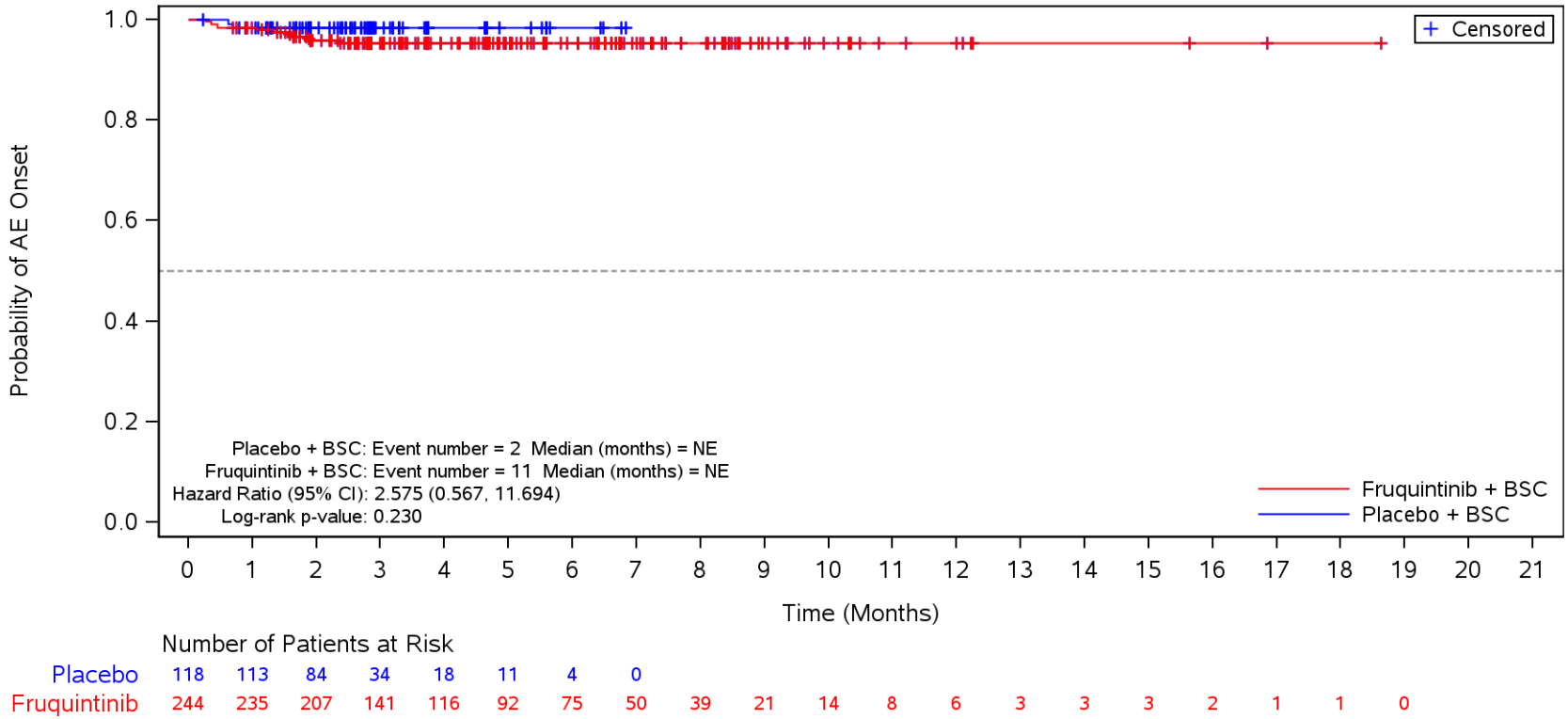
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
<65 years



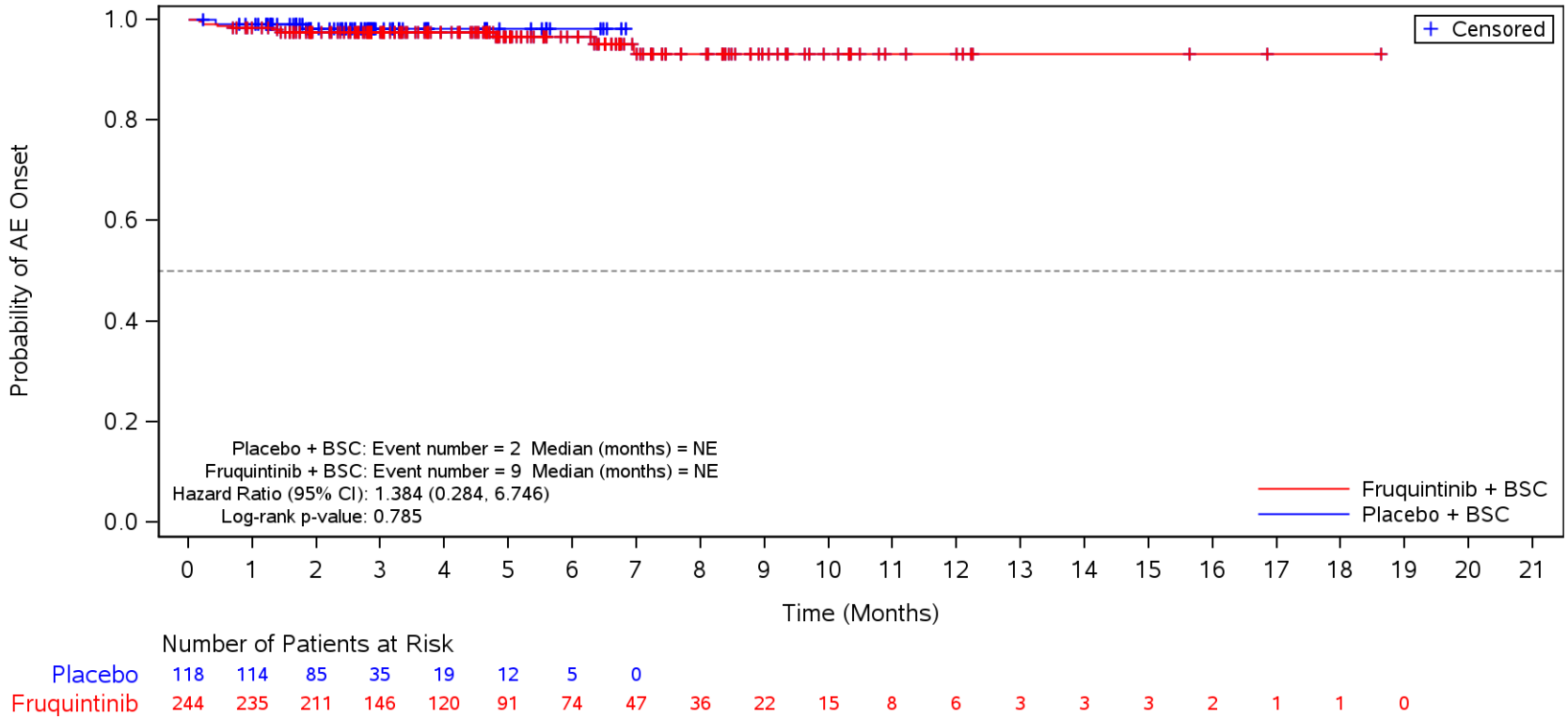
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
<65 years



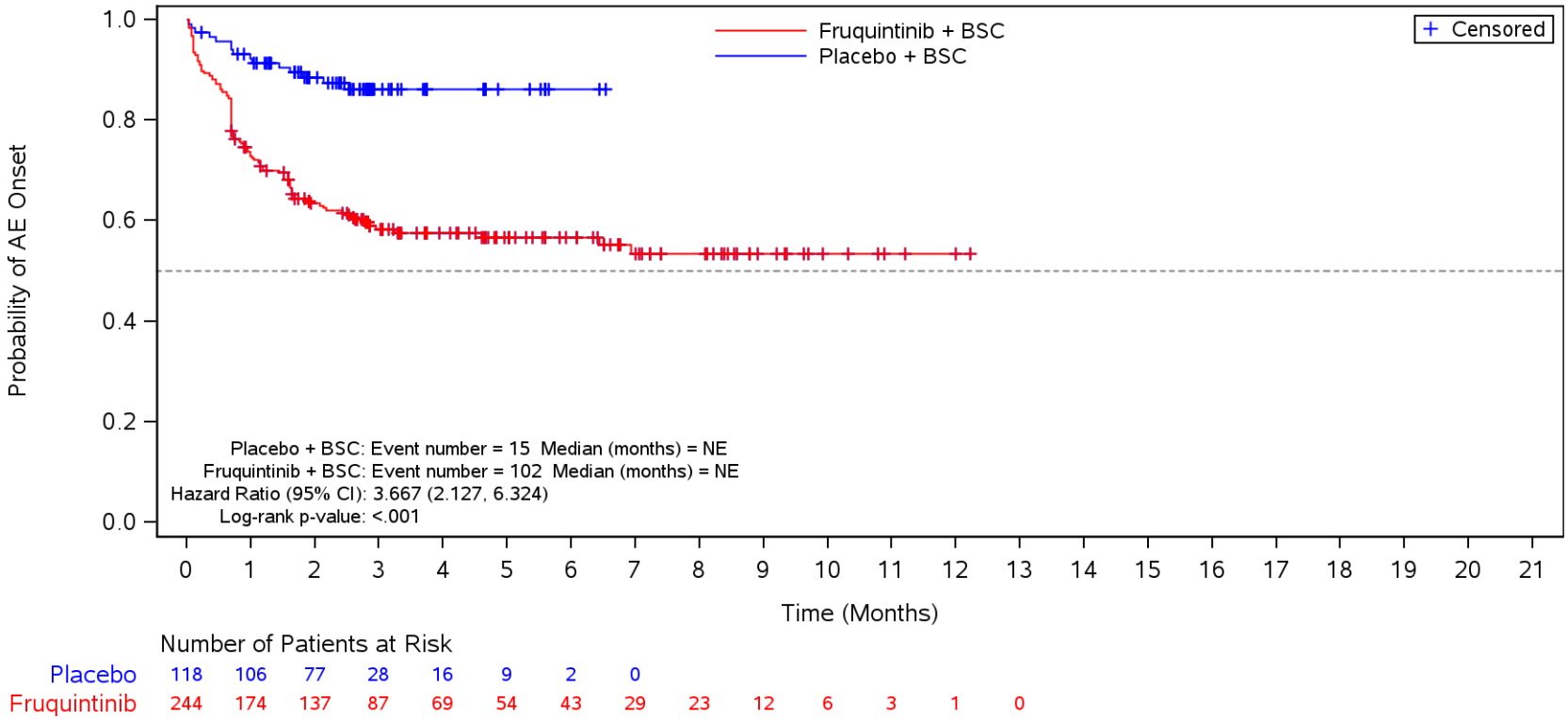
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
<65 years



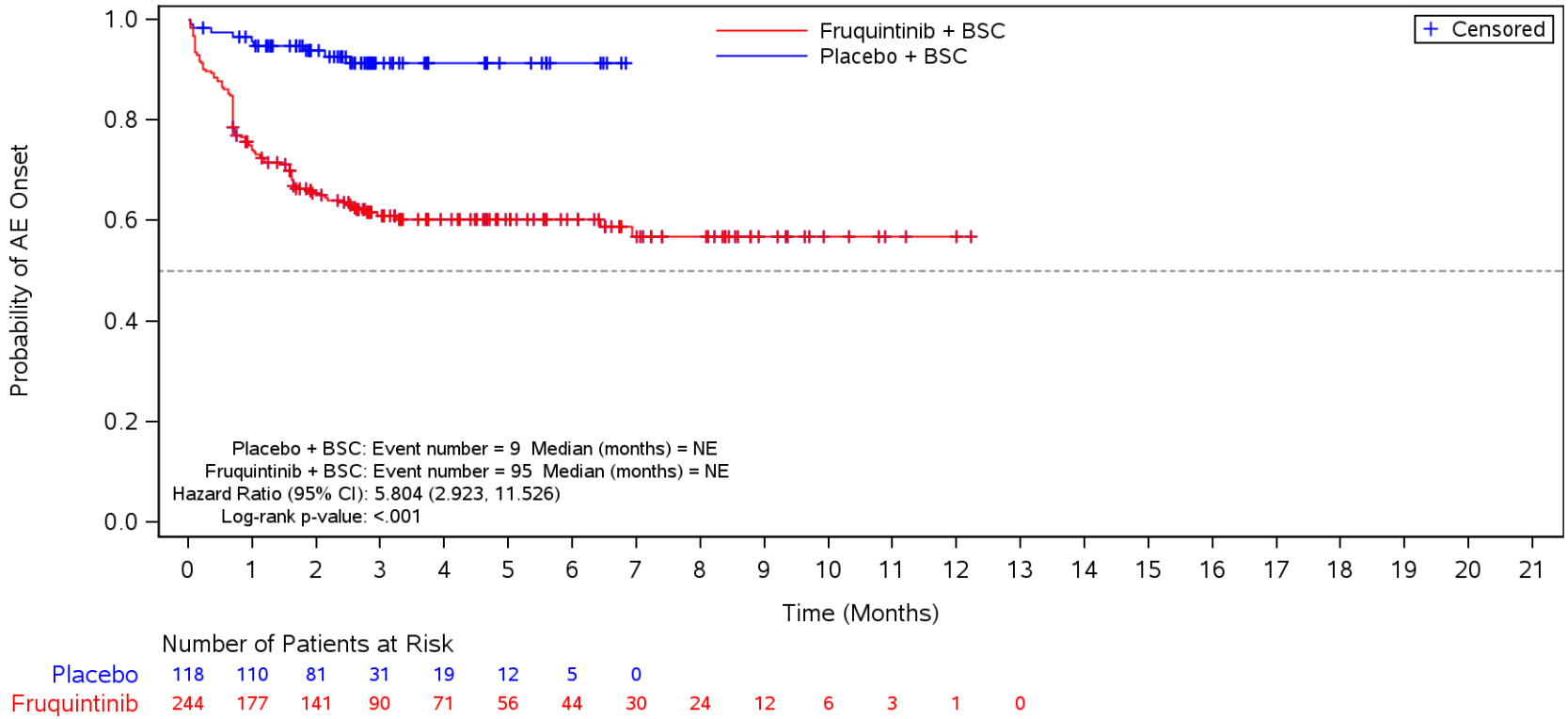
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Vascular disorders**
<65 years



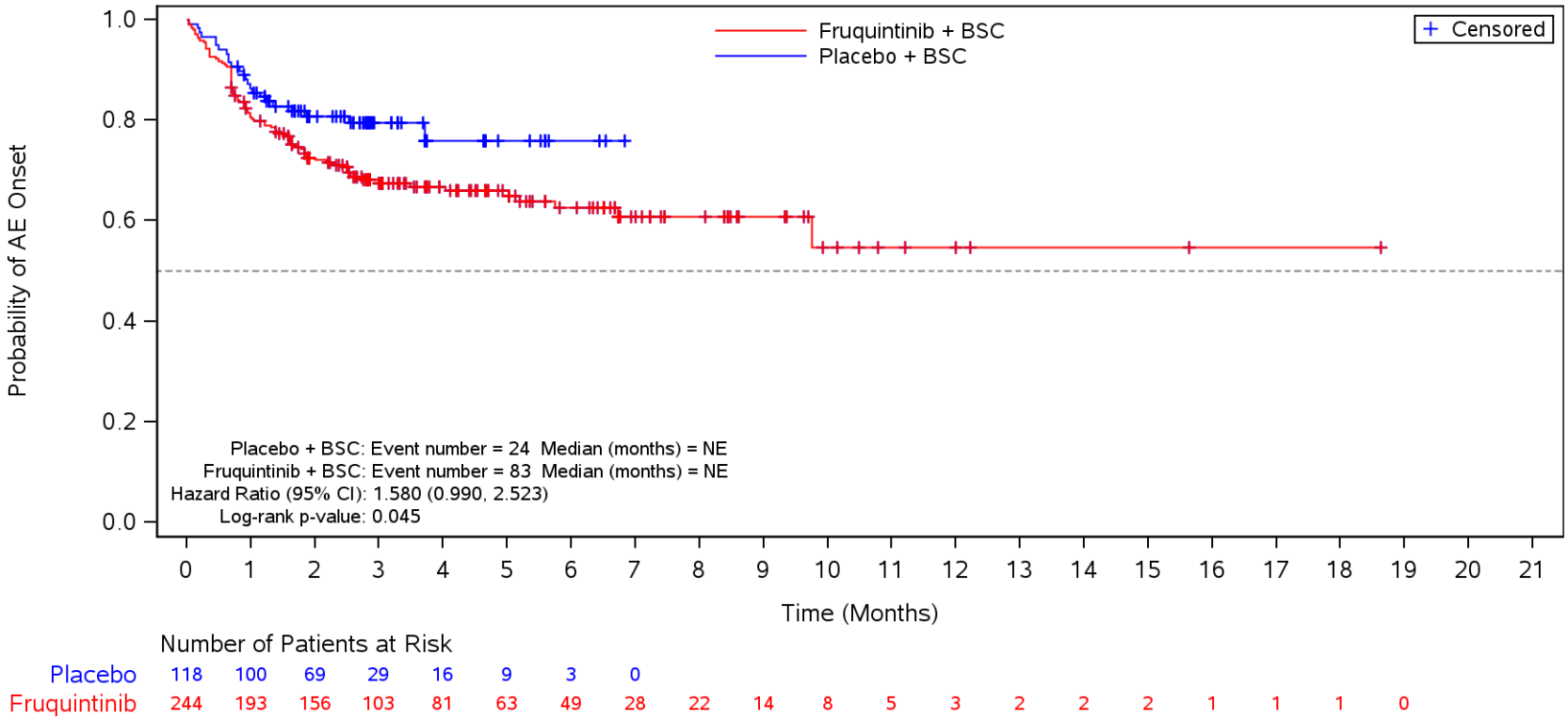
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
<65 years



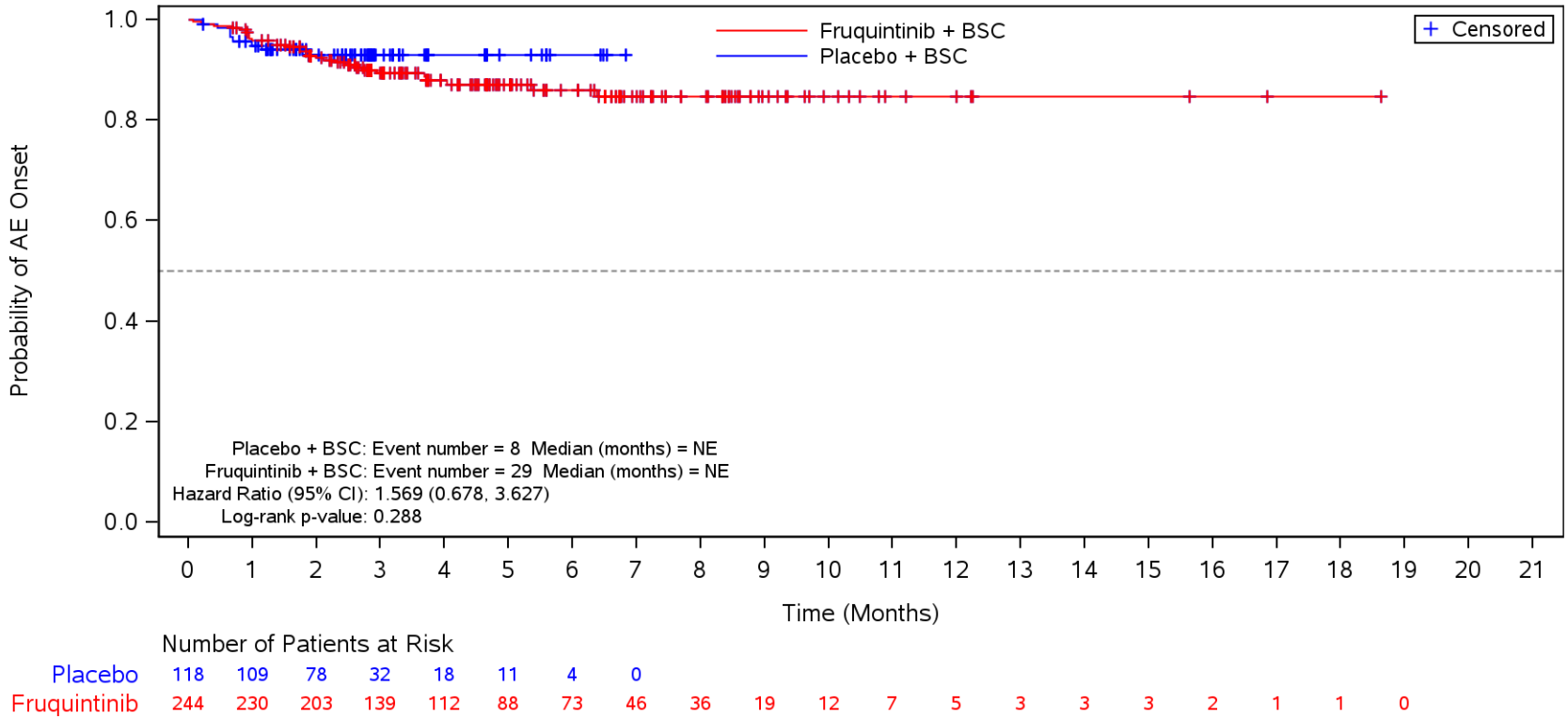
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
<65 years



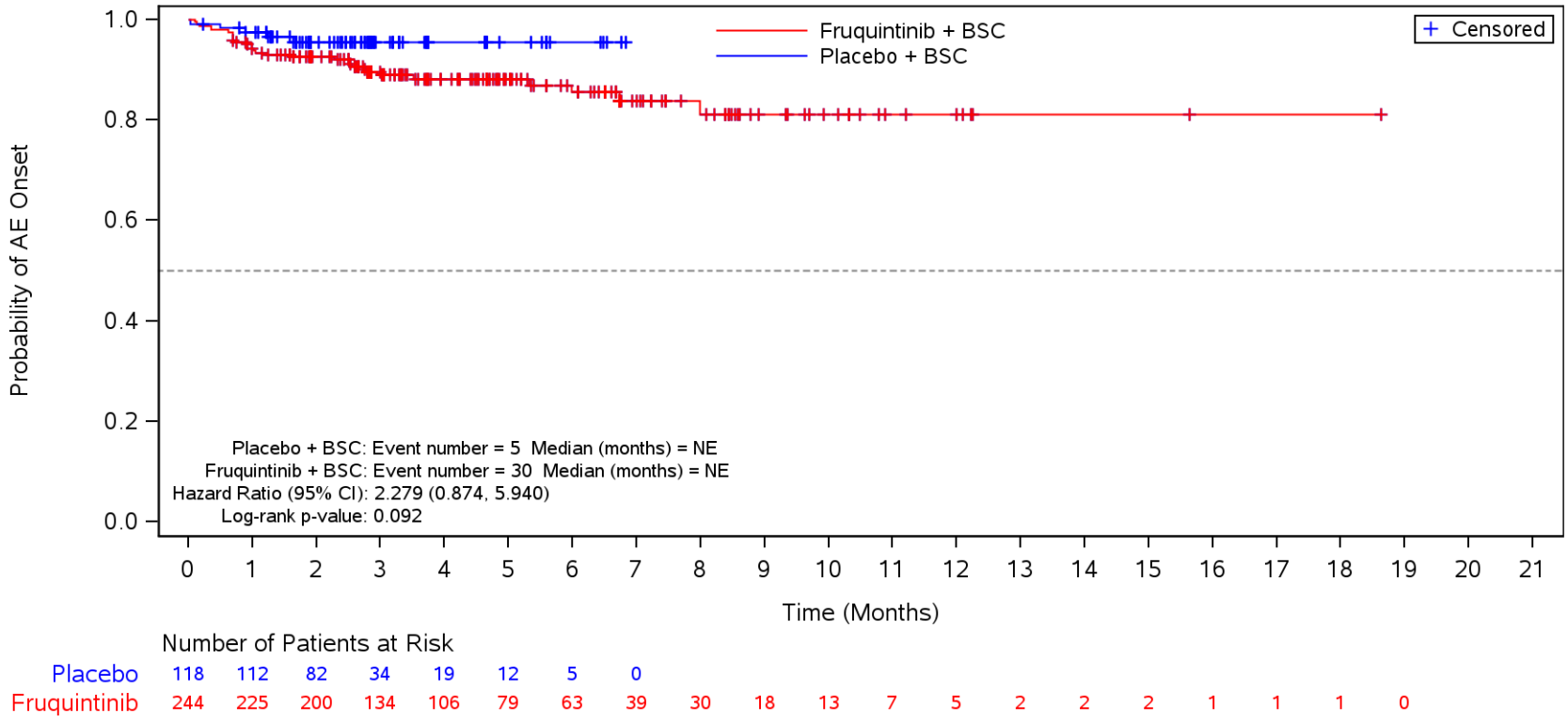
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
<65 years



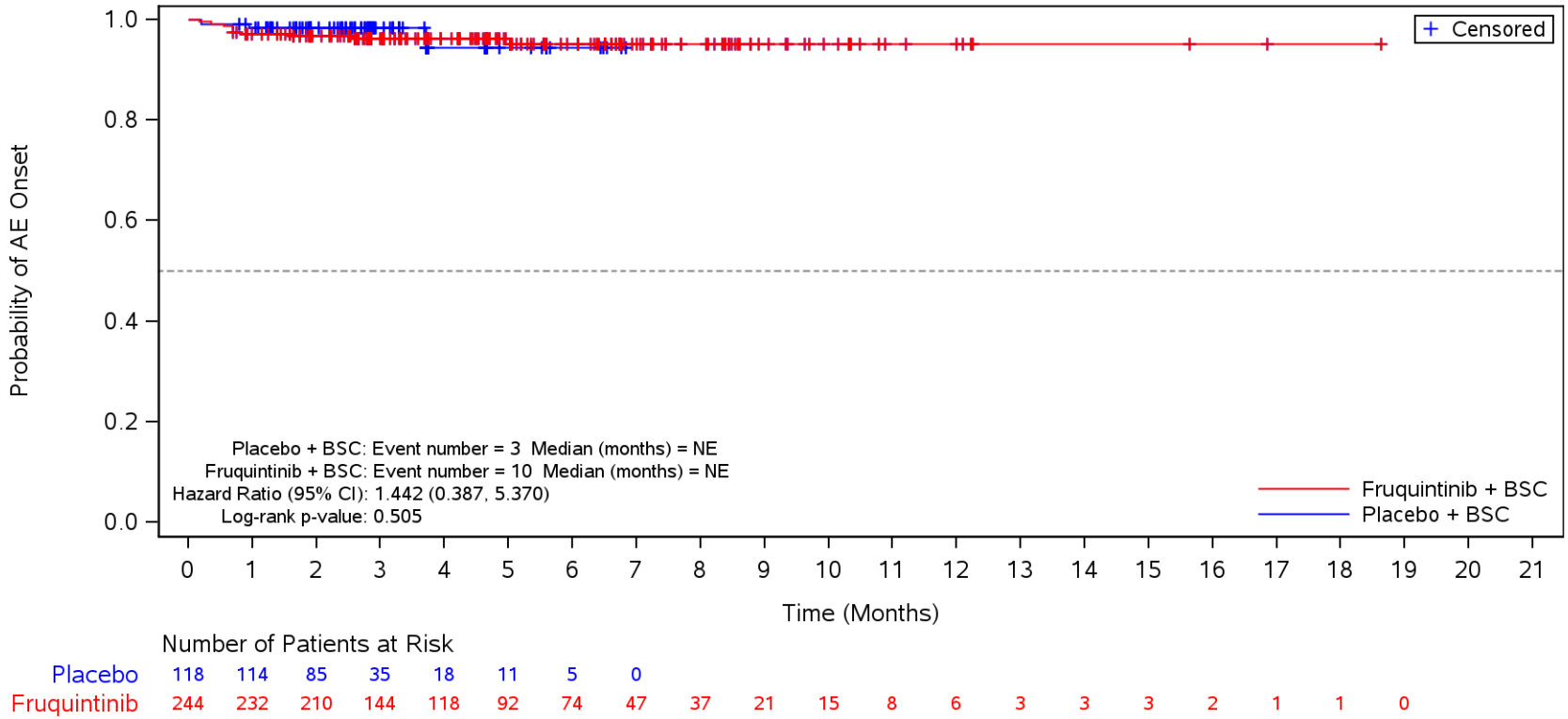
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
<65 years



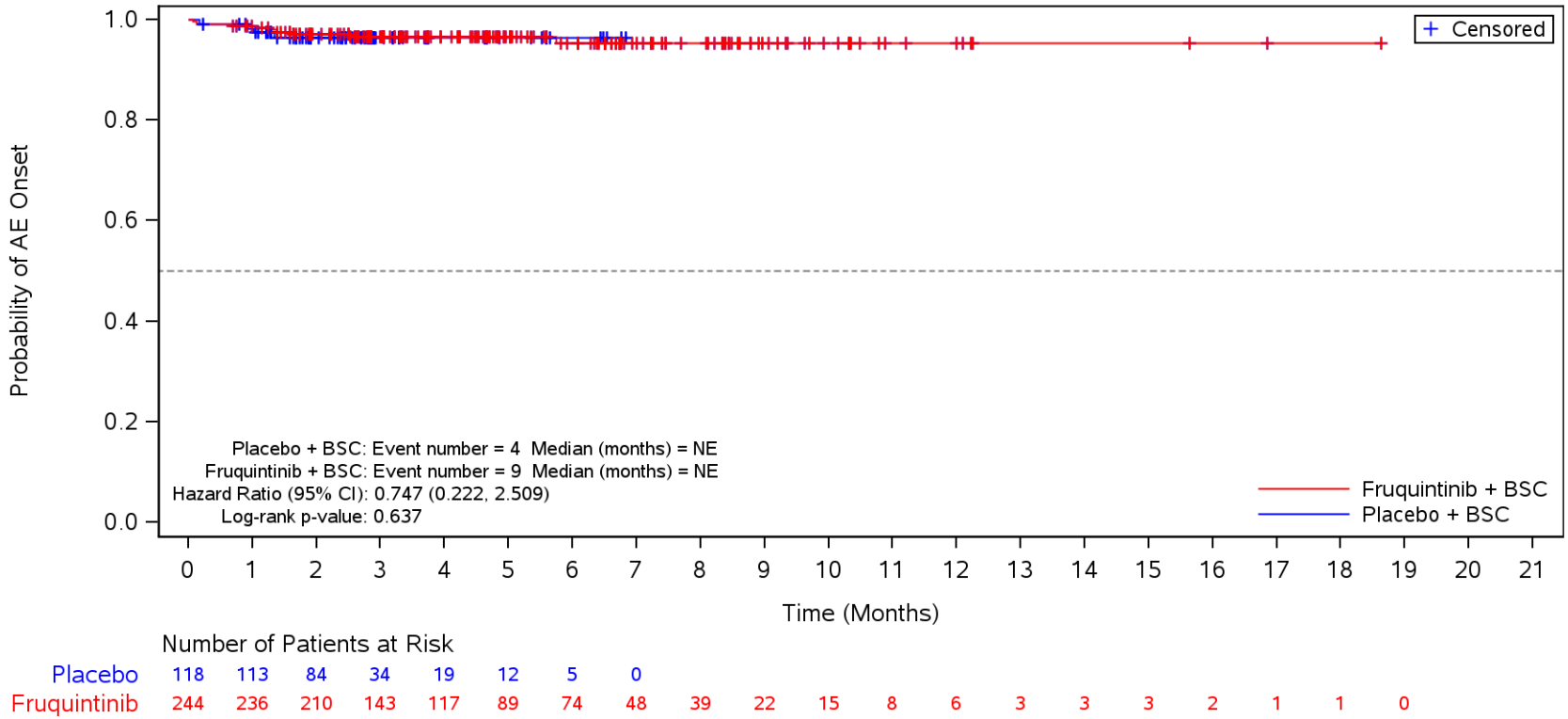
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
<65 years



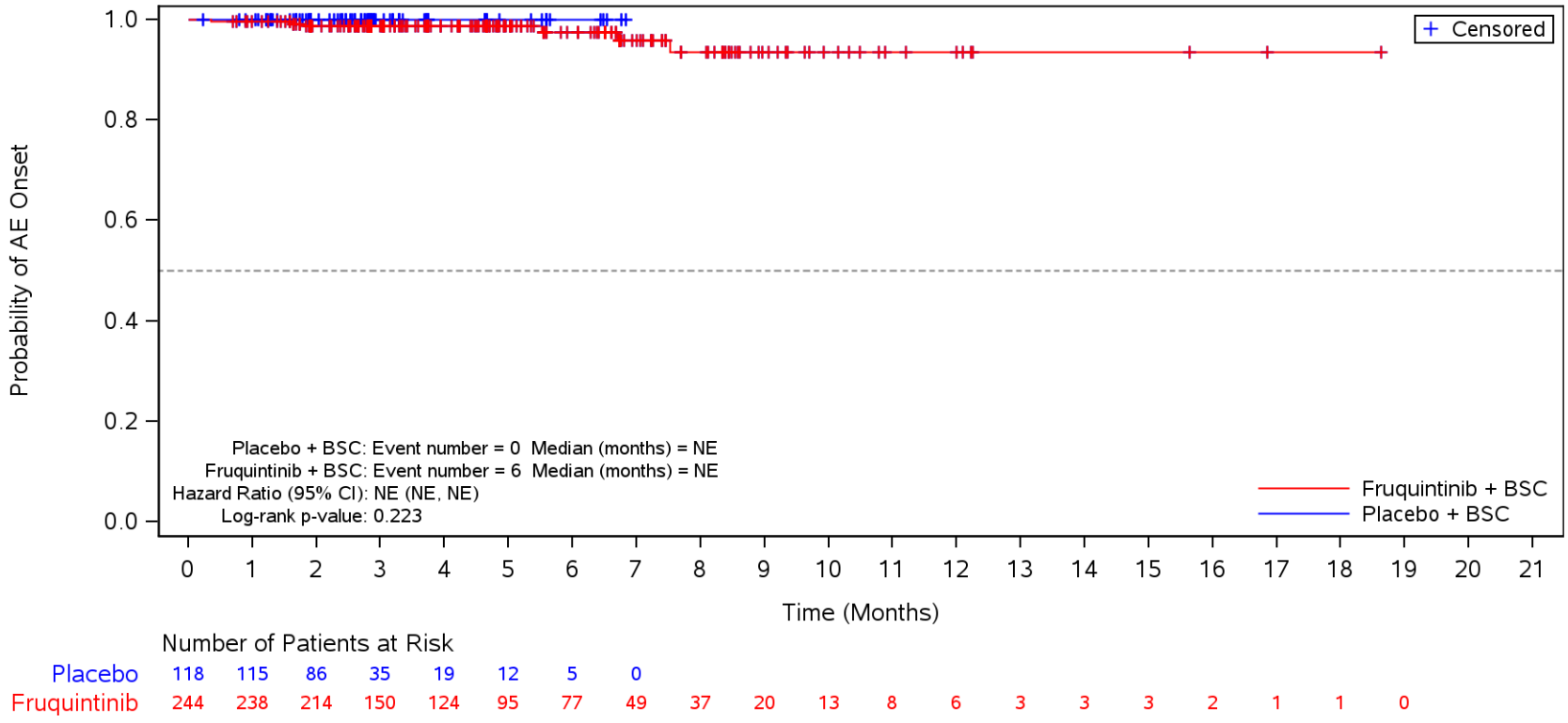
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
<65 years



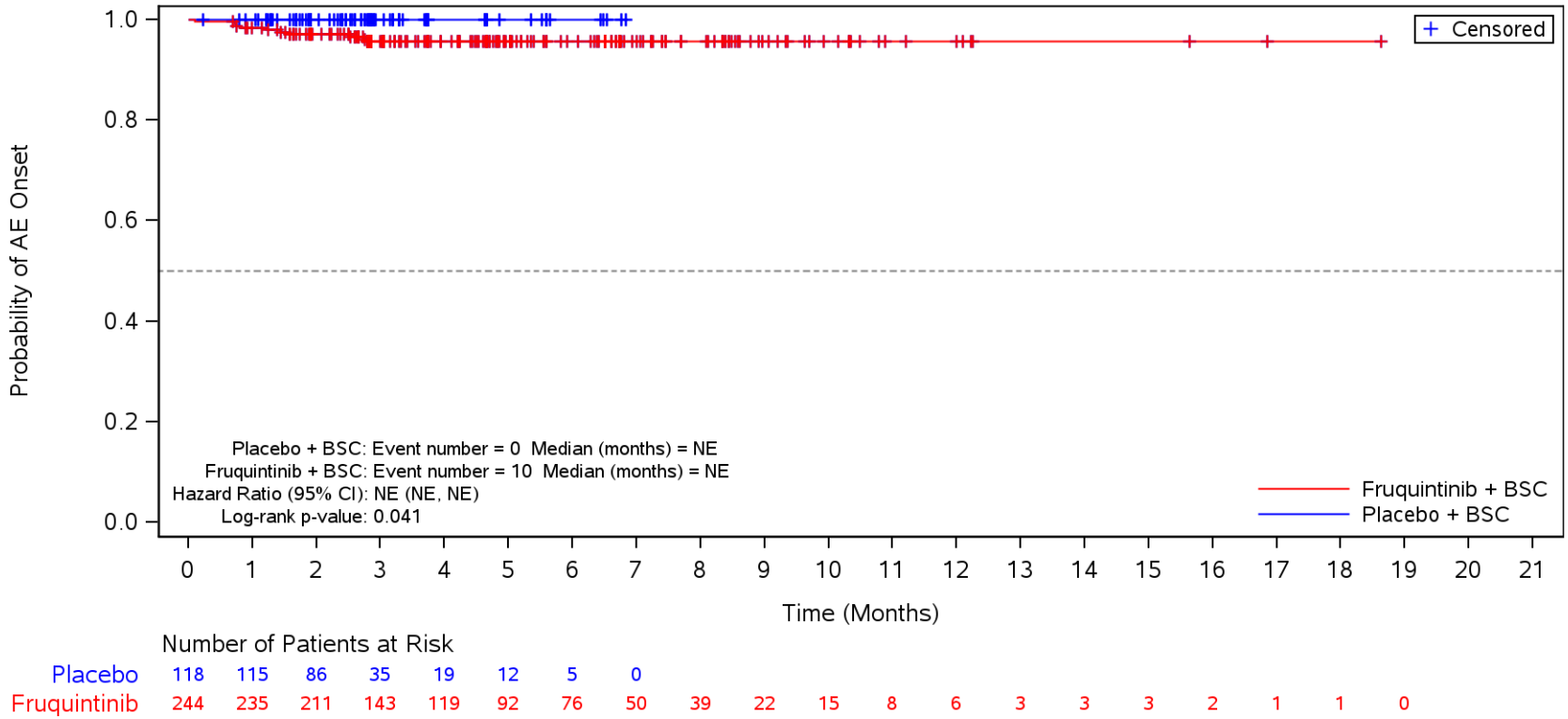
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
<65 years



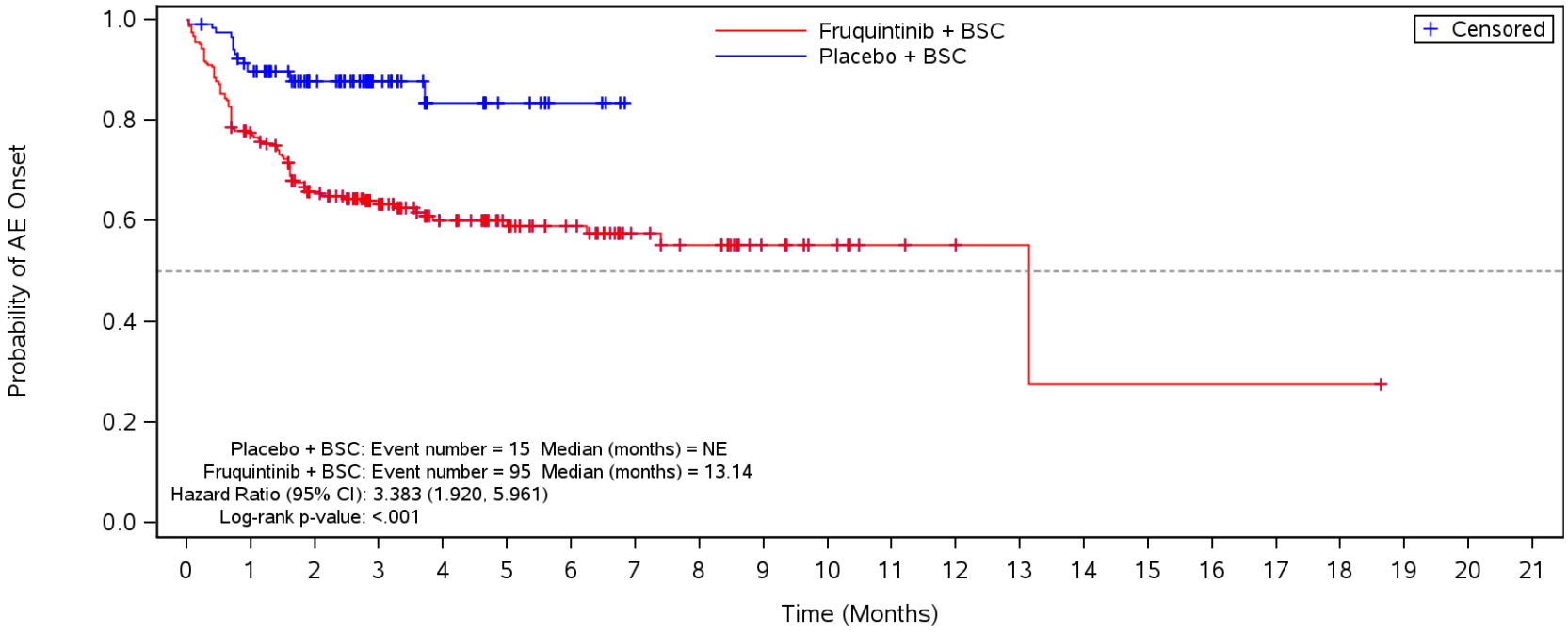
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
<65 years



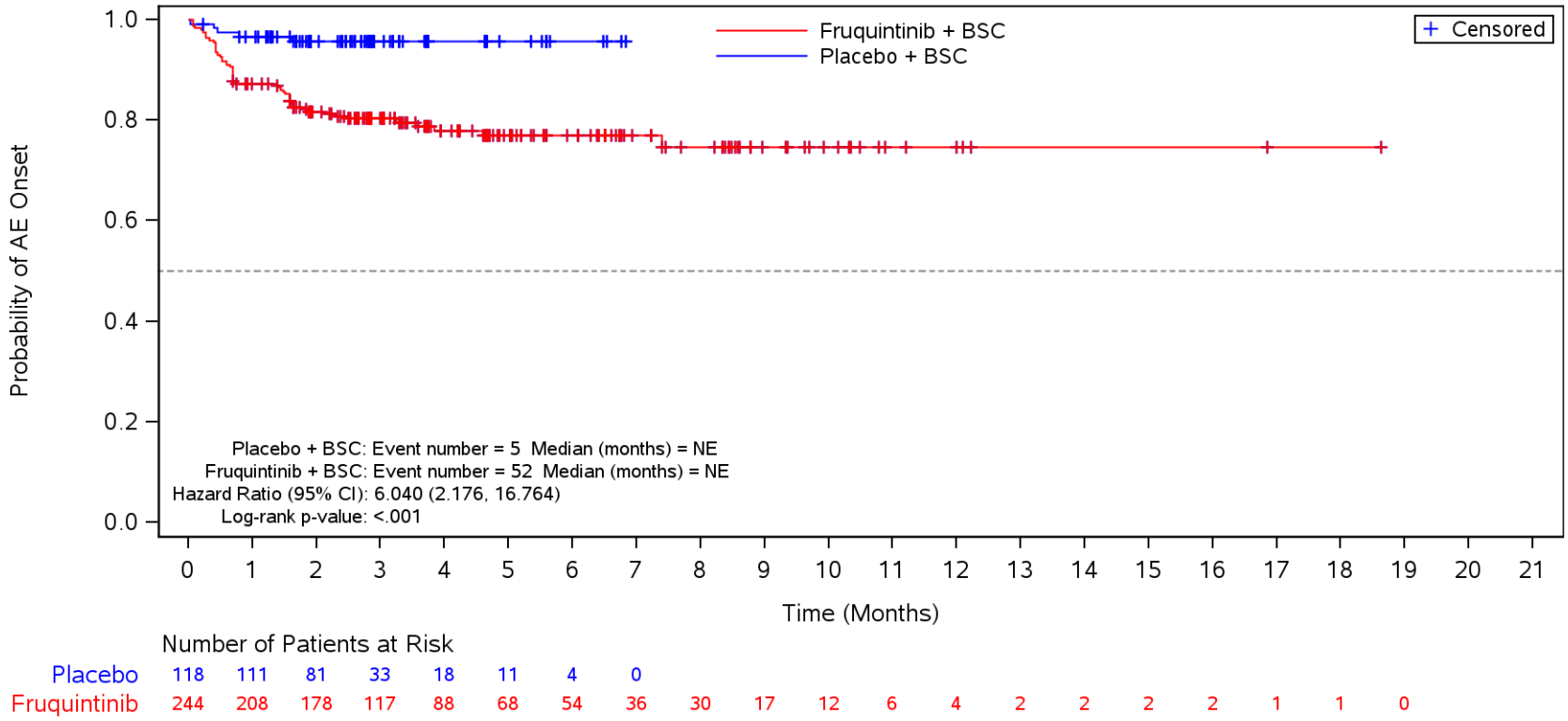
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
<65 years



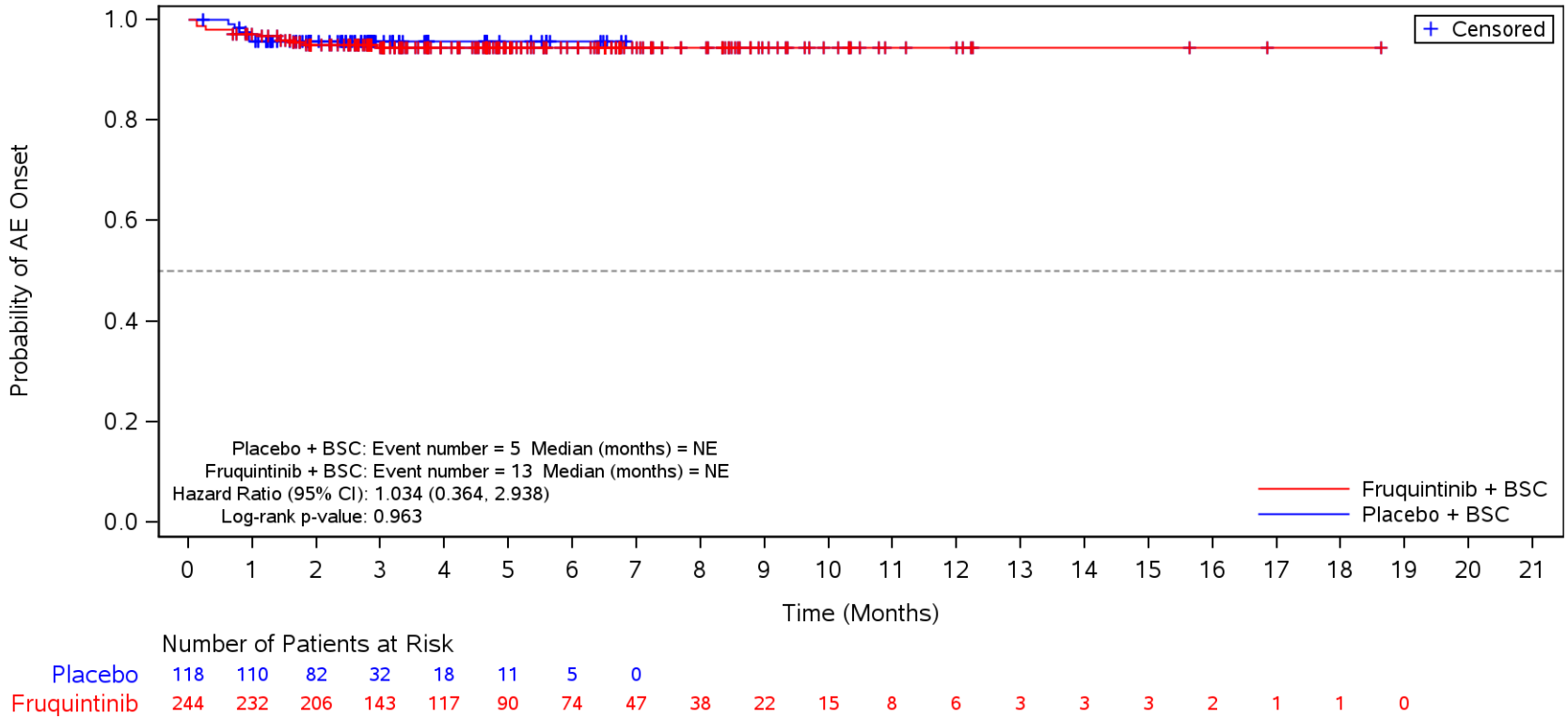
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
<65 years



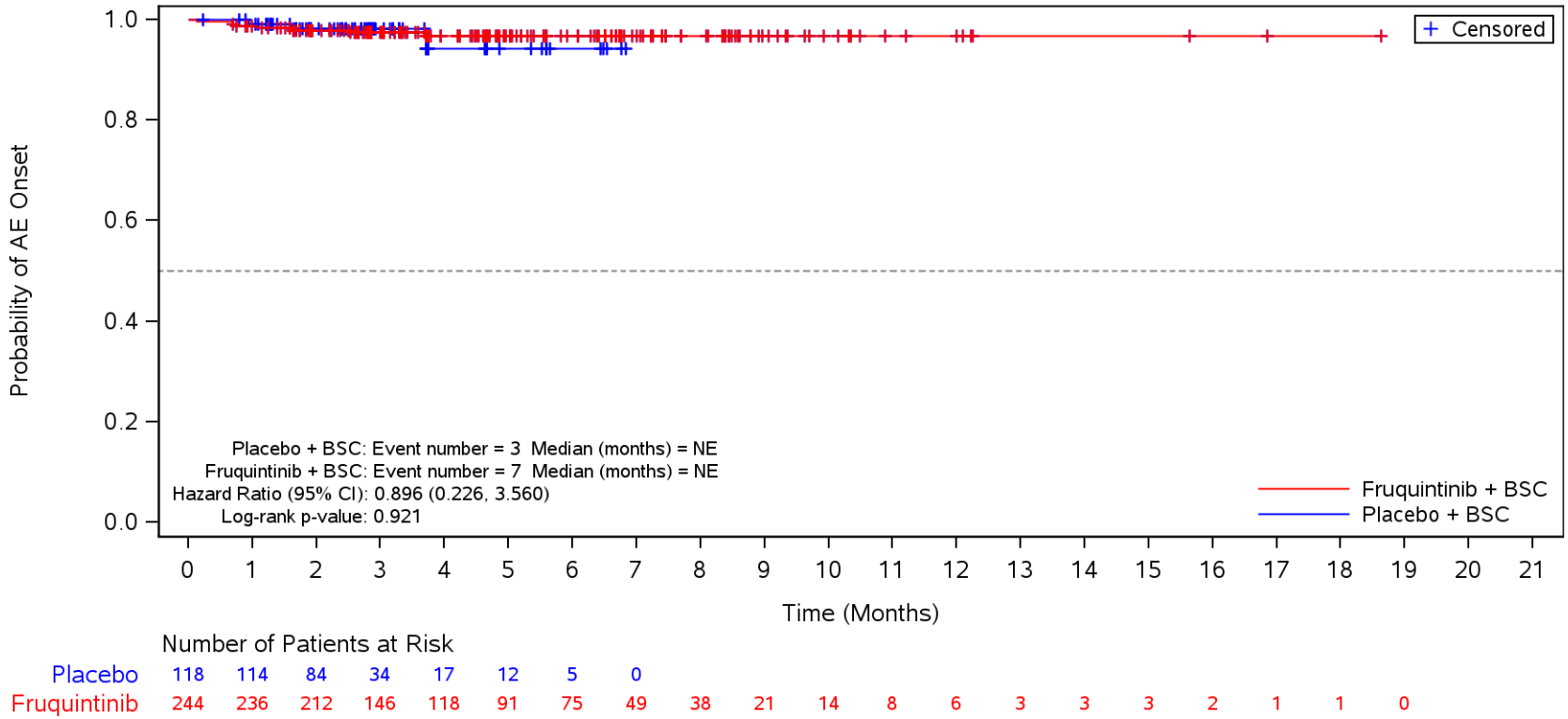
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
<65 years



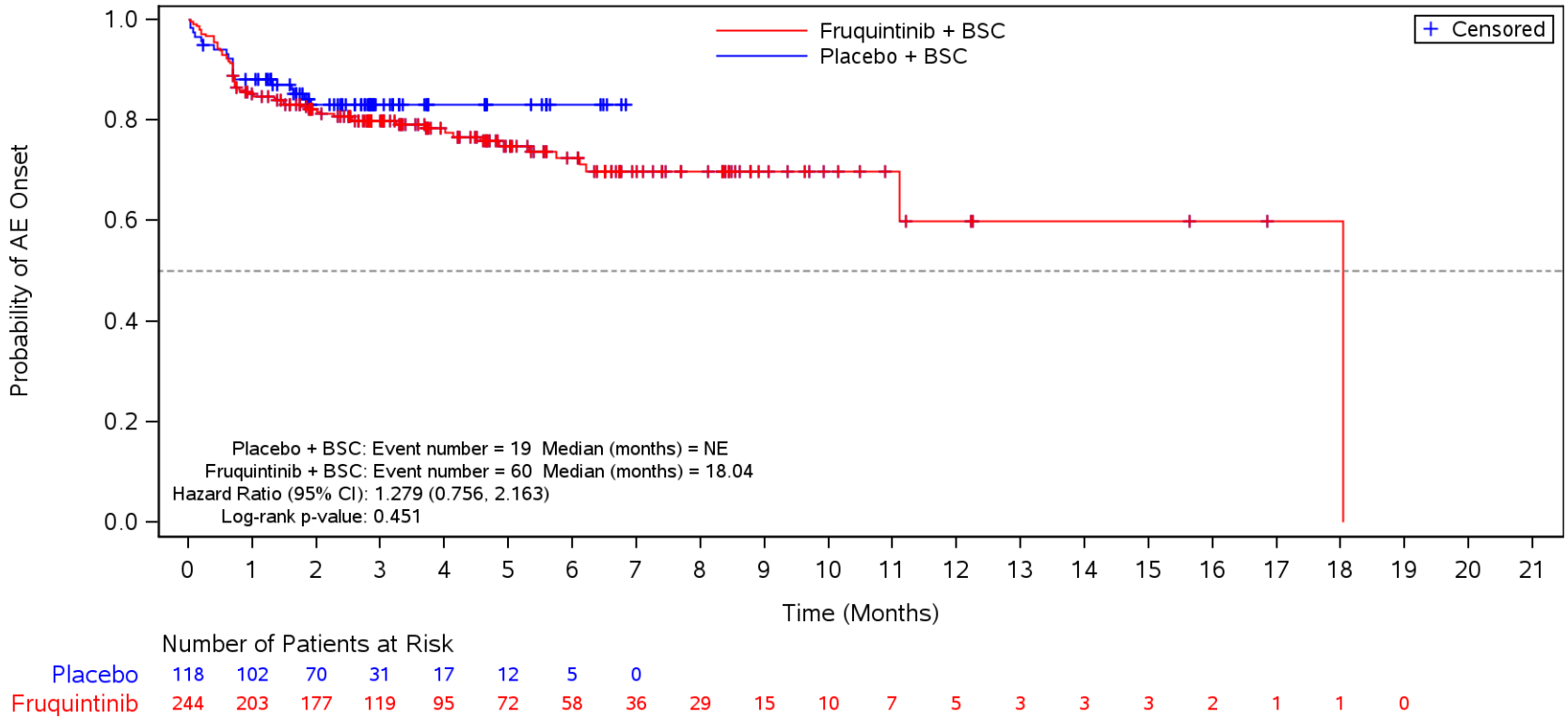
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
<65 years



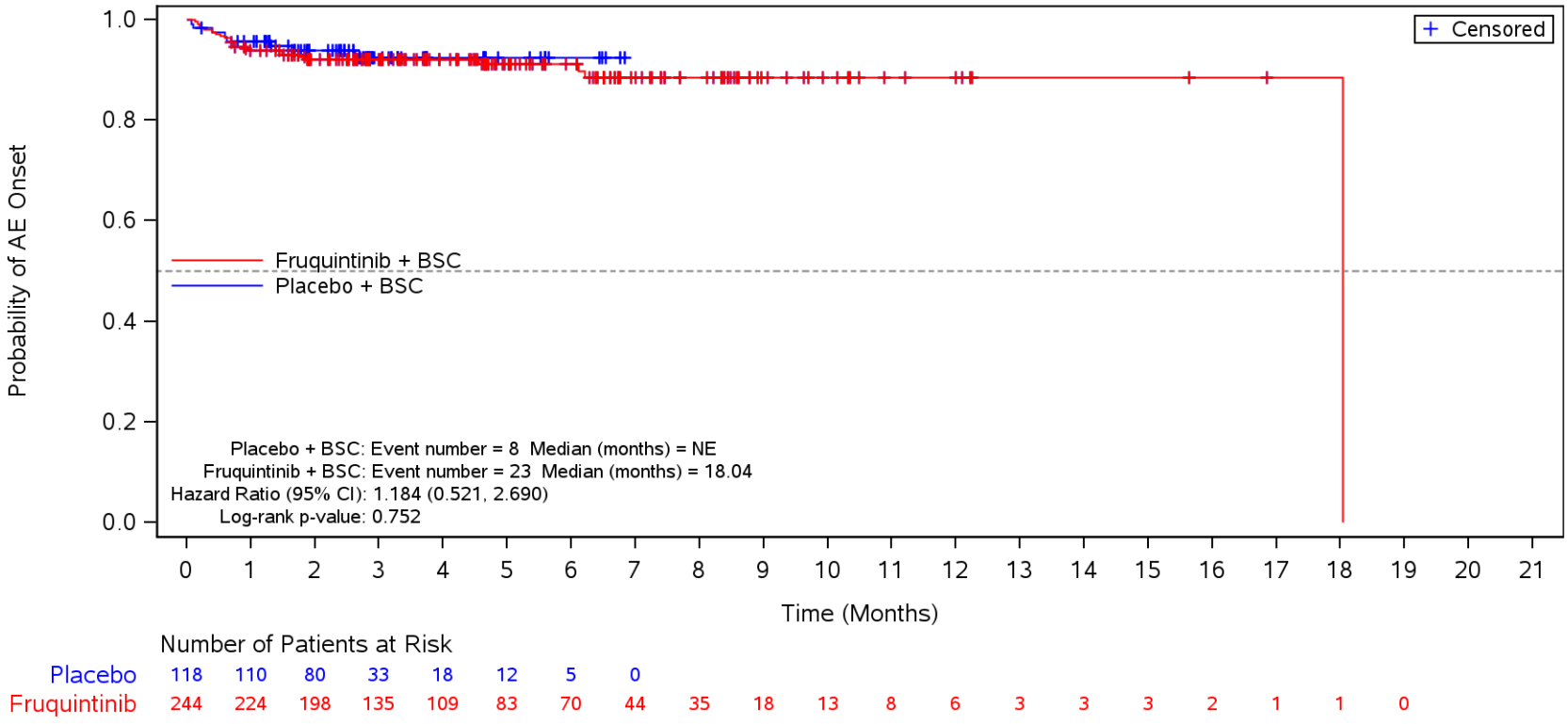
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Nervous system disorders**
<65 years



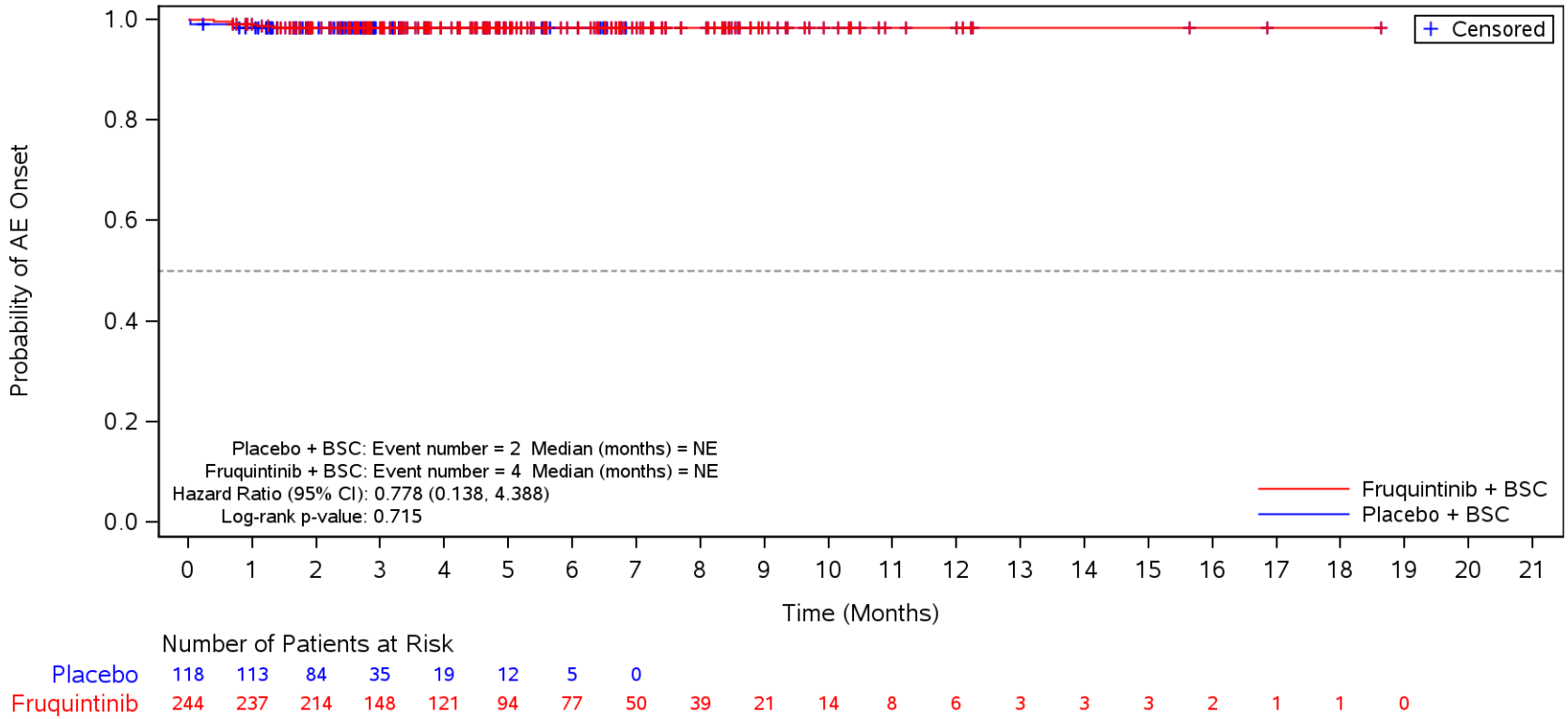
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
<65 years



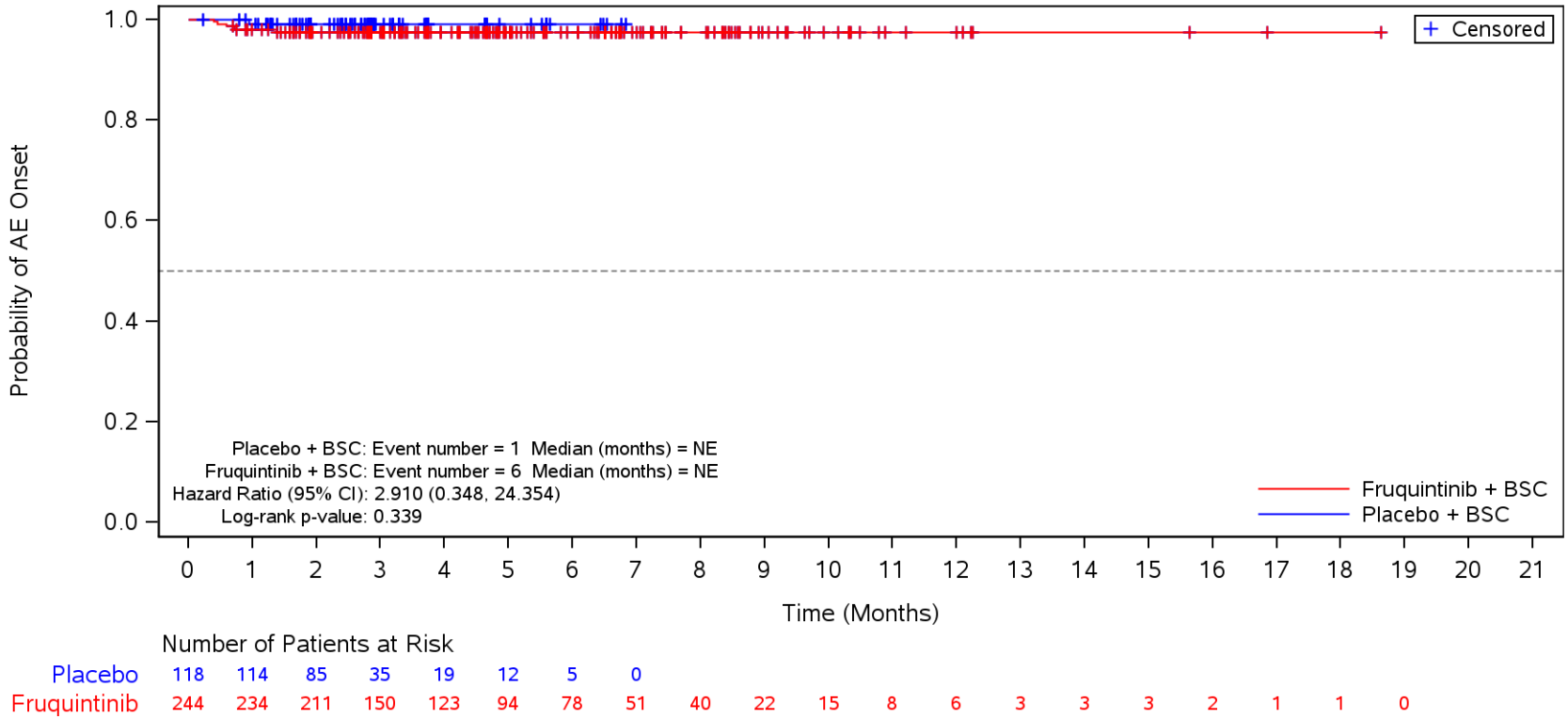
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
<65 years



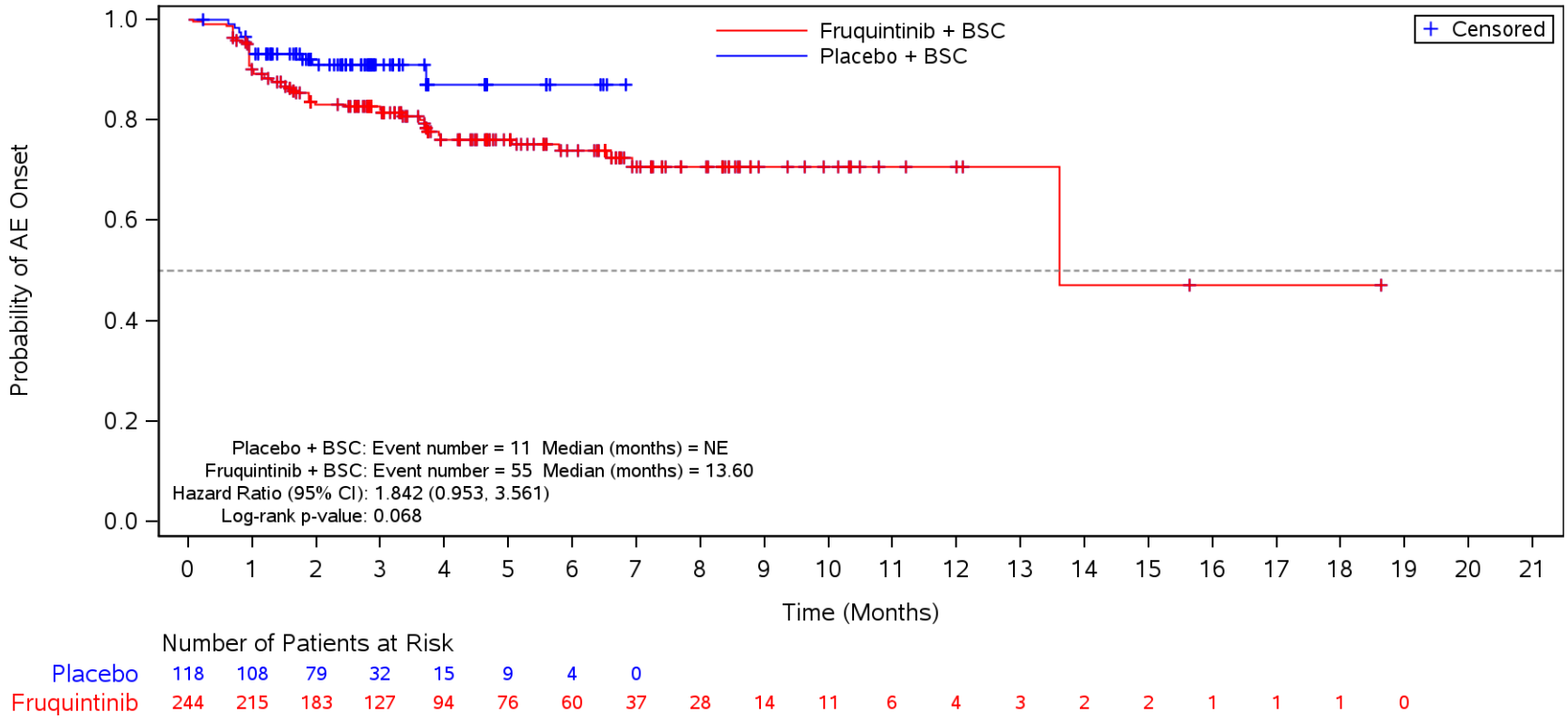
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
<65 years



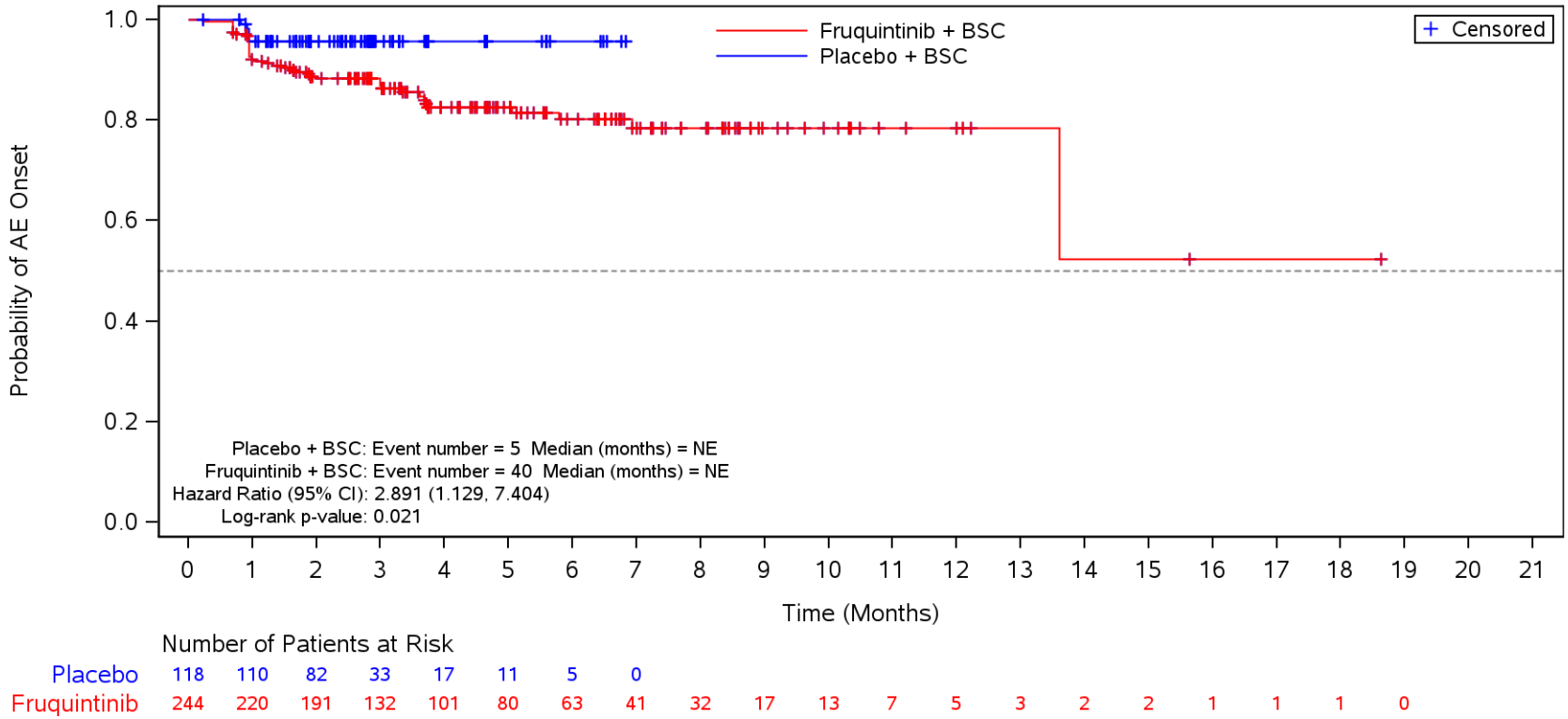
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
<65 years



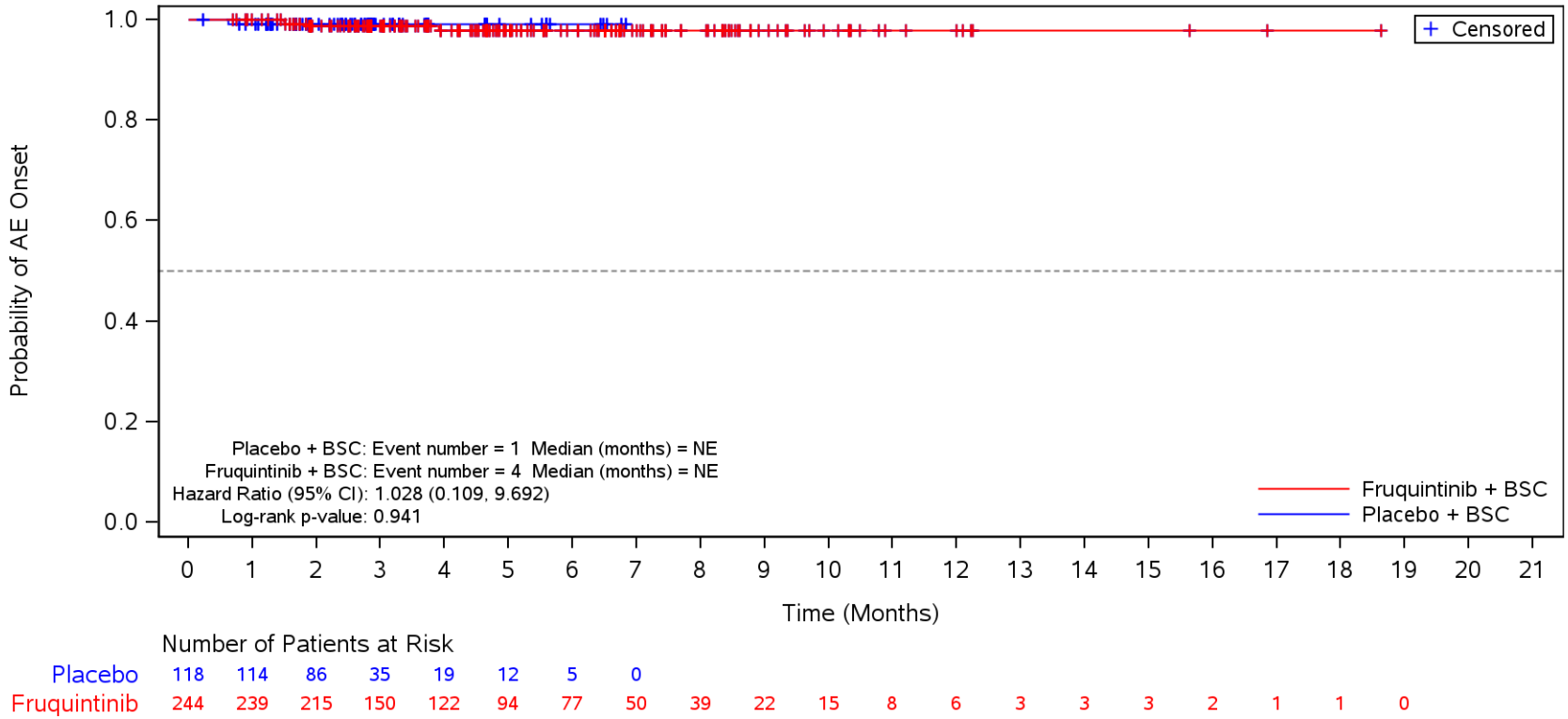
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
<65 years



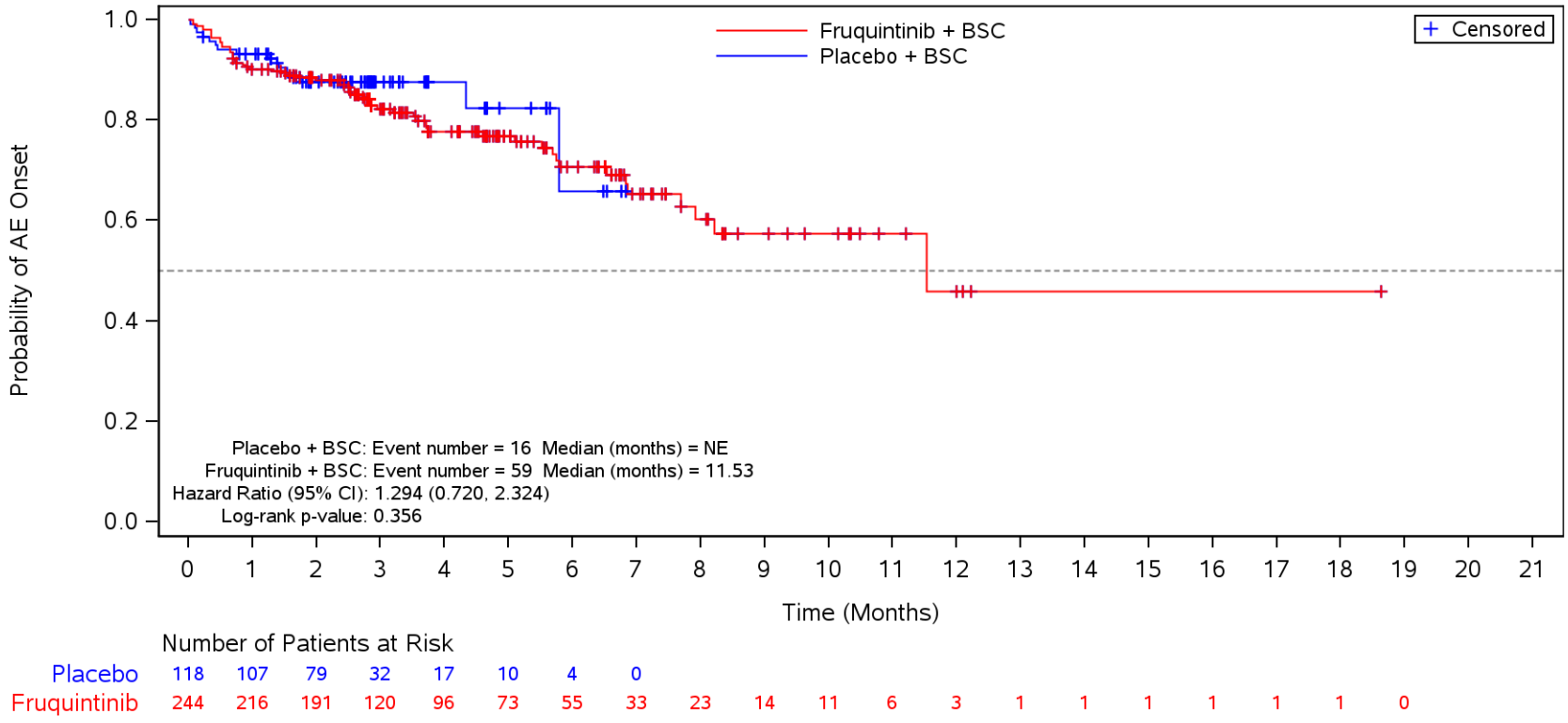
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**
<65 years



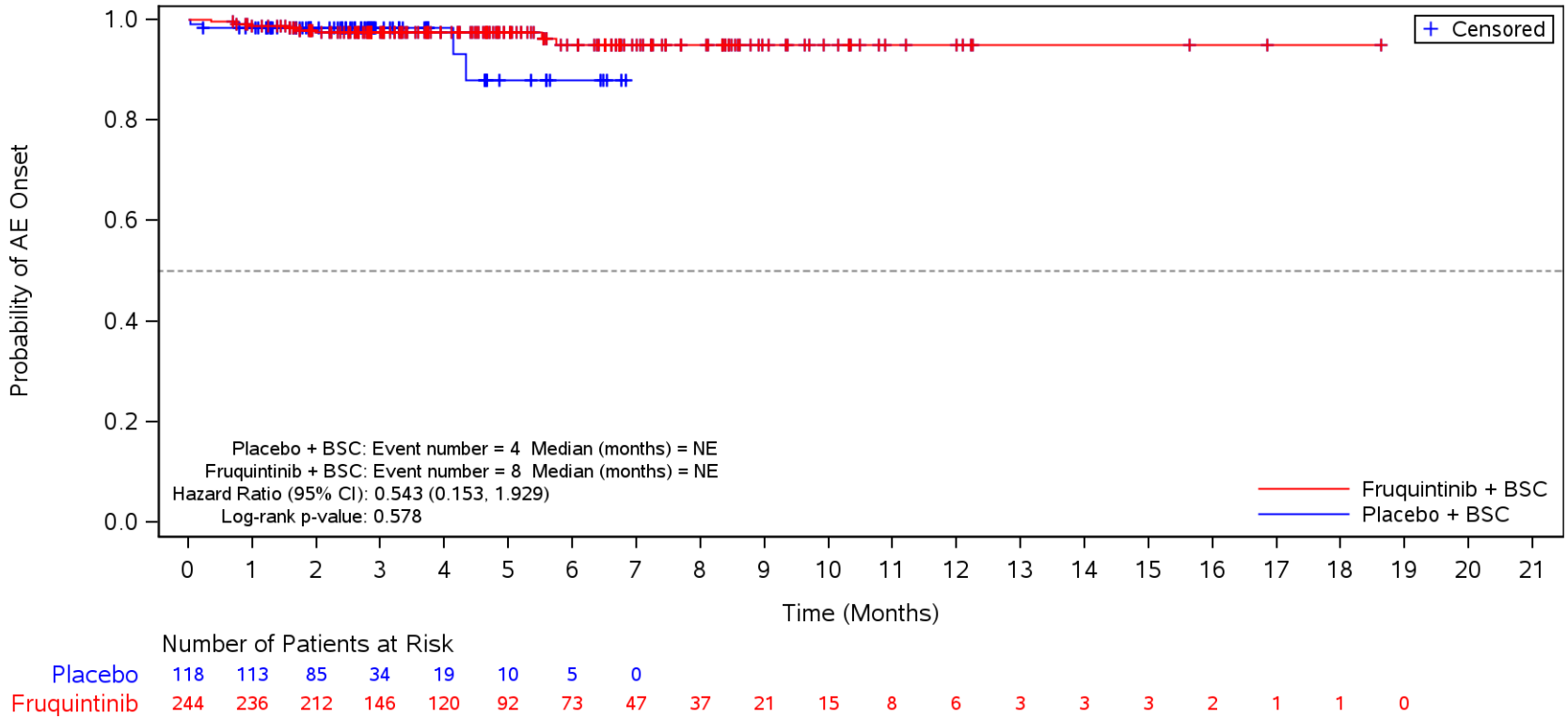
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Infections and infestations**
<65 years



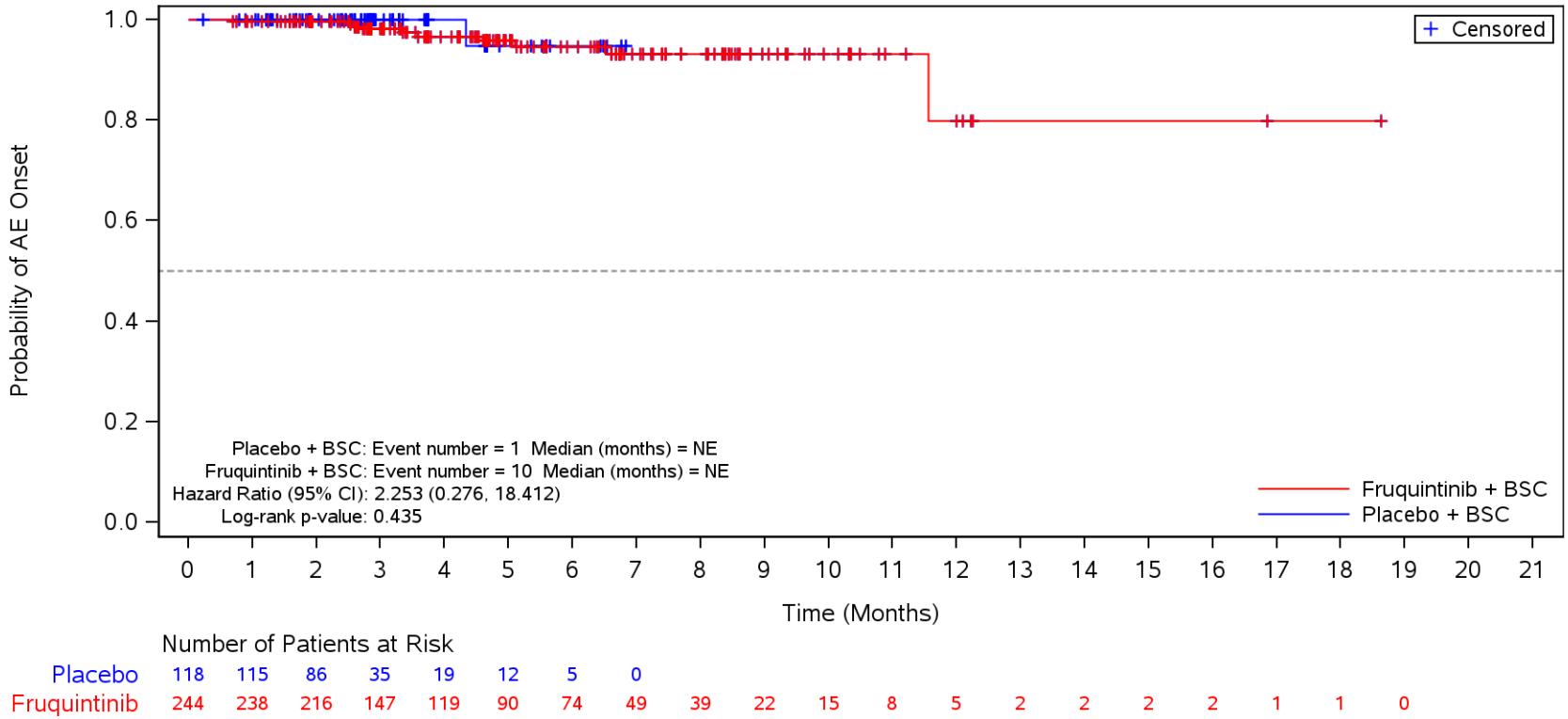
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
<65 years



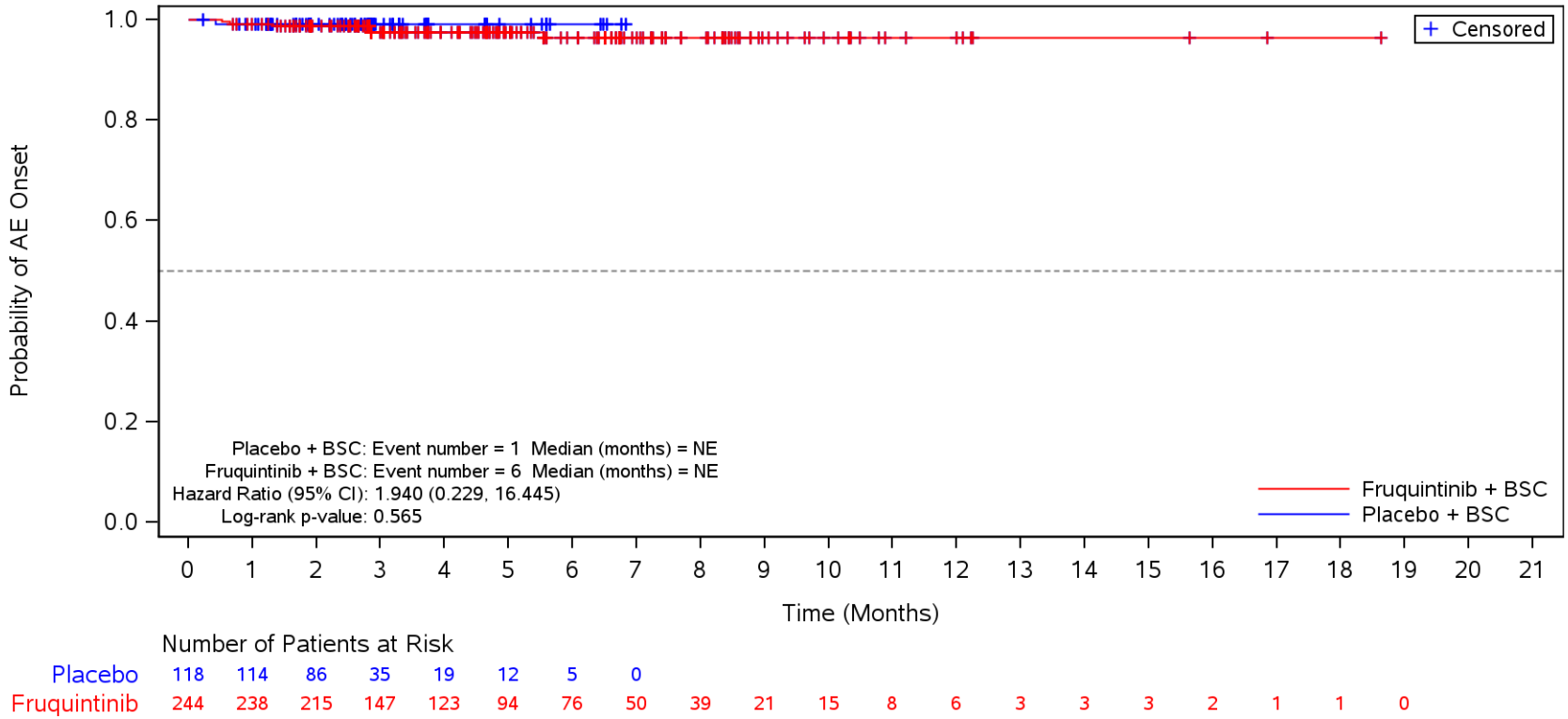
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**
<65 years



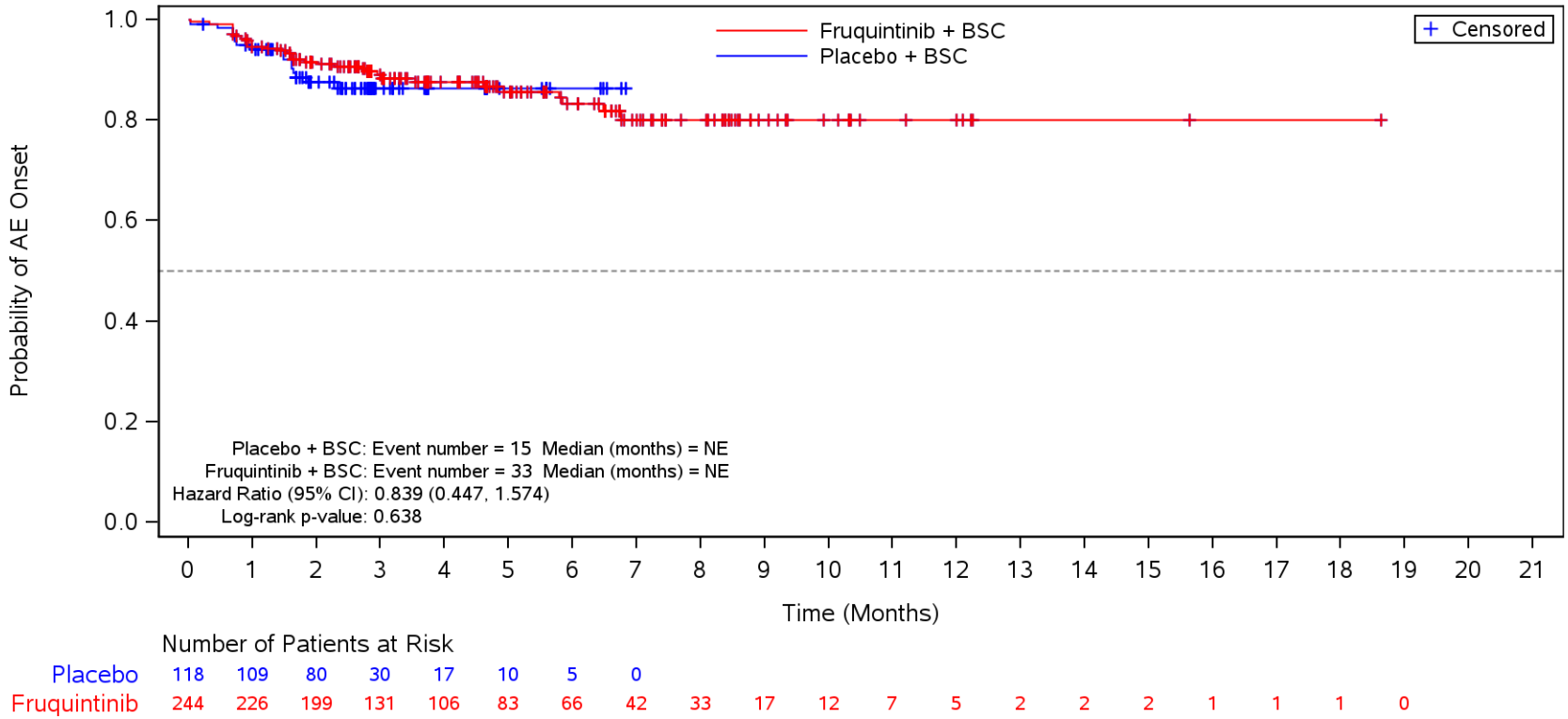
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**
<65 years



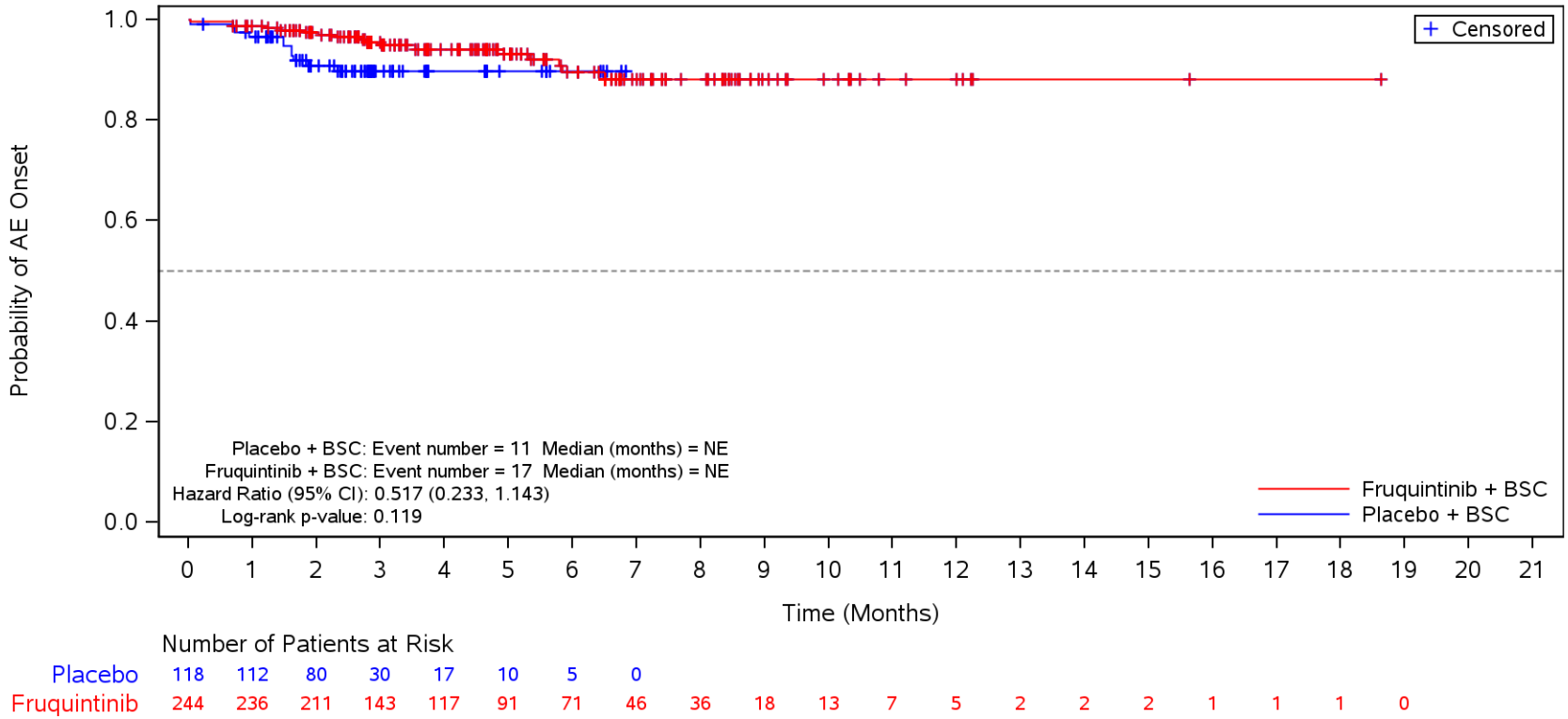
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
<65 years



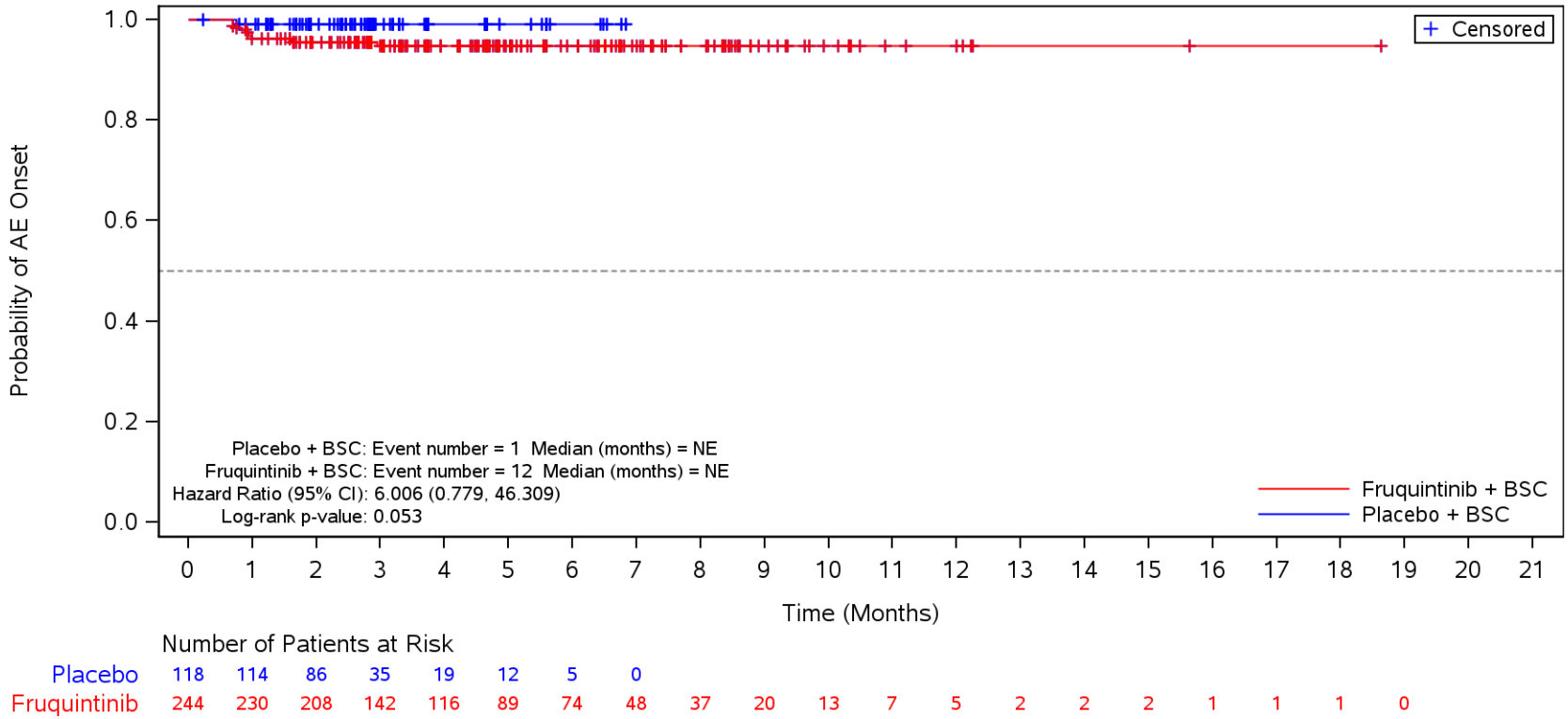
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
<65 years



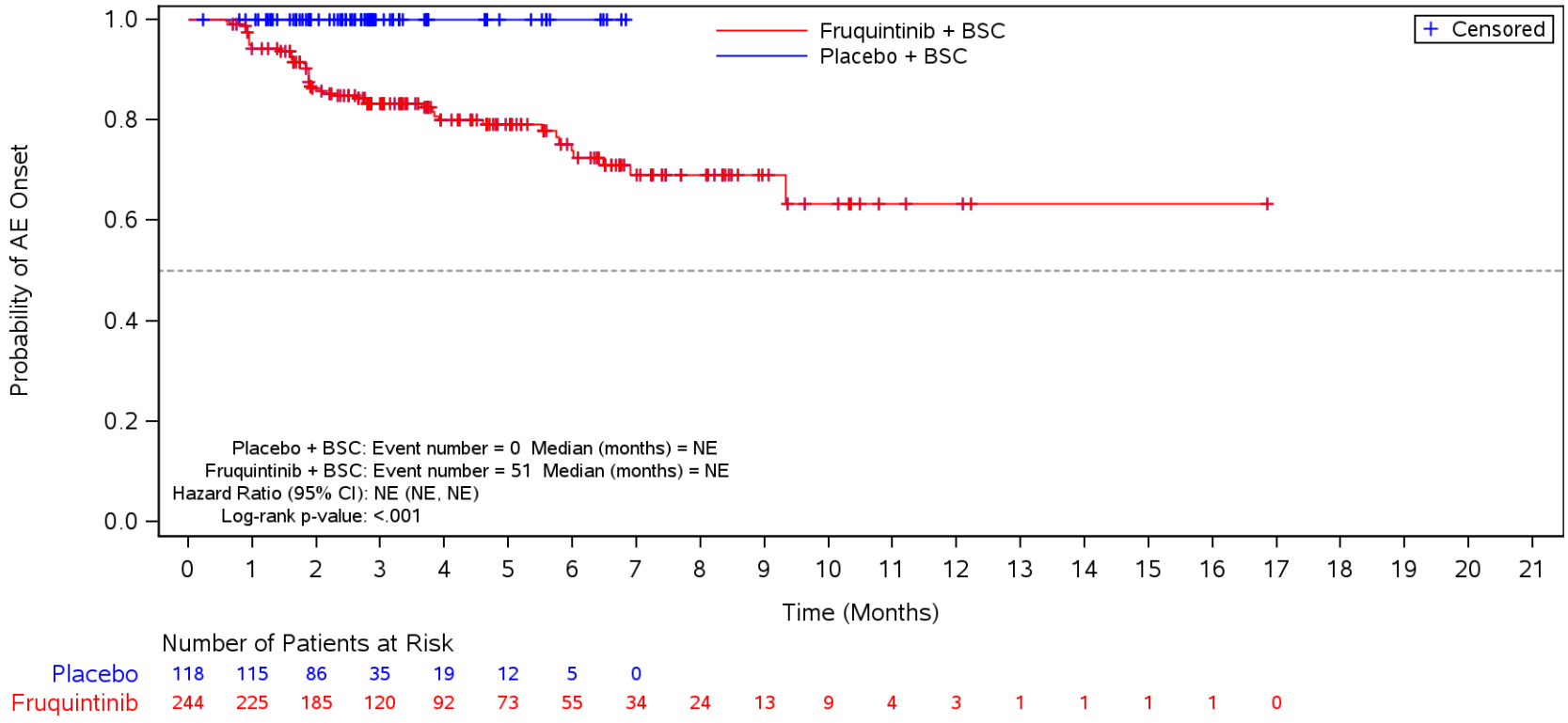
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
<65 years



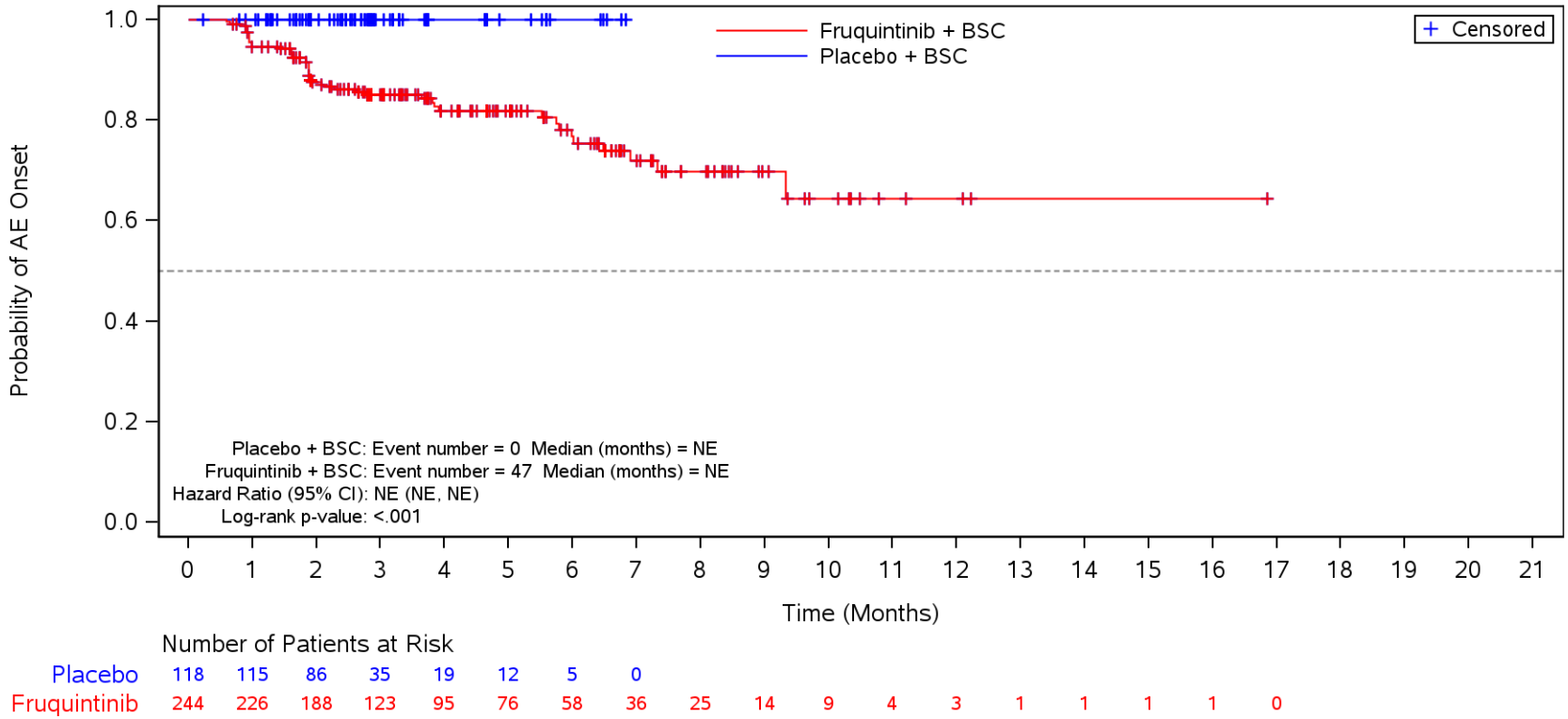
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Endocrine disorders**
<65 years



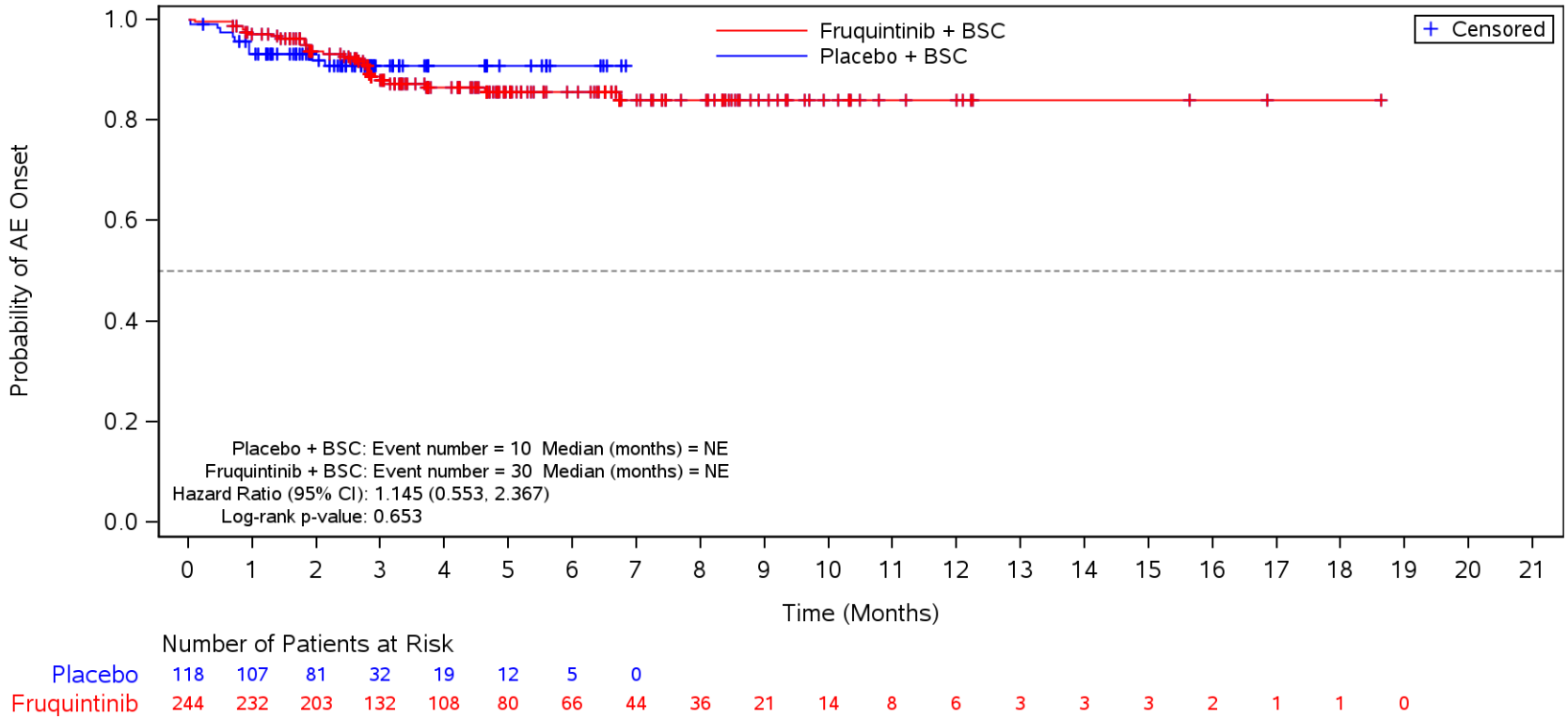
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
<65 years



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Psychiatric disorders**
<65 years

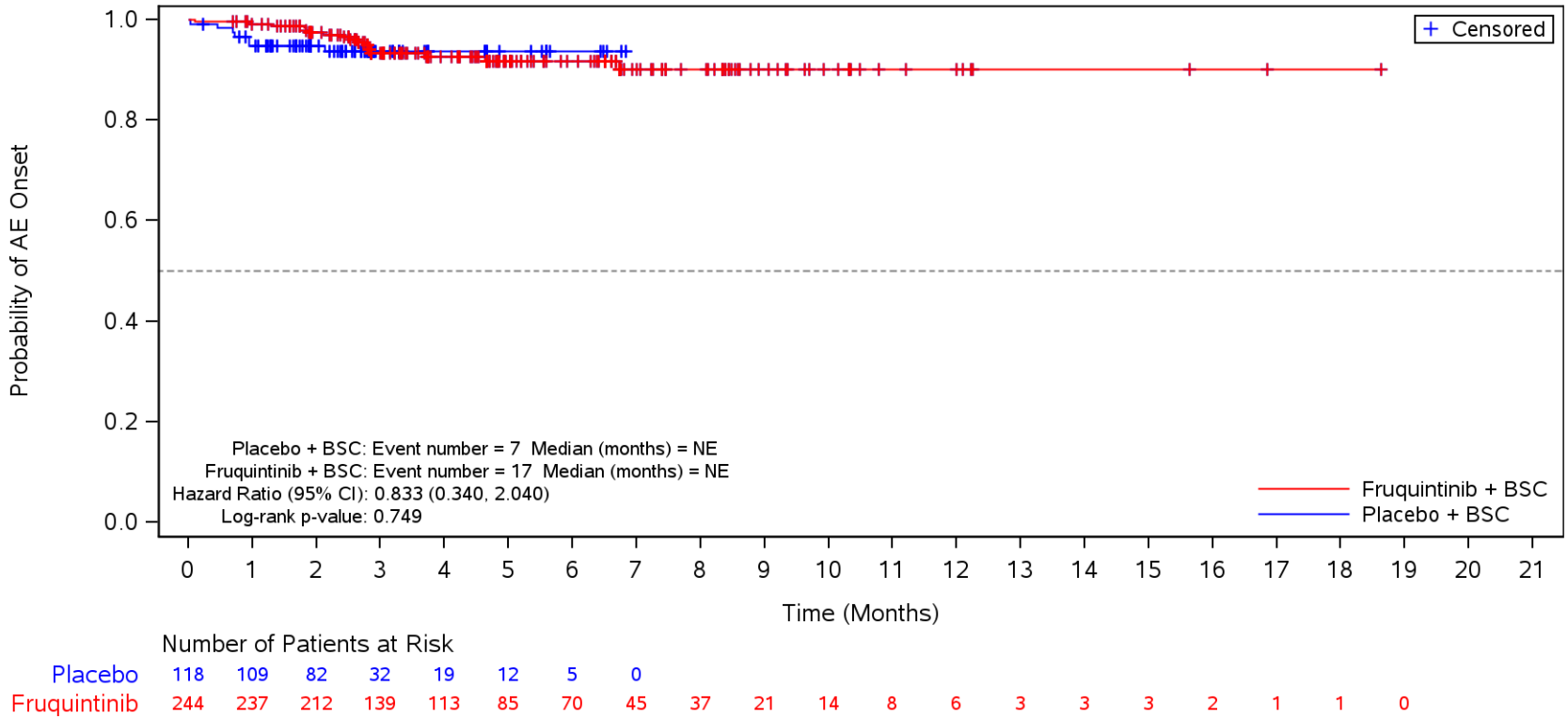


Number of Patients at Risk

Placebo	118	107	81	32	19	12	5	0												
Fruquintinib	244	232	203	132	108	80	66	44	36	21	14	8	6	3	3	3	2	1	1	0

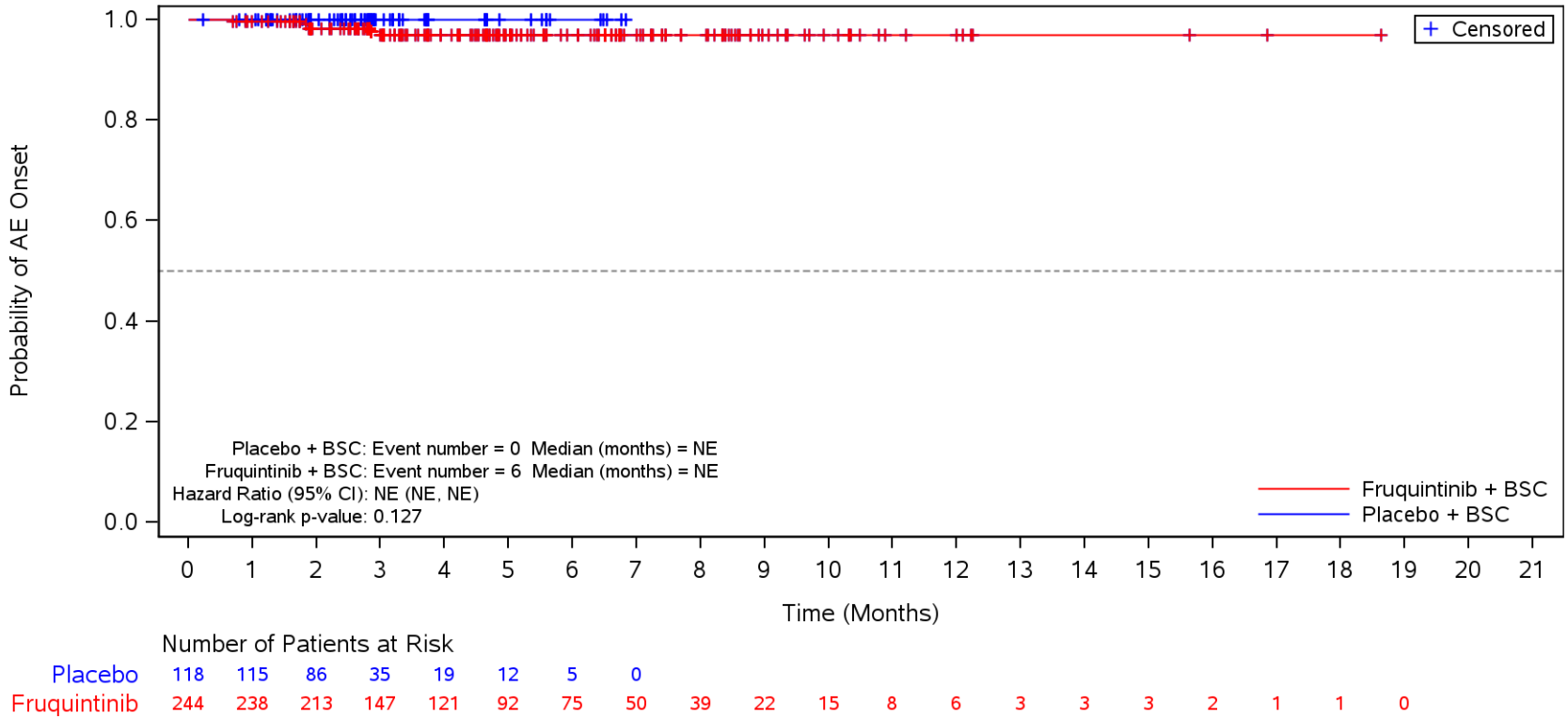
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
<65 years



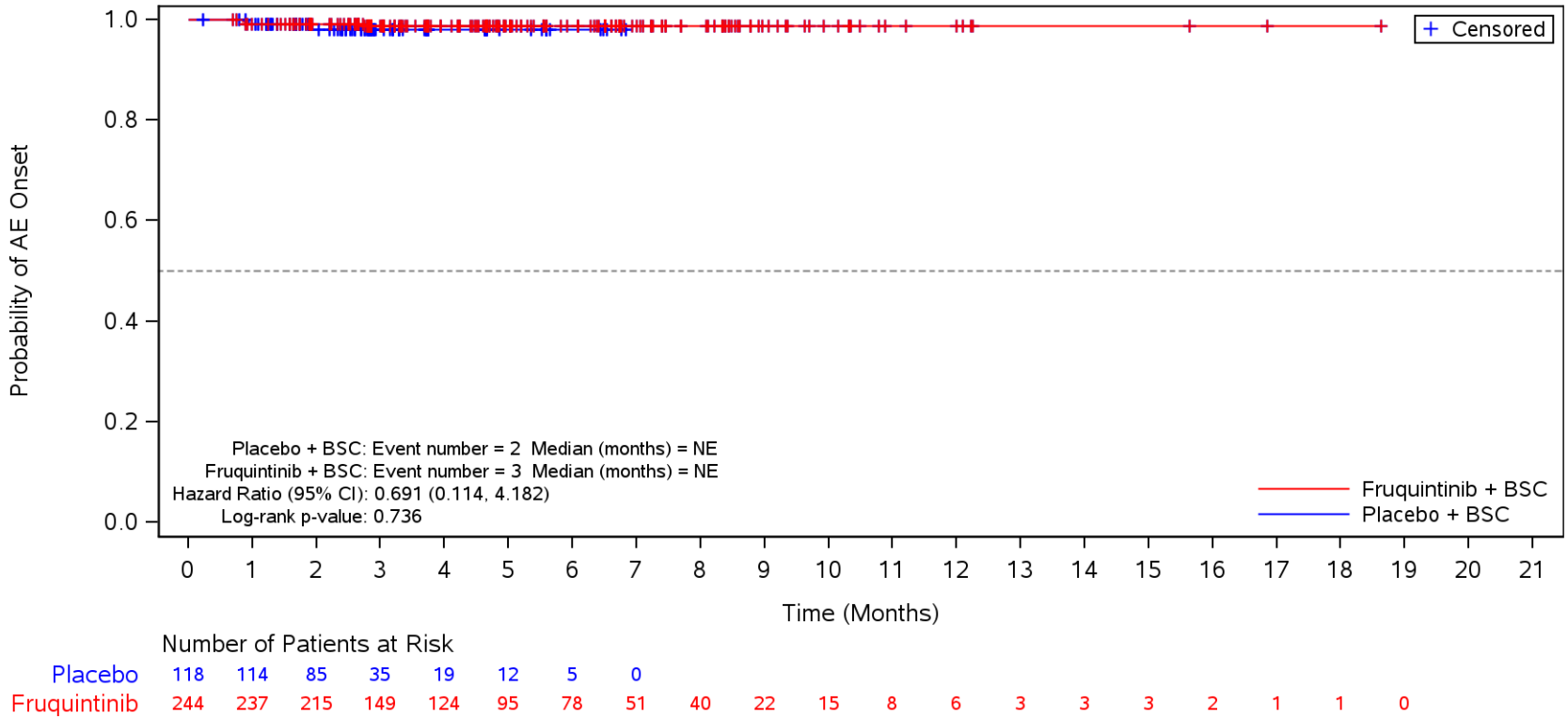
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**
<65 years



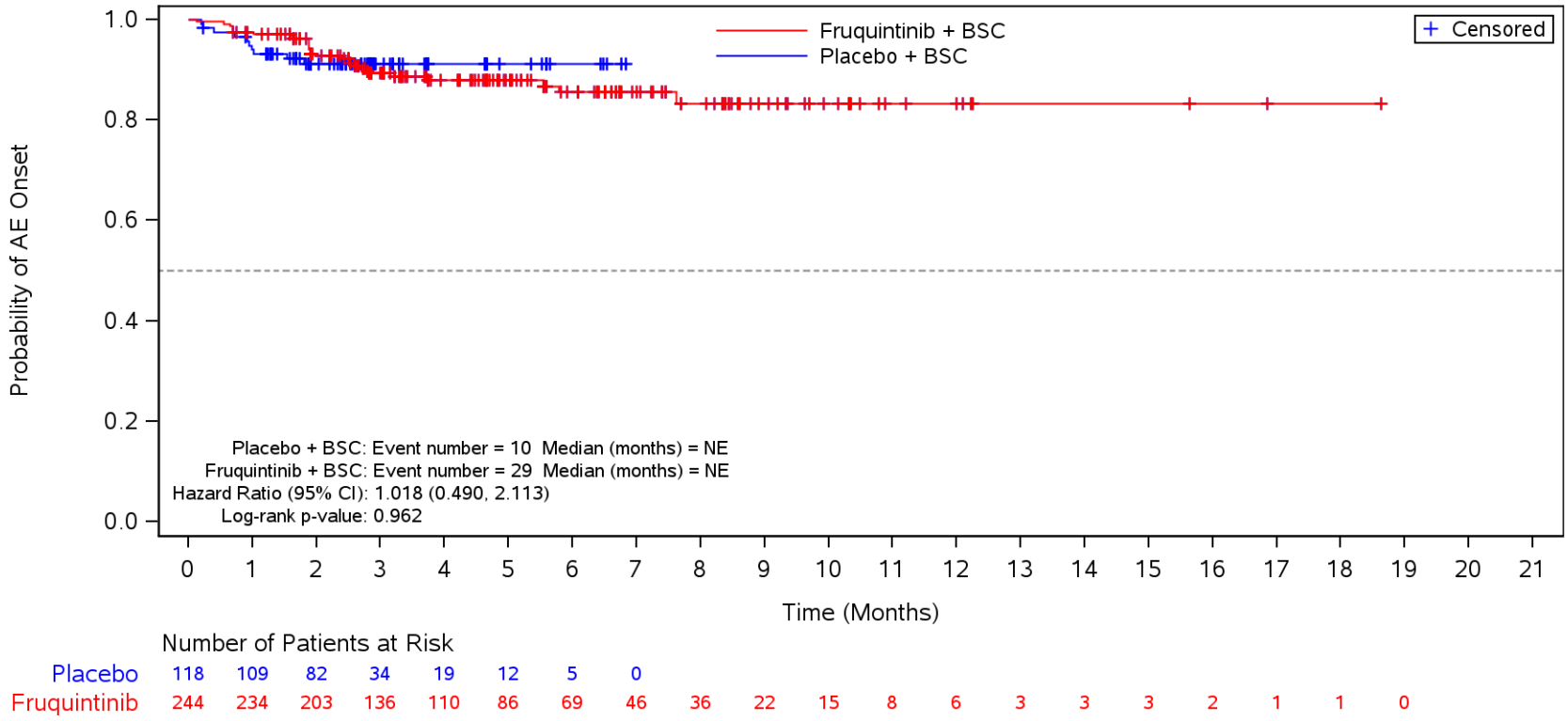
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
<65 years



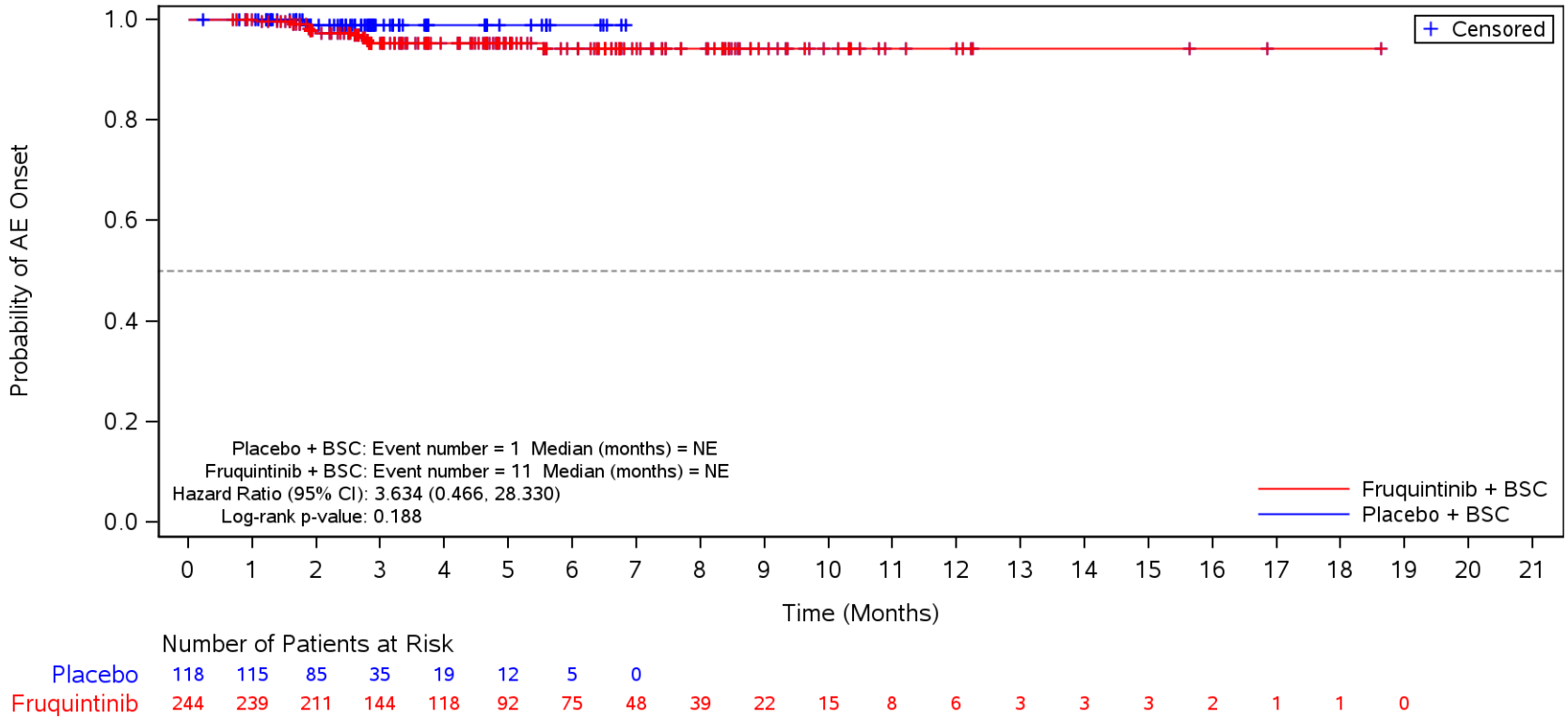
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**
<65 years



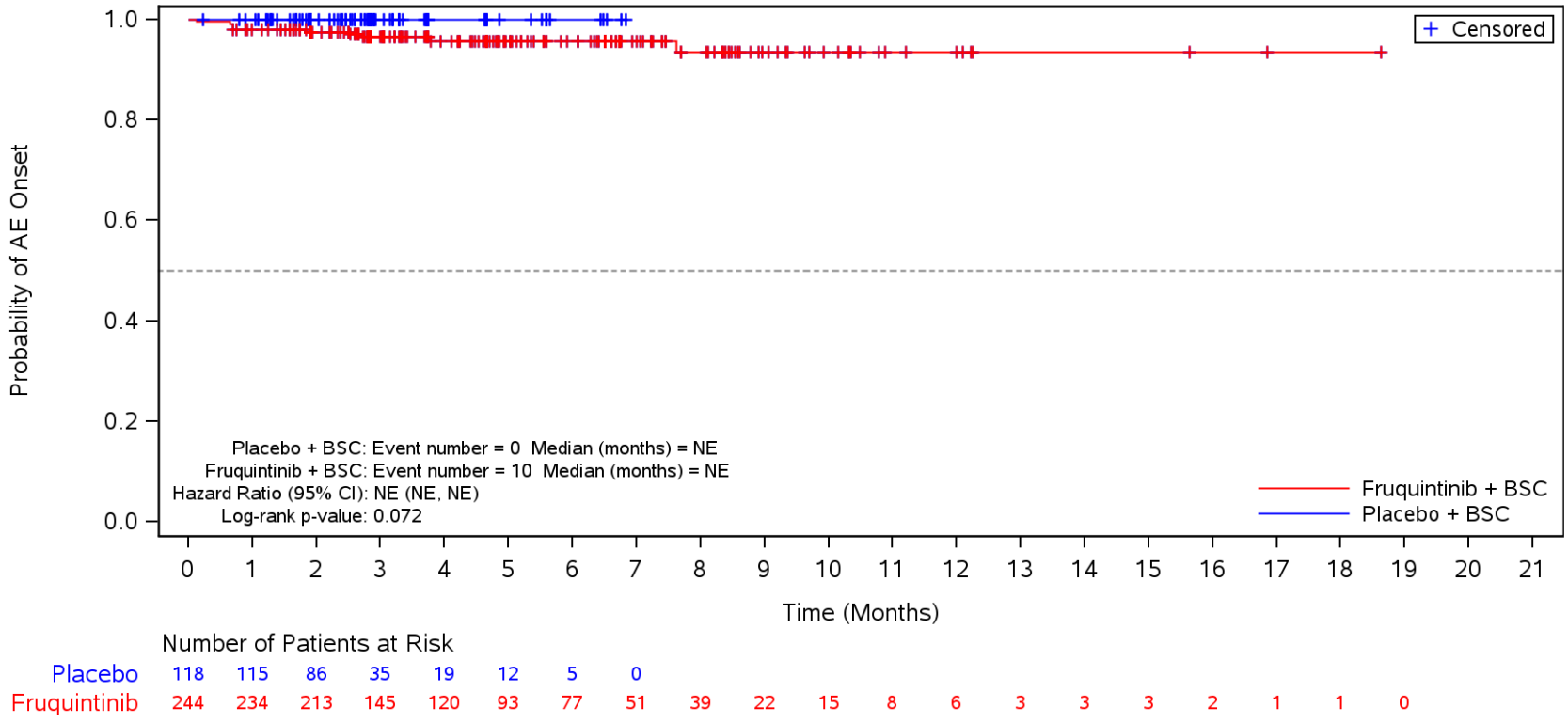
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hypertransaminasaemia**
<65 years



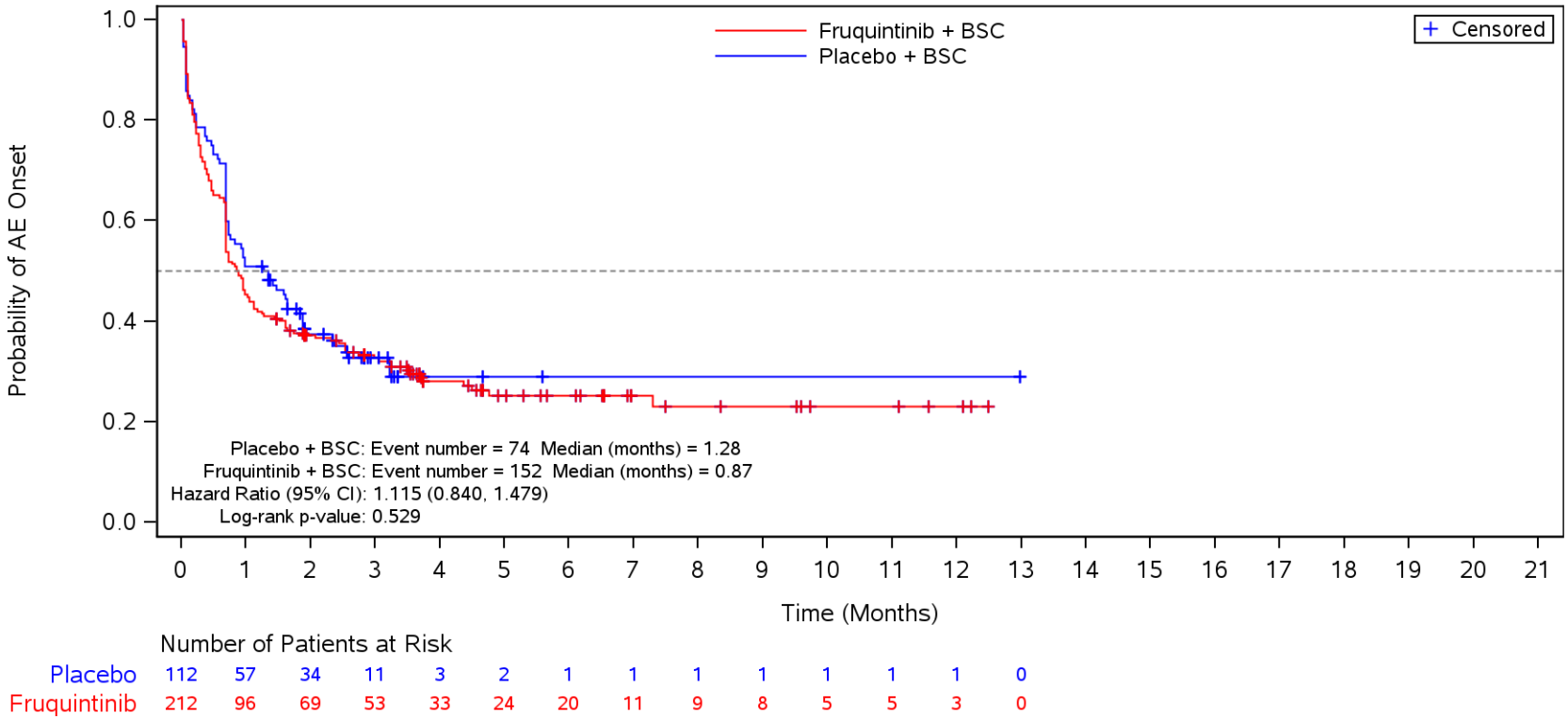
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hyperbilirubinaemia**
<65 years



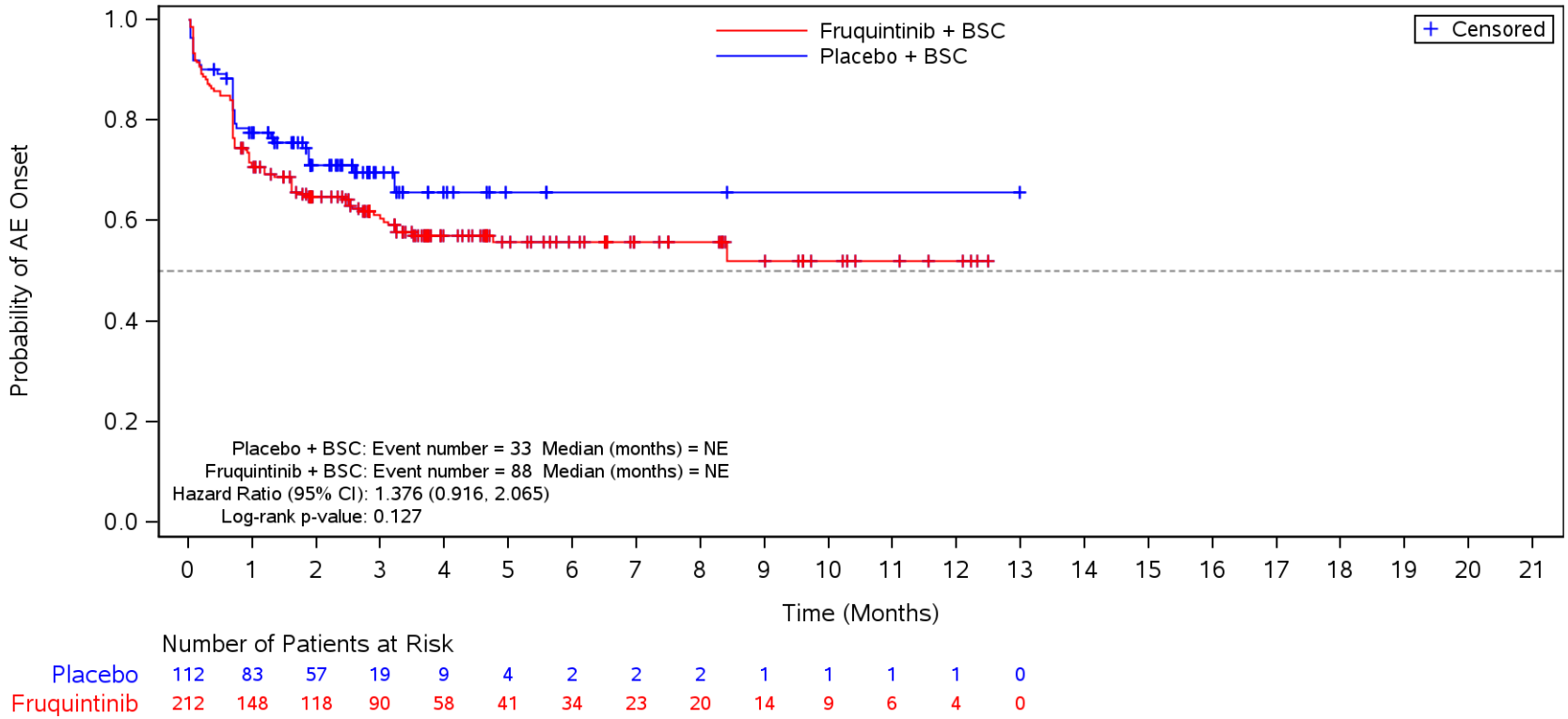
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
>=65 years



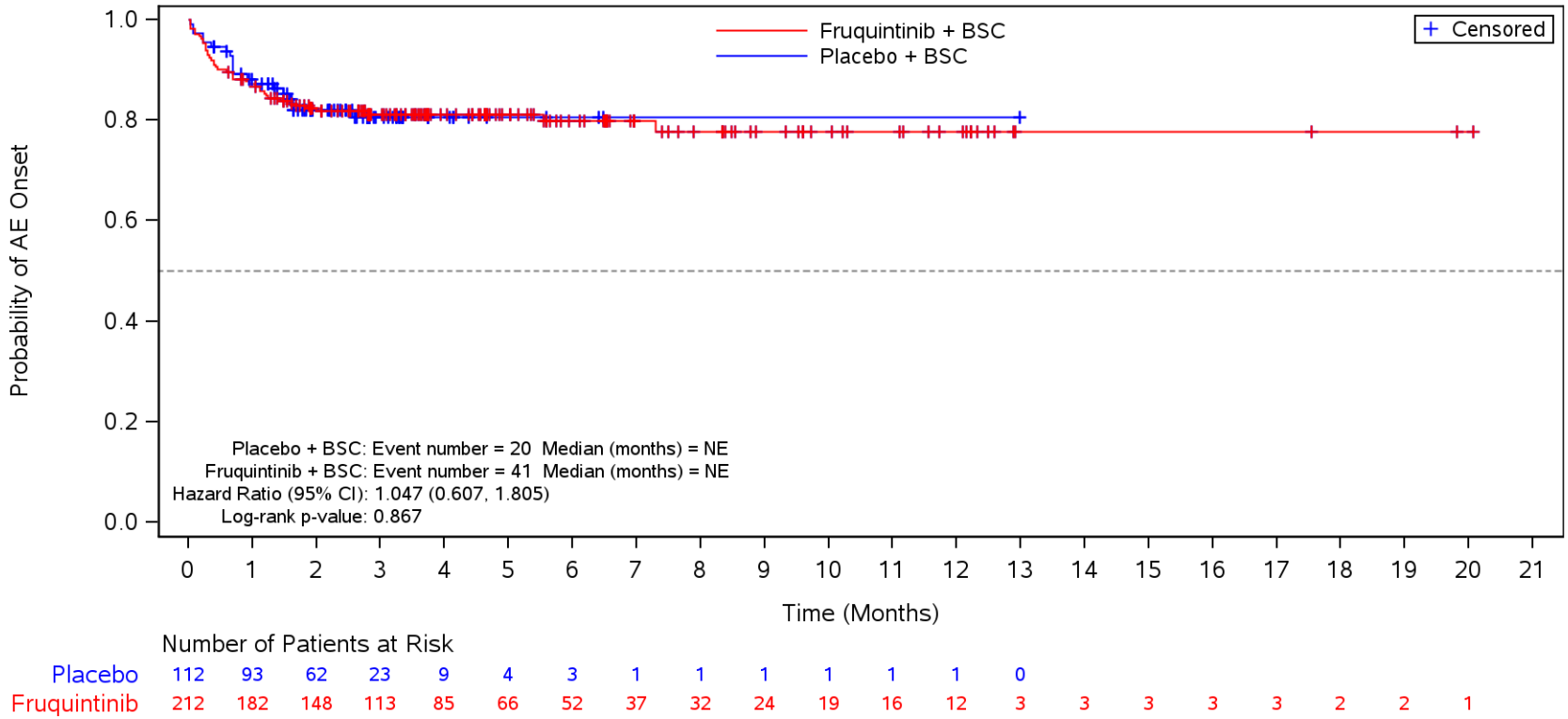
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
>=65 years



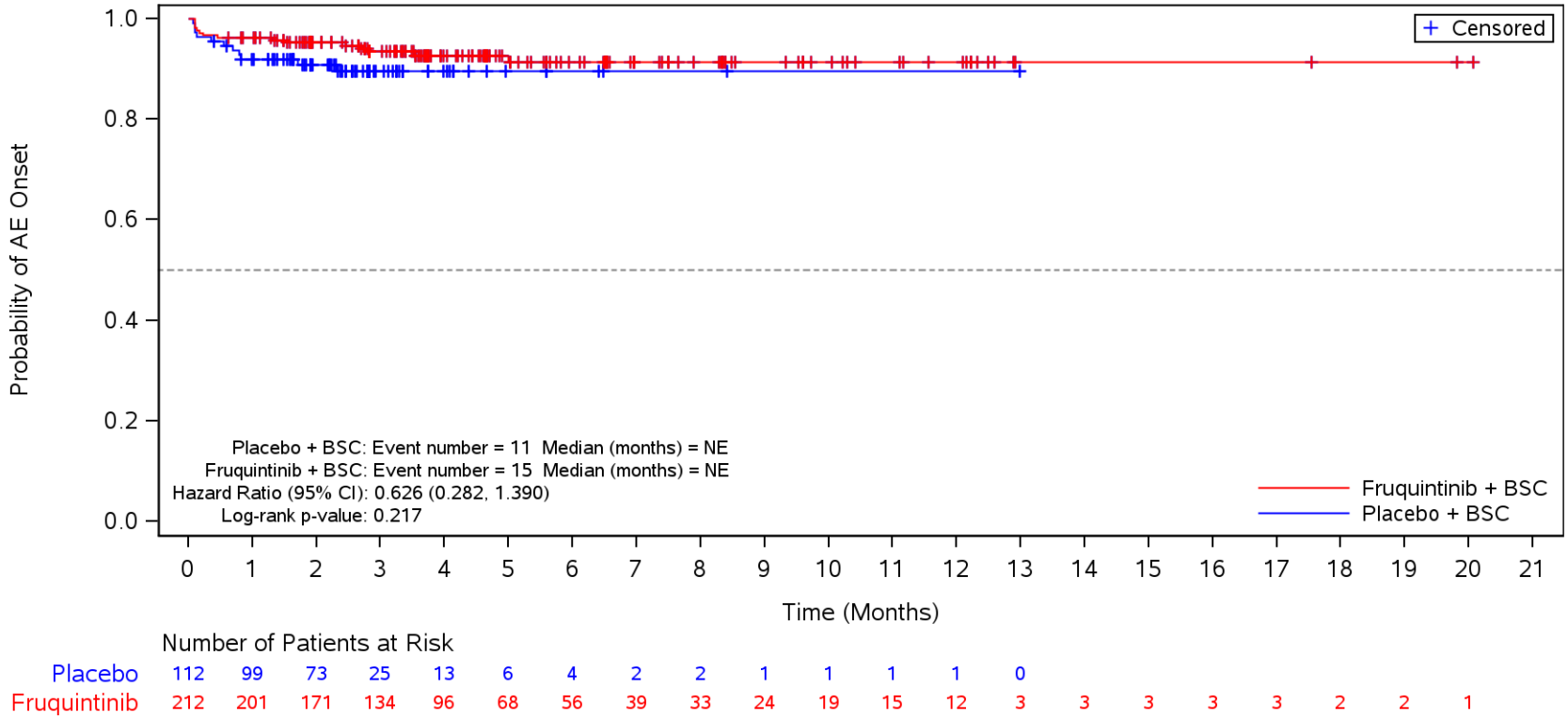
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
>=65 years



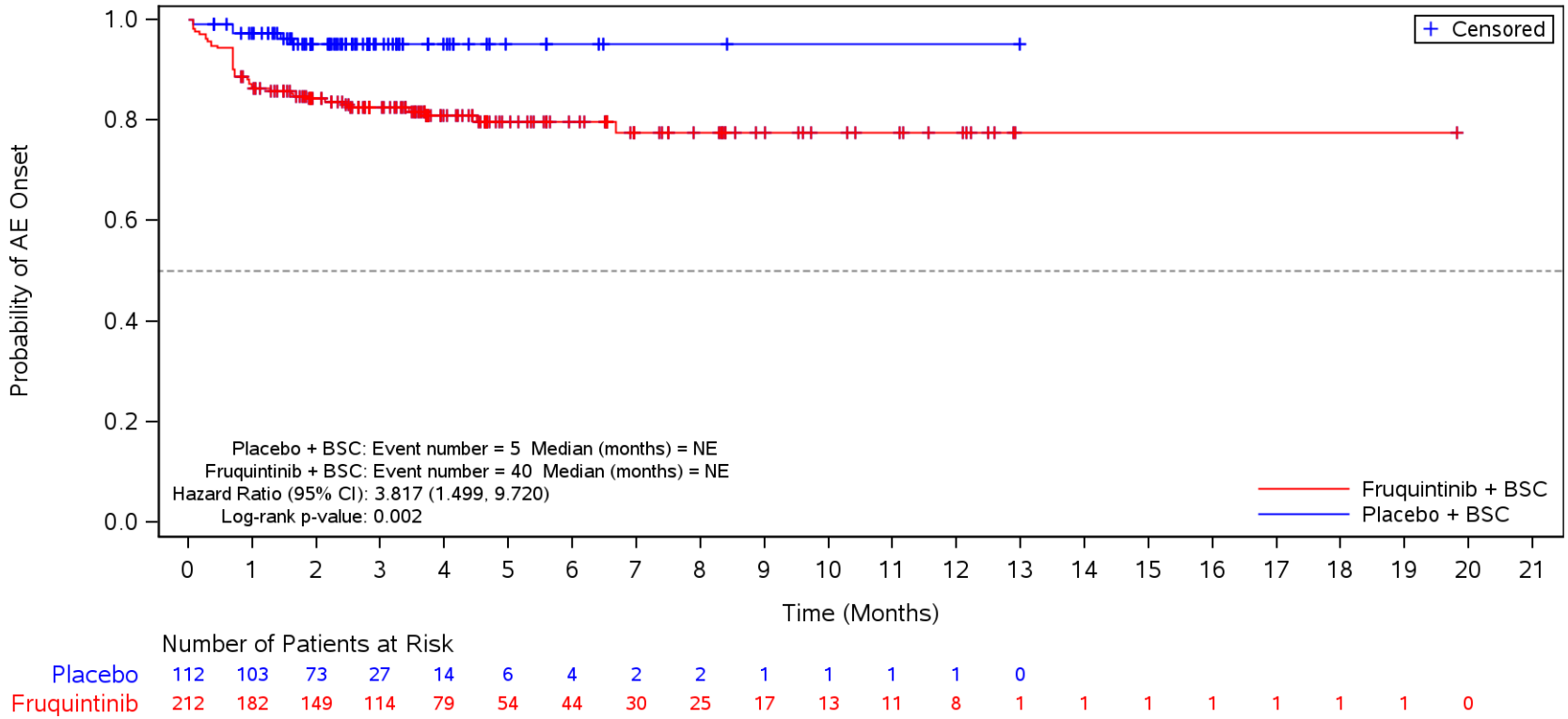
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
>=65 years



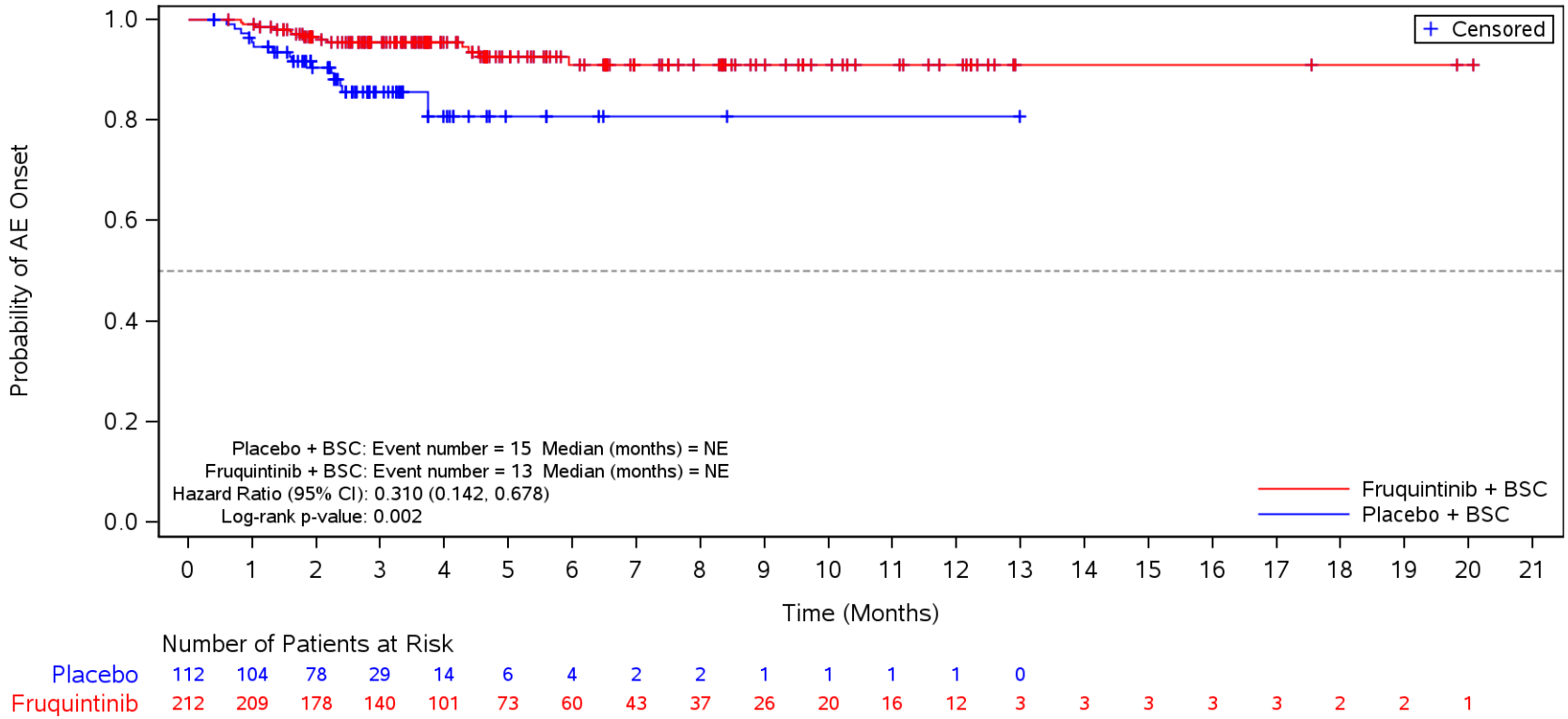
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
>=65 years



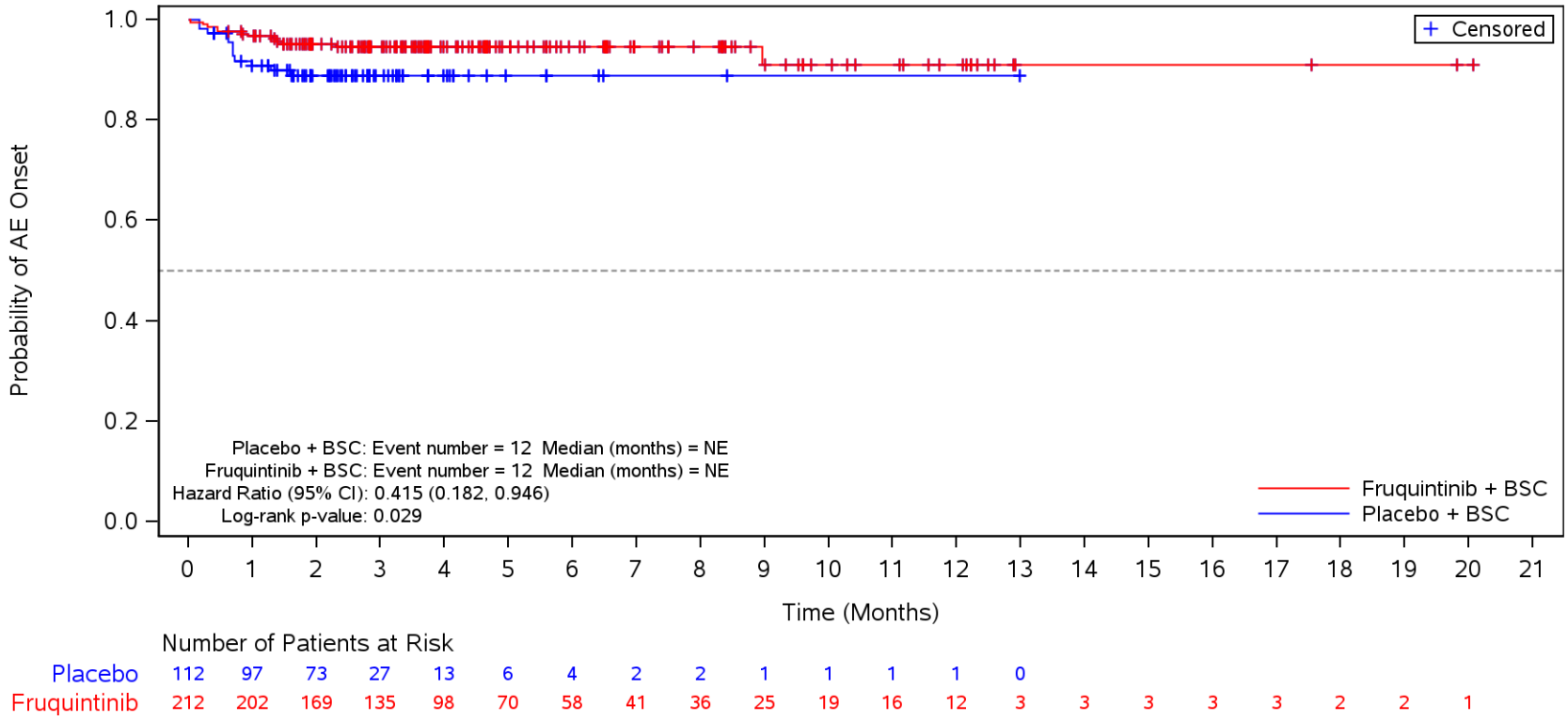
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
>=65 years



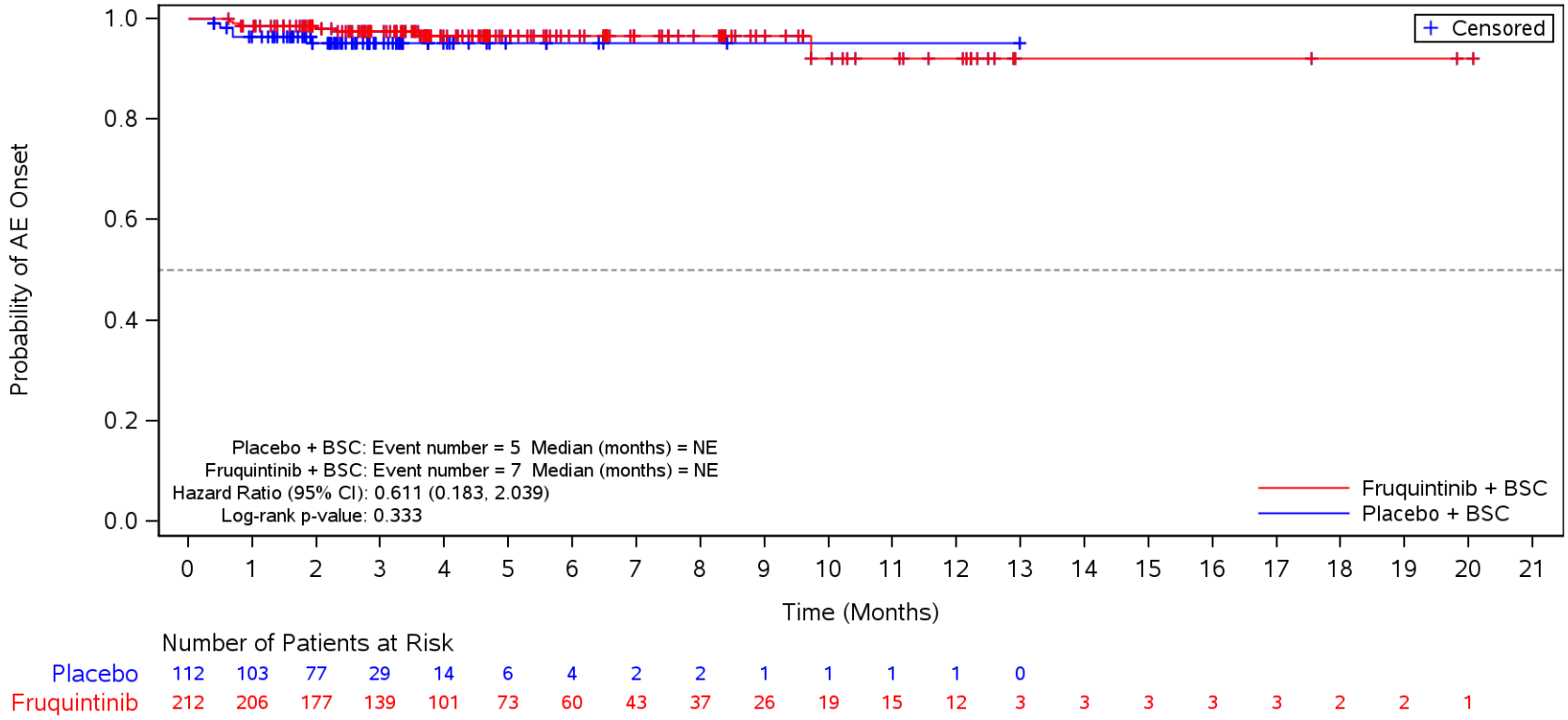
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
>=65 years



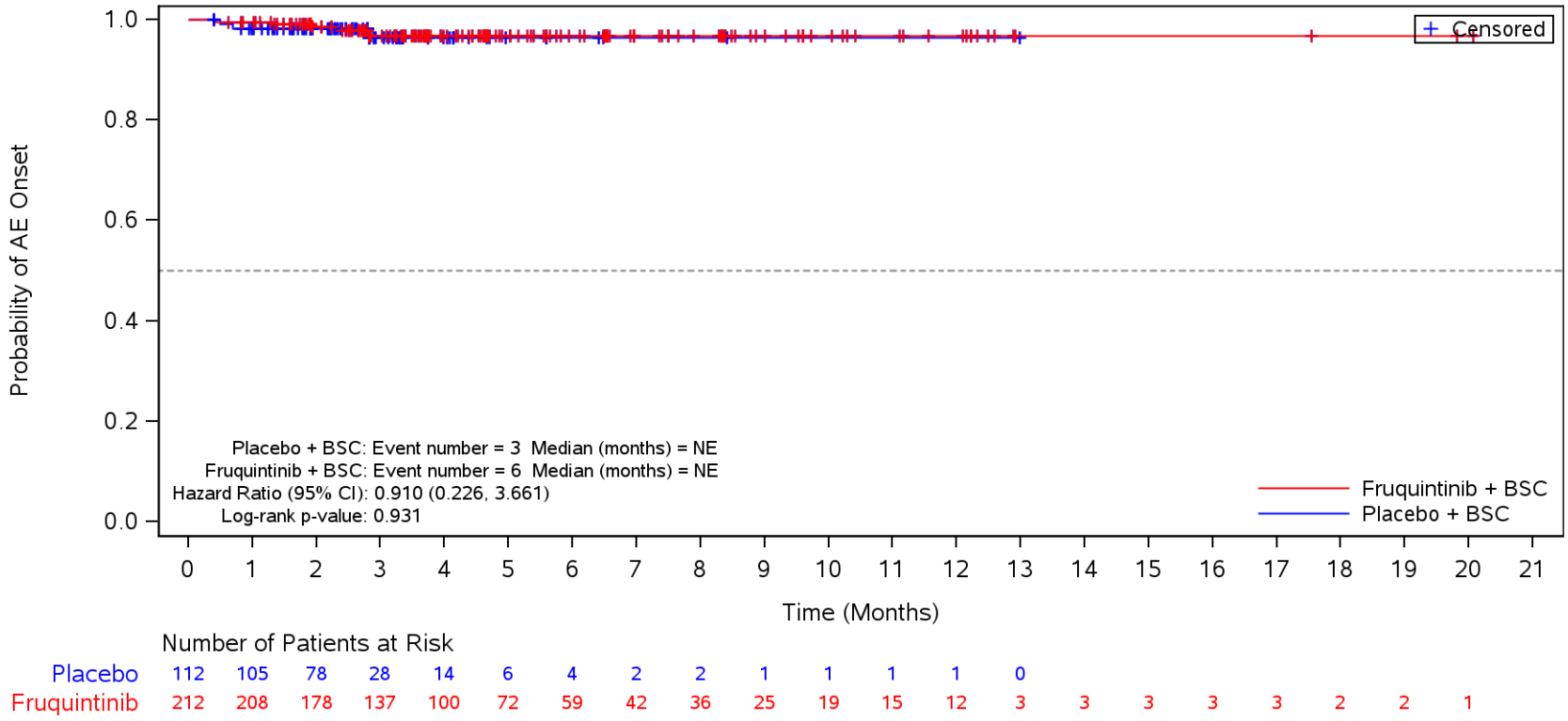
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**
>=65 years



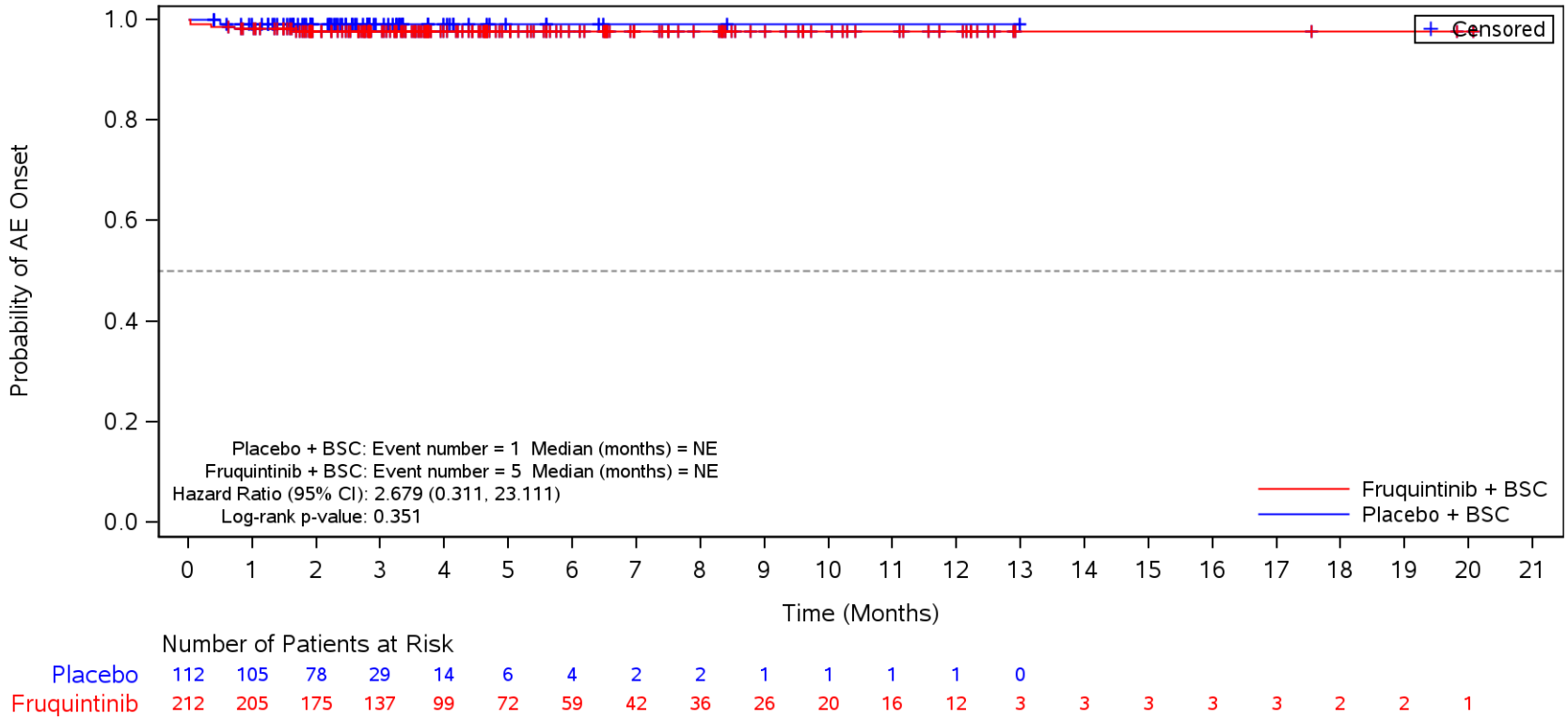
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Condition aggravated**
>=65 years



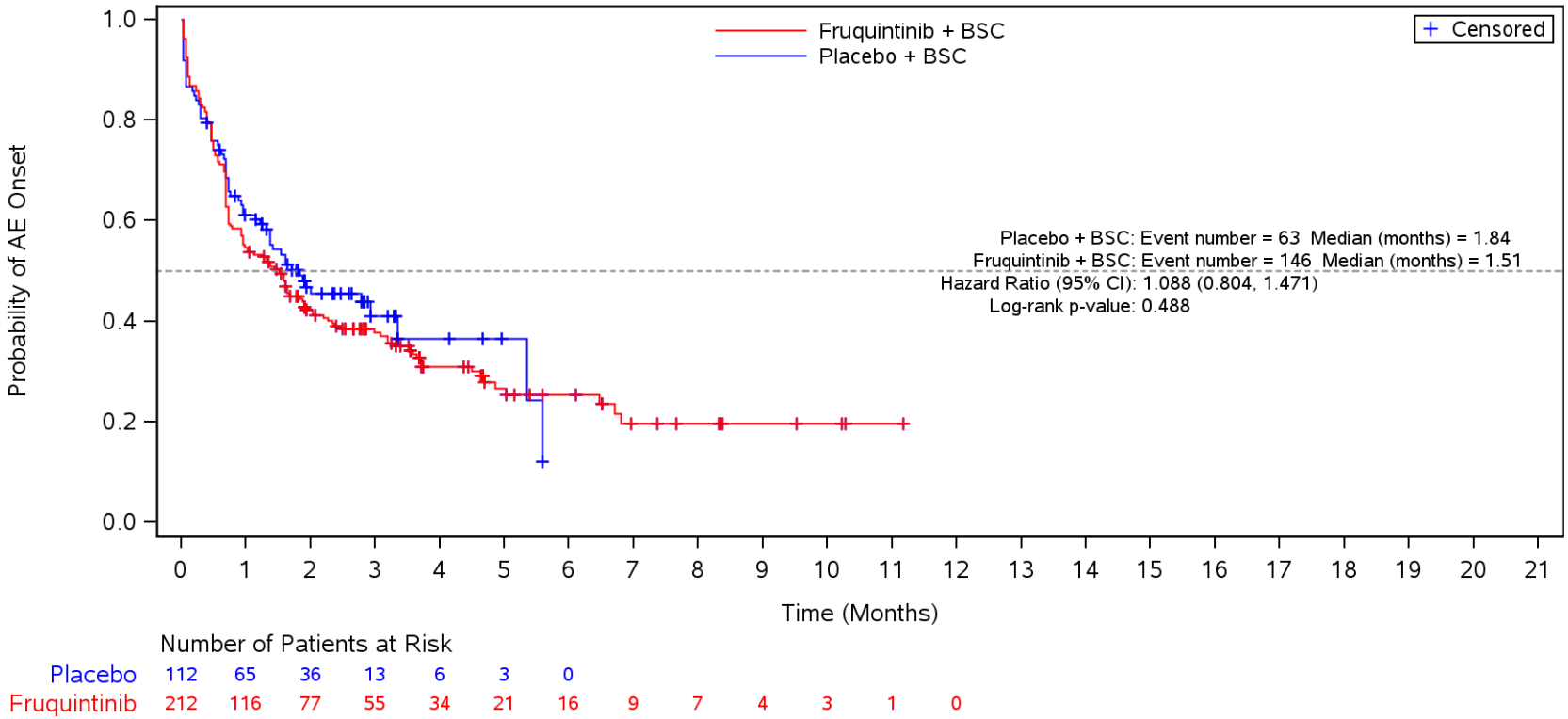
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**
>=65 years



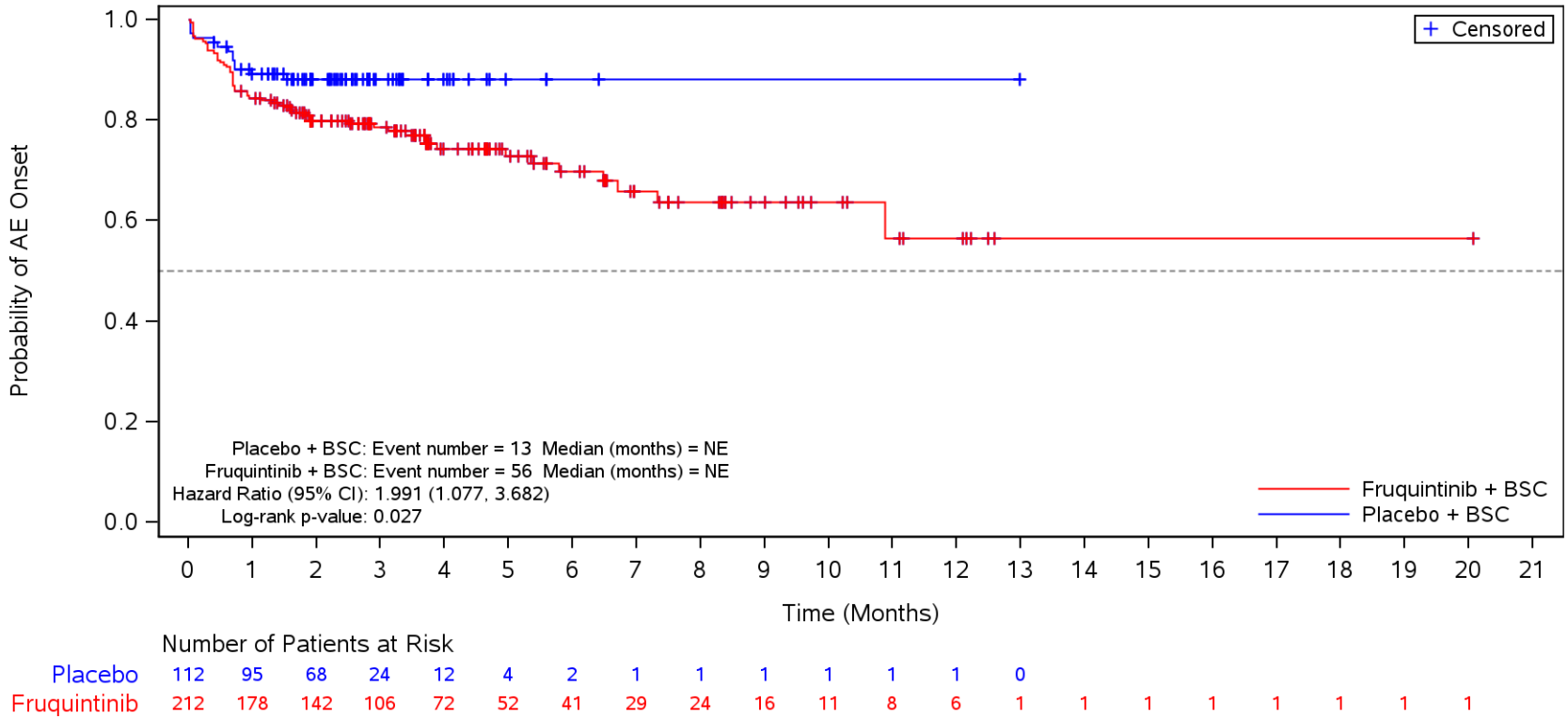
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
>=65 years



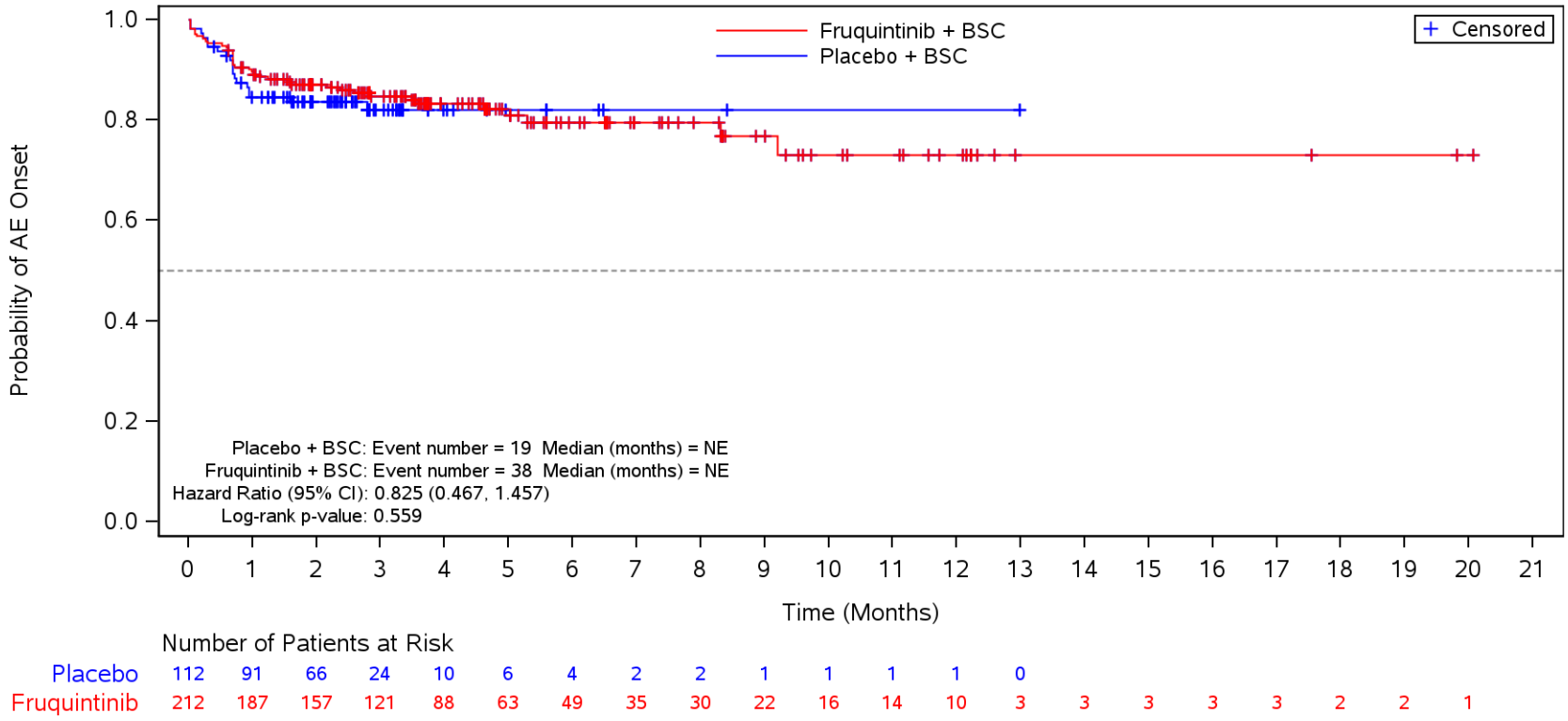
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
>=65 years



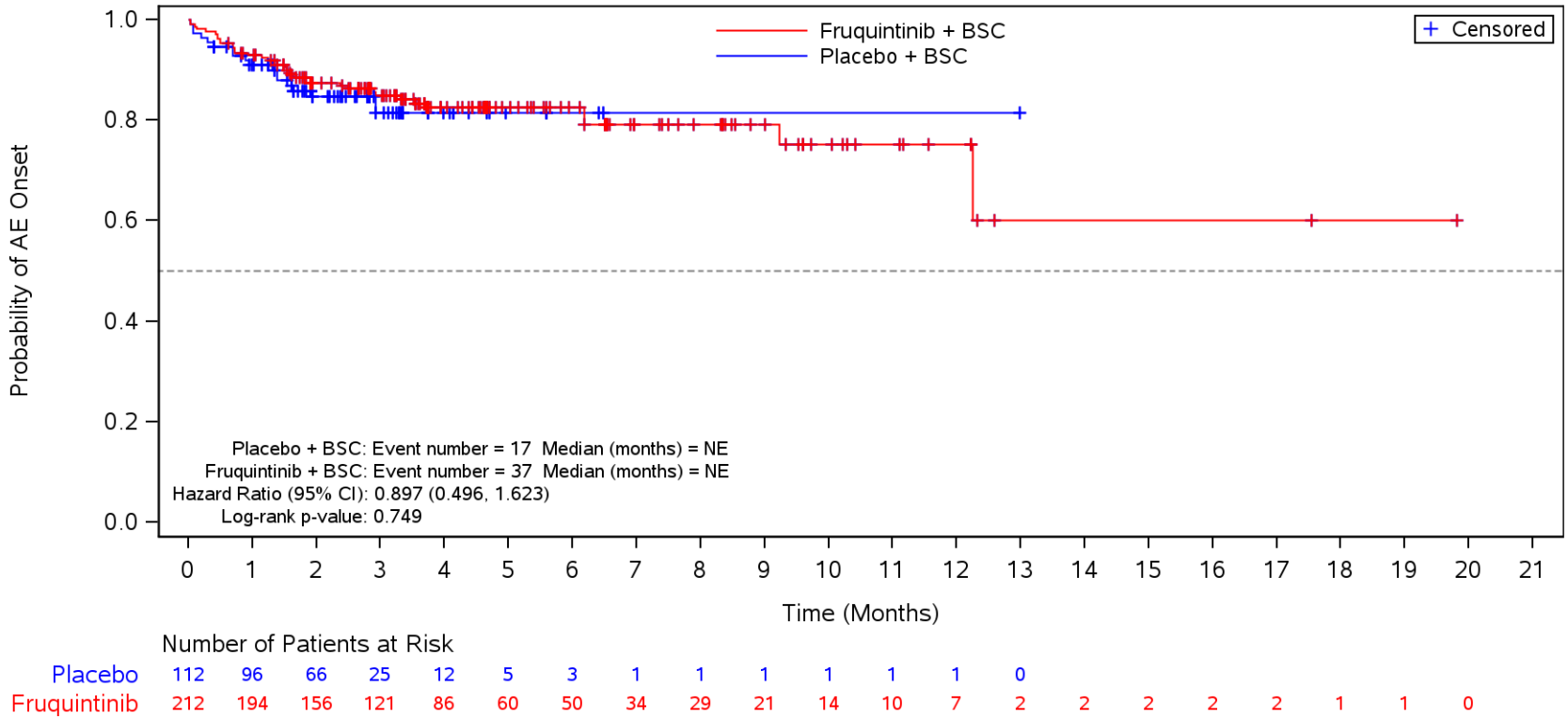
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
>=65 years



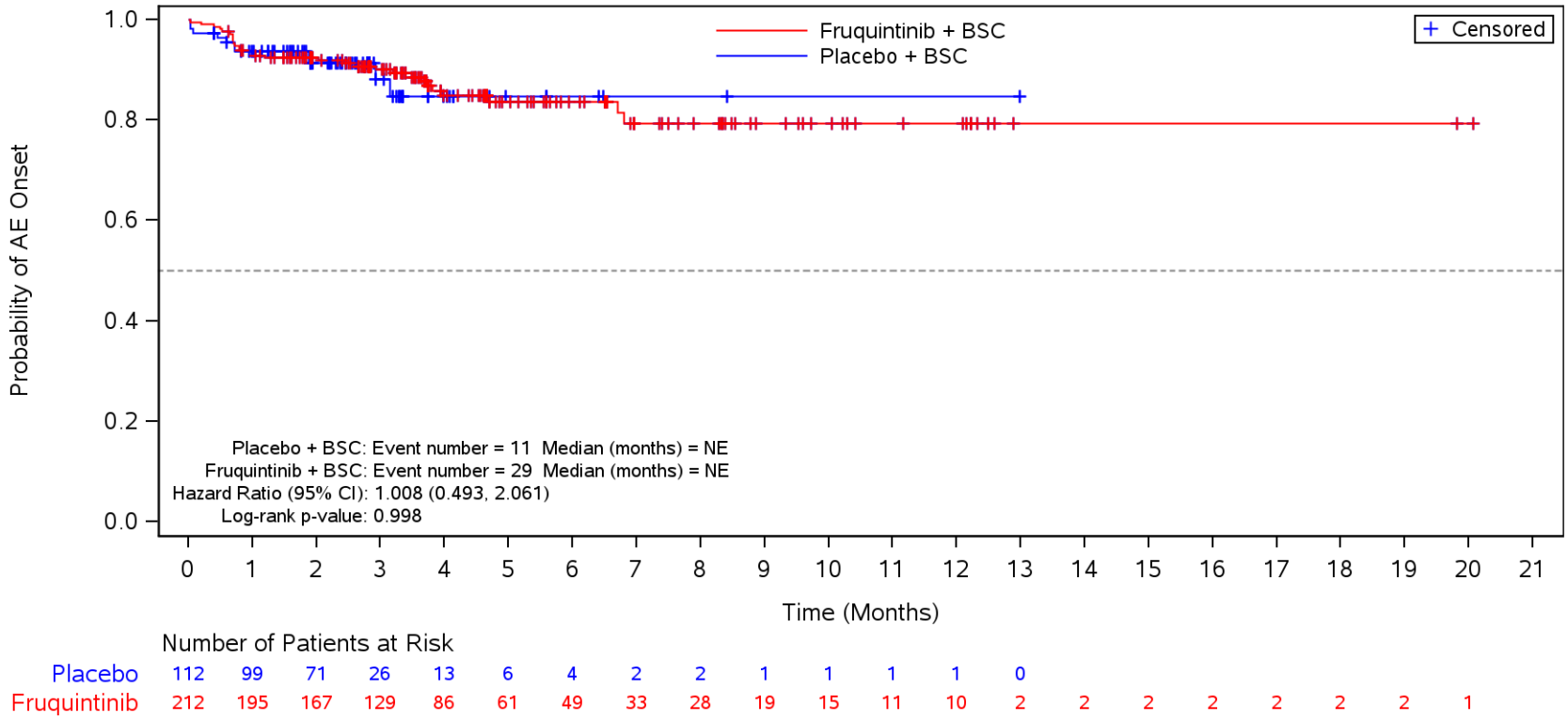
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
>=65 years



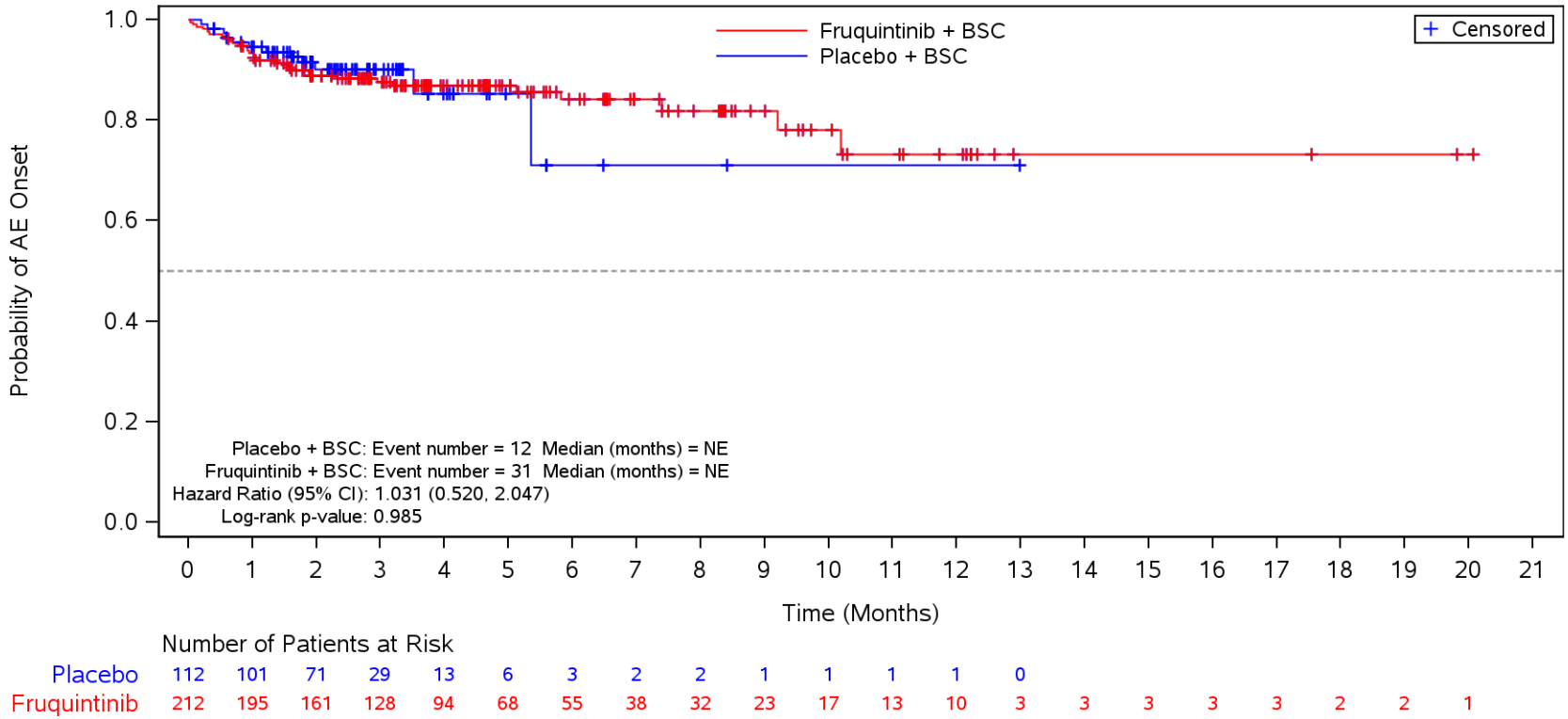
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
>=65 years



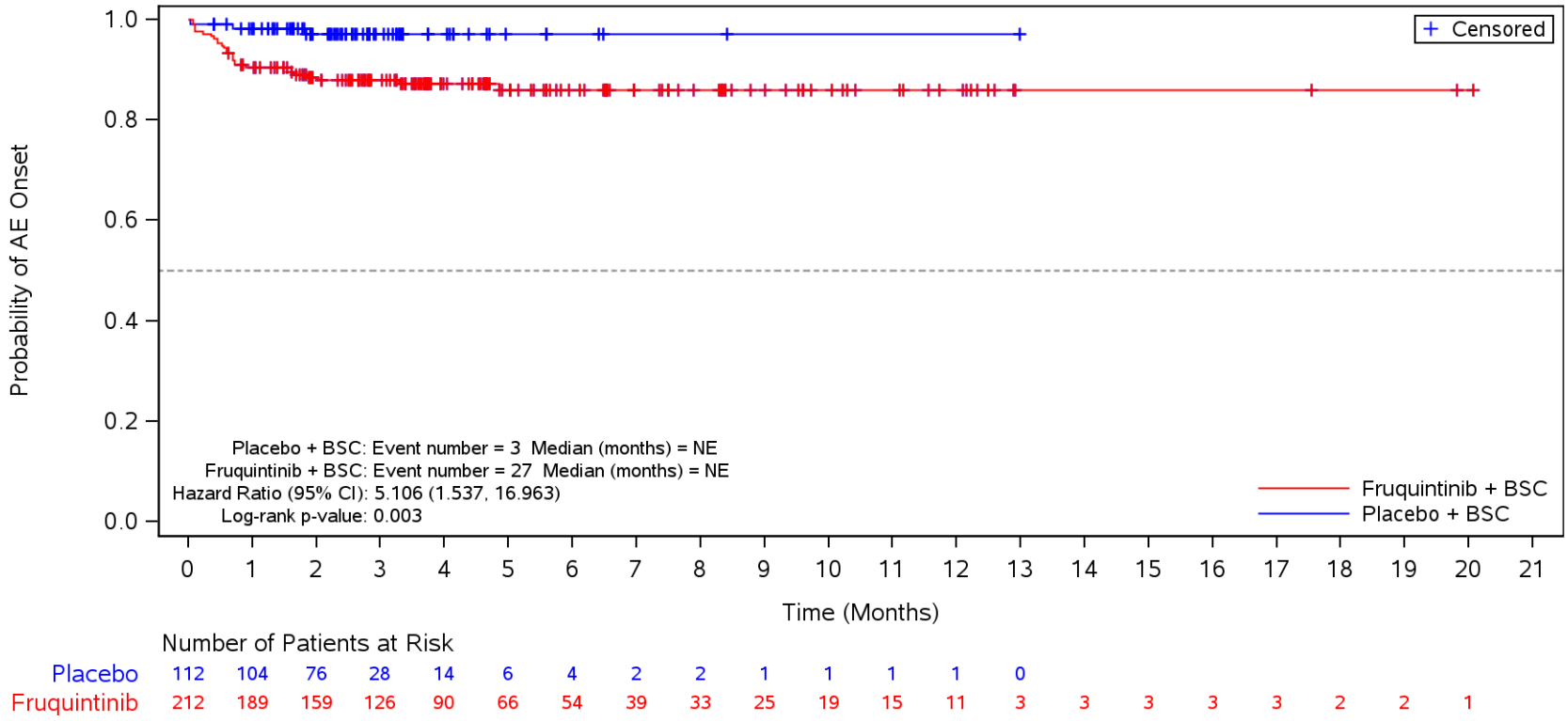
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
>=65 years



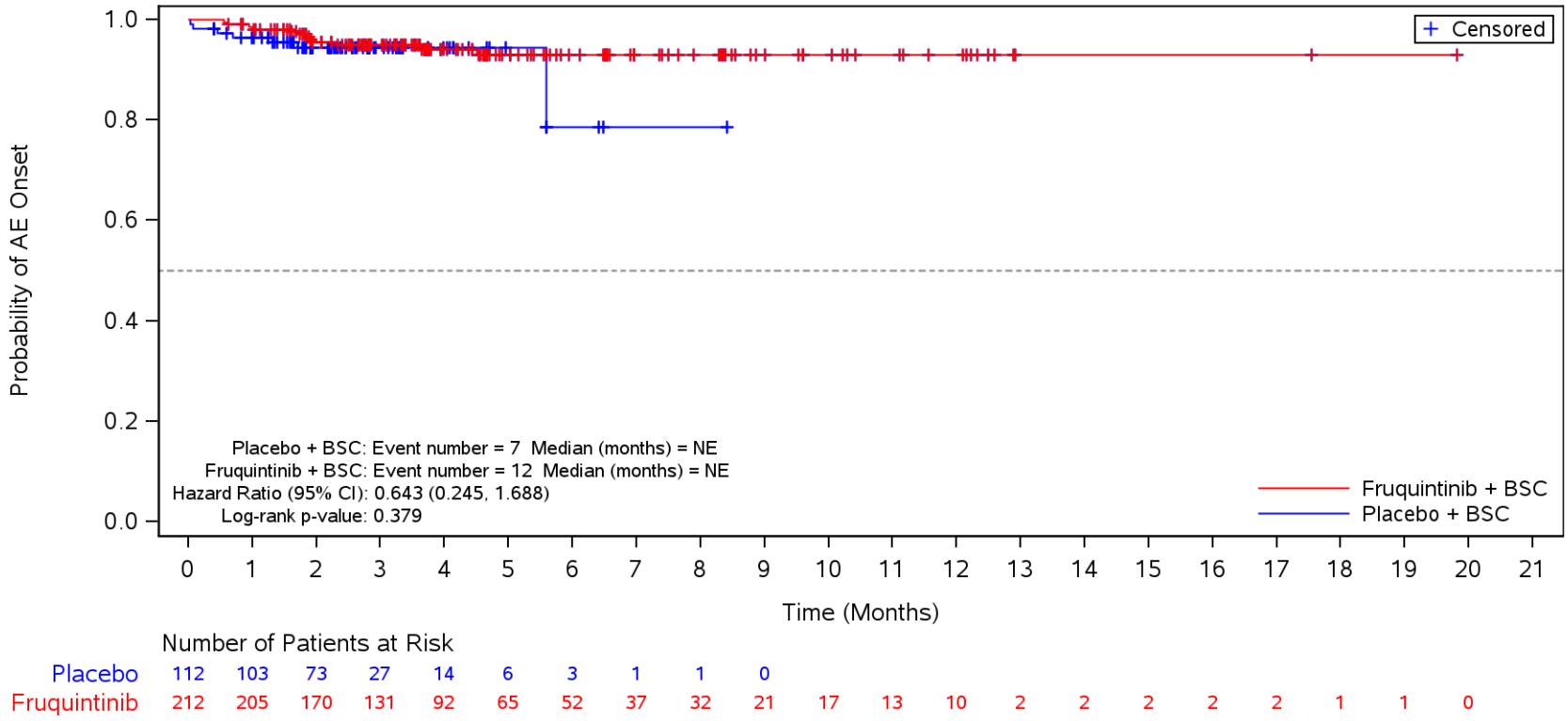
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
>=65 years



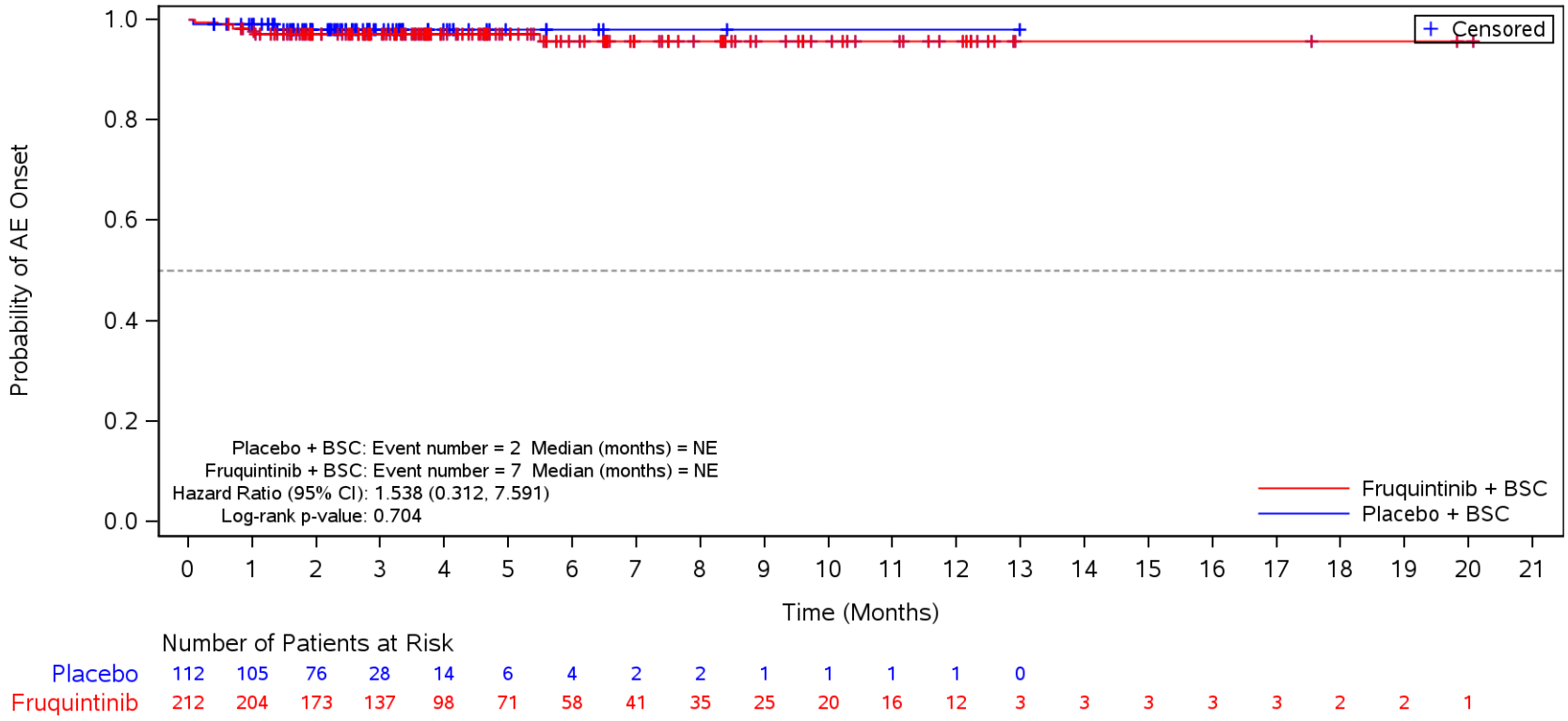
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
>=65 years



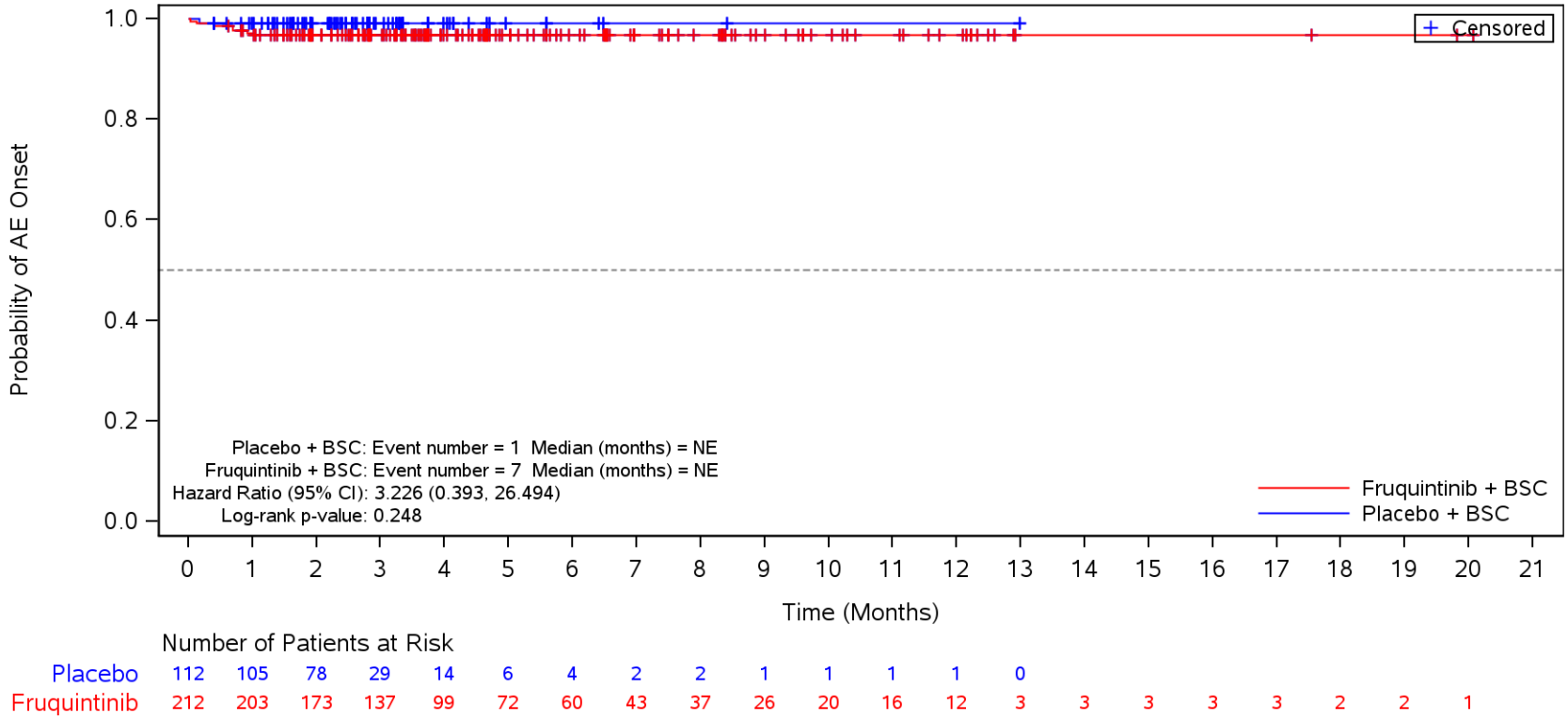
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
>=65 years



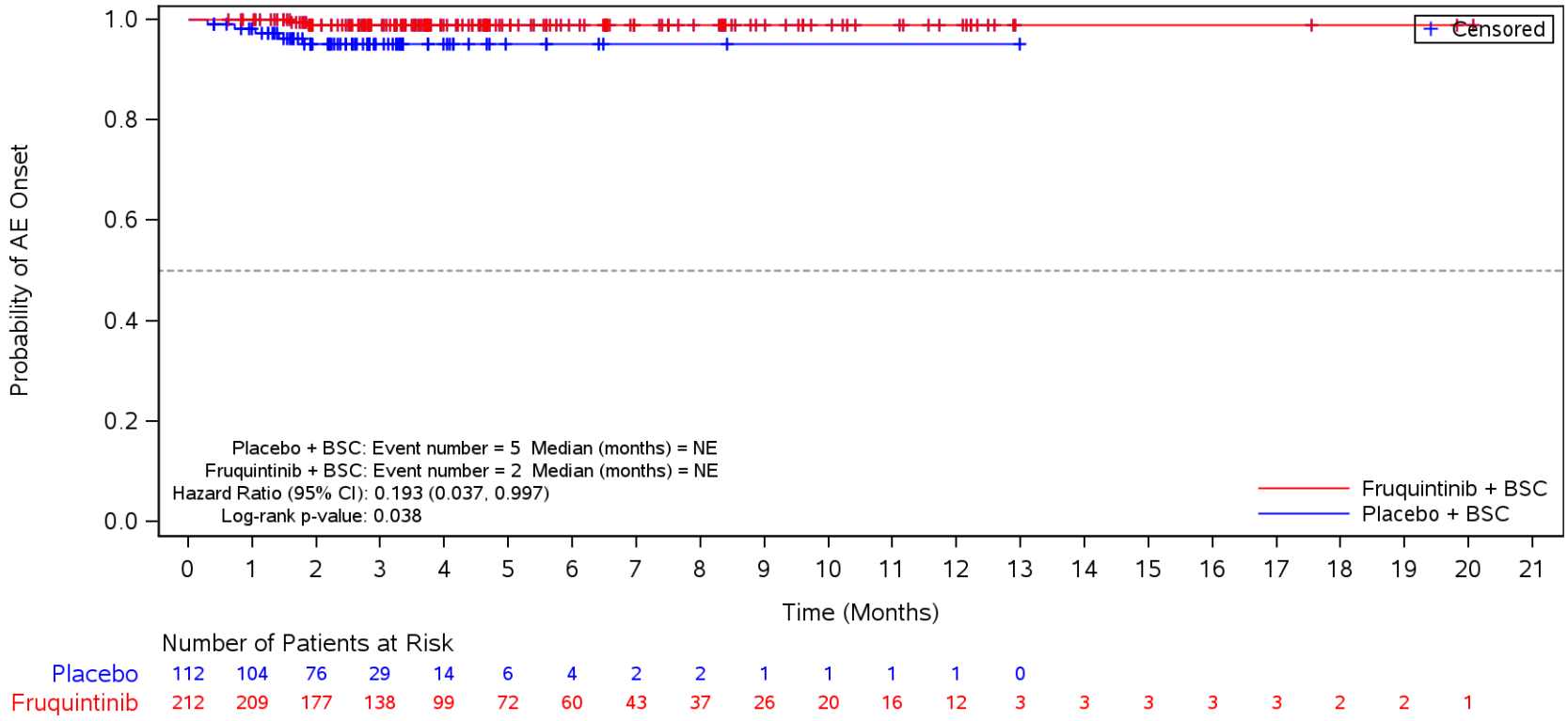
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
>=65 years



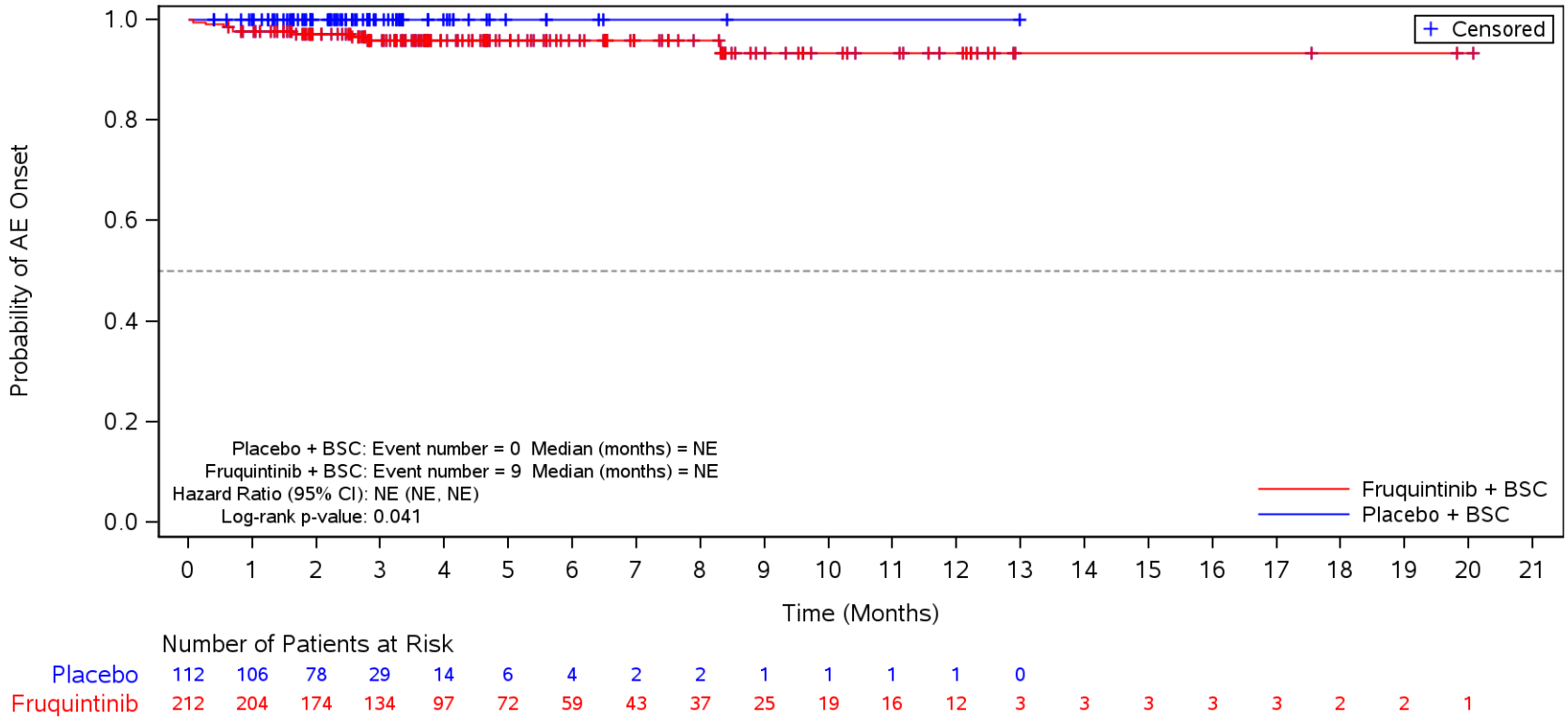
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
>=65 years



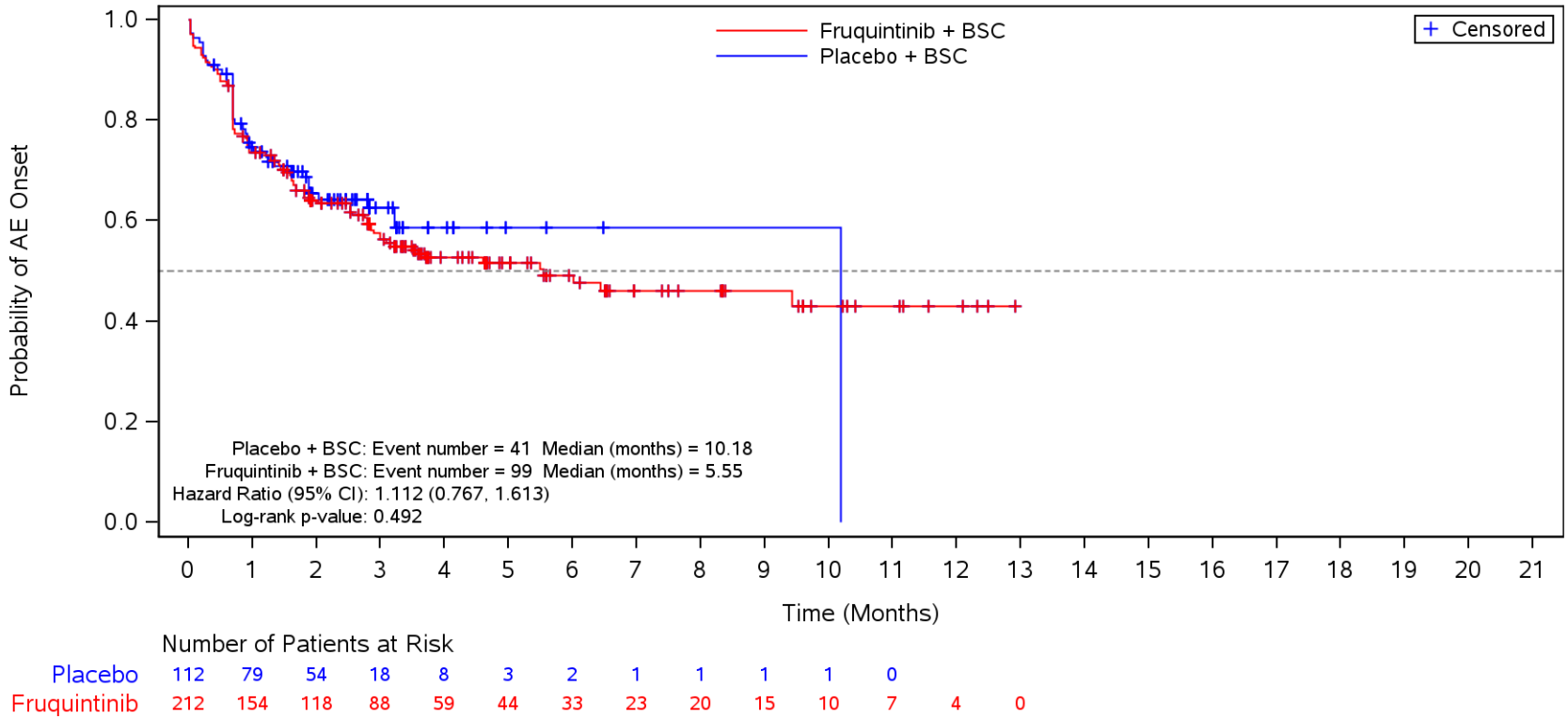
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**
>=65 years



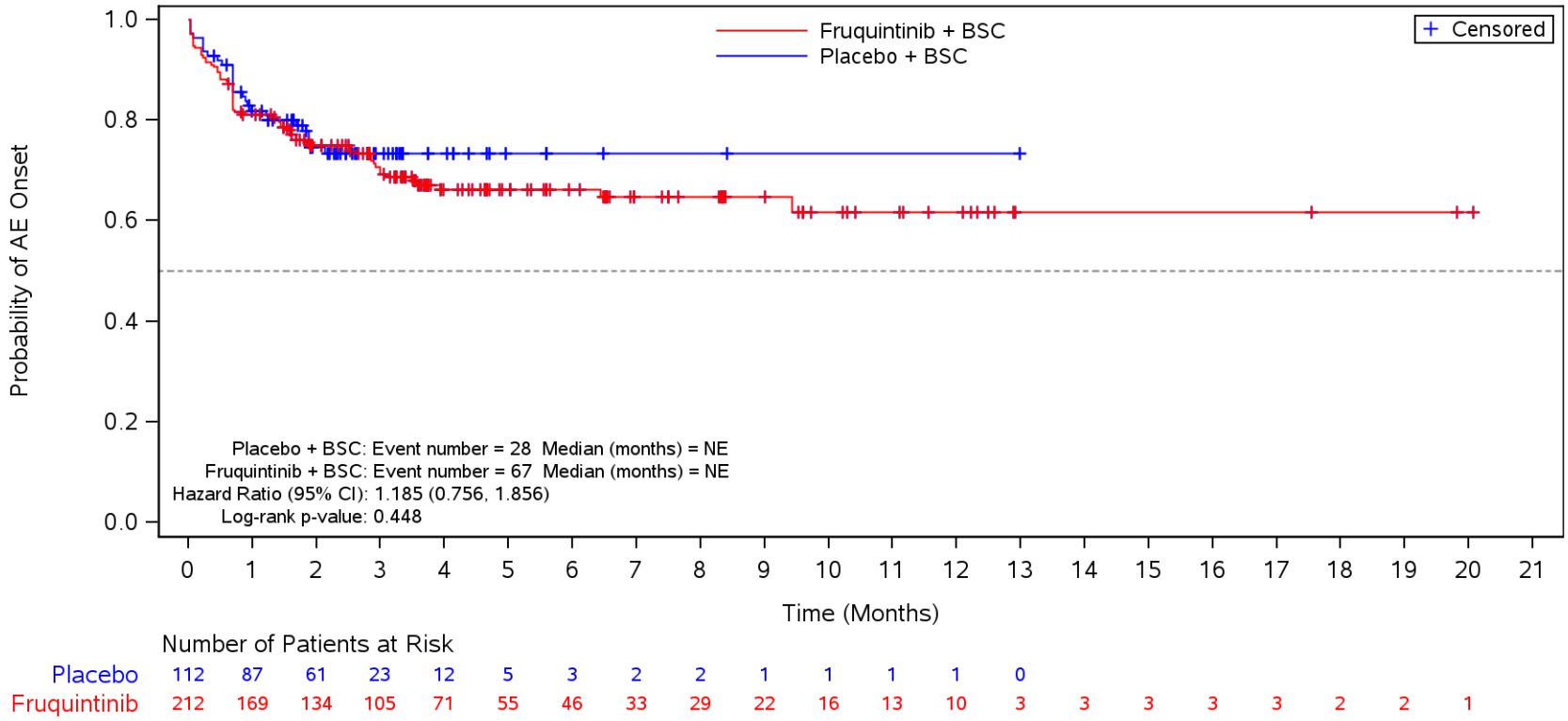
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
>=65 years



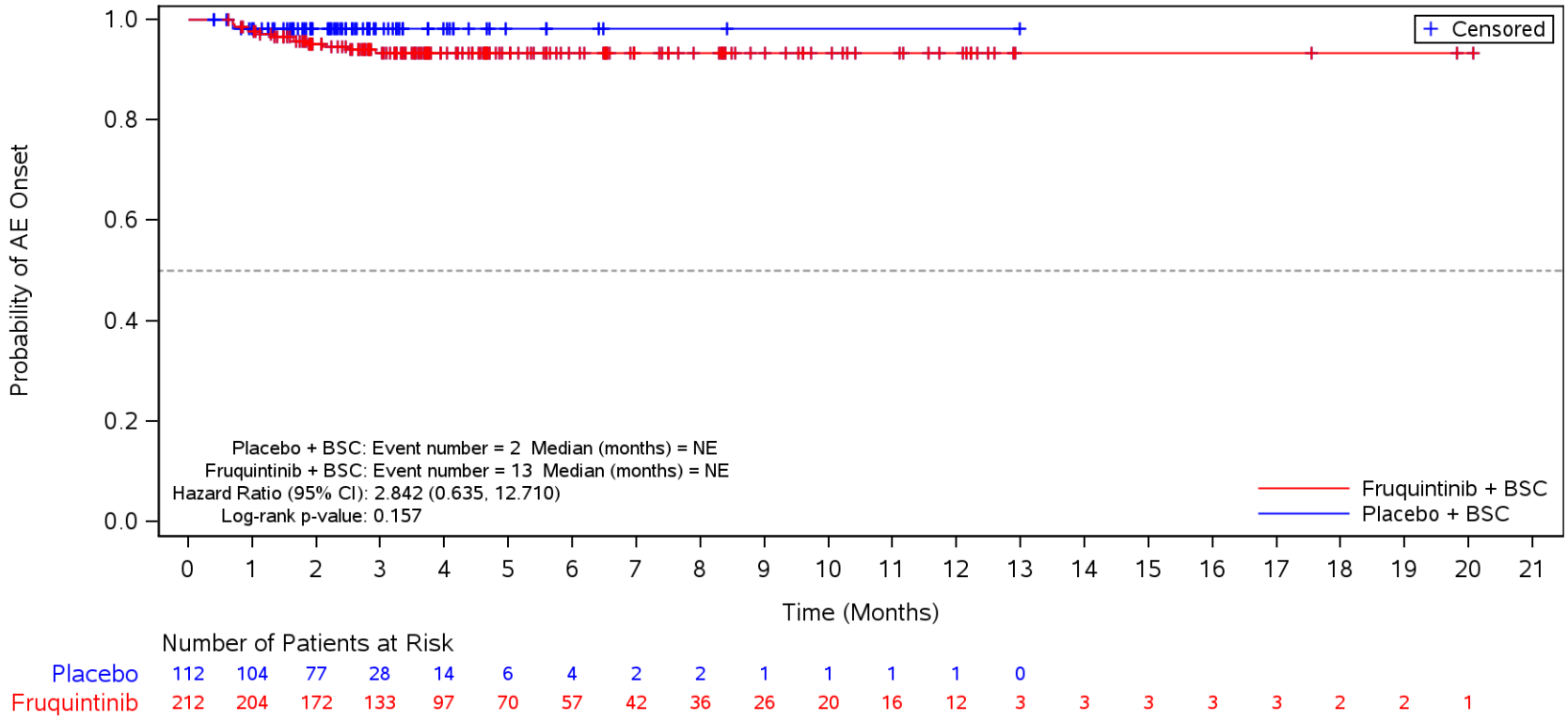
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
>=65 years



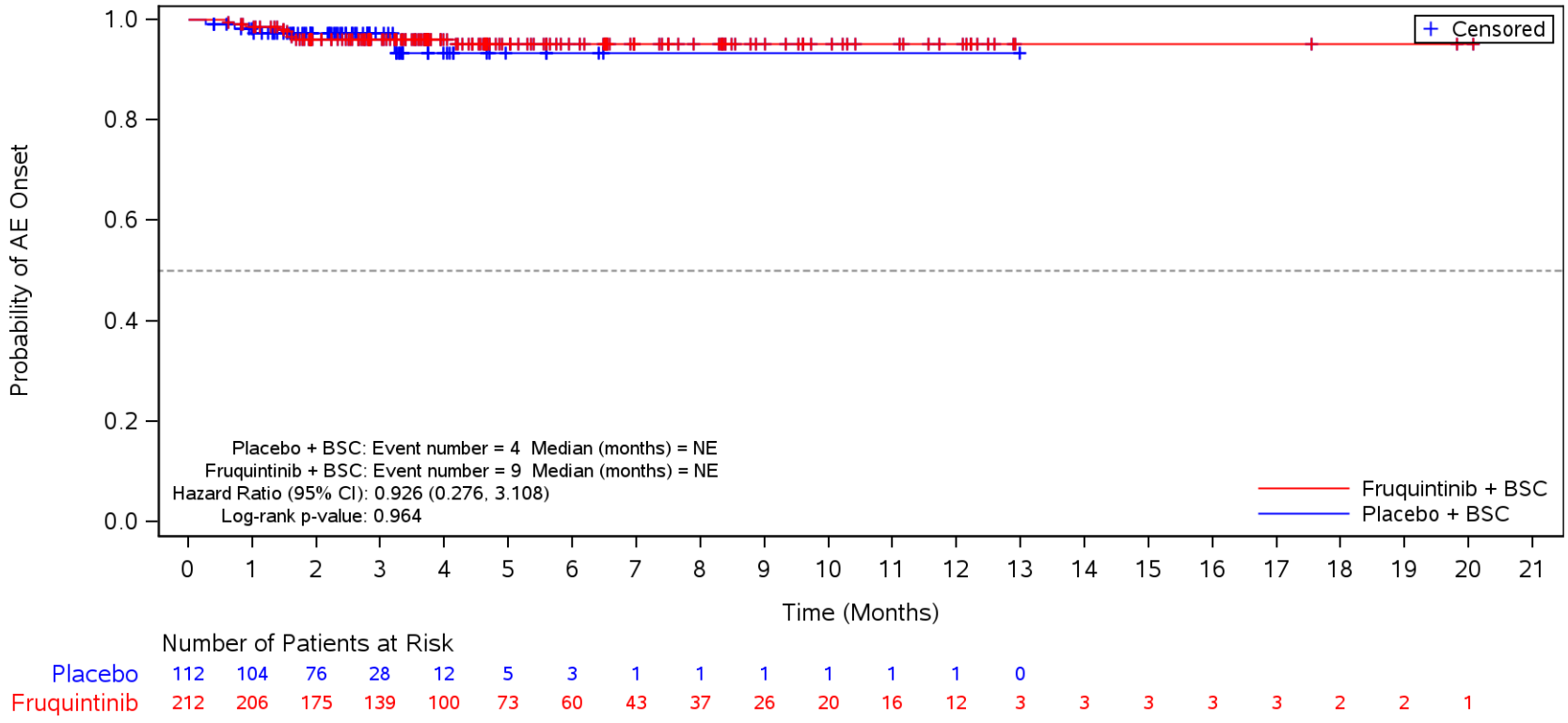
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
>=65 years



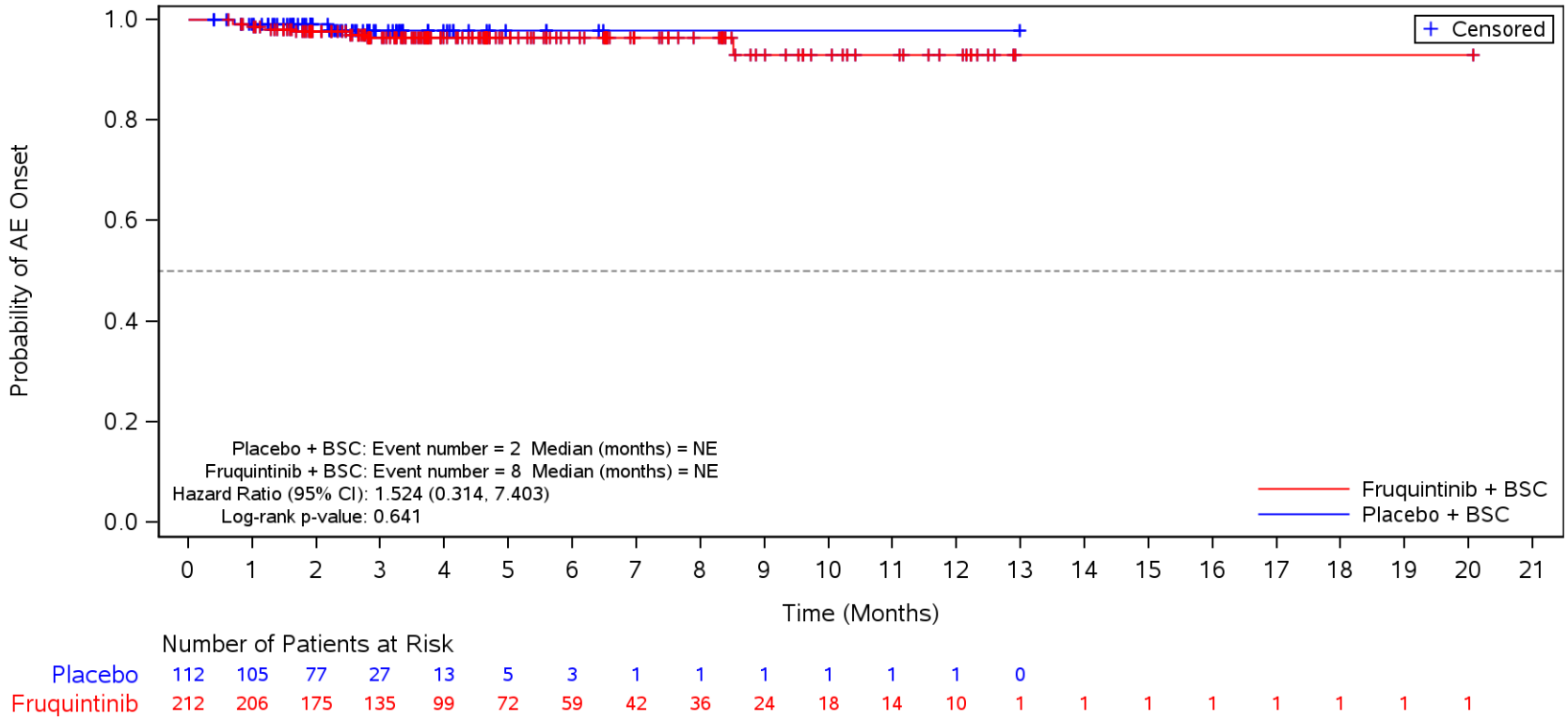
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
>=65 years



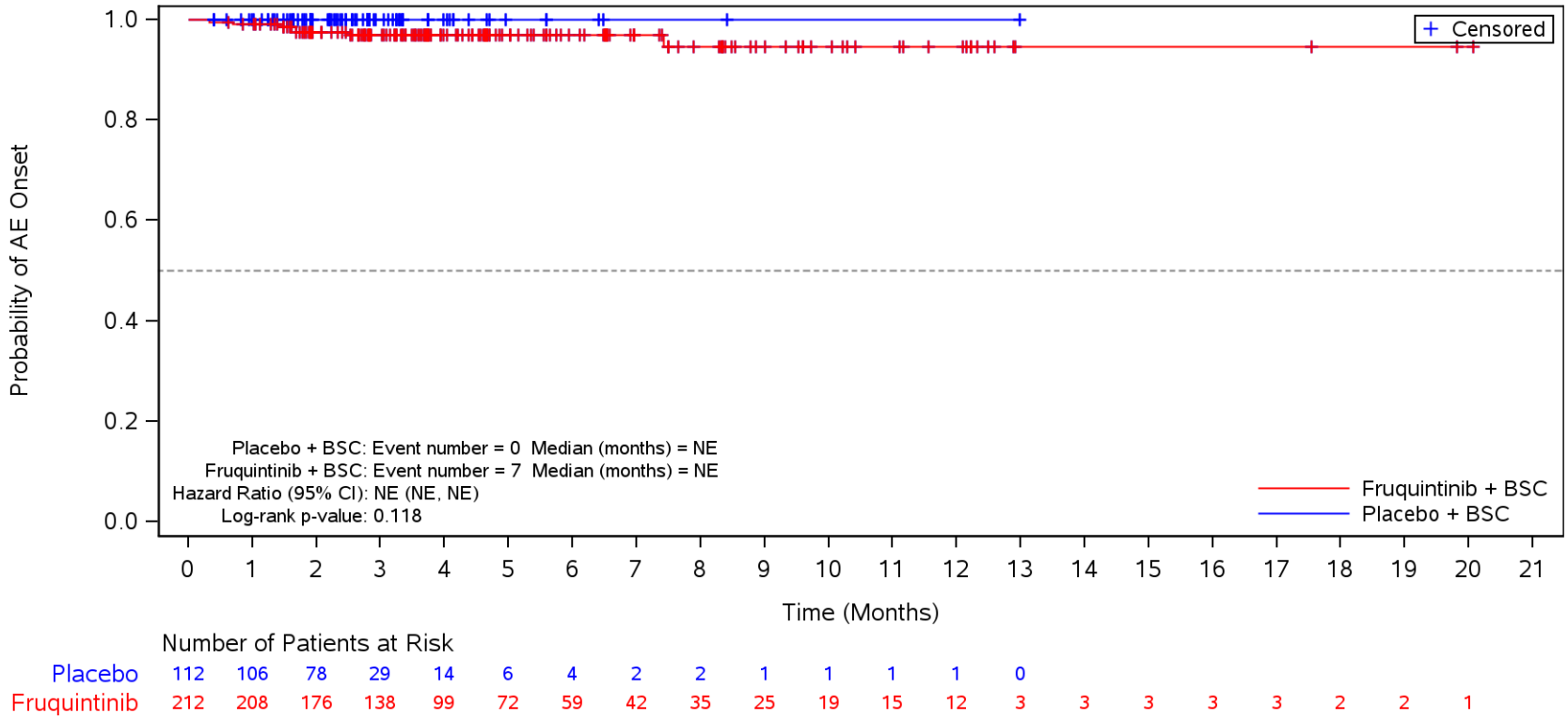
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
>=65 years



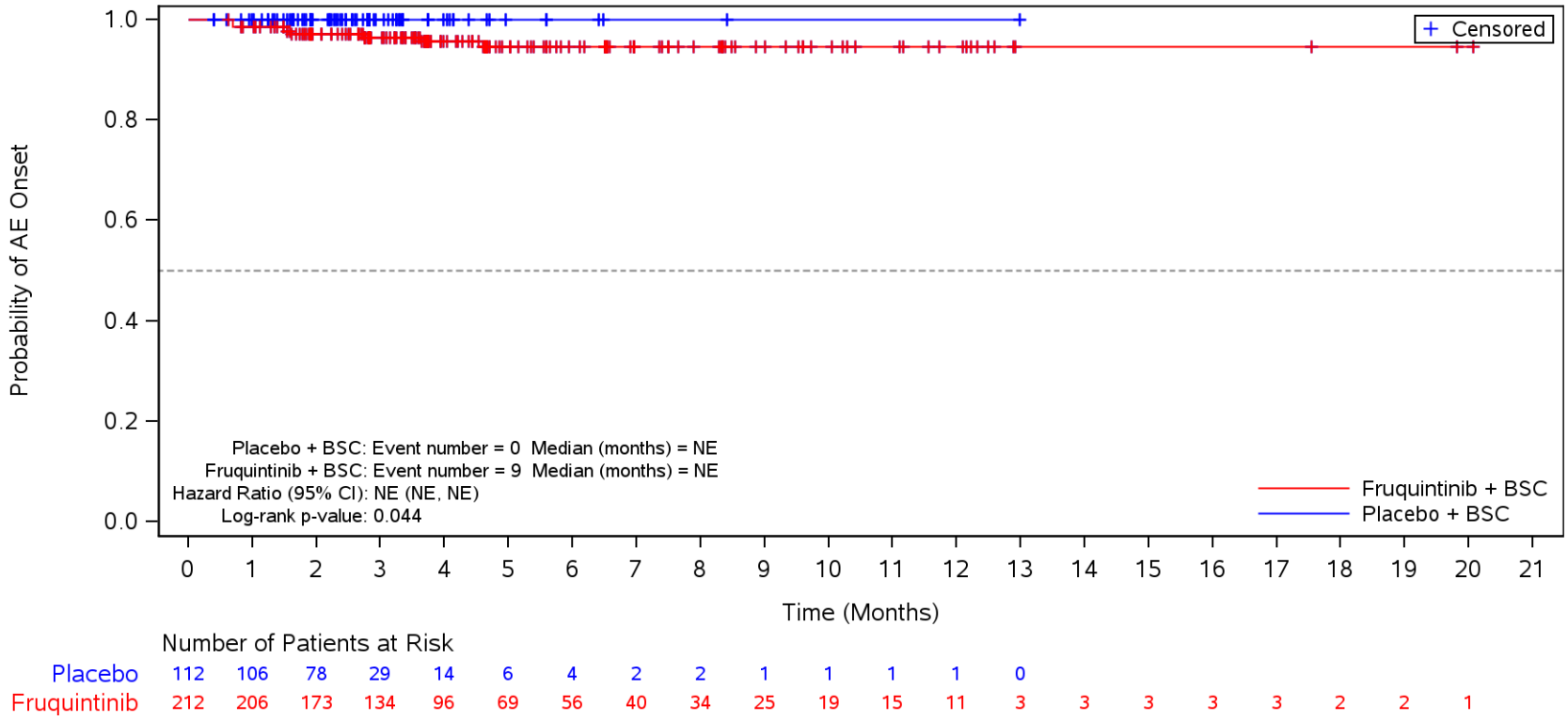
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
>=65 years



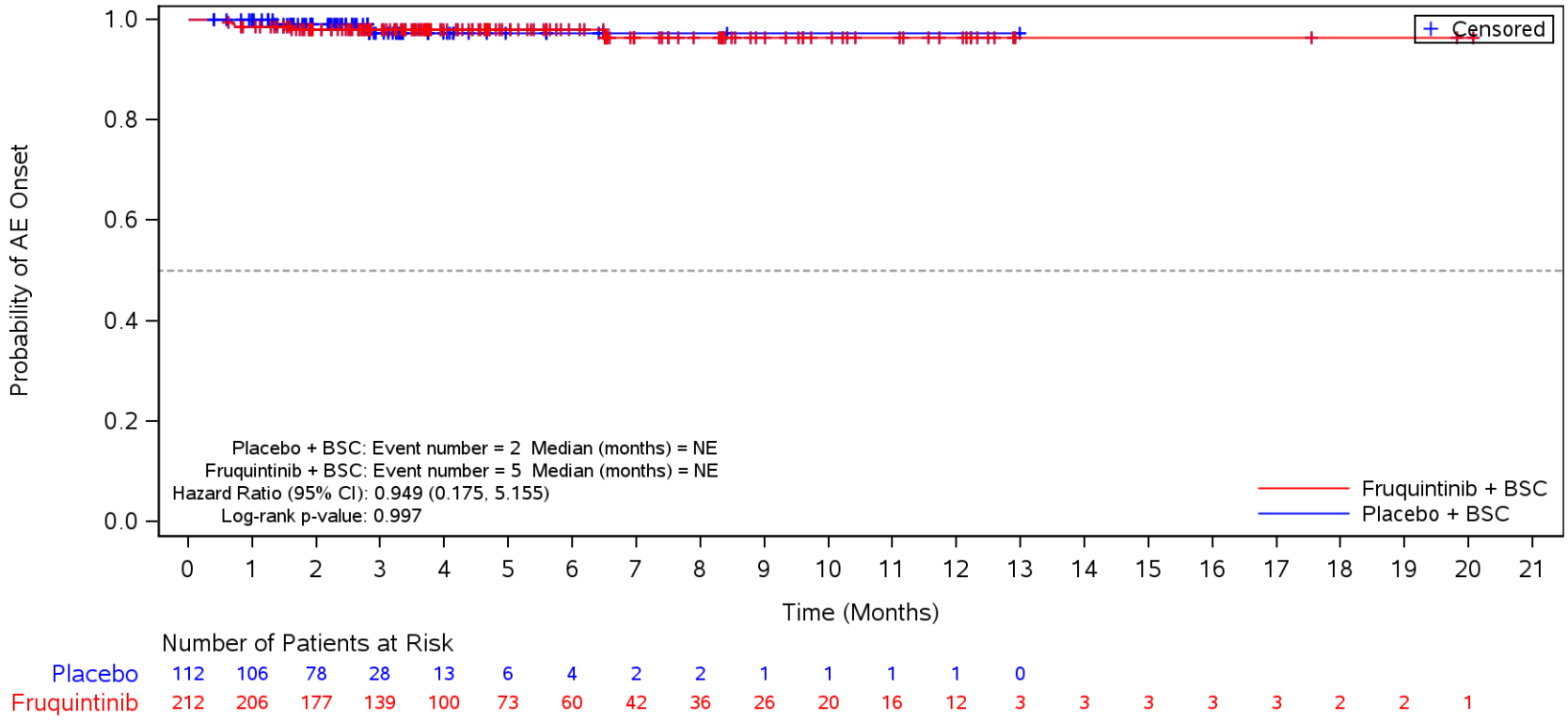
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
>=65 years



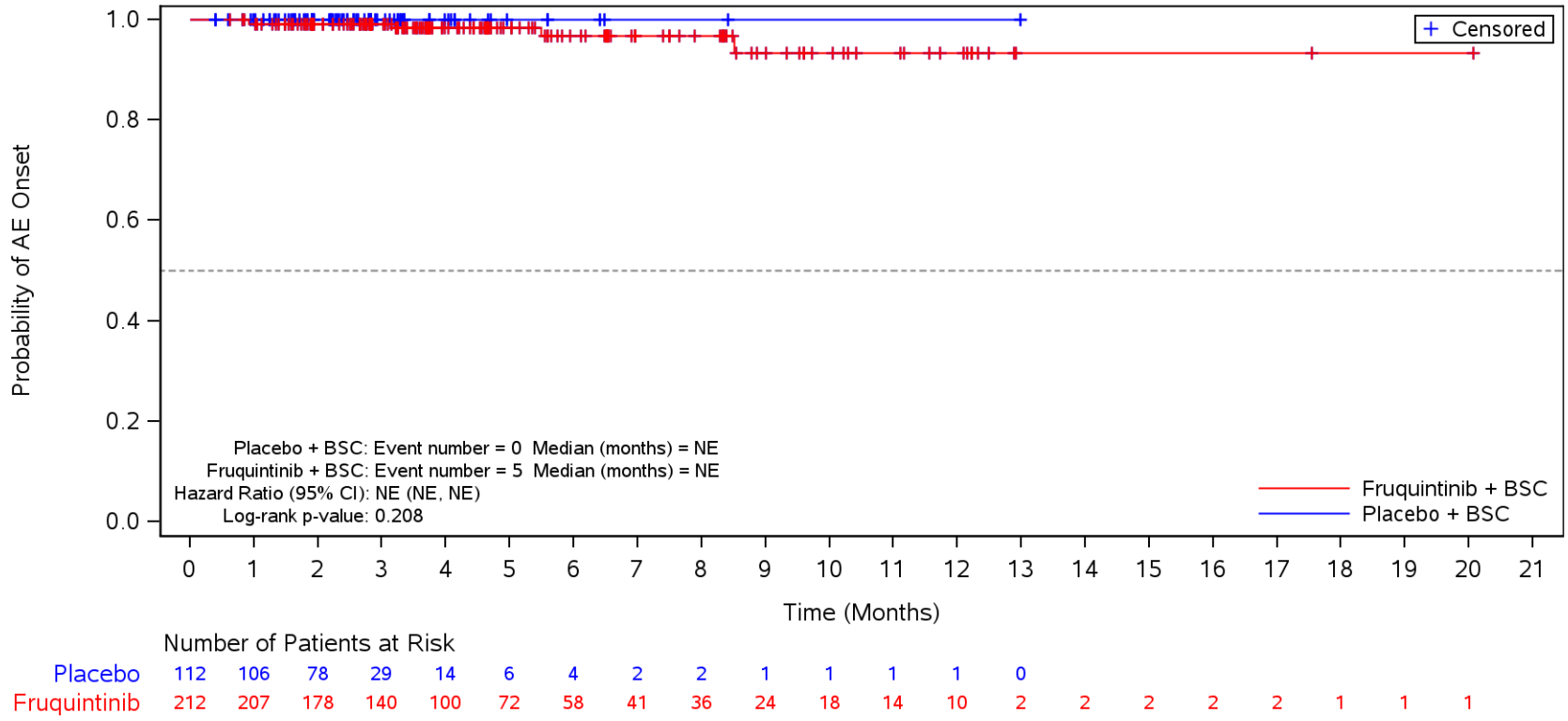
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
>=65 years



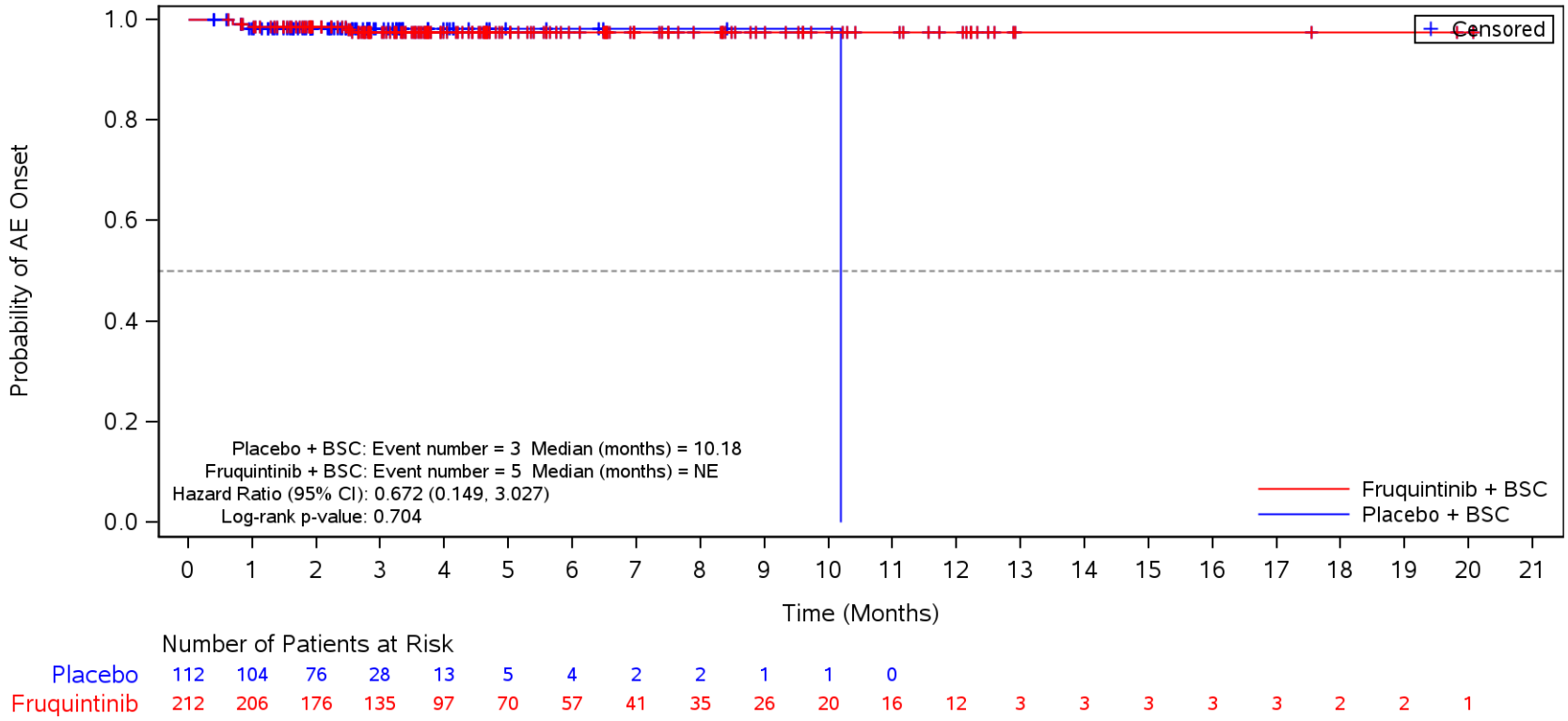
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**
>=65 years



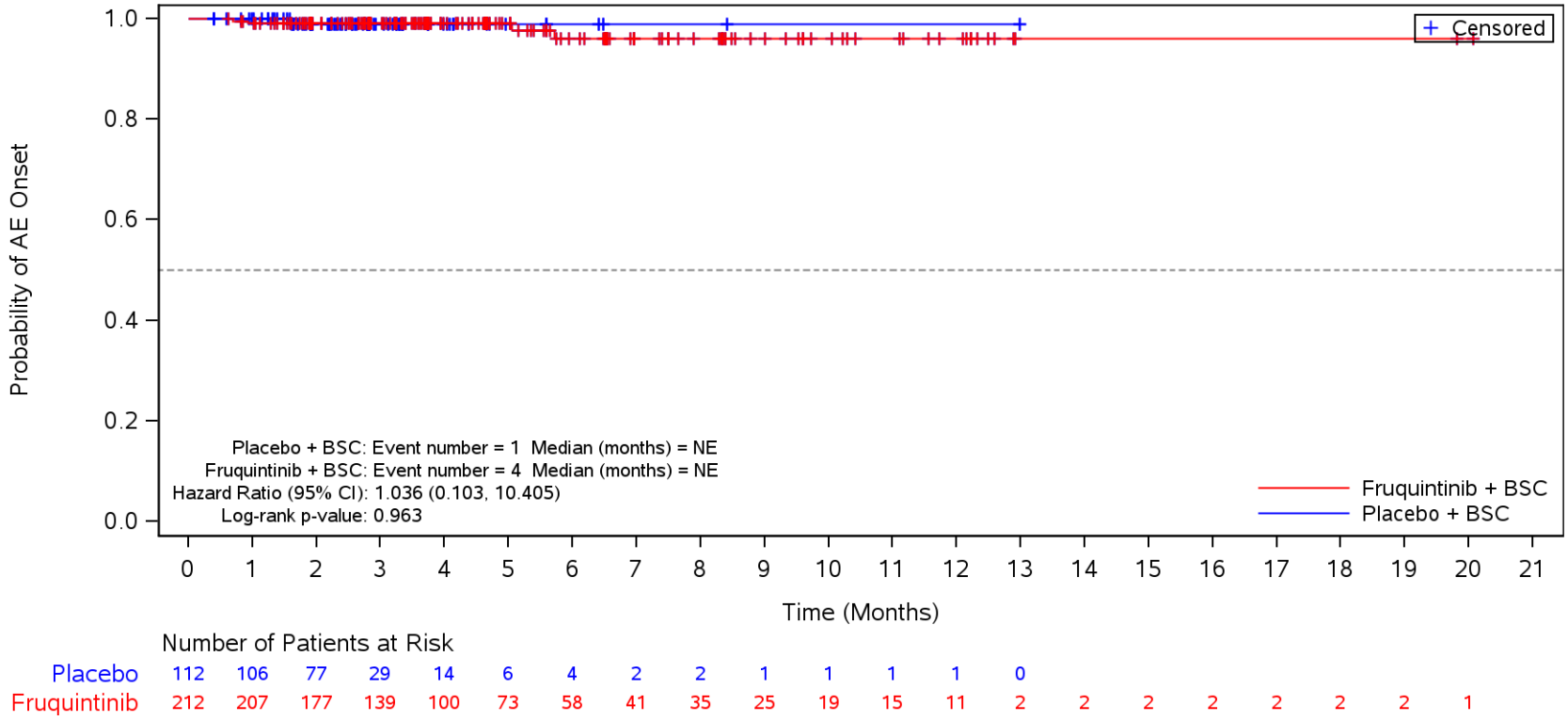
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
>=65 years



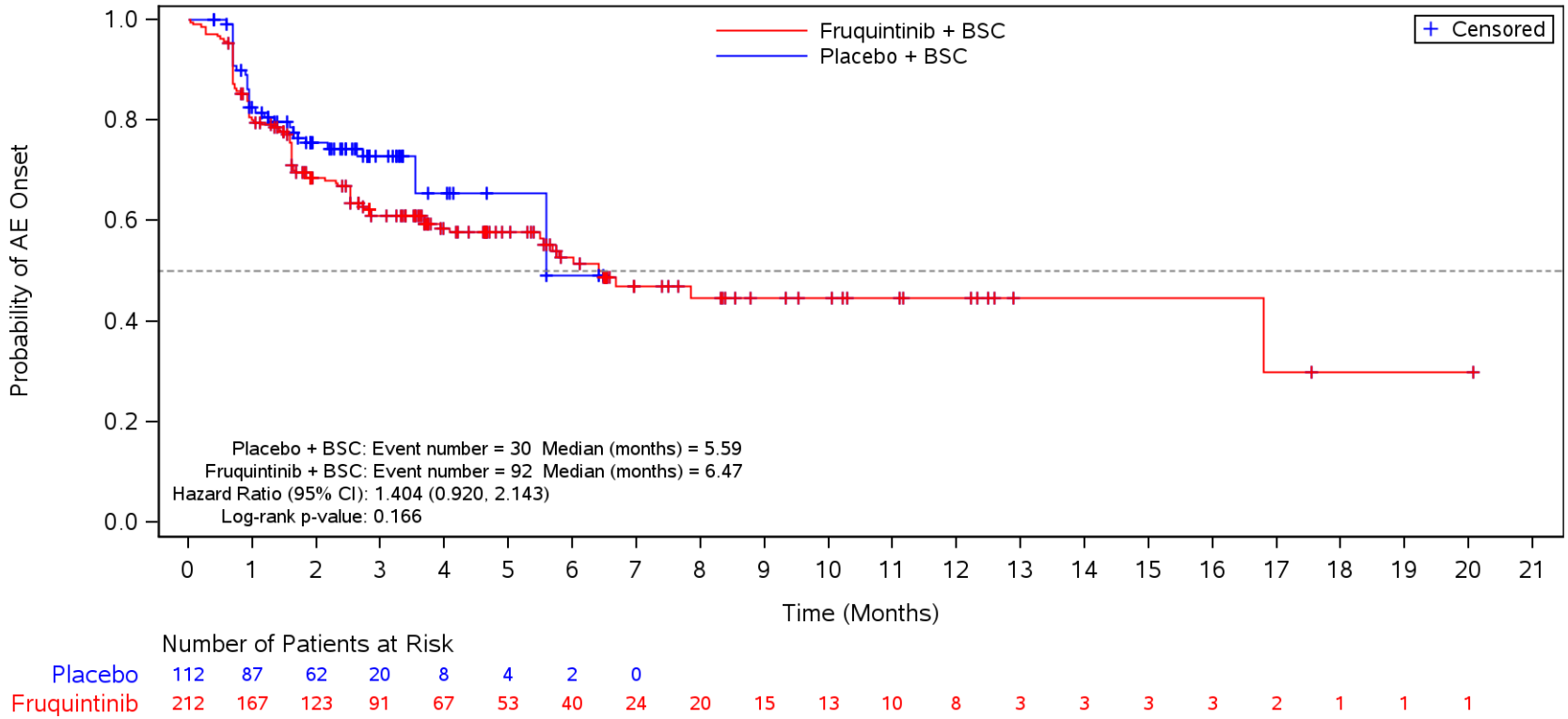
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
>=65 years



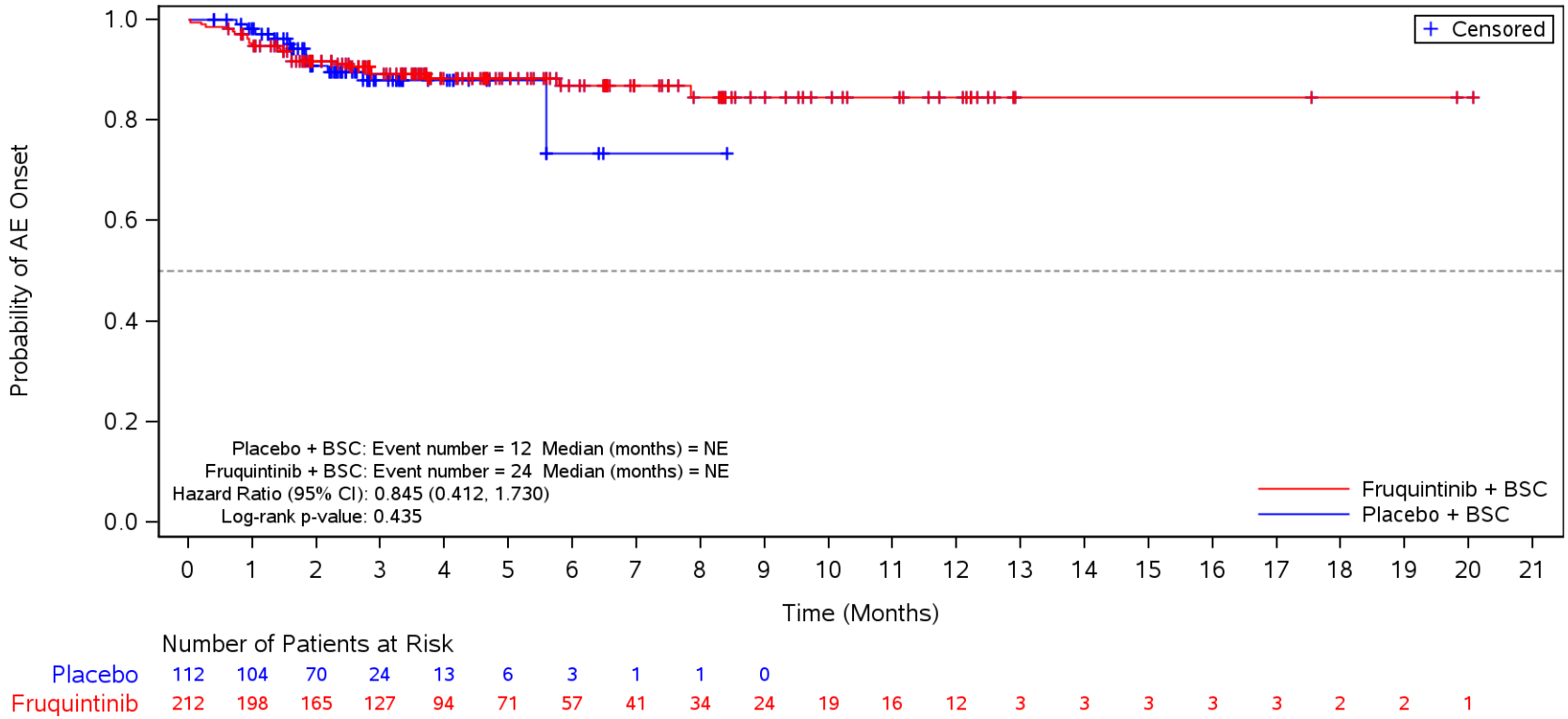
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations**
>=65 years



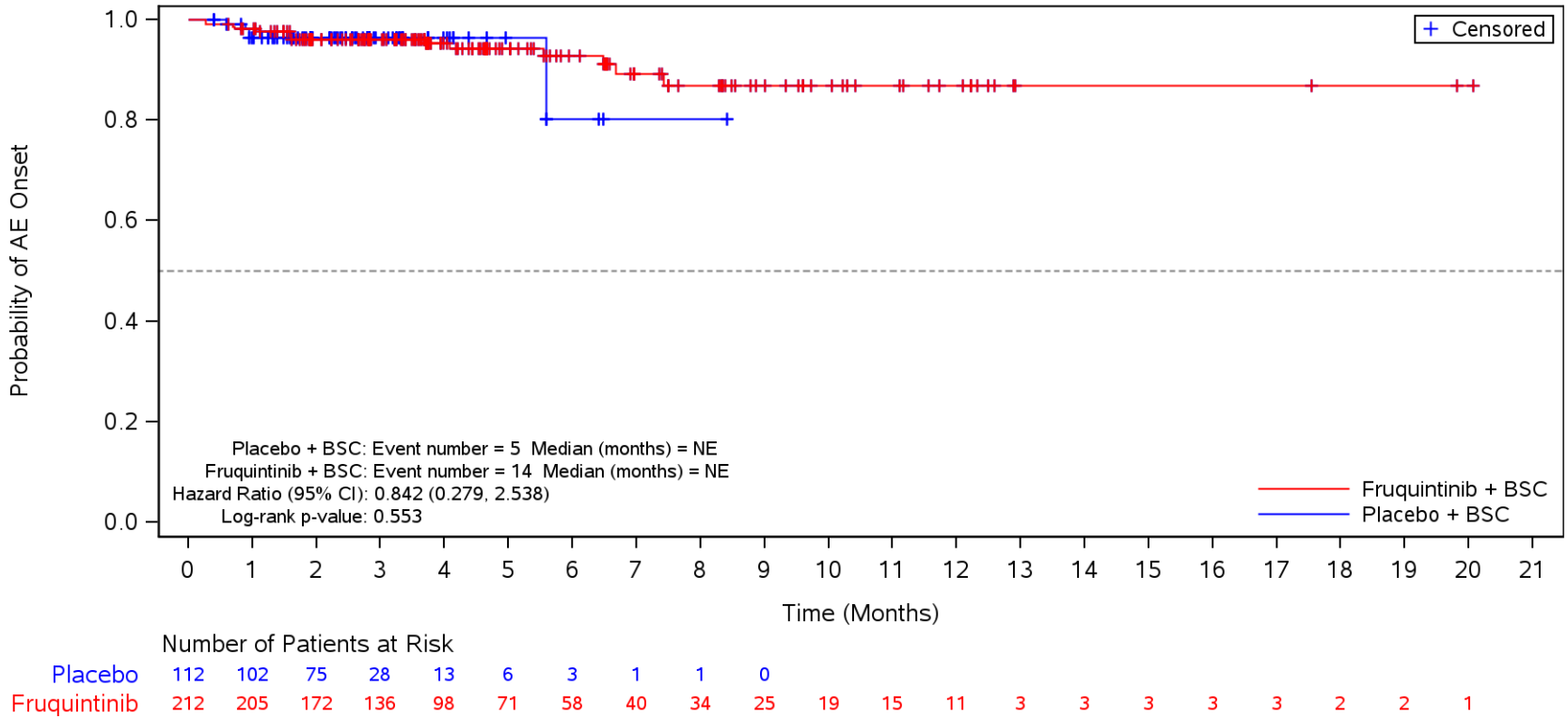
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
>=65 years



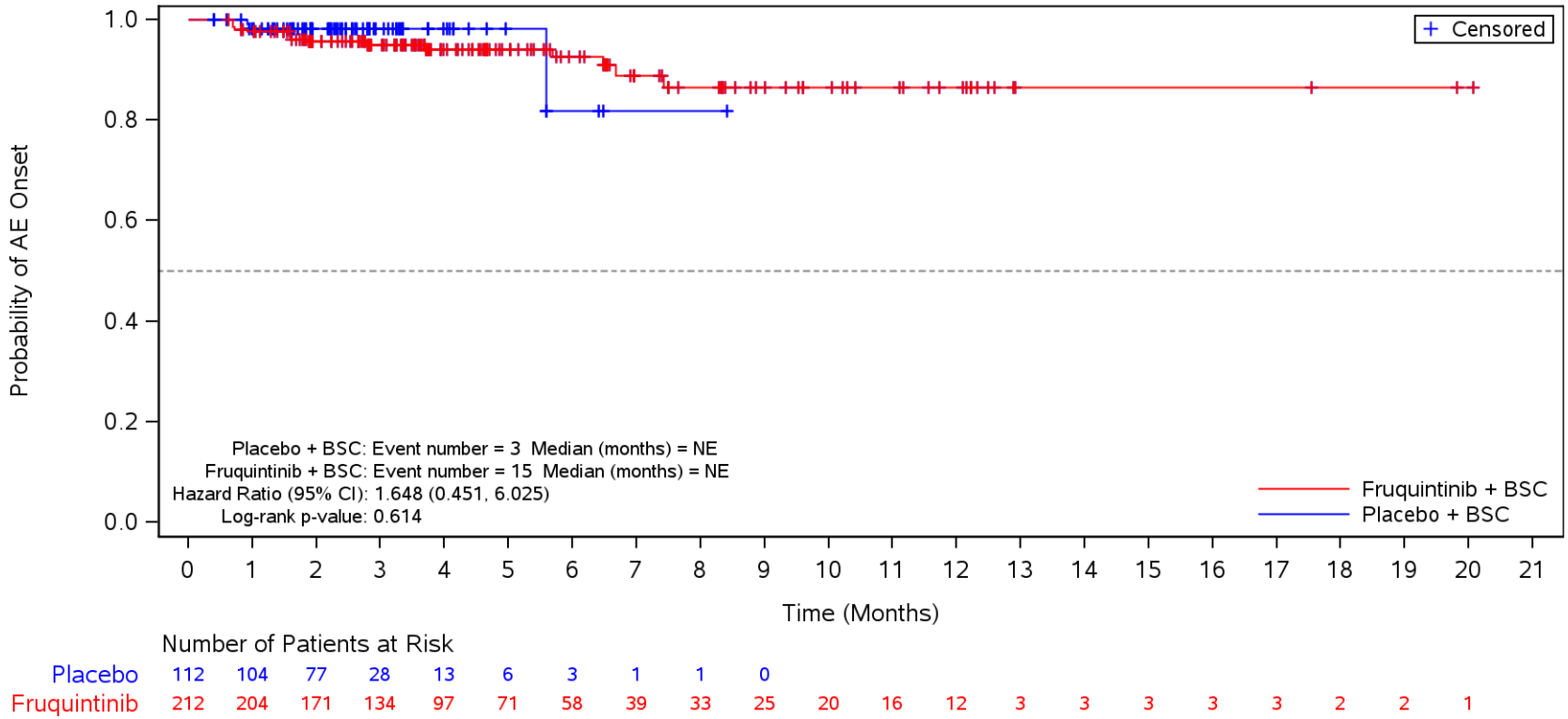
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
>=65 years



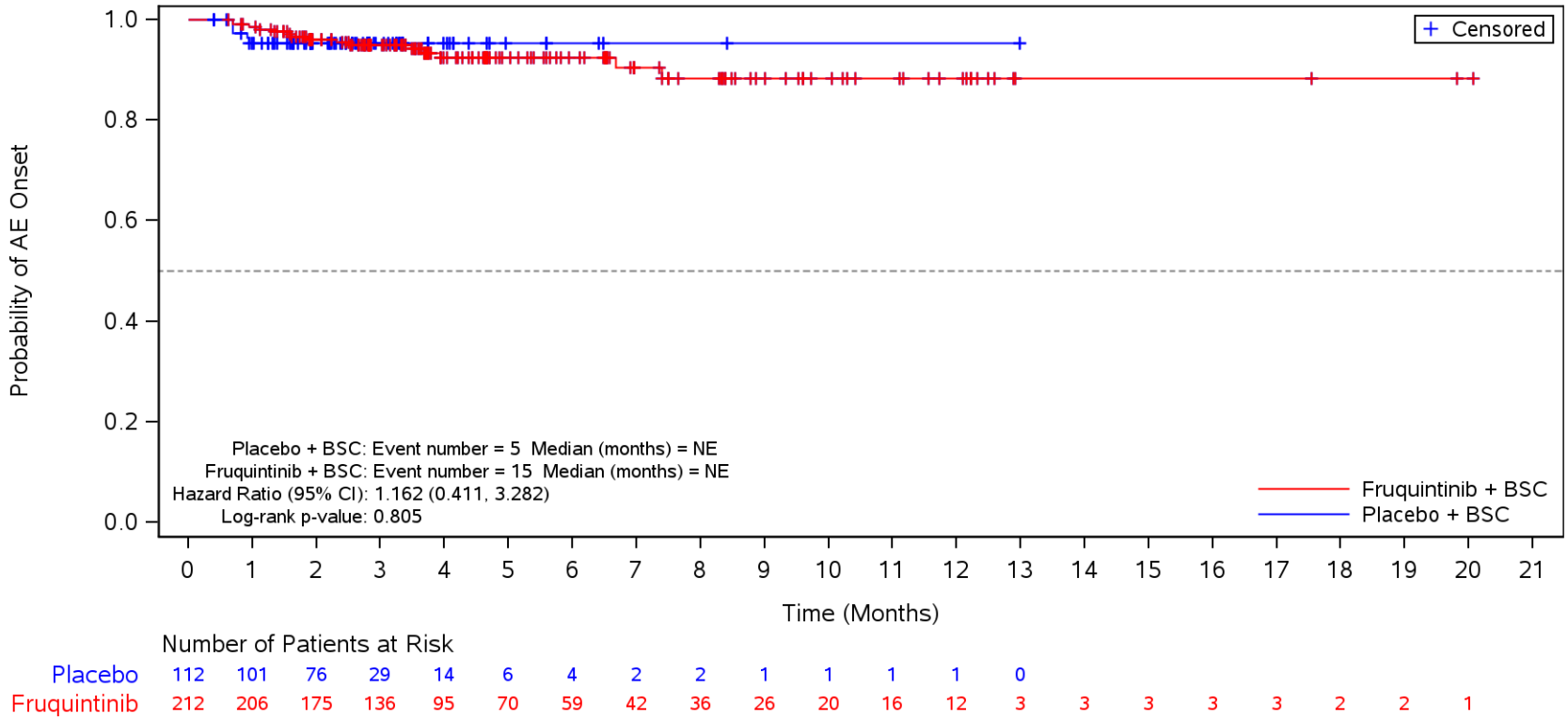
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
>=65 years



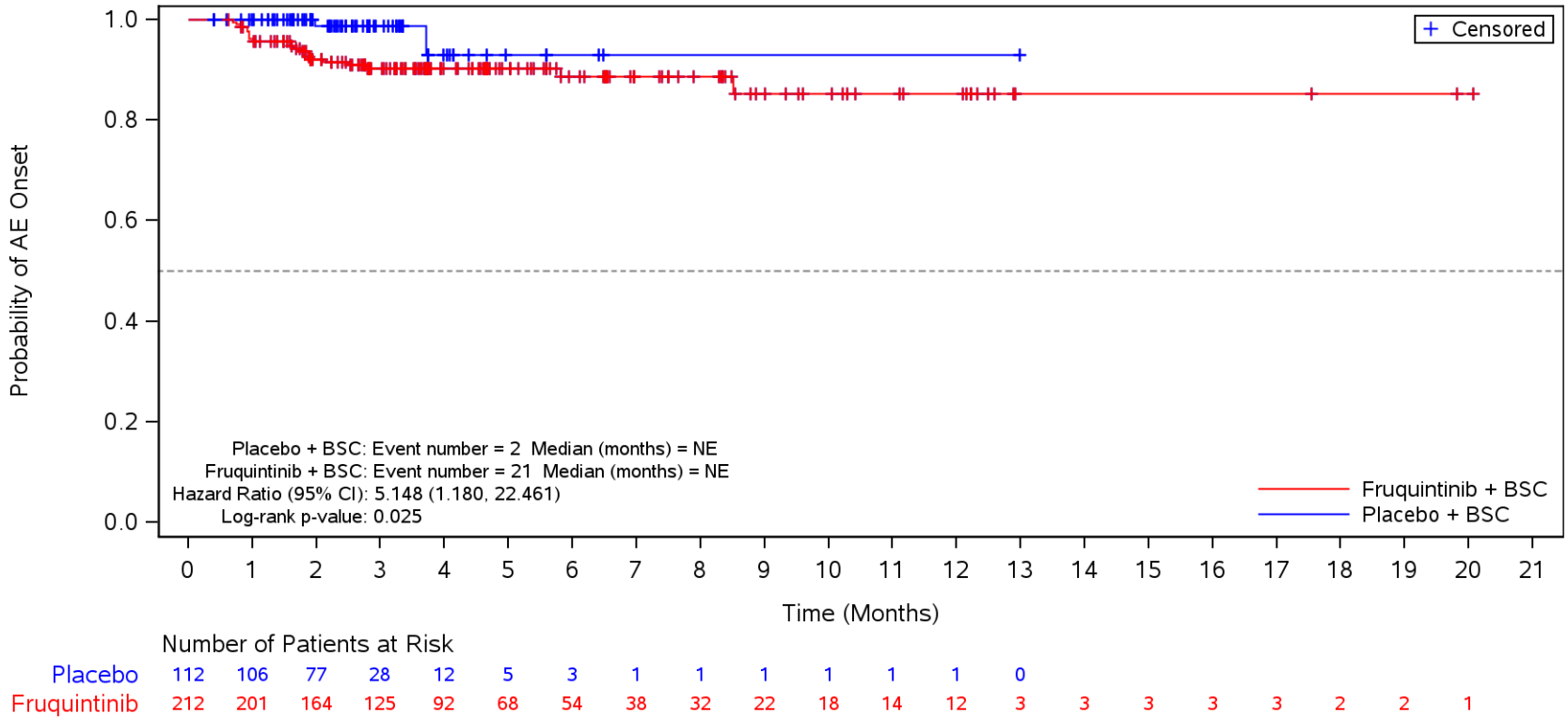
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
>=65 years



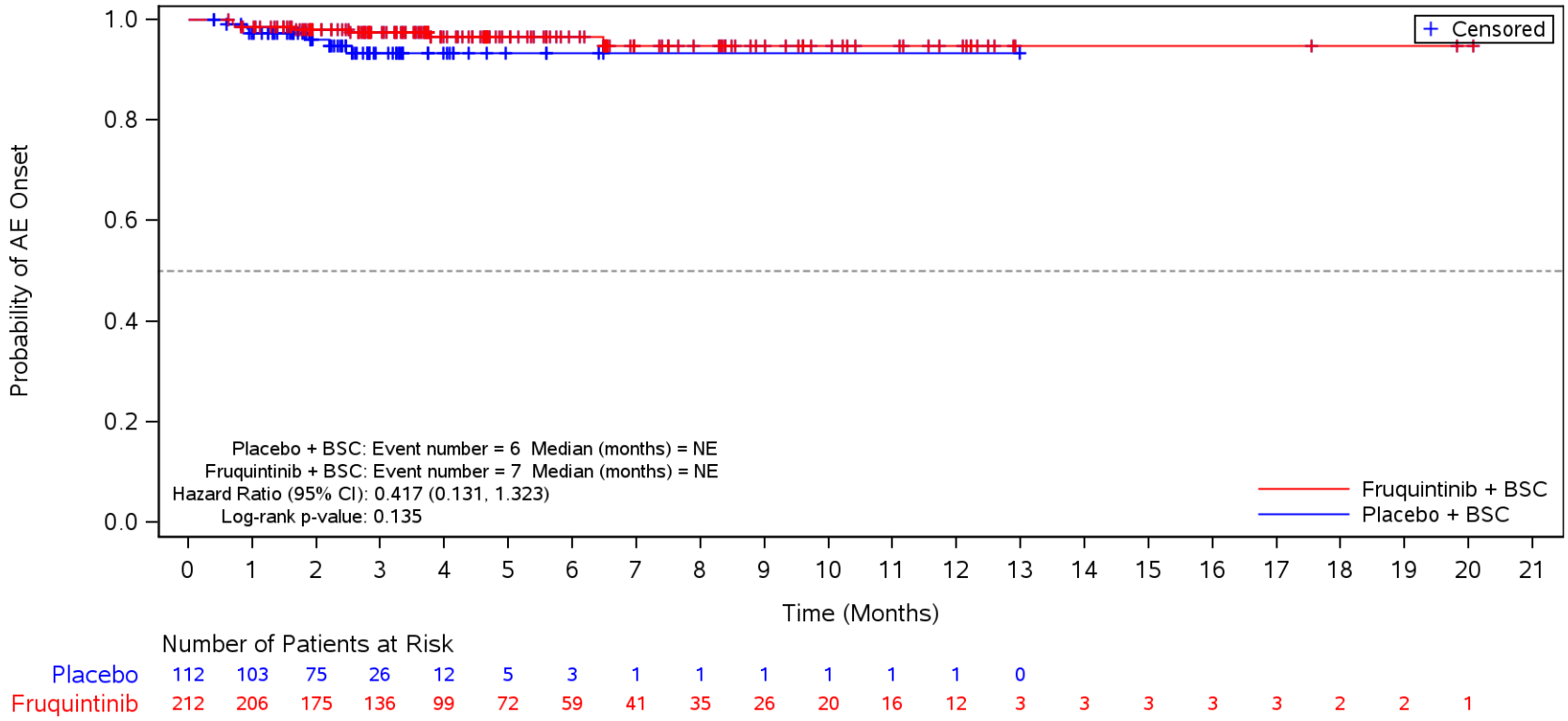
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
>=65 years



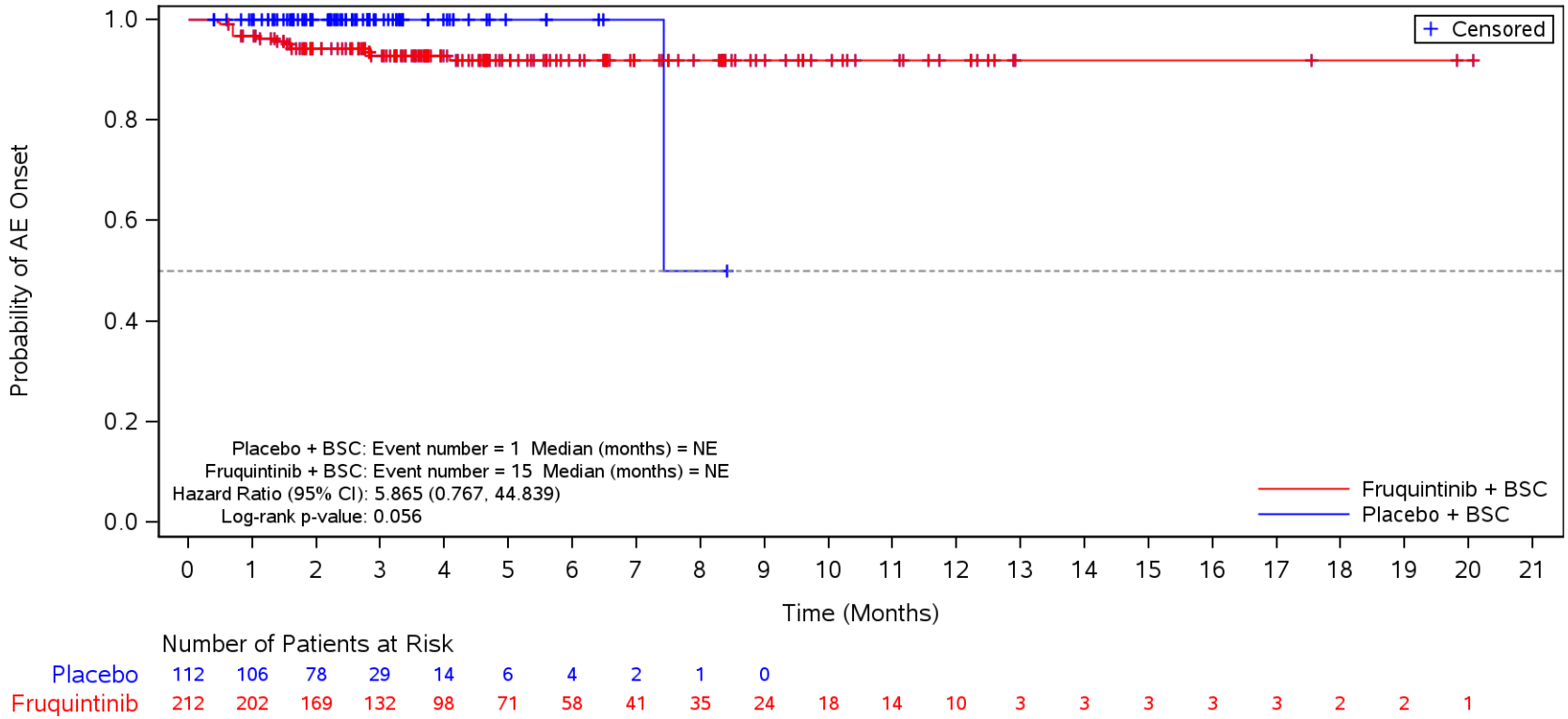
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
>=65 years



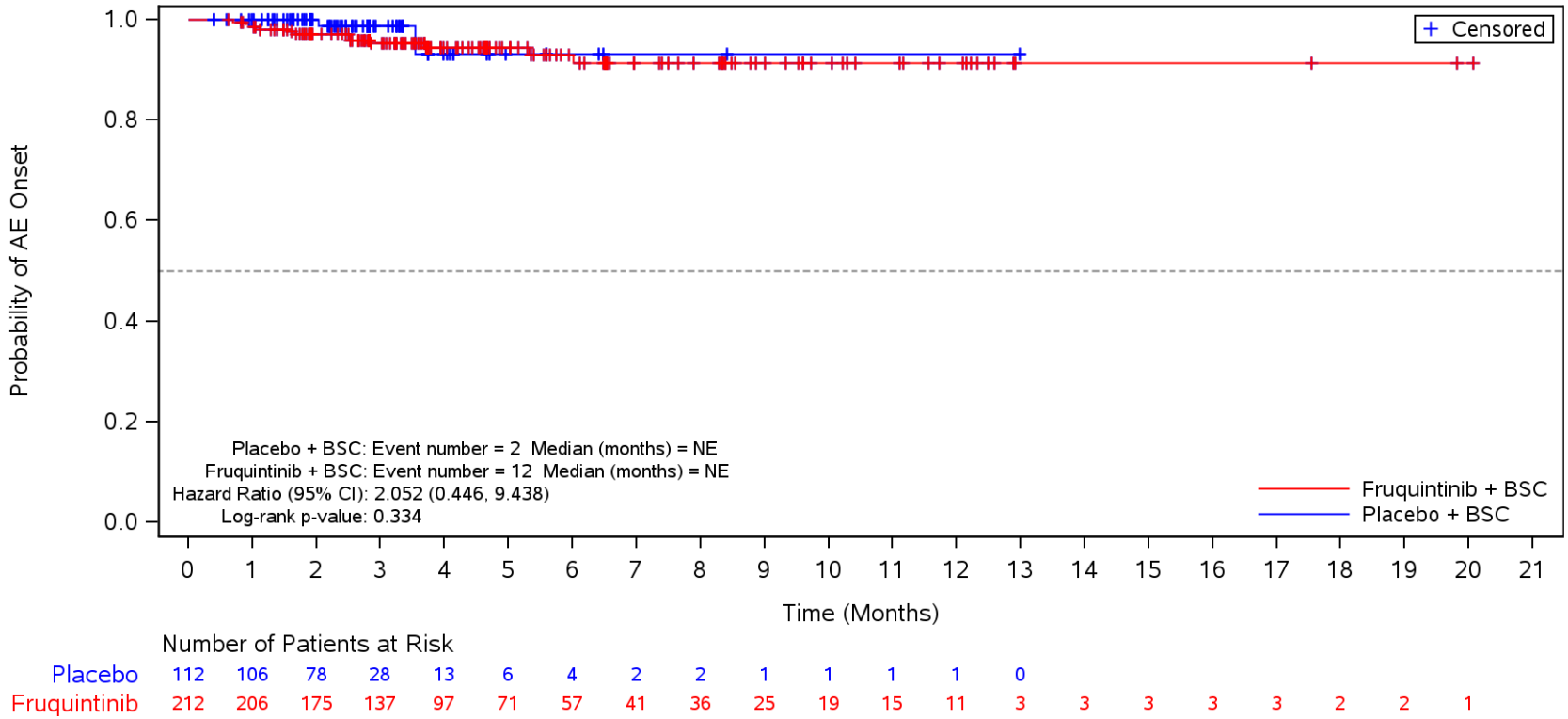
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
>=65 years



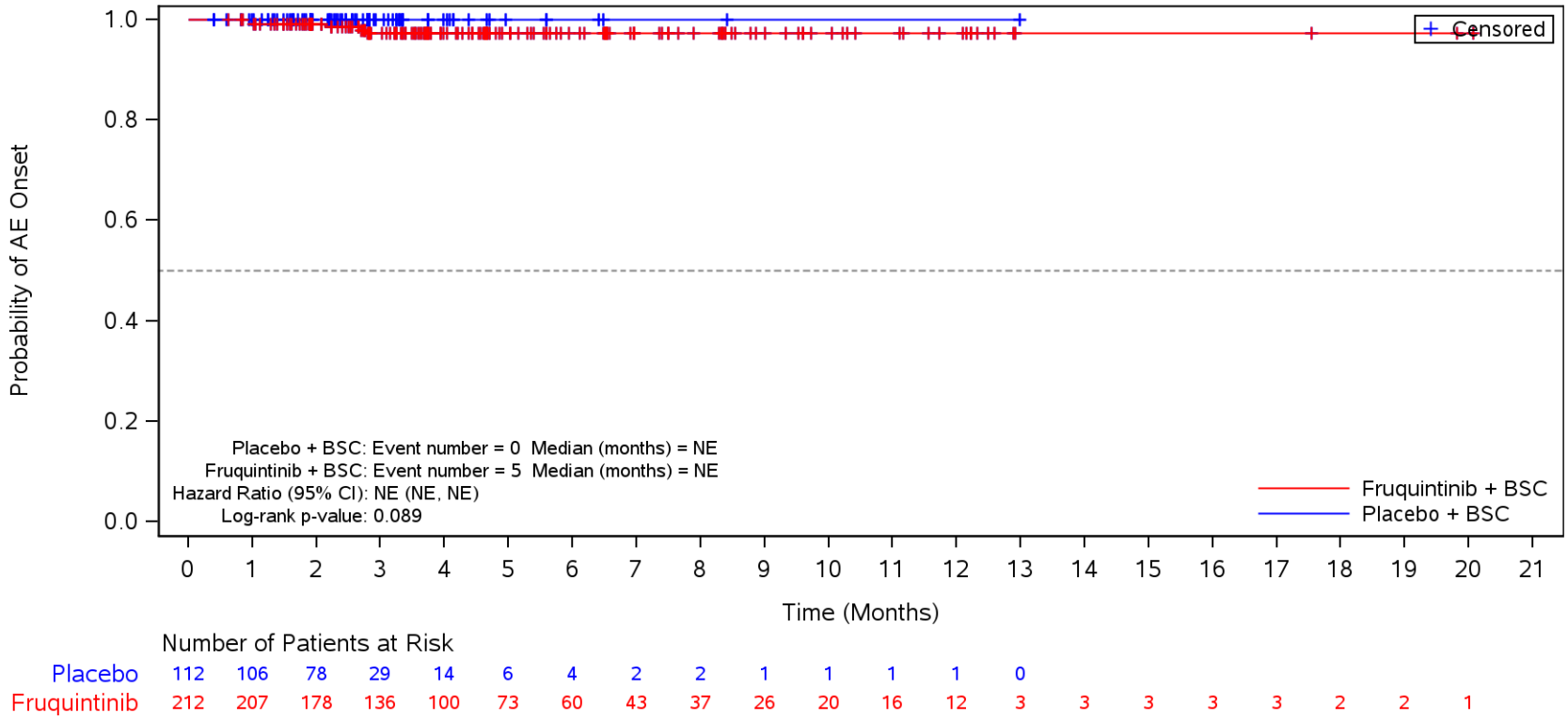
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
>=65 years



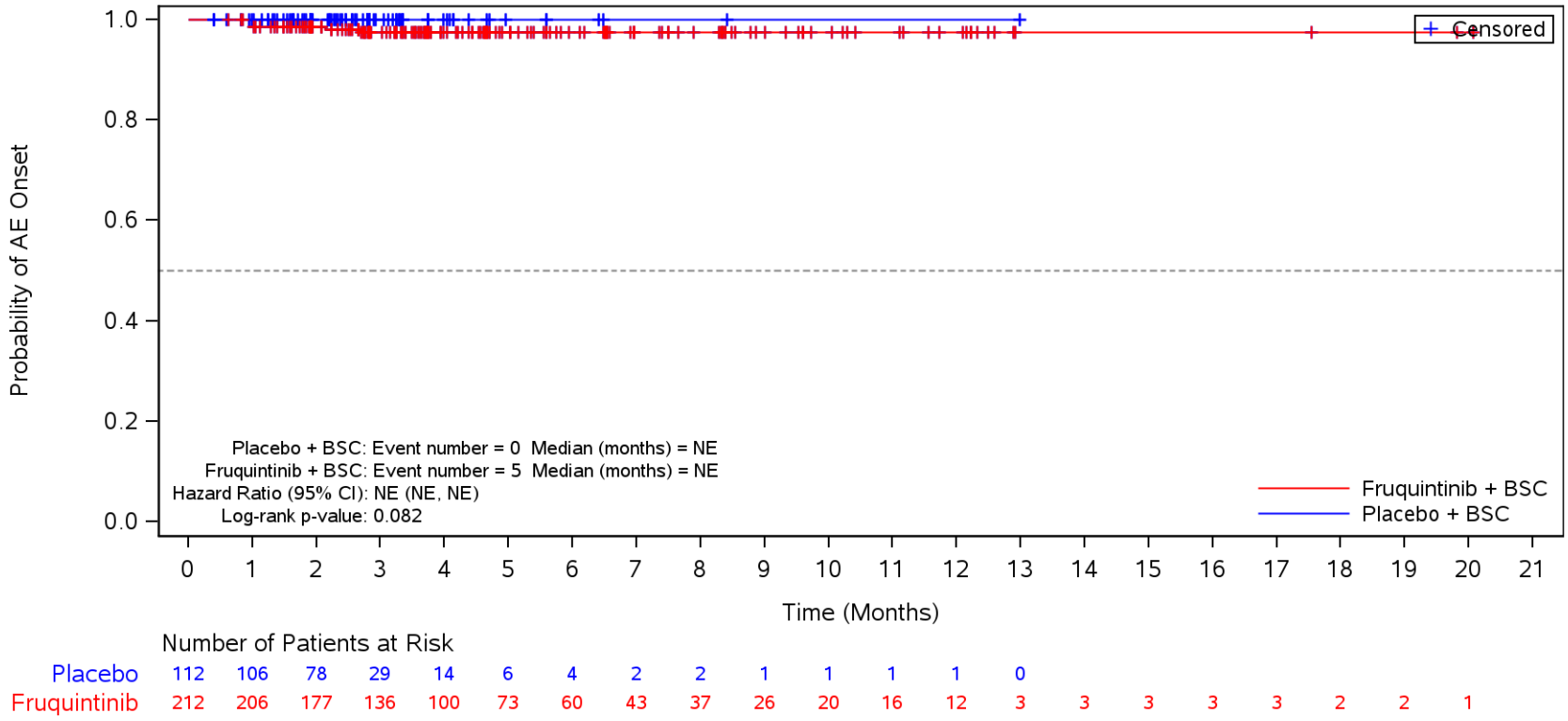
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
>=65 years



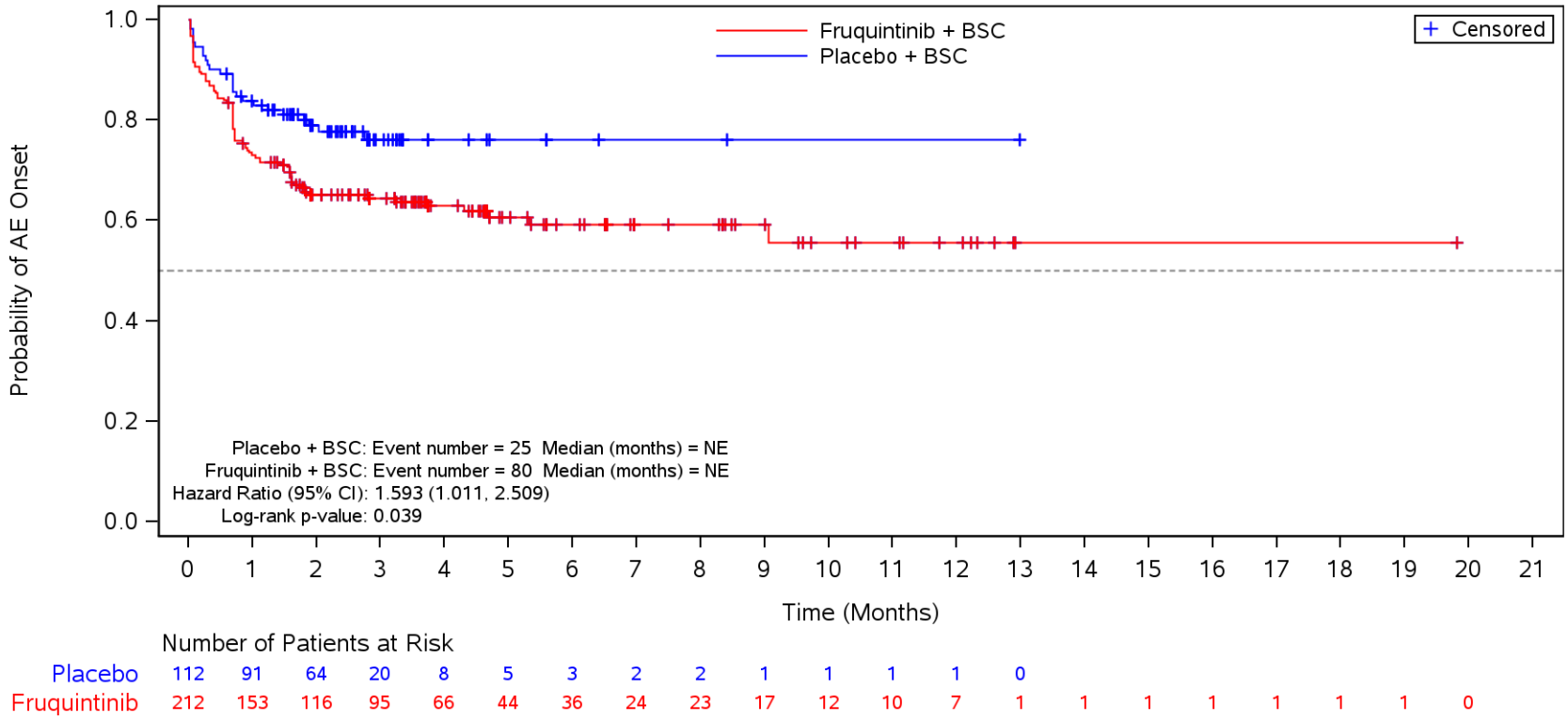
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
>=65 years



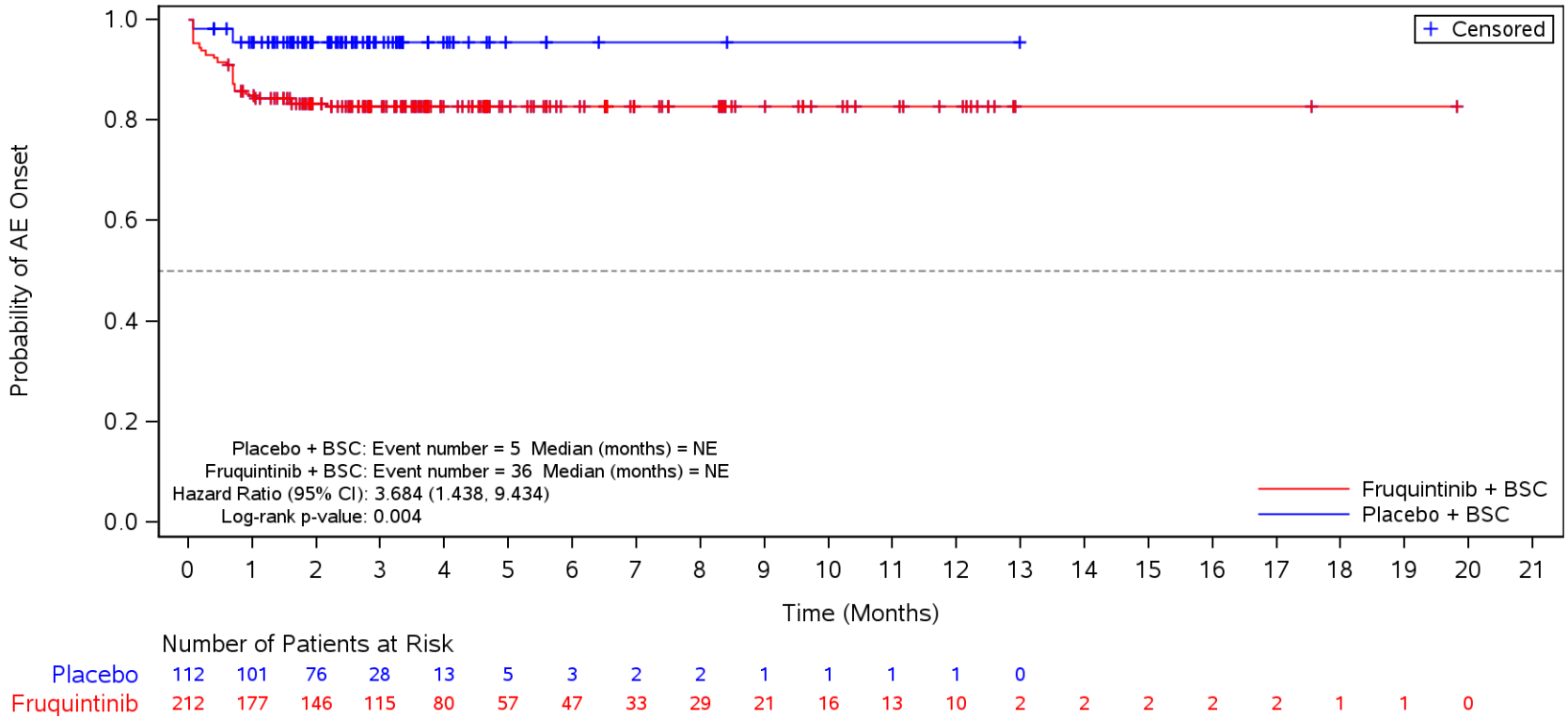
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
>=65 years



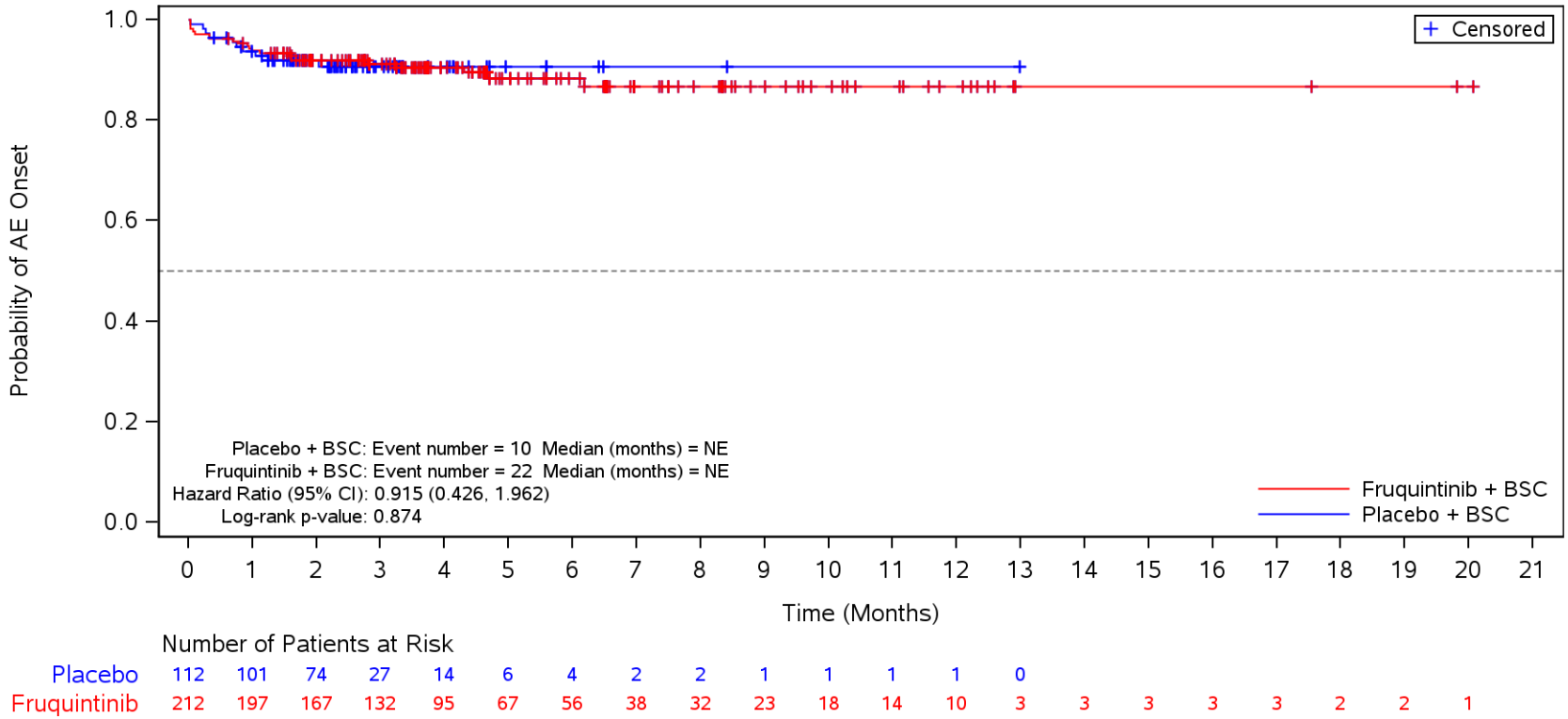
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
>=65 years



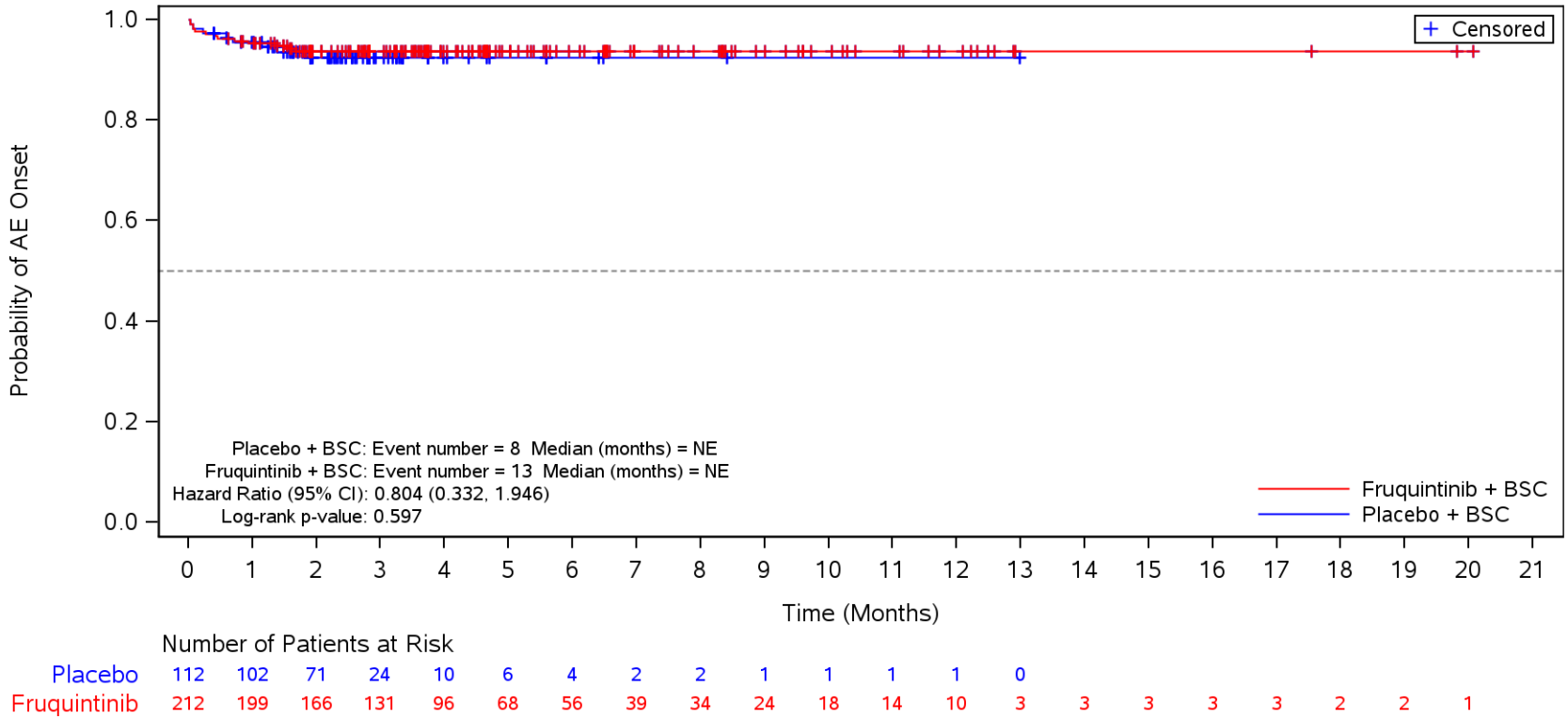
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
>=65 years



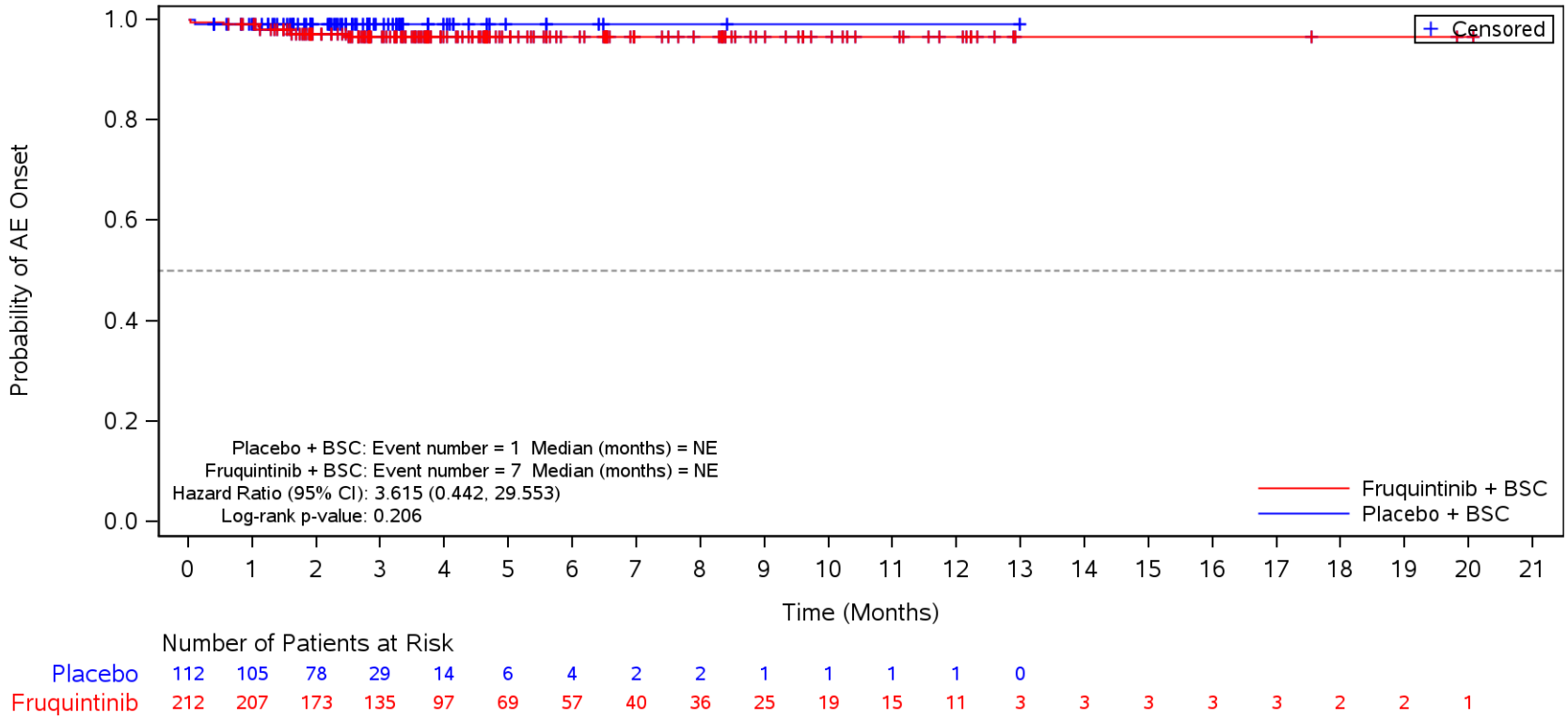
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
>=65 years



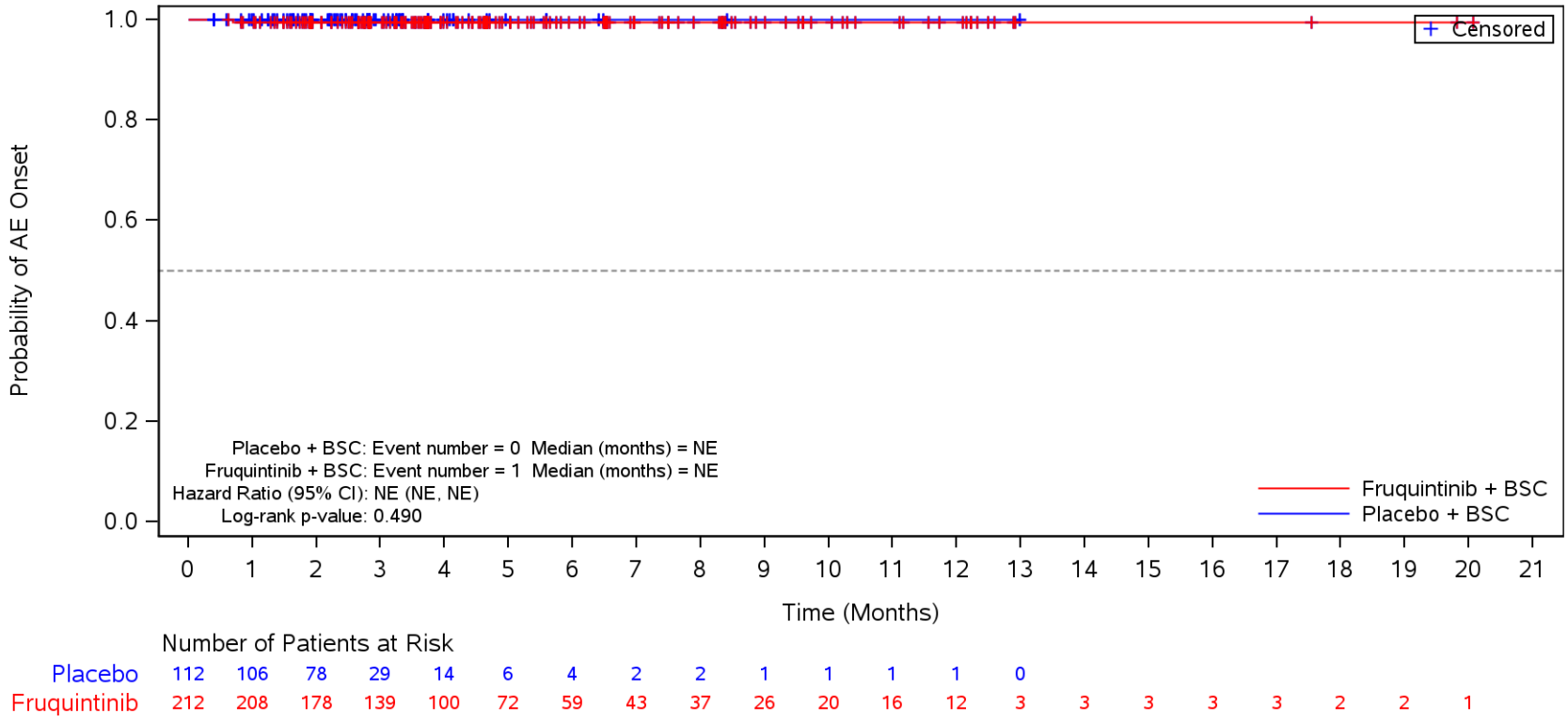
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
>=65 years



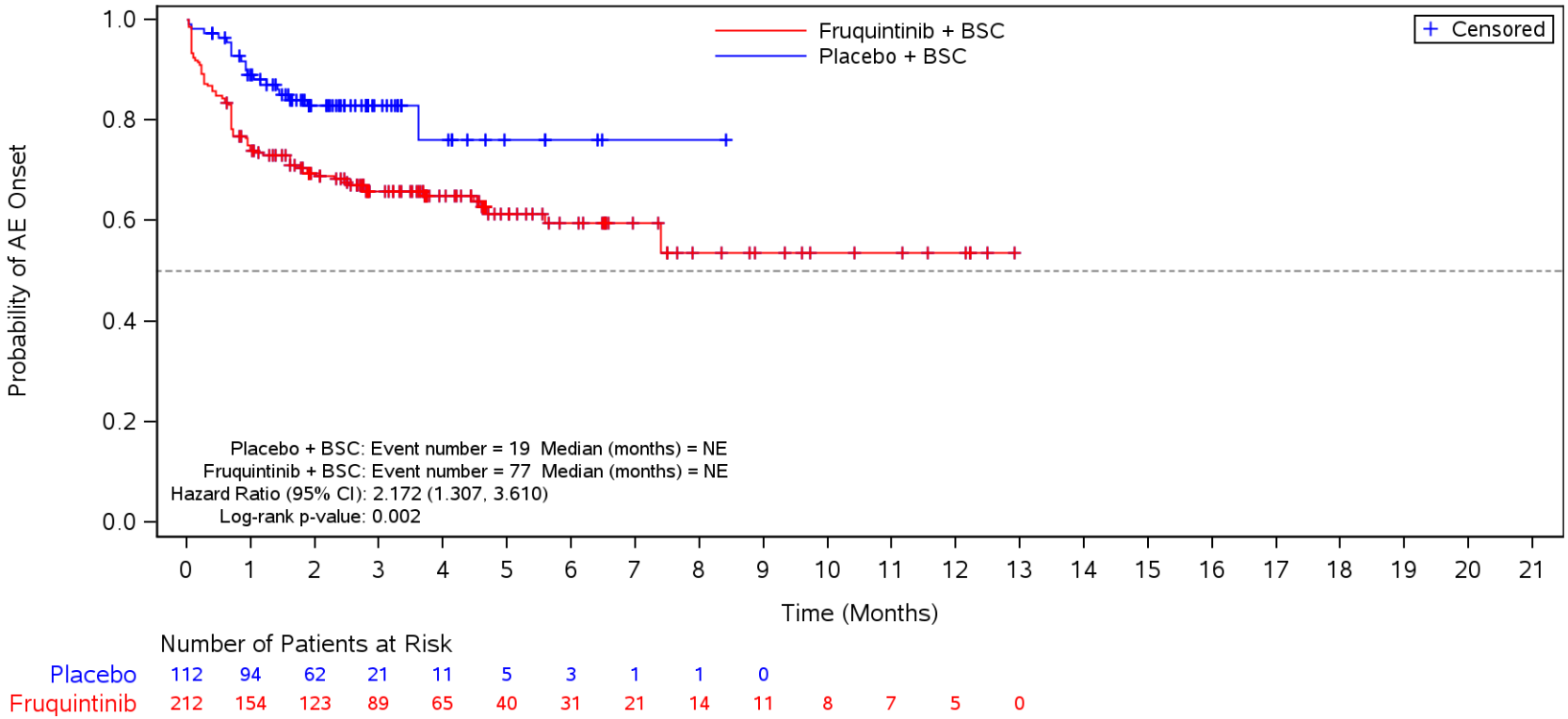
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
>=65 years



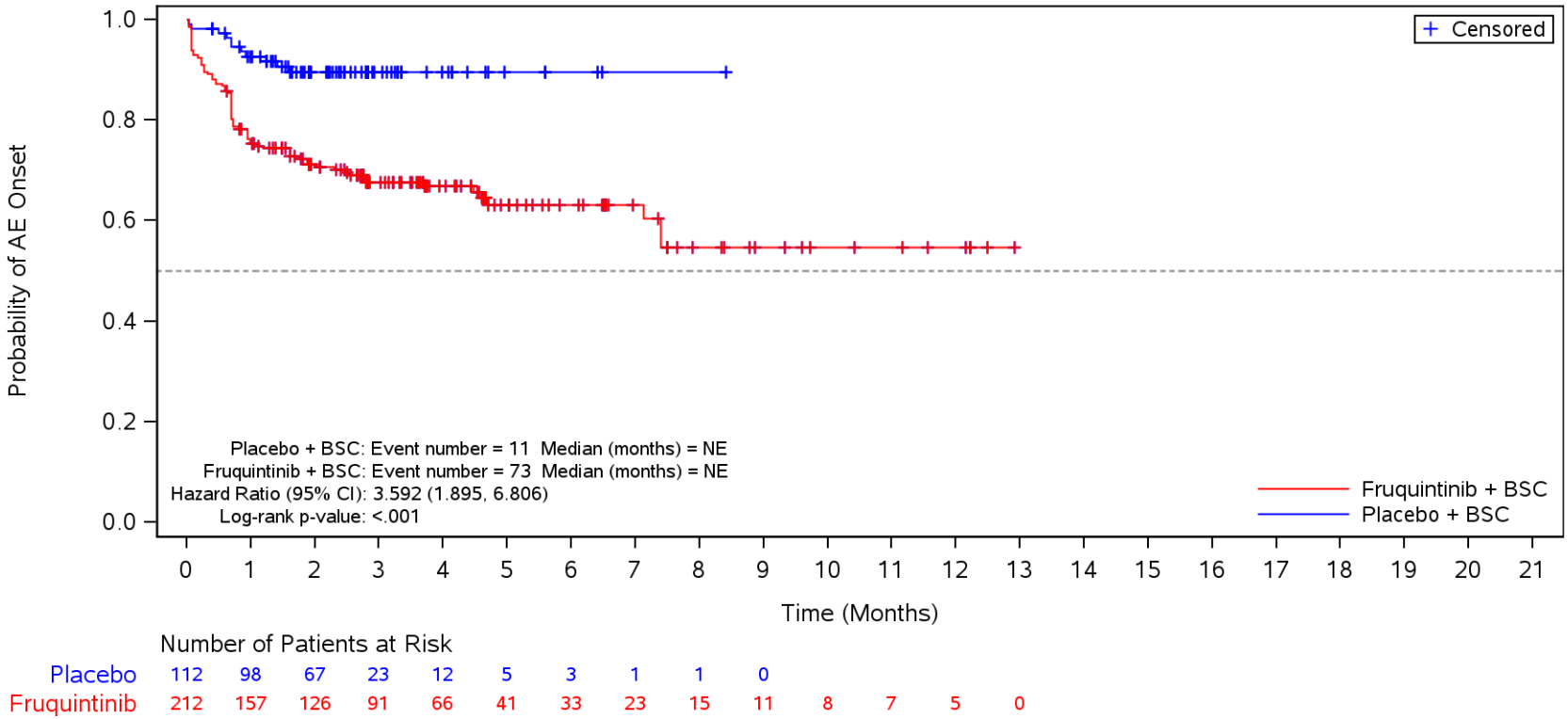
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Vascular disorders**
>=65 years



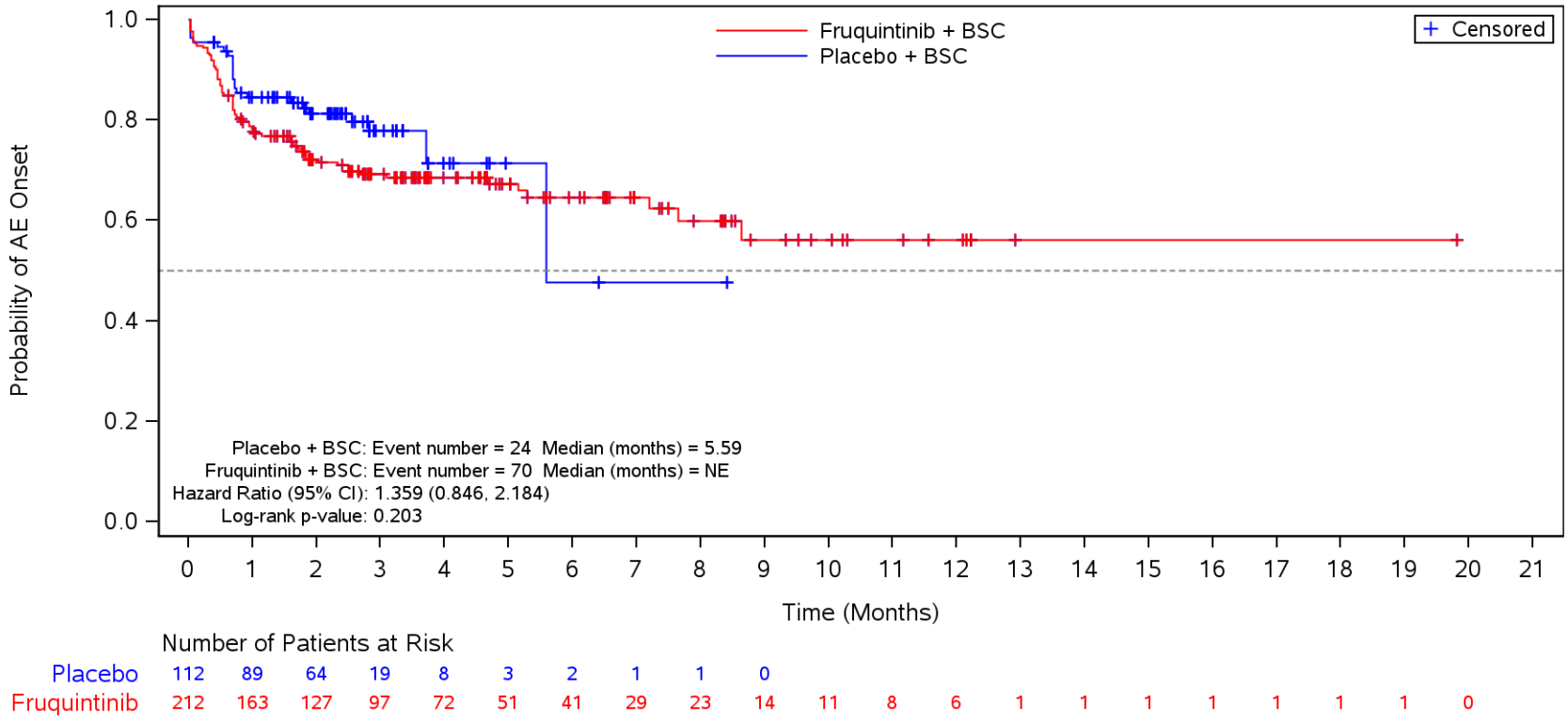
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
>=65 years



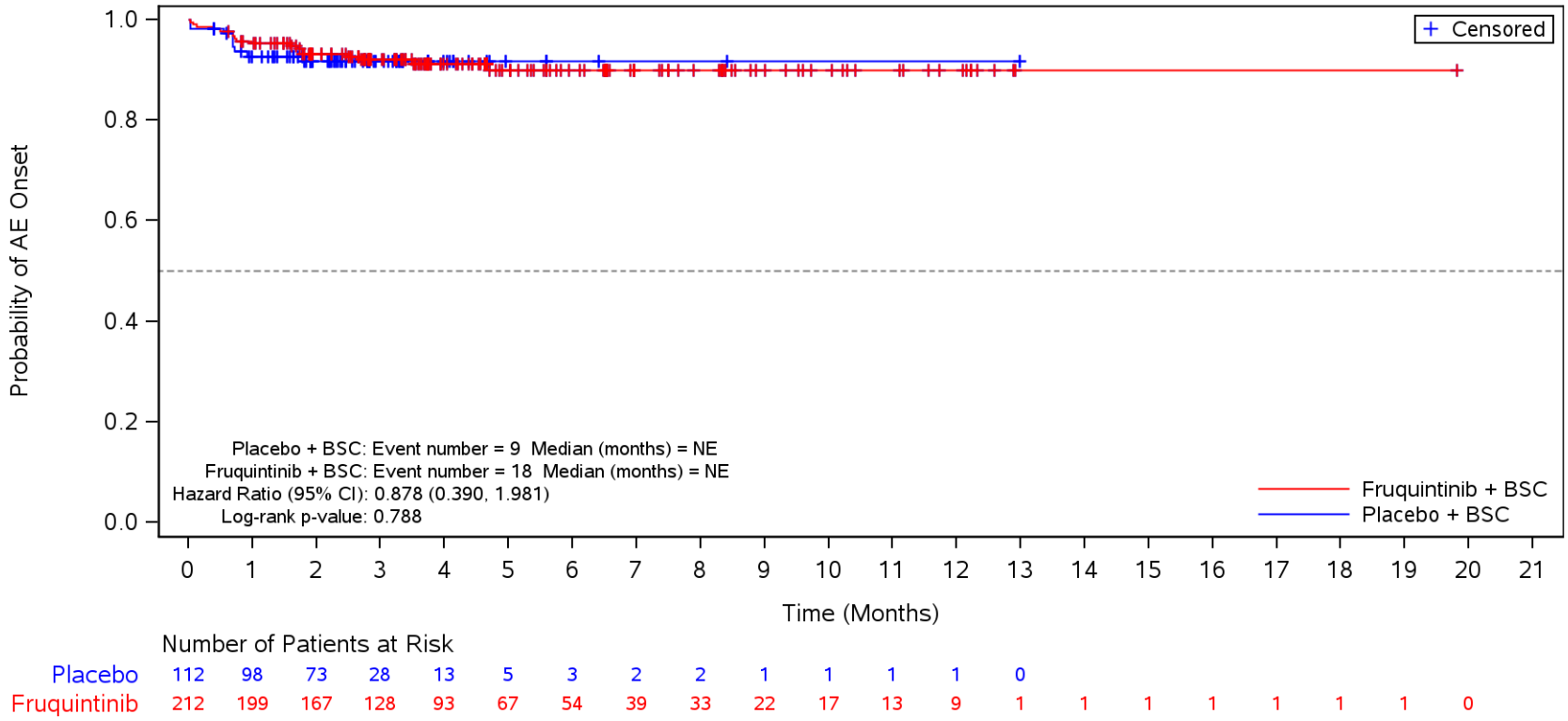
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
>=65 years



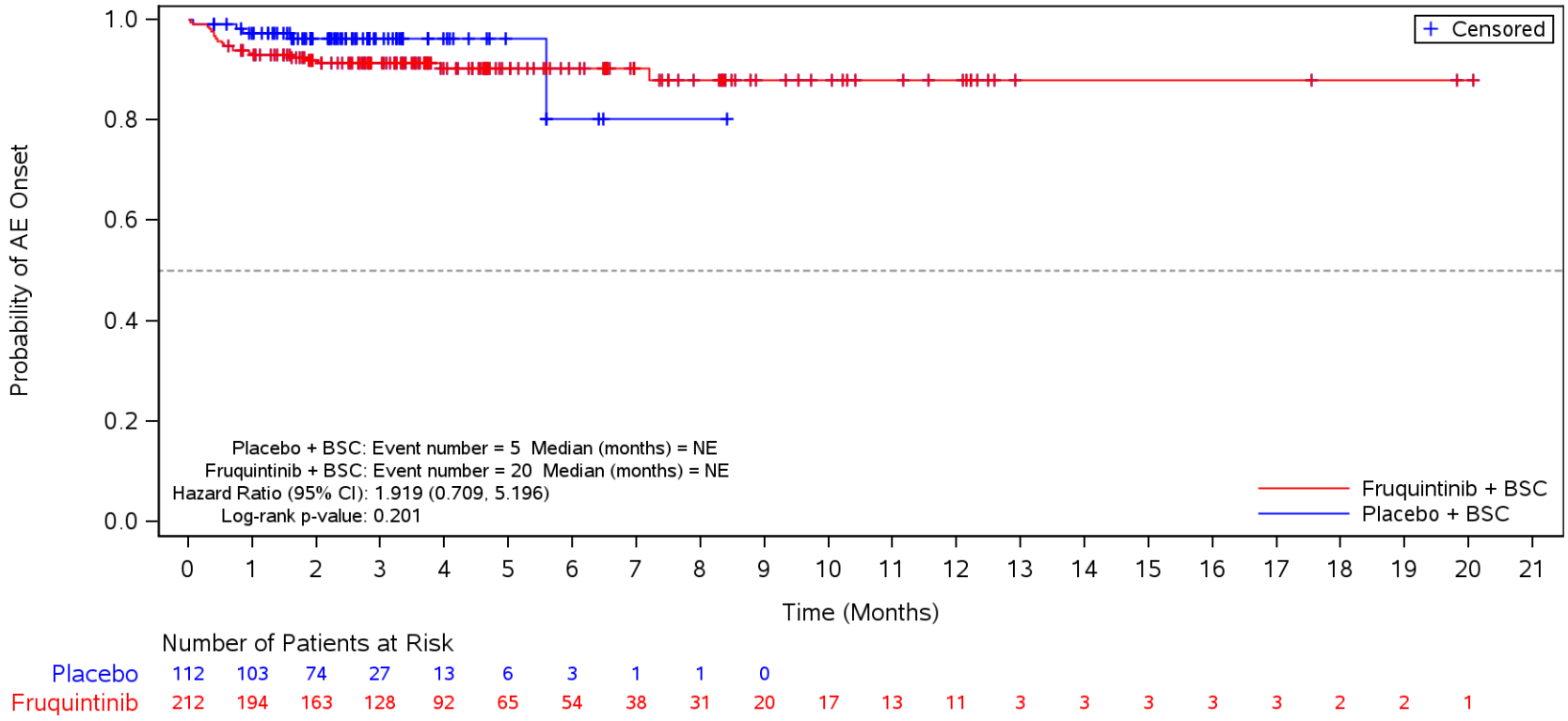
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
>=65 years



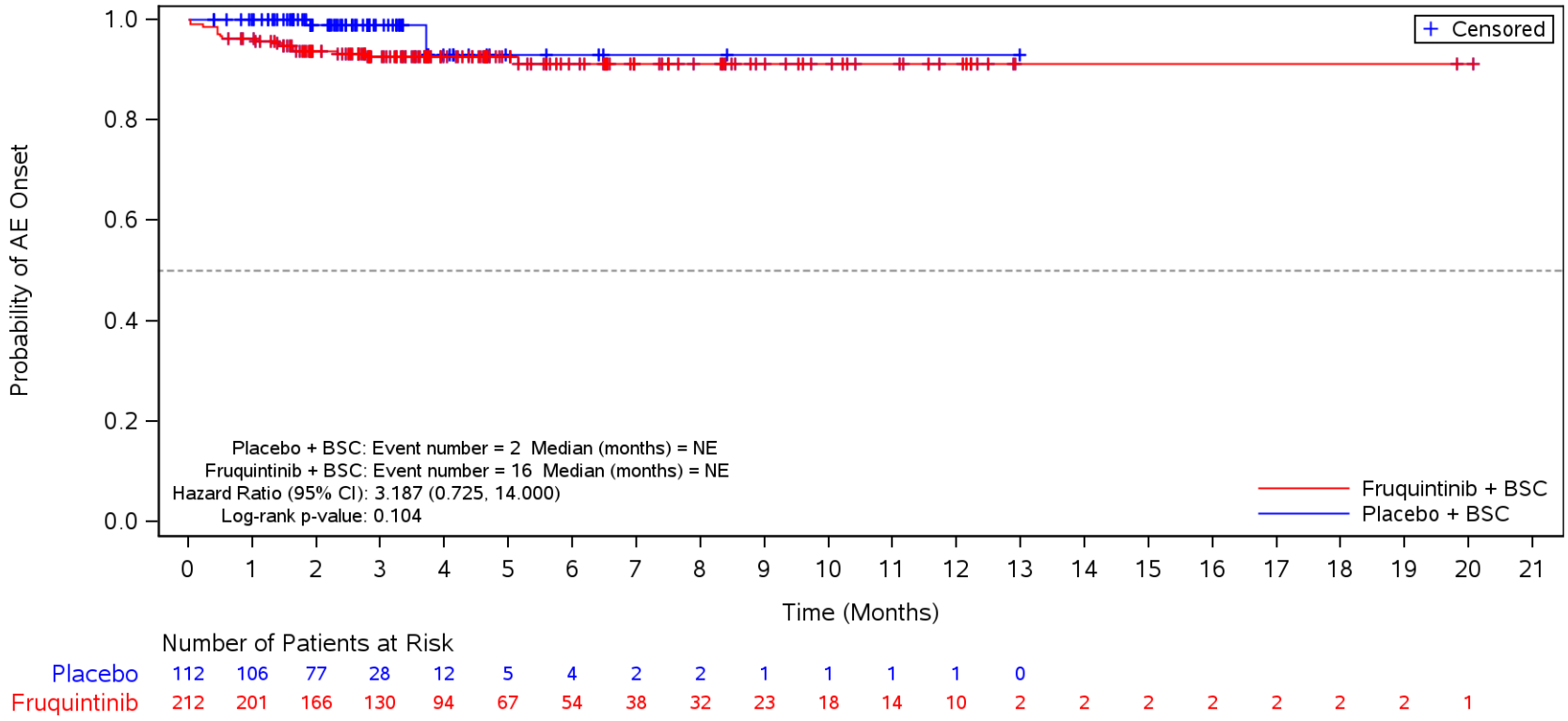
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
>=65 years



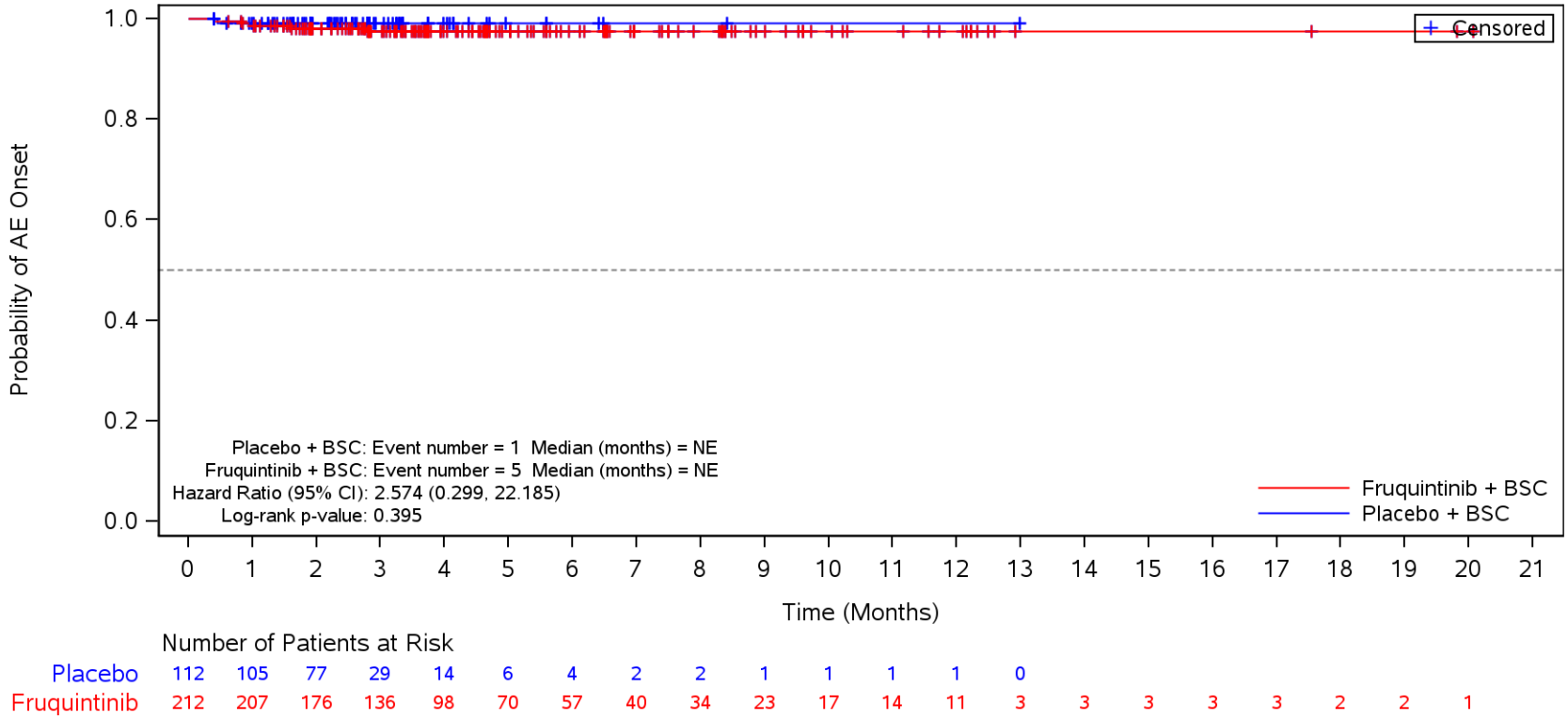
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
>=65 years



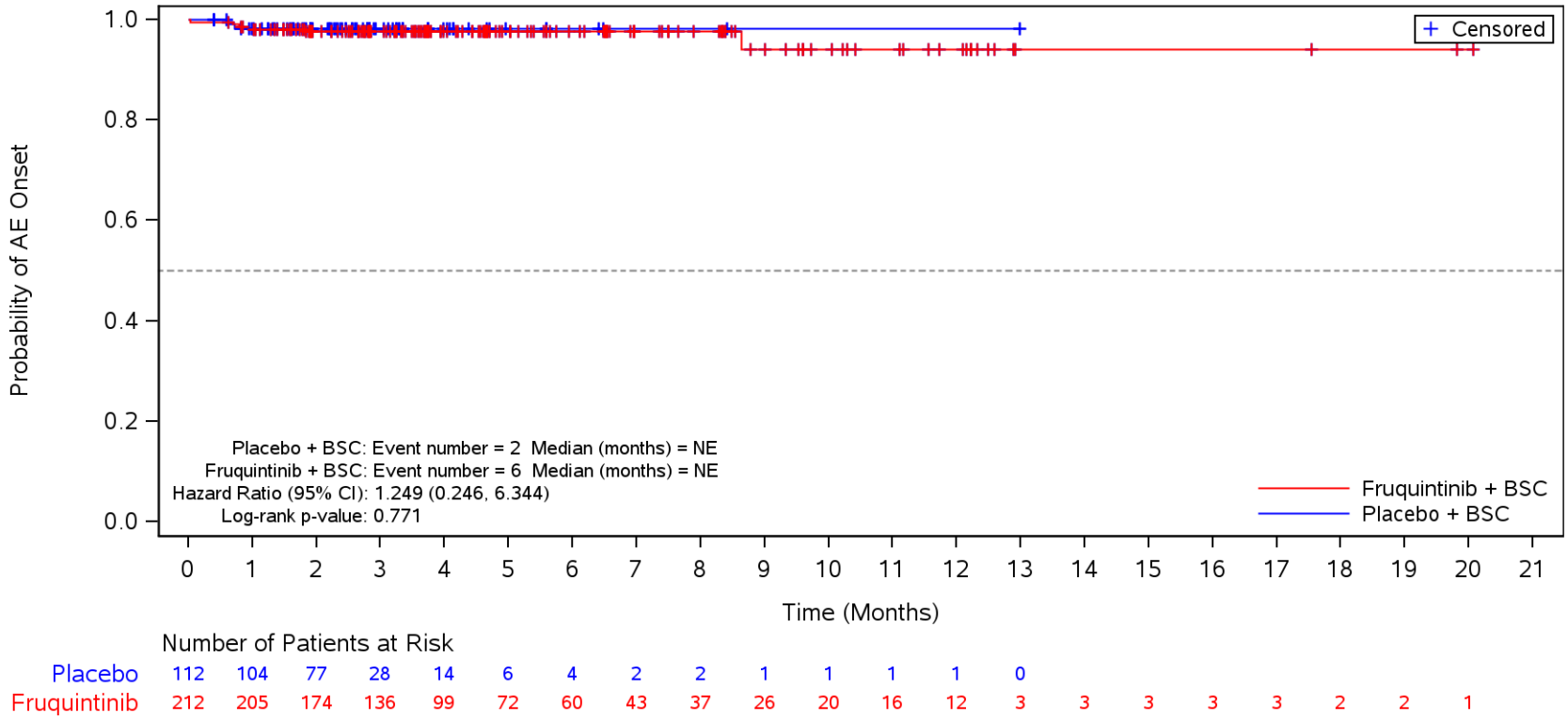
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
>=65 years



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
>=65 years

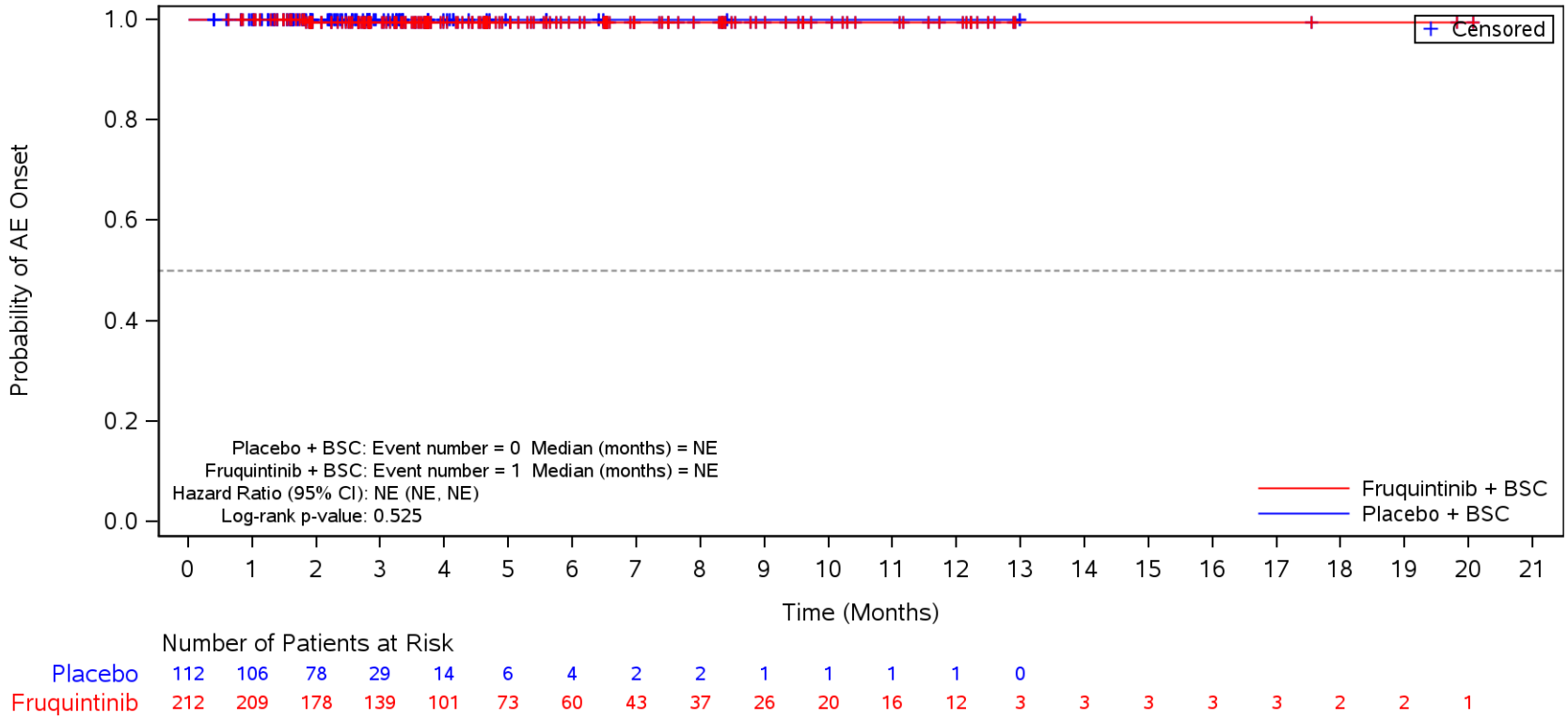


Number of Patients at Risk

Placebo	112	104	77	28	14	6	4	2	2	1	1	1	1	0							
Fruquintinib	212	205	174	136	99	72	60	43	37	26	20	16	12	3	3	3	3	3	2	2	1

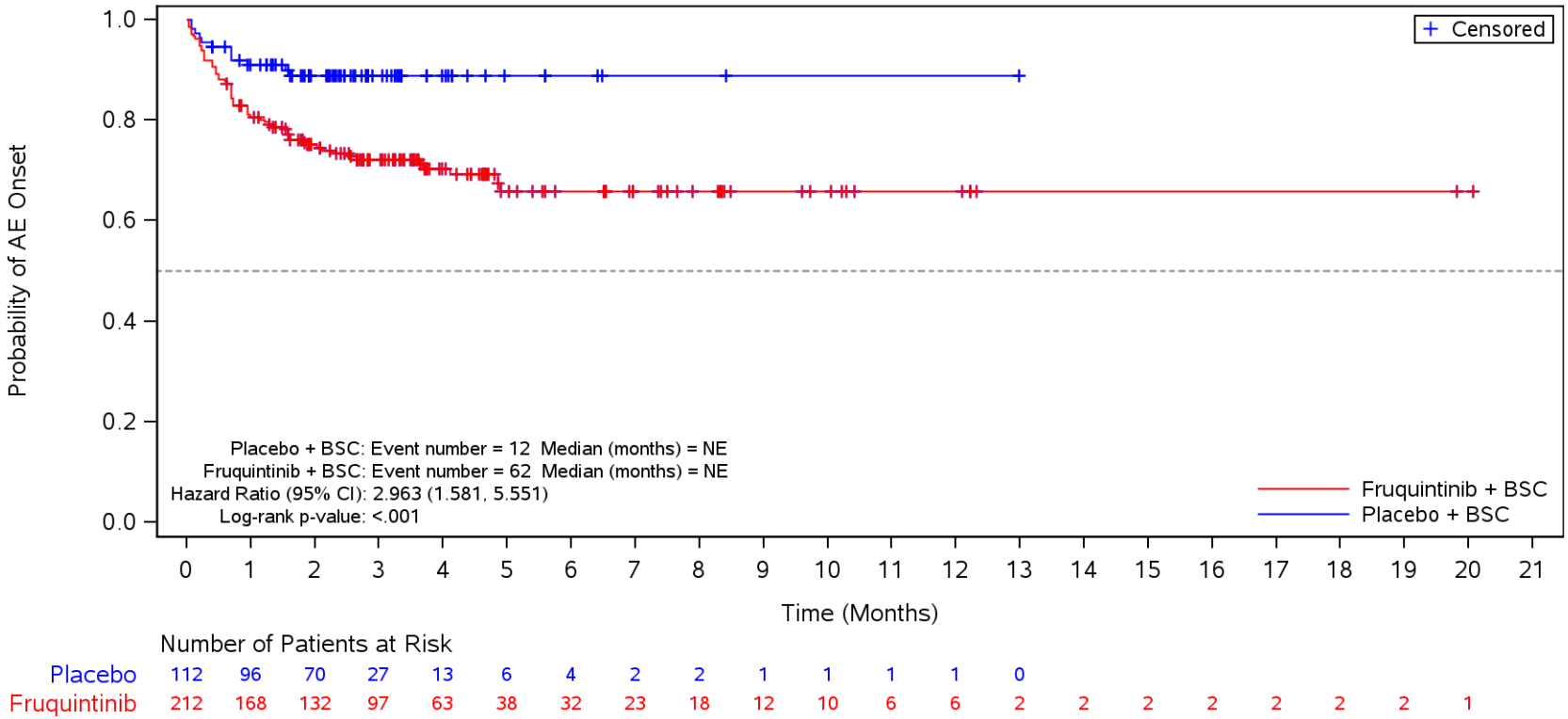
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
>=65 years



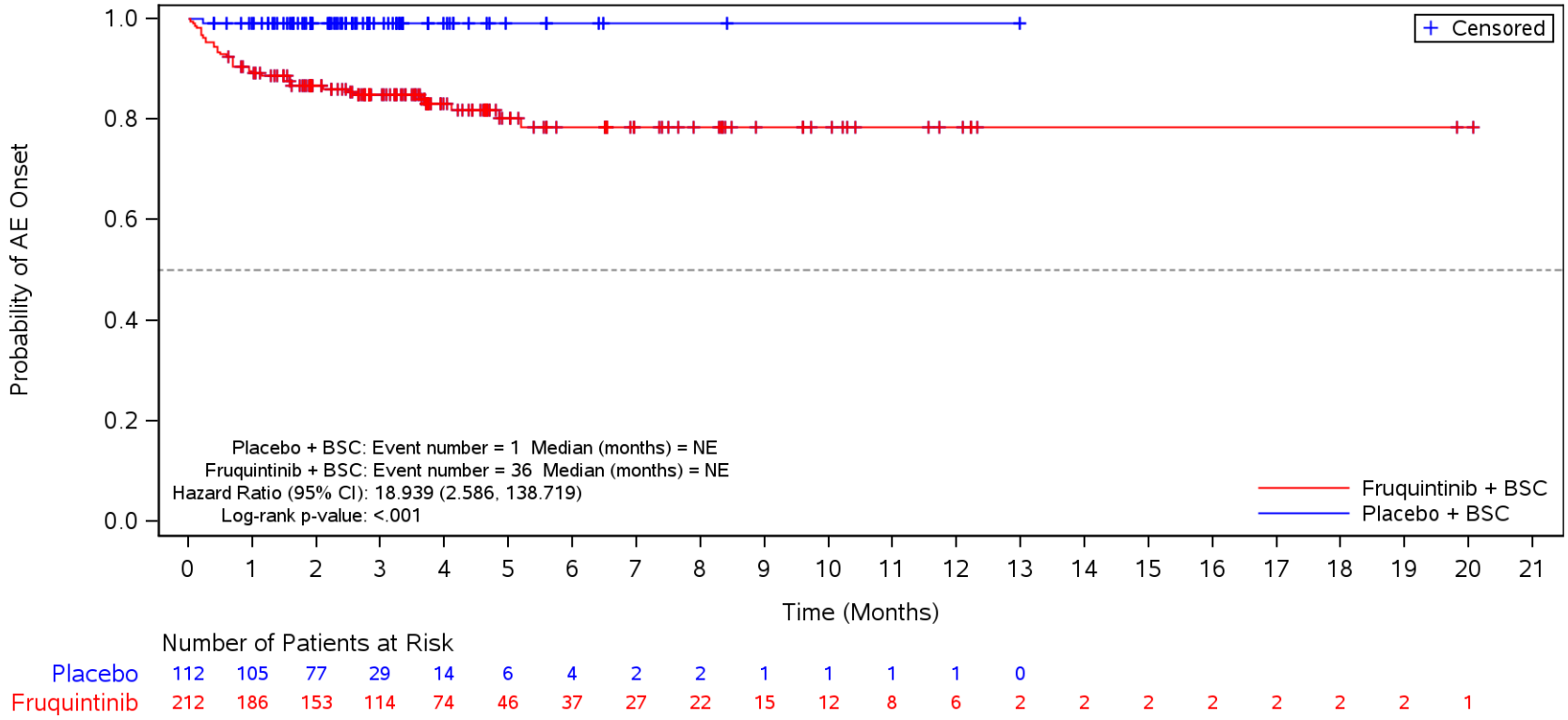
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
>=65 years



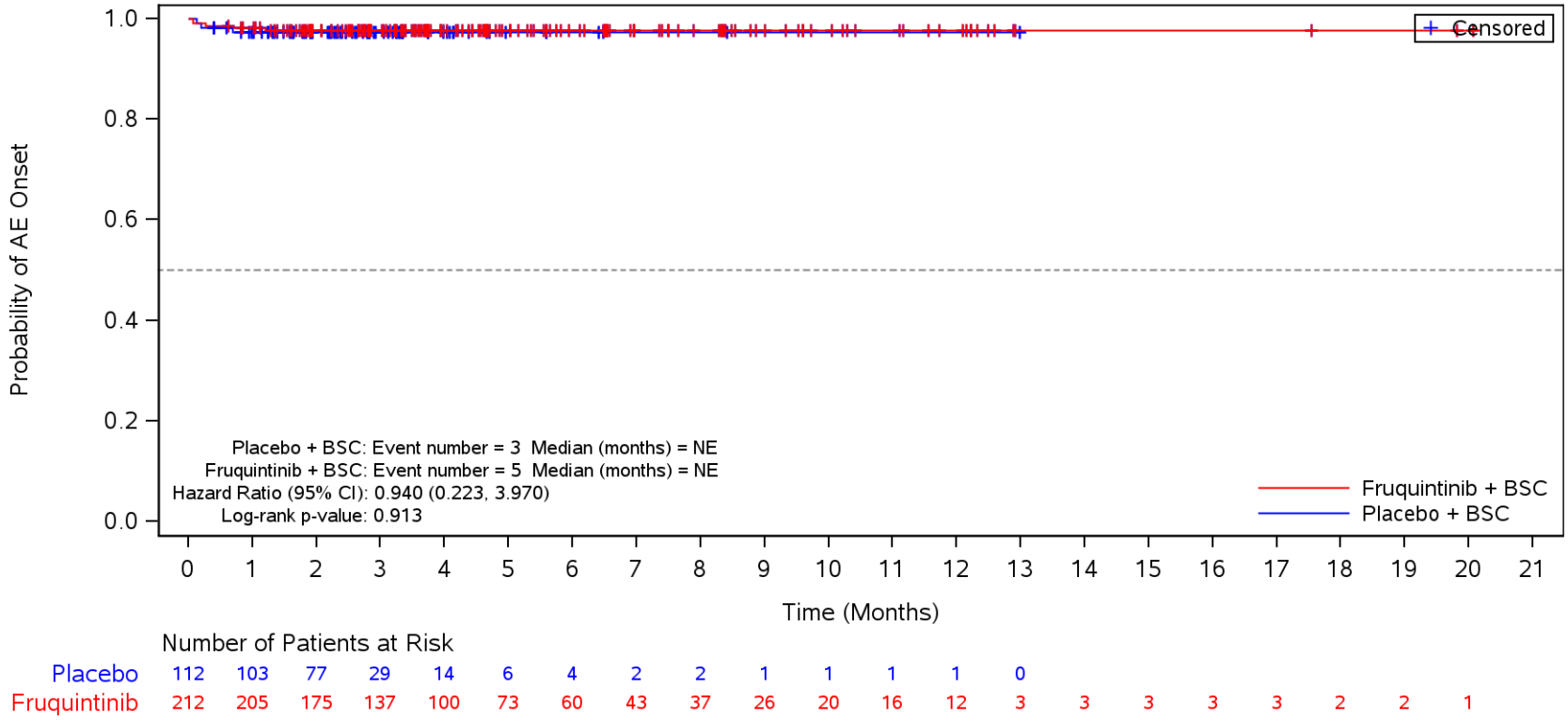
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
>=65 years



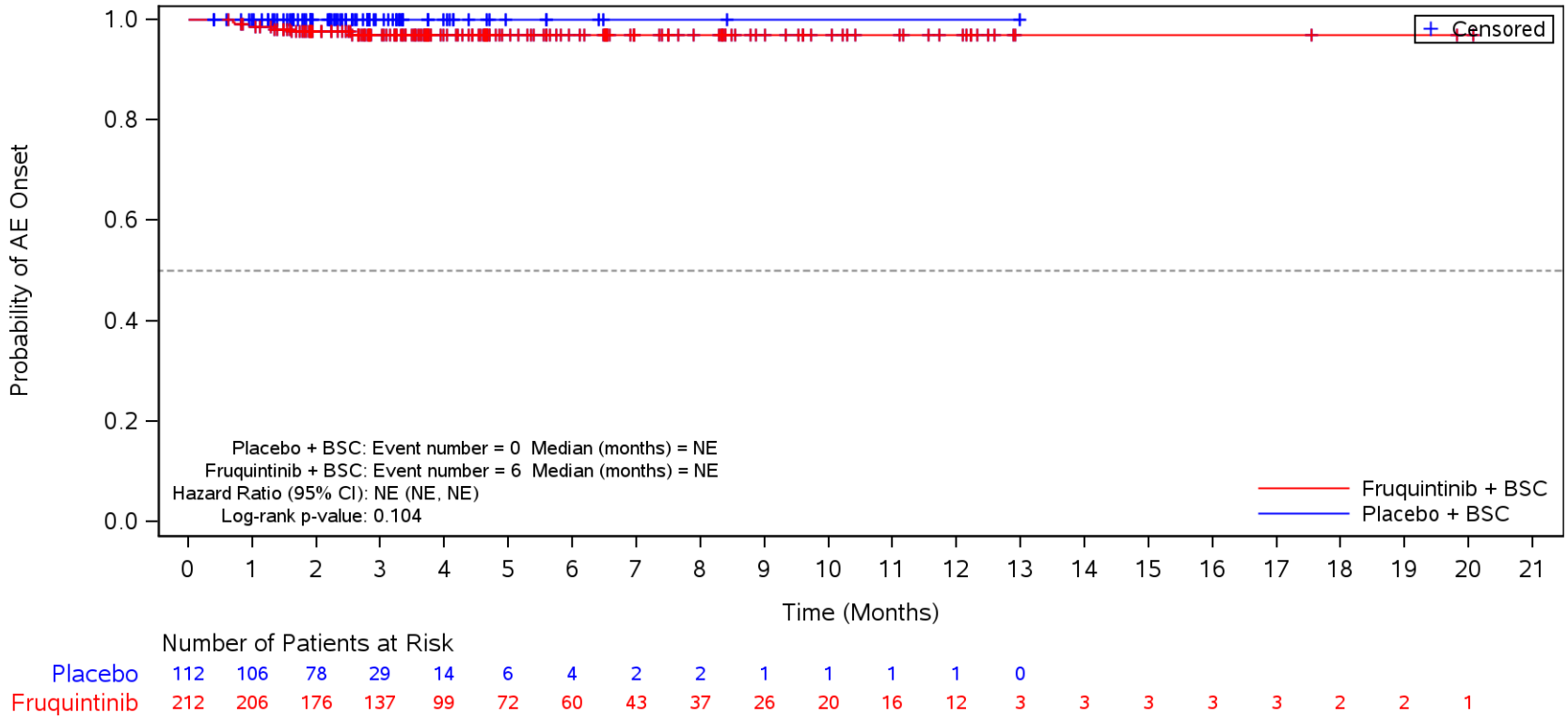
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
>=65 years



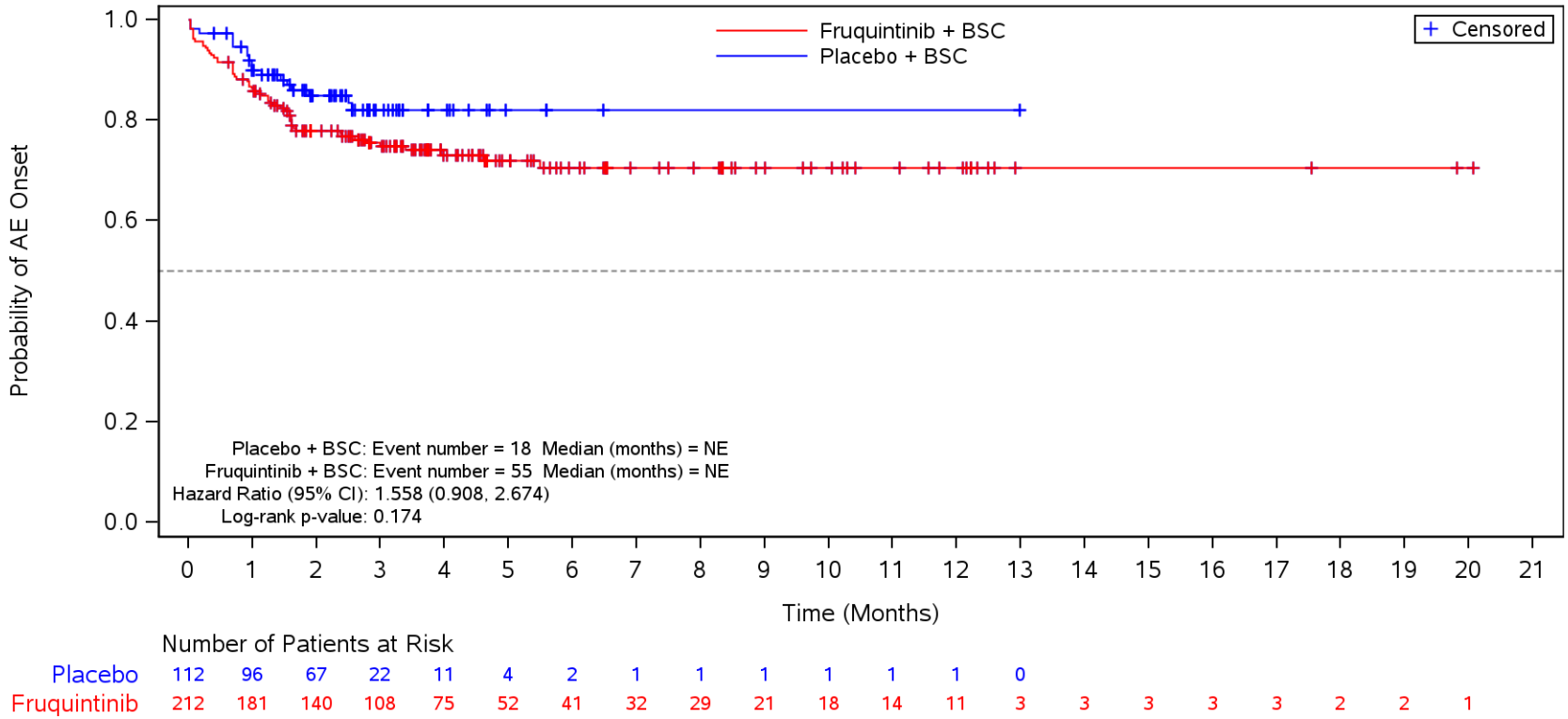
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
>=65 years



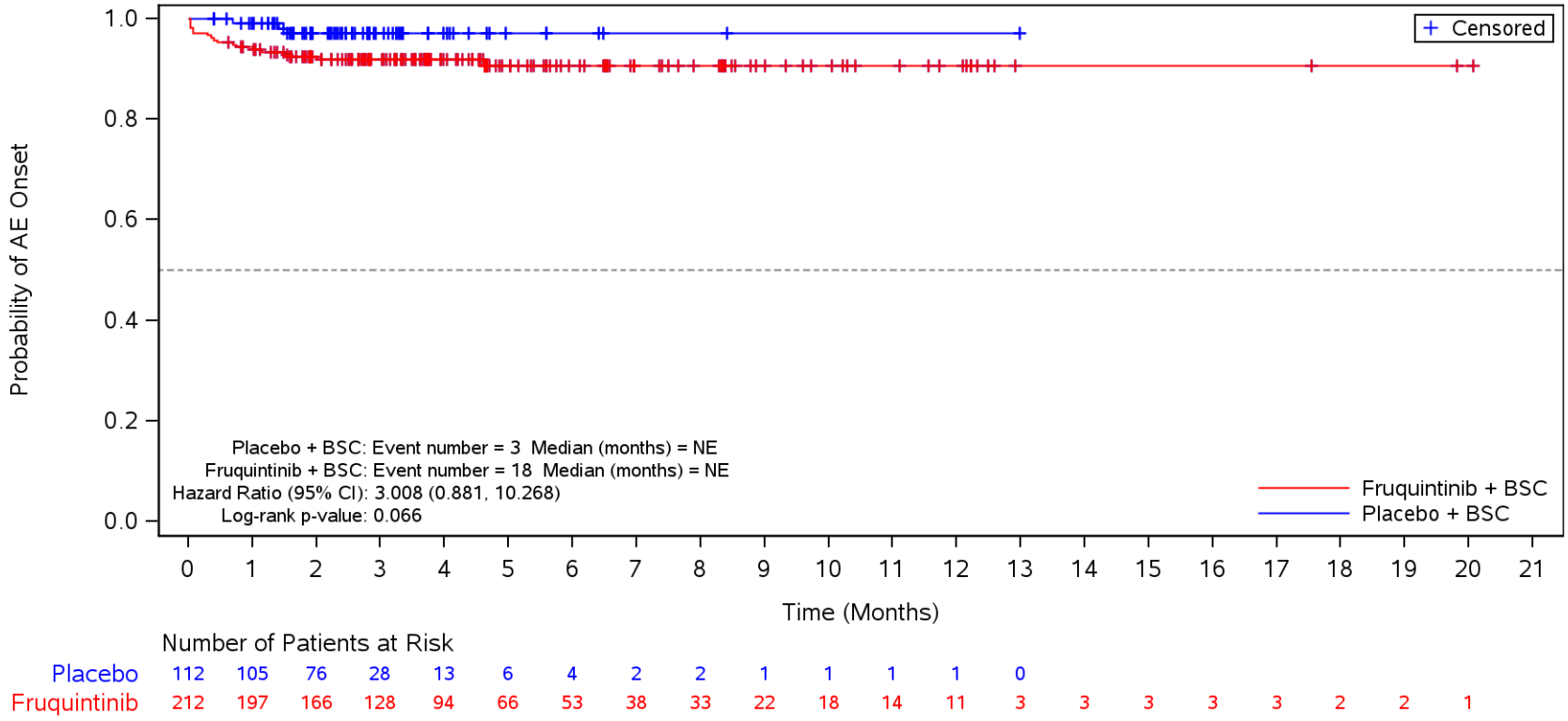
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Nervous system disorders**
>=65 years



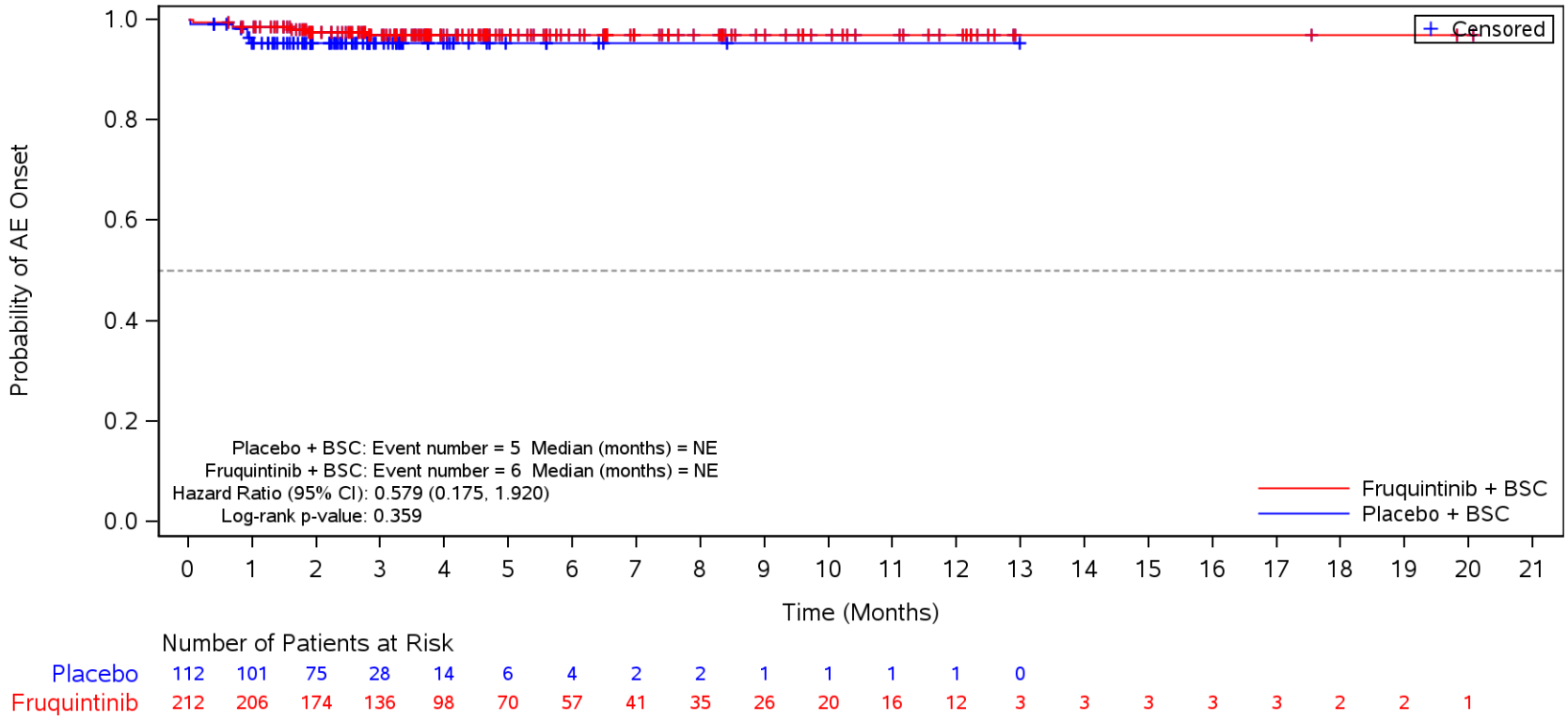
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
>=65 years



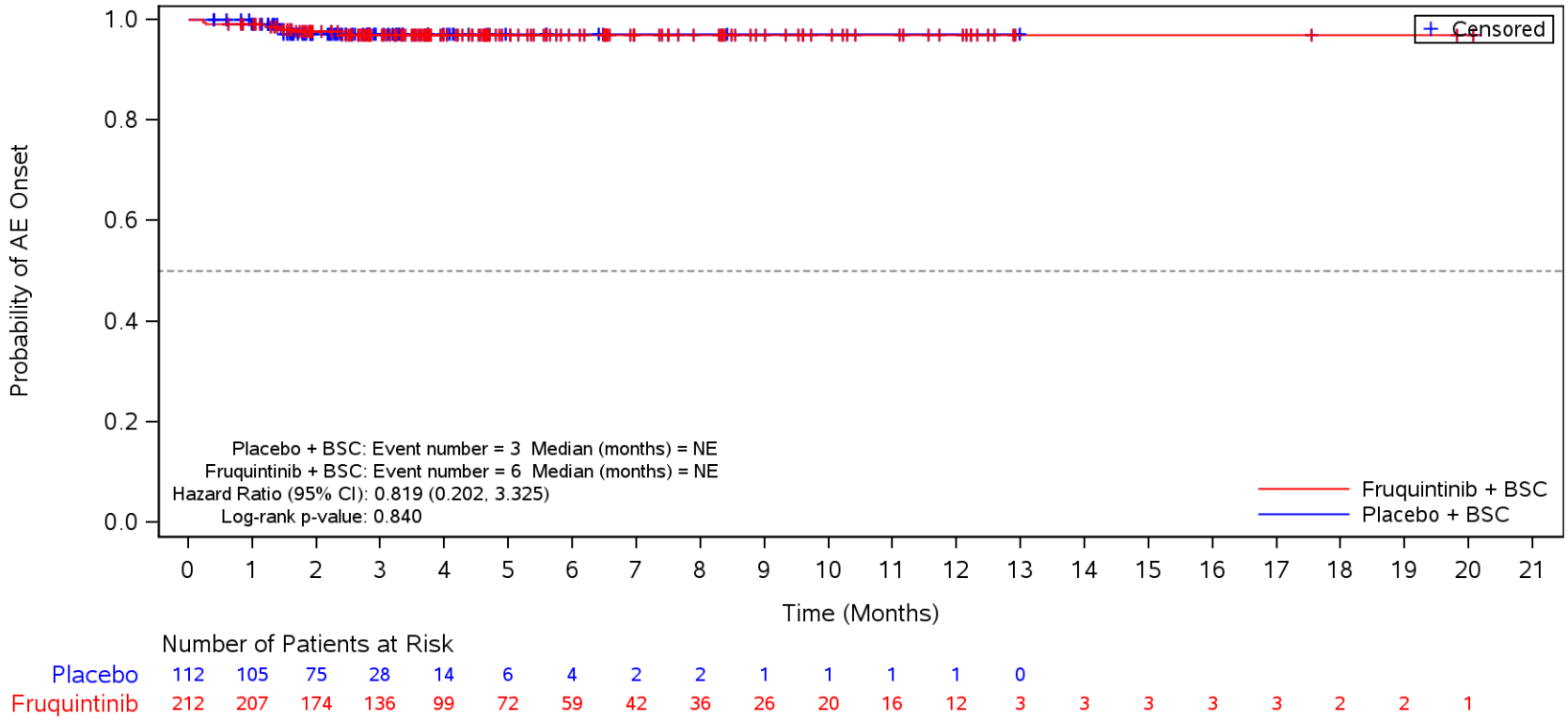
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
>=65 years



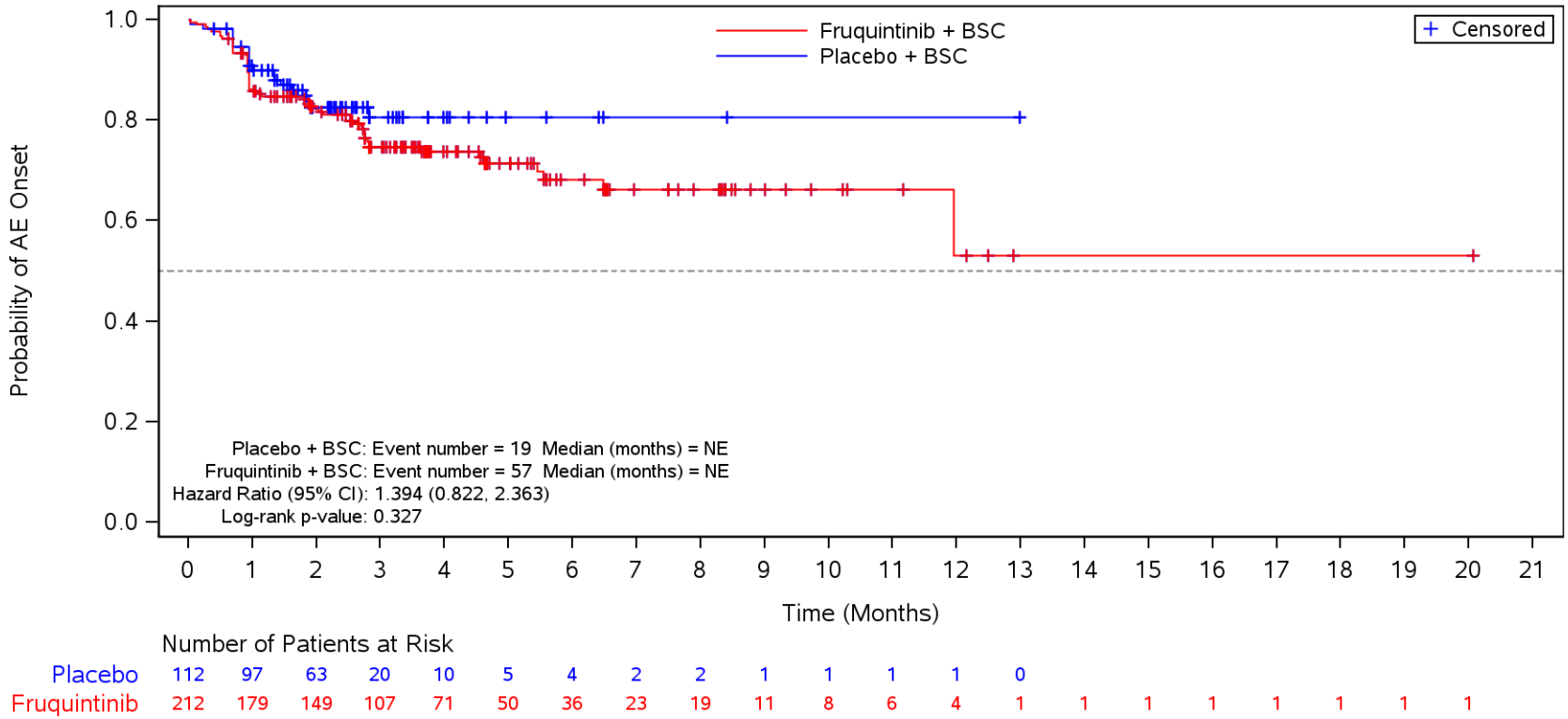
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
>=65 years



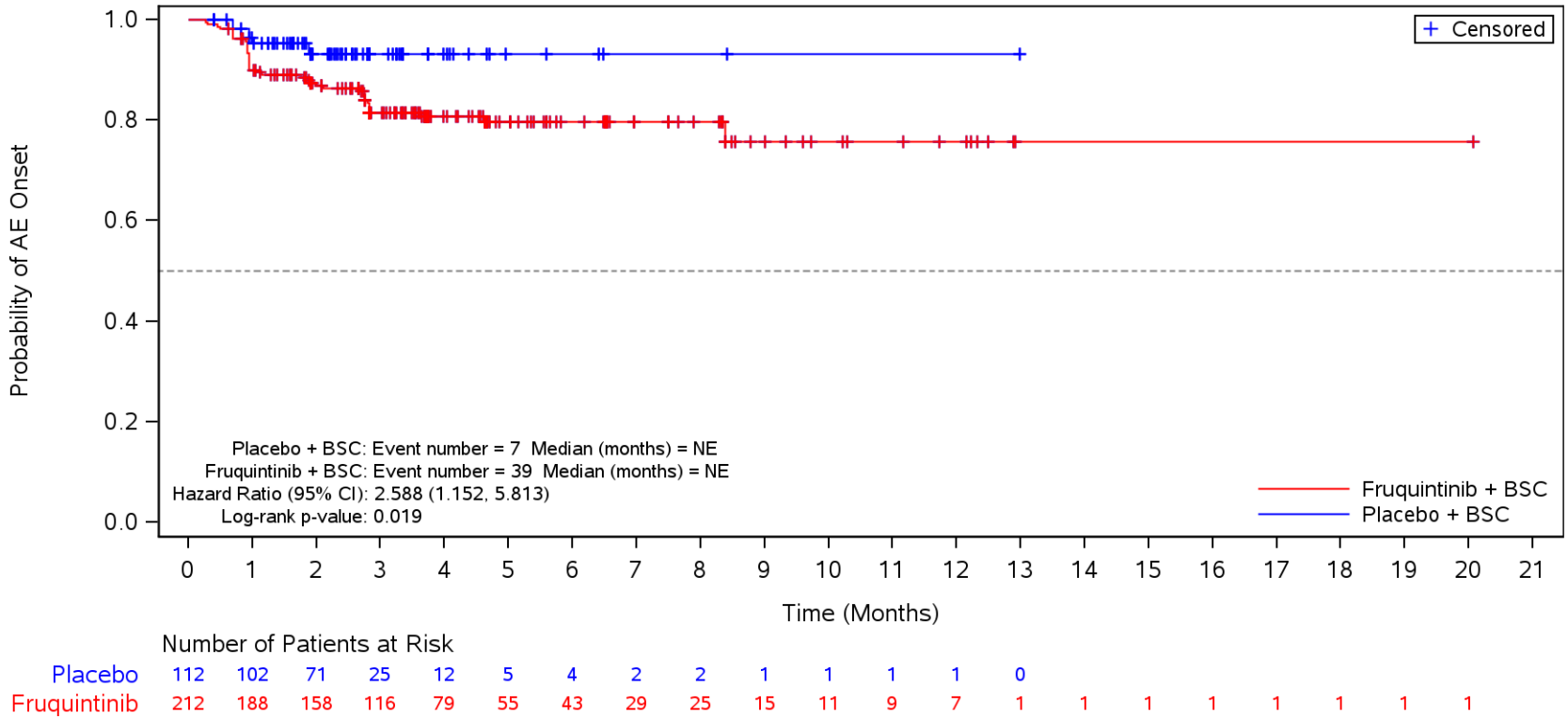
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
>=65 years



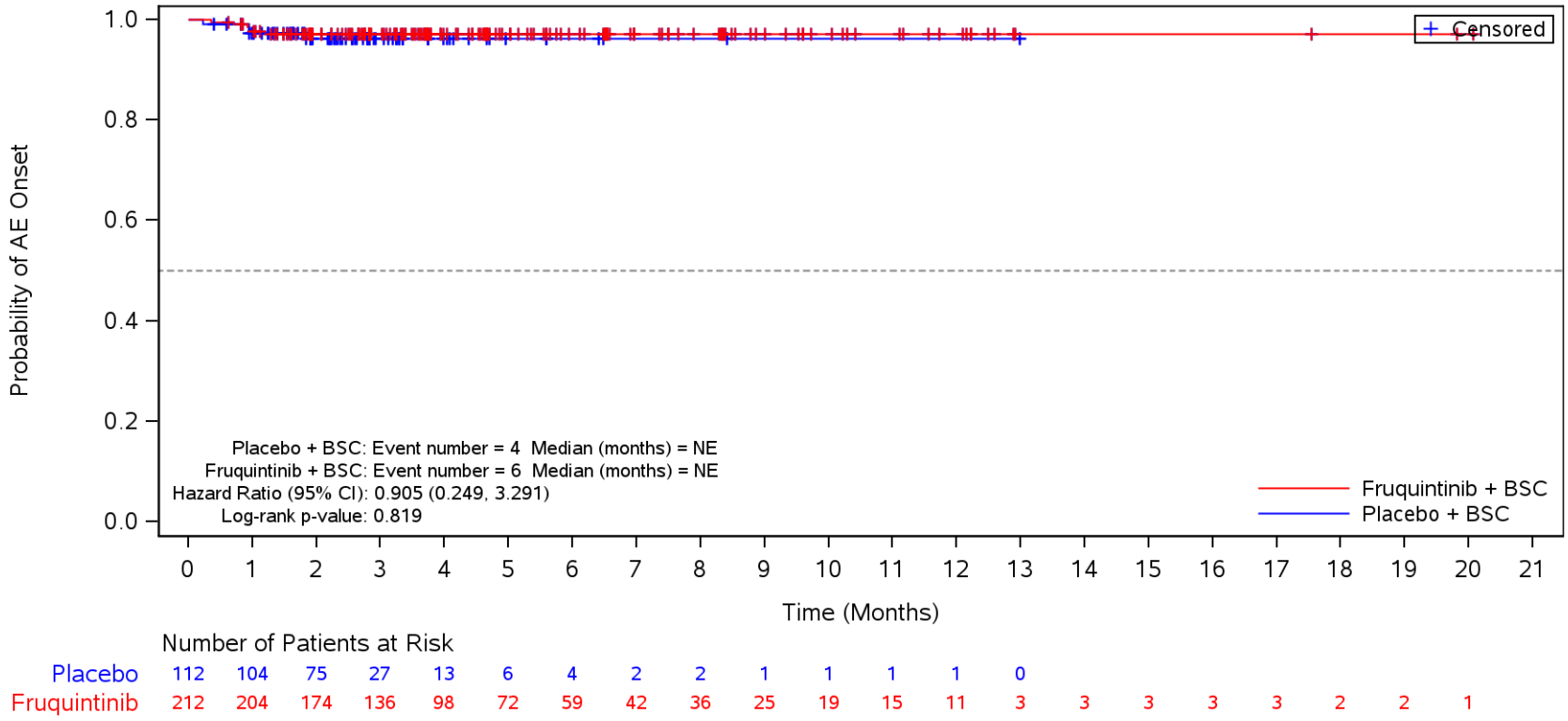
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
>=65 years



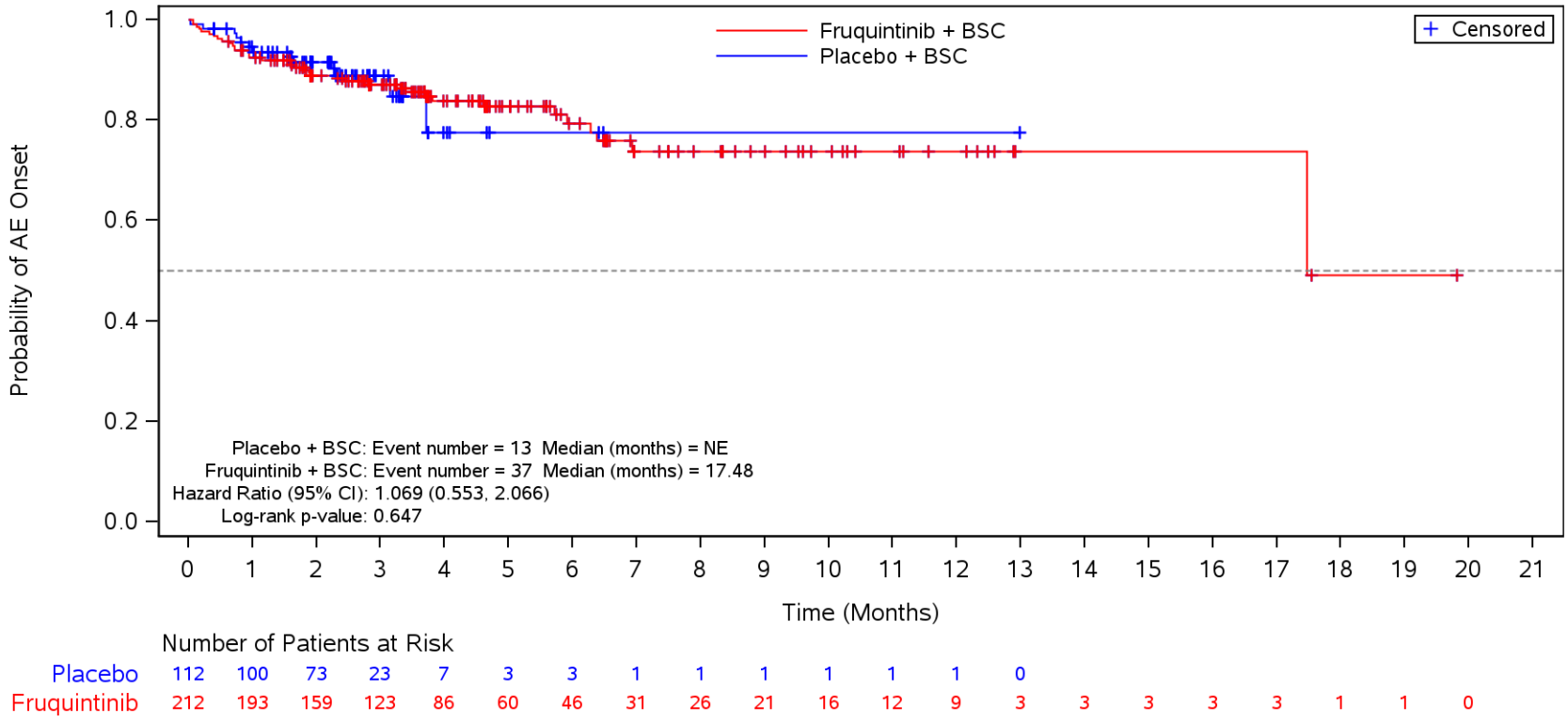
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**
>=65 years



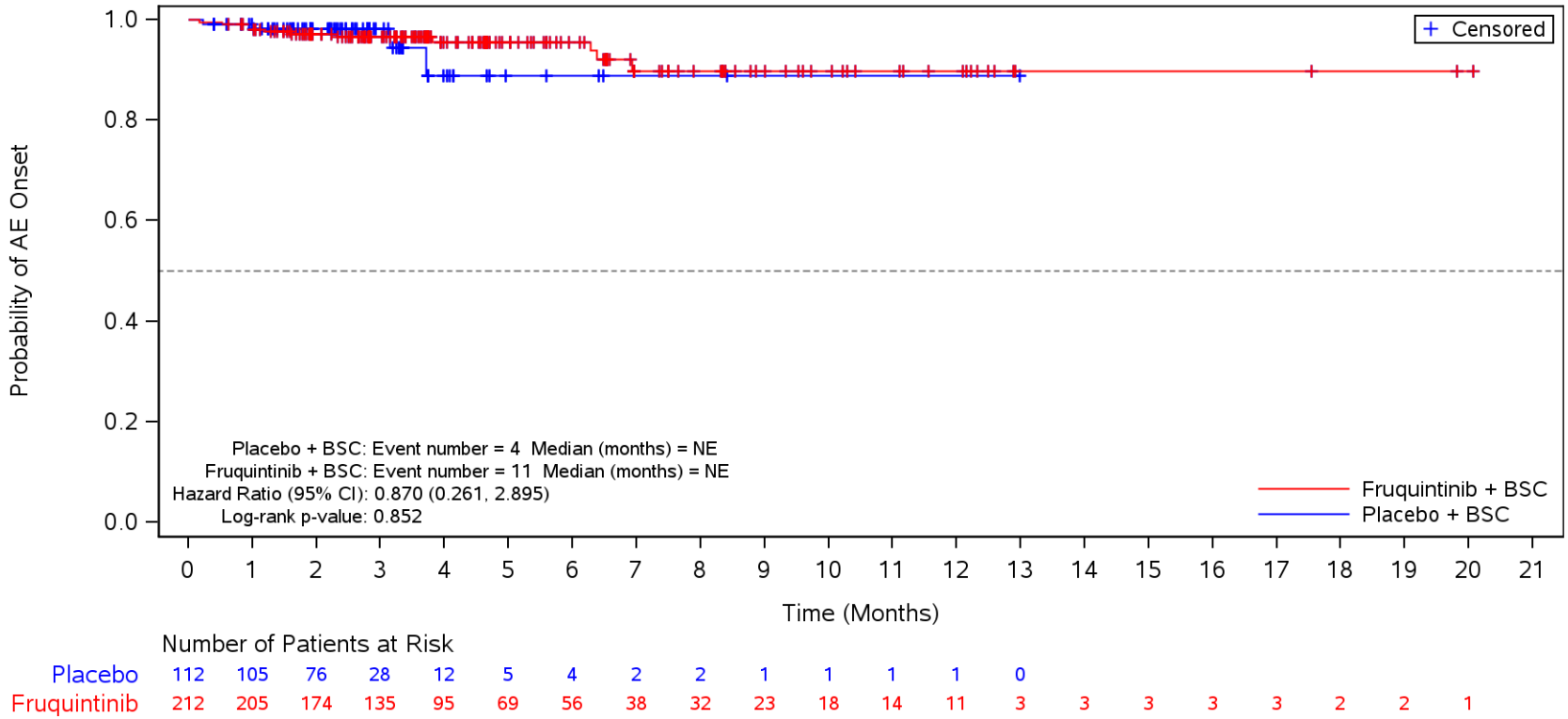
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Infections and infestations**
>=65 years



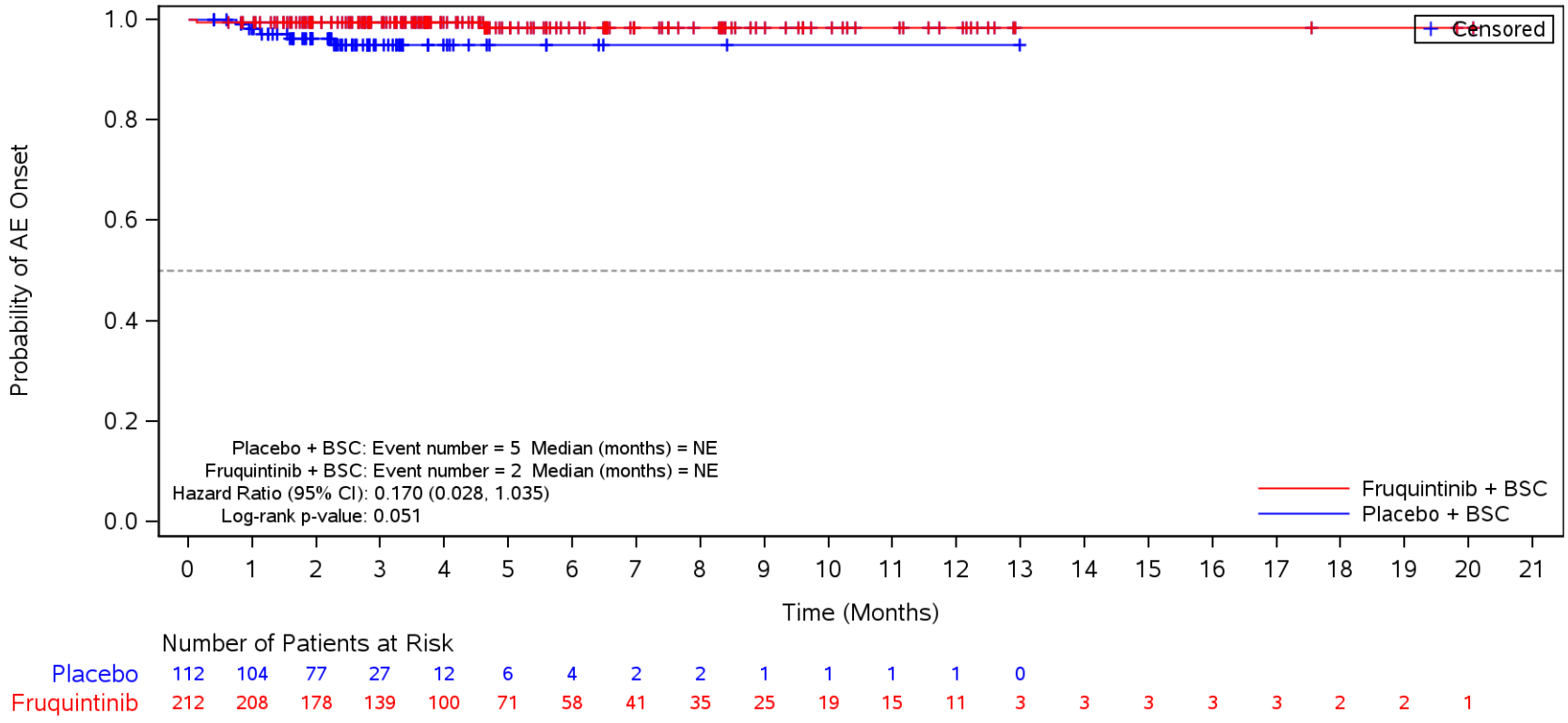
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
>=65 years



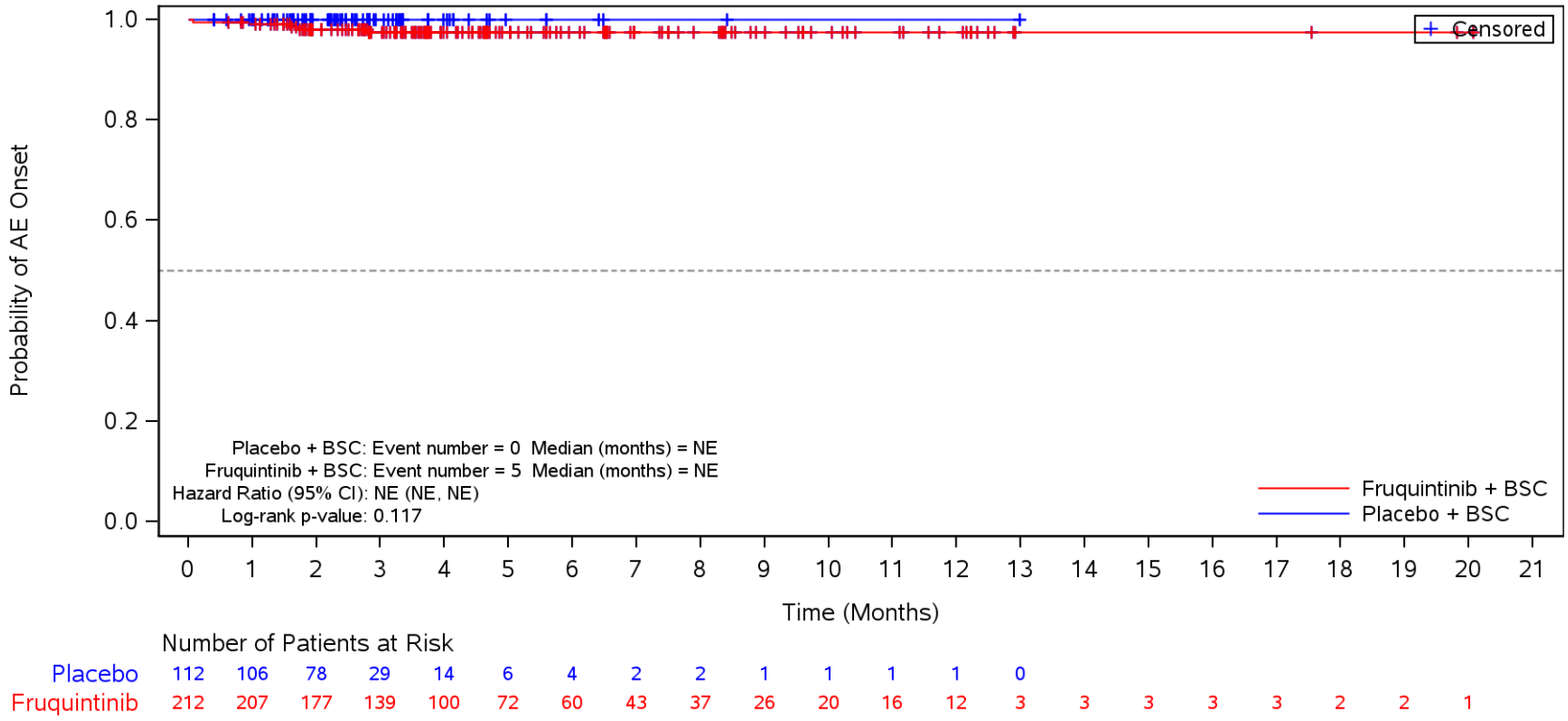
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**
>=65 years



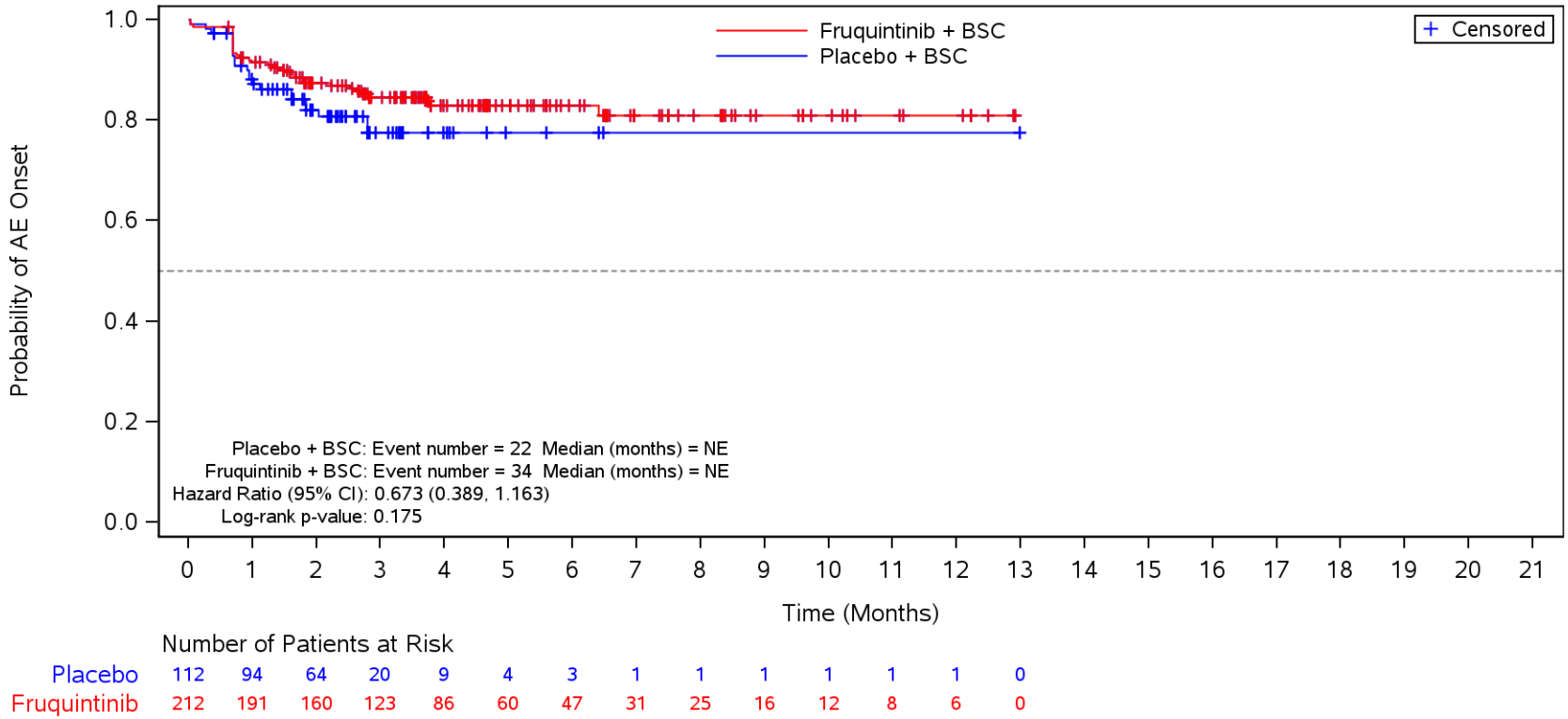
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**
>=65 years



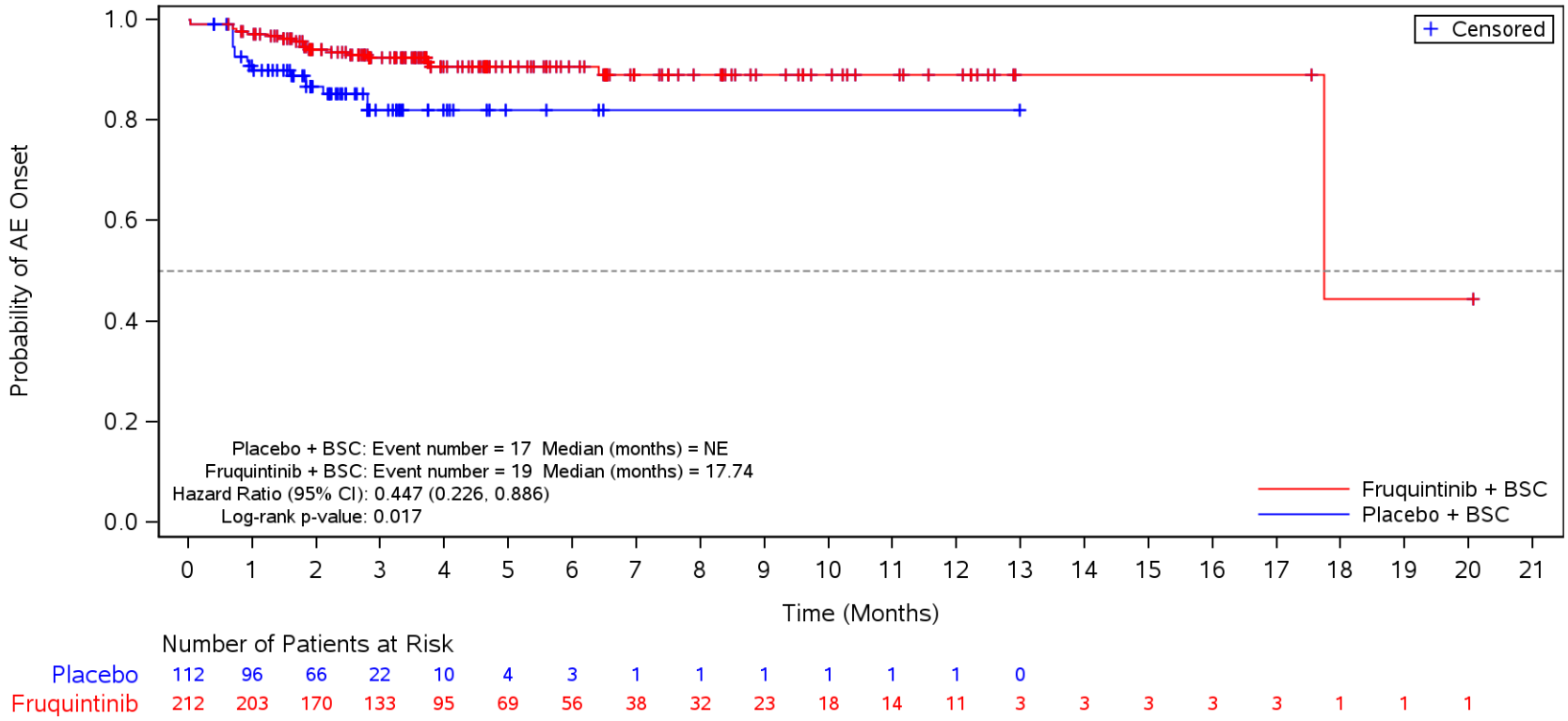
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
>=65 years



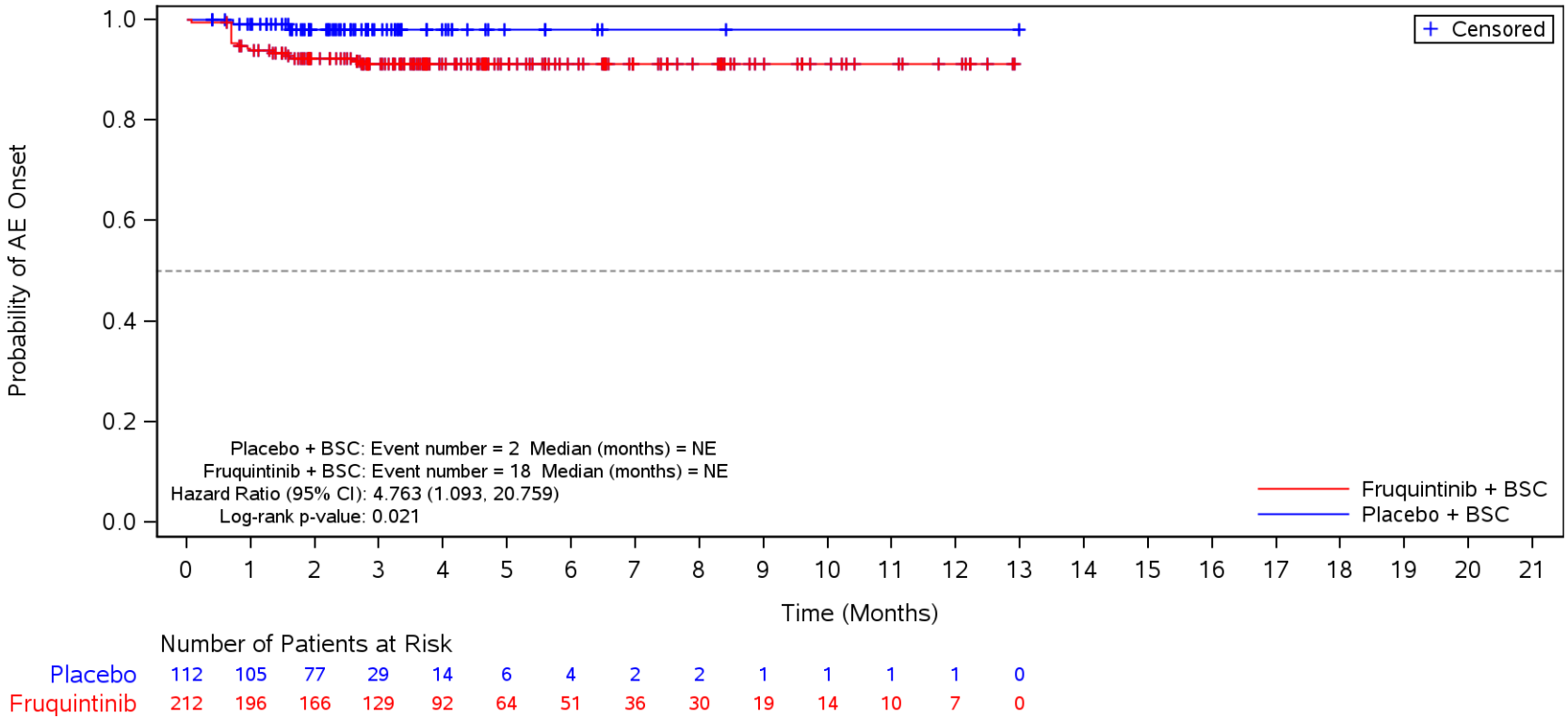
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
>=65 years



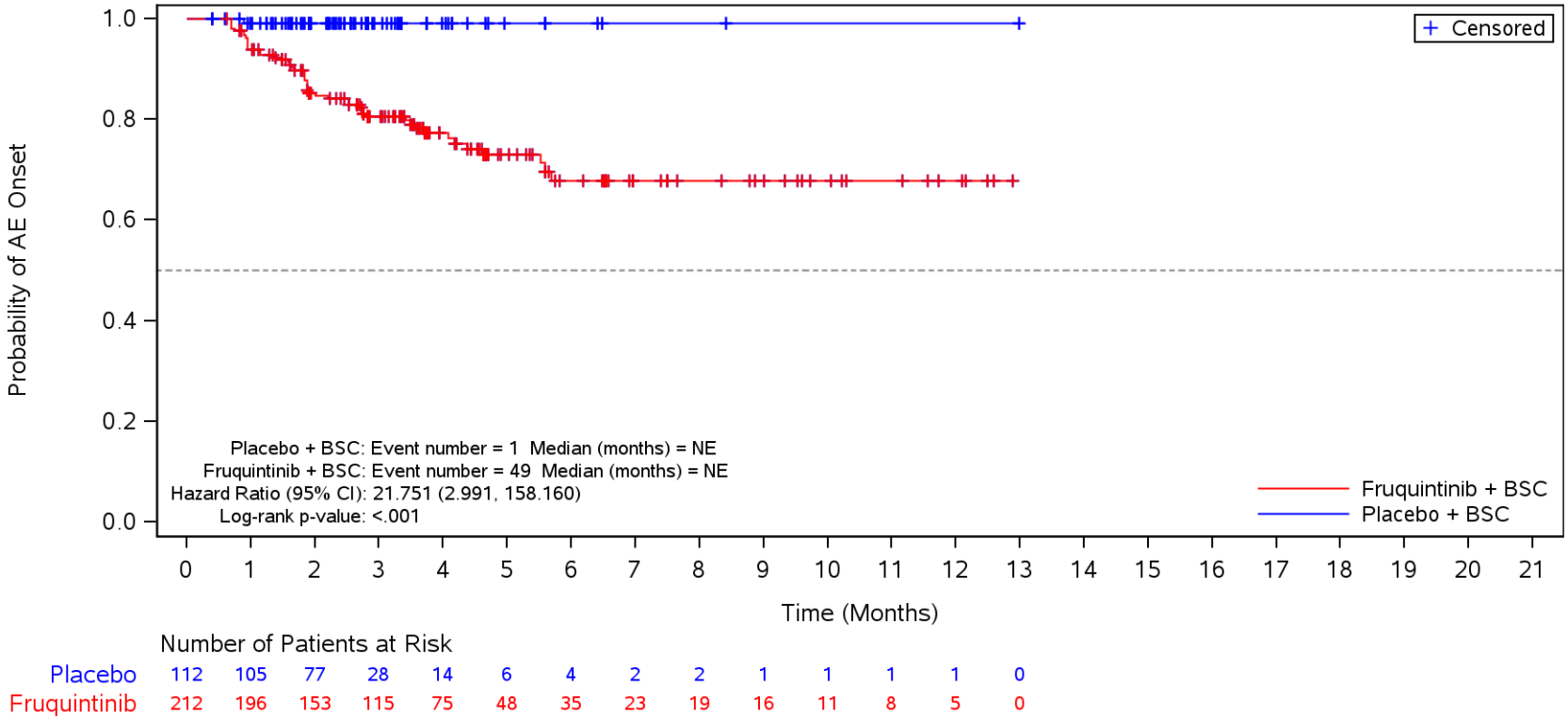
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
>=65 years



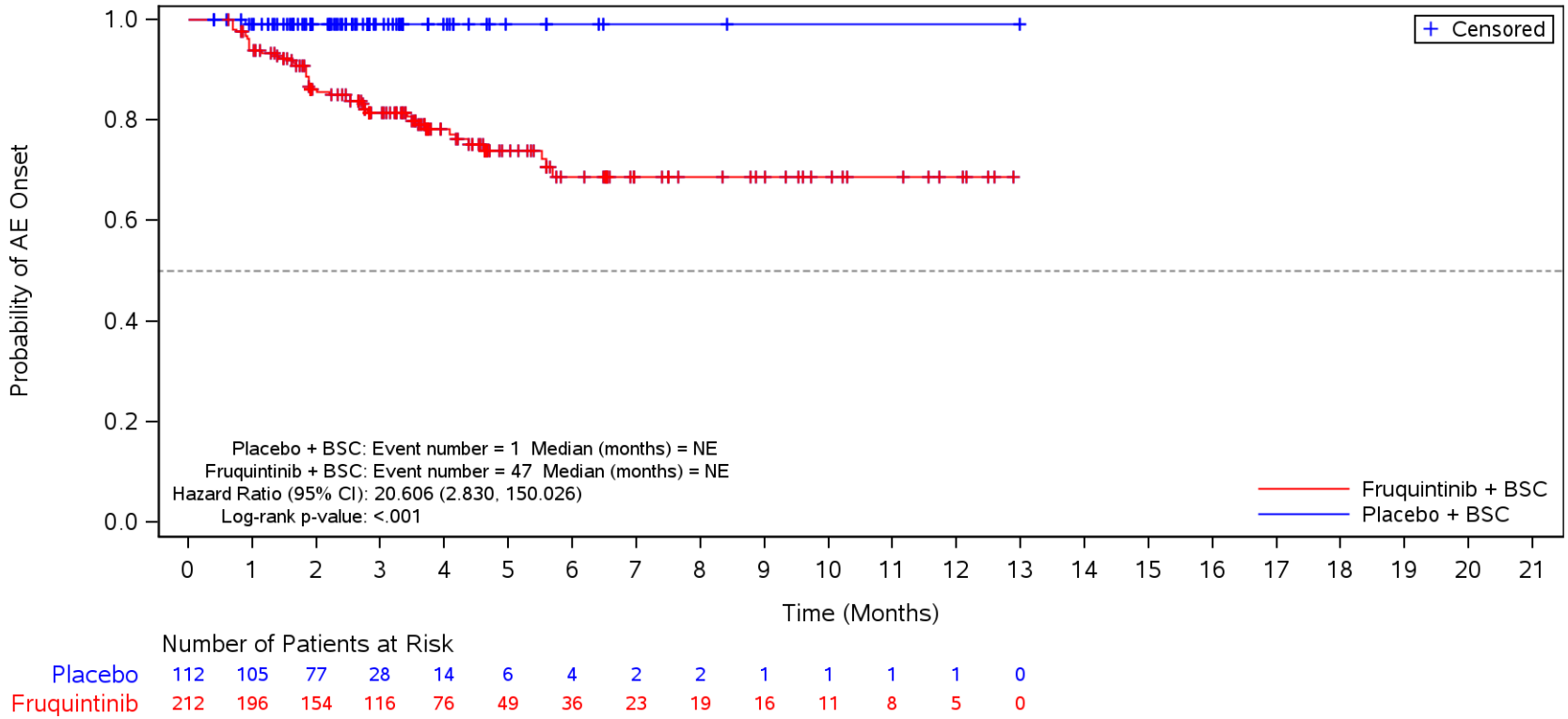
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Endocrine disorders**
>=65 years



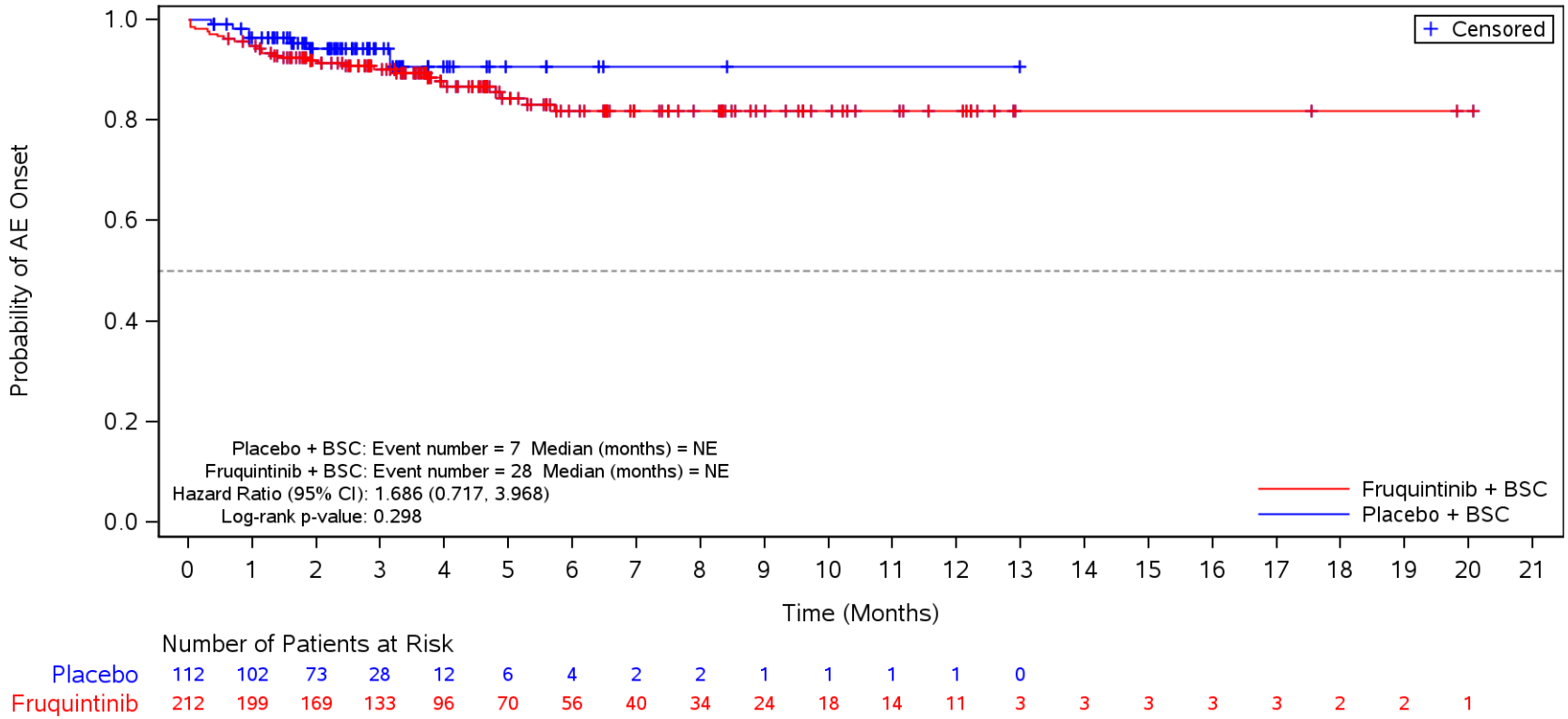
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
>=65 years



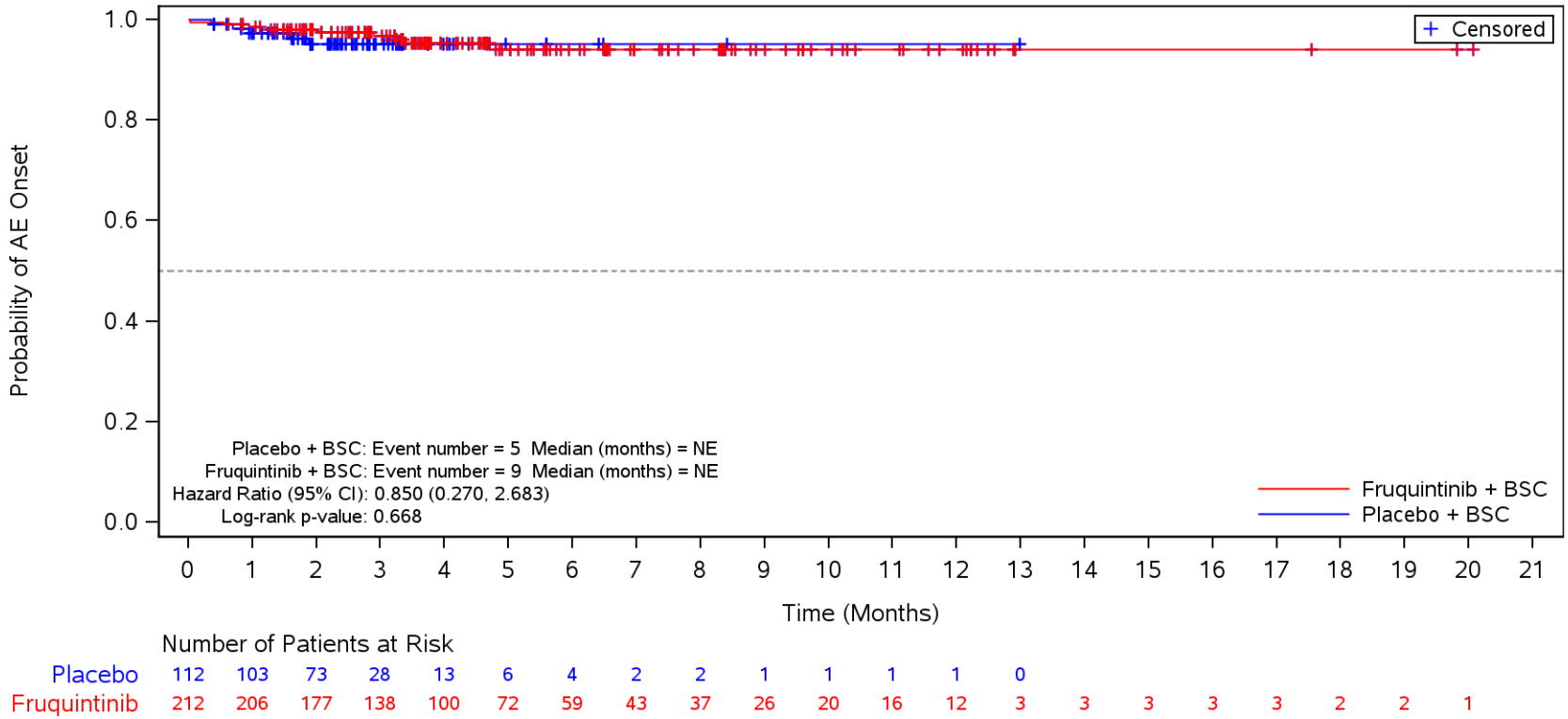
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Psychiatric disorders**
>=65 years



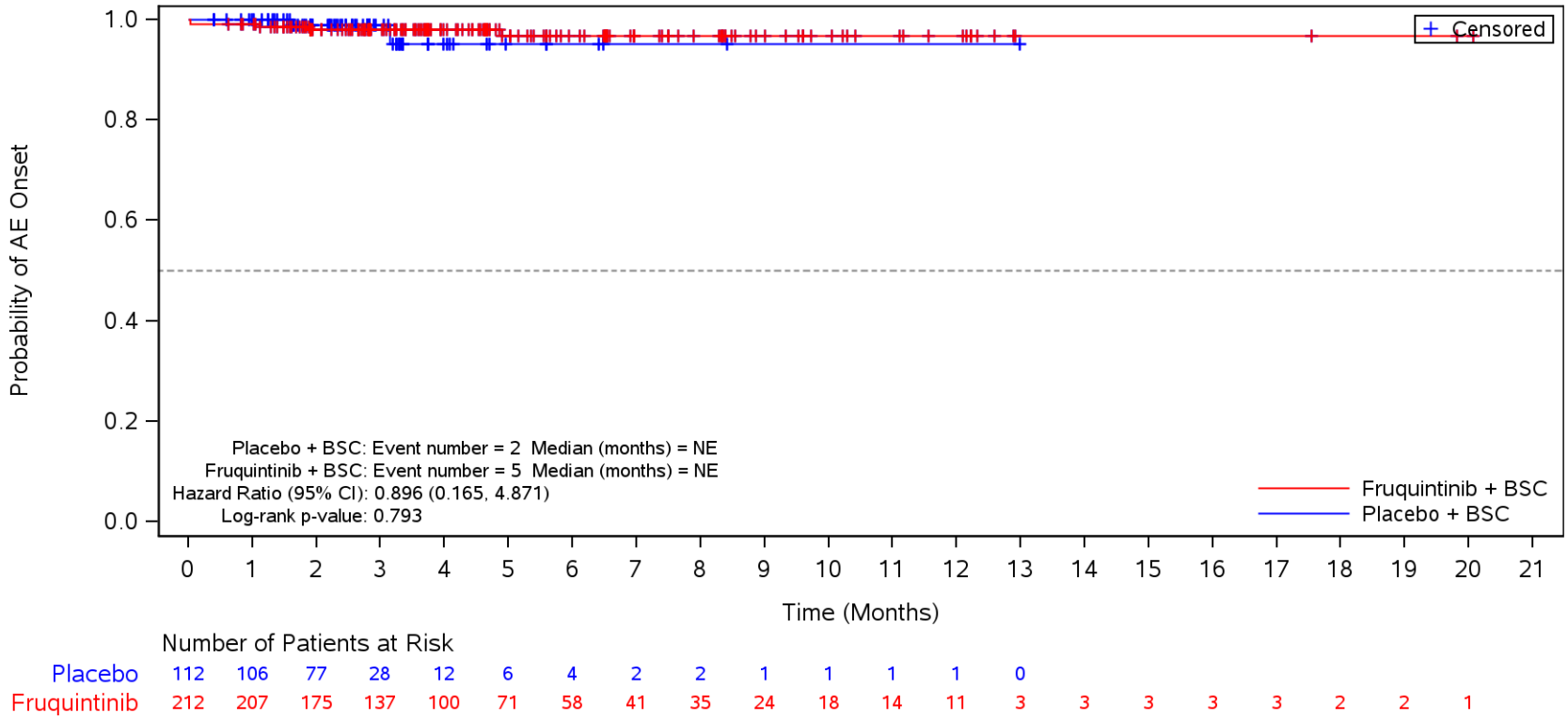
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
>=65 years



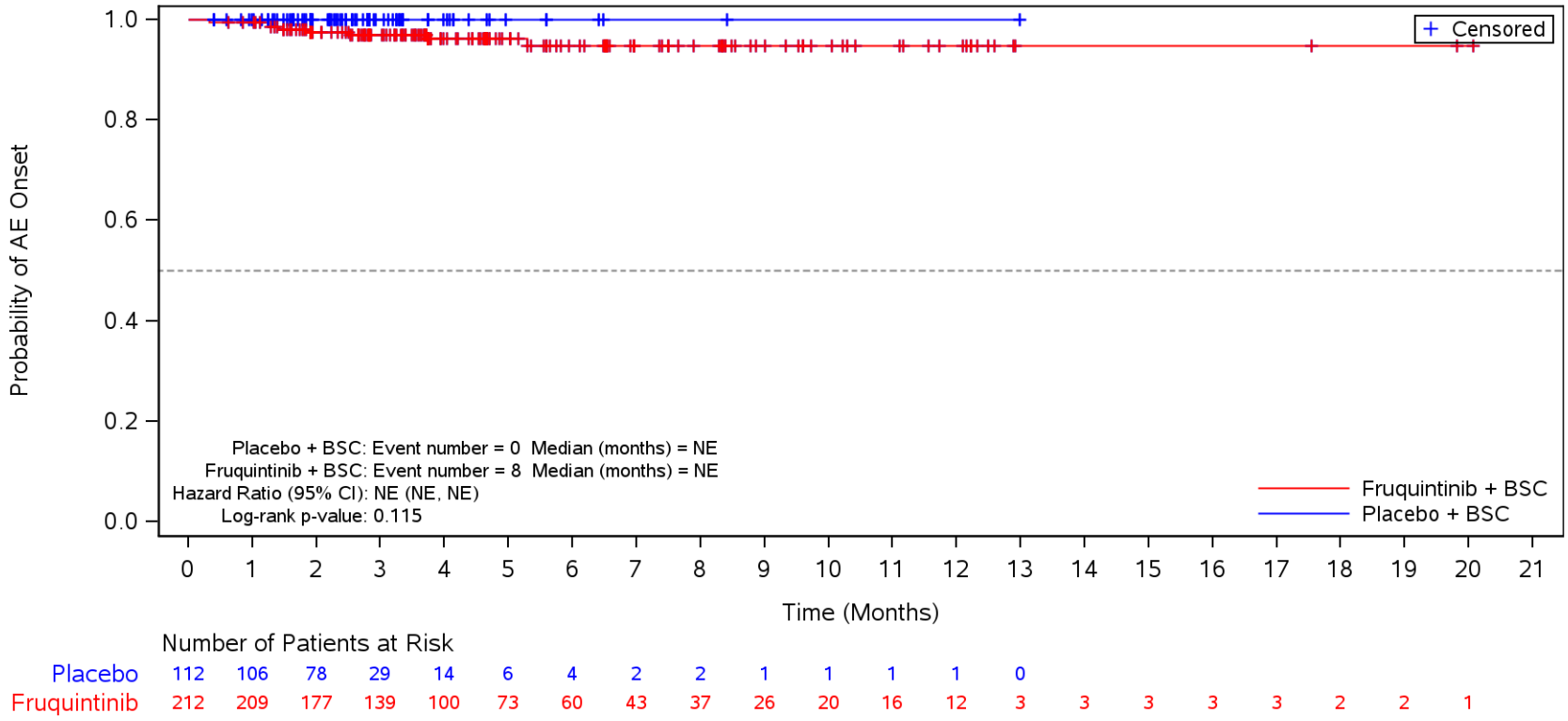
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**
>=65 years



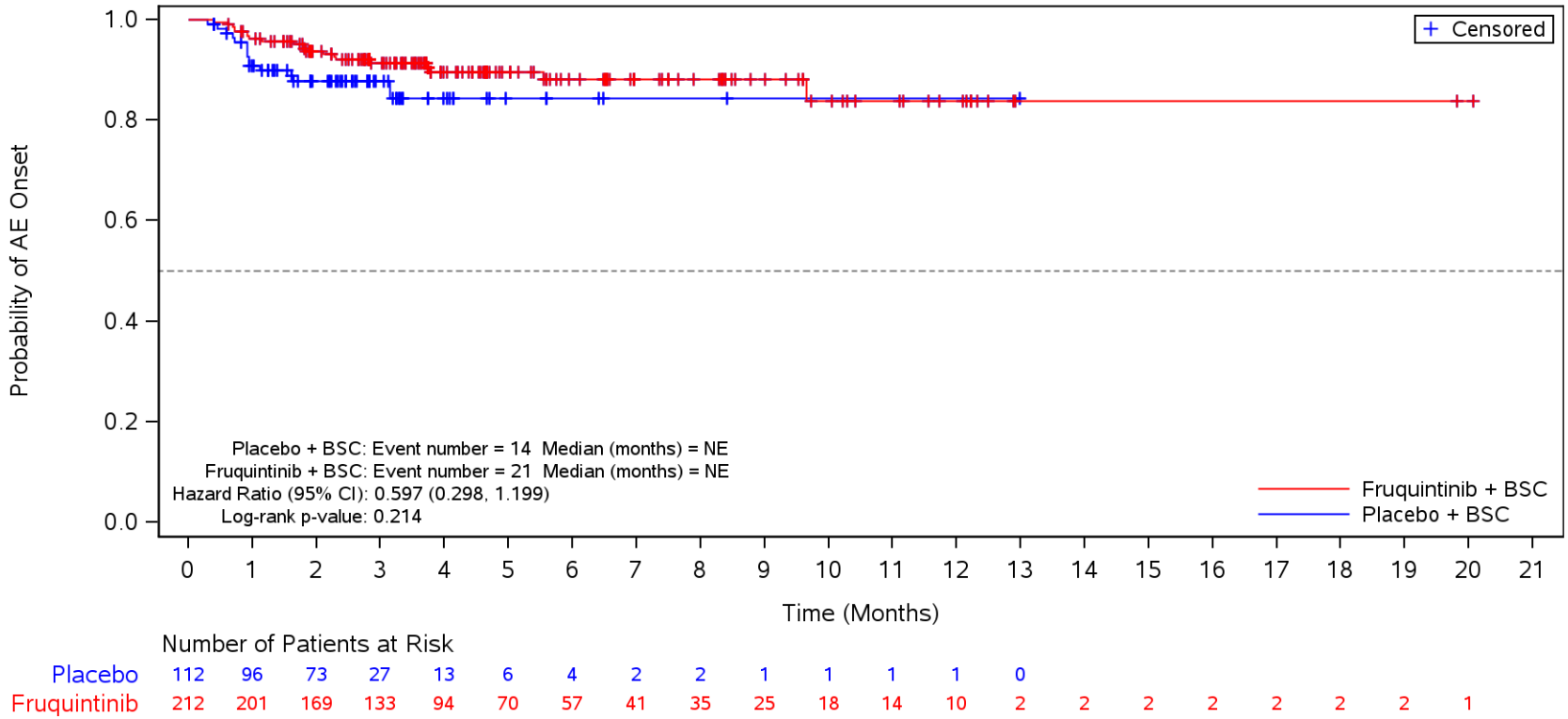
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
>=65 years



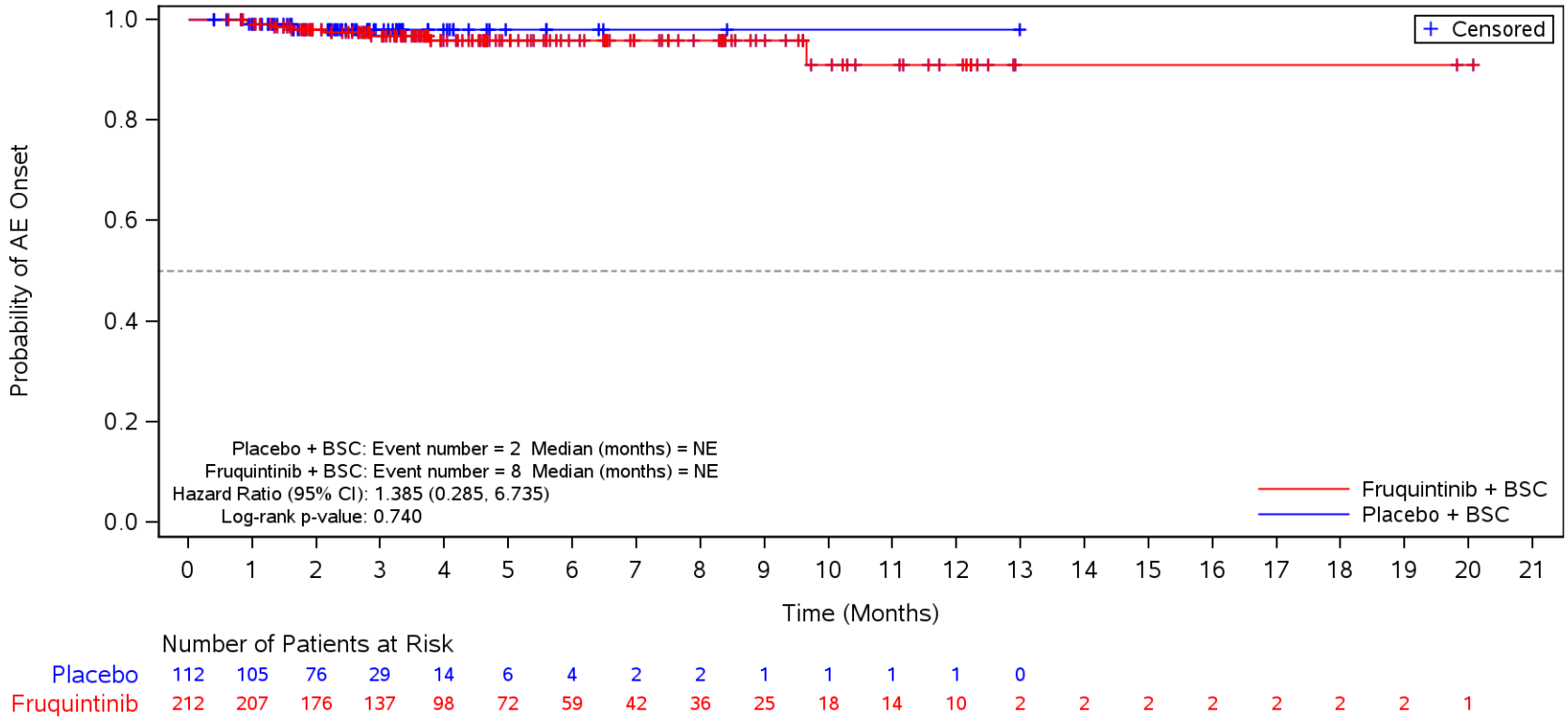
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**
>=65 years



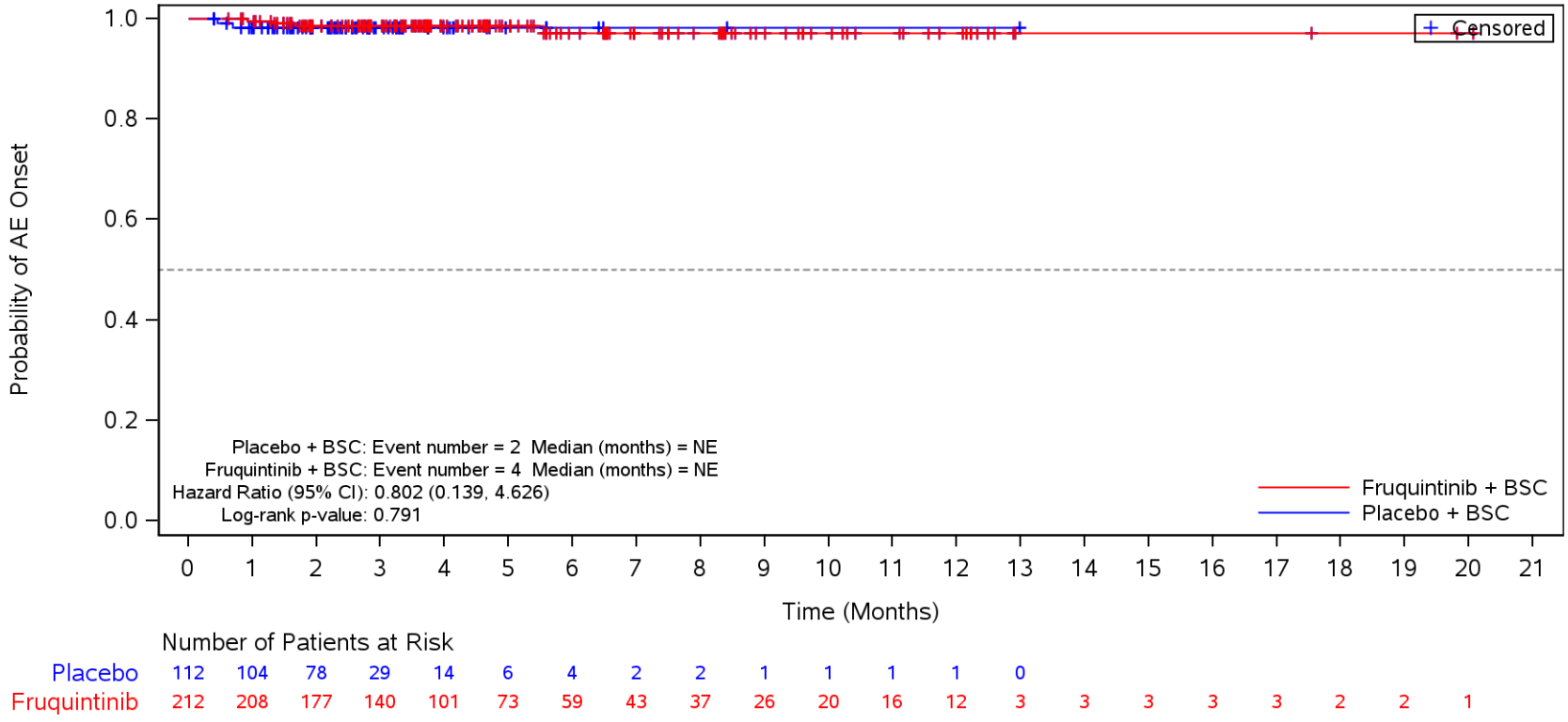
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3B
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Age
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hypertransaminasaemia**
>=65 years



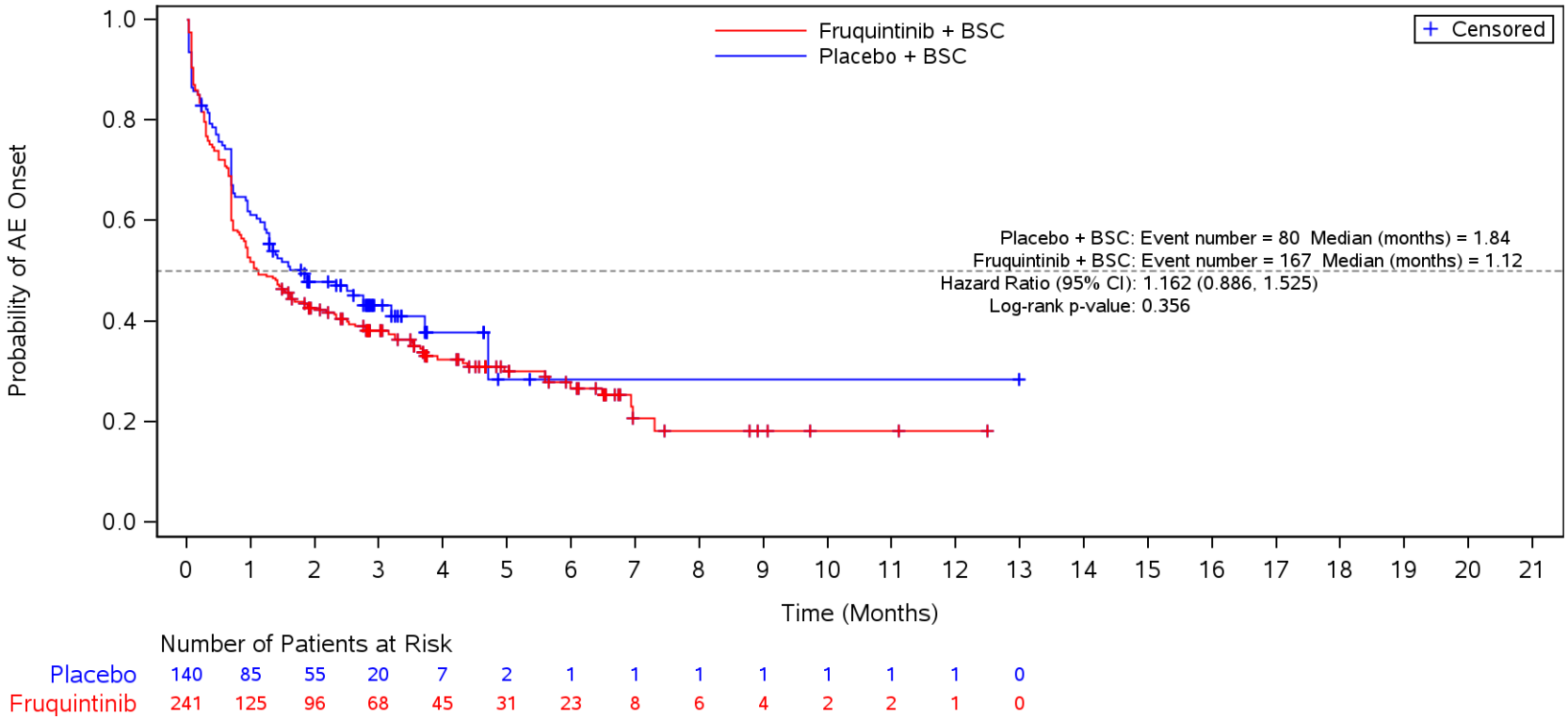
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
Male



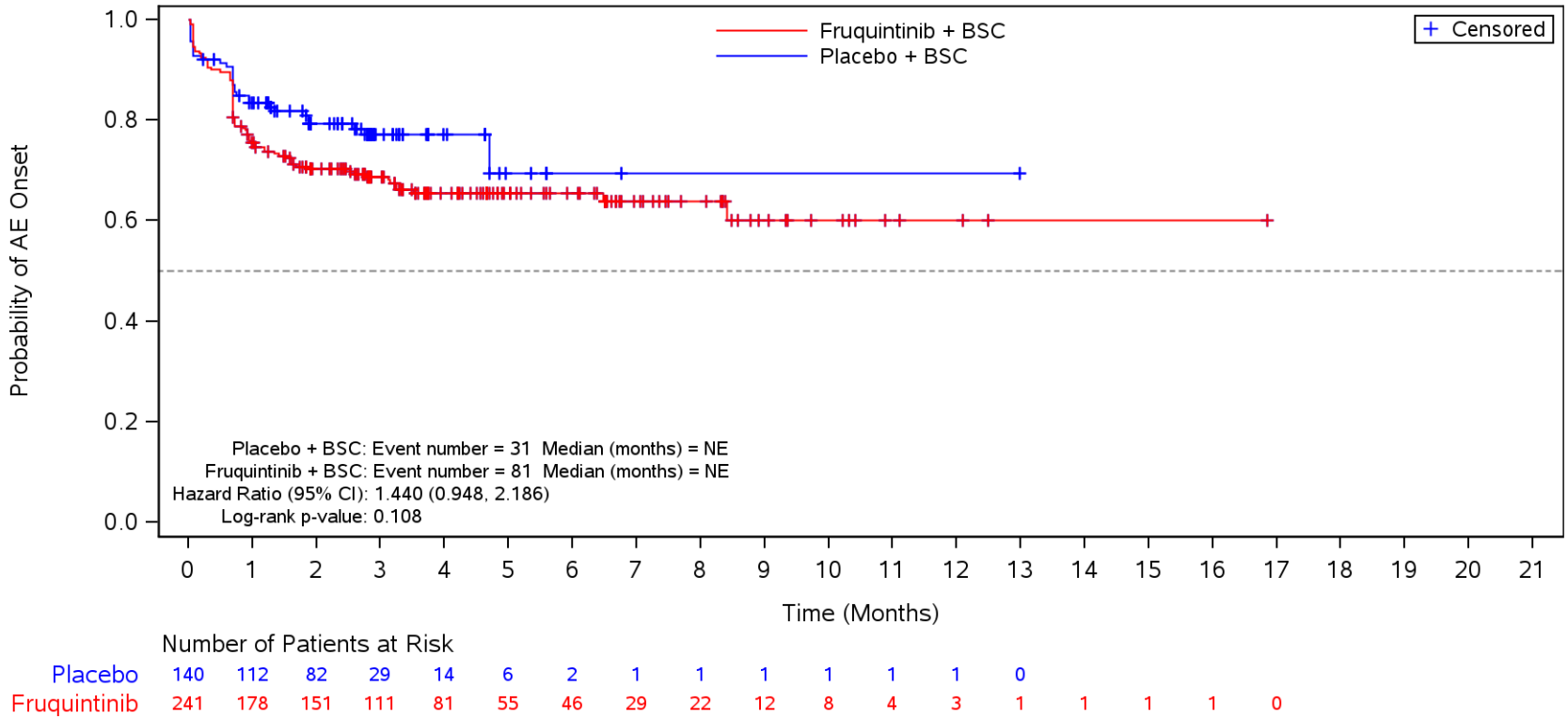
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
Male



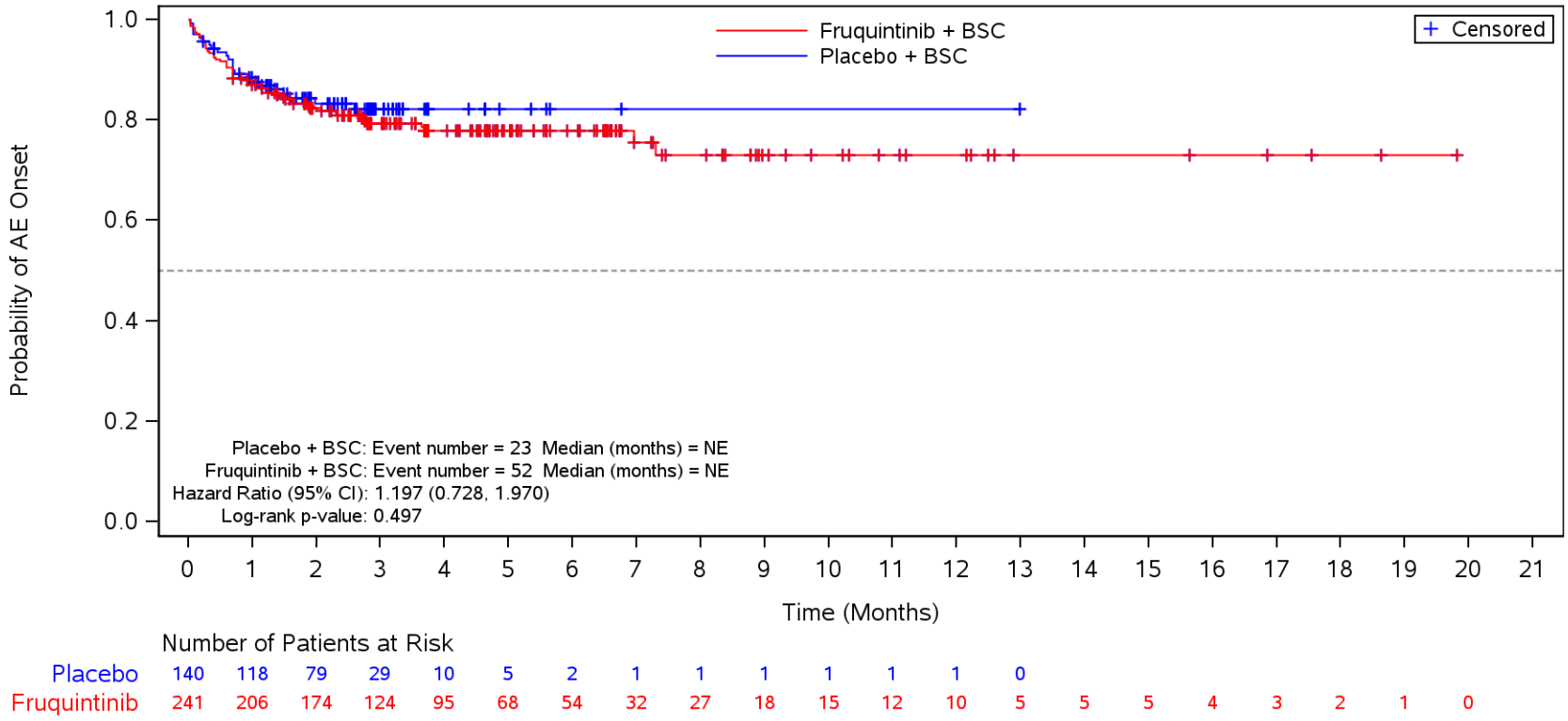
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Male



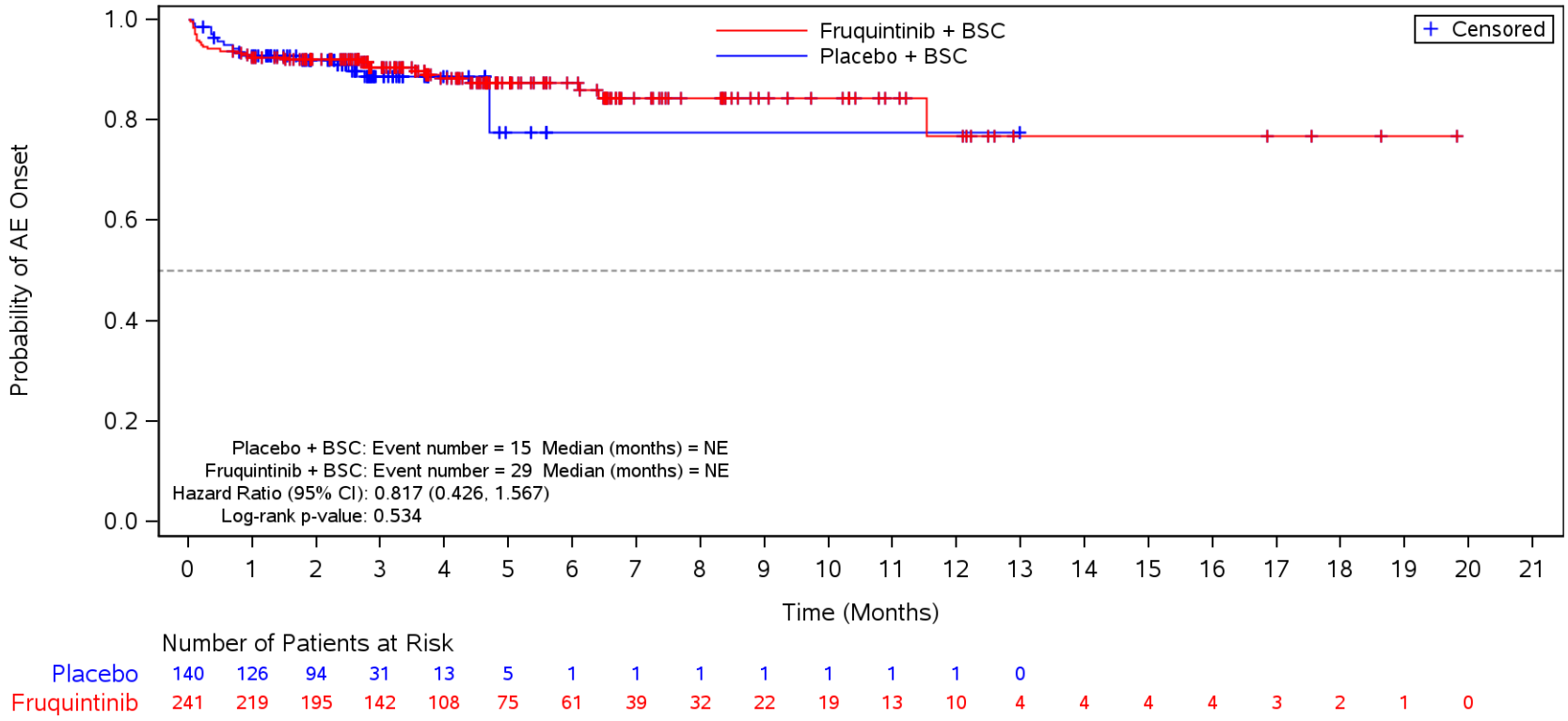
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
Male



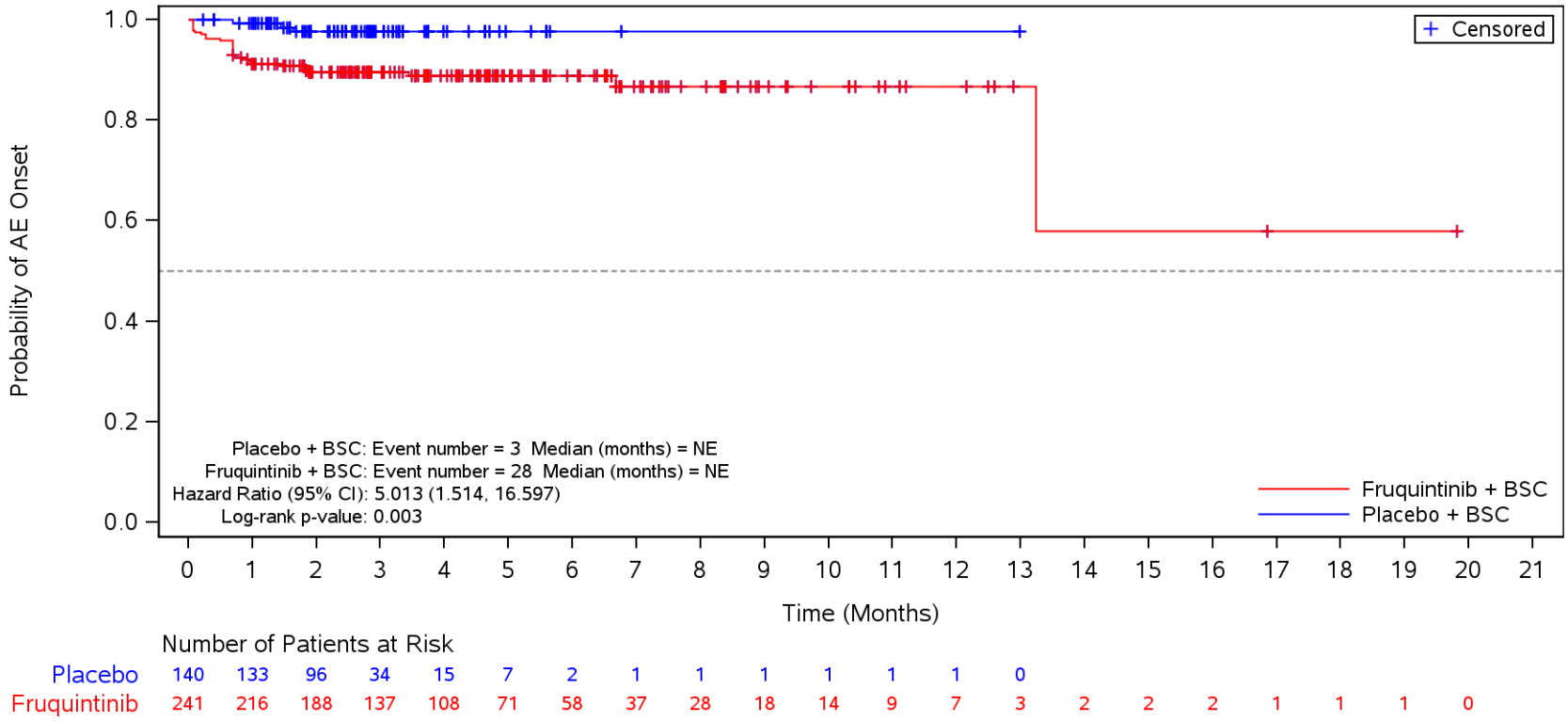
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
Male



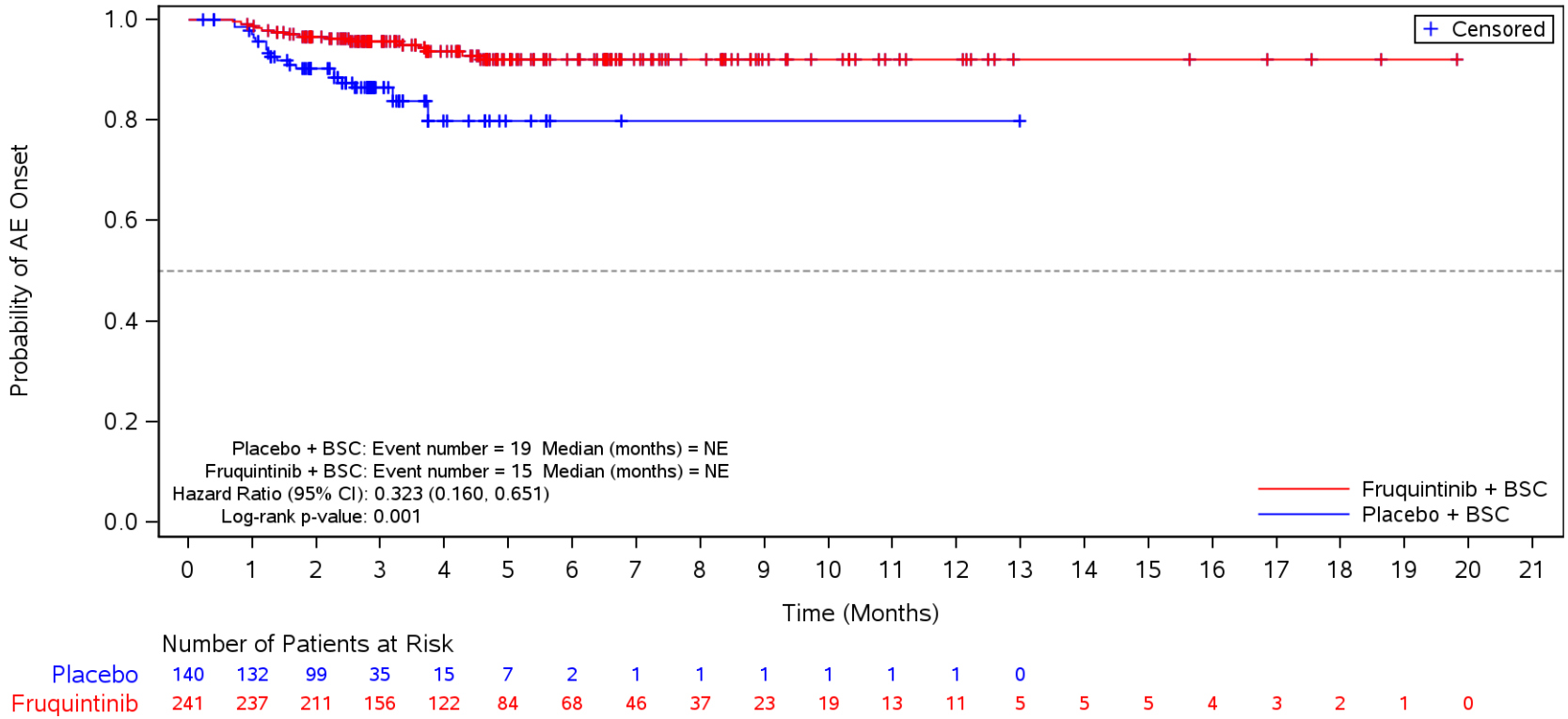
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
Male



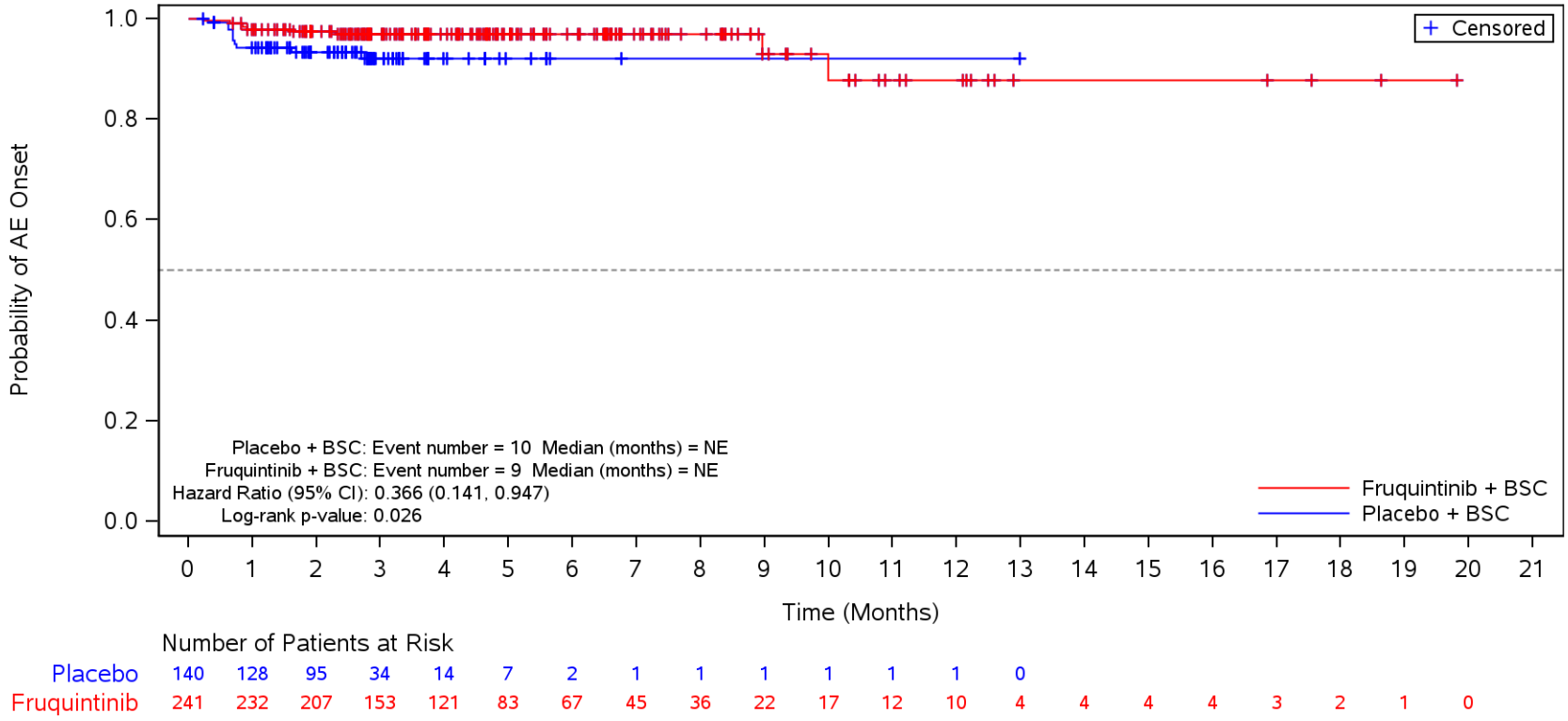
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Male



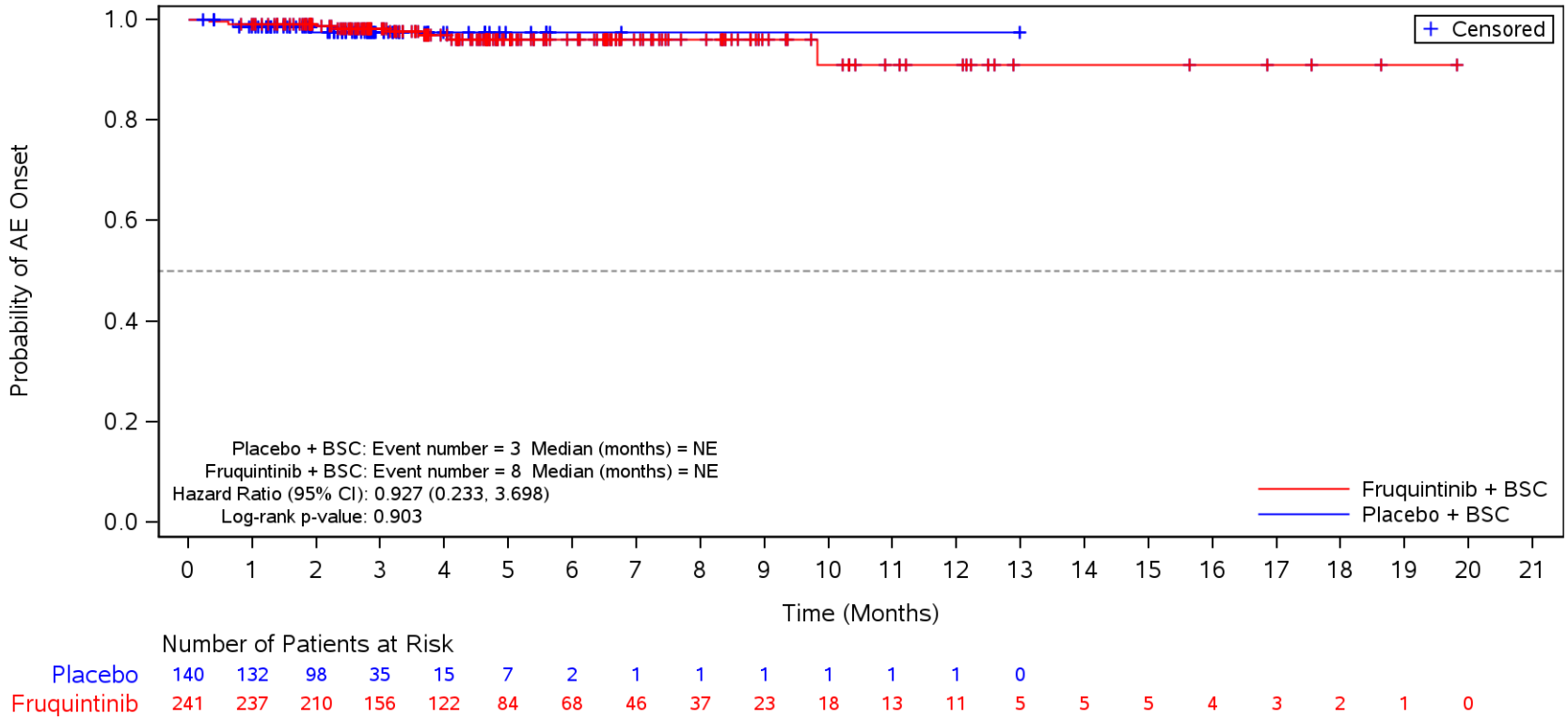
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
Male



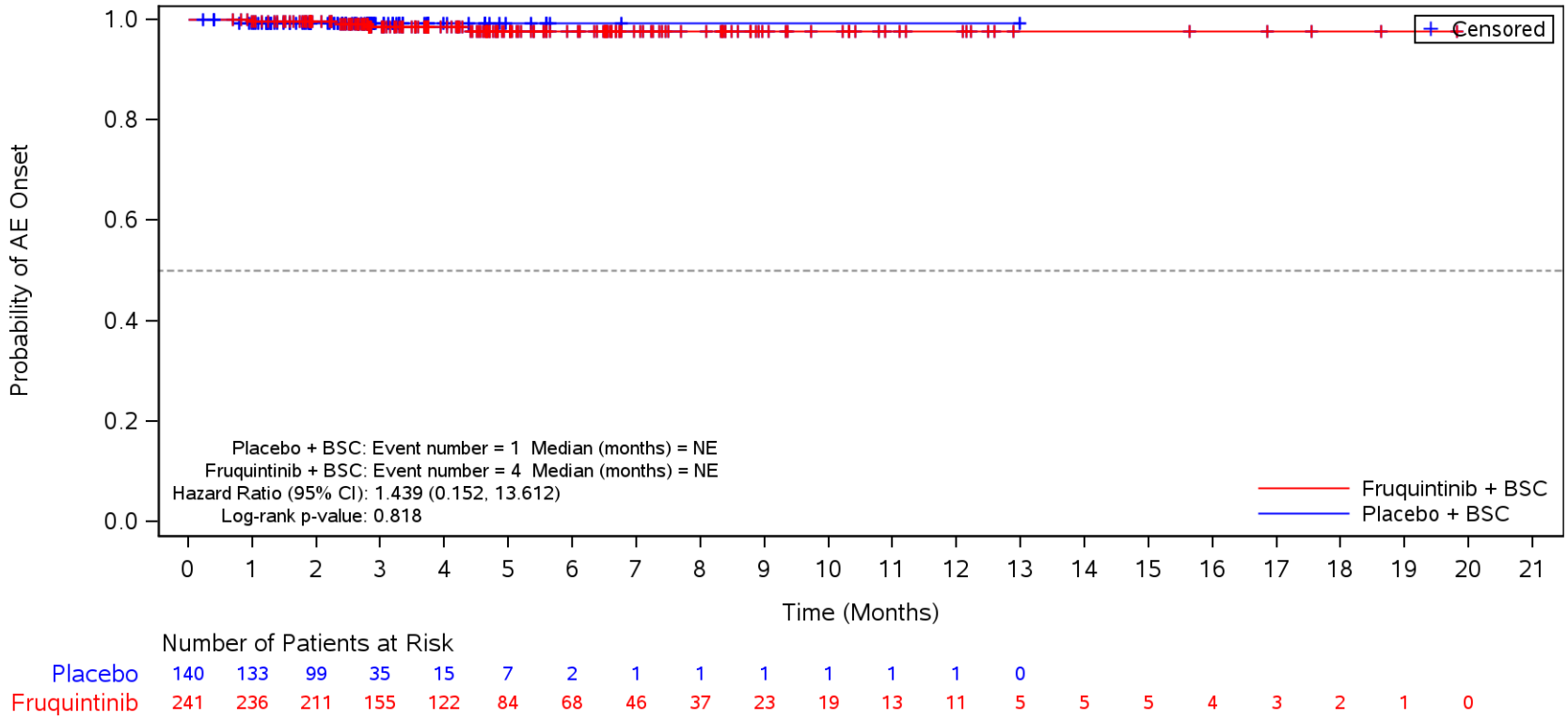
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**
Male



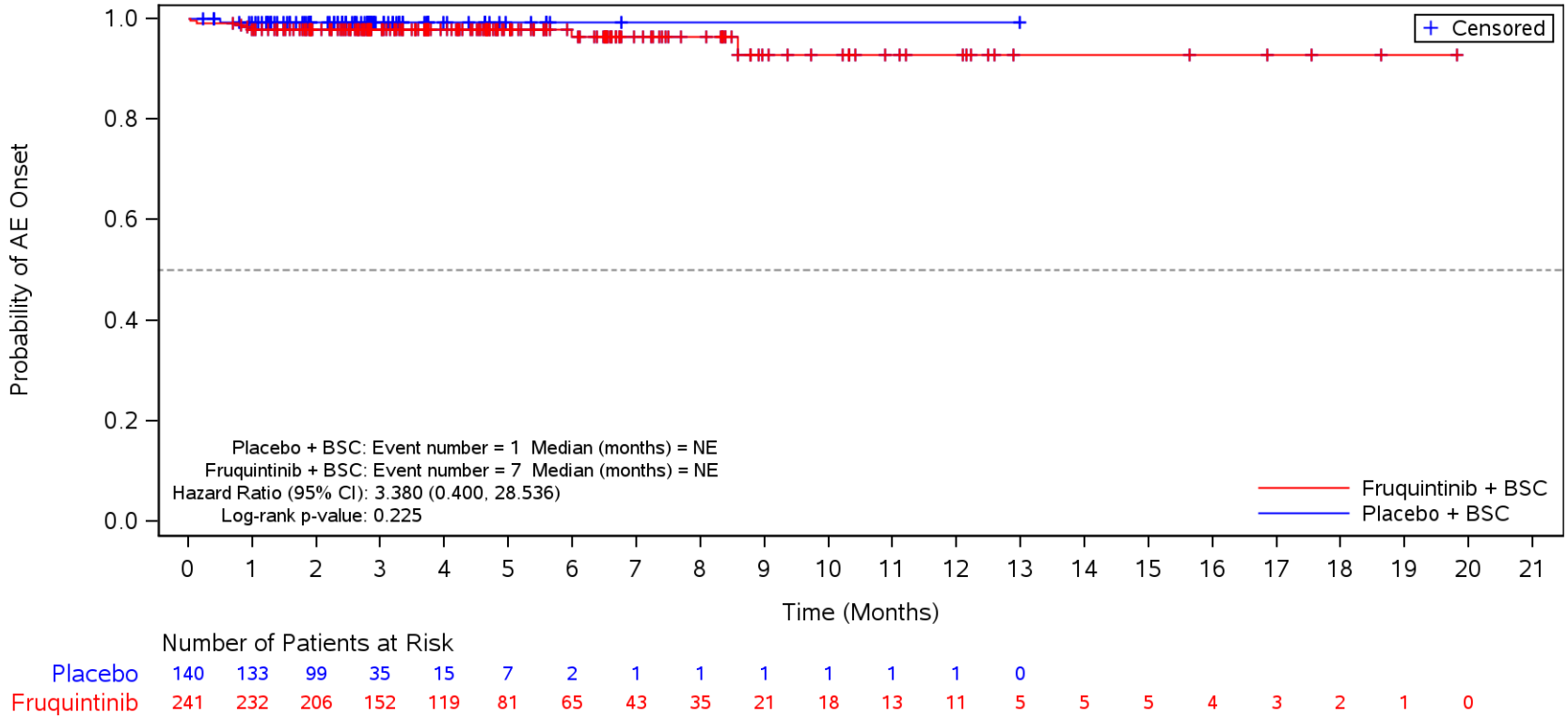
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Condition aggravated**
Male



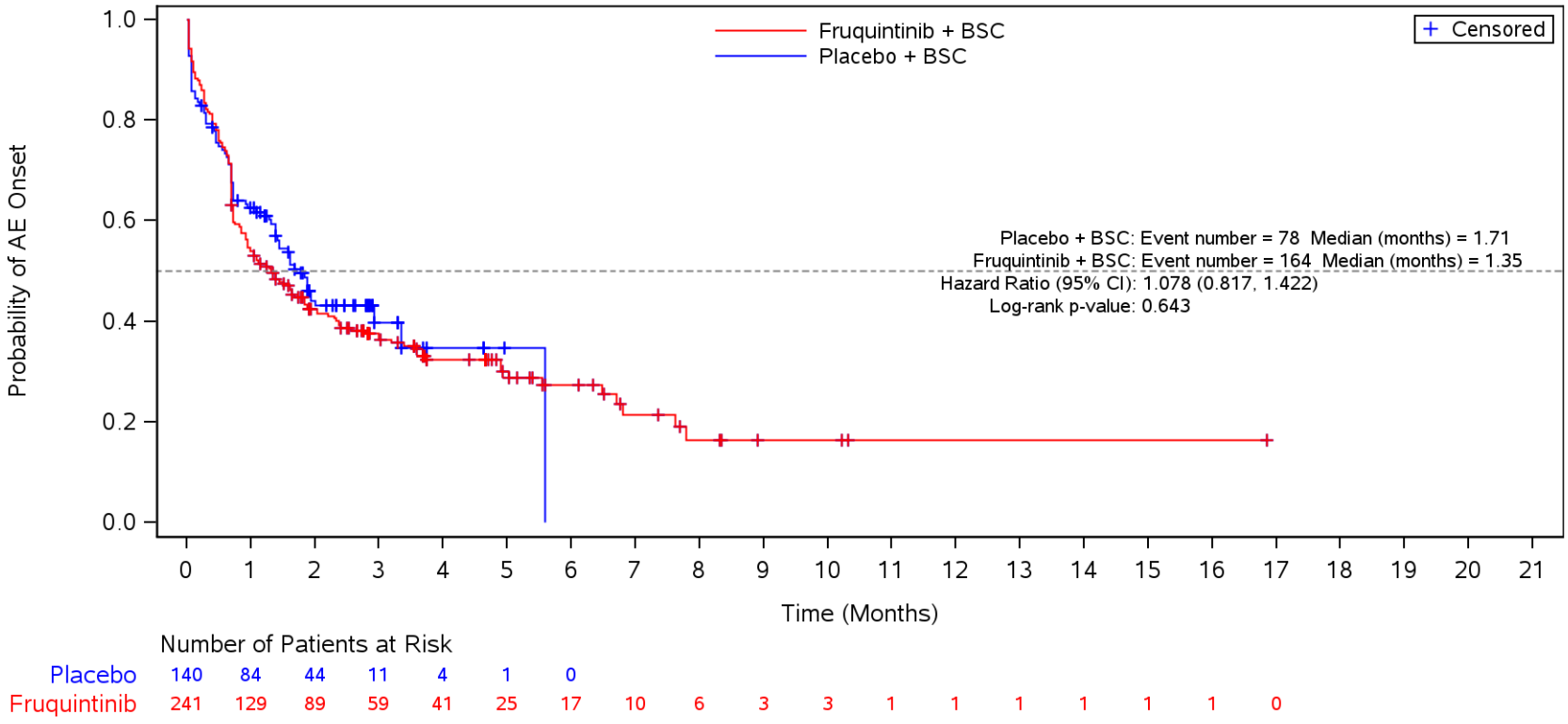
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**
Male



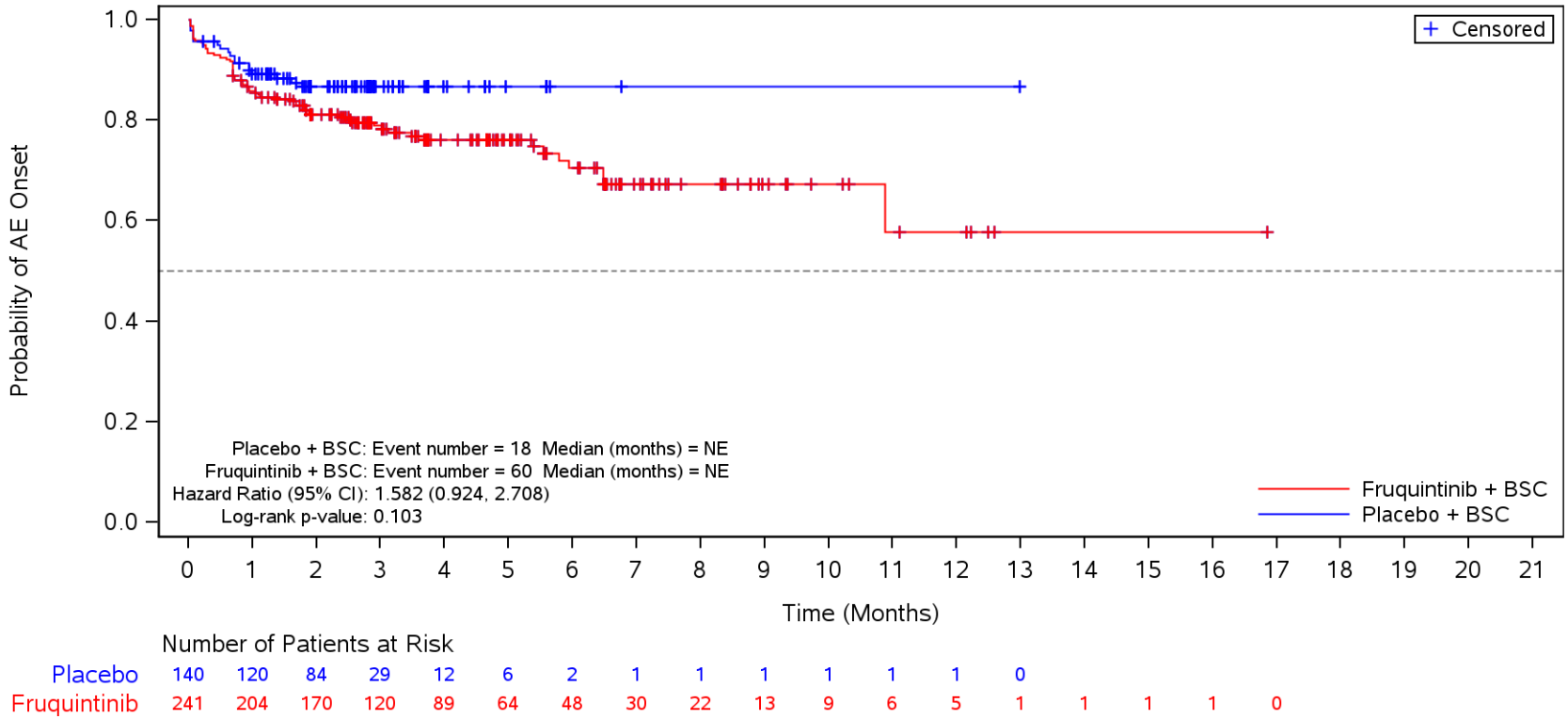
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
Male



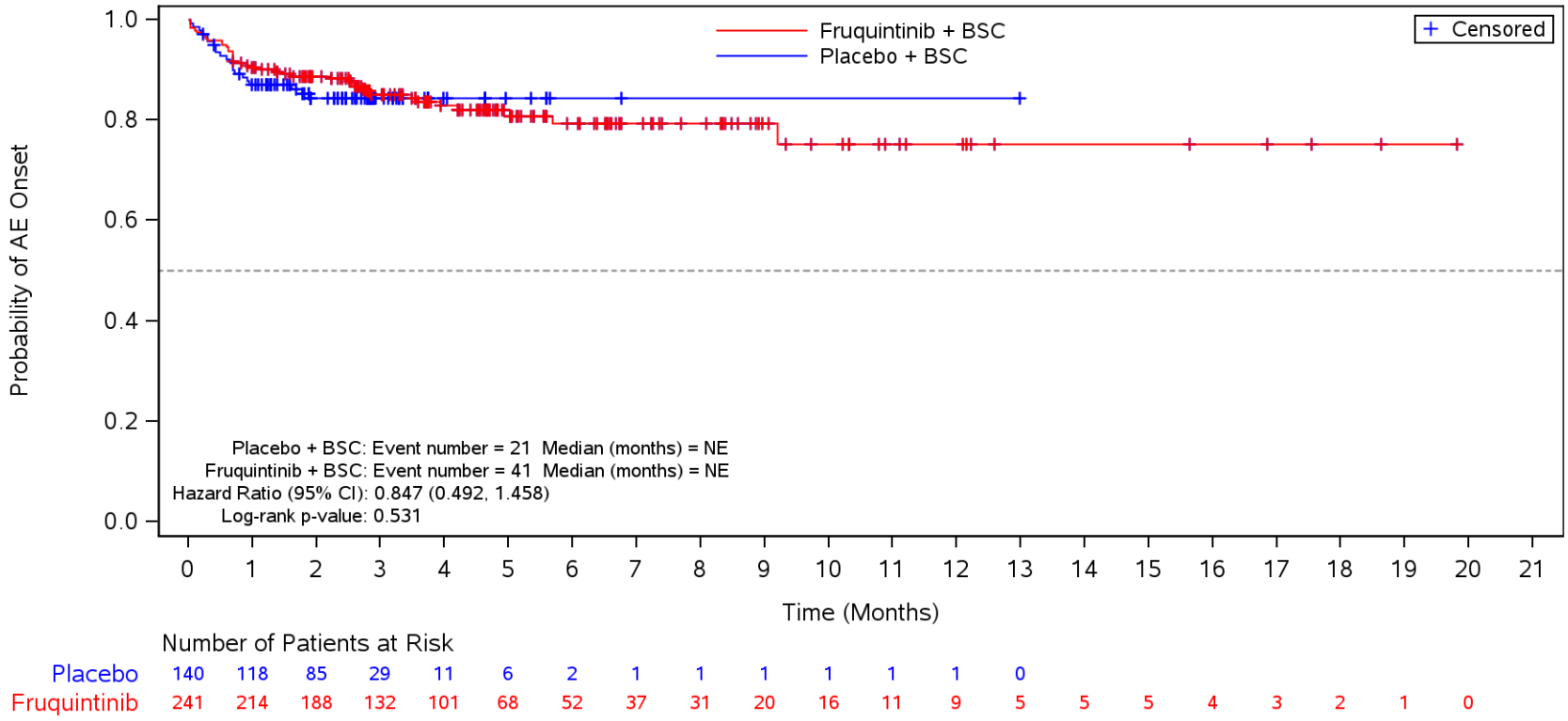
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
Male



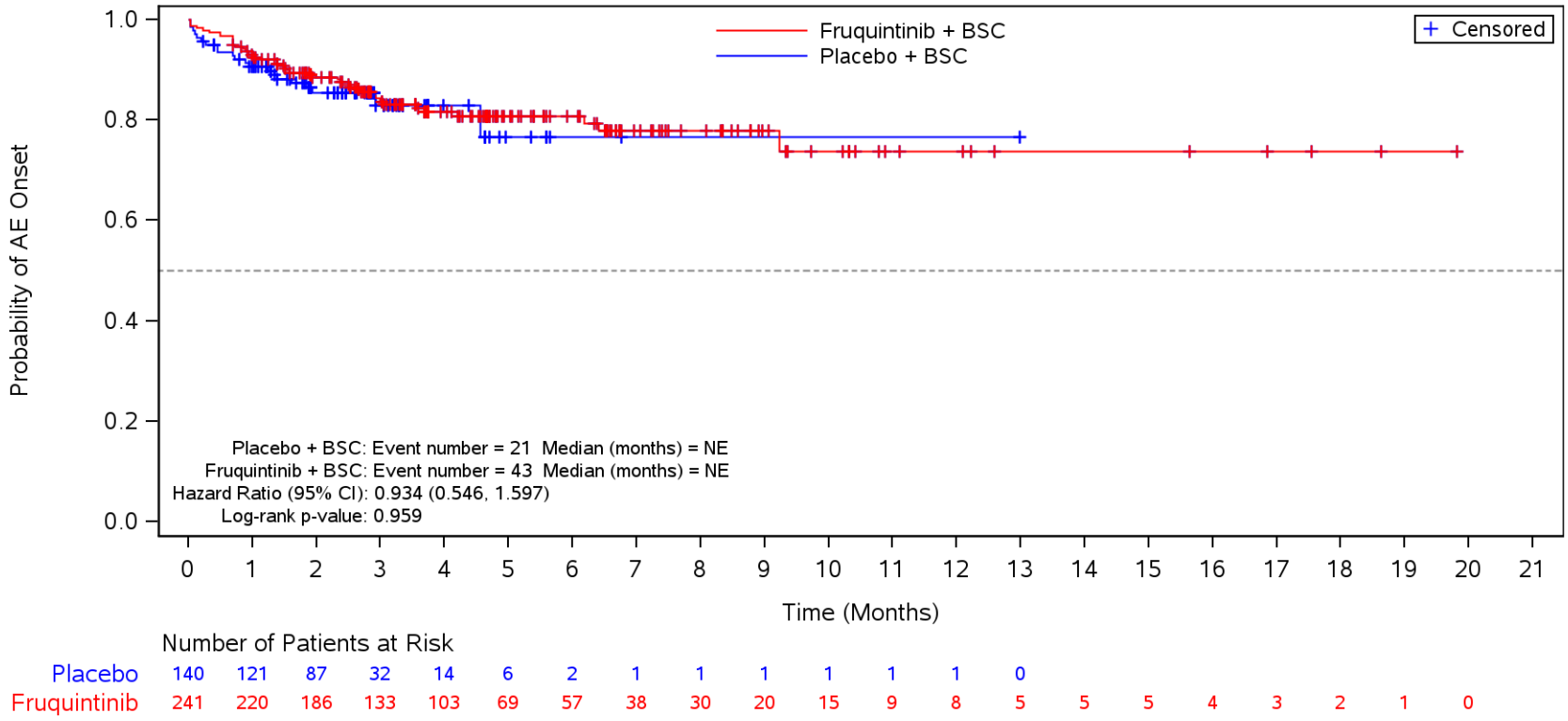
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
Male



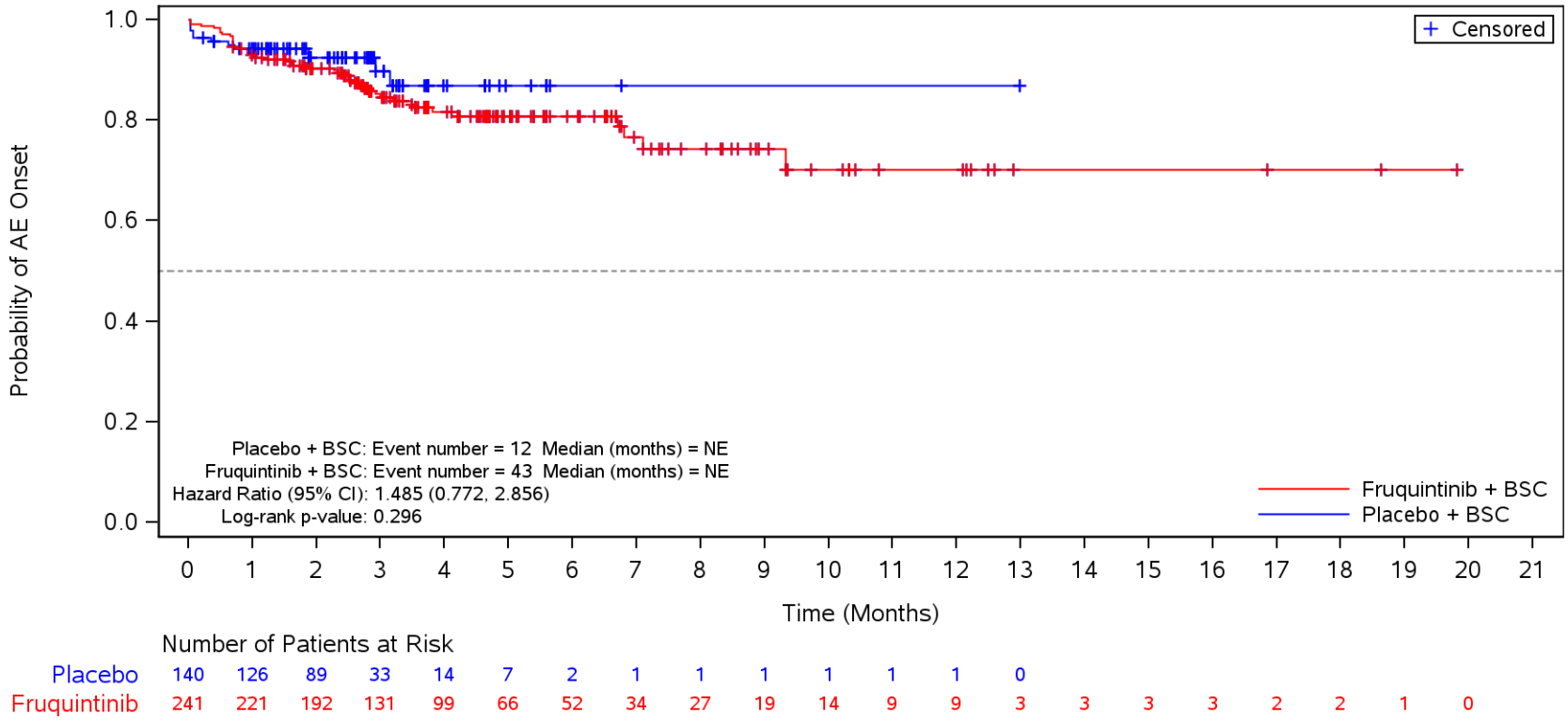
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
Male



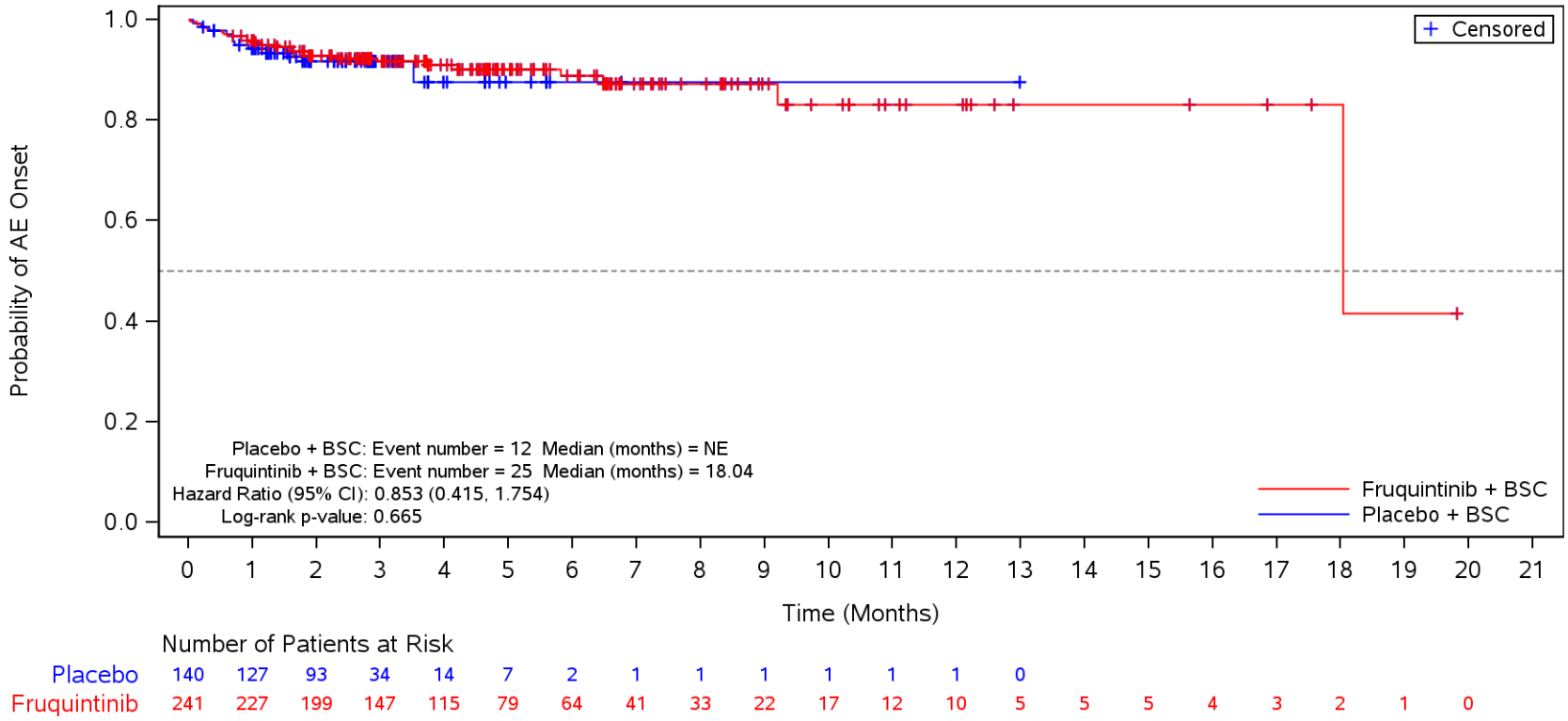
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
Male



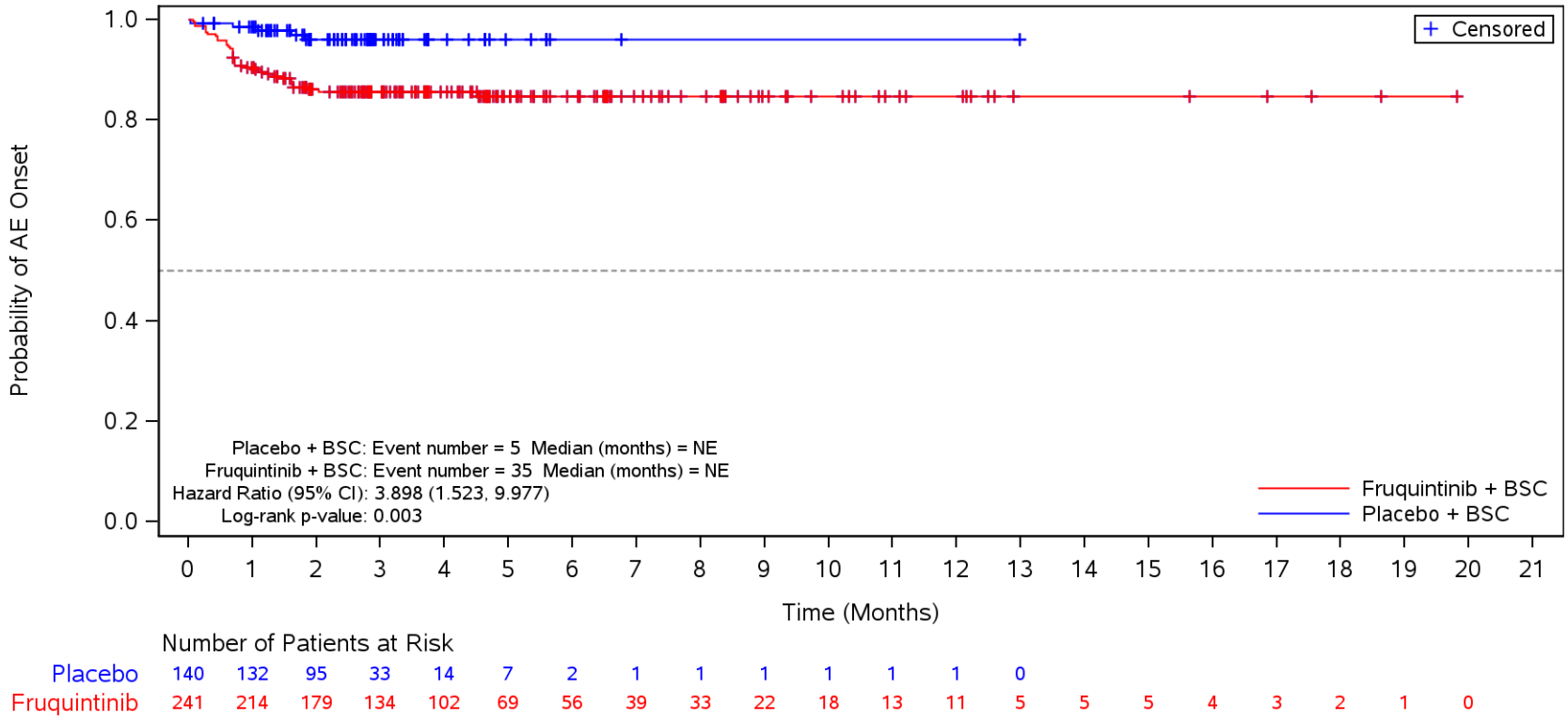
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
Male



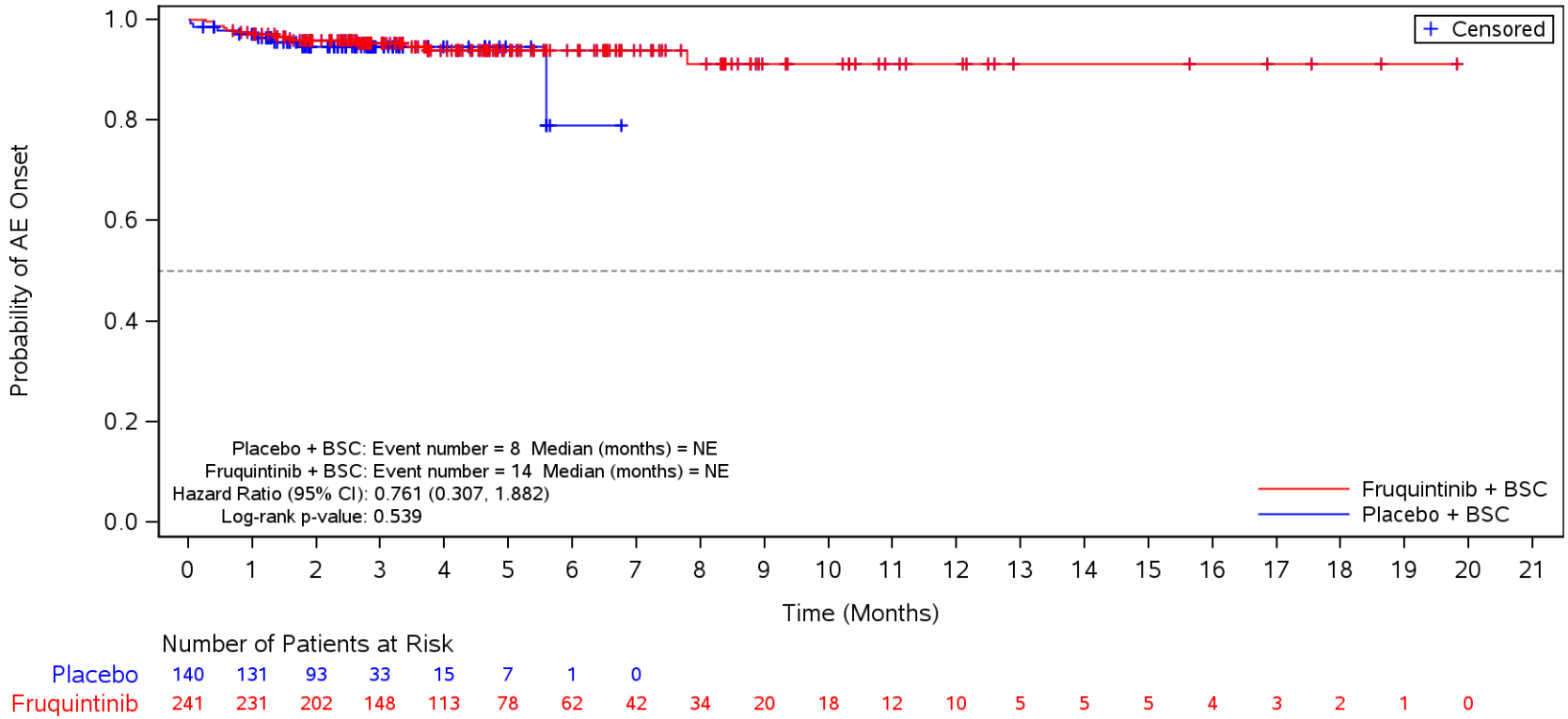
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
Male



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
Male

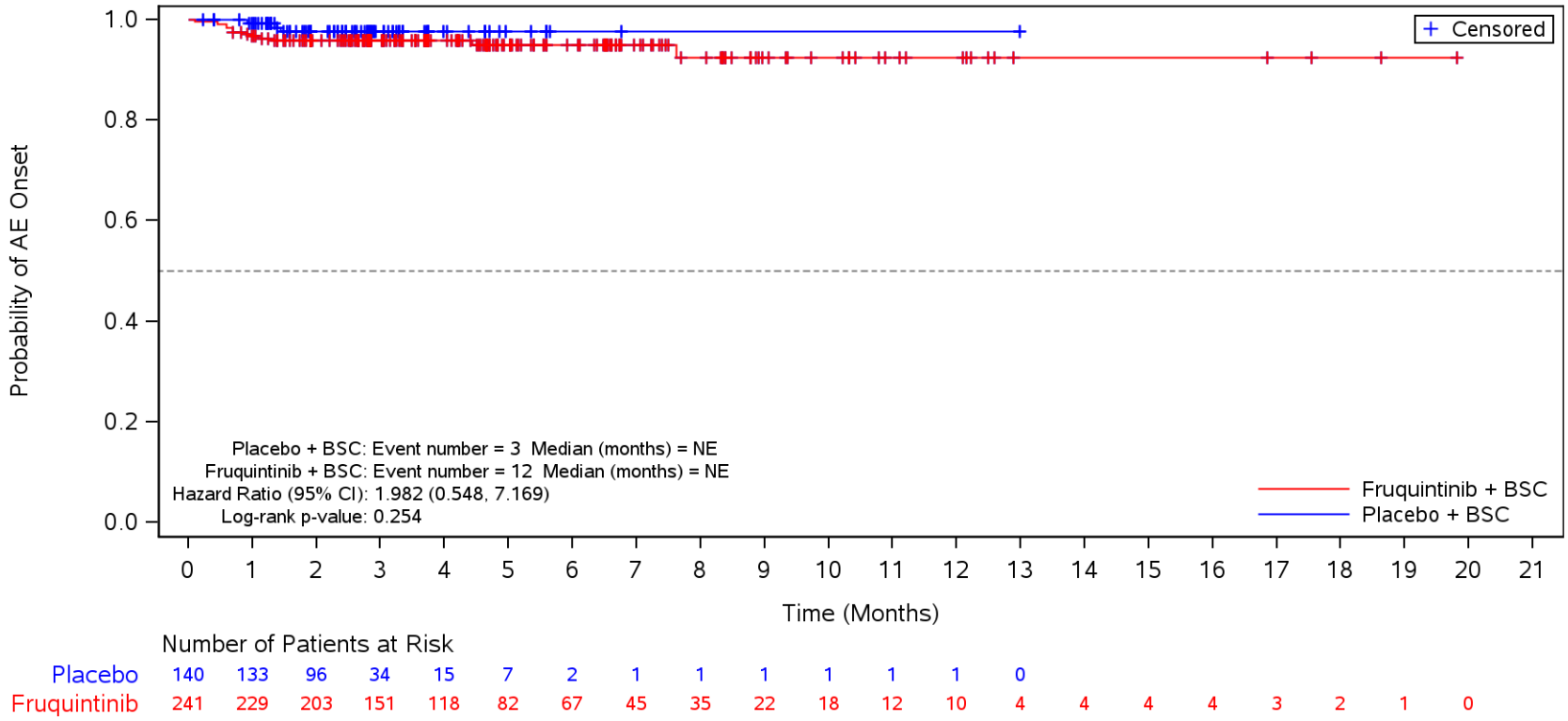


Number of Patients at Risk

Placebo	140	131	93	33	15	7	1	0													
Fruquintinib	241	231	202	148	113	78	62	42	34	20	18	12	10	5	5	5	4	3	2	1	0

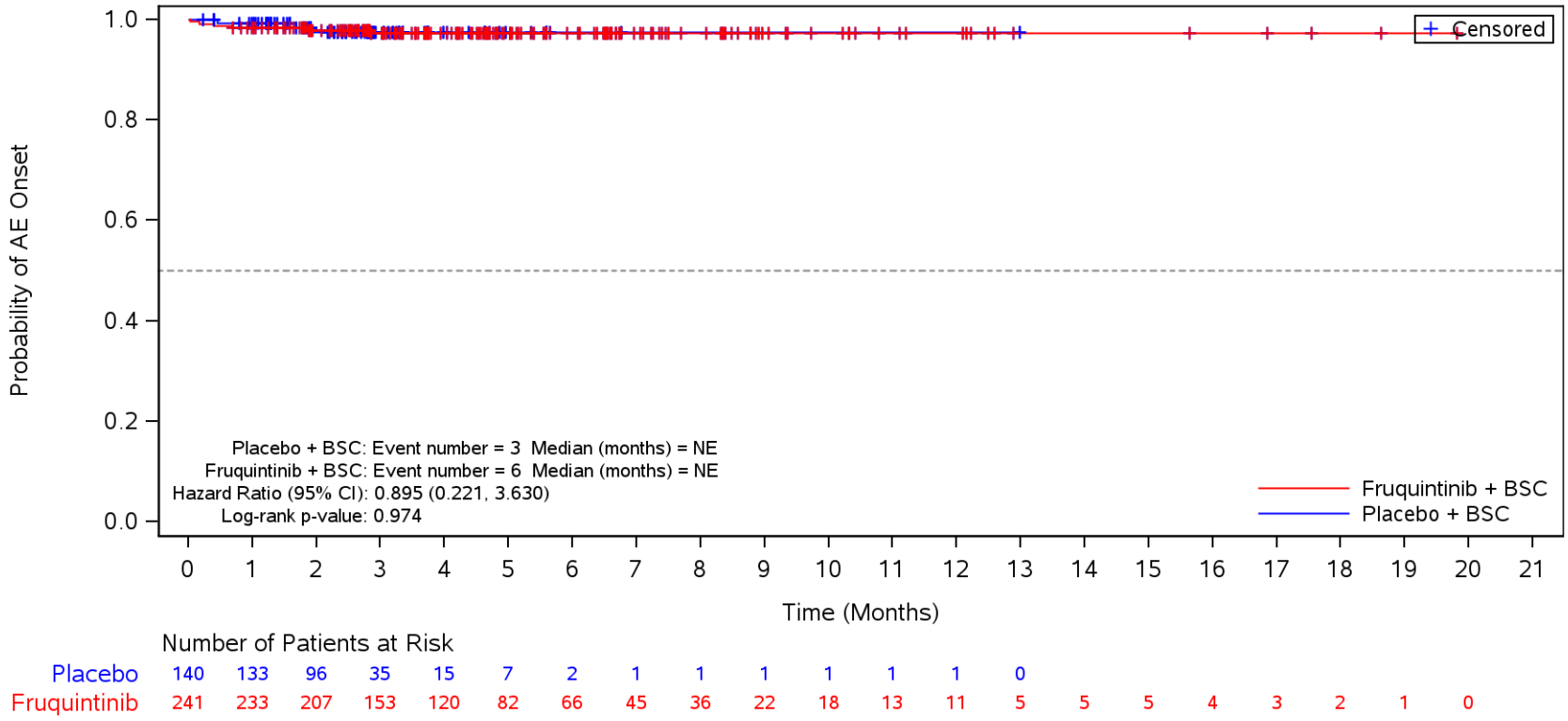
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
Male



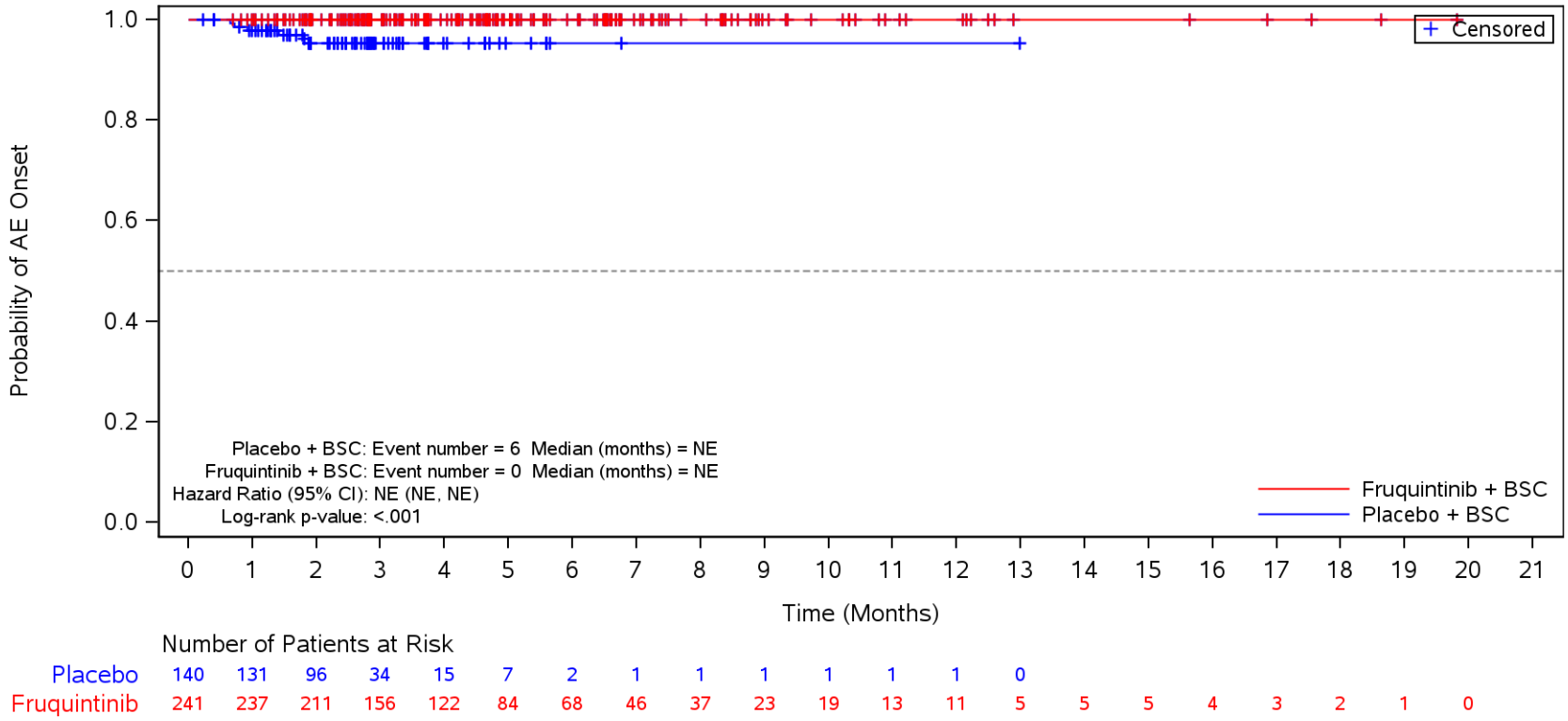
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
Male



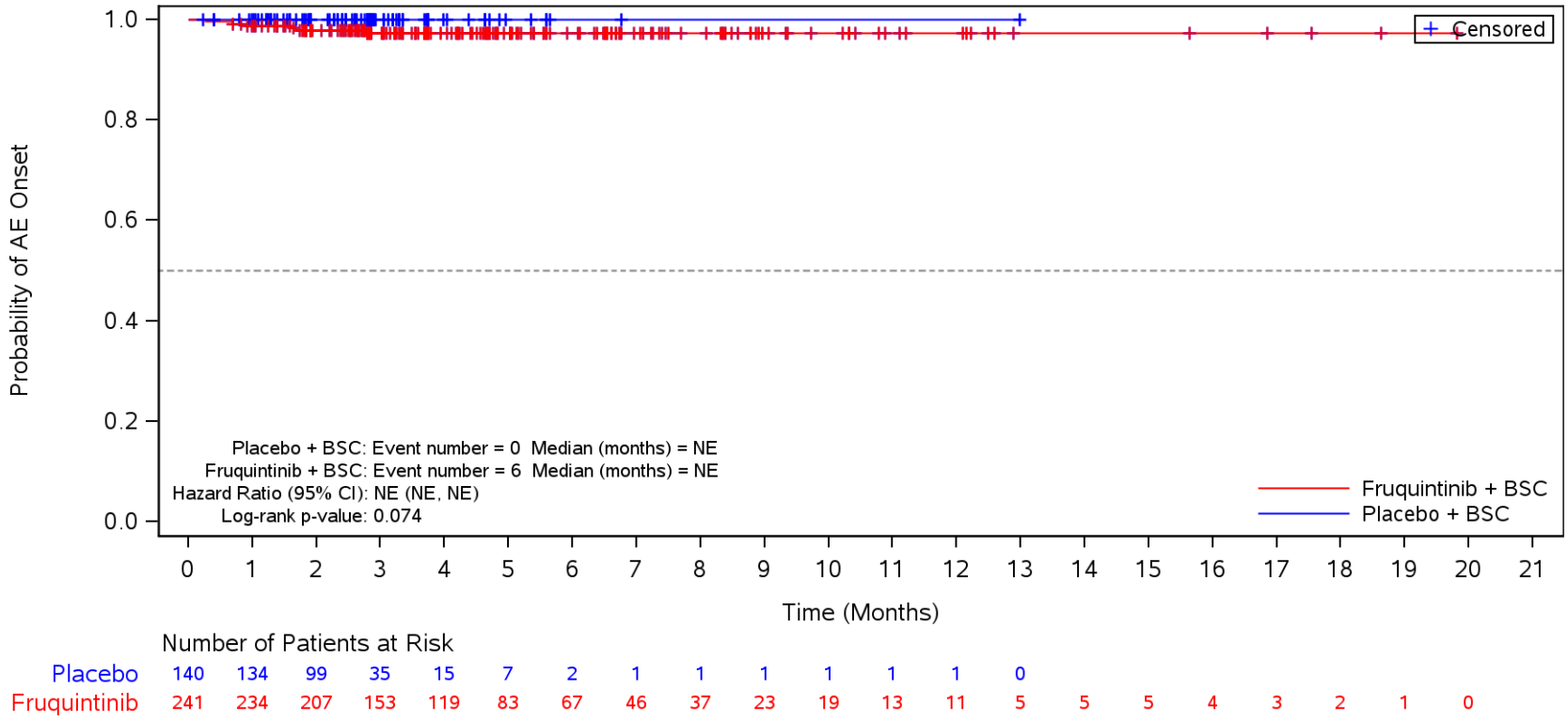
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
Male



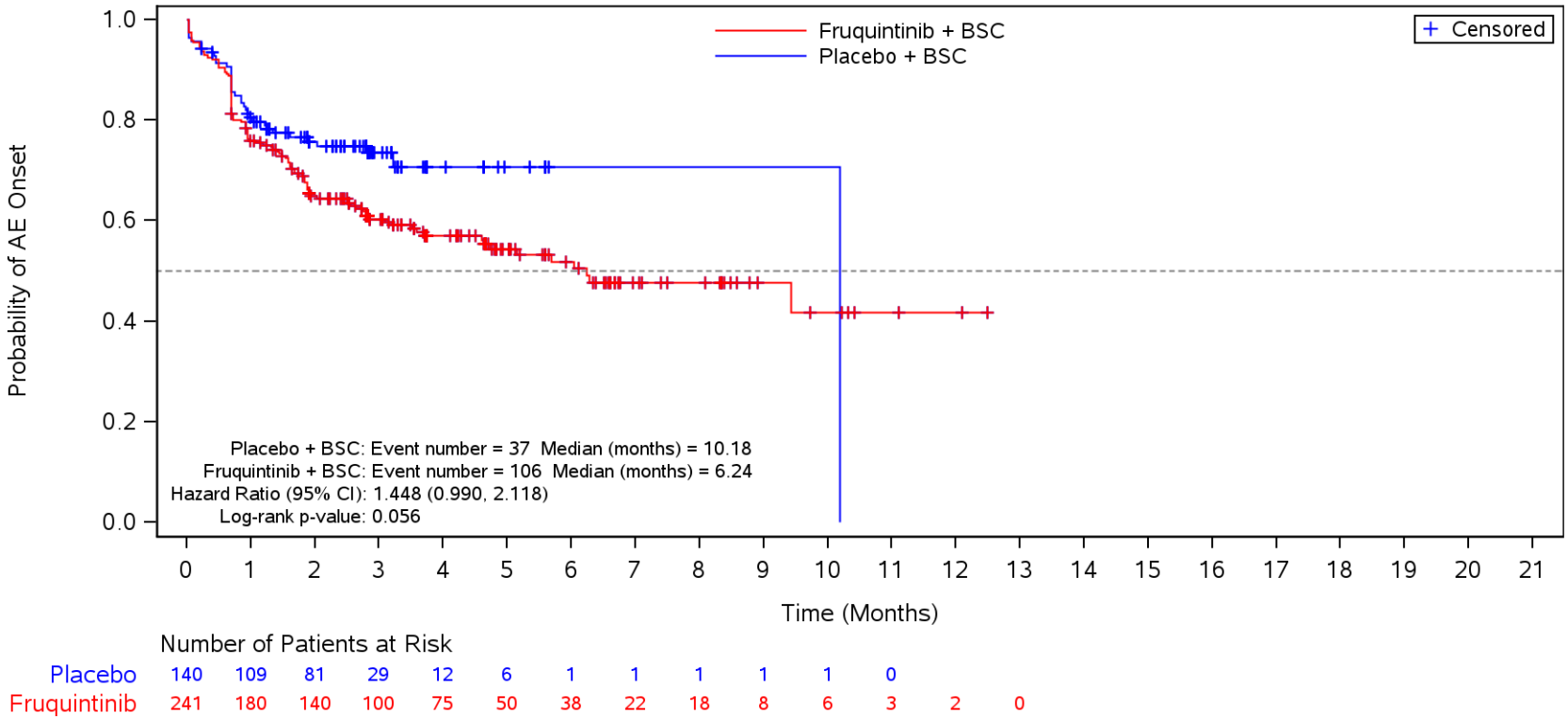
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**
Male



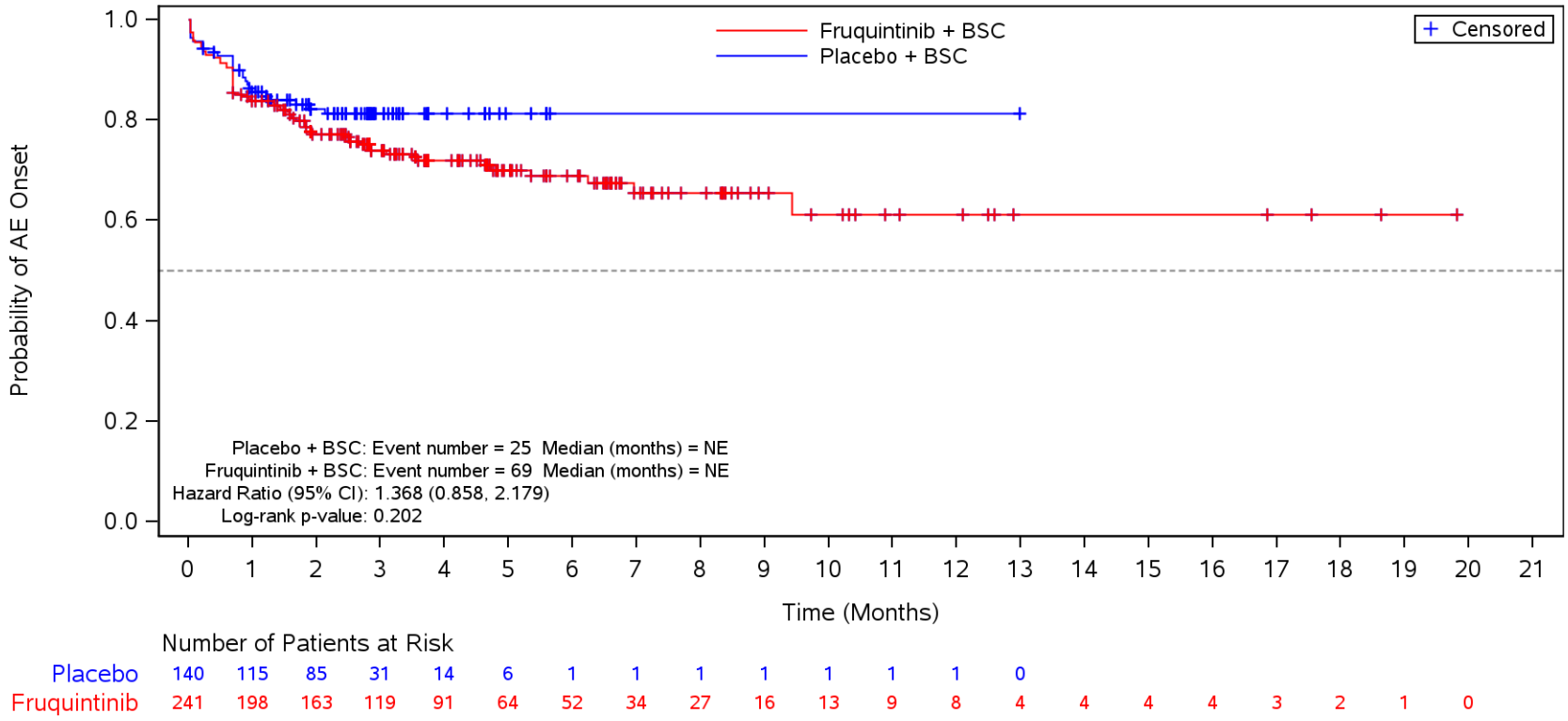
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
Male



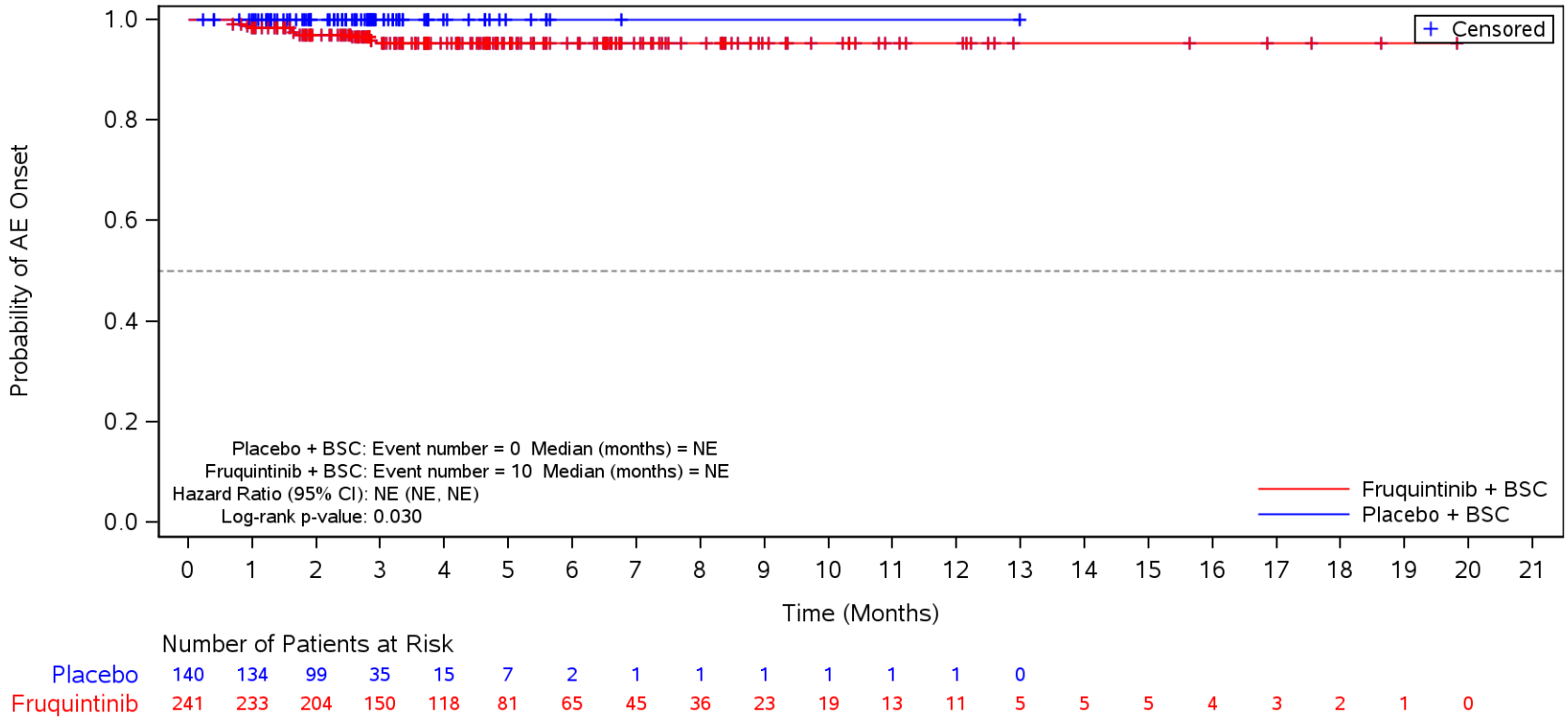
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
Male



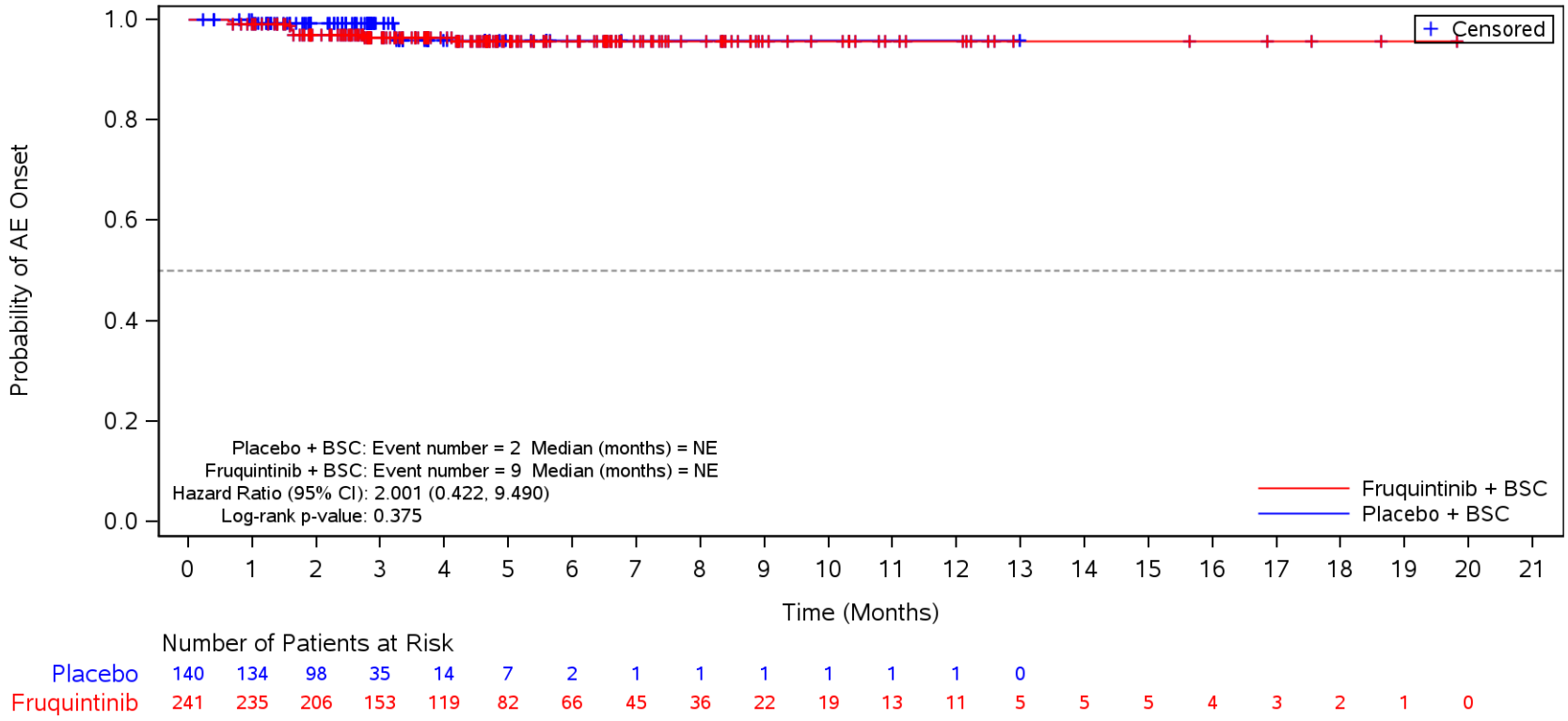
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
Male



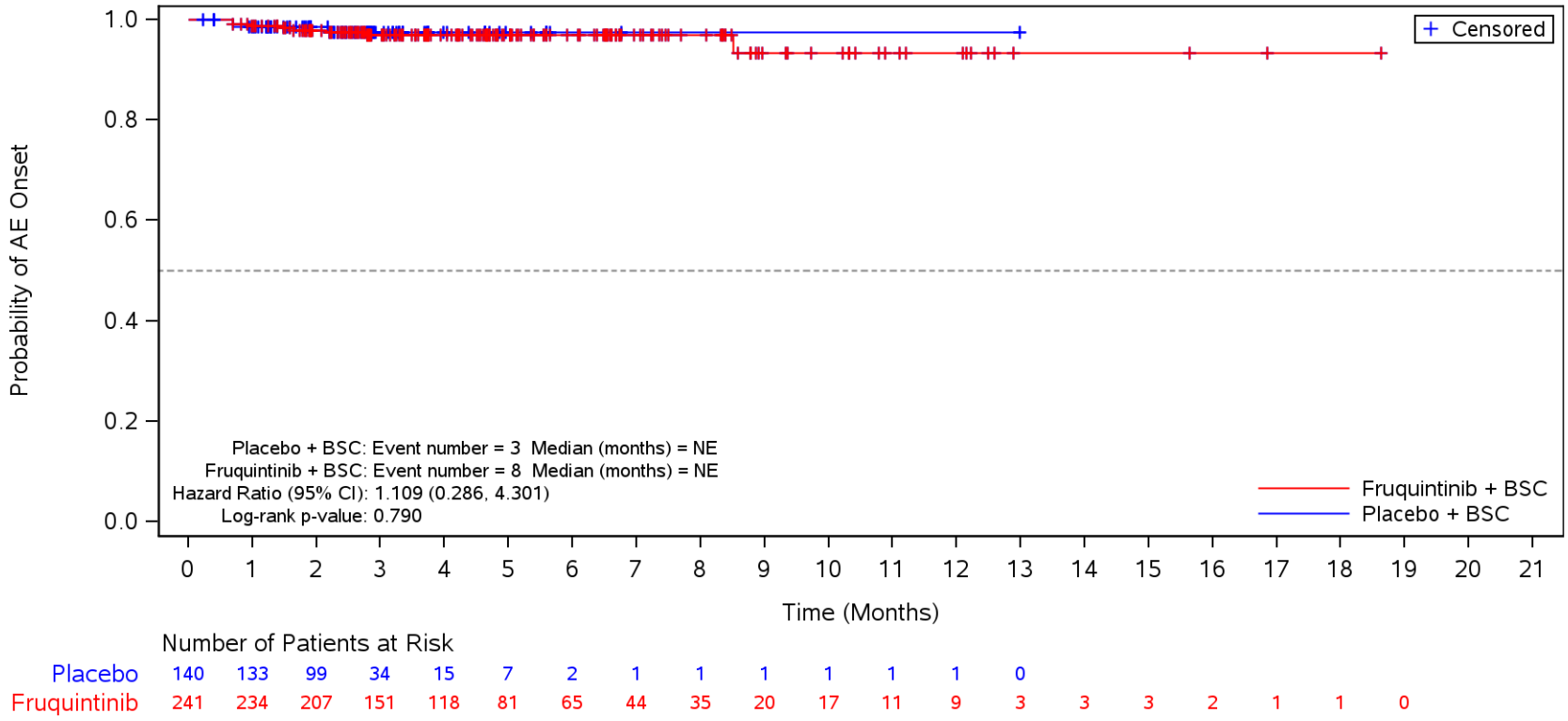
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
Male



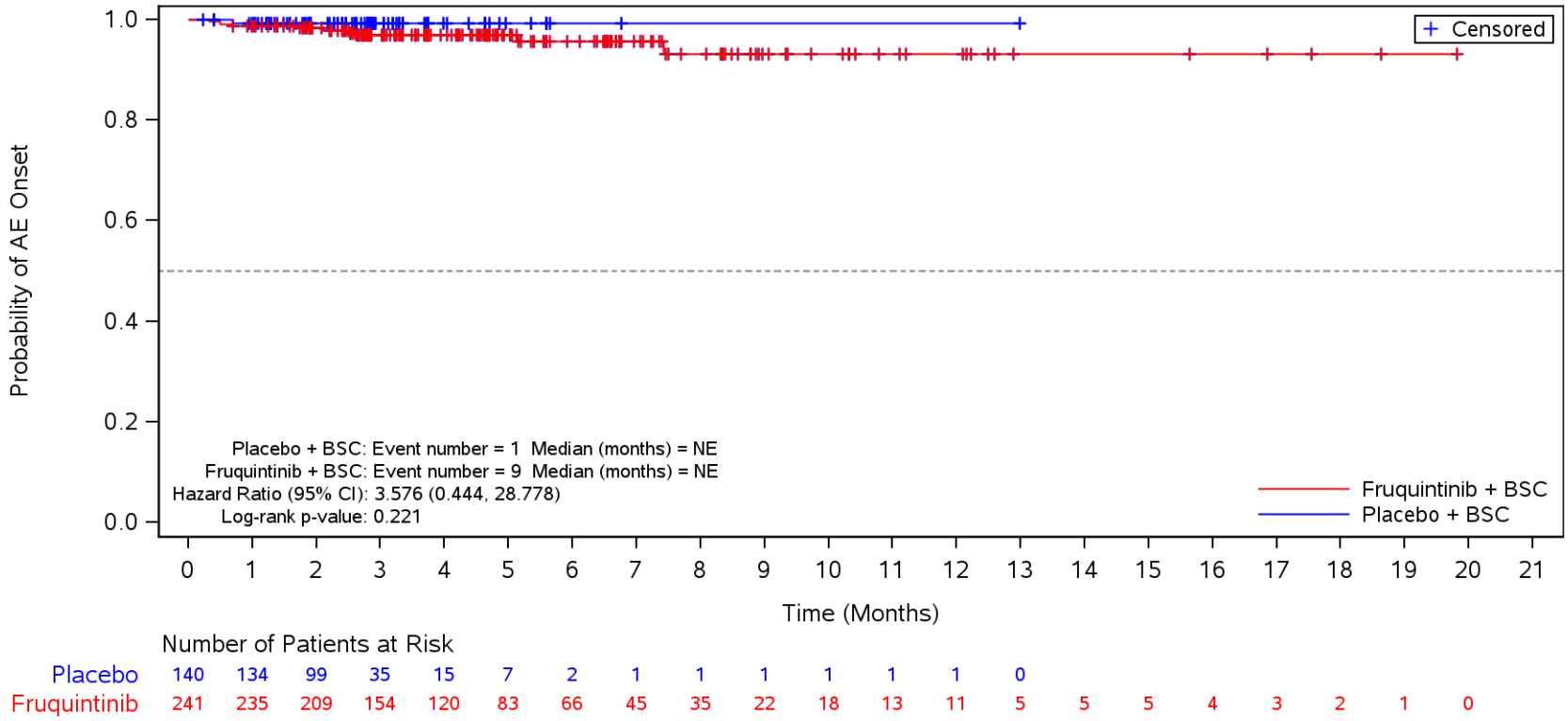
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
Male



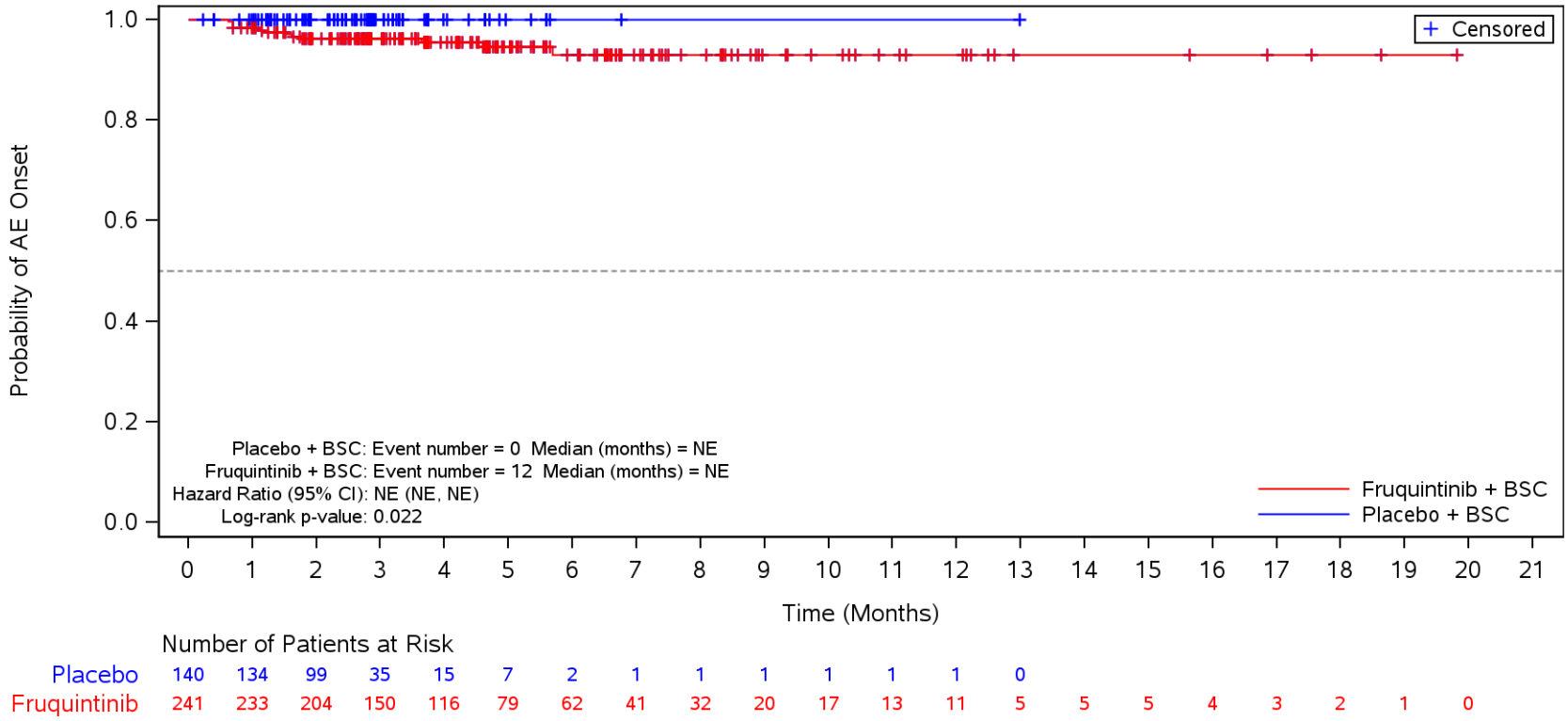
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
Male



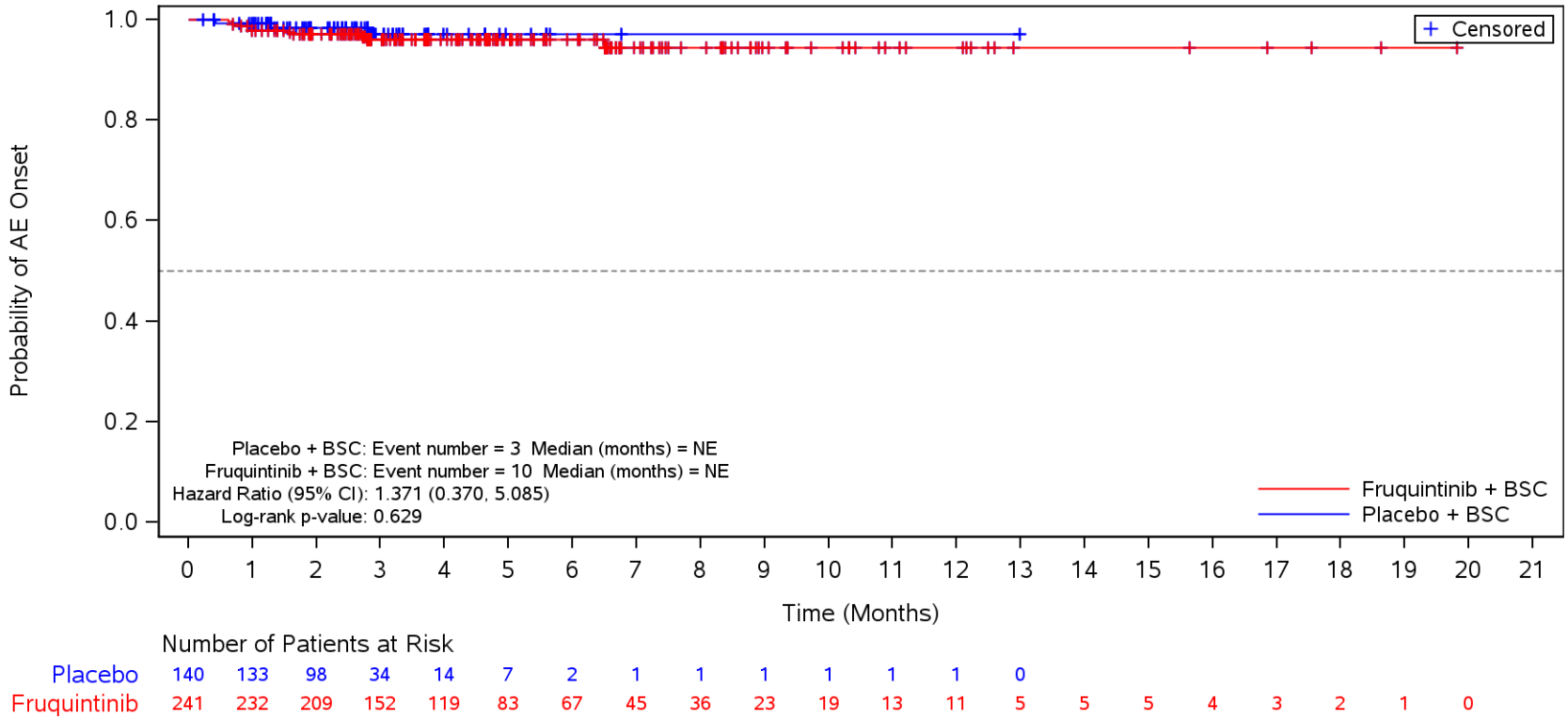
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
Male



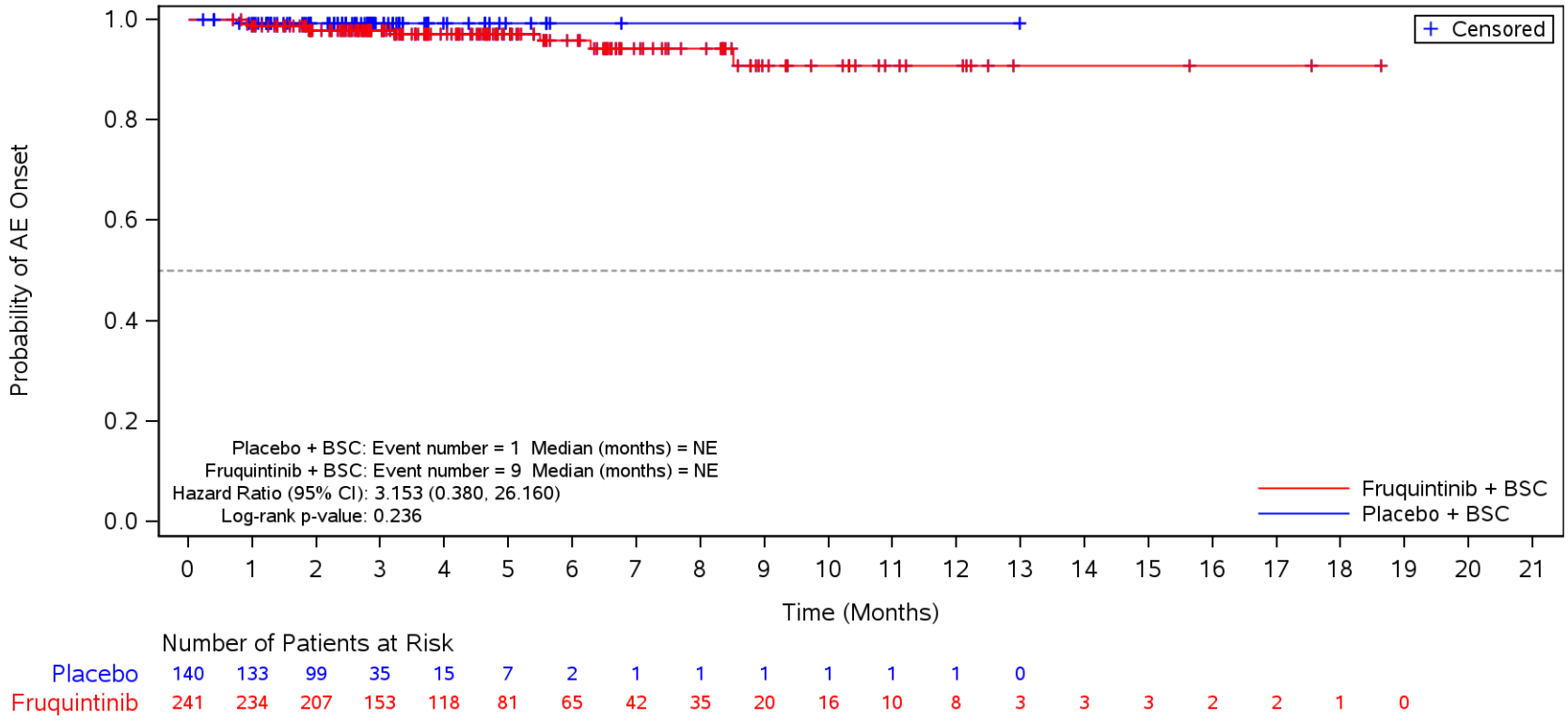
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
Male



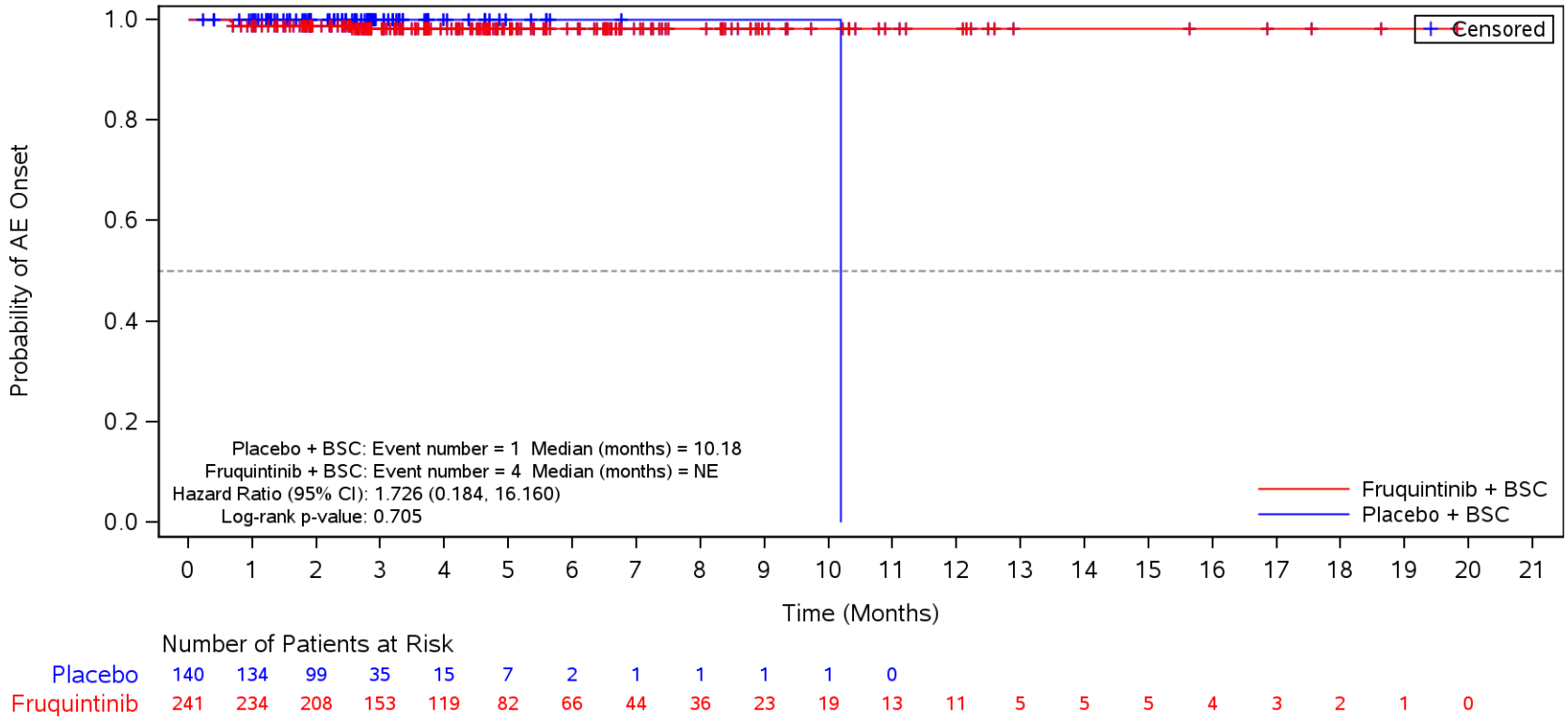
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**
Male



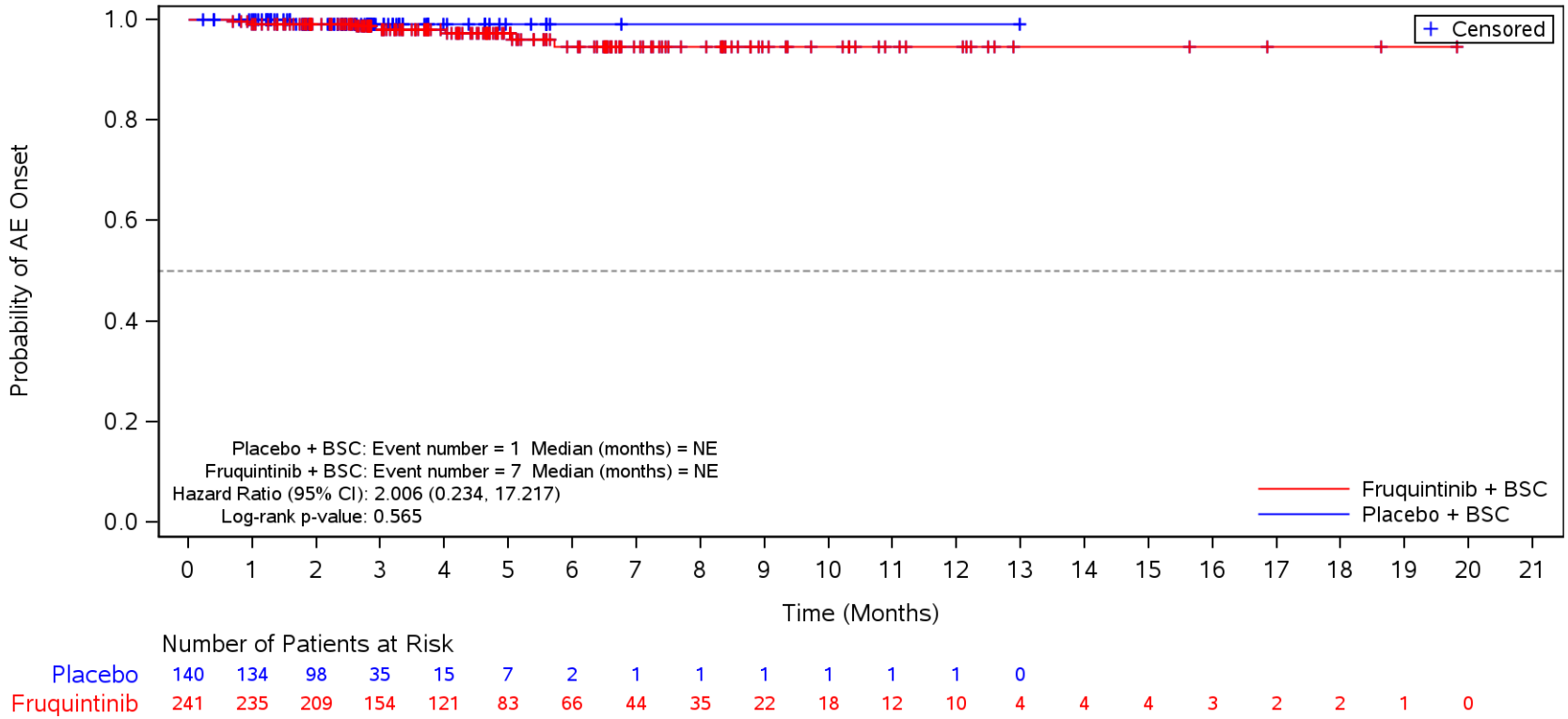
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
Male



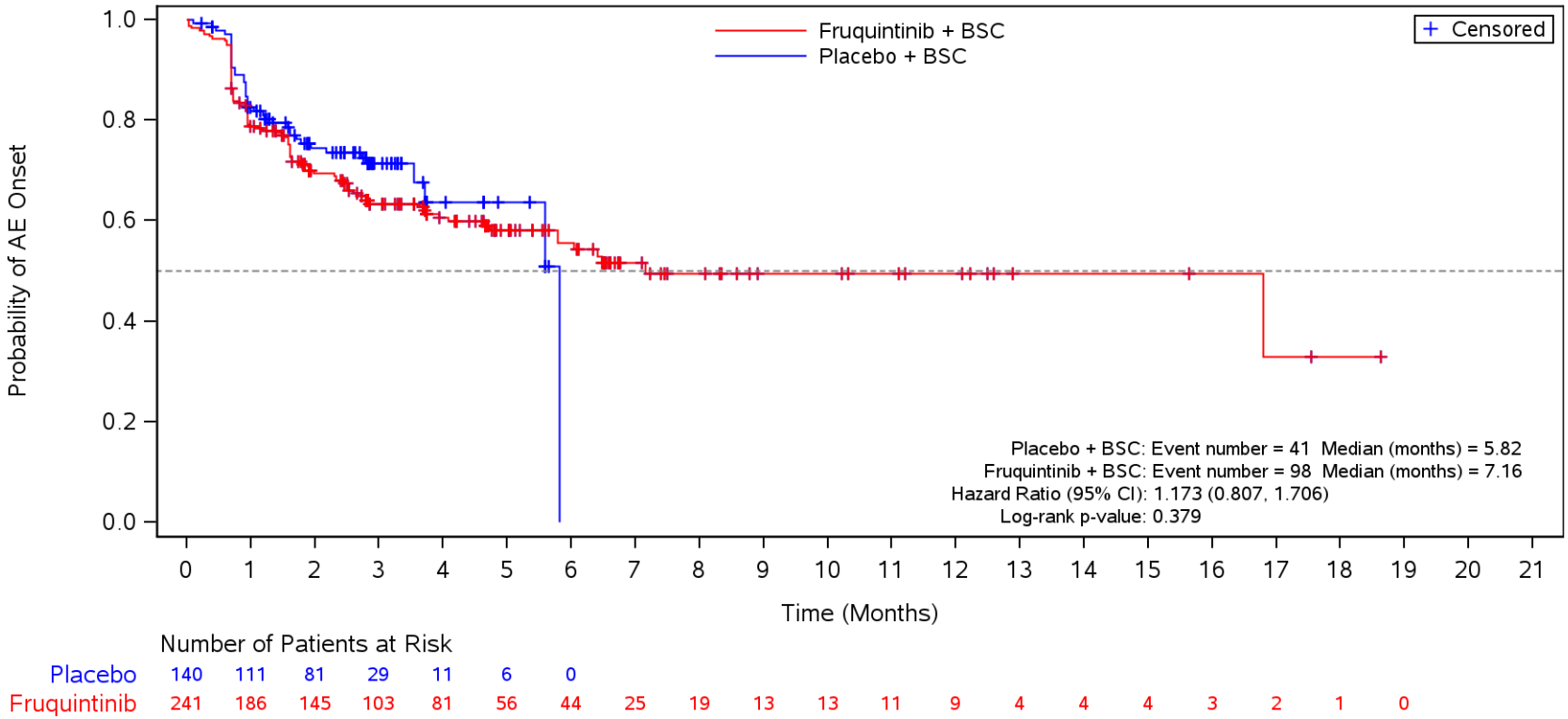
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
Male



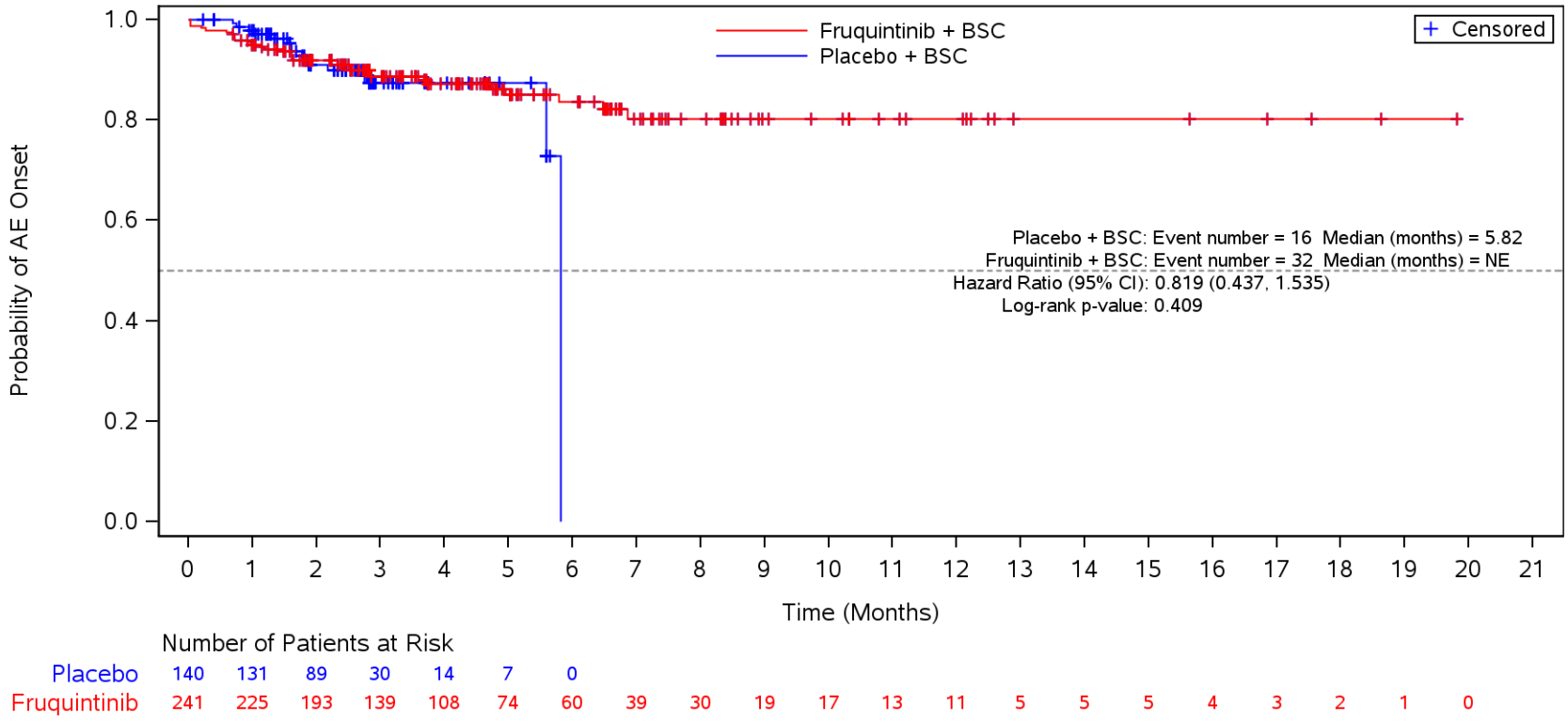
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations**
Male



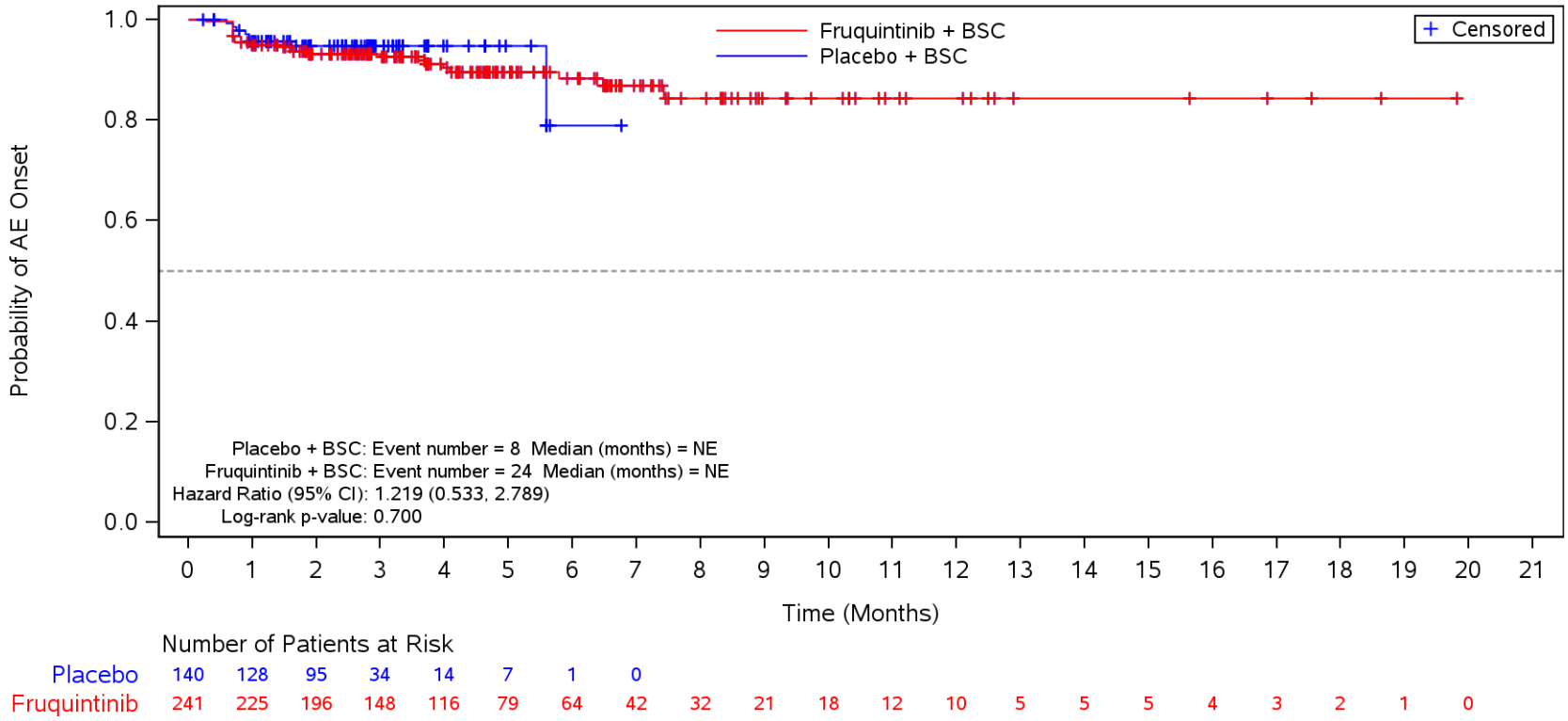
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
Male



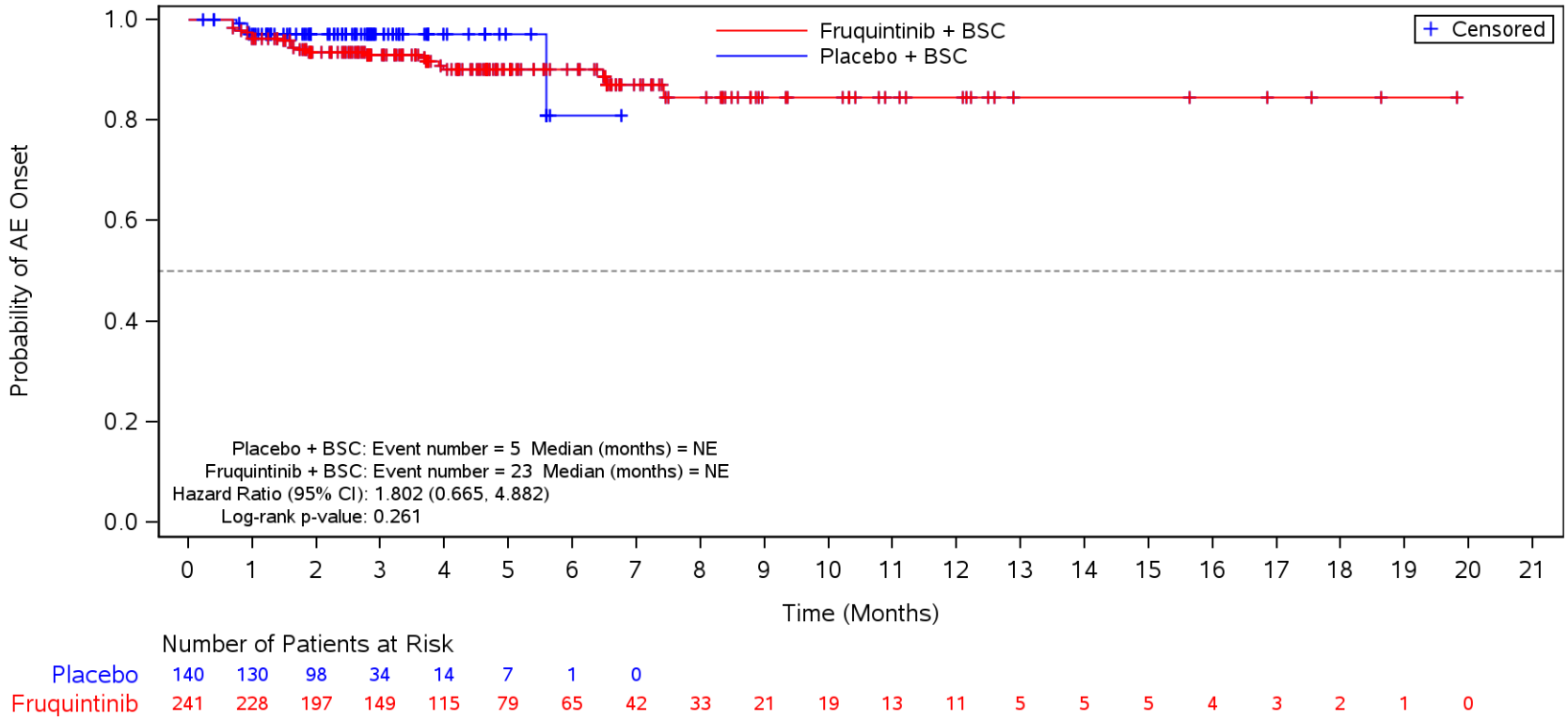
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
Male



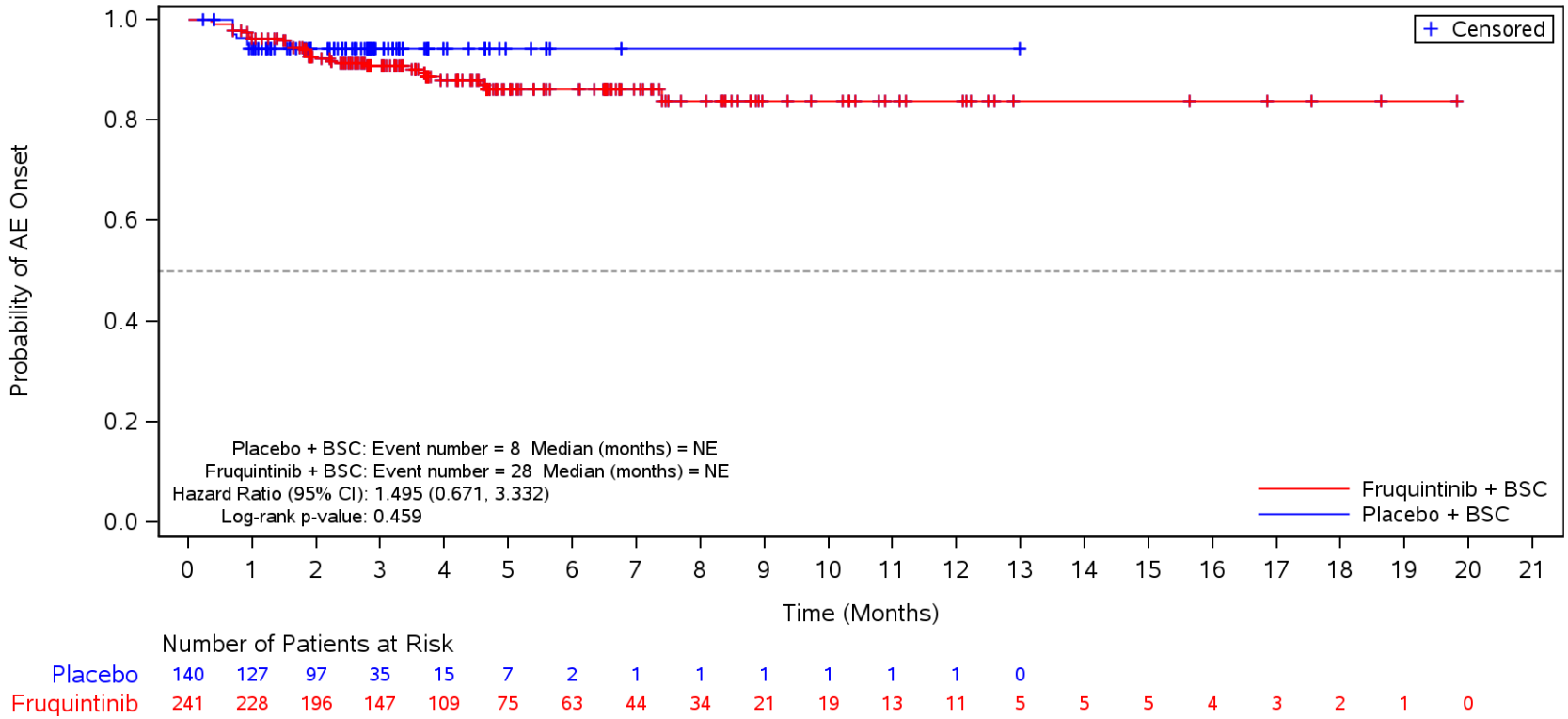
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
Male



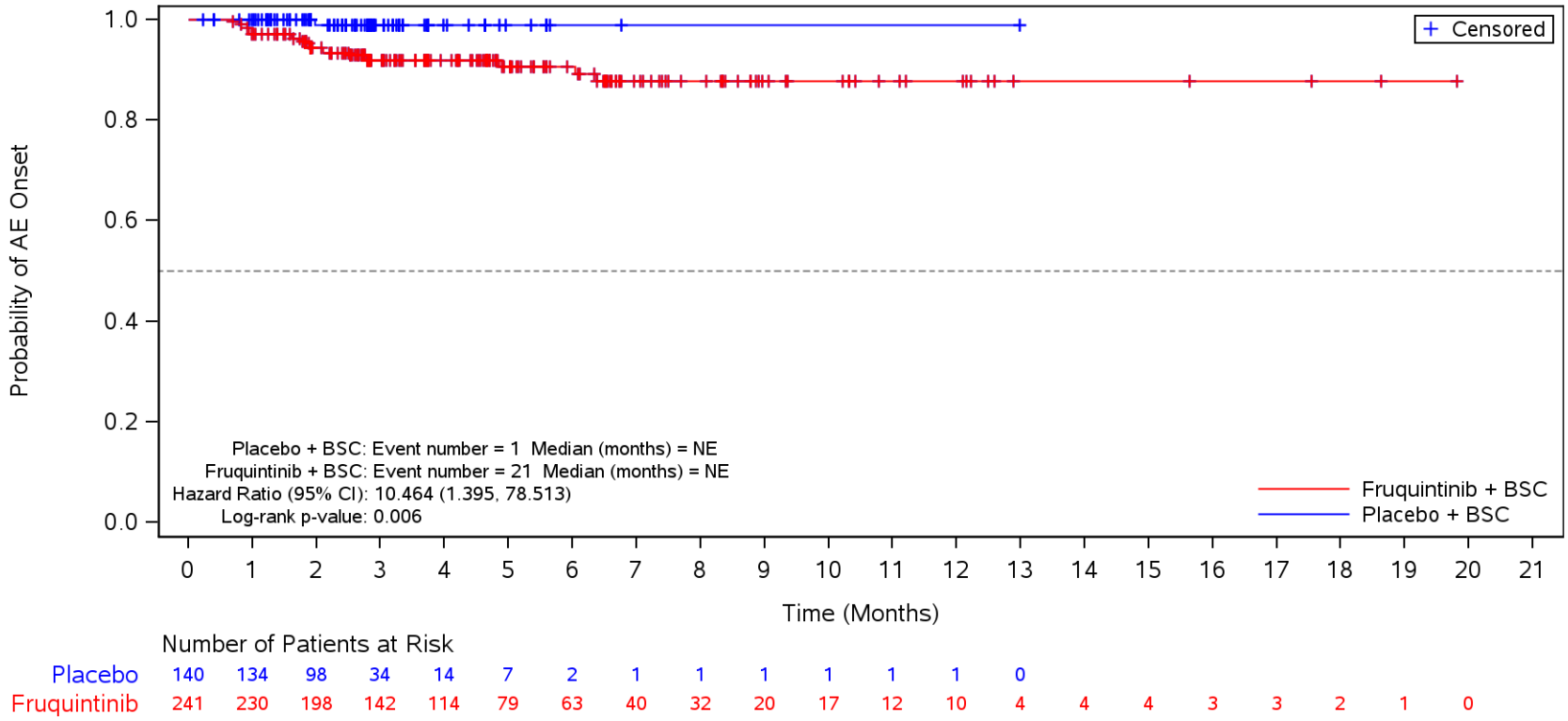
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
Male



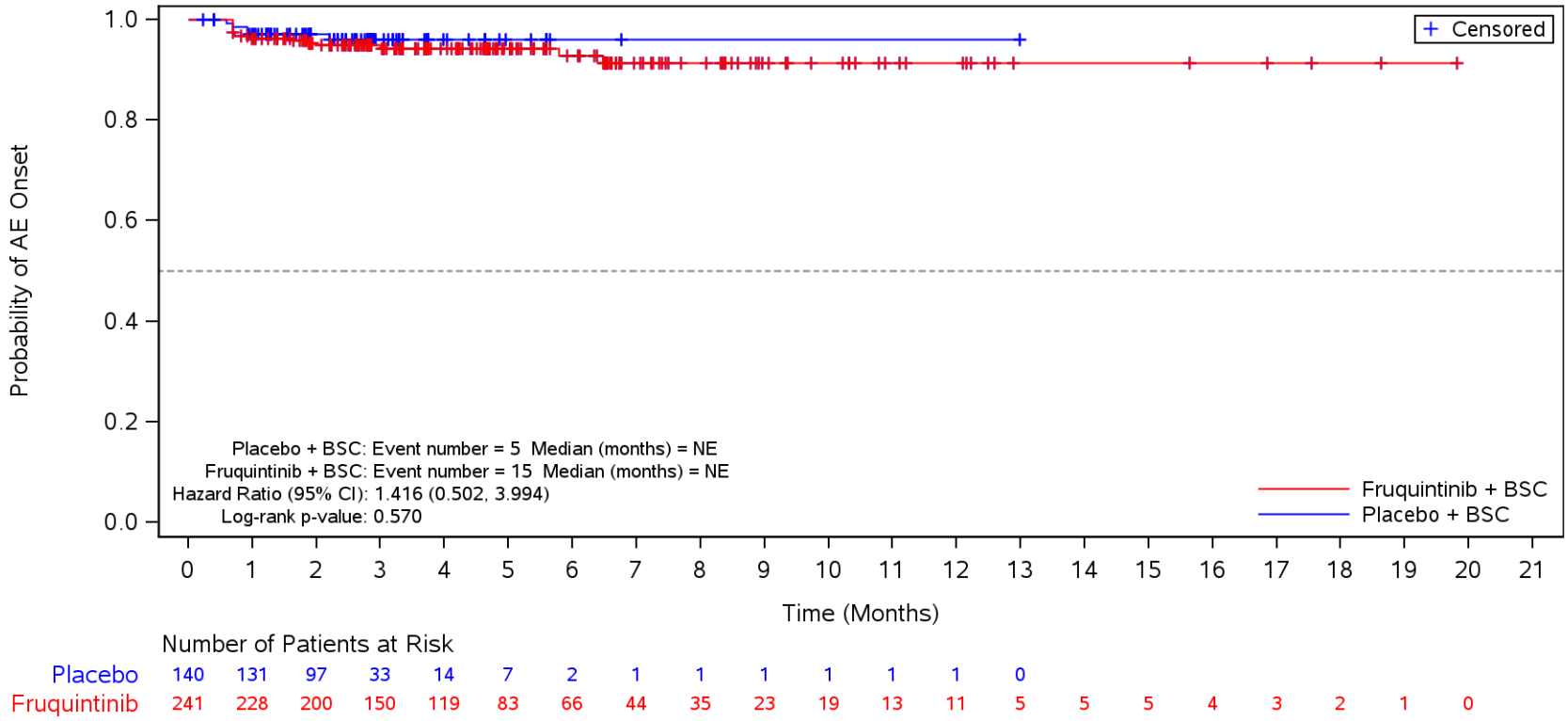
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
Male



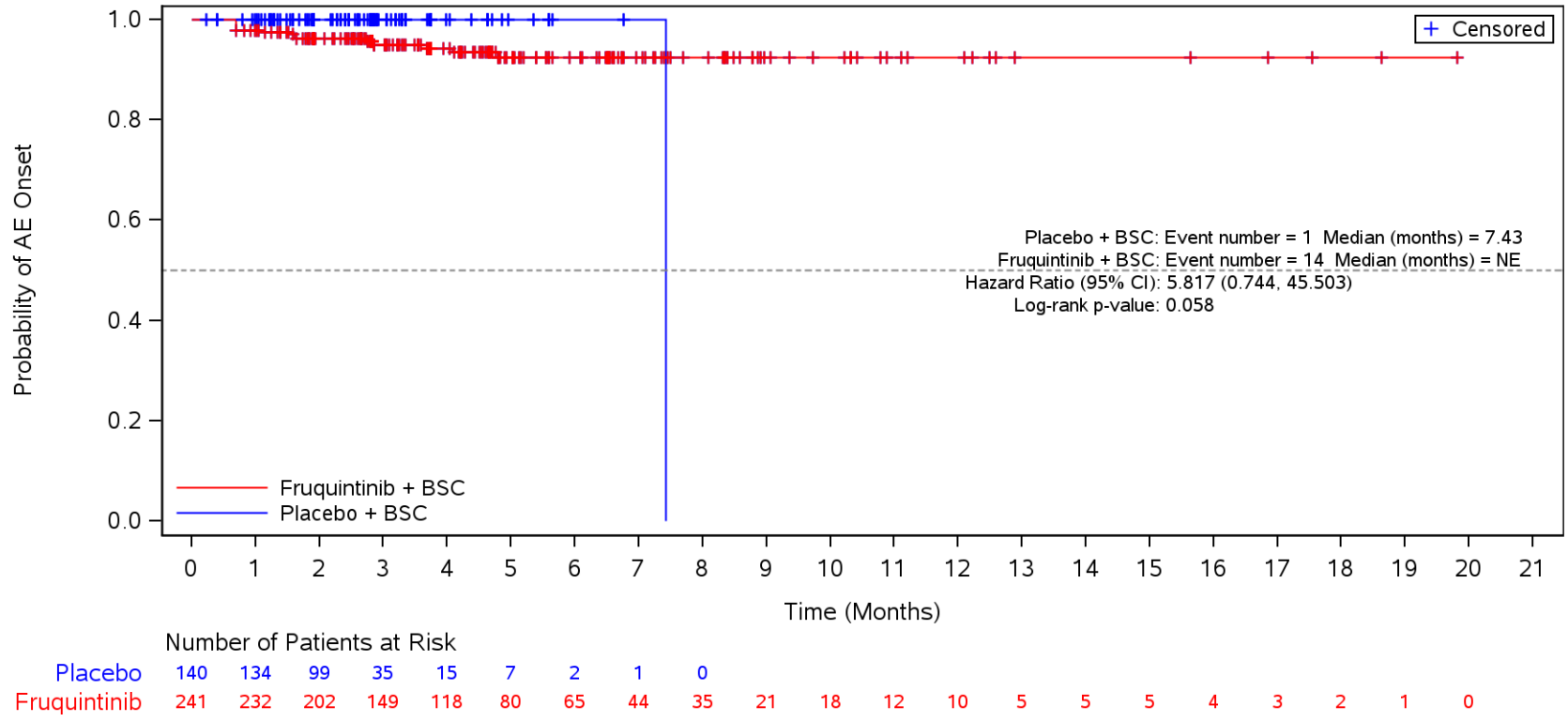
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
Male



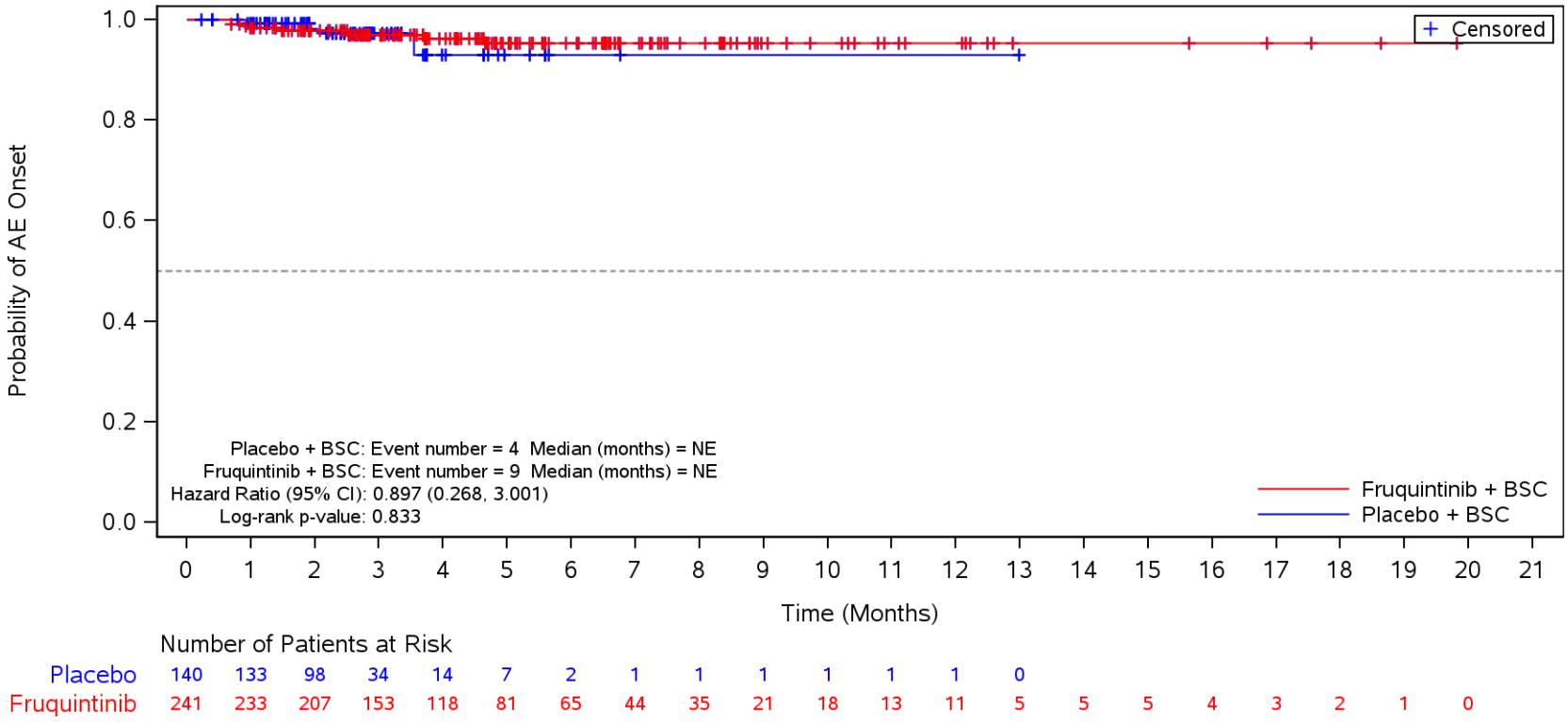
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
Male



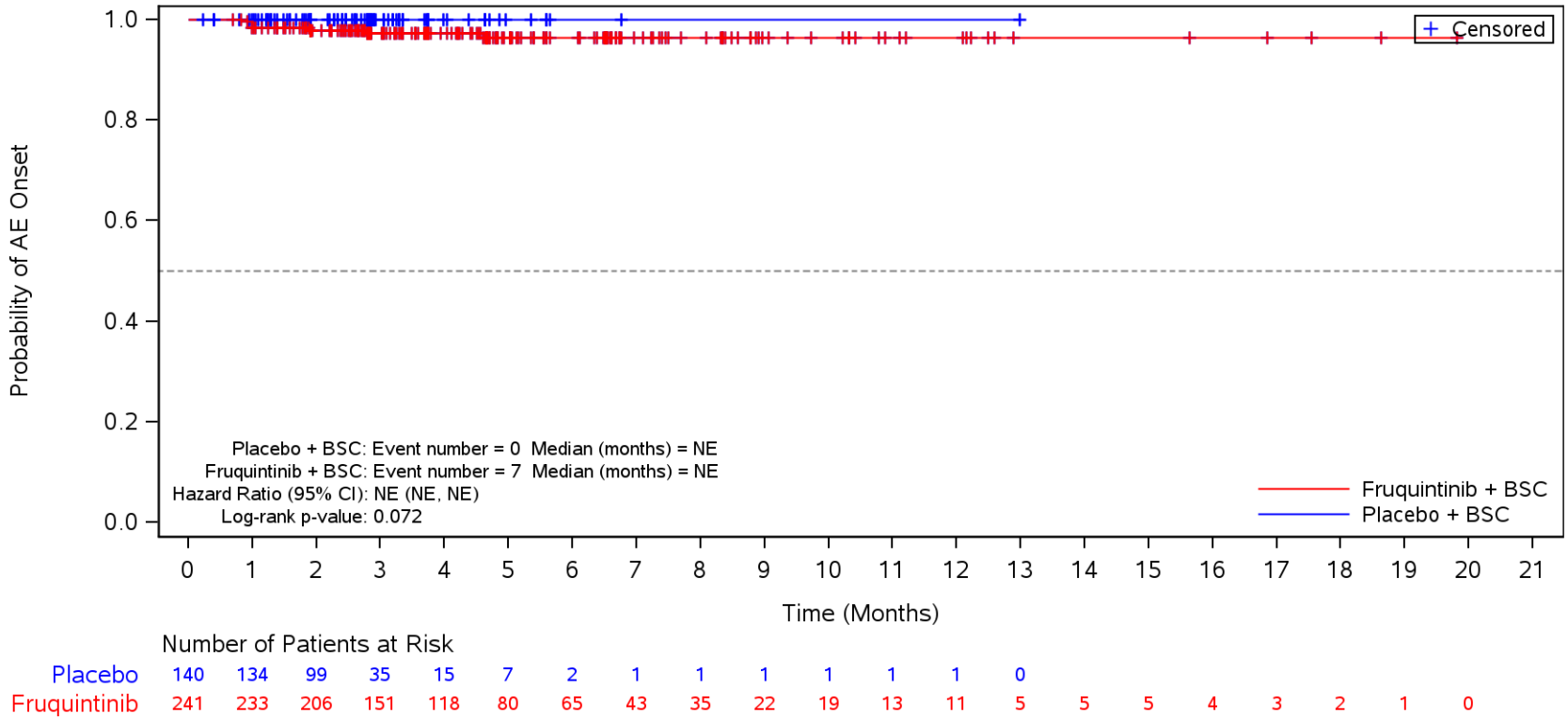
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
Male



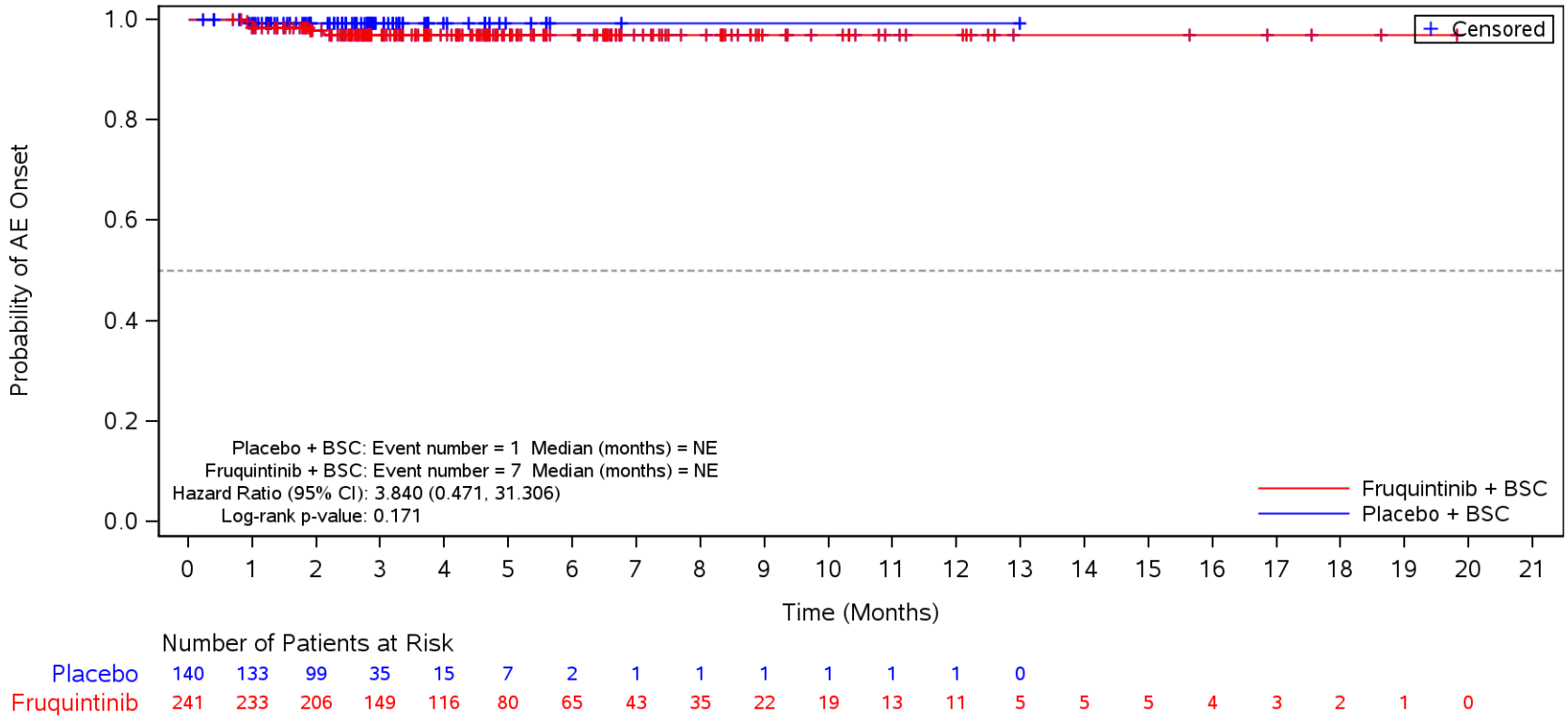
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
Male



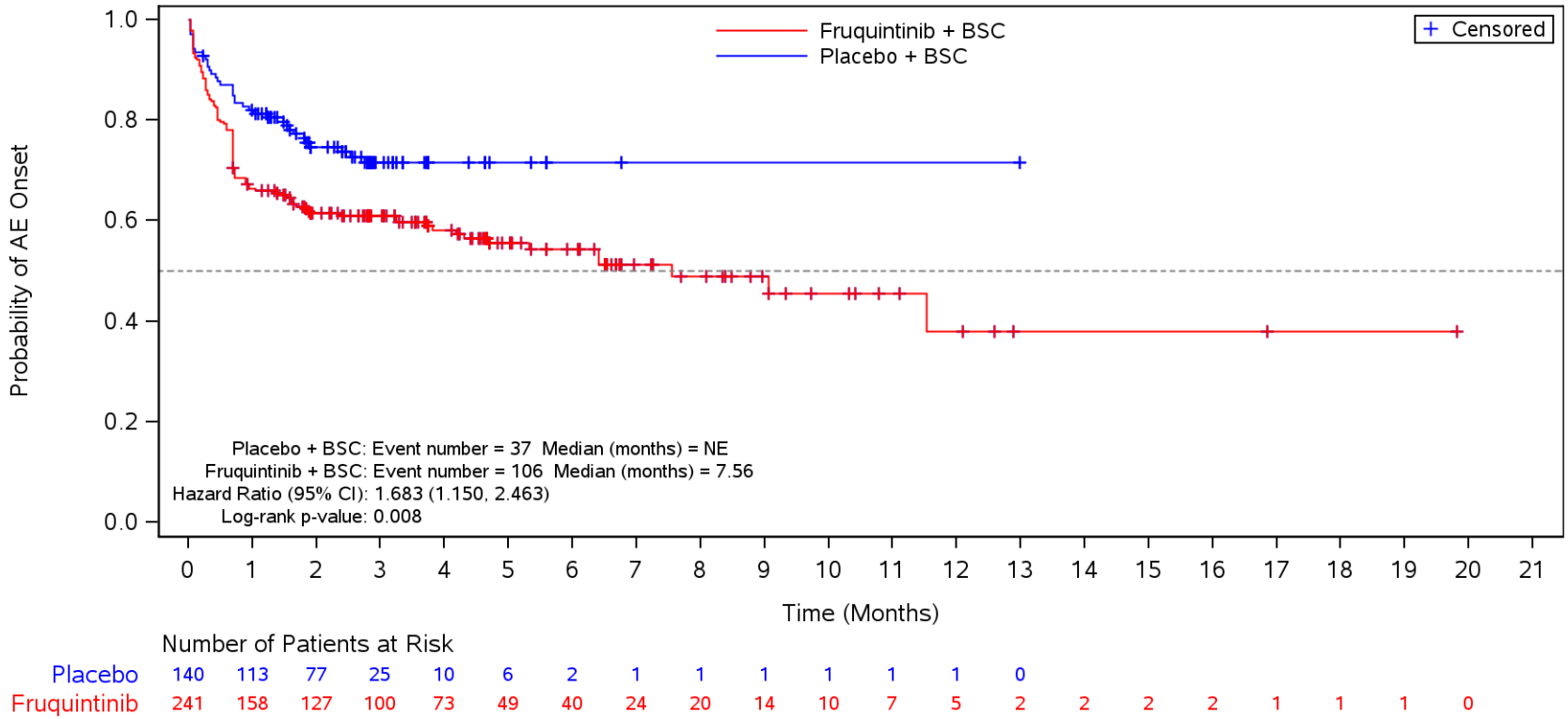
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
Male



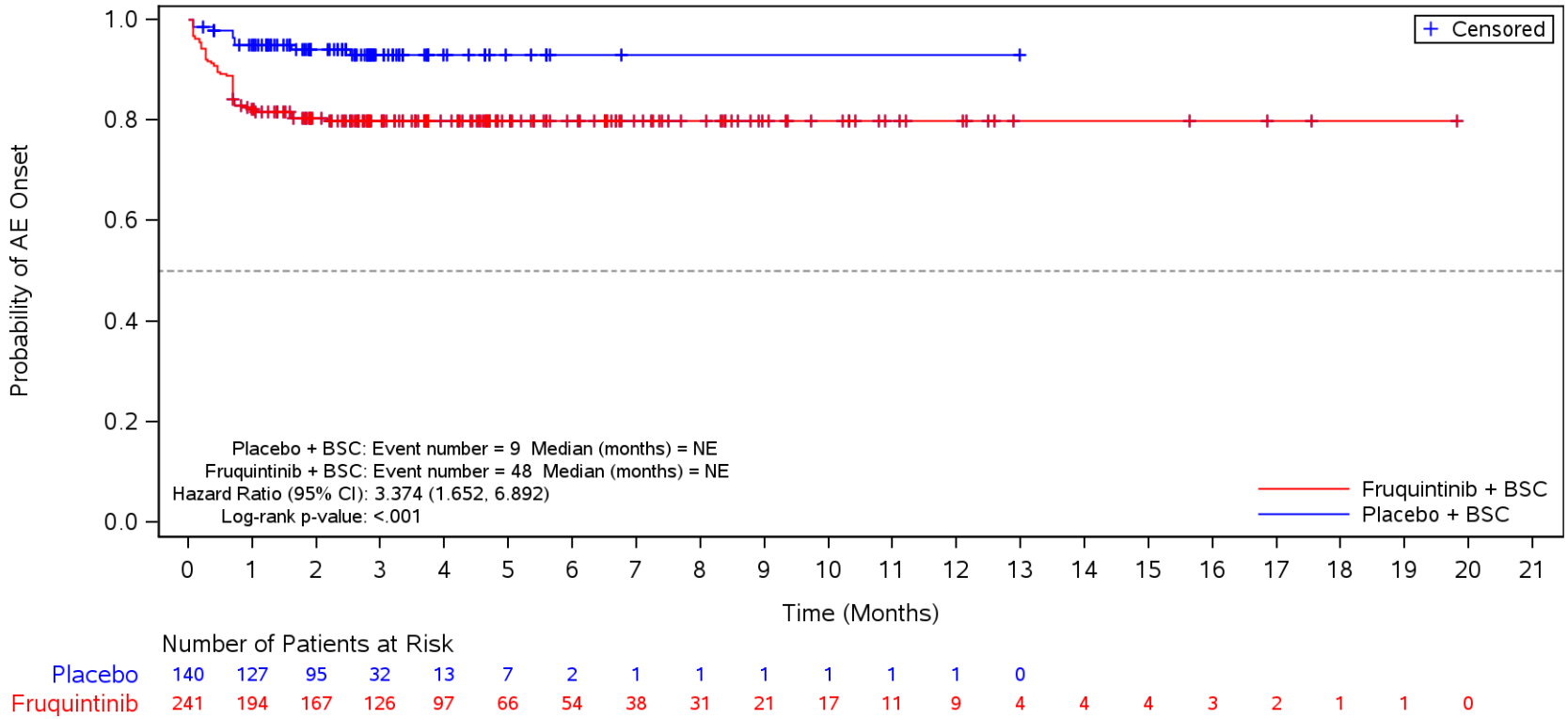
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
Male



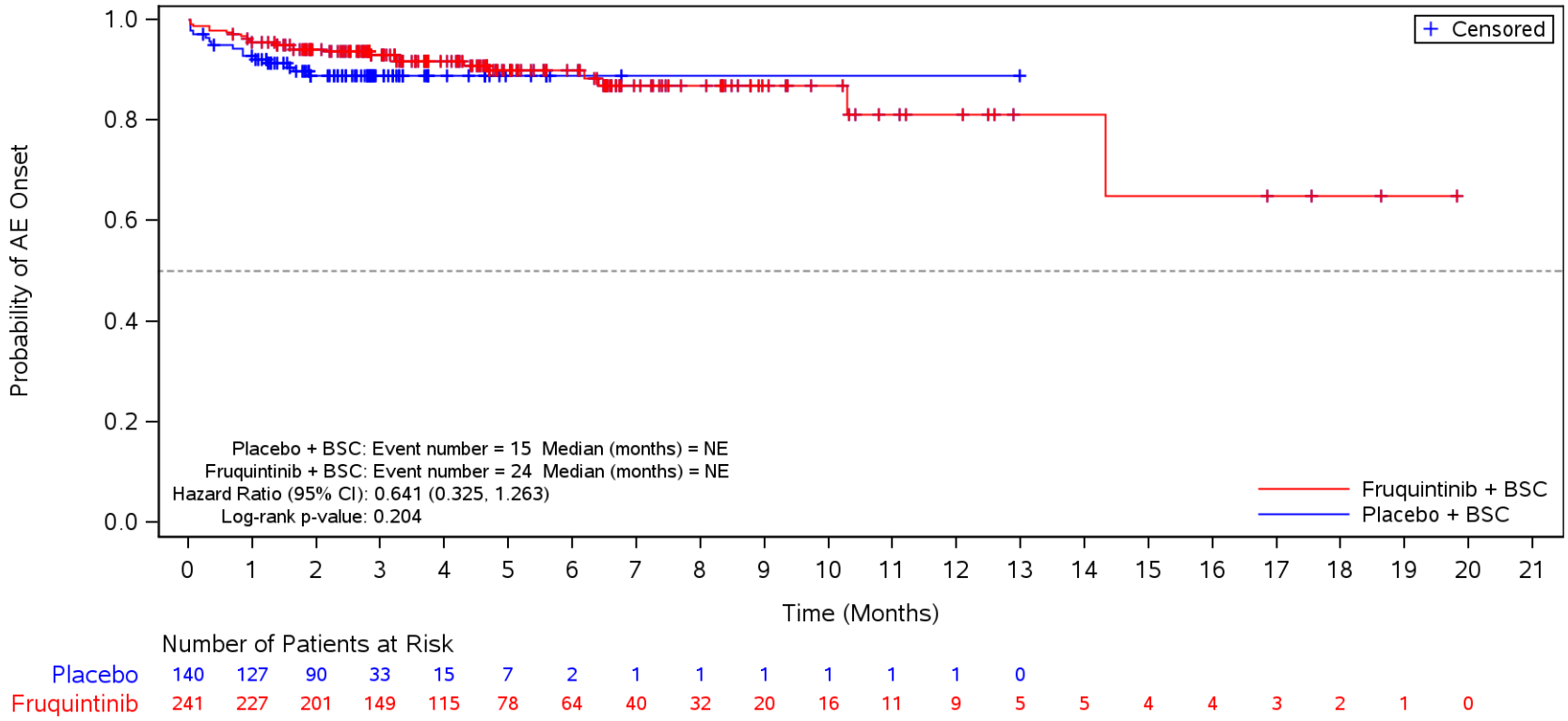
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
Male



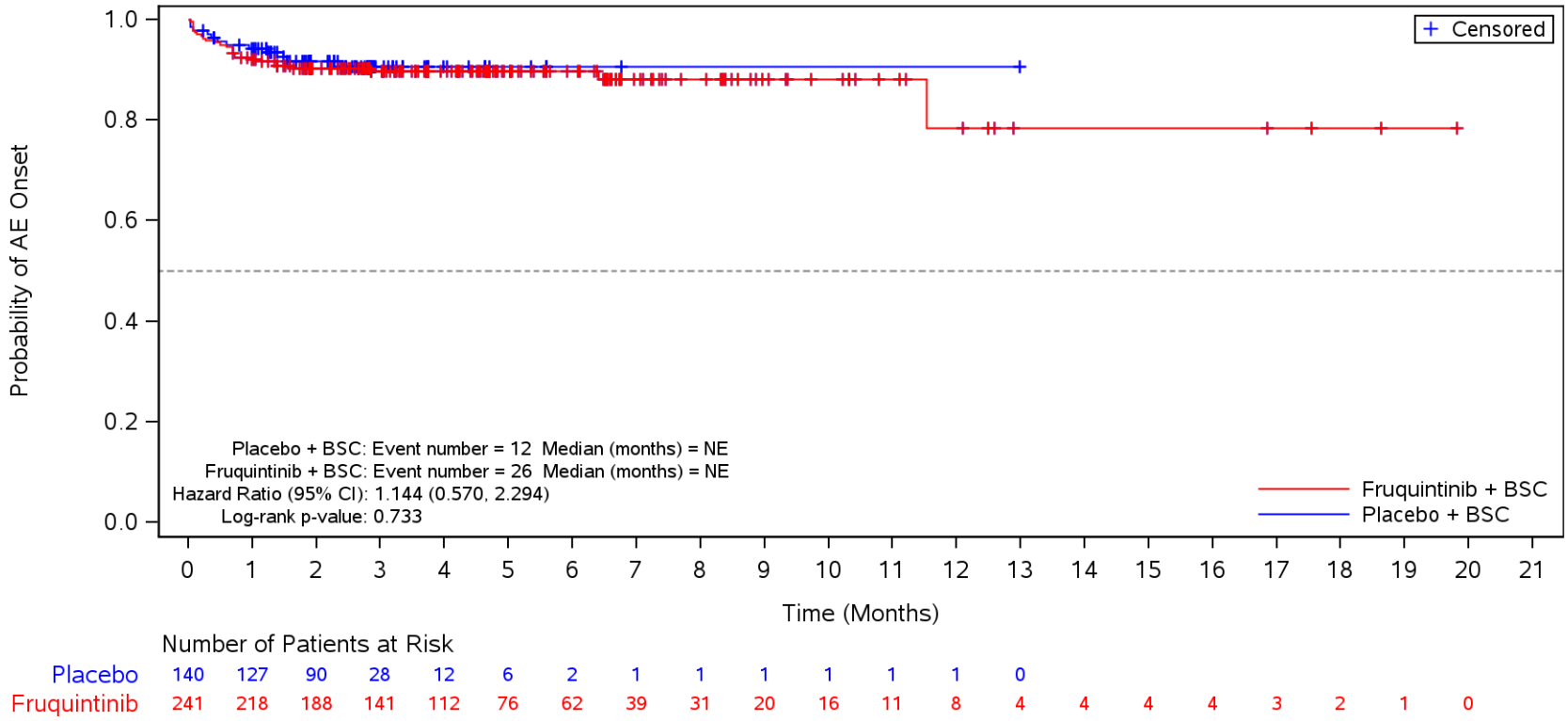
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
Male



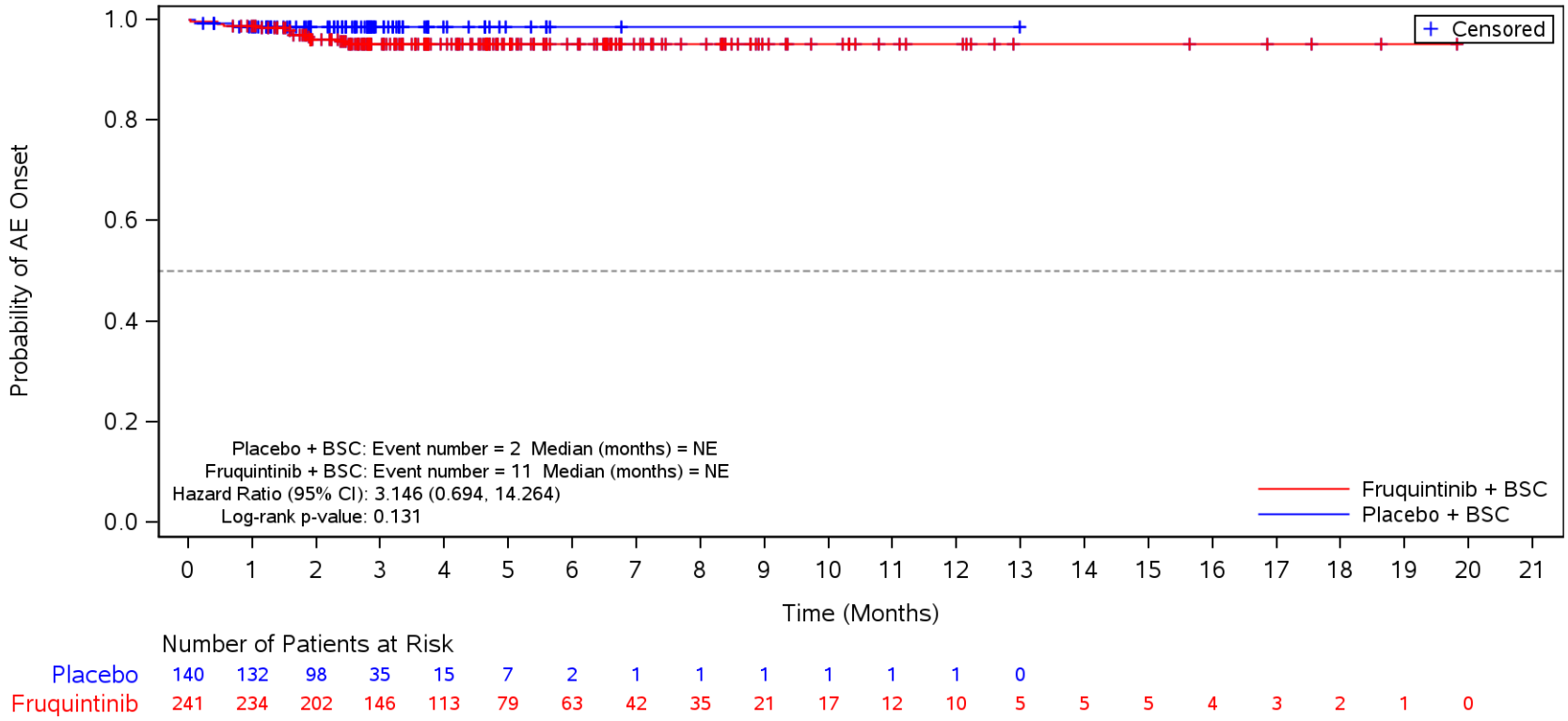
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
Male



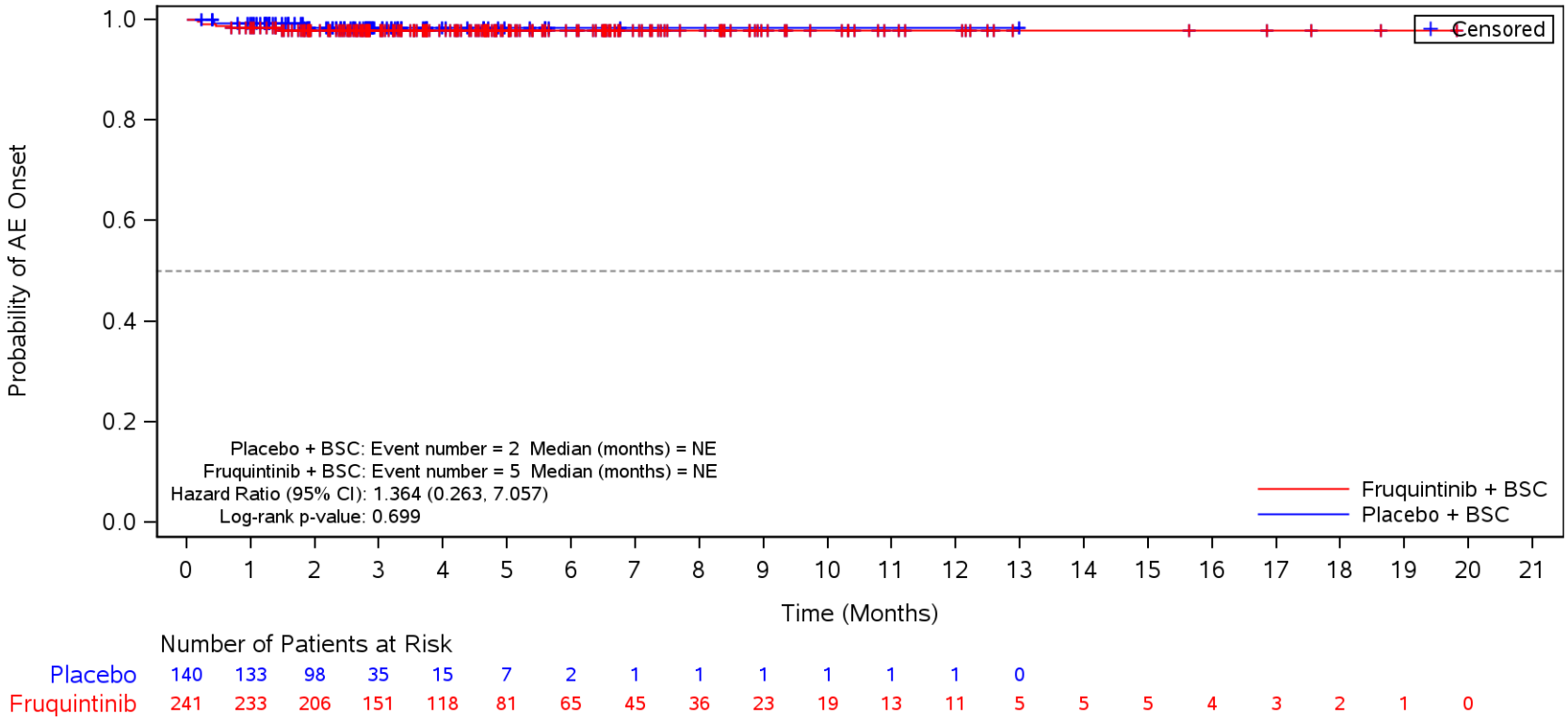
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
Male



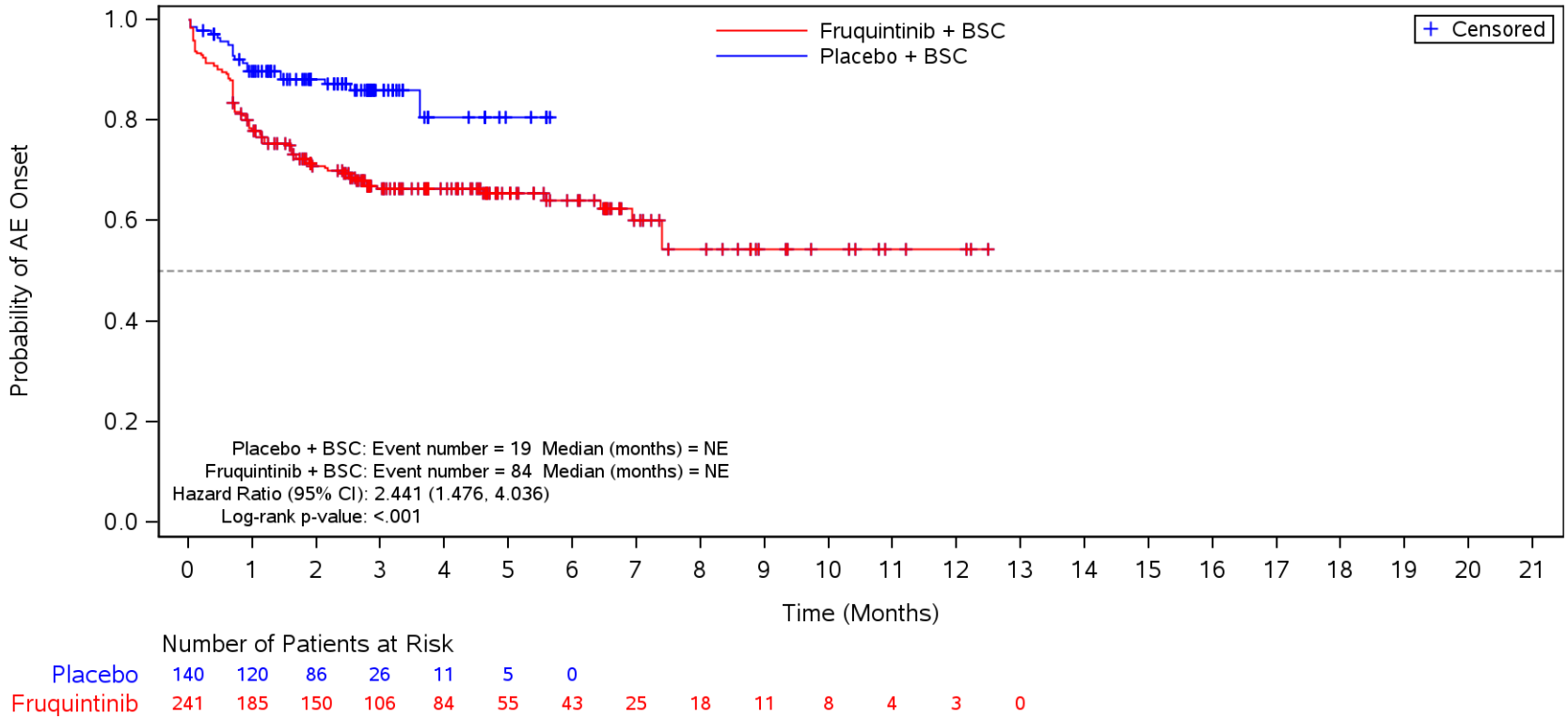
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
Male



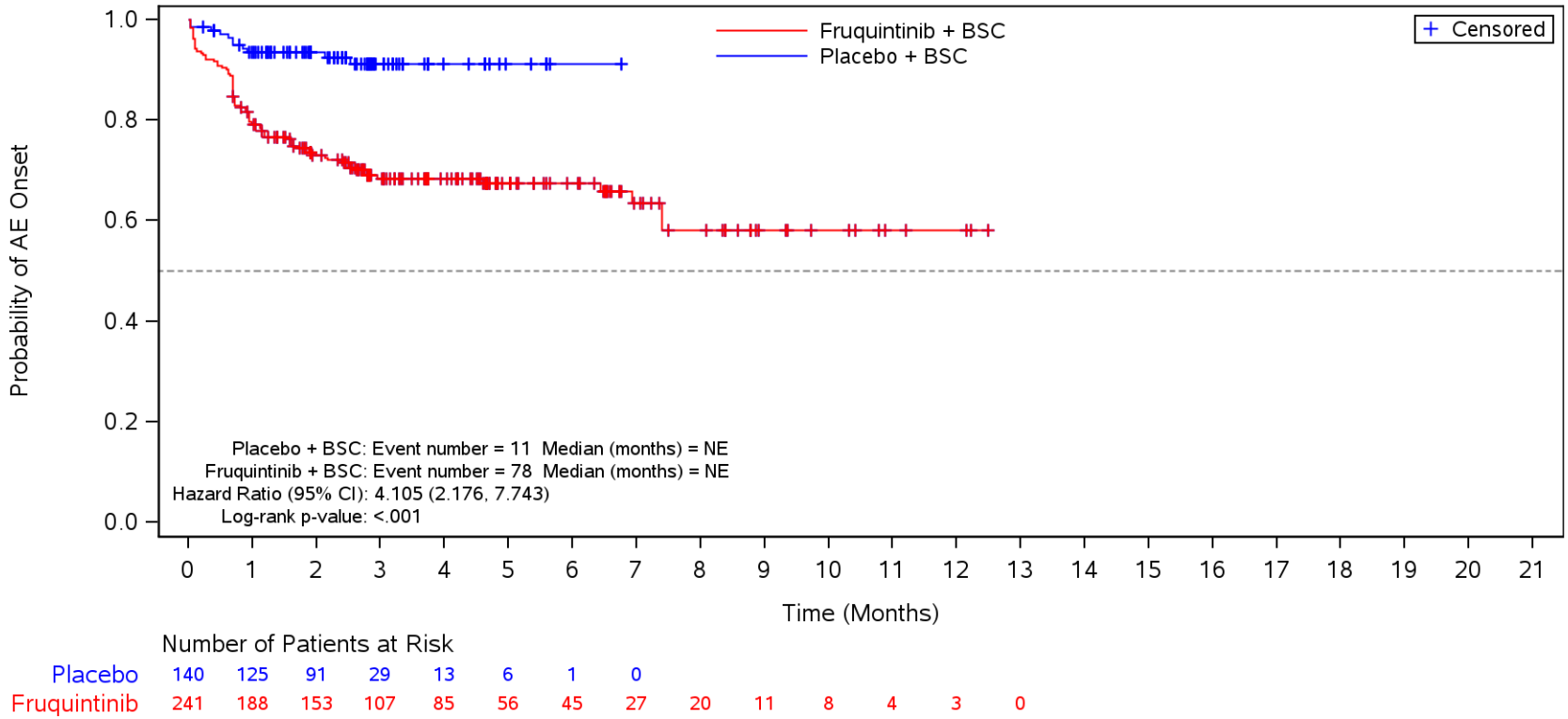
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Vascular disorders**
Male



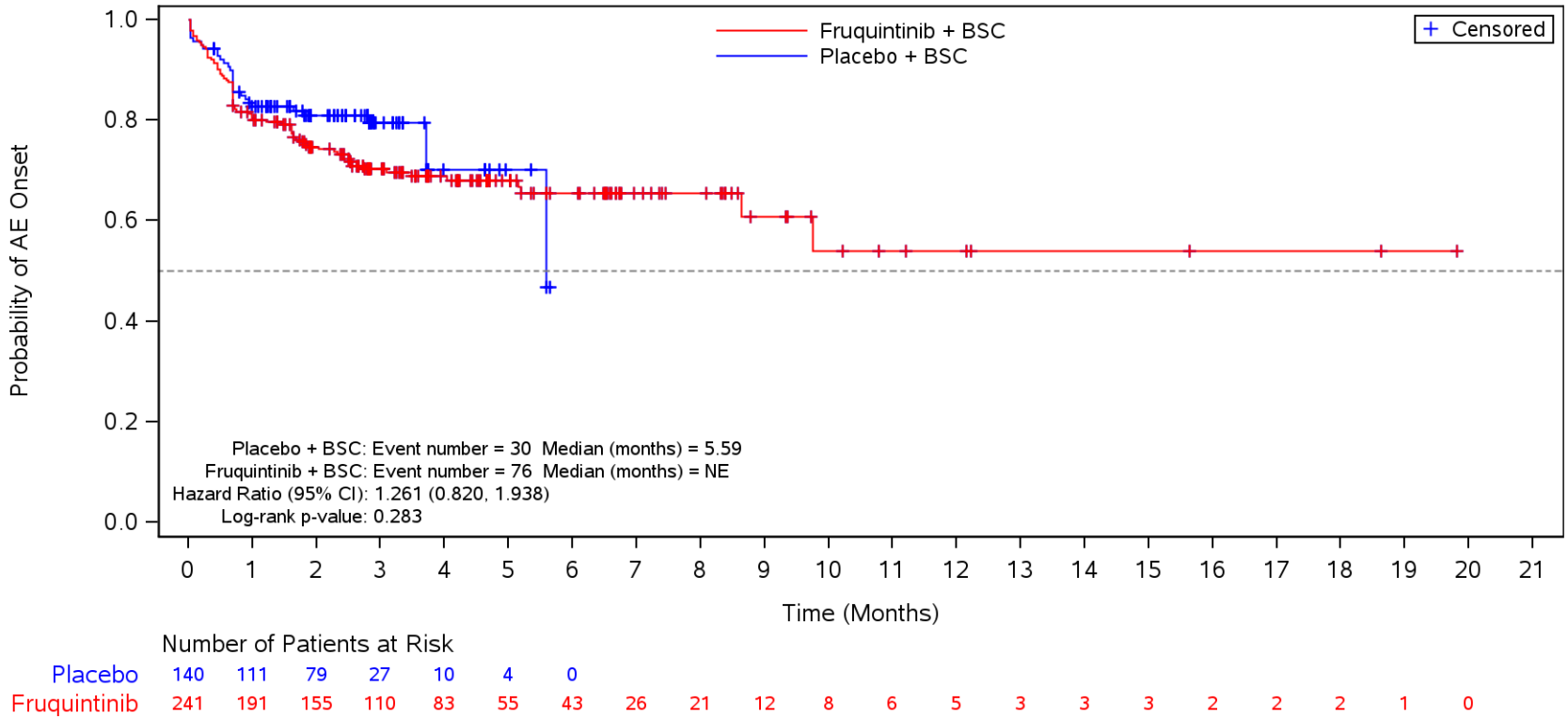
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Male



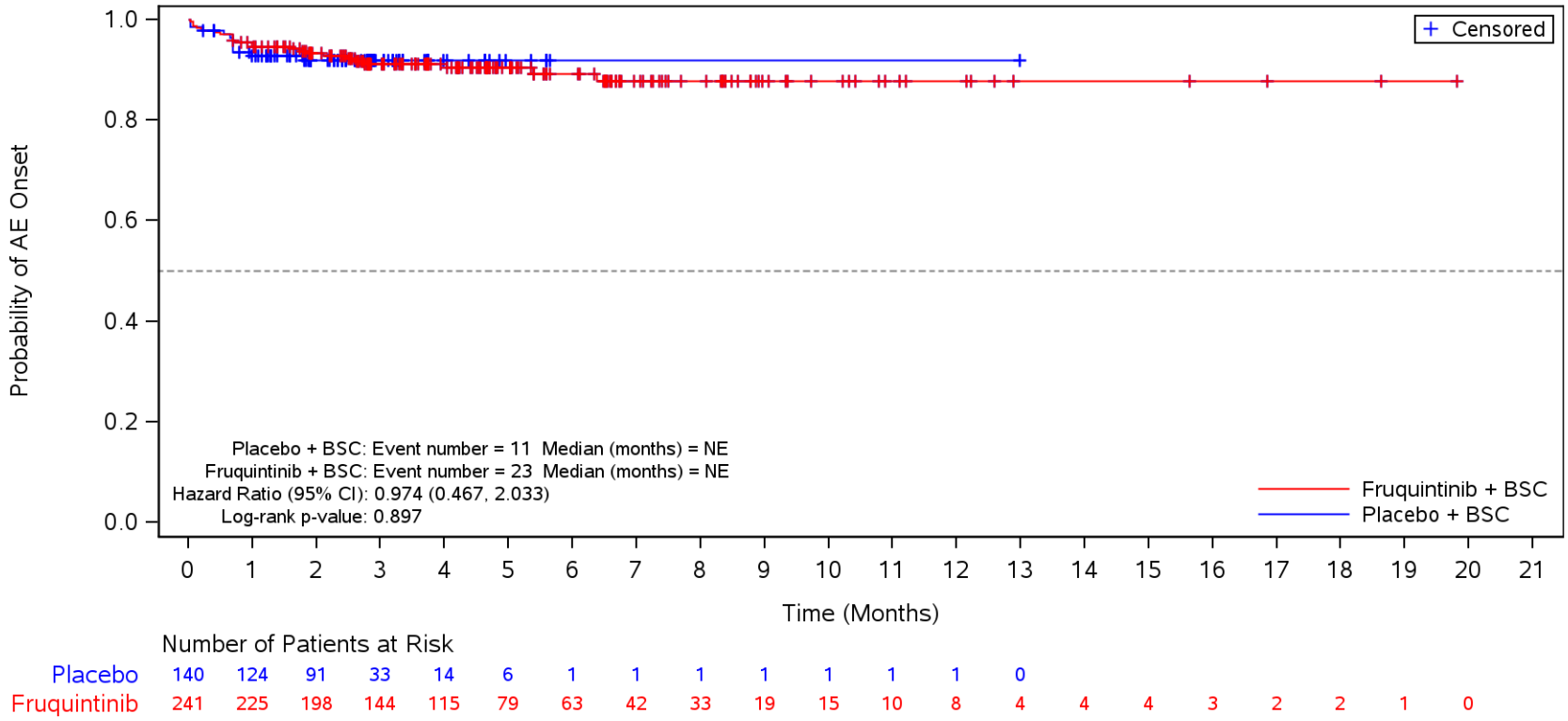
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
Male



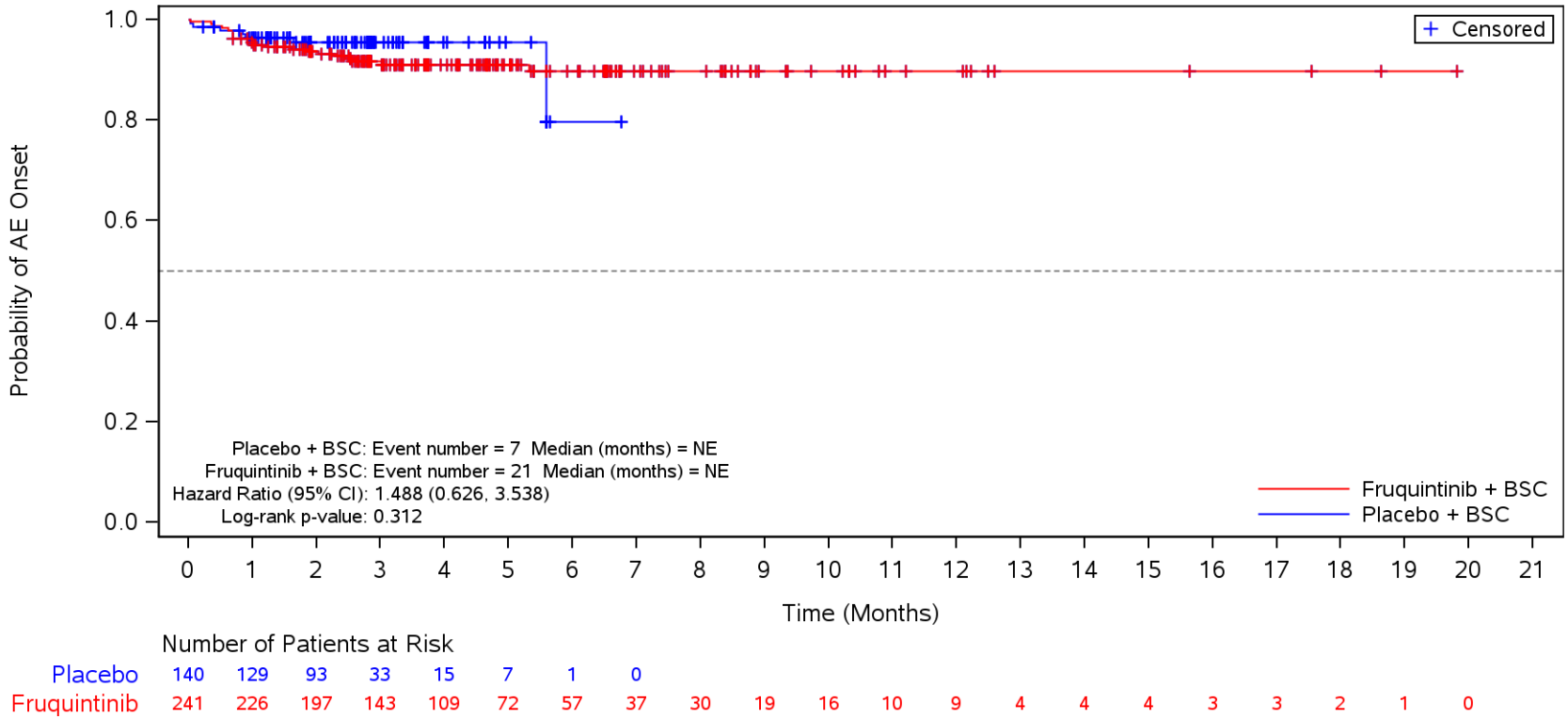
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
Male



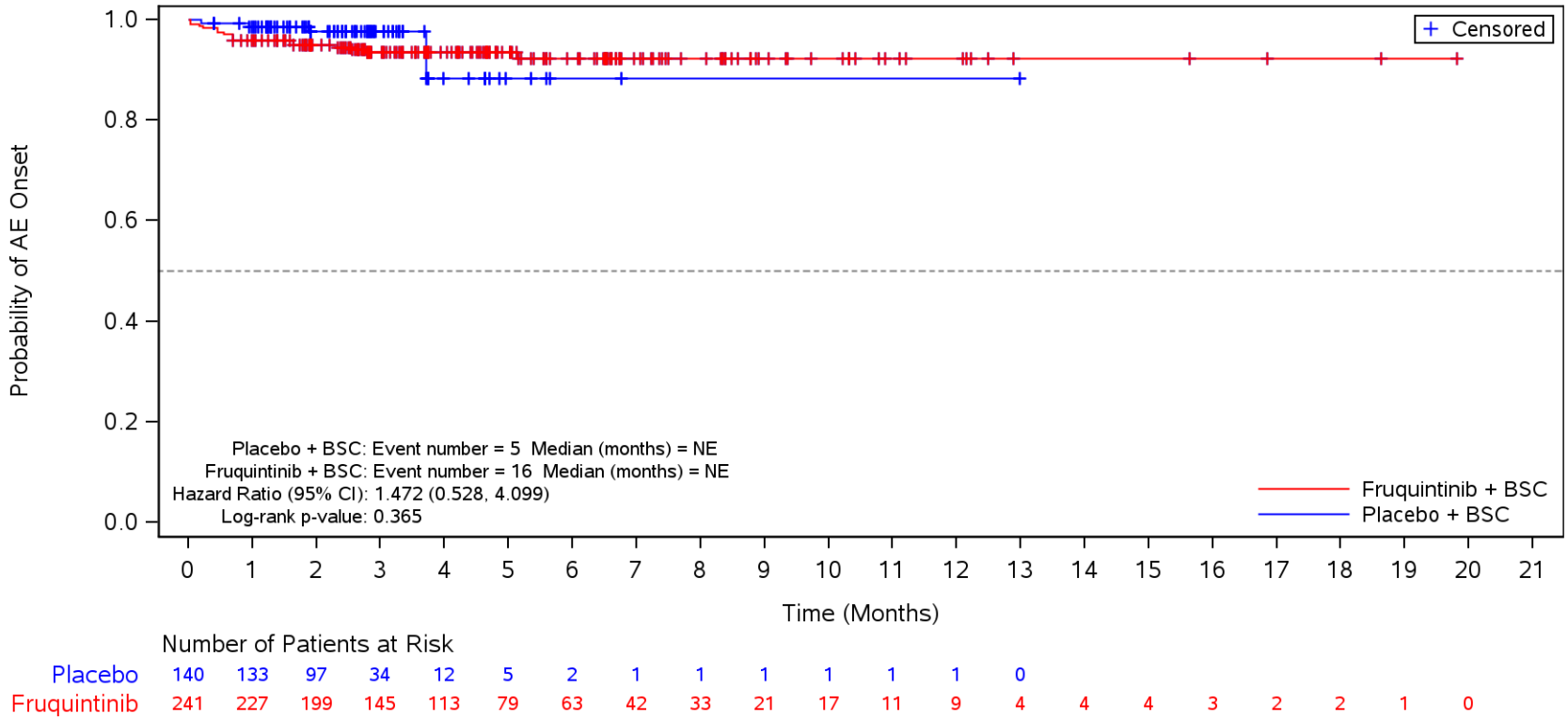
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
Male



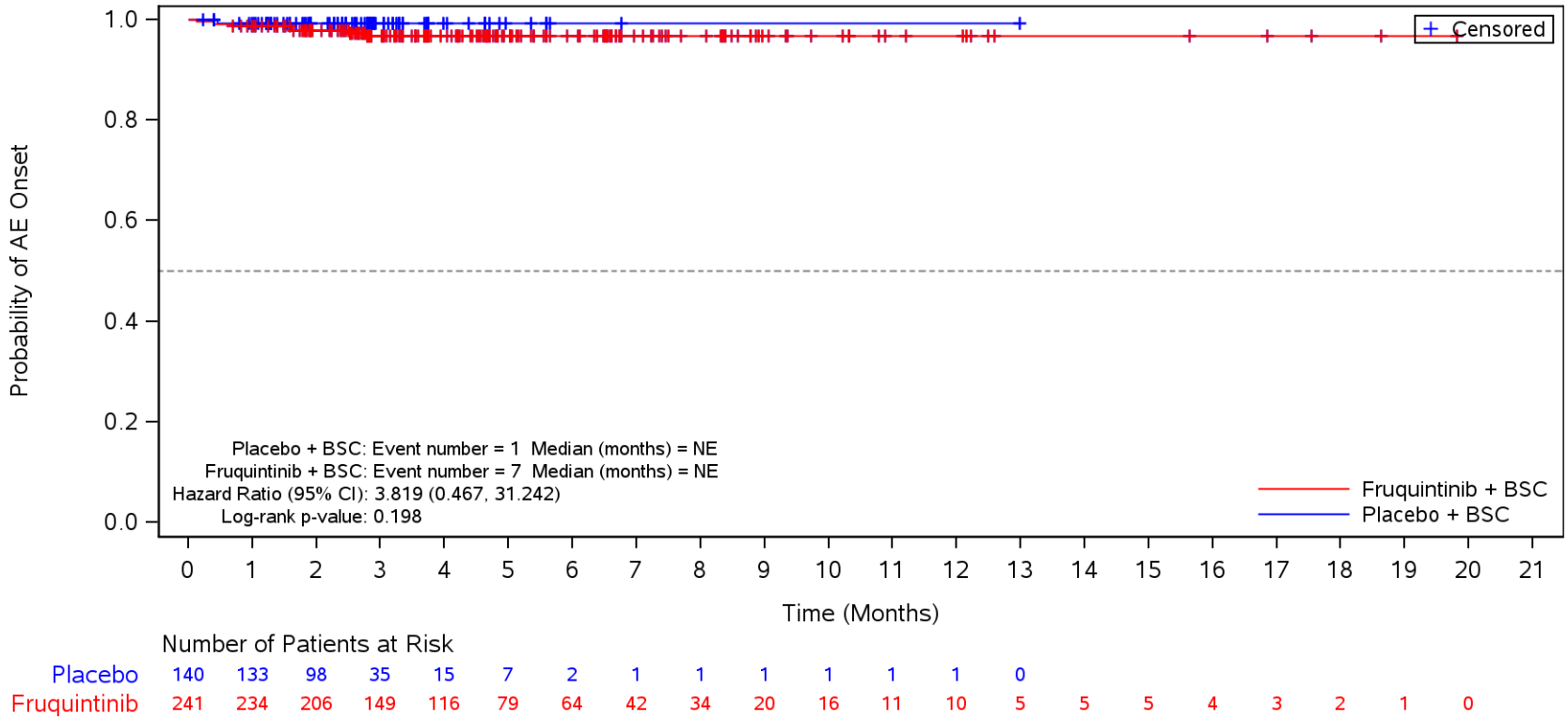
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
Male



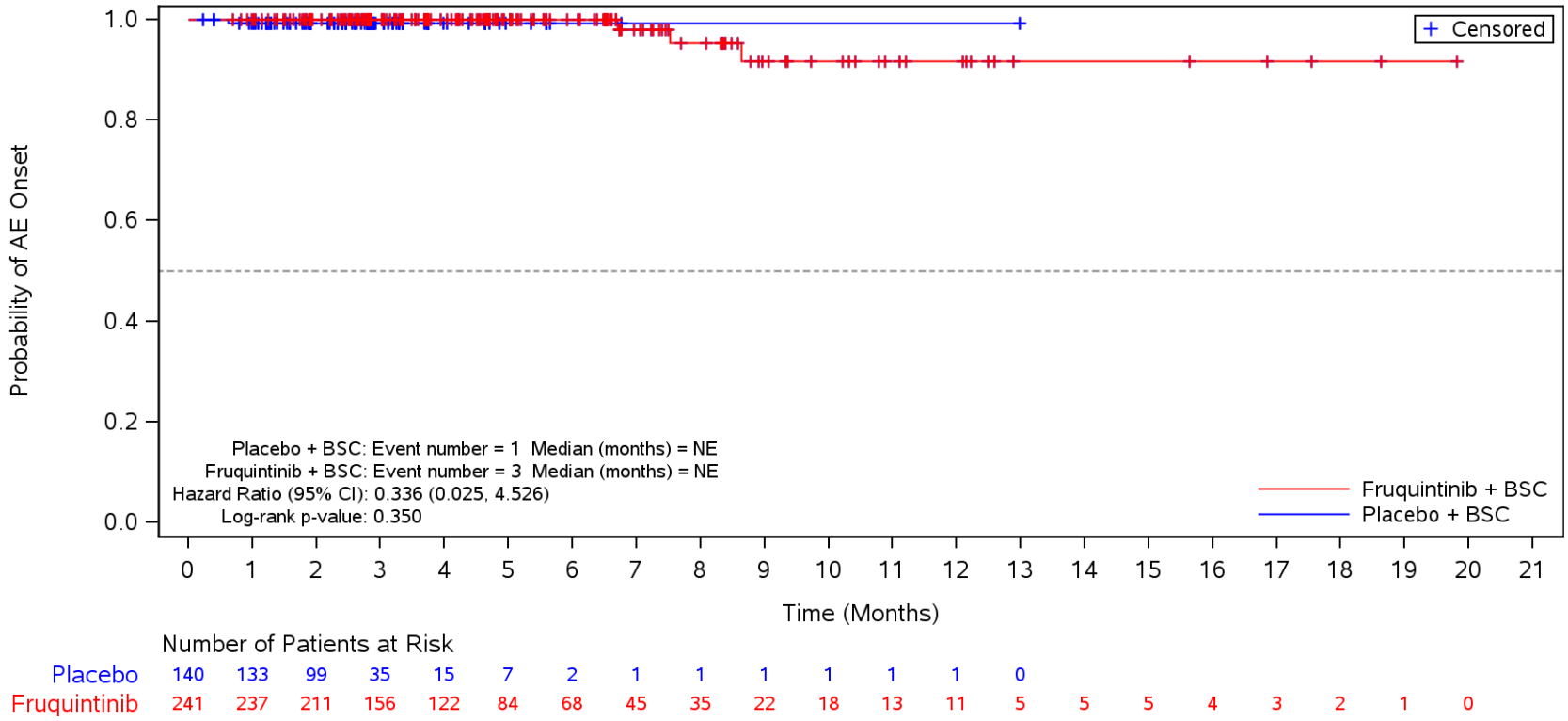
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
Male



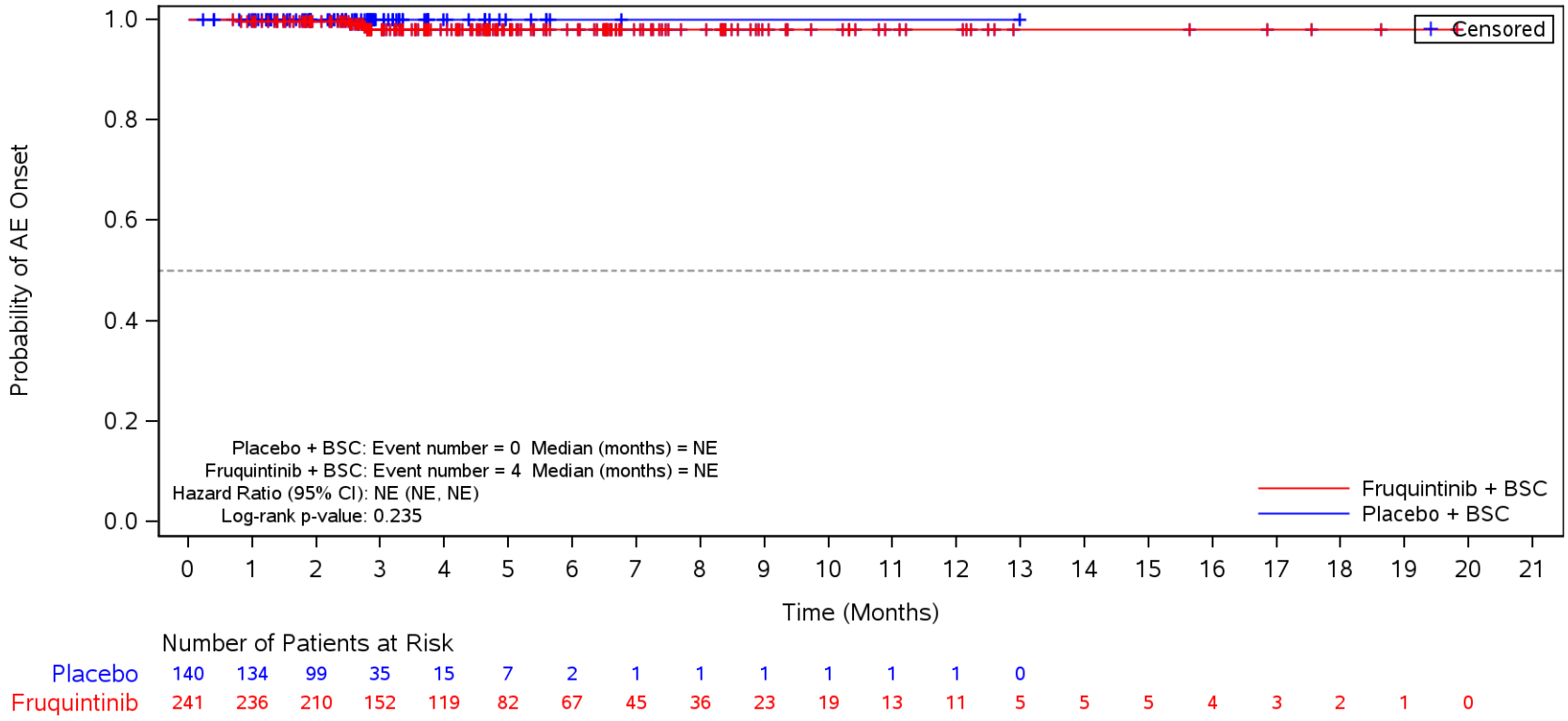
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
Male



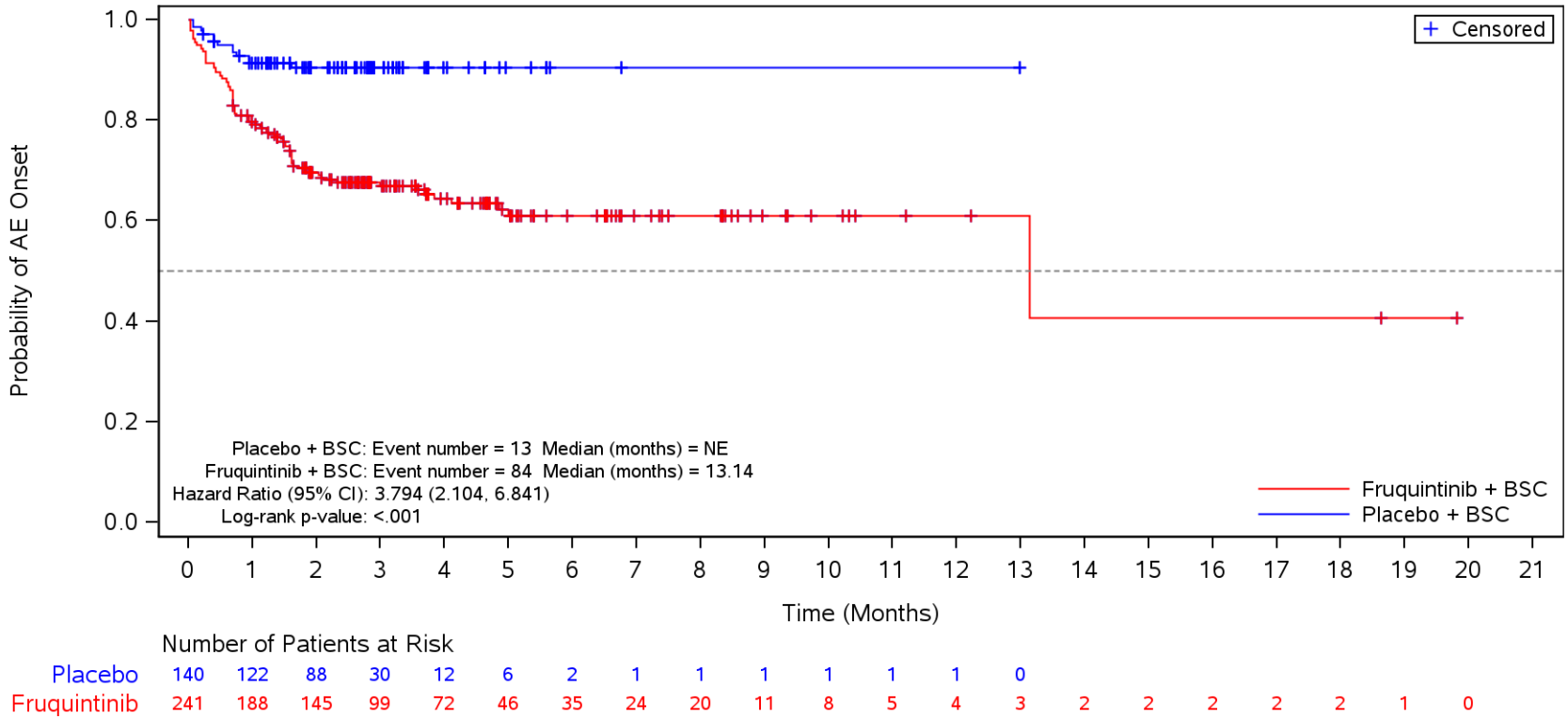
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
Male



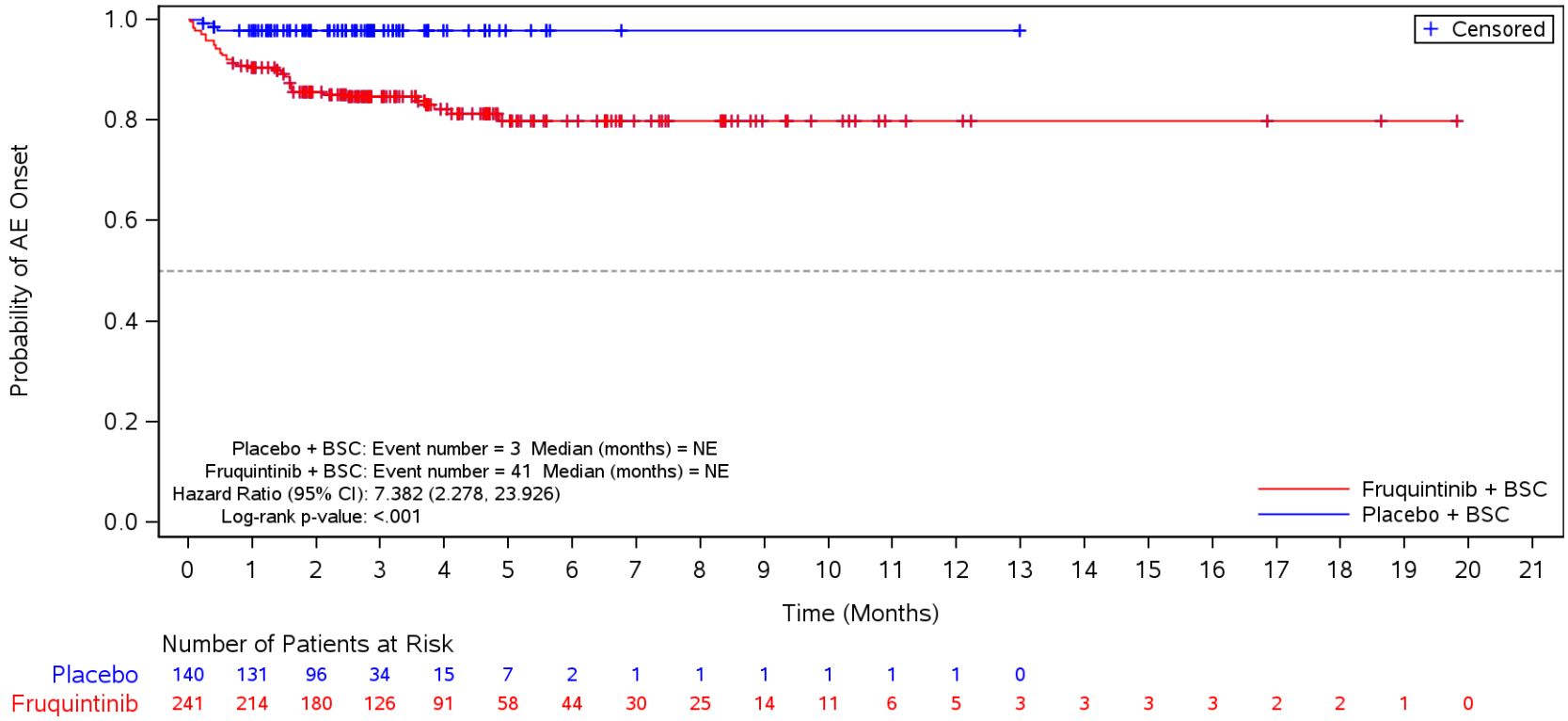
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
Male



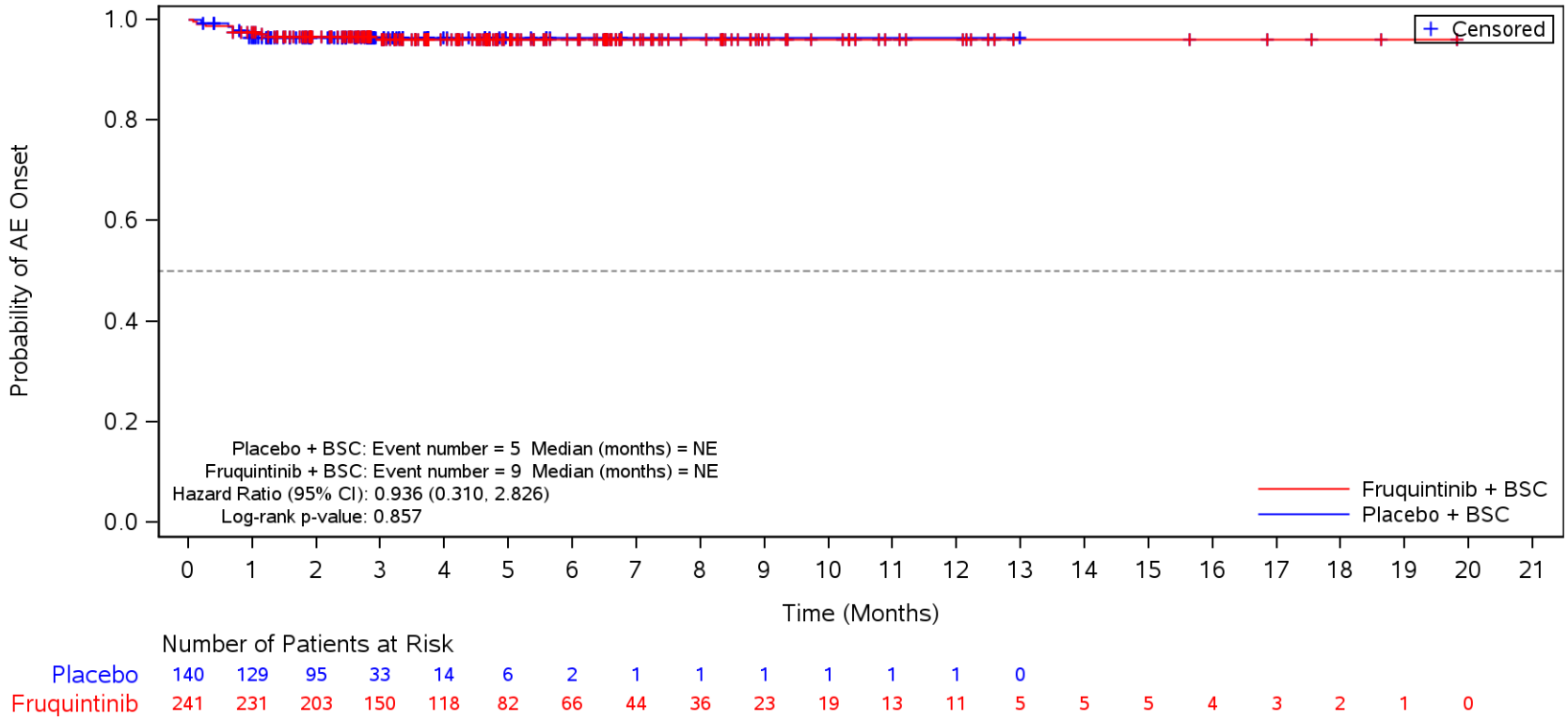
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Male



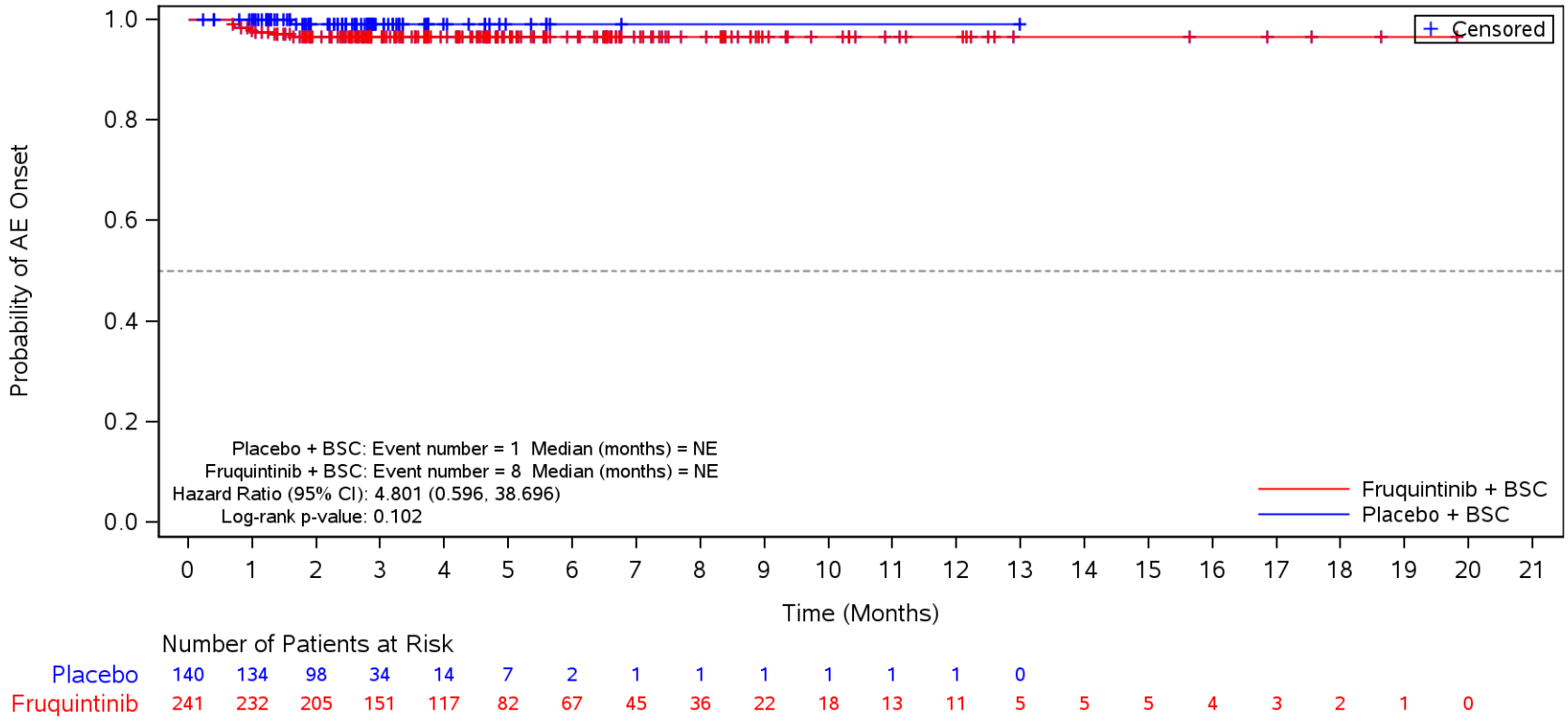
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
Male



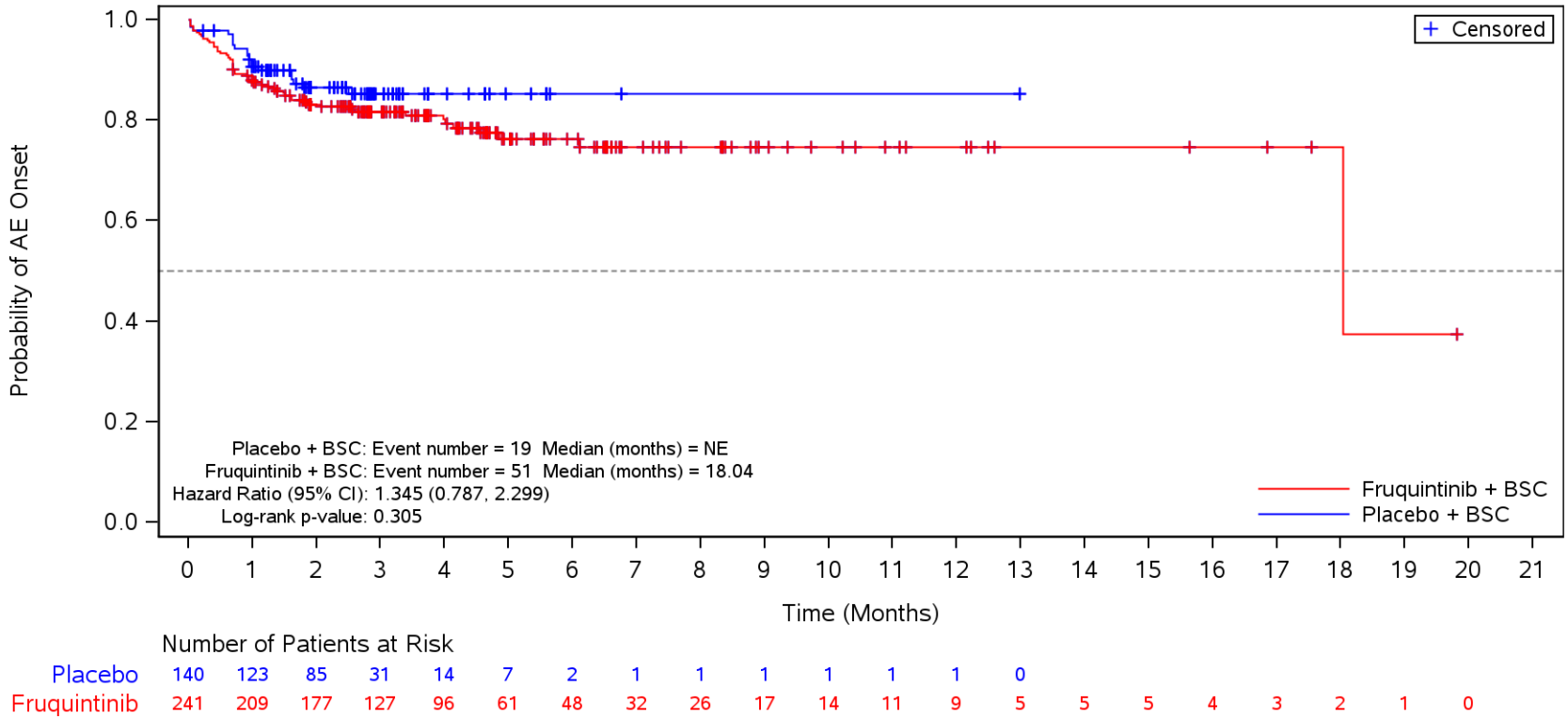
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
Male



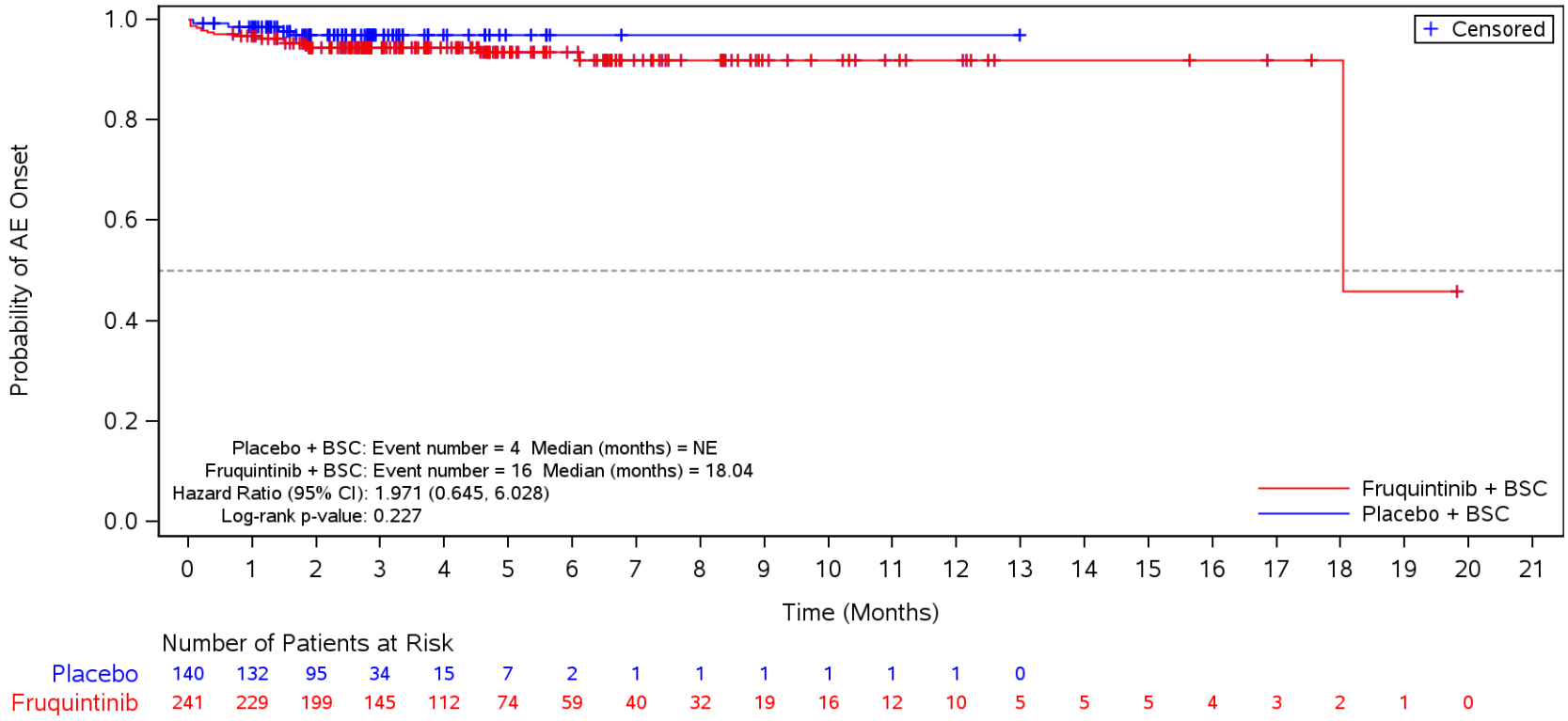
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Nervous system disorders**
Male



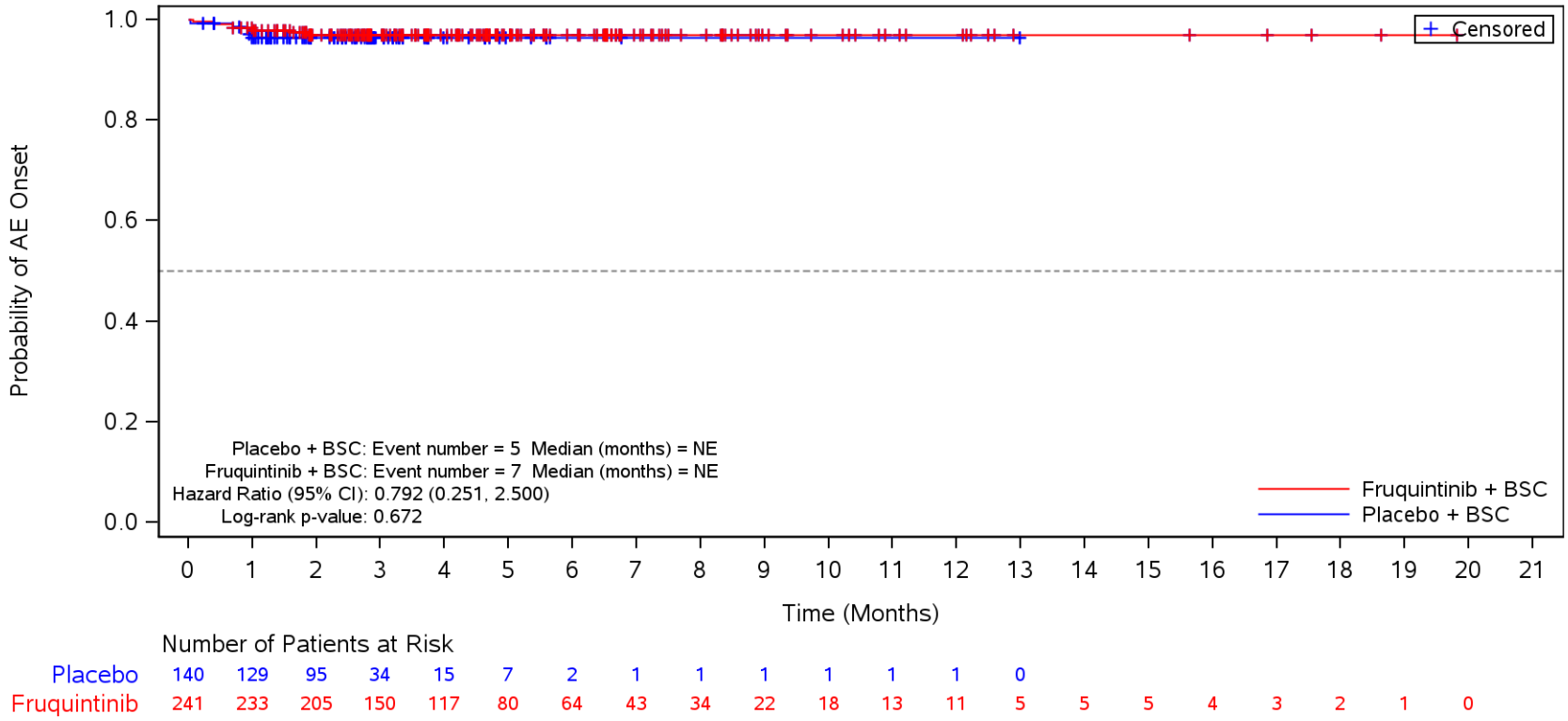
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
Male



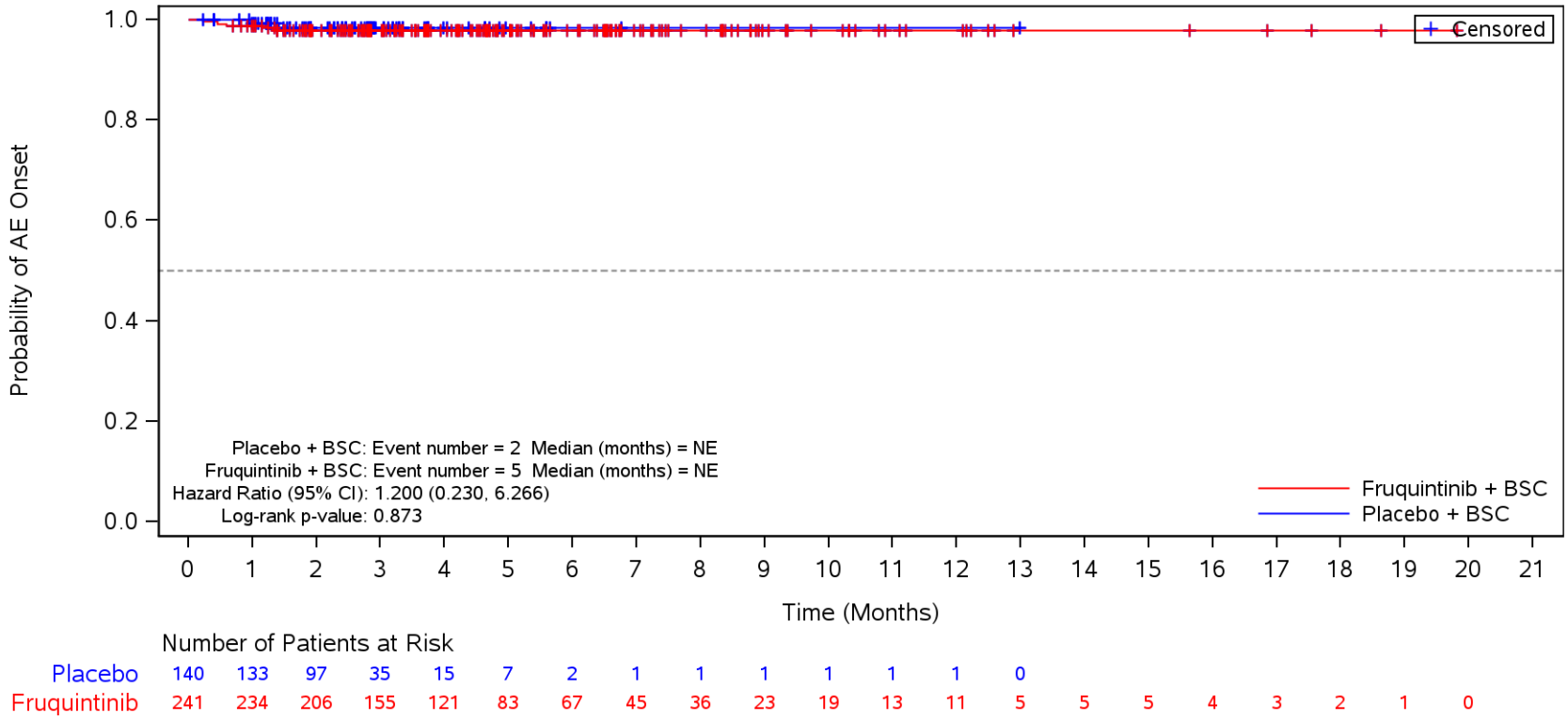
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
Male



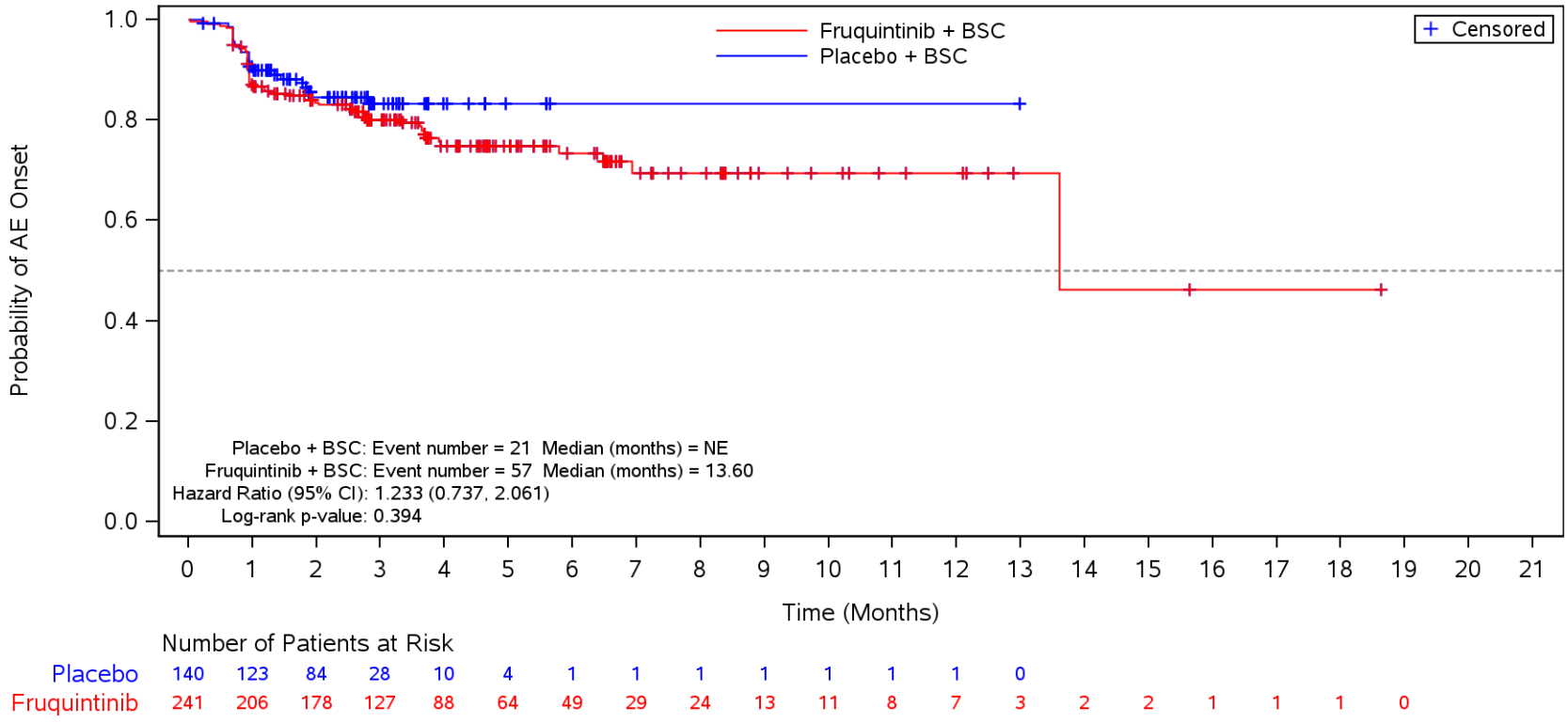
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
Male



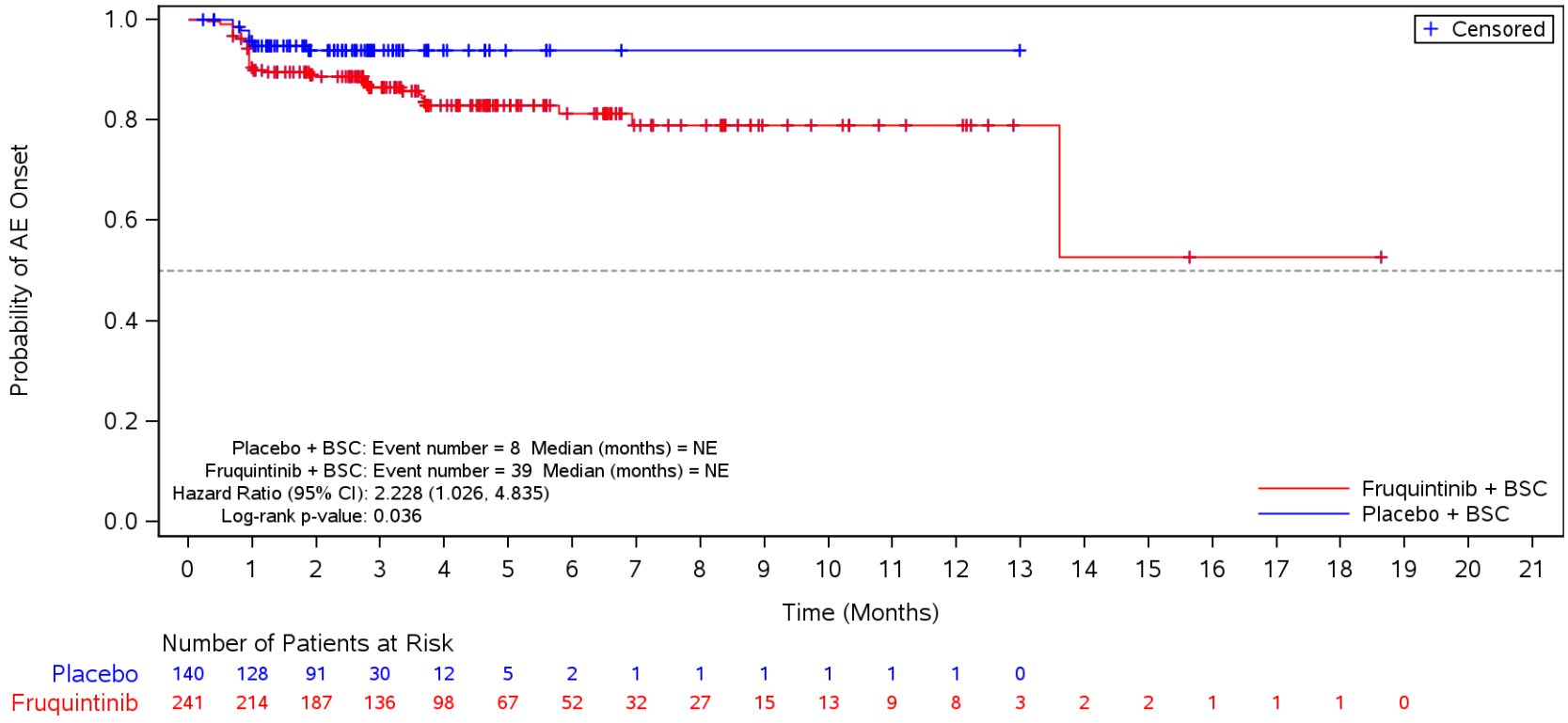
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
Male



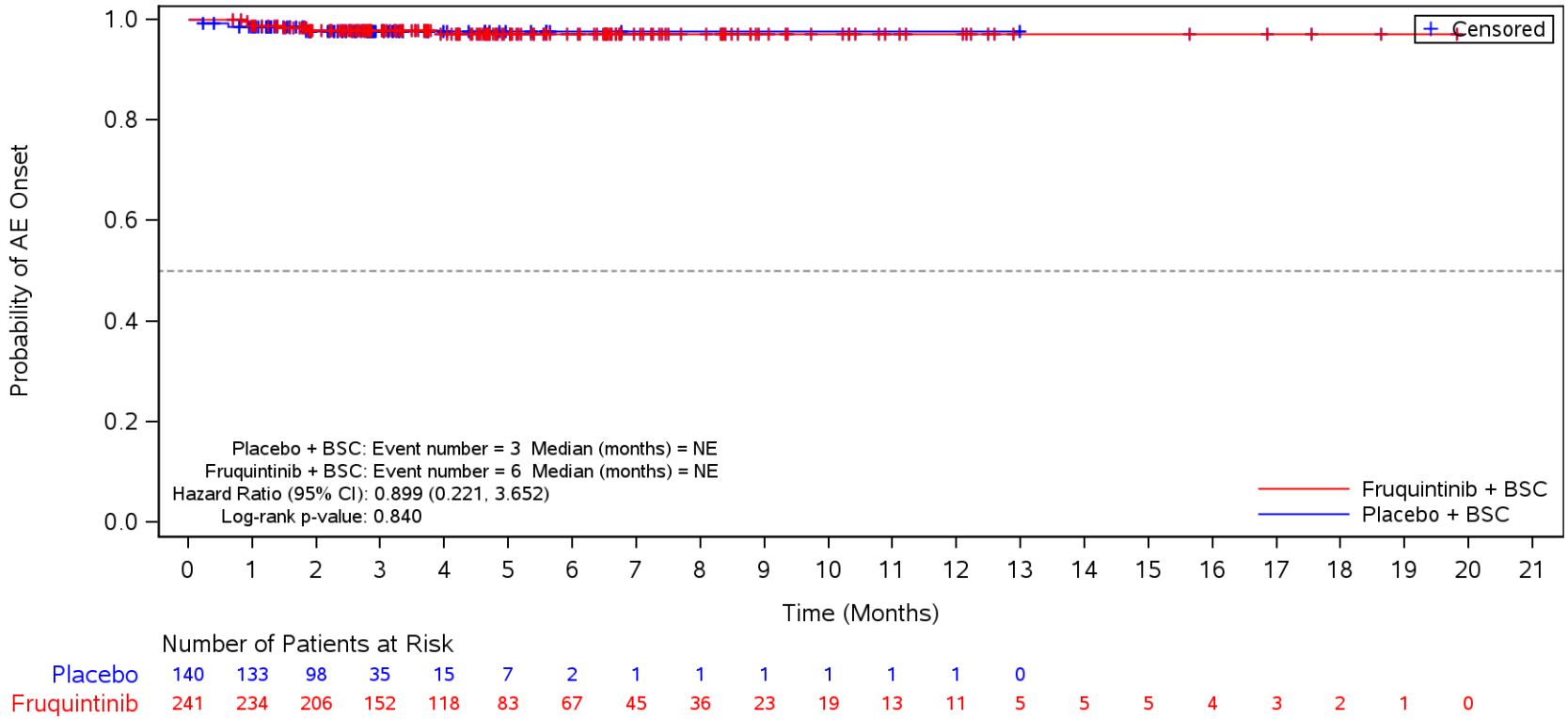
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
Male



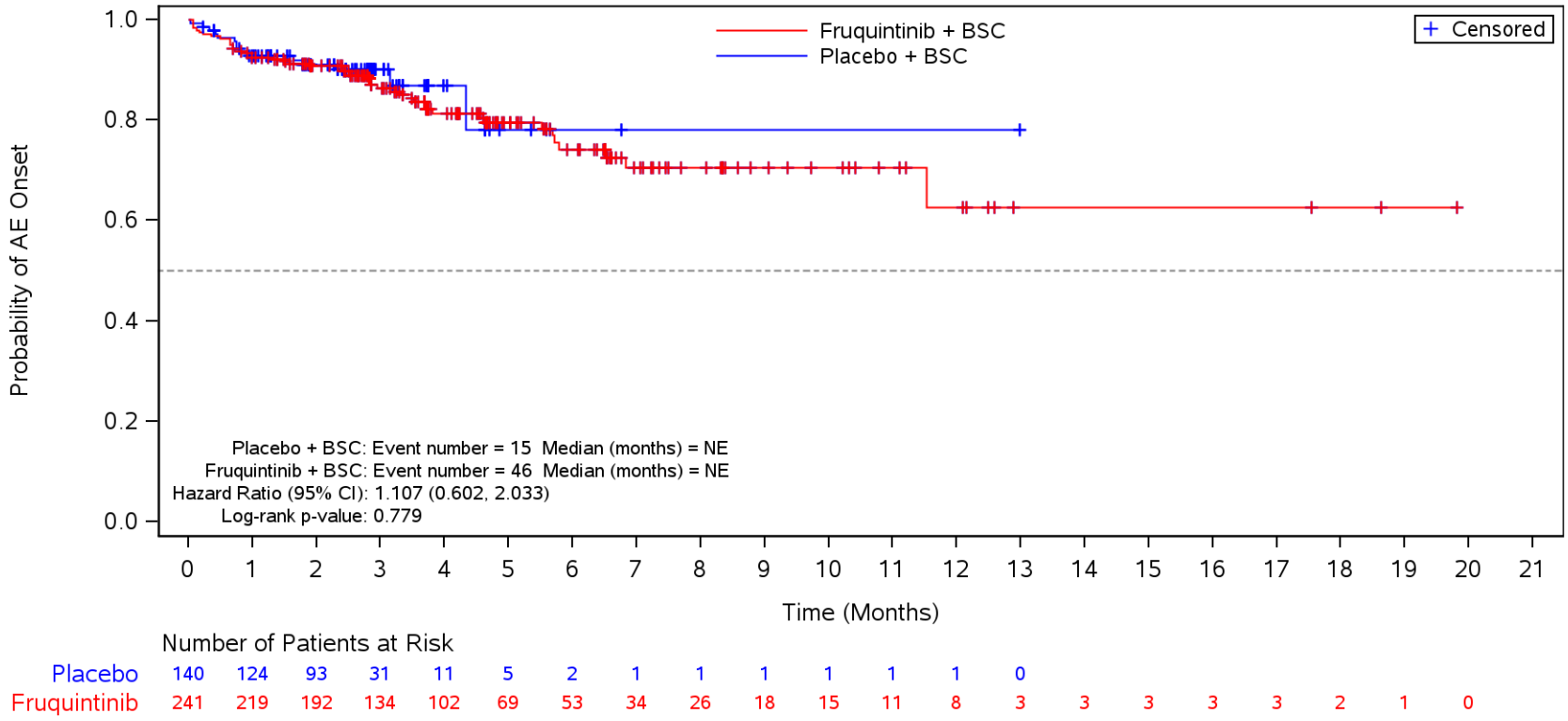
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**
Male



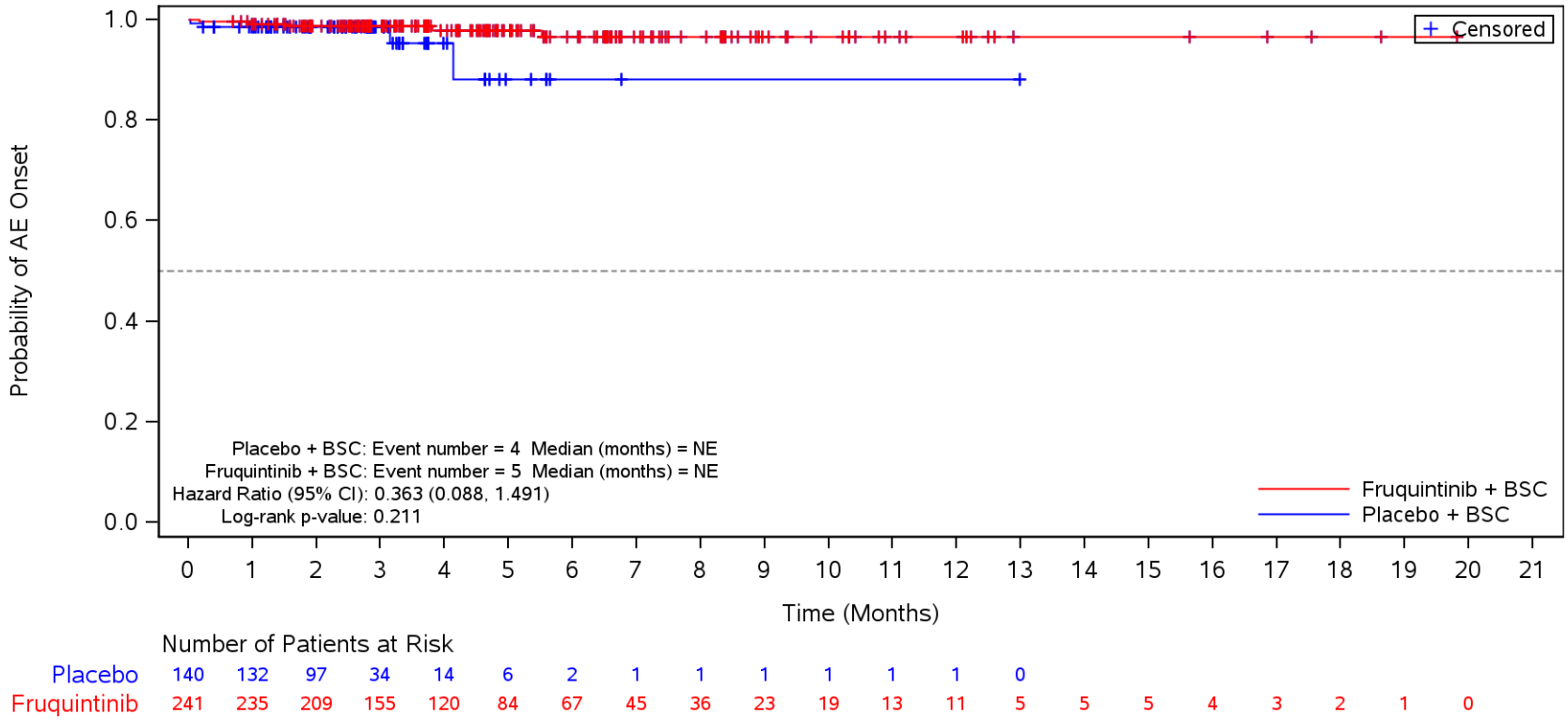
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Infections and infestations**
Male



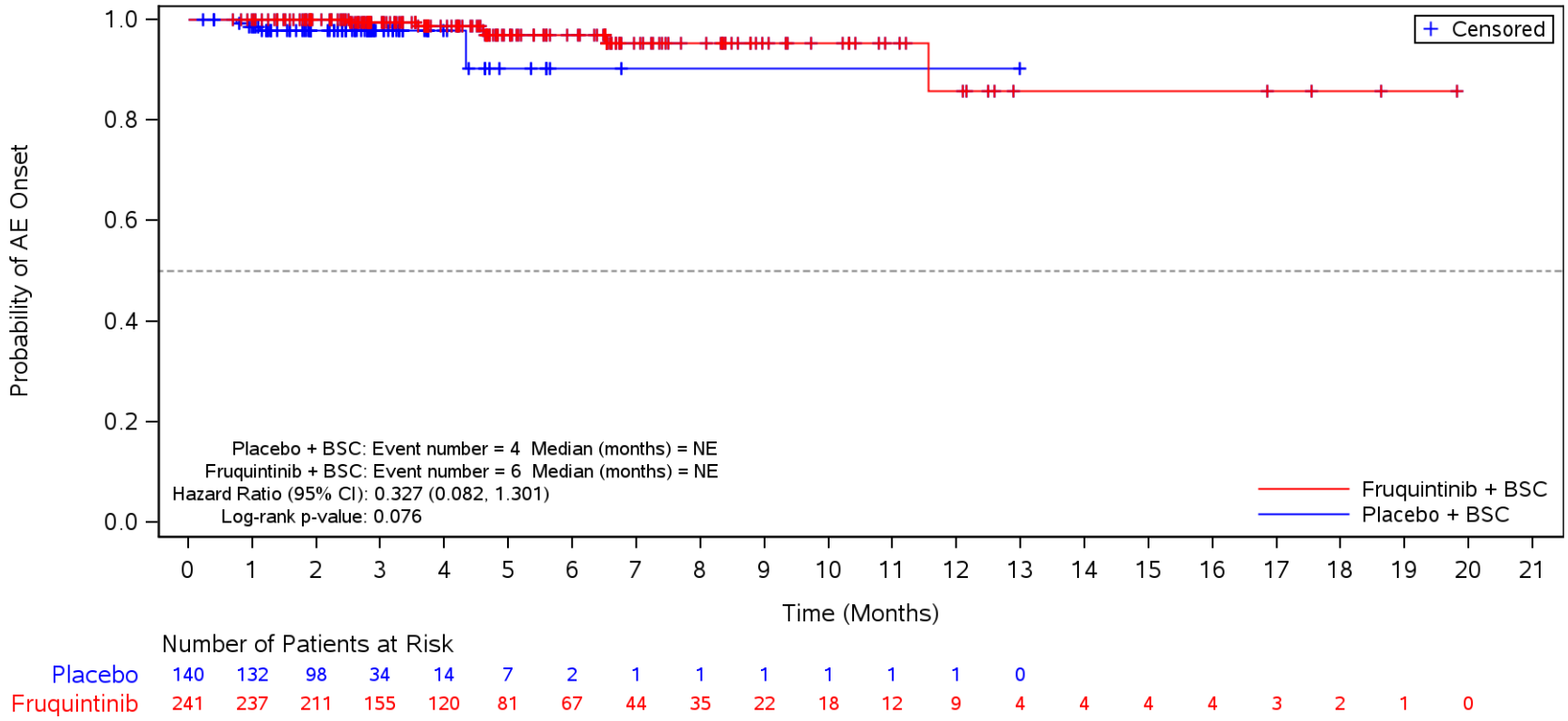
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
Male



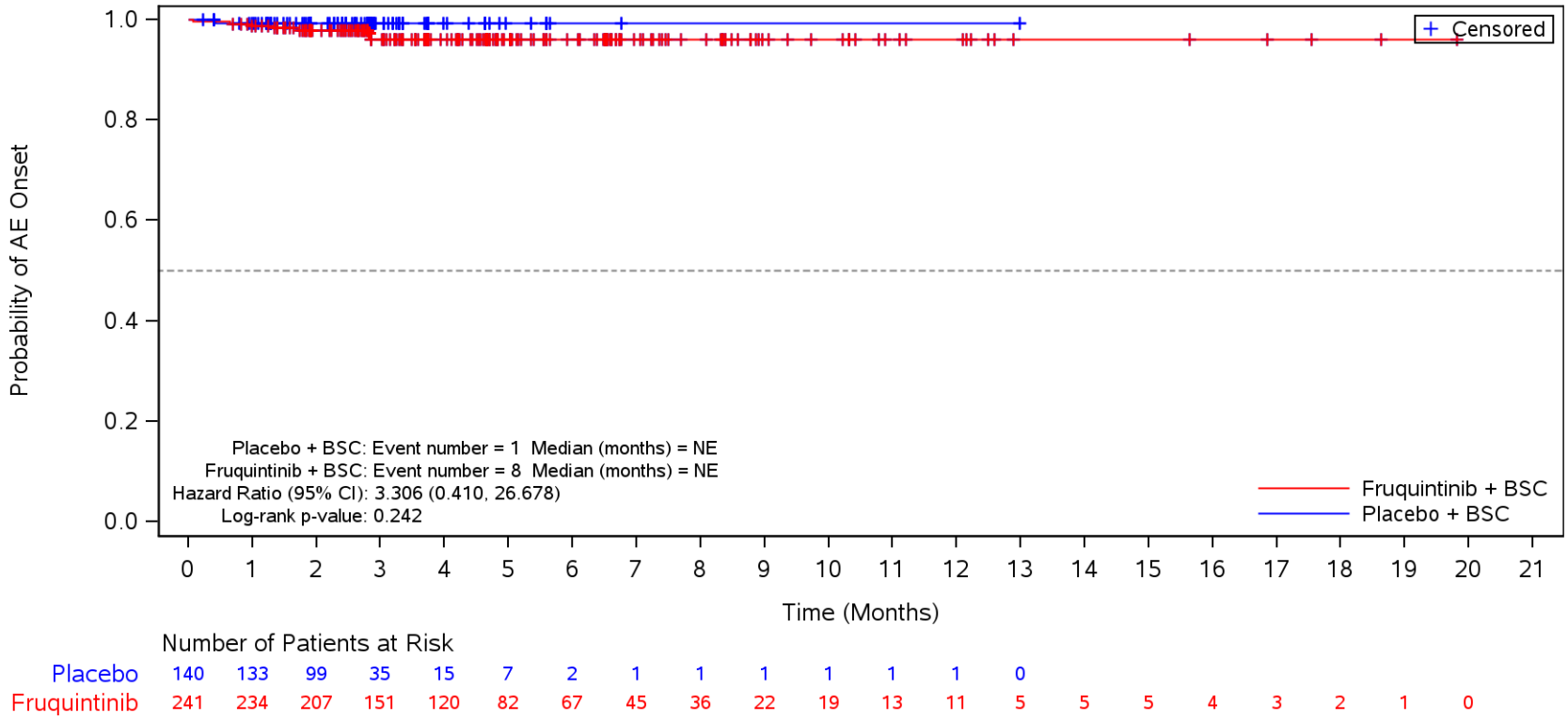
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**
Male



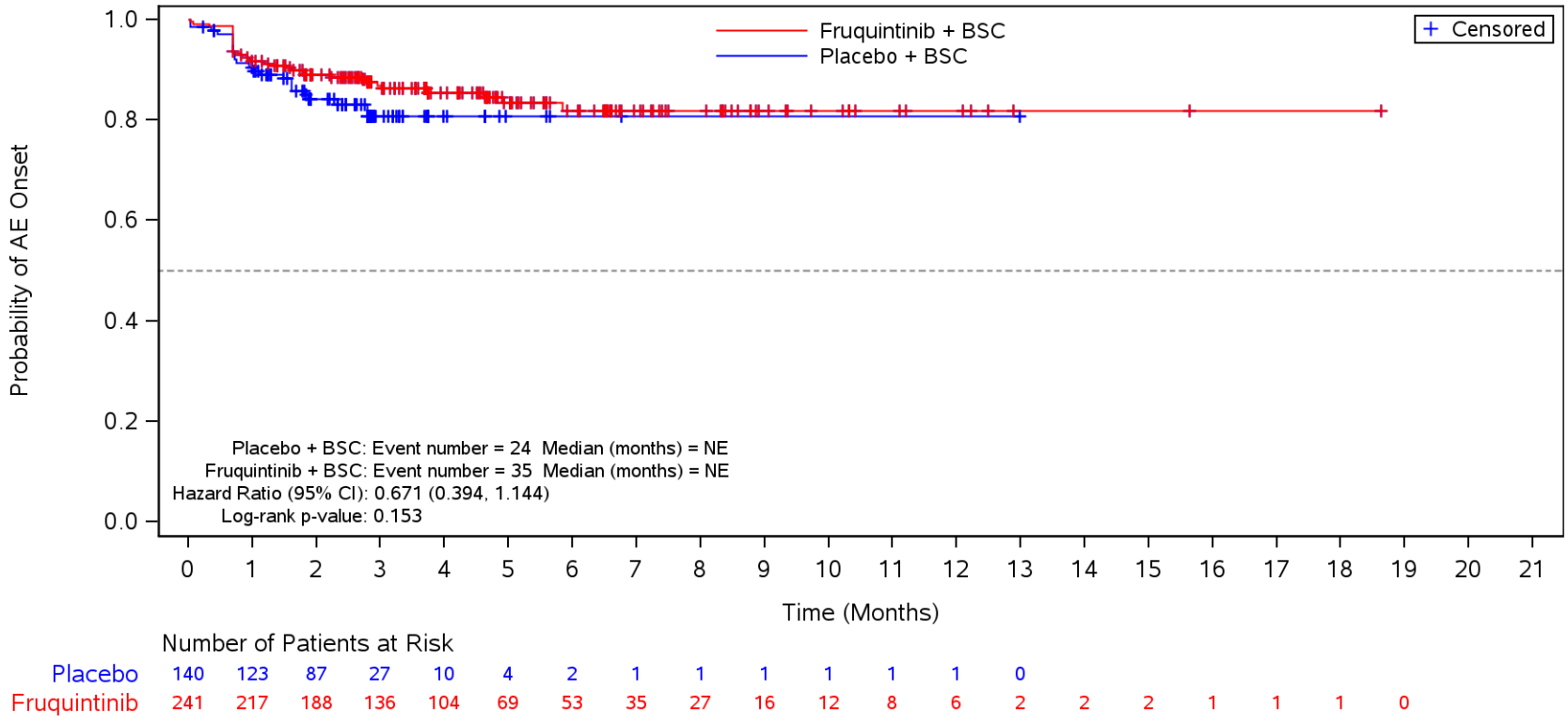
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**
Male



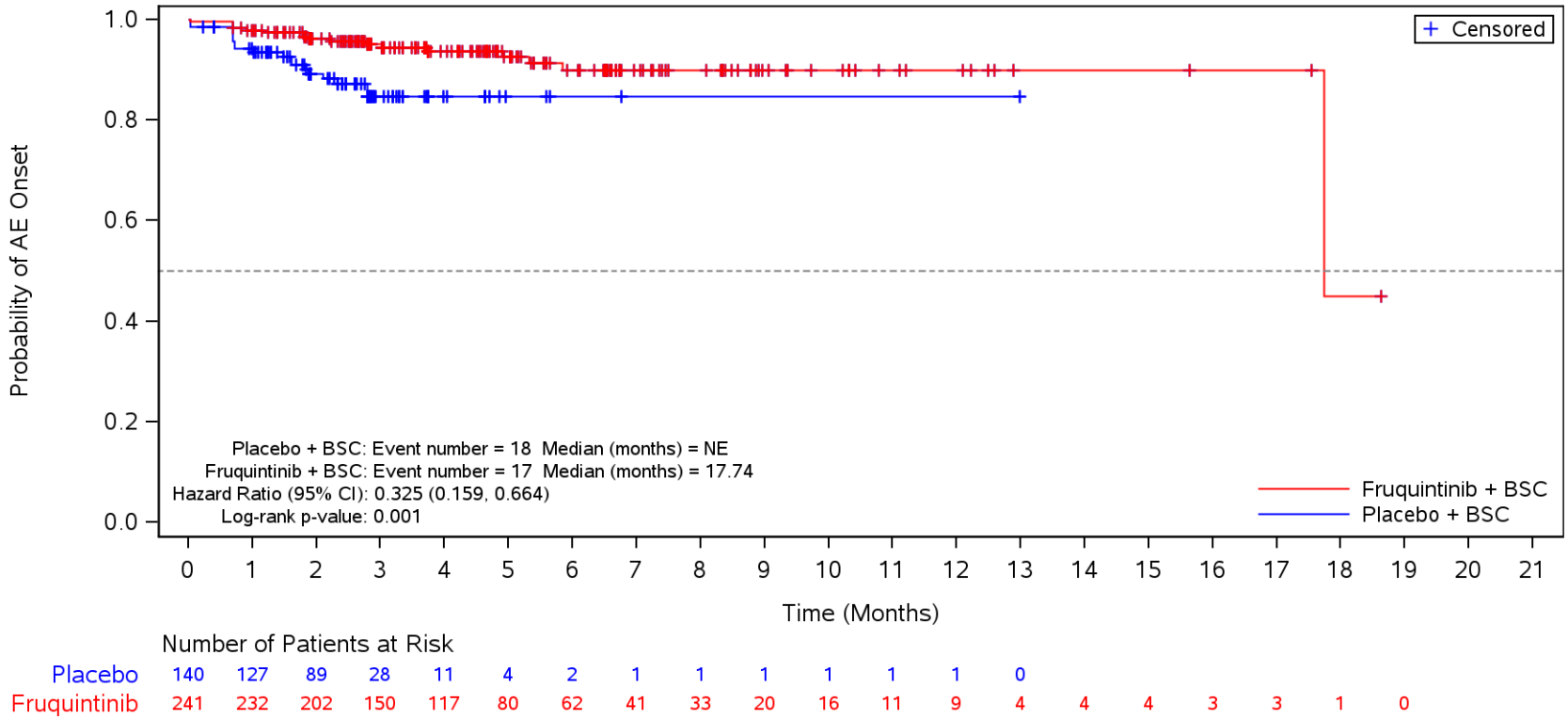
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
Male



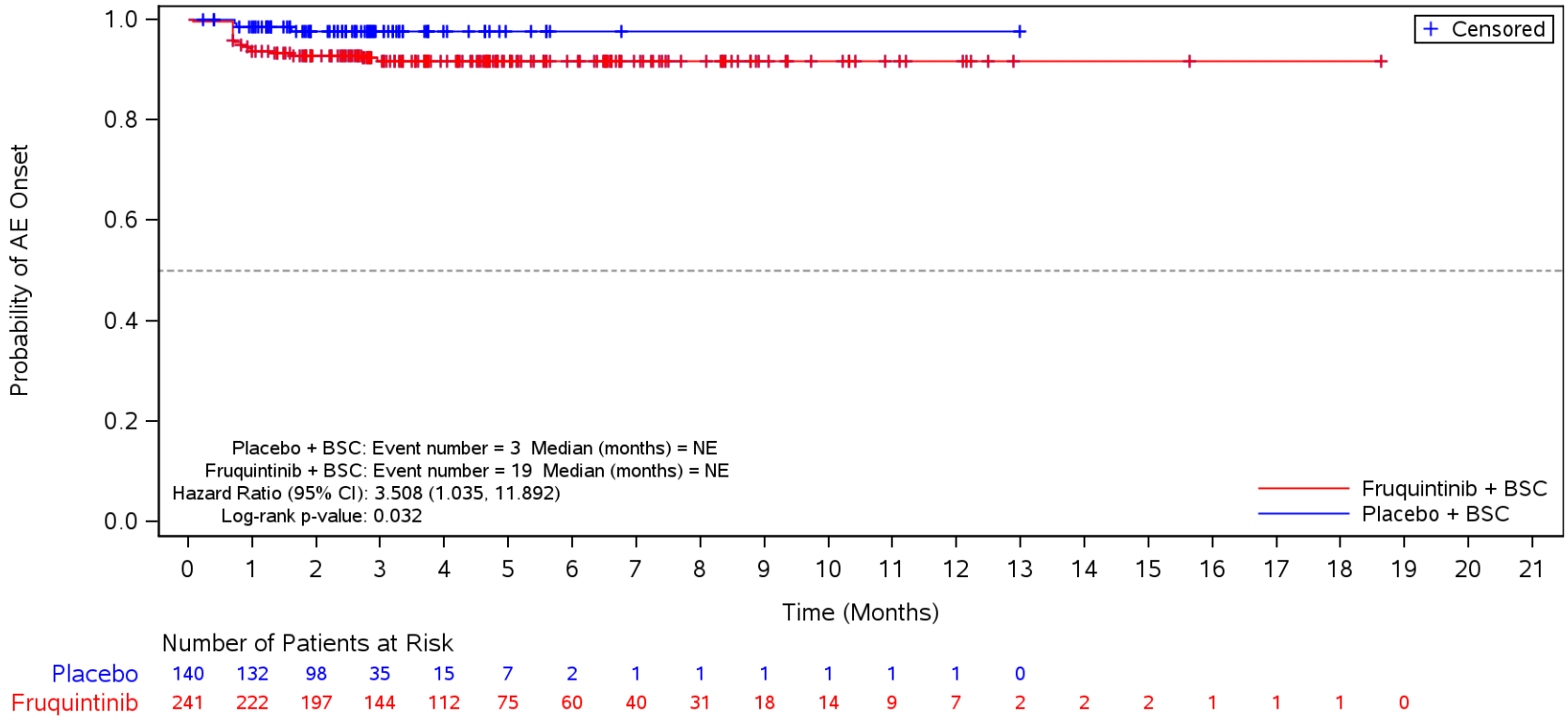
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
Male



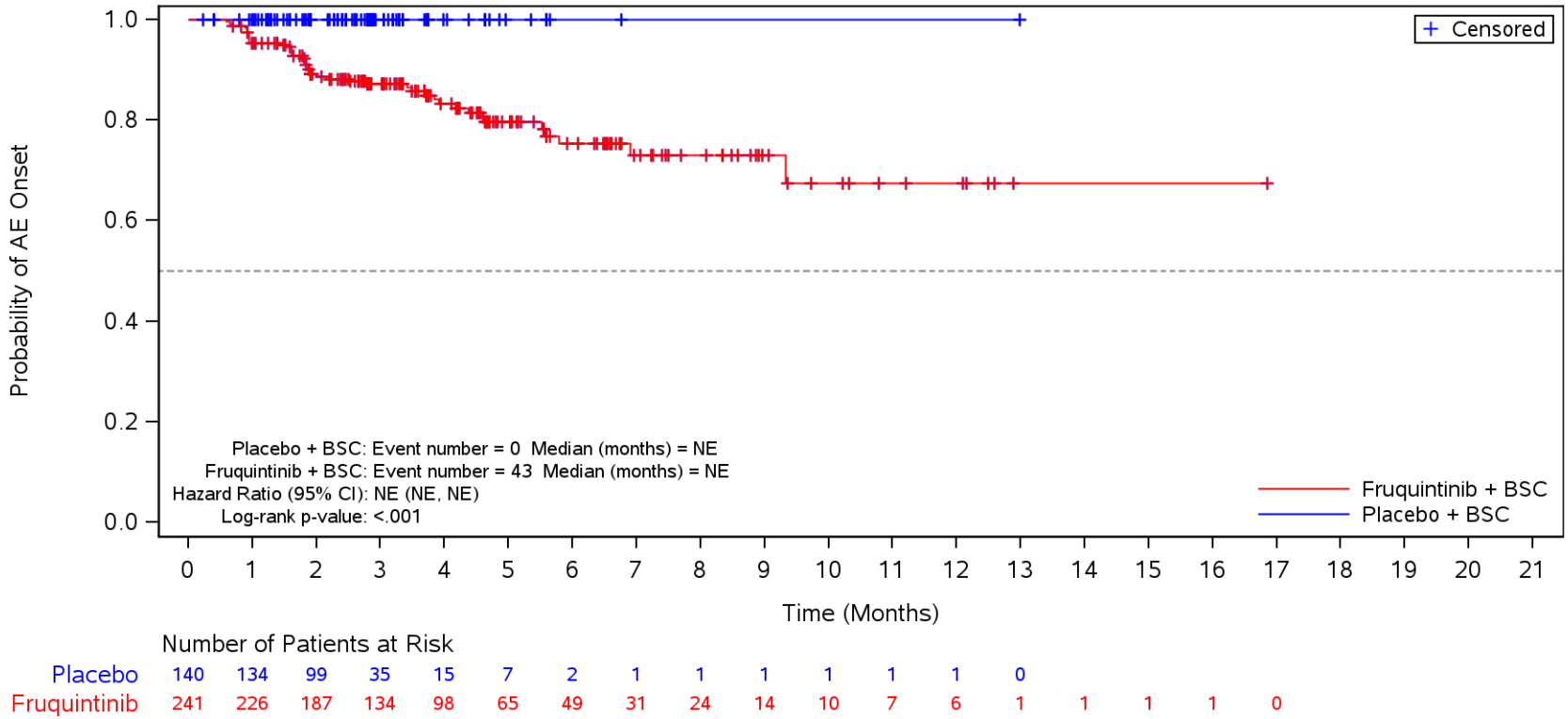
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
Male



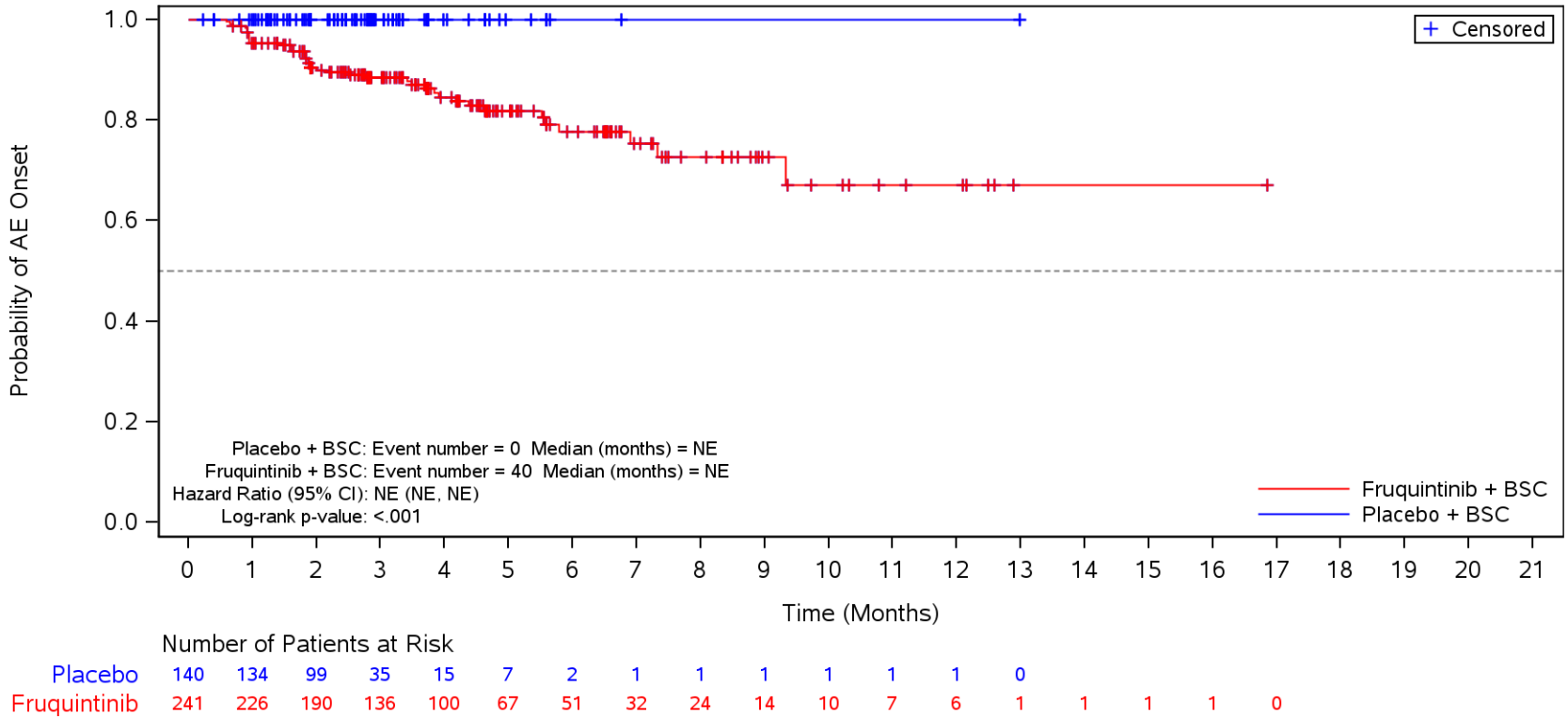
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Endocrine disorders**
Male



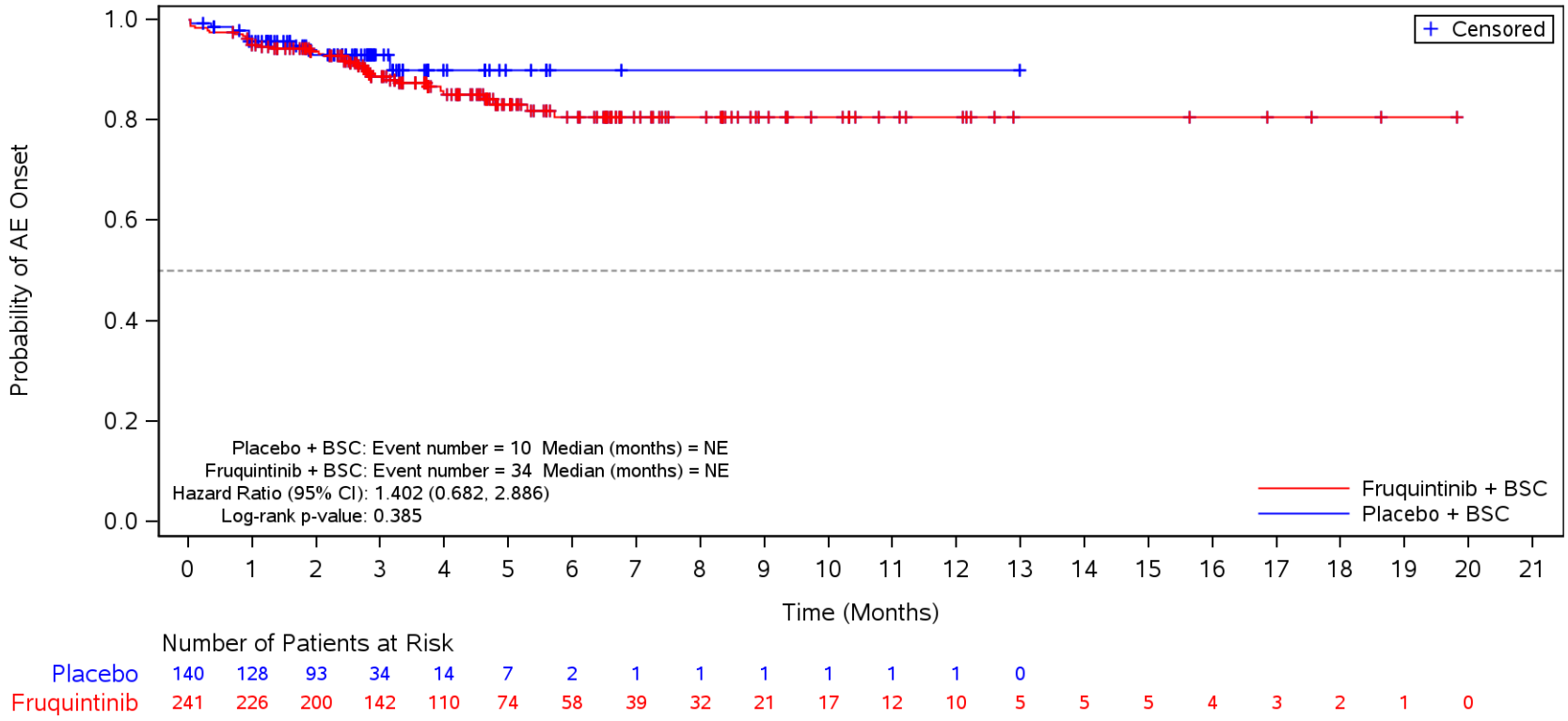
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
Male



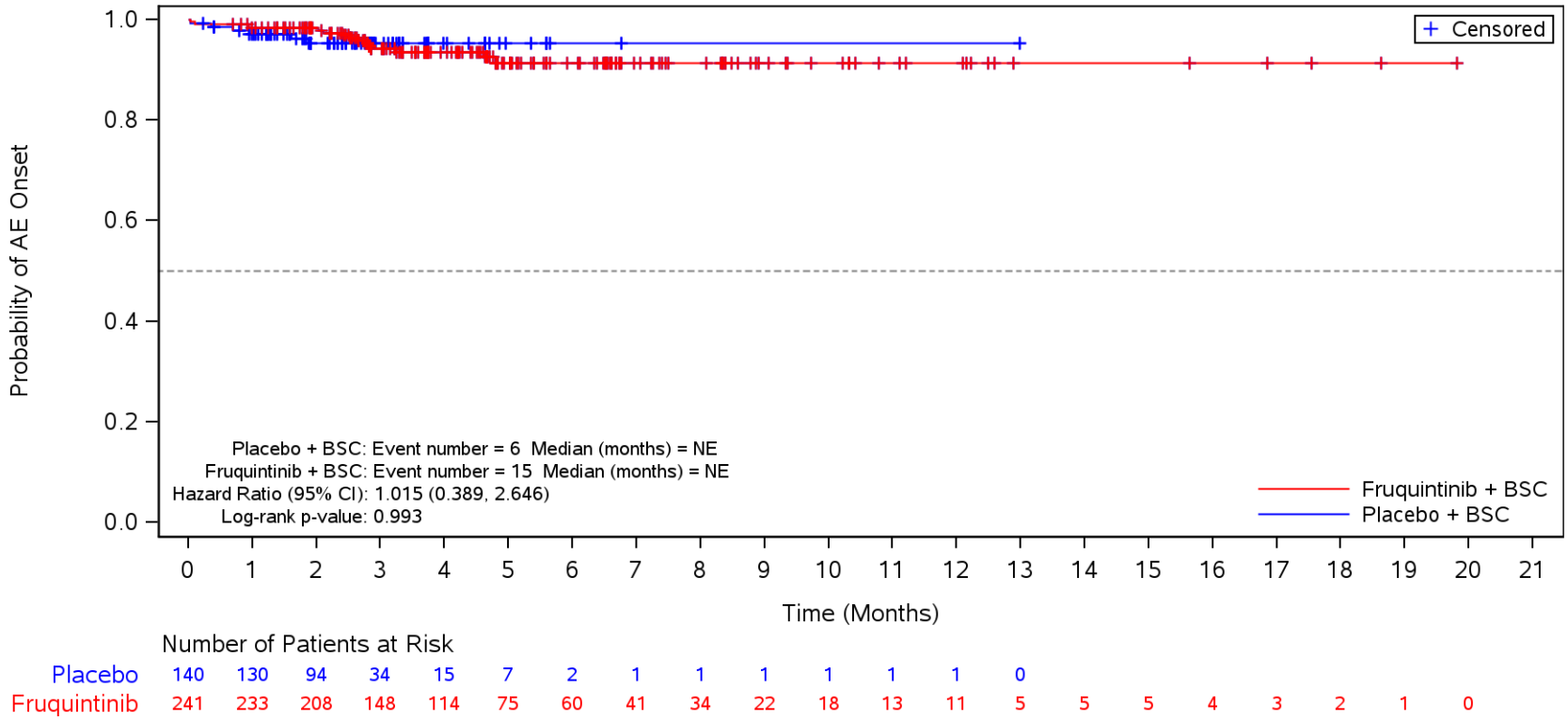
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Psychiatric disorders**
Male



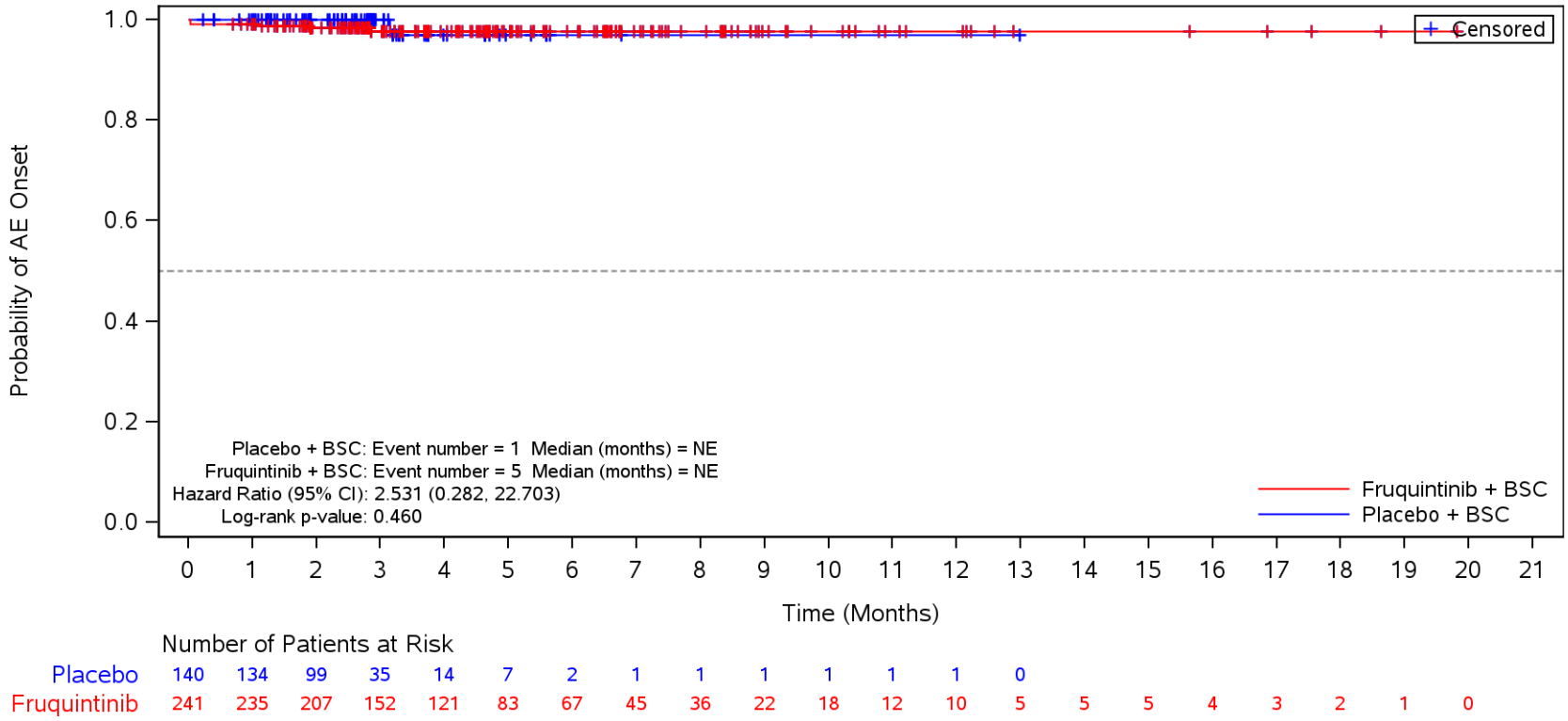
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
Male



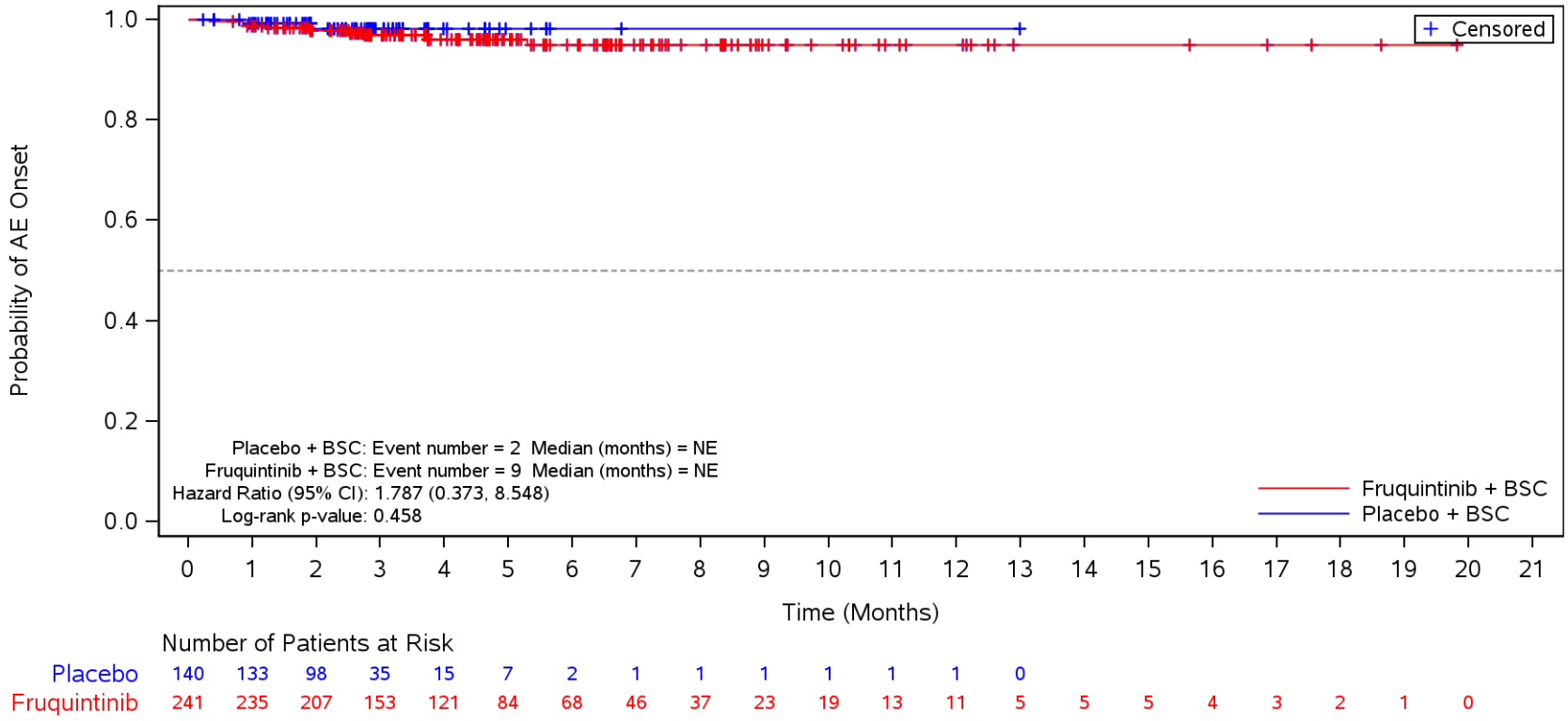
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**
Male



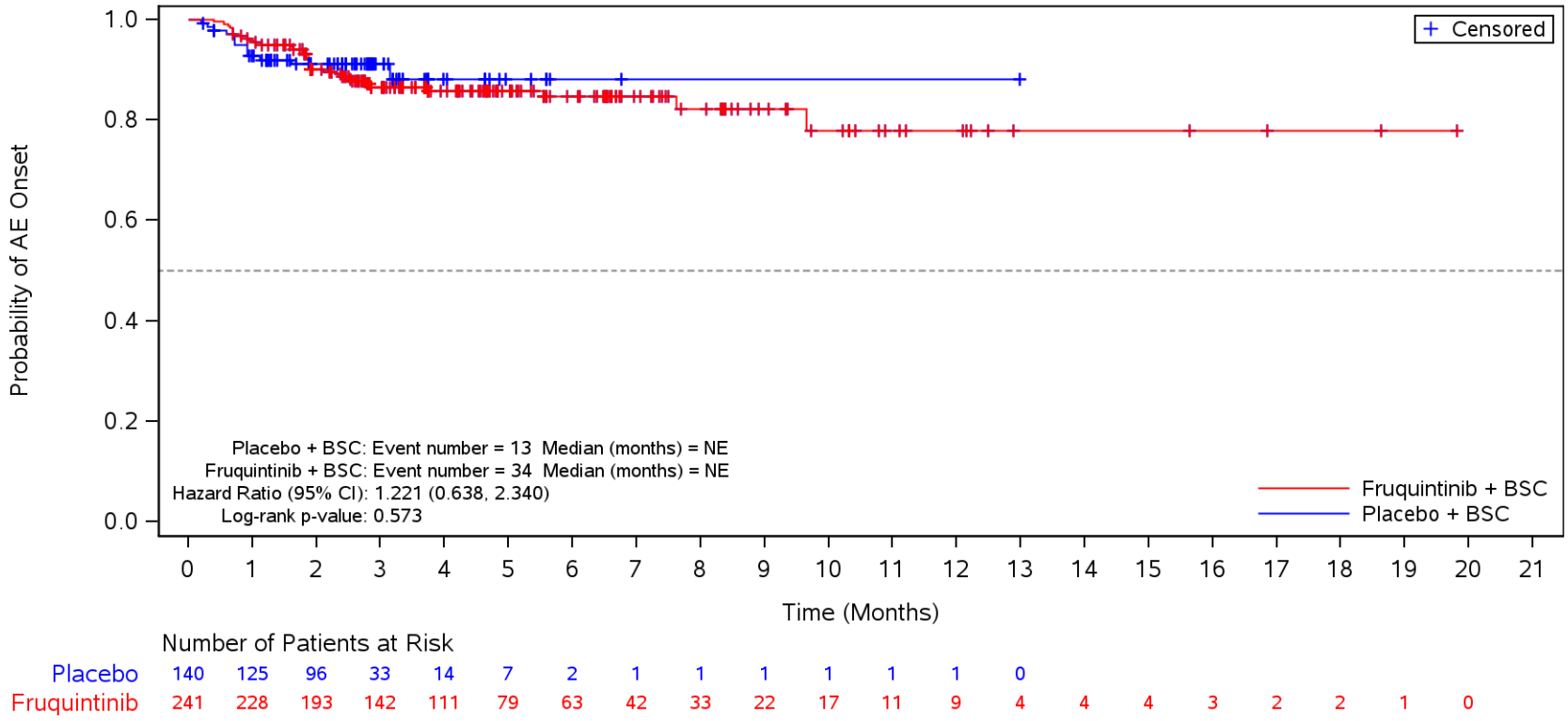
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
Male



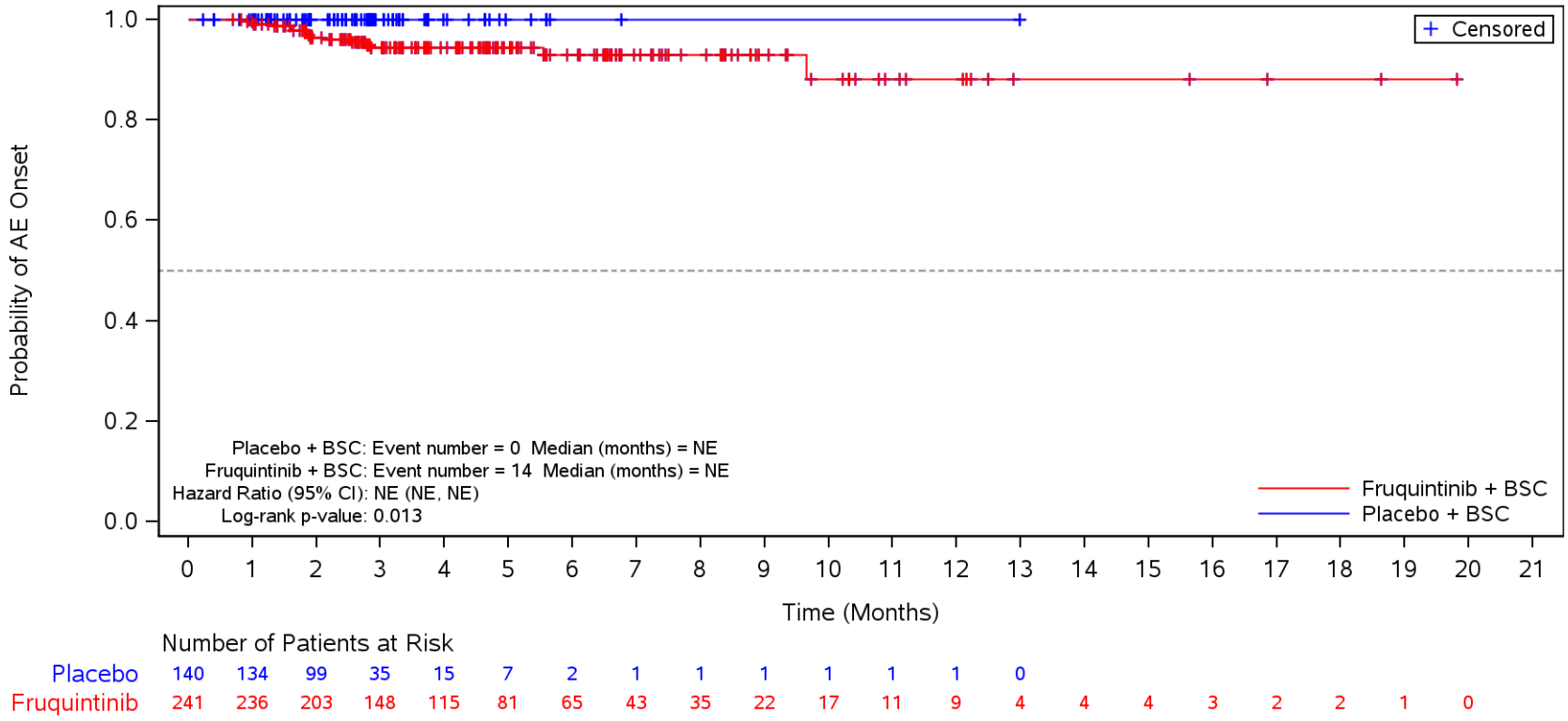
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**
Male



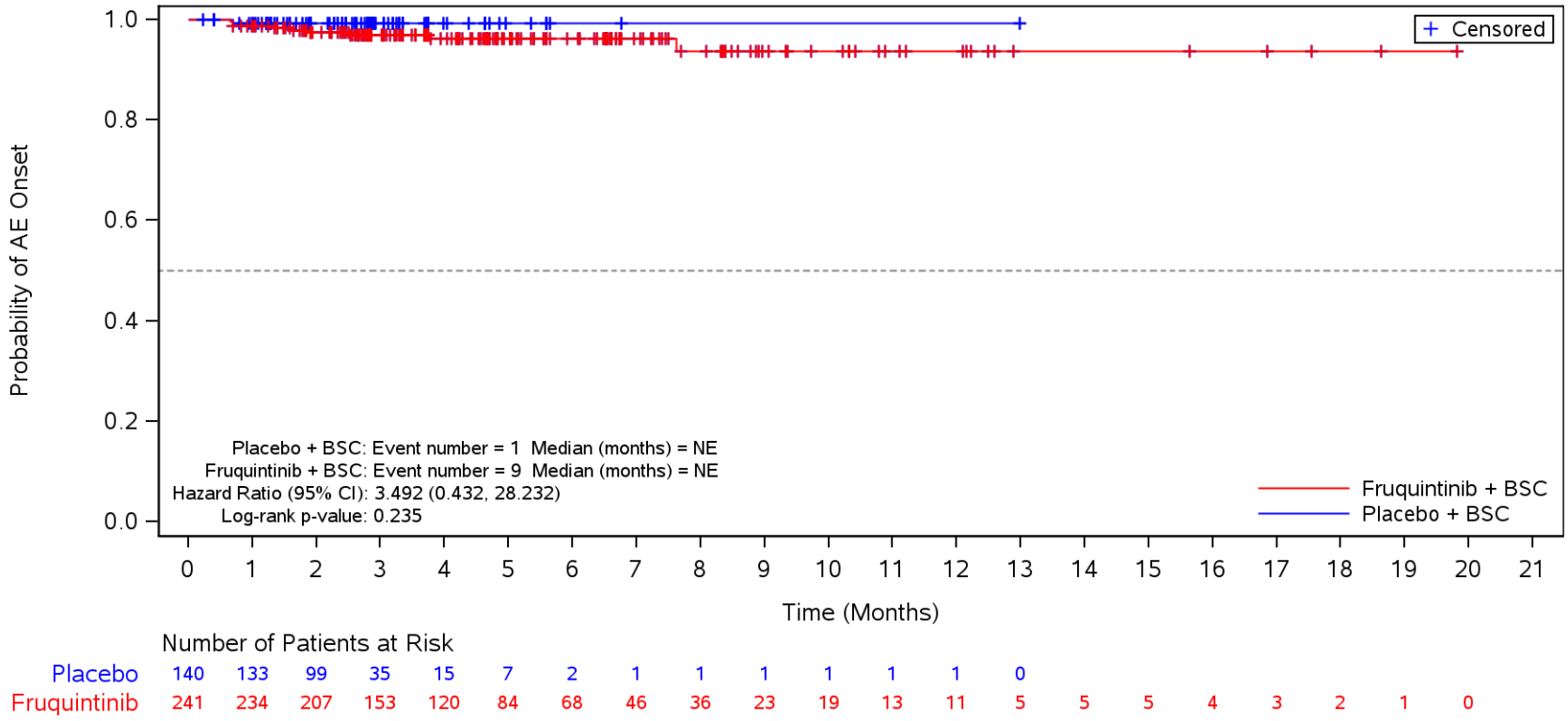
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hypertransaminasaemia**
Male



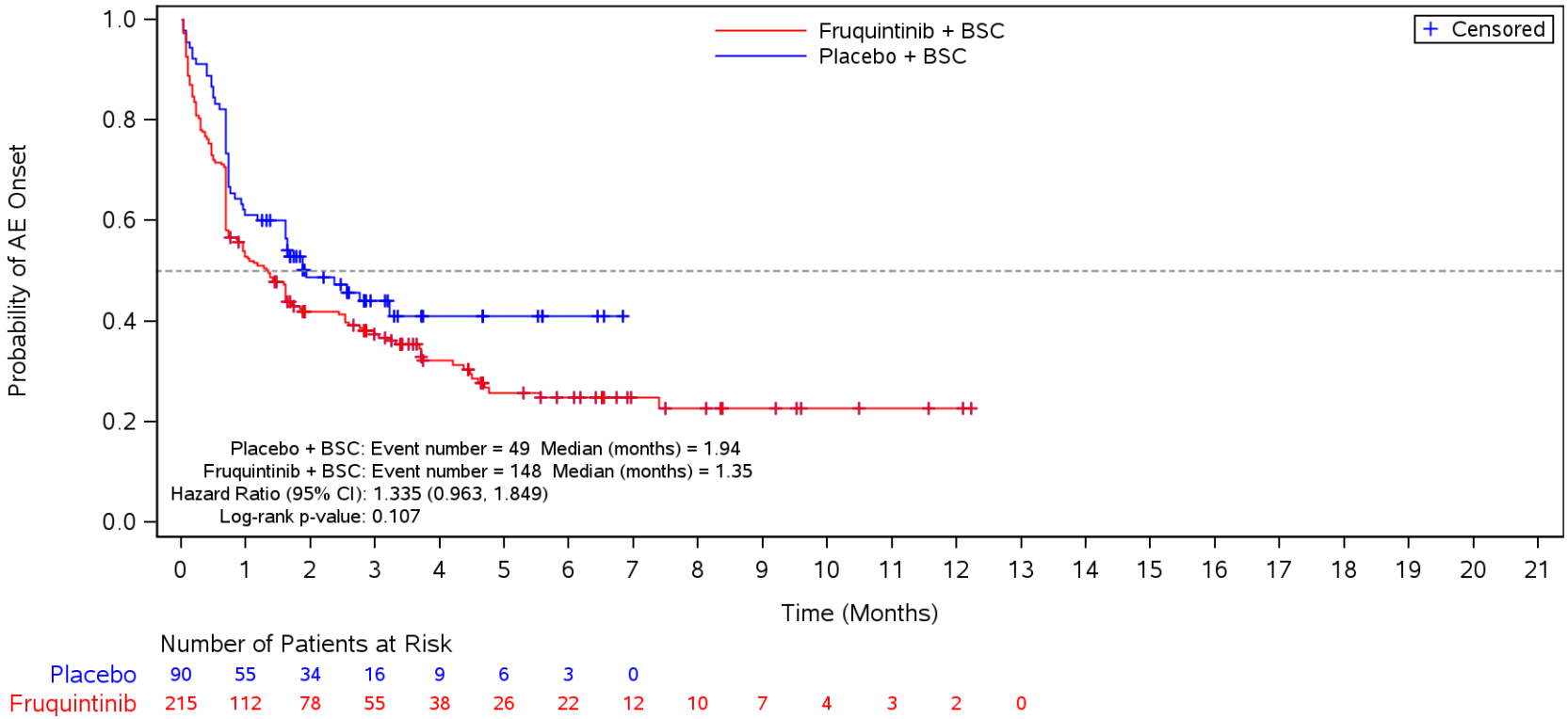
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hyperbilirubinaemia**
Male



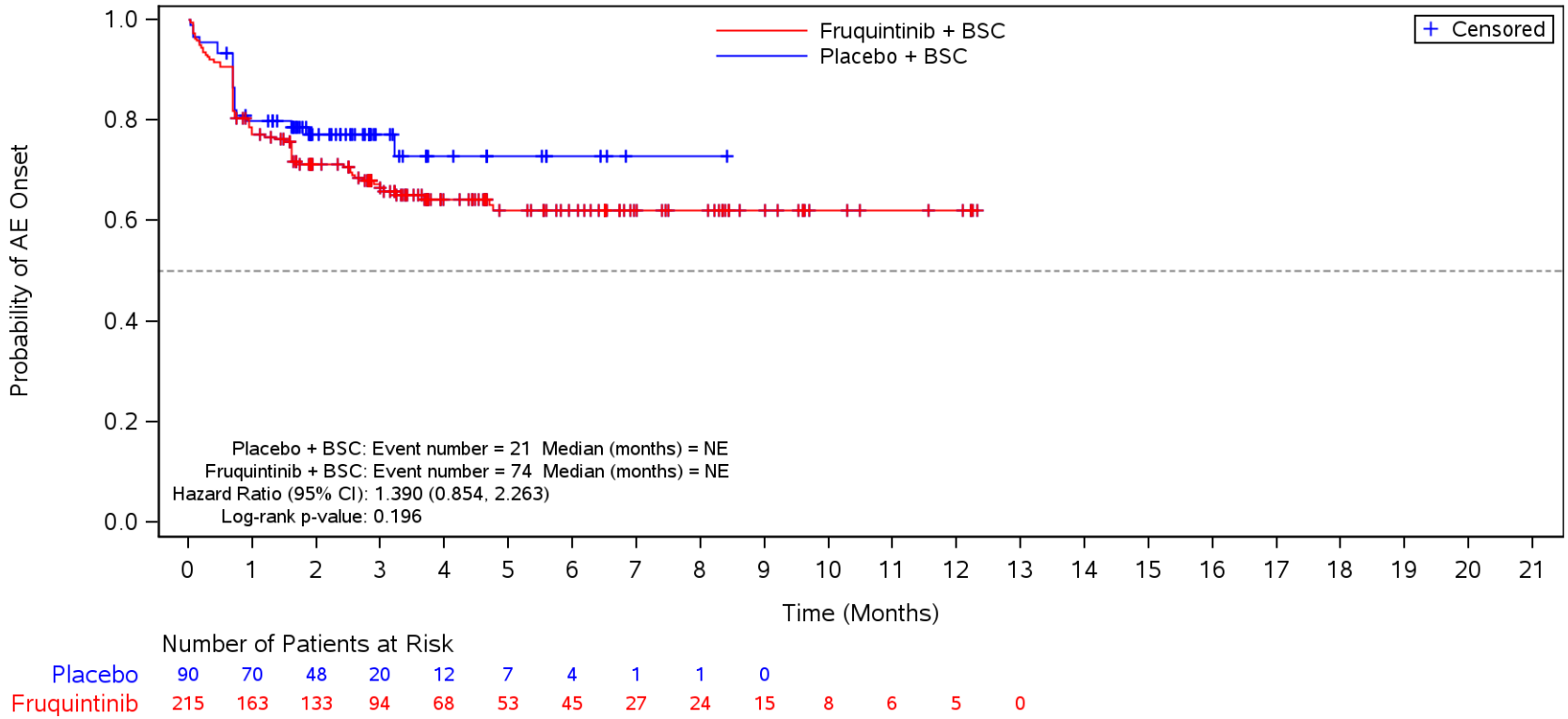
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
Female



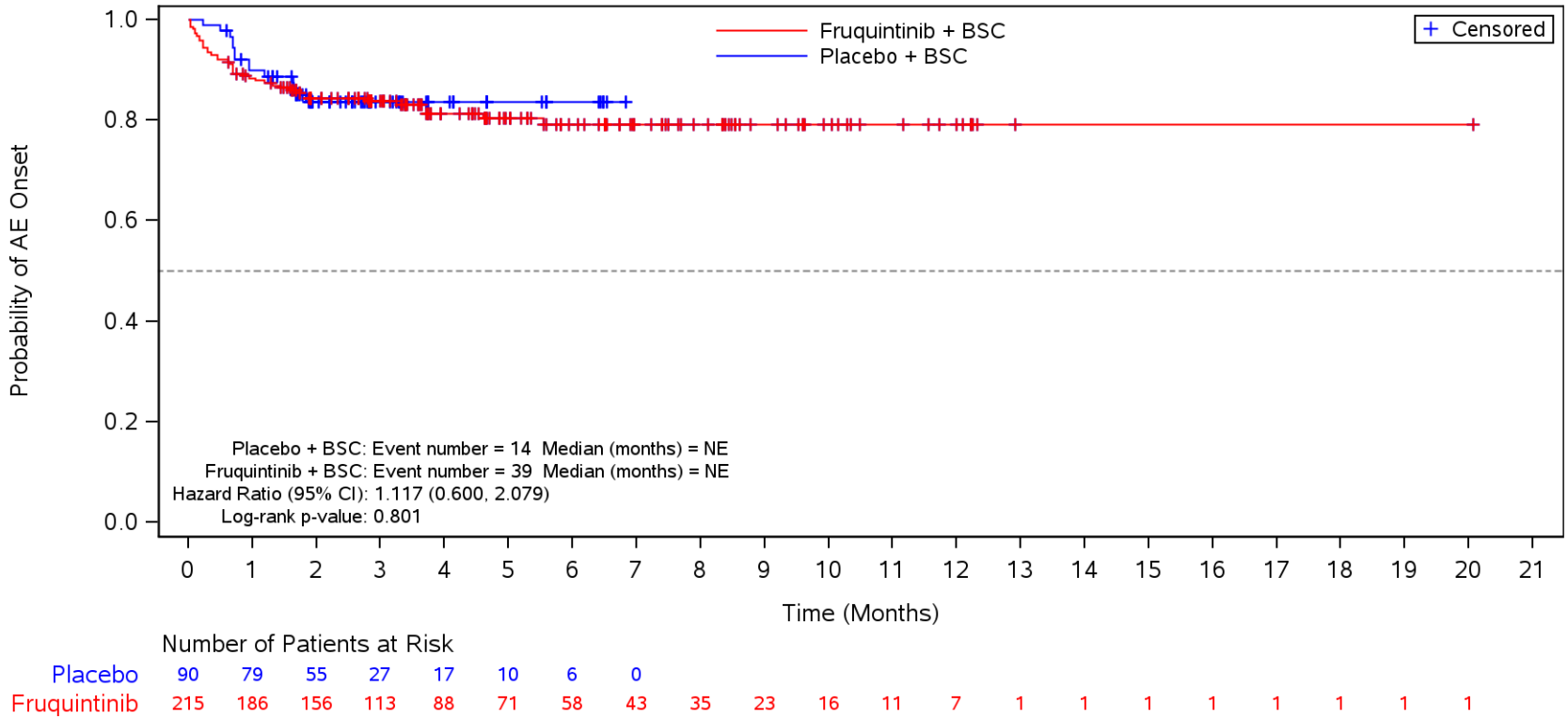
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Female



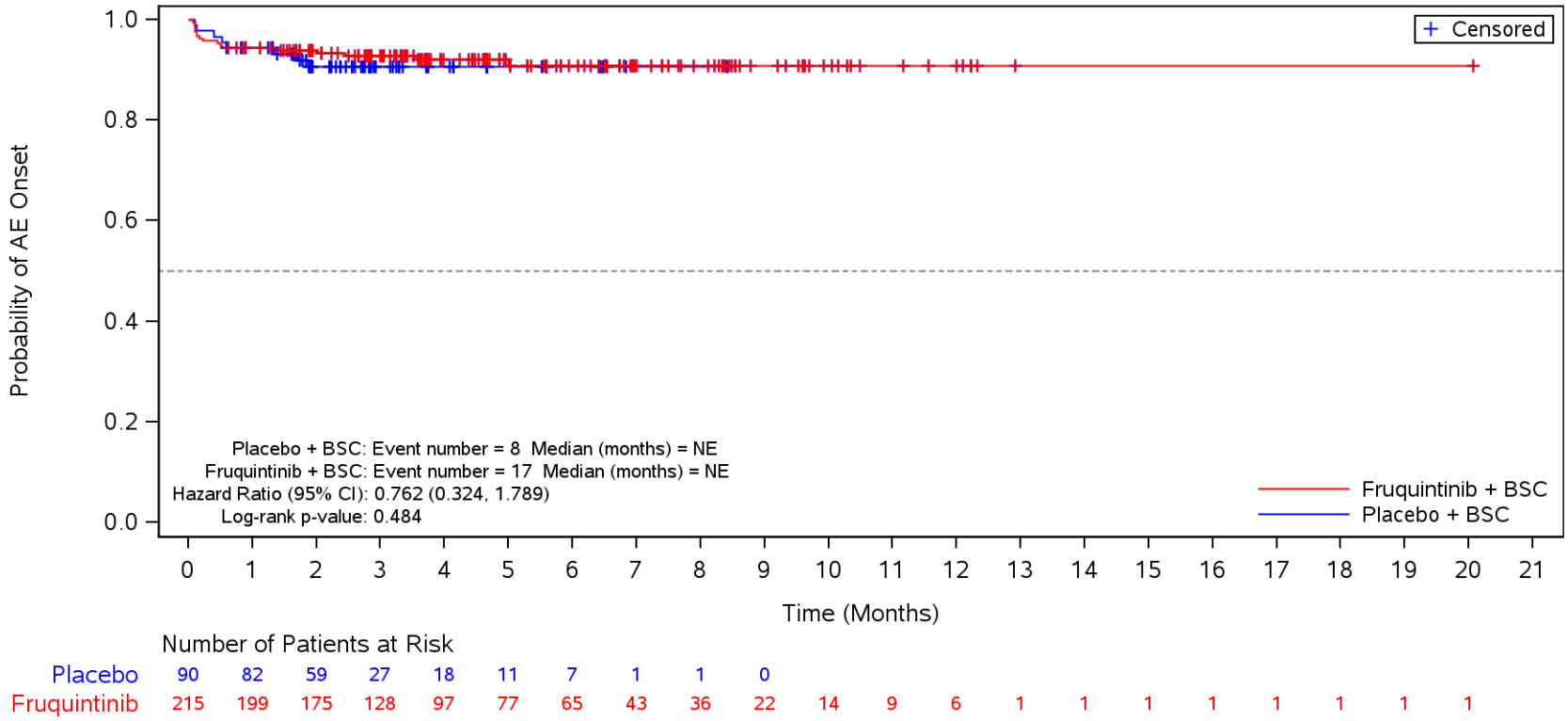
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
Female



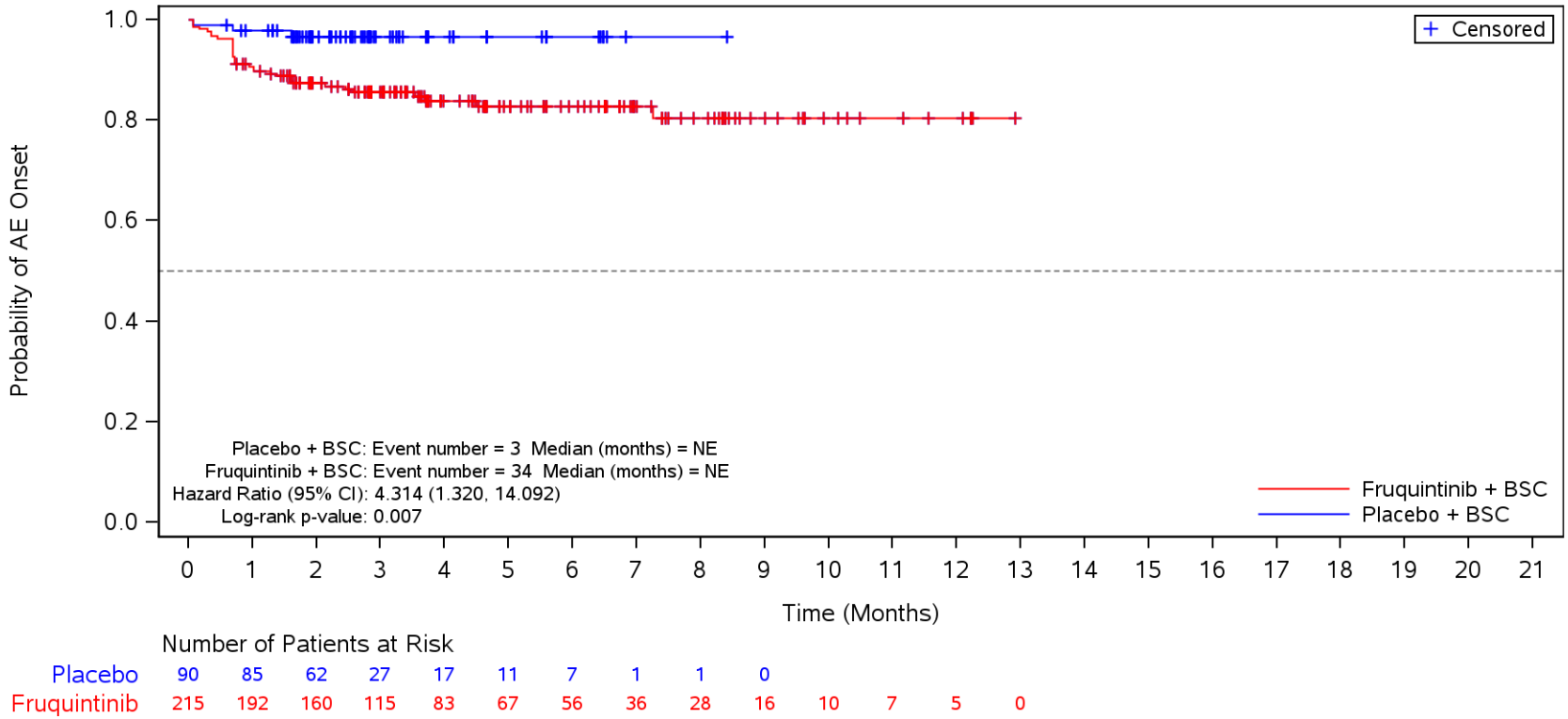
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
Female



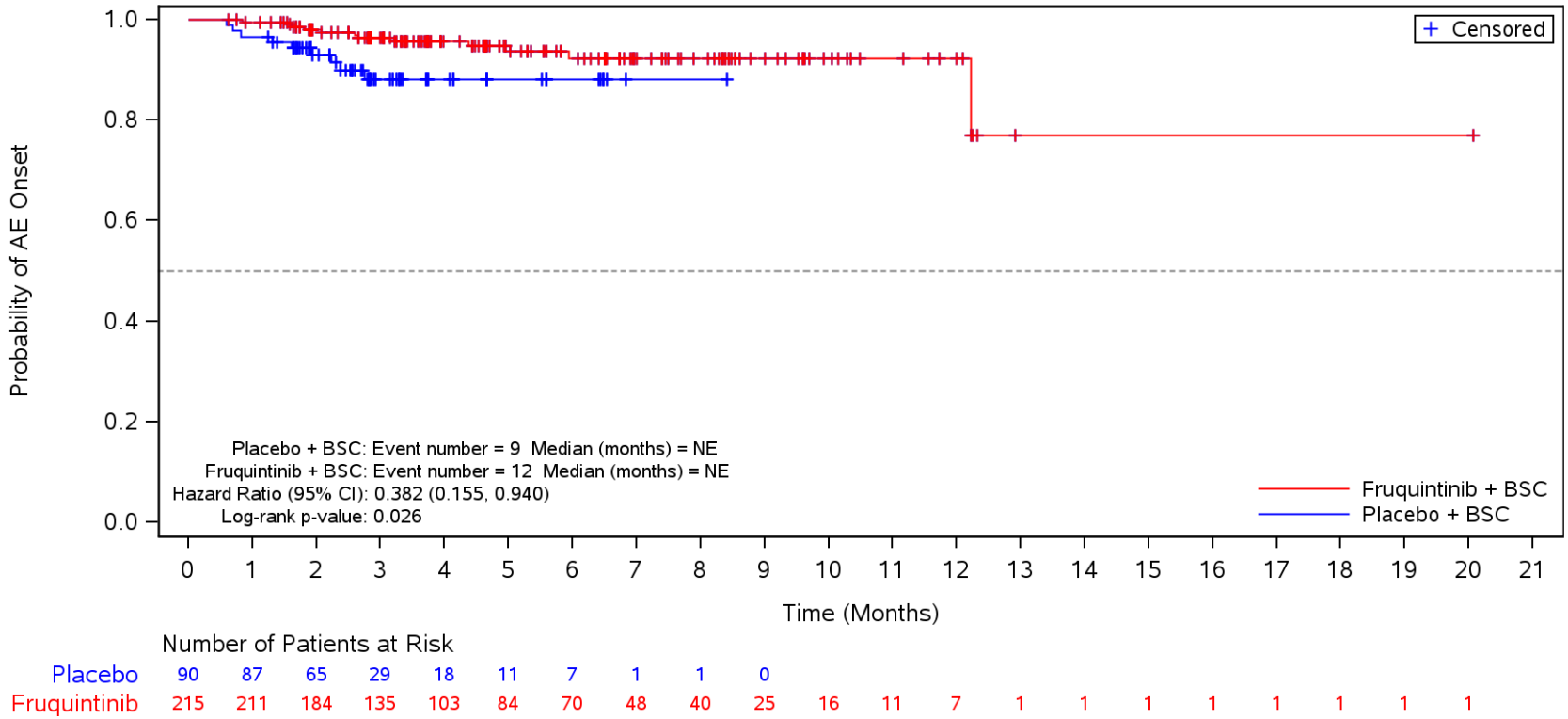
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
Female



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Female

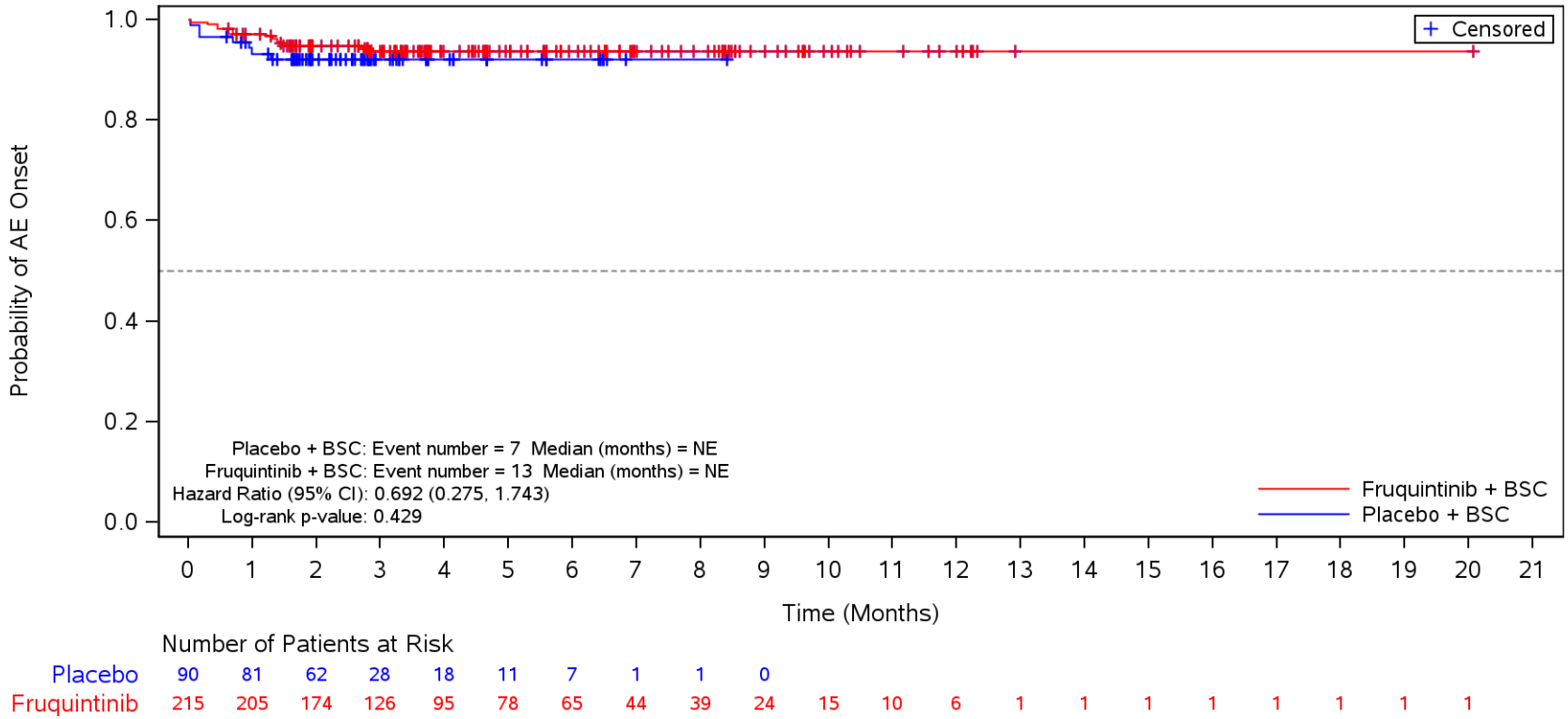


Number of Patients at Risk

Placebo	90	87	65	29	18	11	7	1	1	0											
Fruquintinib	215	211	184	135	103	84	70	48	40	25	16	11	7	1	1	1	1	1	1	1	1

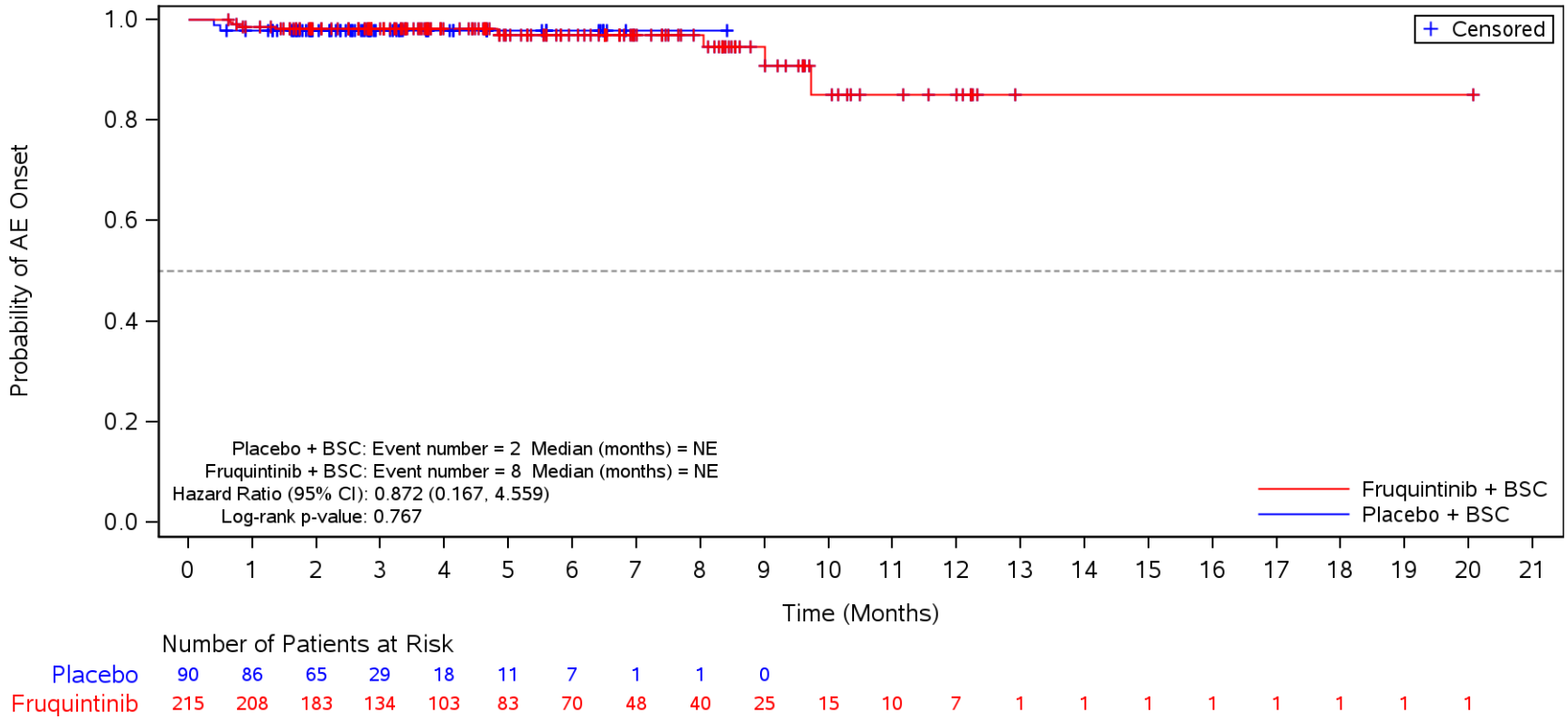
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
Female



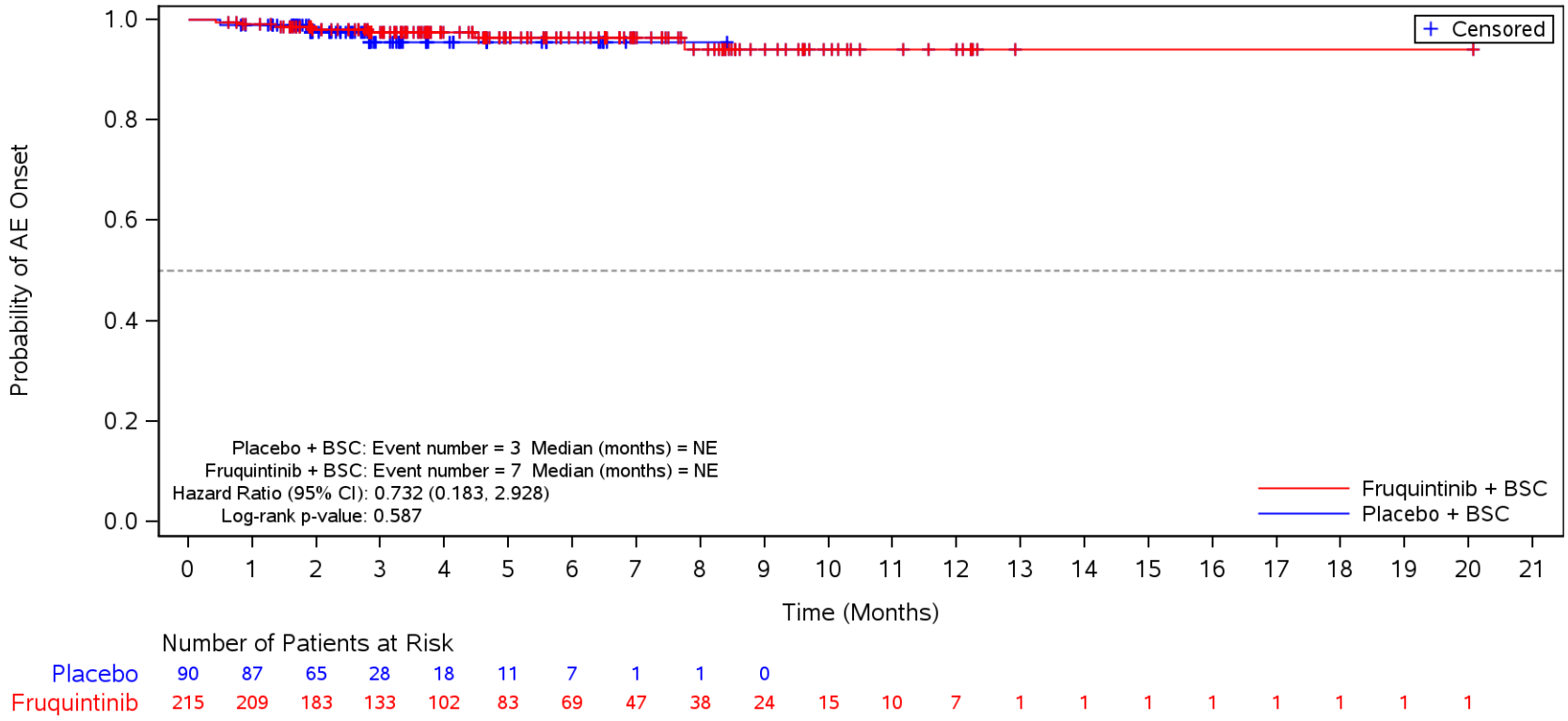
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**
Female



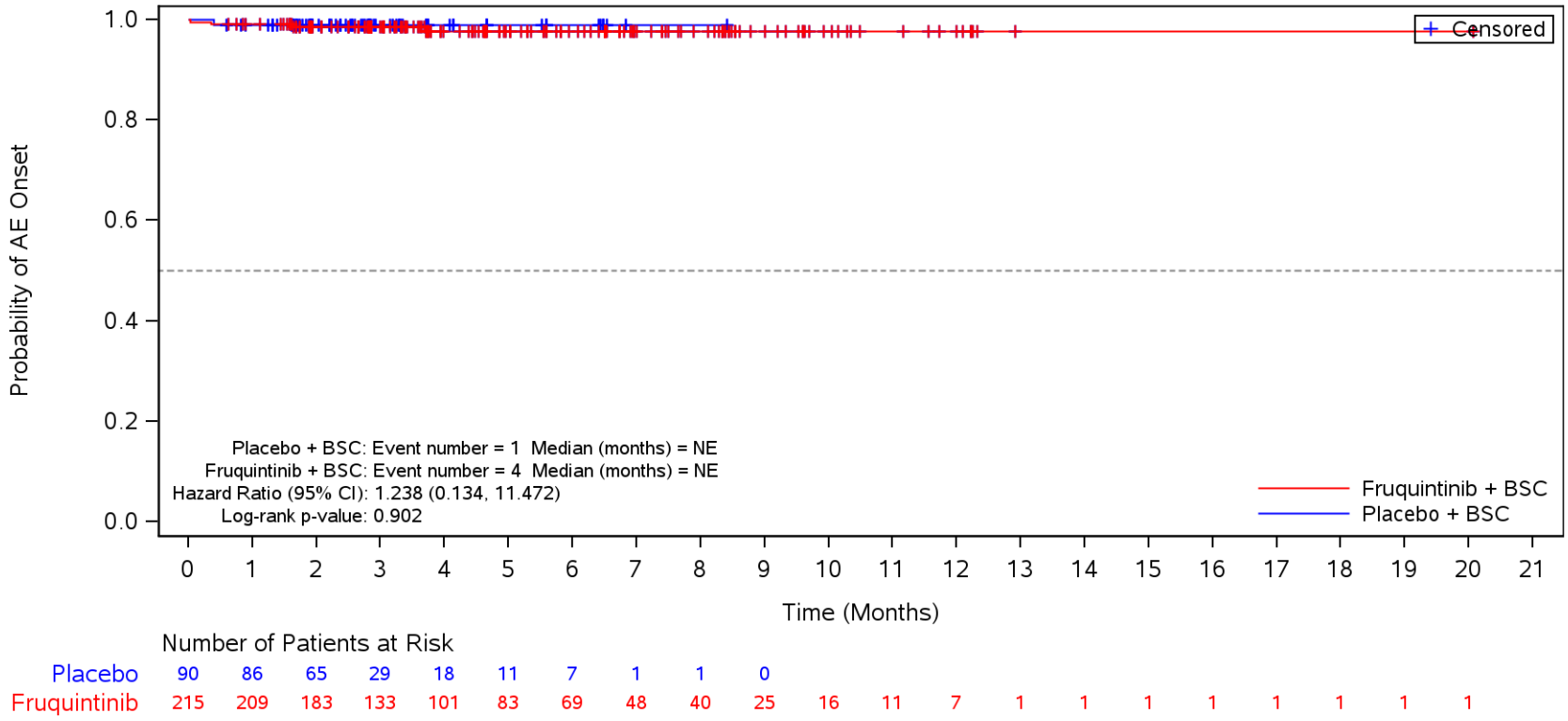
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Condition aggravated**
Female



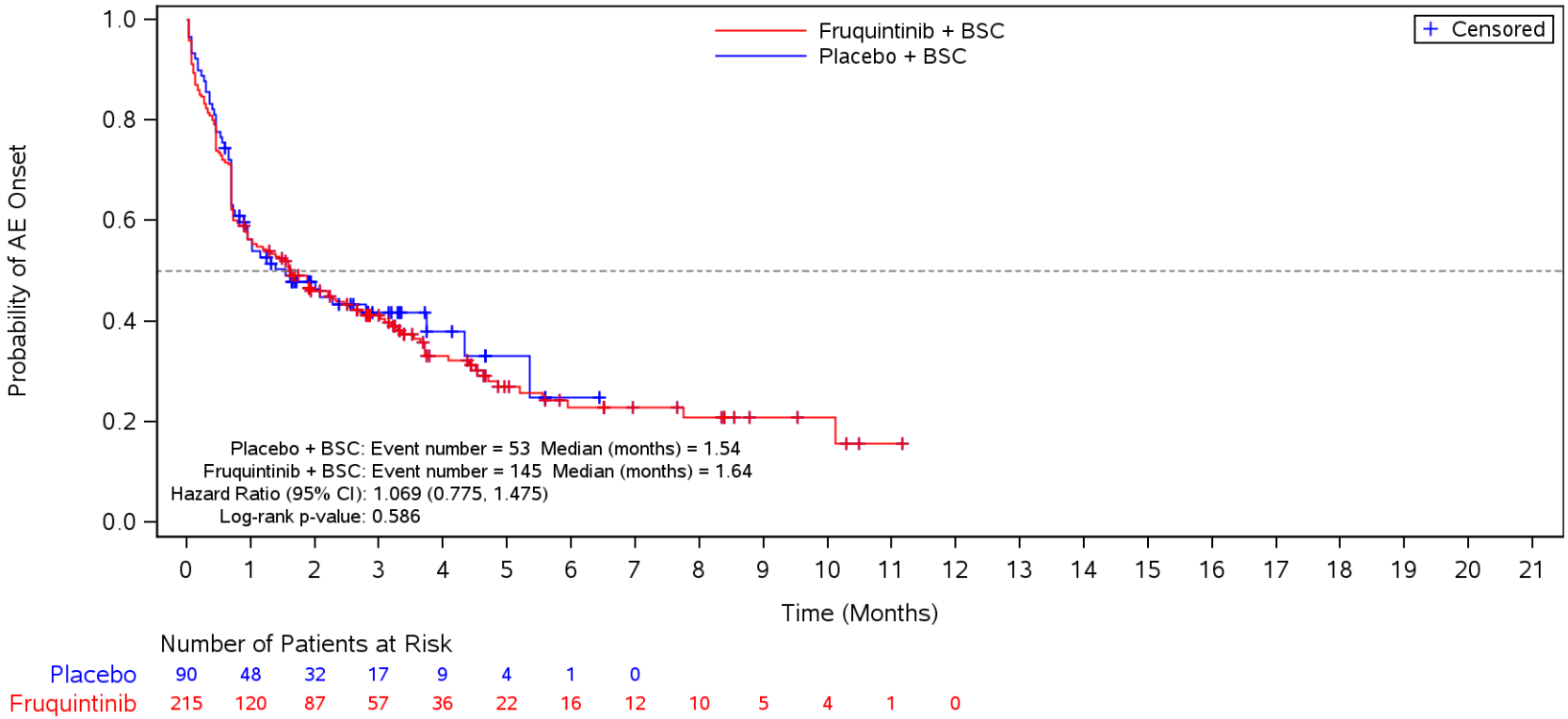
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**
Female



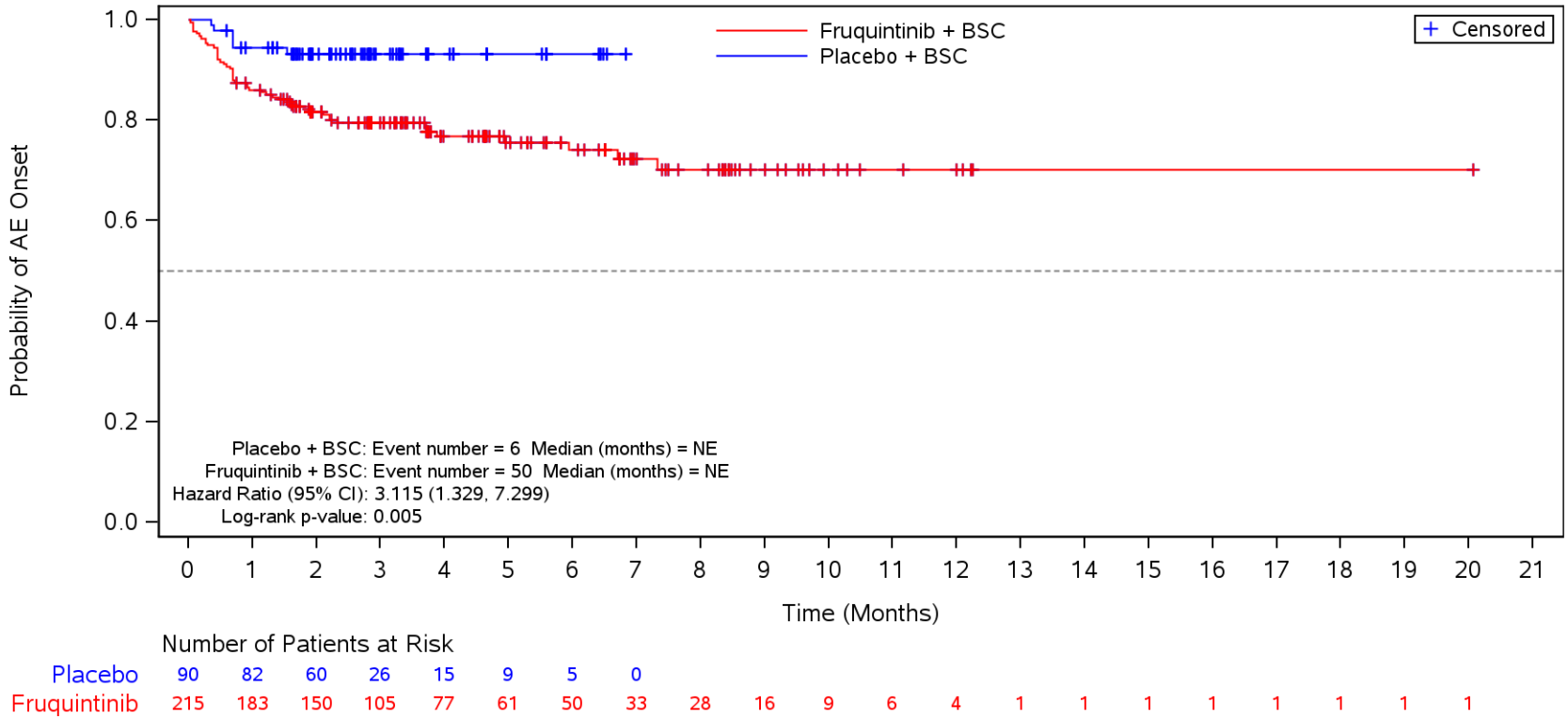
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
Female



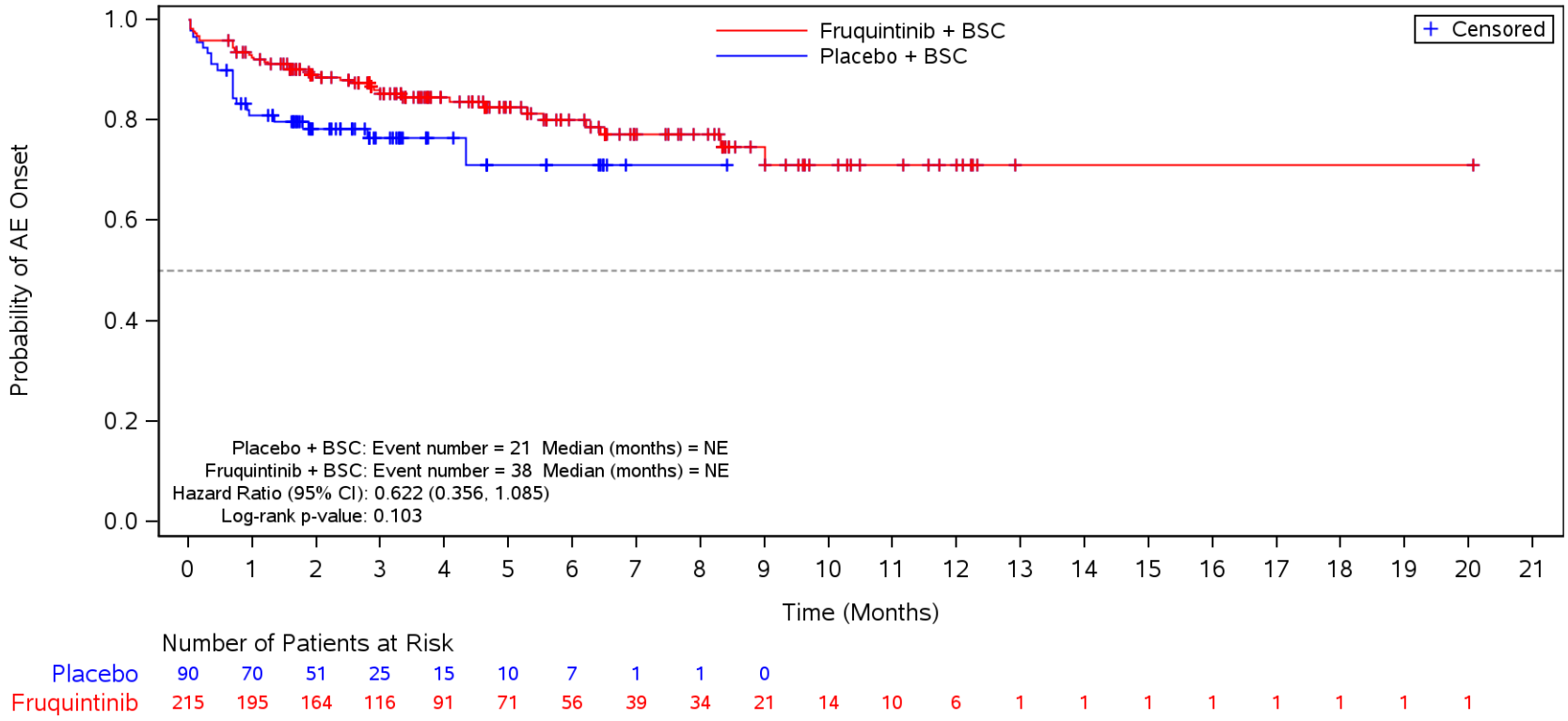
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
Female



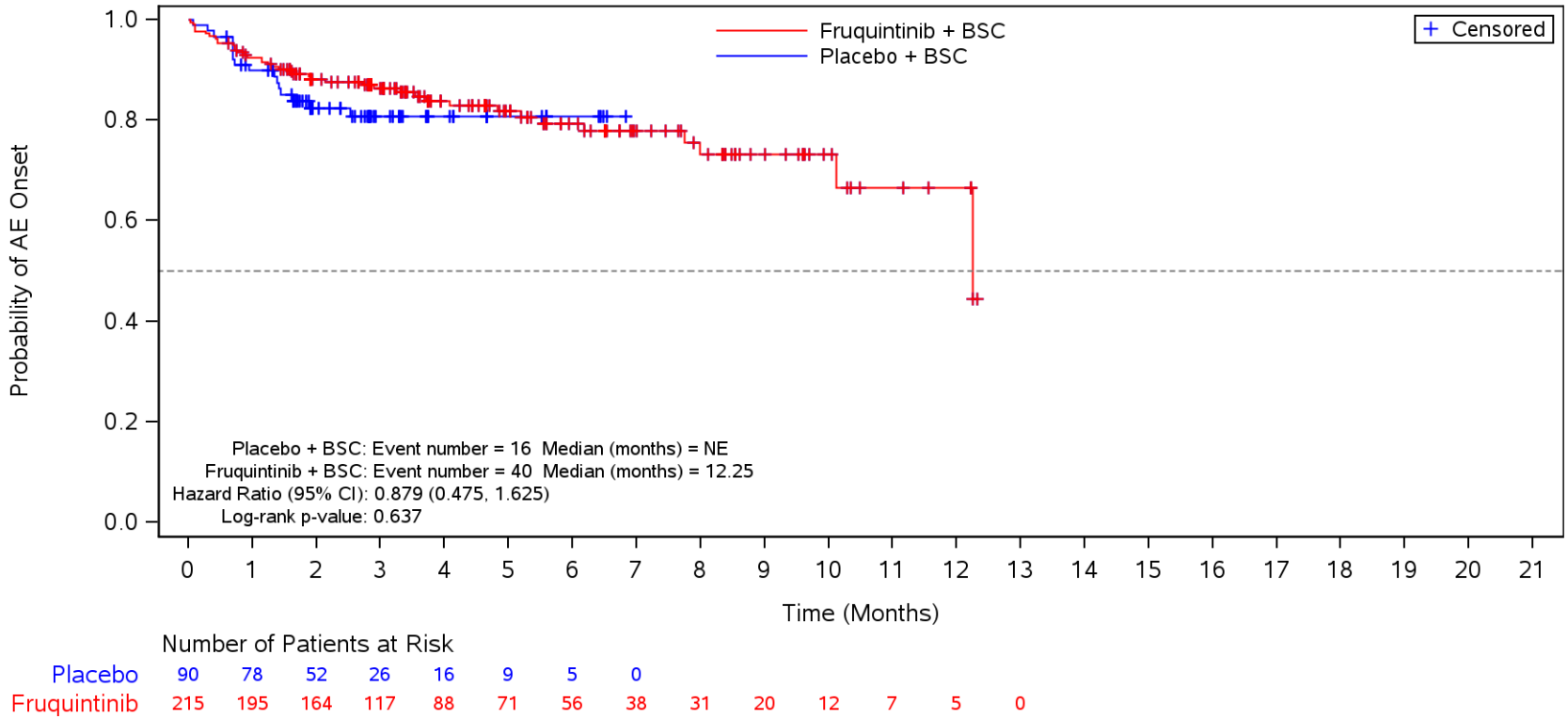
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
Female



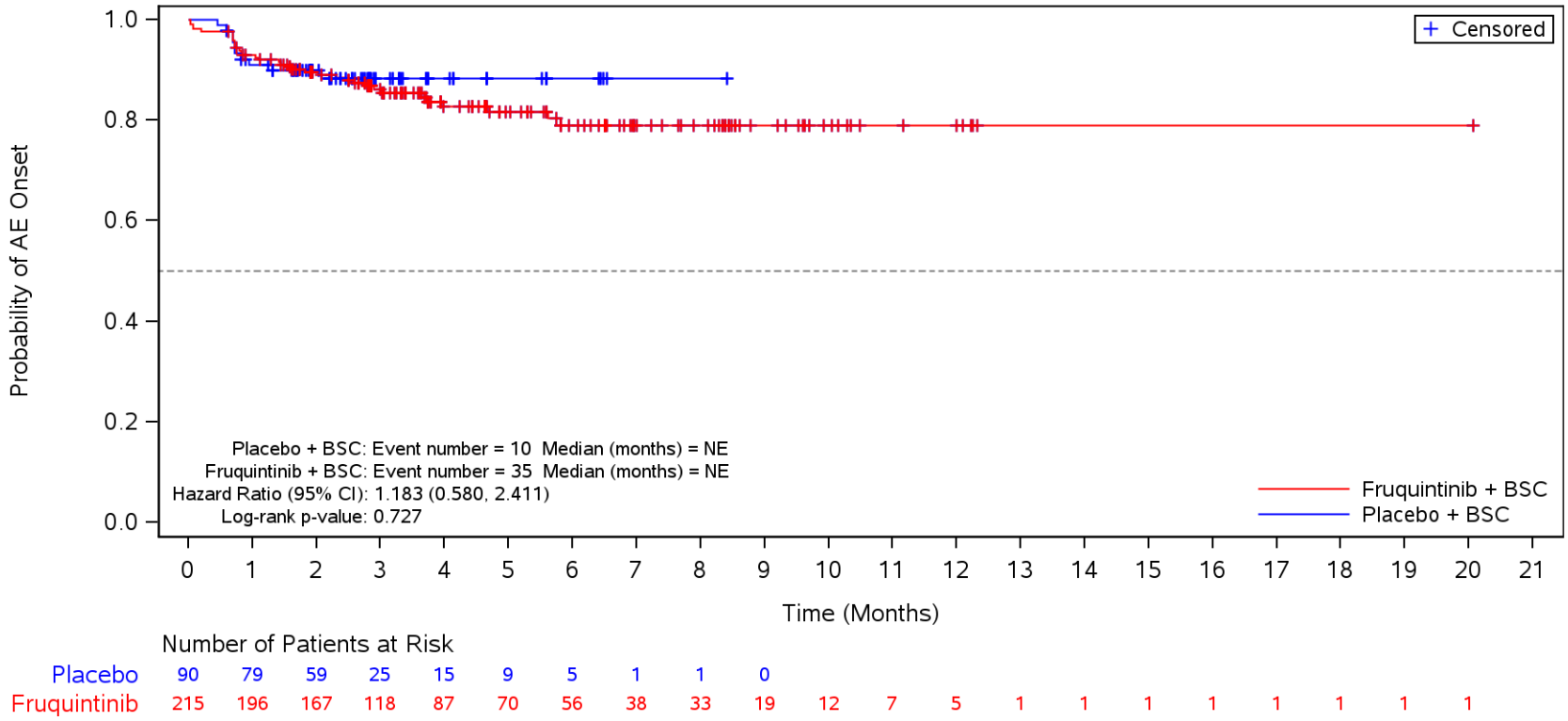
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
Female



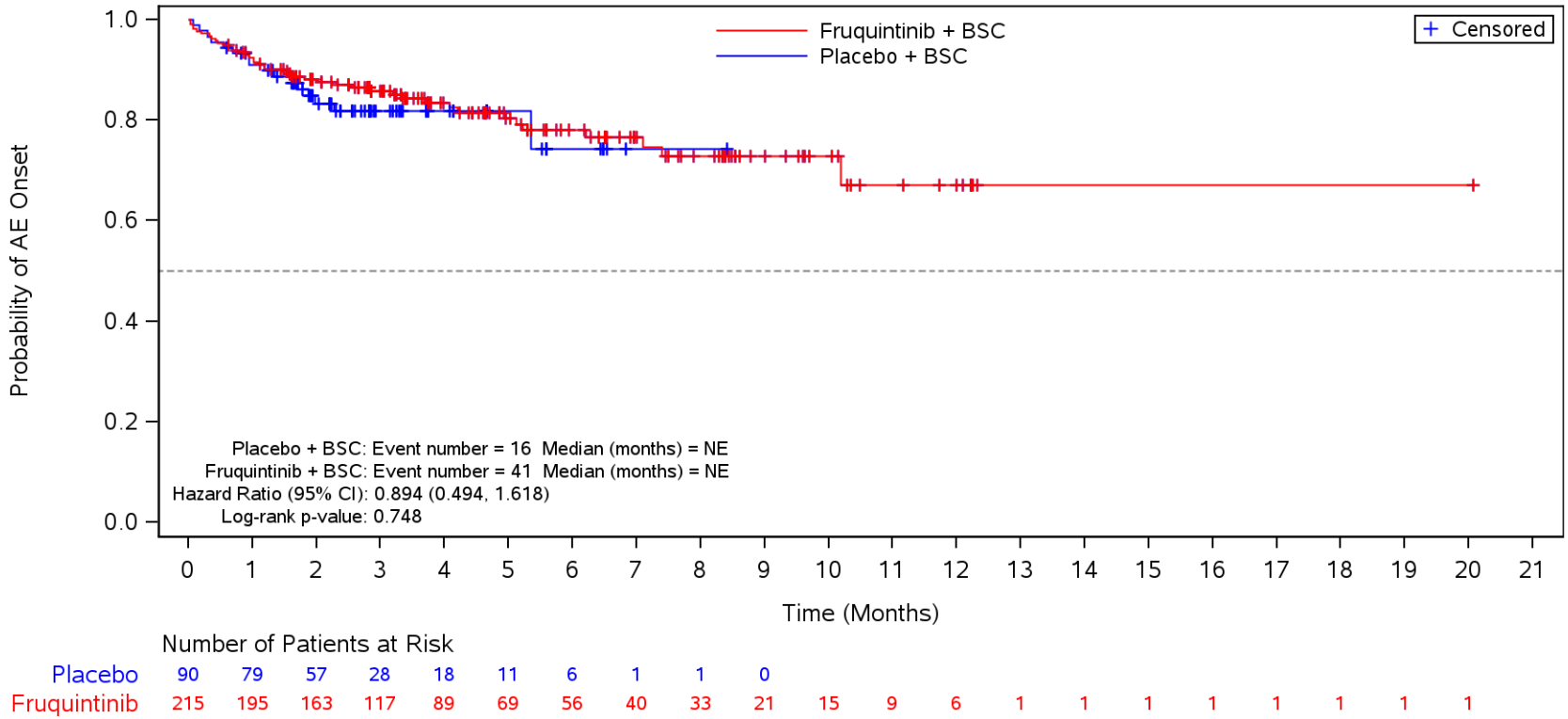
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
Female



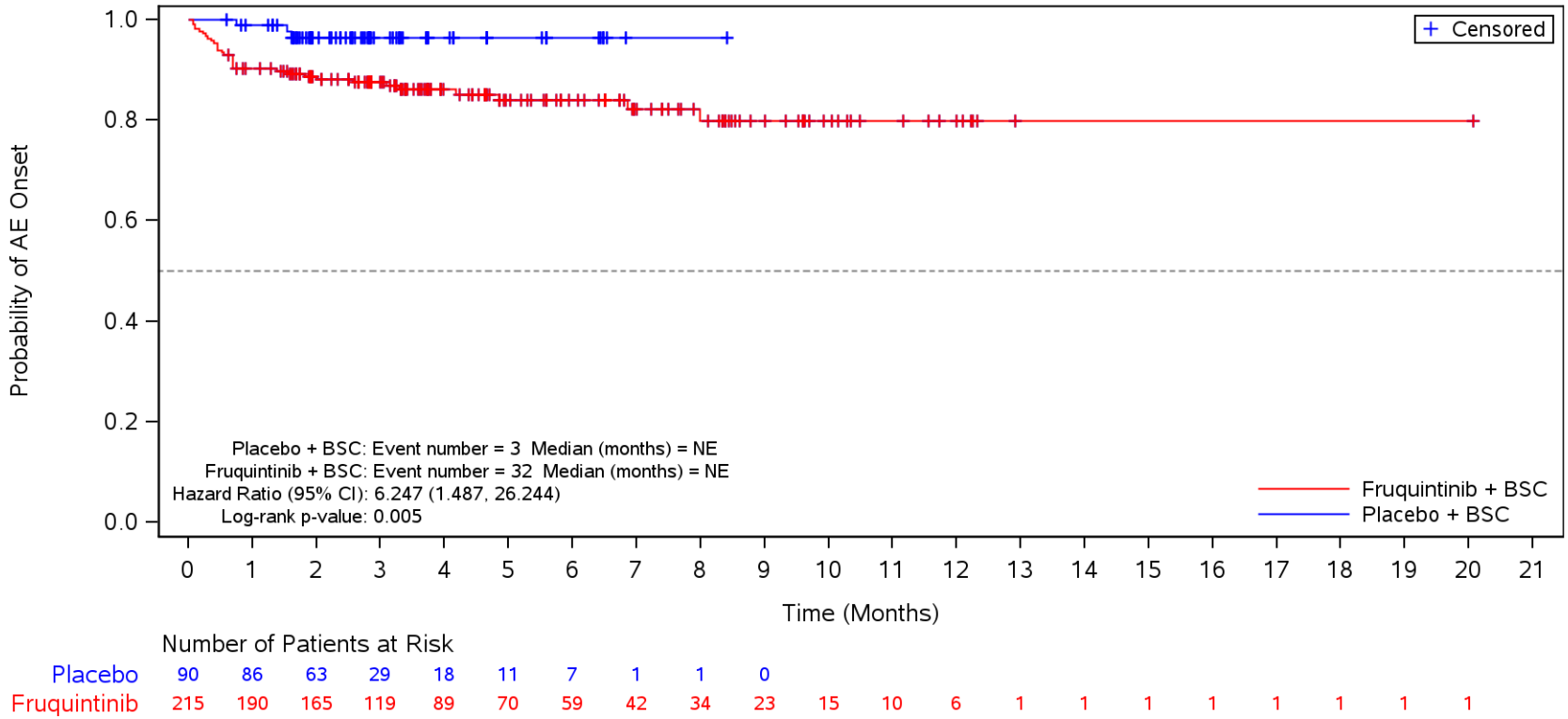
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
Female



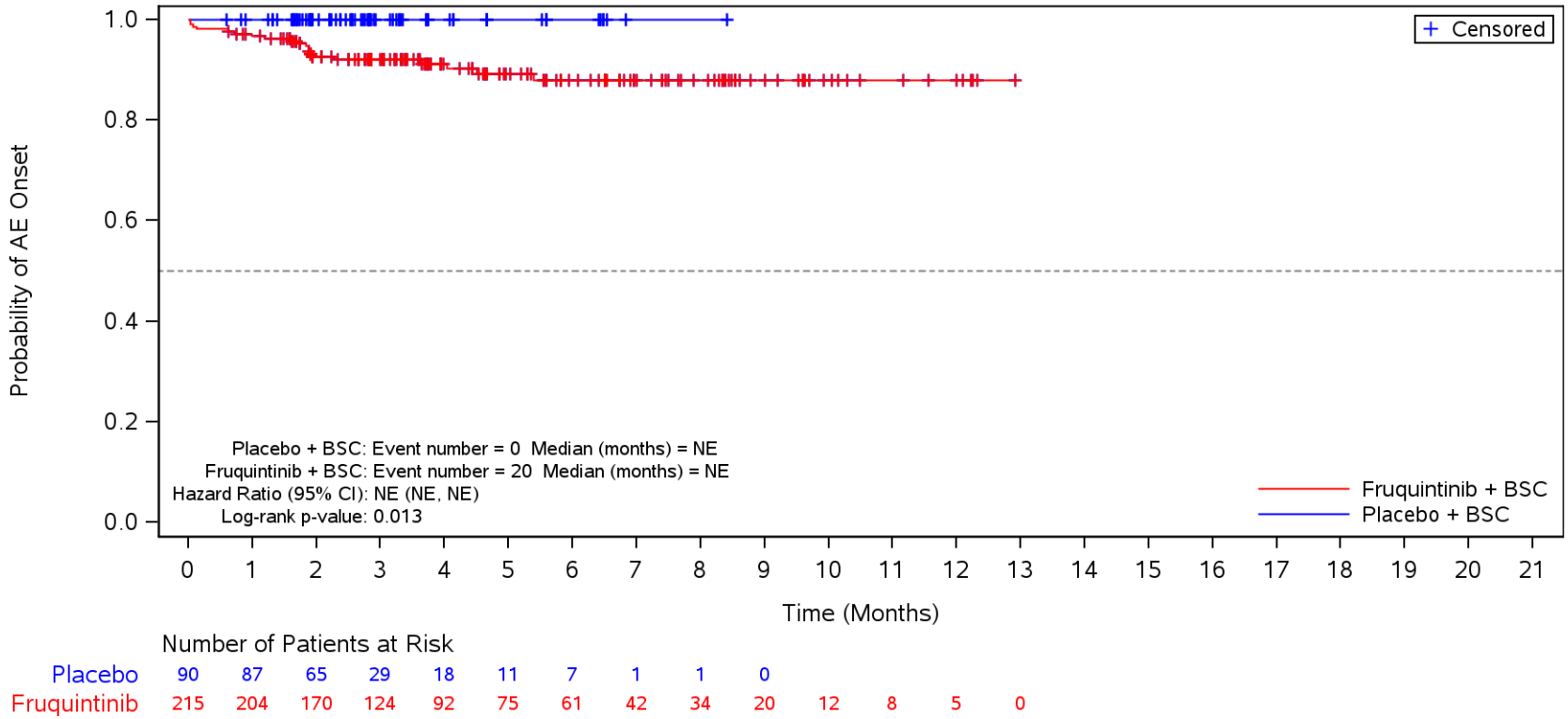
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
Female



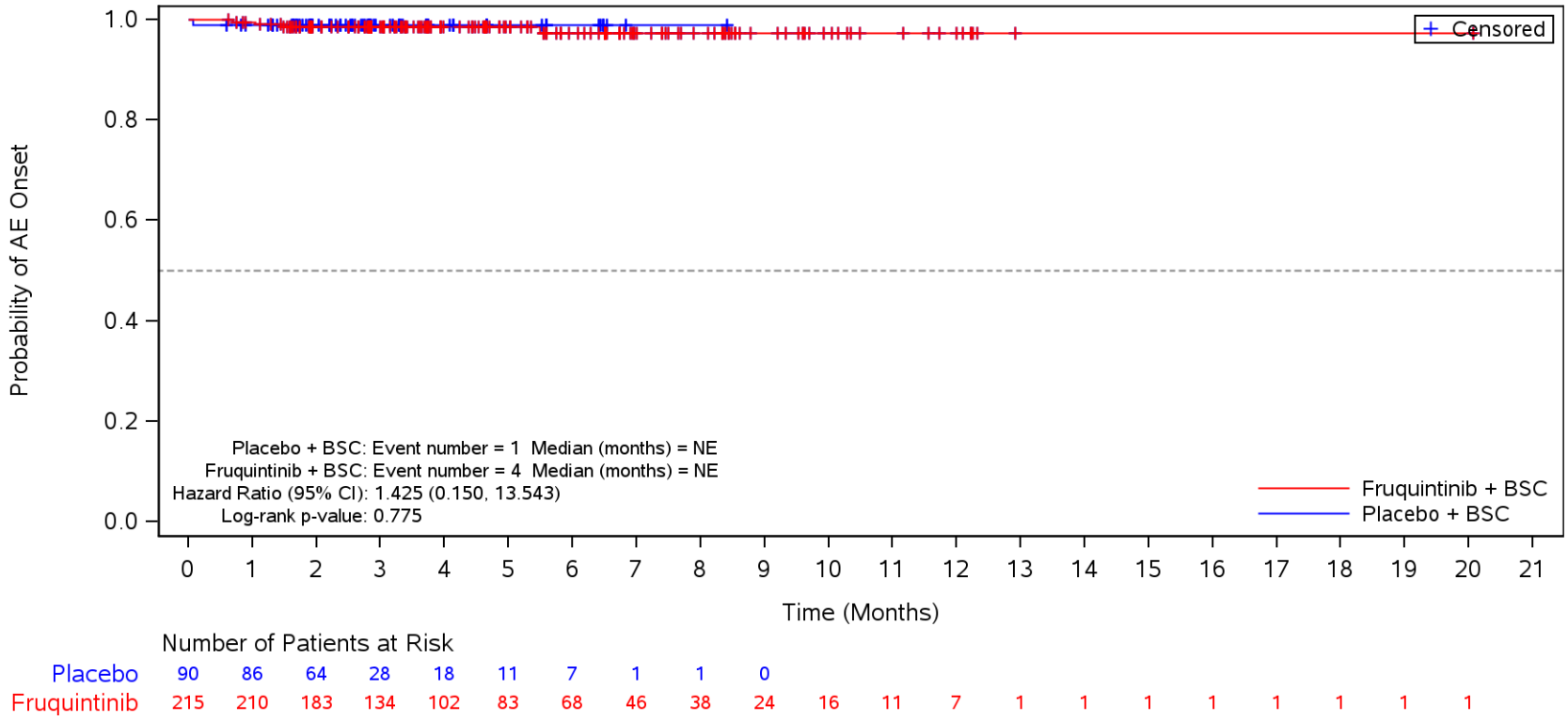
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
Female



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
Female

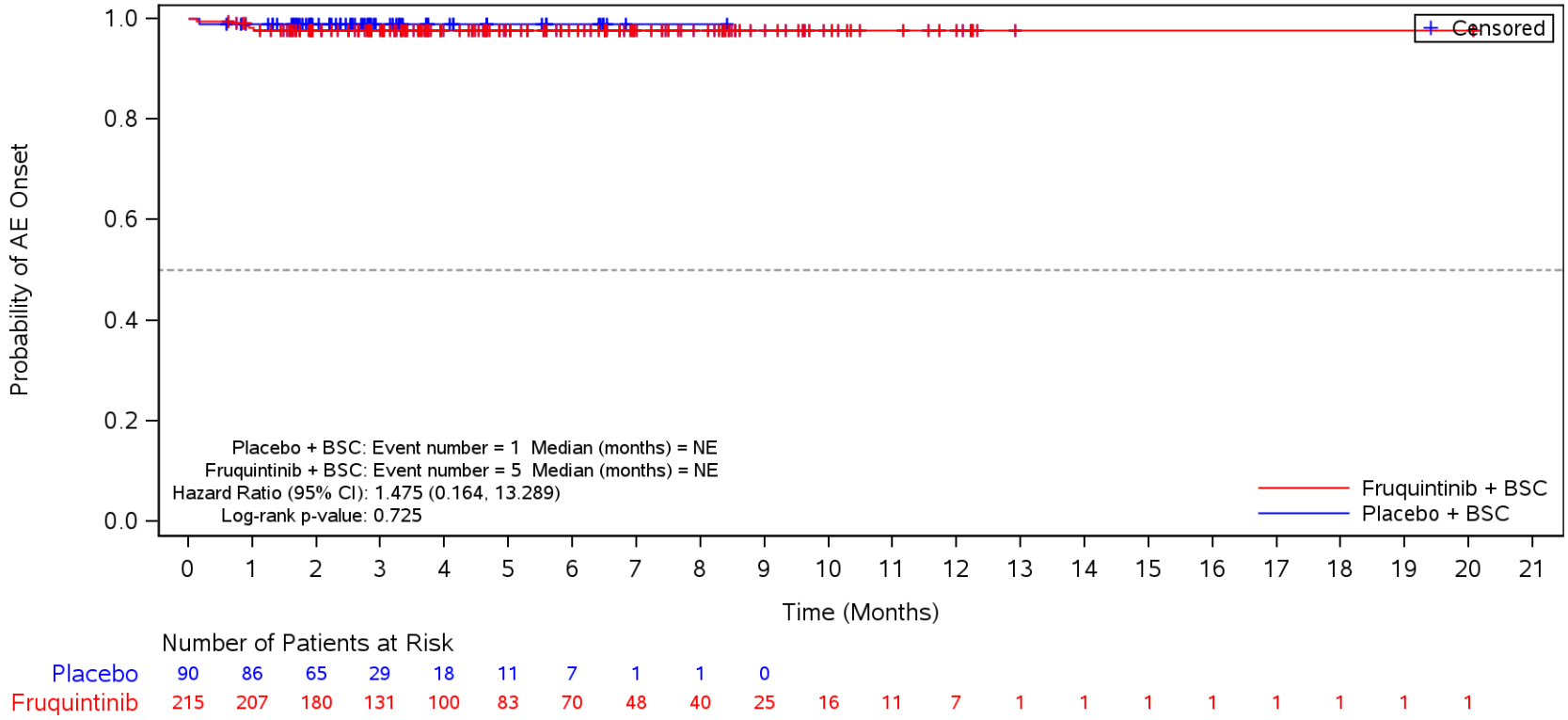


Number of Patients at Risk

Placebo	90	86	64	28	18	11	7	1	1	0											
Fruquintinib	215	210	183	134	102	83	68	46	38	24	16	11	7	1	1	1	1	1	1	1	1

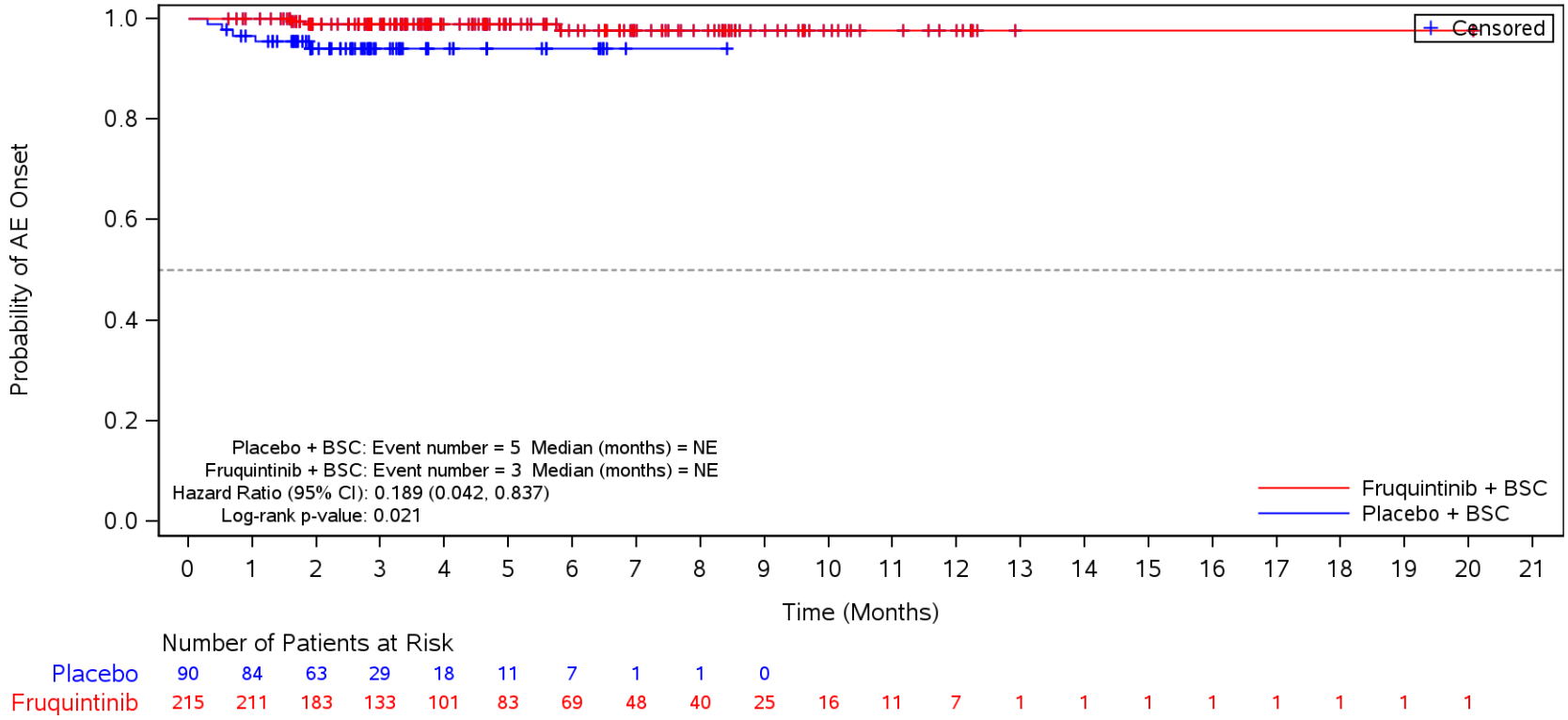
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
Female



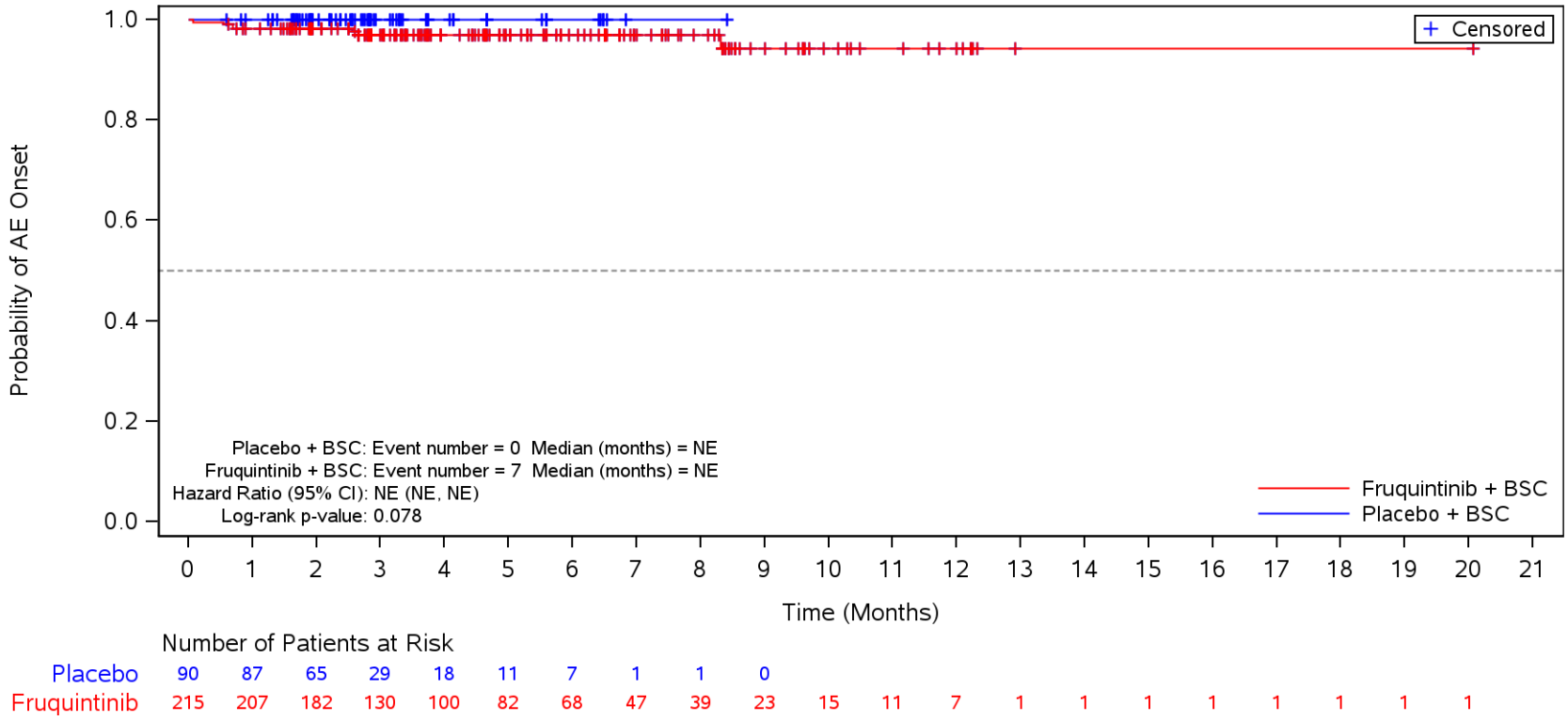
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
Female



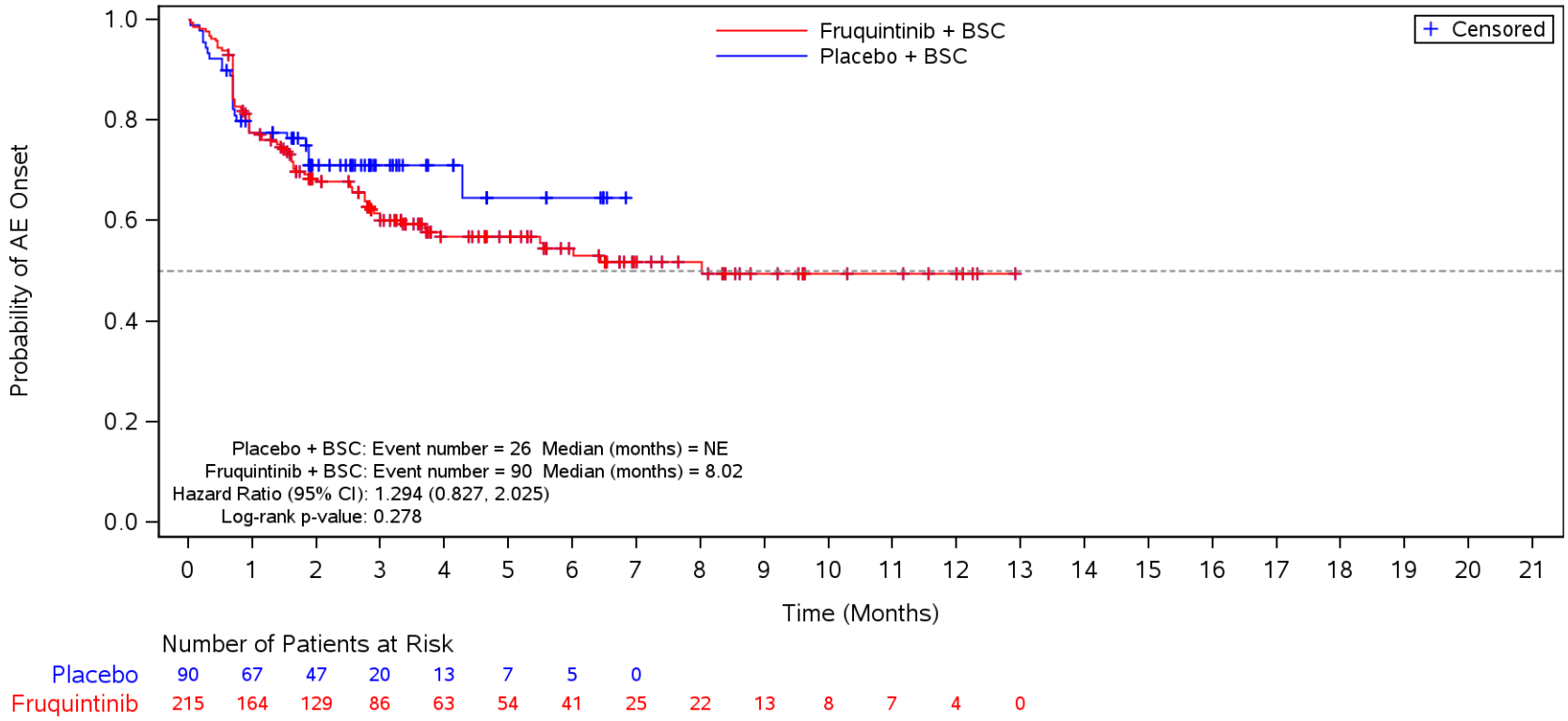
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**
Female



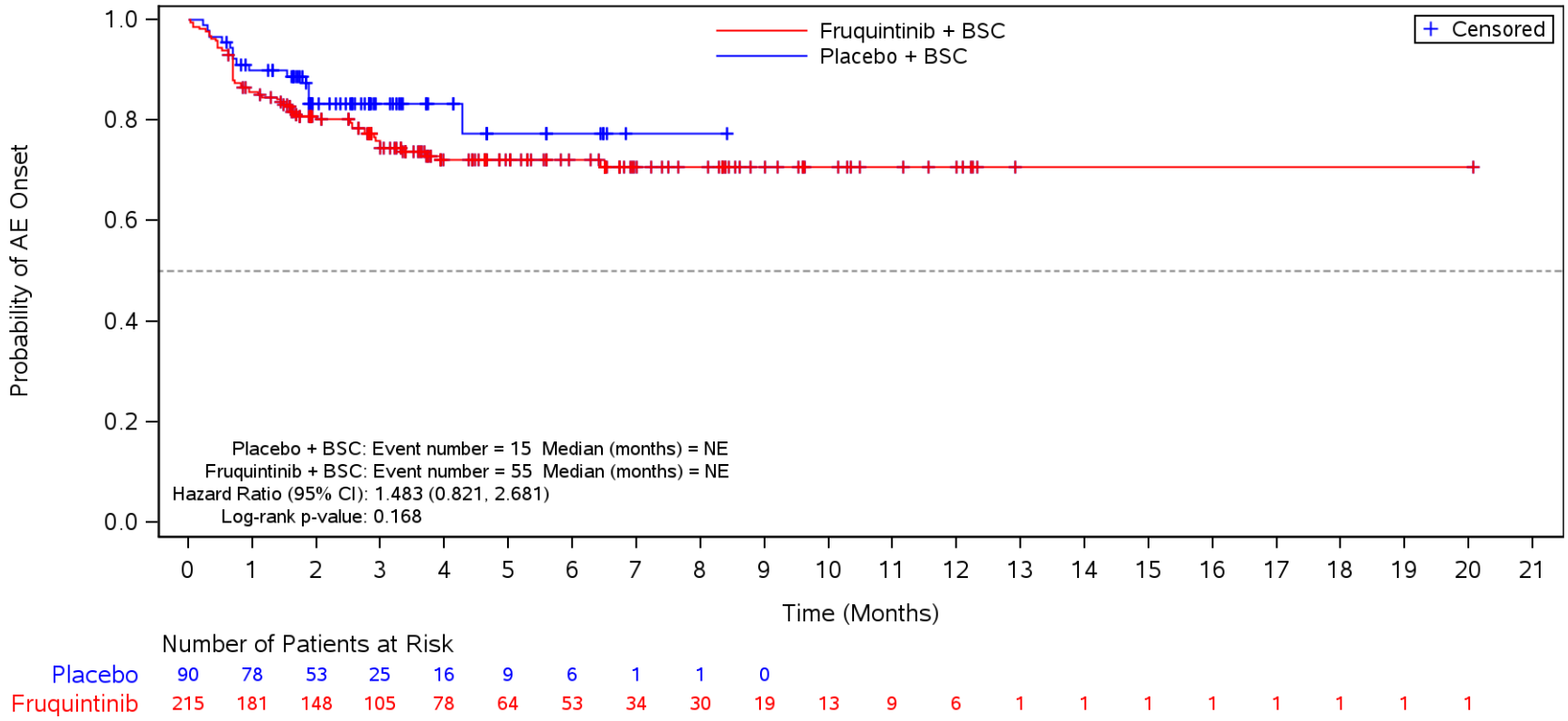
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
Female



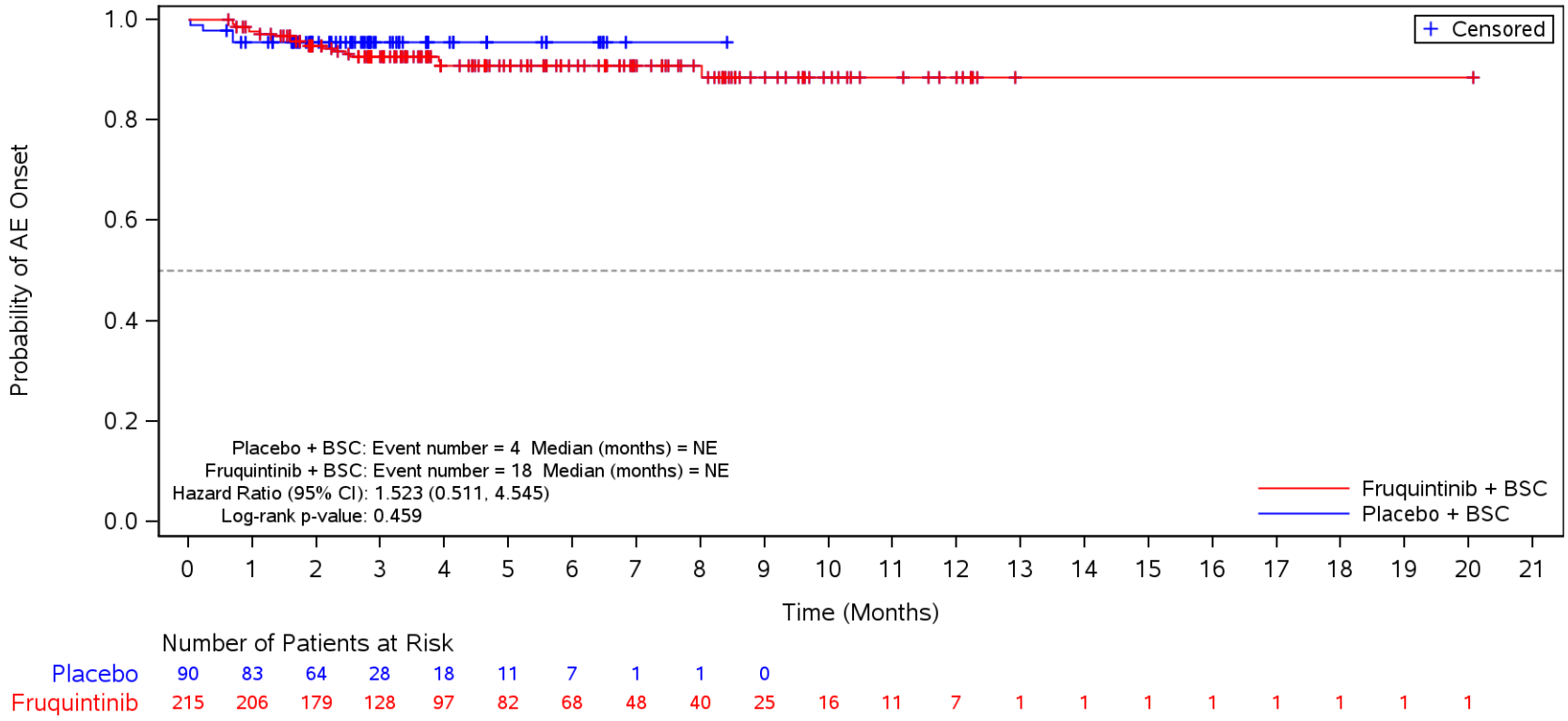
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
Female



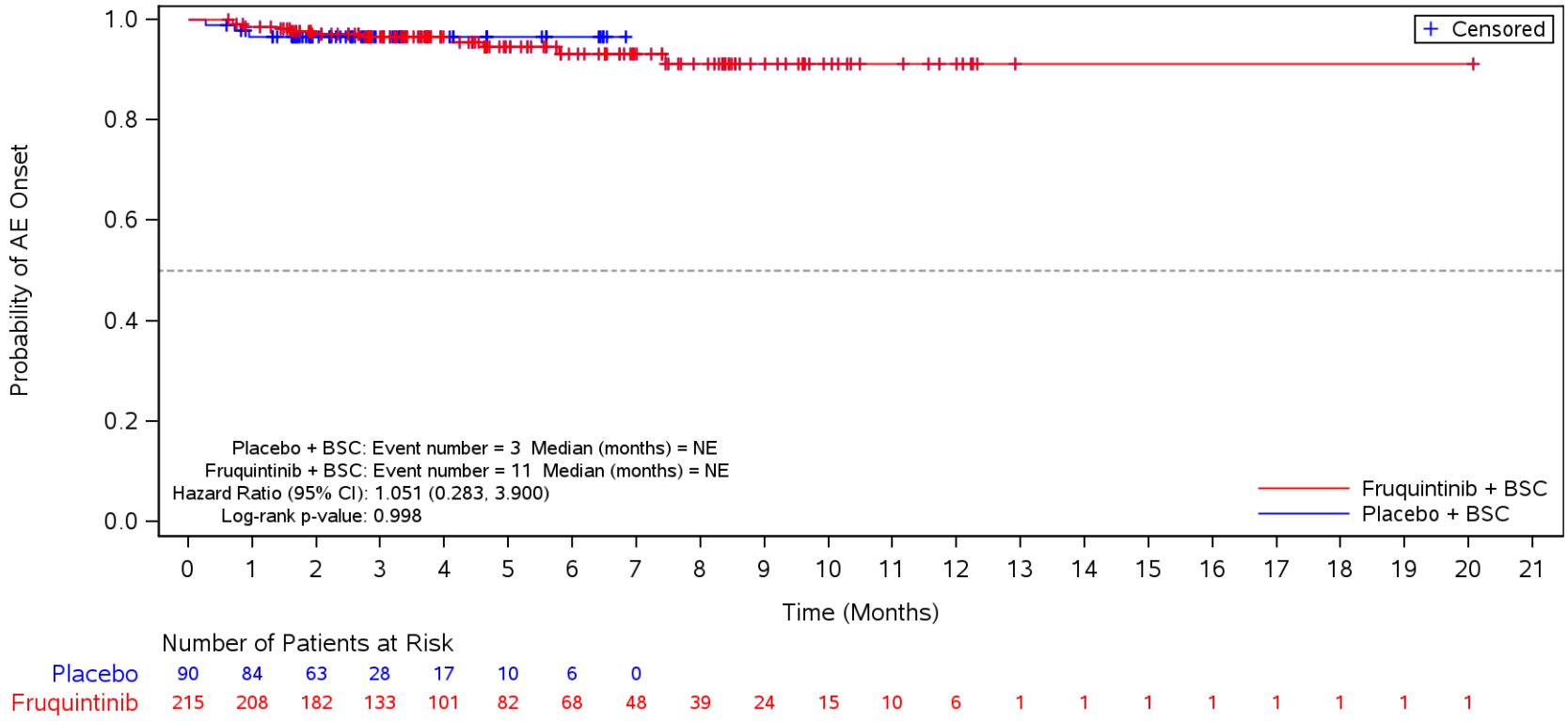
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
Female



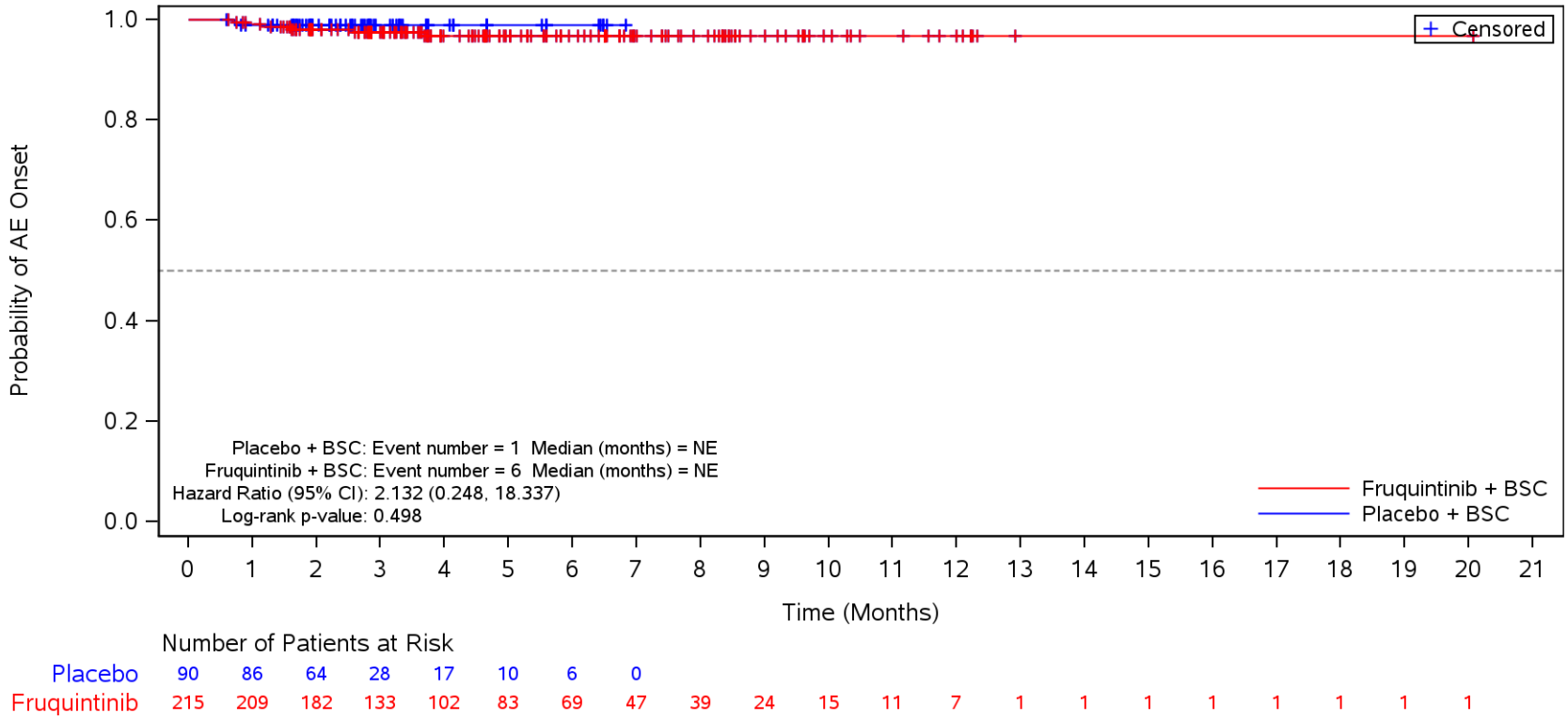
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
Female



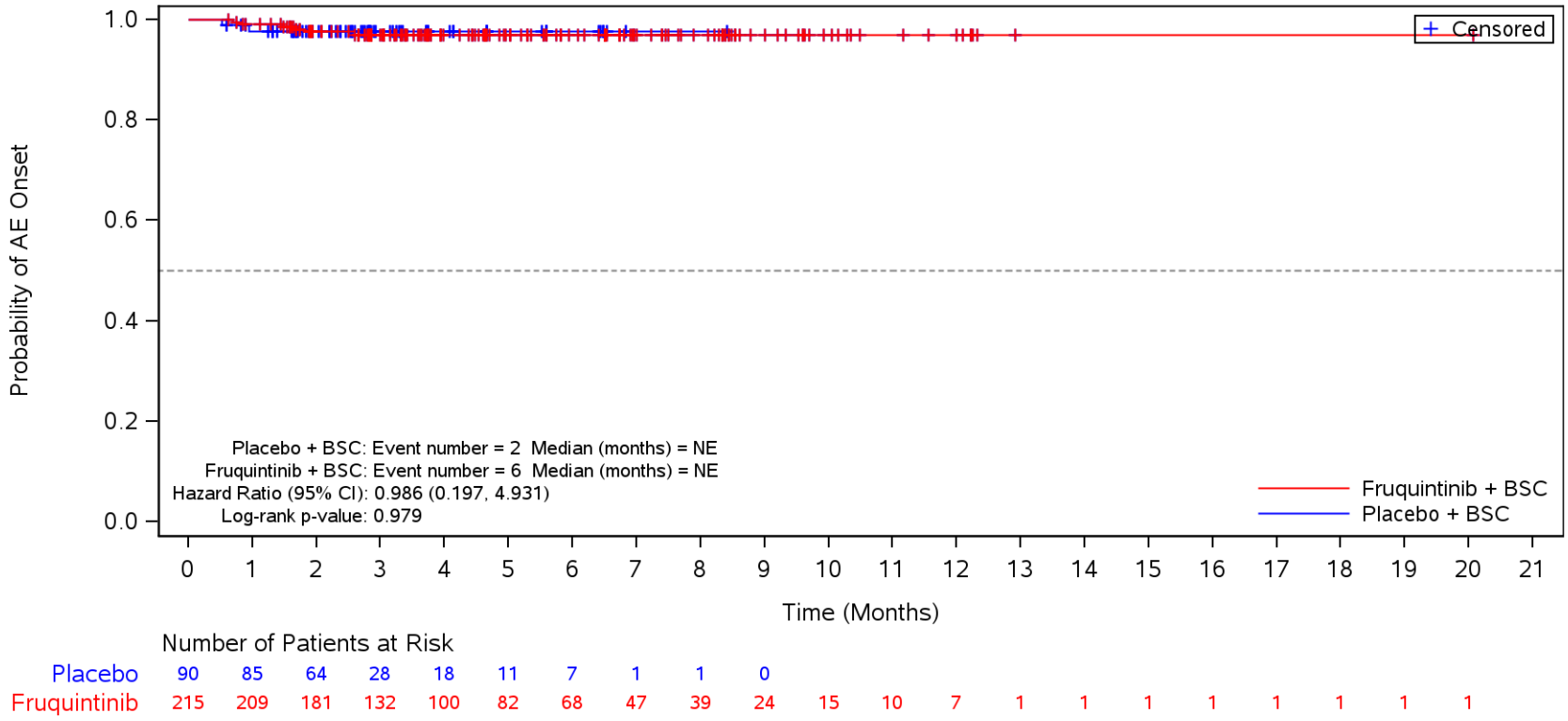
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
Female



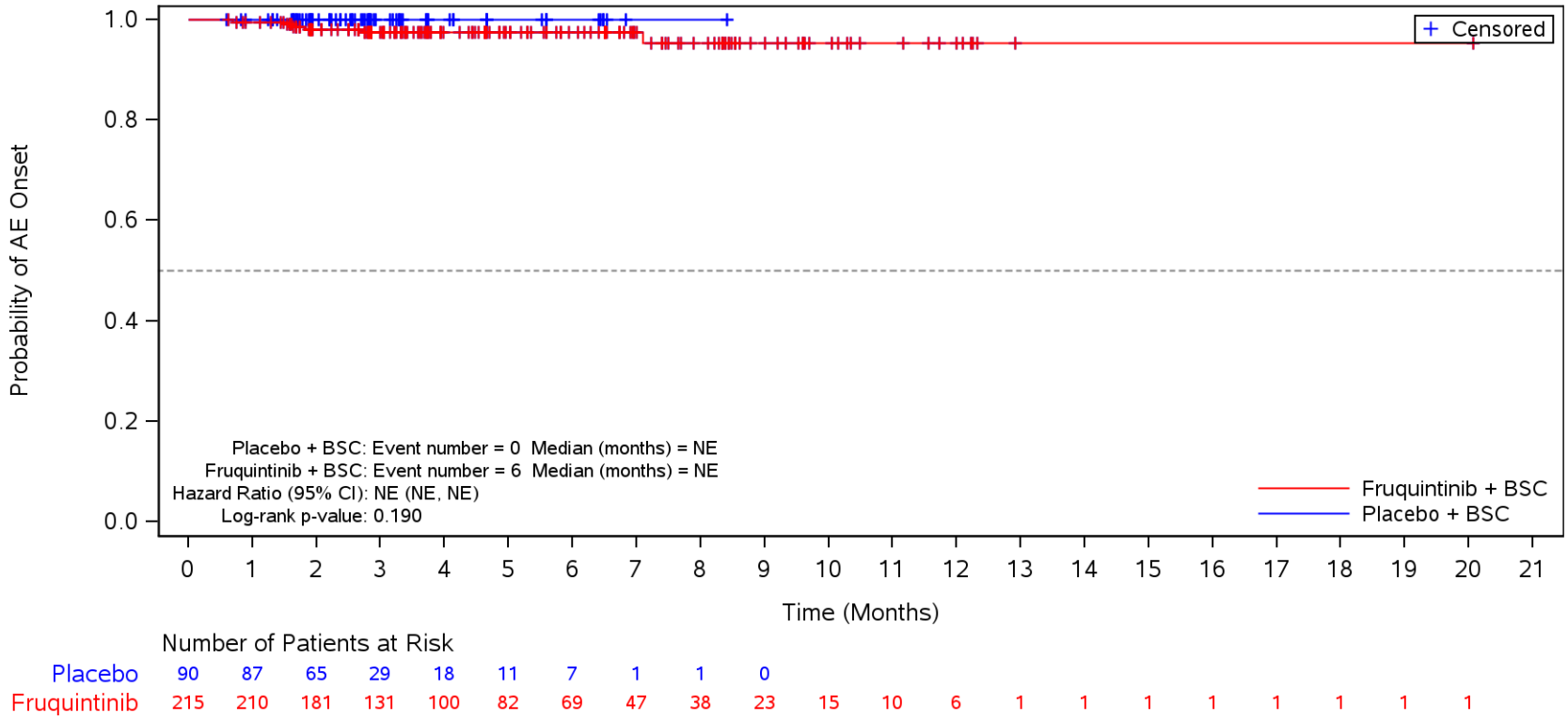
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
Female



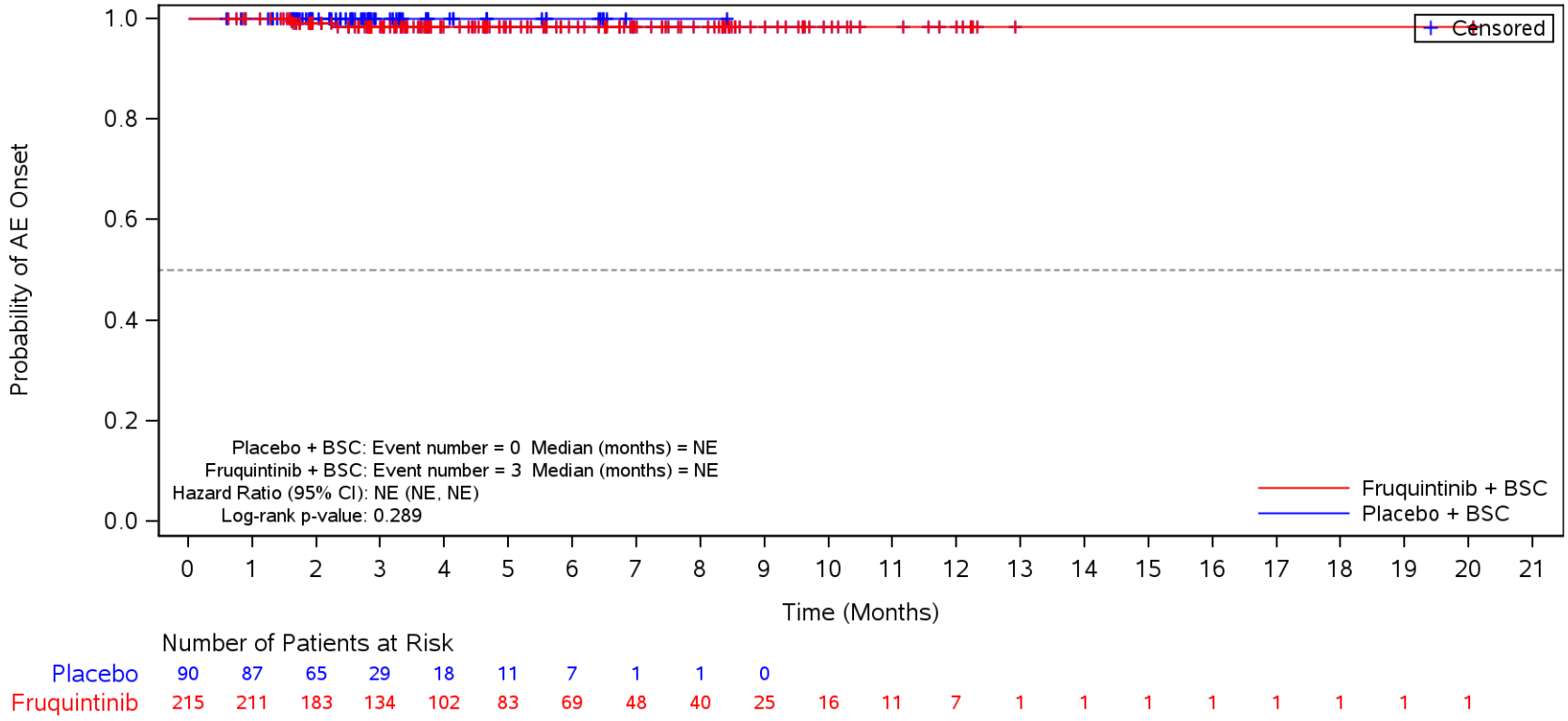
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
Female



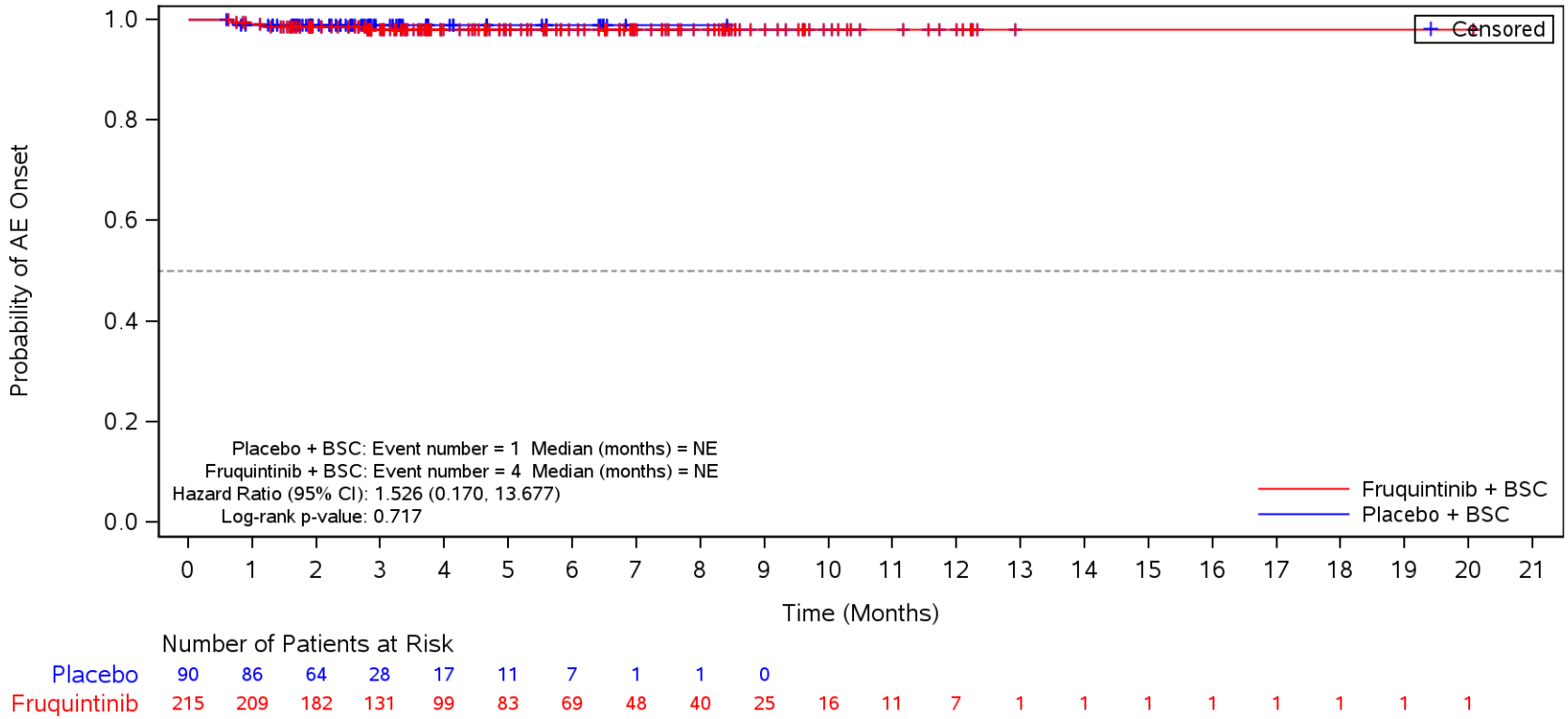
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
Female



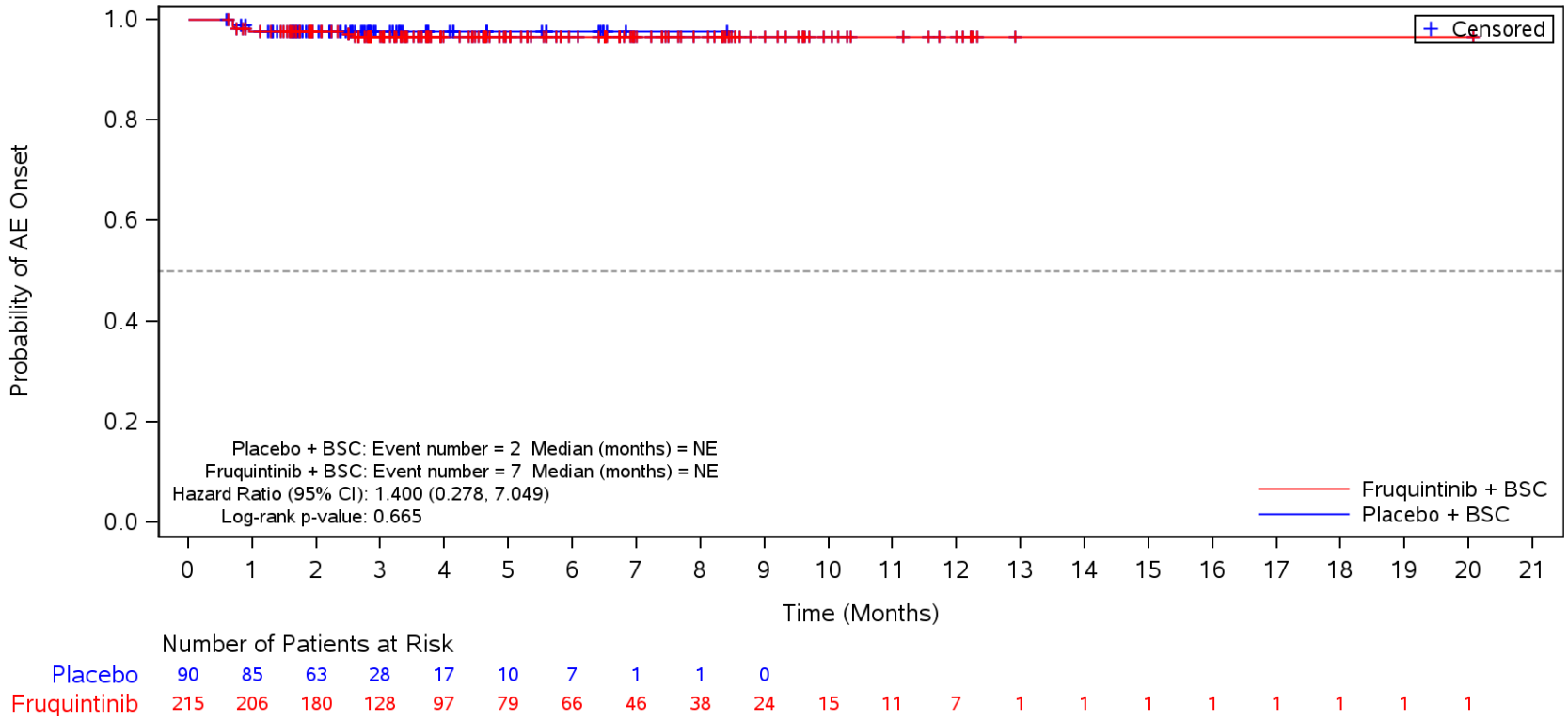
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**
Female



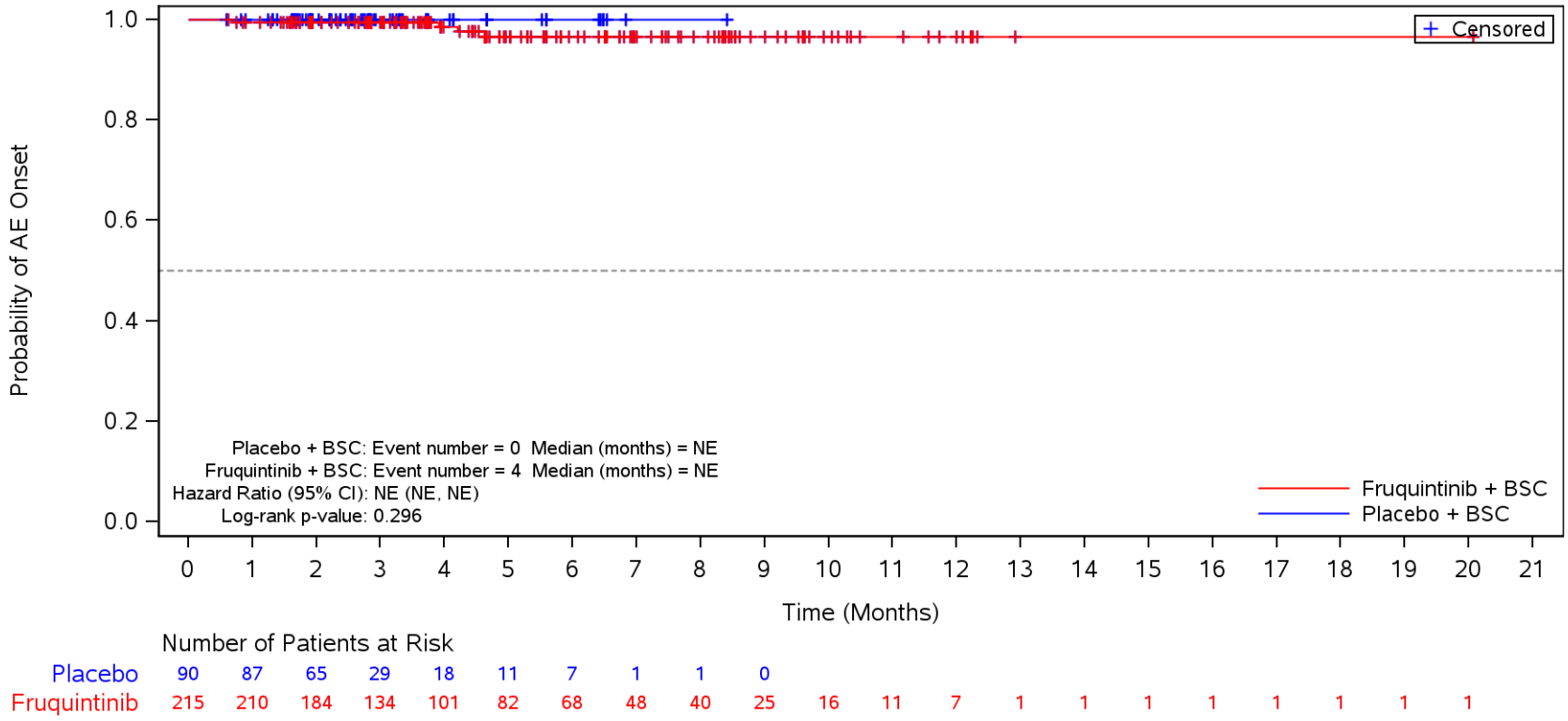
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
Female



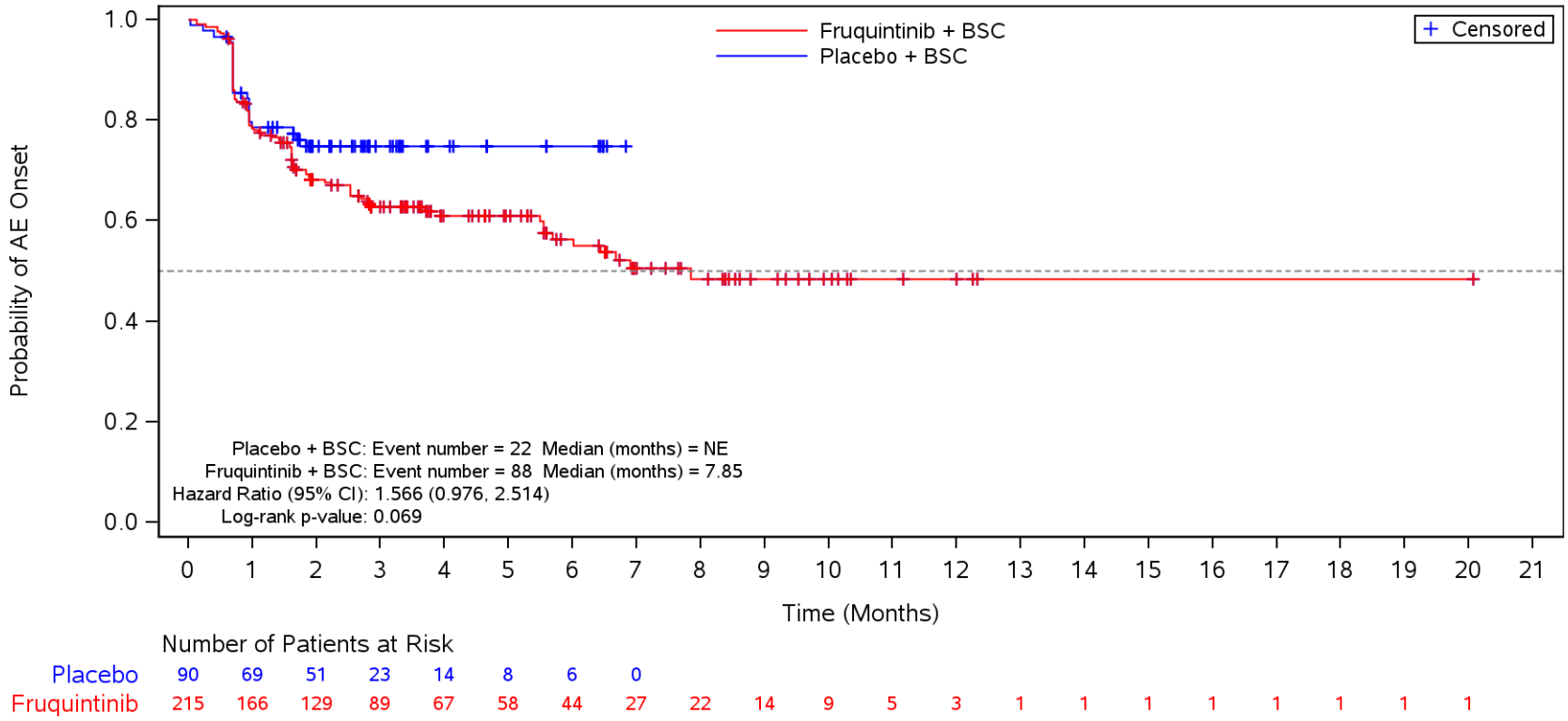
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
Female



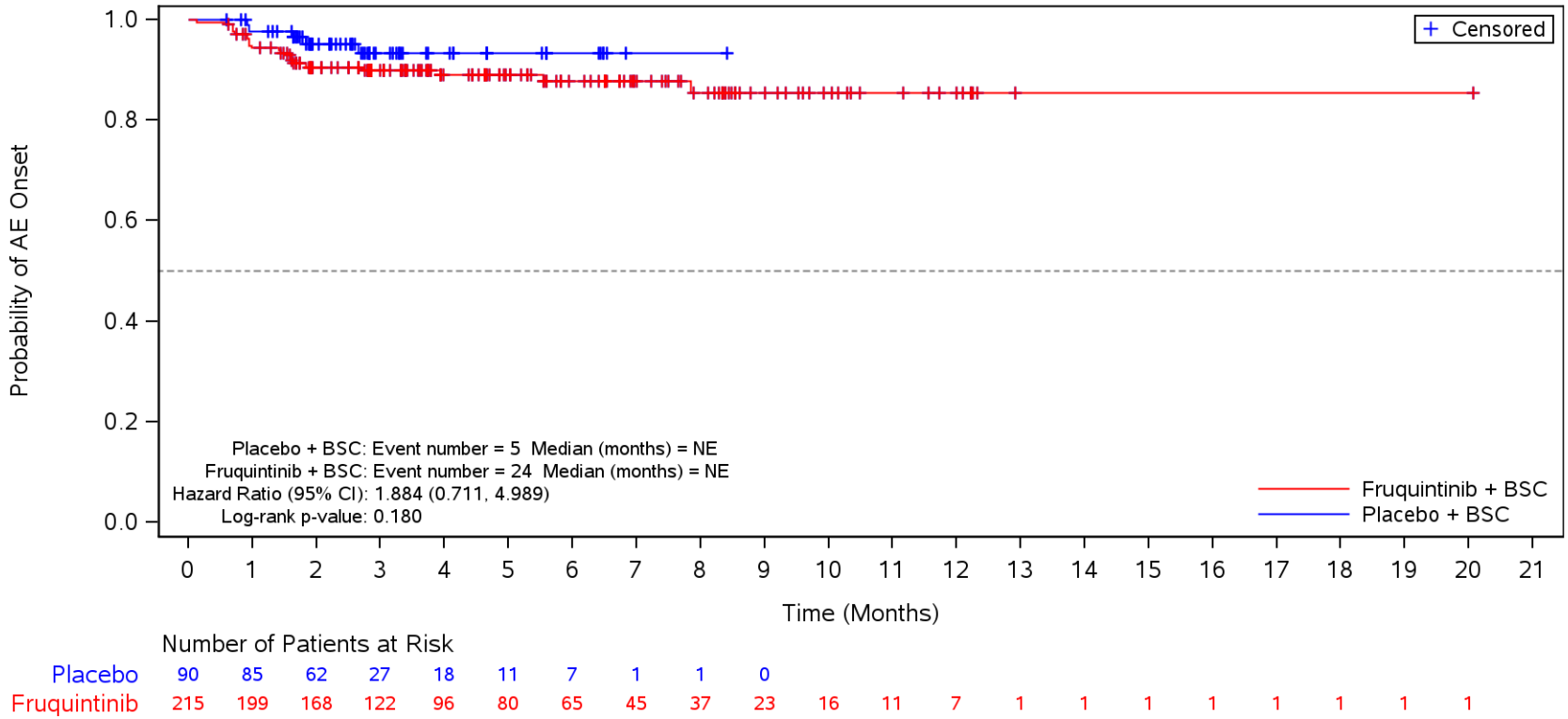
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations**
Female



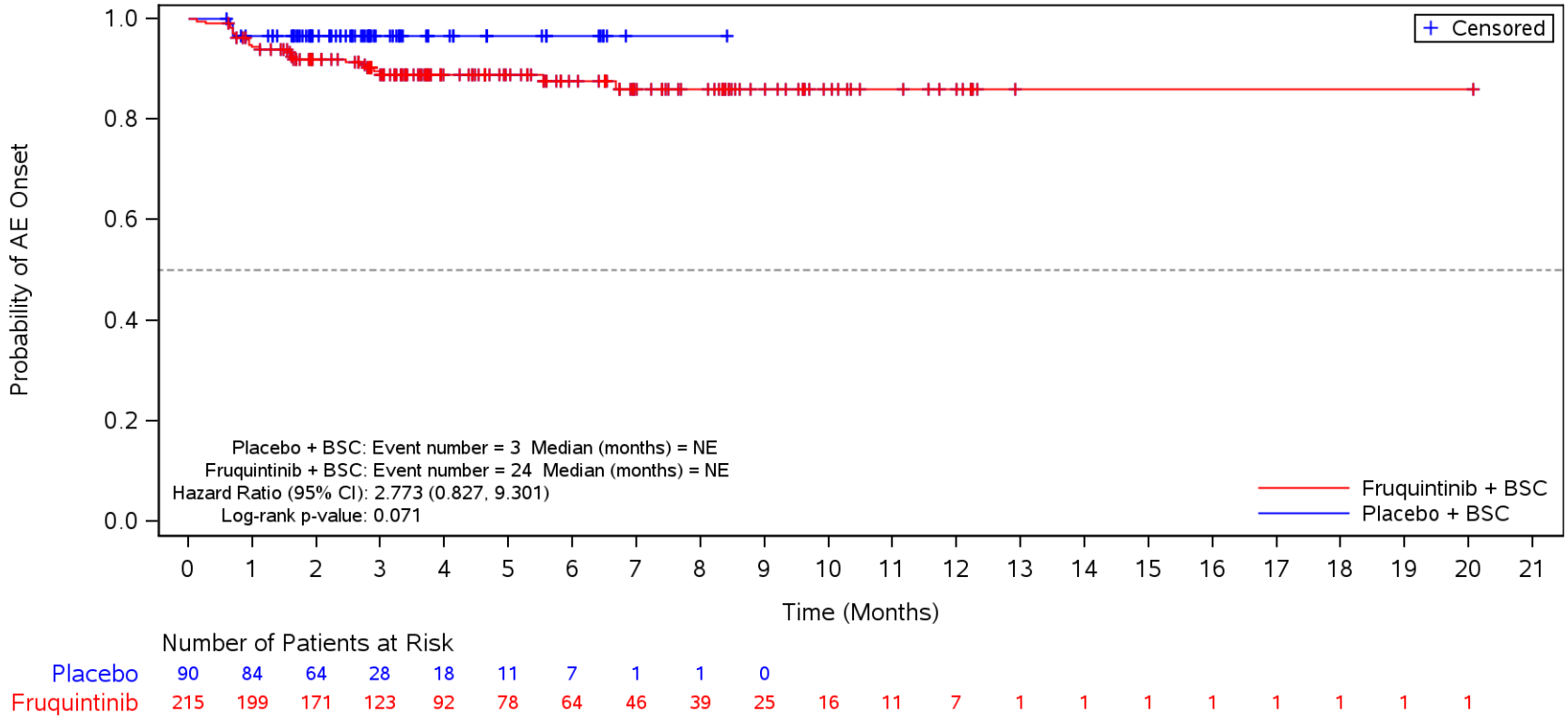
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
Female



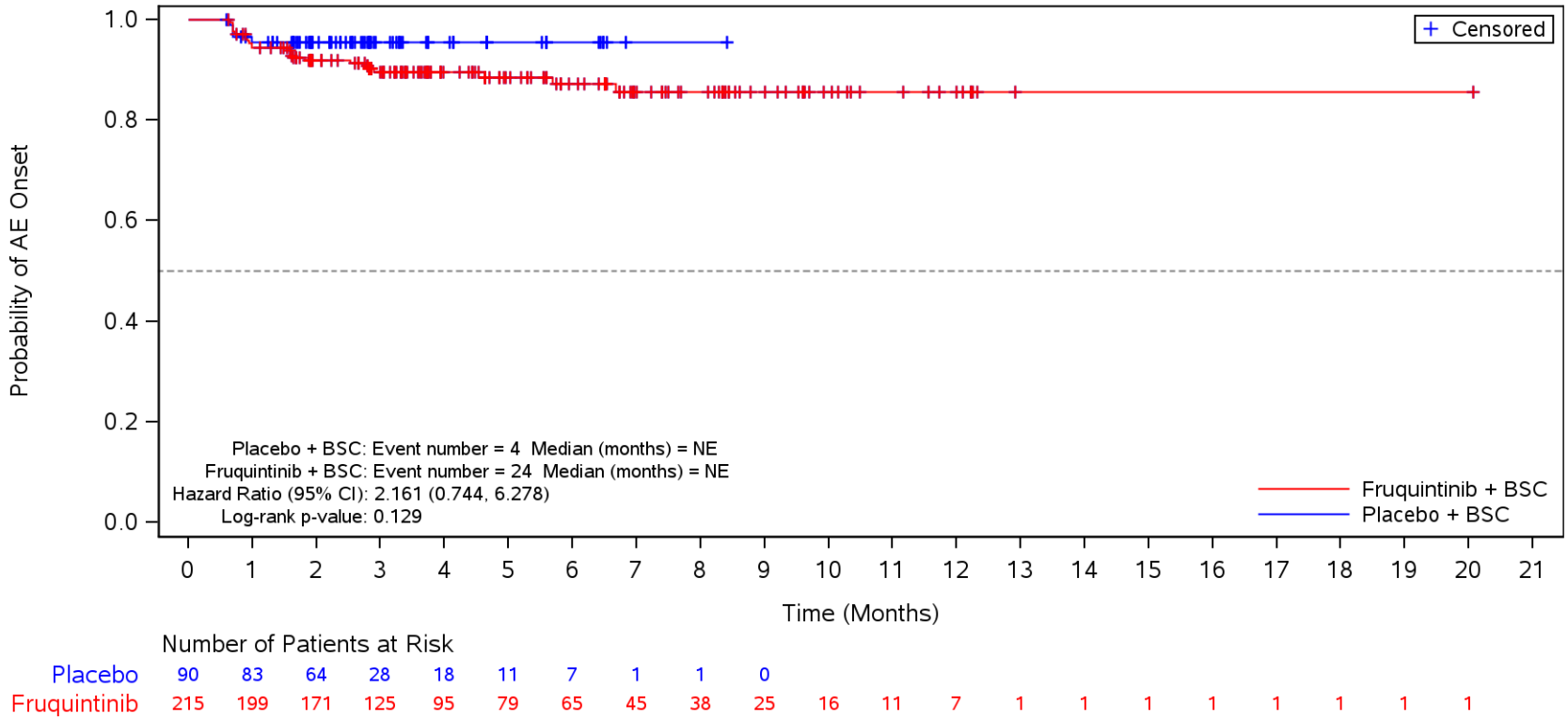
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
Female



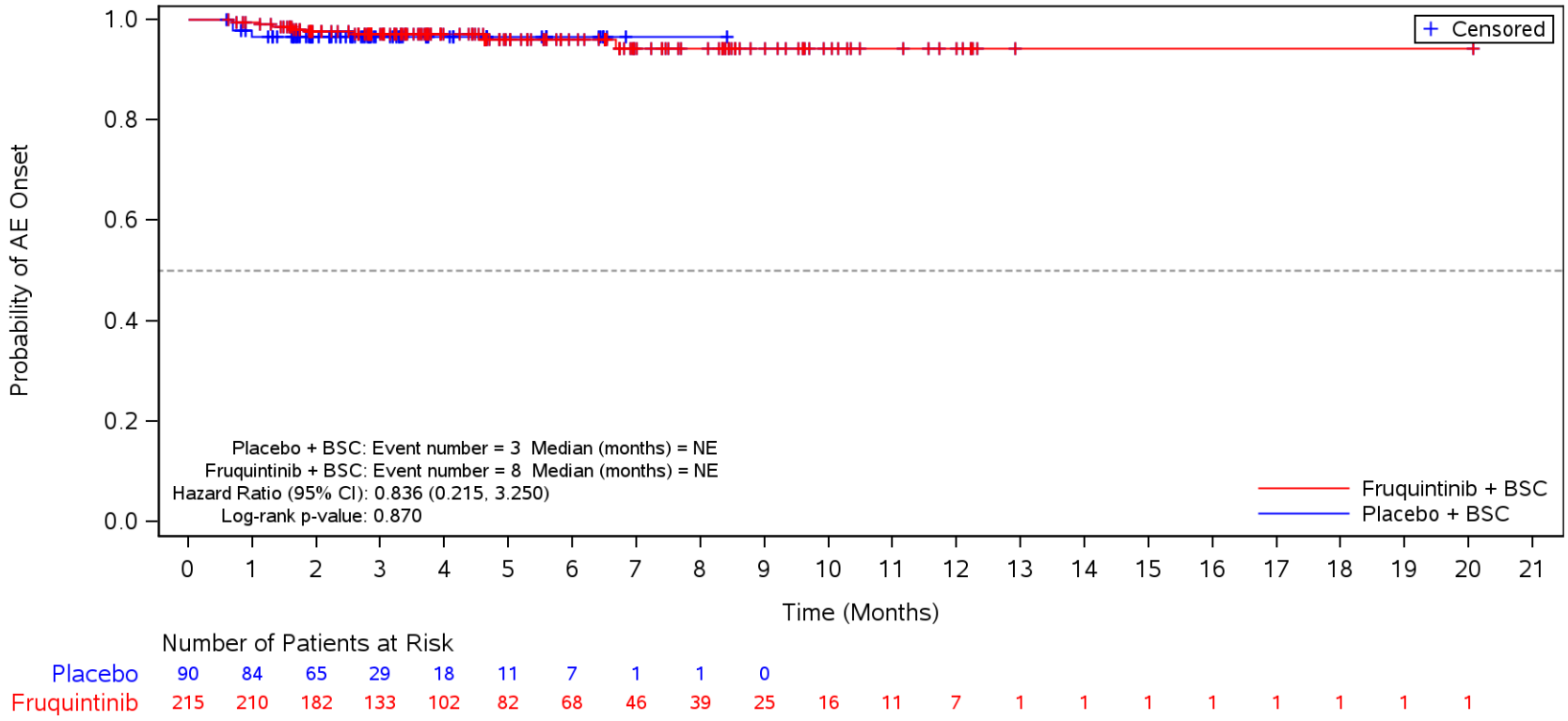
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
Female



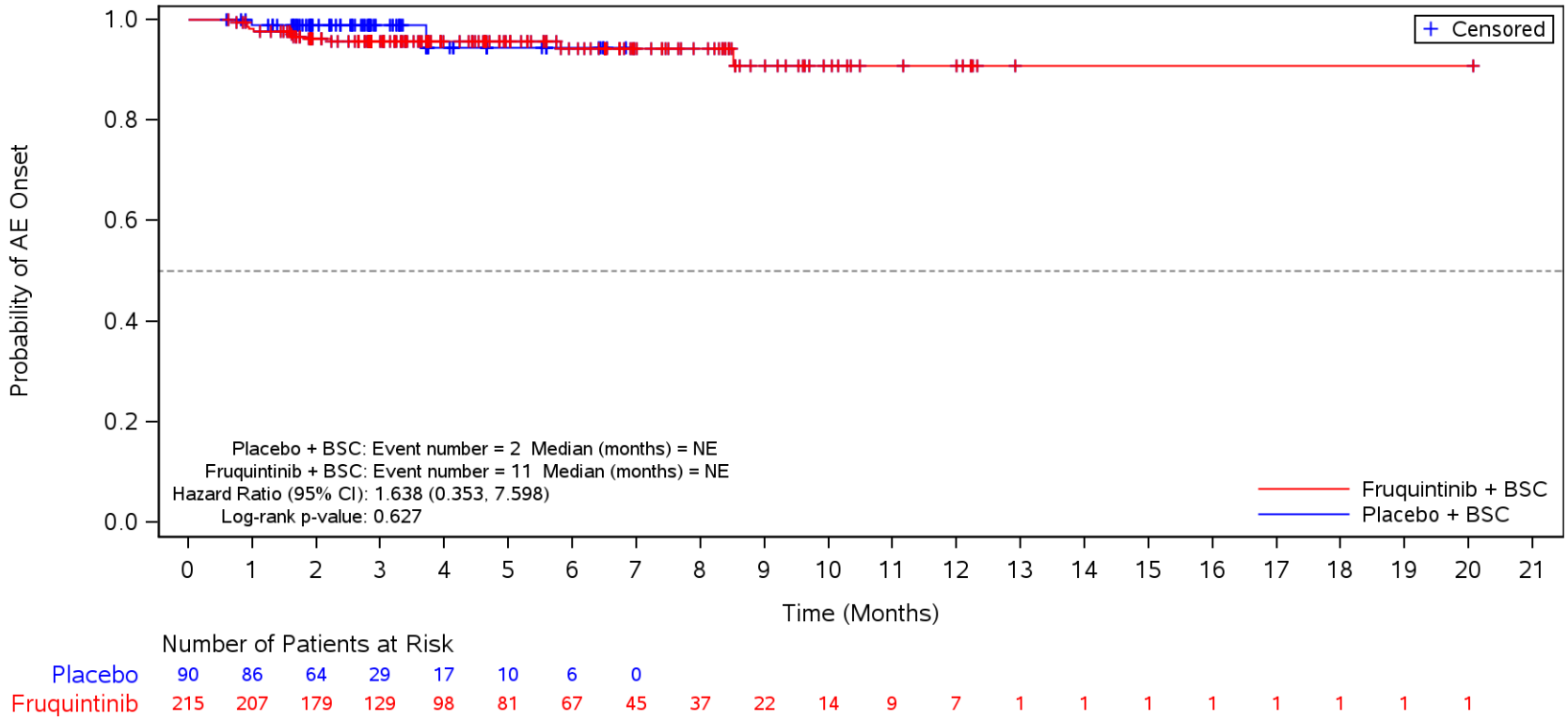
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
Female



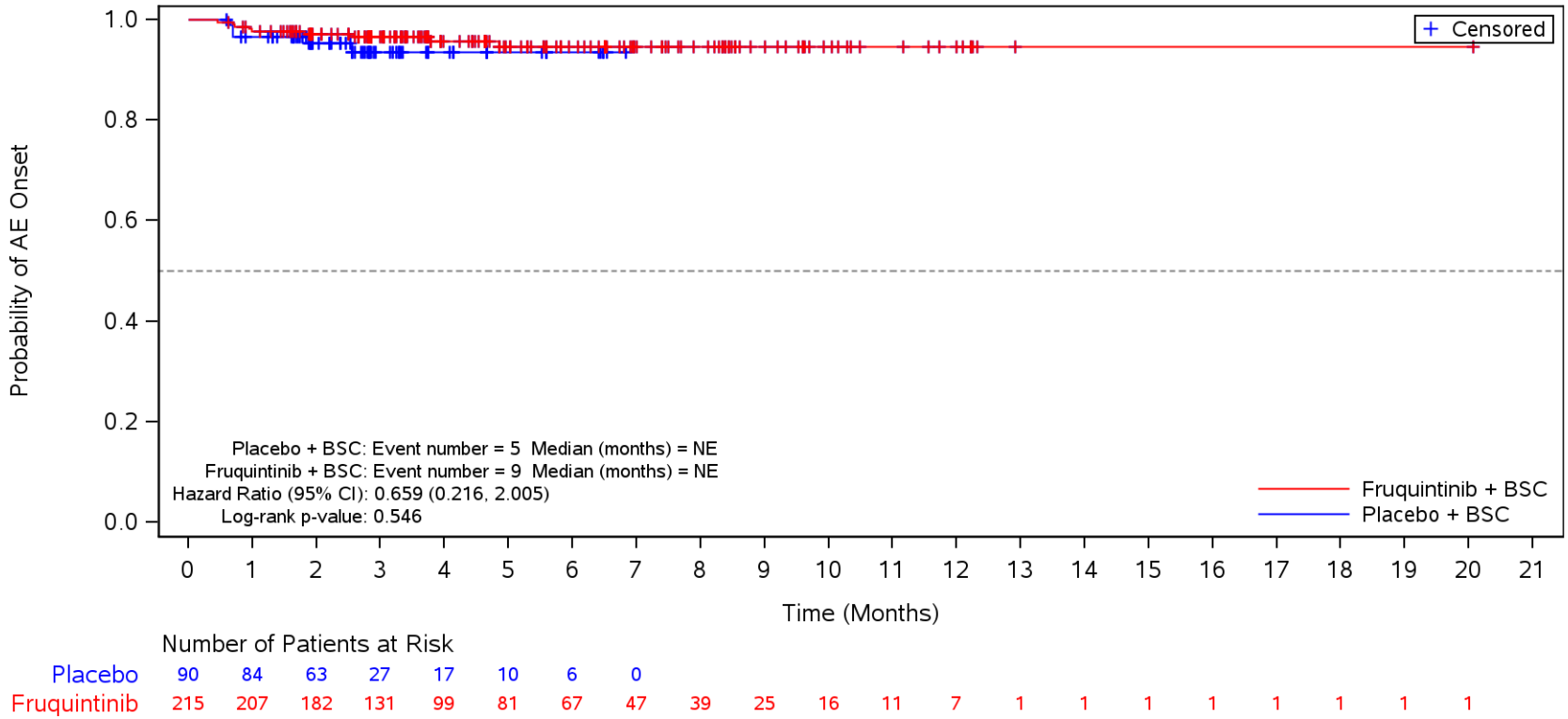
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
Female



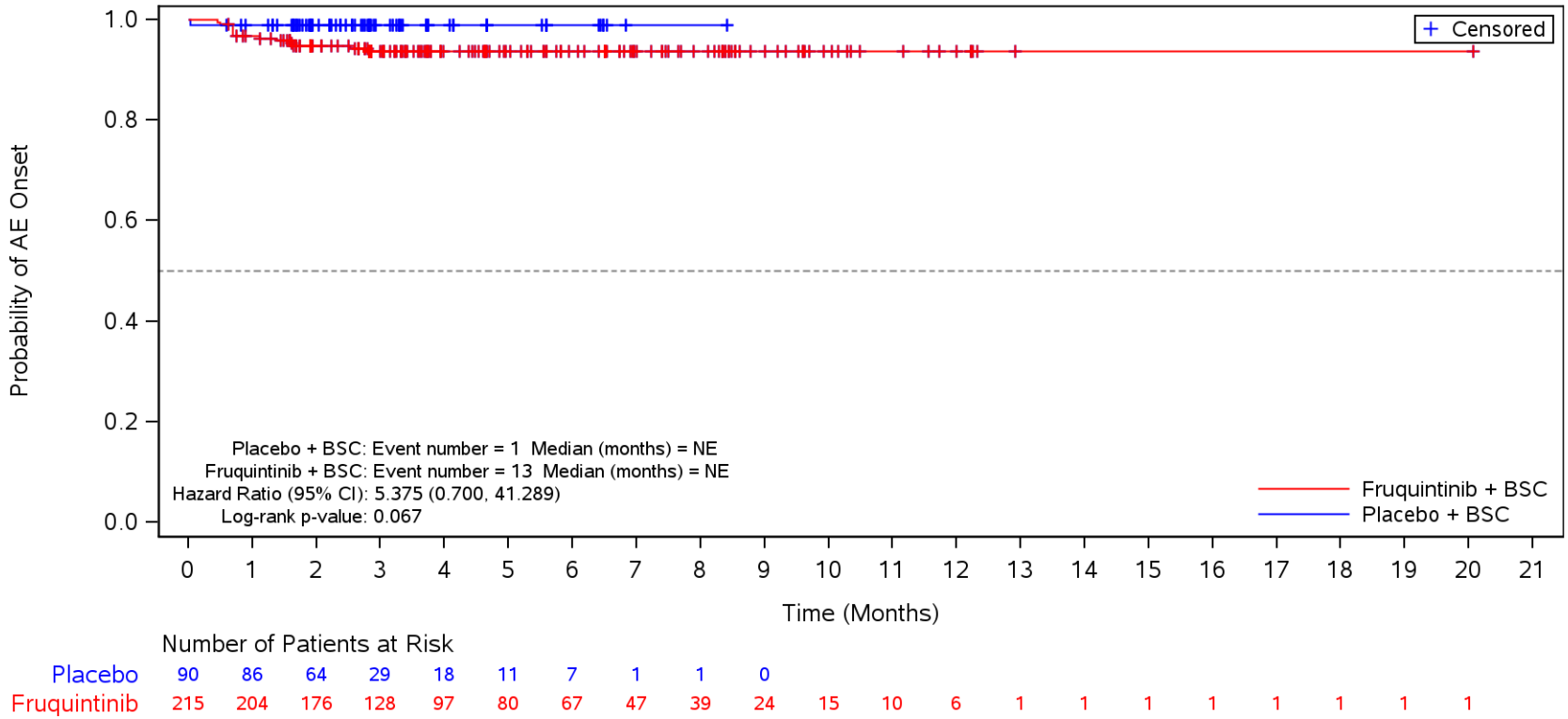
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
Female



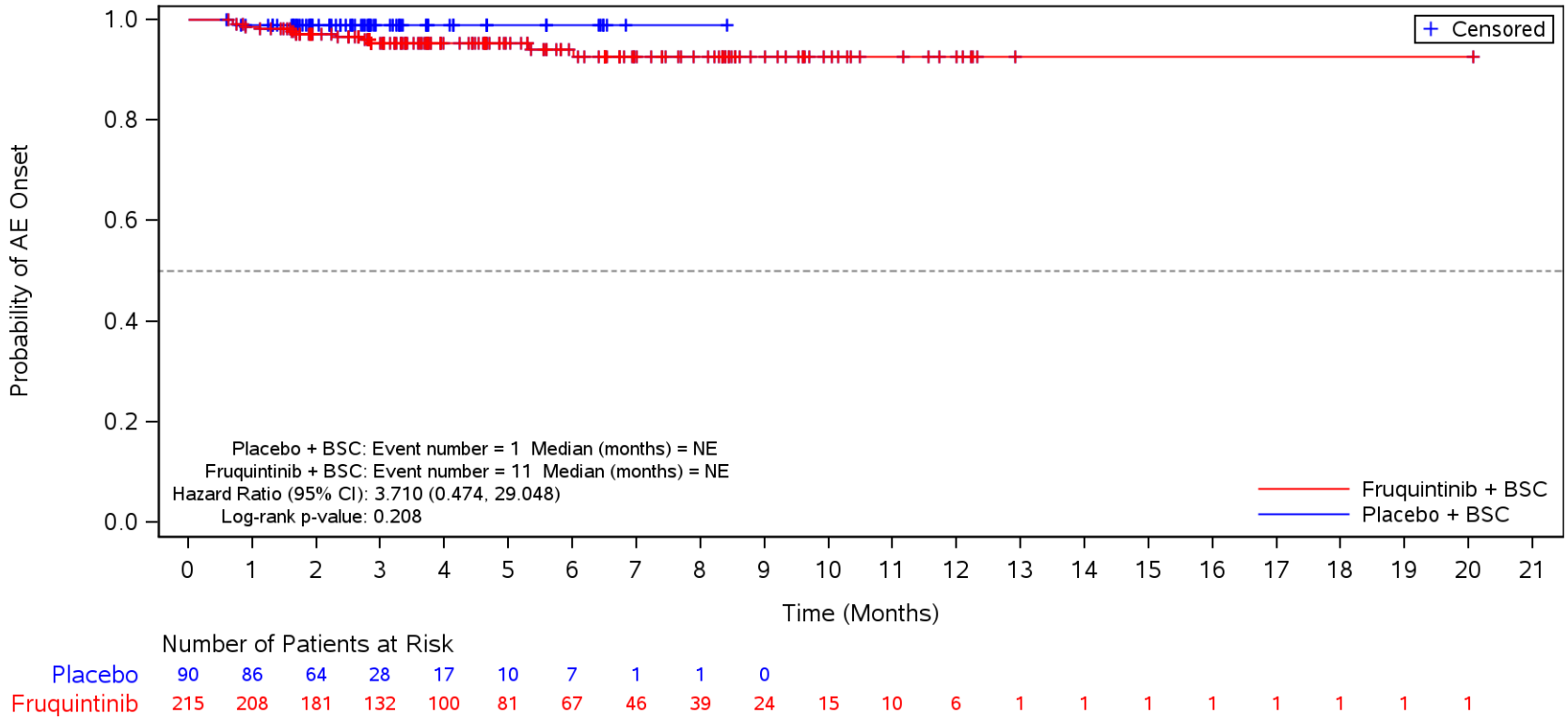
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
Female



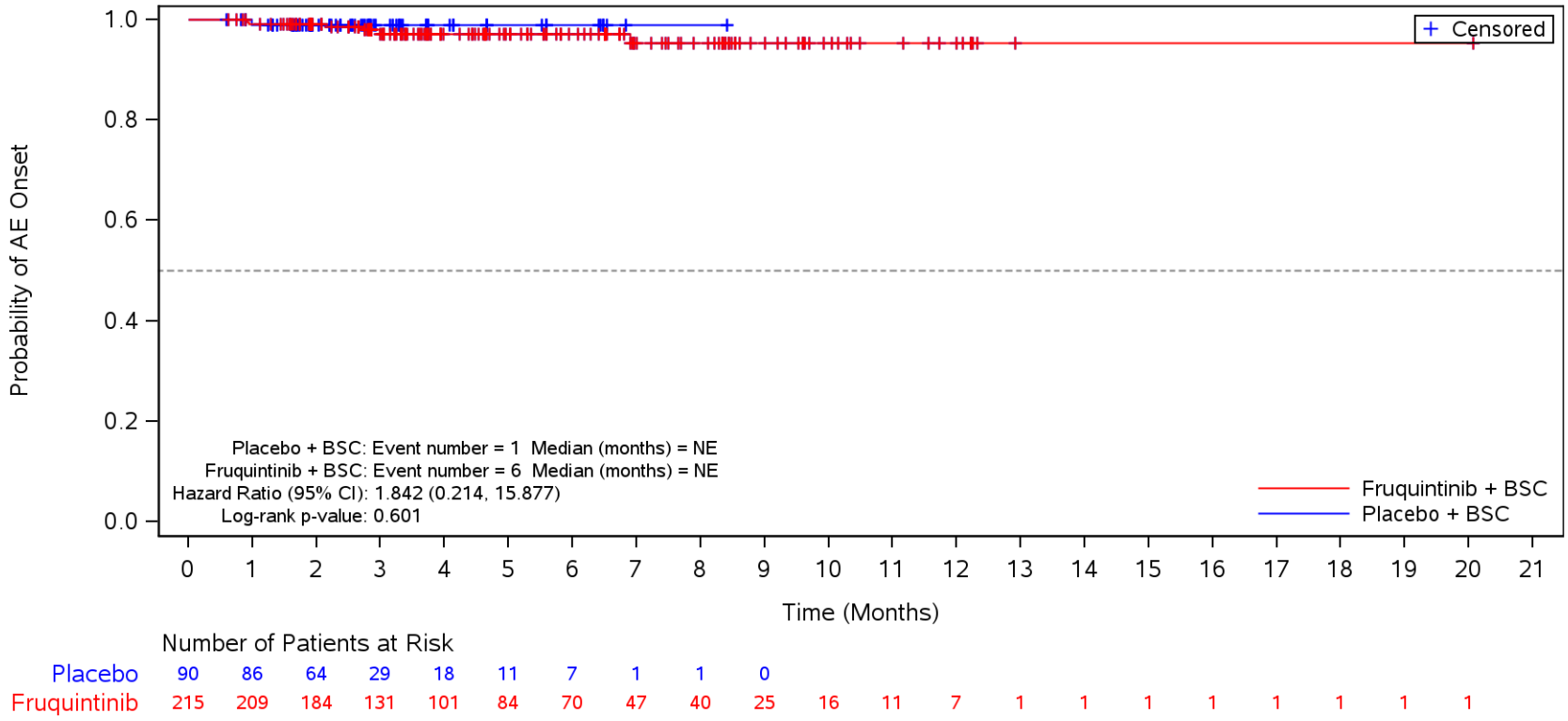
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
Female



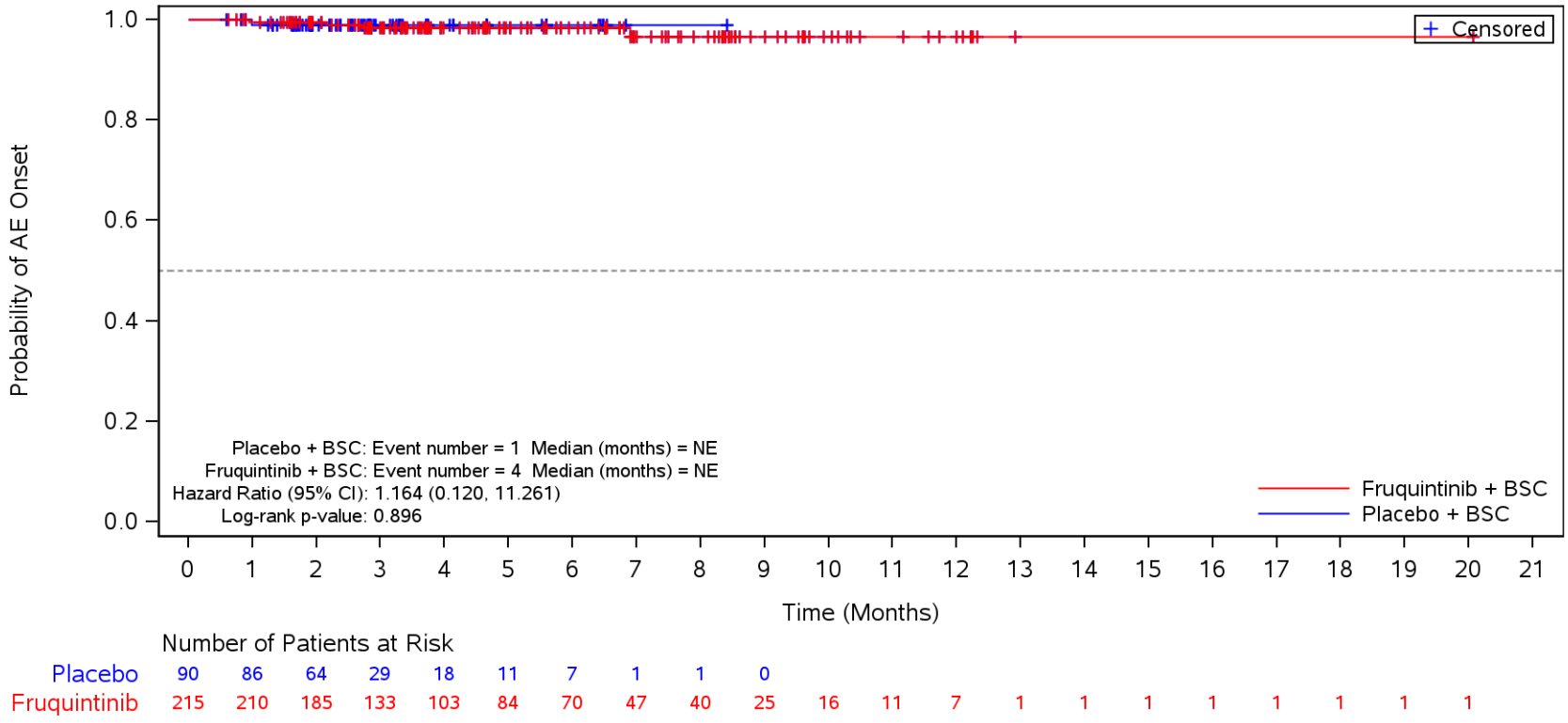
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
Female



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
Female

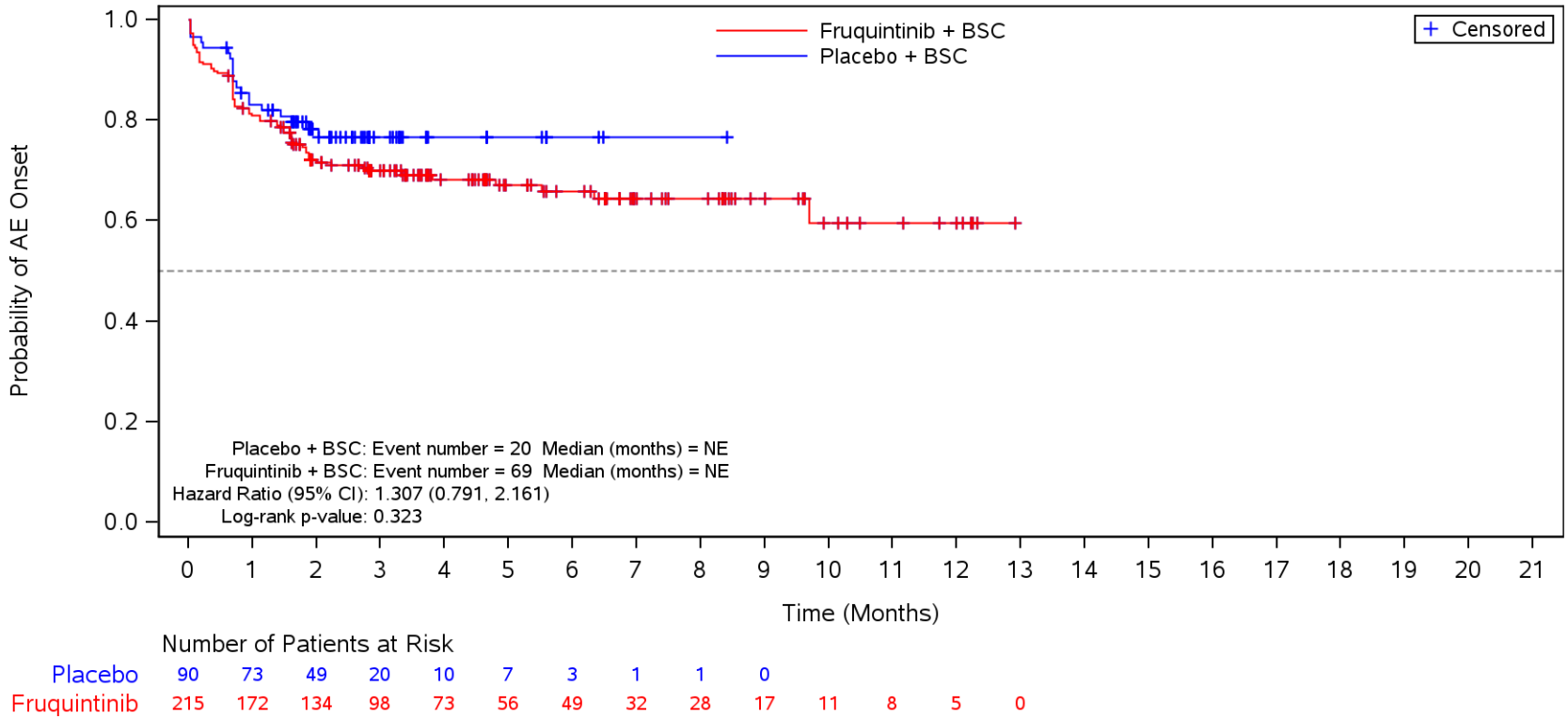


Number of Patients at Risk

Placebo	90	86	64	29	18	11	7	1	1	0											
Fruquintinib	215	210	185	133	103	84	70	47	40	25	16	11	7	1	1	1	1	1	1	1	1

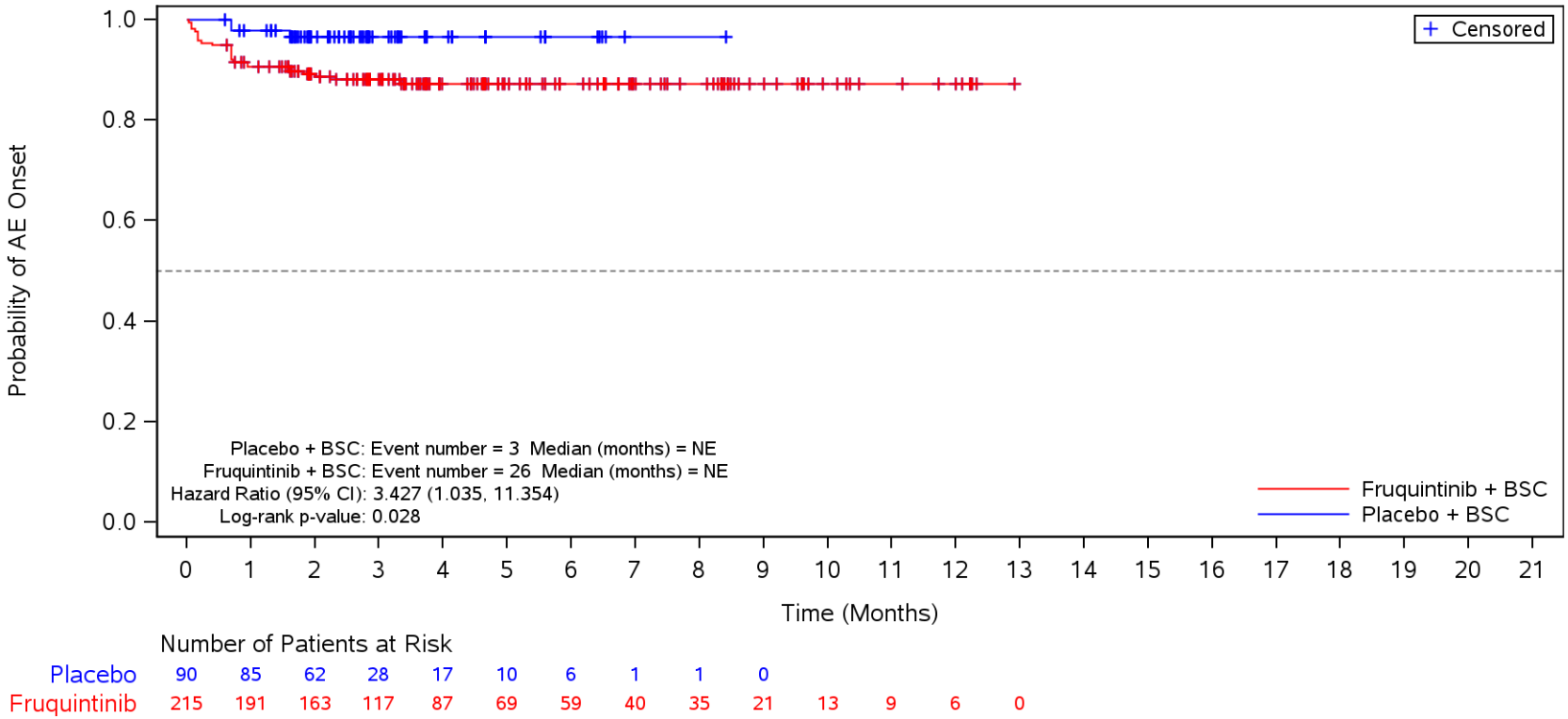
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
Female



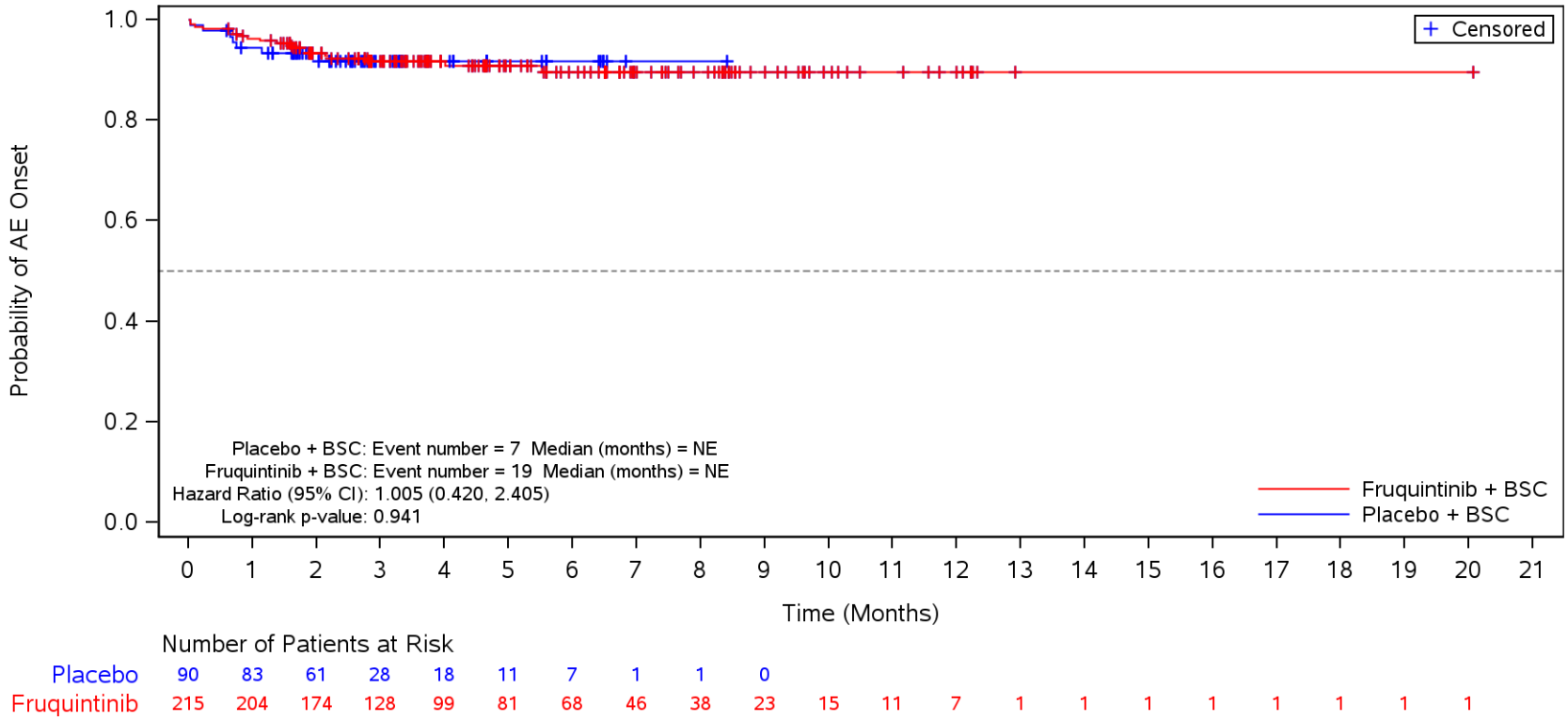
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
Female



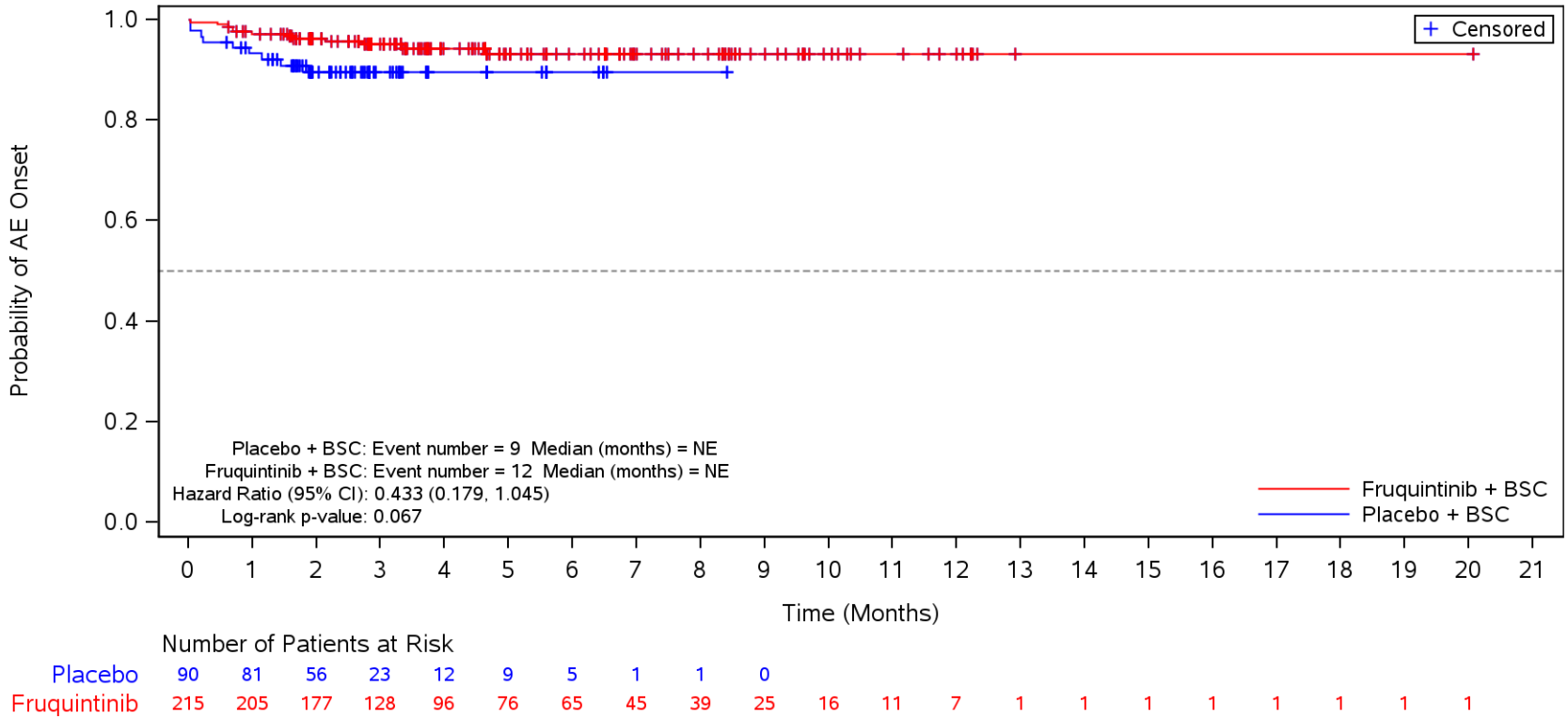
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
Female



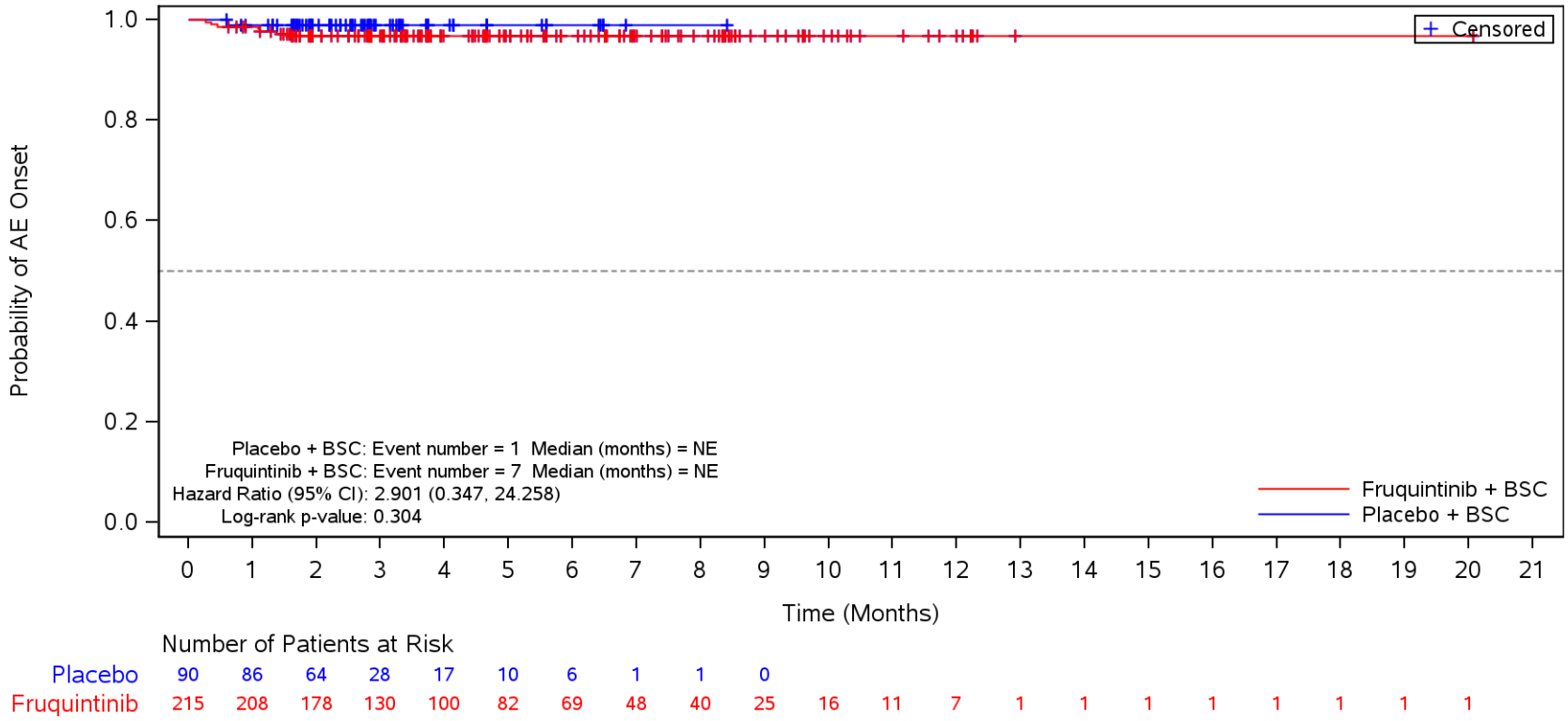
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
Female



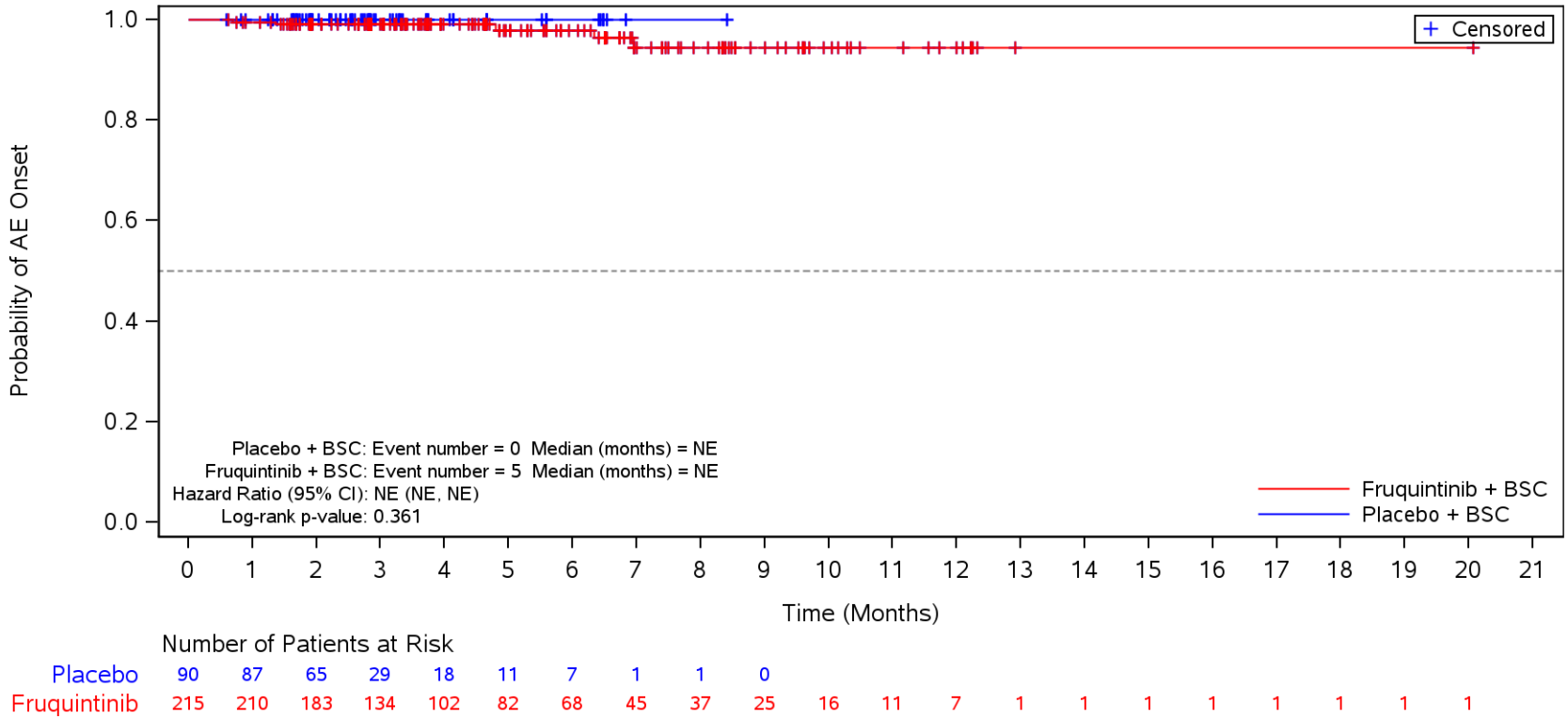
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
Female



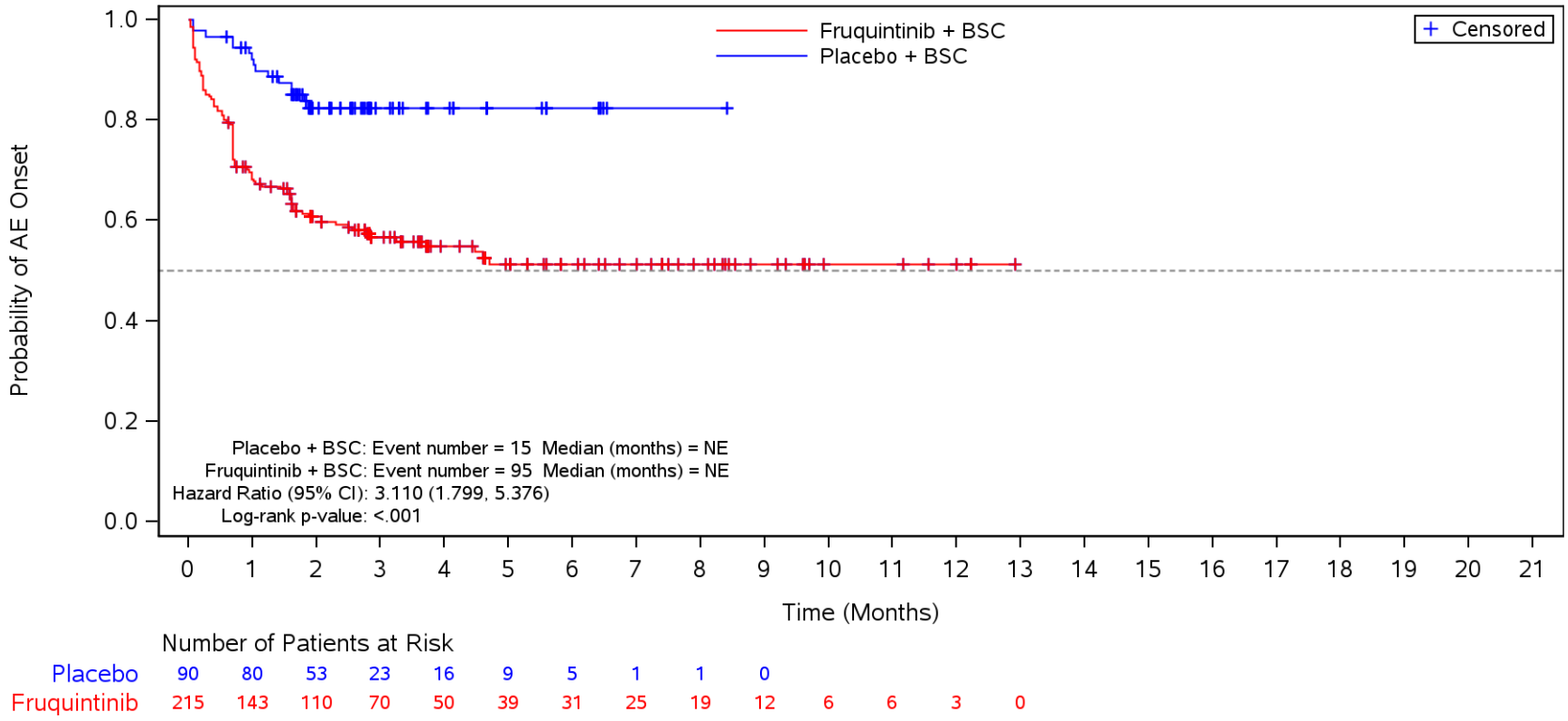
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
Female



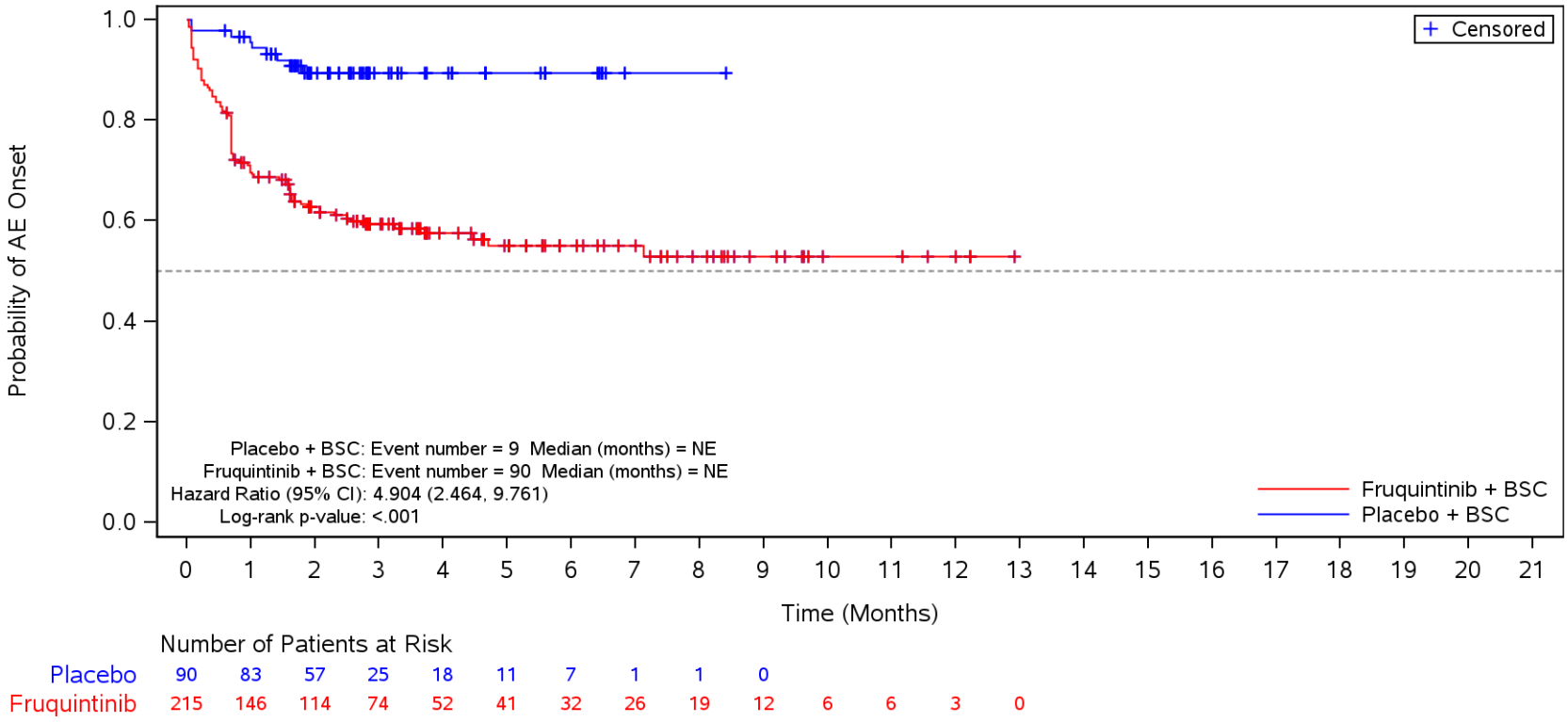
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Vascular disorders**
Female



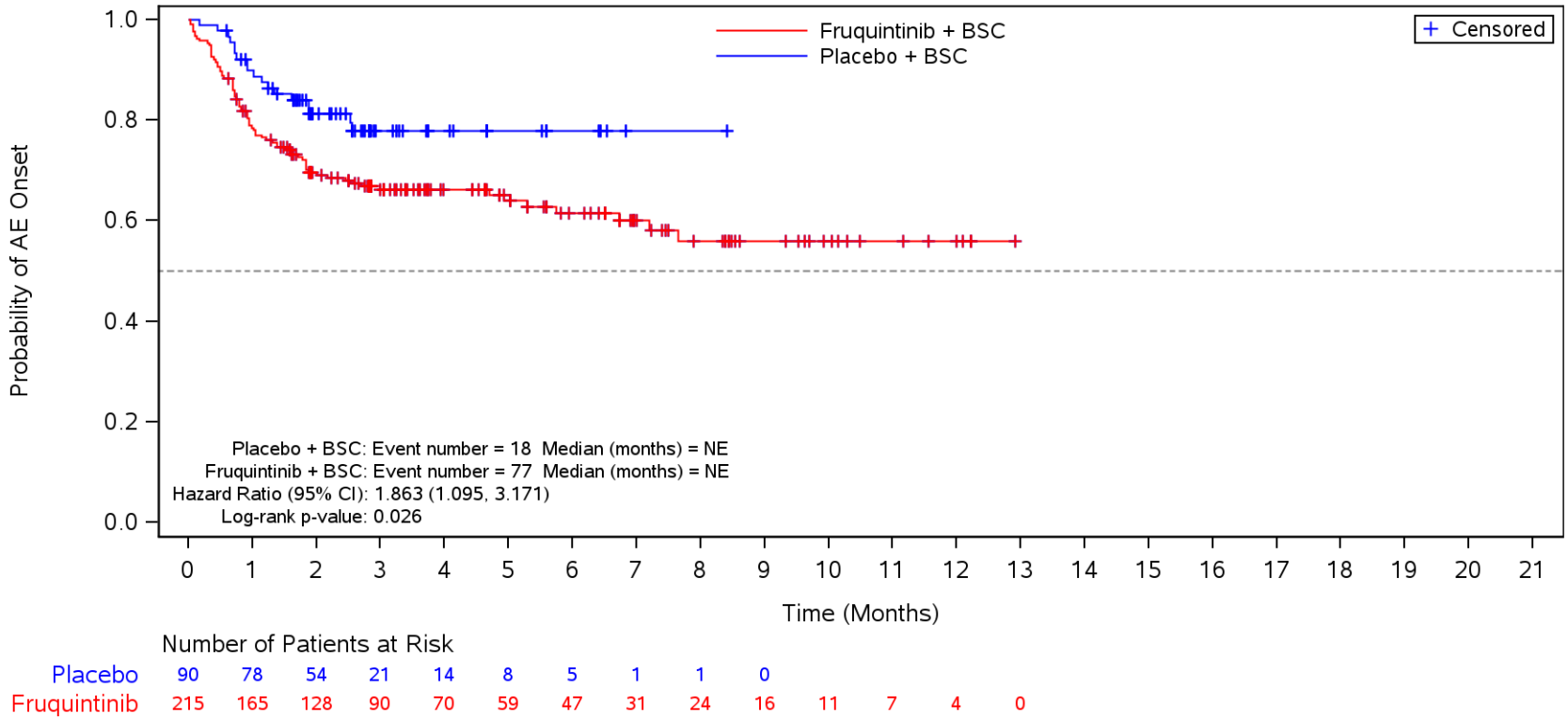
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Female



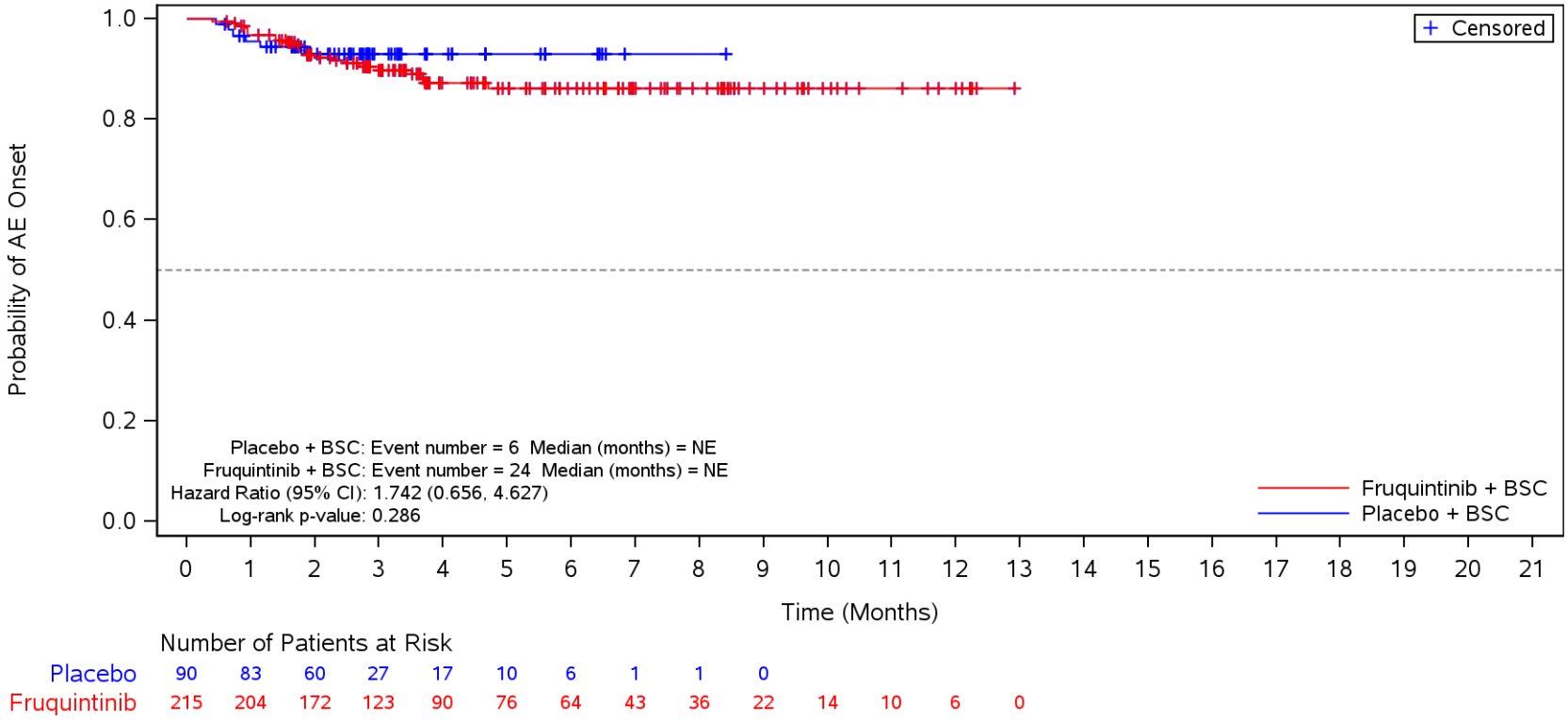
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
Female



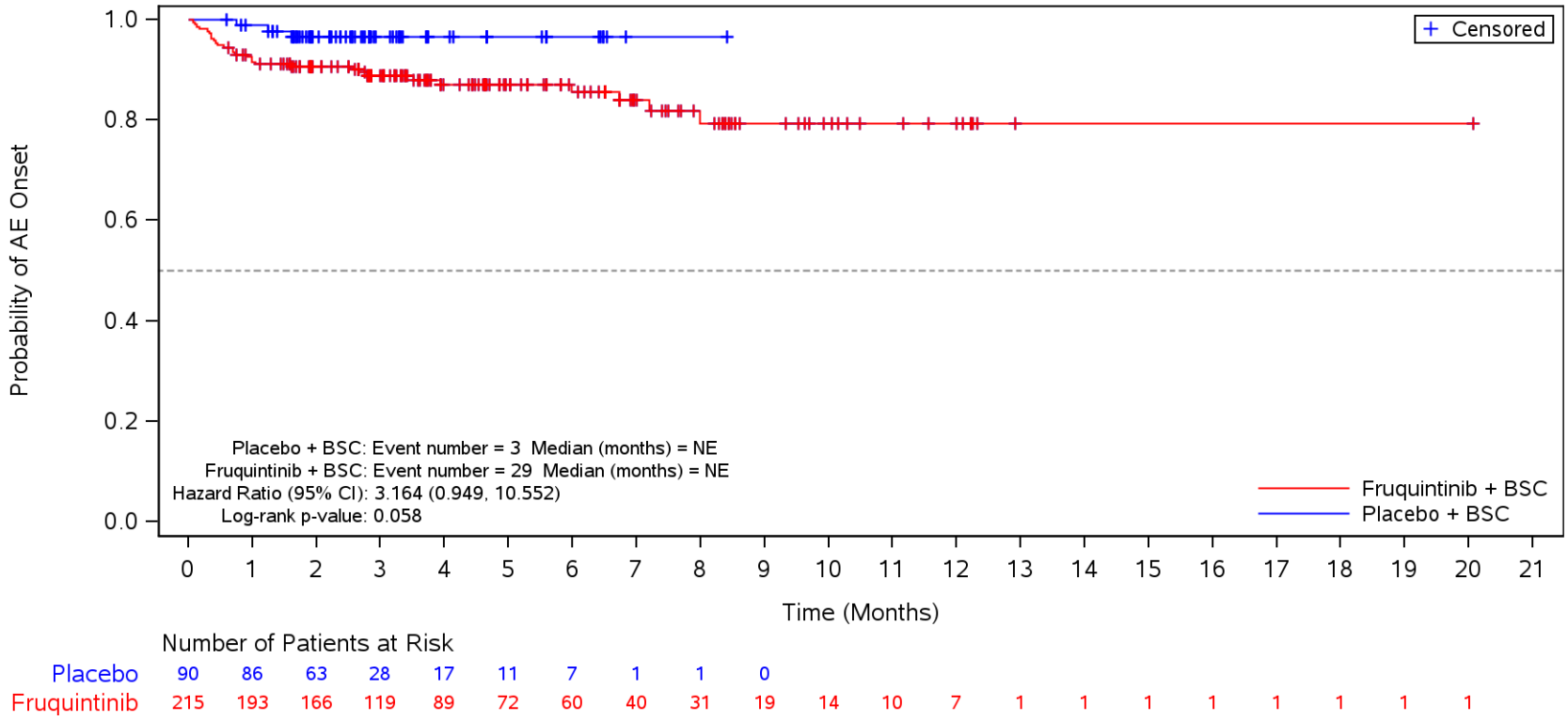
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
Female



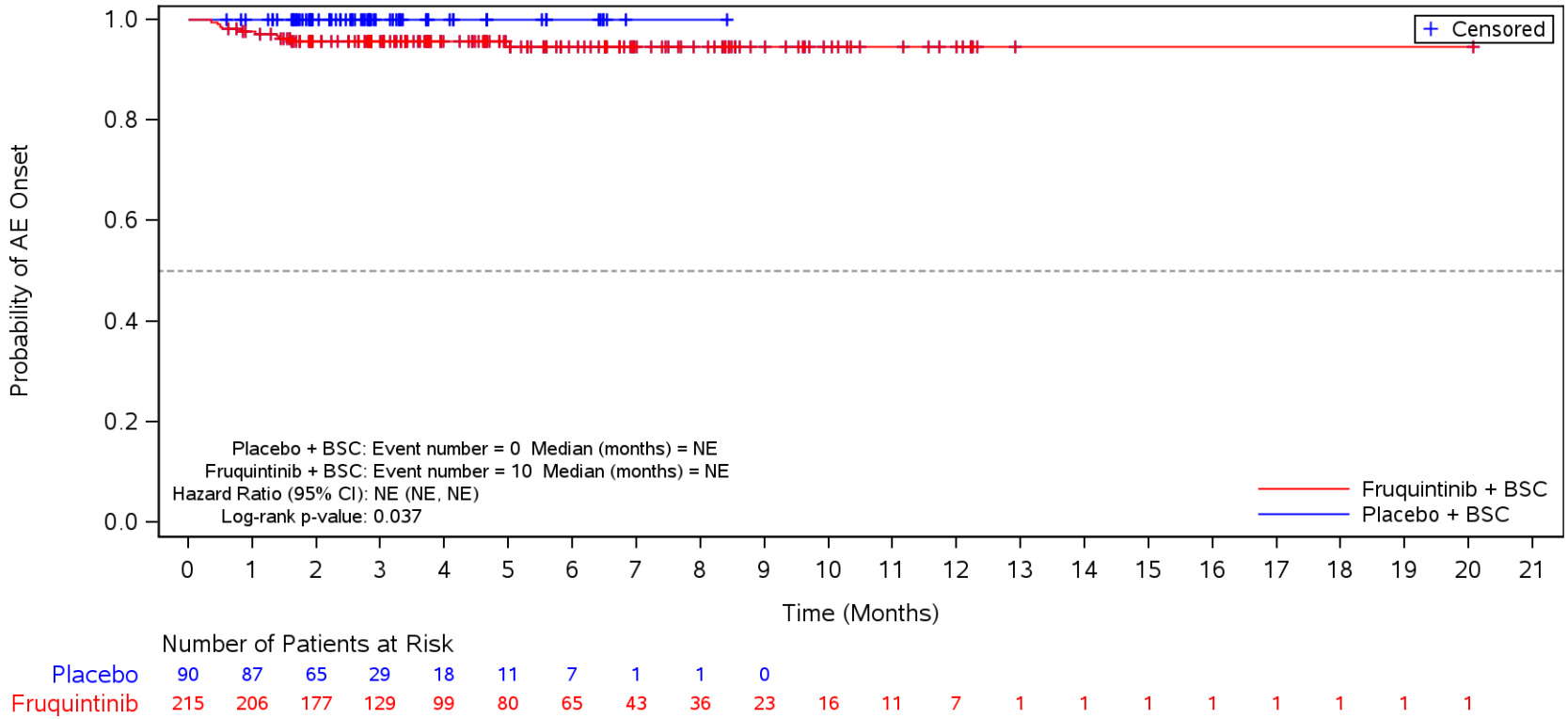
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
Female



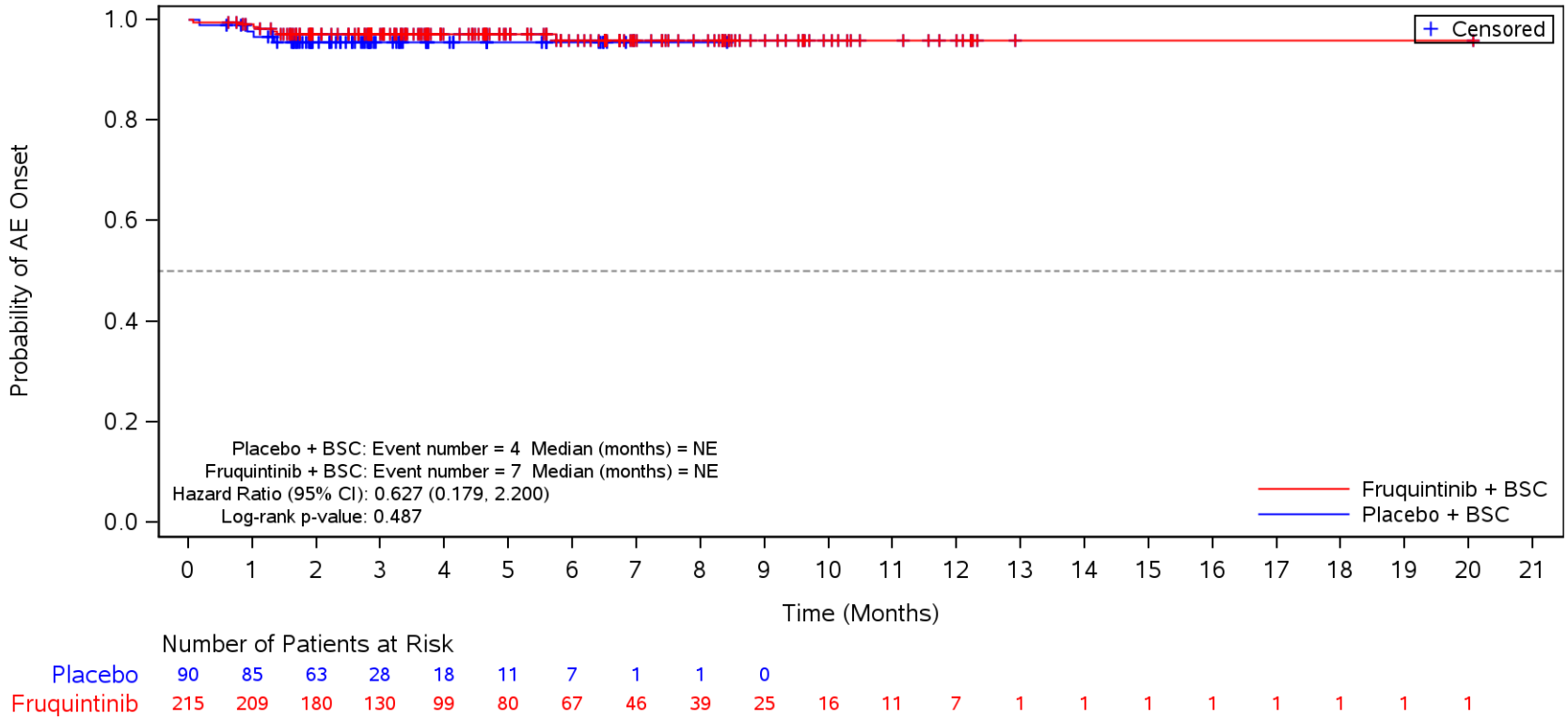
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
Female



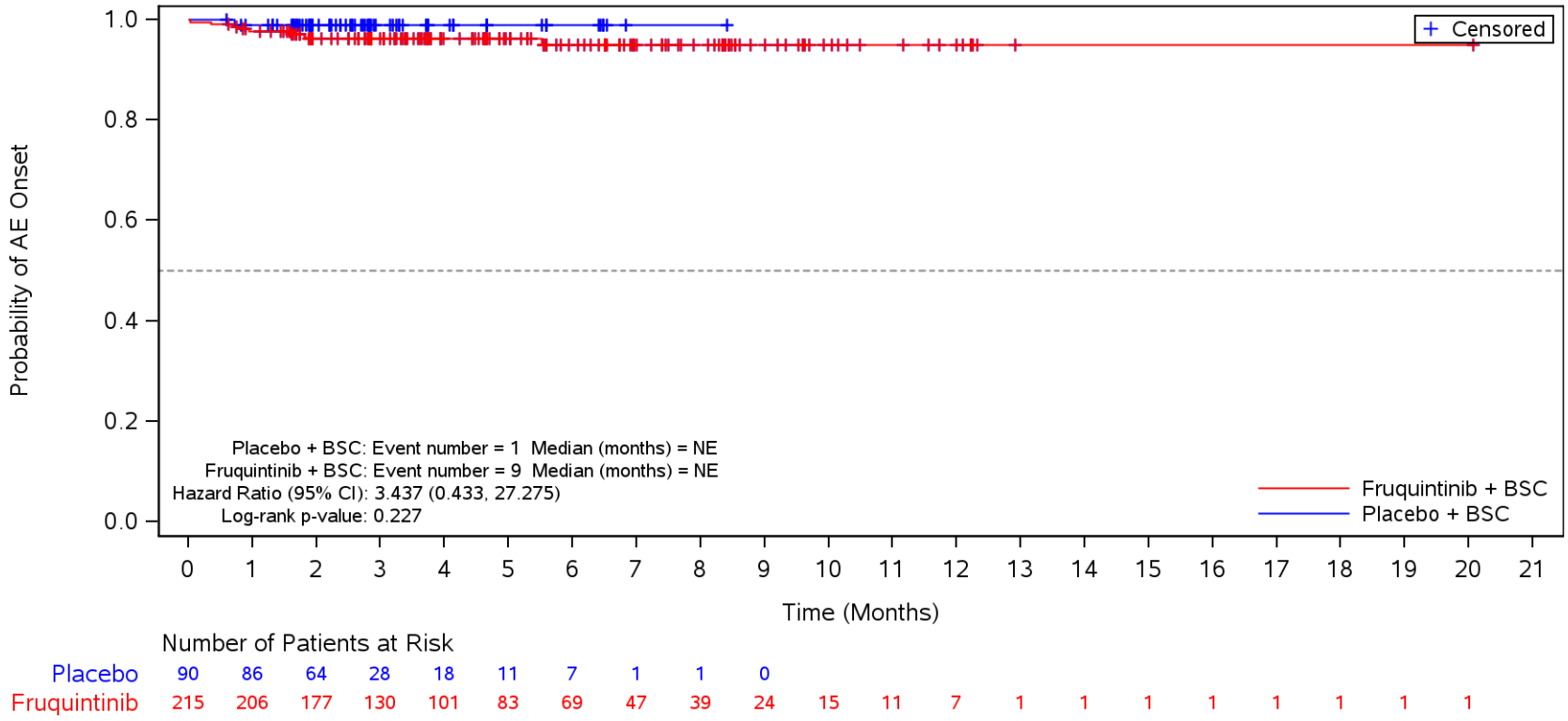
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
Female



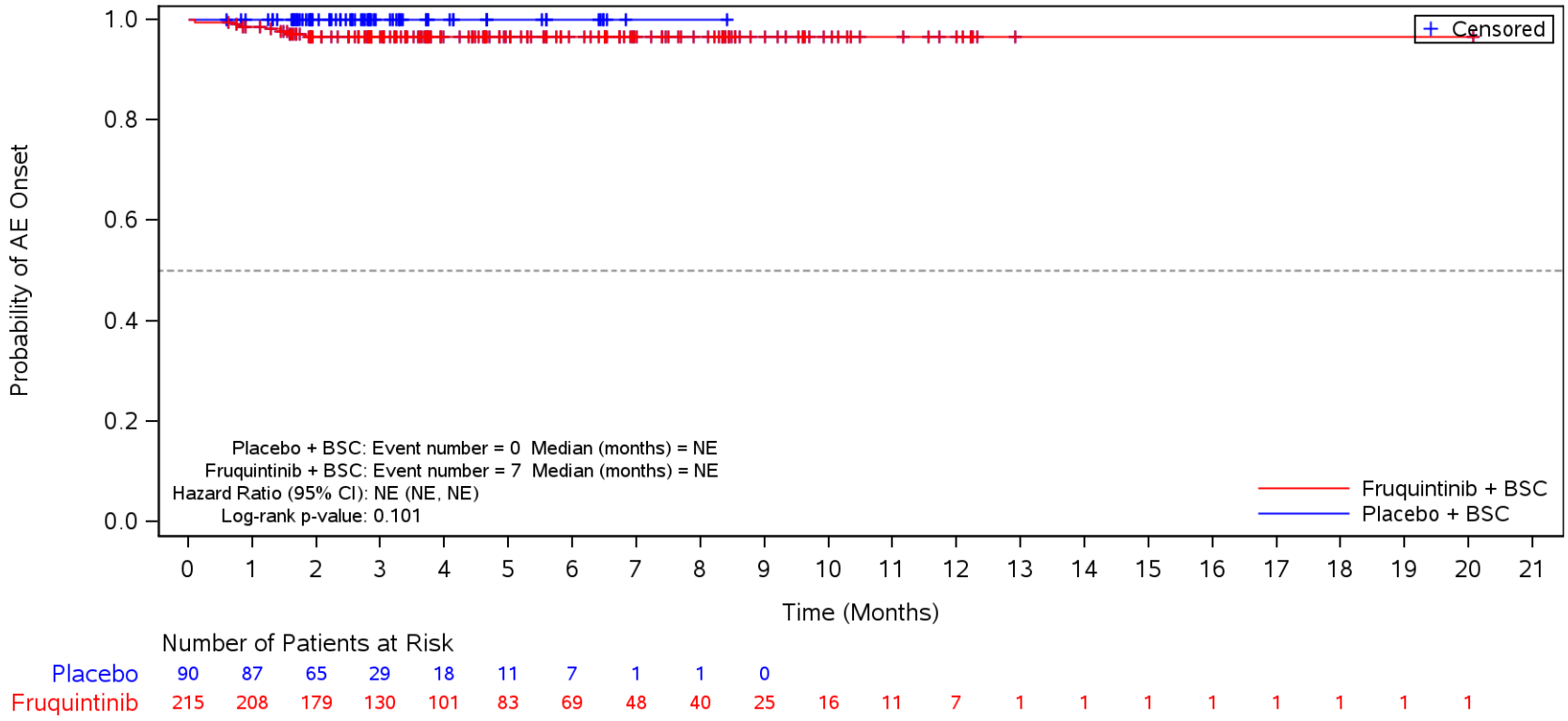
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
Female



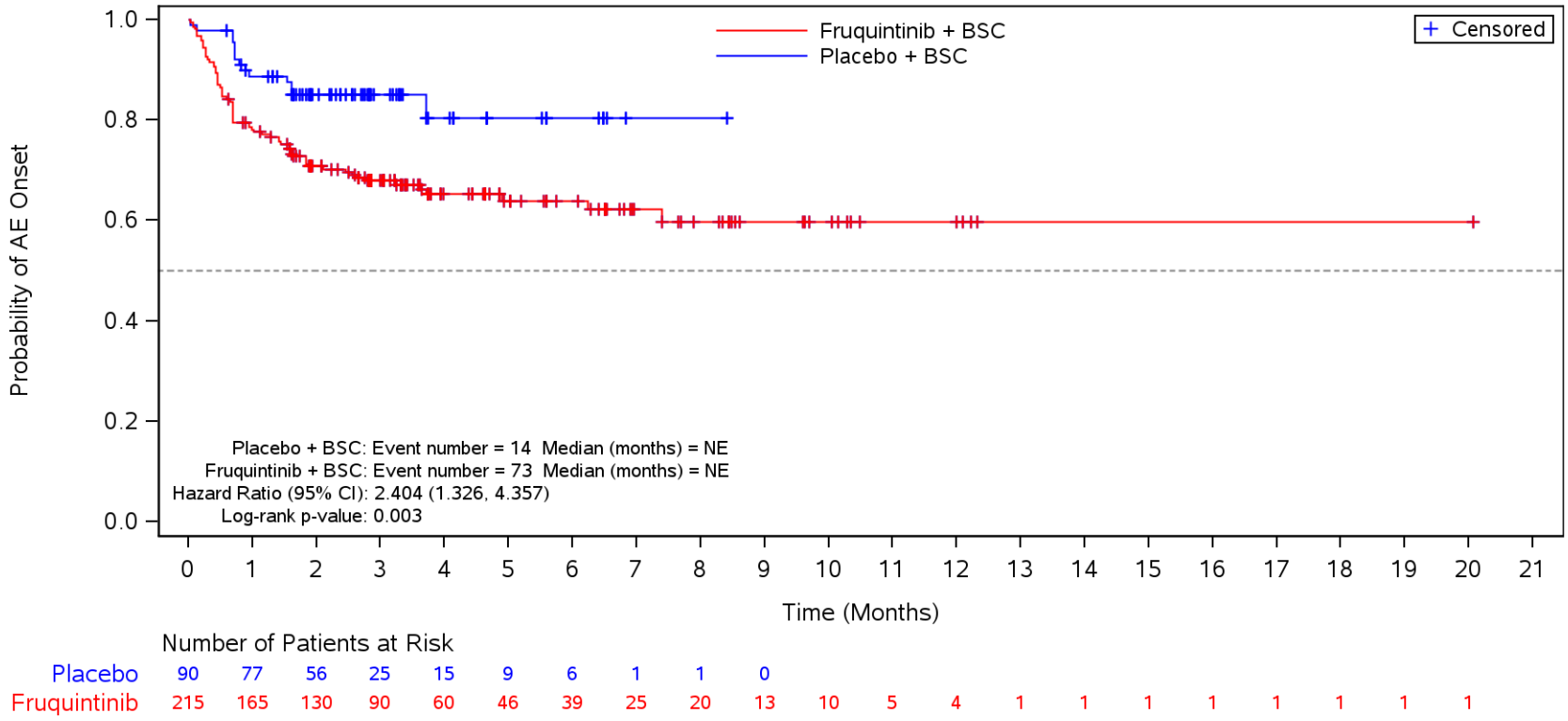
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
Female



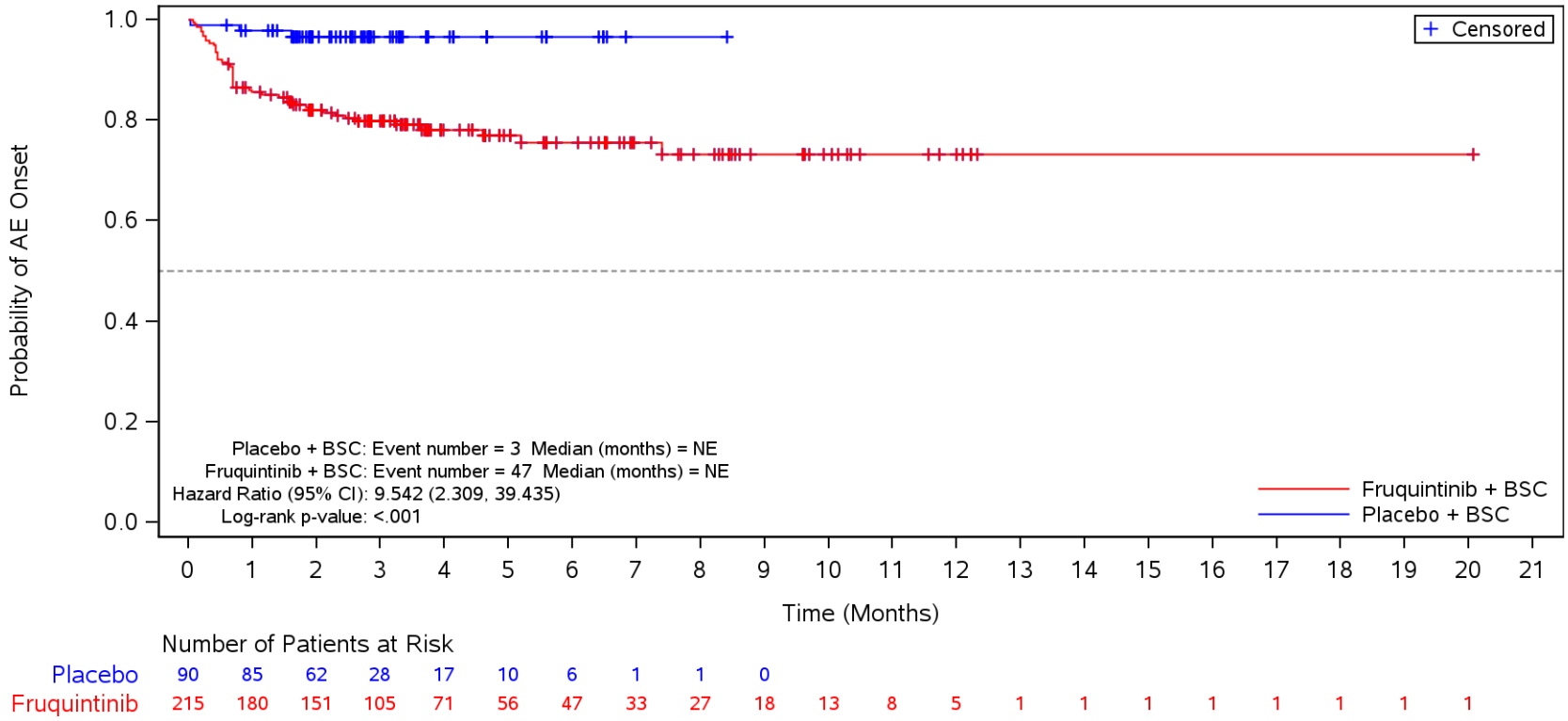
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
Female



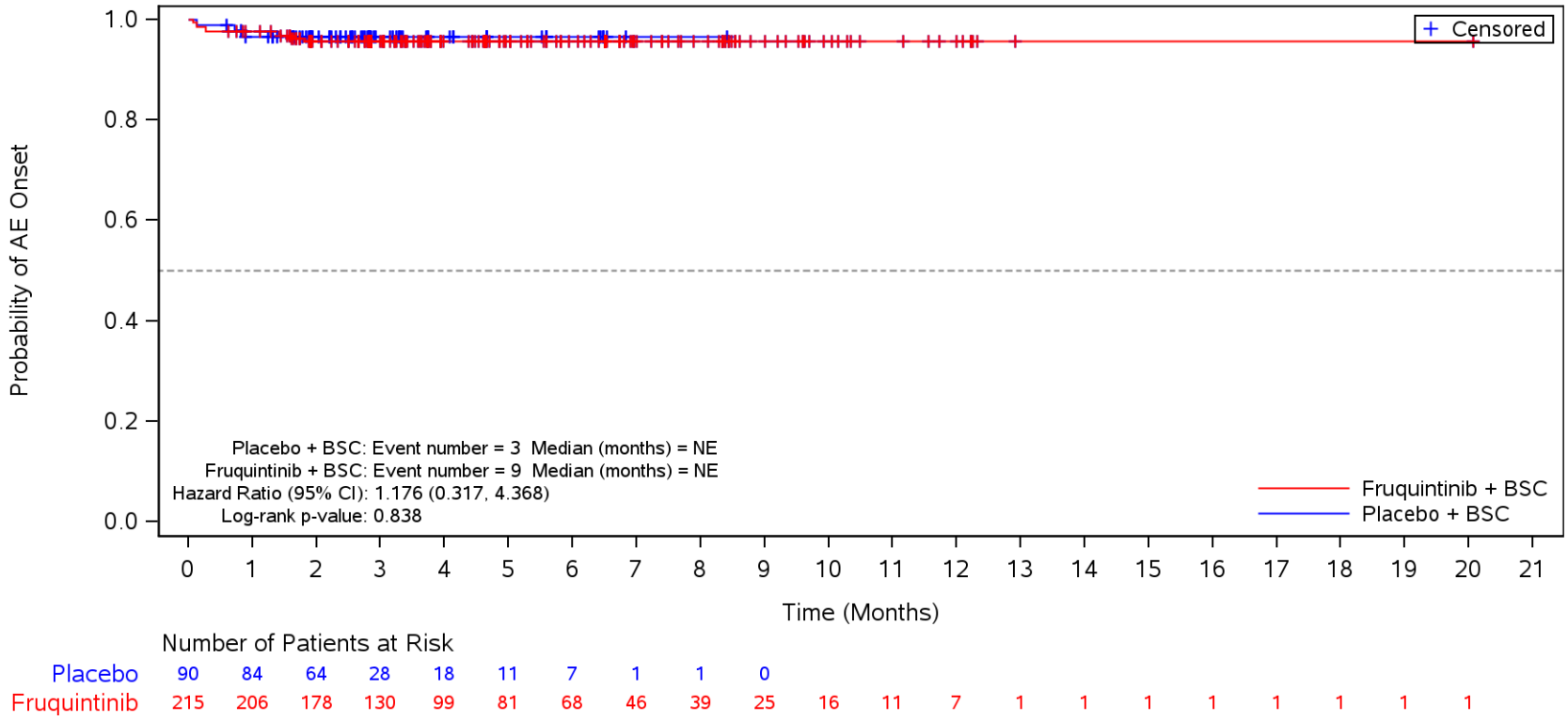
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Female



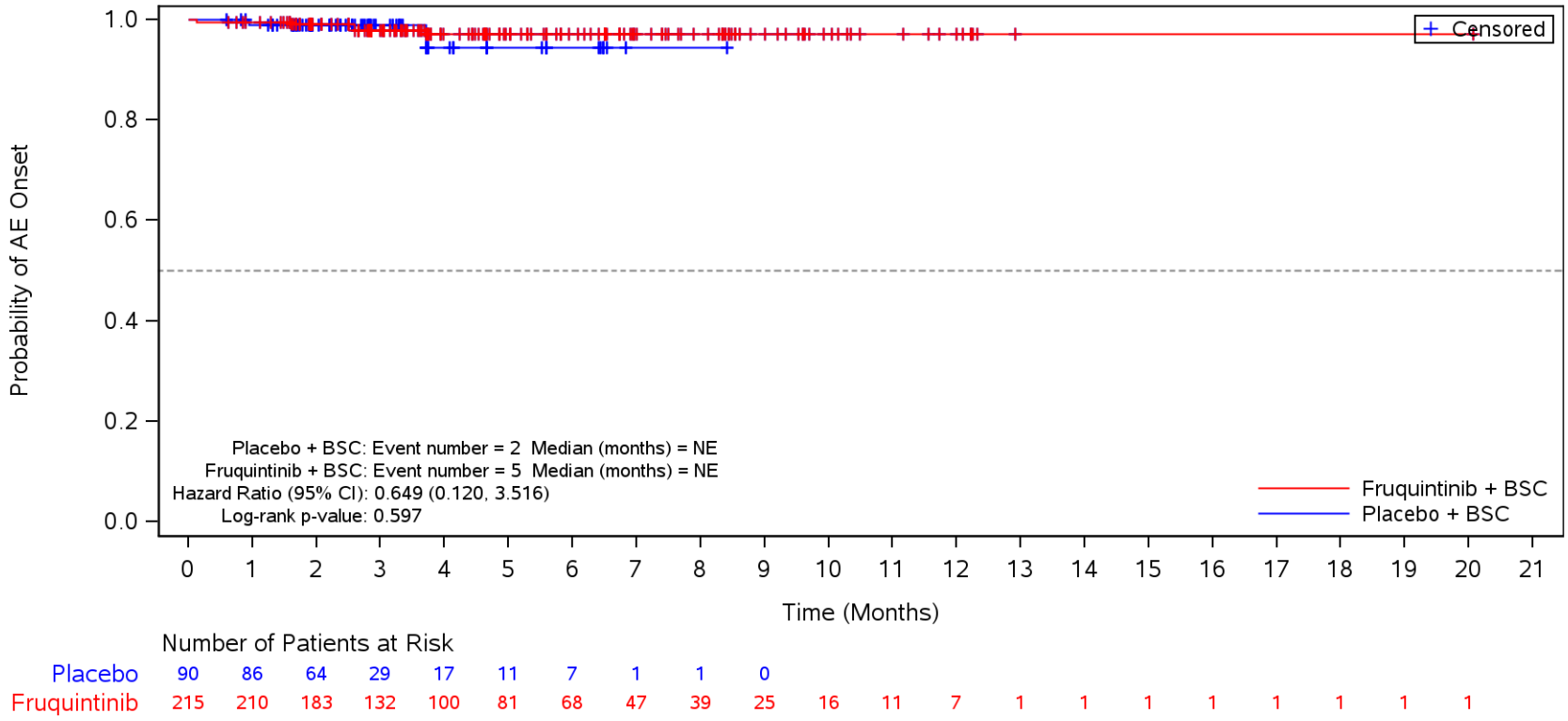
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
Female



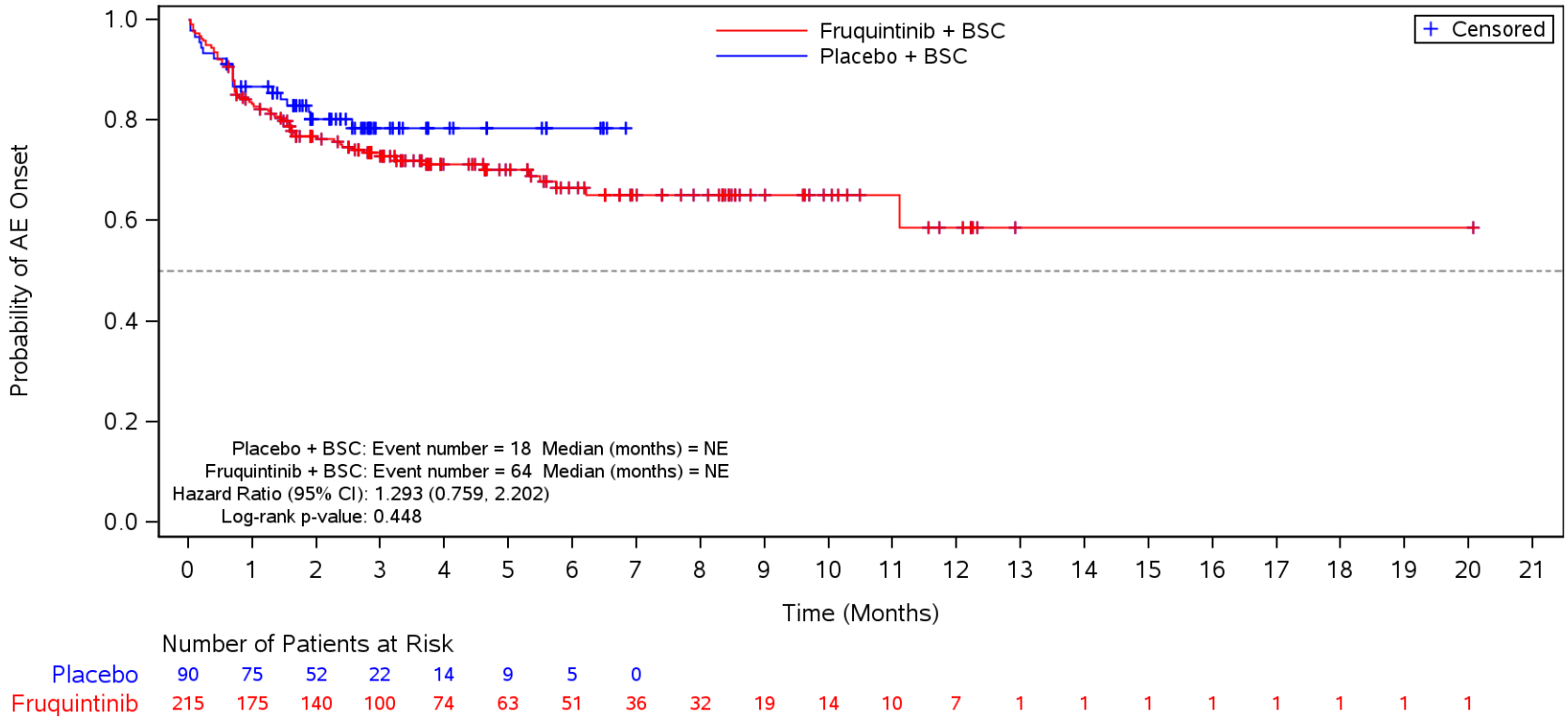
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
Female



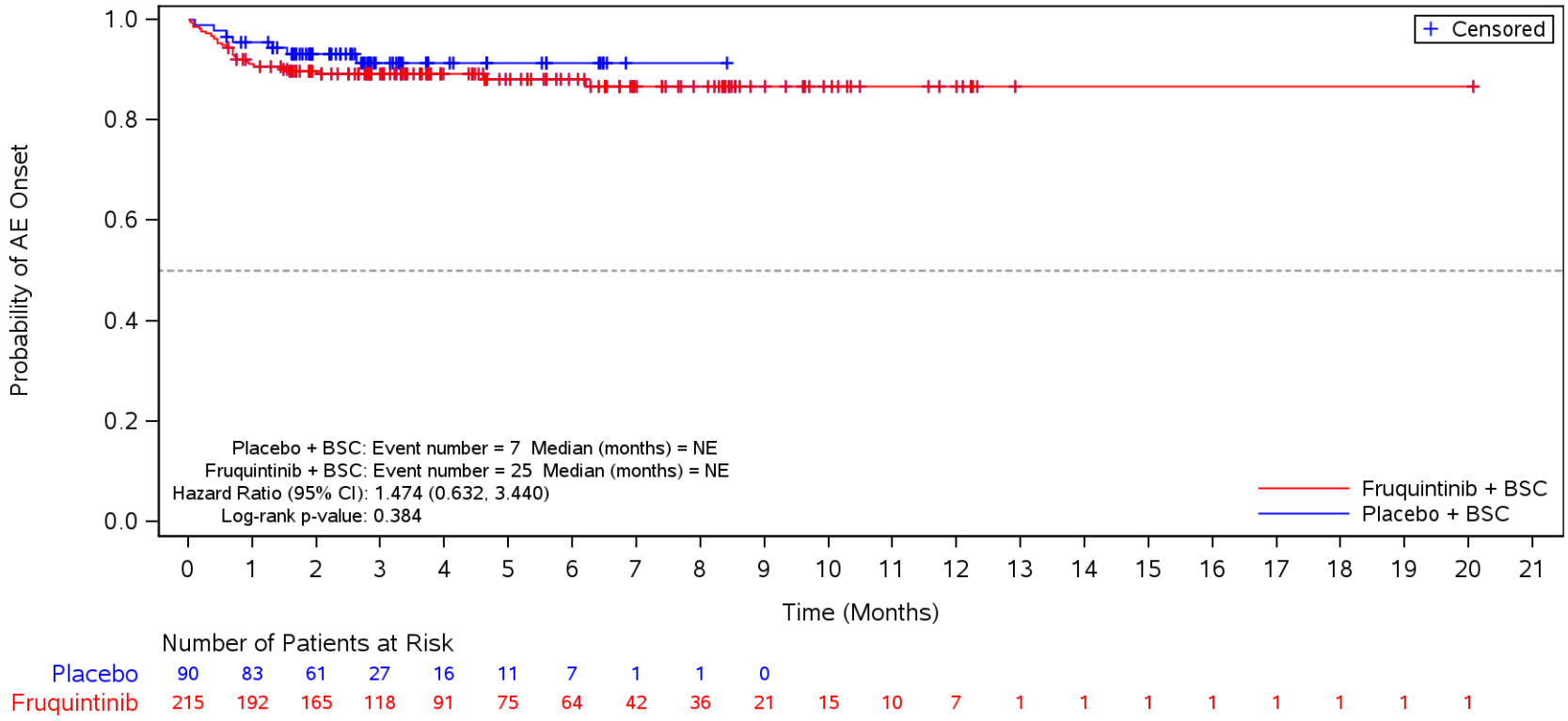
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Nervous system disorders**
Female



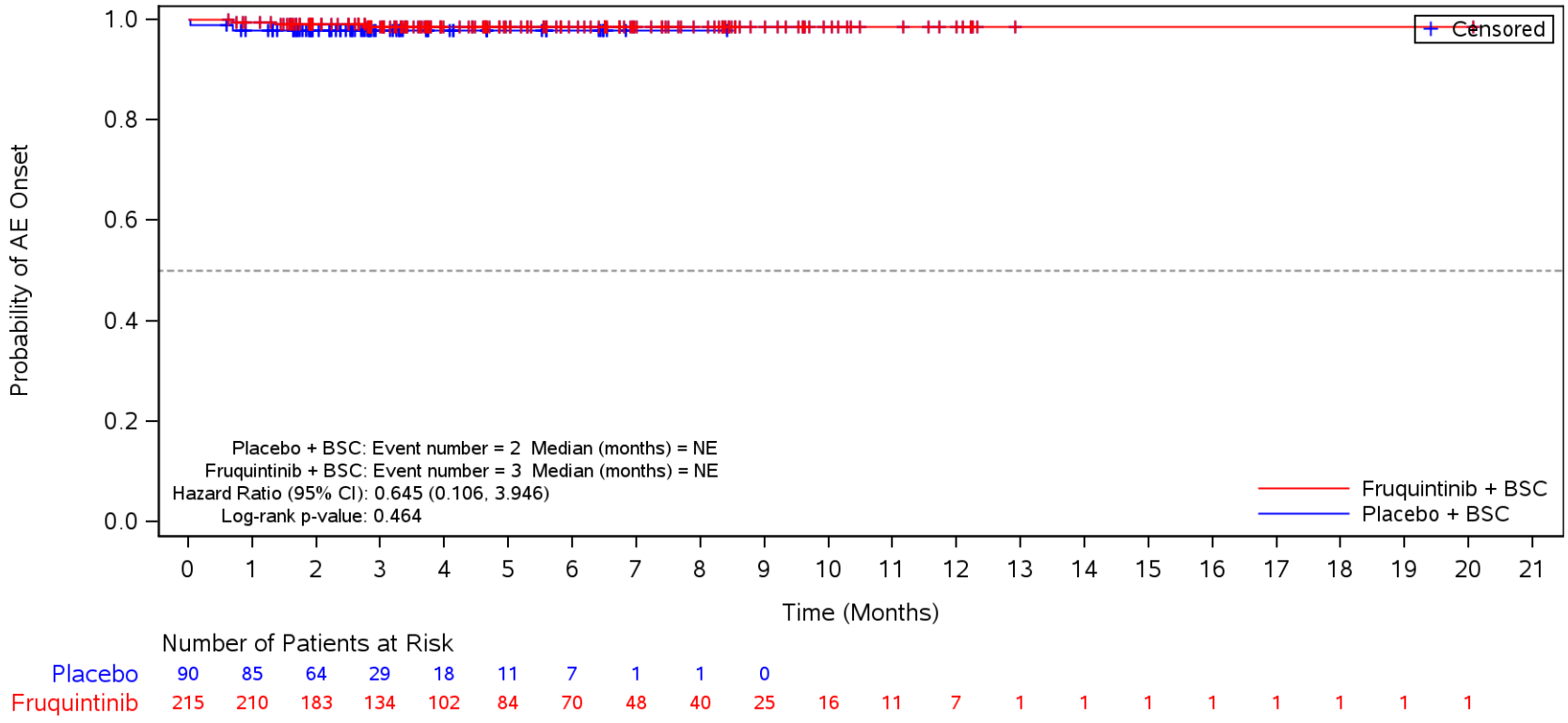
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
Female



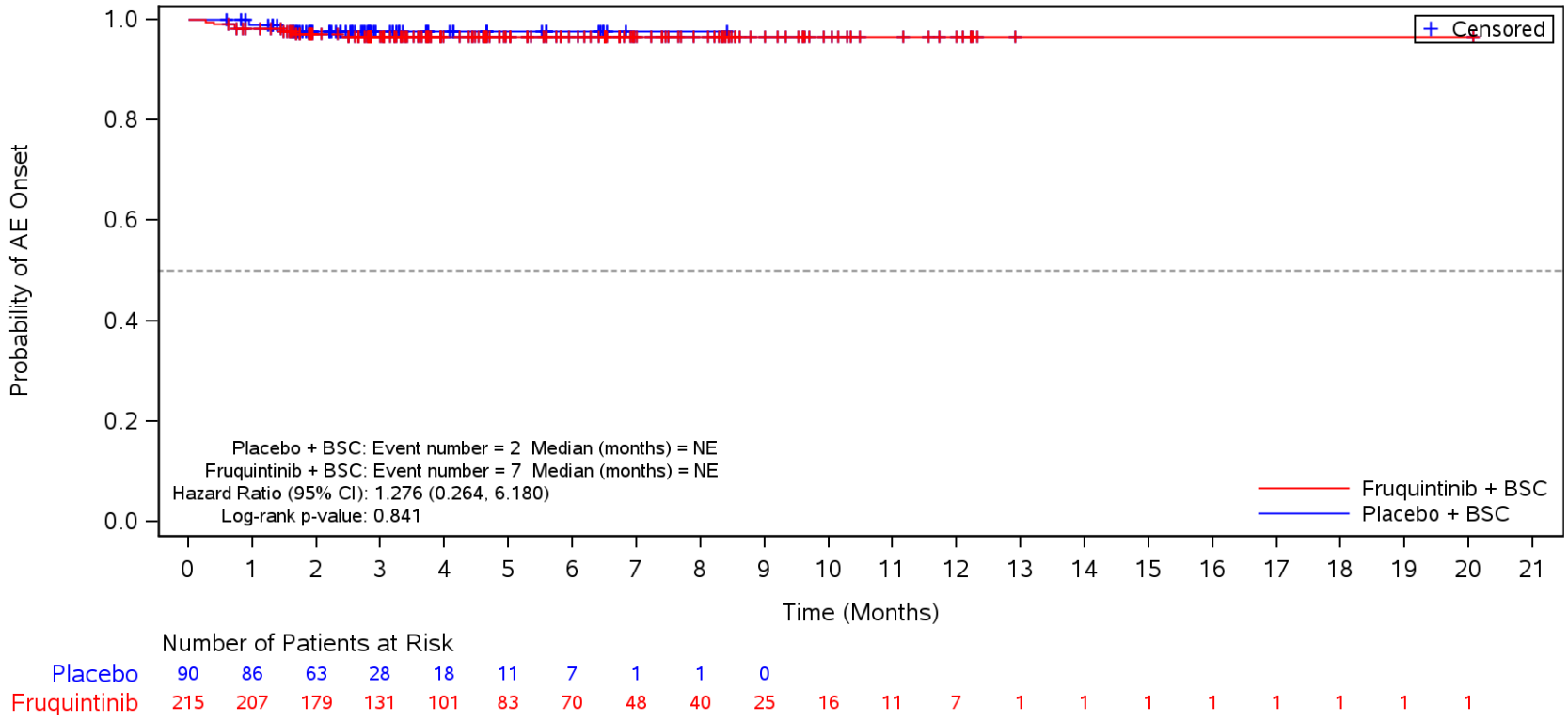
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
Female



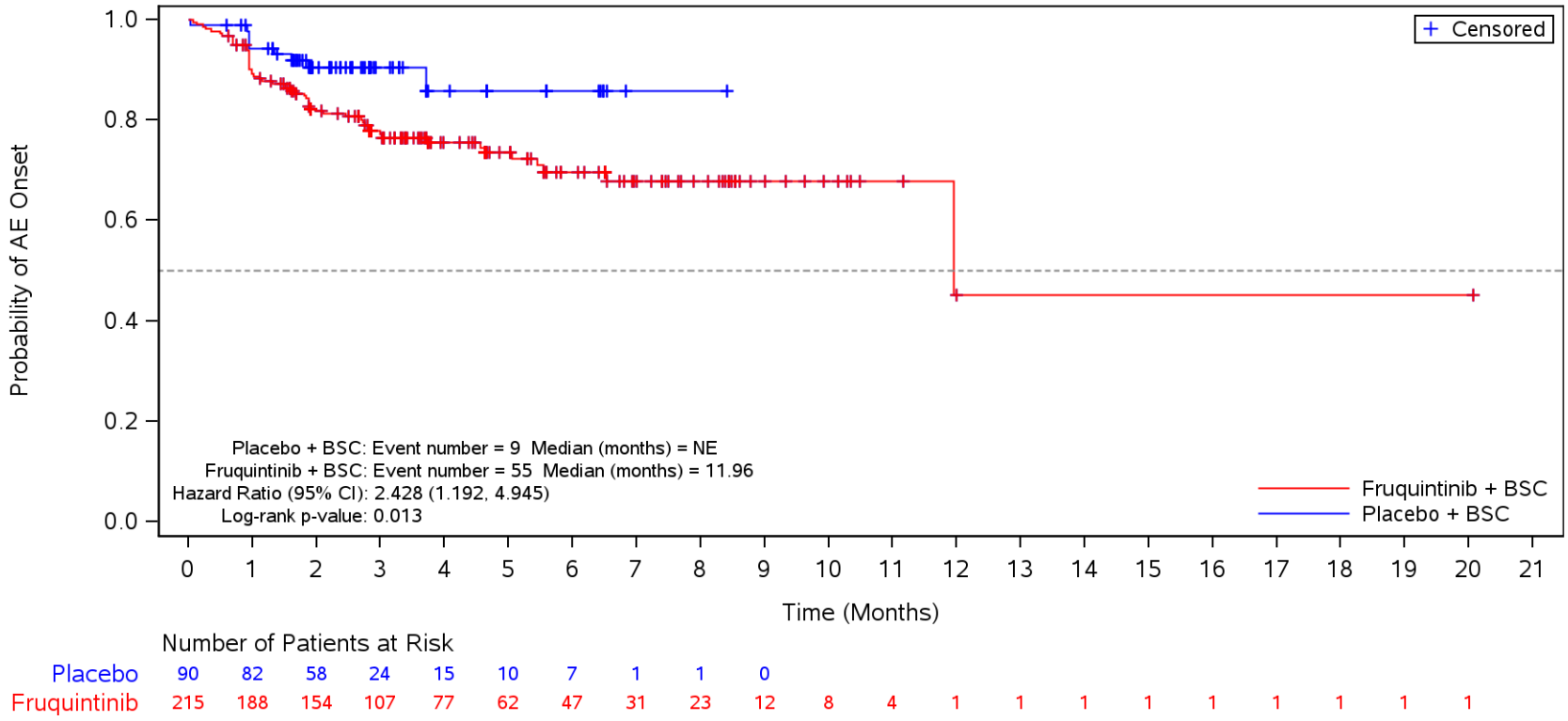
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
Female



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
Female

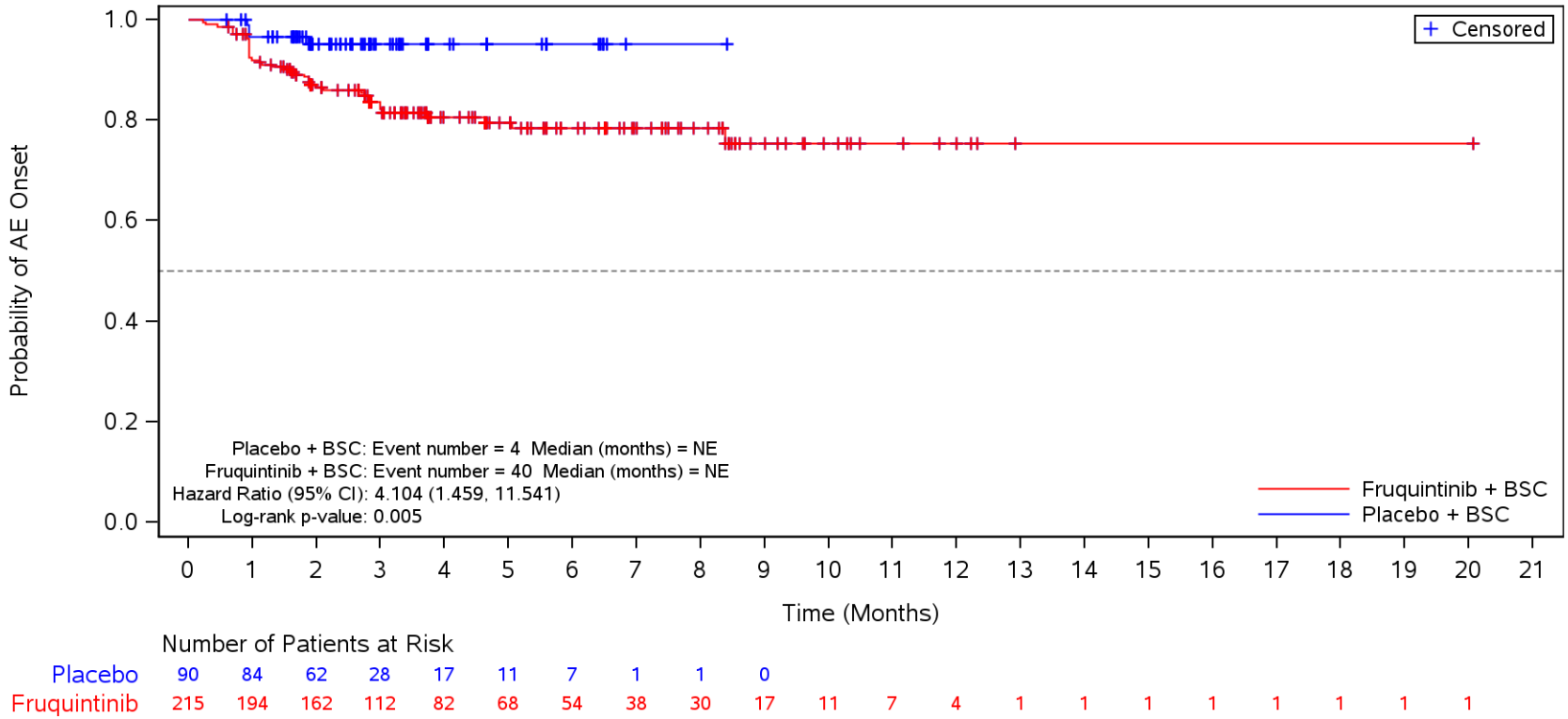


Number of Patients at Risk

Placebo	90	82	58	24	15	10	7	1	1	0											
Fruquintinib	215	188	154	107	77	62	47	31	23	12	8	4	1	1	1	1	1	1	1	1	1

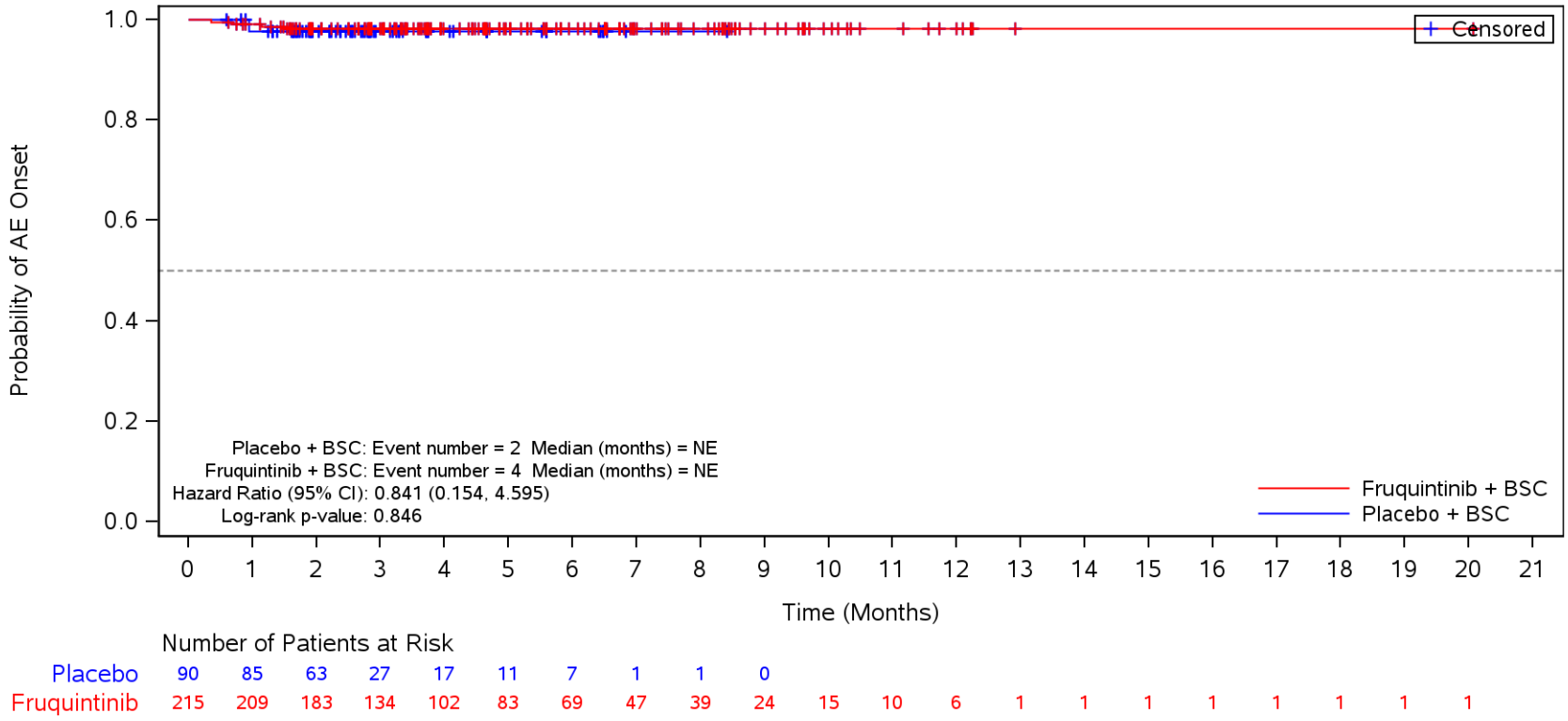
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
Female



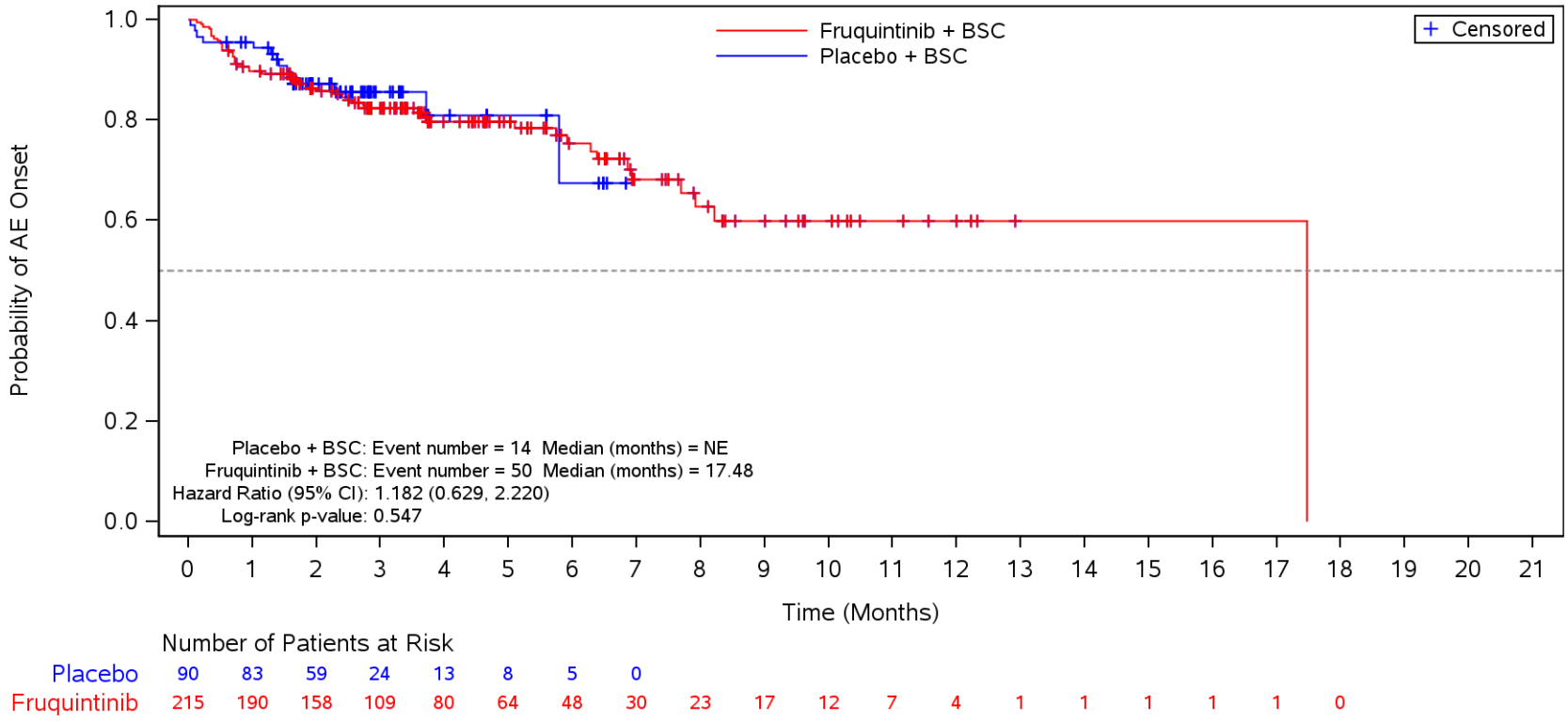
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**
Female



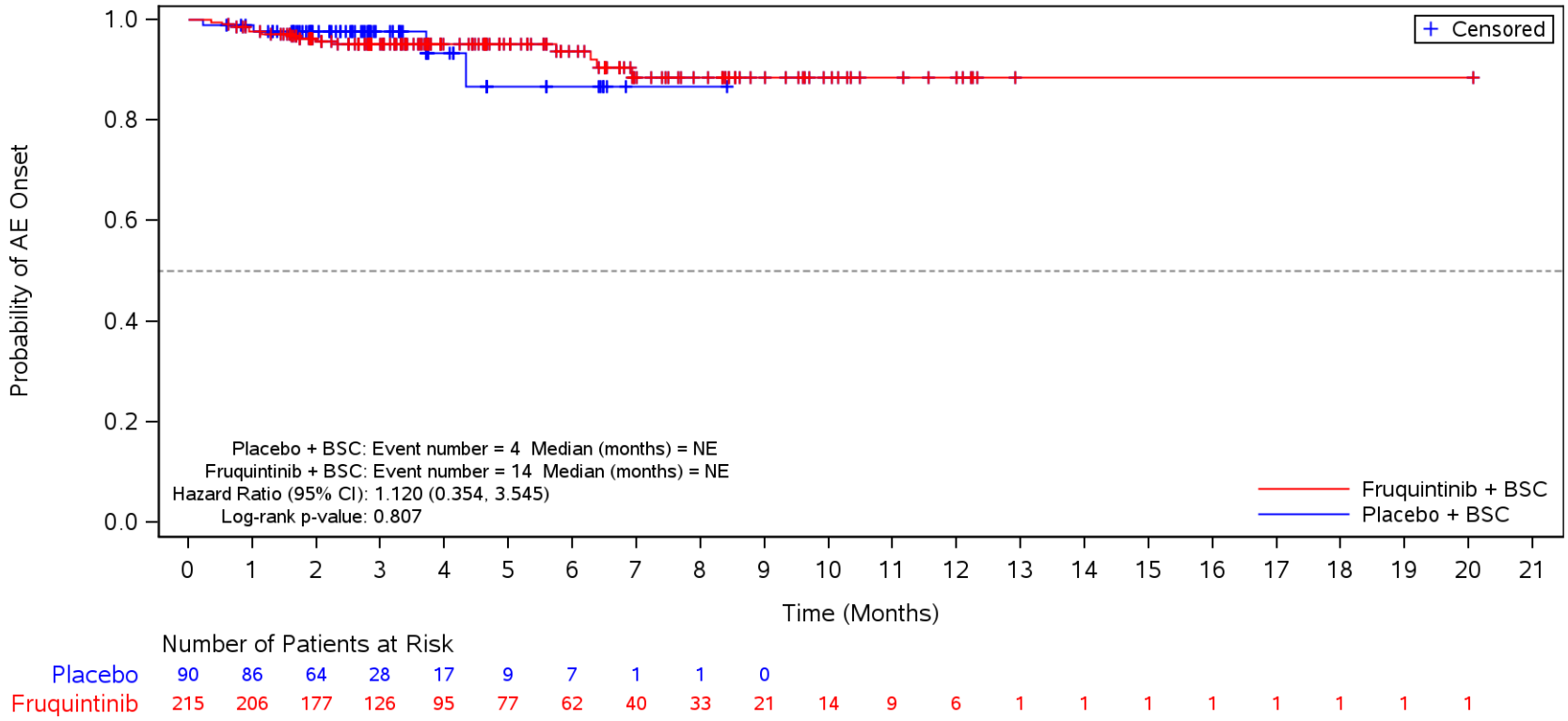
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Infections and infestations**
Female



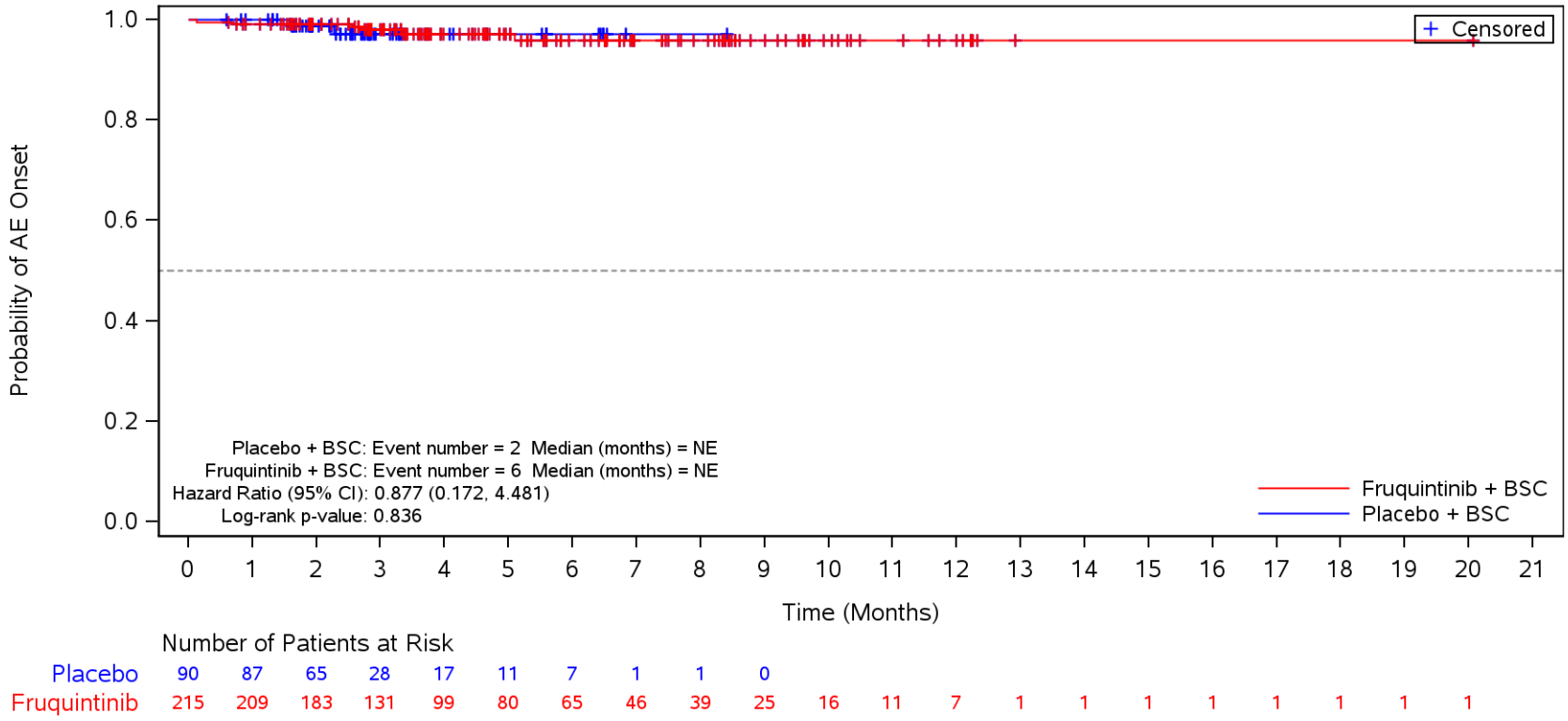
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
Female



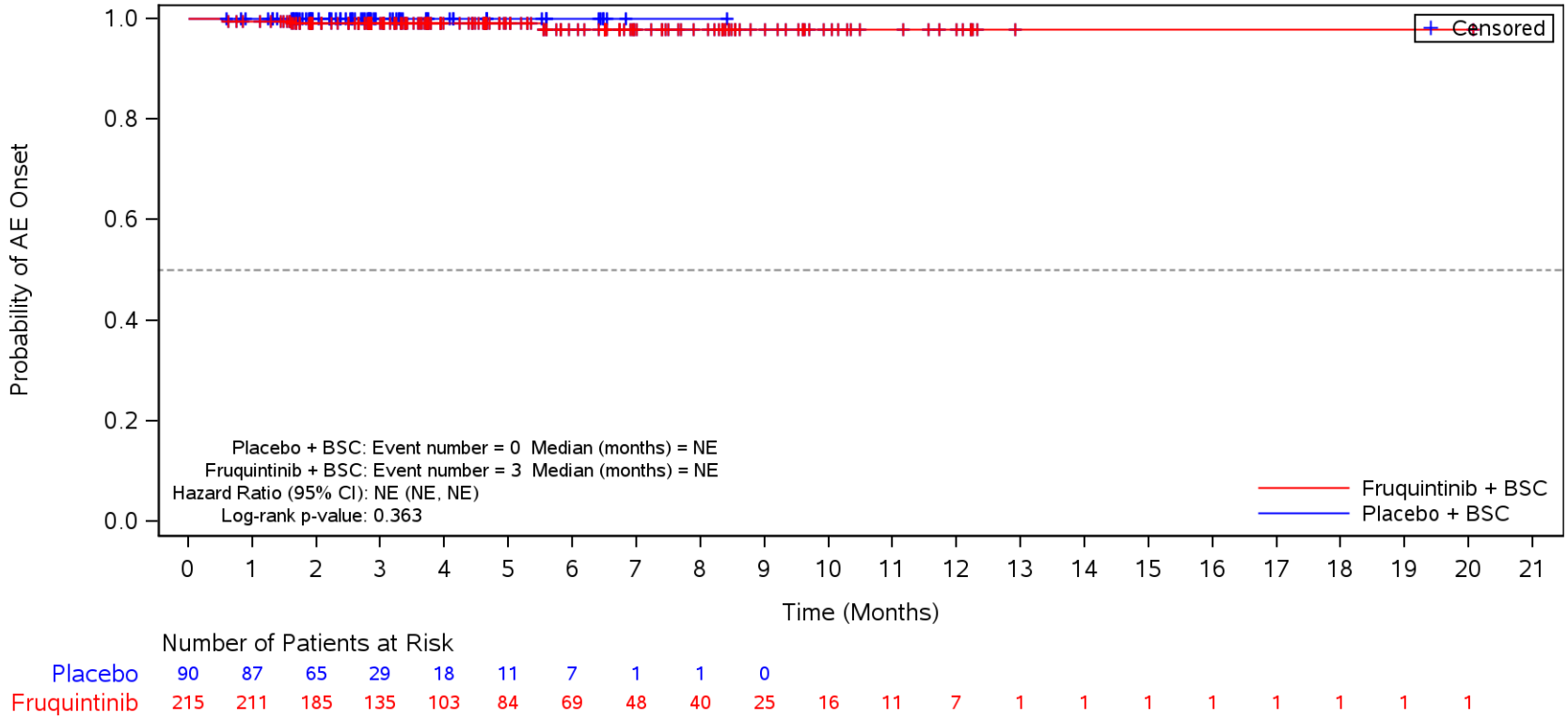
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**
Female



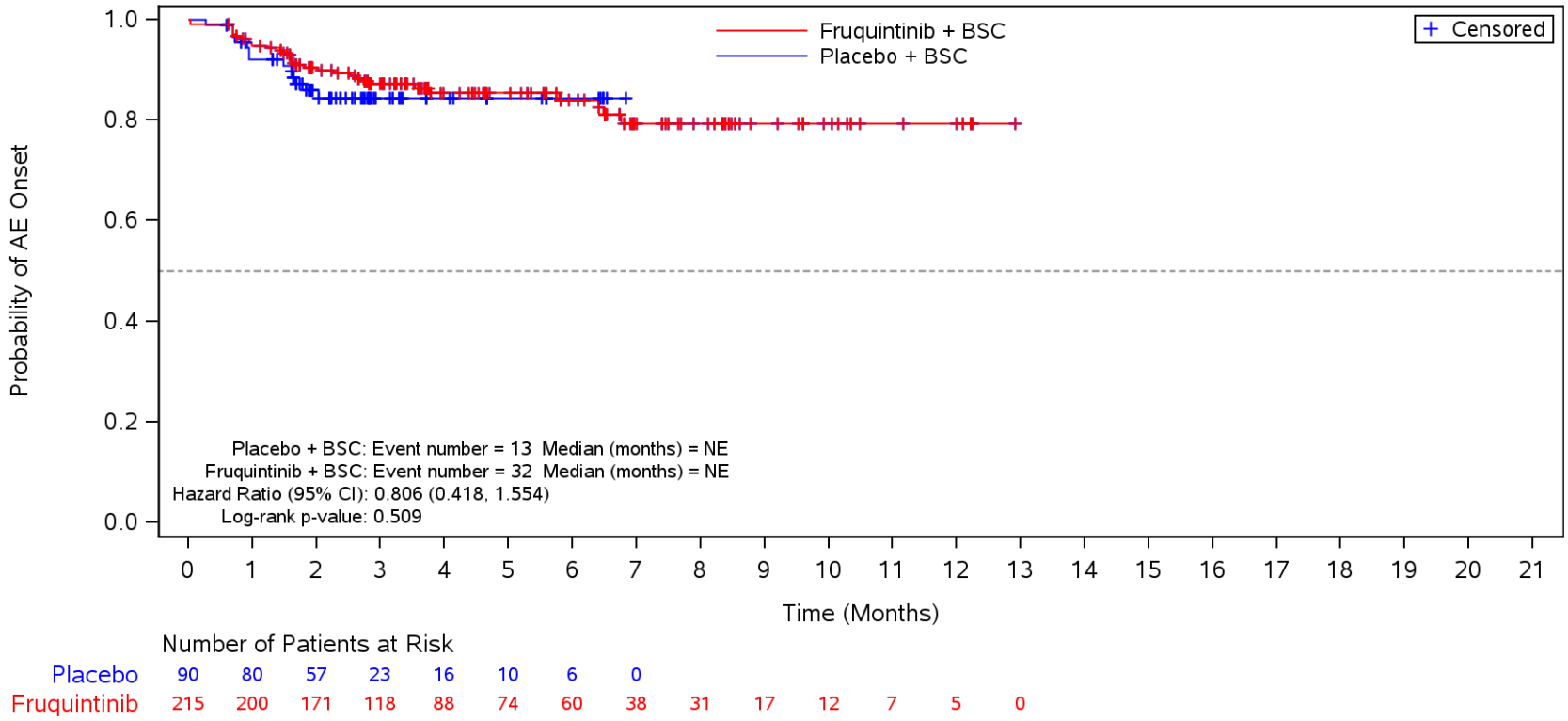
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**
Female



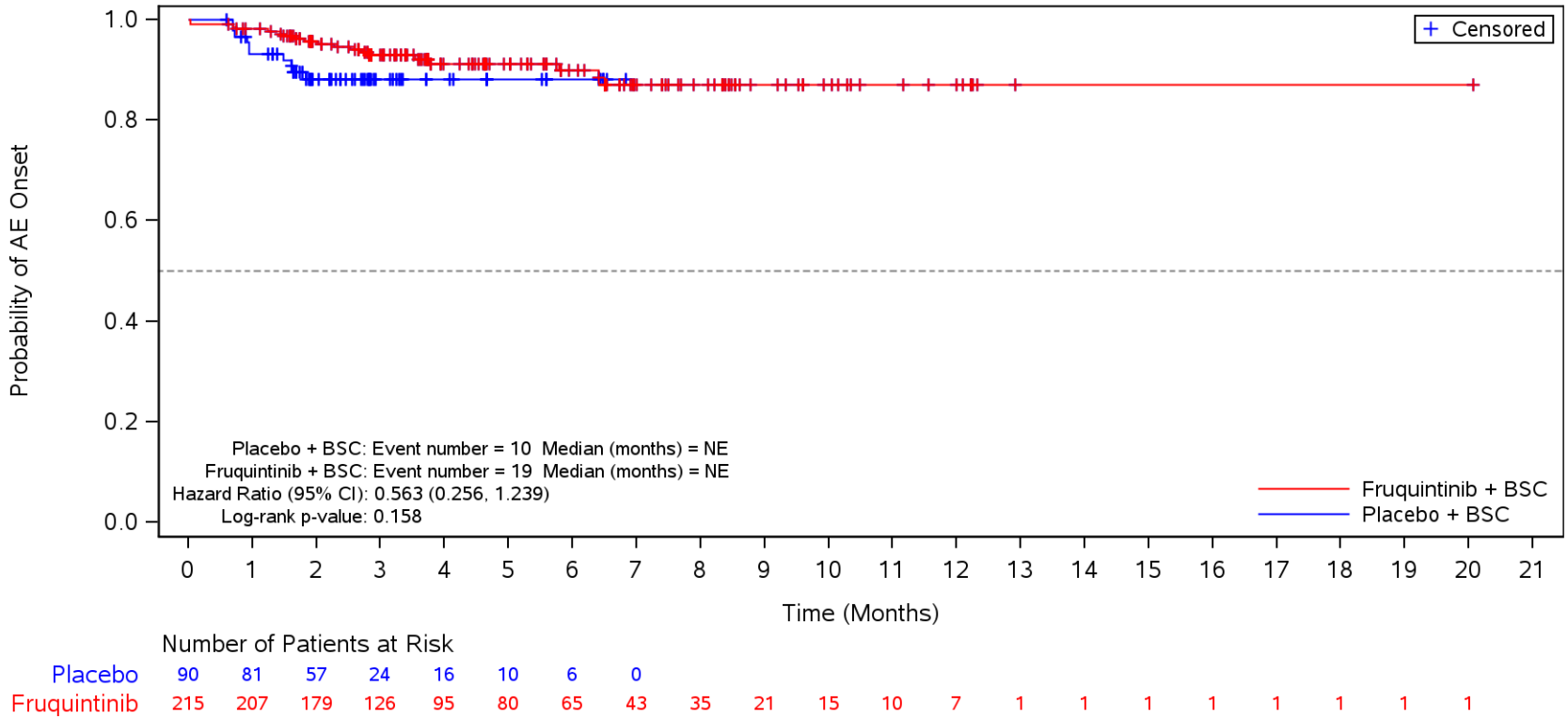
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
Female



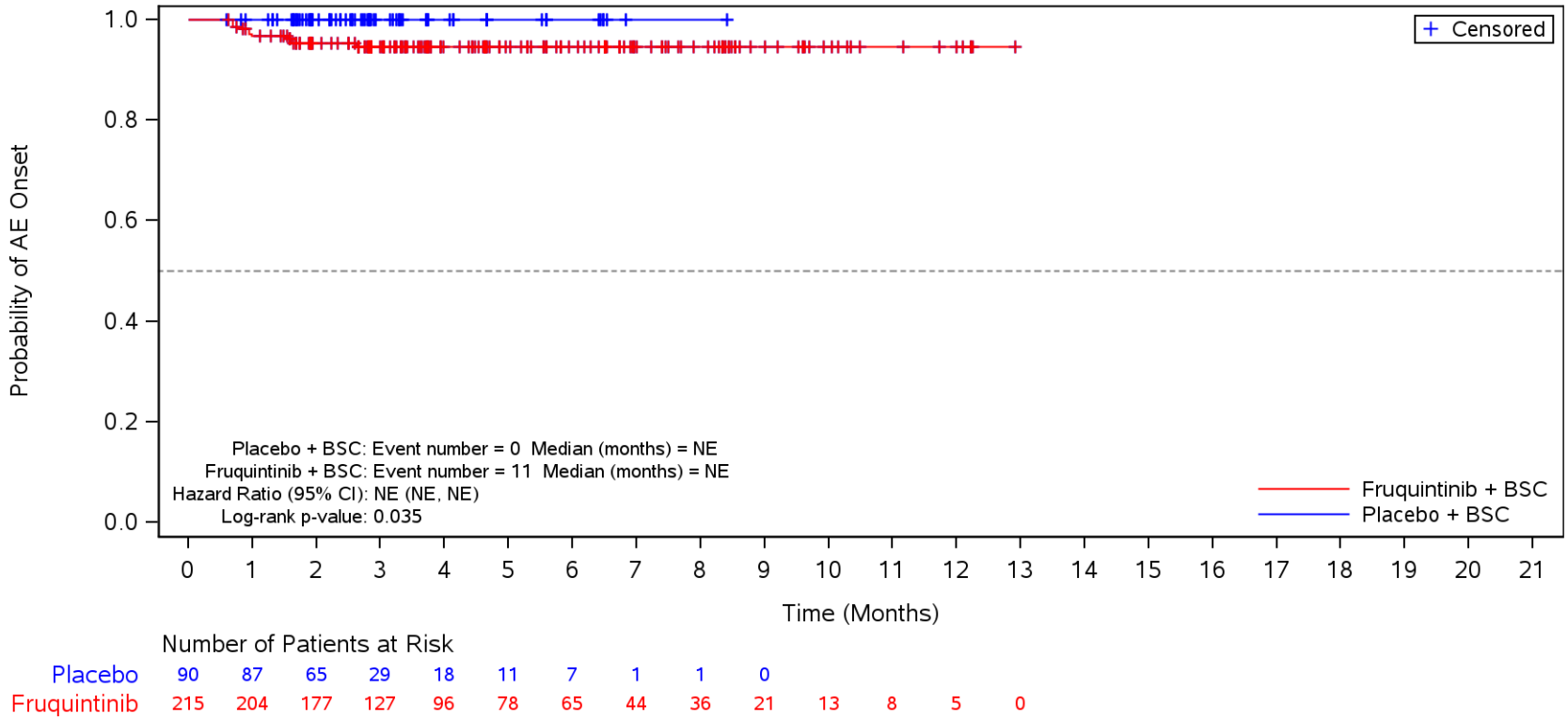
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
Female



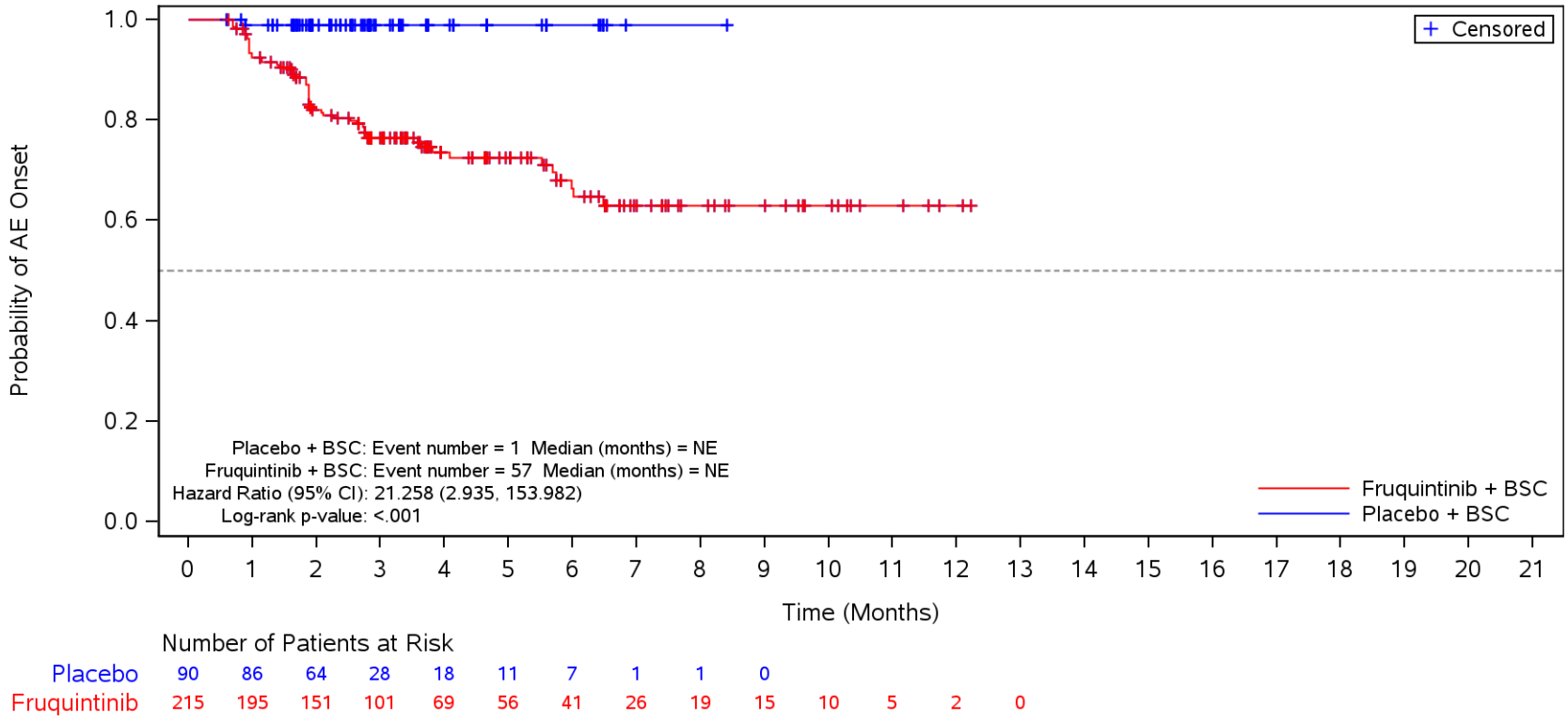
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
Female



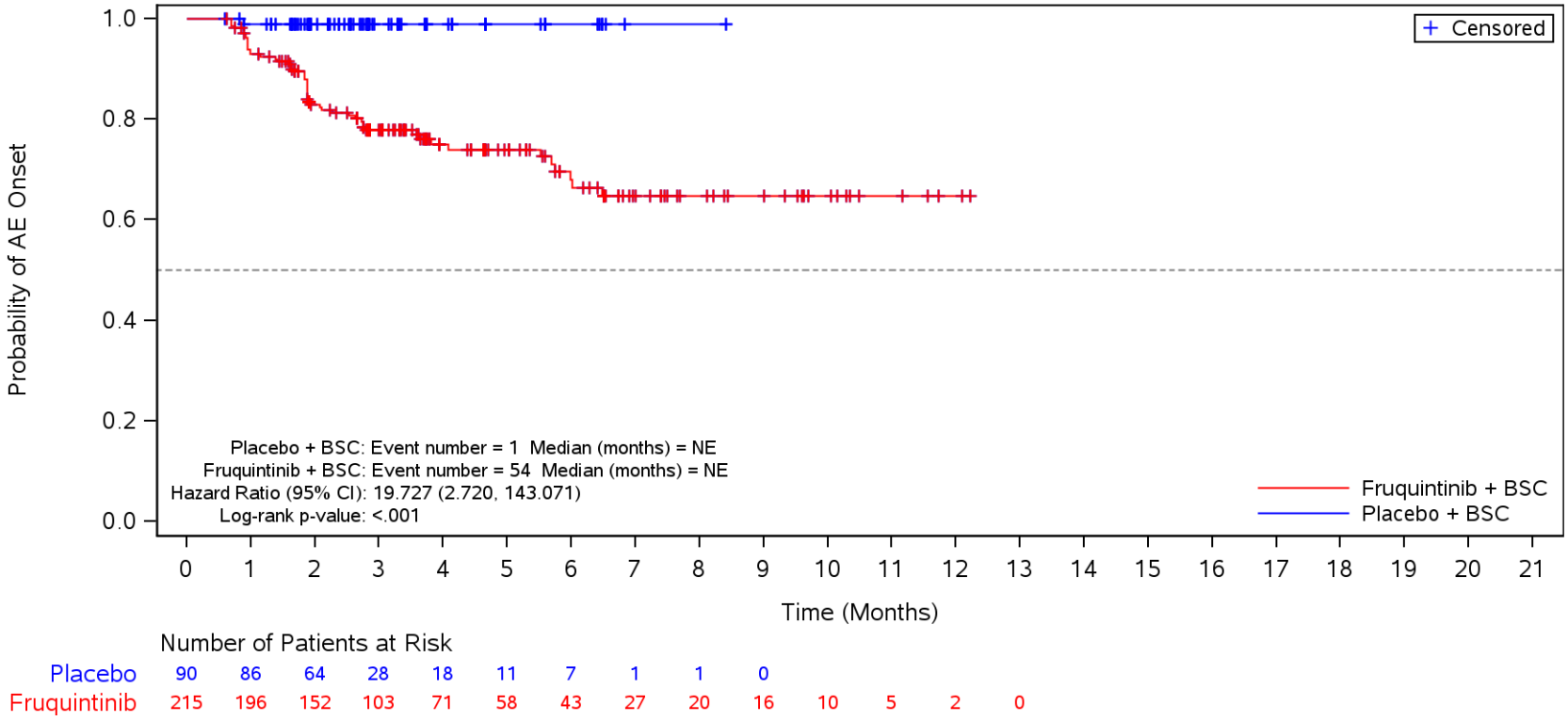
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Endocrine disorders**
Female



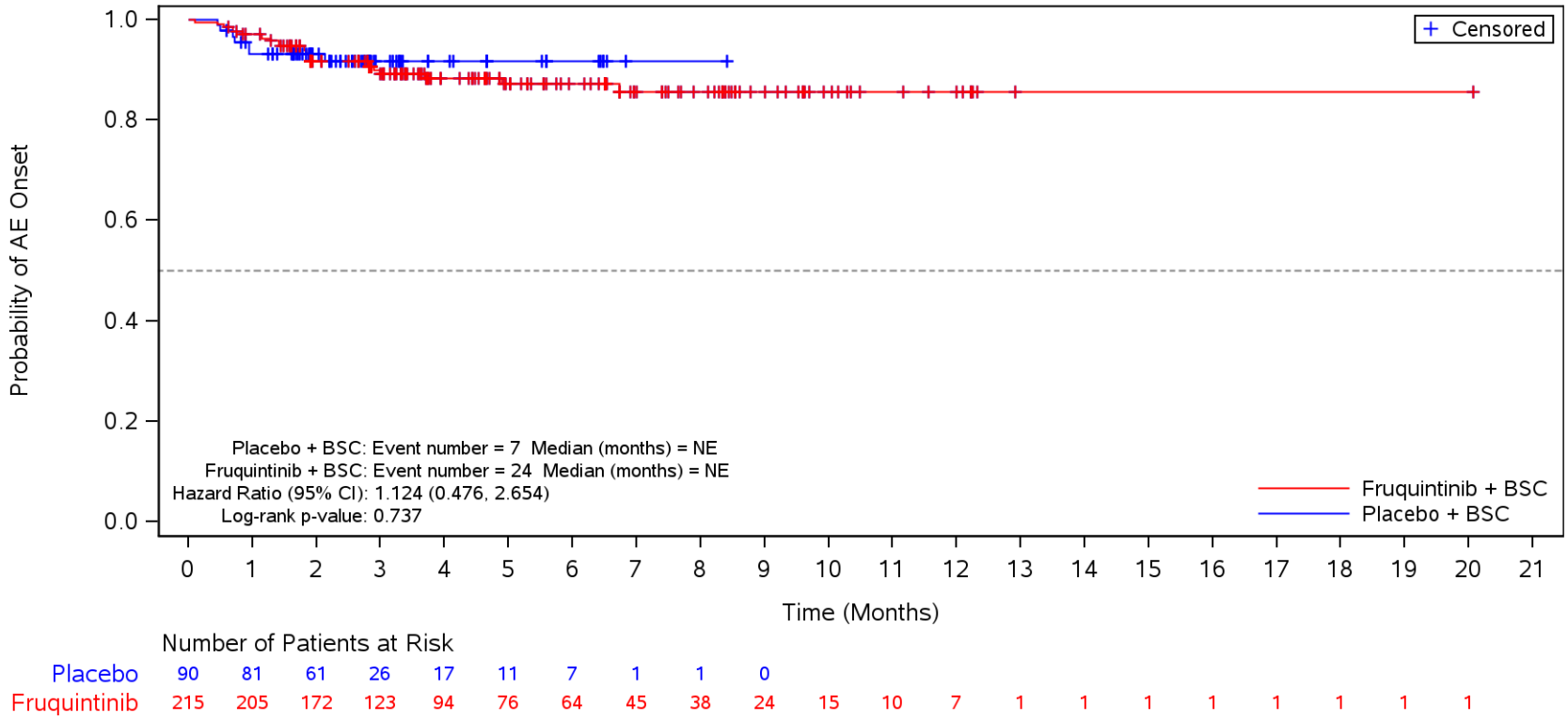
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
Female



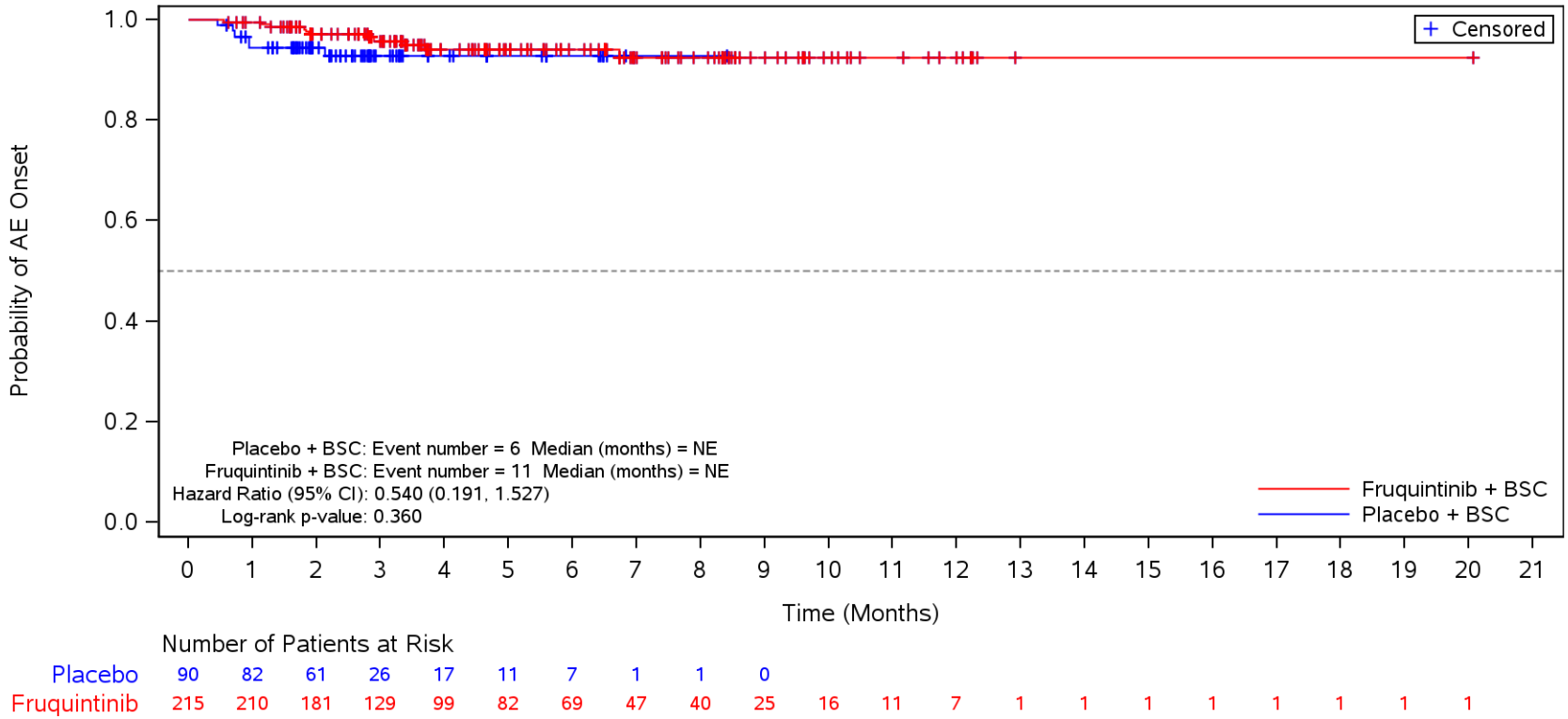
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Psychiatric disorders**
Female



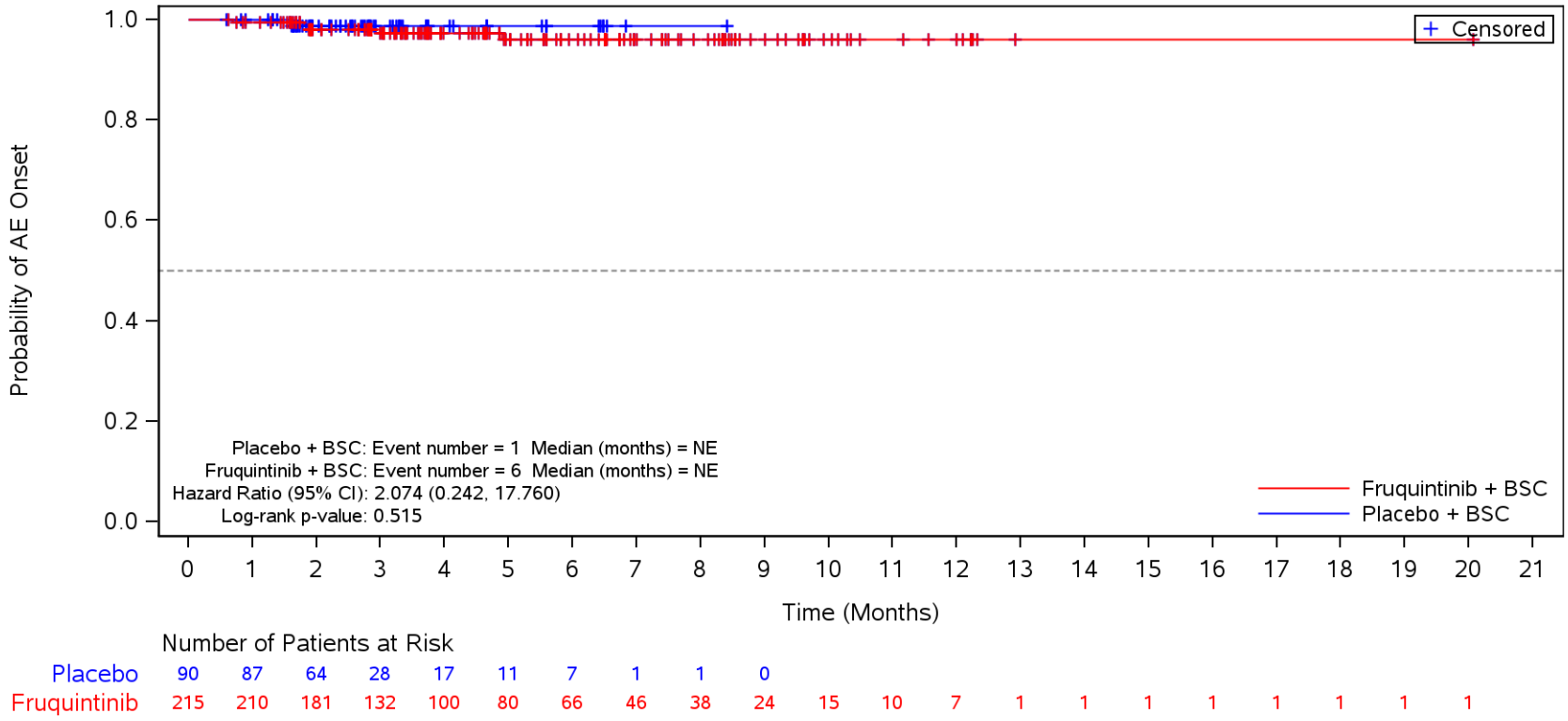
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
Female



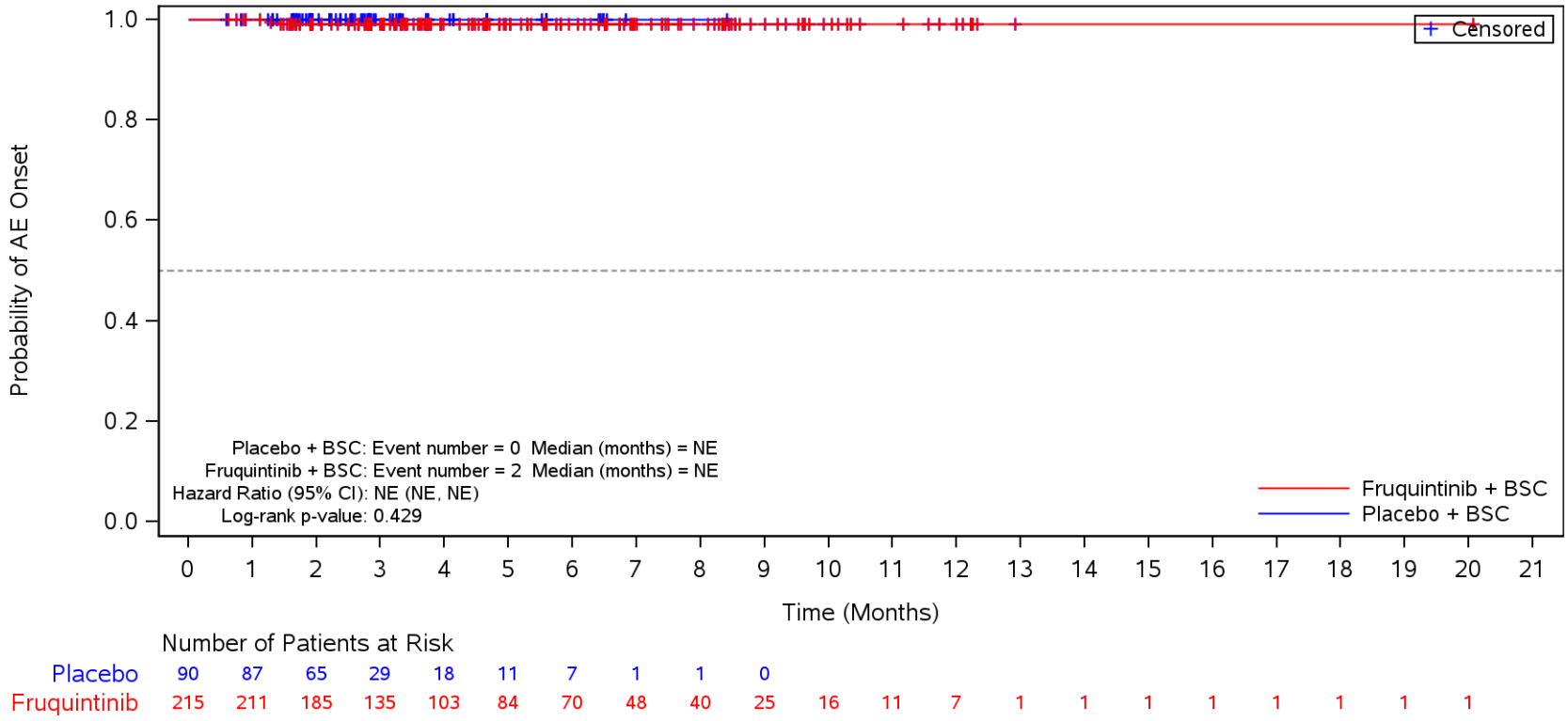
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**
Female



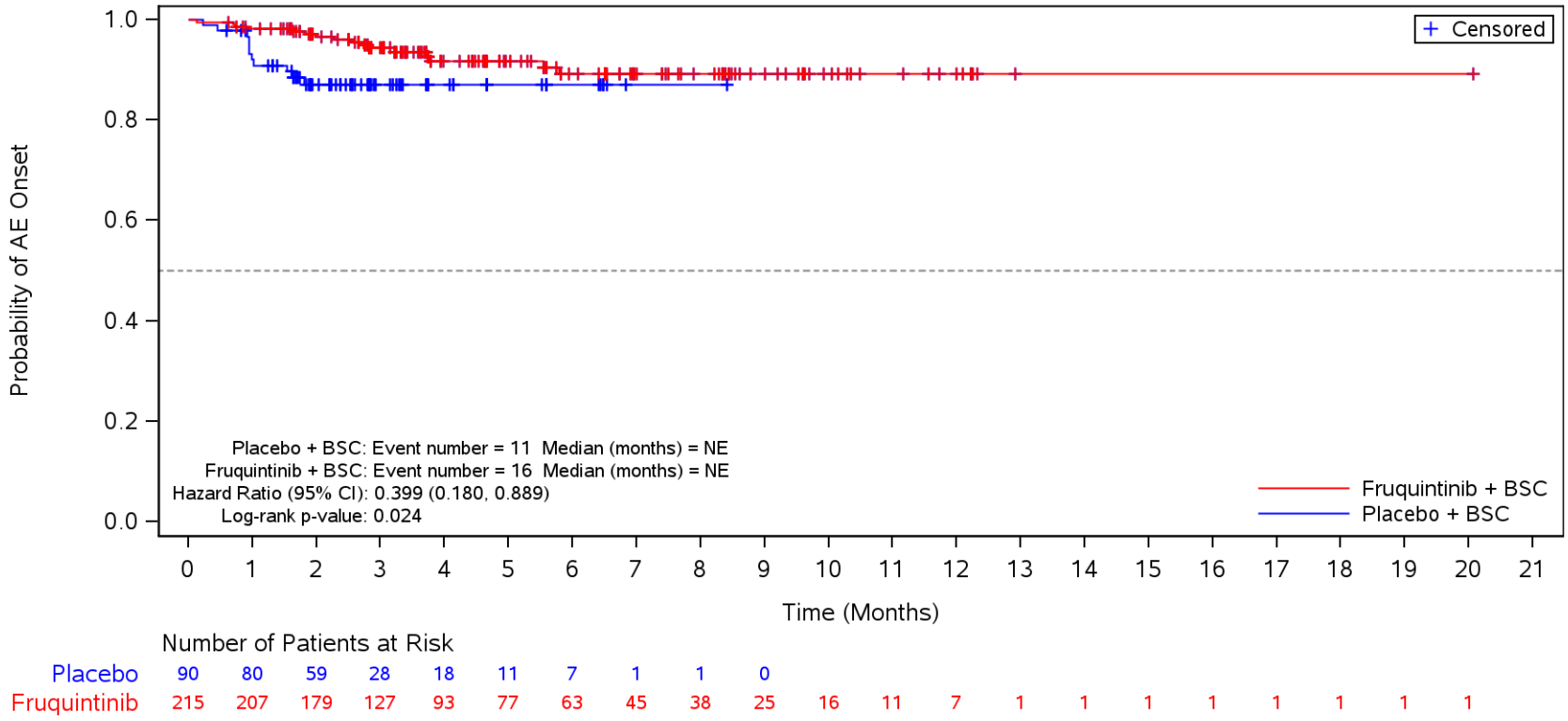
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
Female



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**
Female

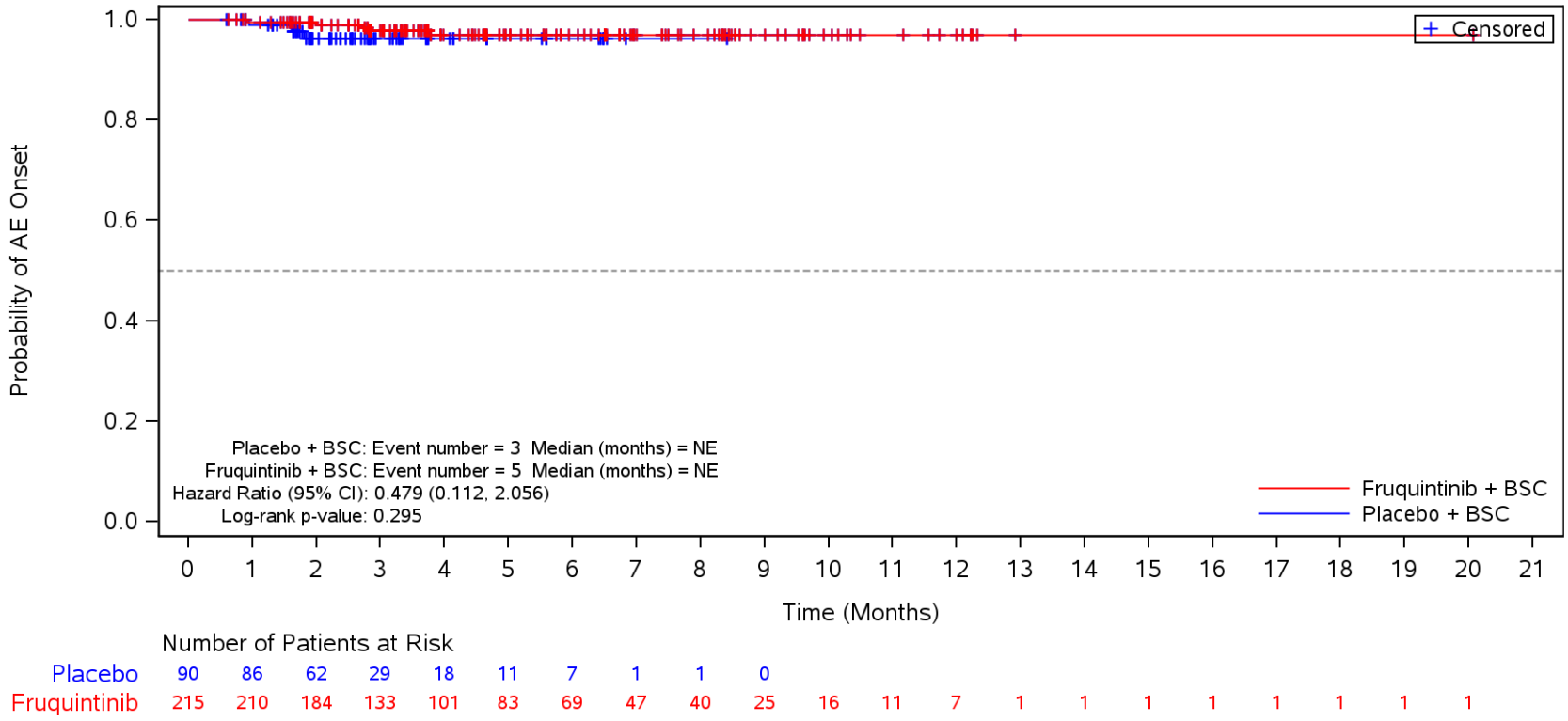


Number of Patients at Risk

Placebo	90	80	59	28	18	11	7	1	1	0											
Fruquintinib	215	207	179	127	93	77	63	45	38	25	16	11	7	1	1	1	1	1	1	1	1

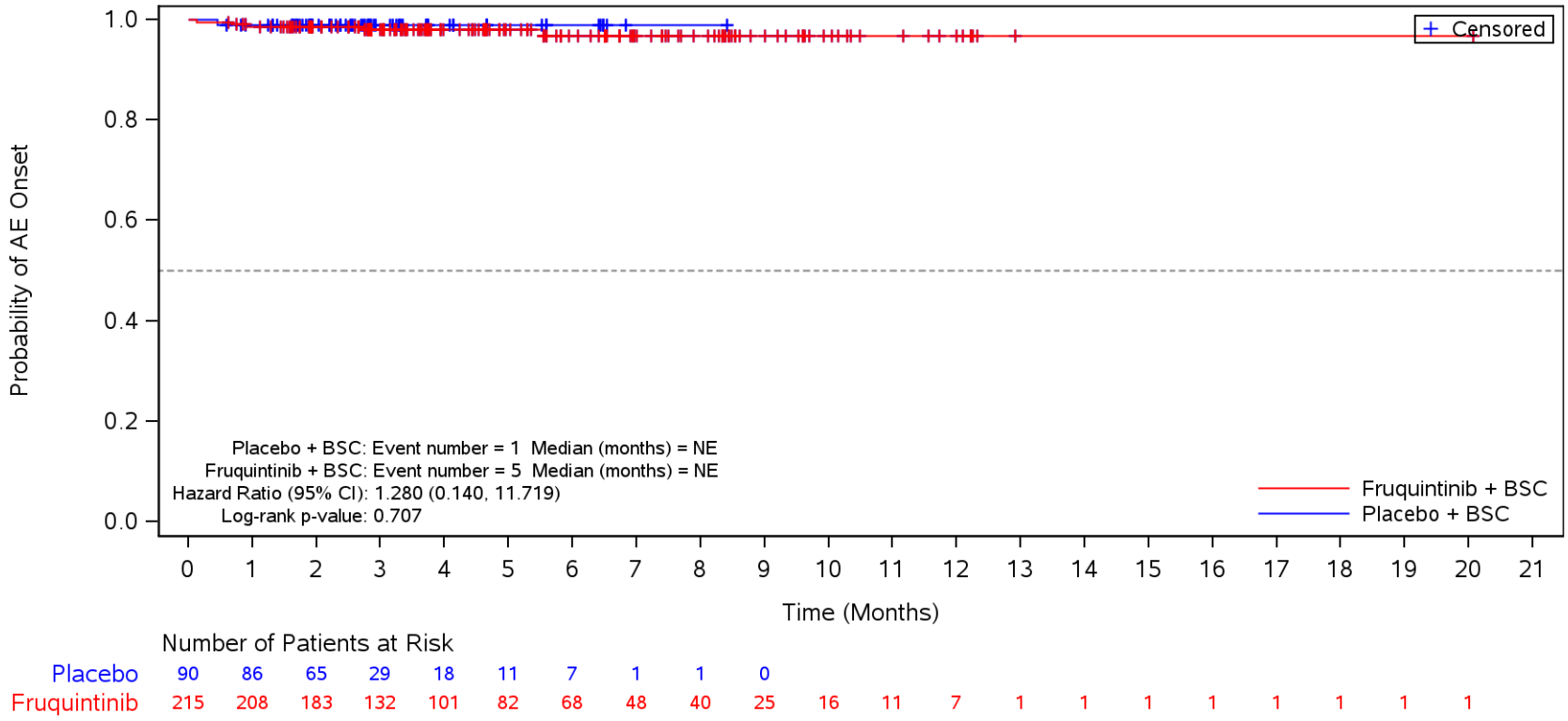
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3C
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Sex
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hypertransaminasaemia**
Female



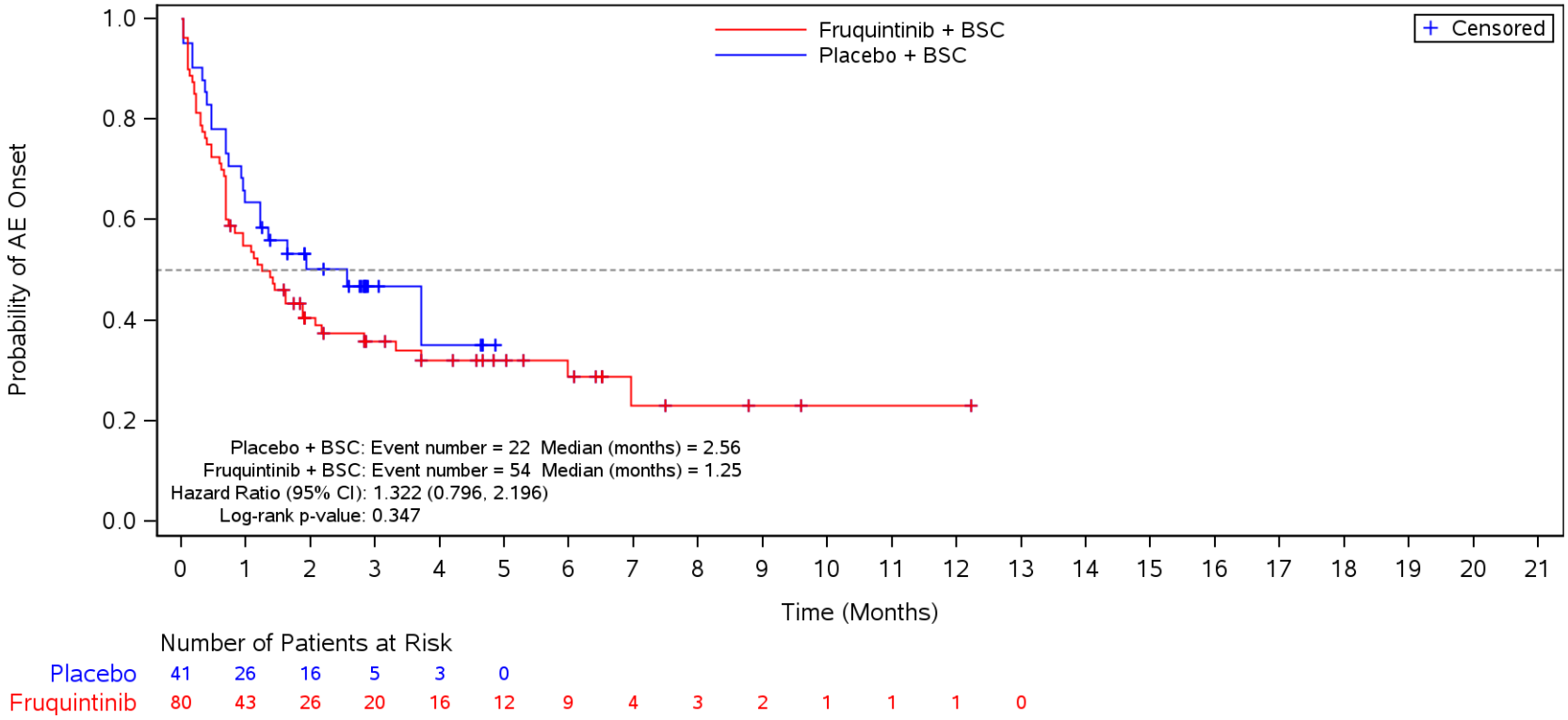
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
North America



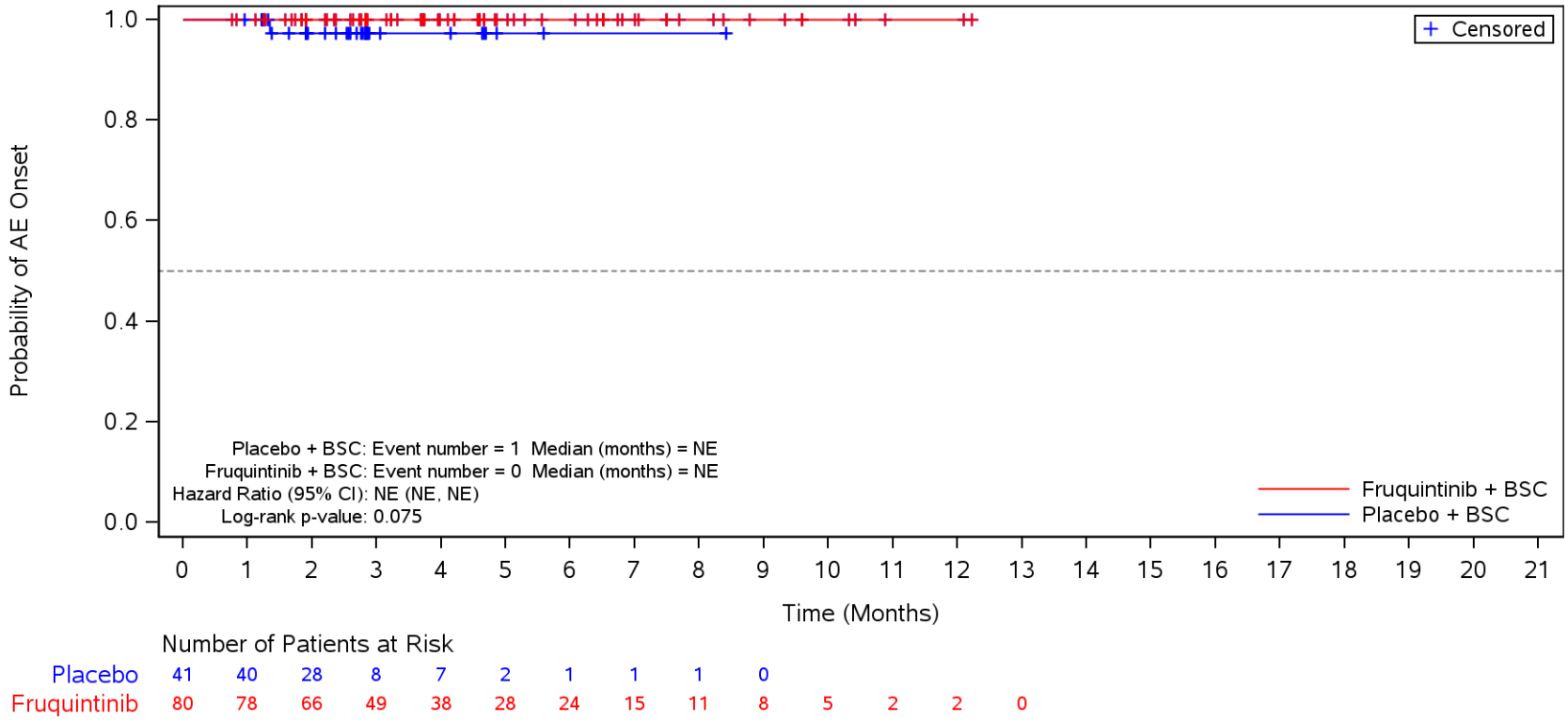
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
North America



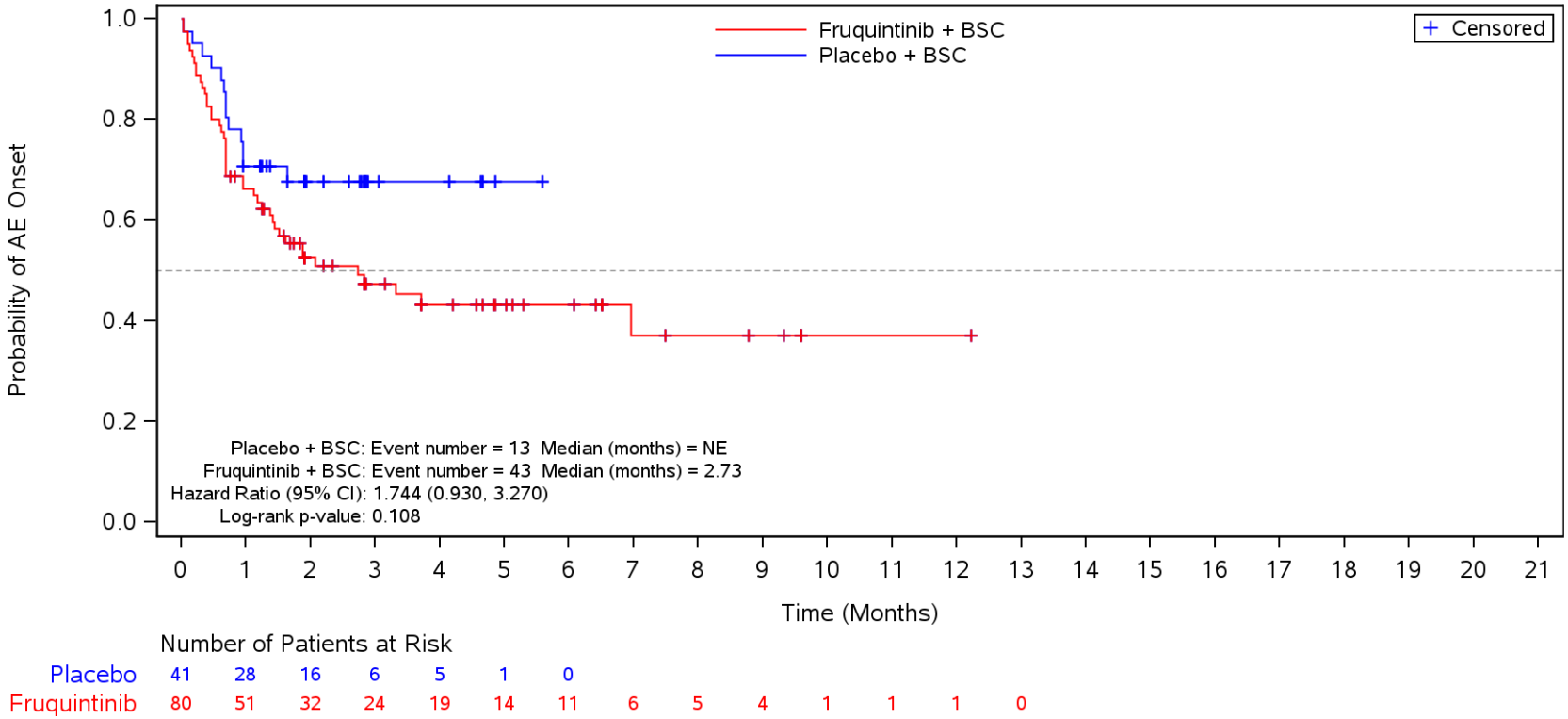
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
North America



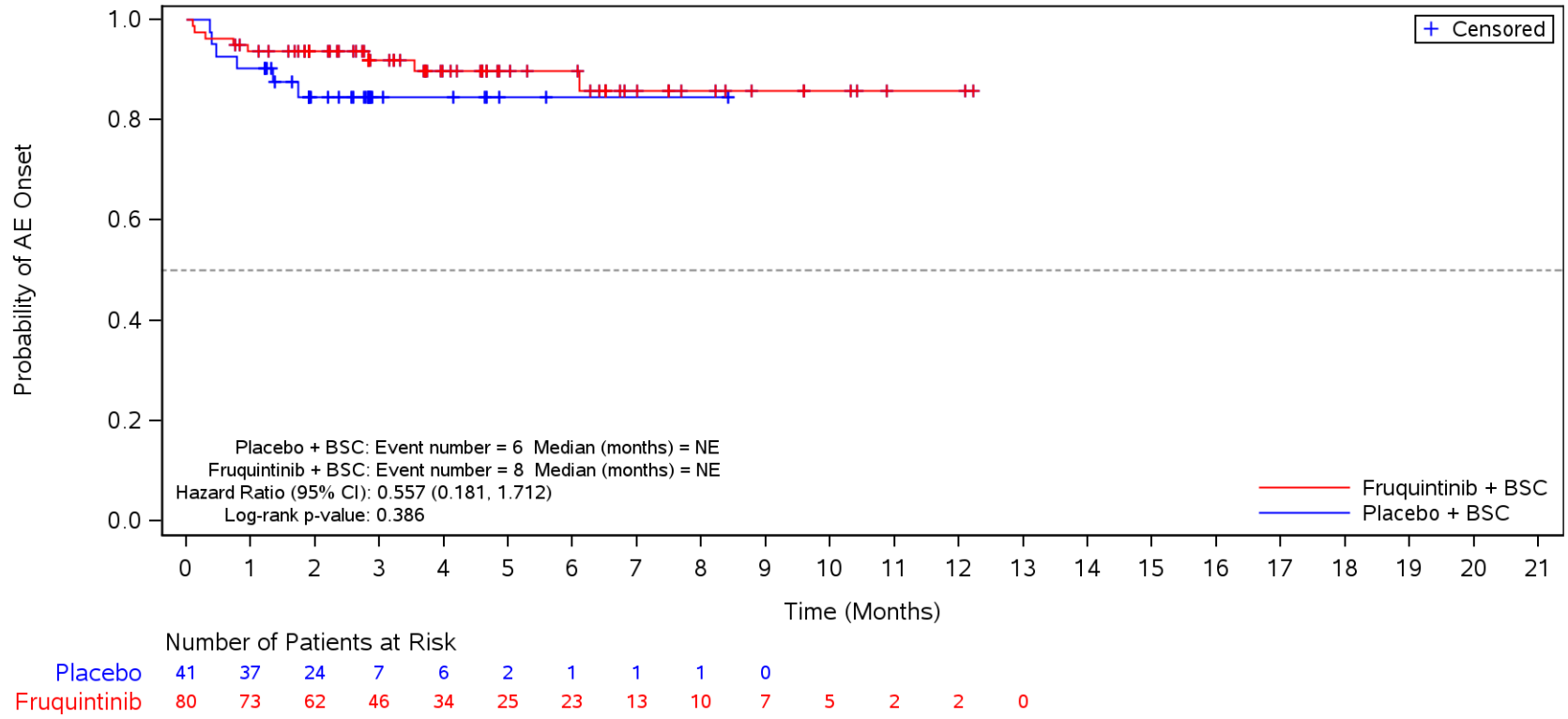
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
North America



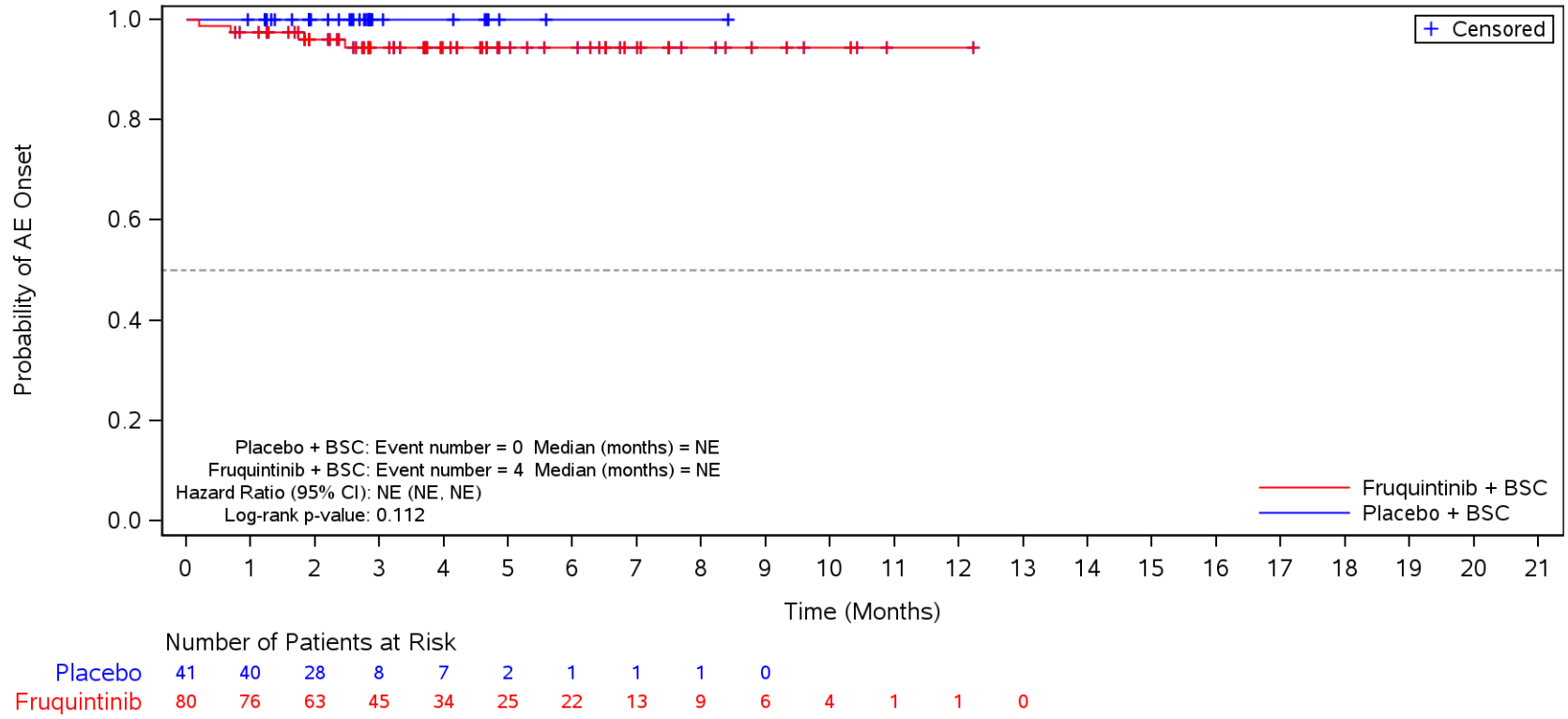
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
North America



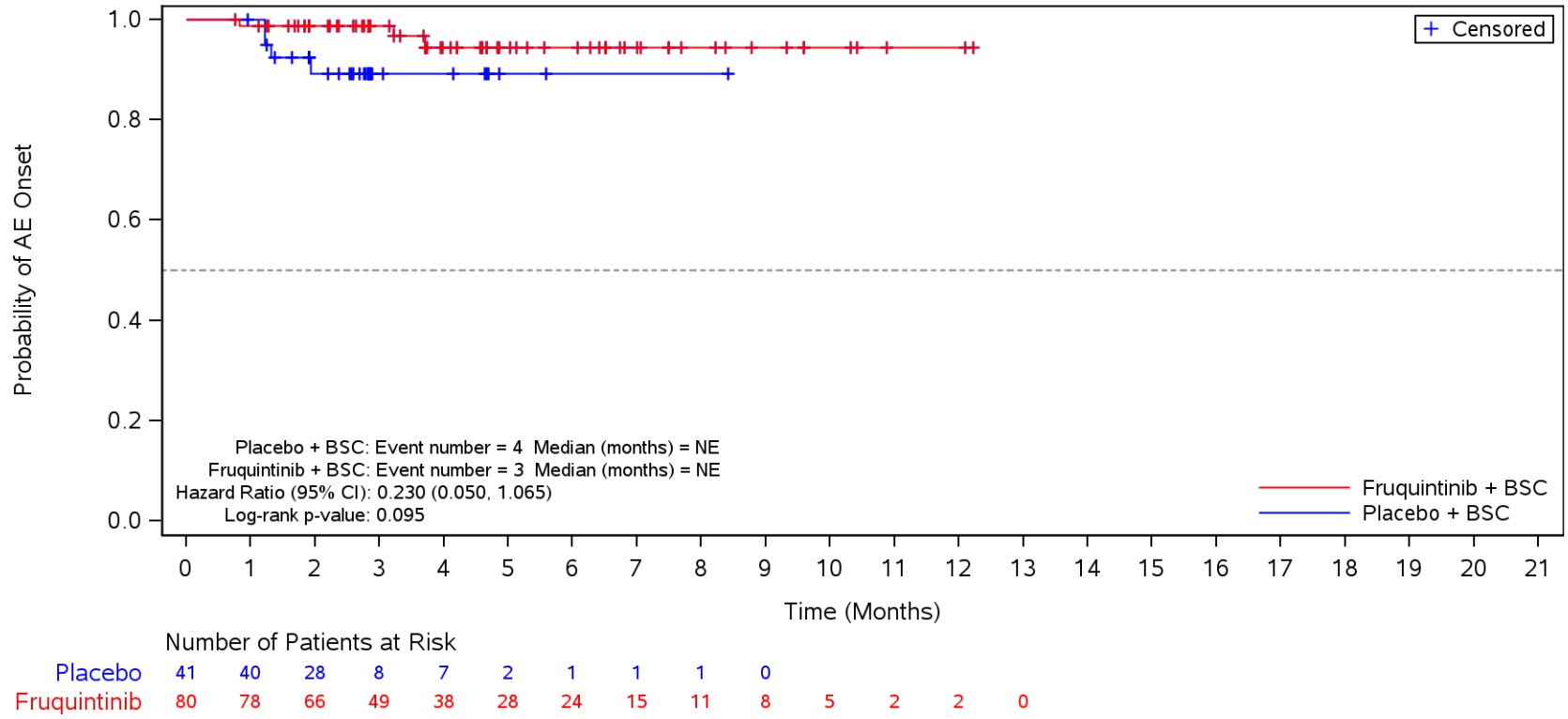
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
North America



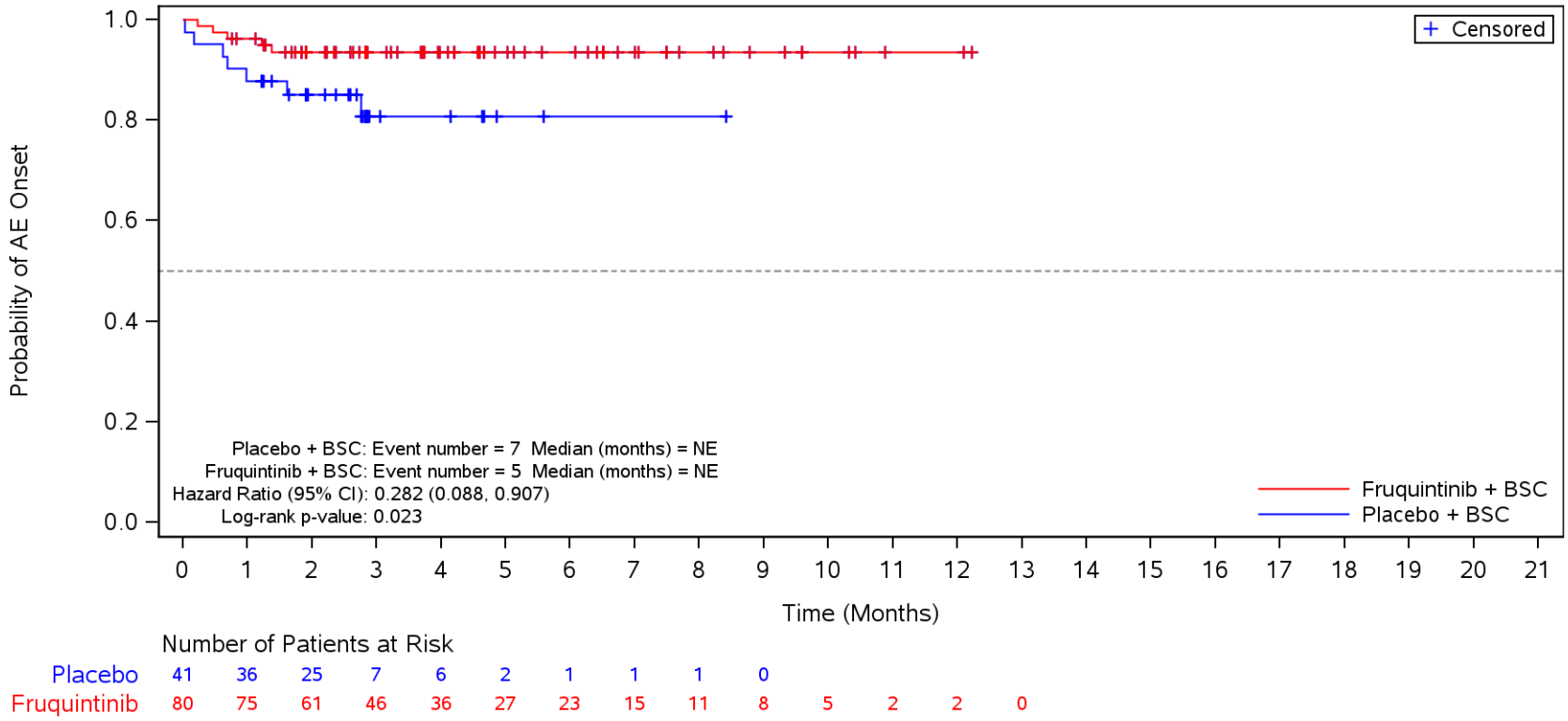
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
North America



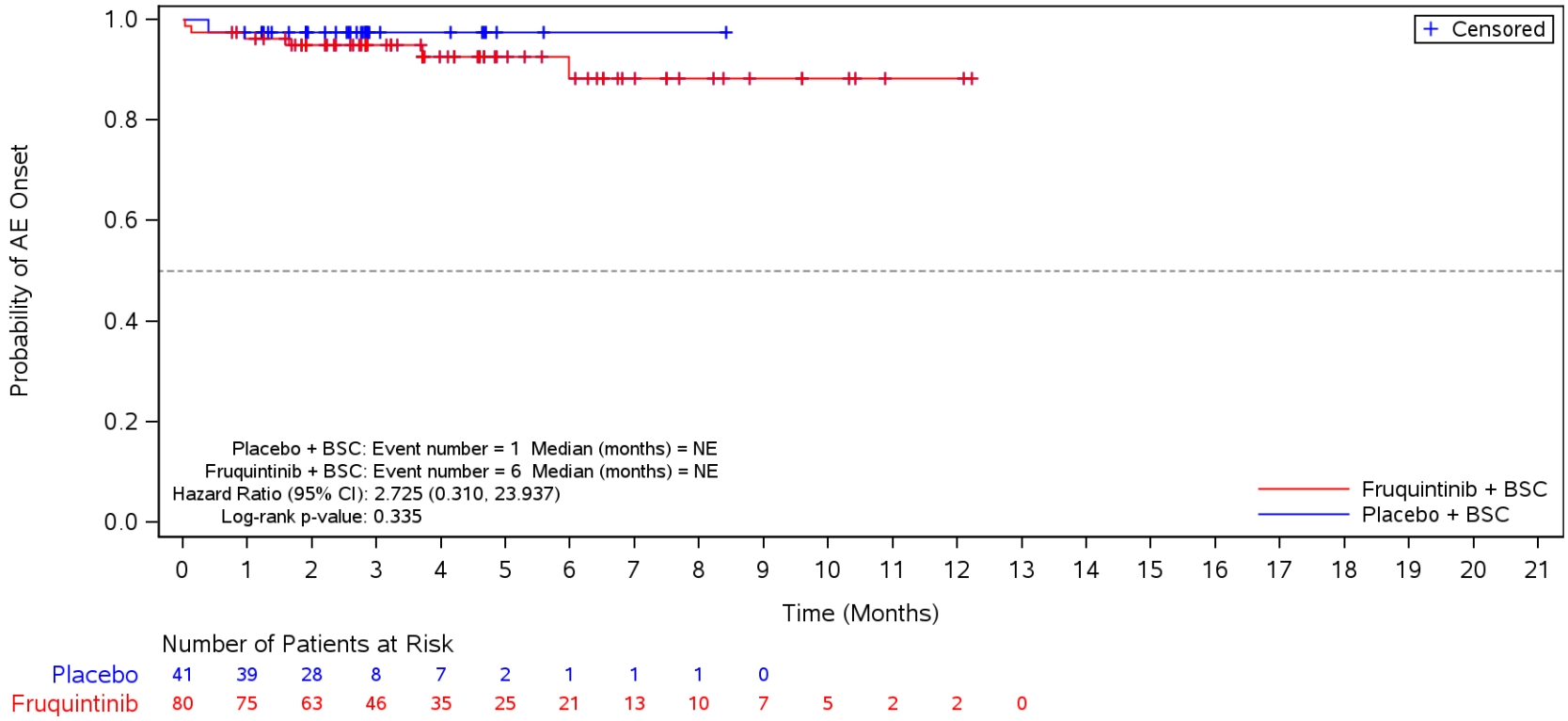
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
North America



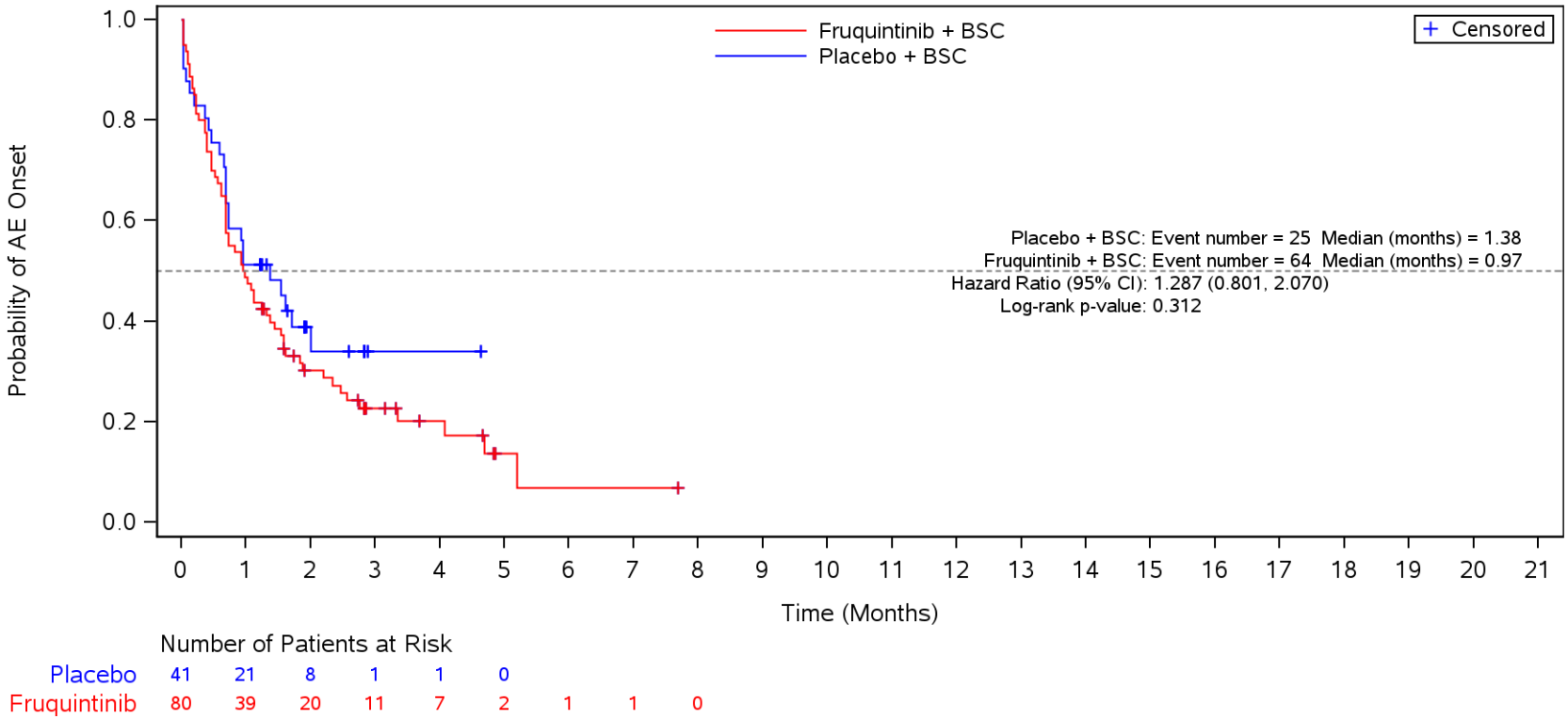
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**
North America



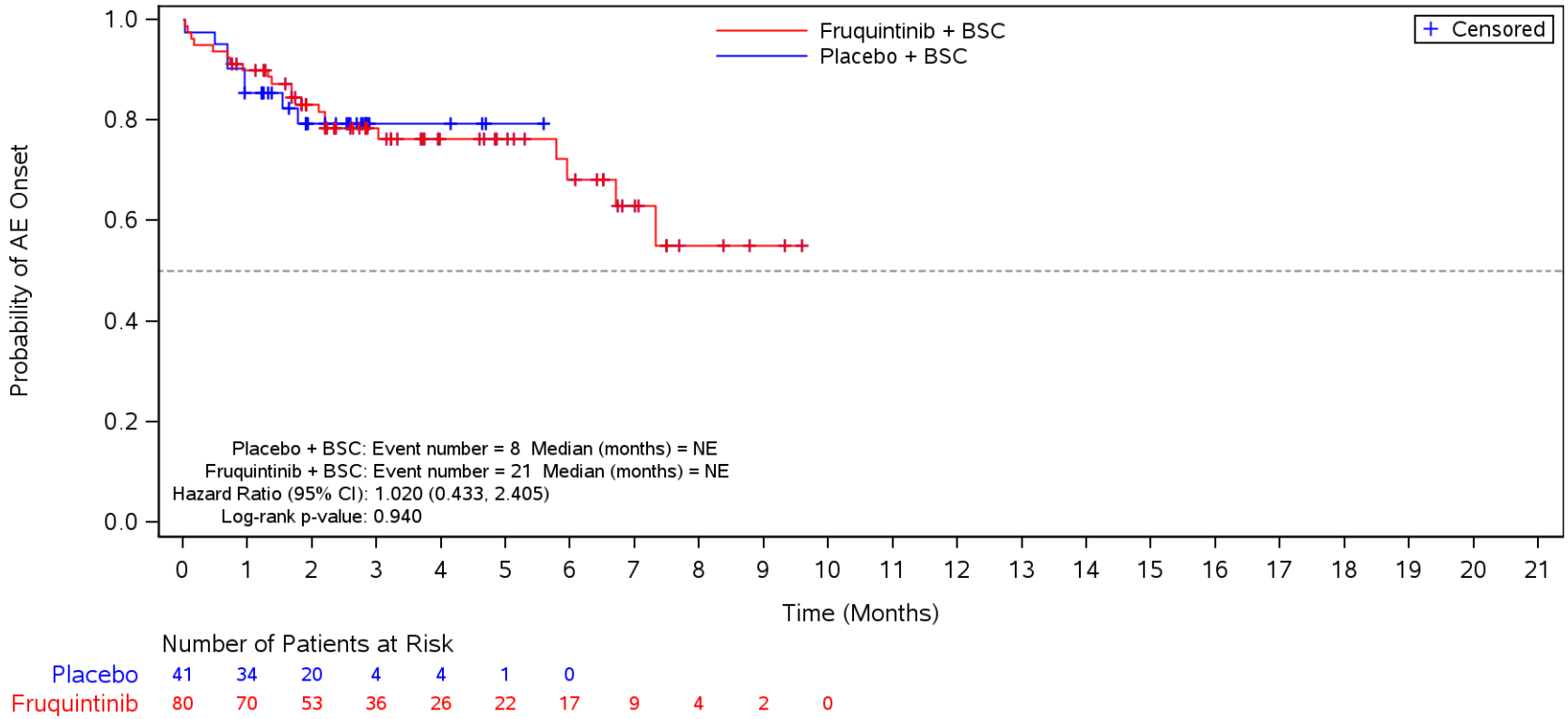
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
North America



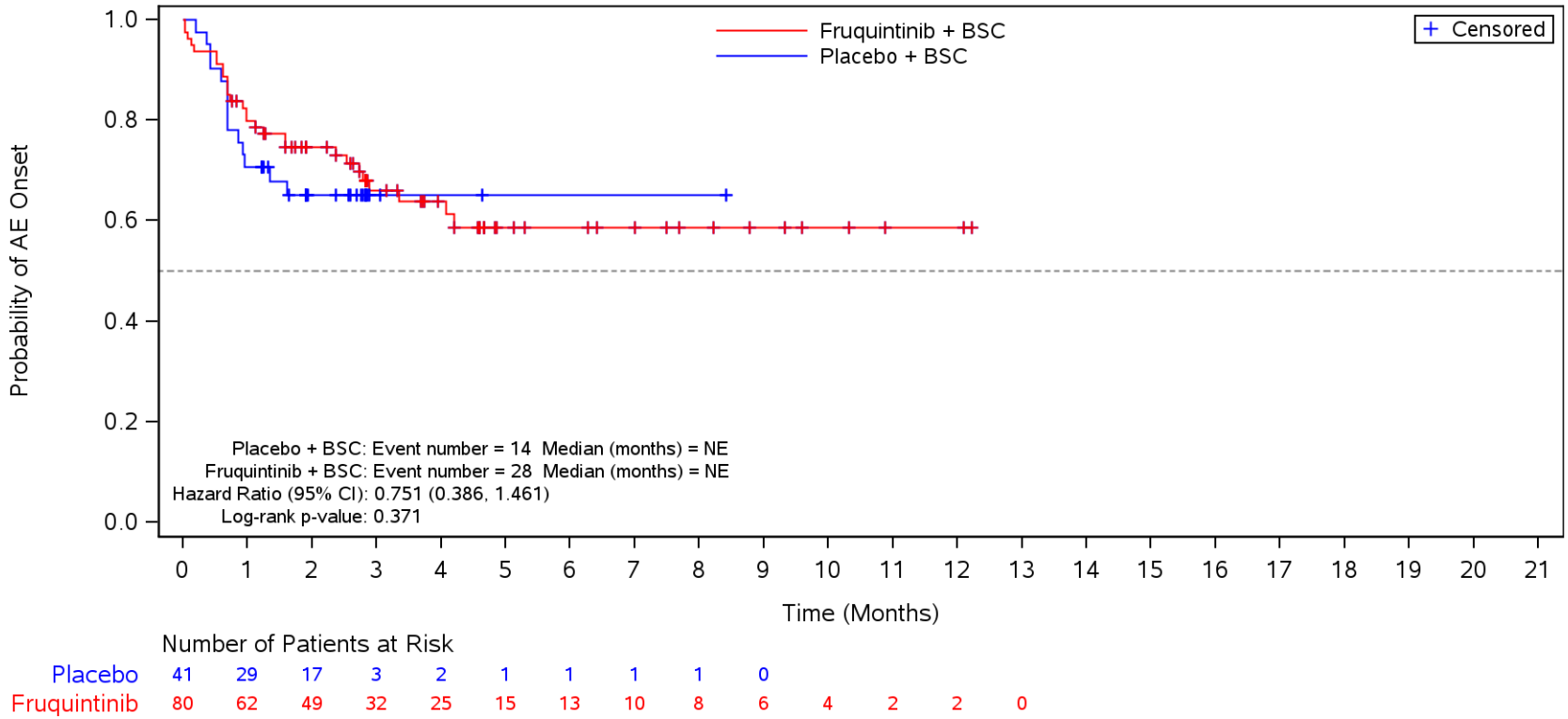
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
North America



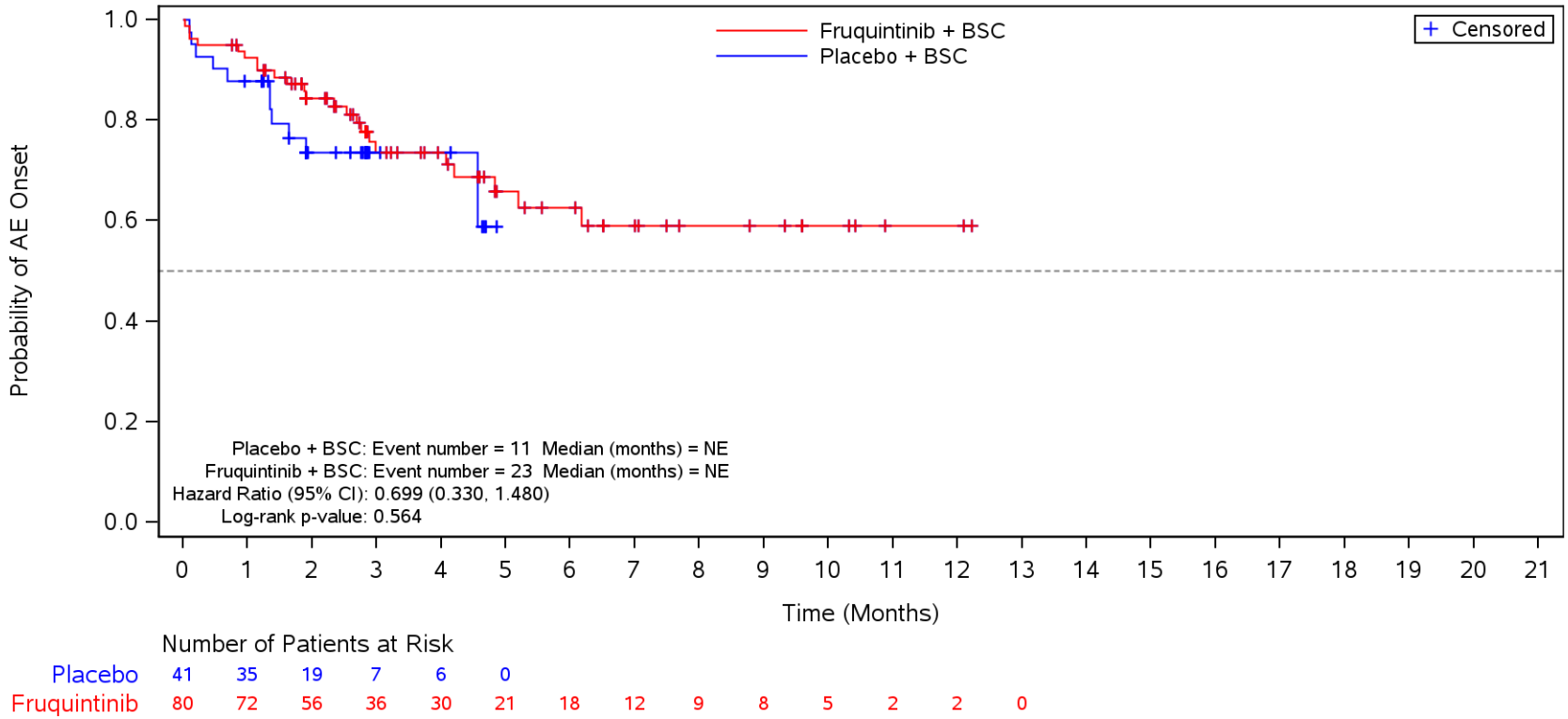
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
North America



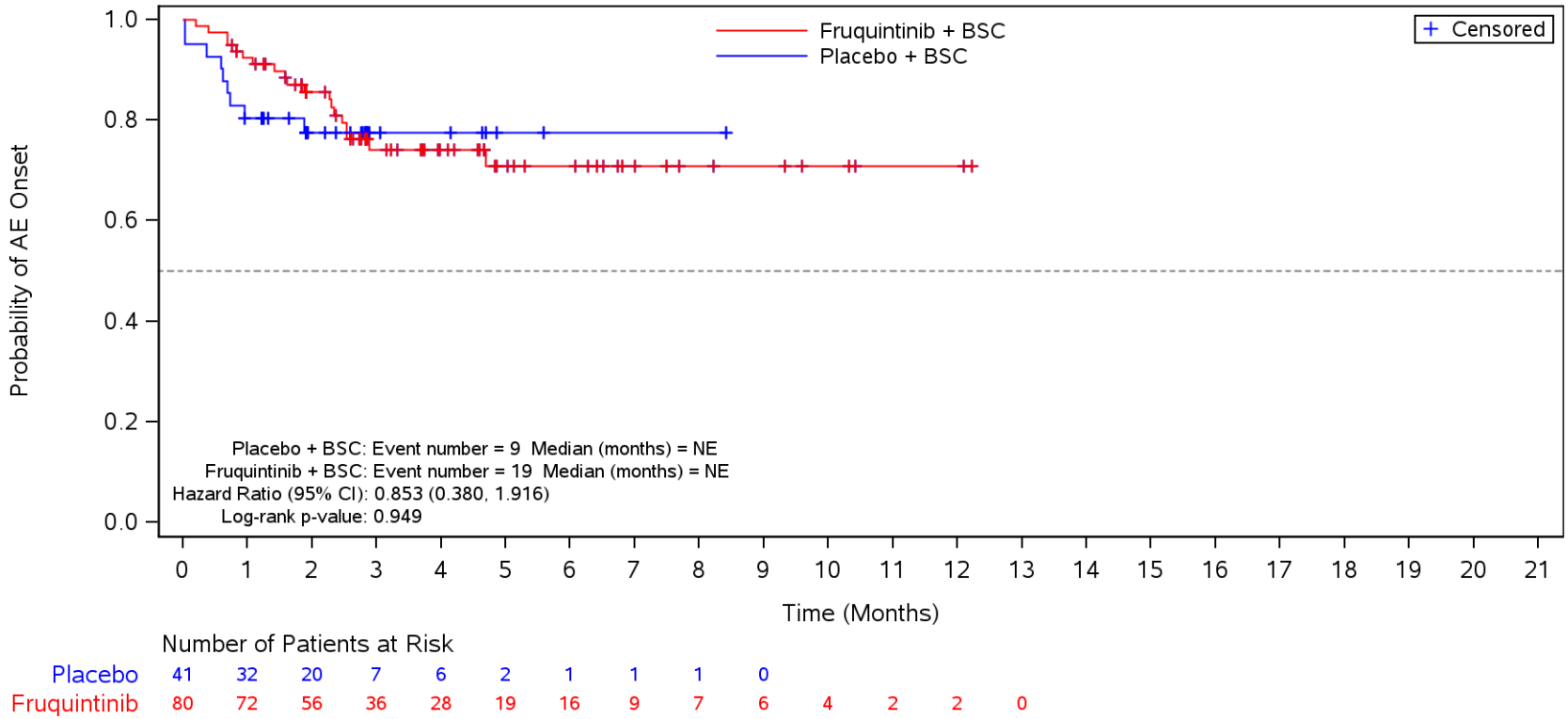
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
North America



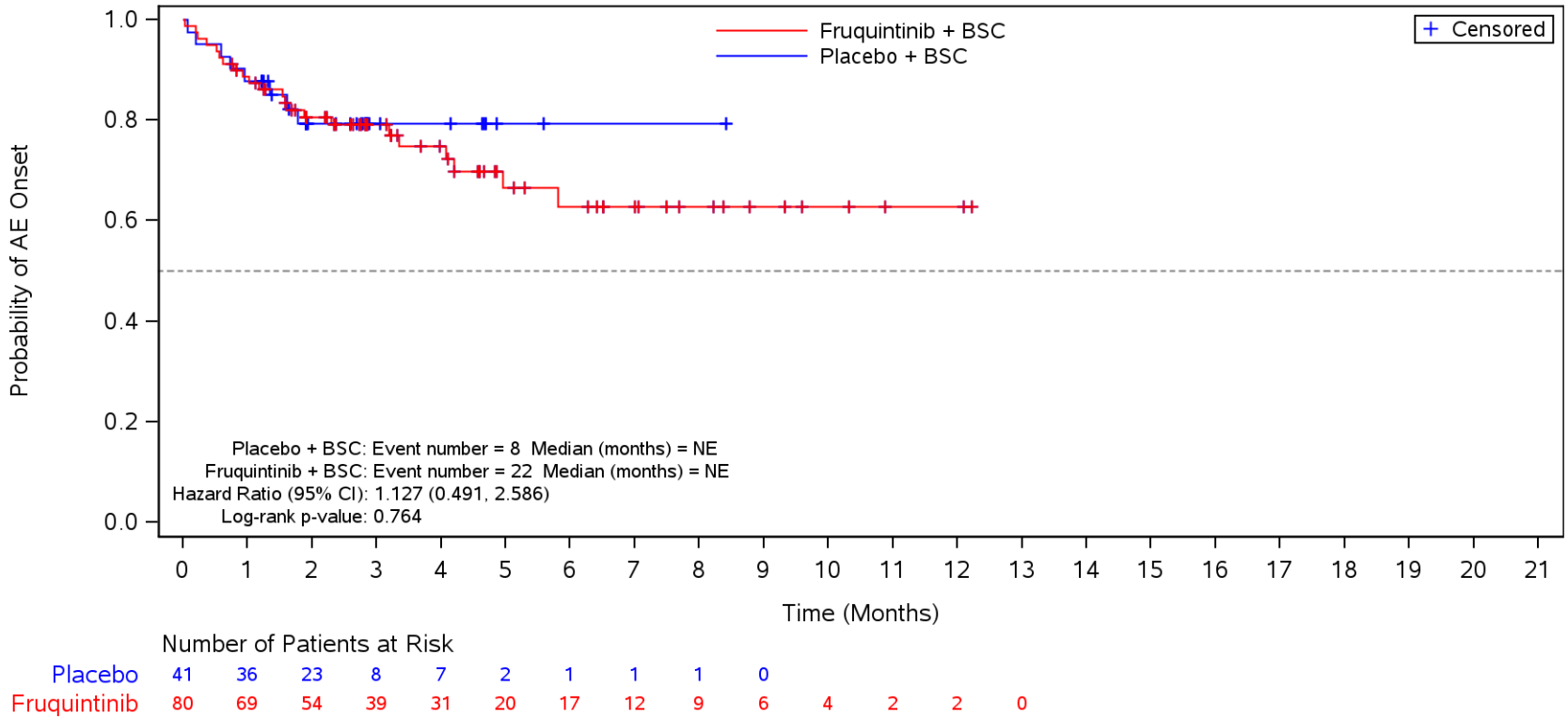
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
North America



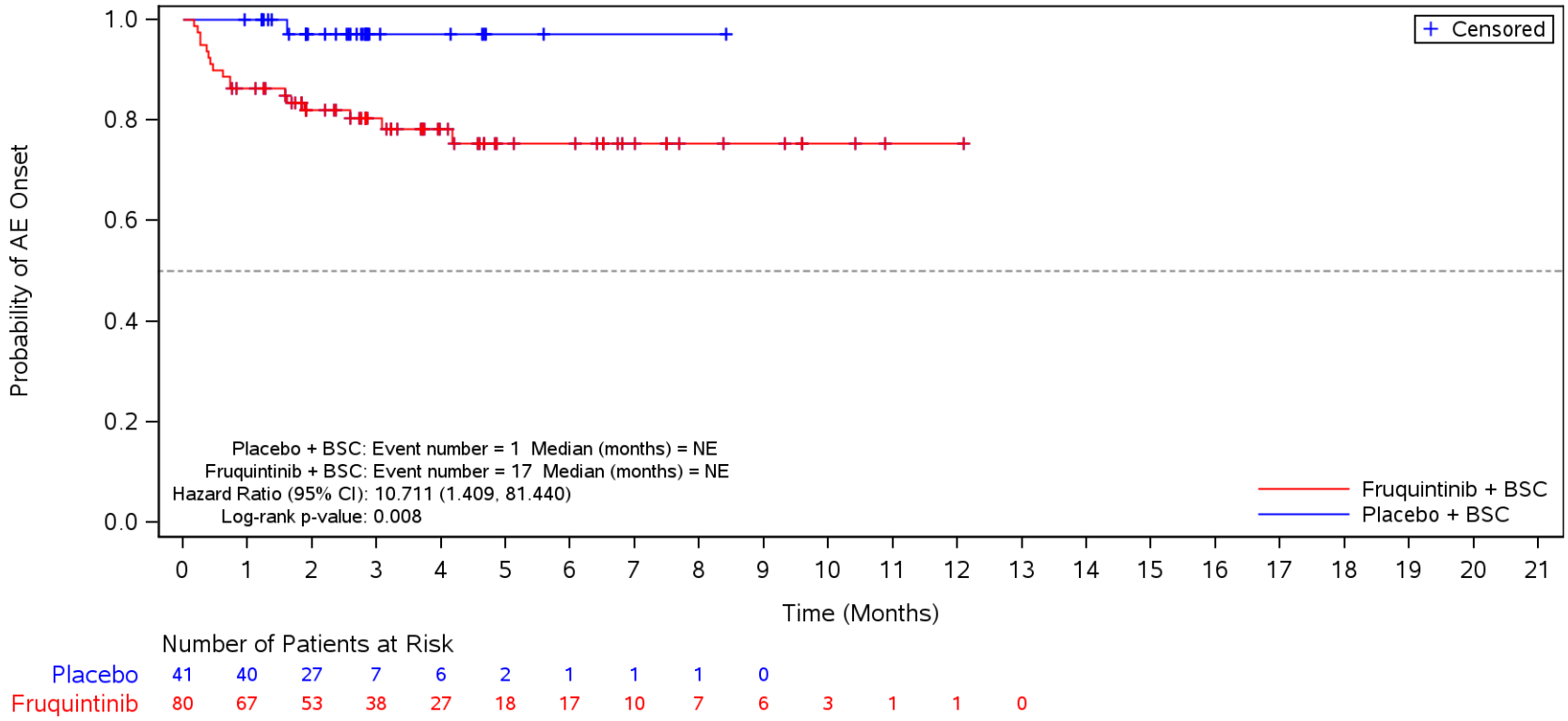
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
North America



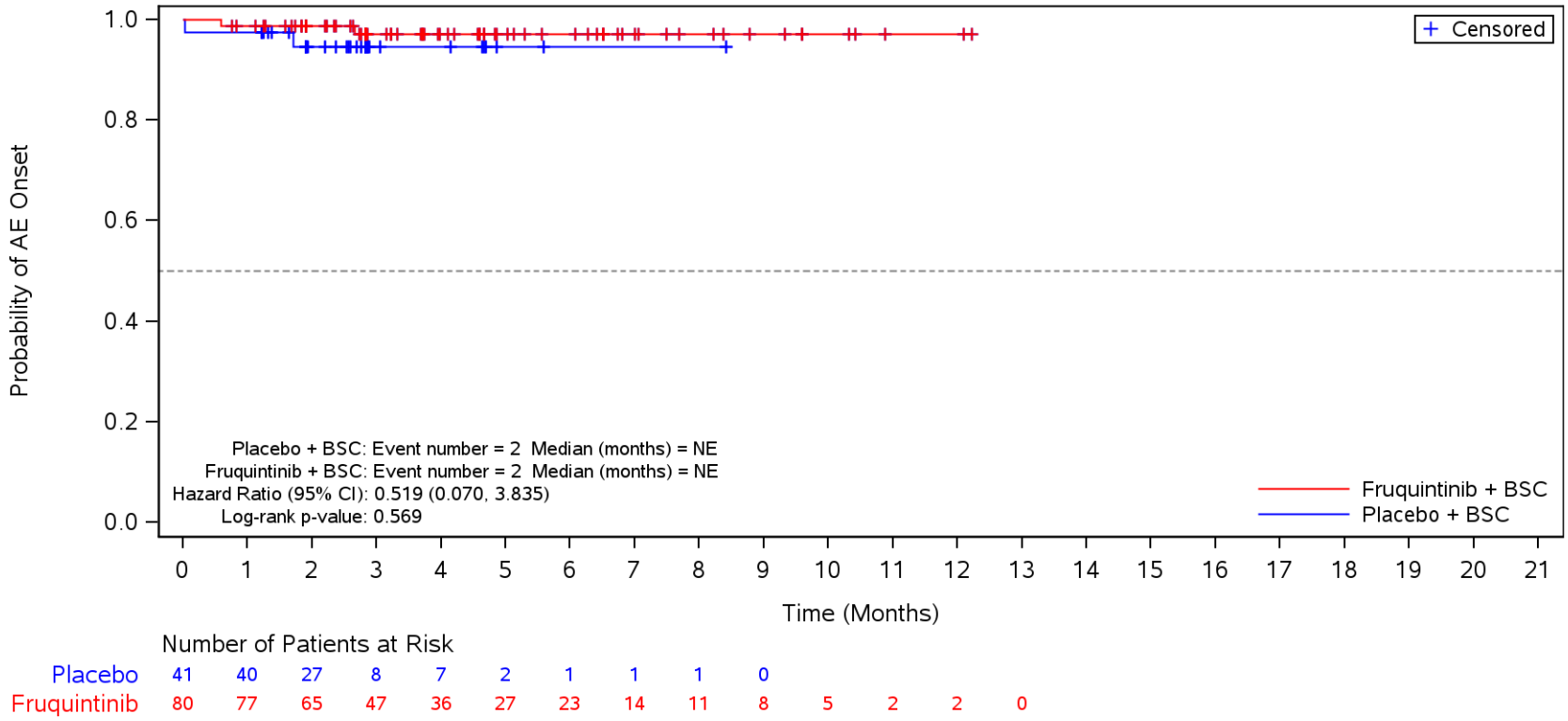
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
North America



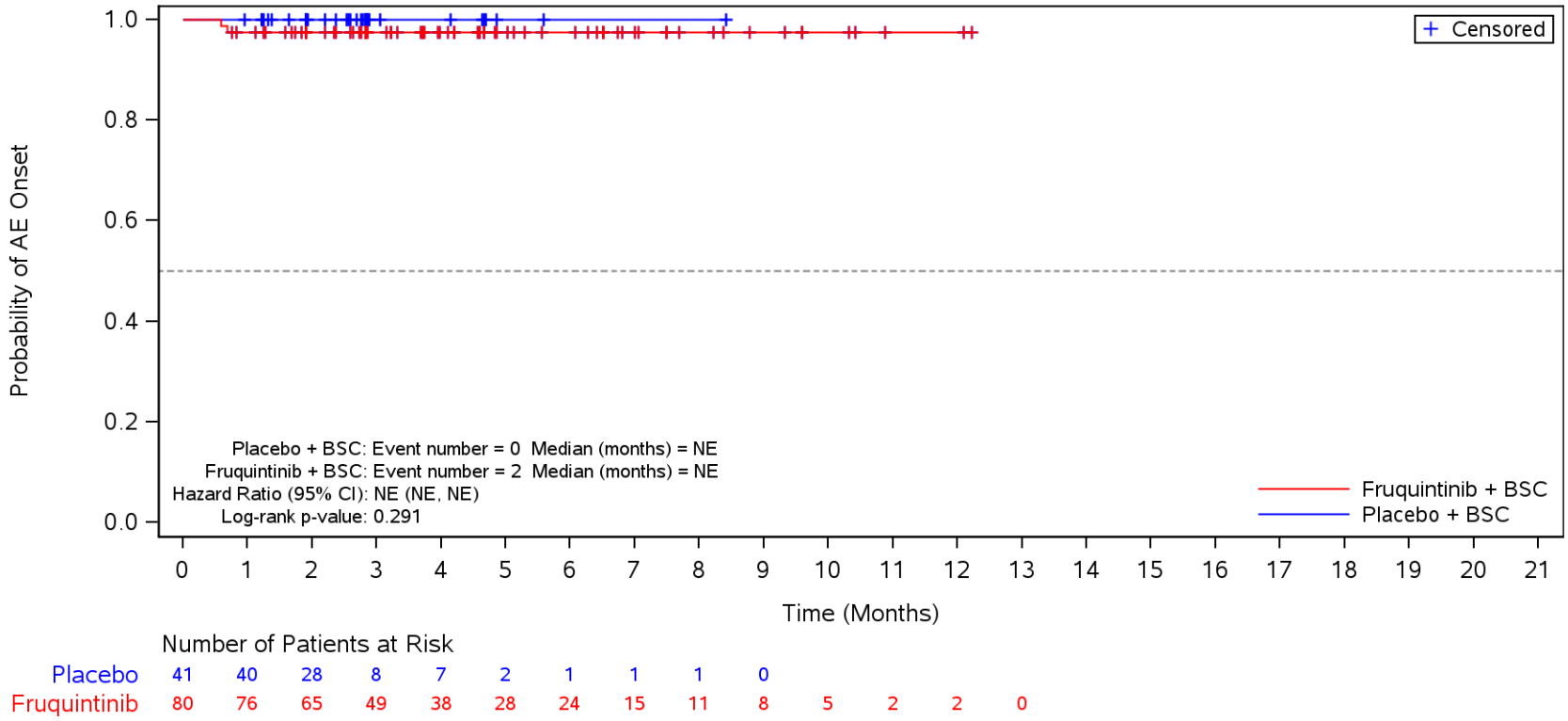
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
North America



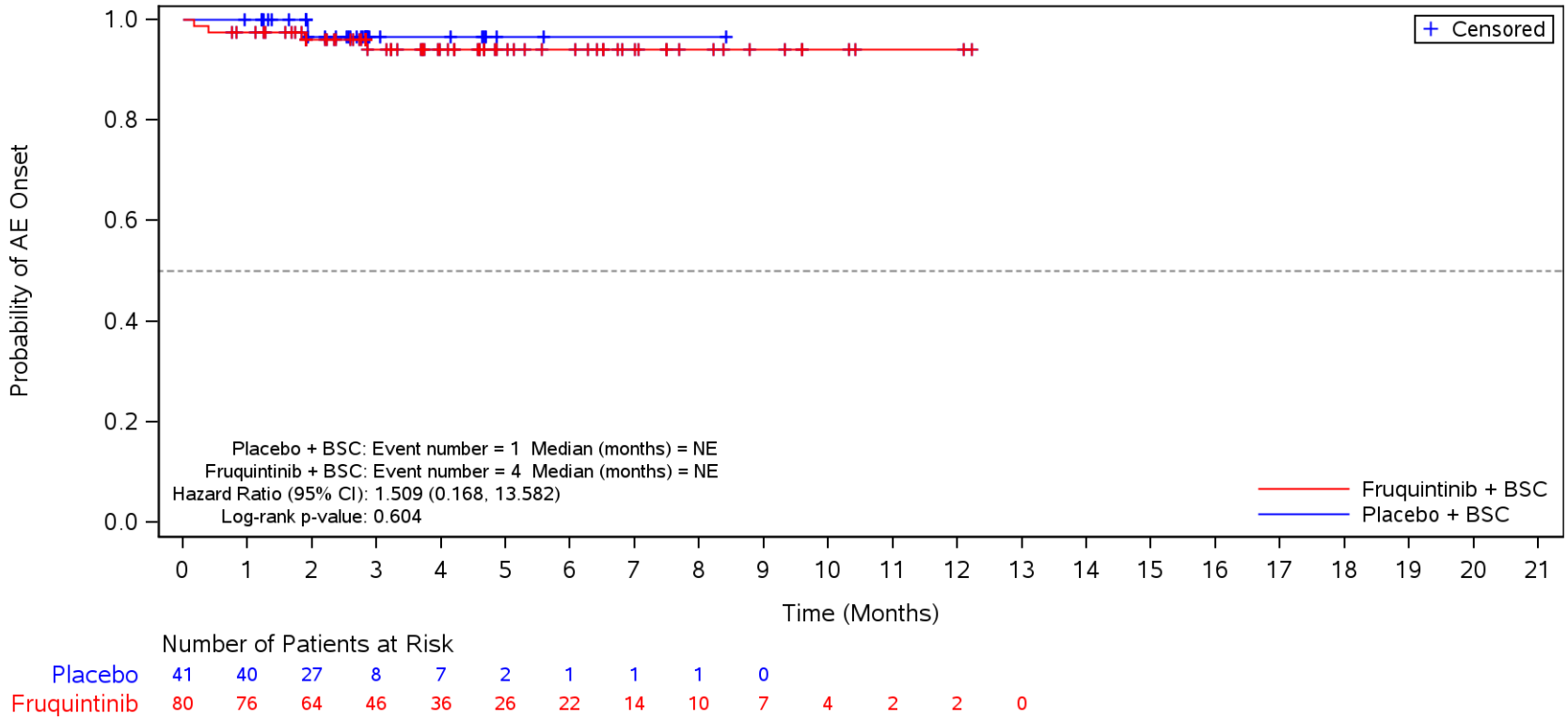
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
North America



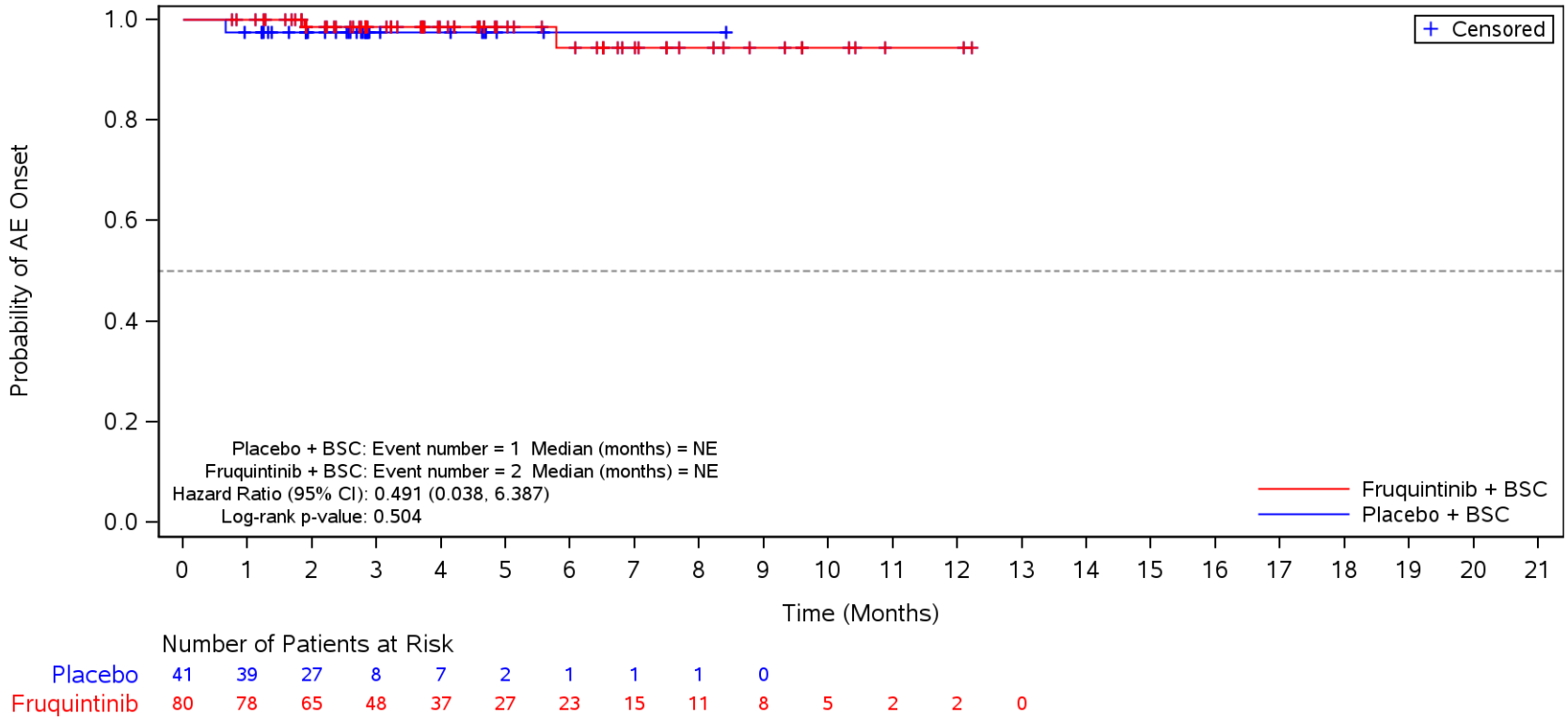
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
North America



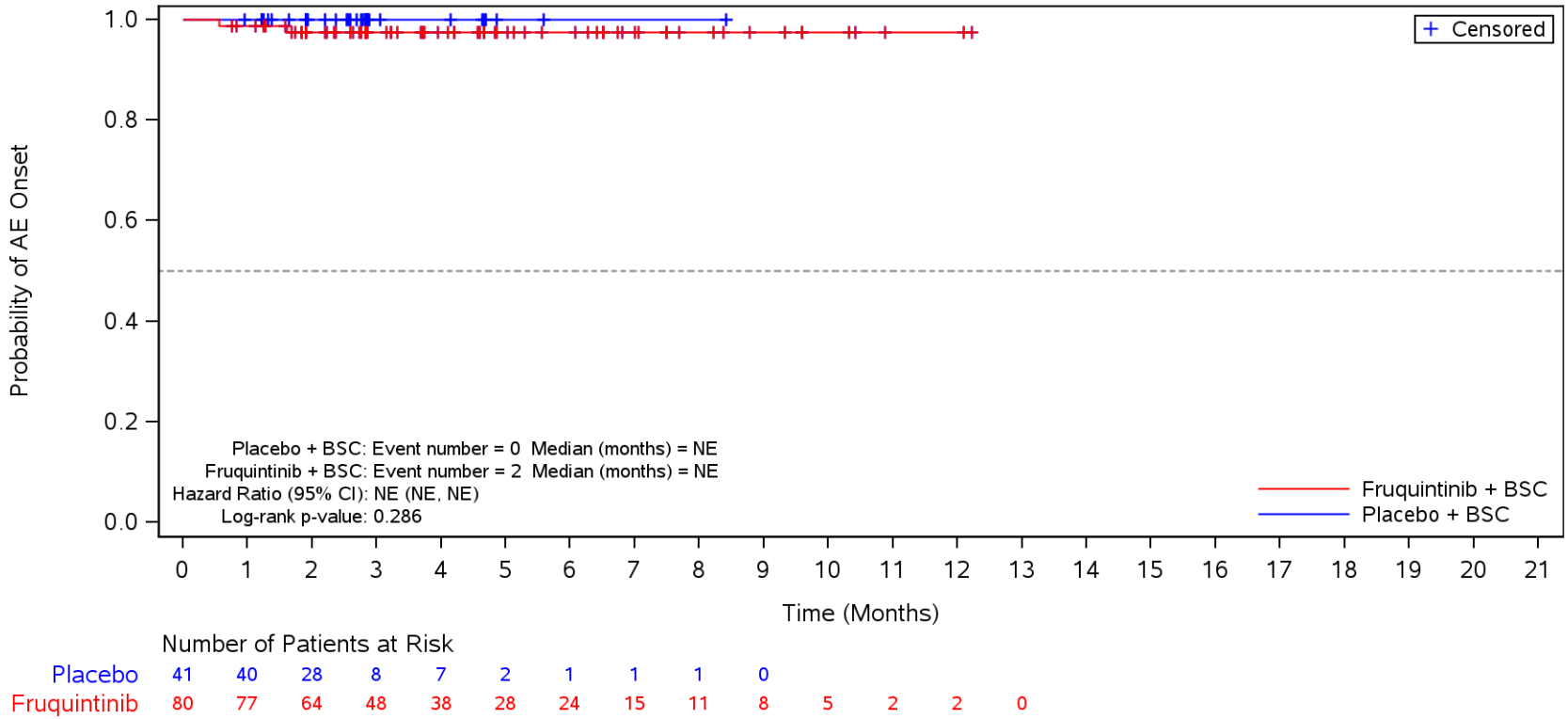
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
North America



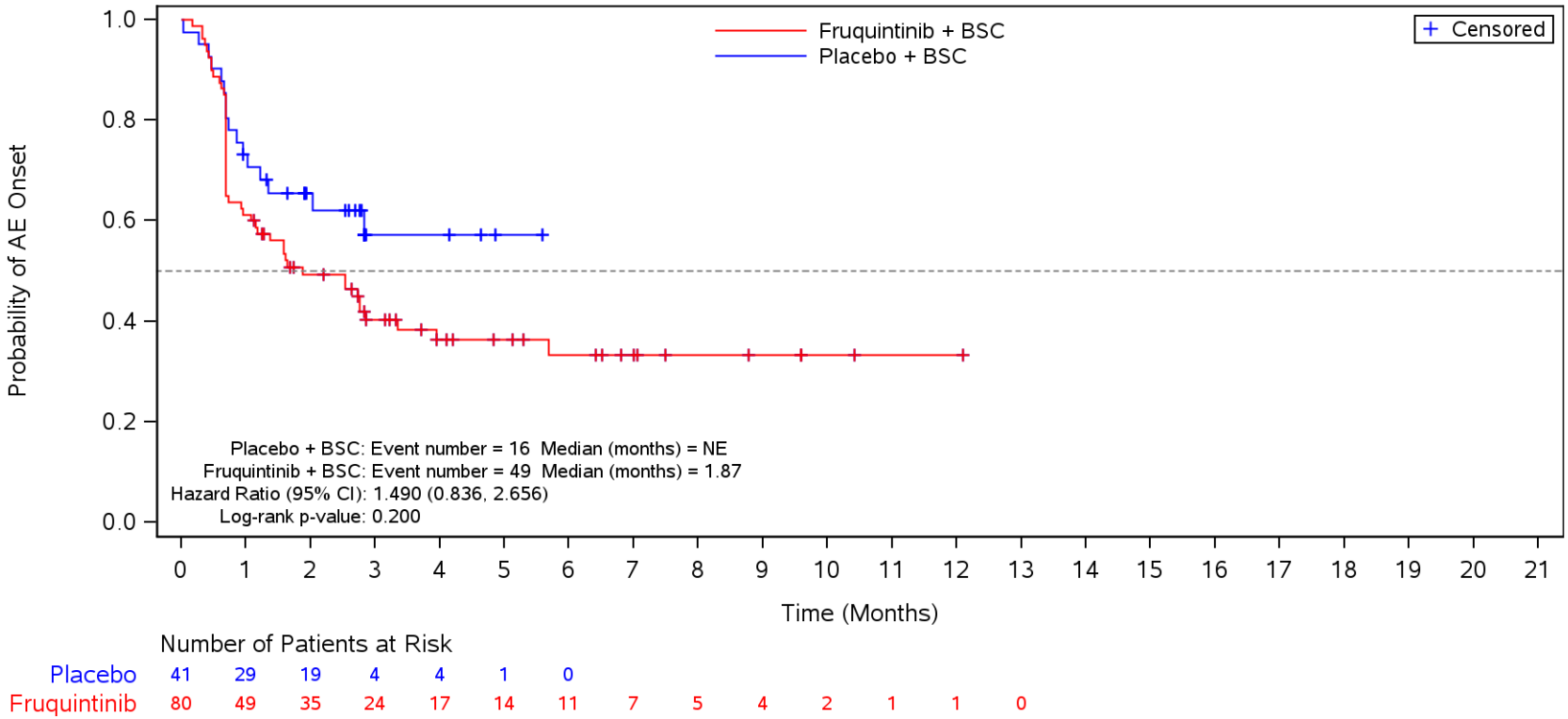
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**
North America



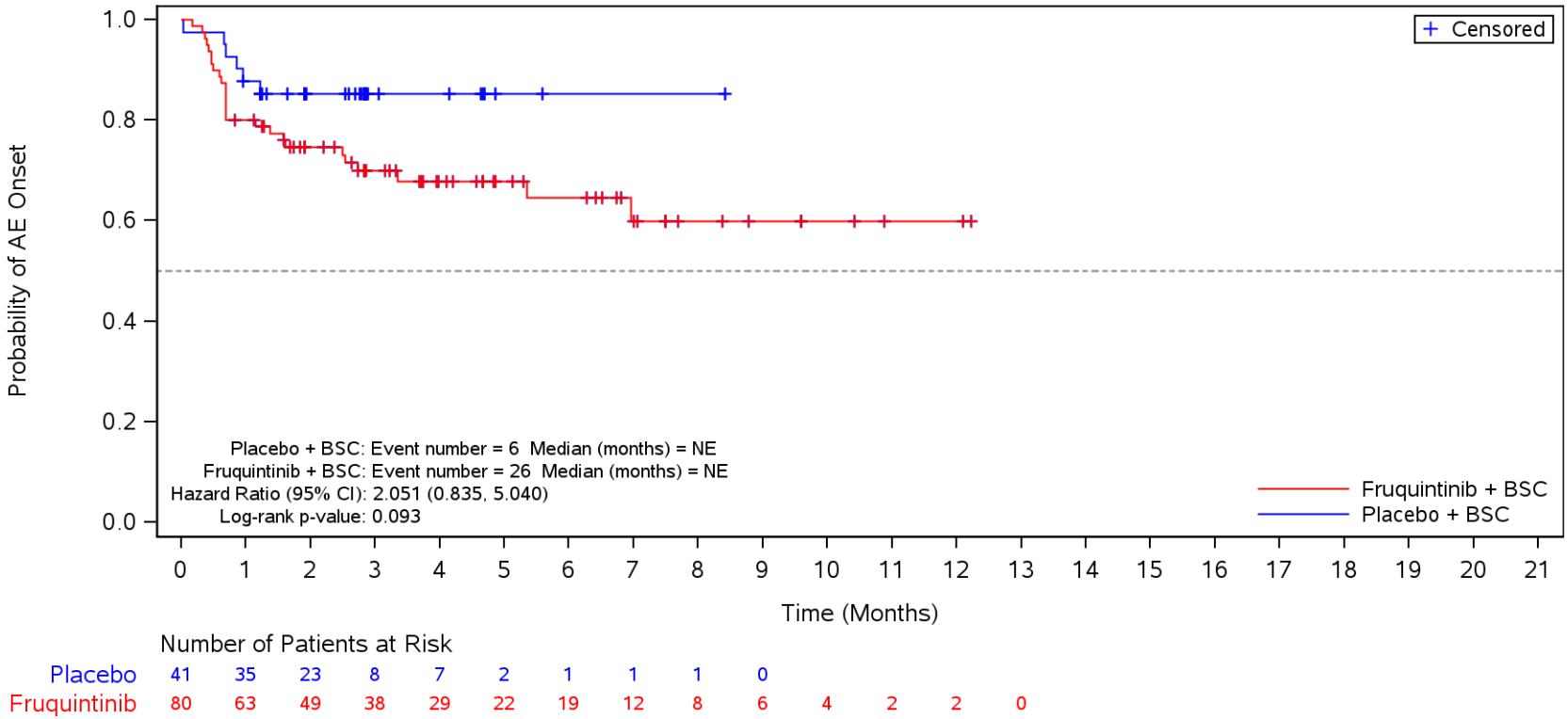
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
North America



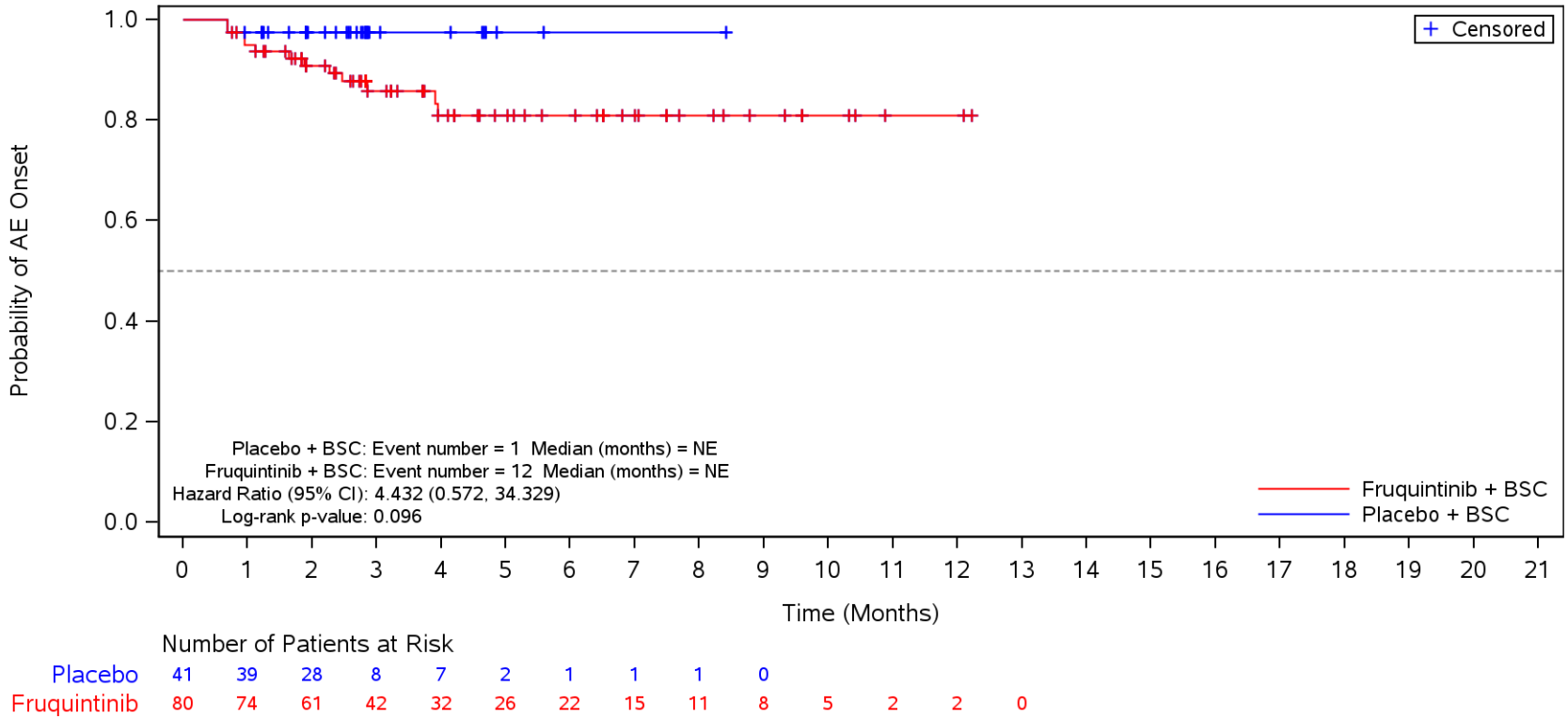
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
North America



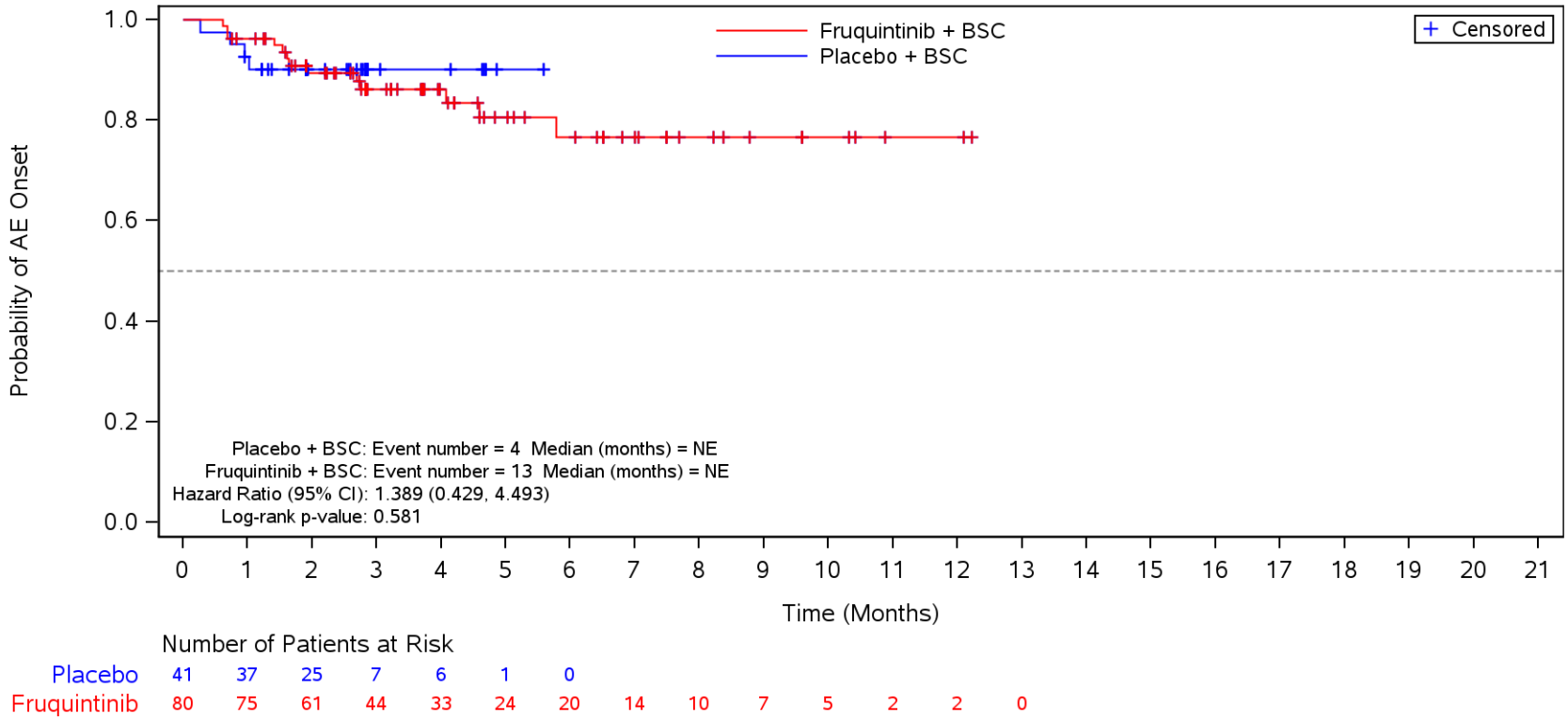
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
North America



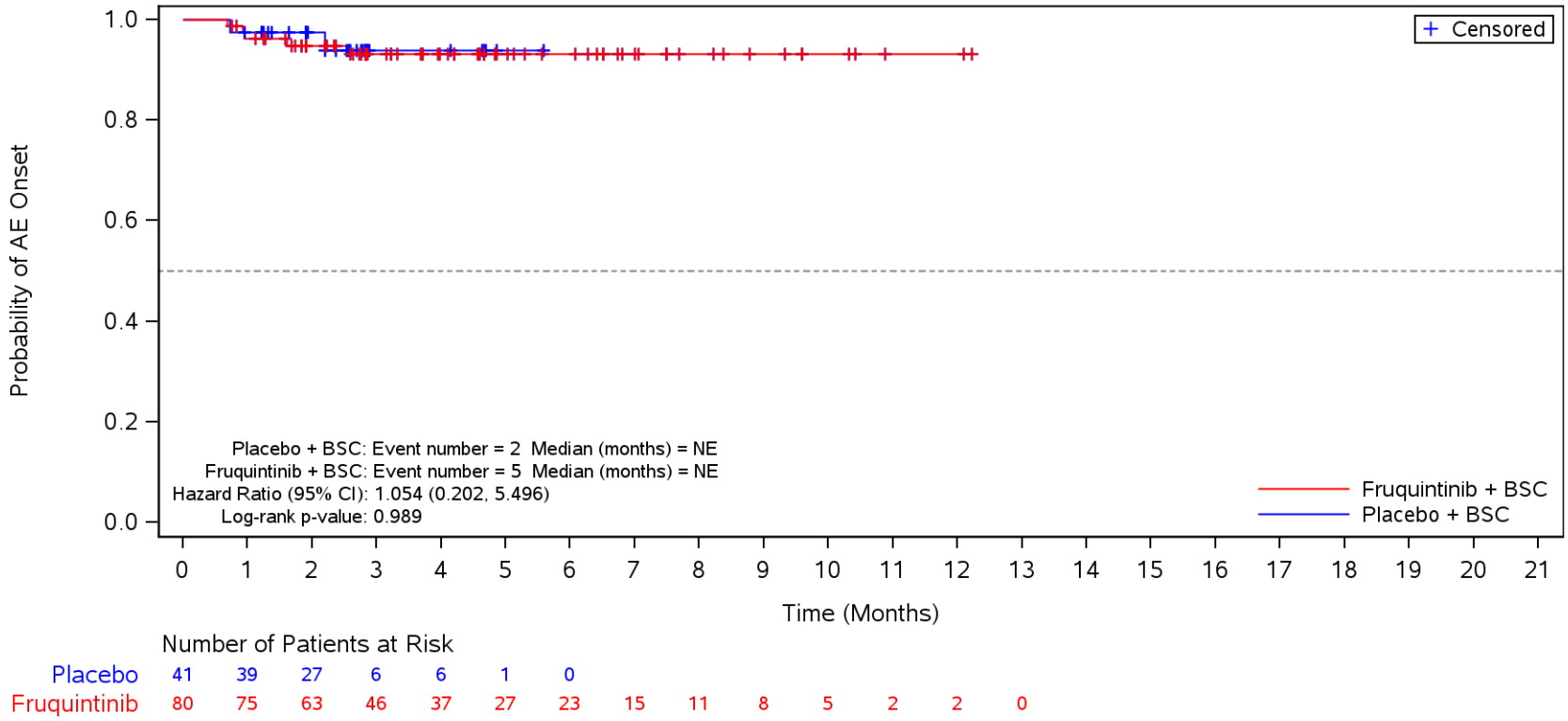
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
North America



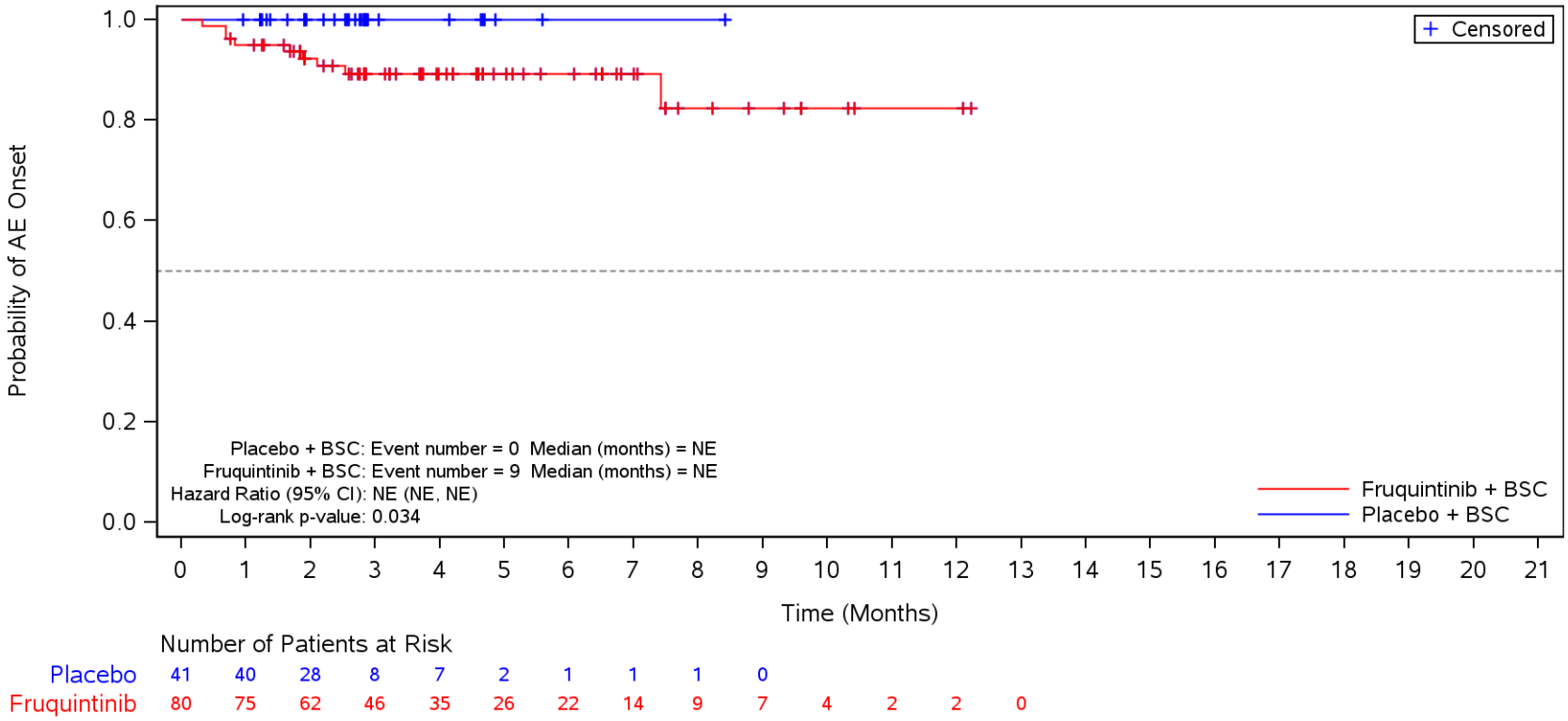
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
North America



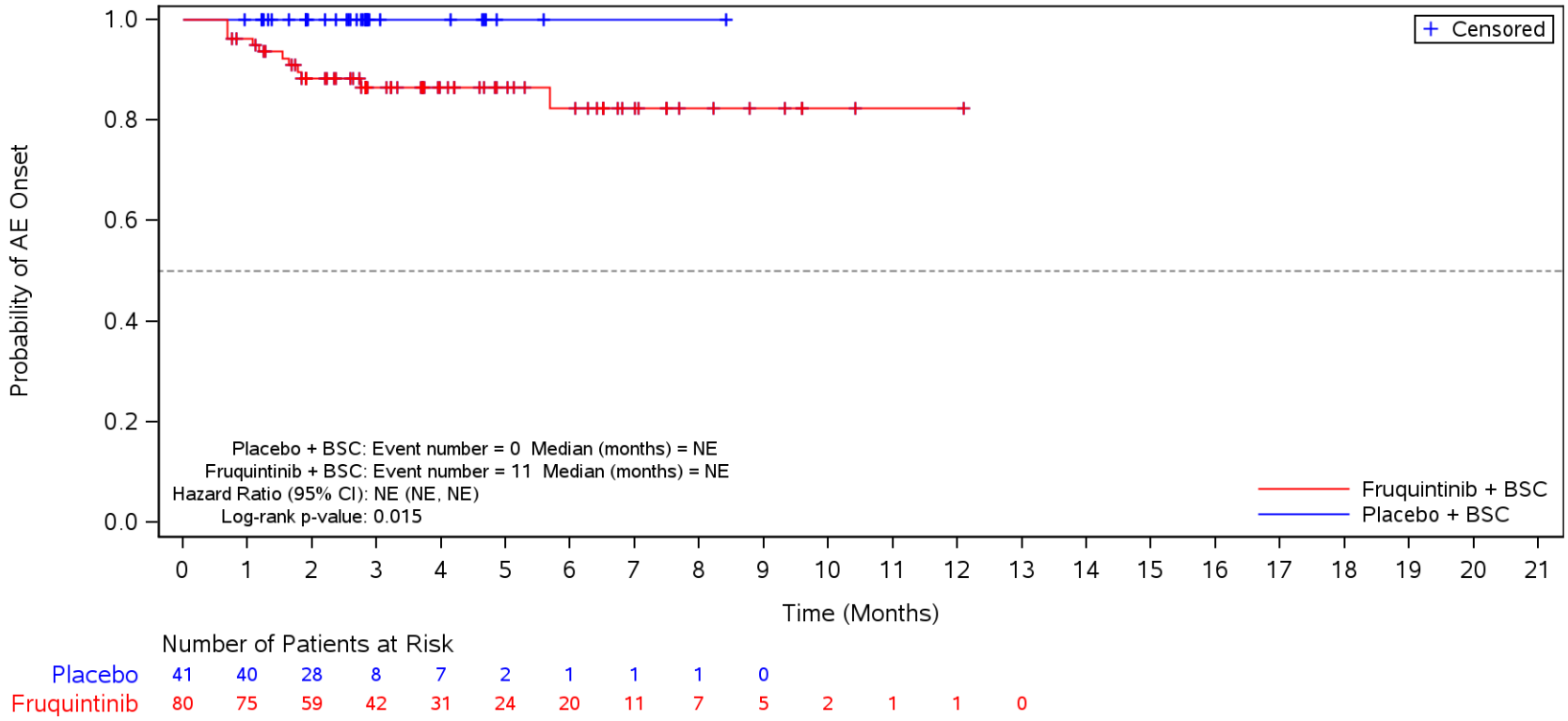
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
North America



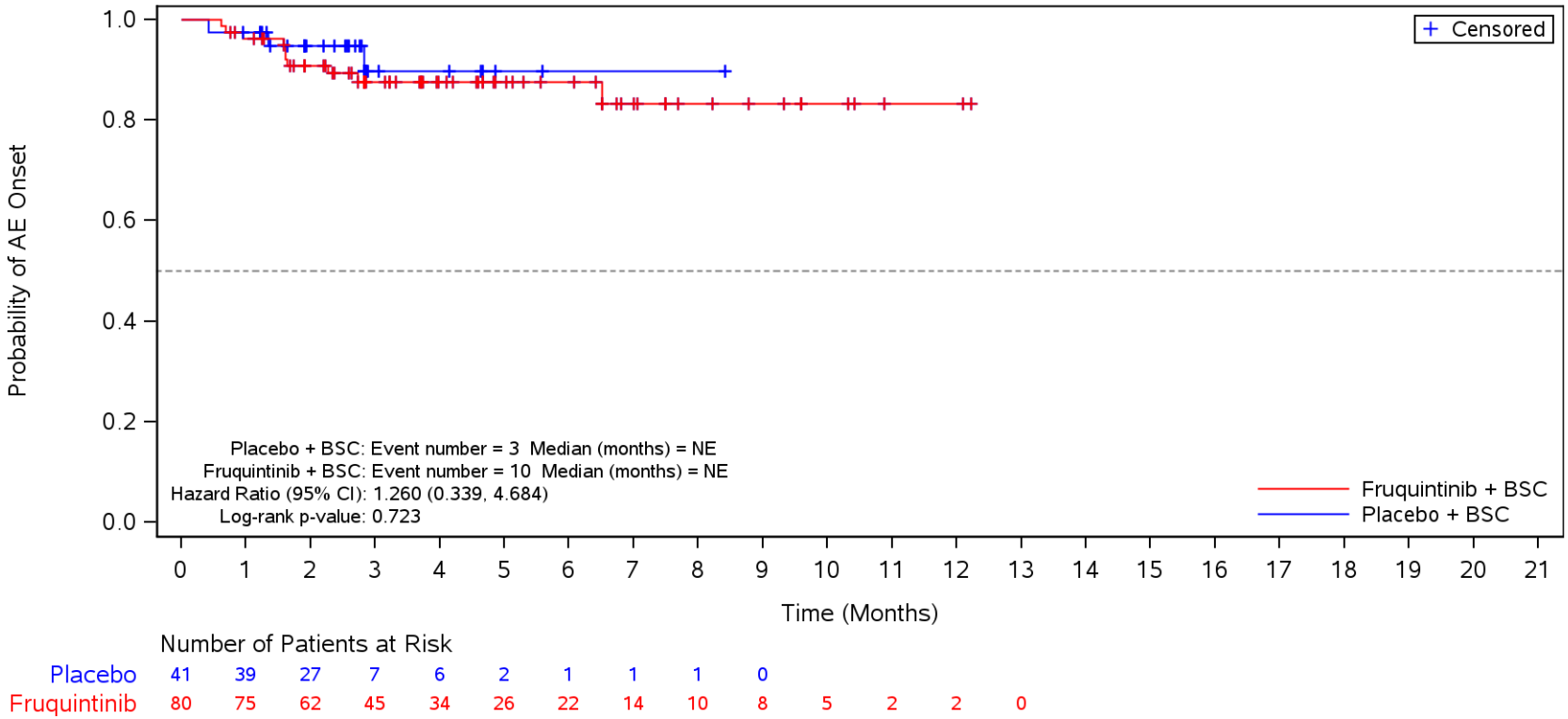
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
North America



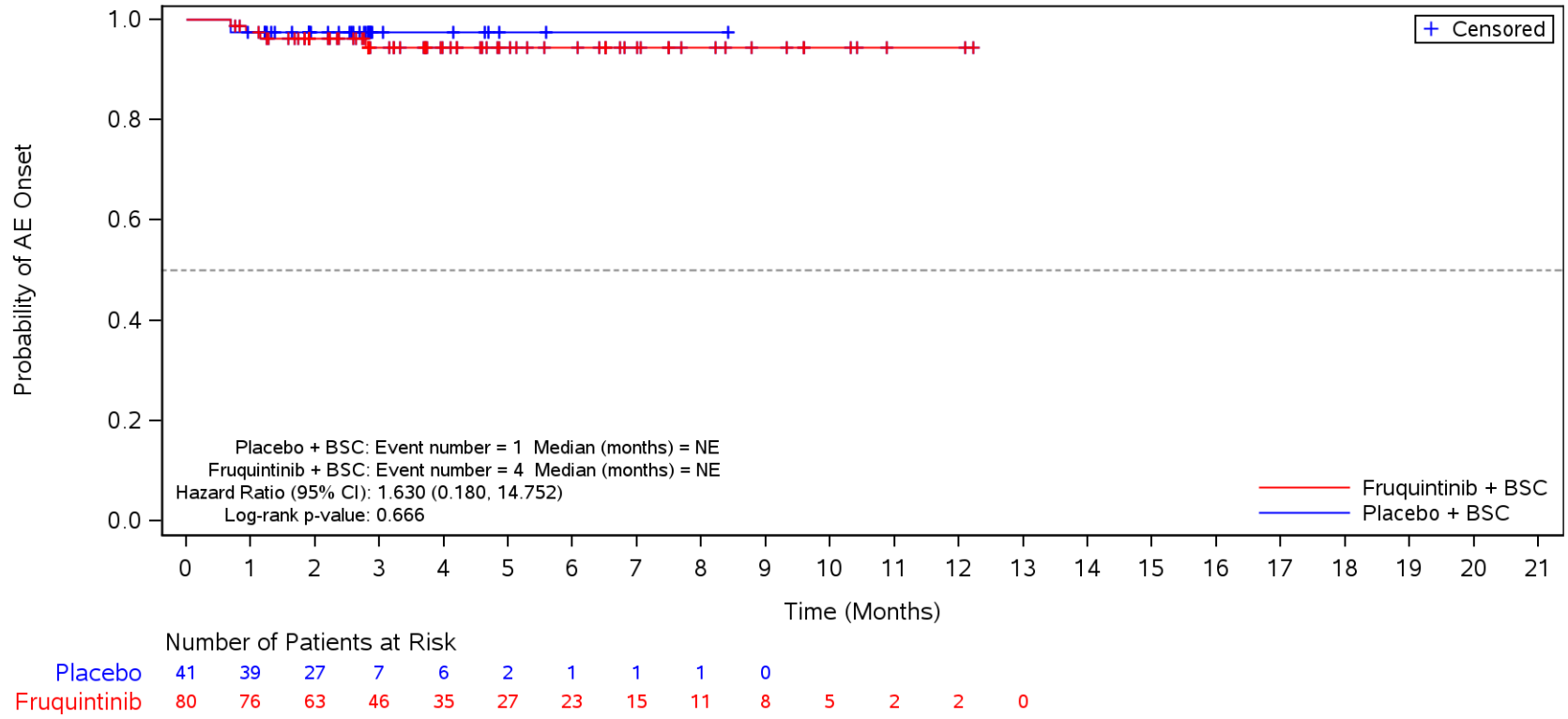
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
North America



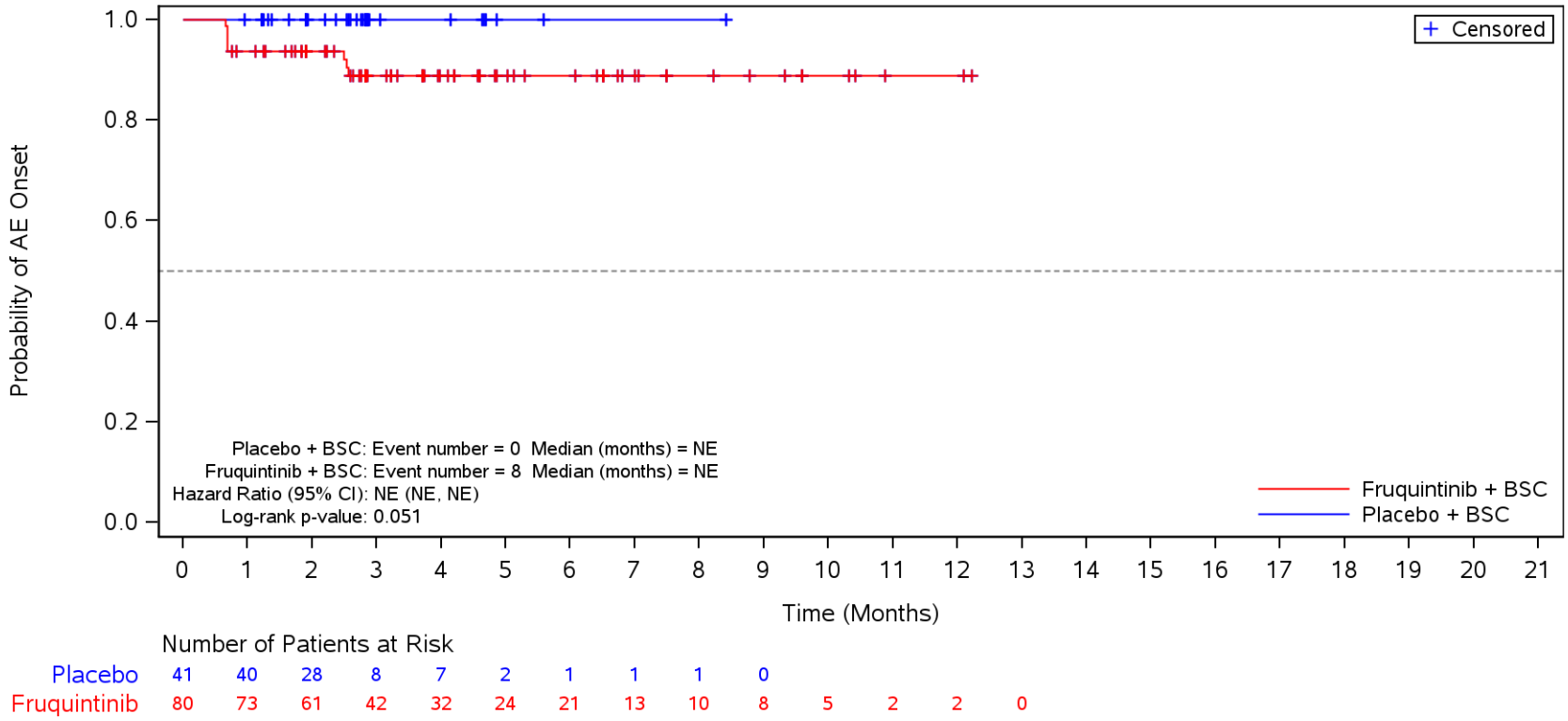
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**
North America



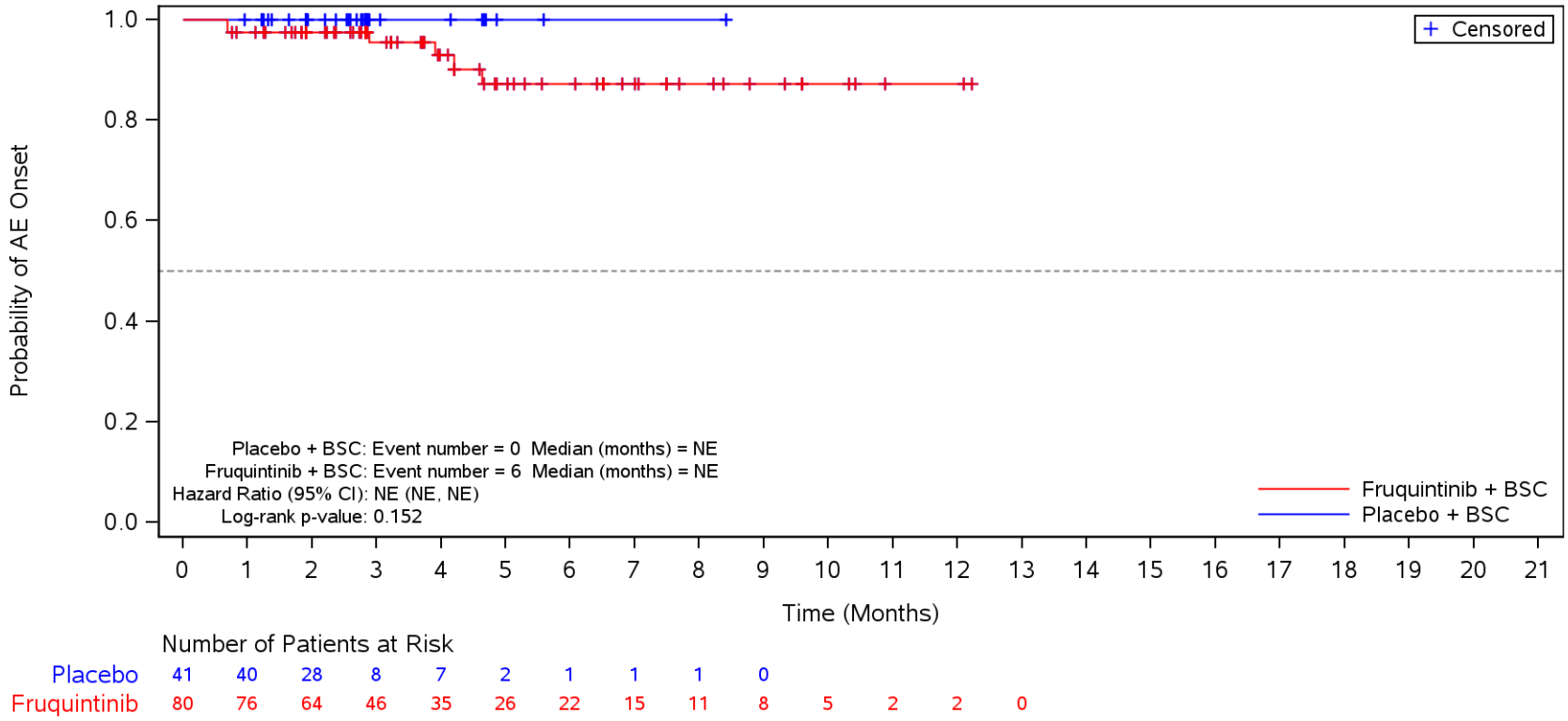
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
North America



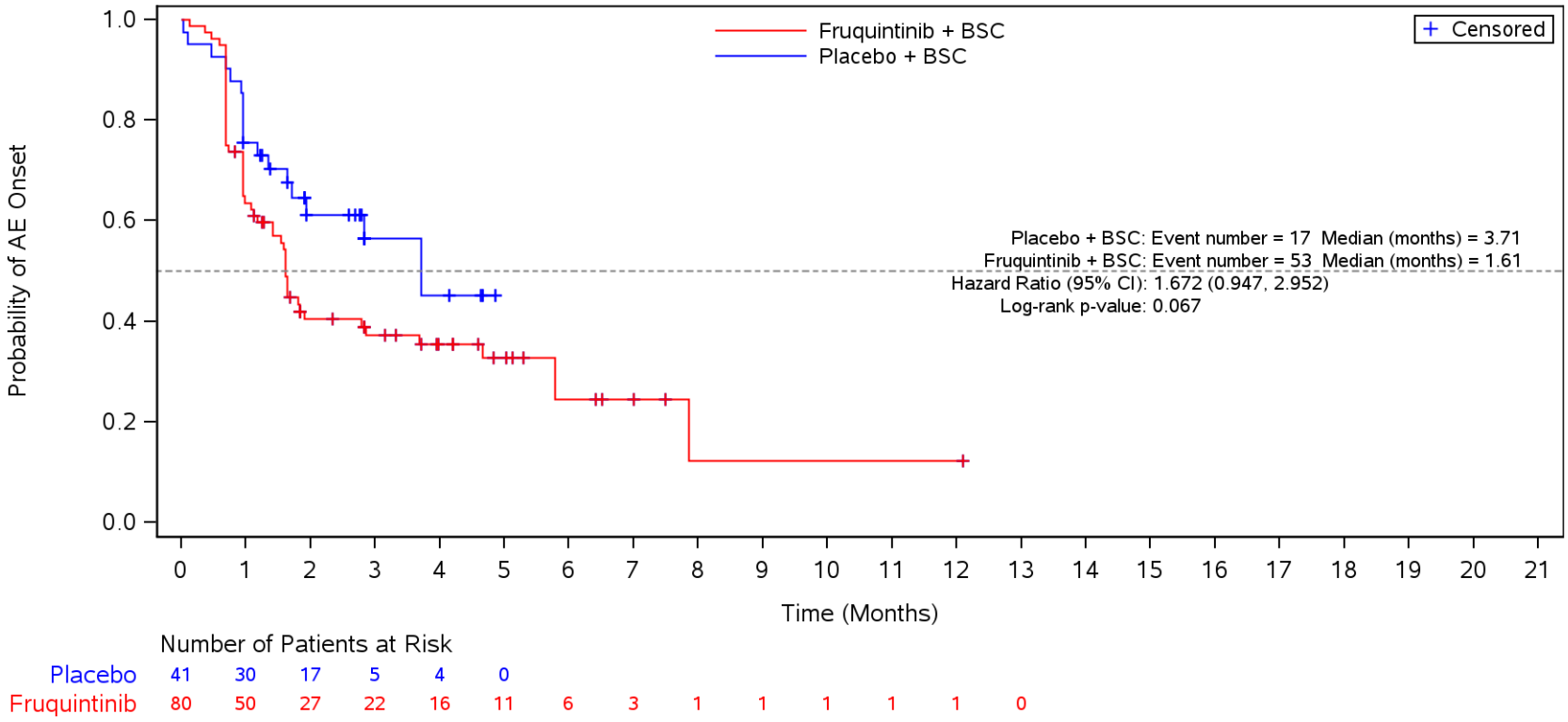
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
North America



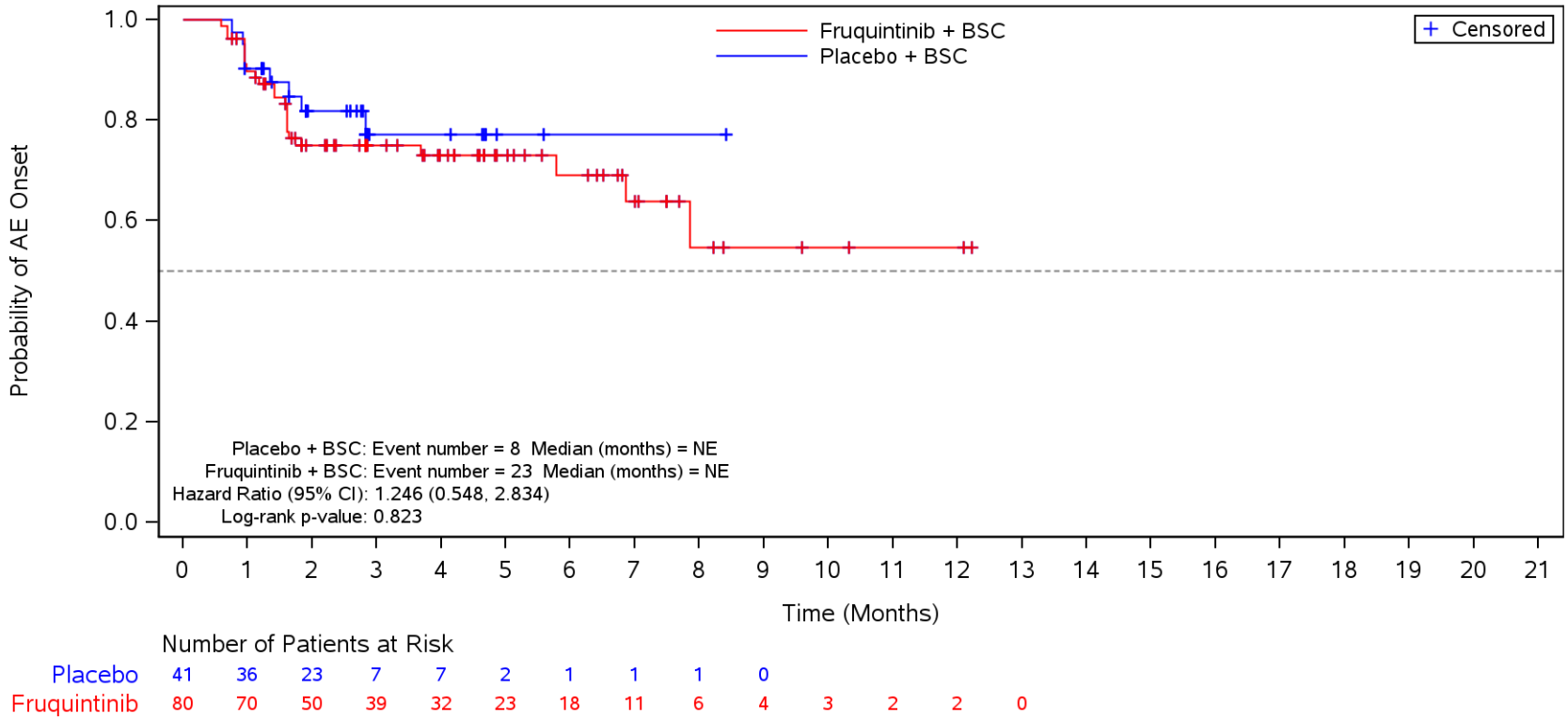
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations**
North America



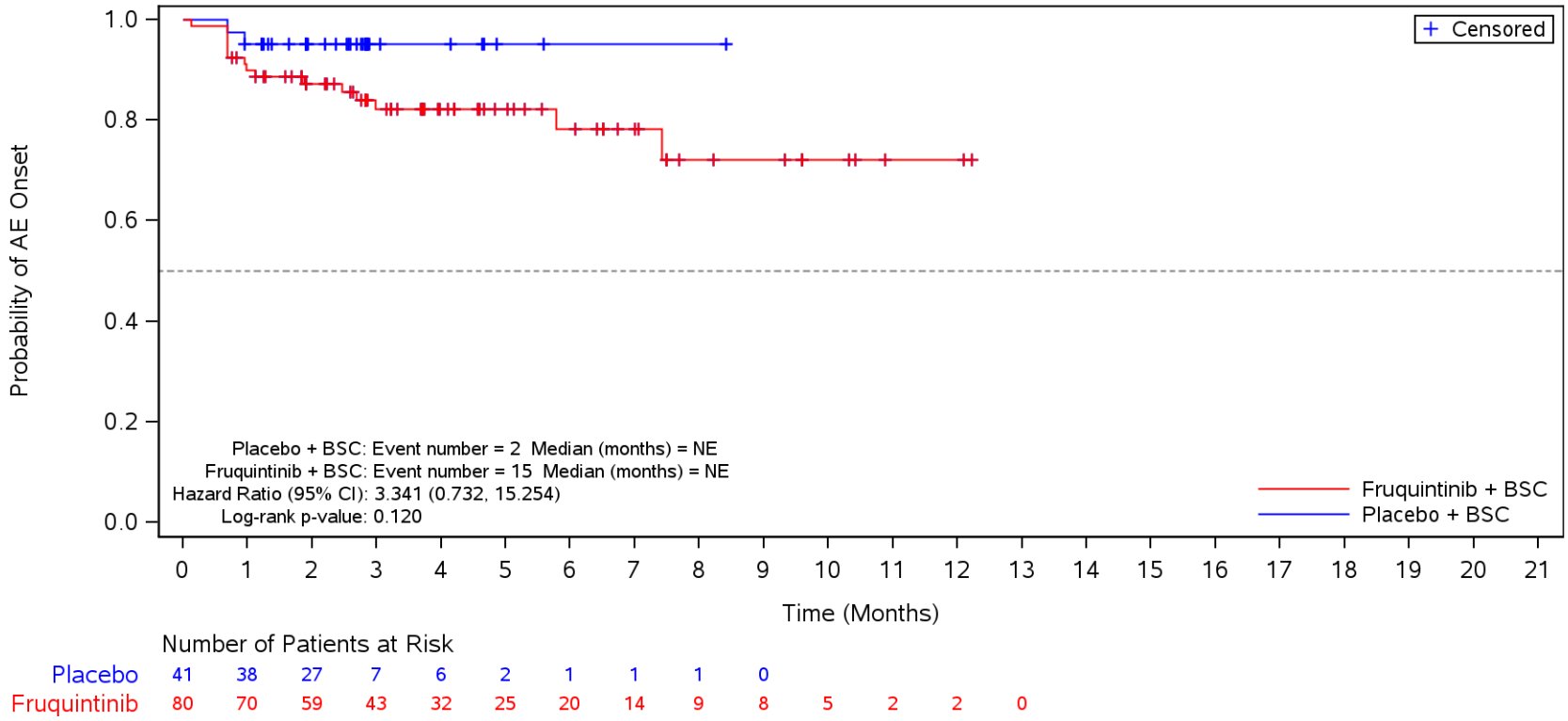
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
North America



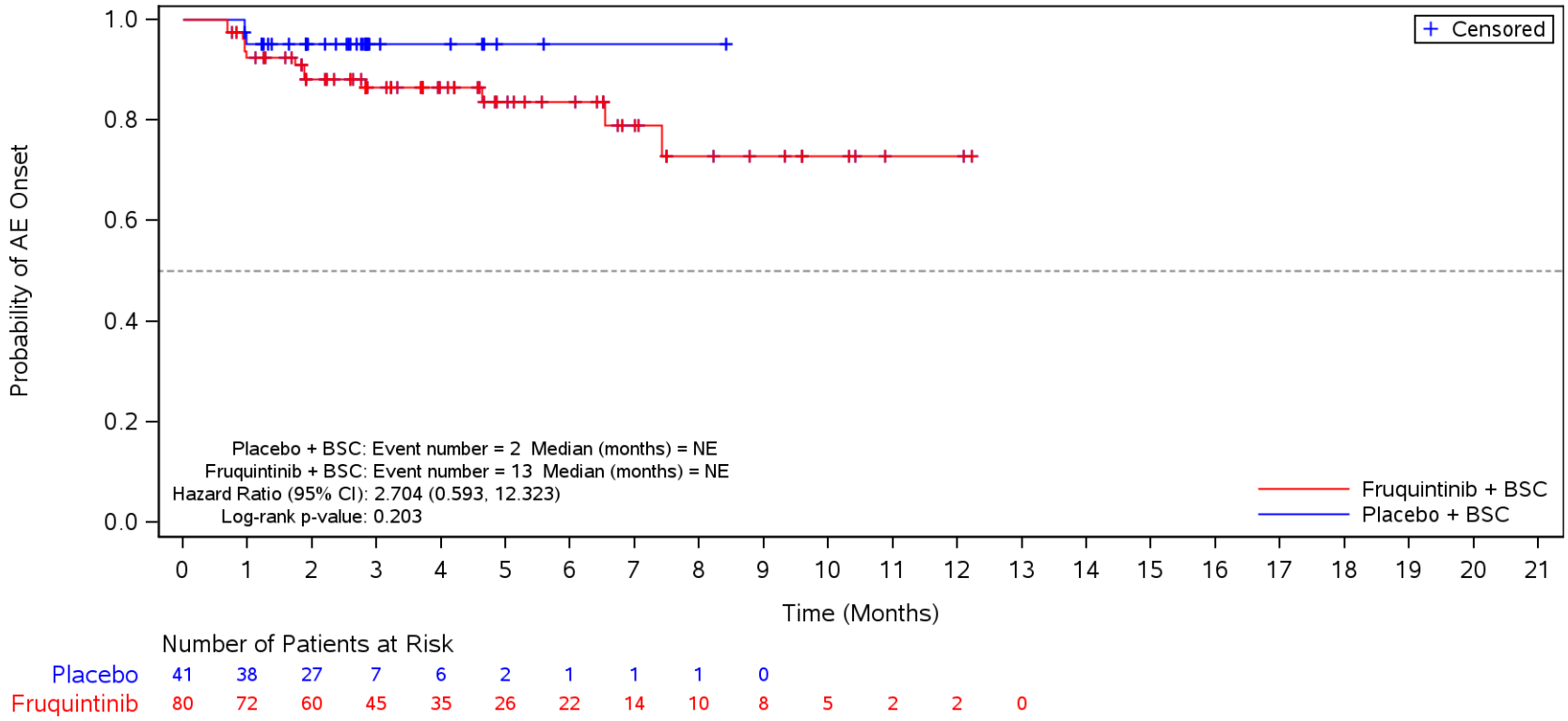
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
North America



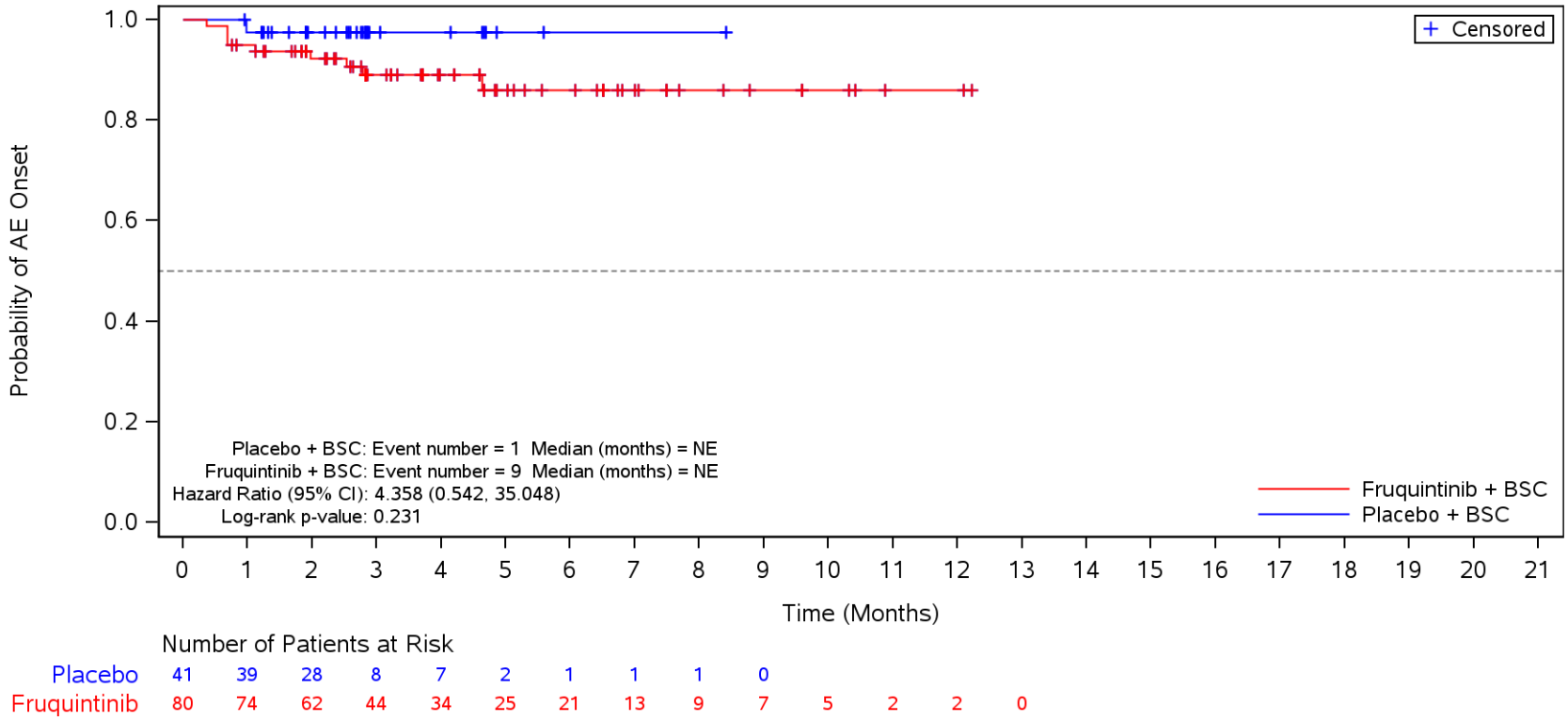
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
North America



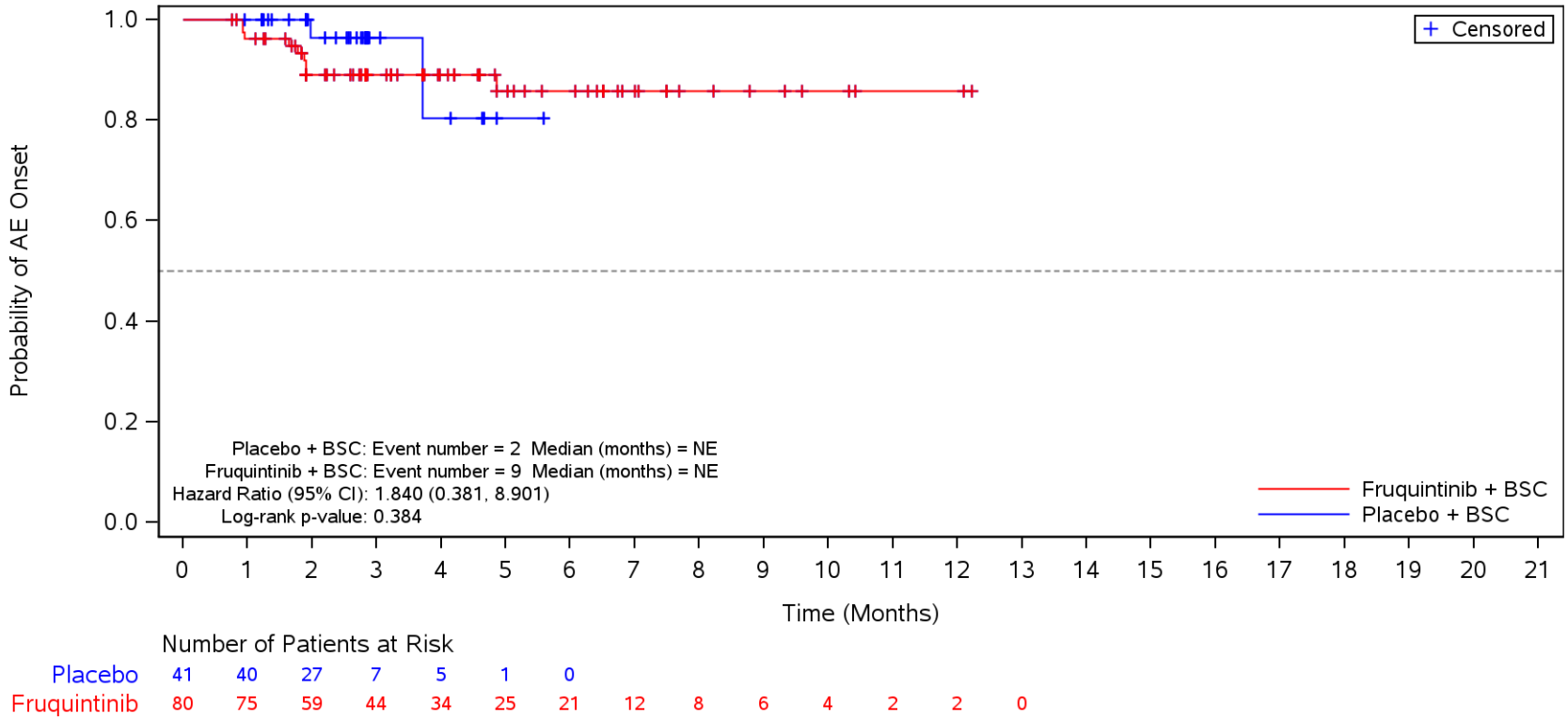
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
North America



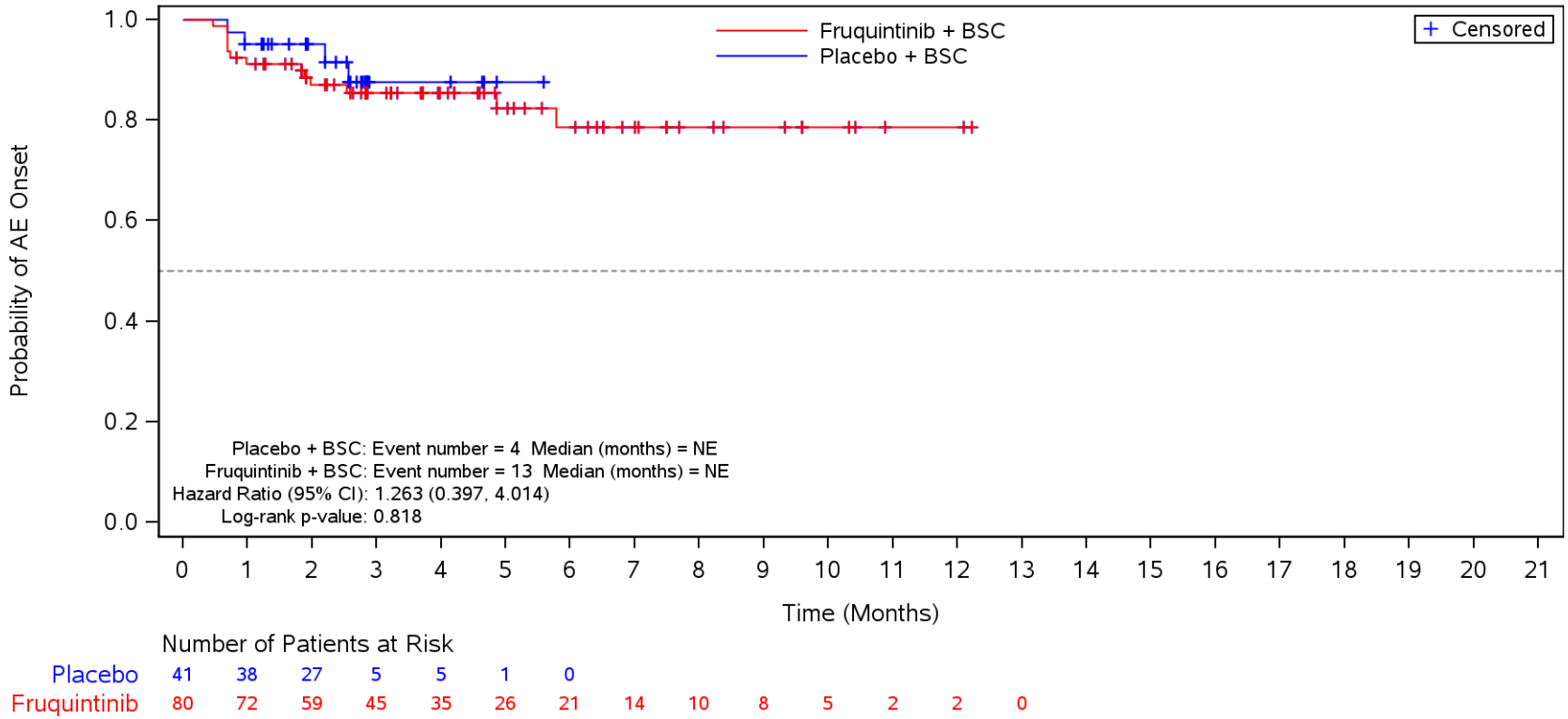
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
North America



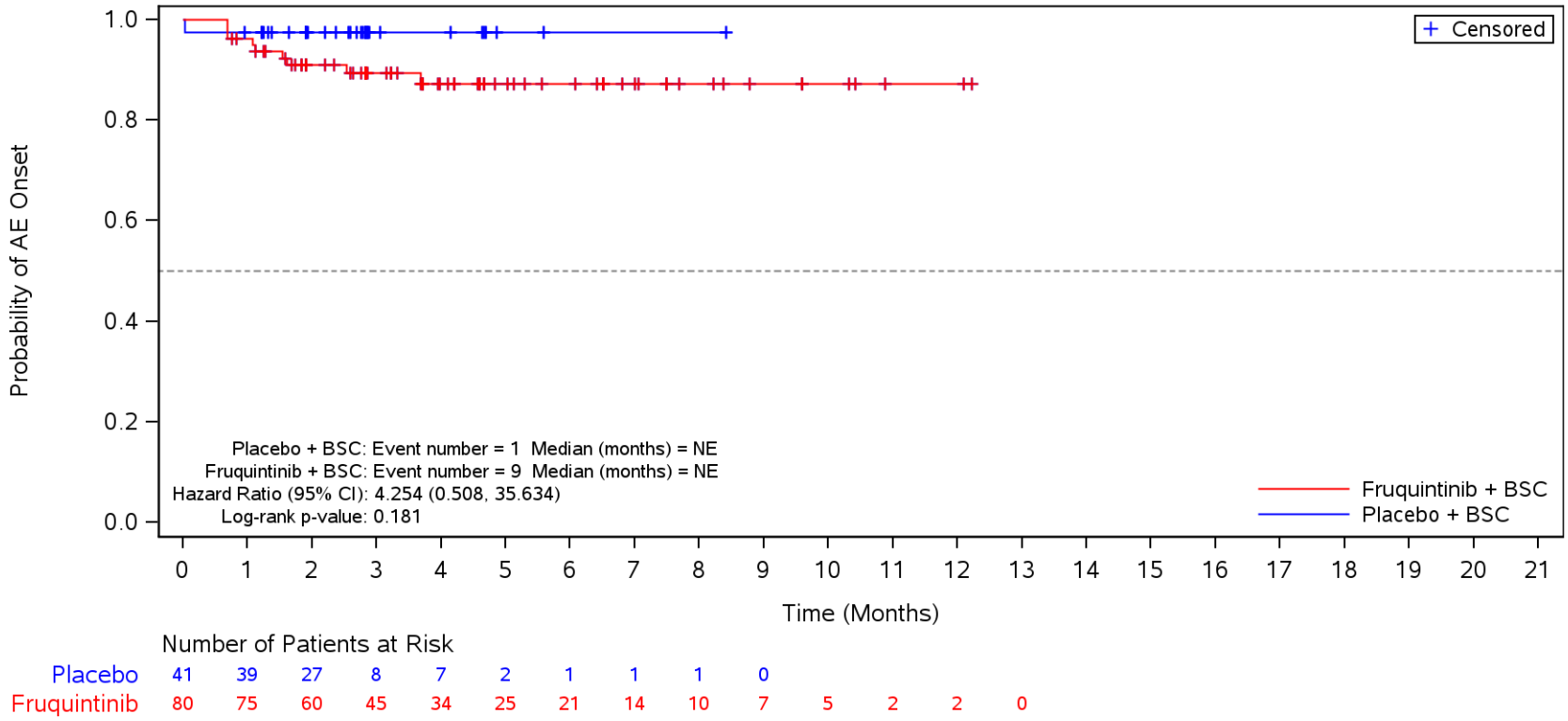
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
North America



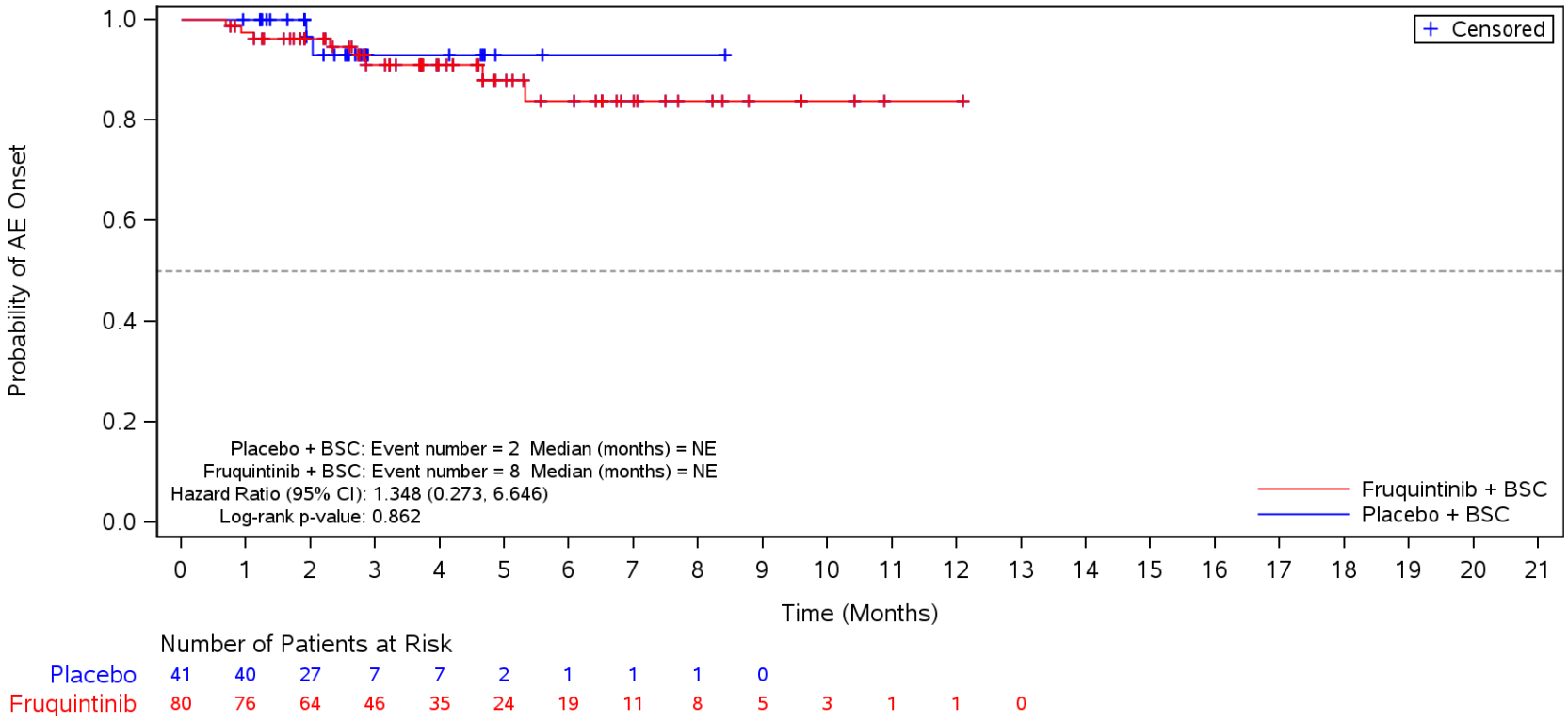
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
North America



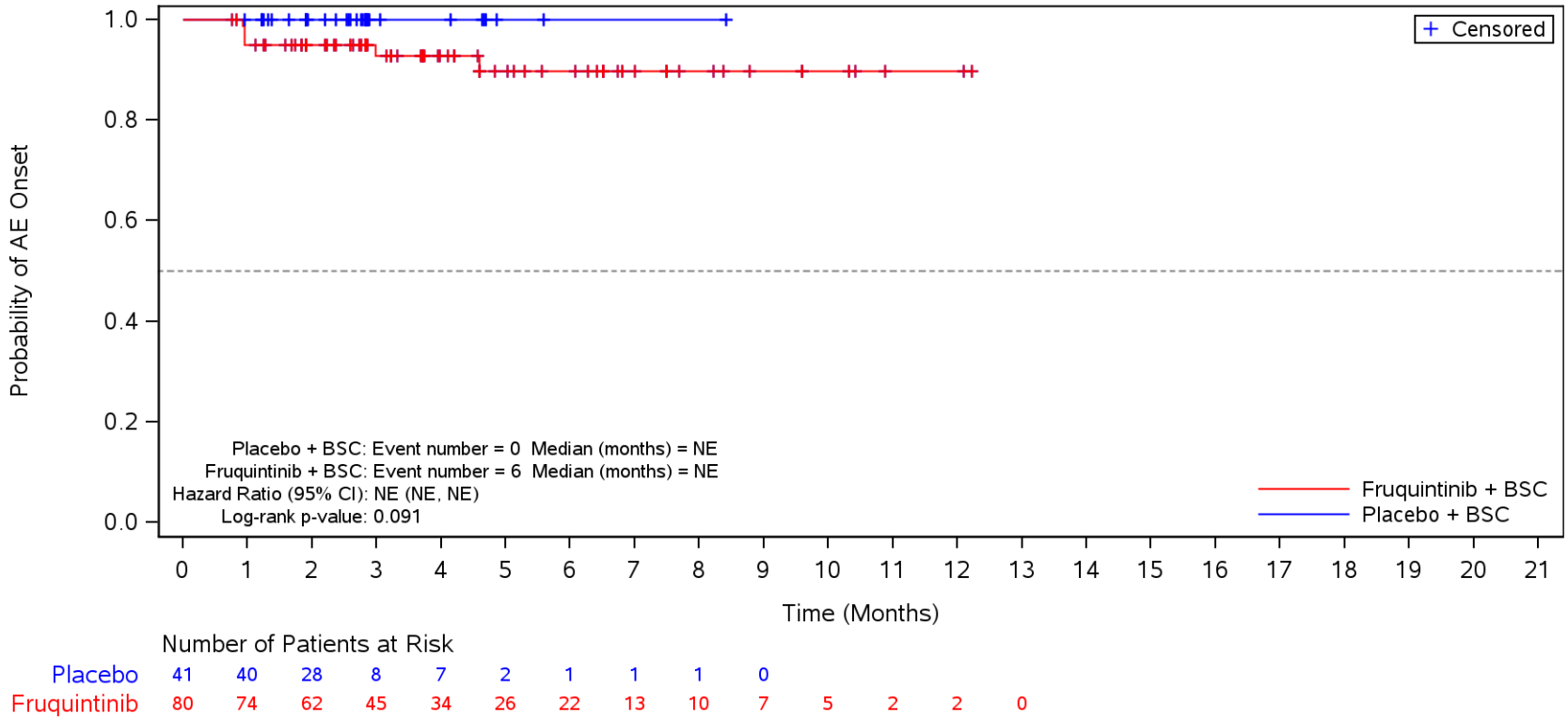
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
North America



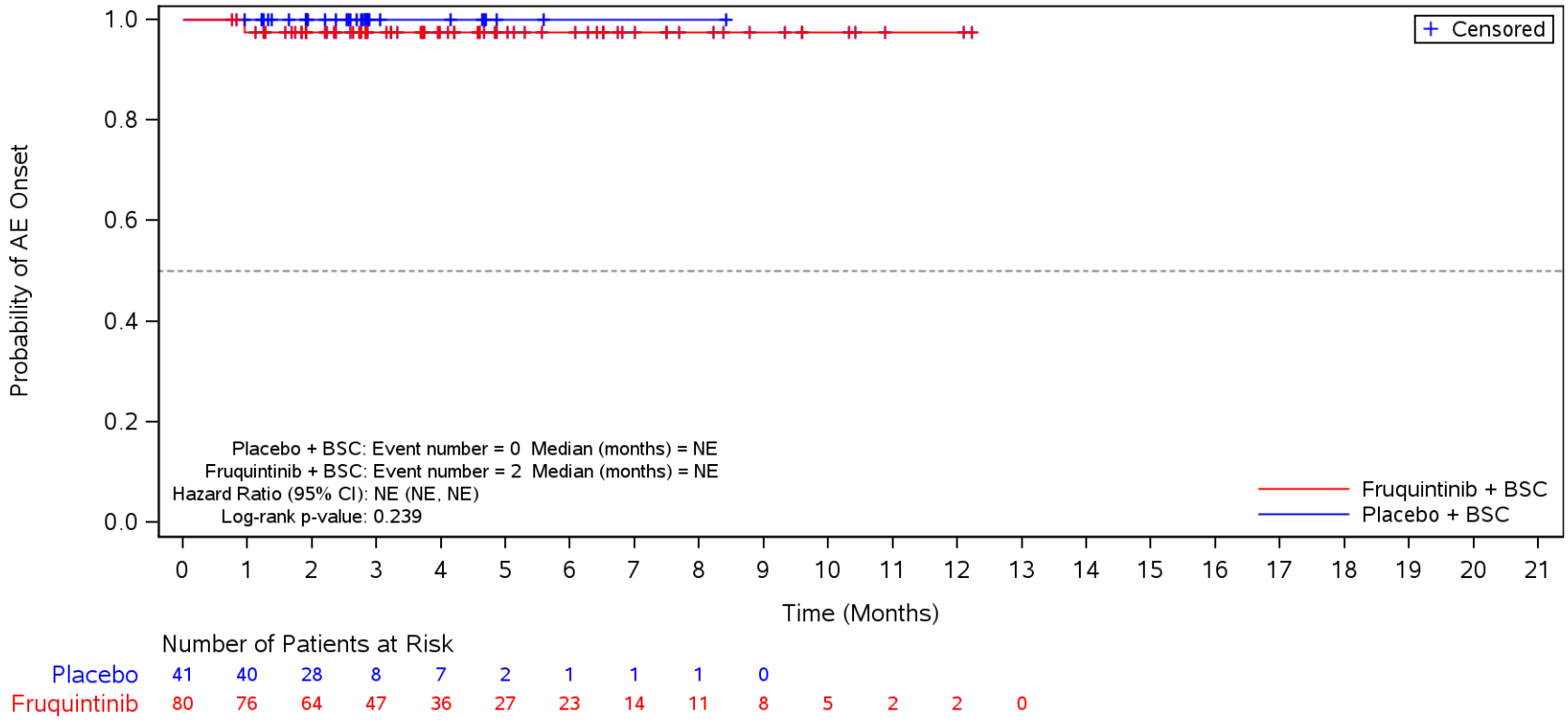
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
North America



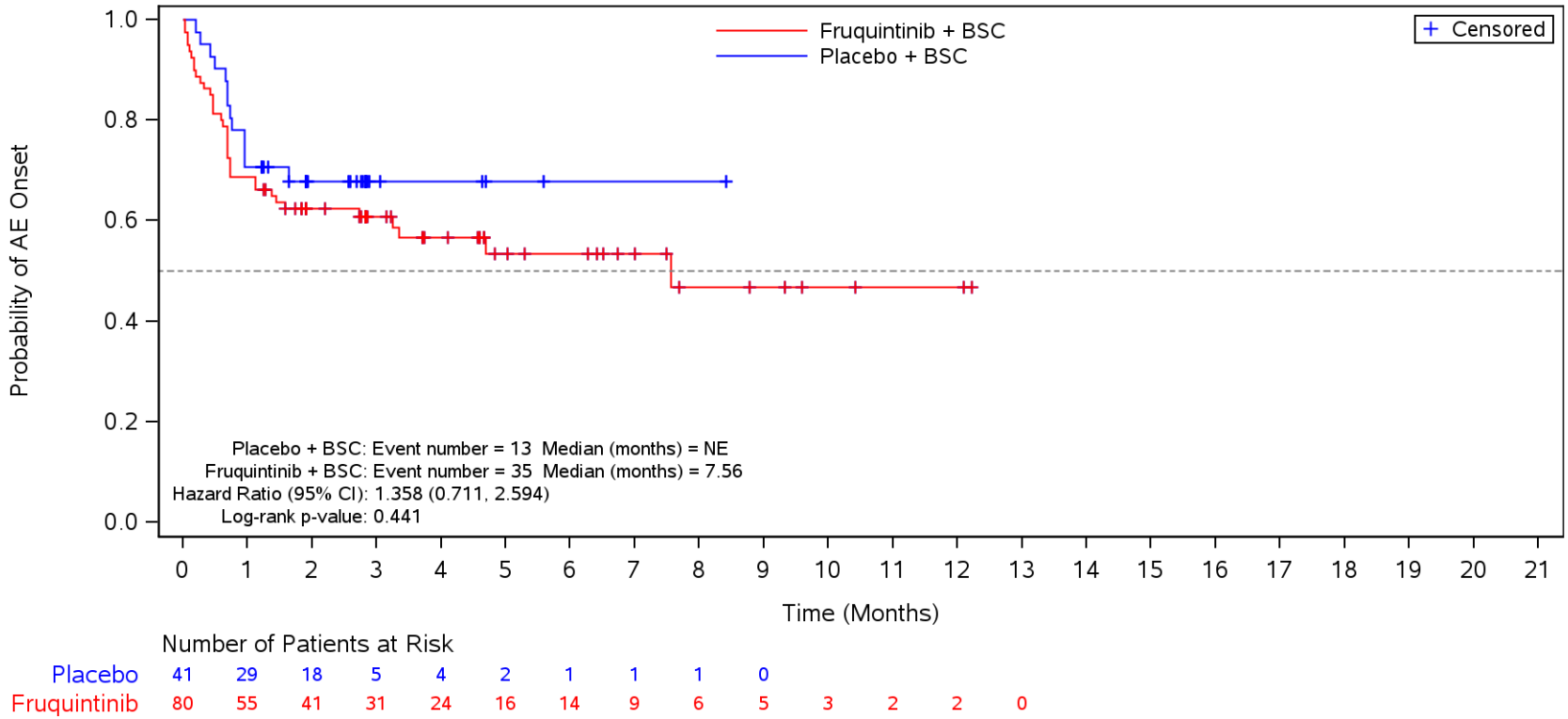
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
North America



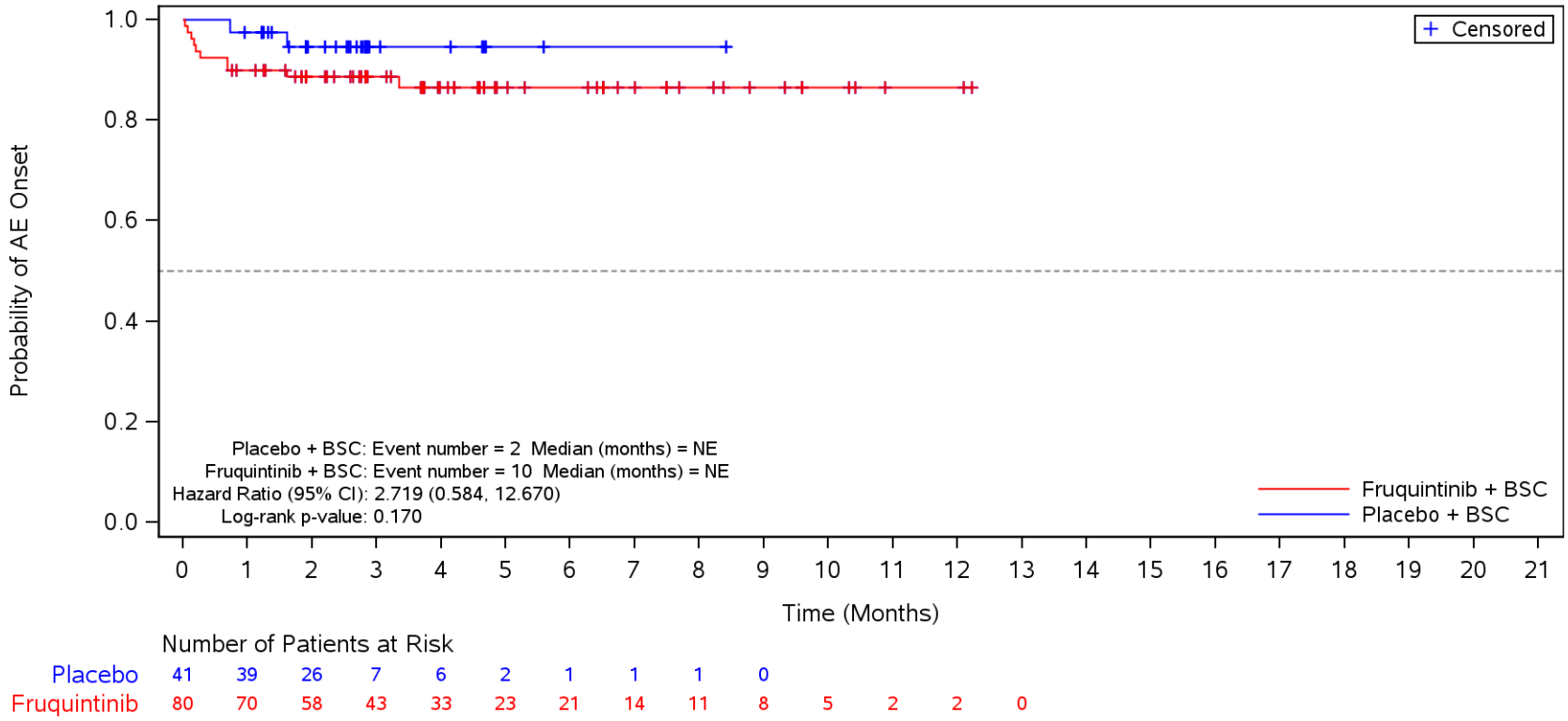
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
North America



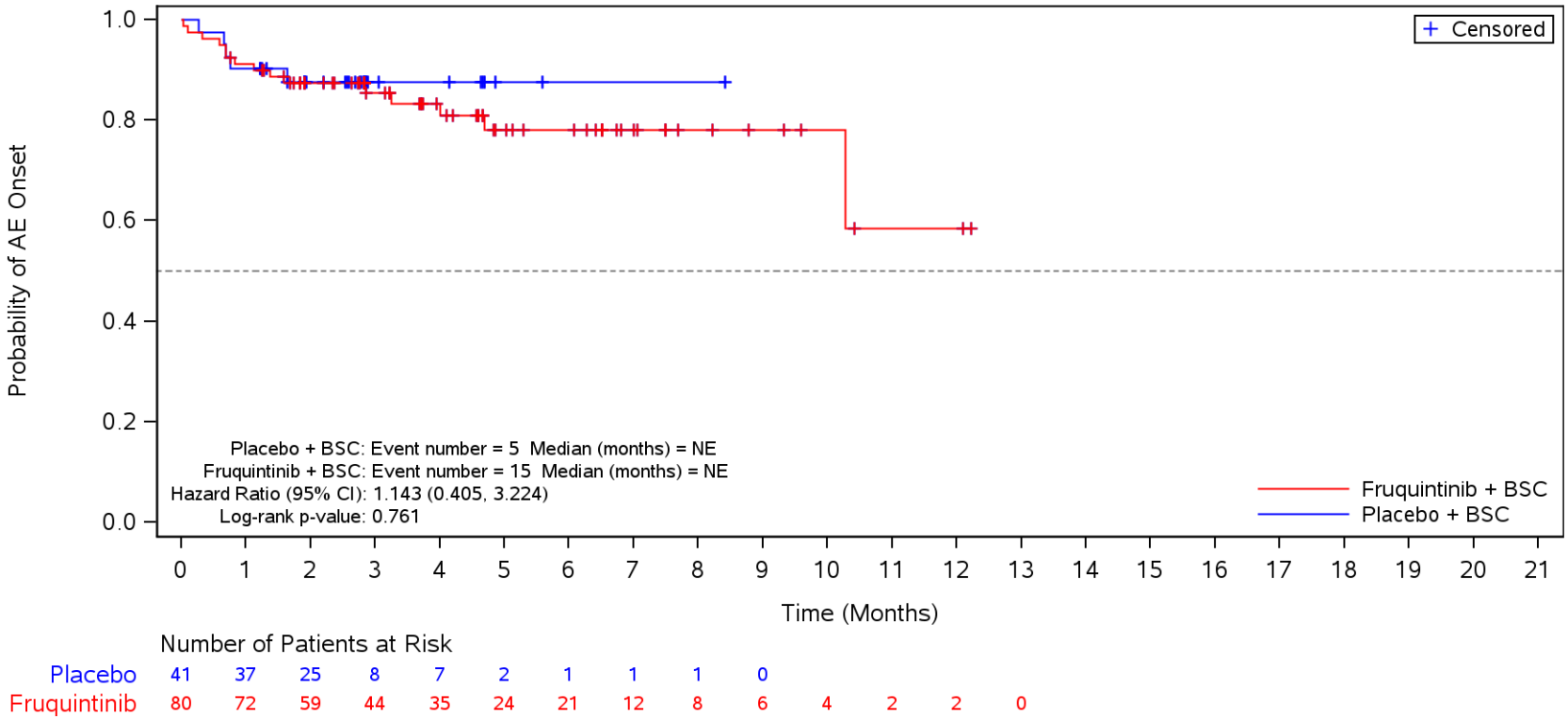
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
North America



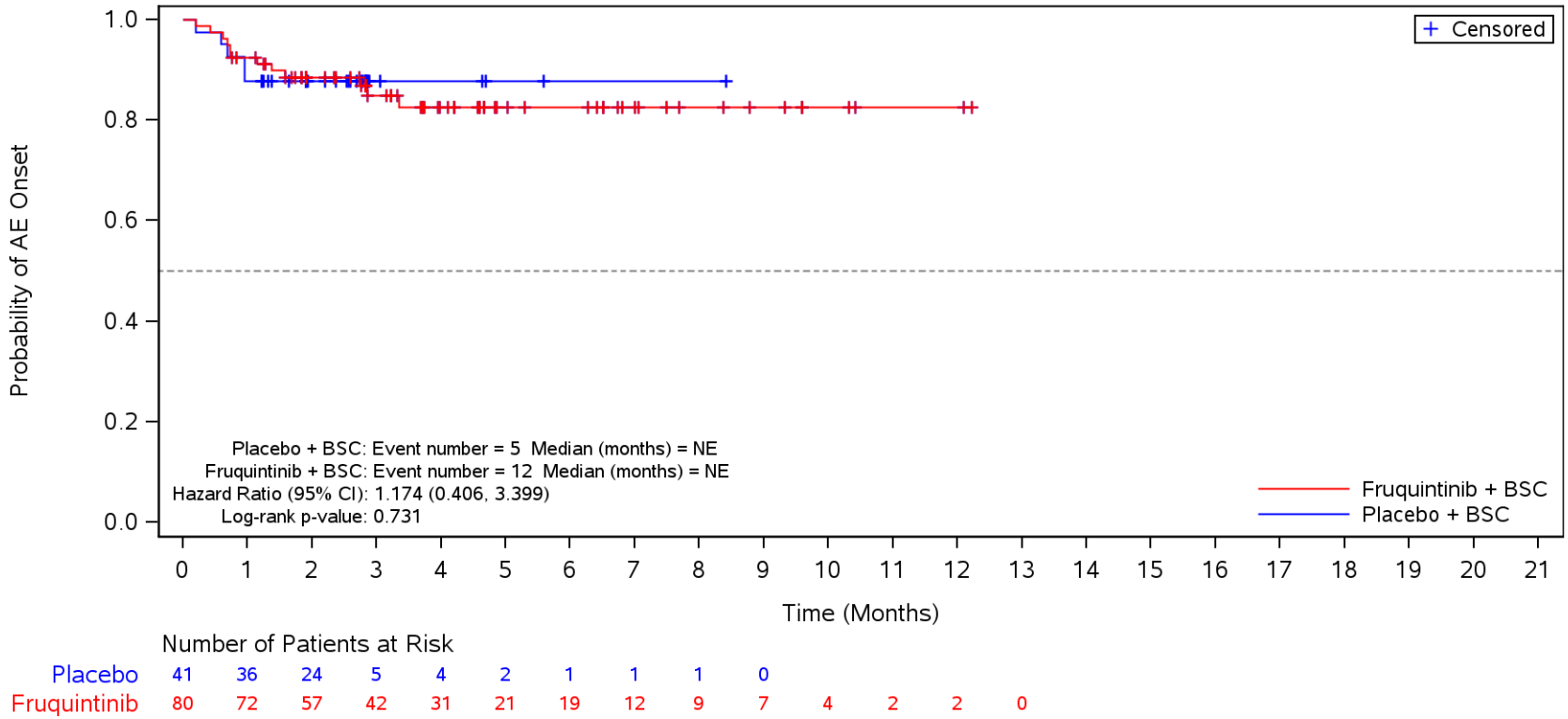
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
North America



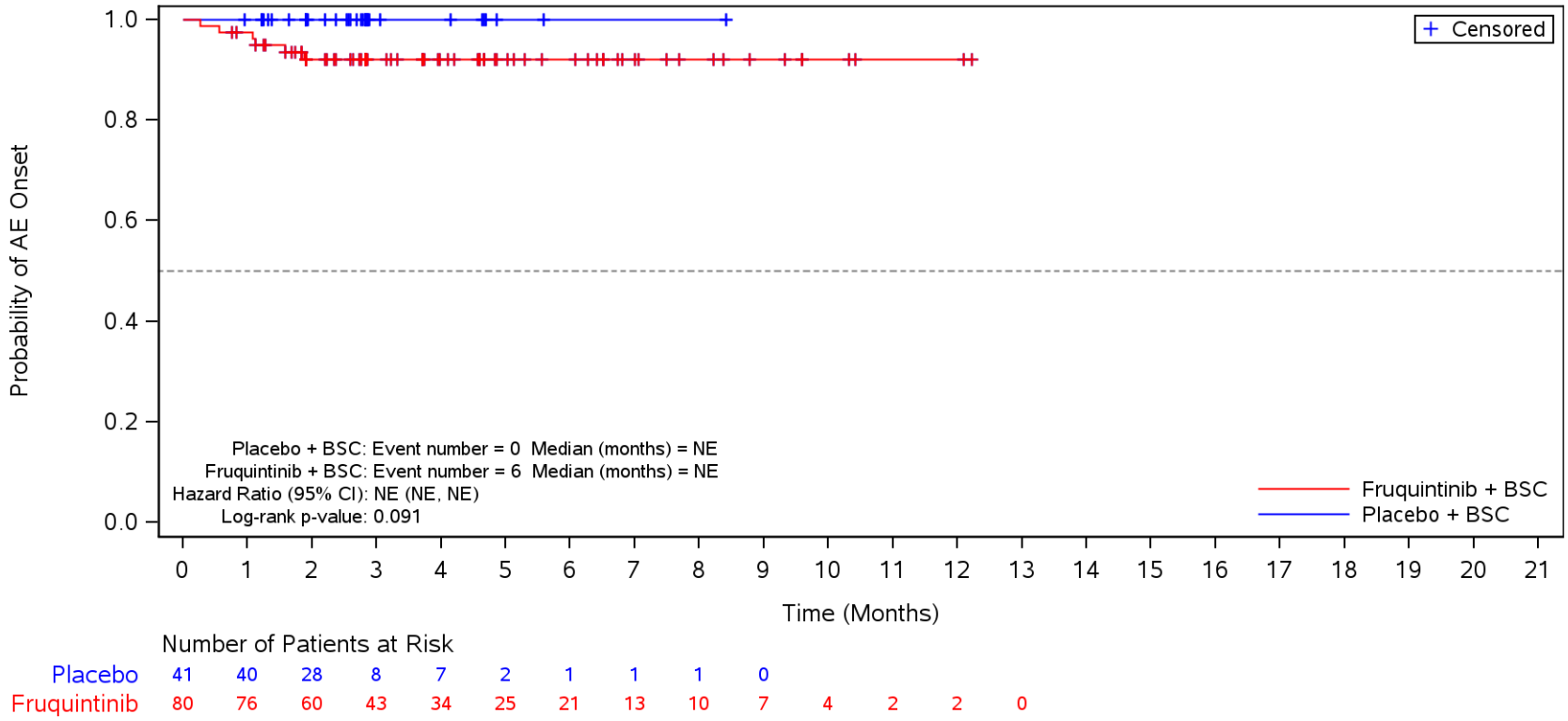
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
North America



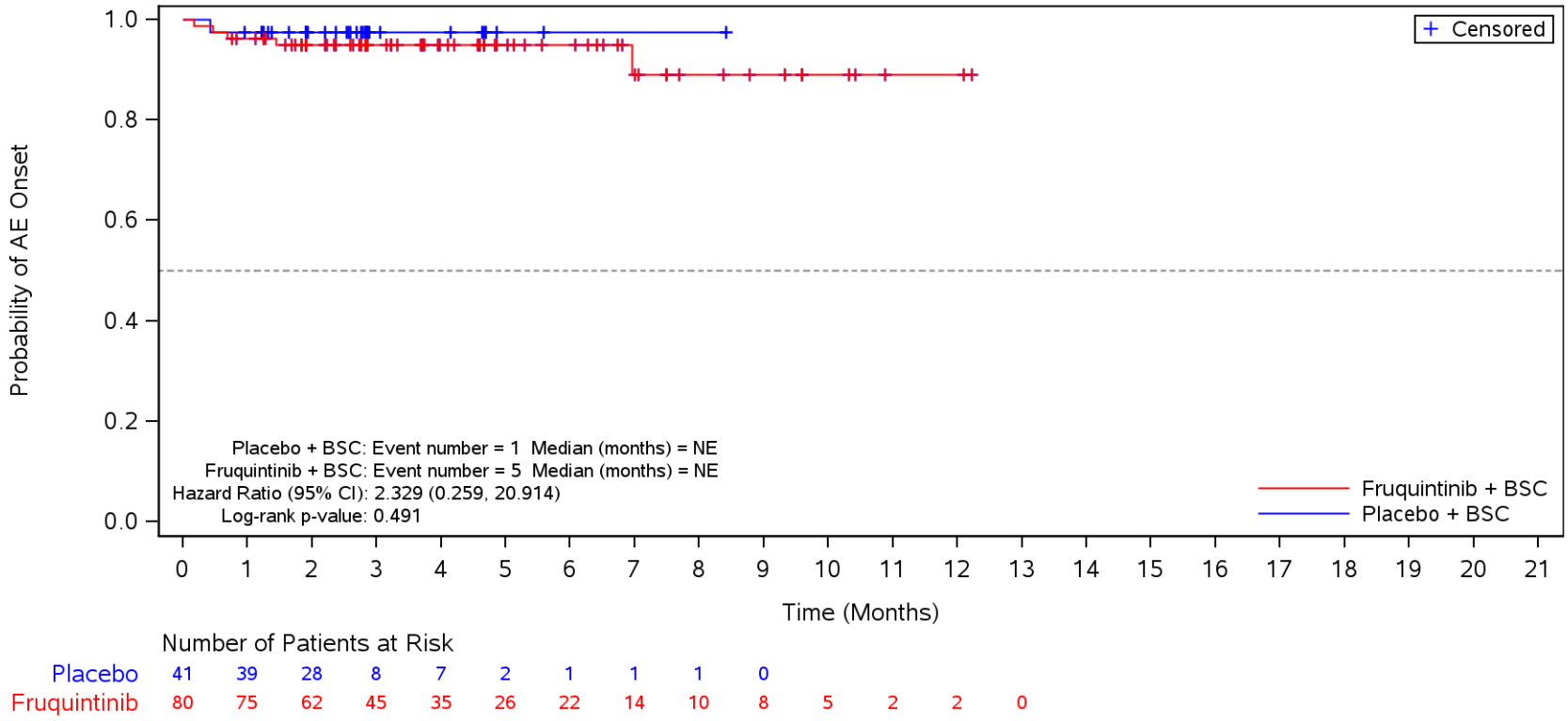
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
North America



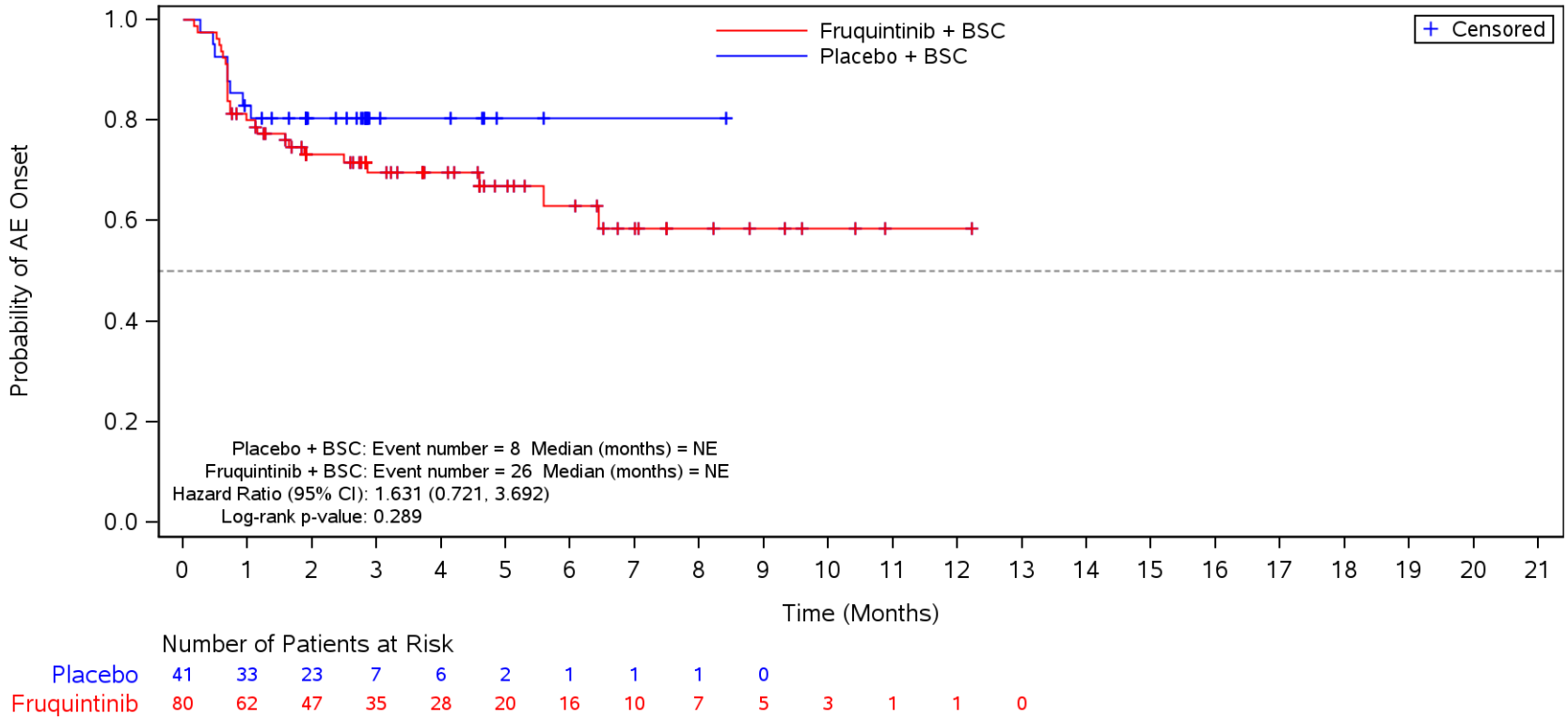
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
North America



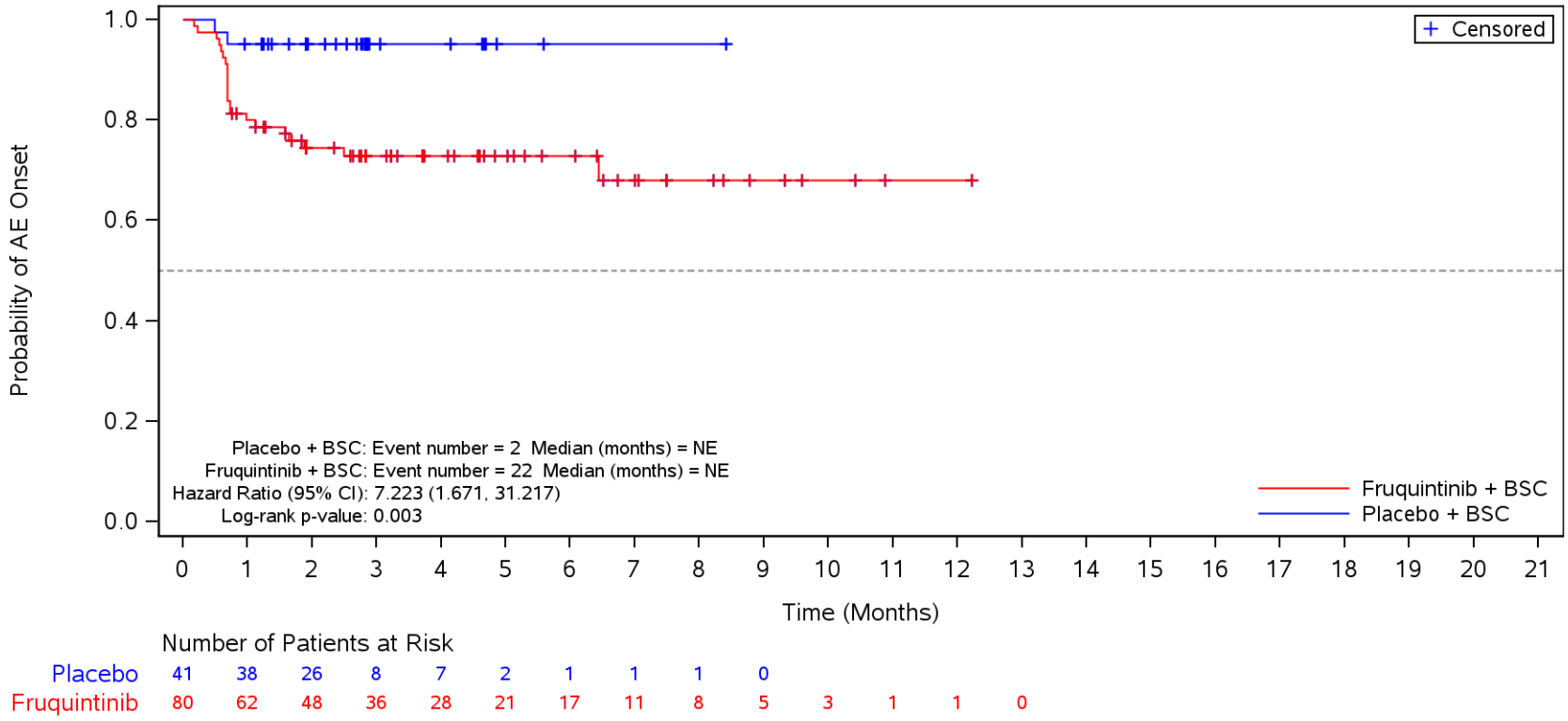
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Vascular disorders**
North America



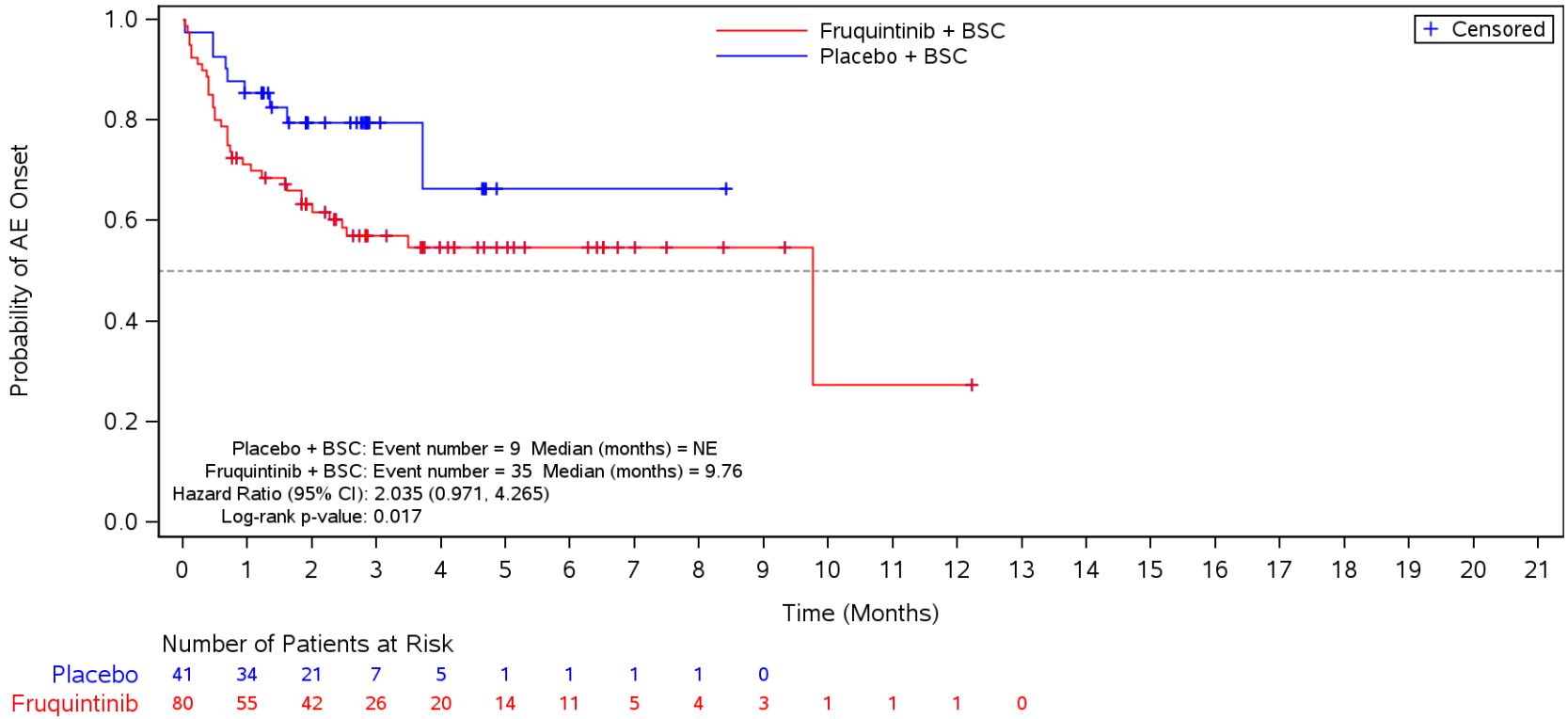
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
North America



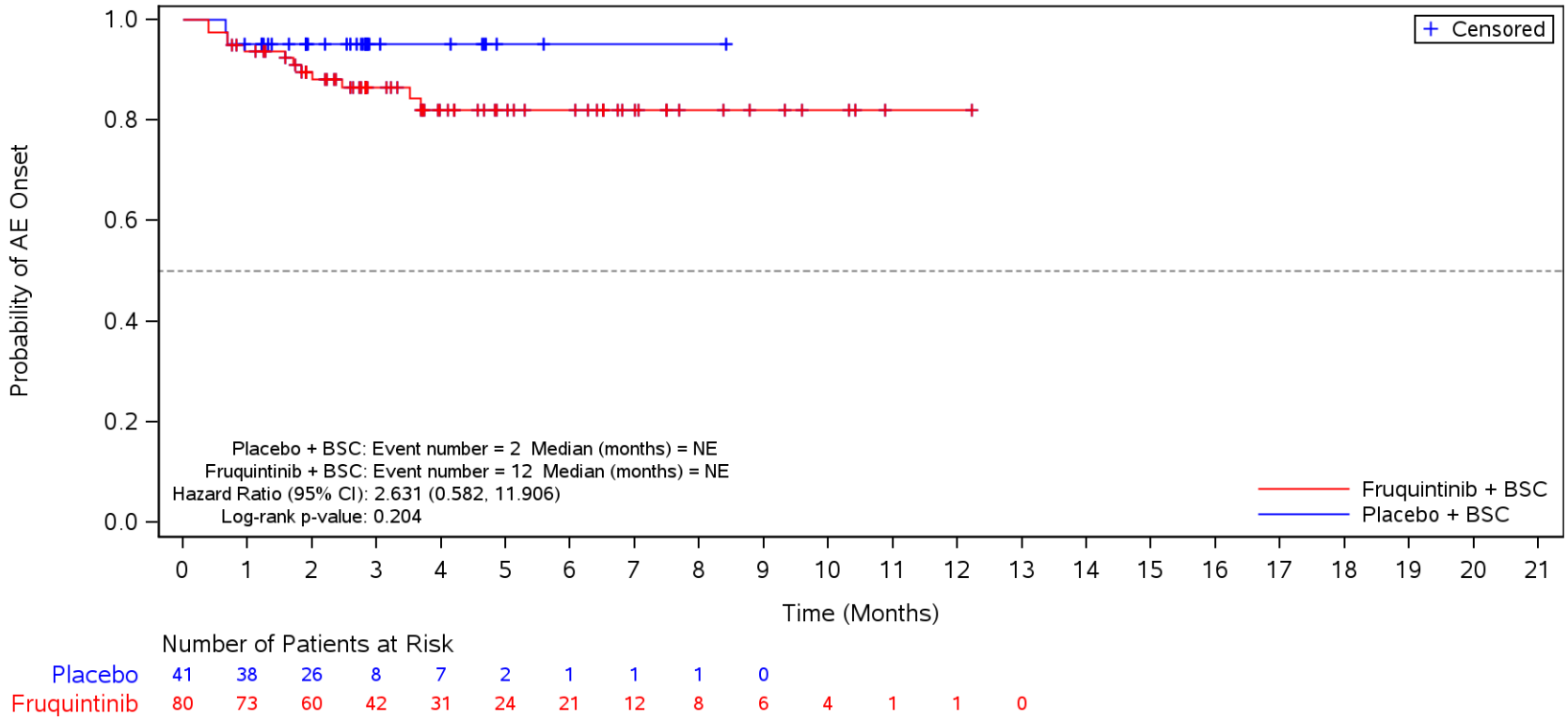
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
North America



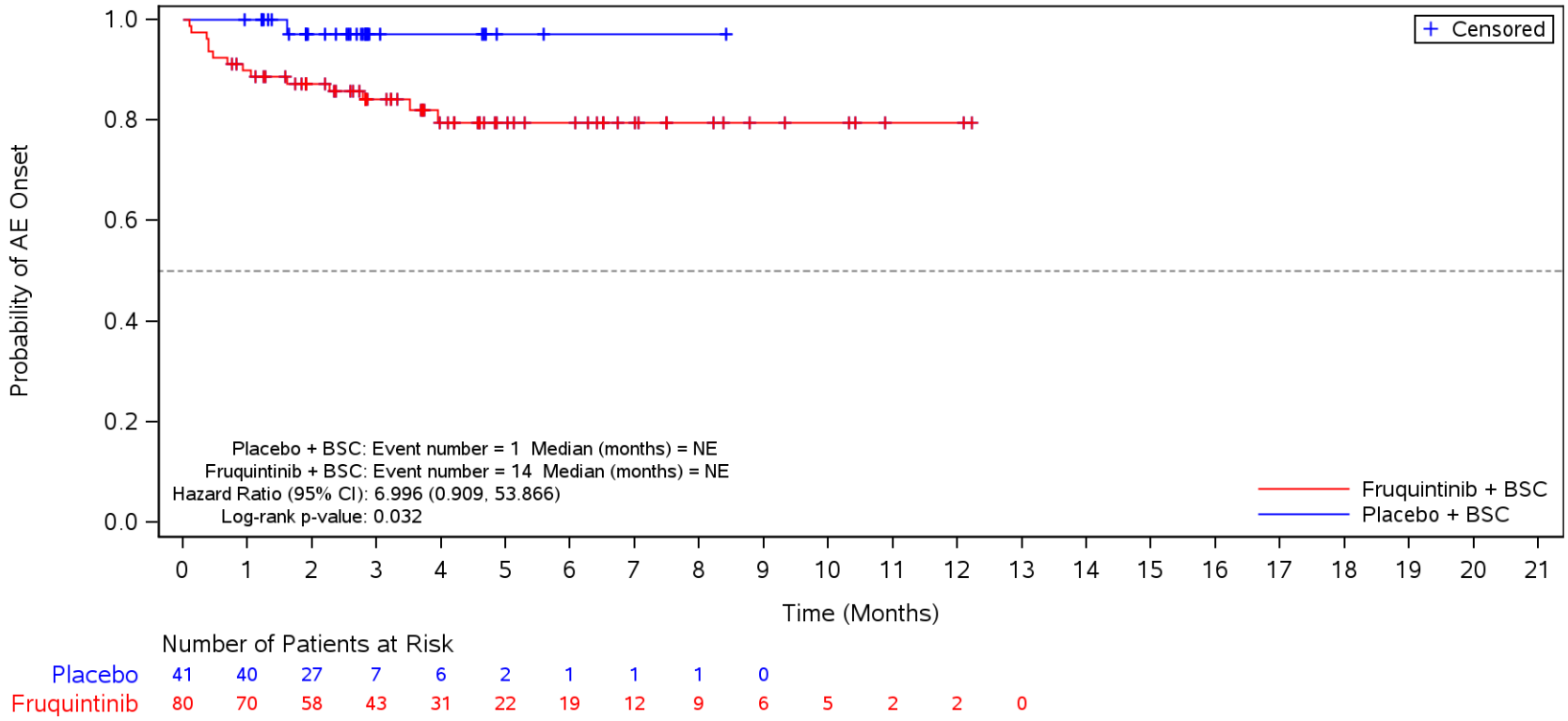
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
North America



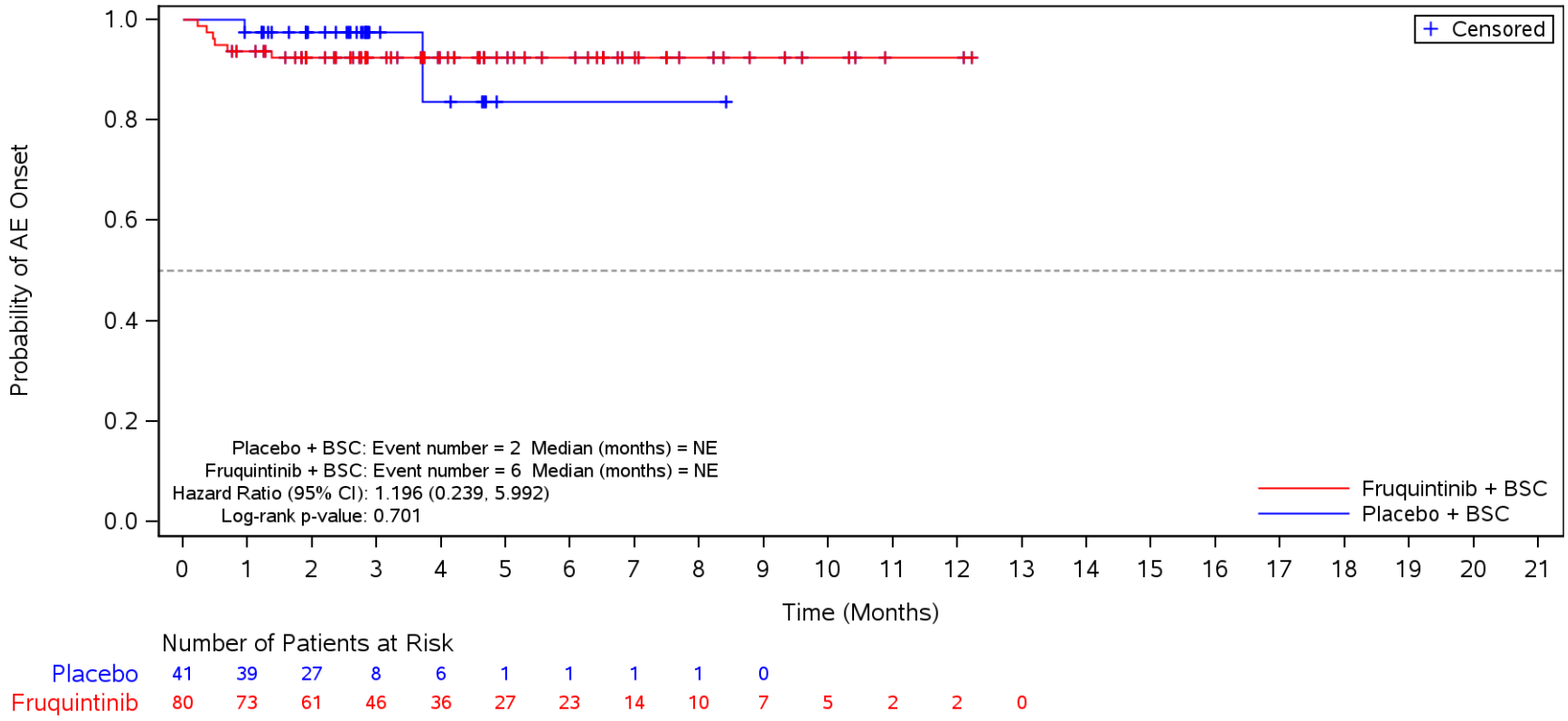
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
North America



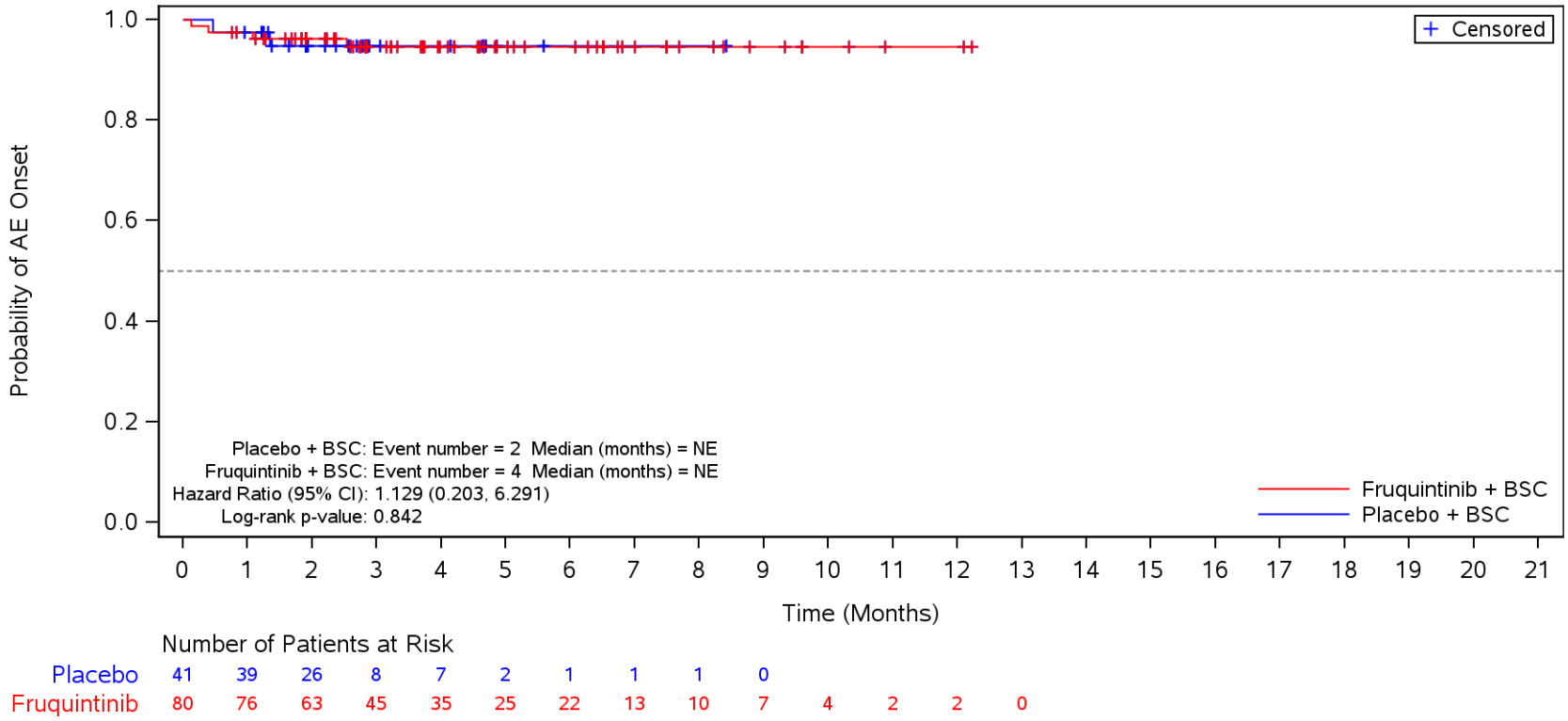
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
North America



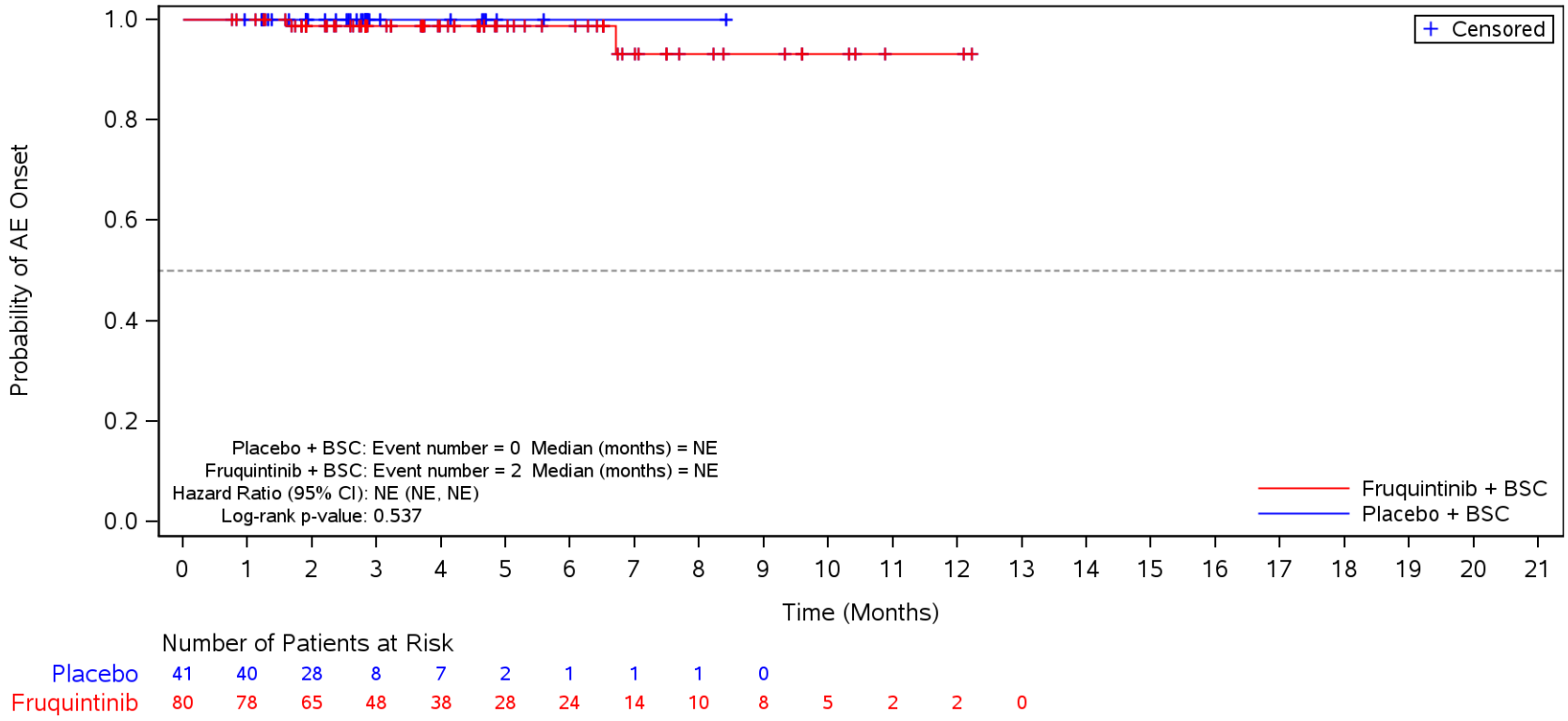
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
North America



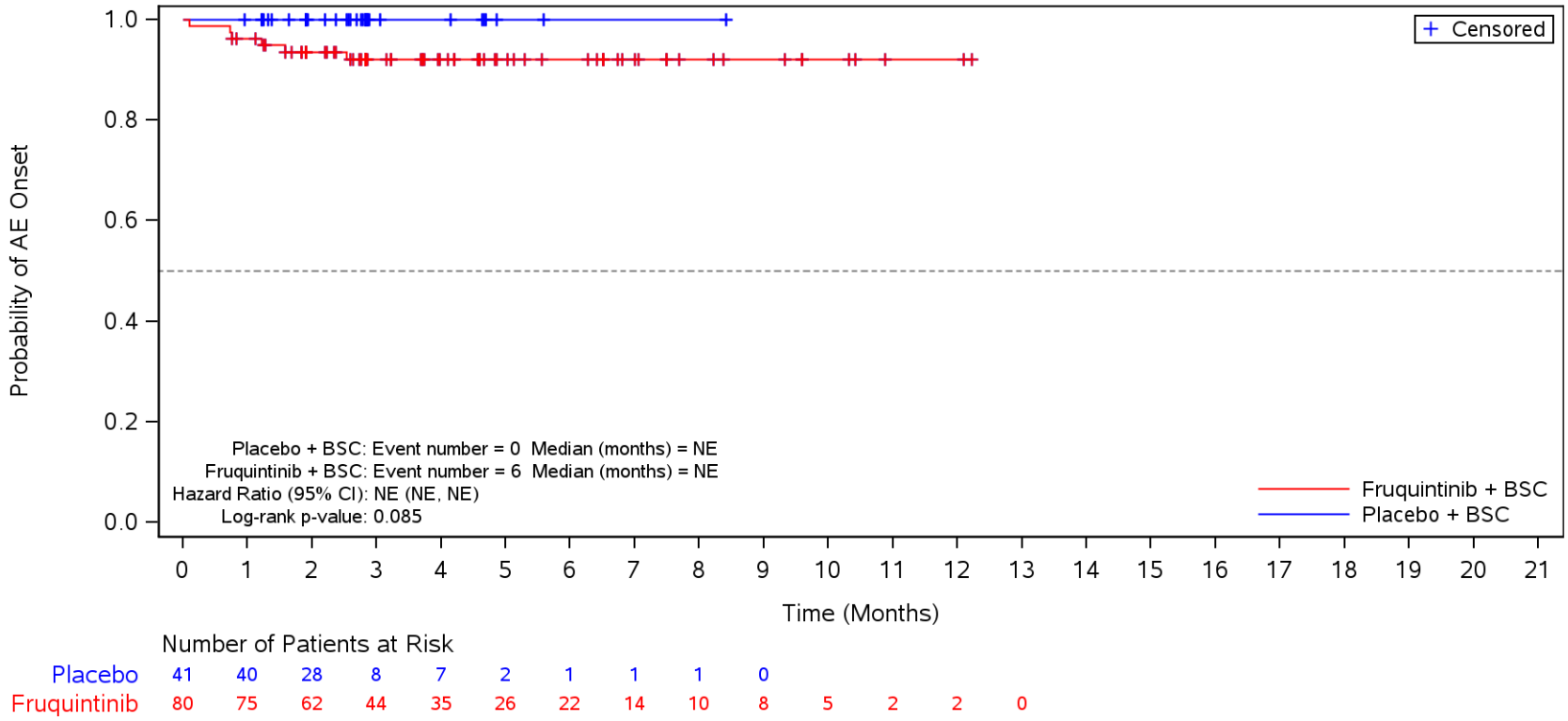
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
North America



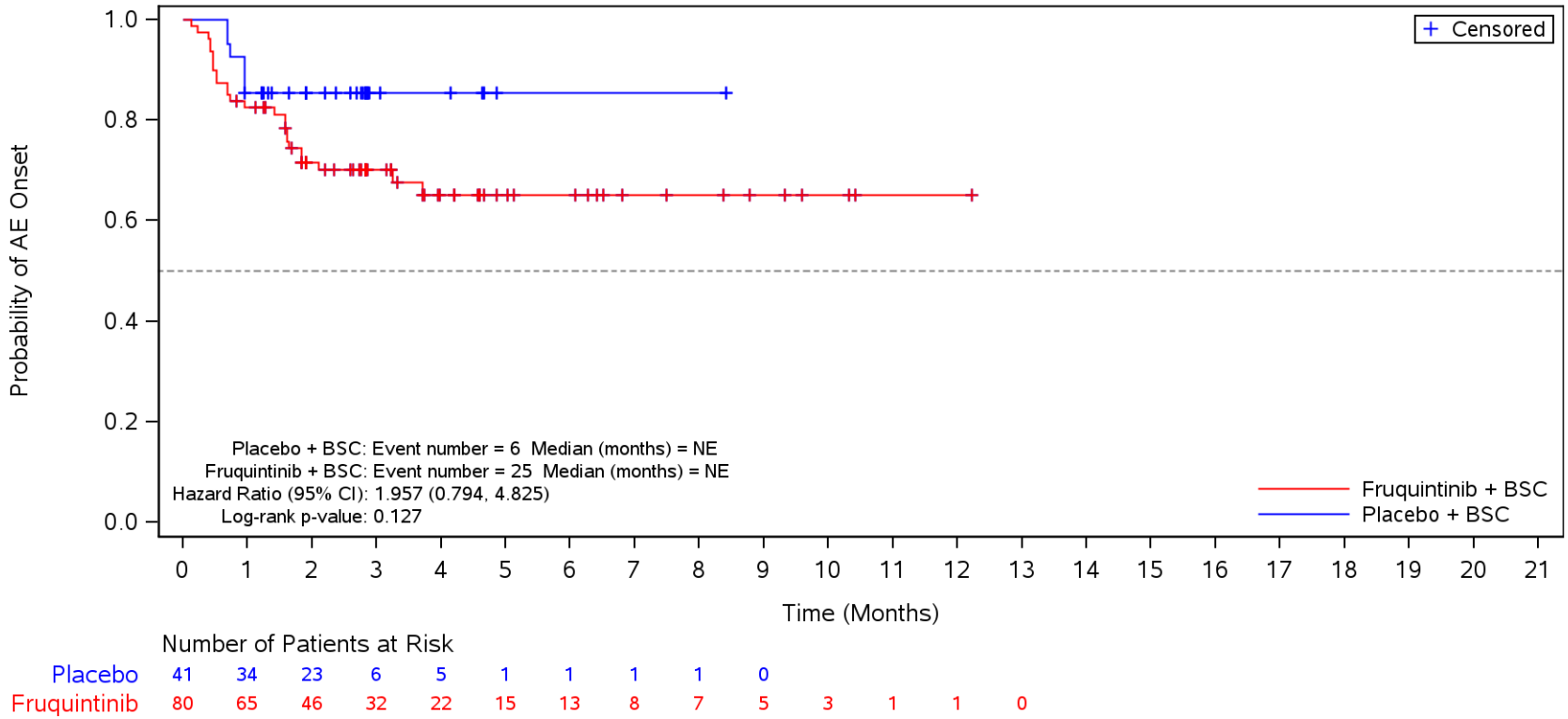
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
North America



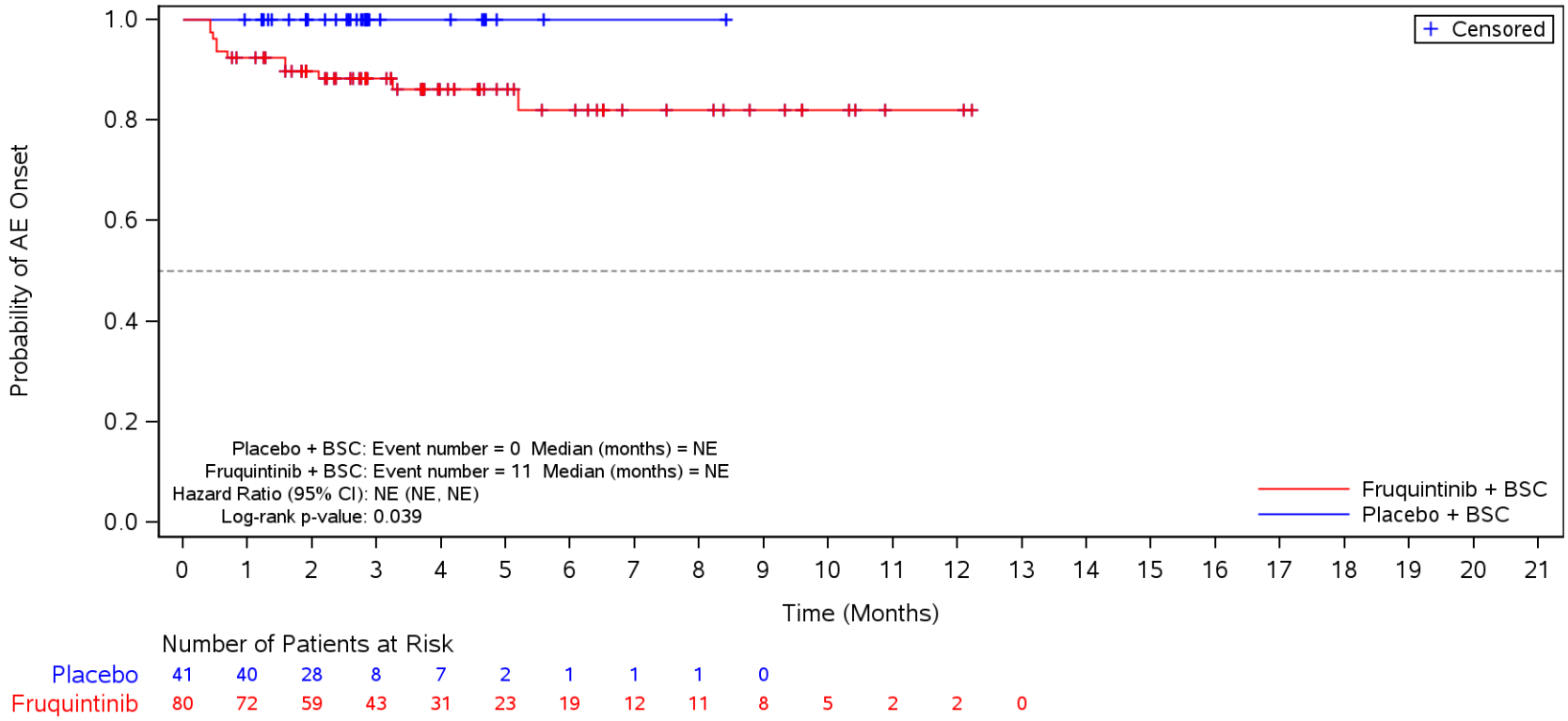
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
North America



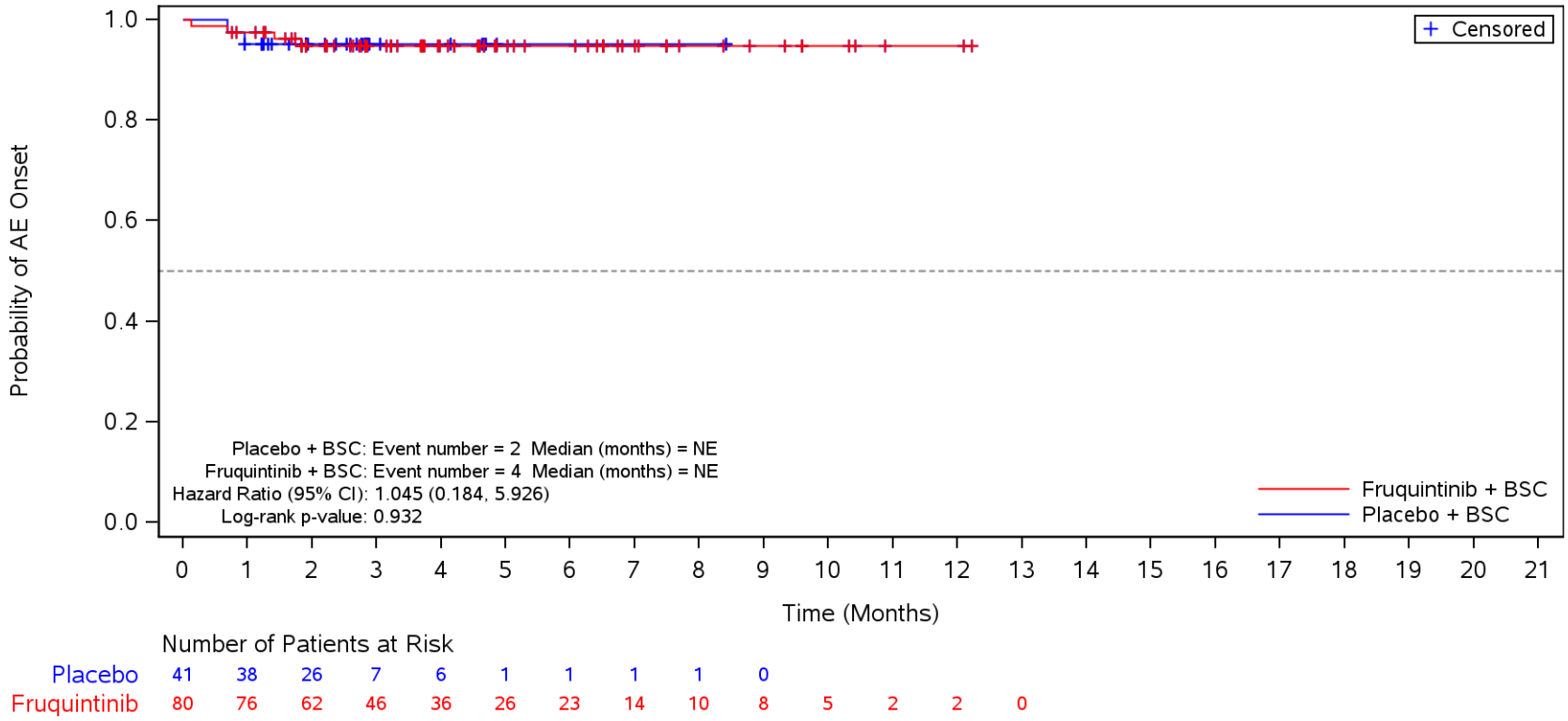
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
North America



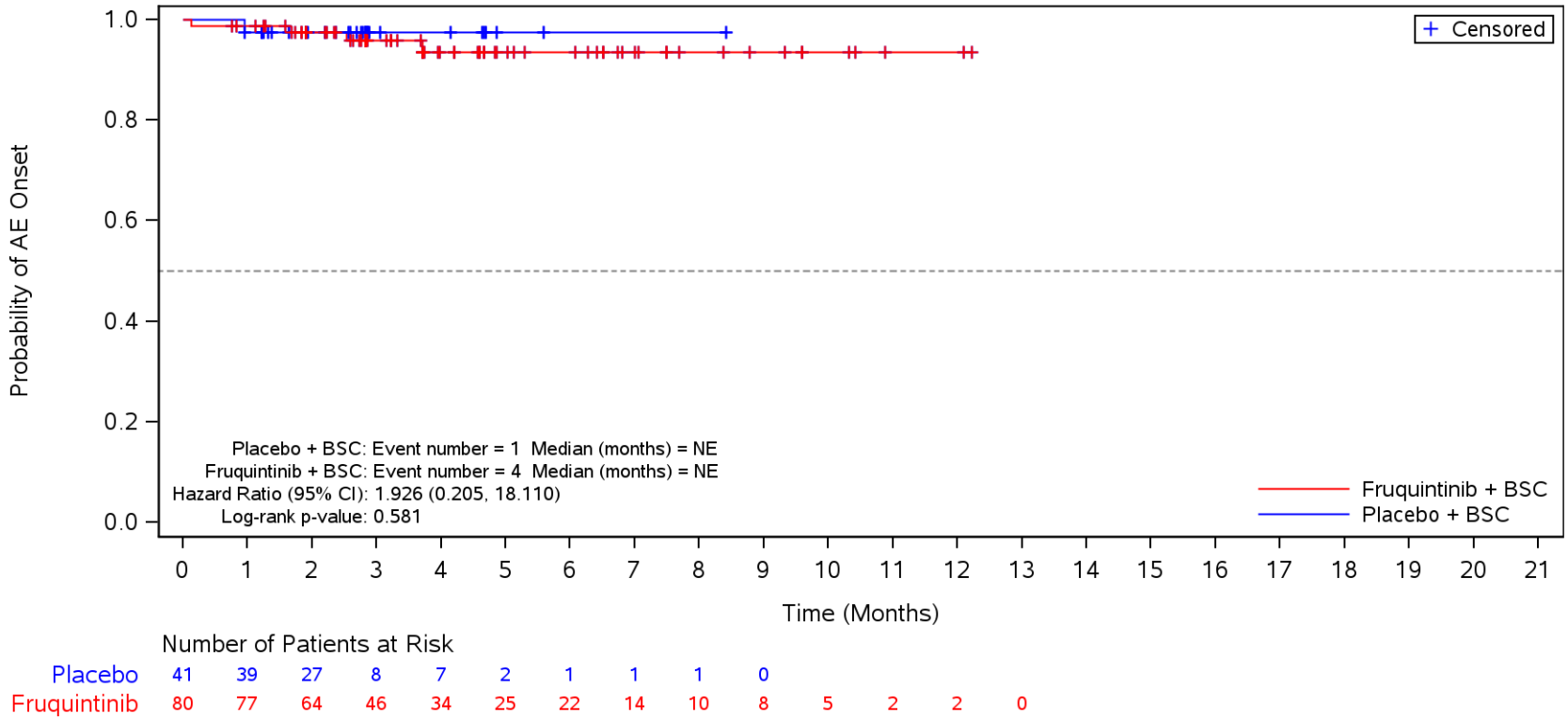
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
North America



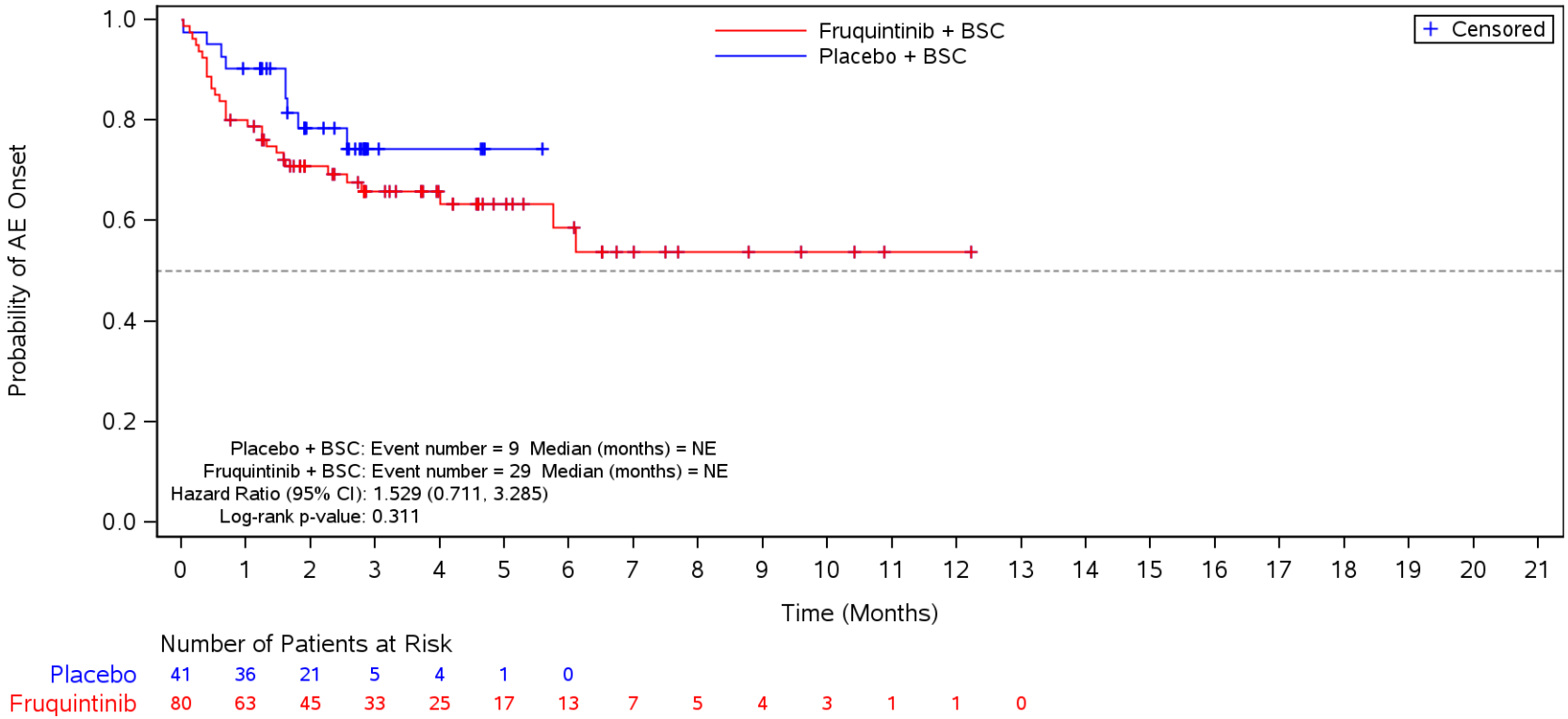
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
North America



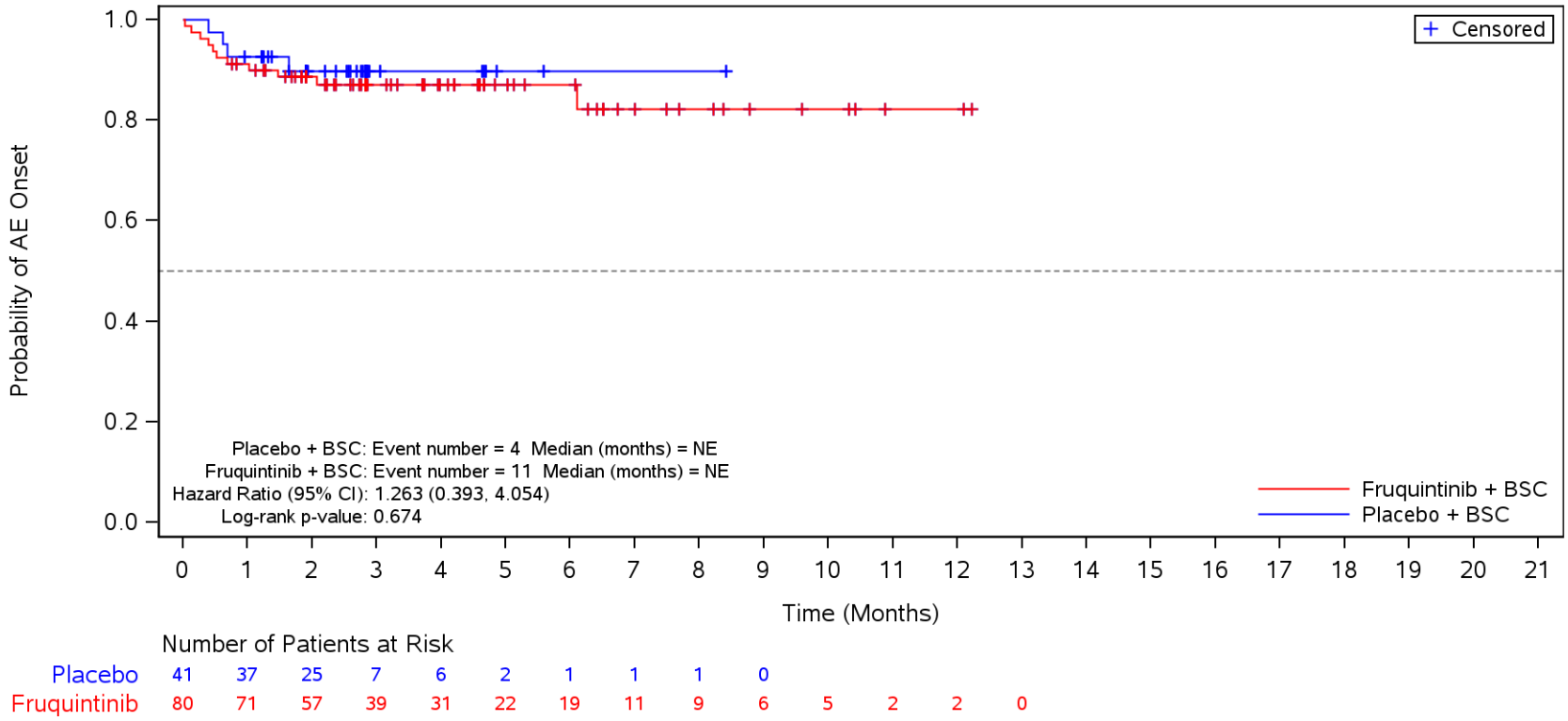
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders**
North America



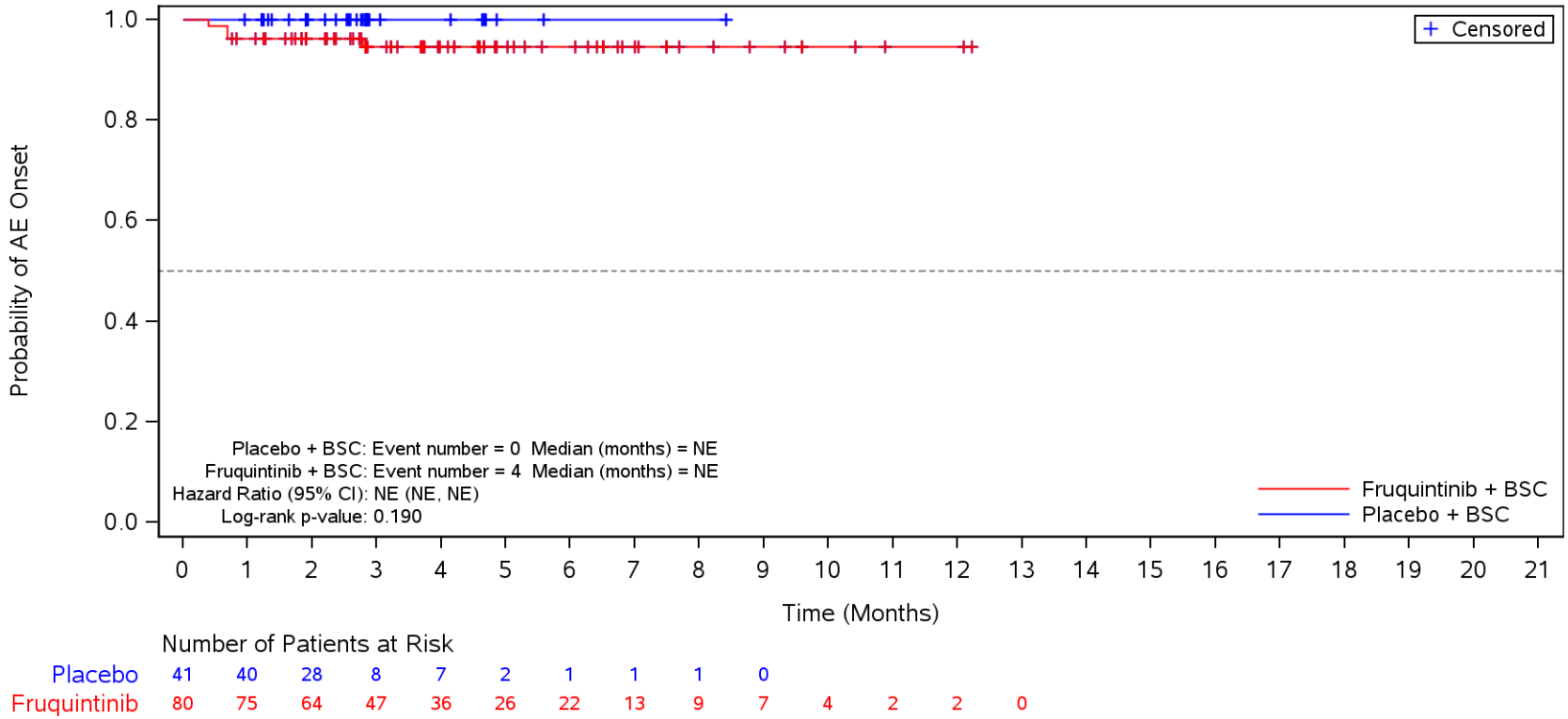
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
North America



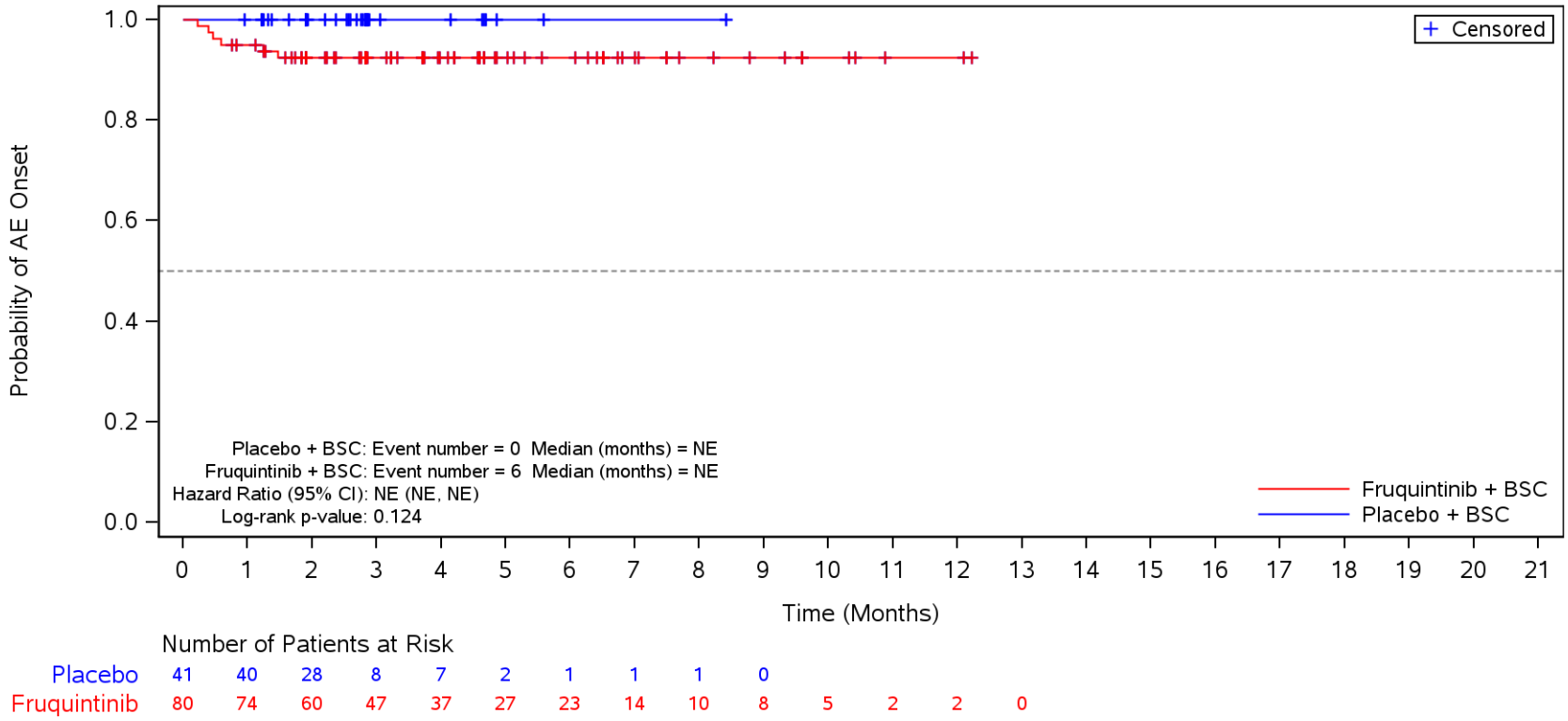
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
North America



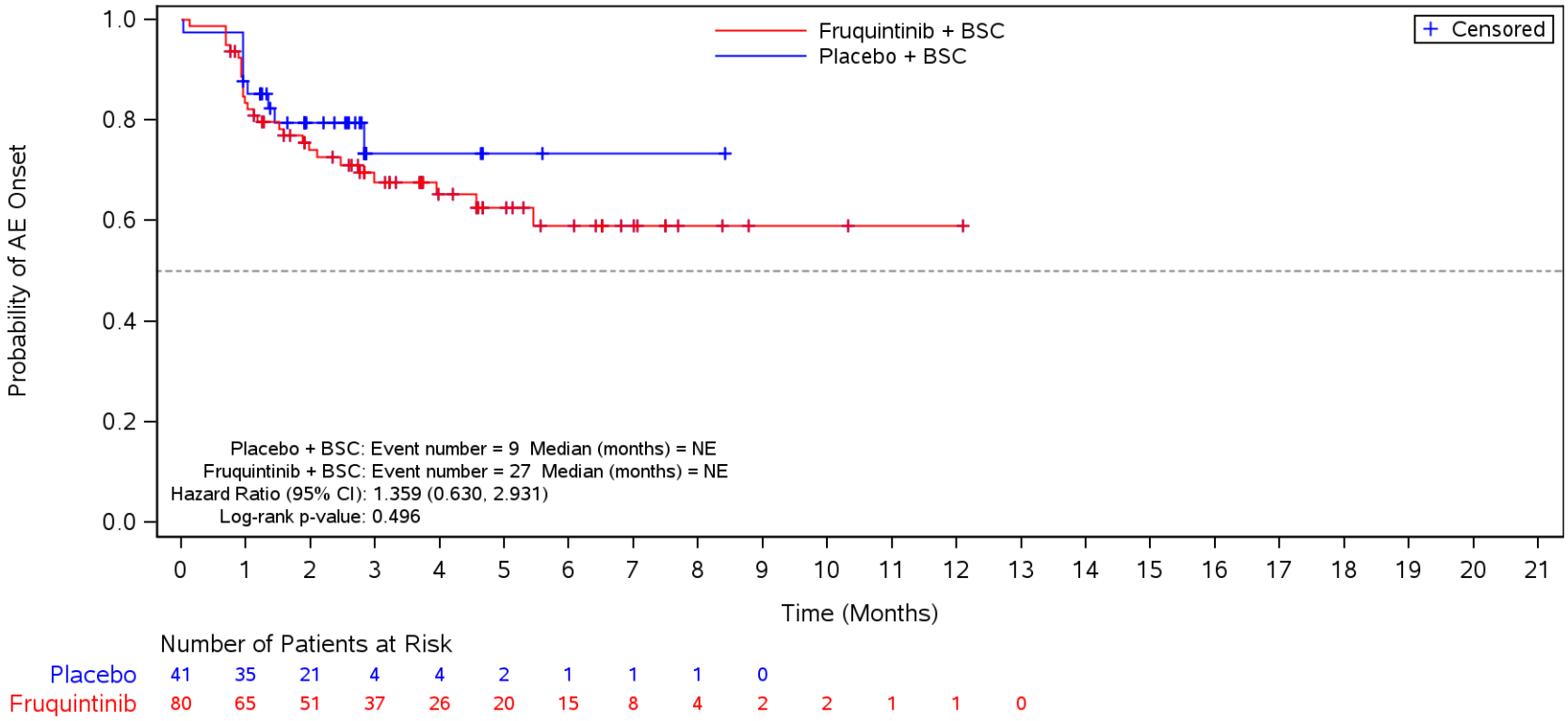
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
North America



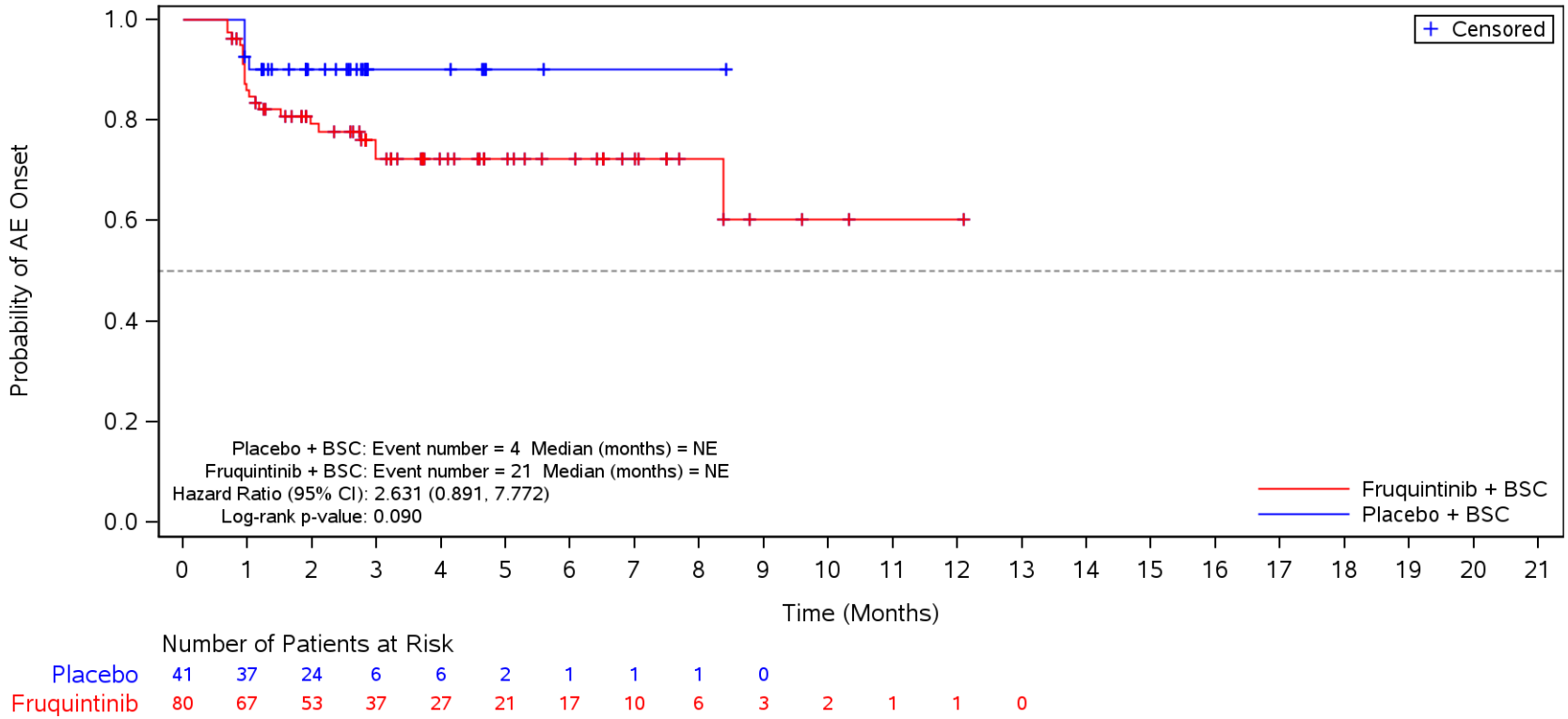
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
North America



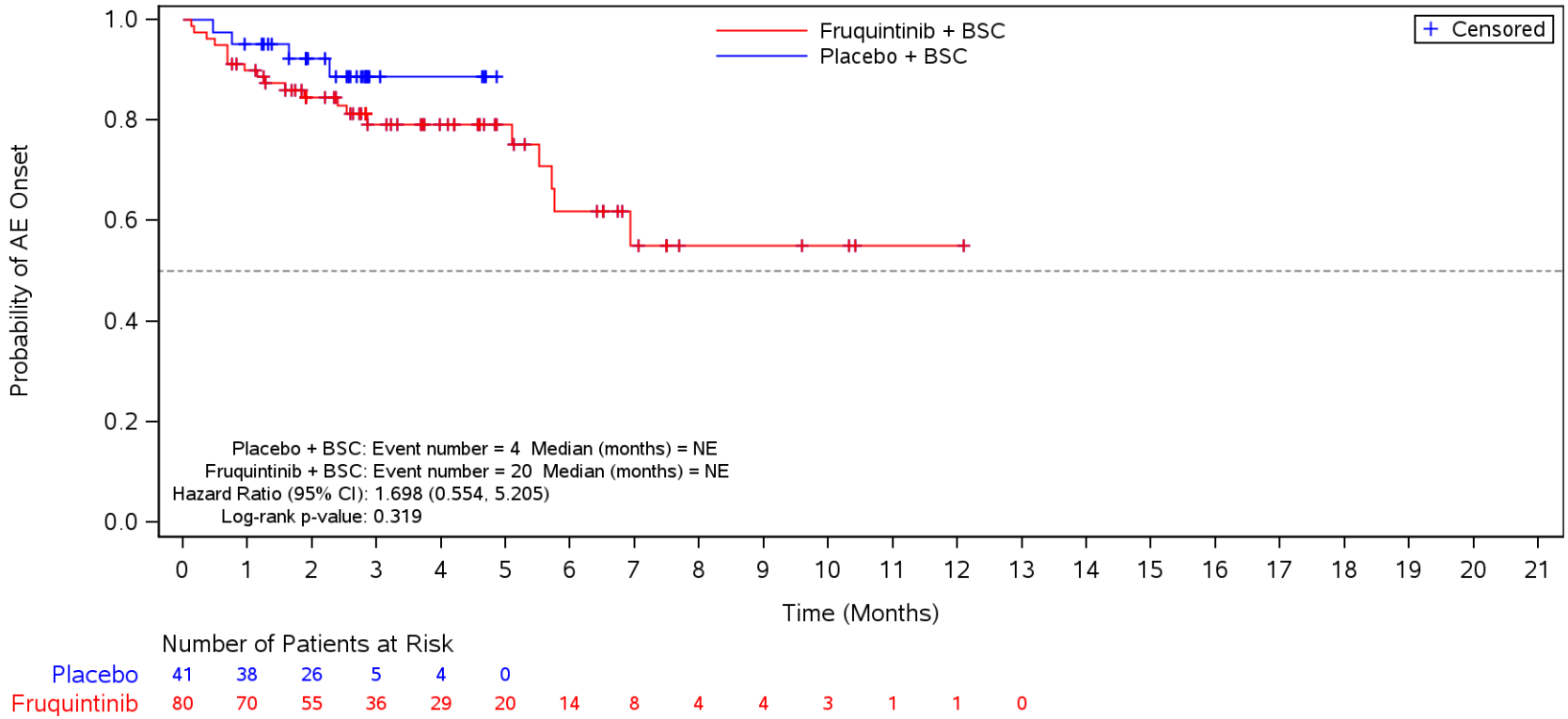
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
North America



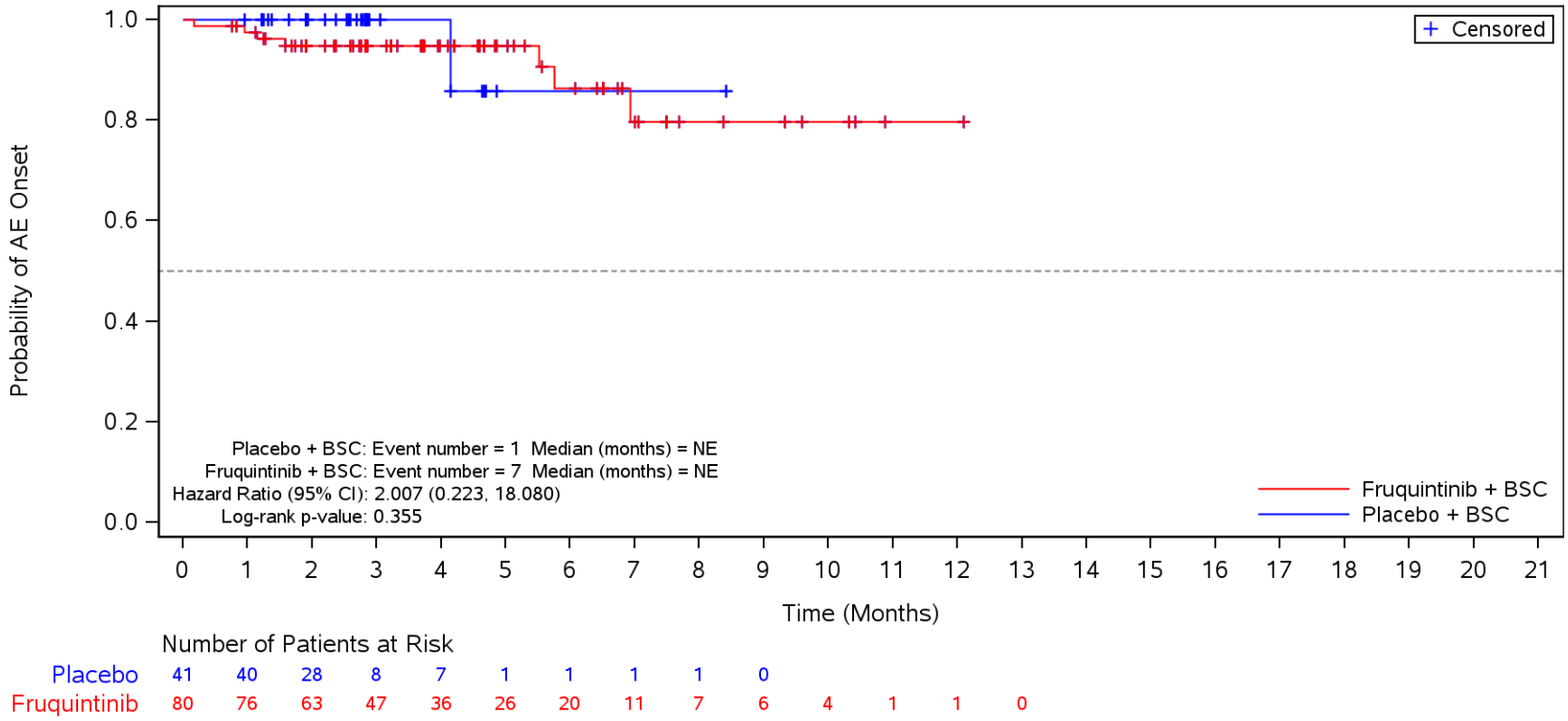
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations**
North America



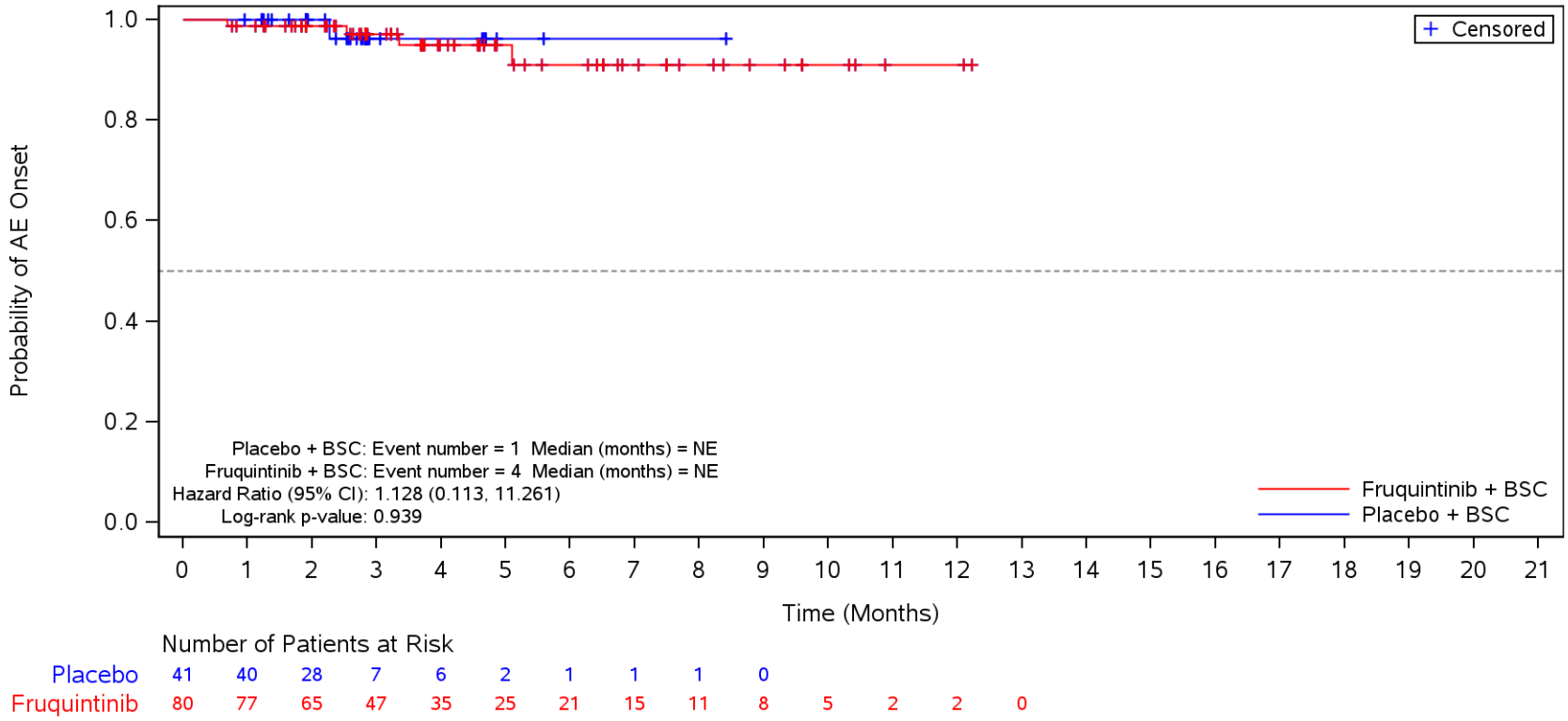
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
North America



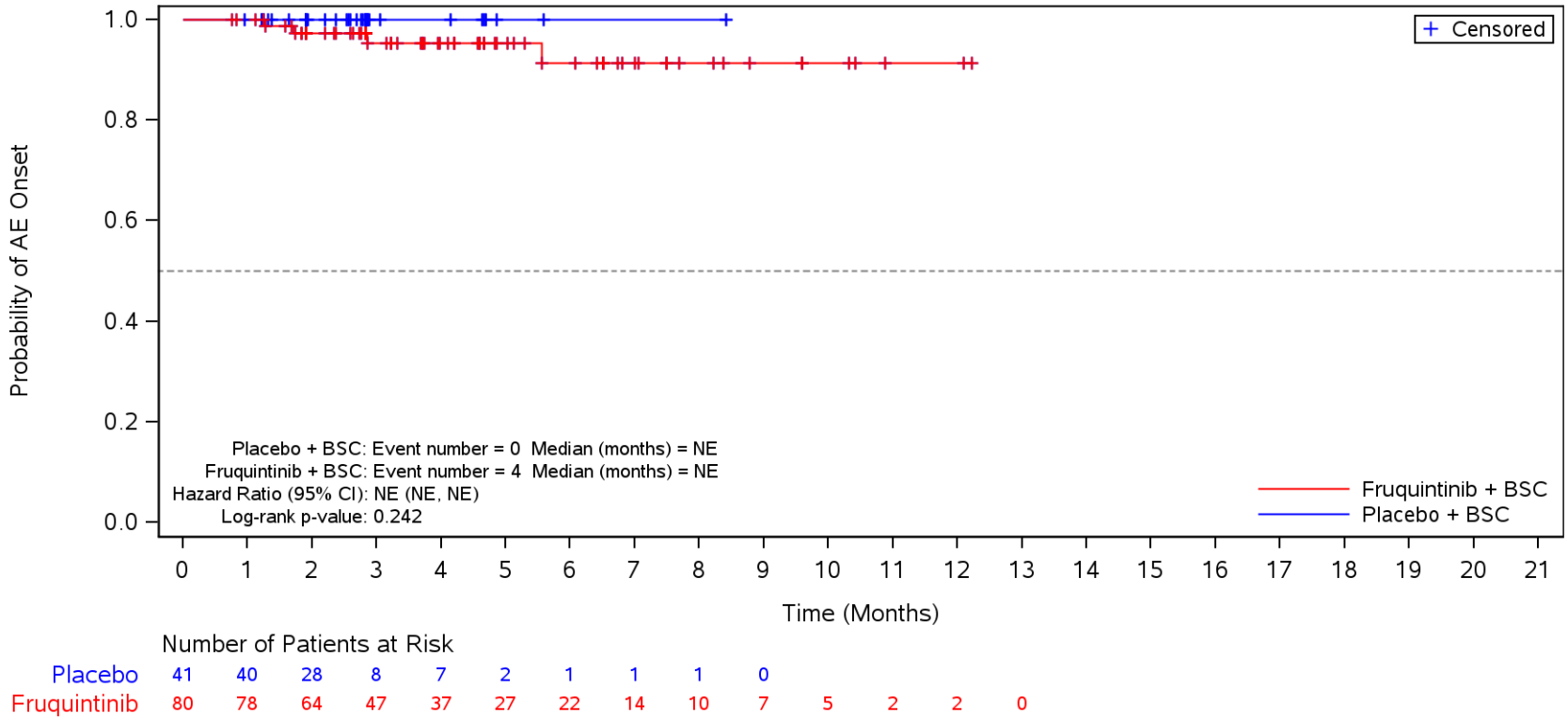
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**
North America



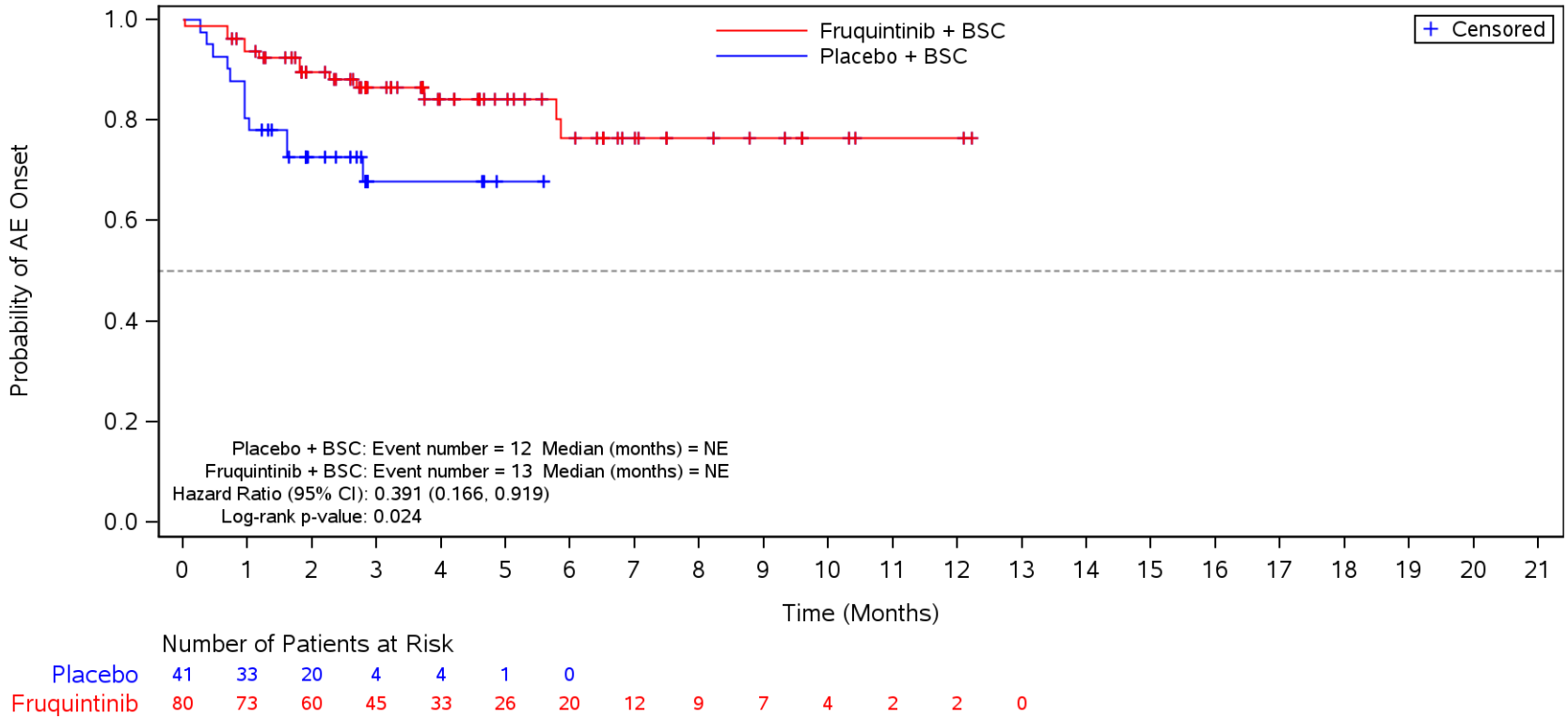
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**
North America



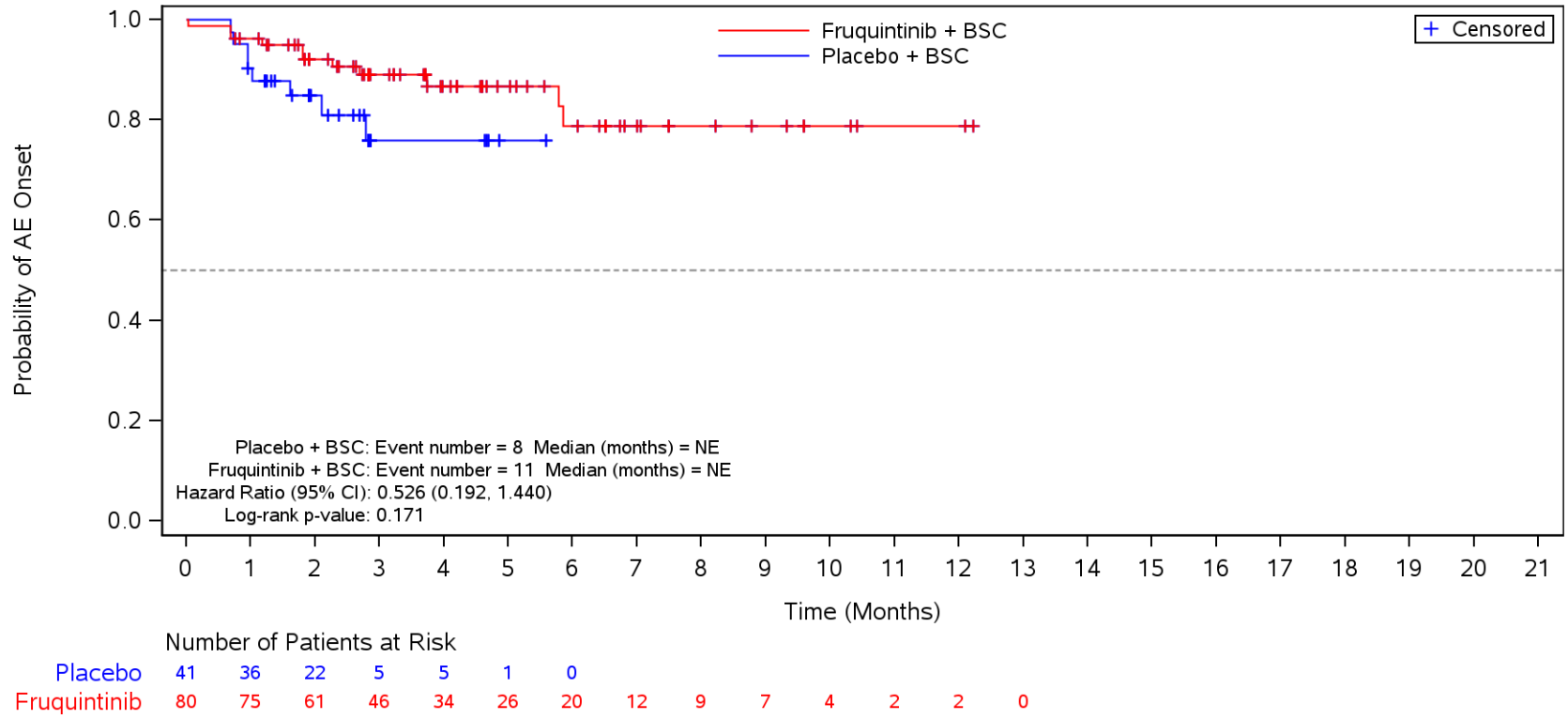
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
North America



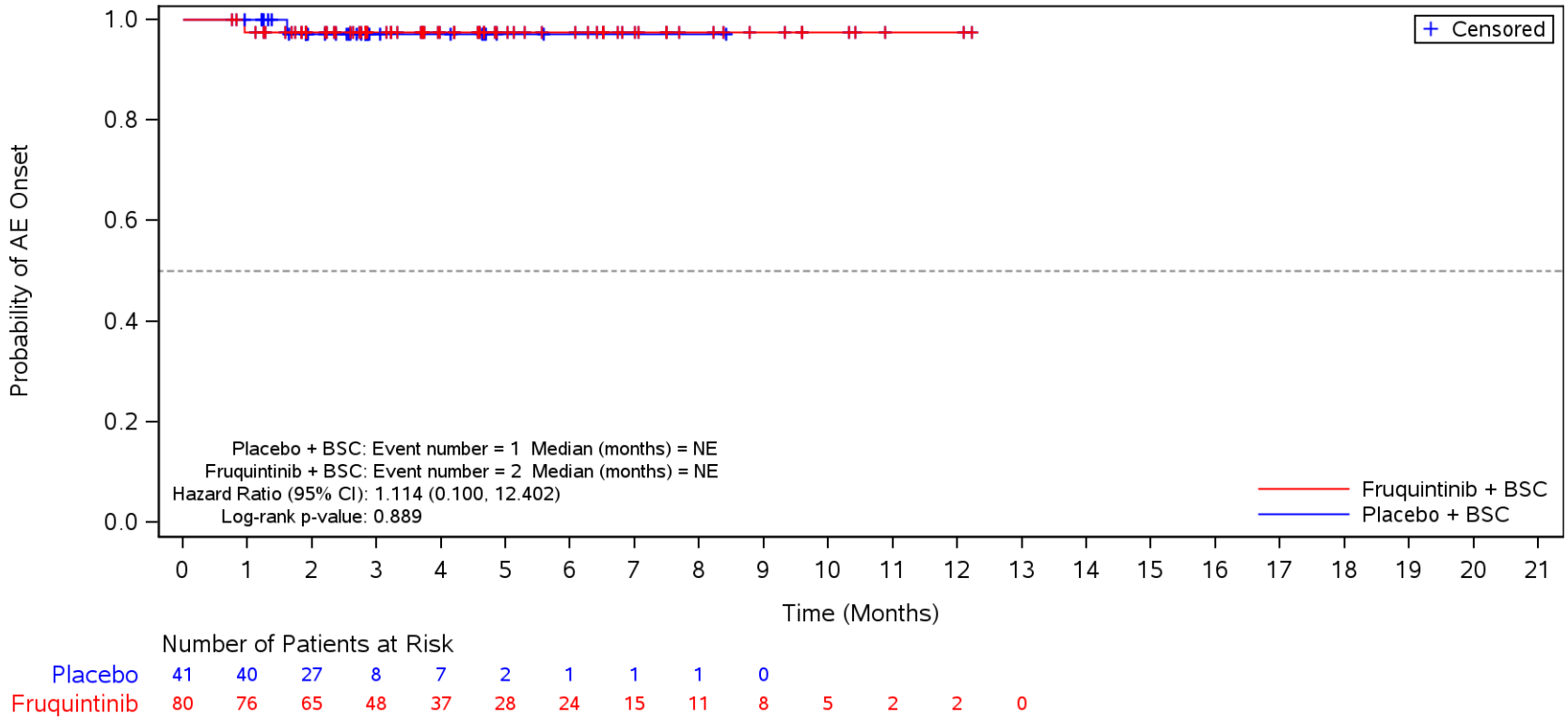
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
North America



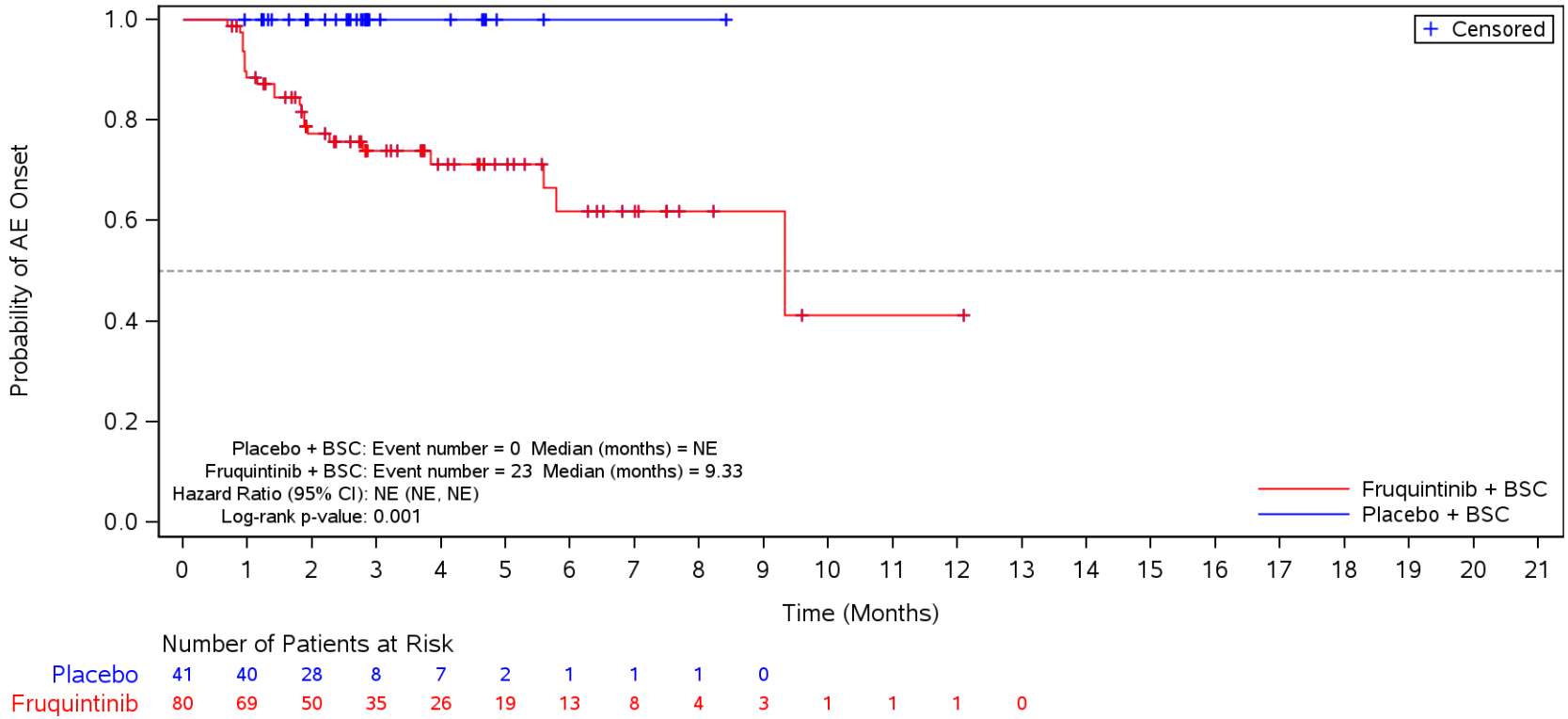
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
North America



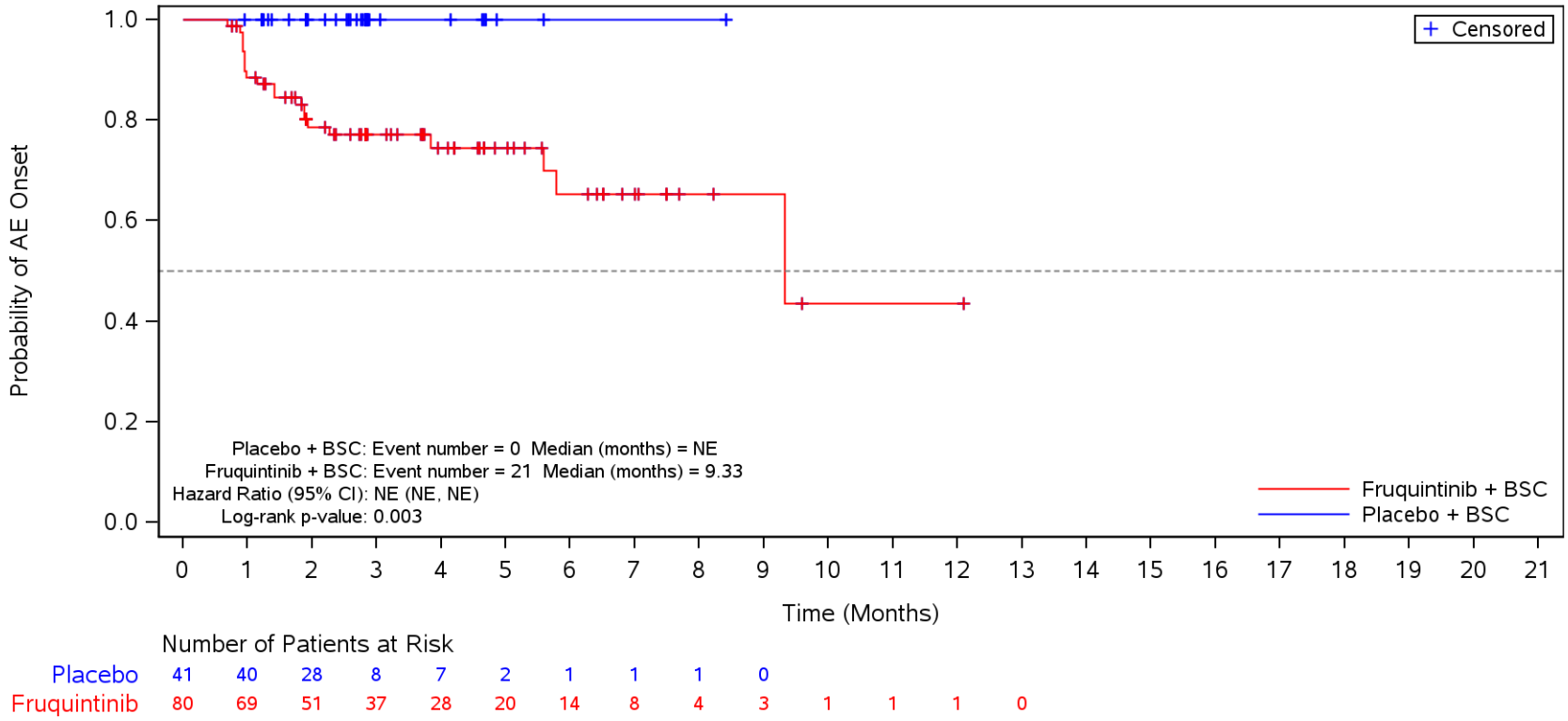
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Endocrine disorders**
North America



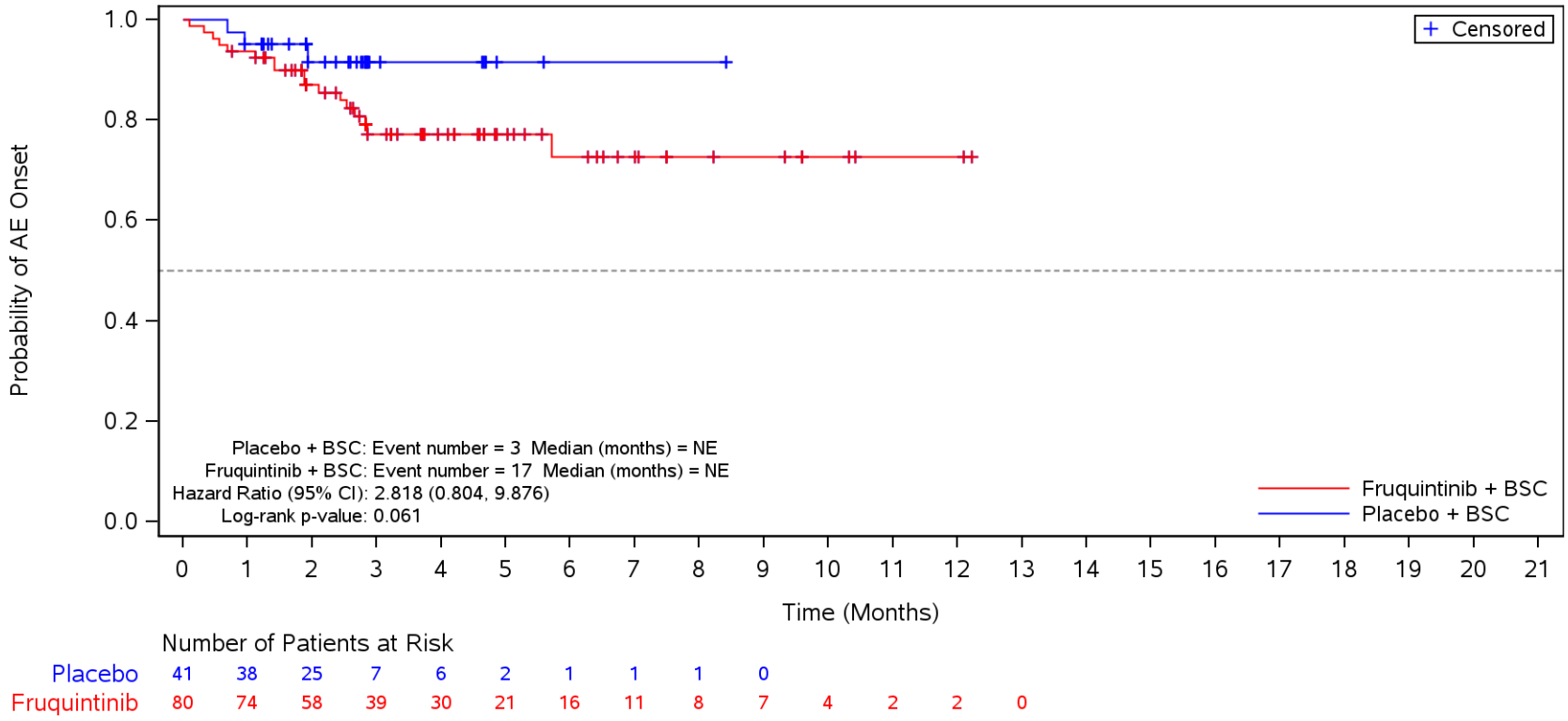
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
North America



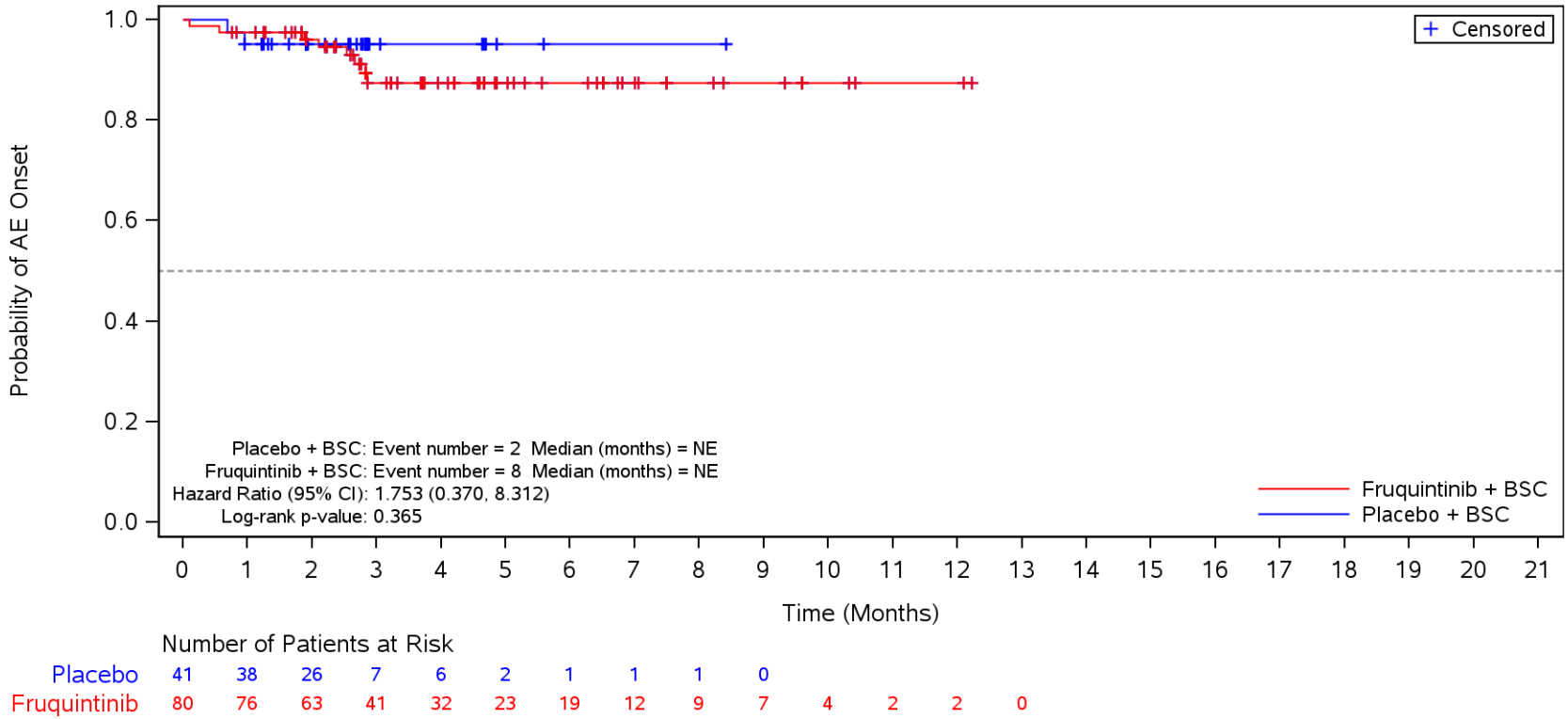
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders**
North America



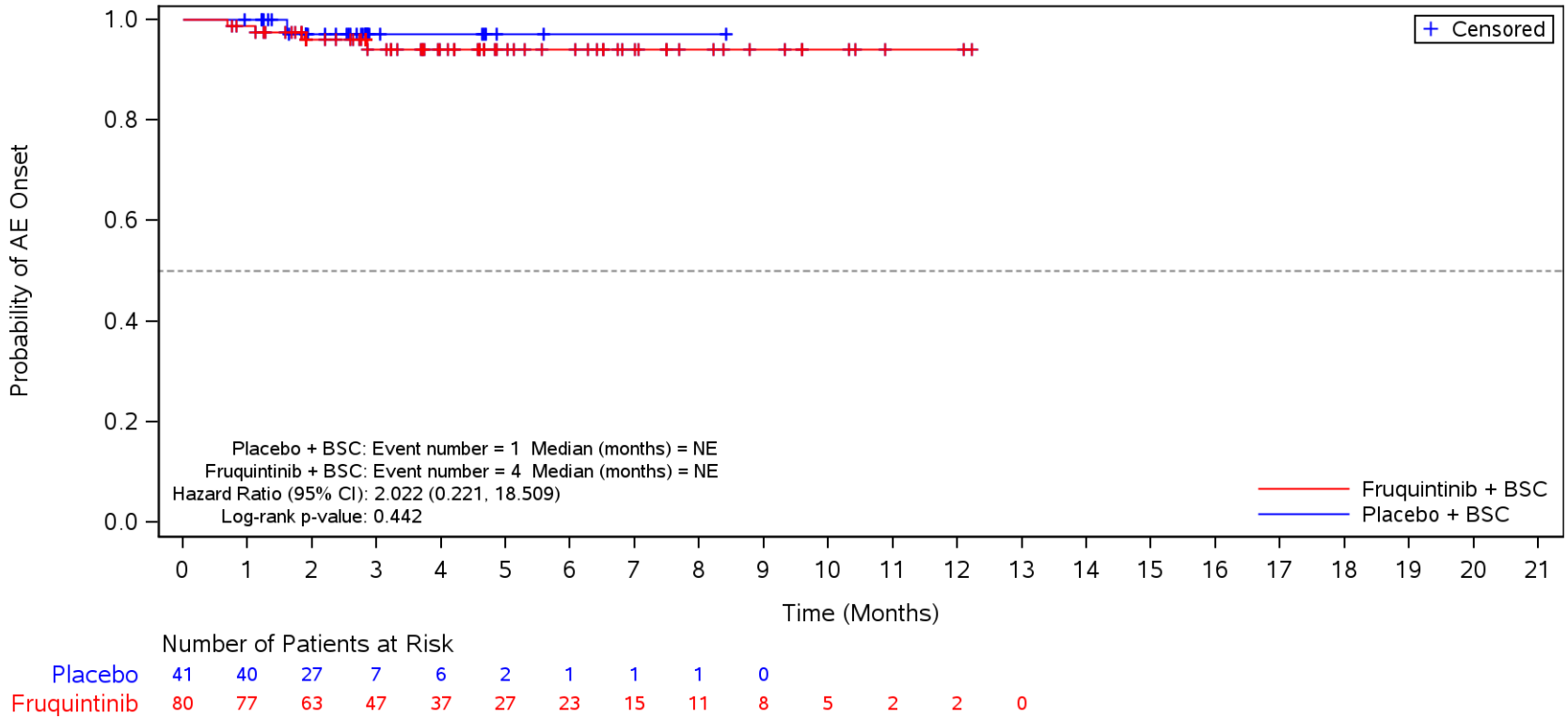
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
North America



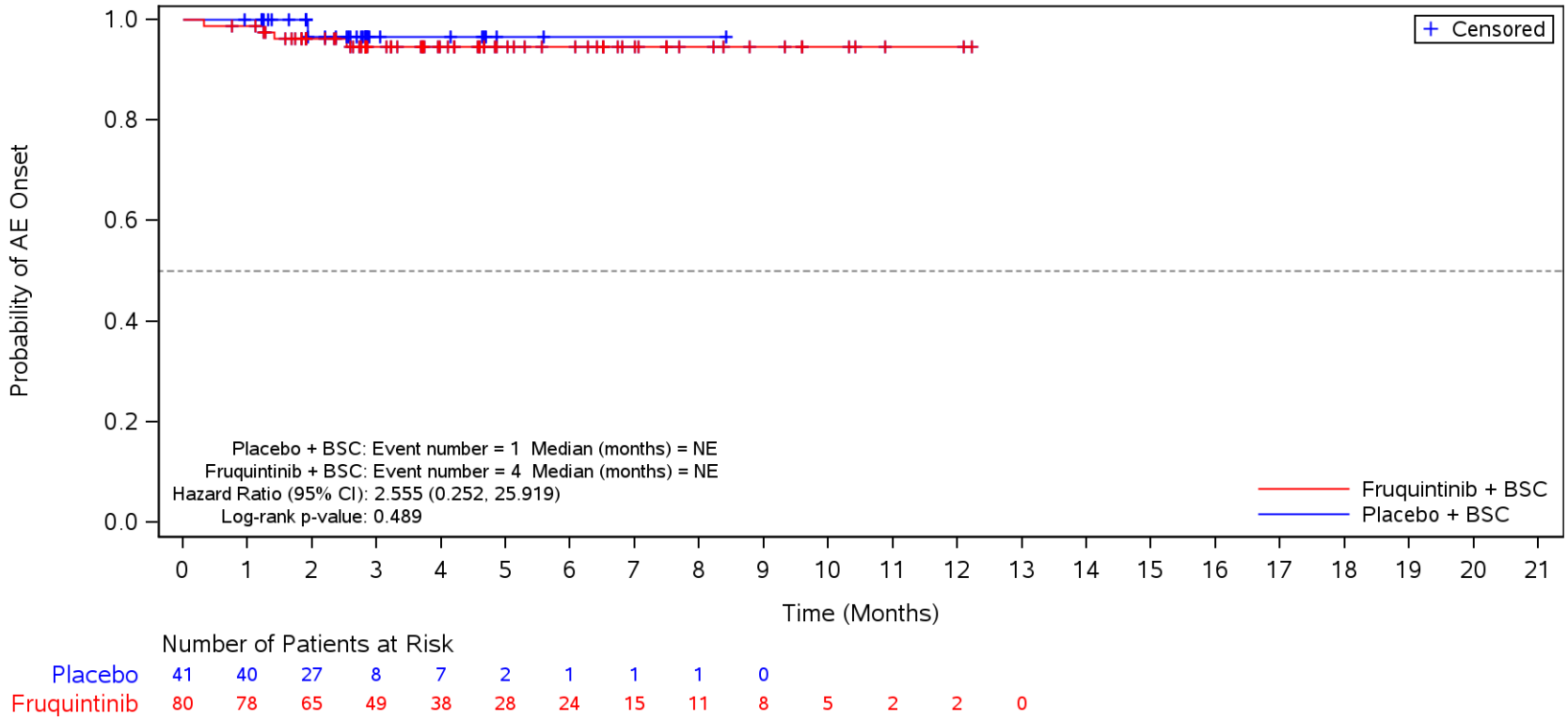
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**
North America



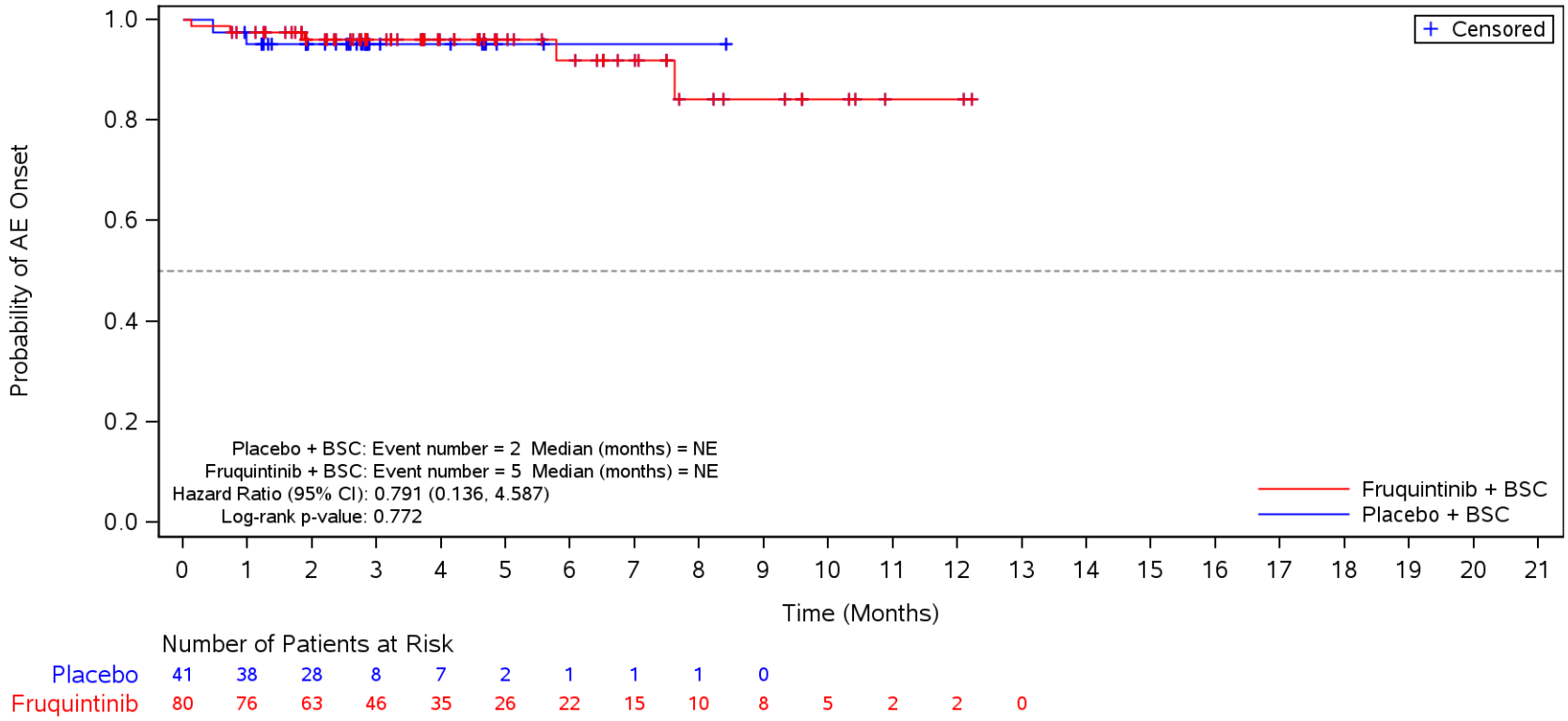
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
North America



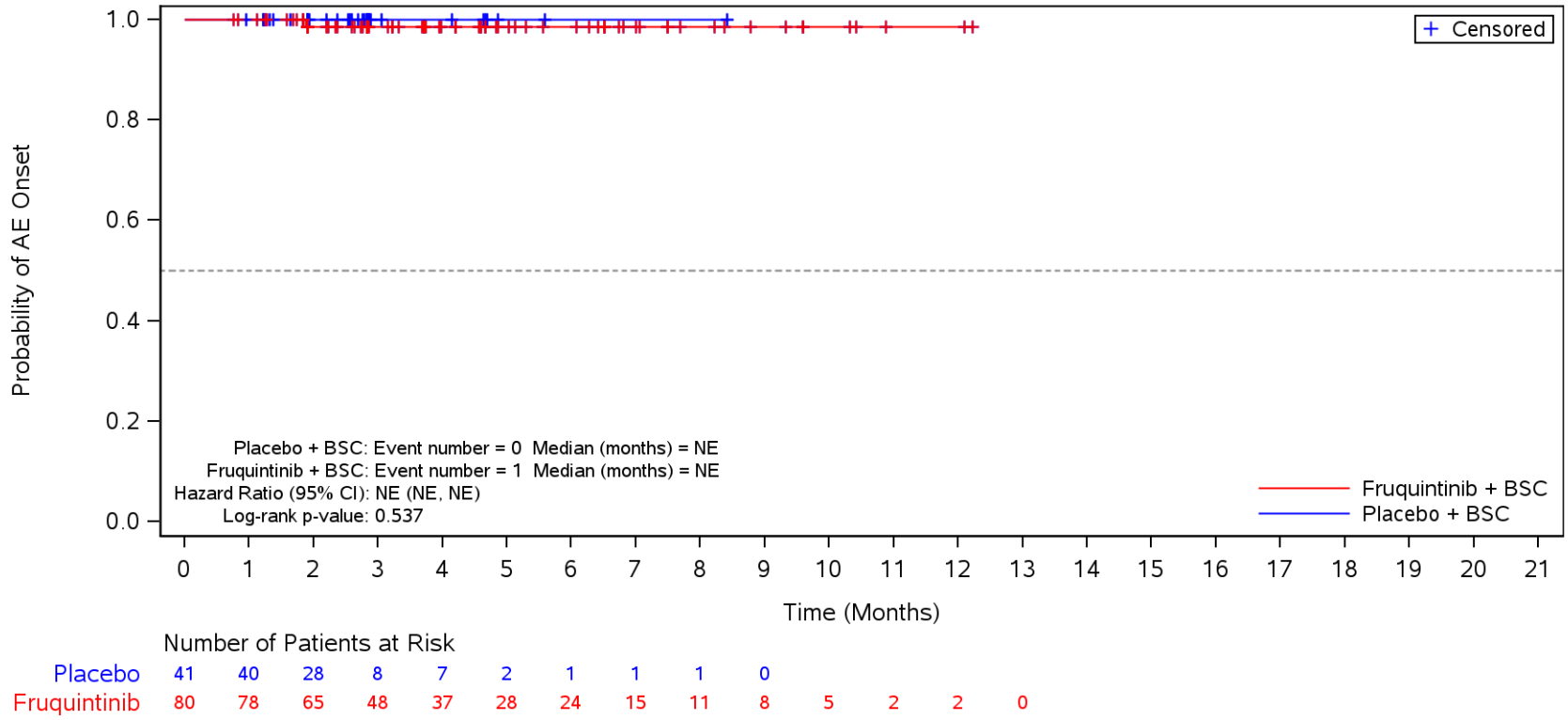
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**
North America



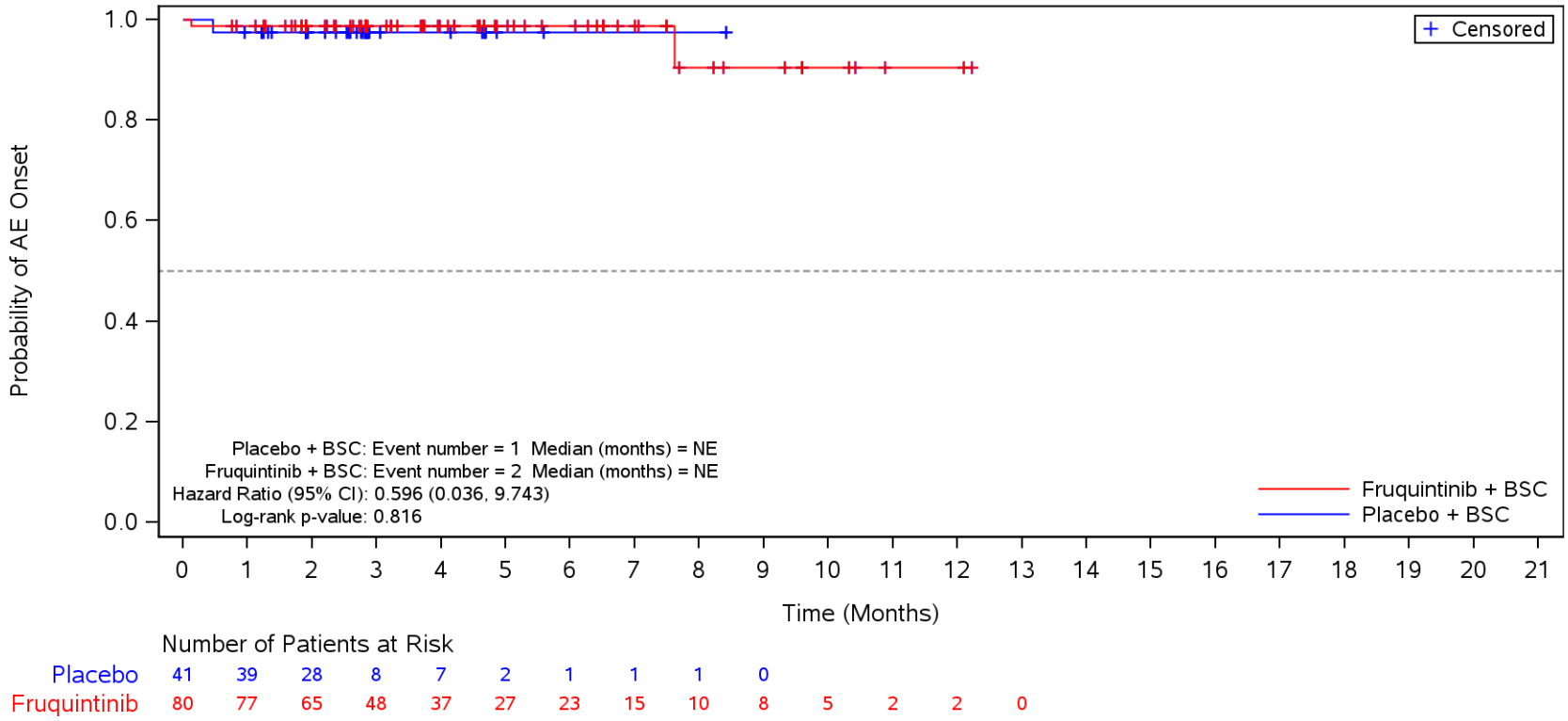
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hypertransaminasaemia**
North America



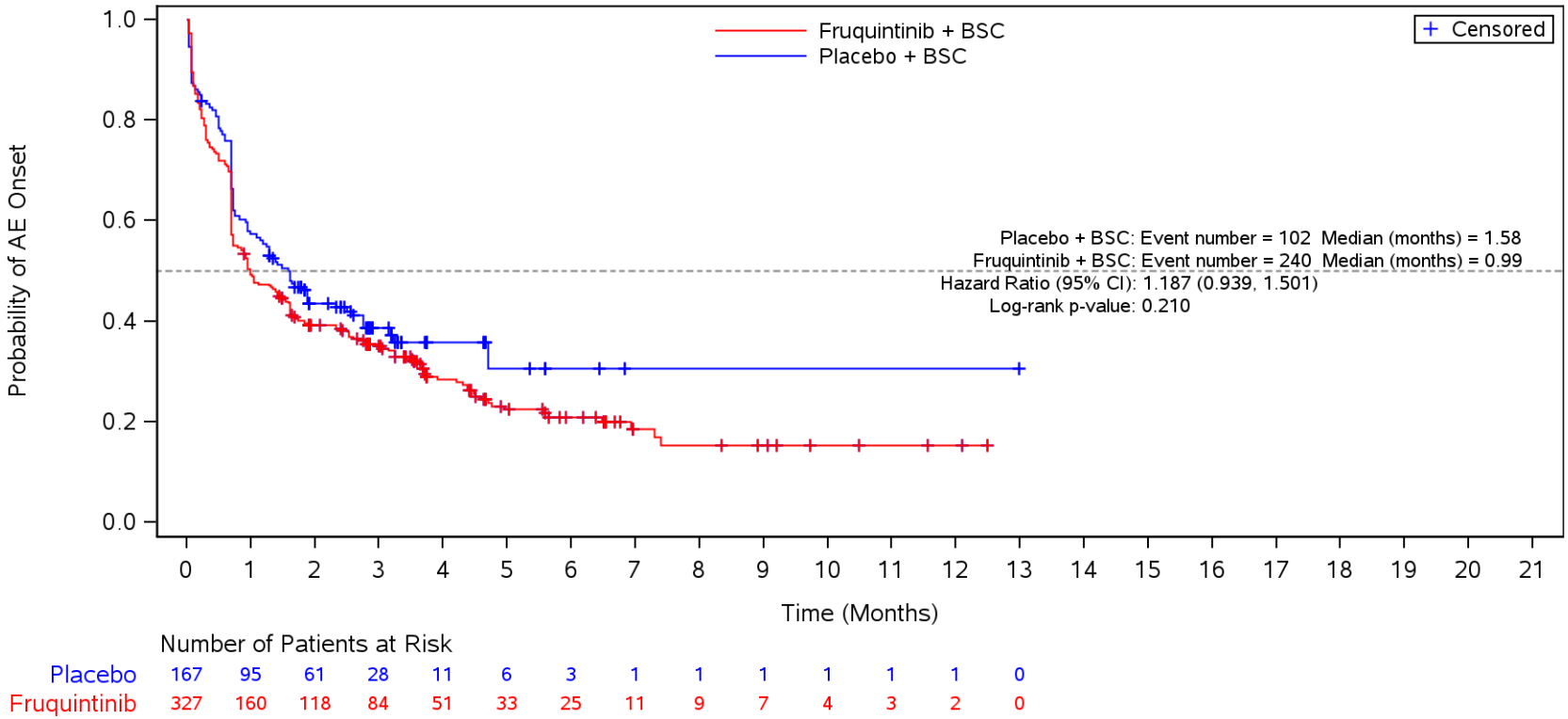
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hyperbilirubinaemia**
North America



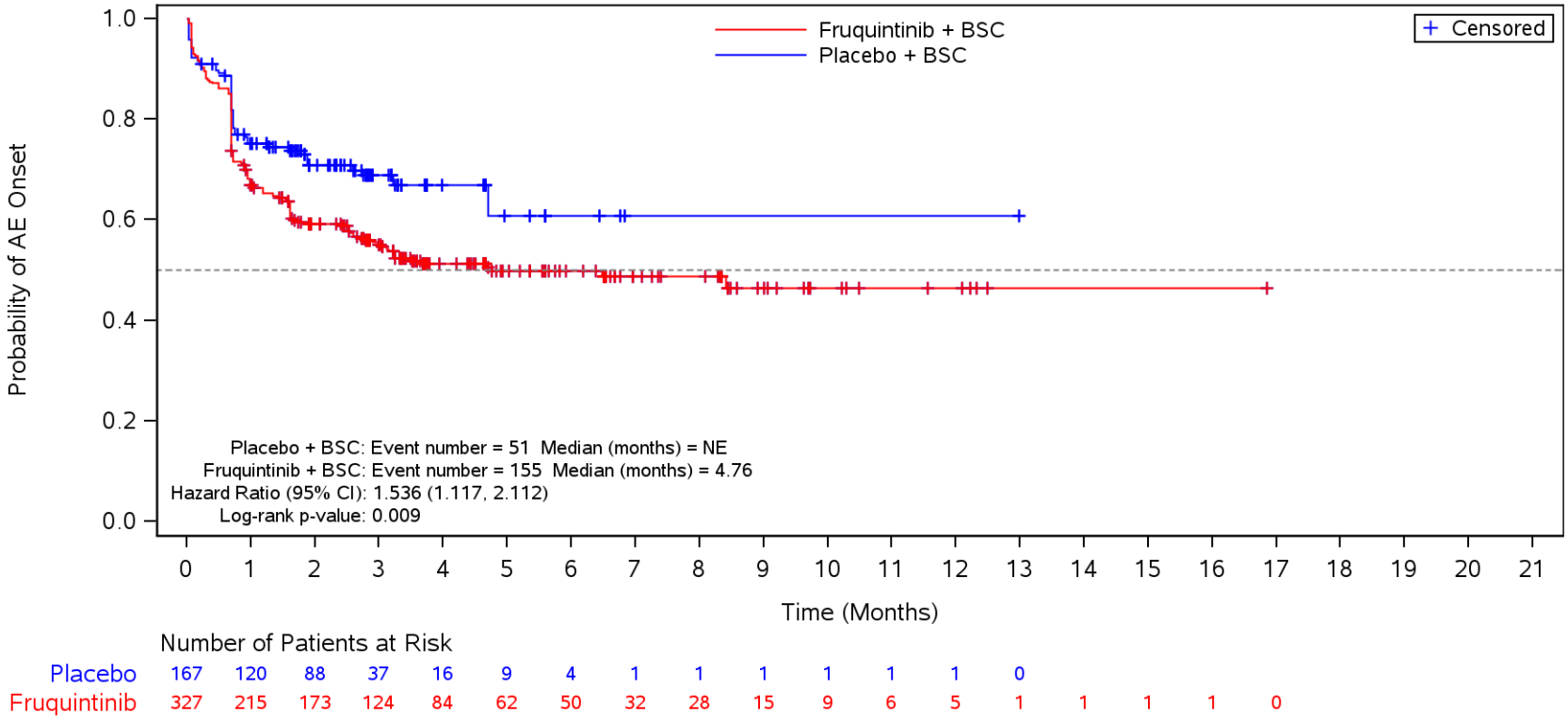
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
Europe



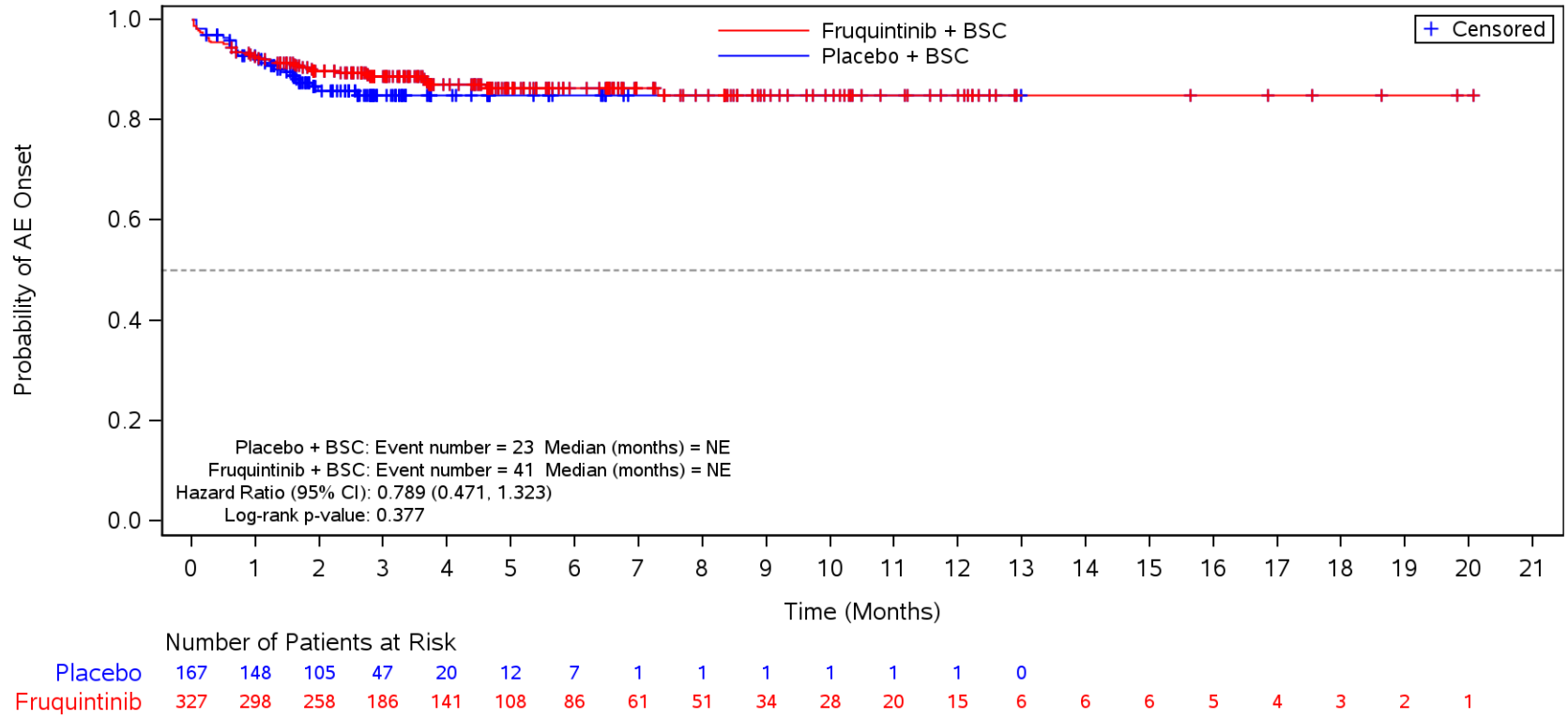
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
Europe



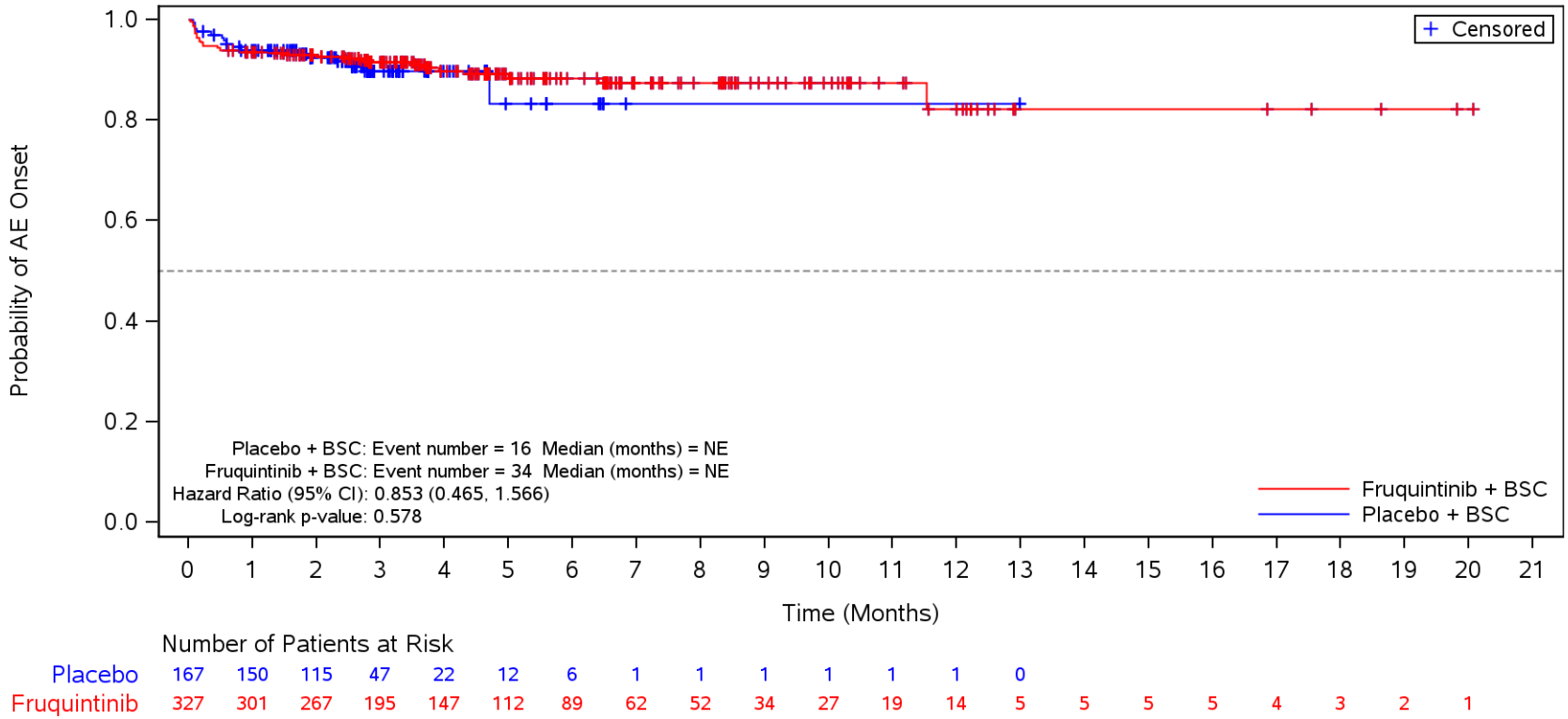
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
Europe



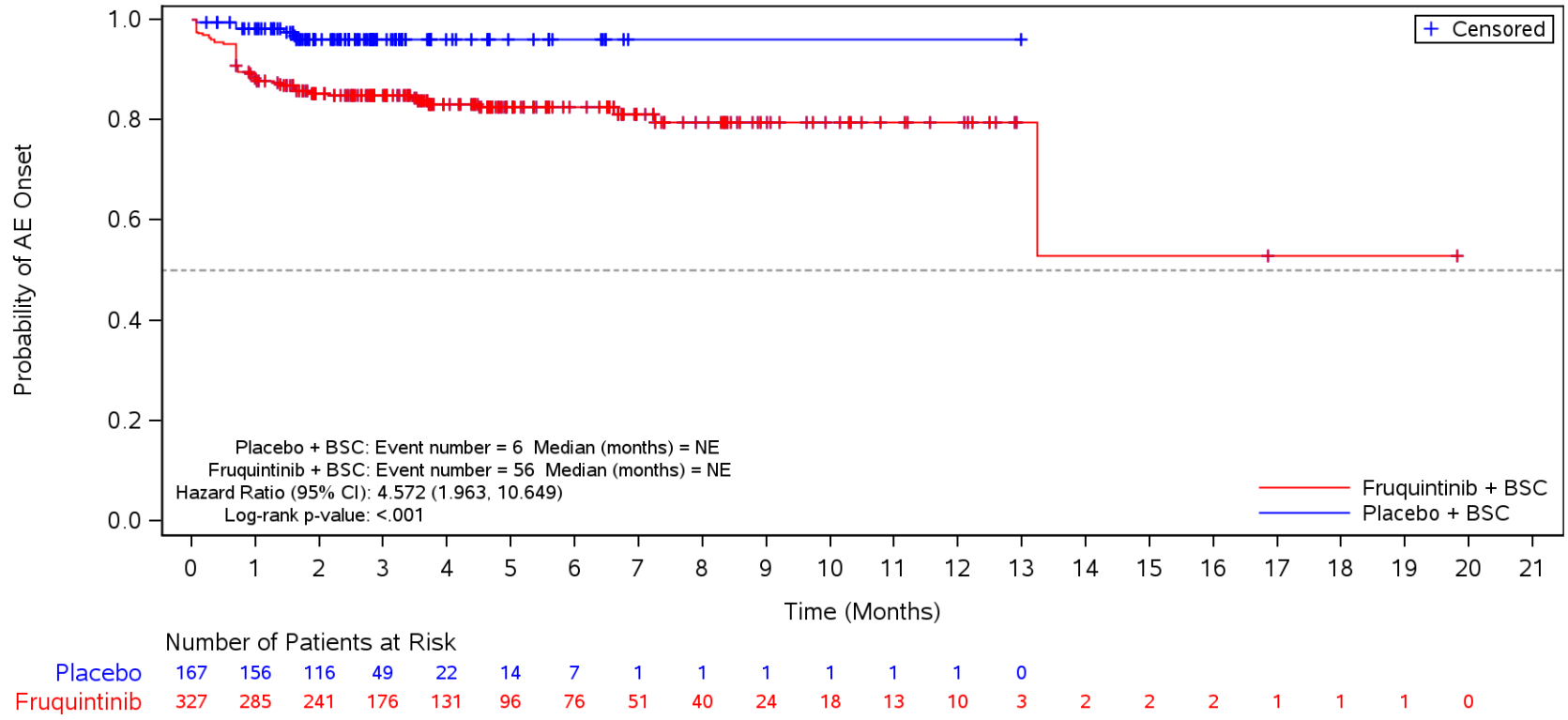
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
Europe



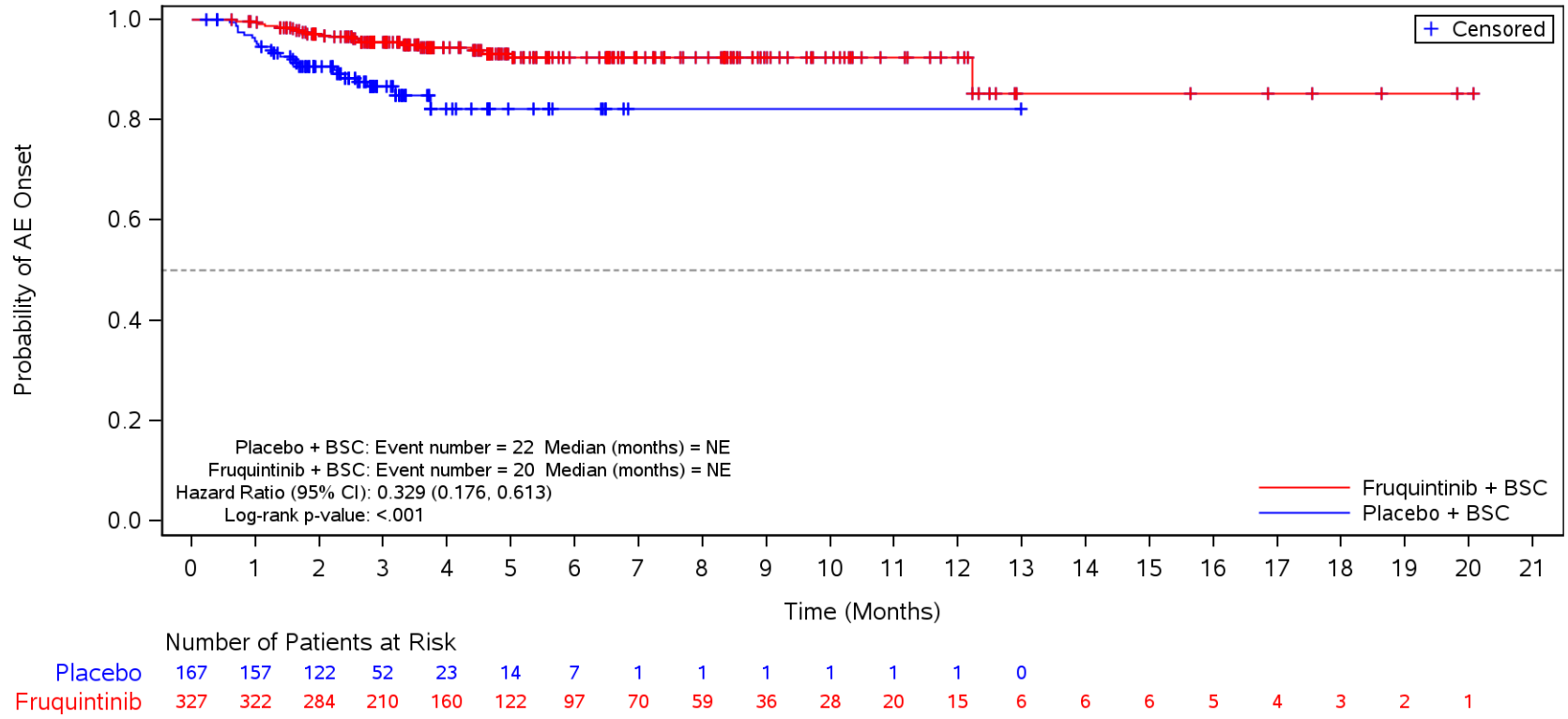
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
Europe



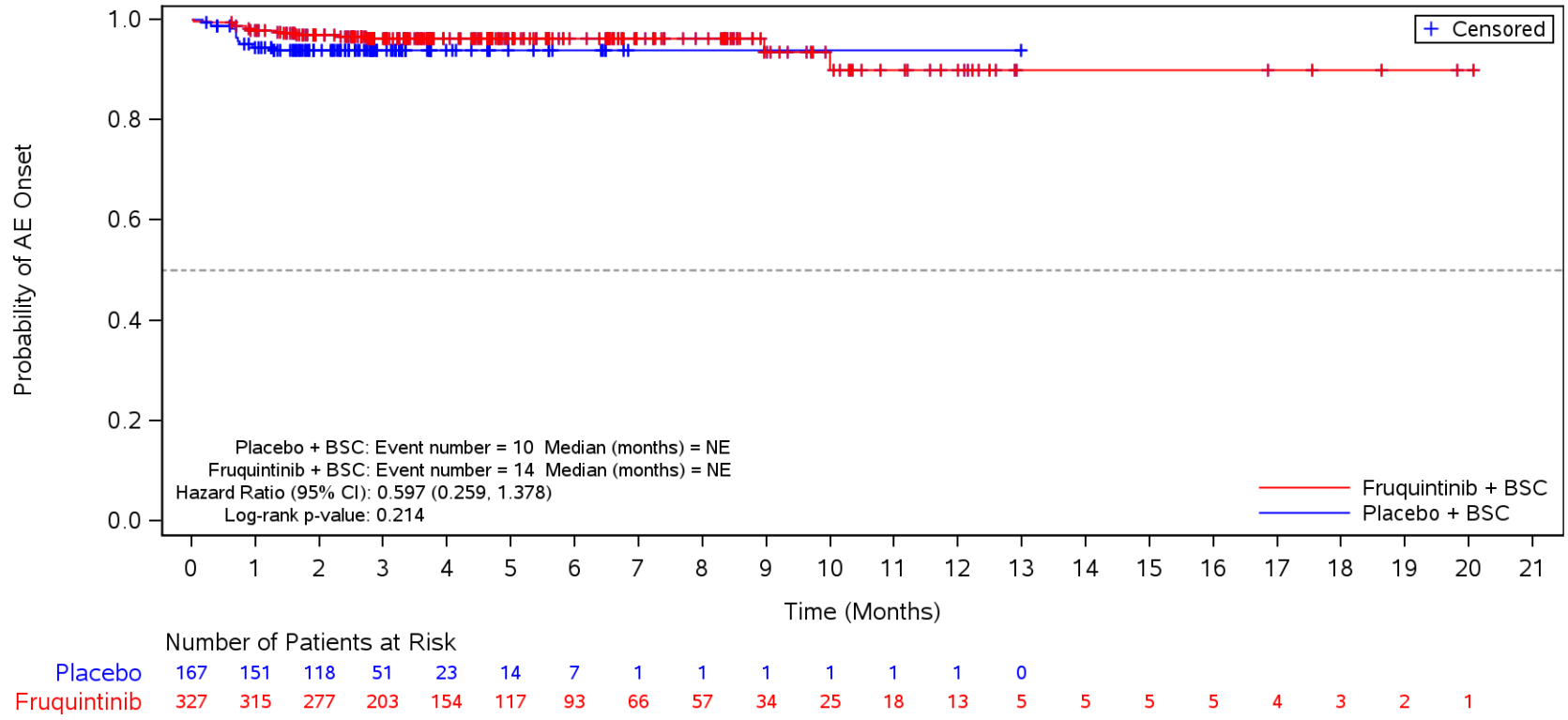
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Europe



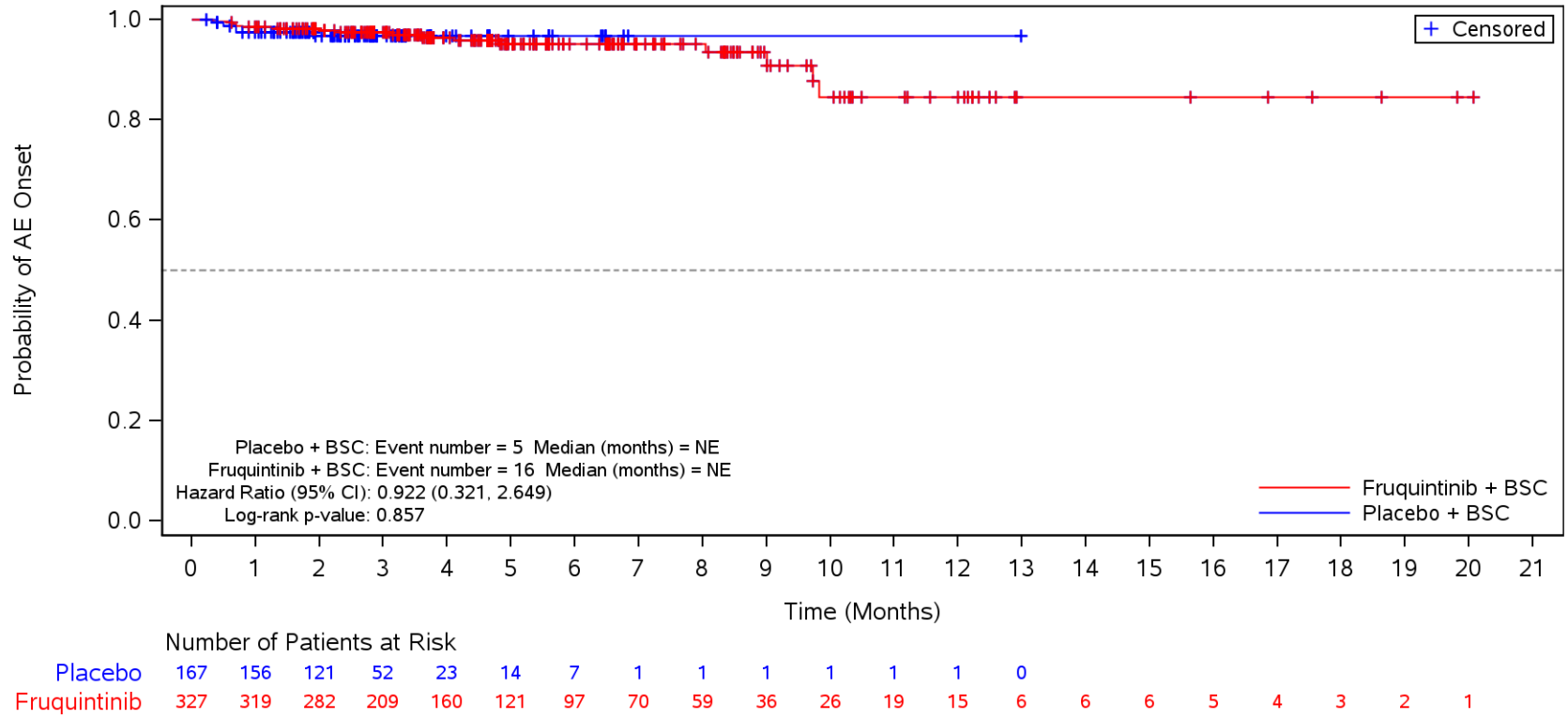
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
Europe



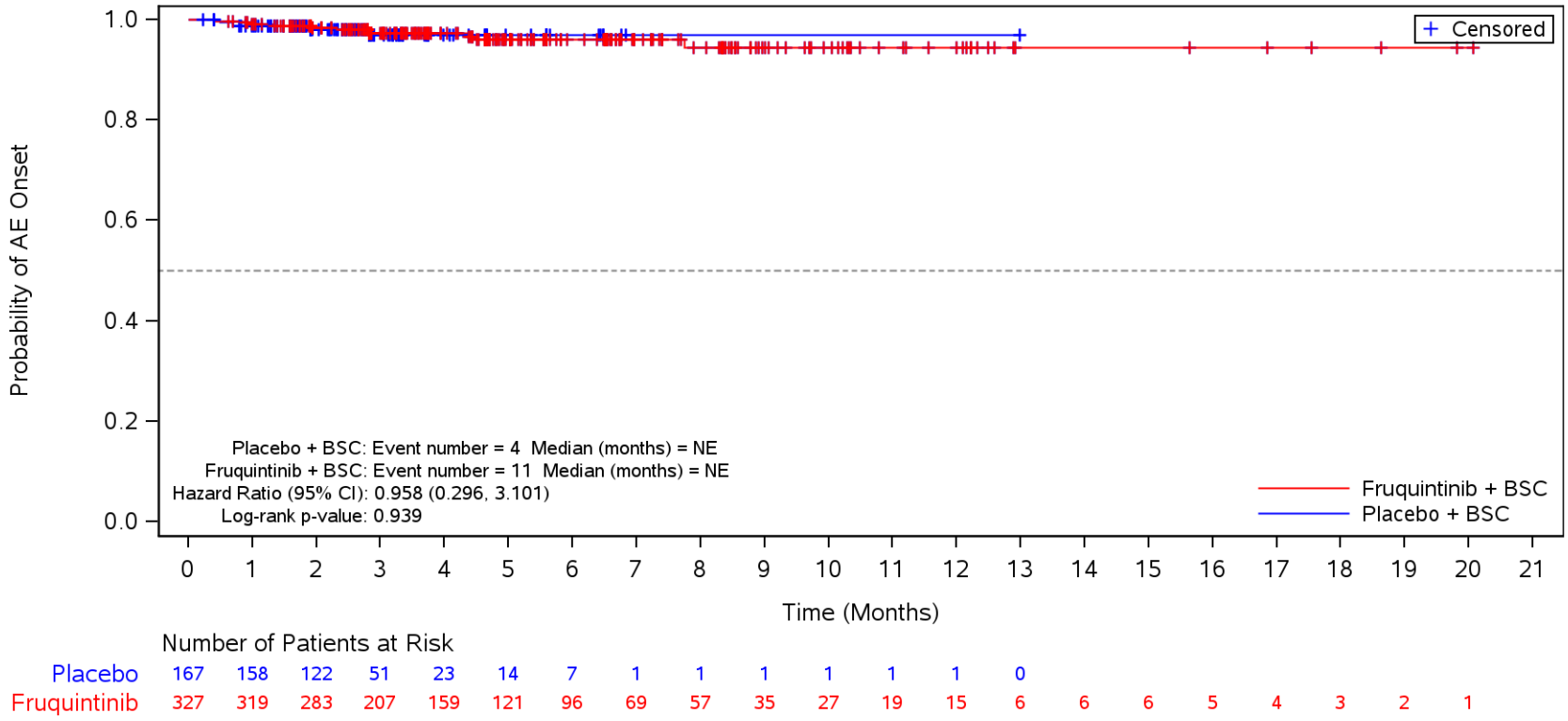
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**
Europe



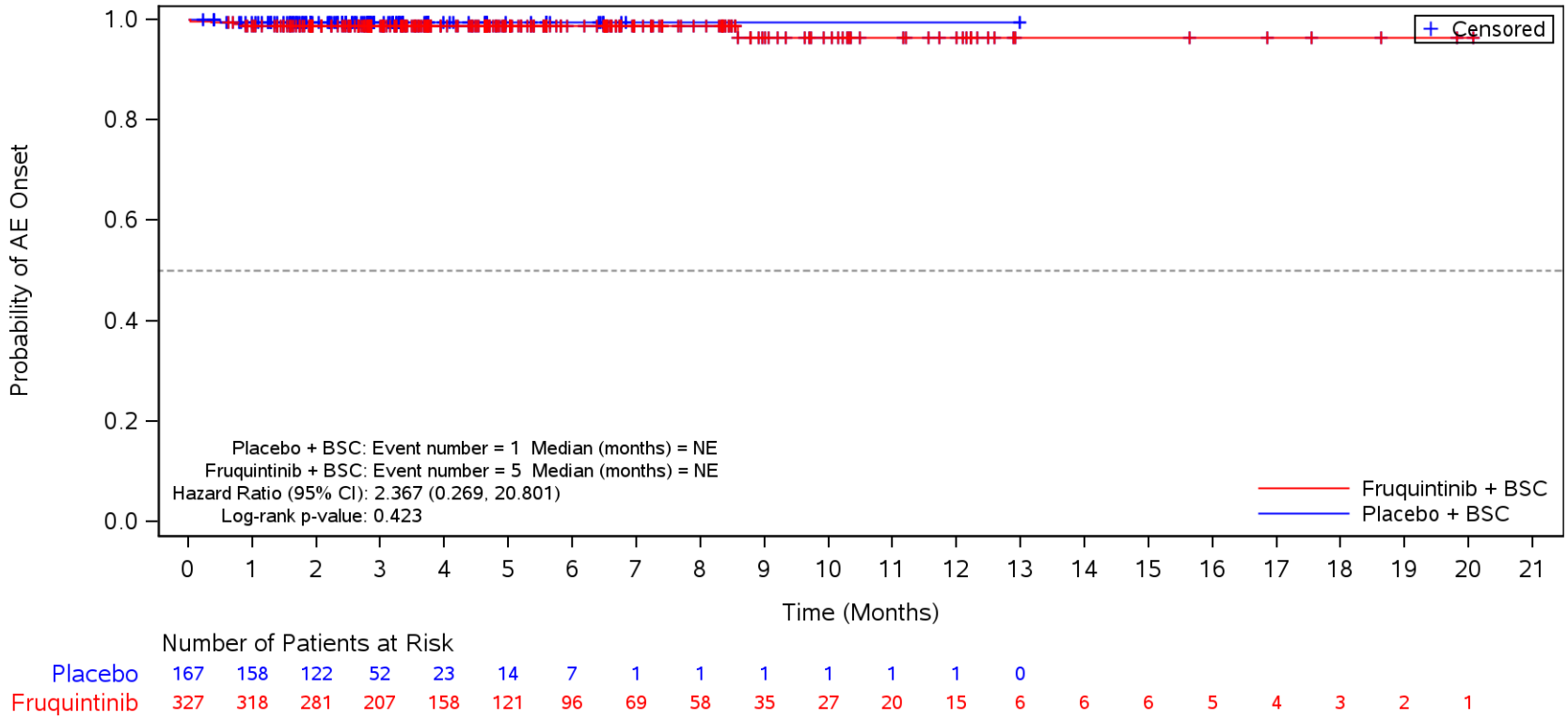
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Condition aggravated**
Europe



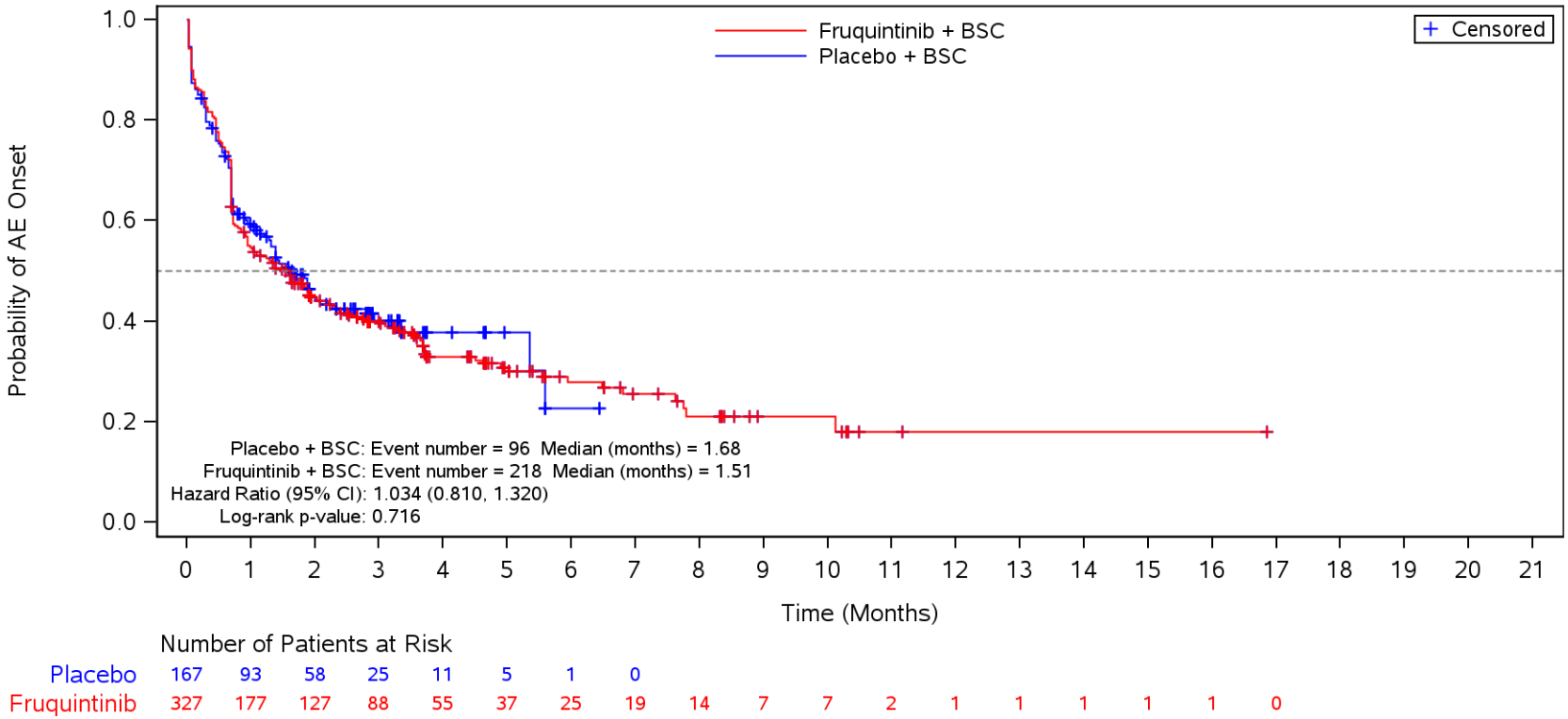
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**
Europe



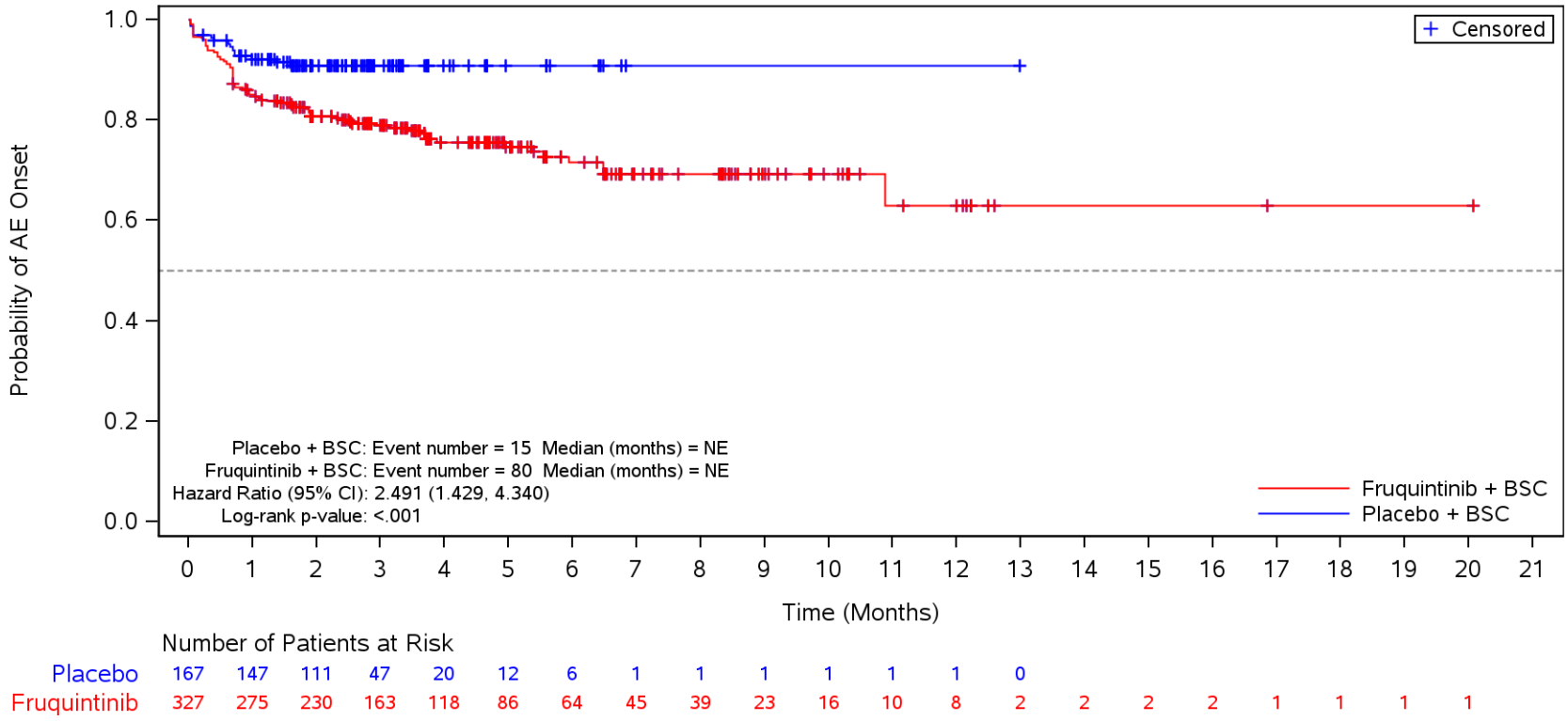
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
Europe



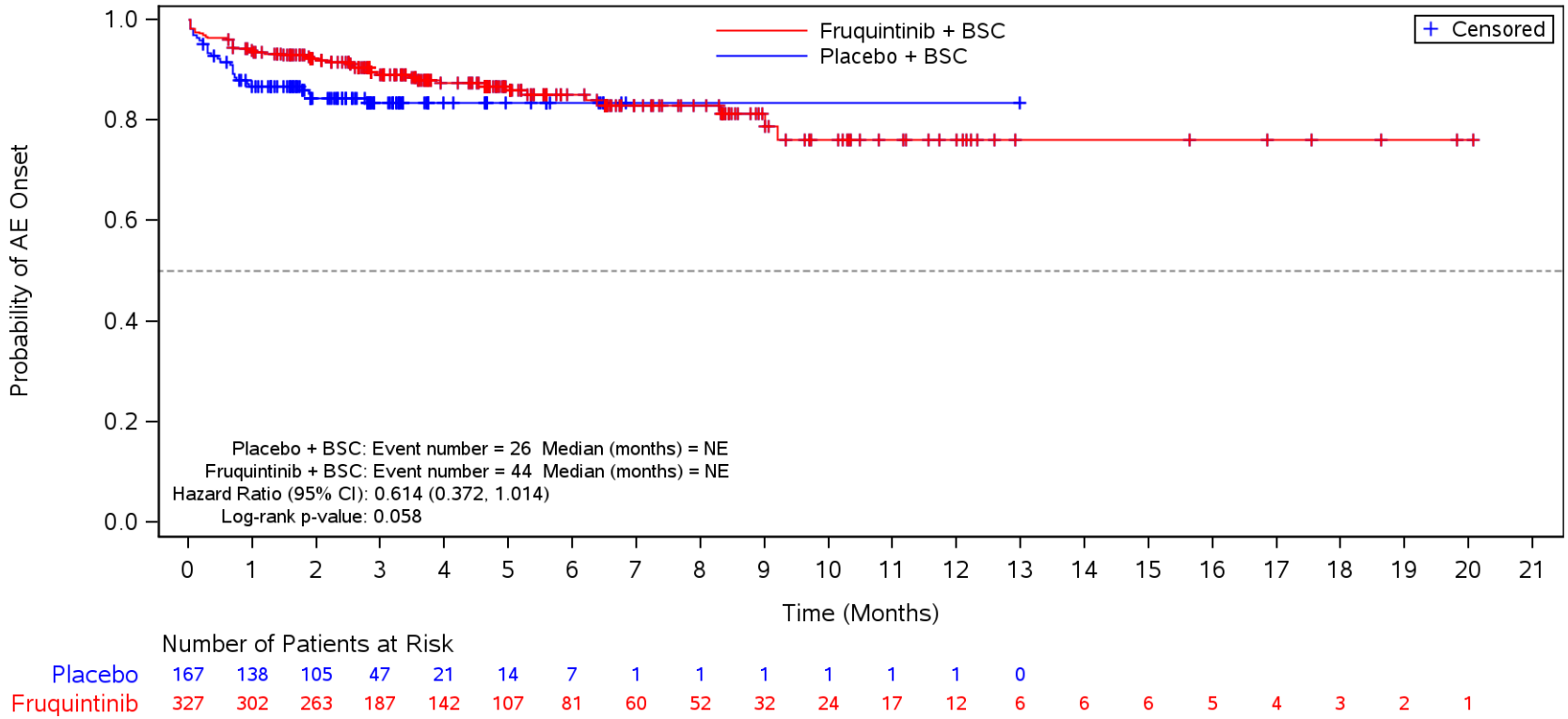
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
Europe



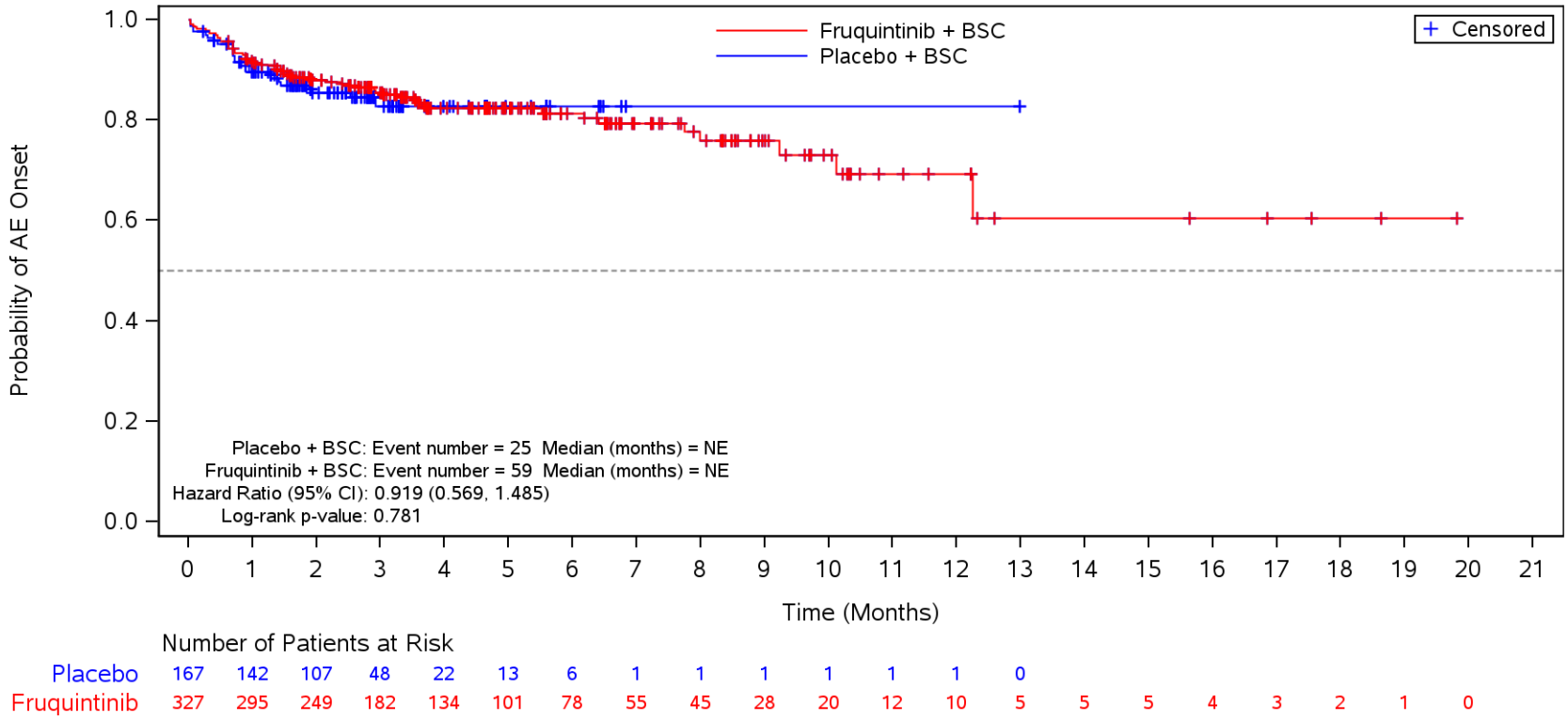
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
Europe



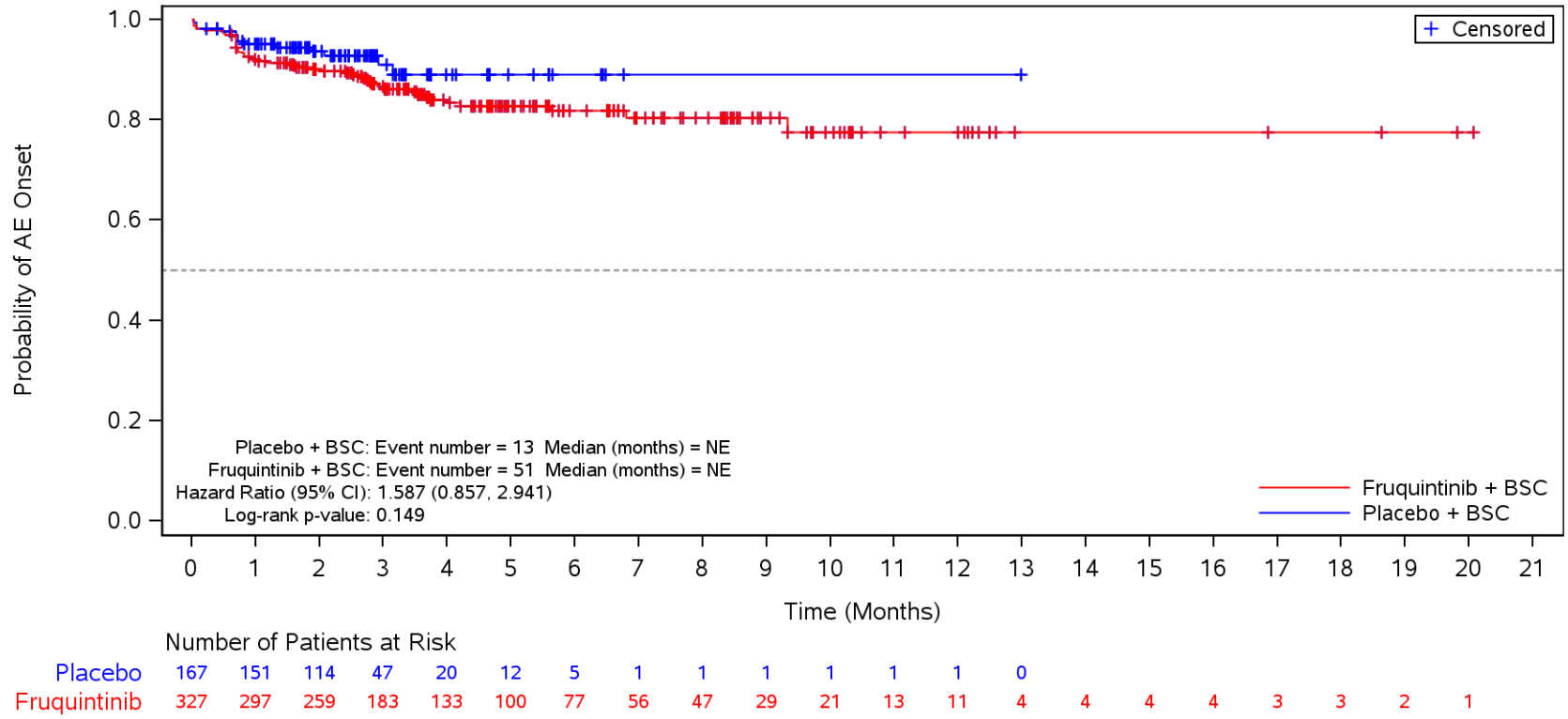
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
Europe



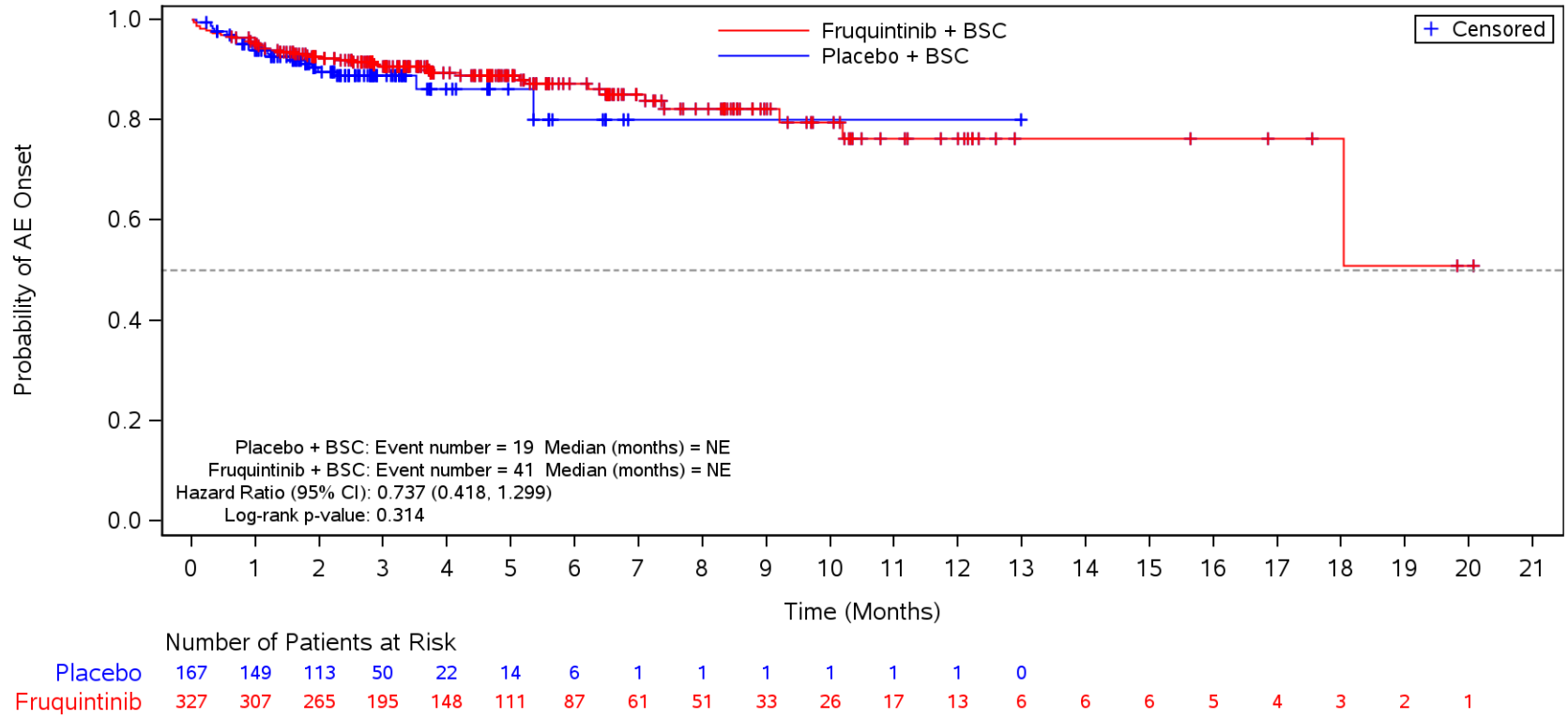
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
Europe



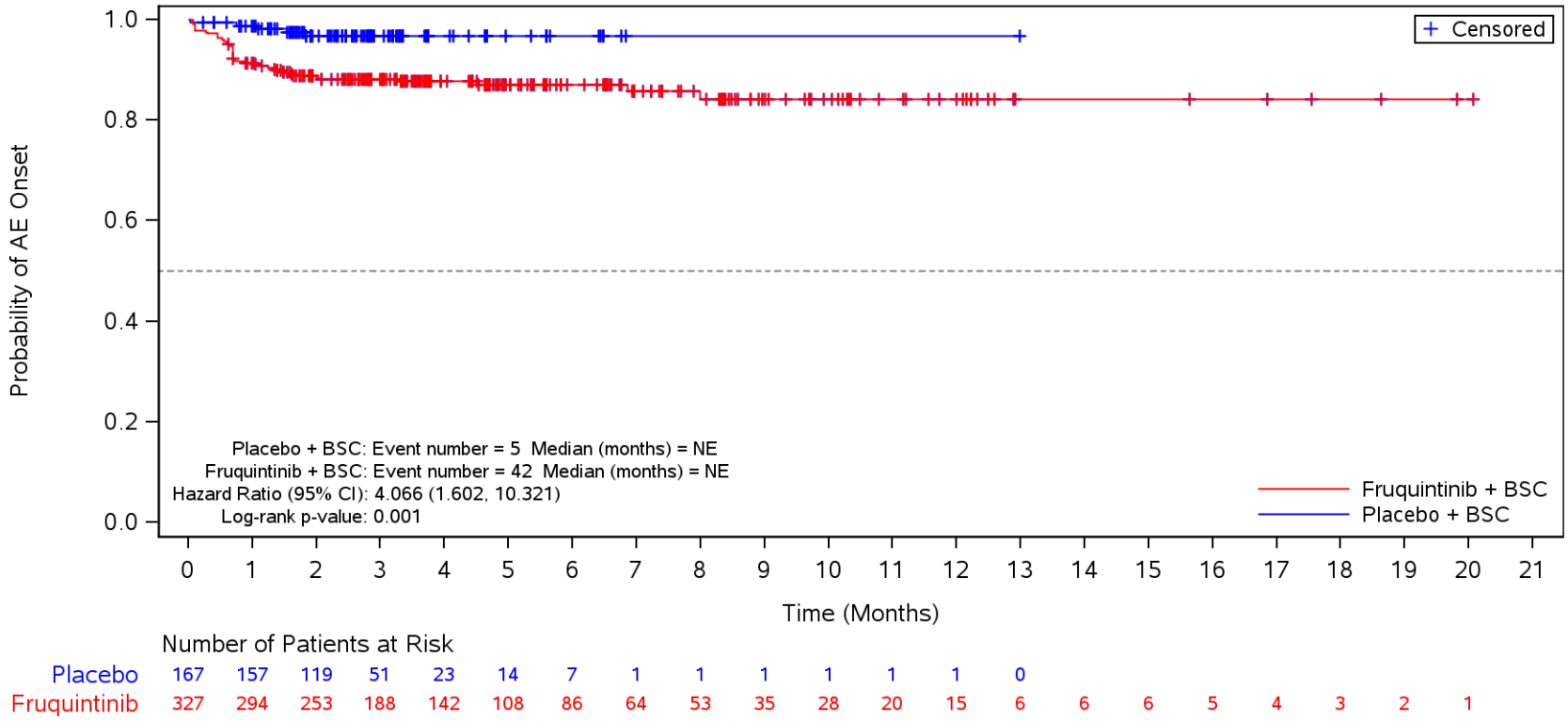
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
Europe



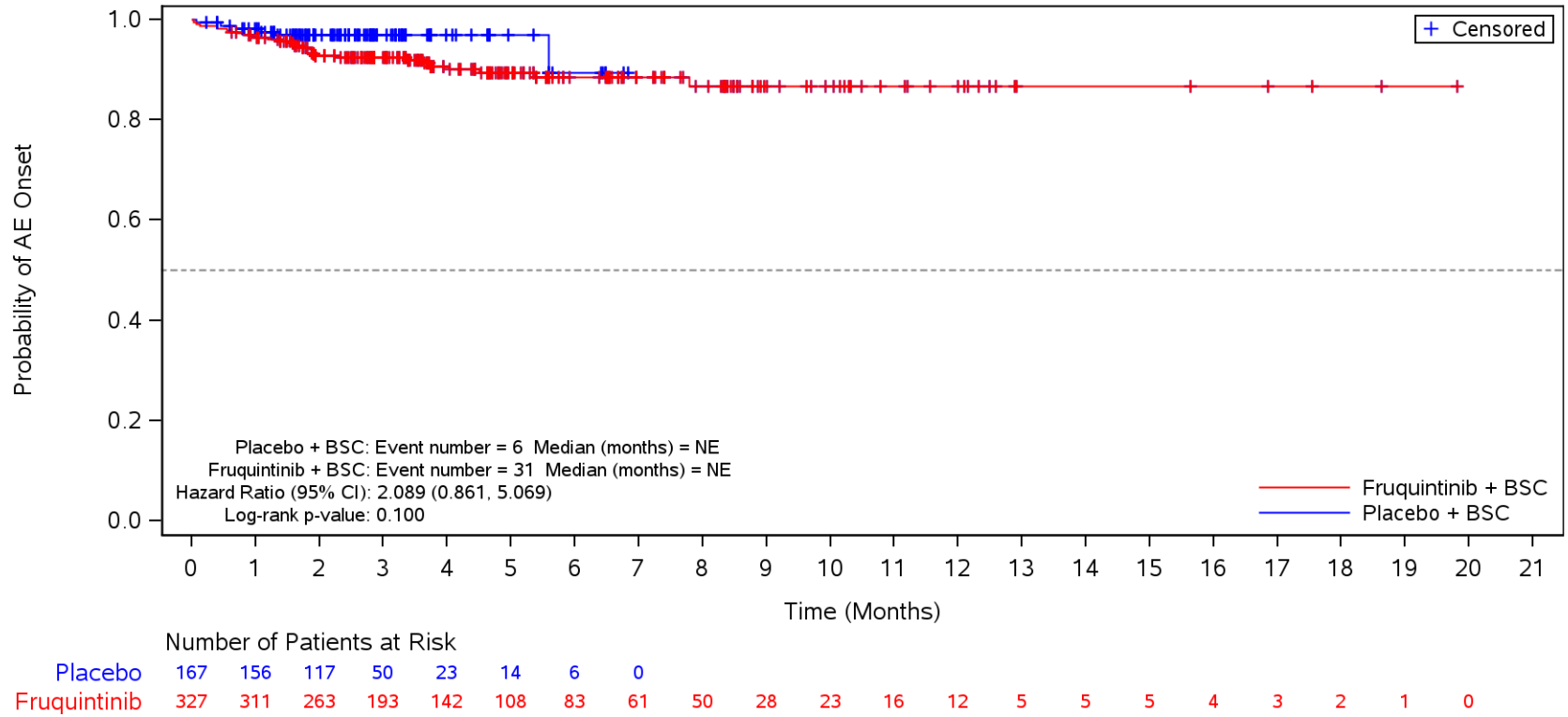
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
Europe



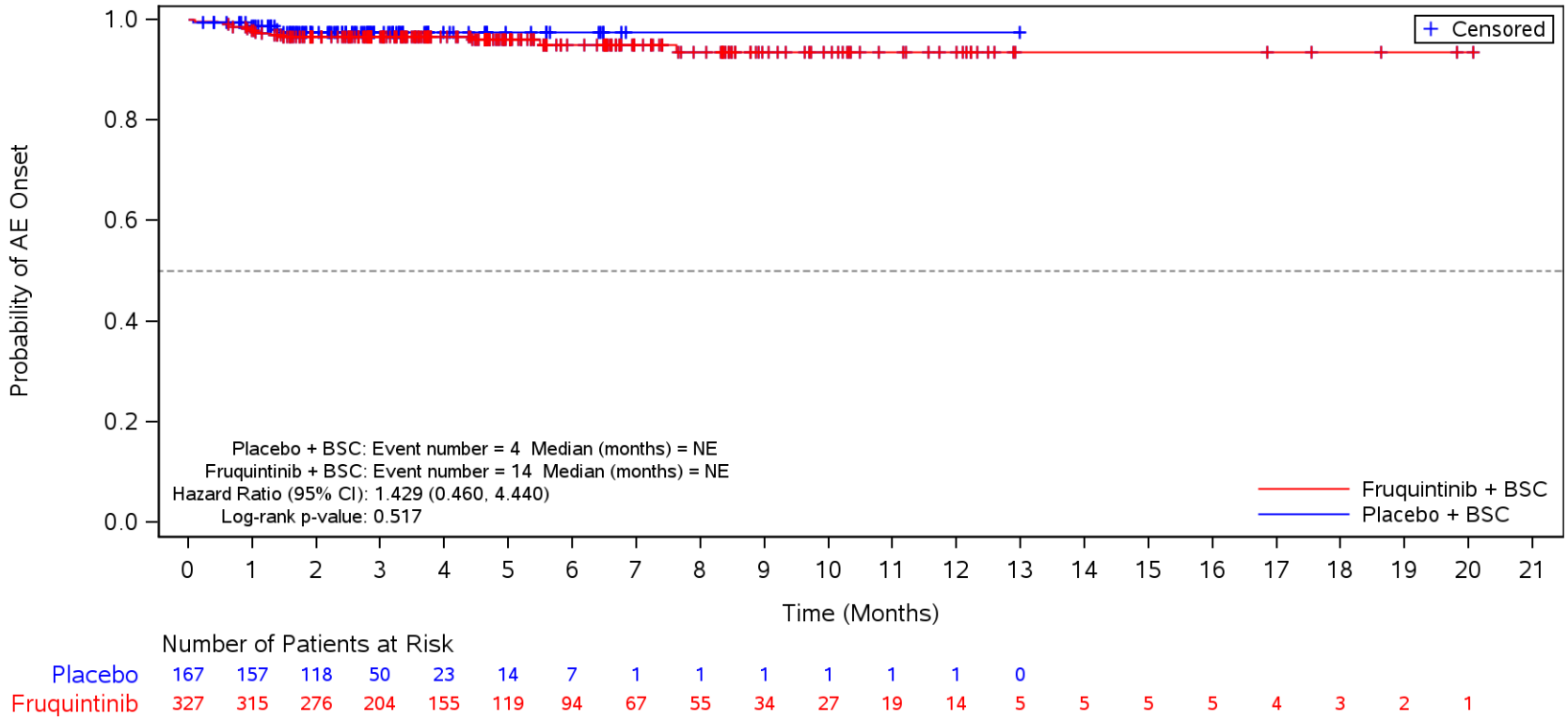
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
Europe



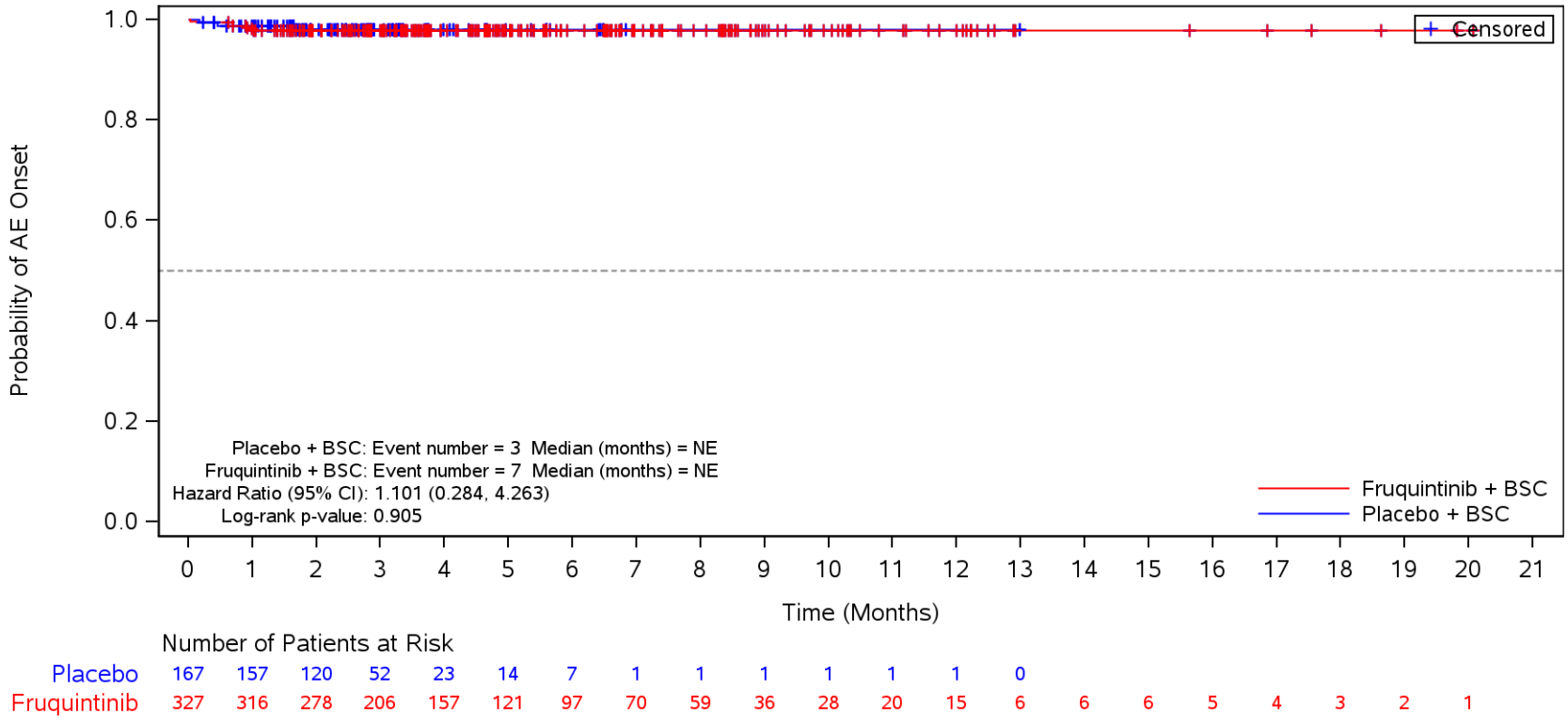
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
Europe



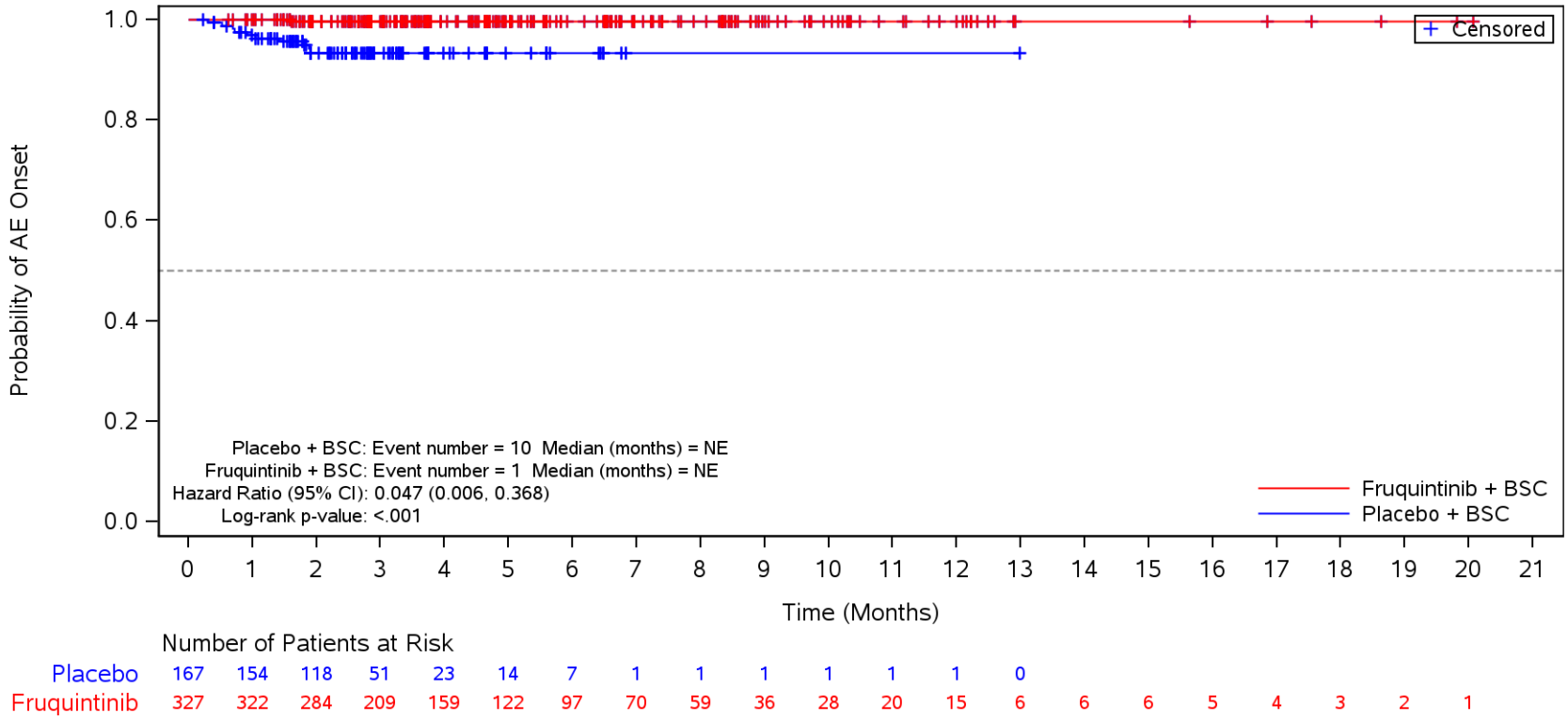
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
Europe



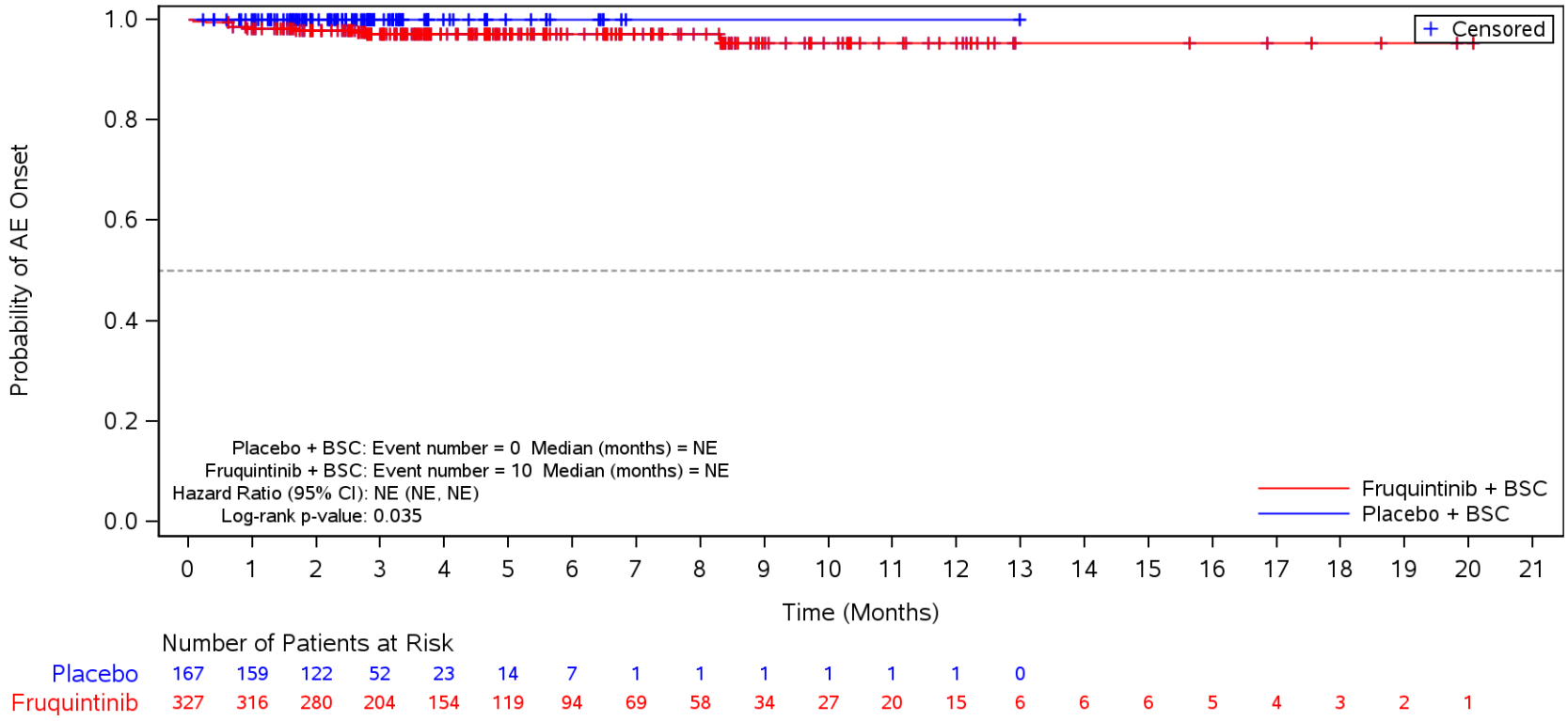
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
Europe



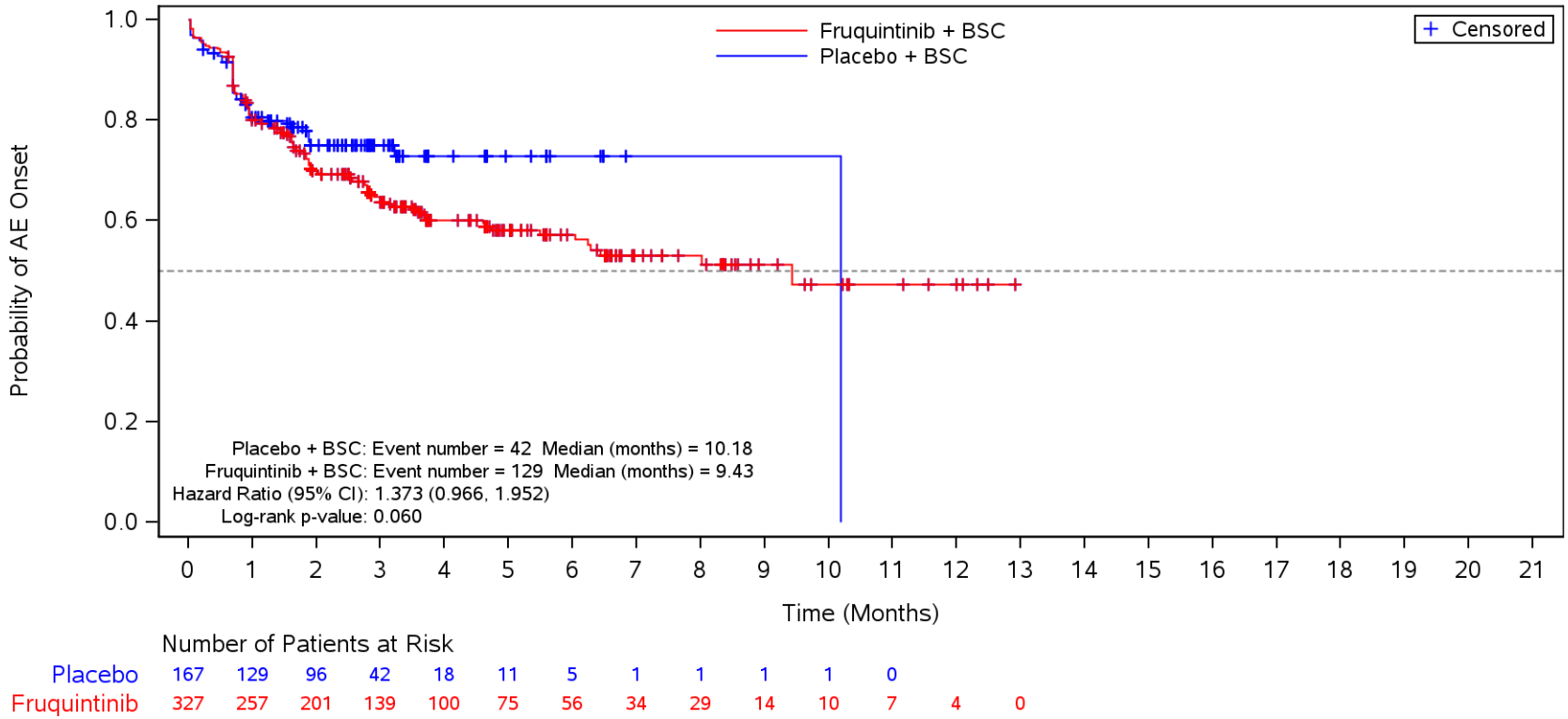
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**
Europe



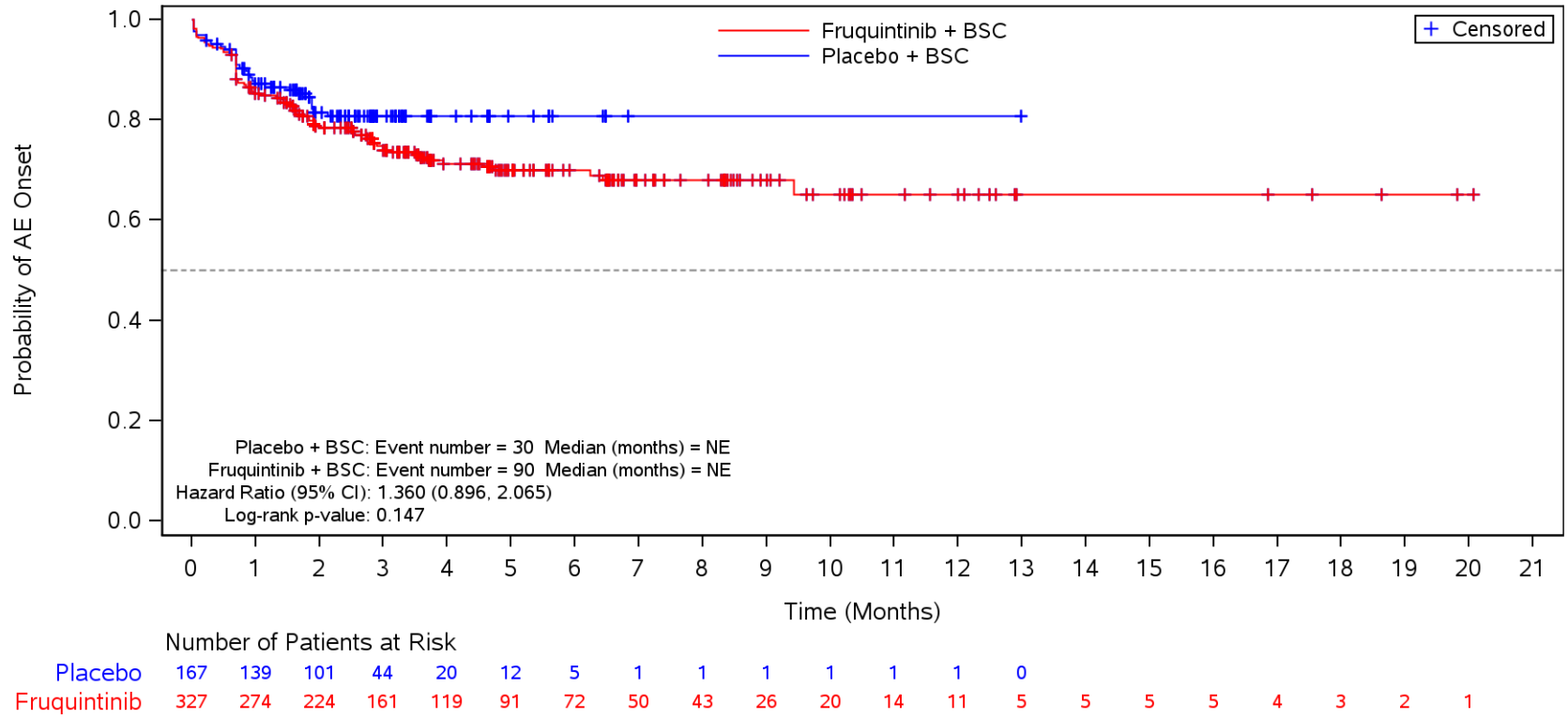
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
Europe



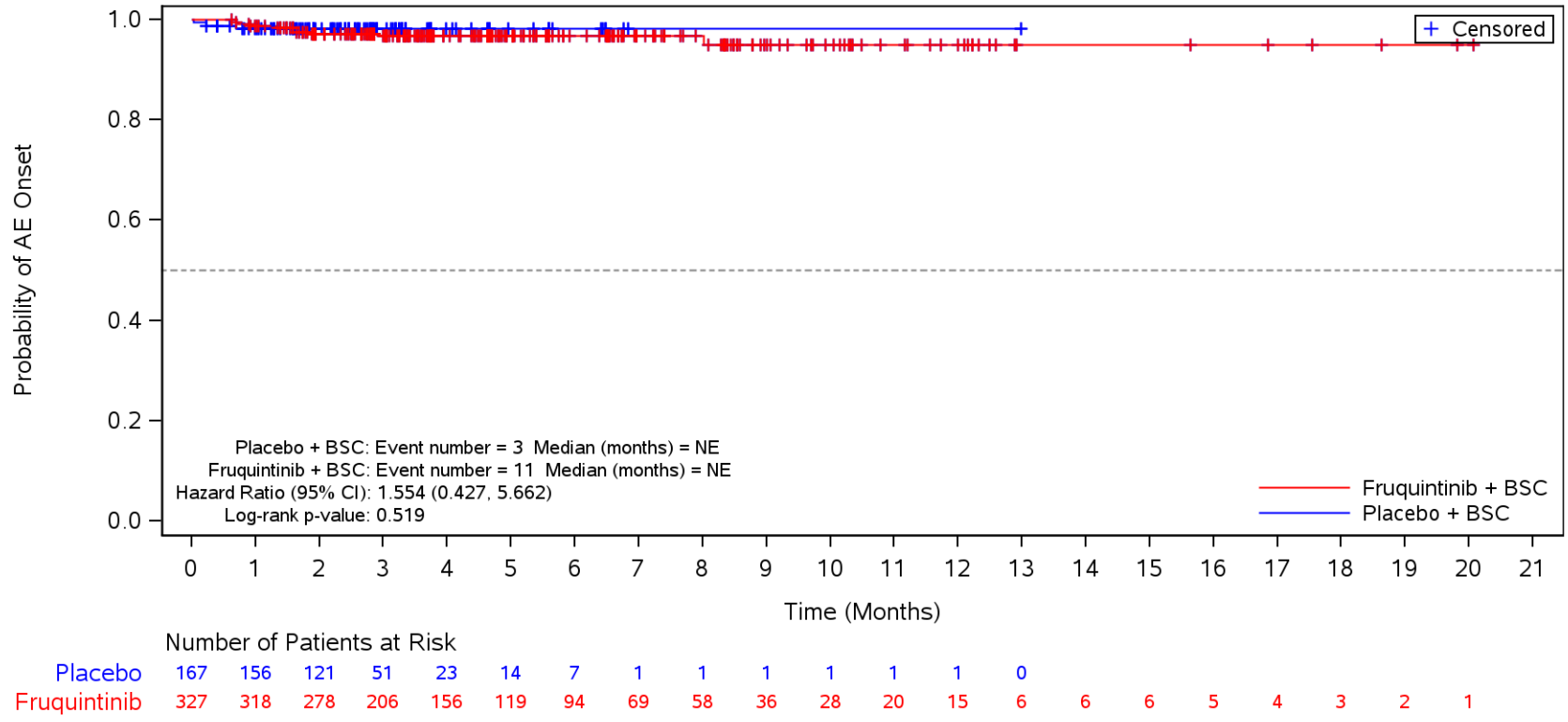
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
Europe



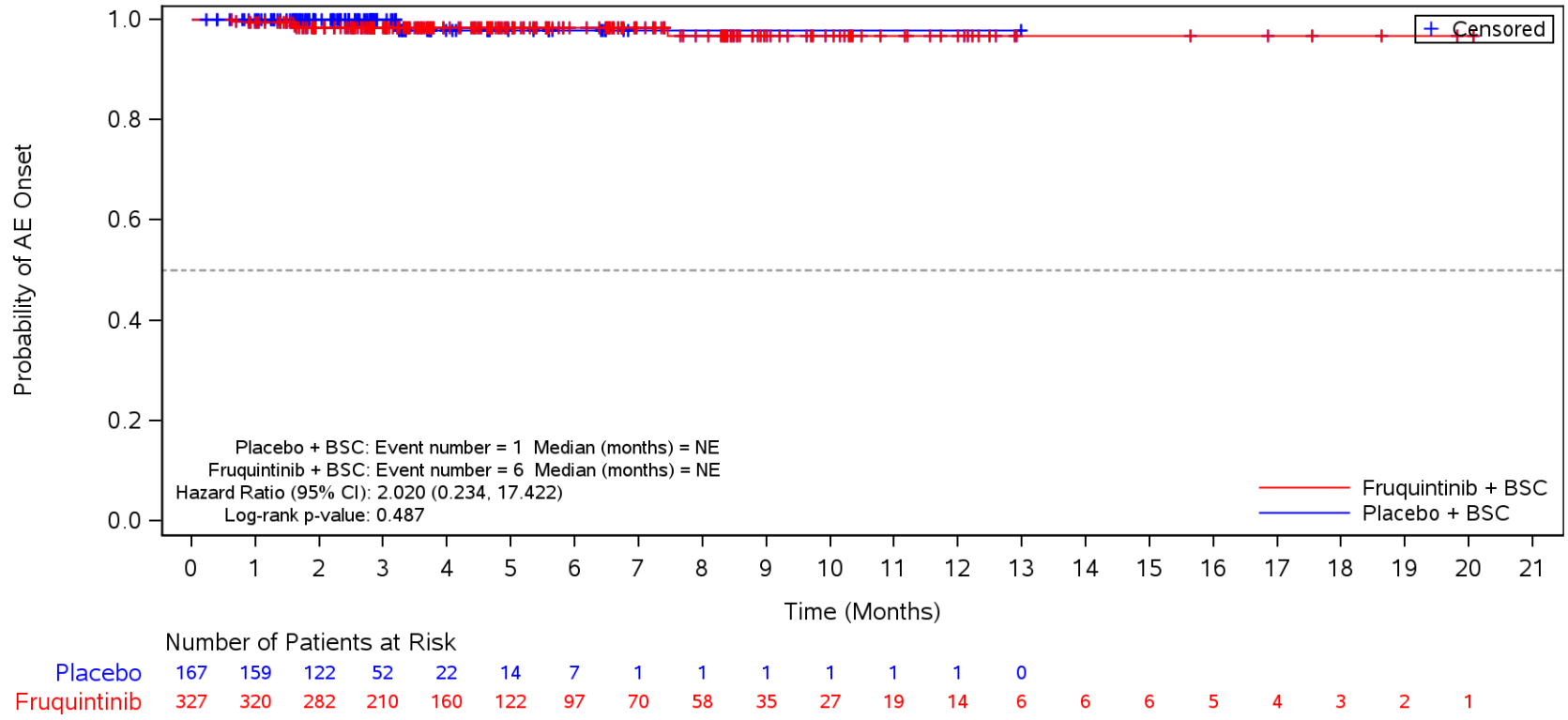
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
Europe



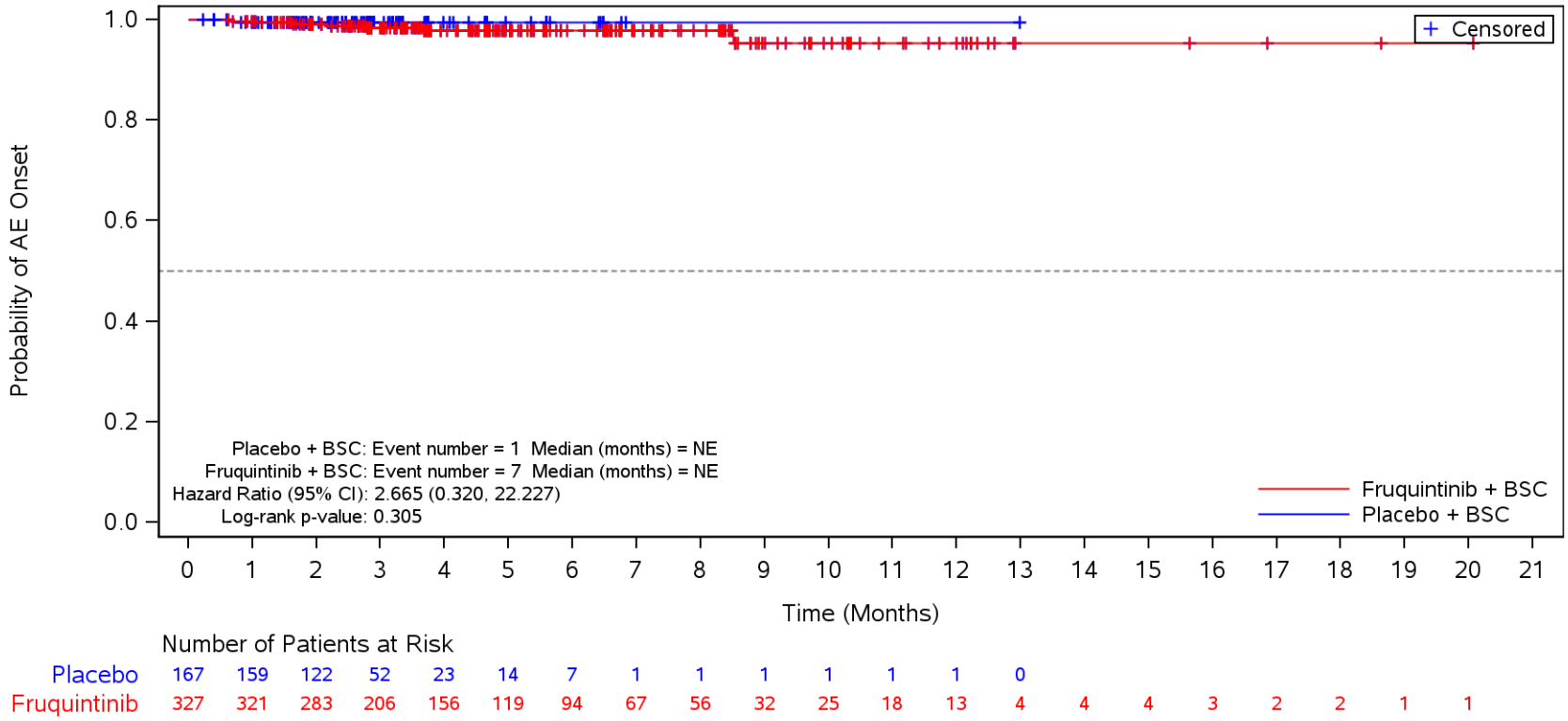
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
Europe



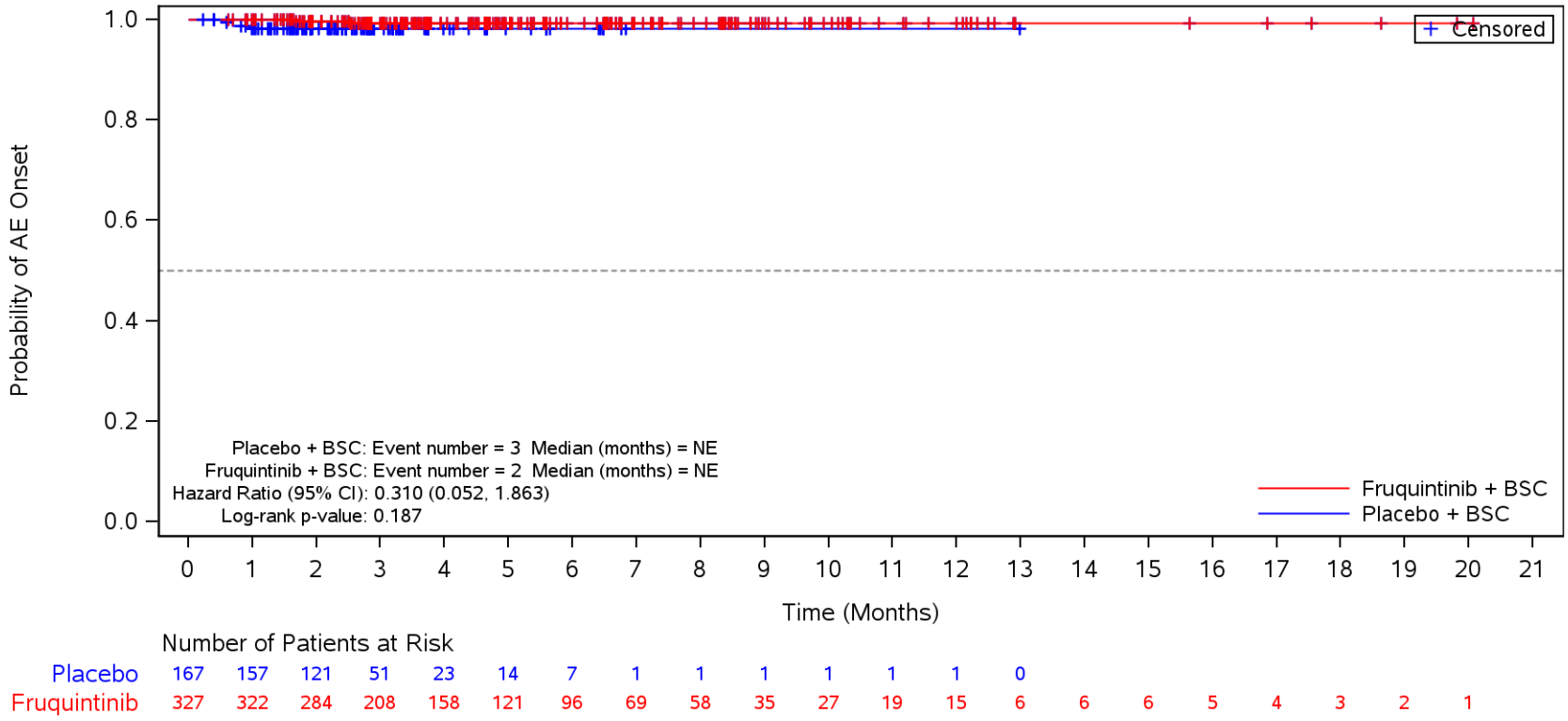
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
Europe



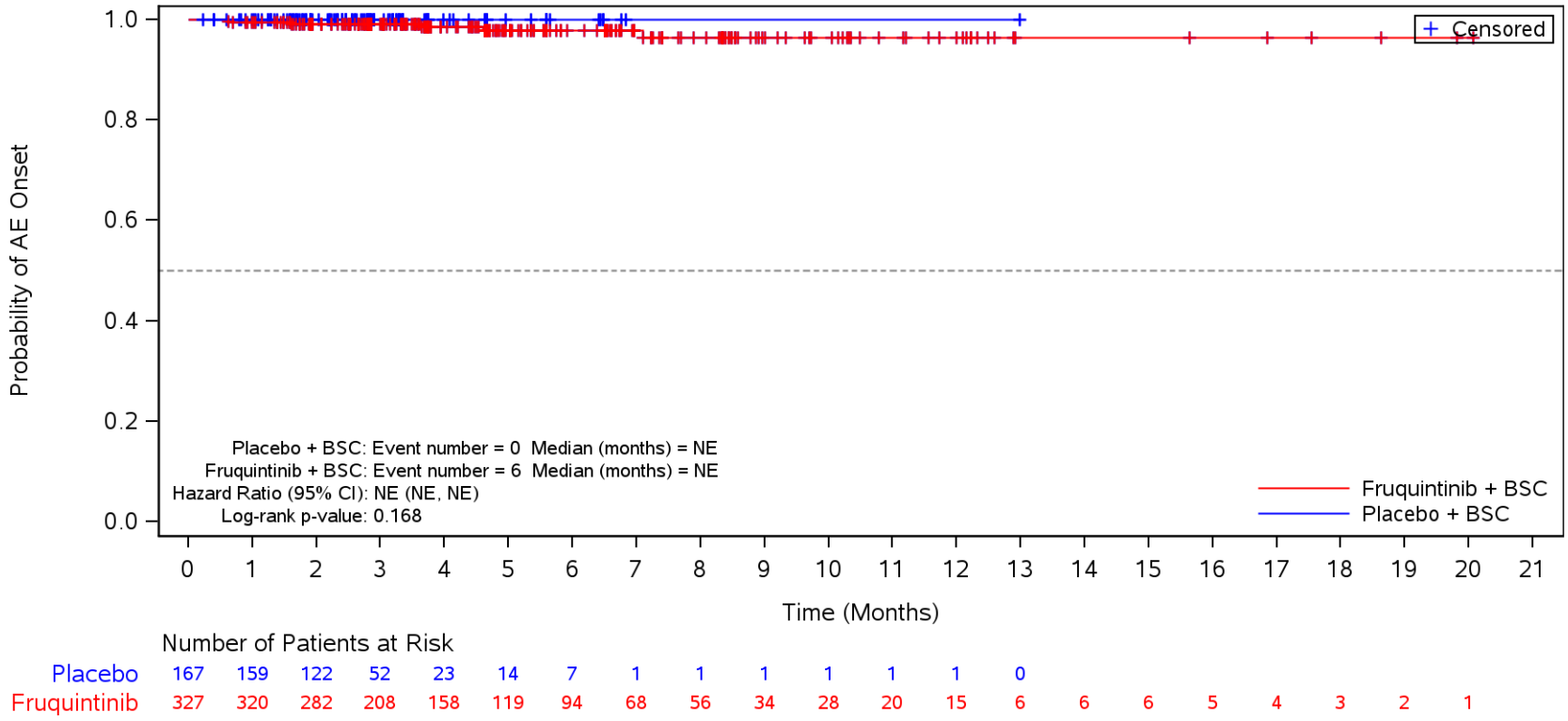
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
Europe



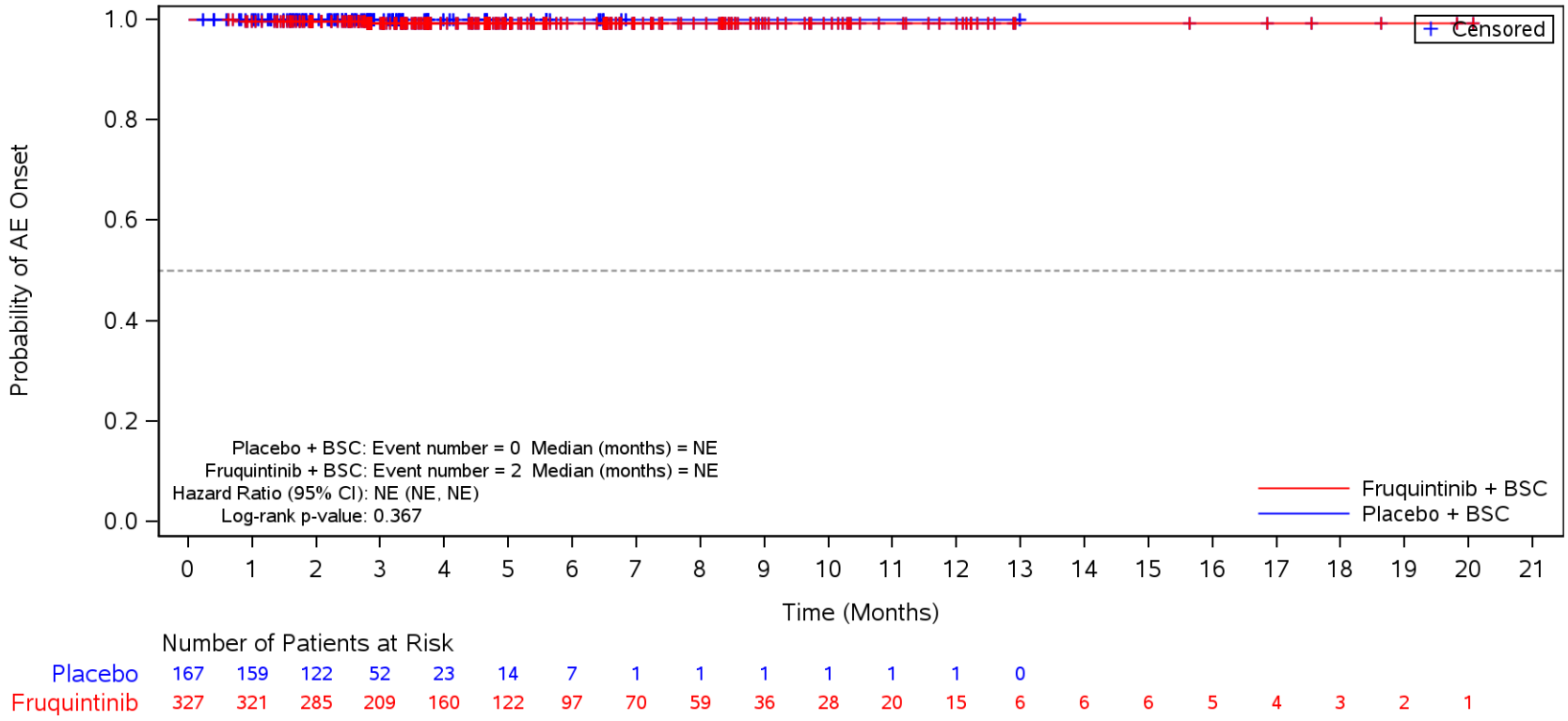
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
Europe



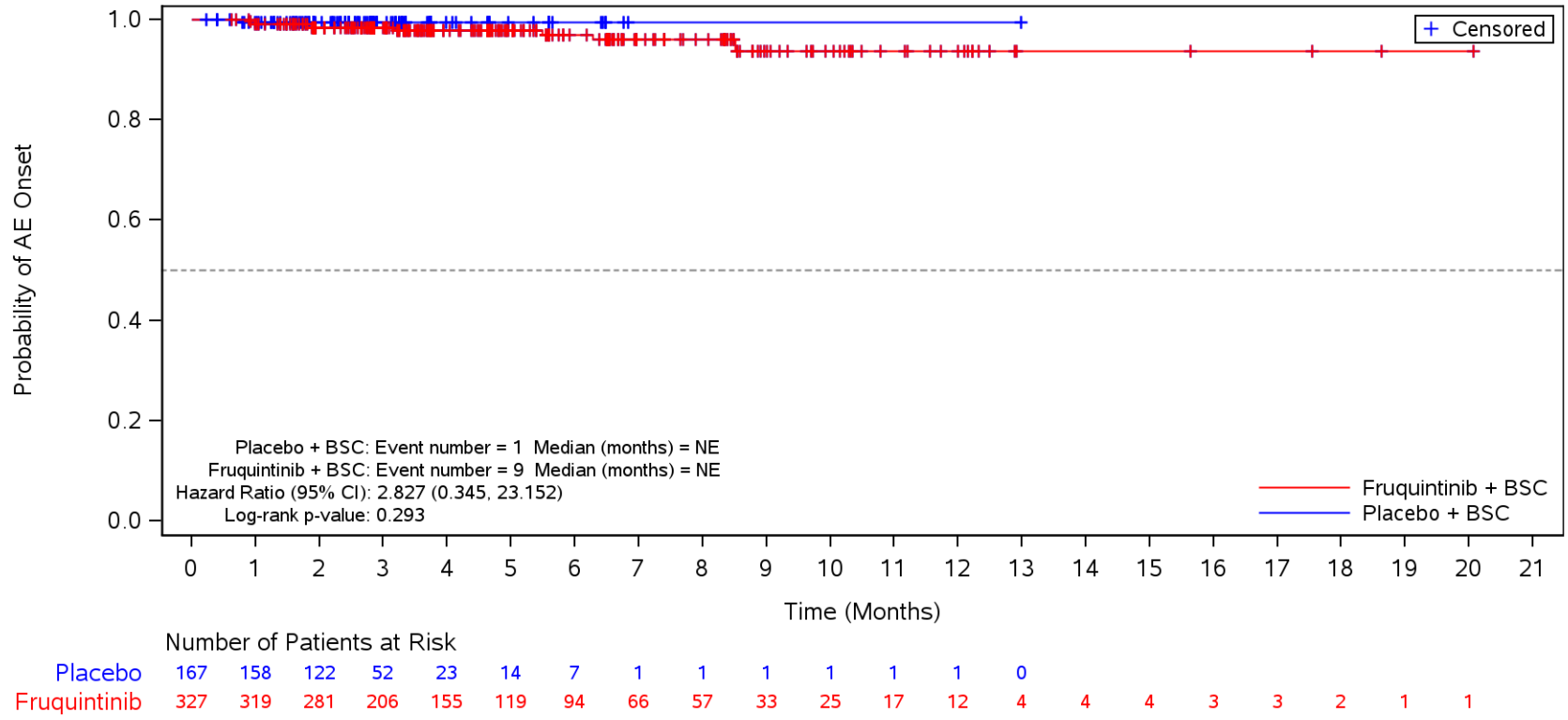
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
Europe



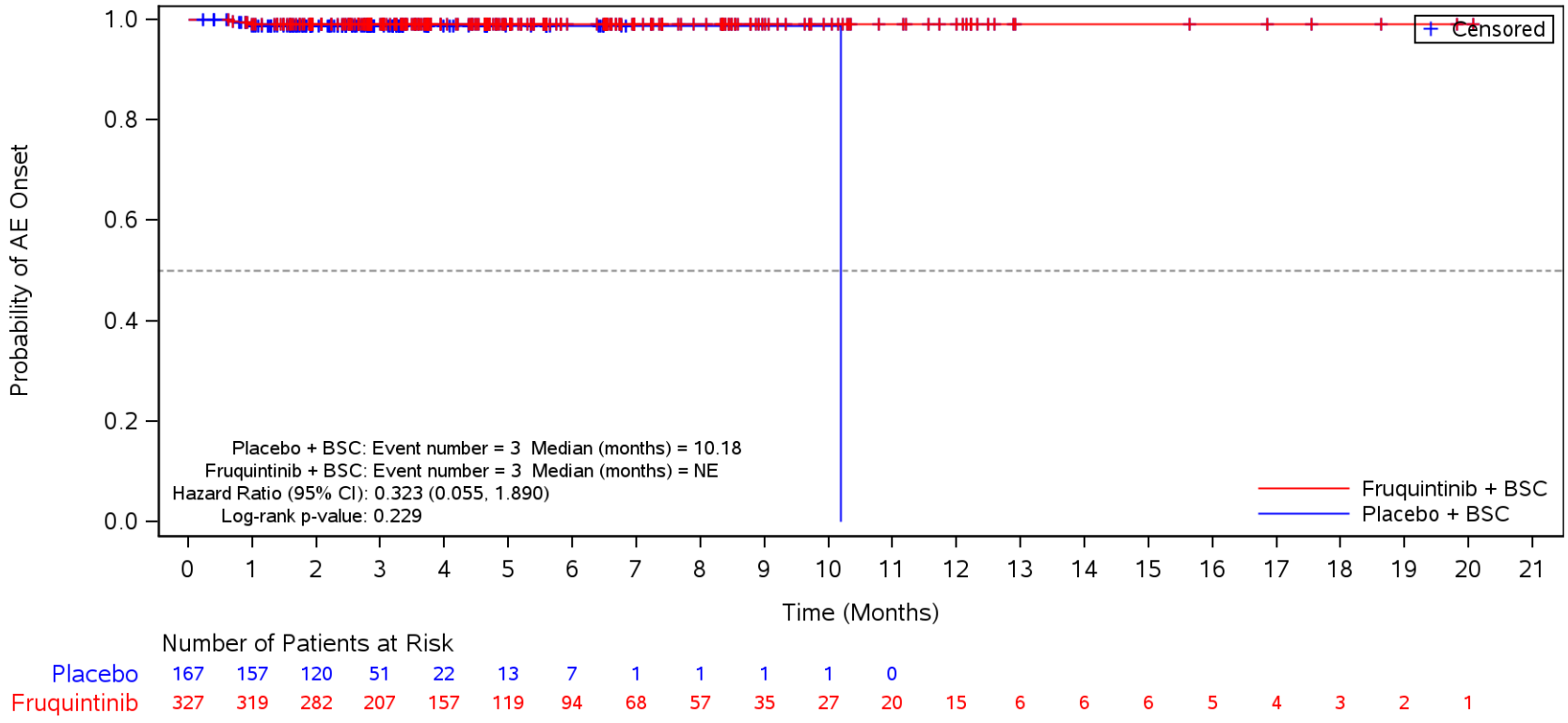
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**
Europe



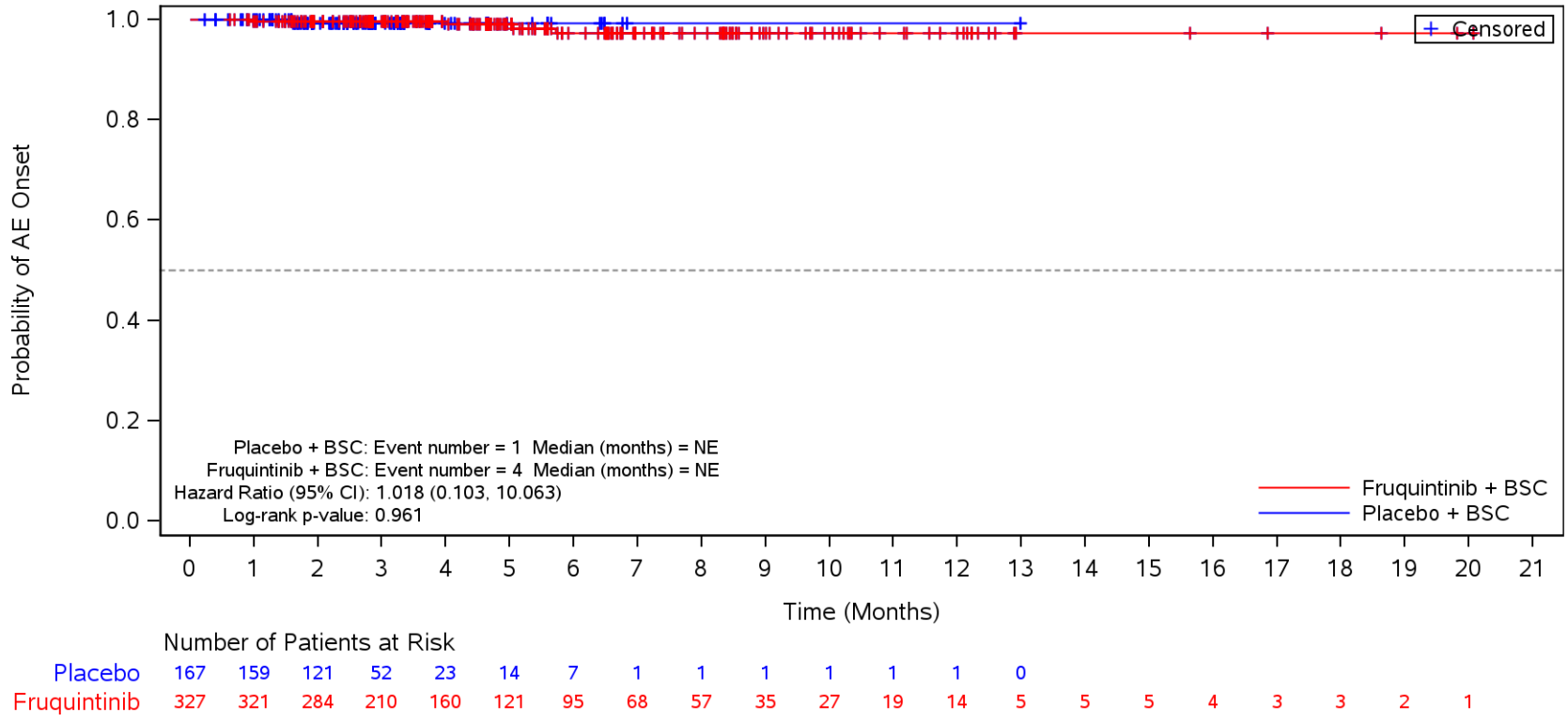
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
Europe



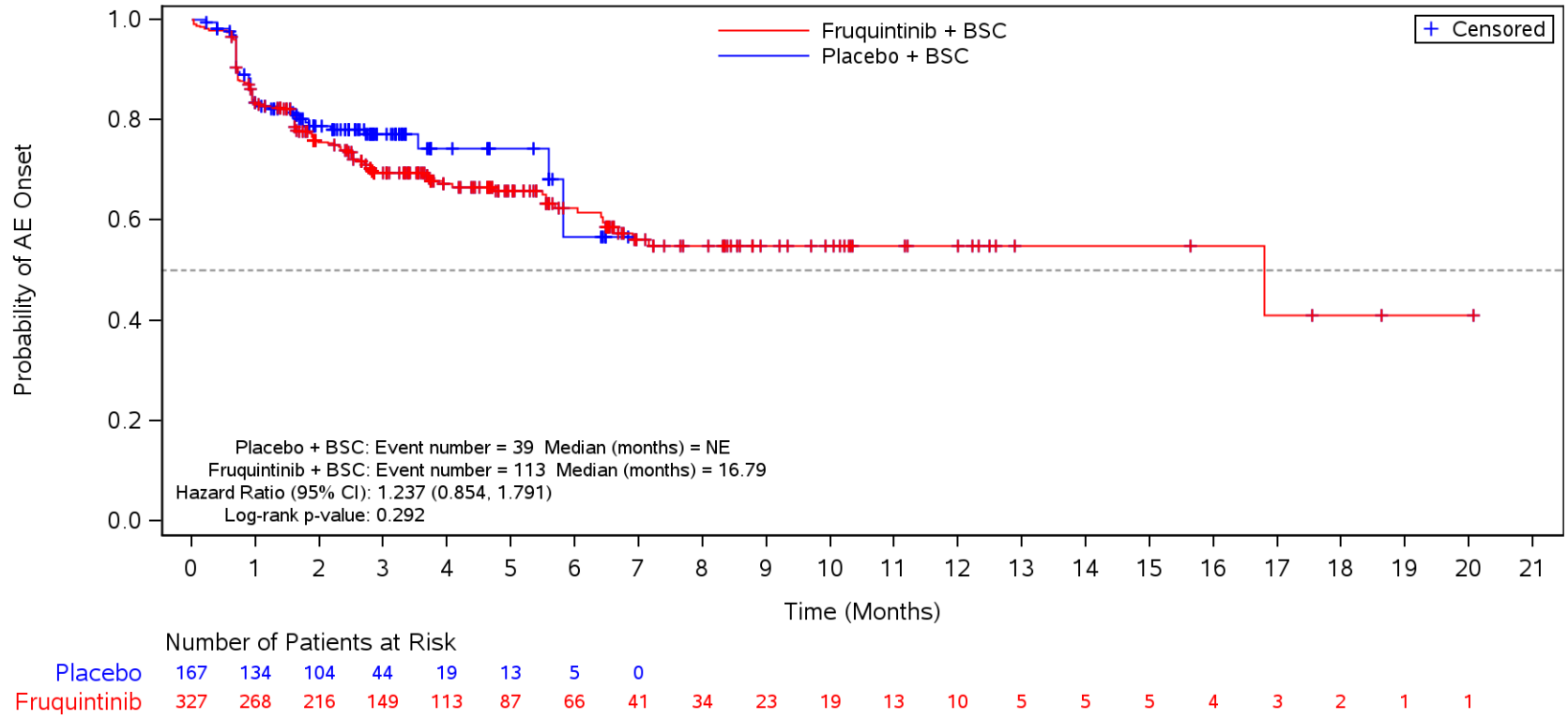
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
Europe



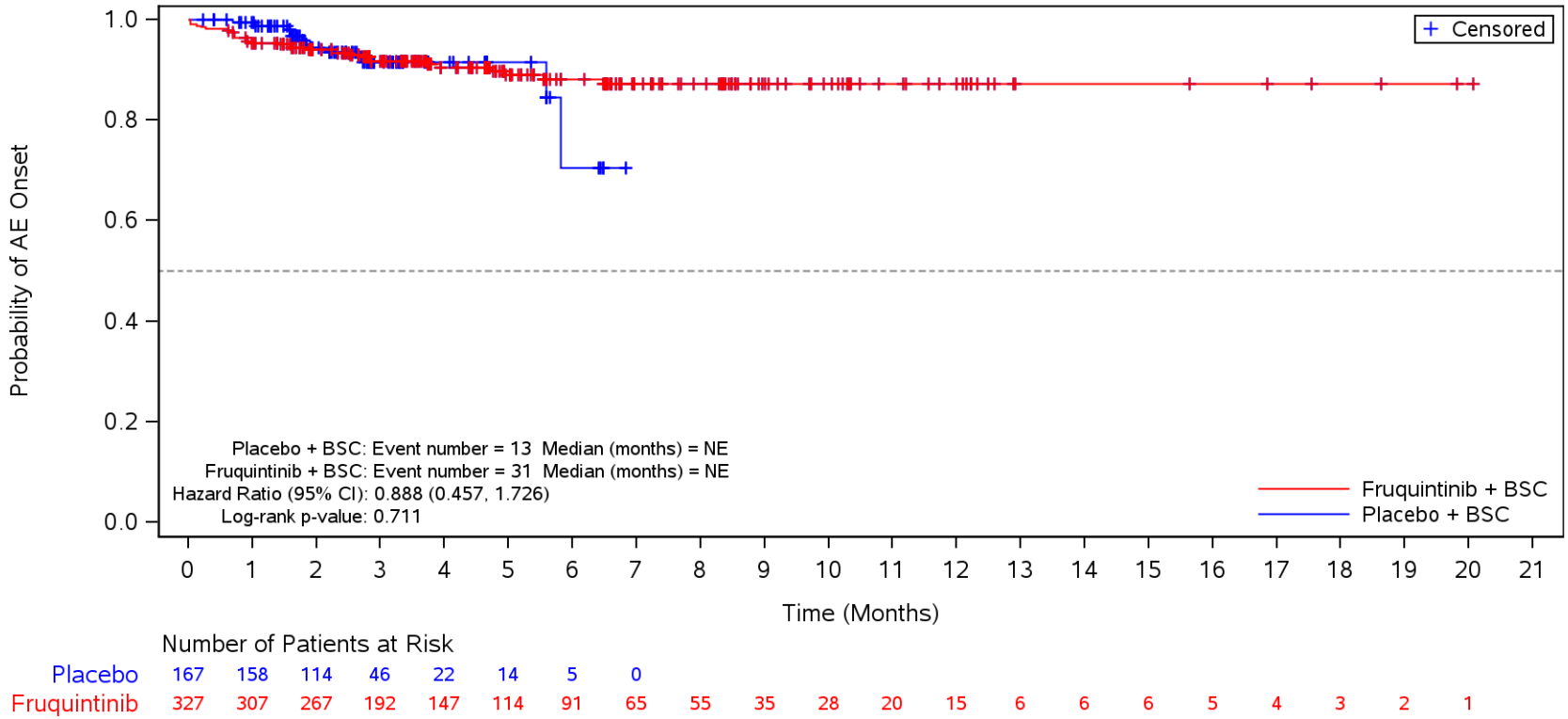
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations**
Europe



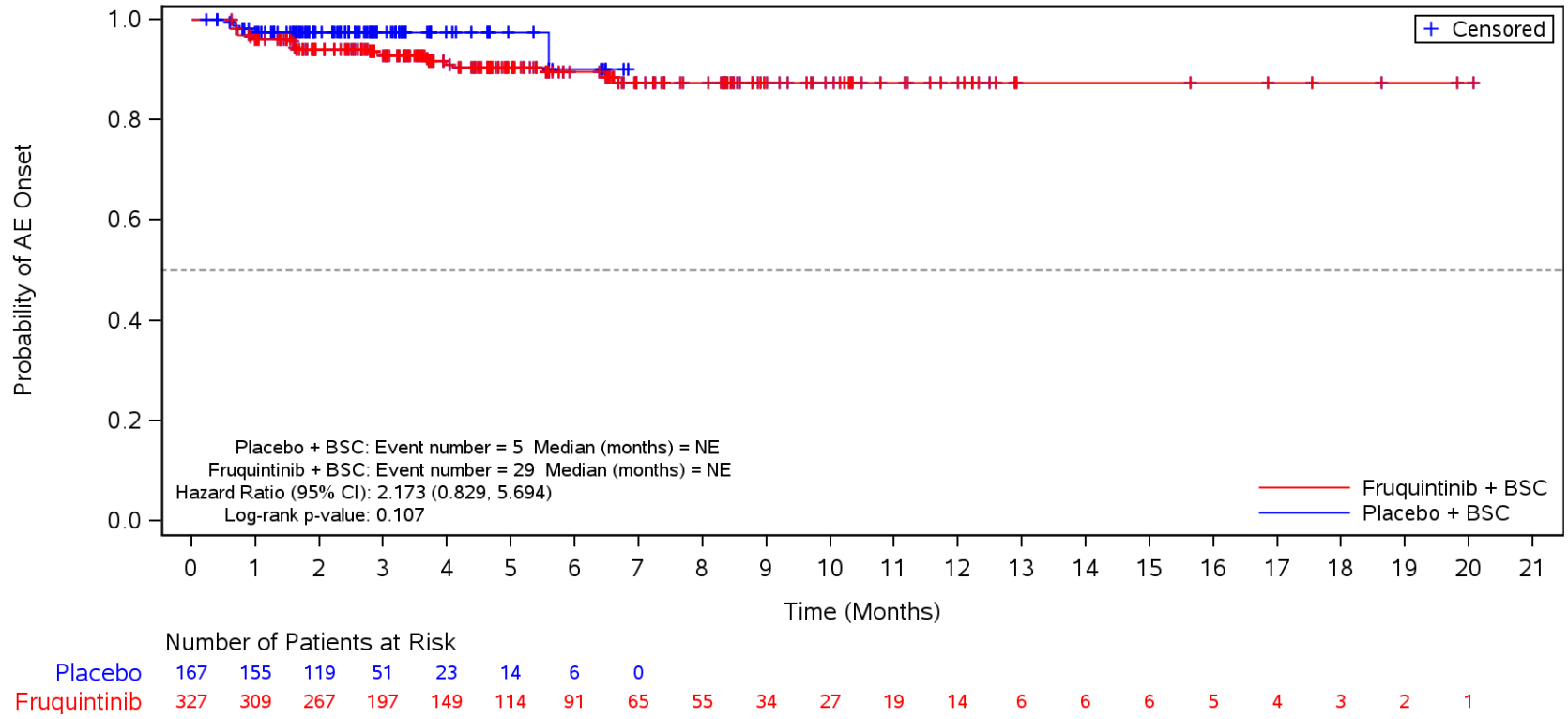
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
Europe



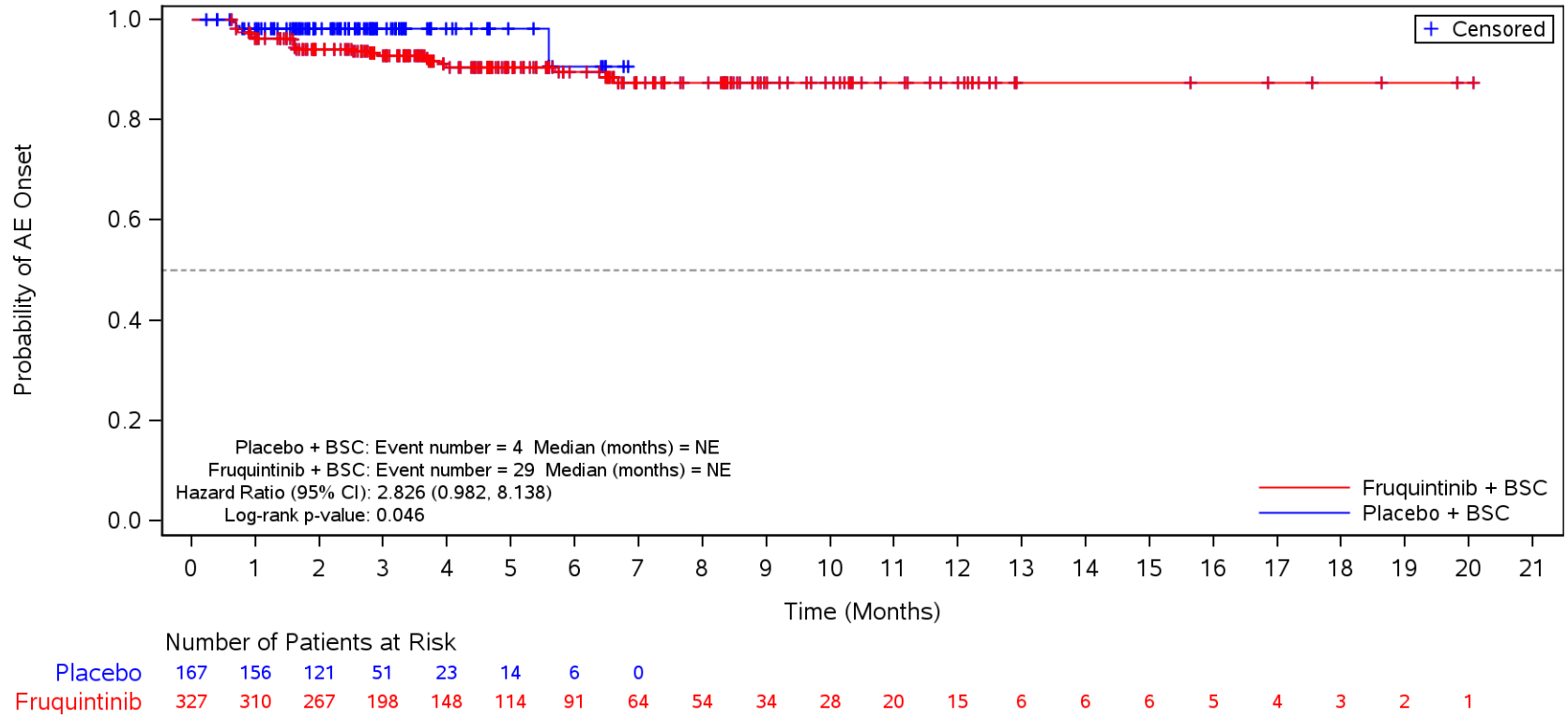
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
Europe



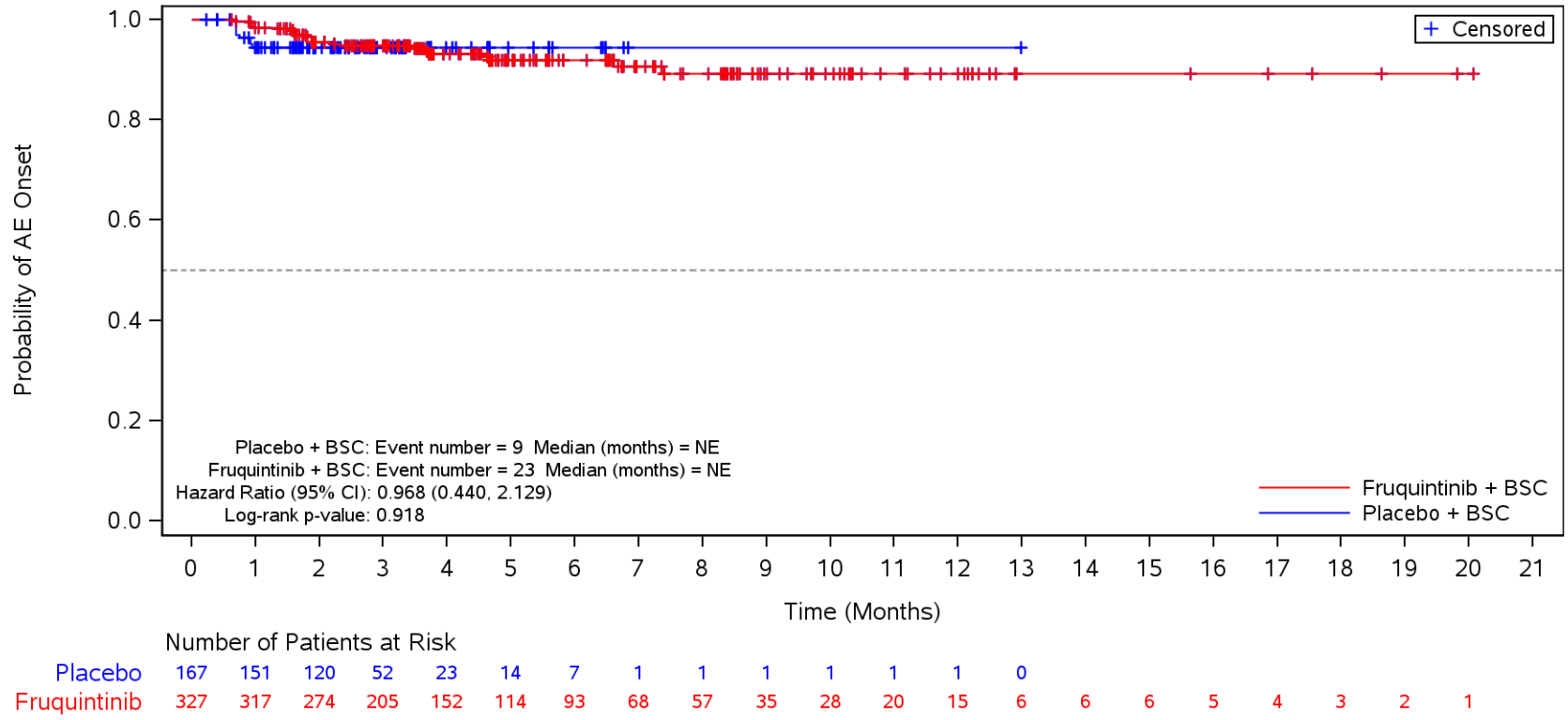
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
Europe



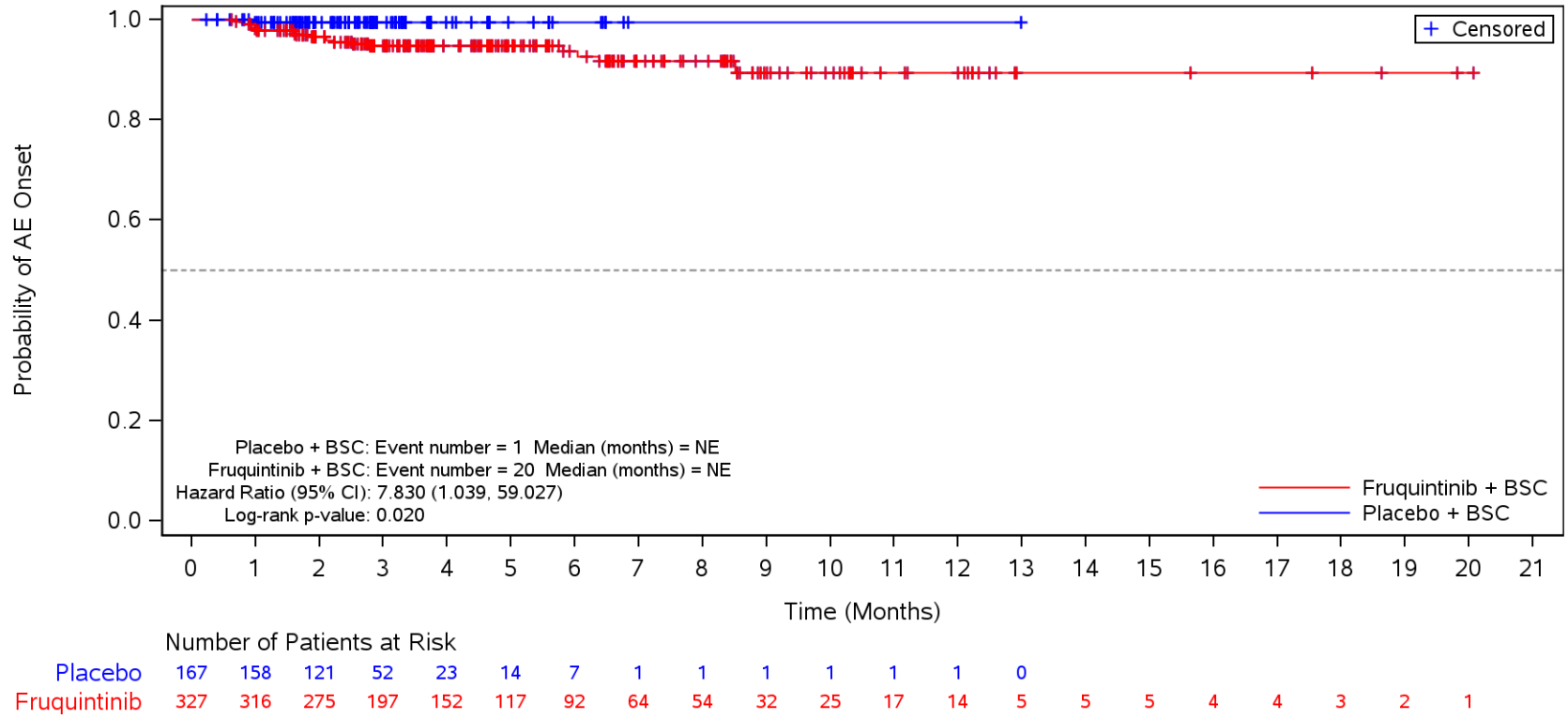
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
Europe



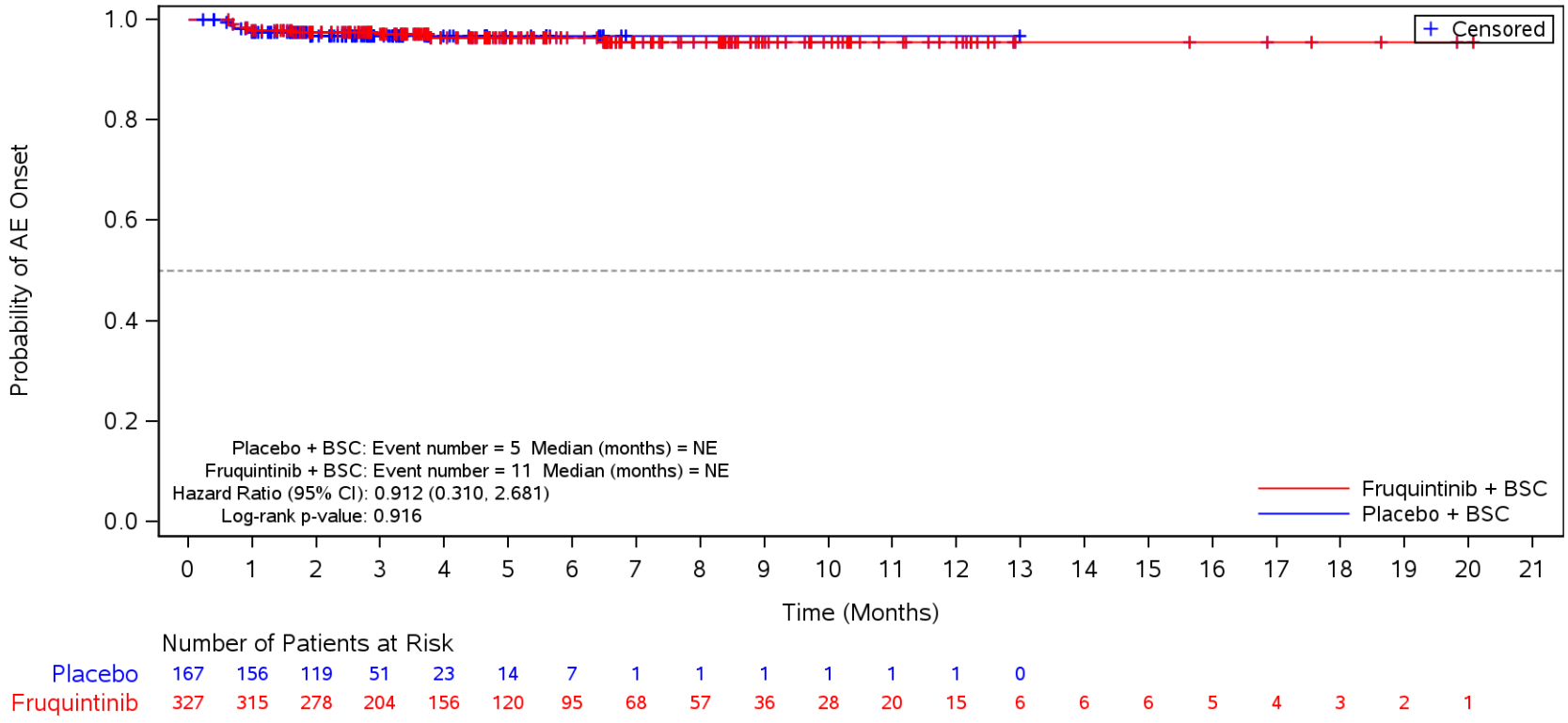
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
Europe



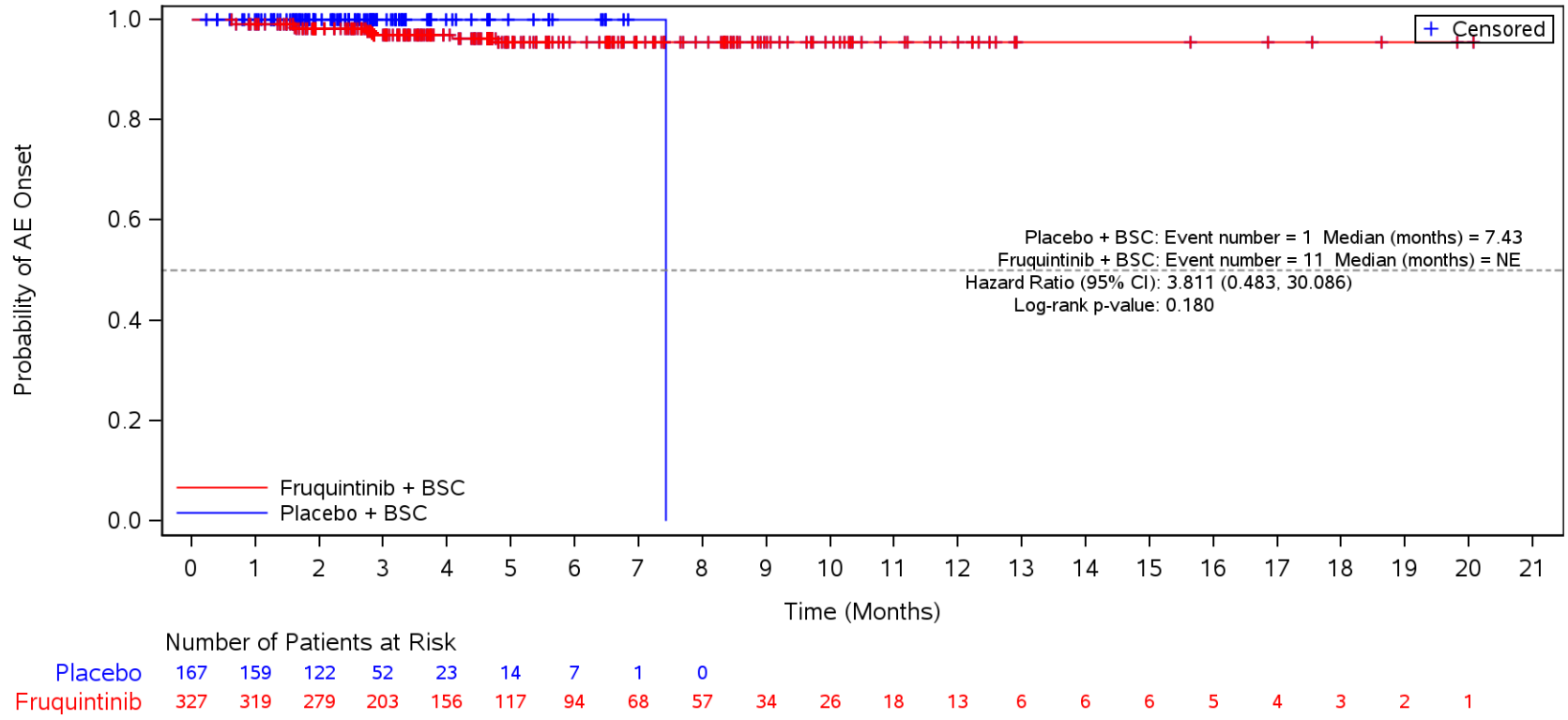
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
Europe



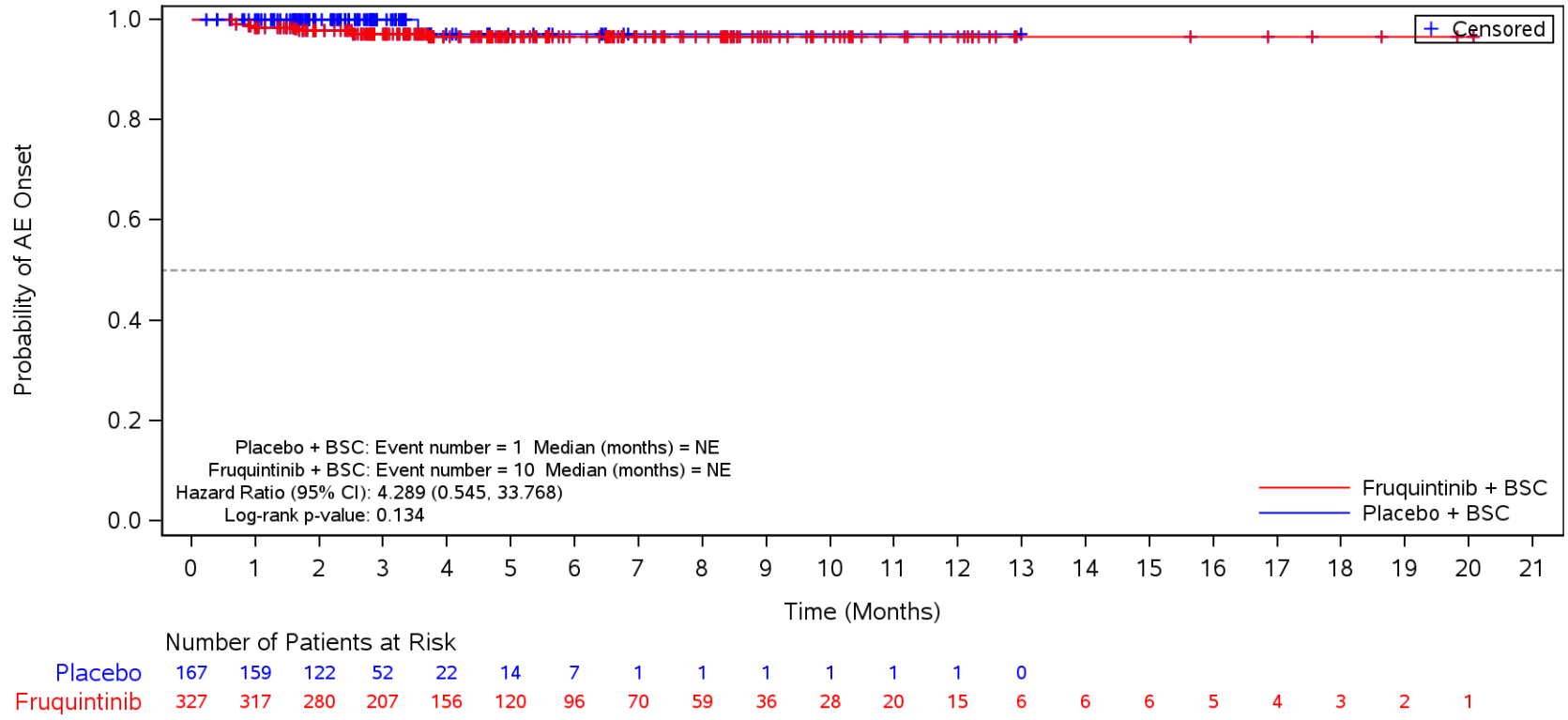
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
Europe



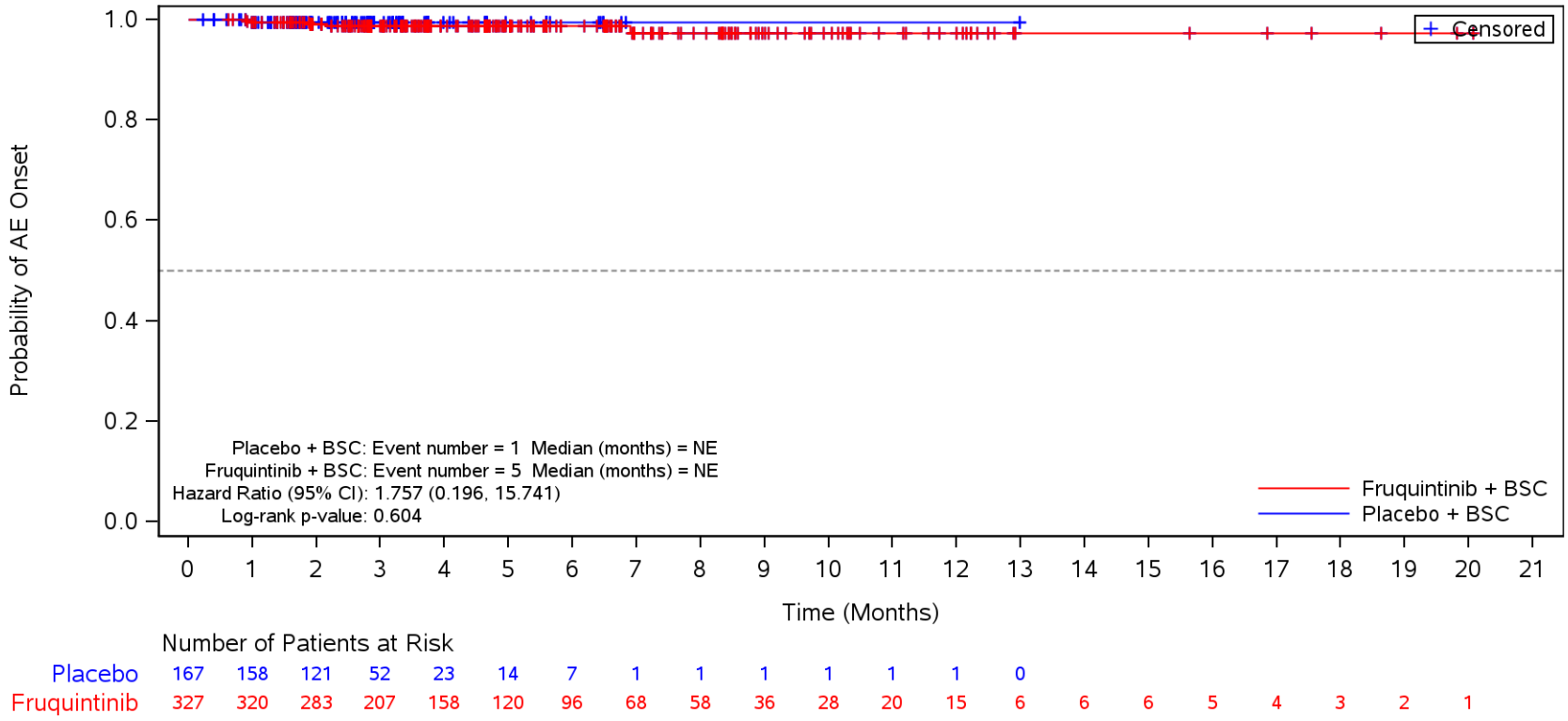
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
Europe



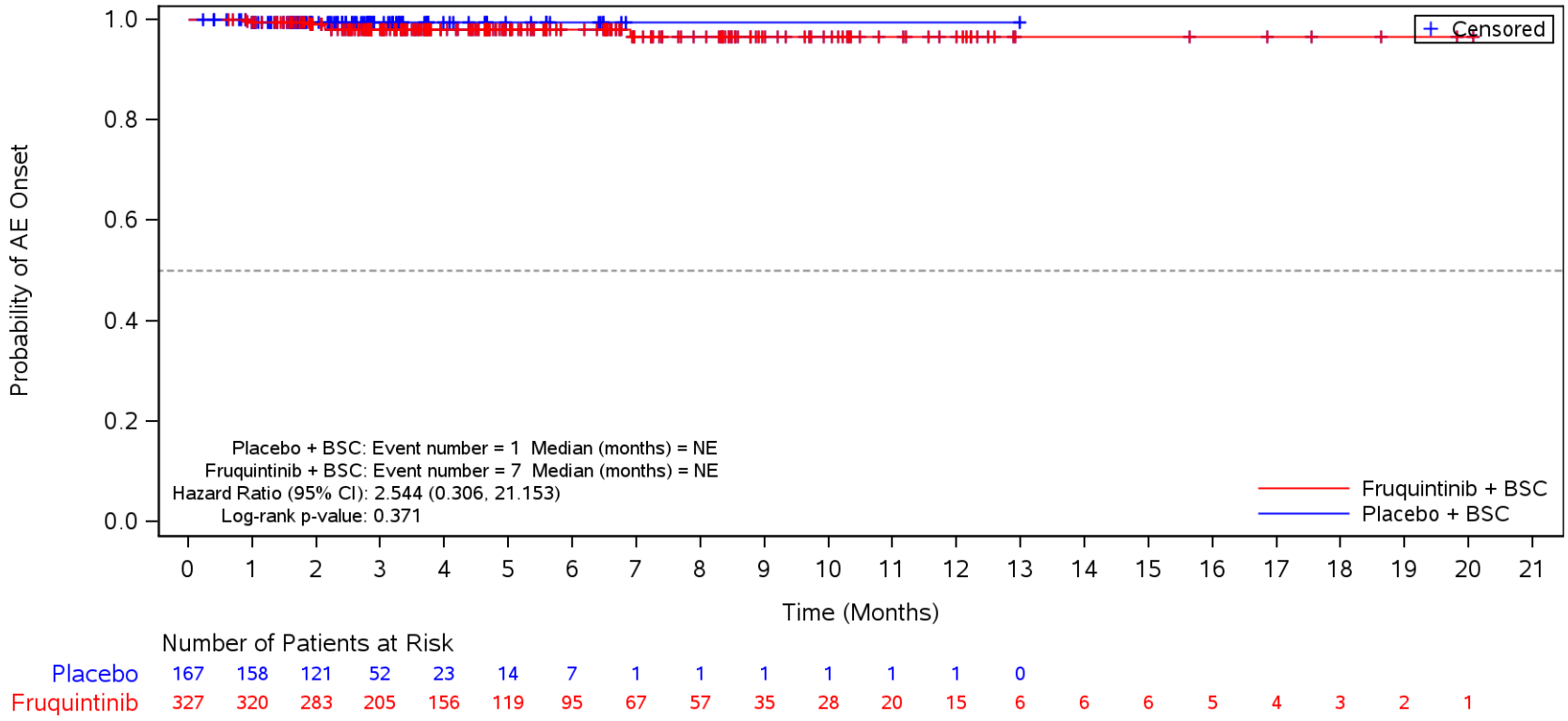
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
Europe



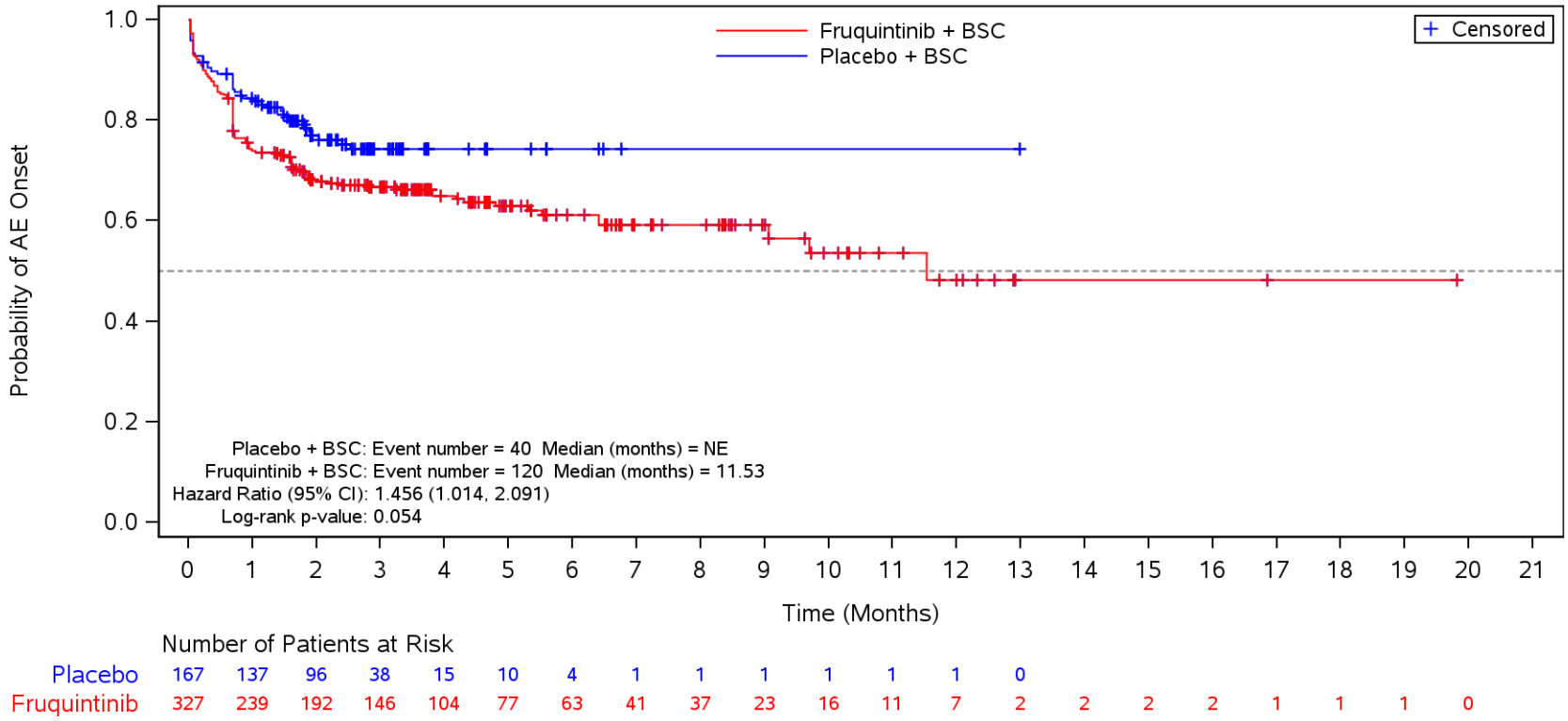
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
Europe



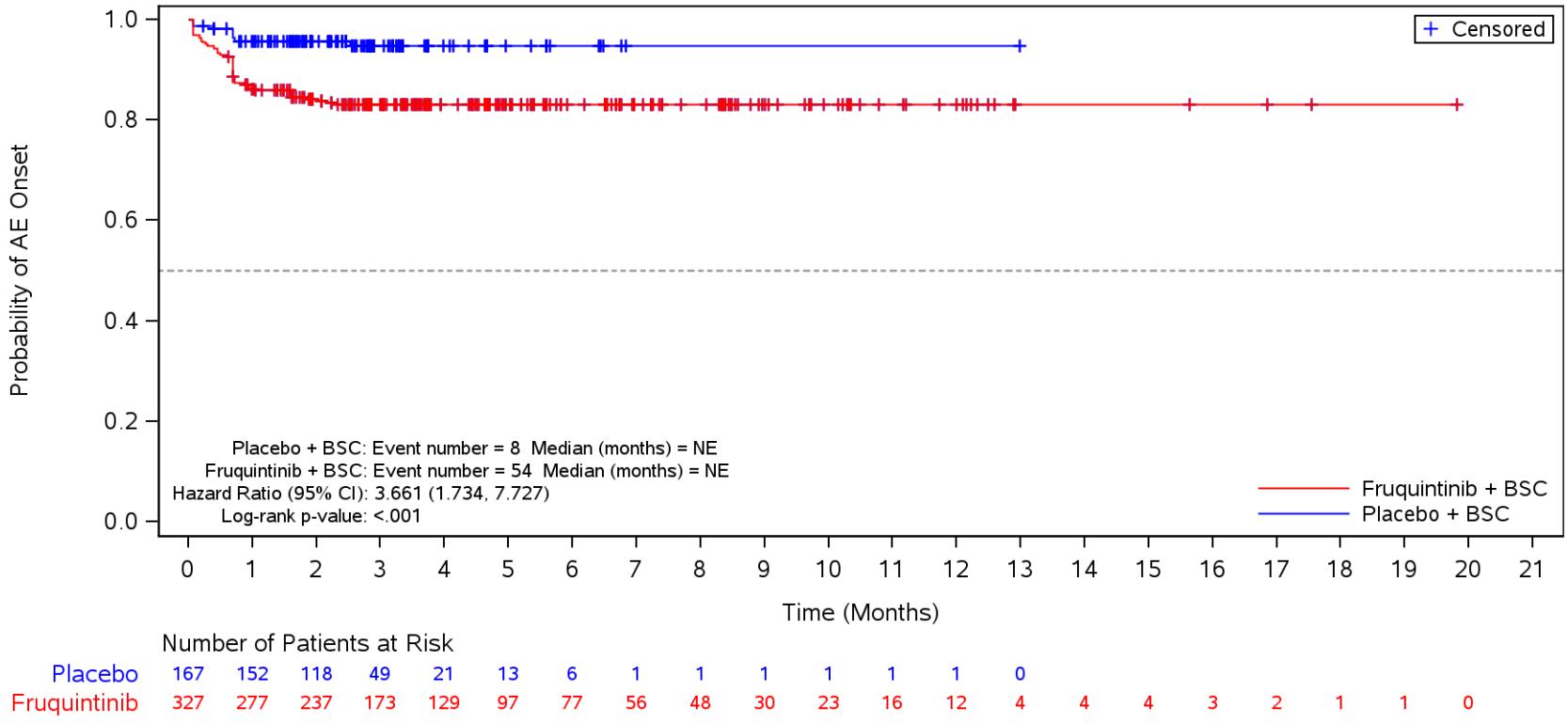
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
Europe



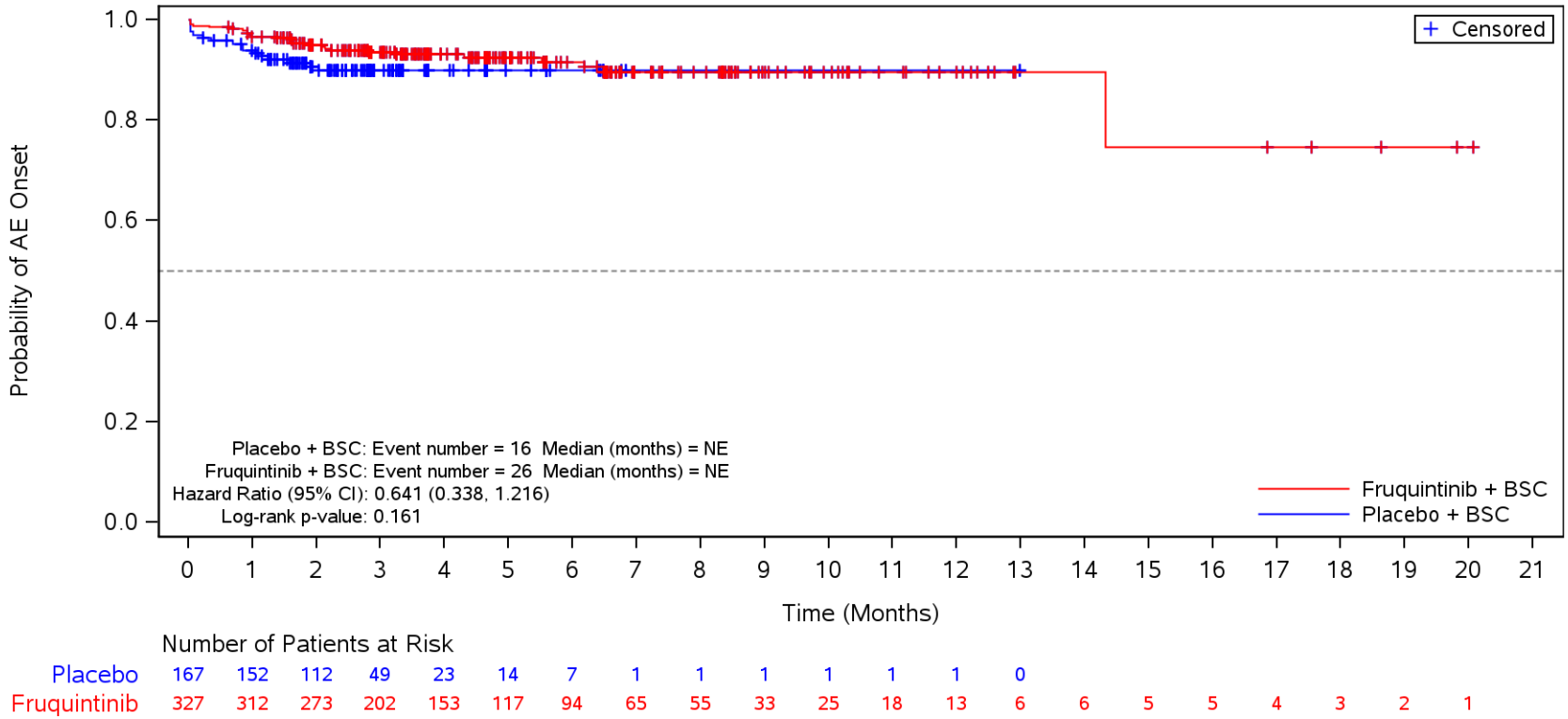
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
Europe



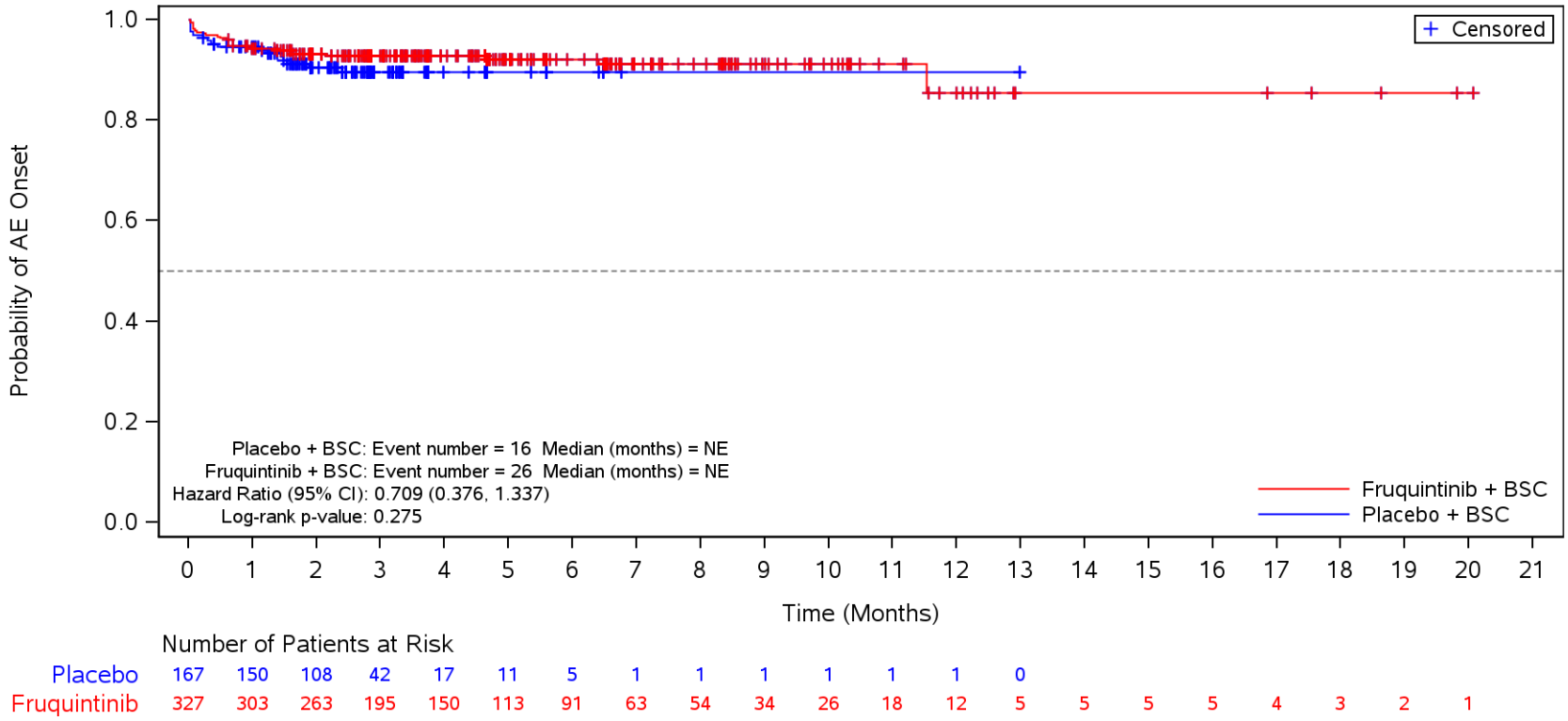
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
Europe



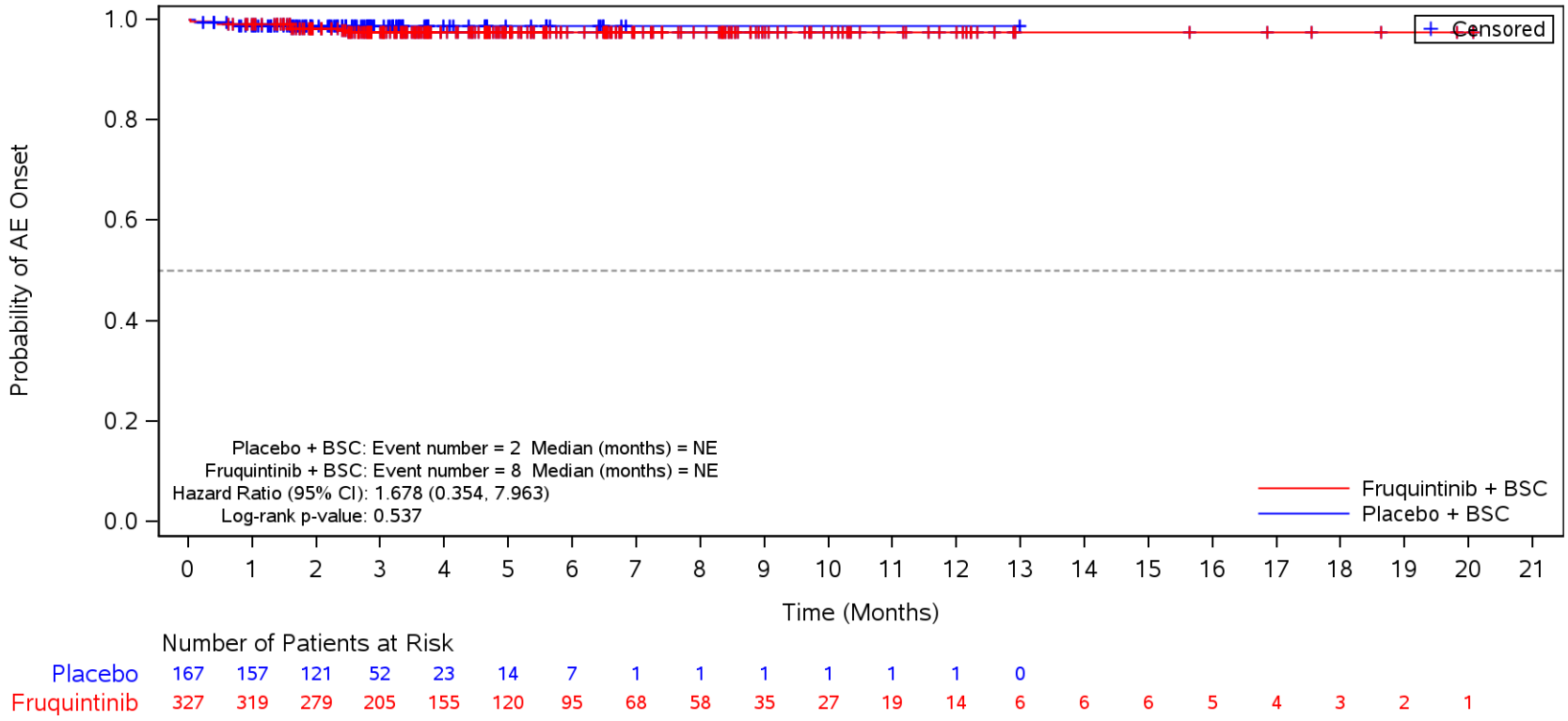
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
Europe



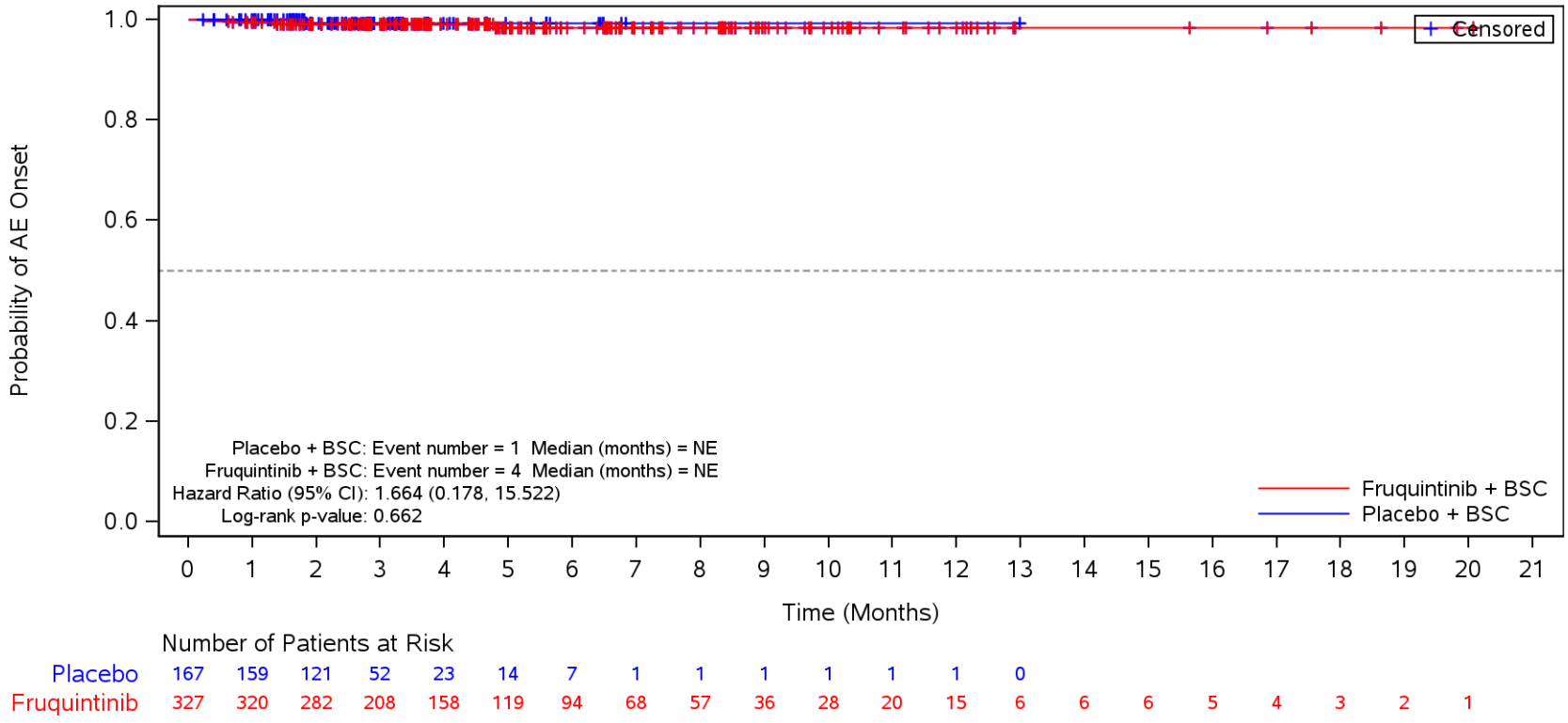
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
Europe



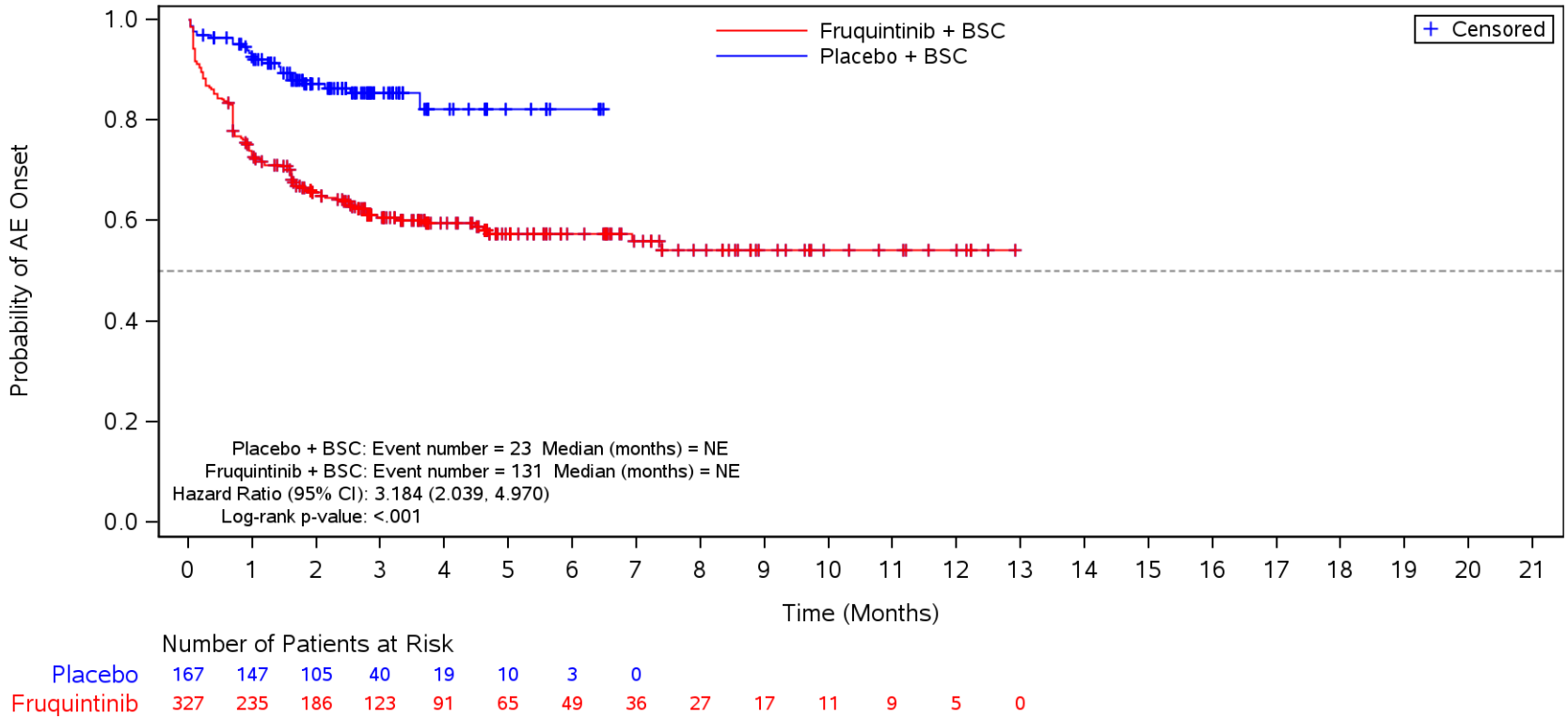
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
Europe



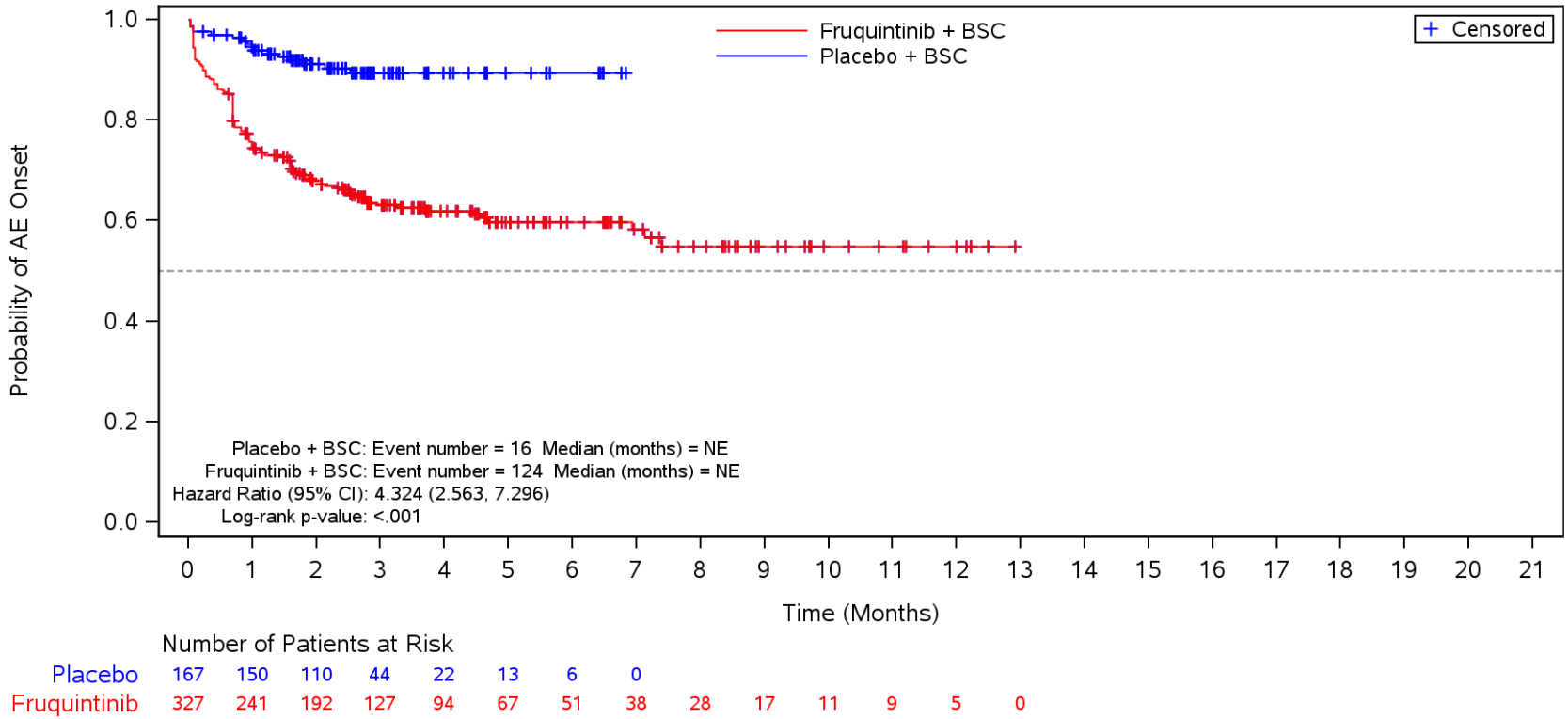
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Vascular disorders**
Europe



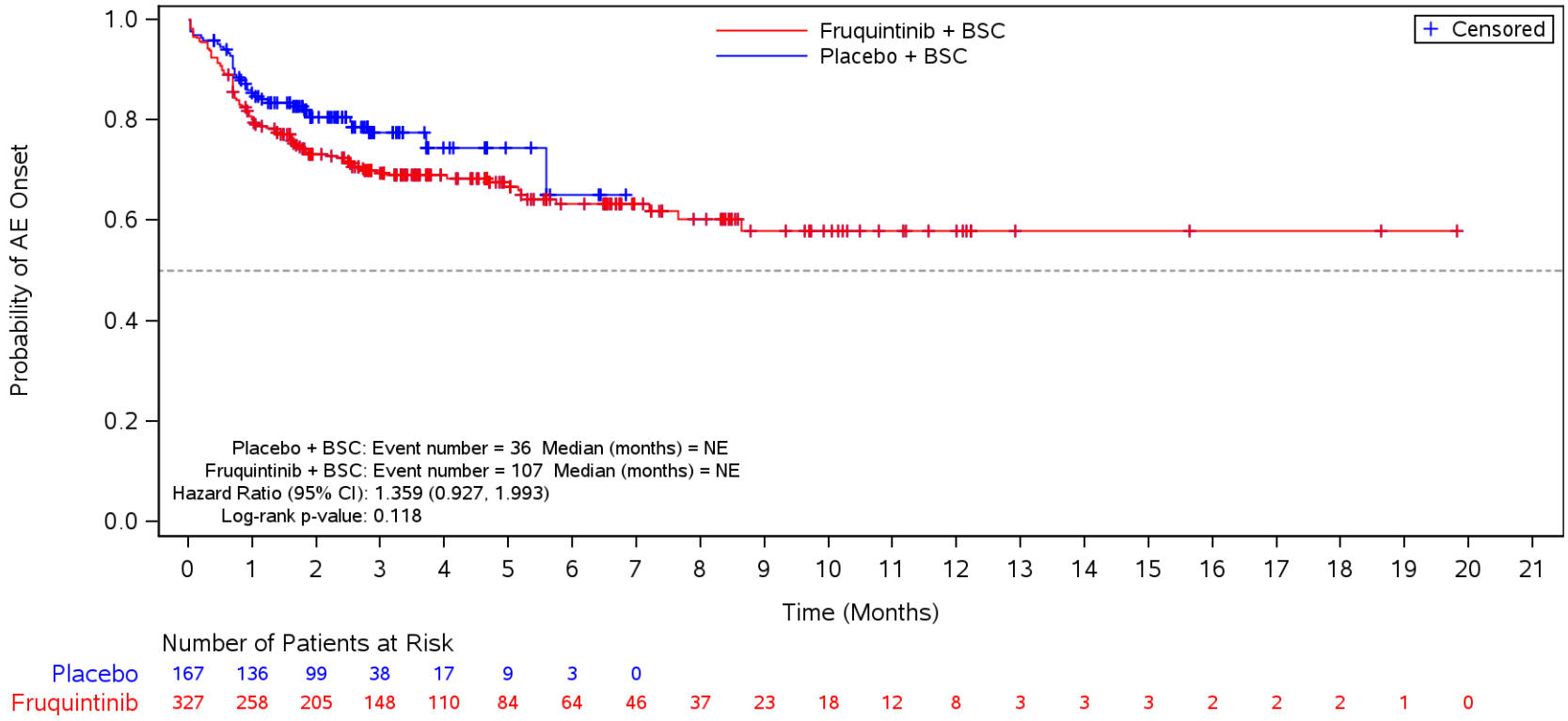
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Europe



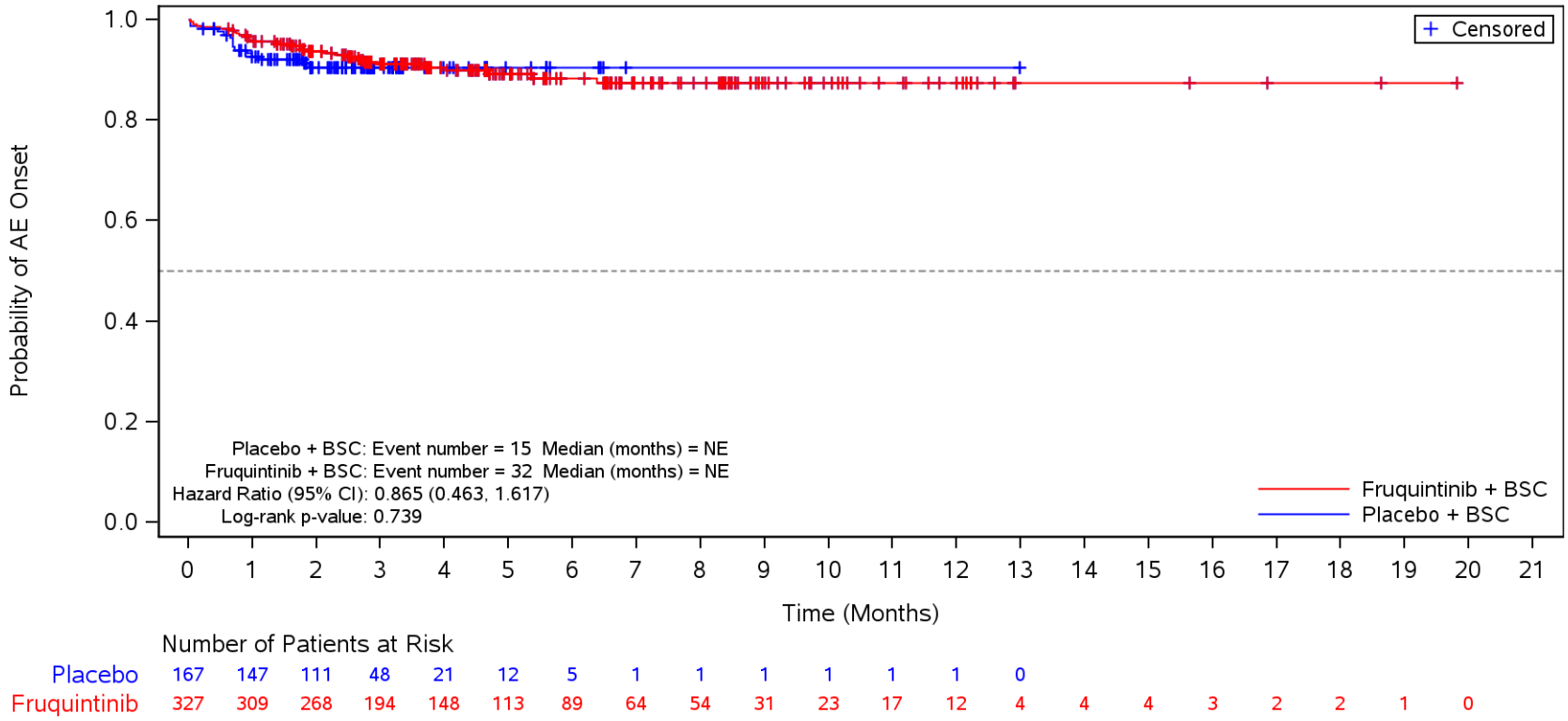
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
Europe



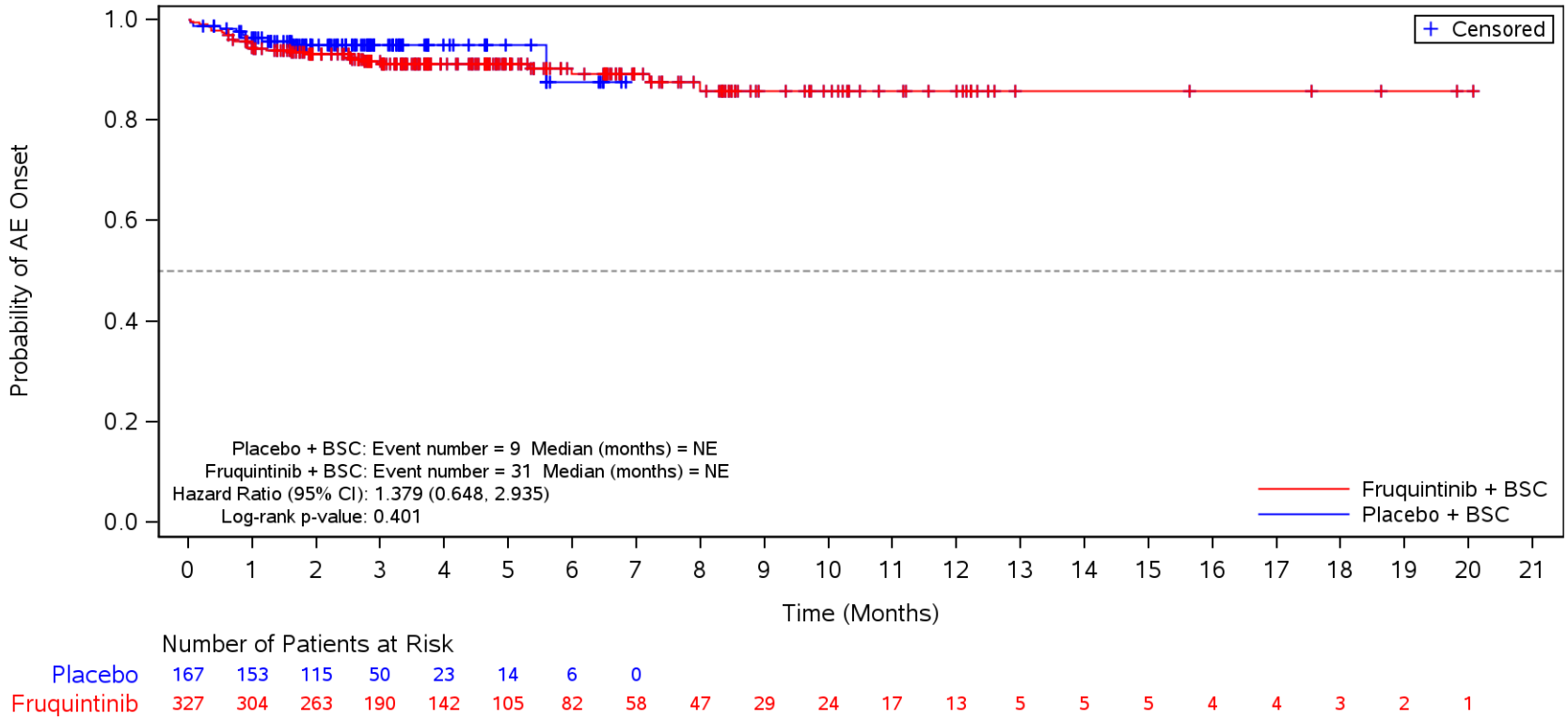
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
Europe



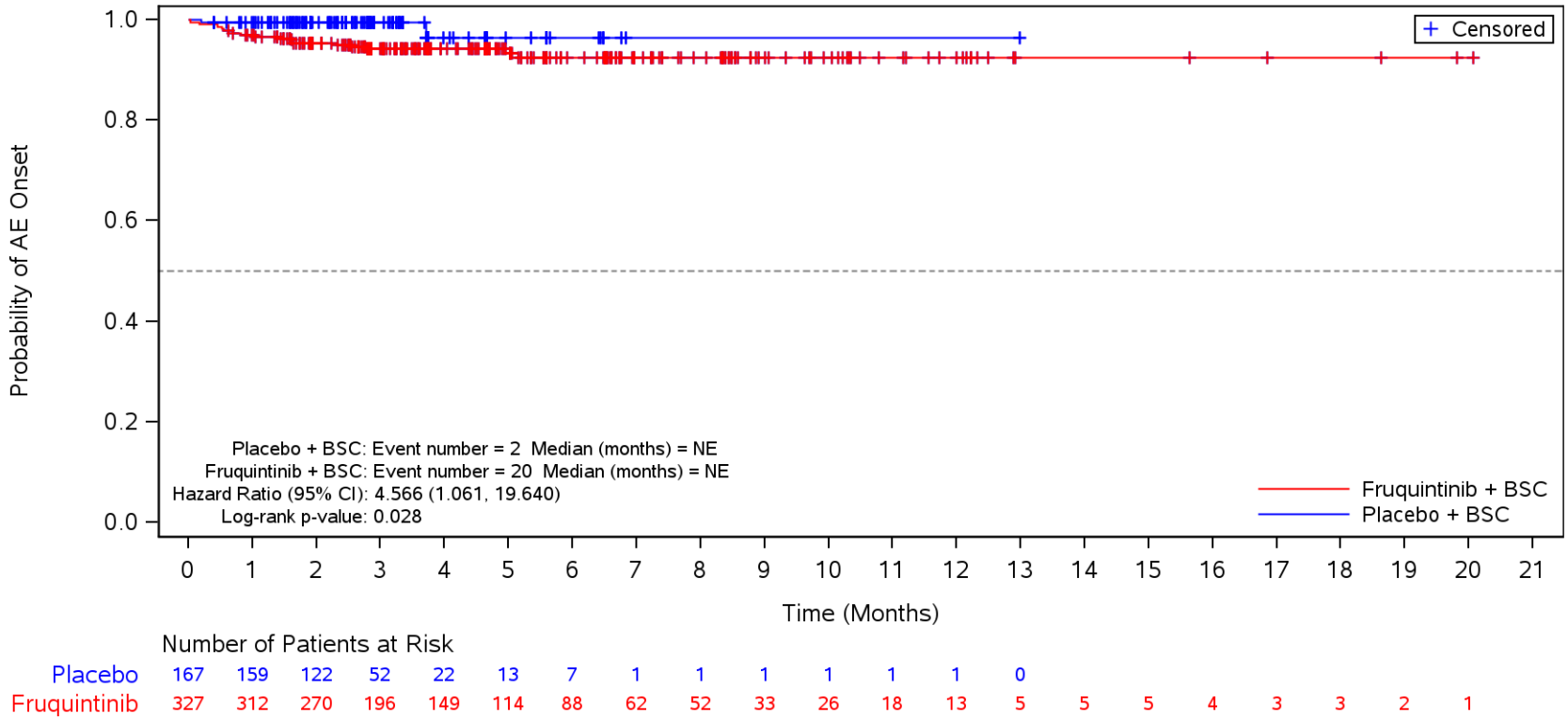
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
Europe



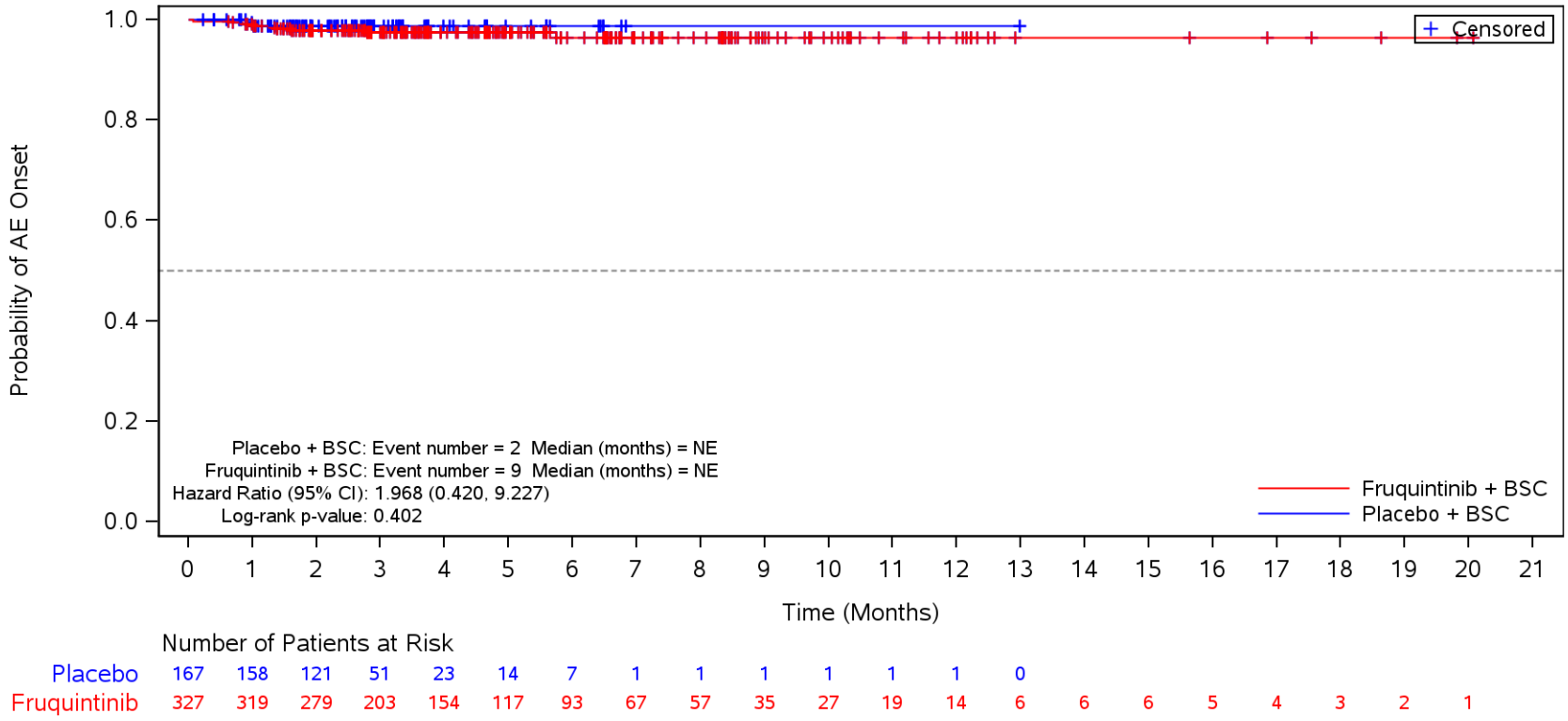
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
Europe



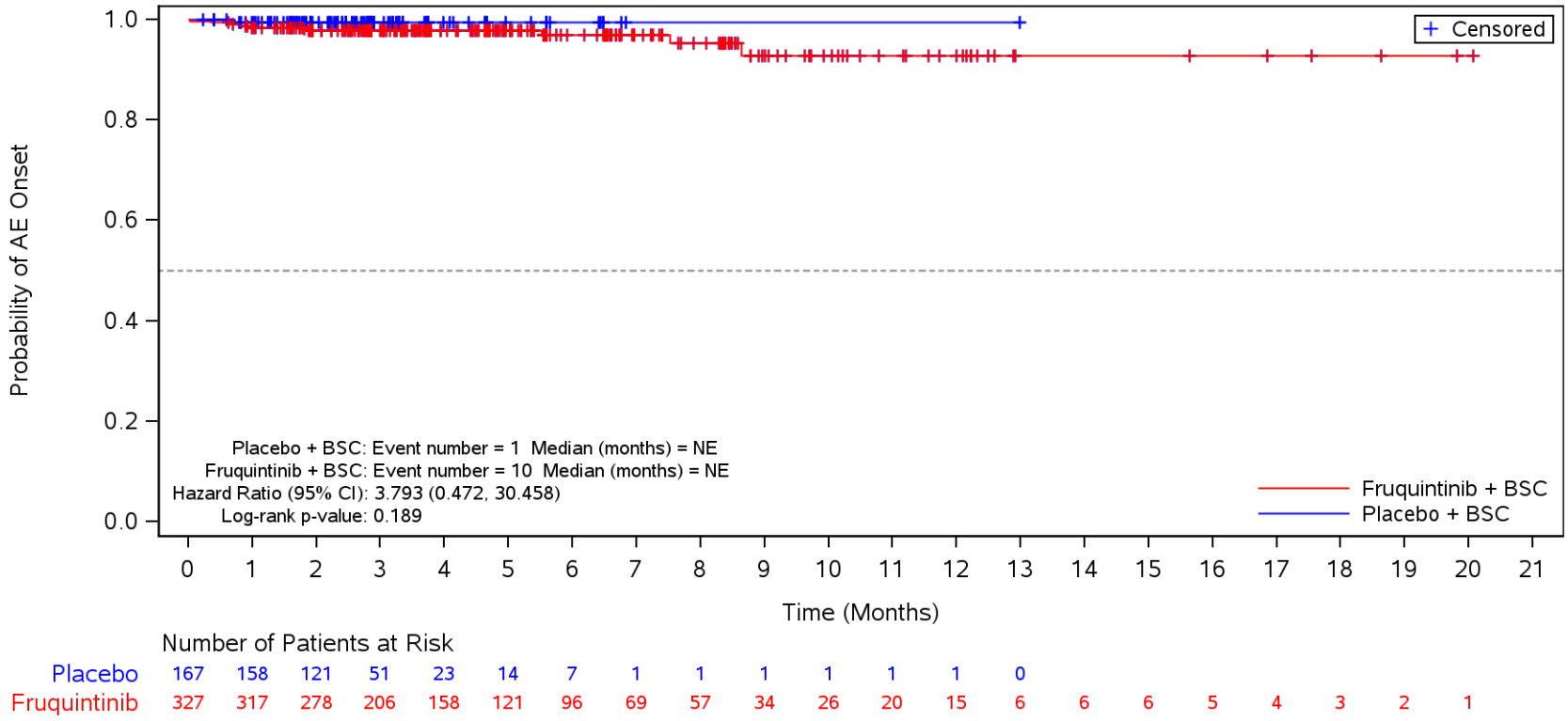
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
Europe



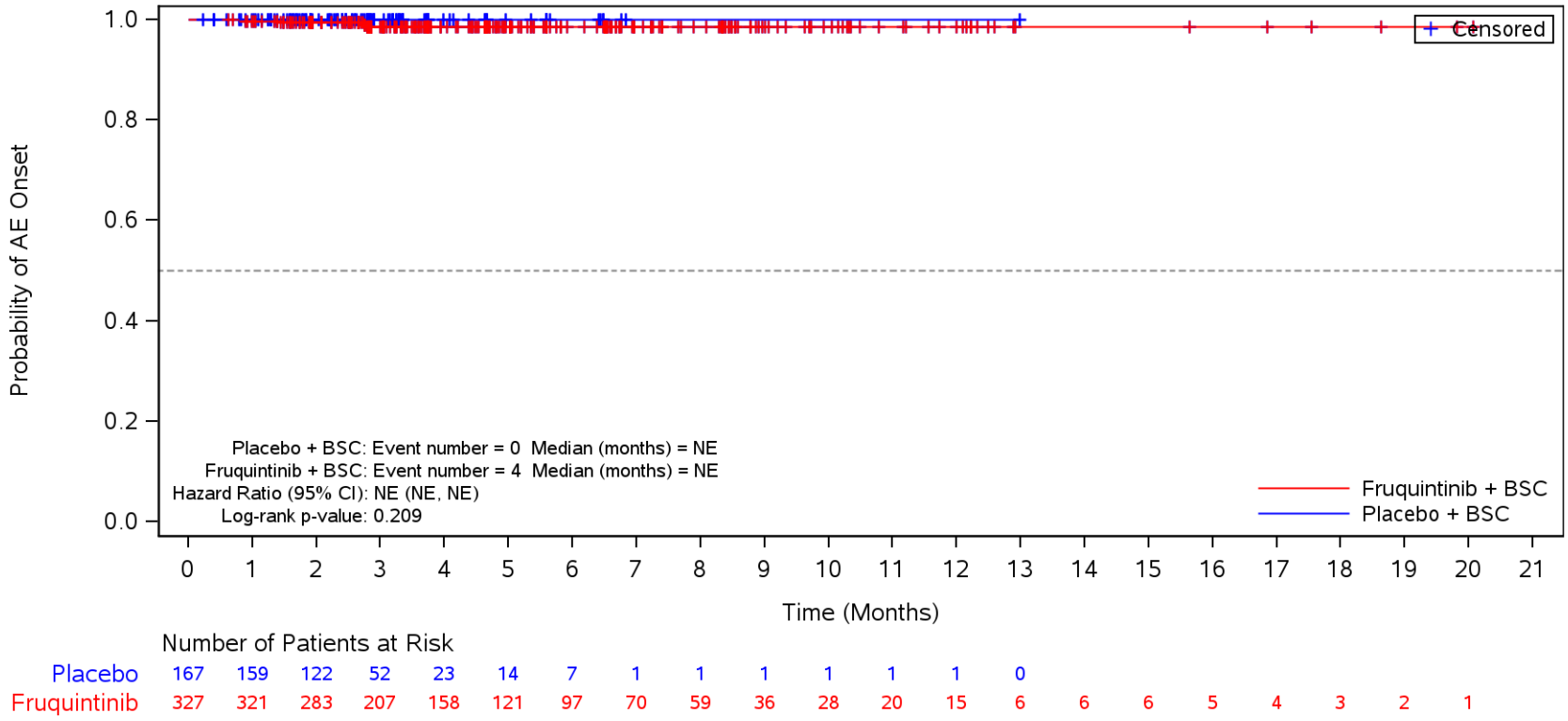
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
Europe



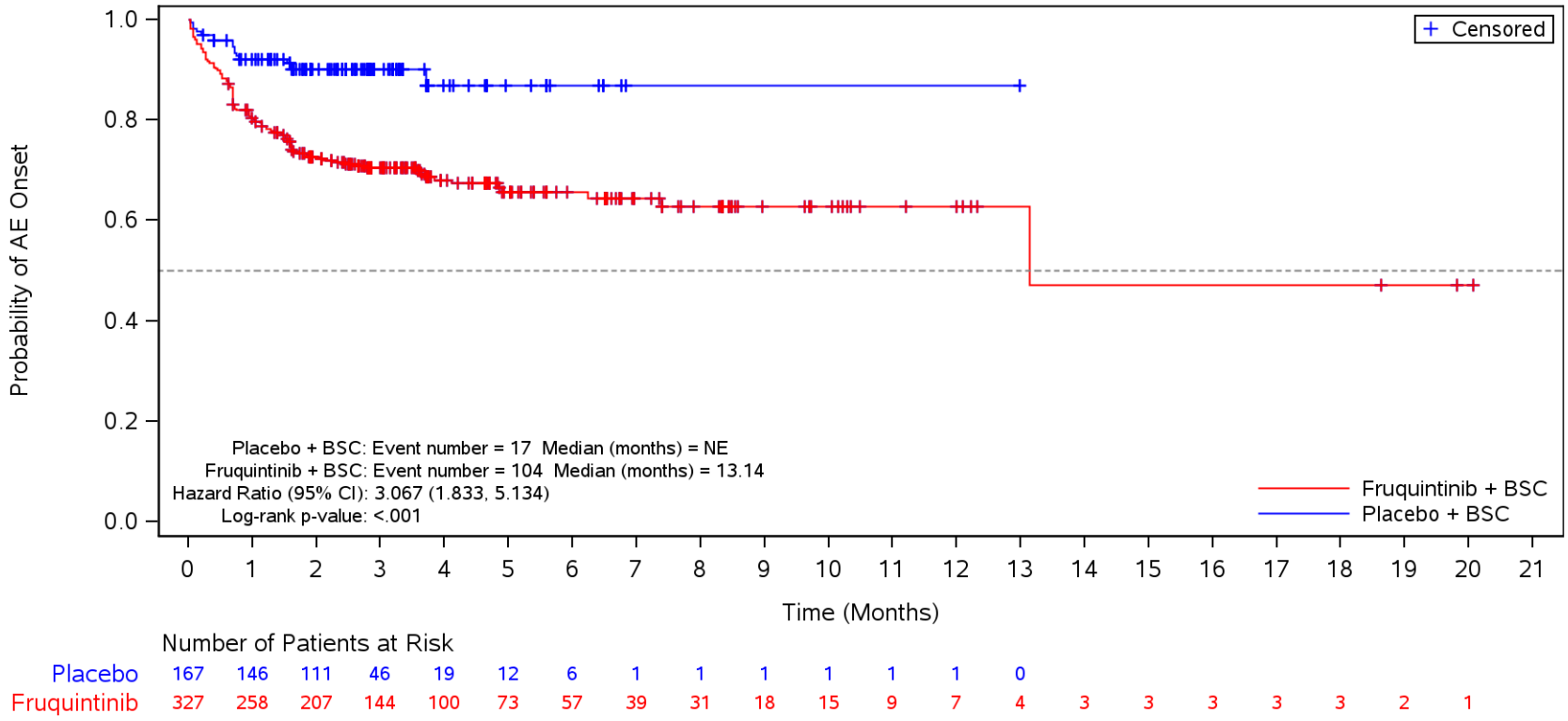
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
Europe



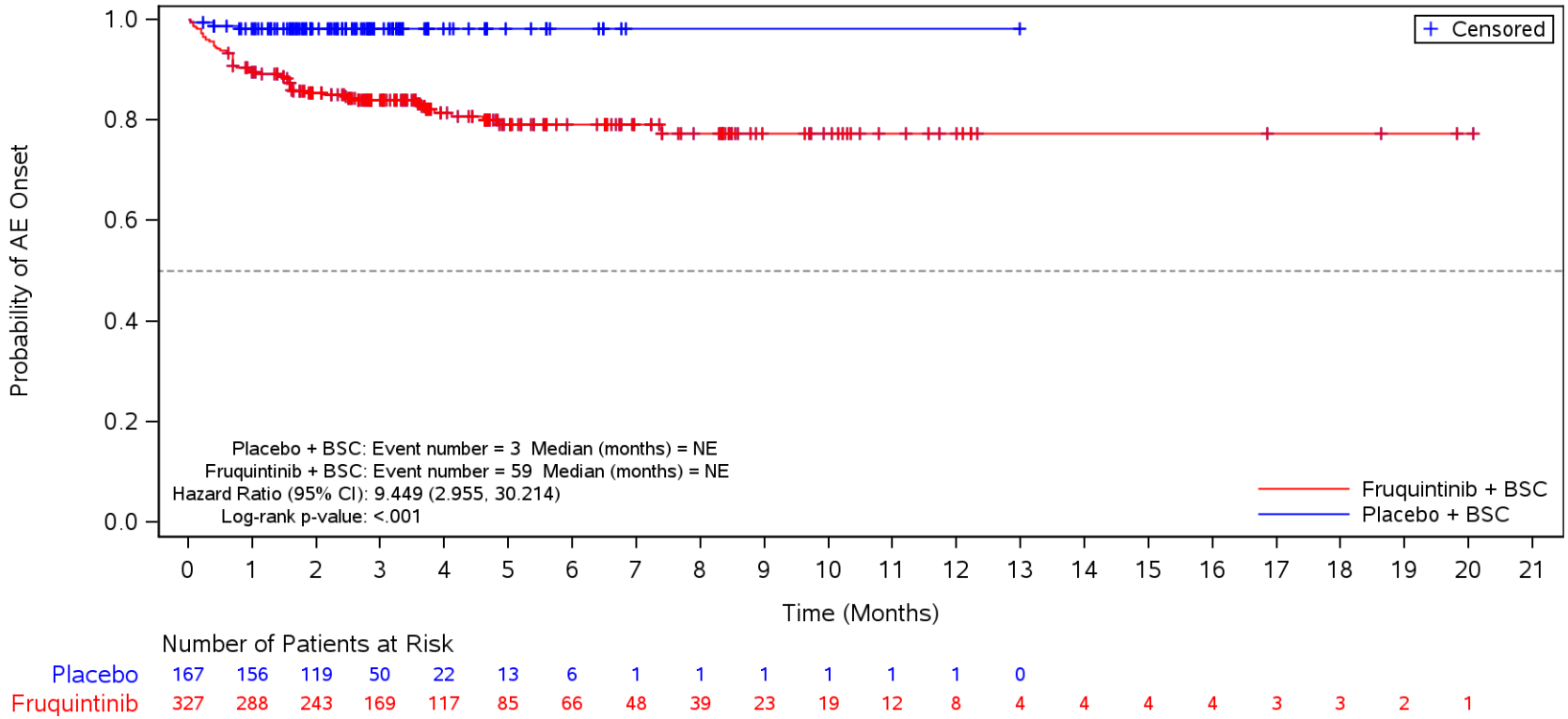
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
Europe



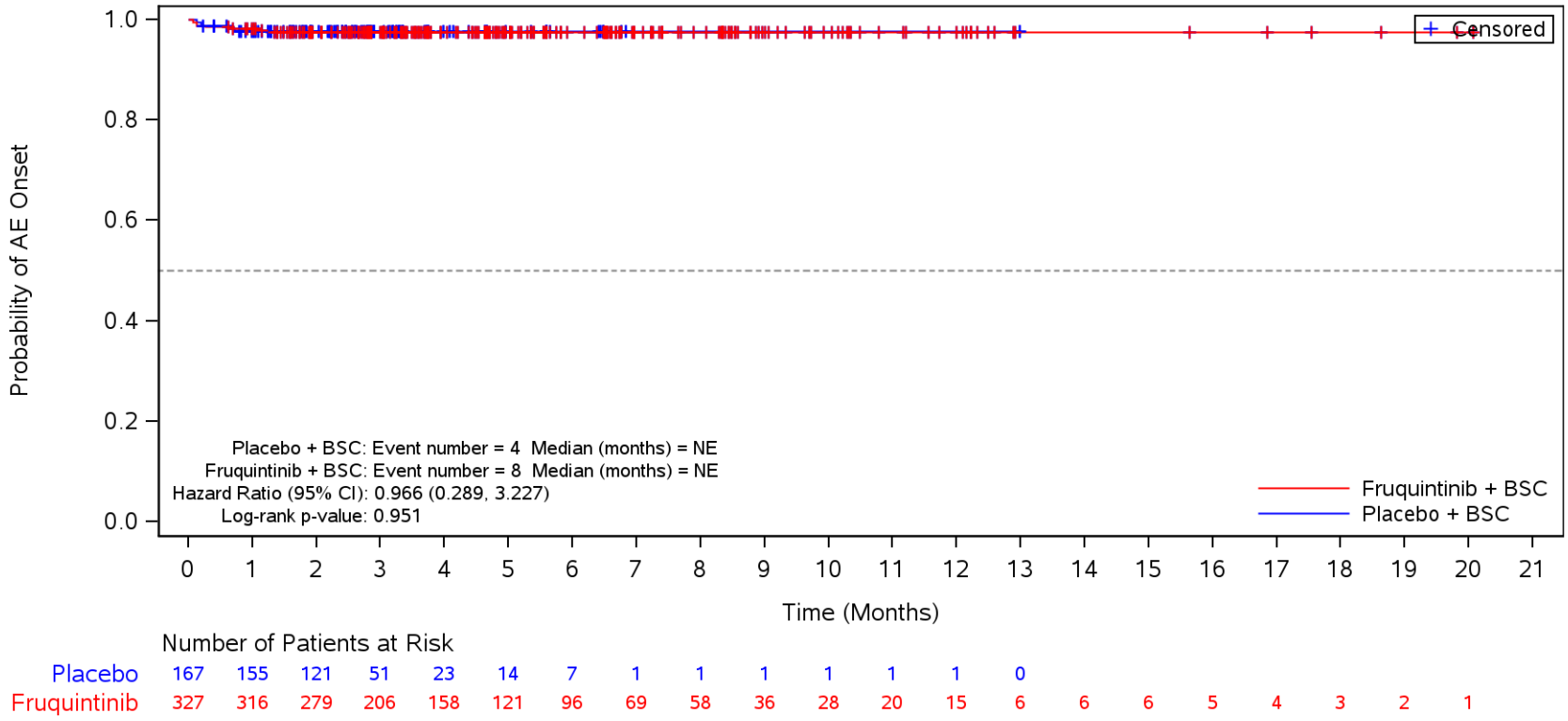
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Europe



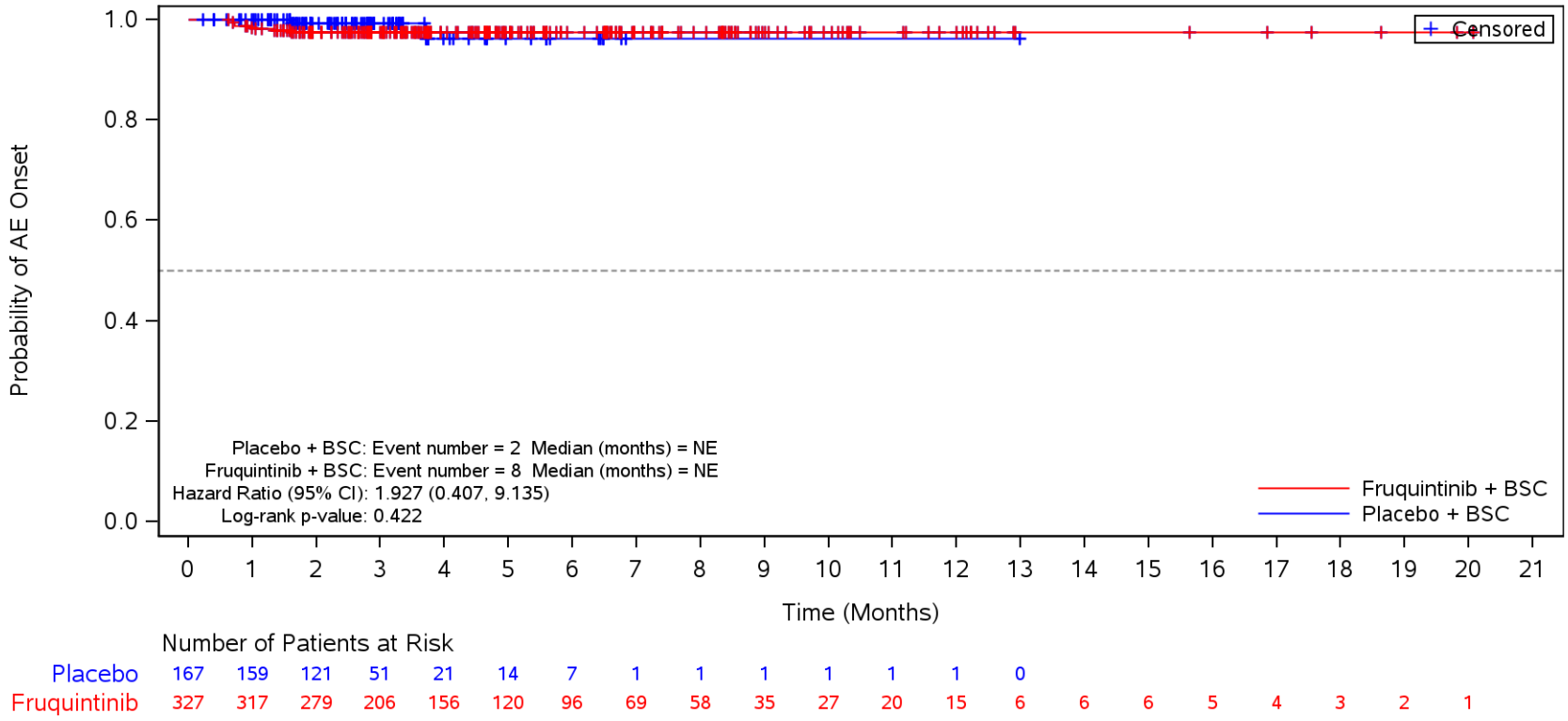
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
Europe



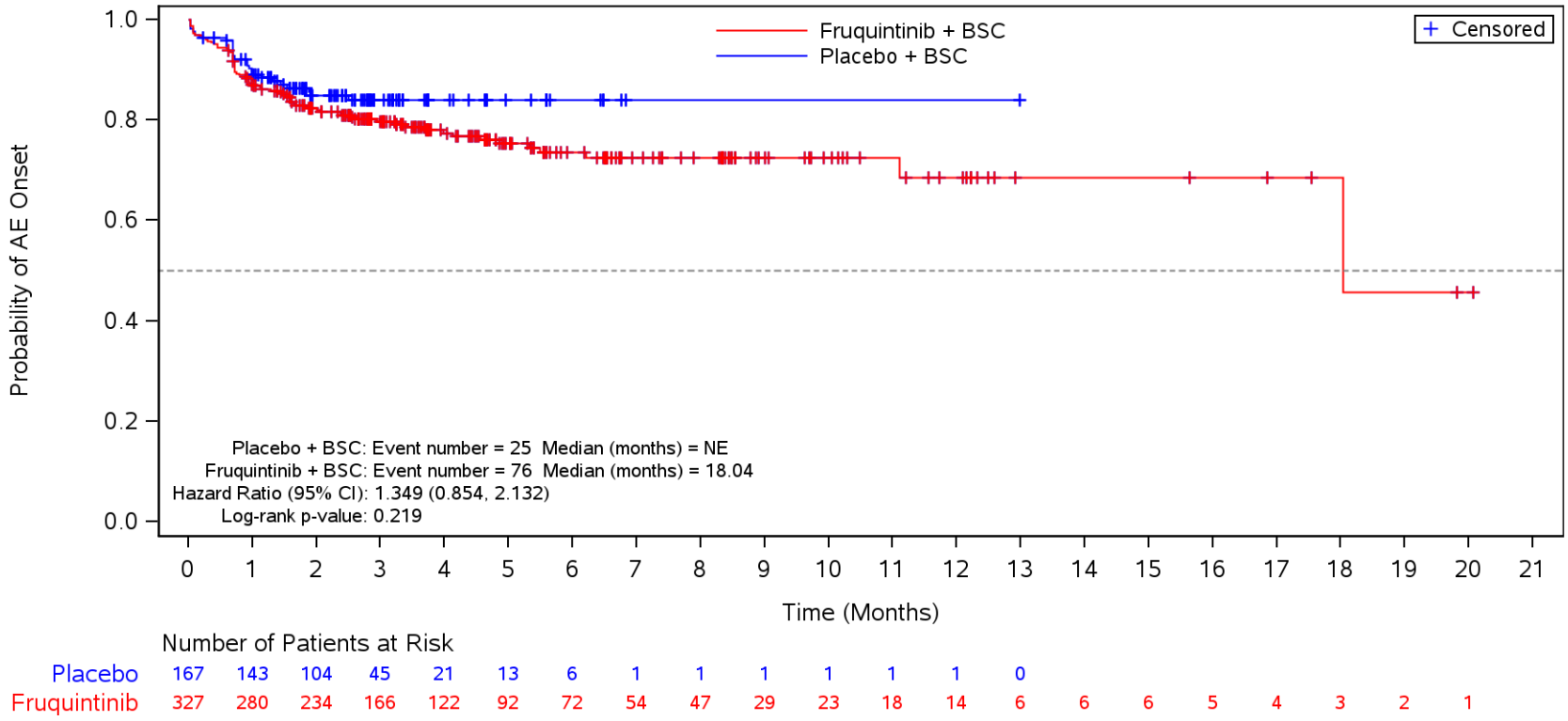
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
Europe



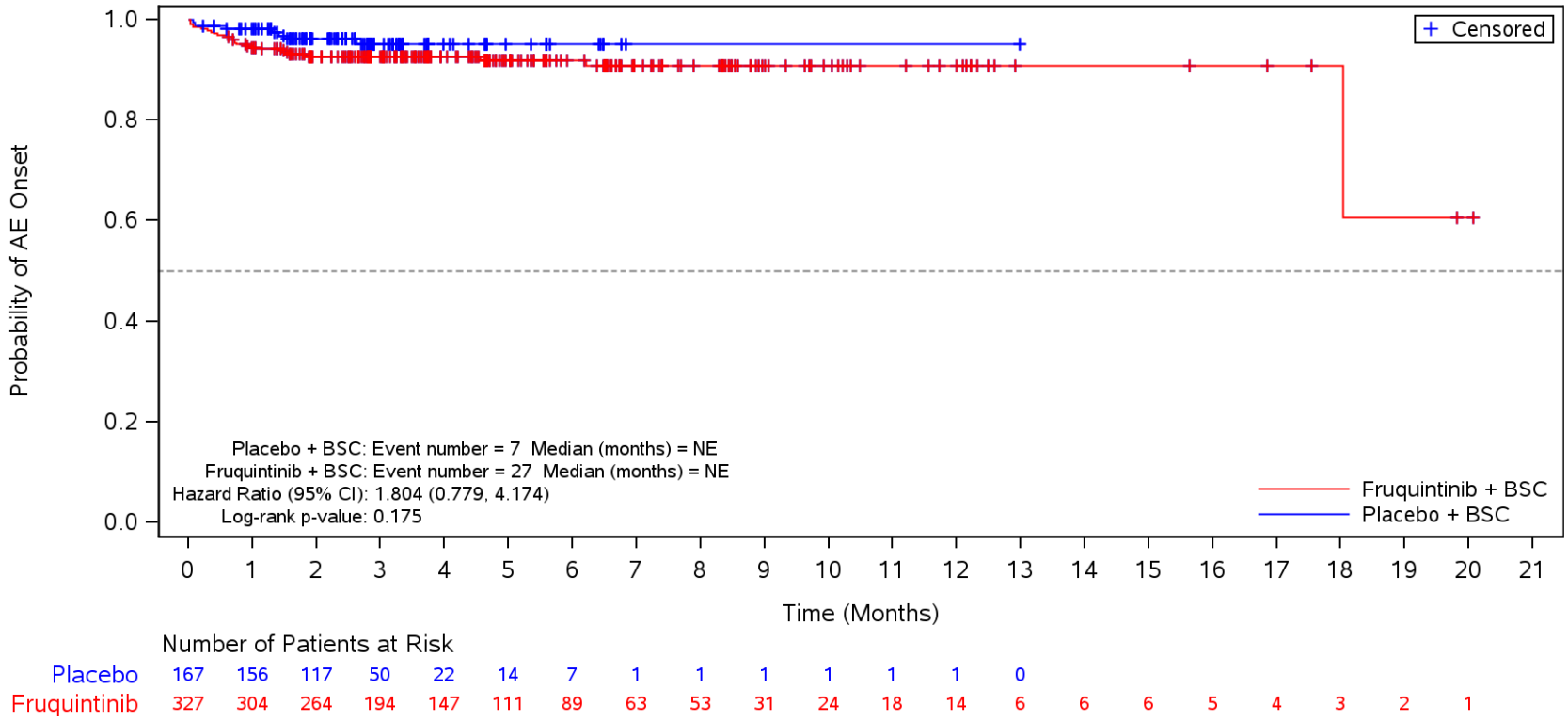
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders**
Europe



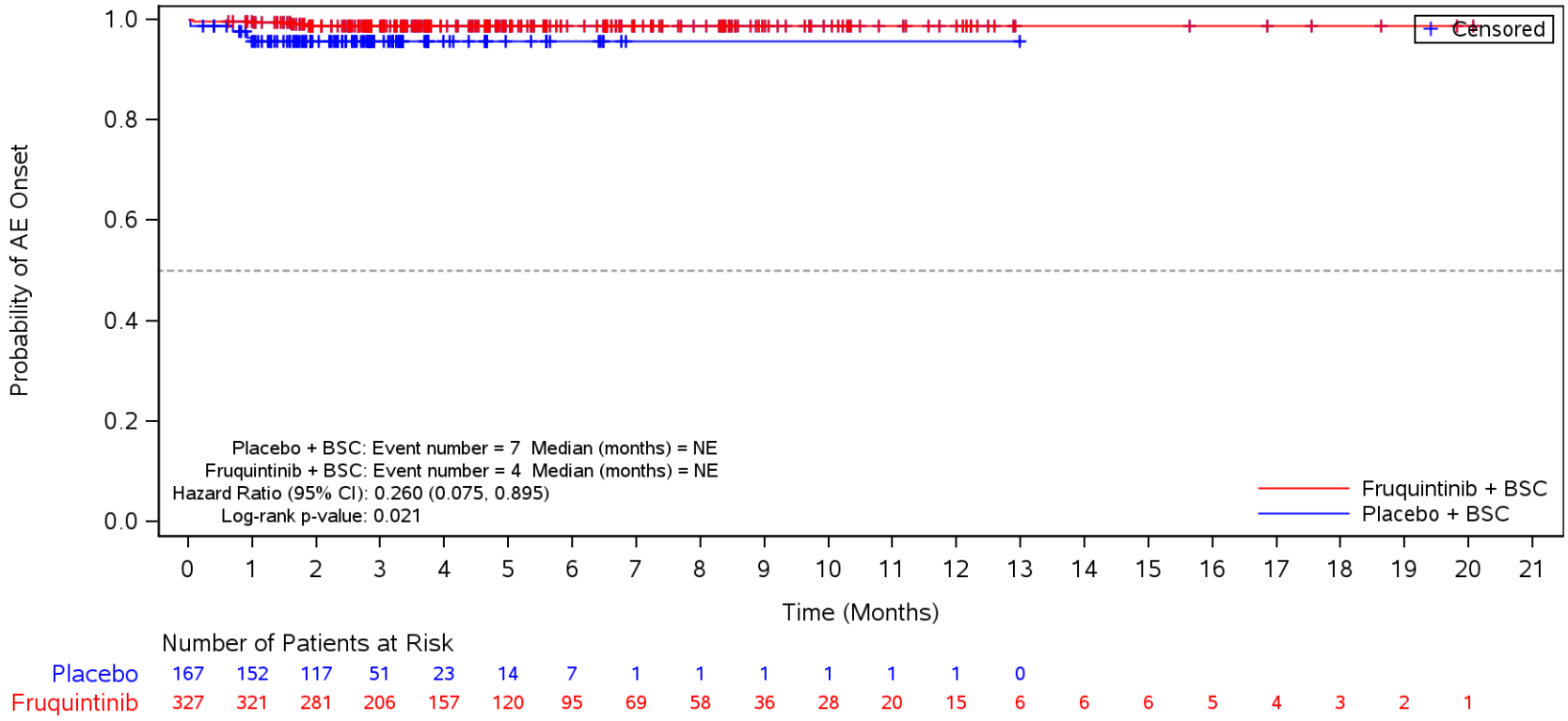
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
Europe



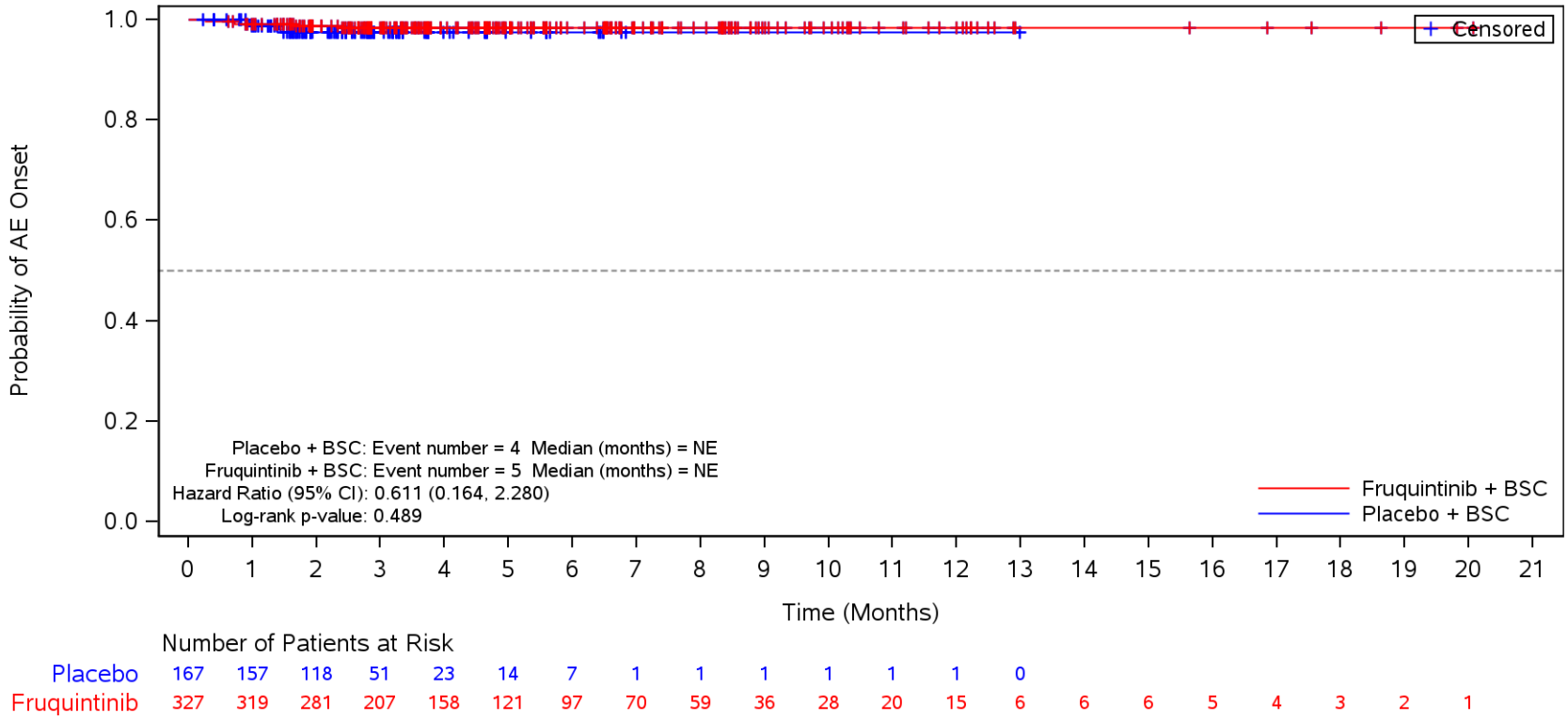
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
Europe



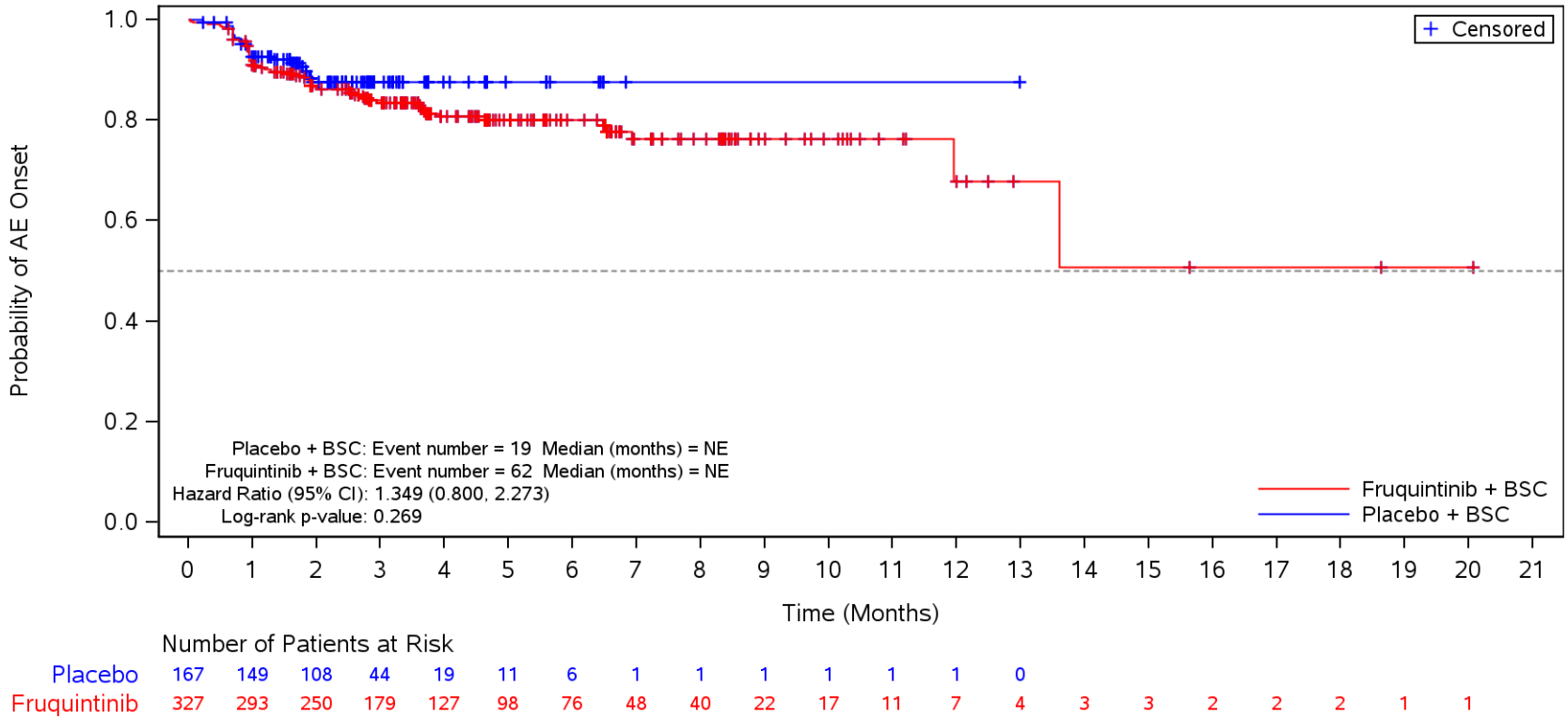
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
Europe



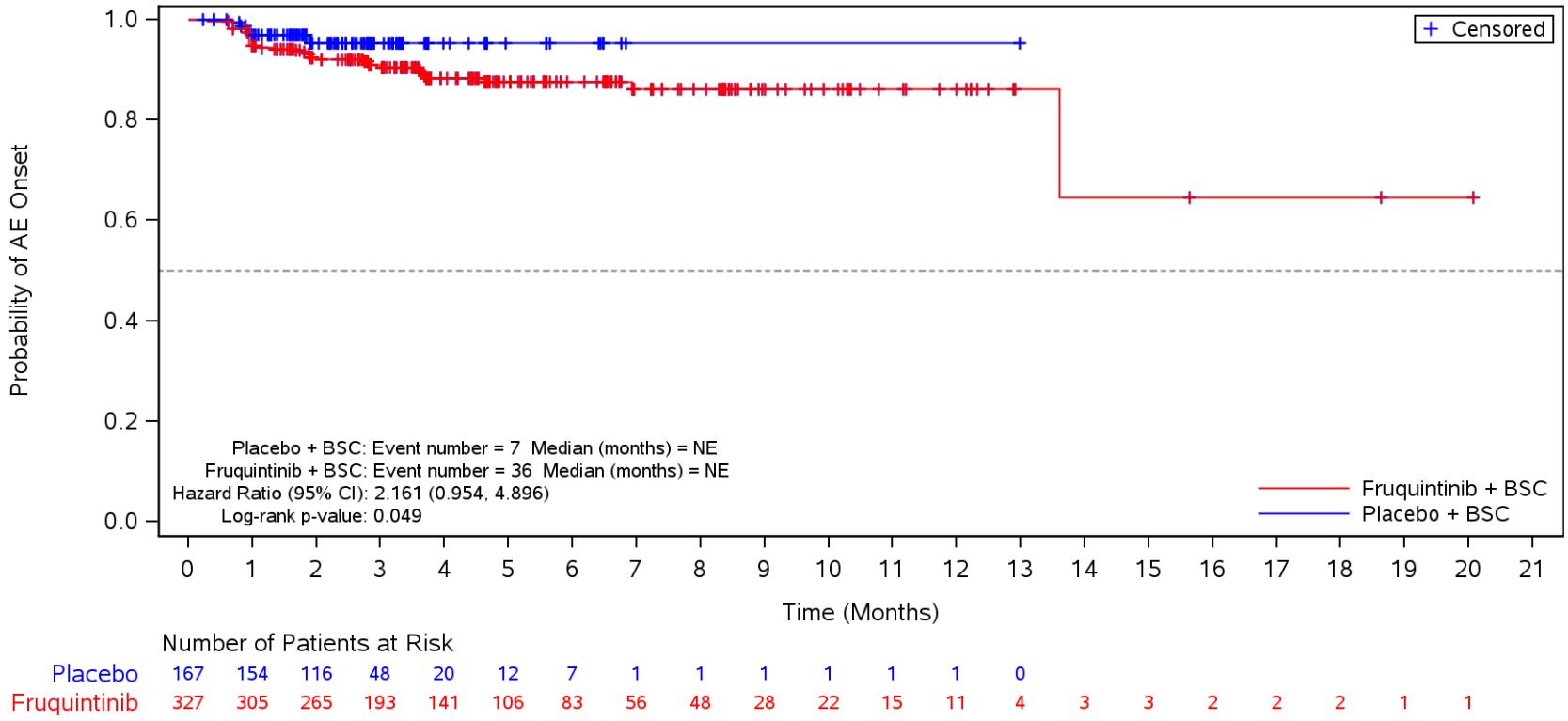
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
Europe



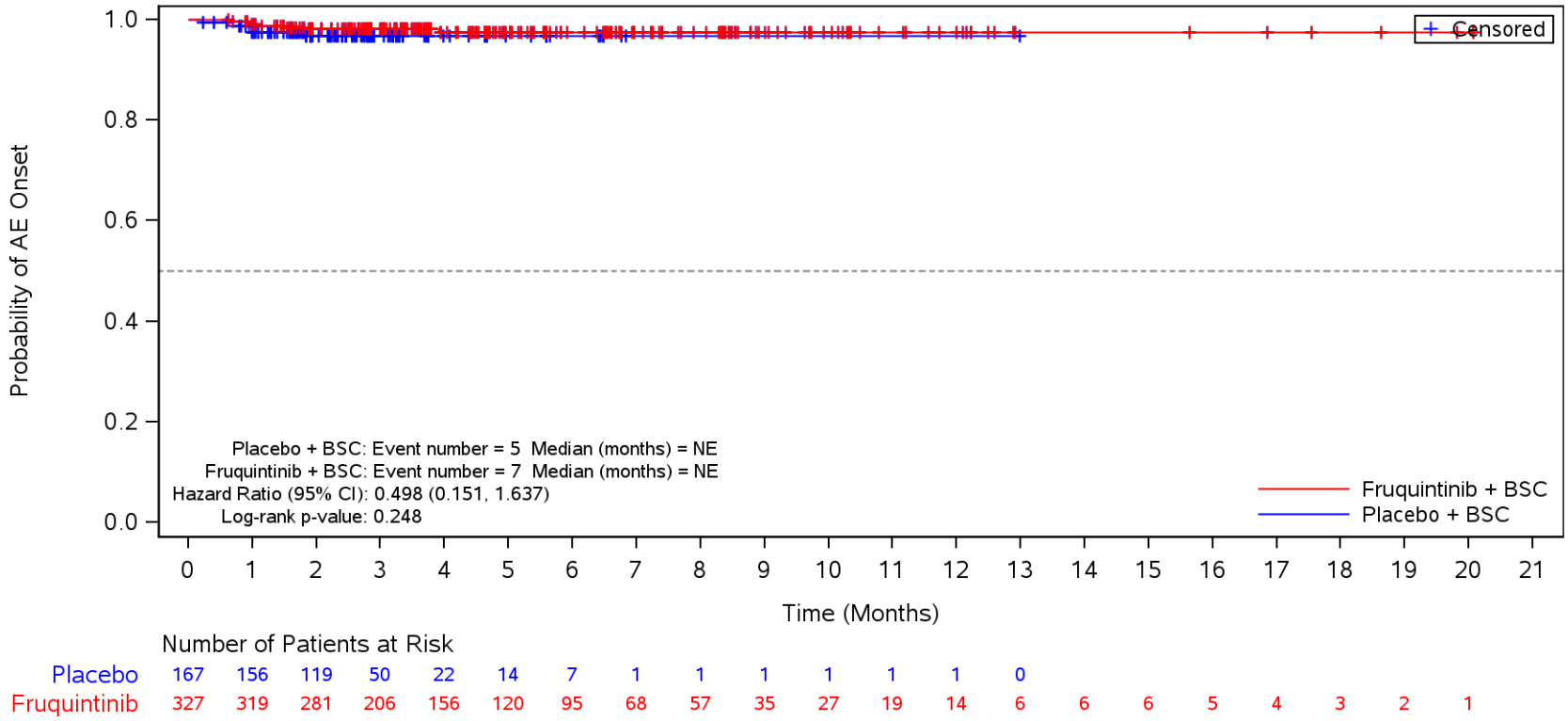
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
Europe



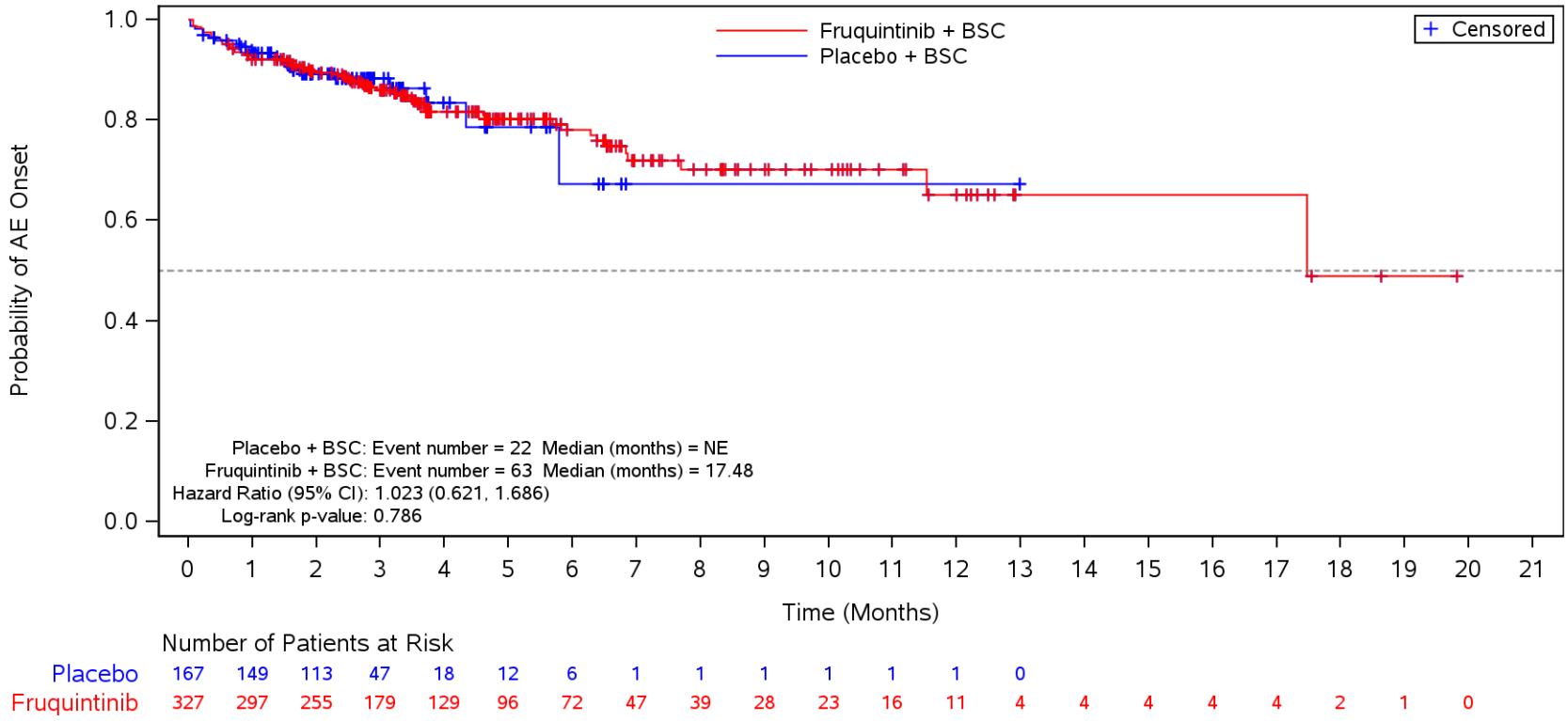
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**
Europe



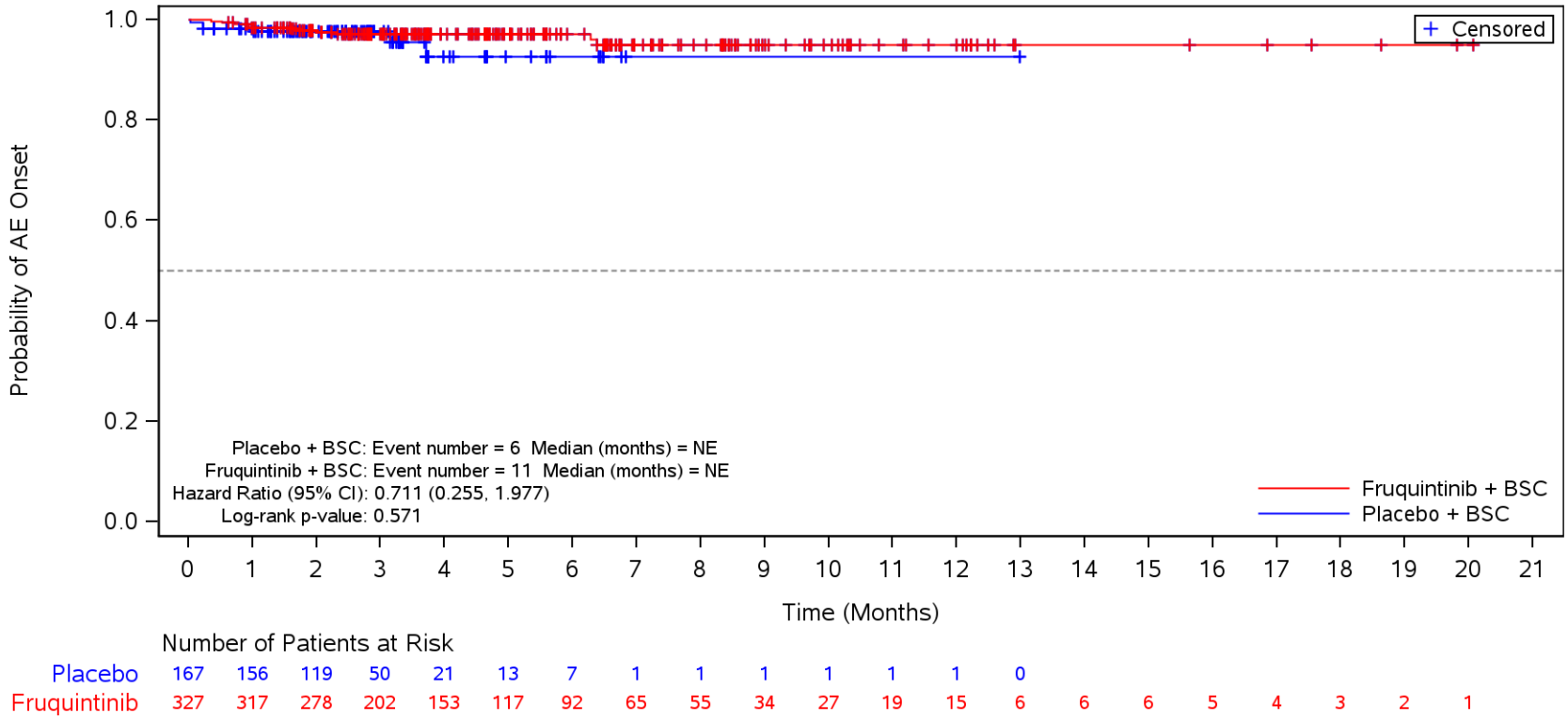
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations**
Europe



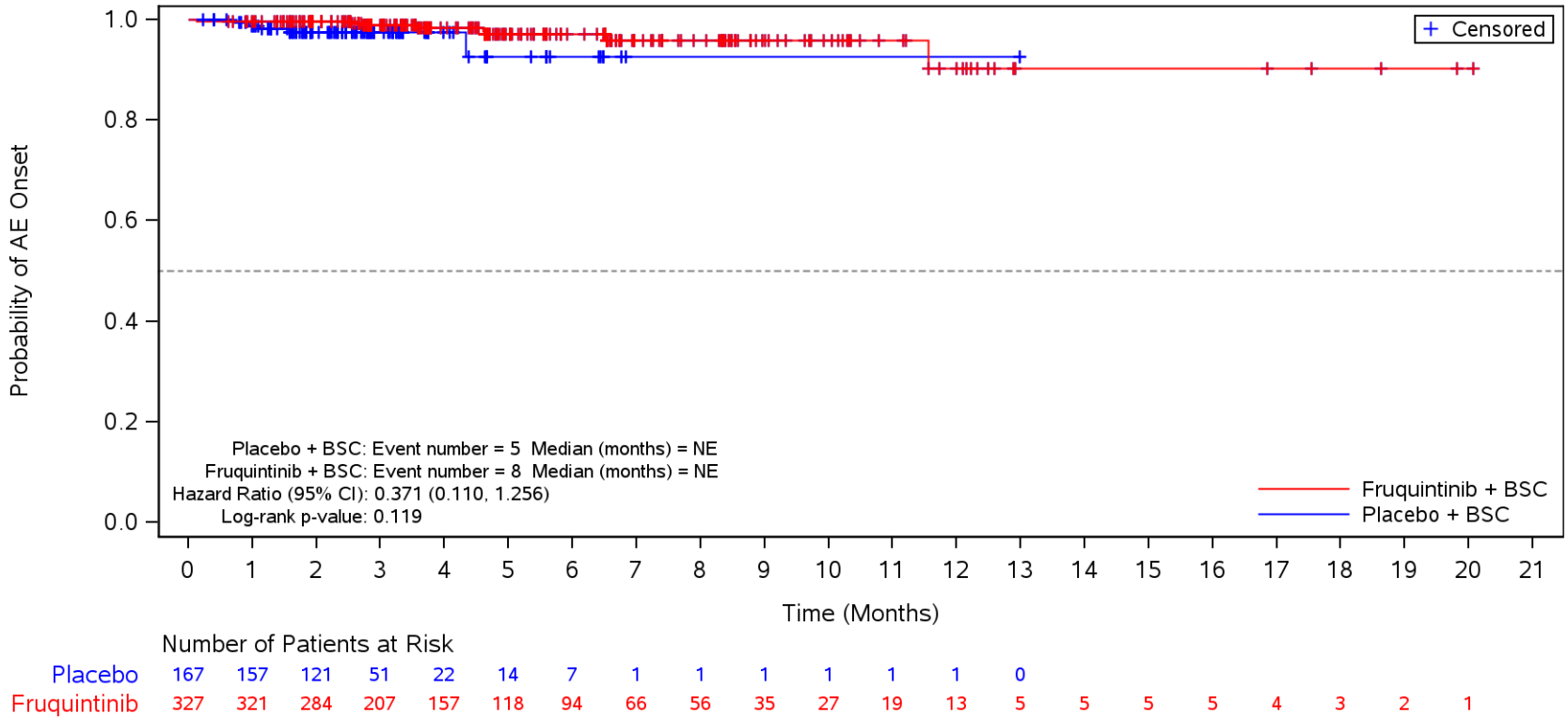
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
Europe



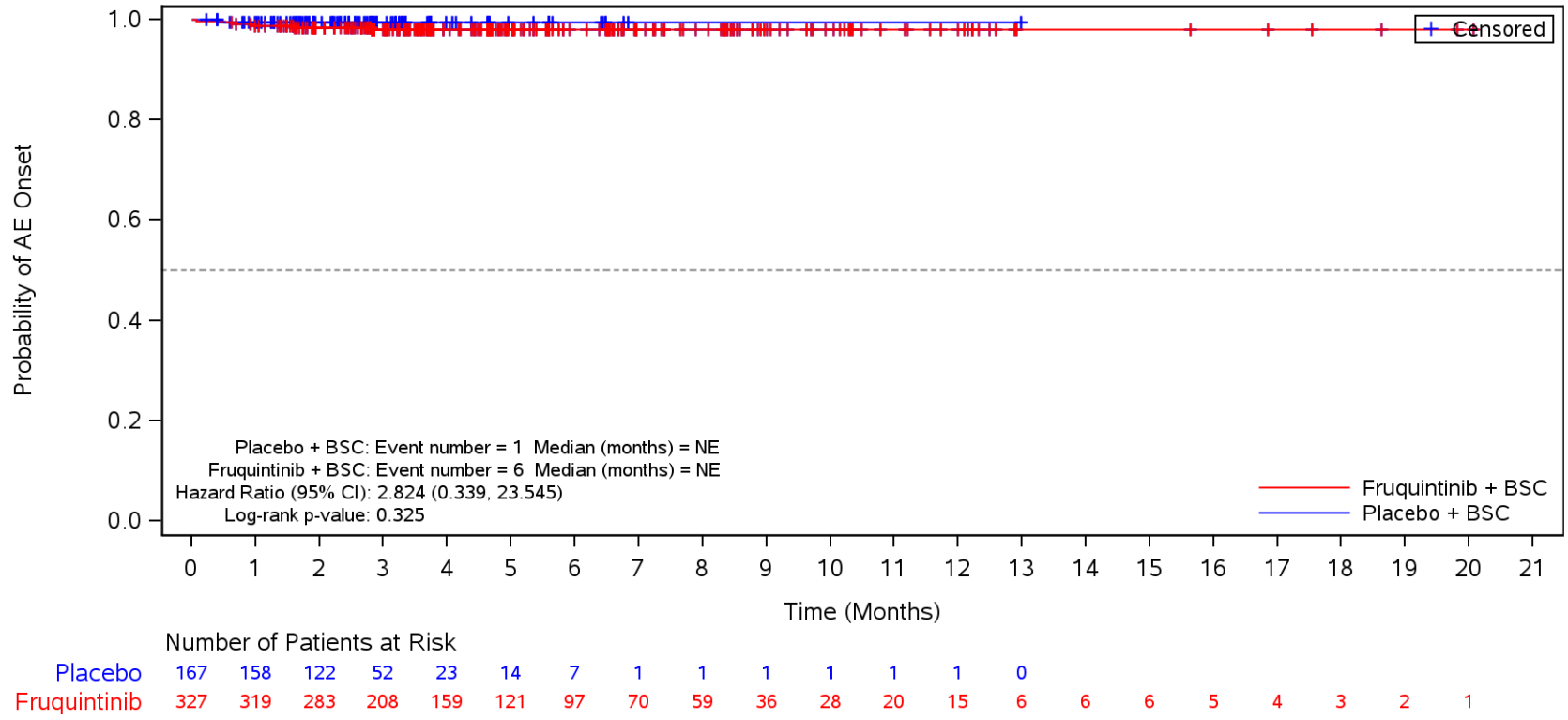
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**
Europe



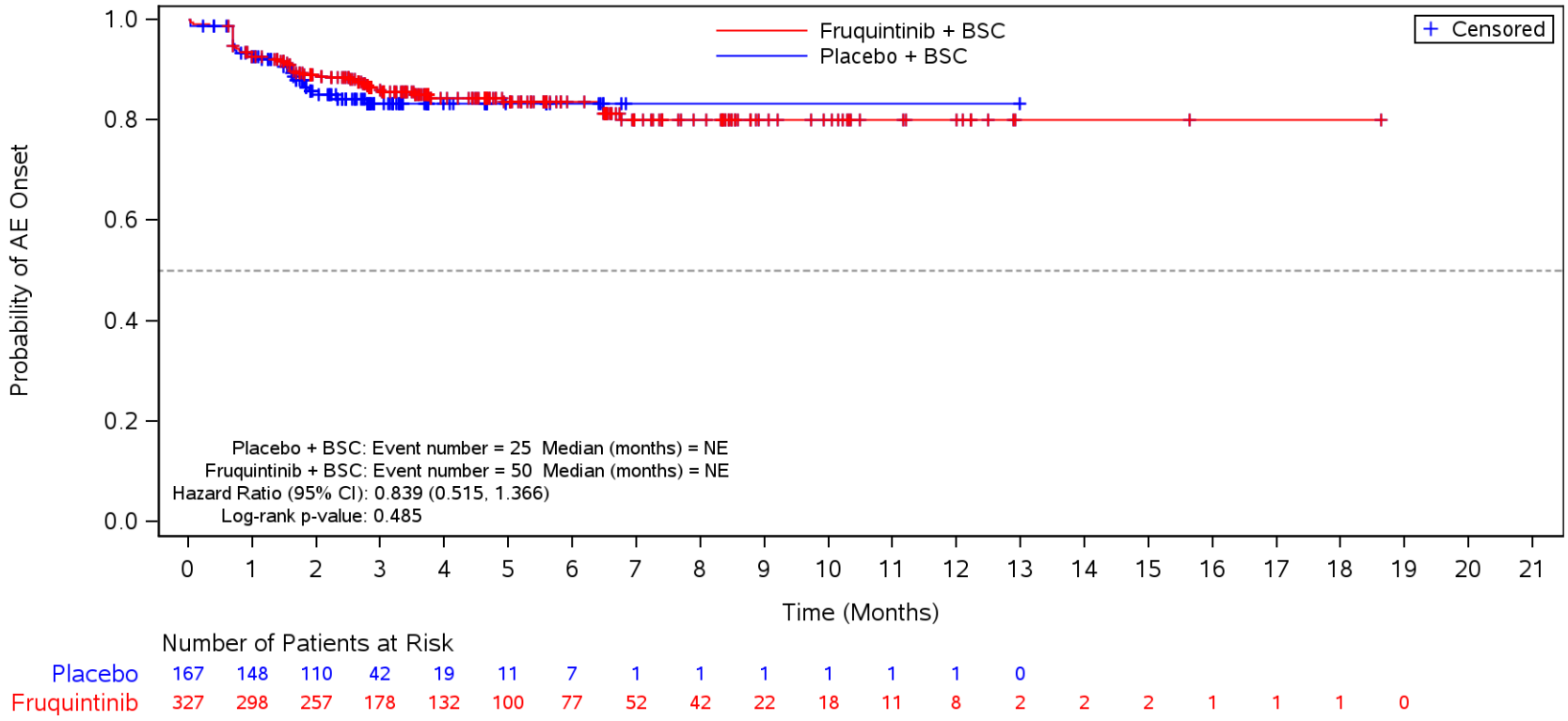
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**
Europe



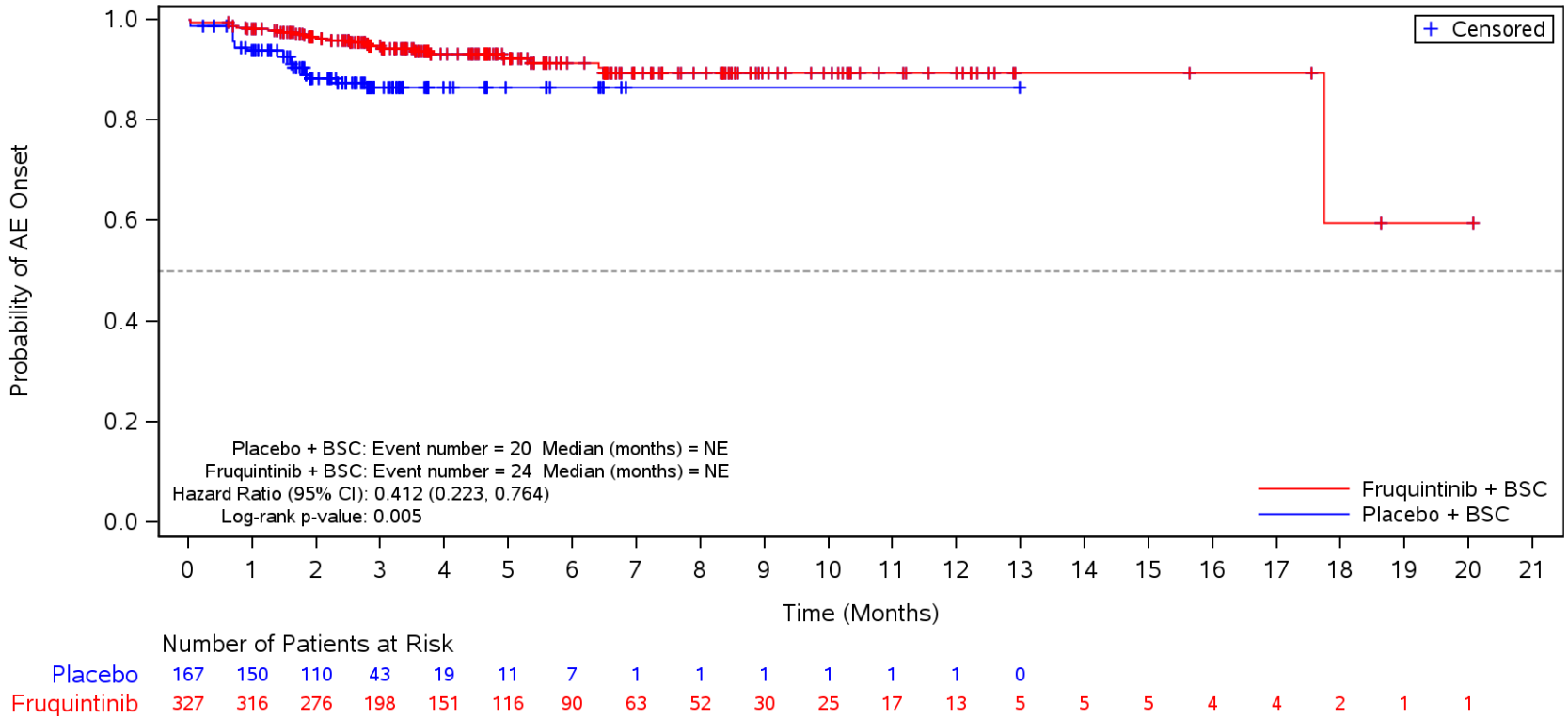
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
Europe



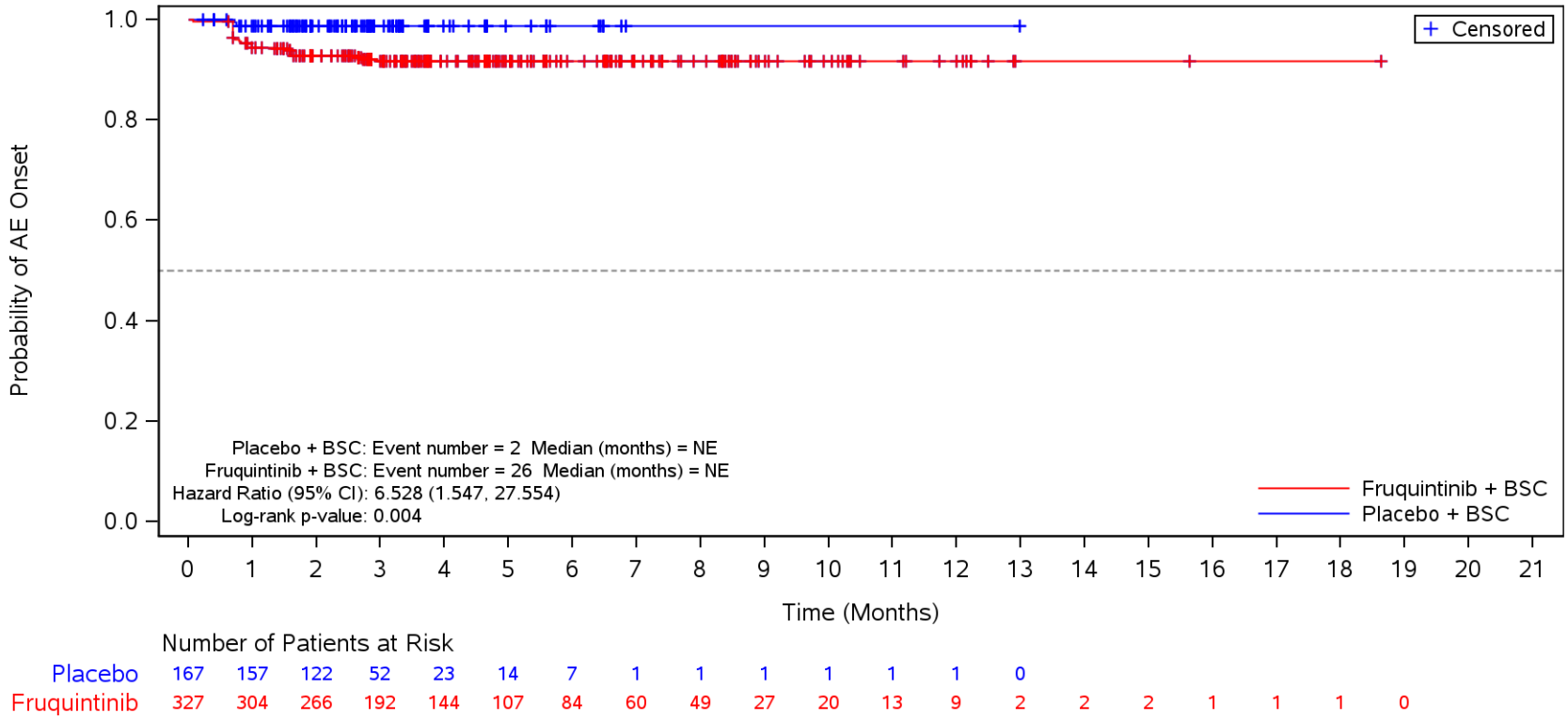
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
Europe



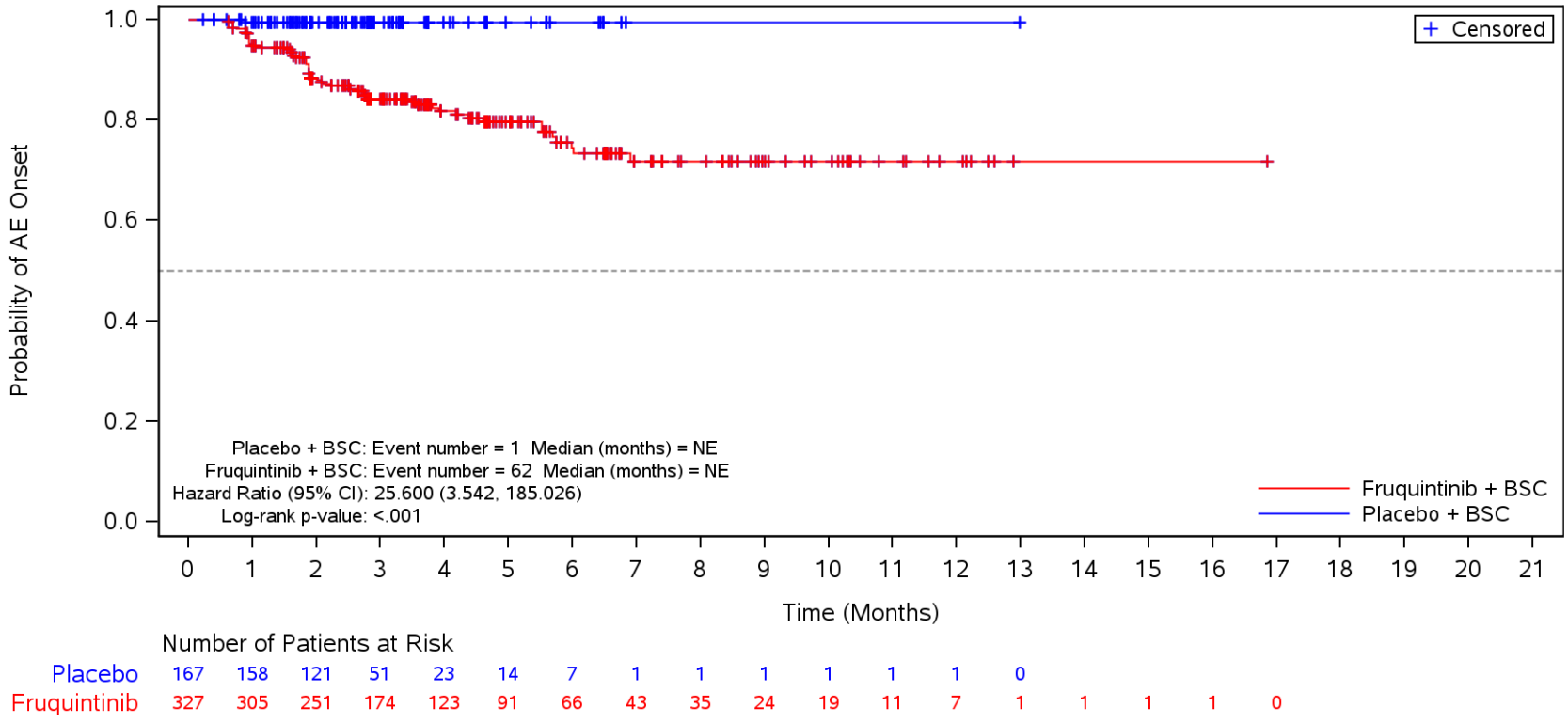
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
Europe



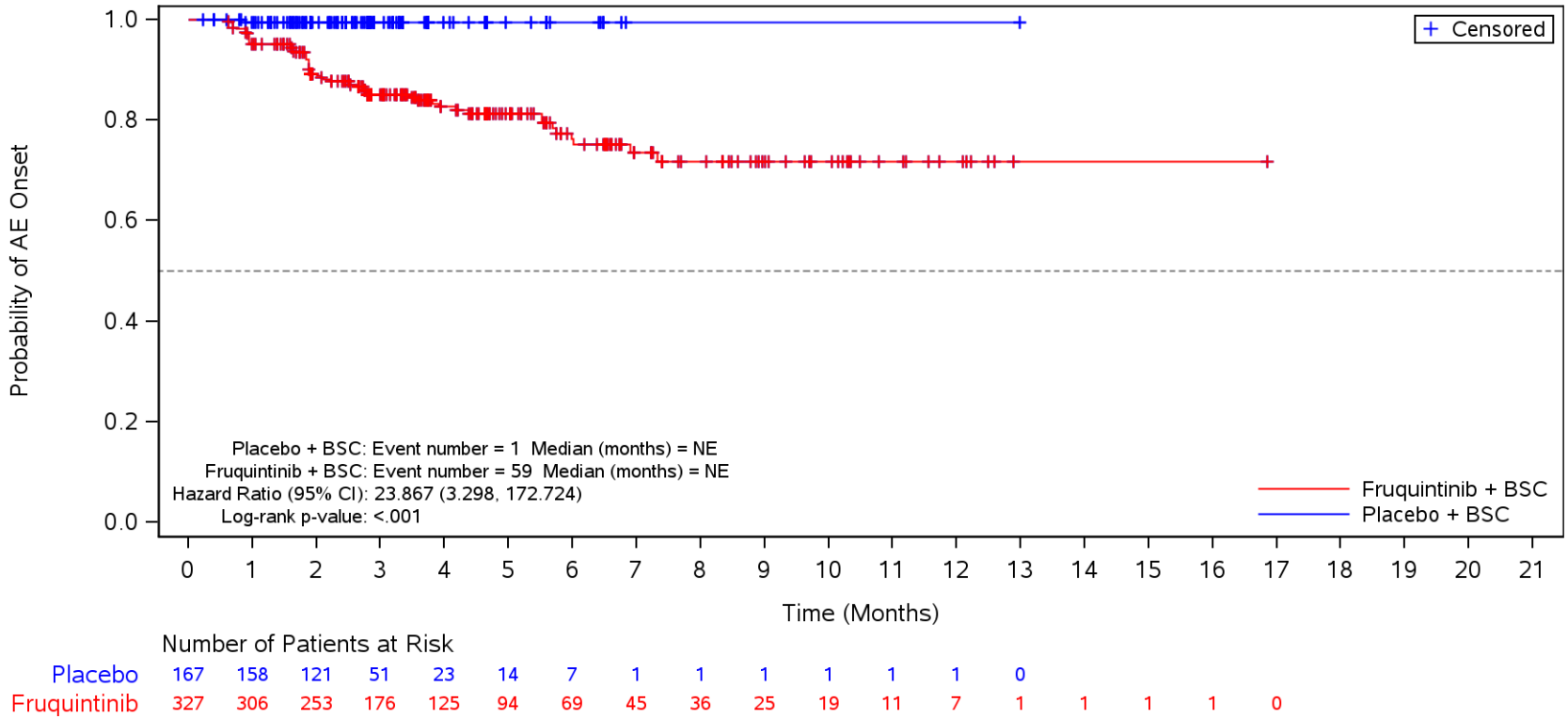
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Endocrine disorders**
Europe



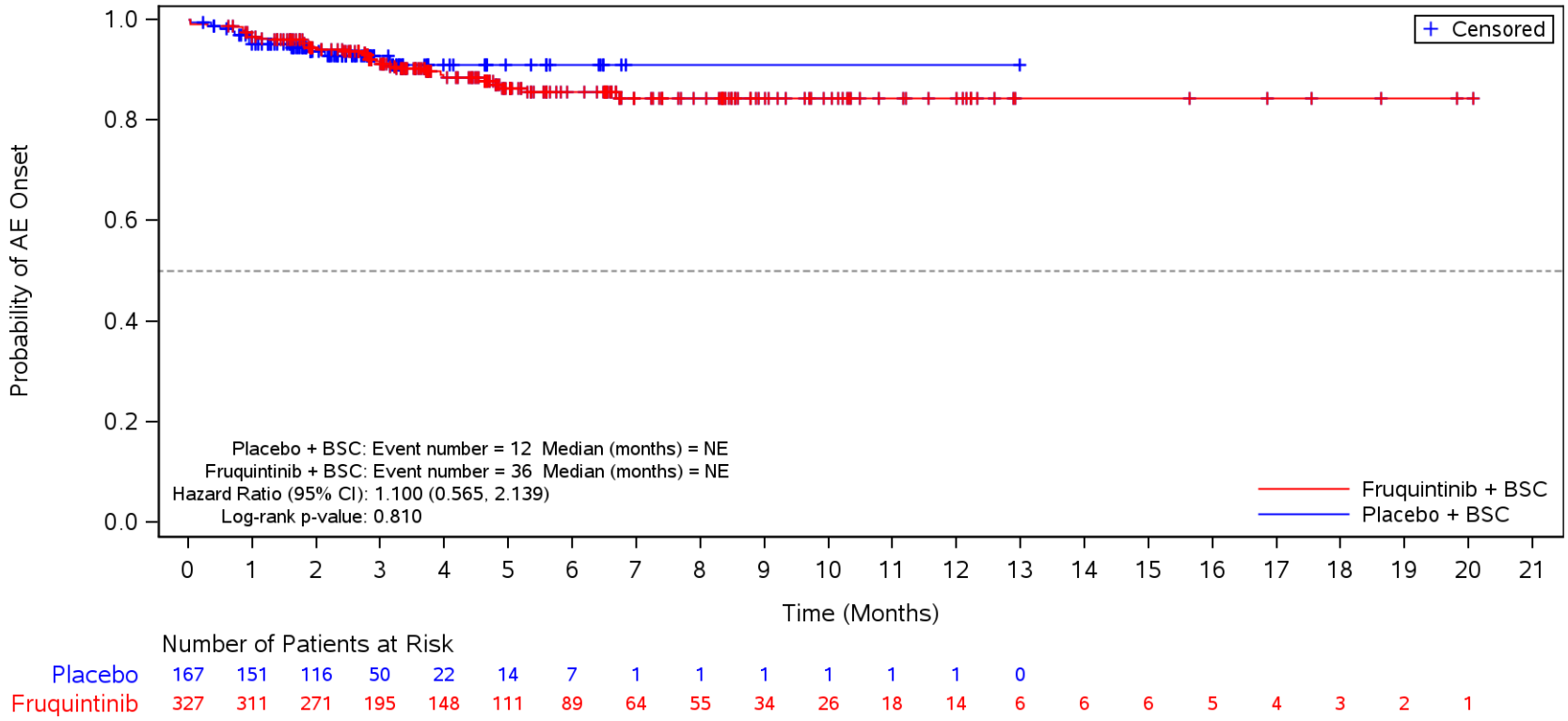
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
Europe



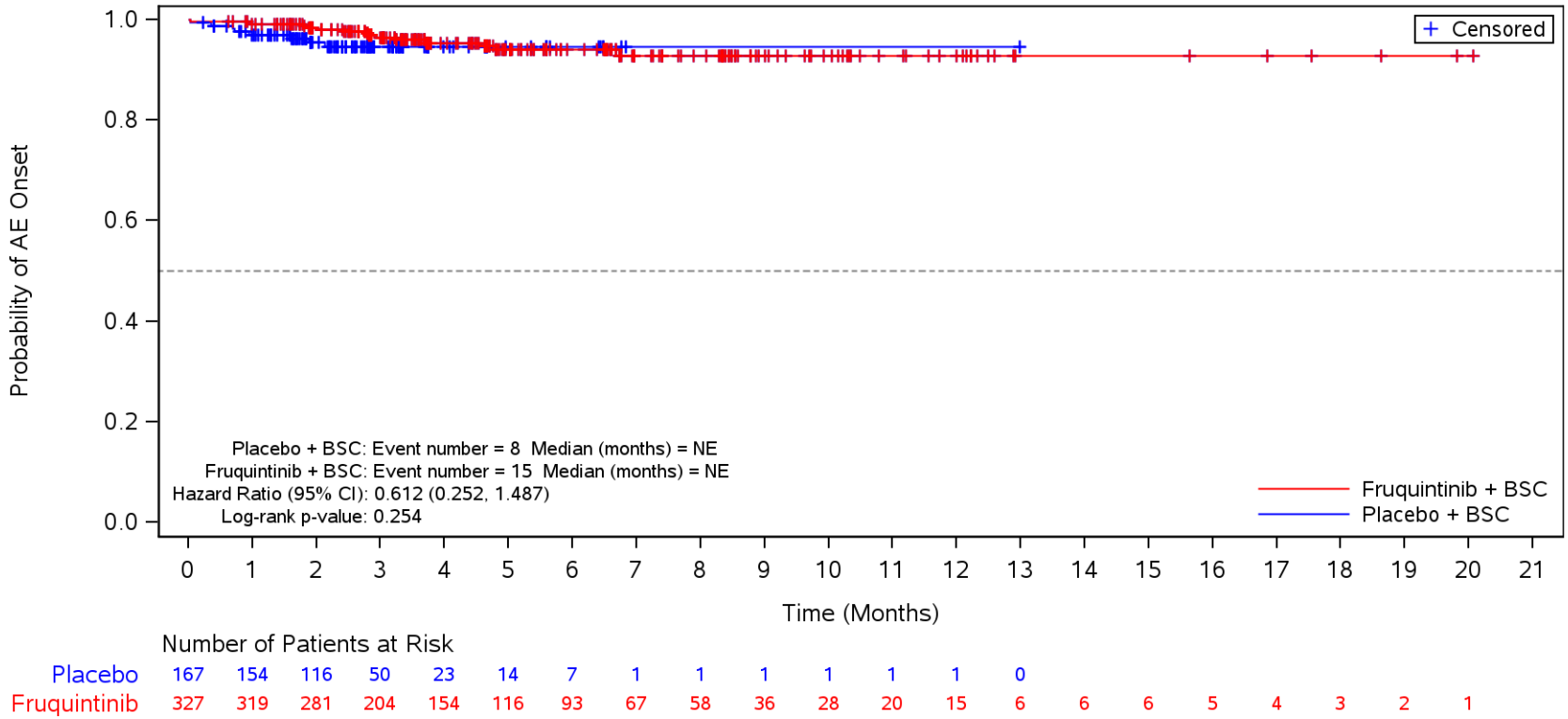
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders**
Europe



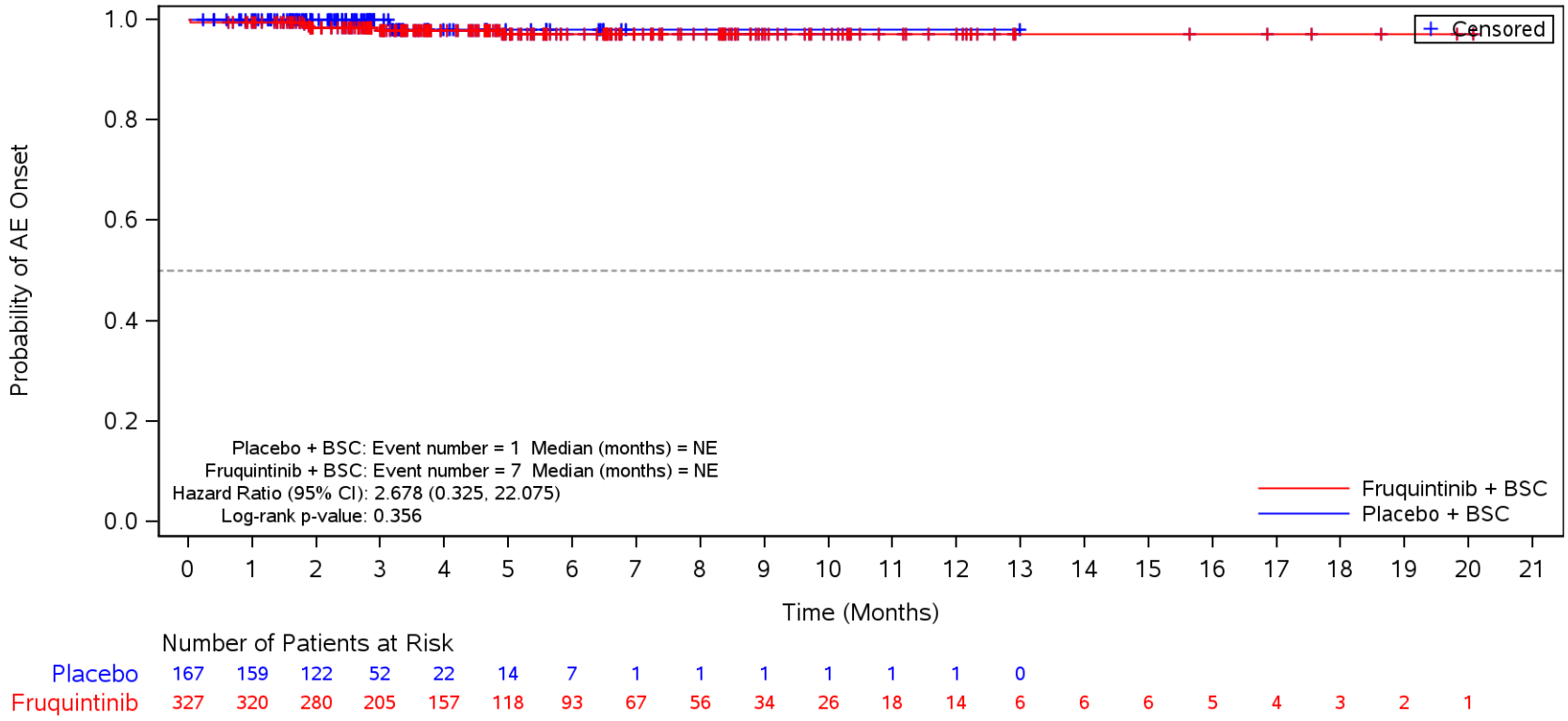
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
Europe



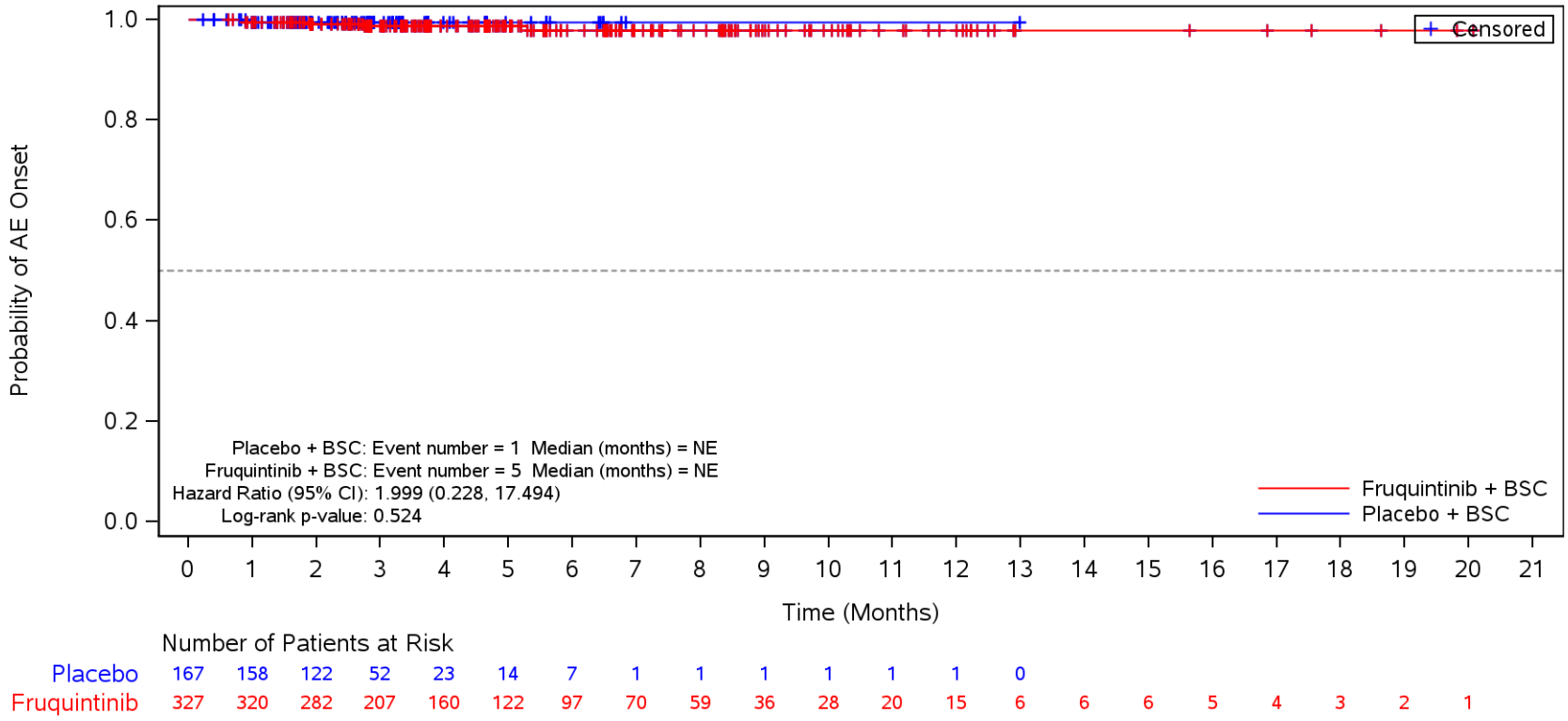
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**
Europe



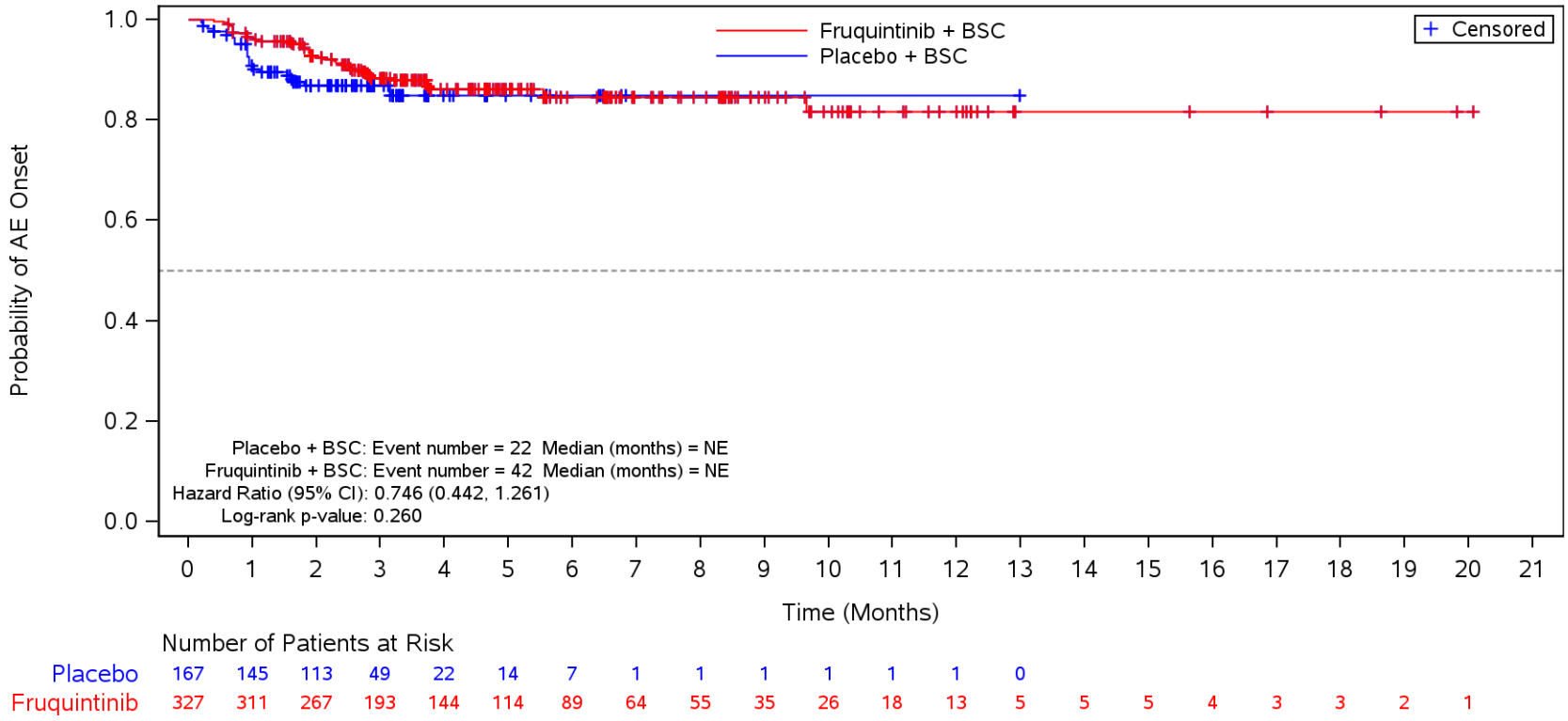
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
Europe



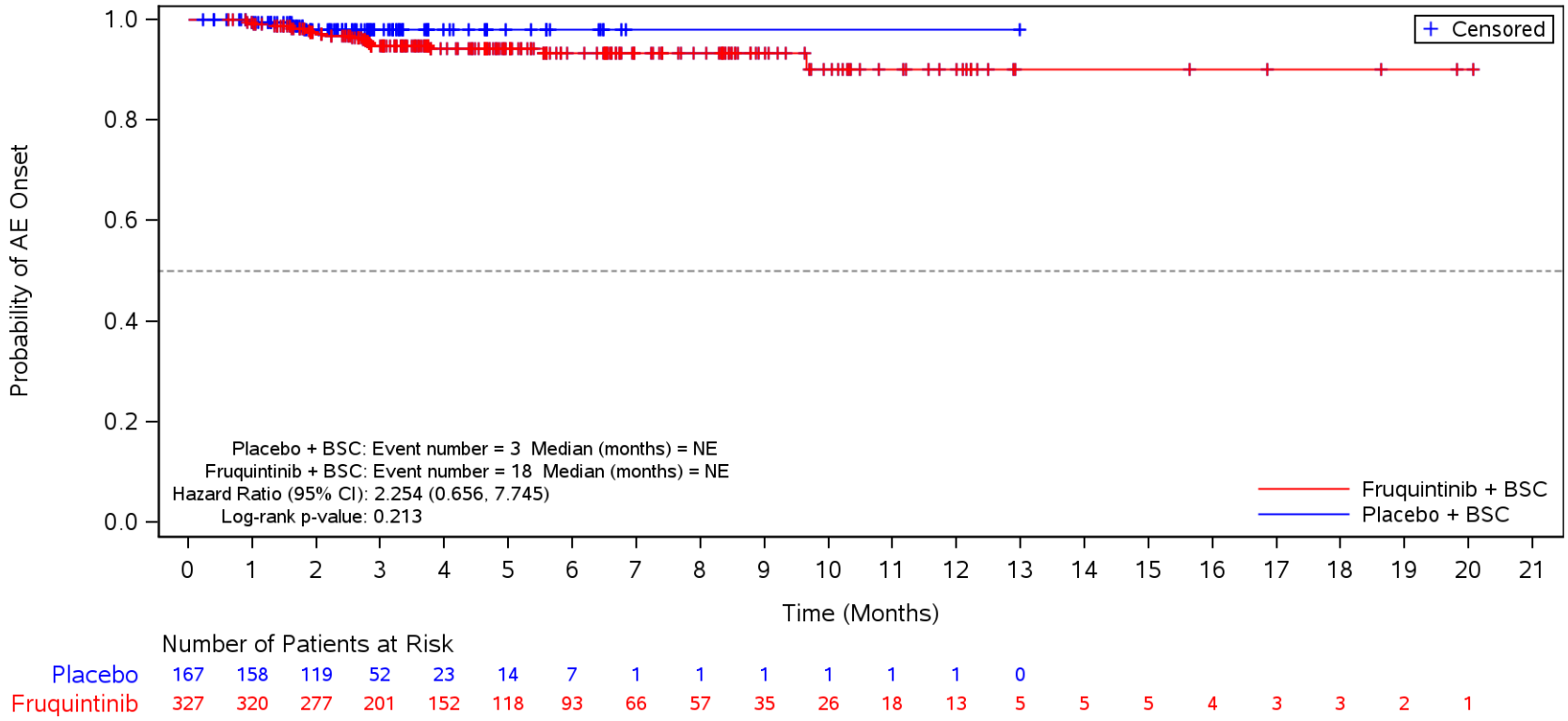
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**
Europe



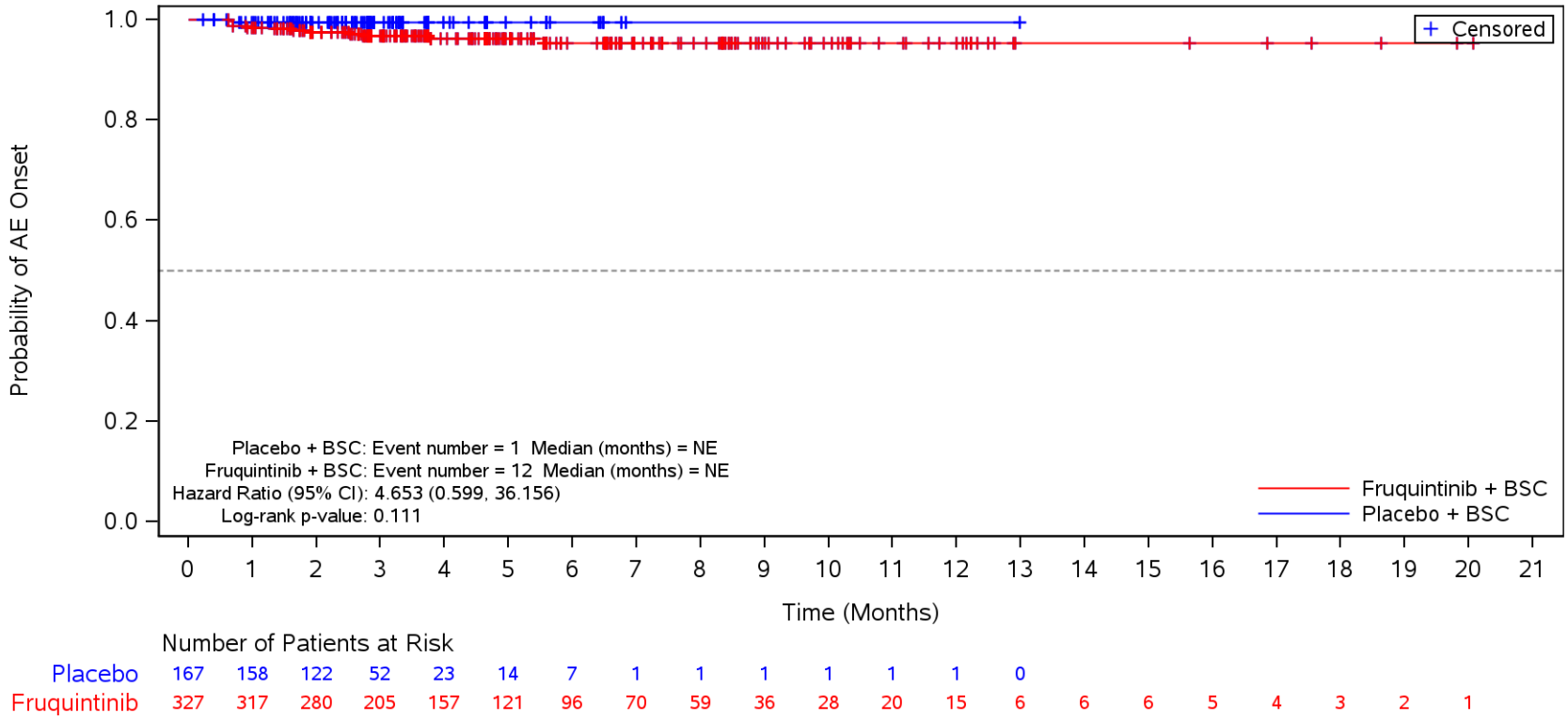
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hypertransaminasaemia**
Europe



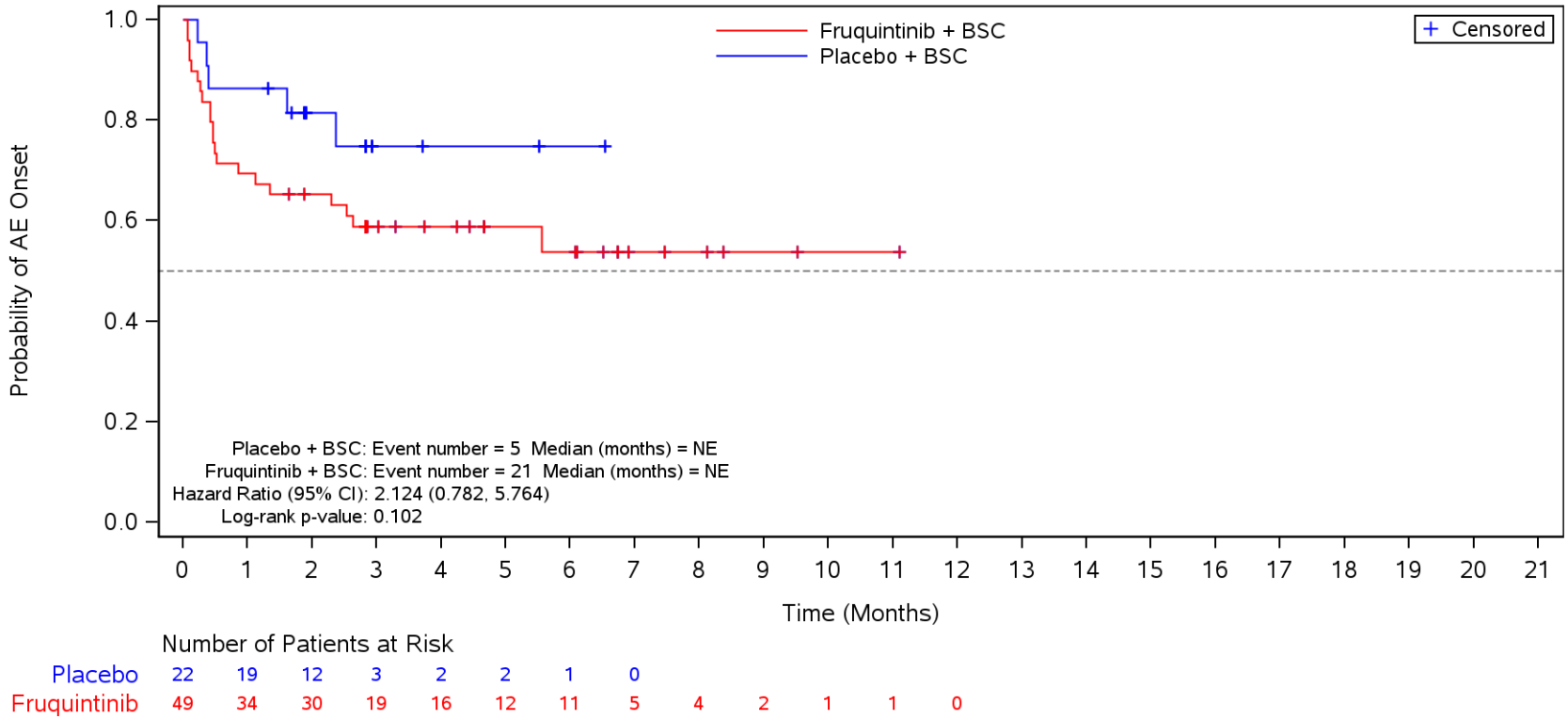
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hyperbilirubinaemia**
Europe



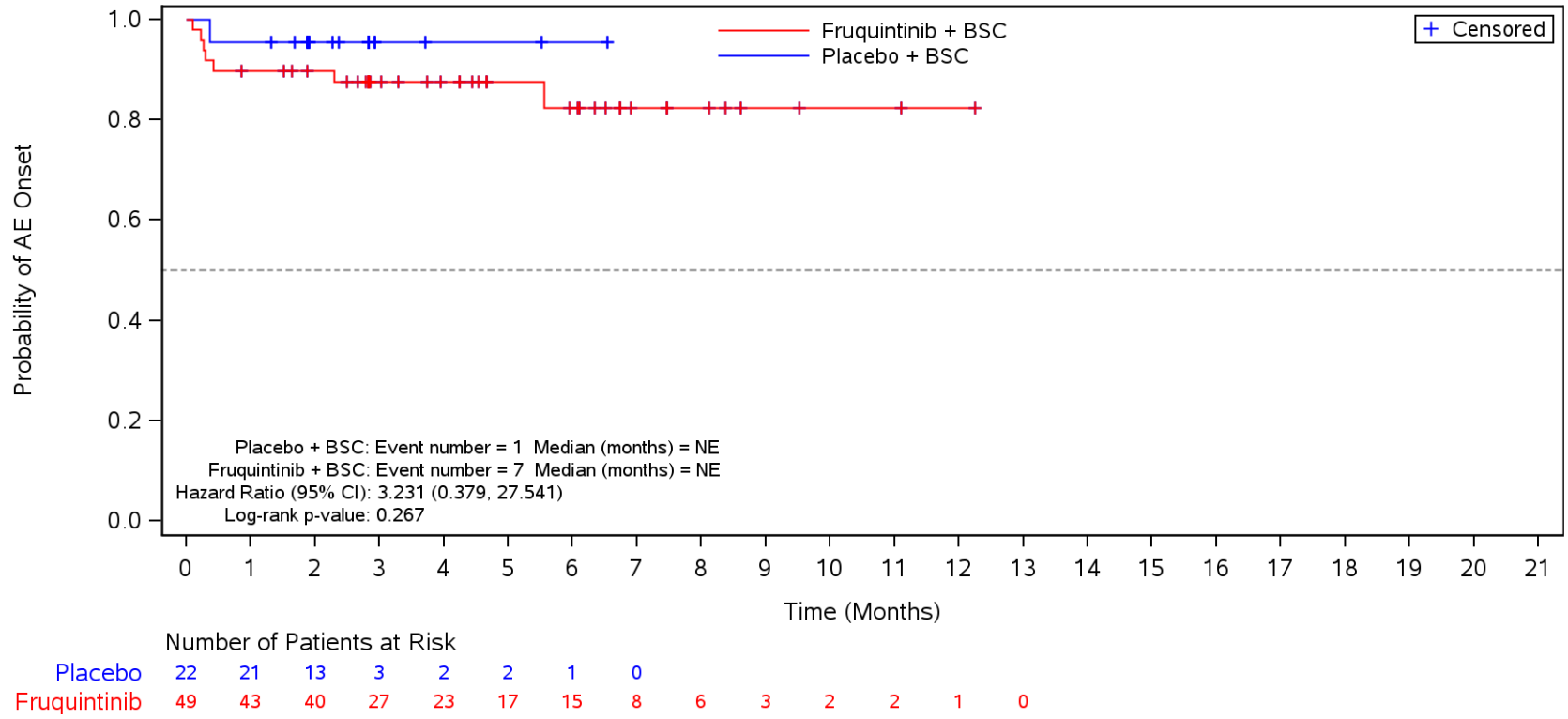
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
Asia



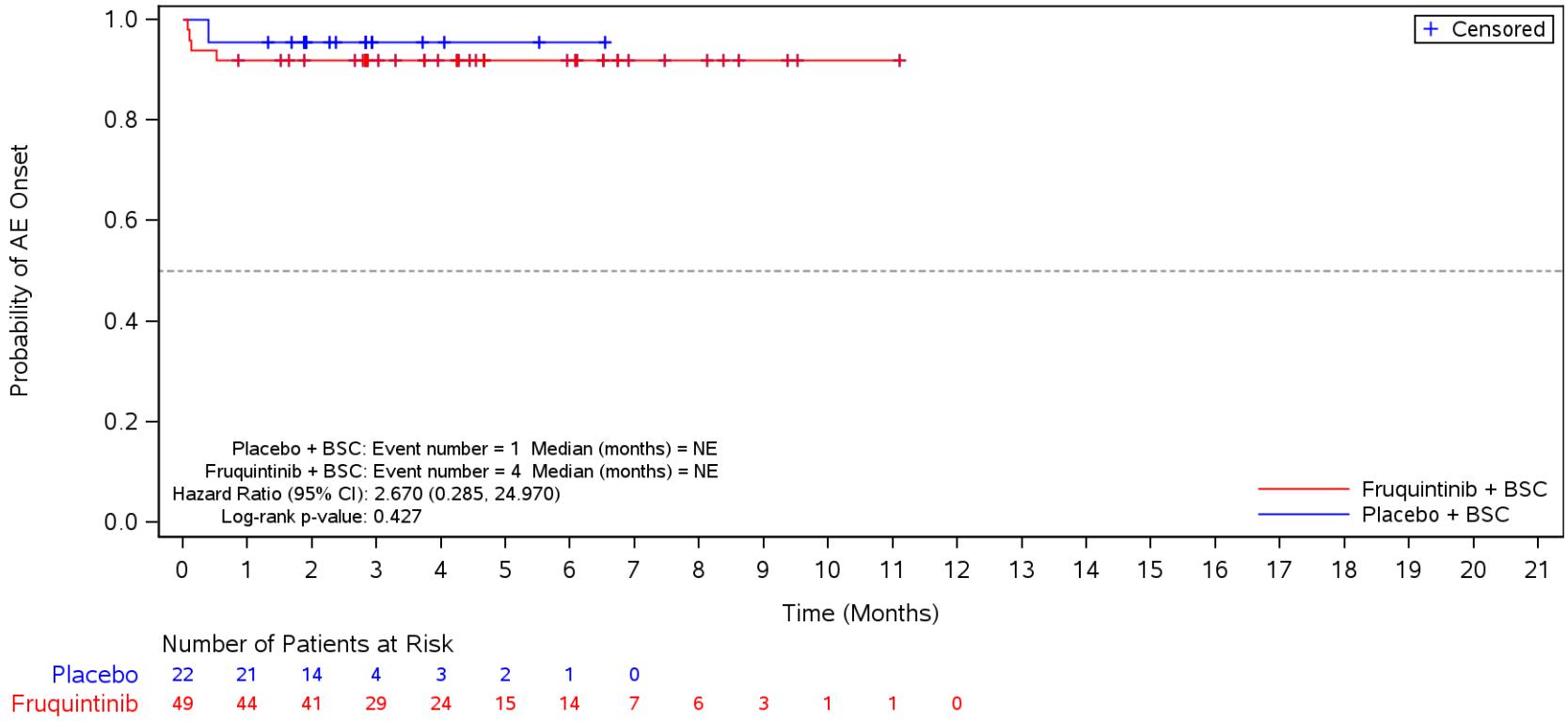
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
Asia



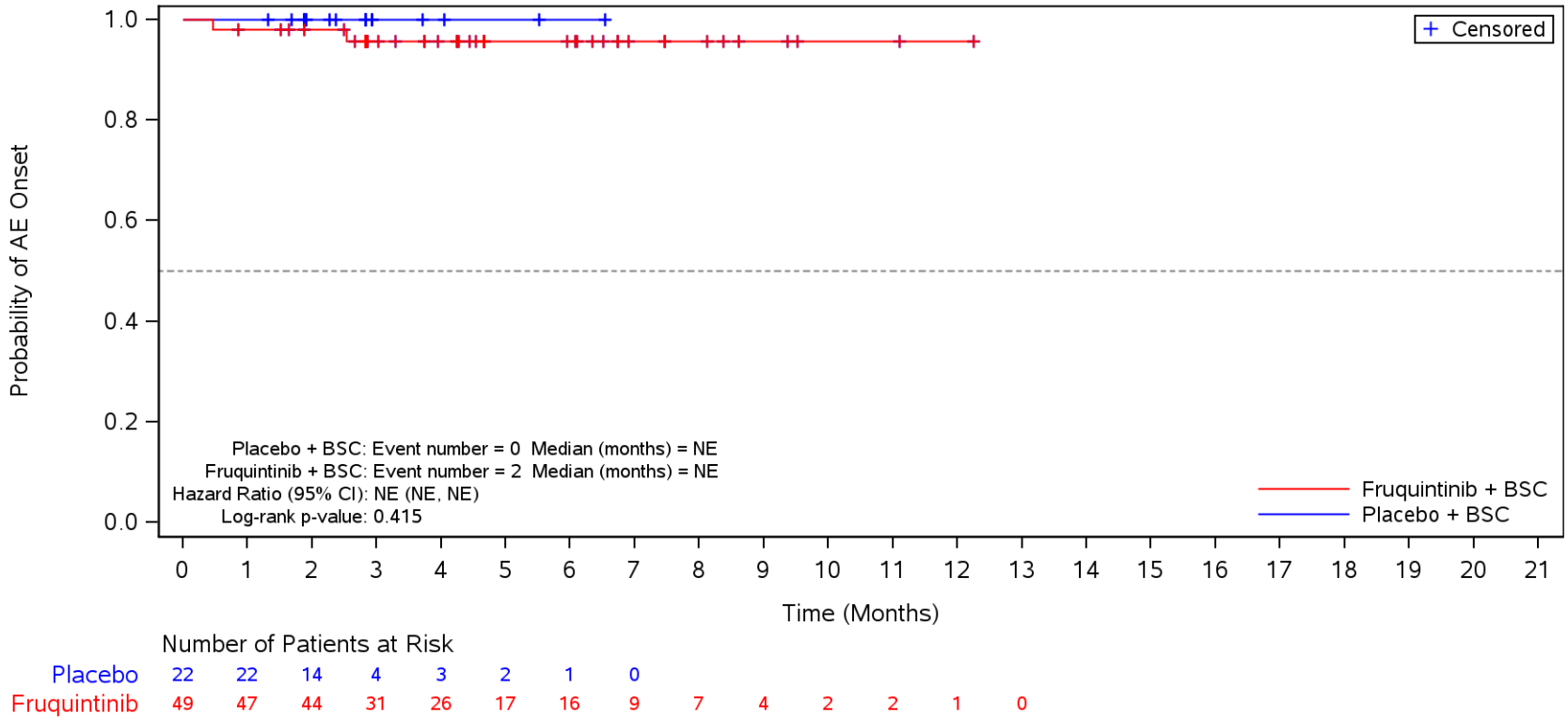
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
Asia



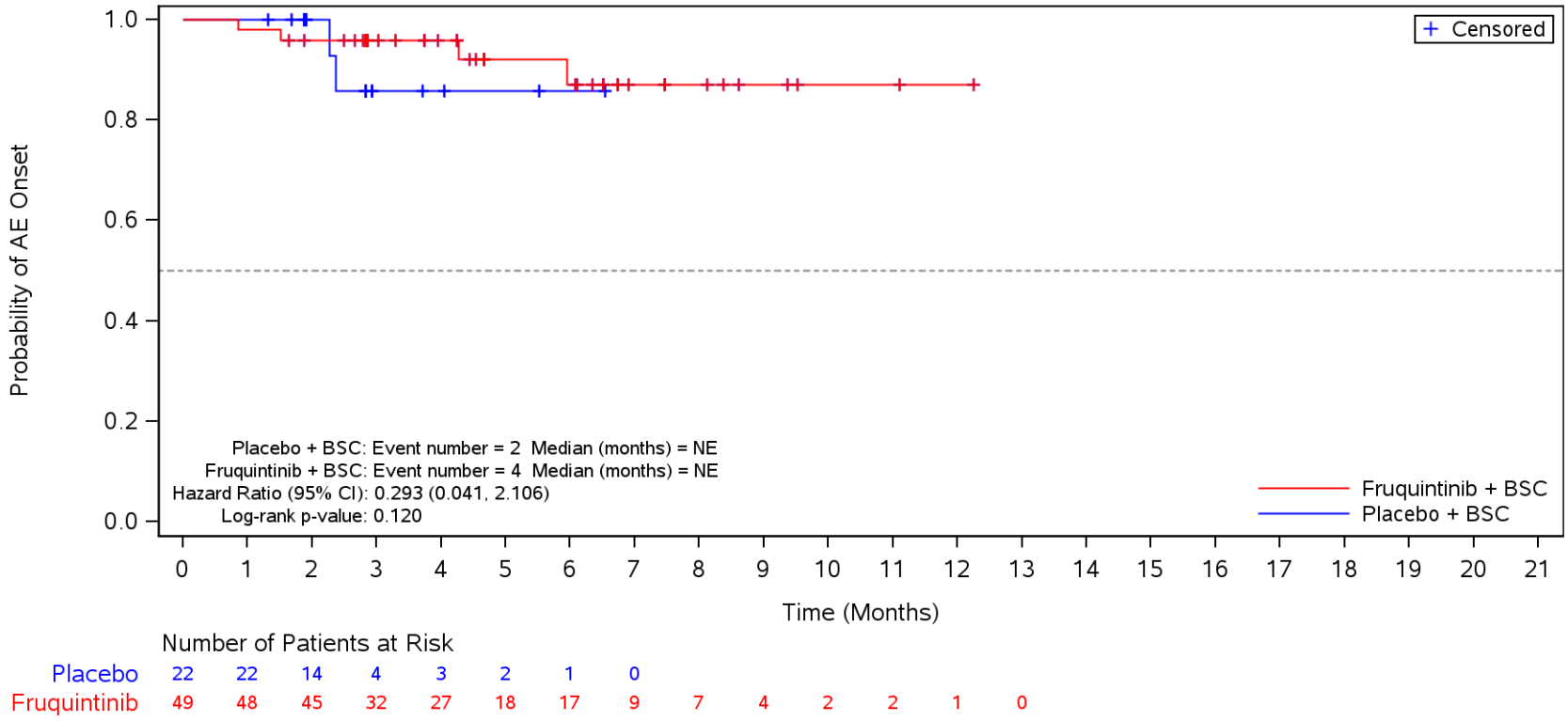
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
Asia



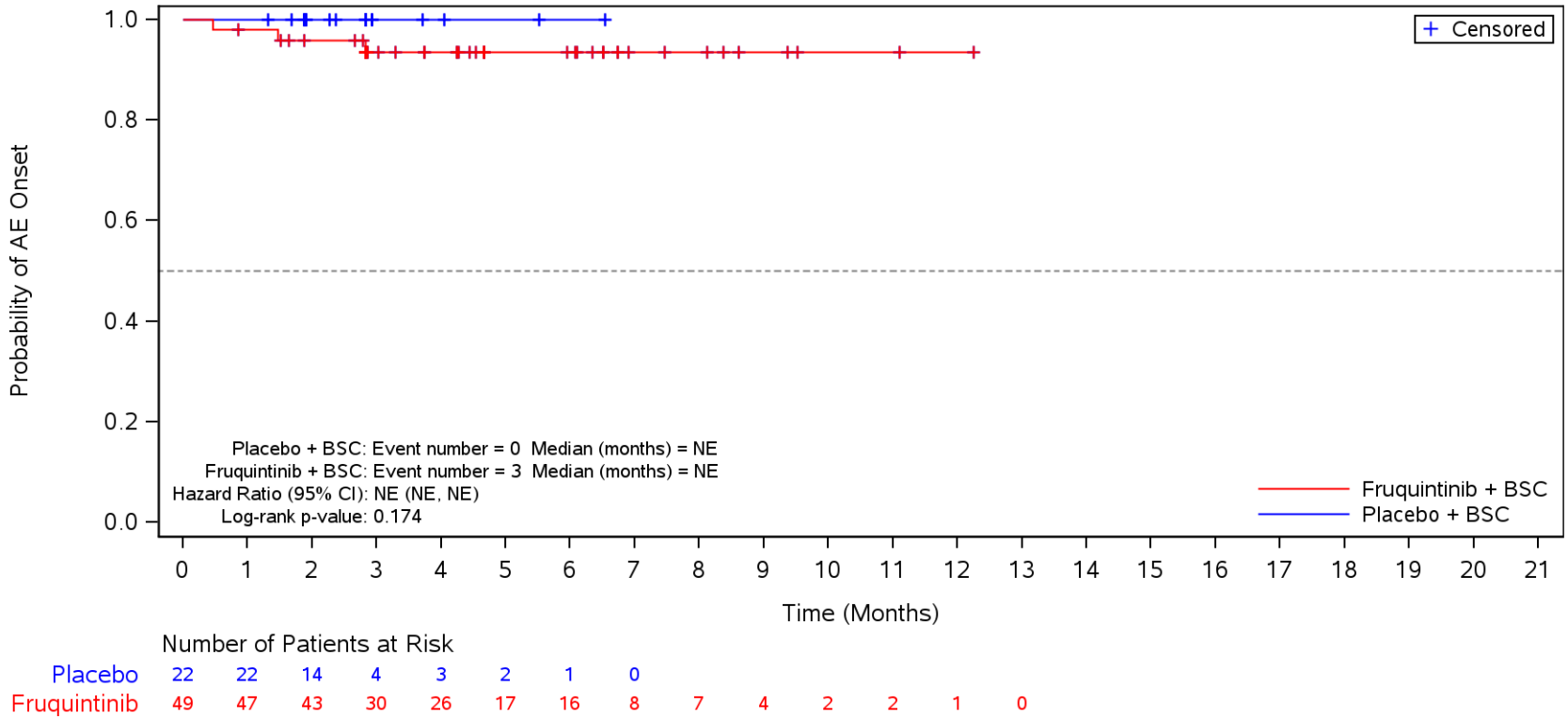
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
Asia



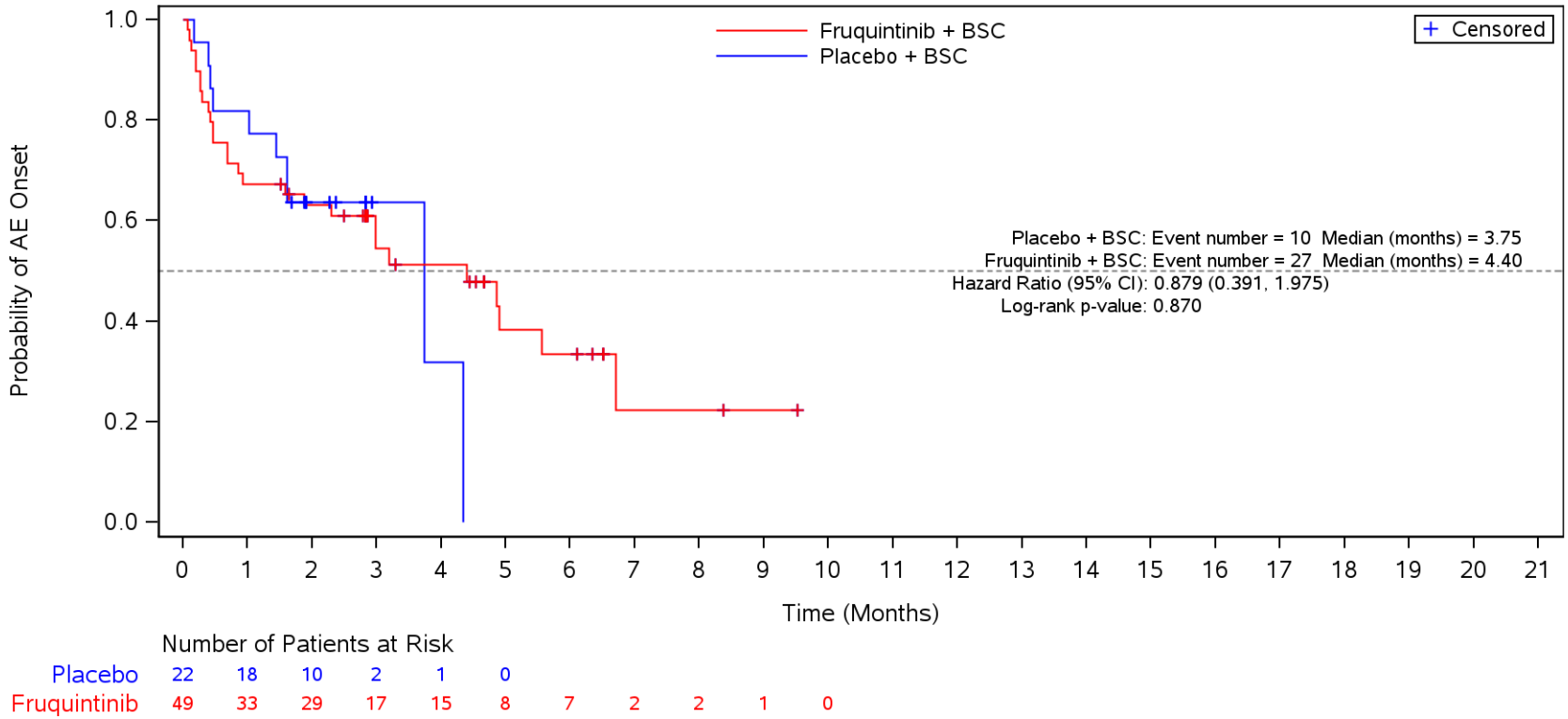
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
Asia



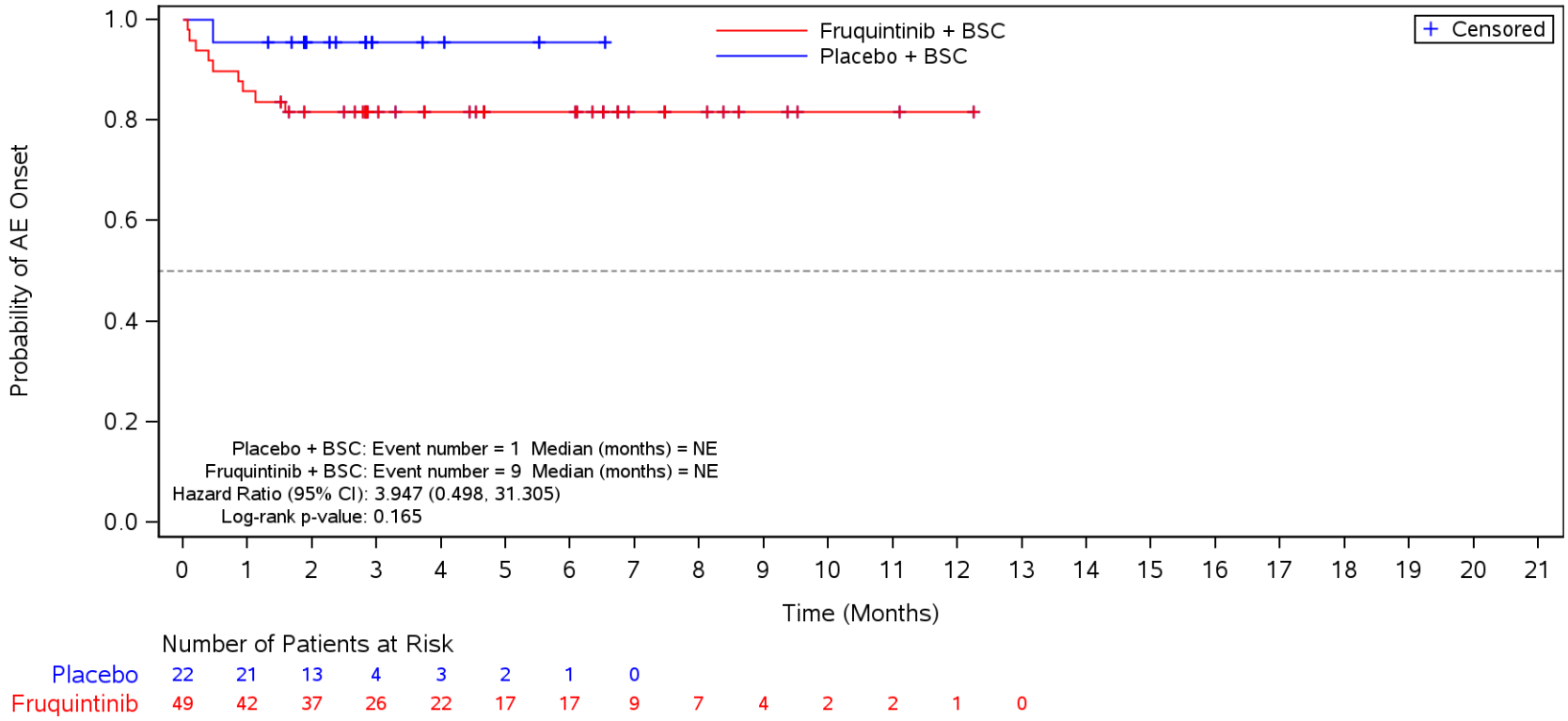
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
Asia



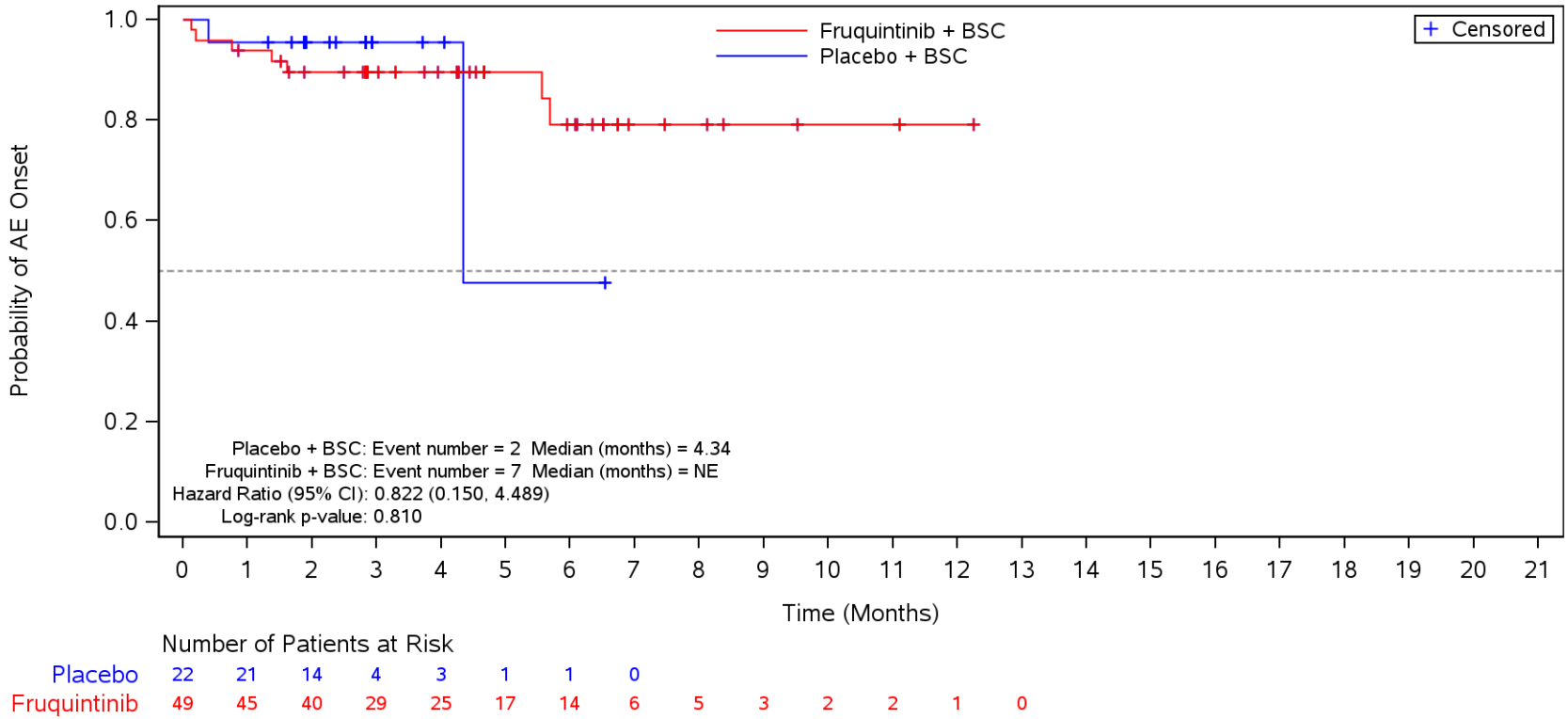
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
Asia



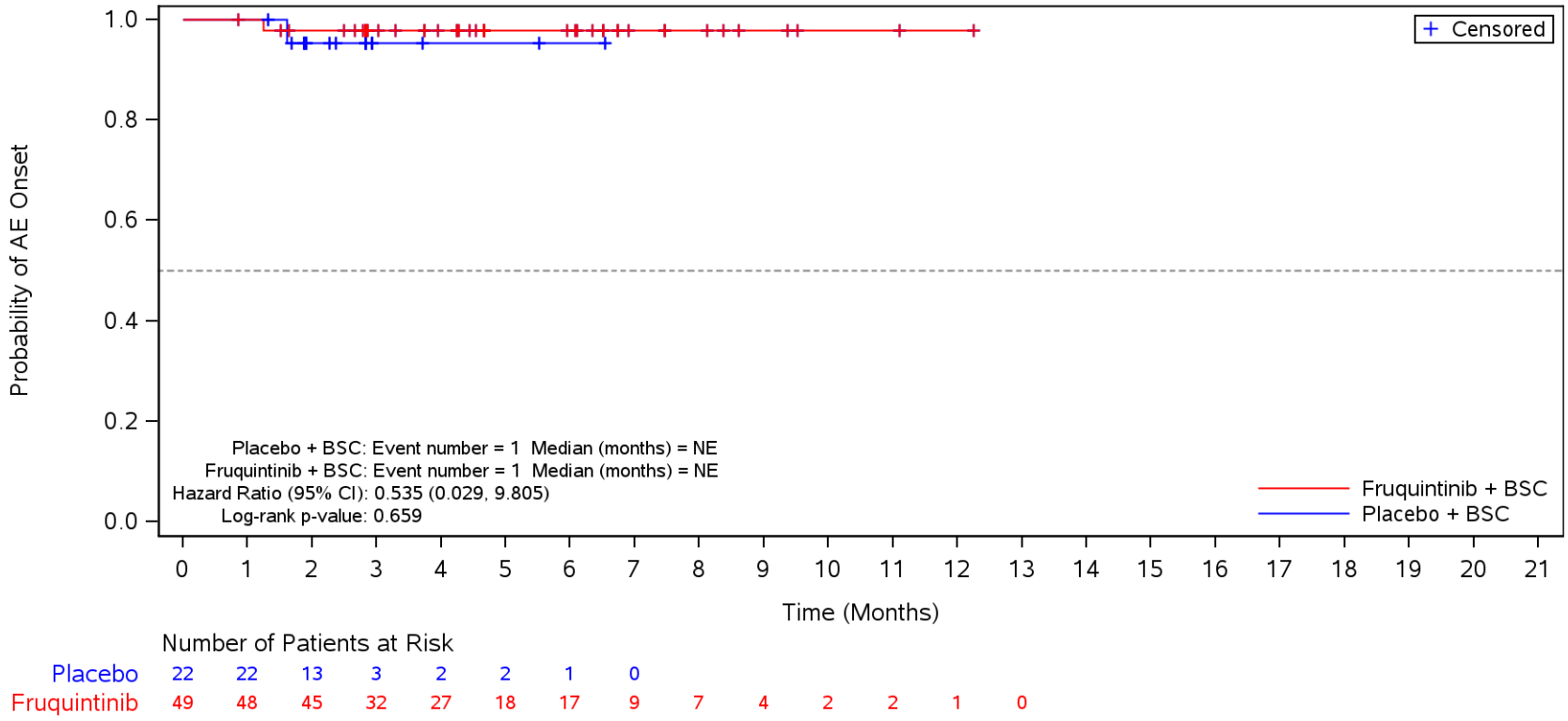
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
Asia



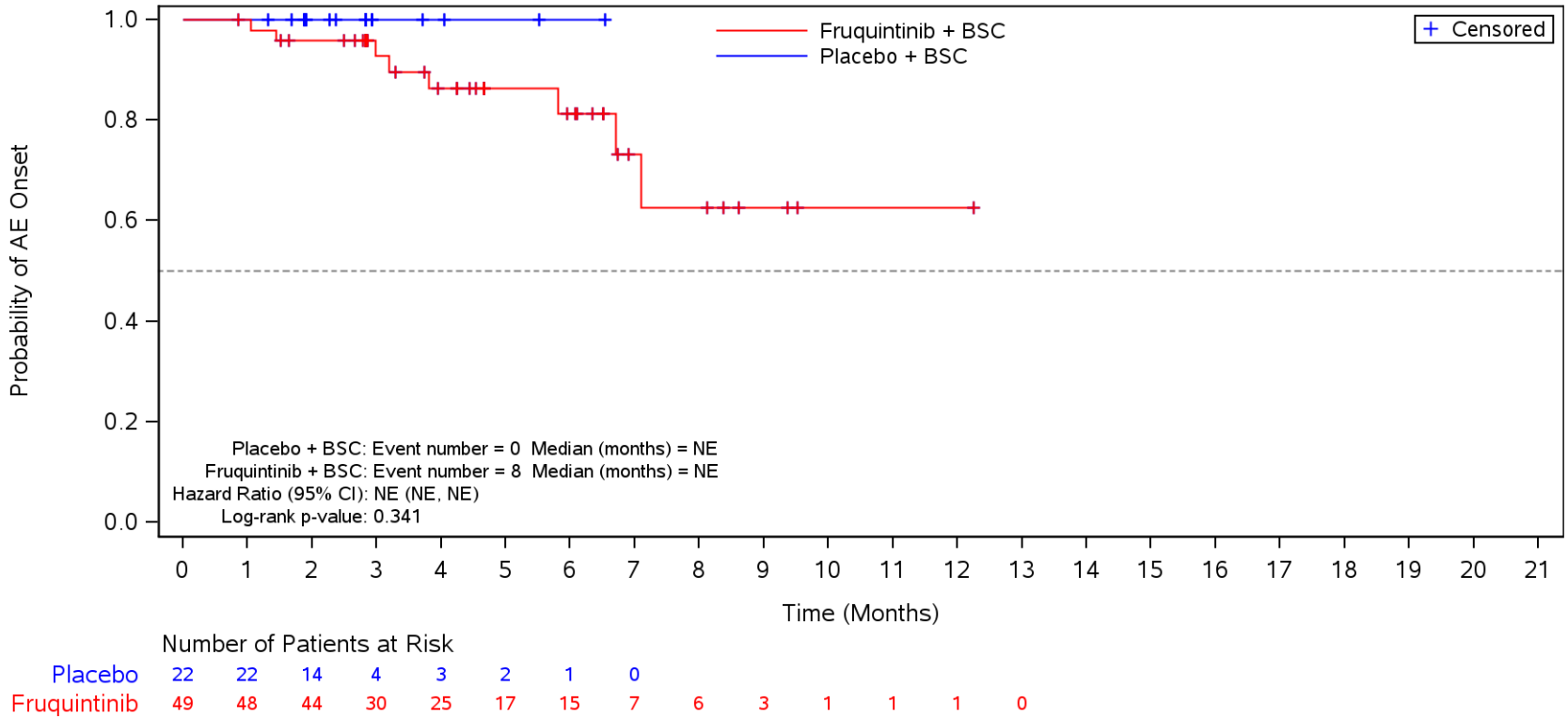
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
Asia



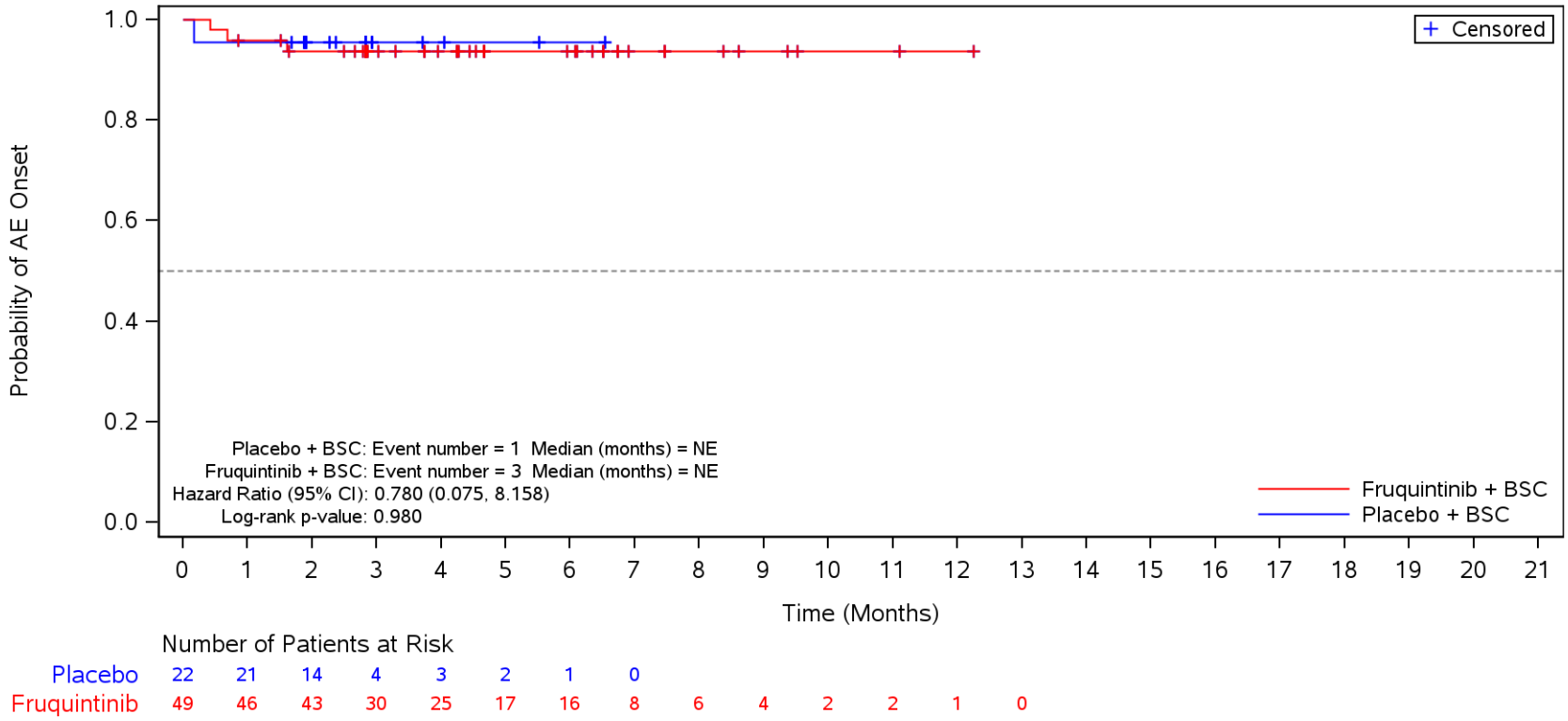
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
Asia



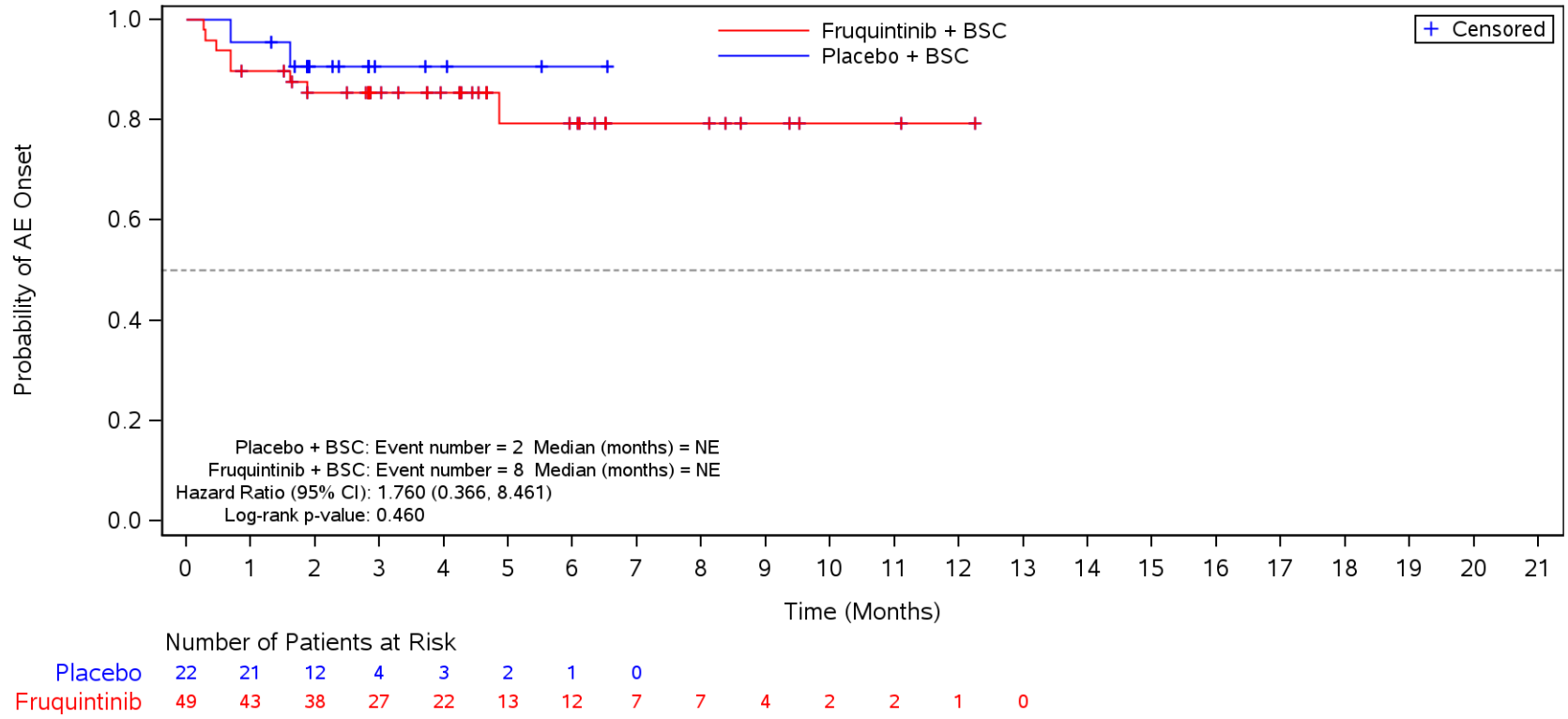
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
Asia



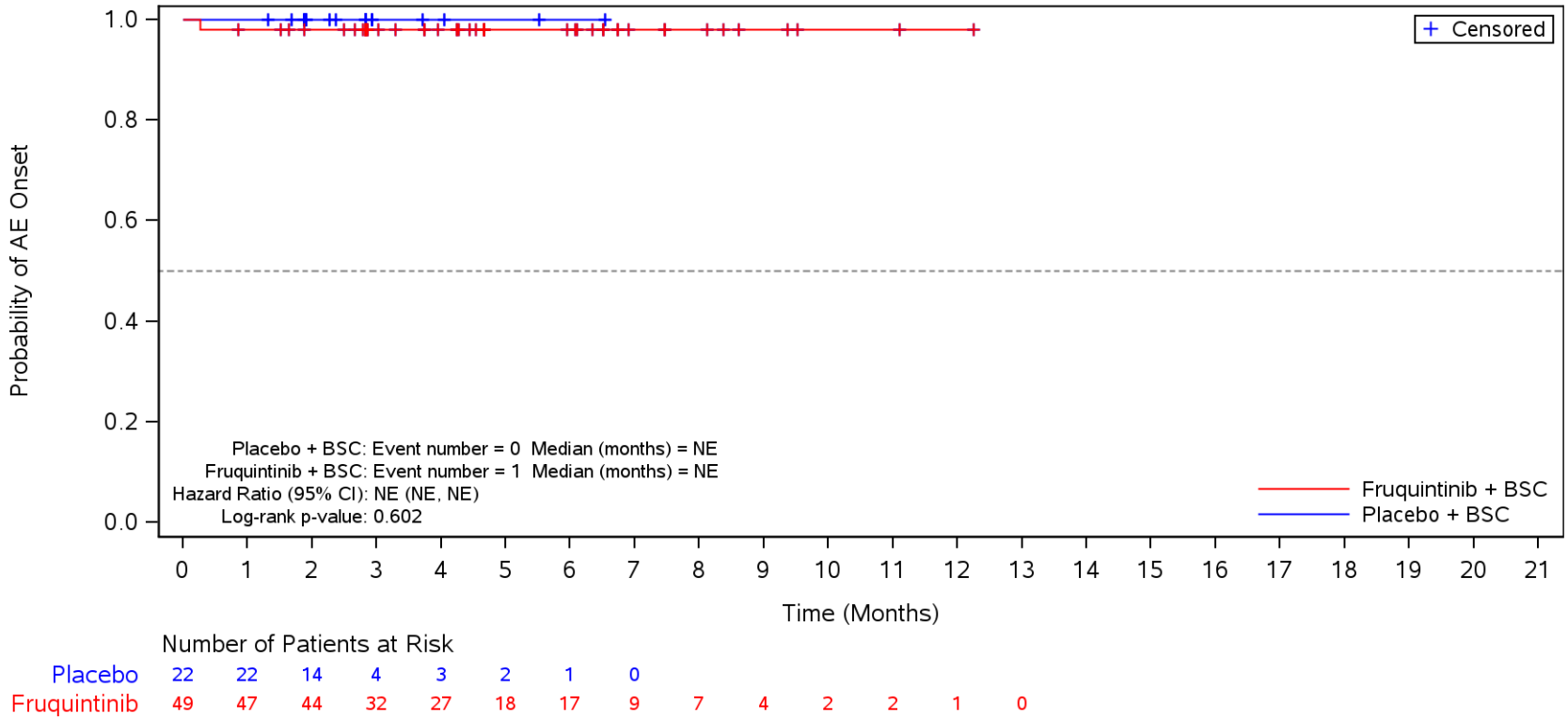
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
Asia



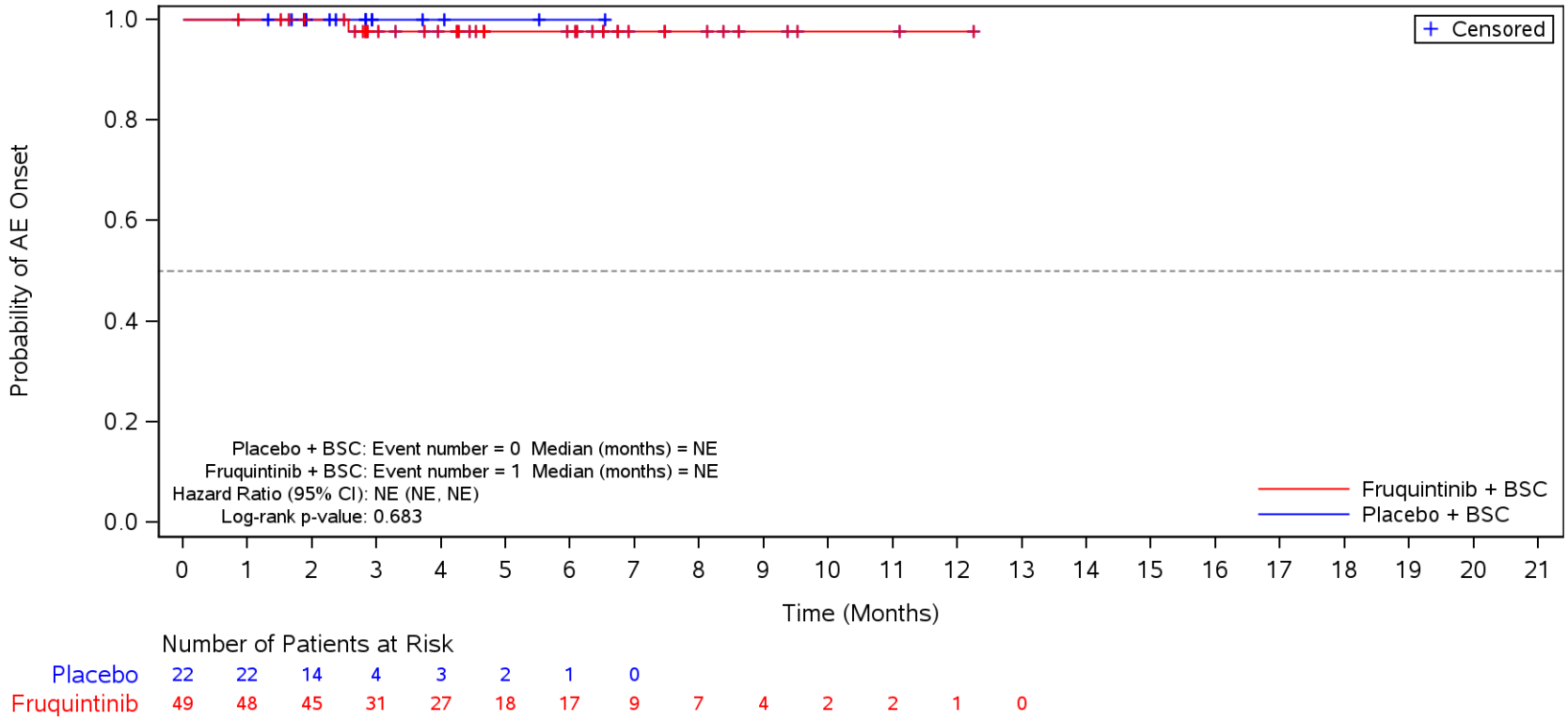
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
Asia



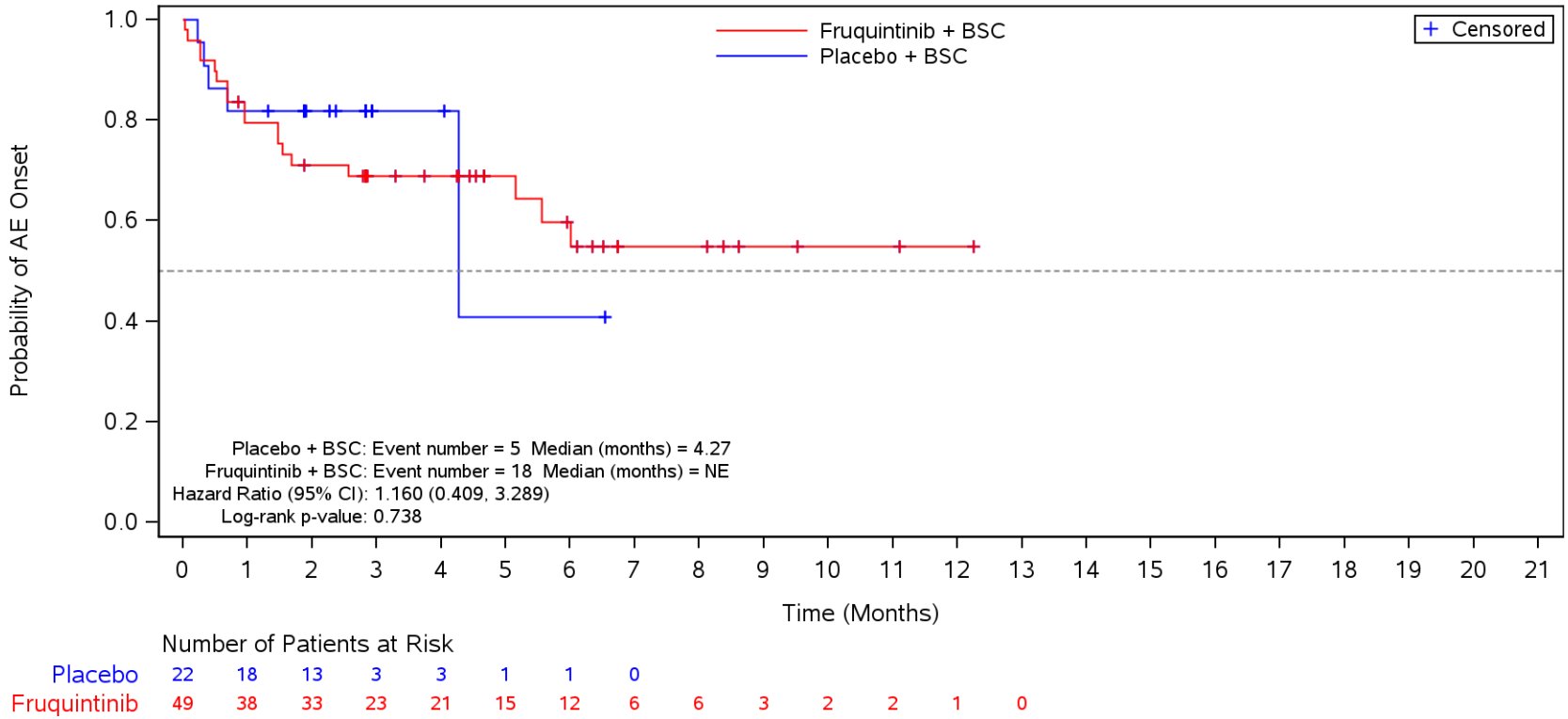
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**
Asia



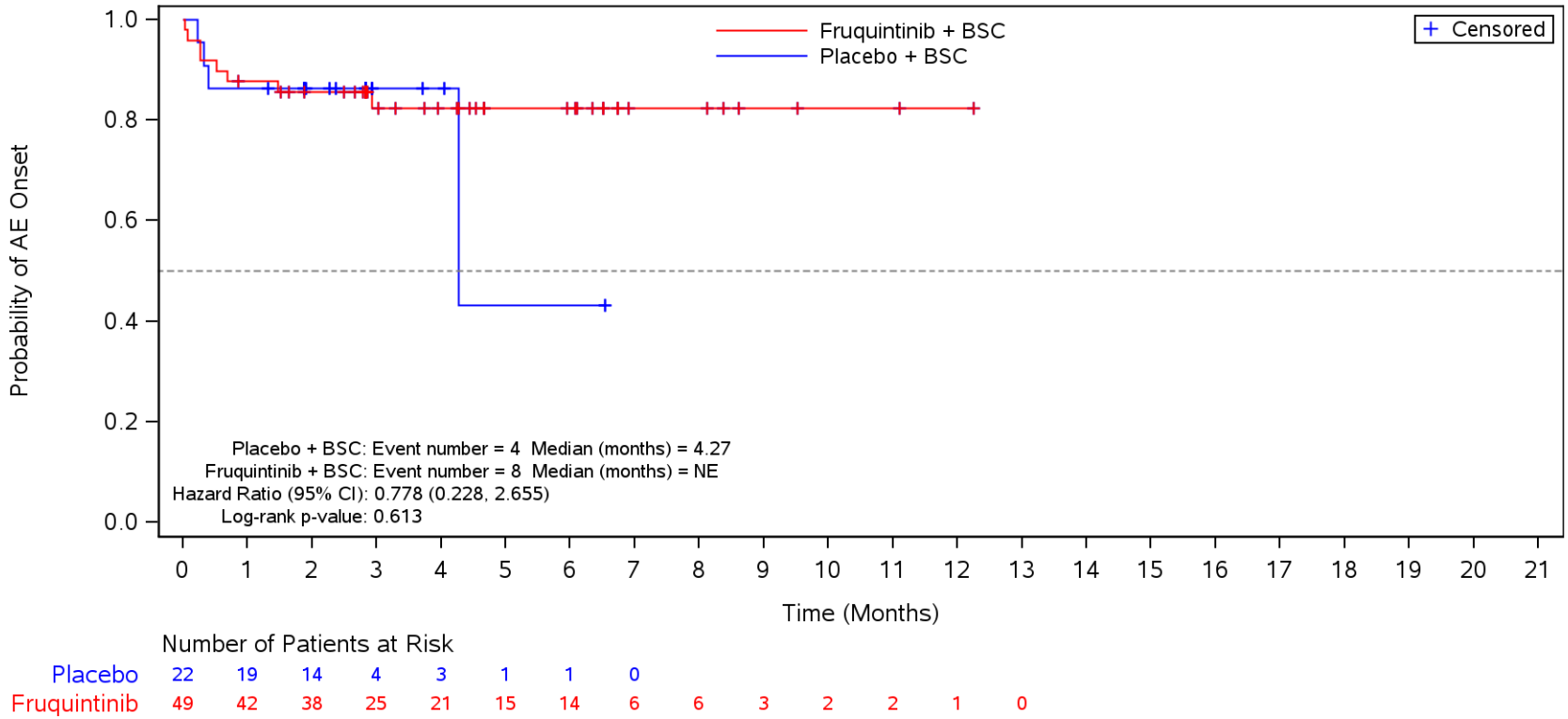
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
Asia



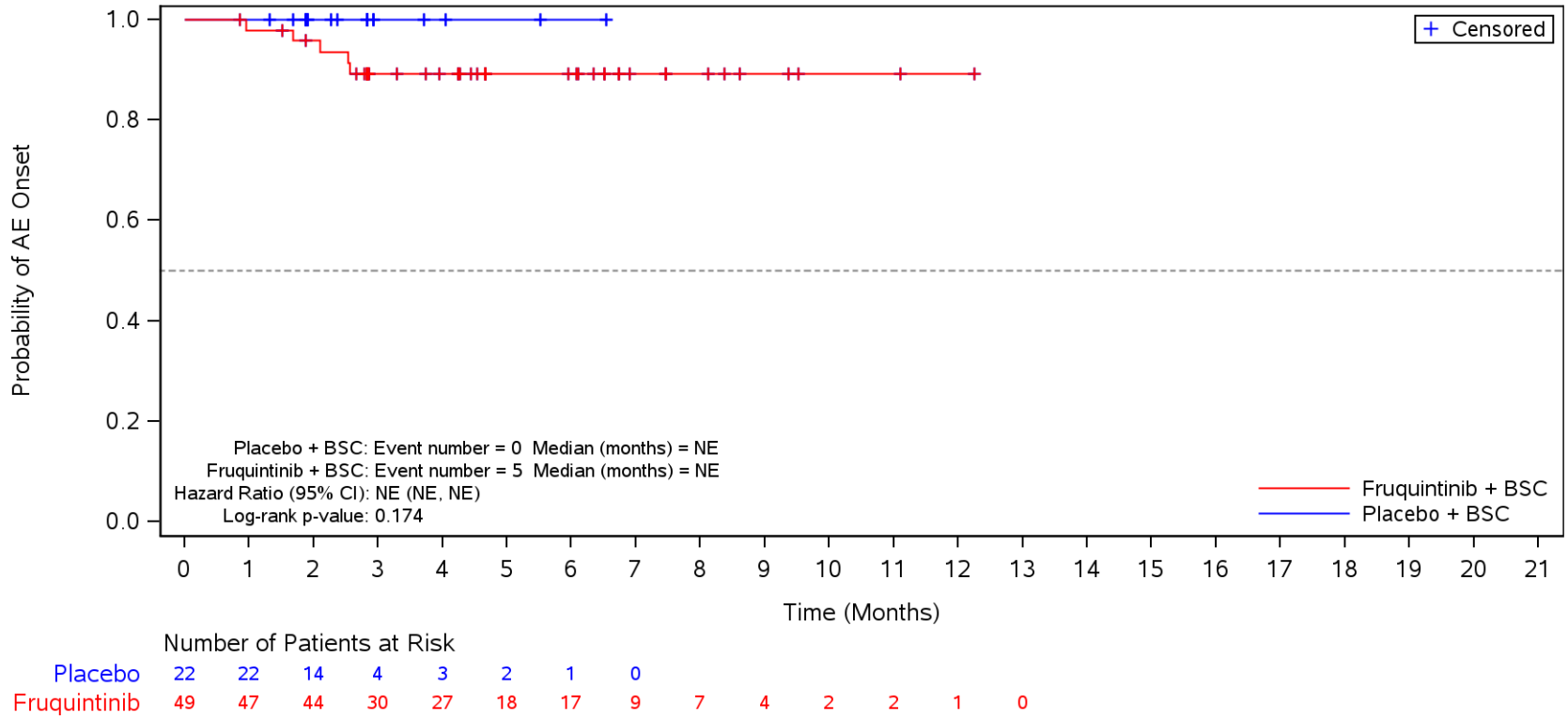
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
Asia



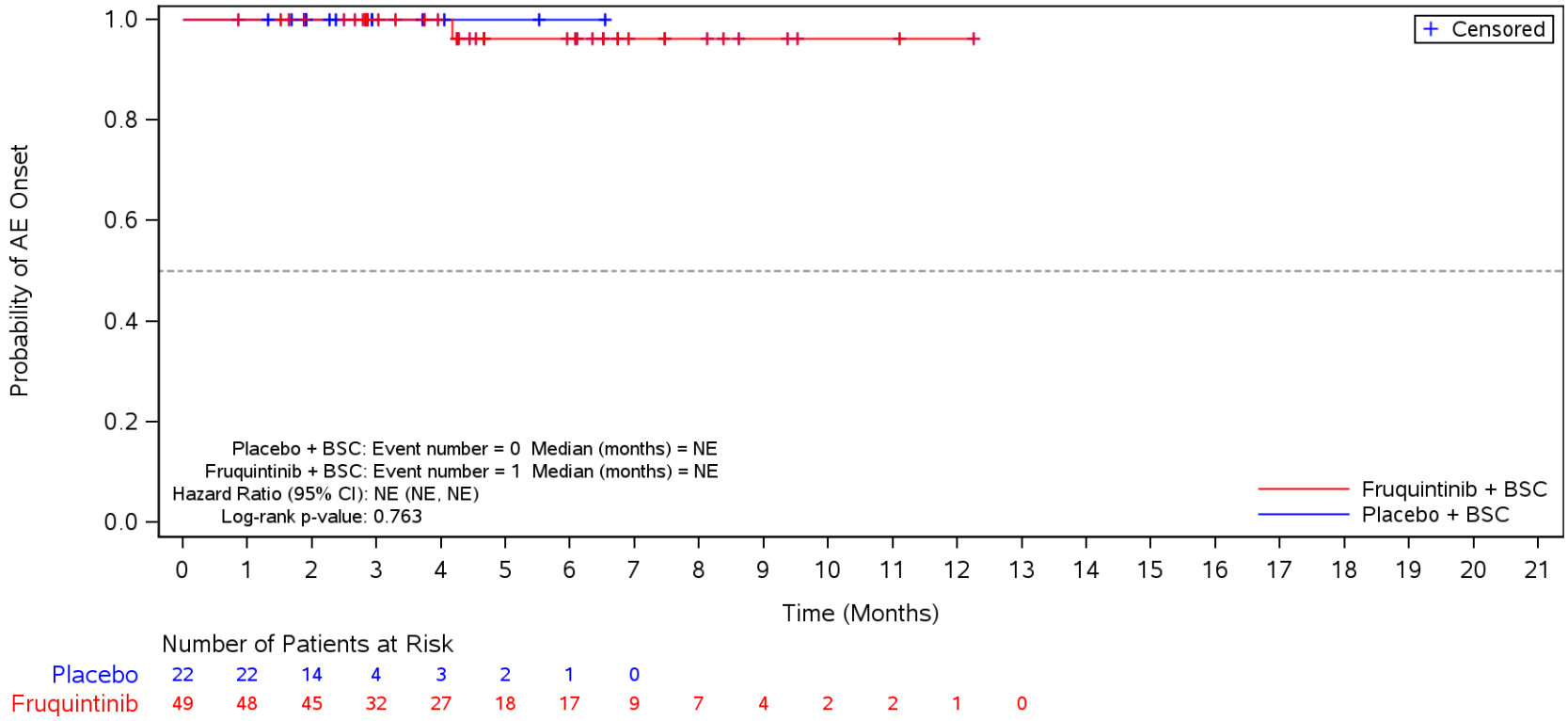
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
Asia



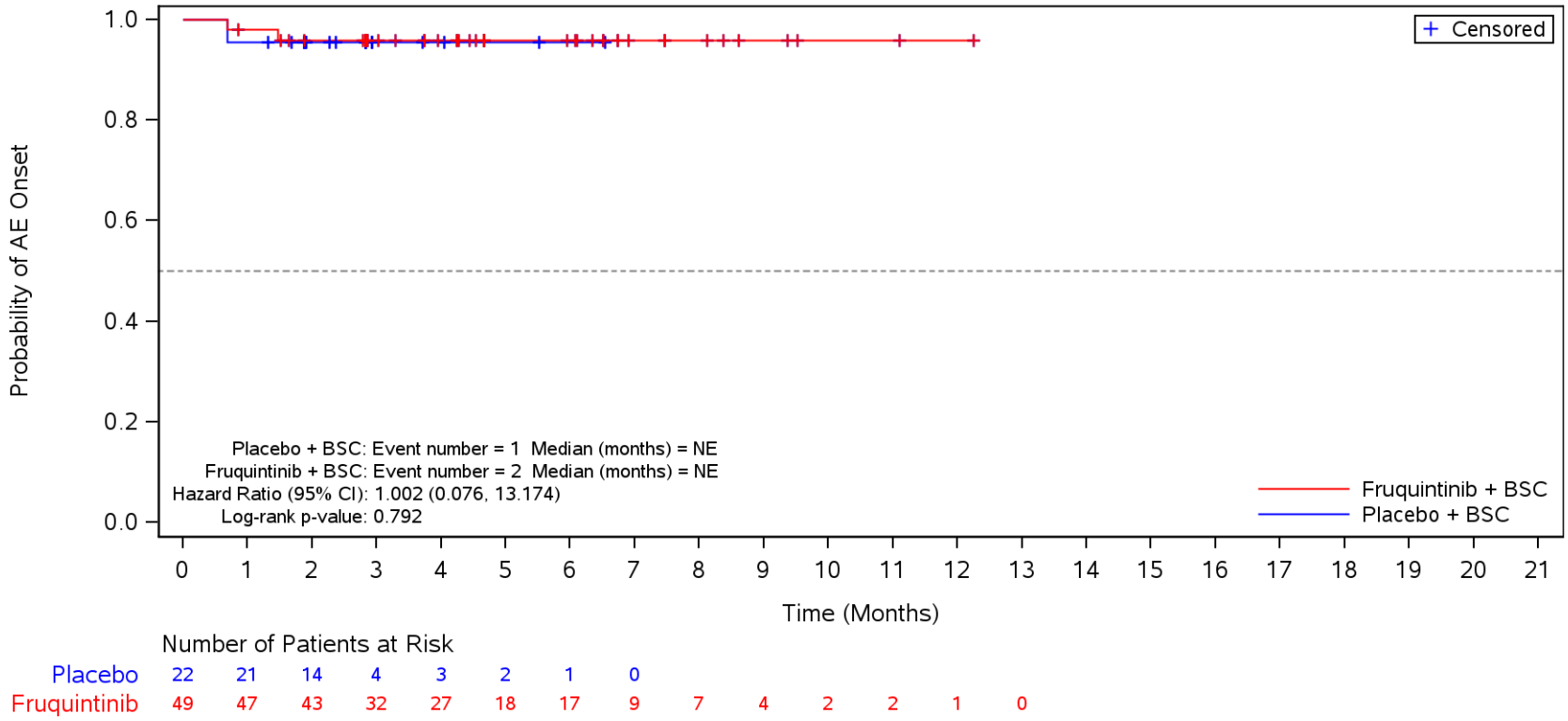
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
Asia



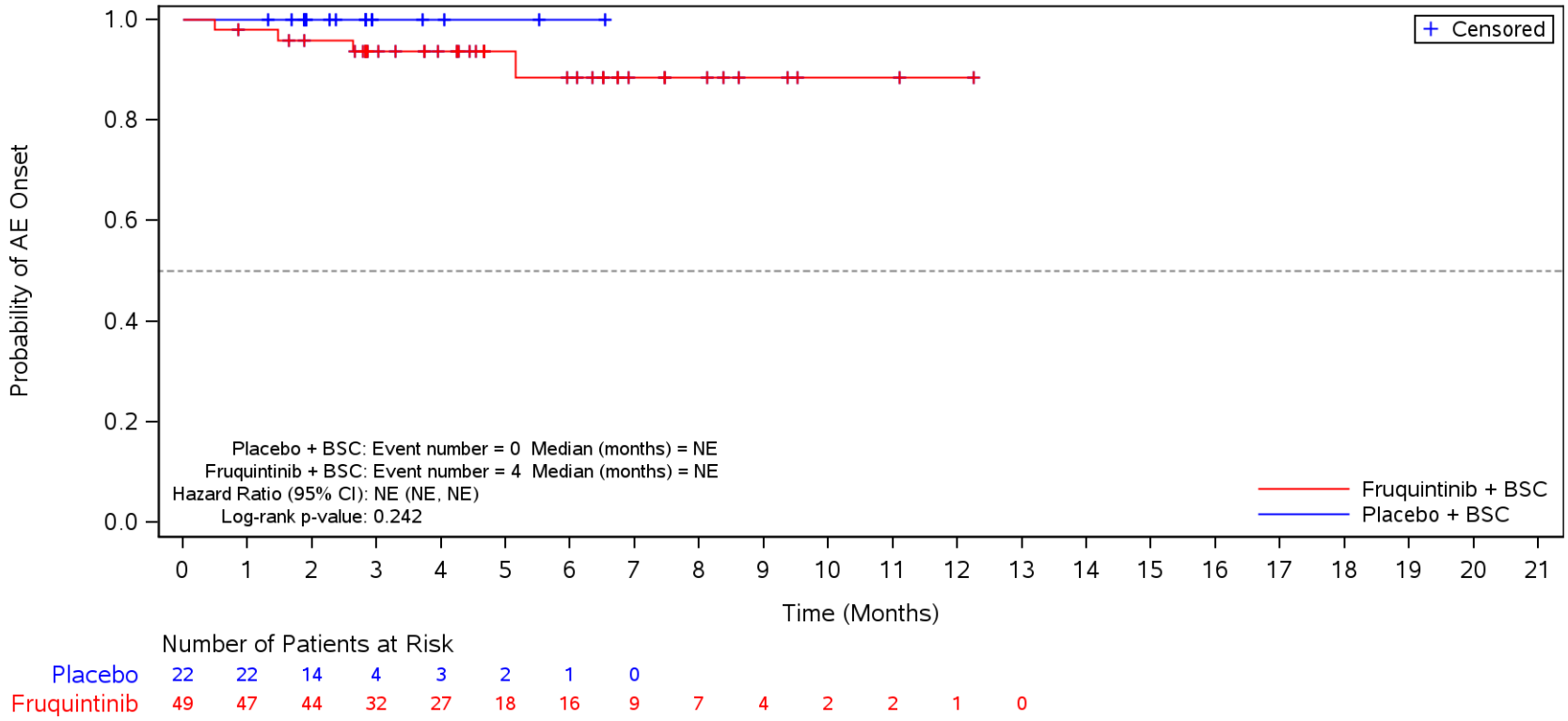
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
Asia



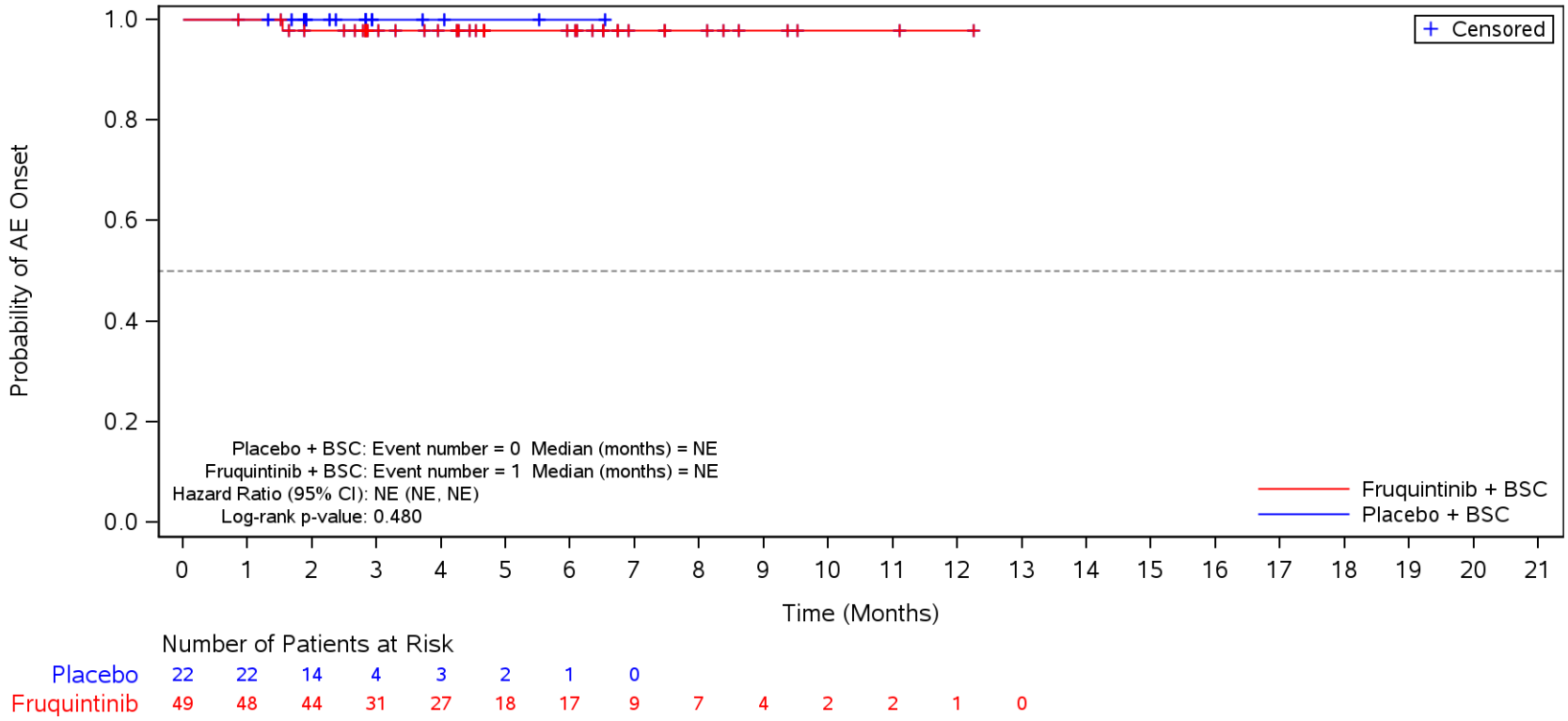
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
Asia



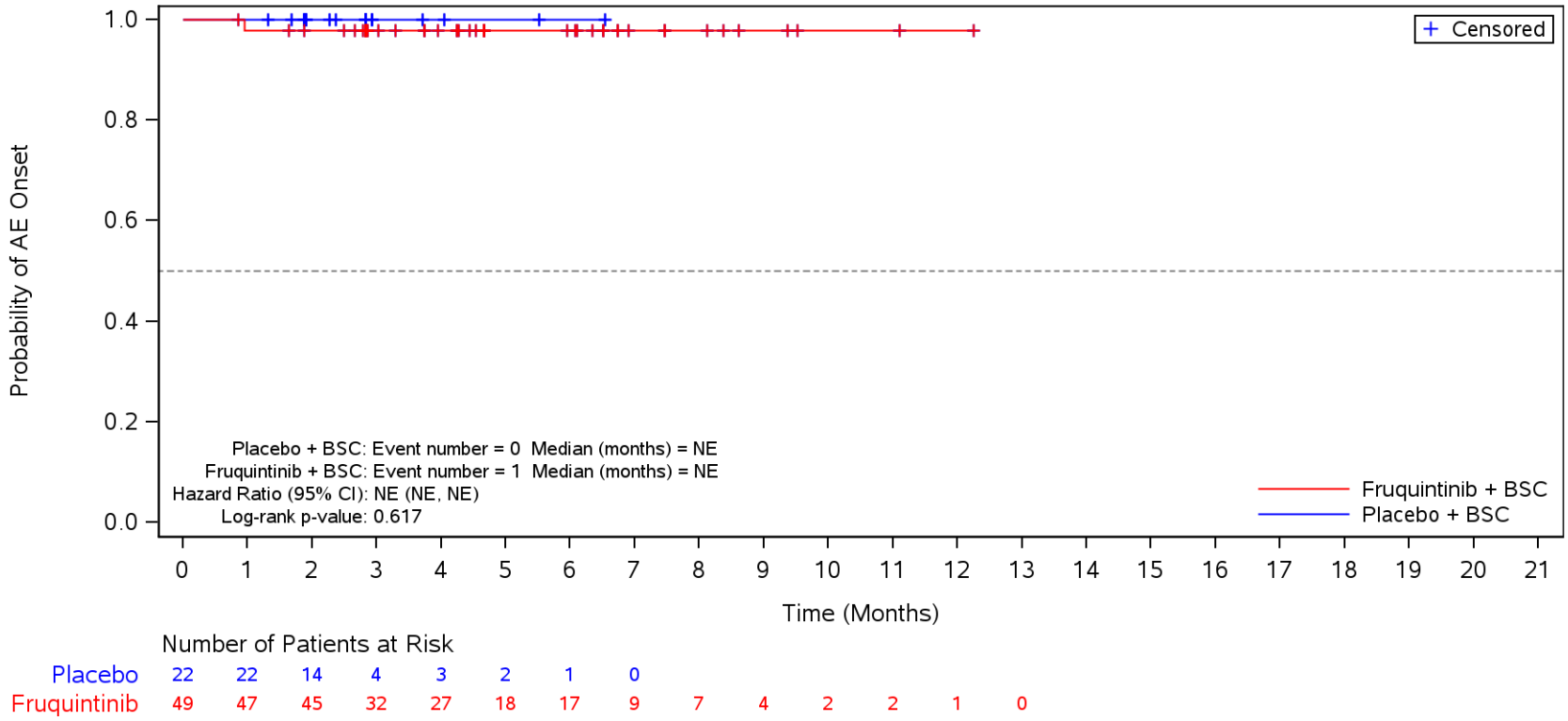
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
Asia



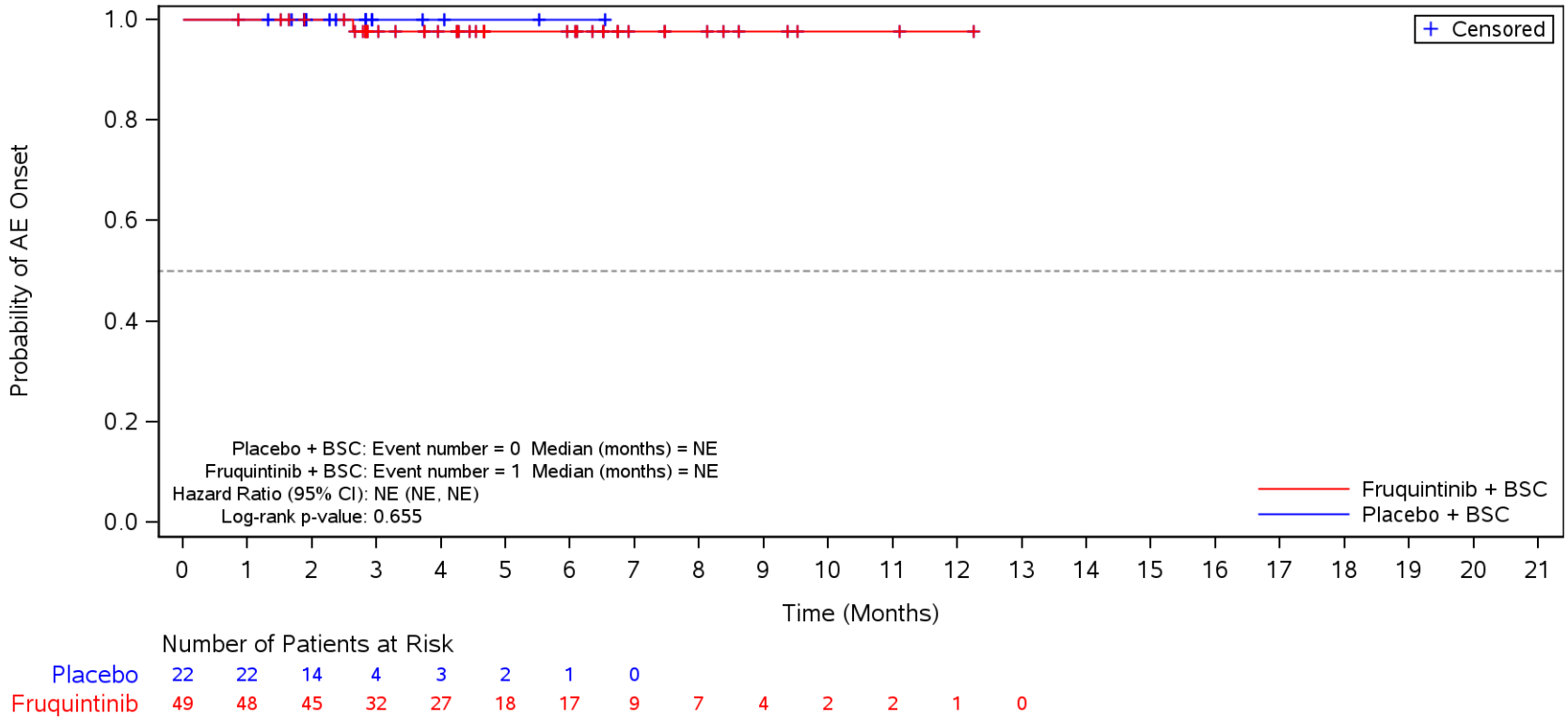
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
Asia



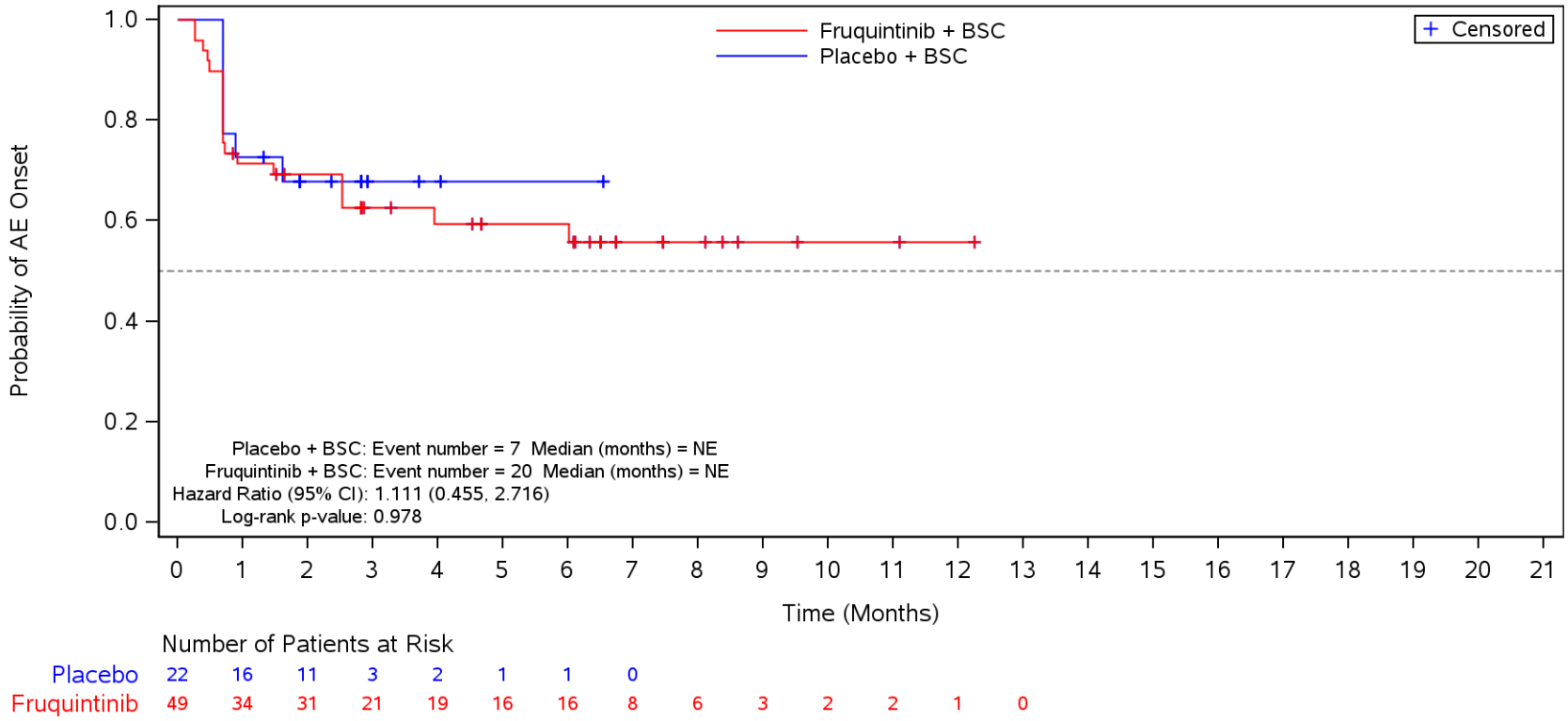
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
Asia



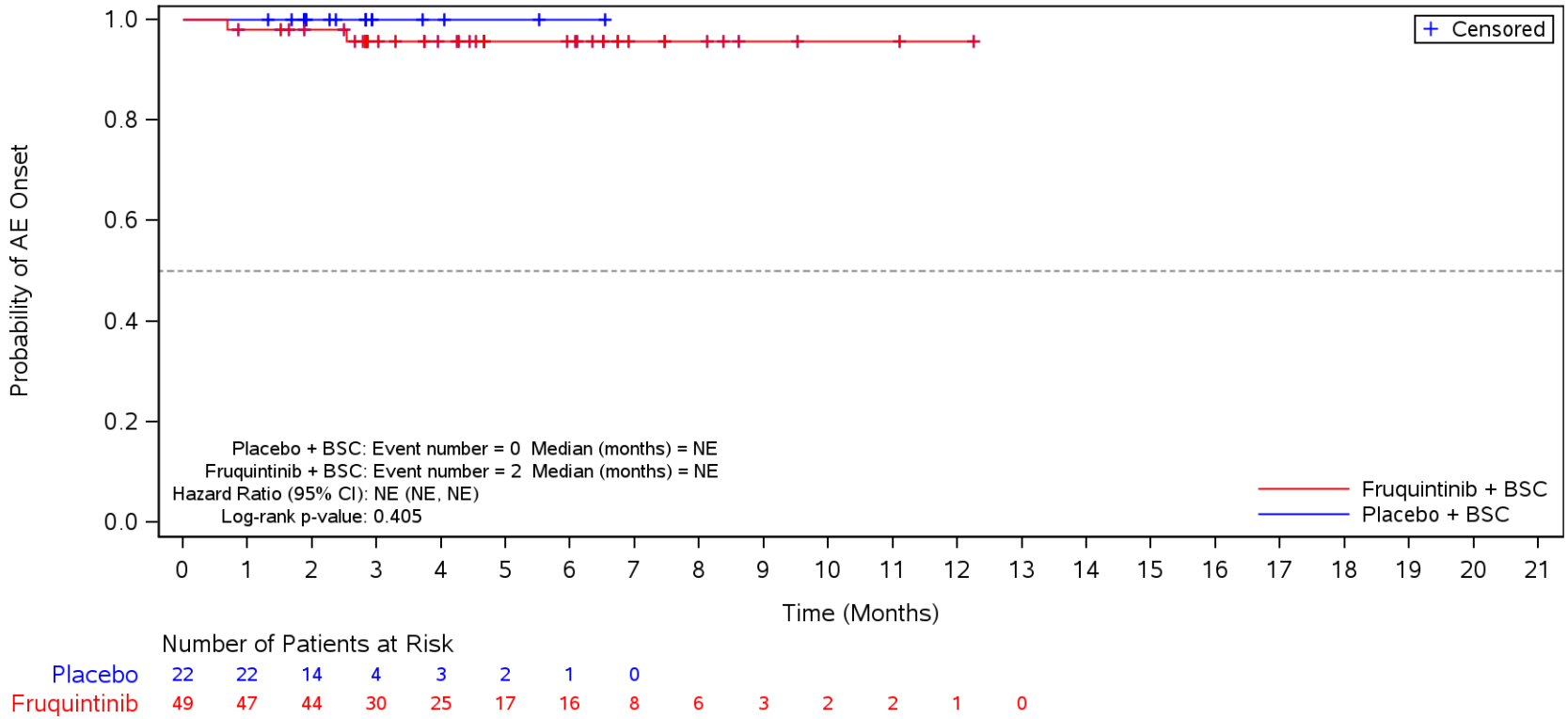
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations**
Asia



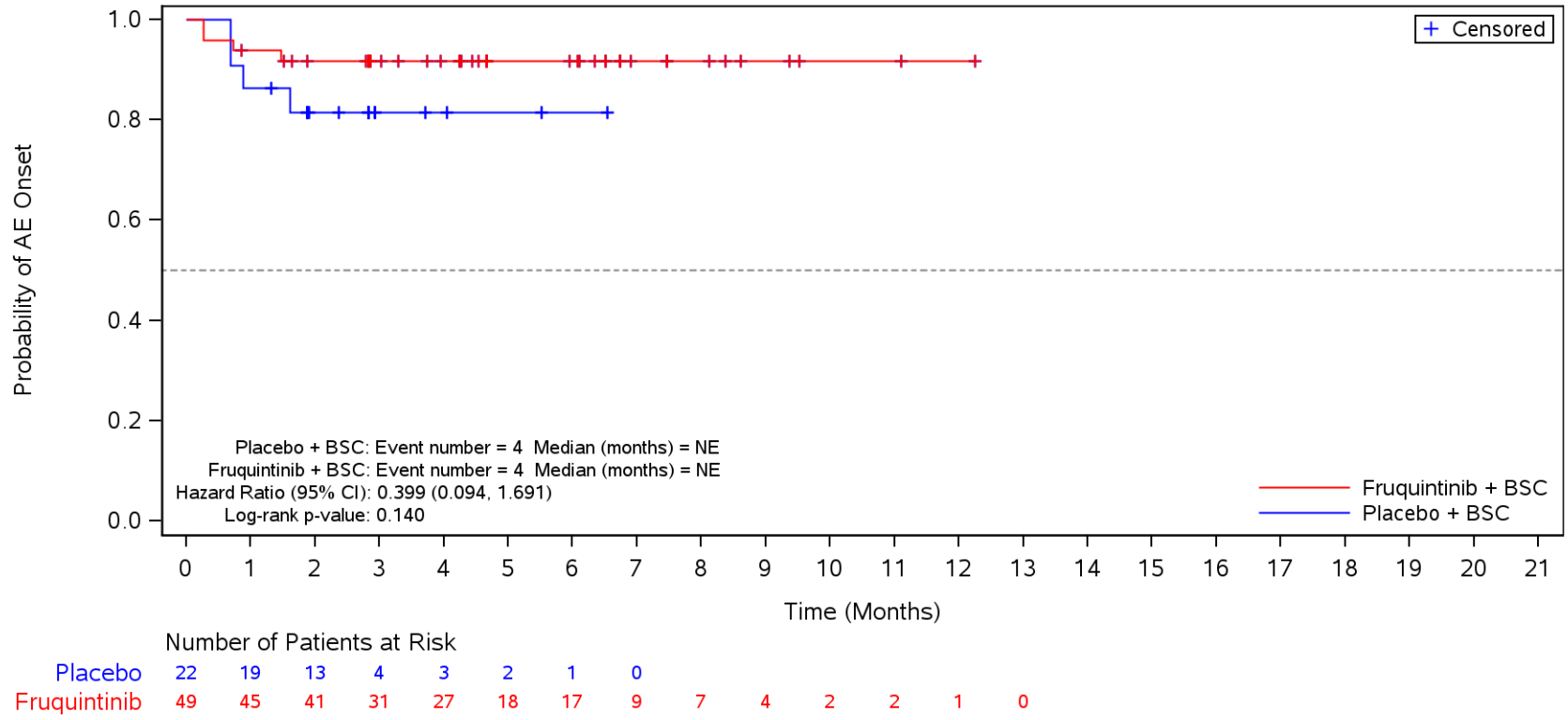
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
Asia



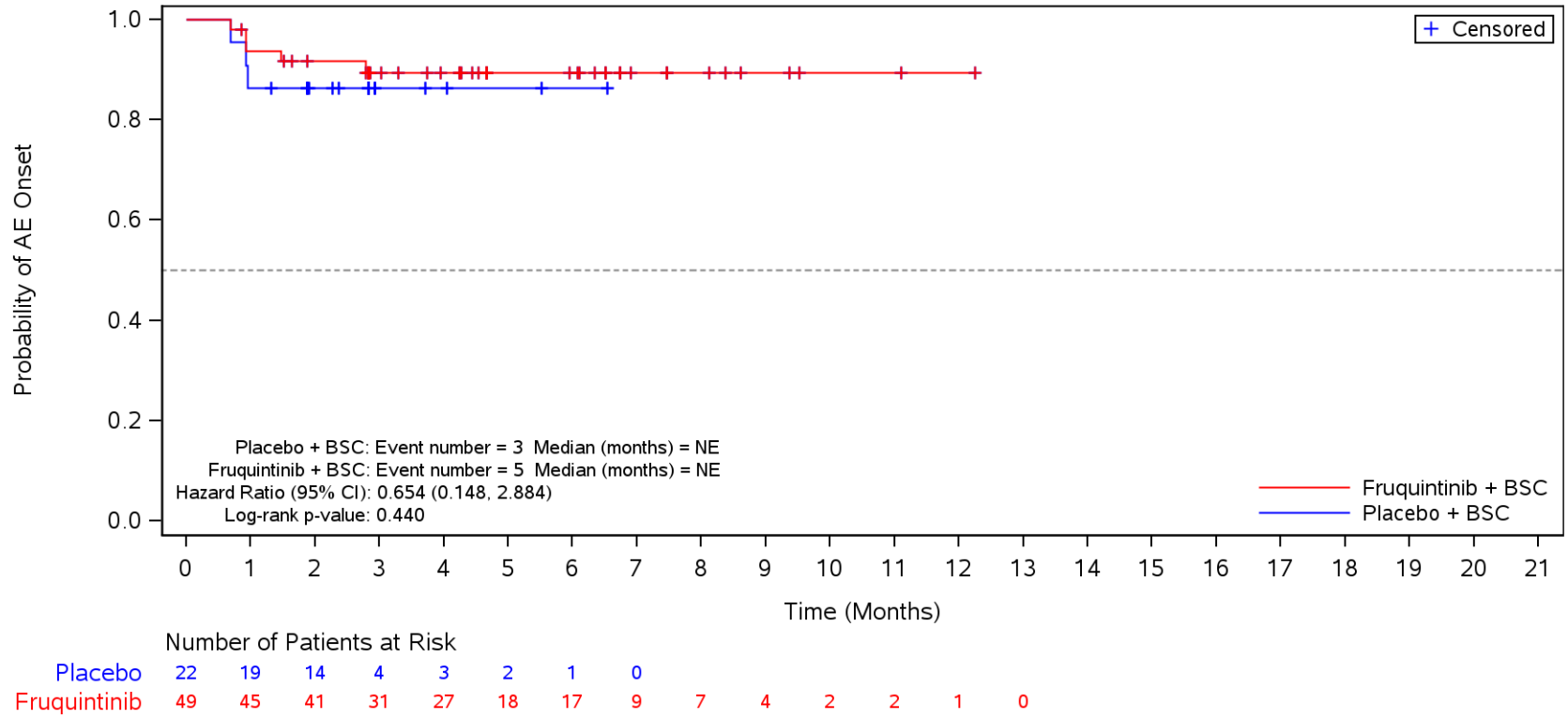
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
Asia



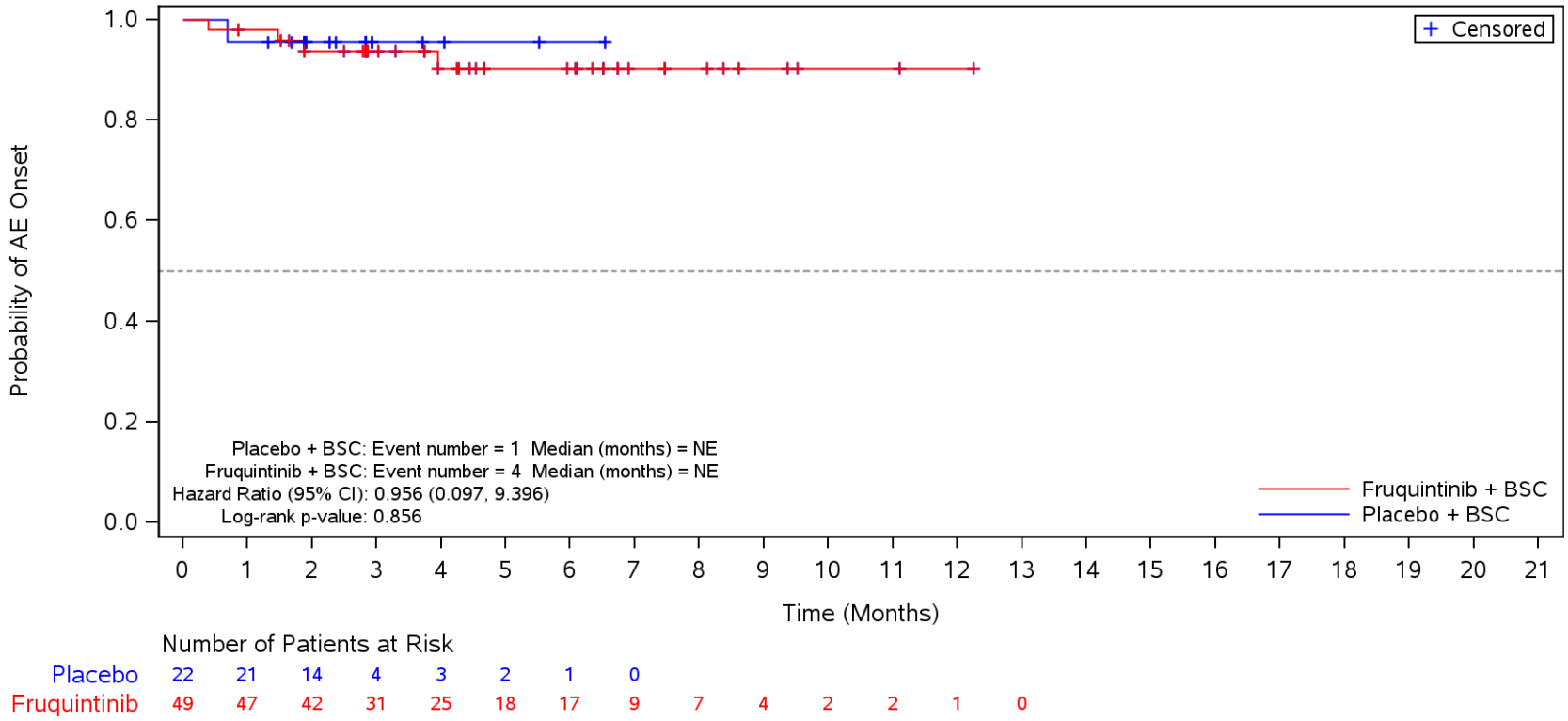
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
Asia



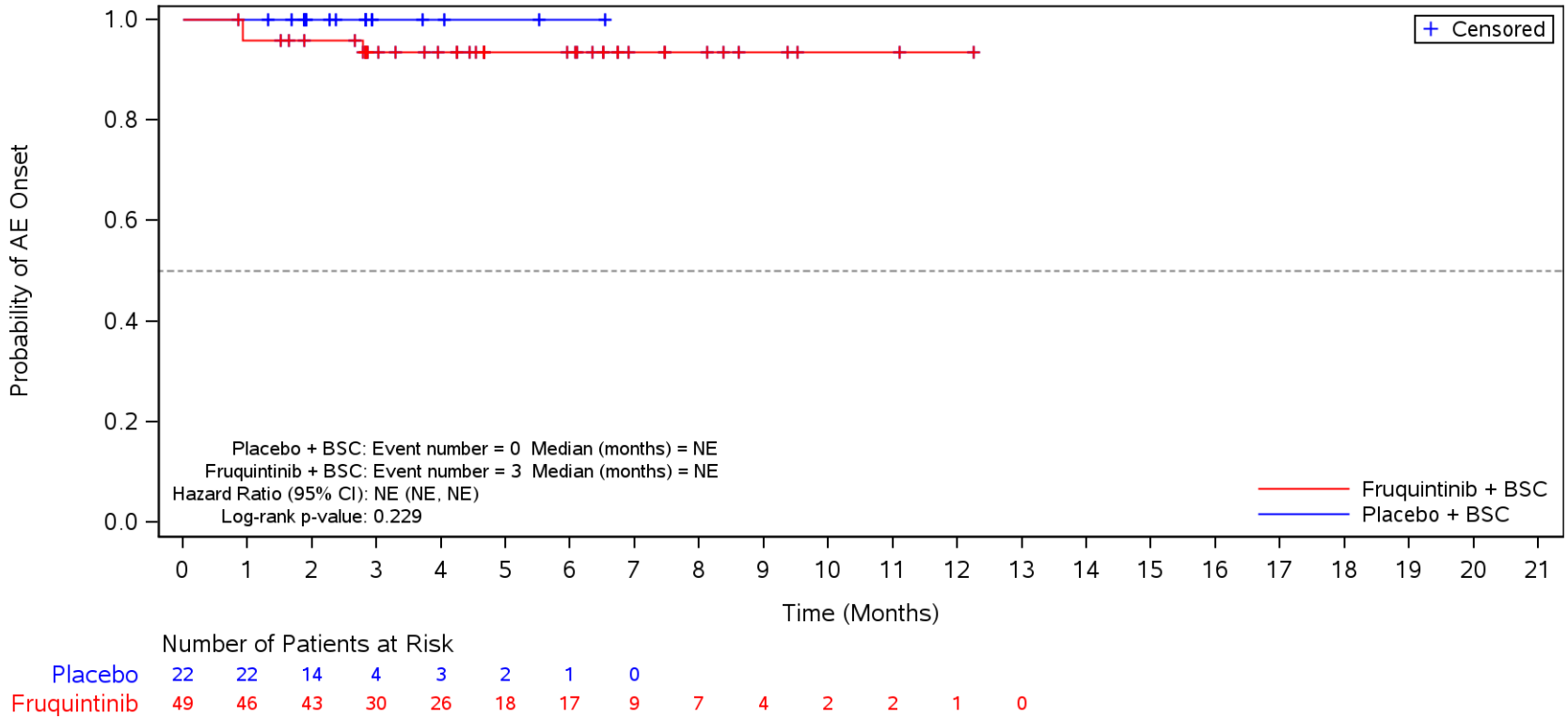
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
Asia



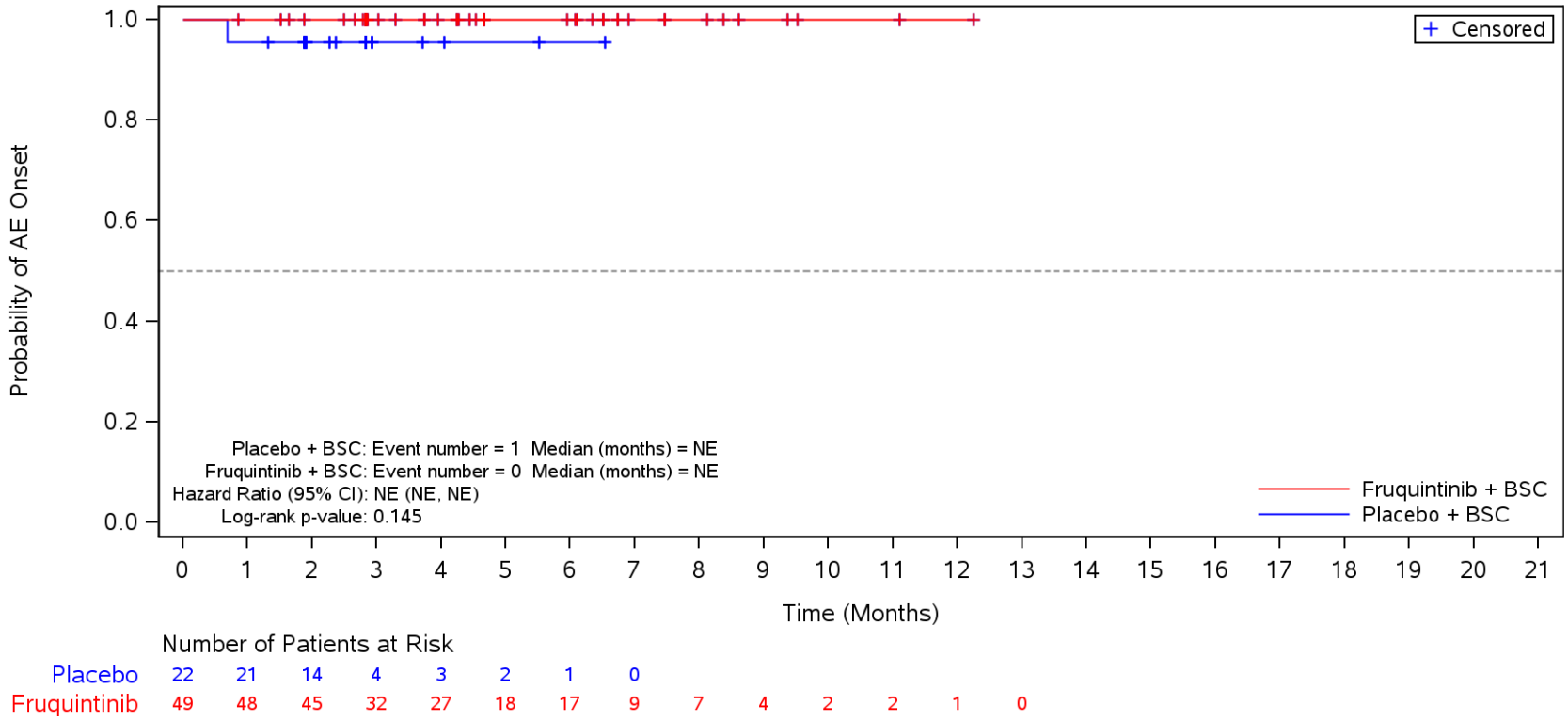
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
Asia



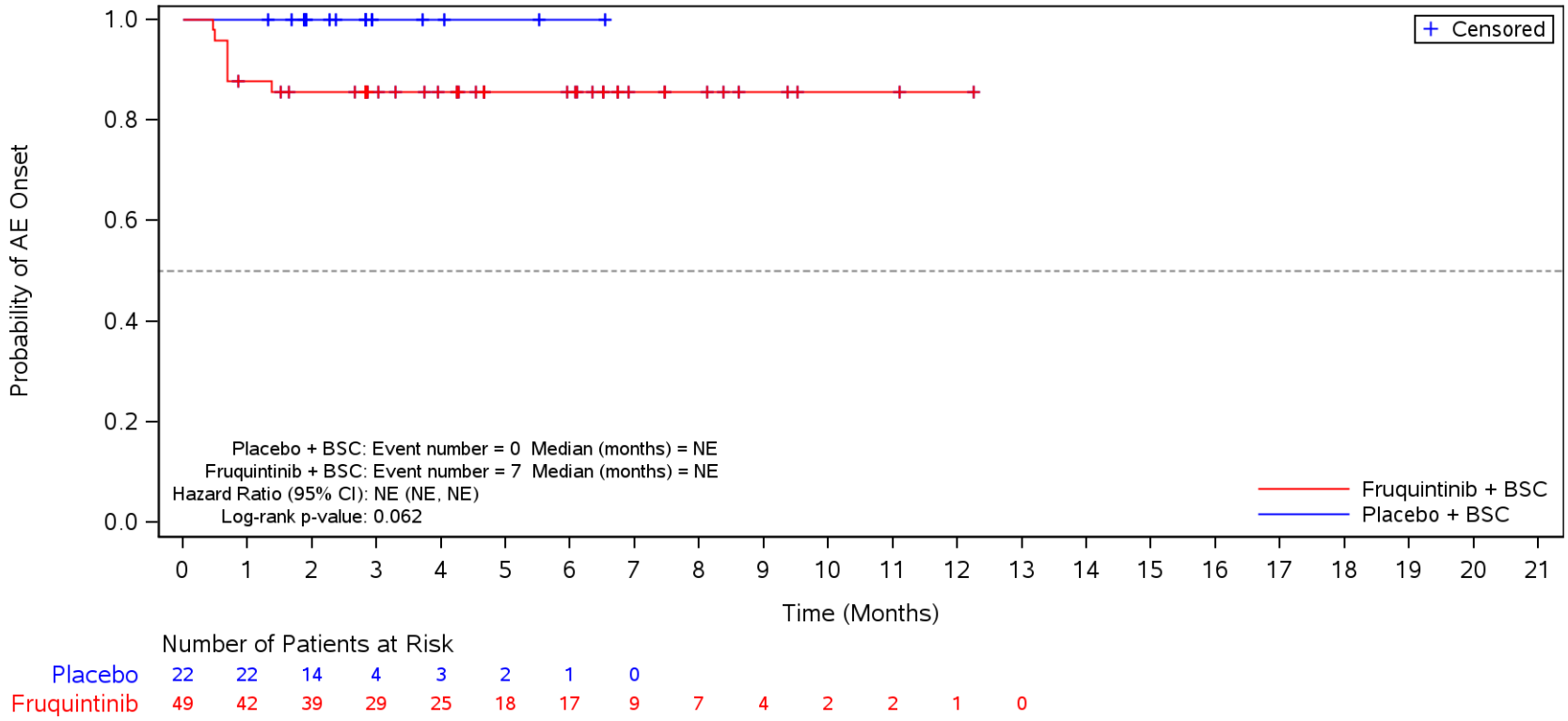
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
Asia



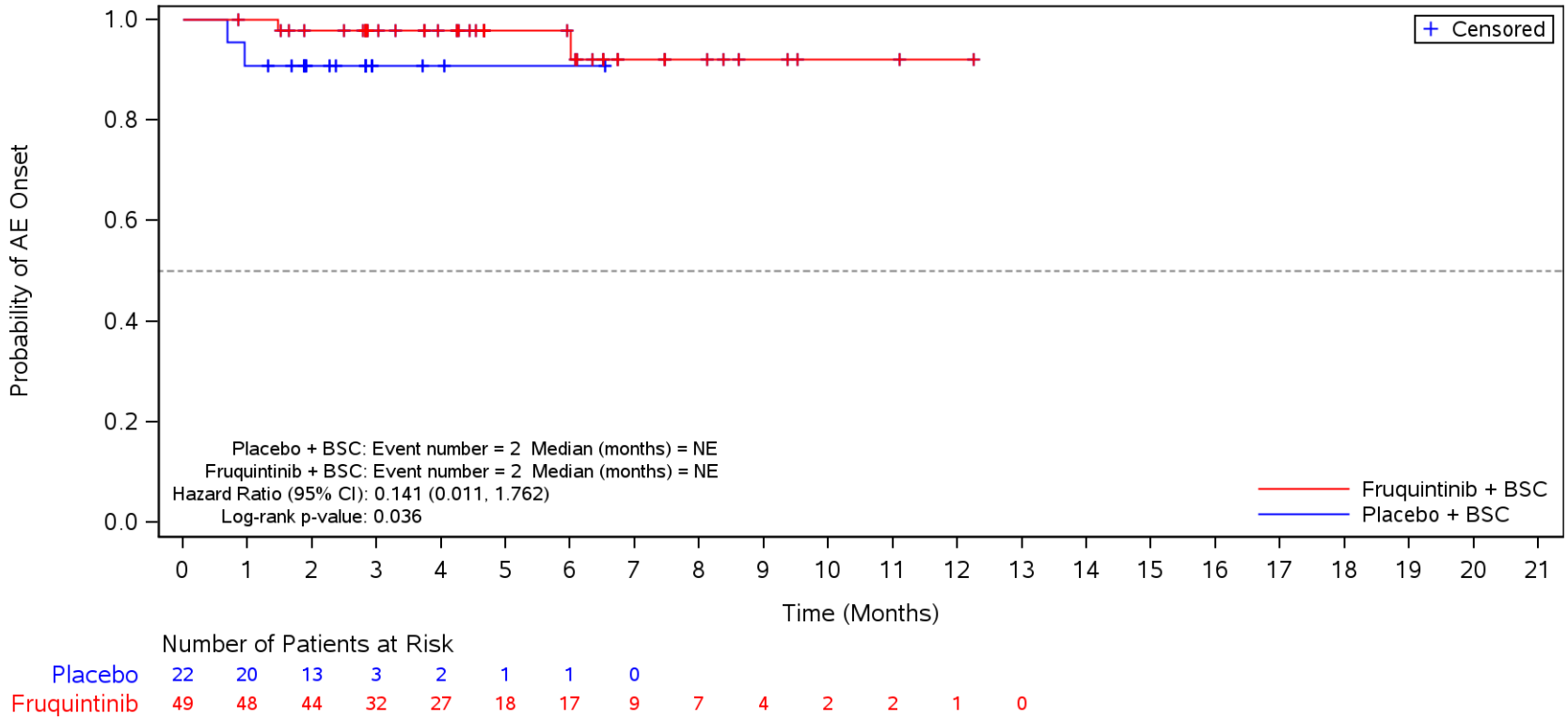
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
Asia



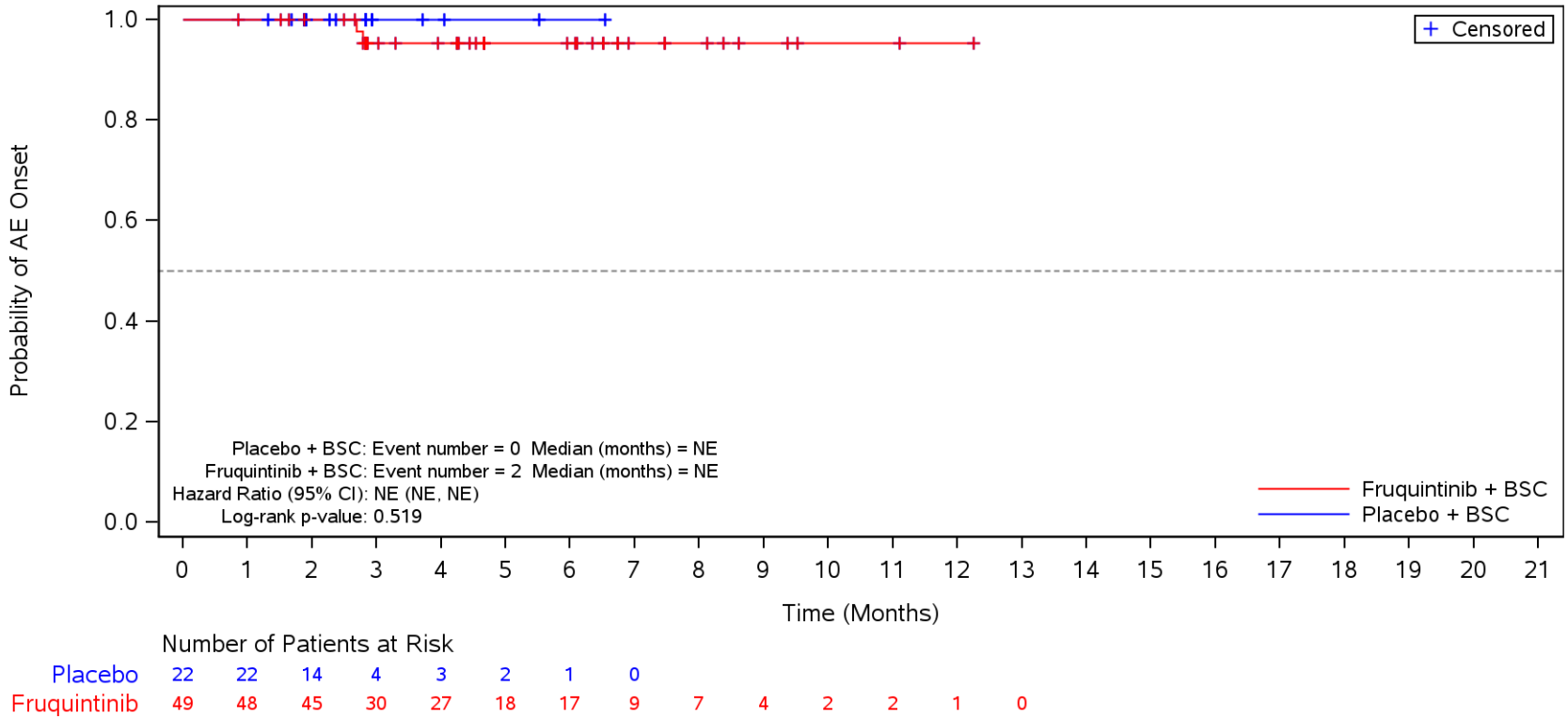
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
Asia



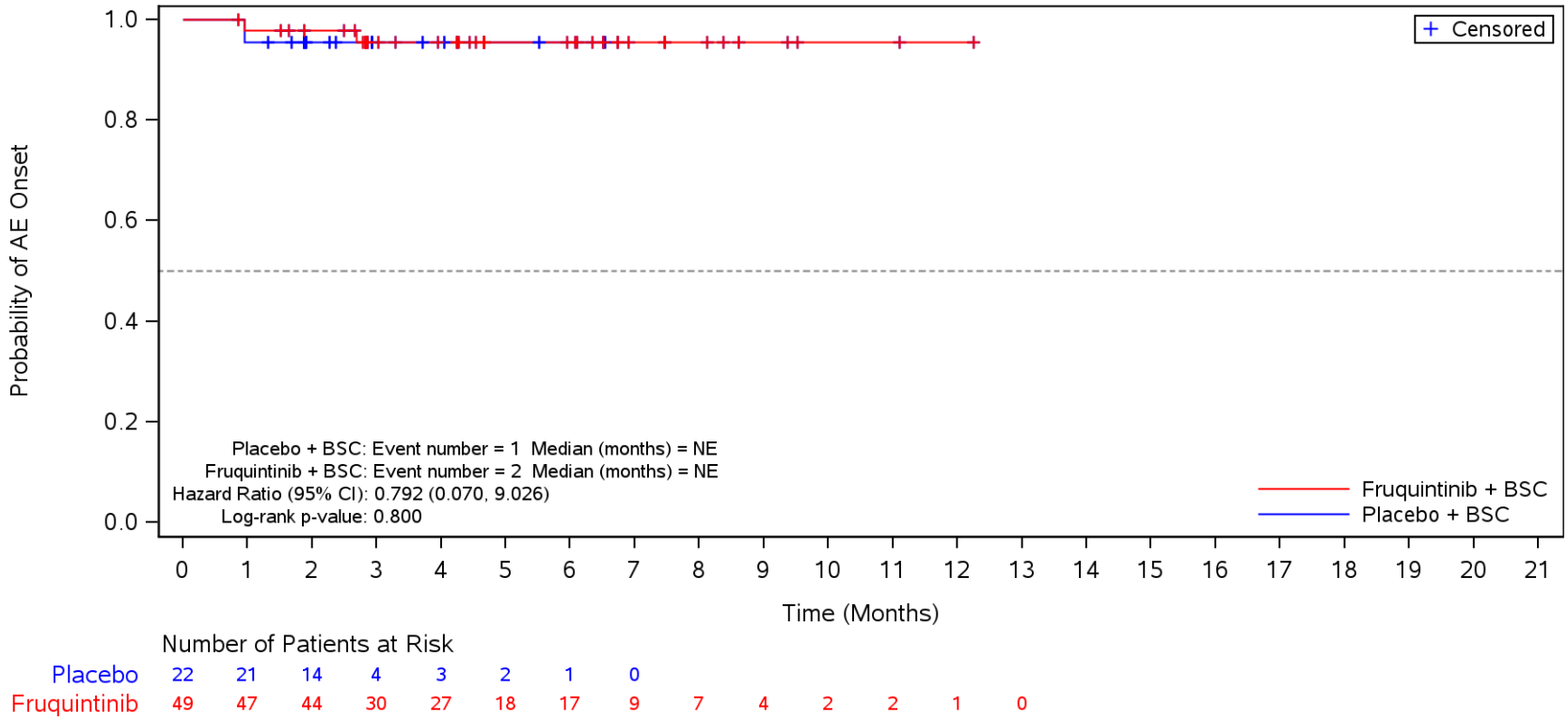
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
Asia



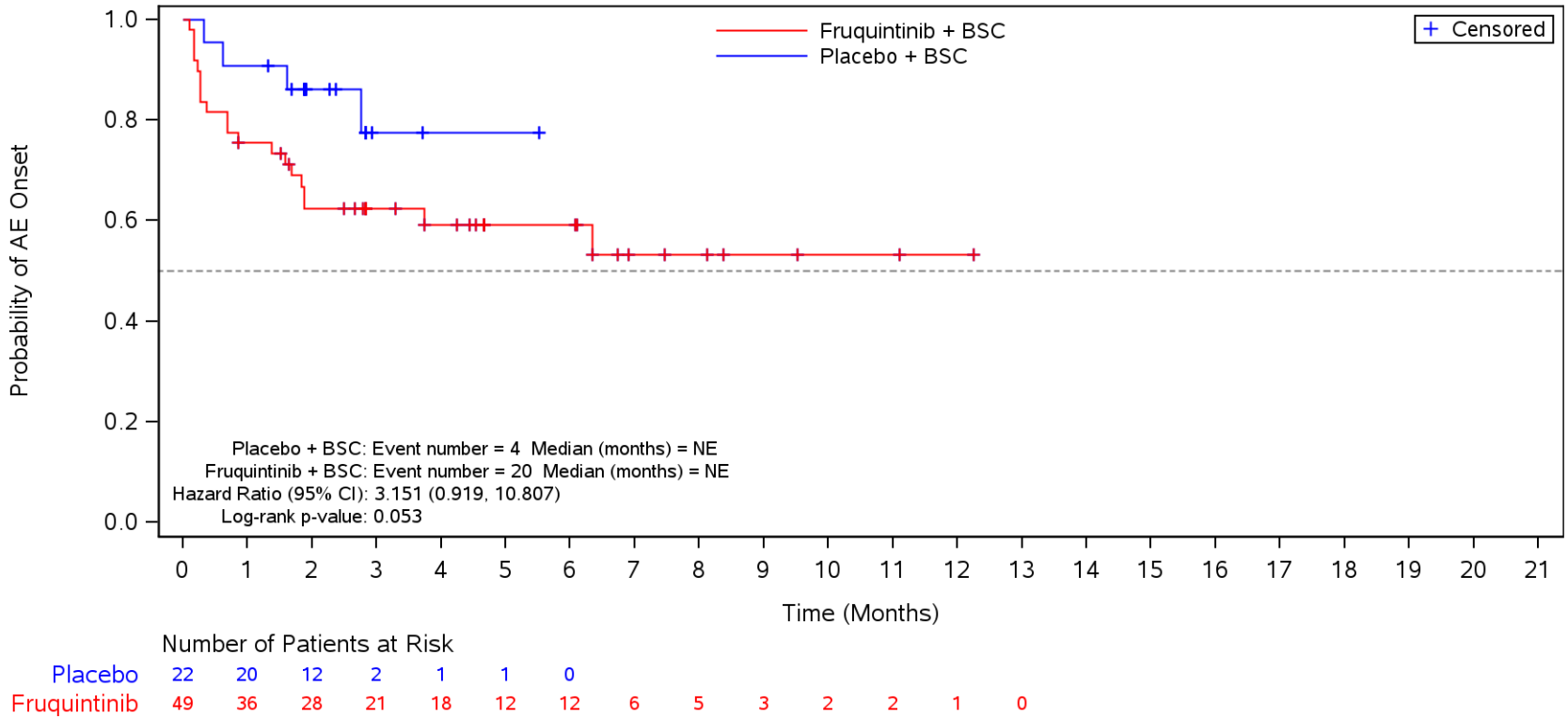
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
Asia



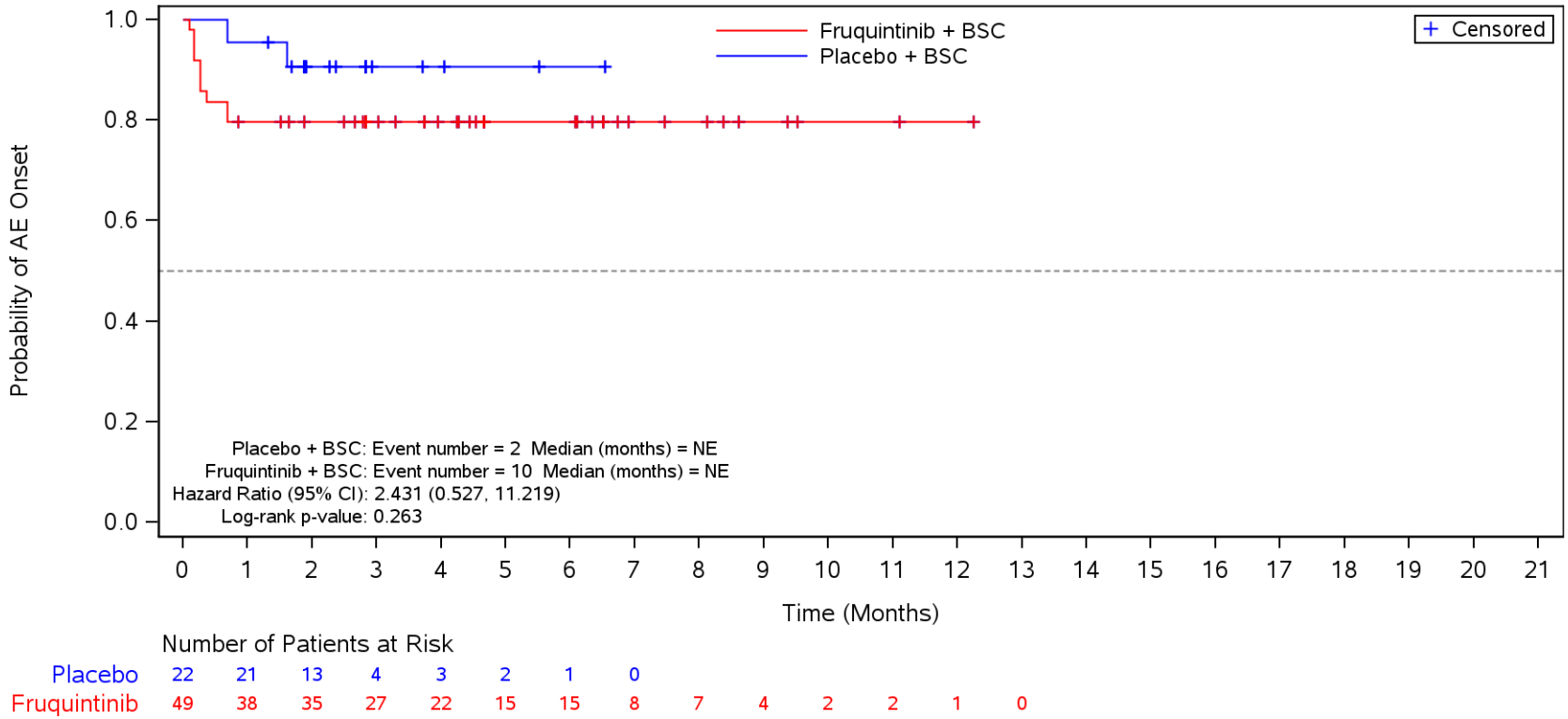
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
Asia



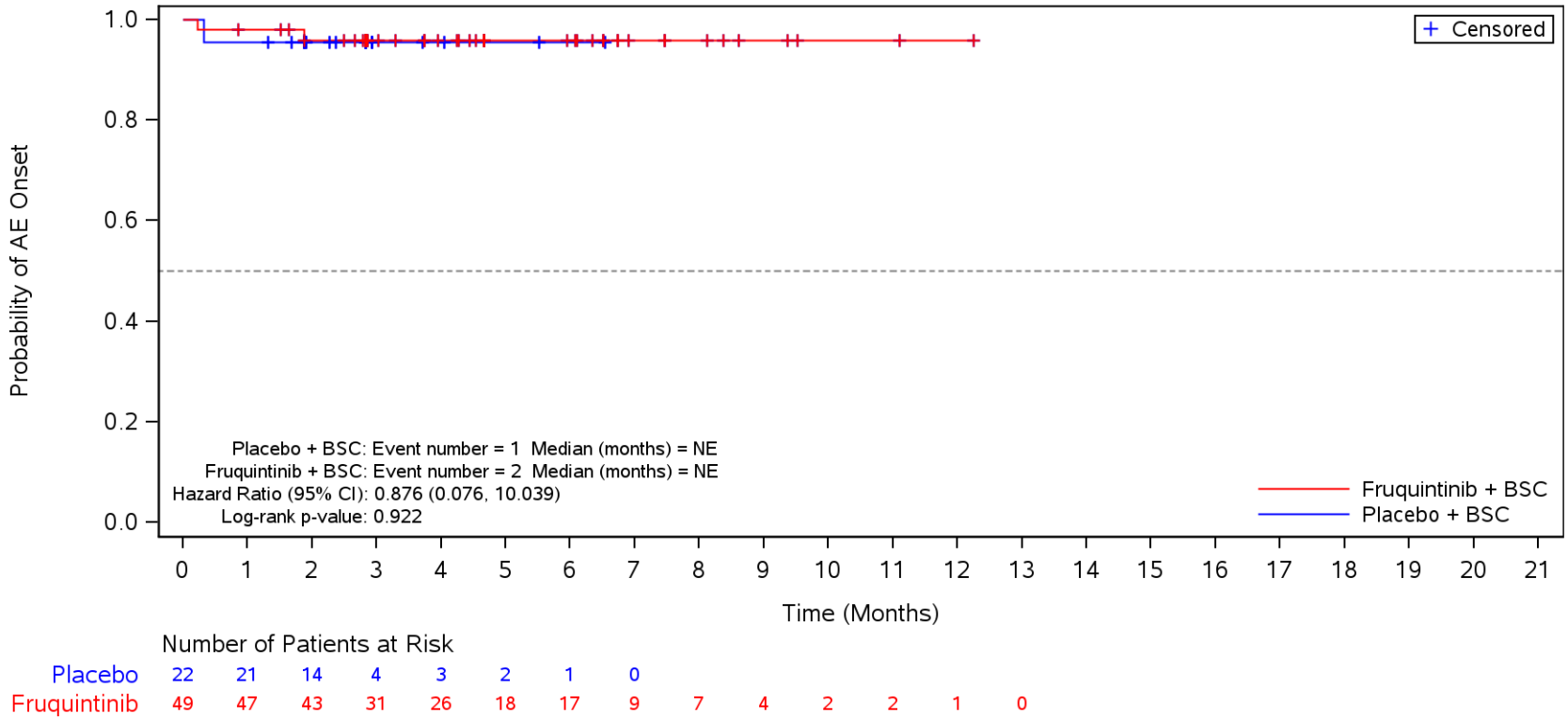
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
Asia



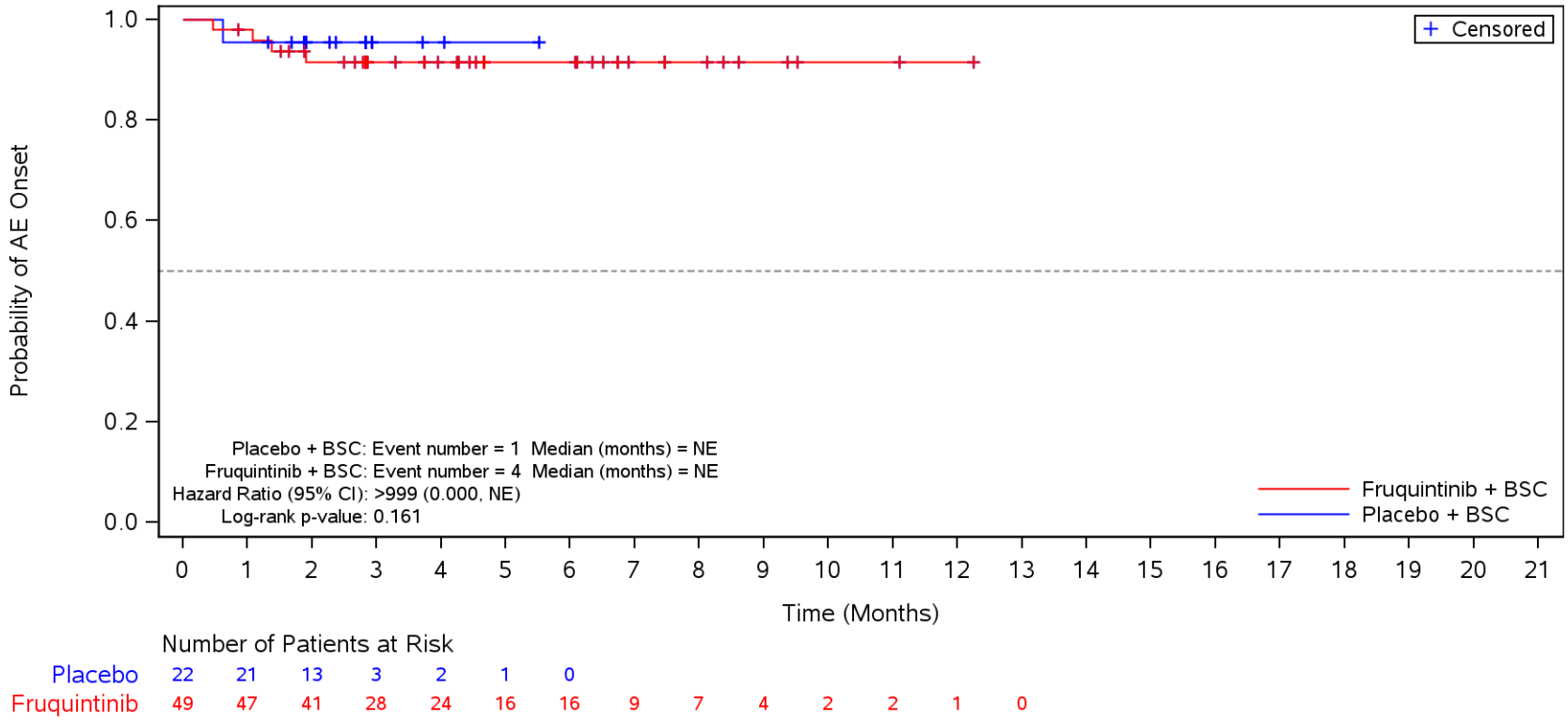
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
Asia



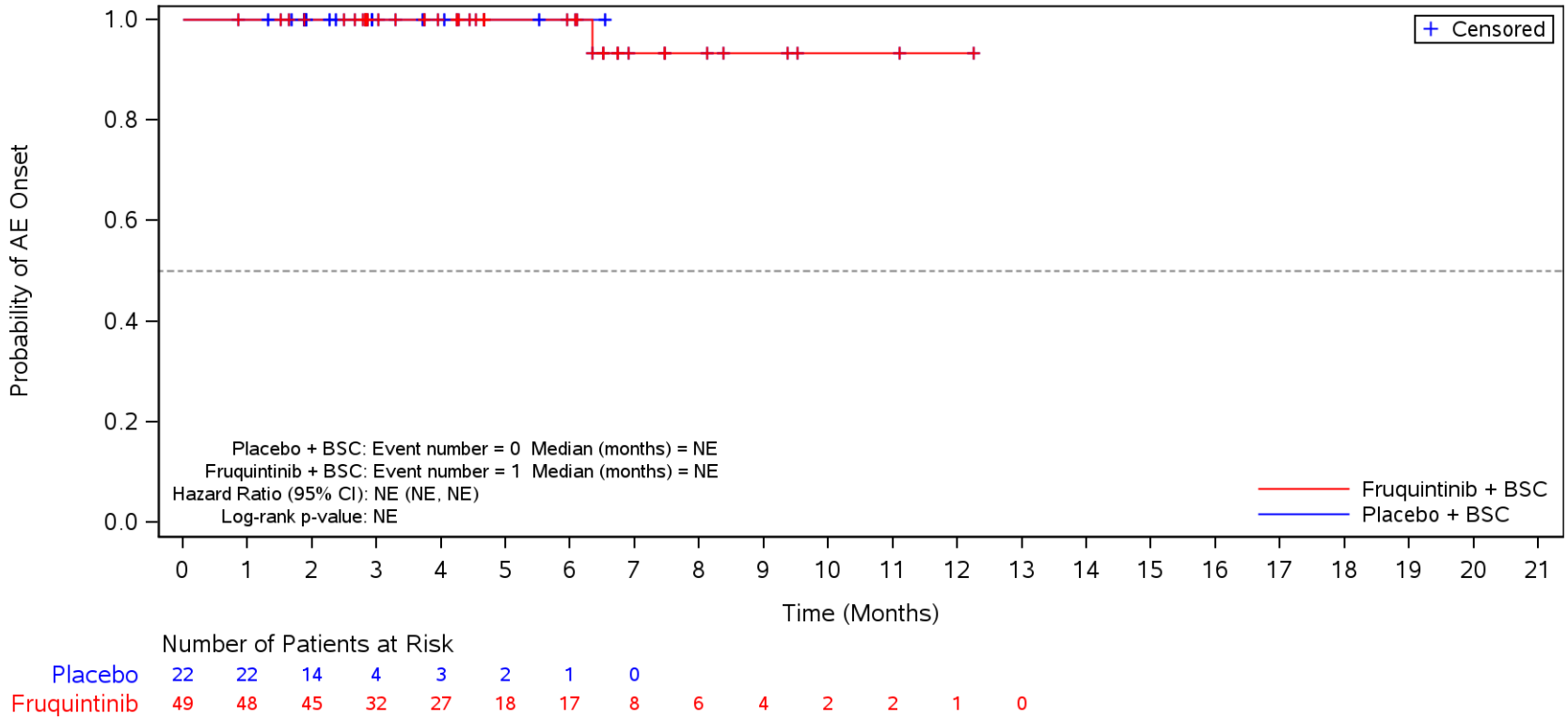
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
Asia



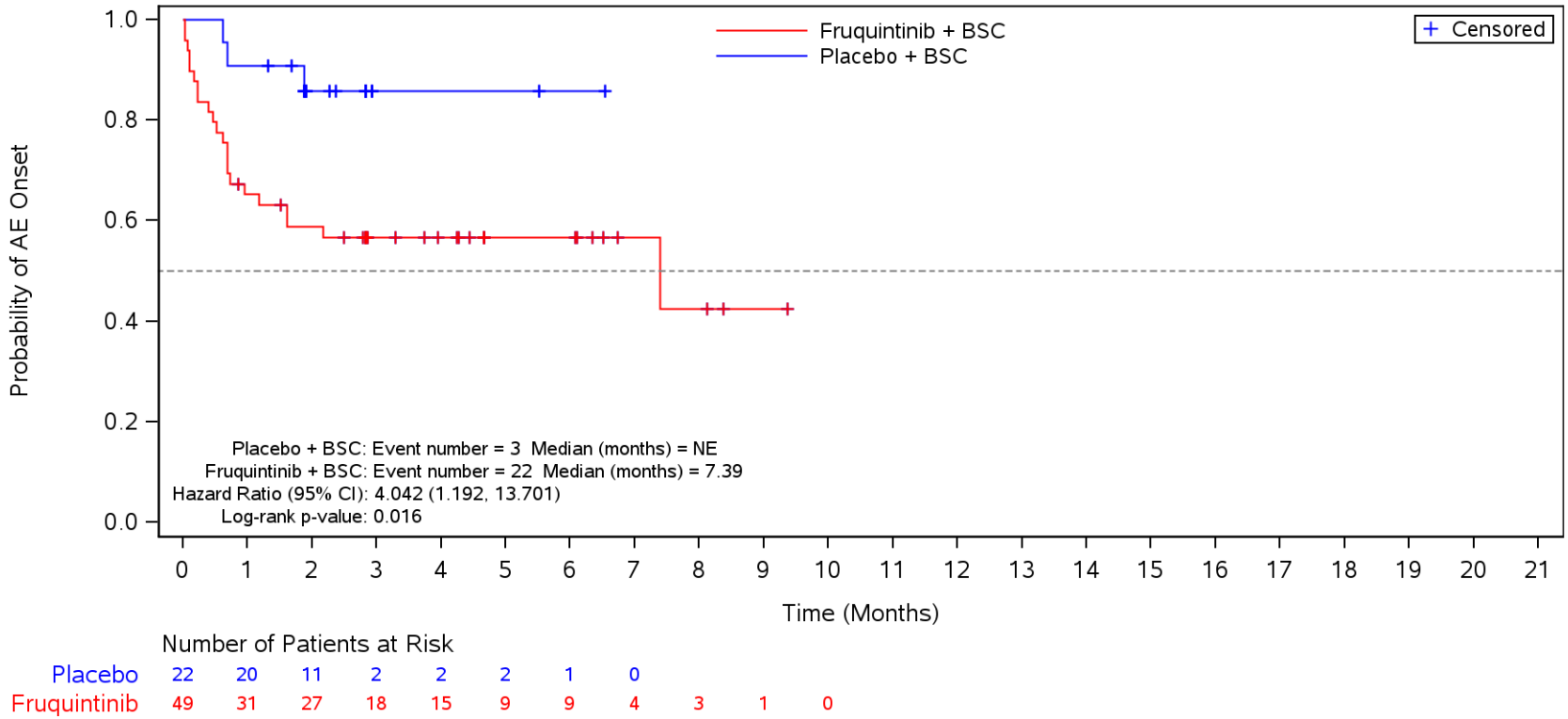
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
Asia



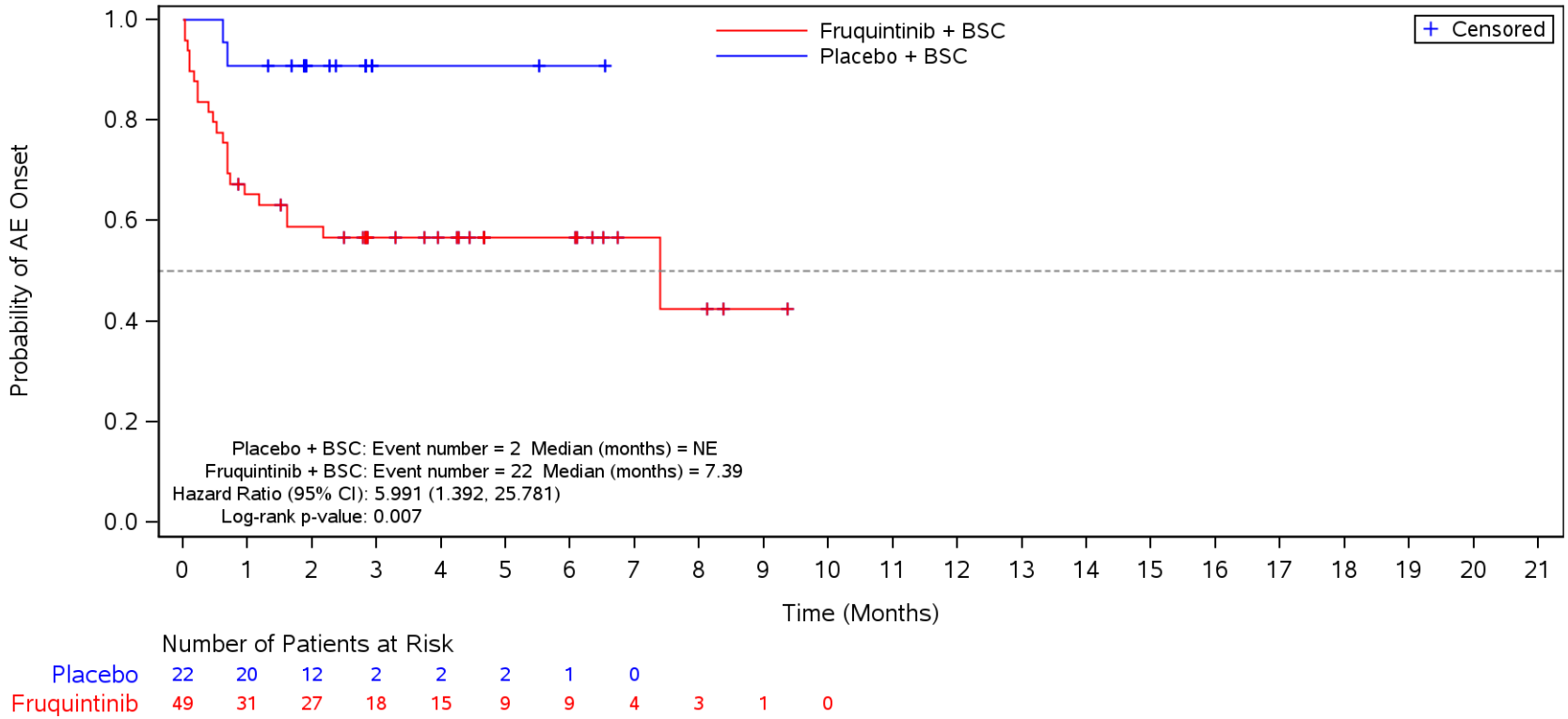
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Vascular disorders**
Asia



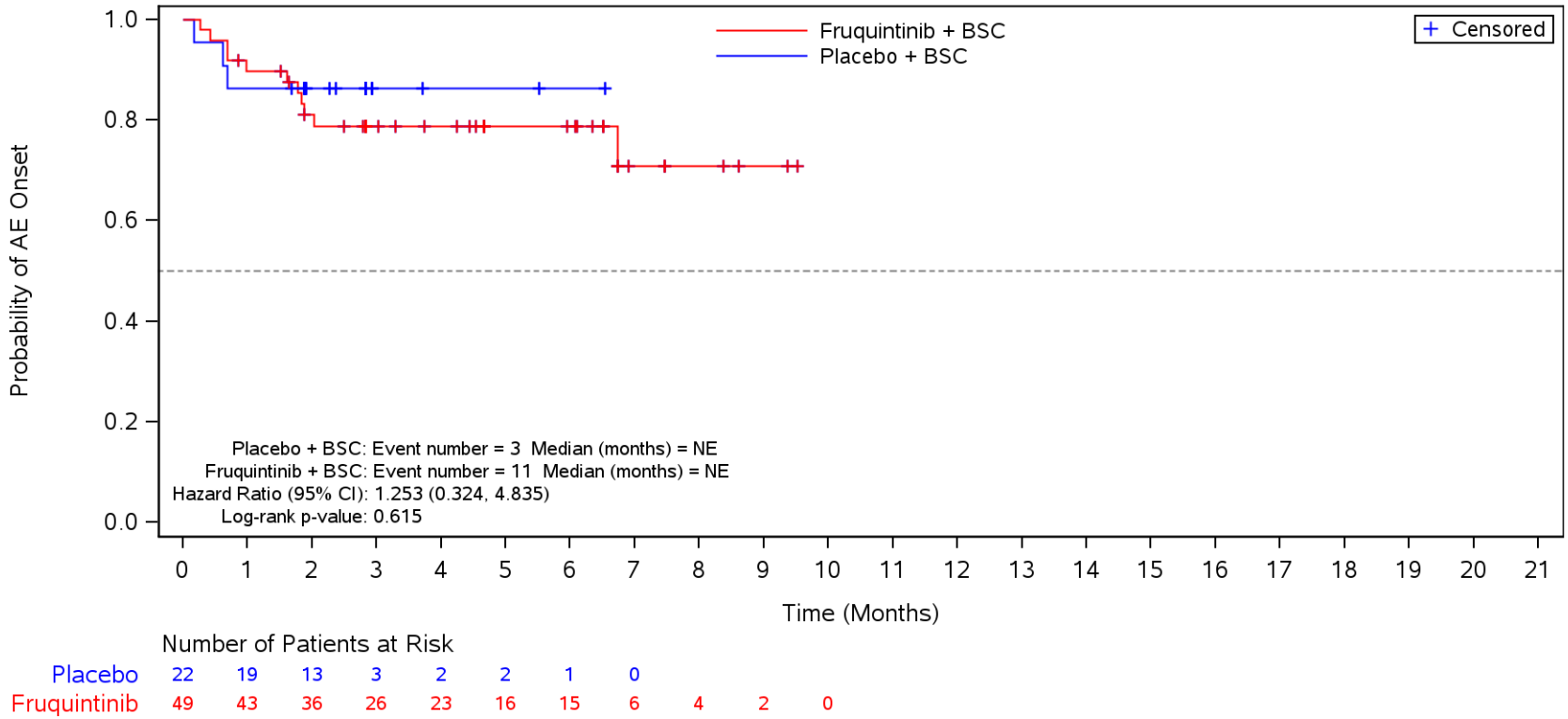
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
Asia



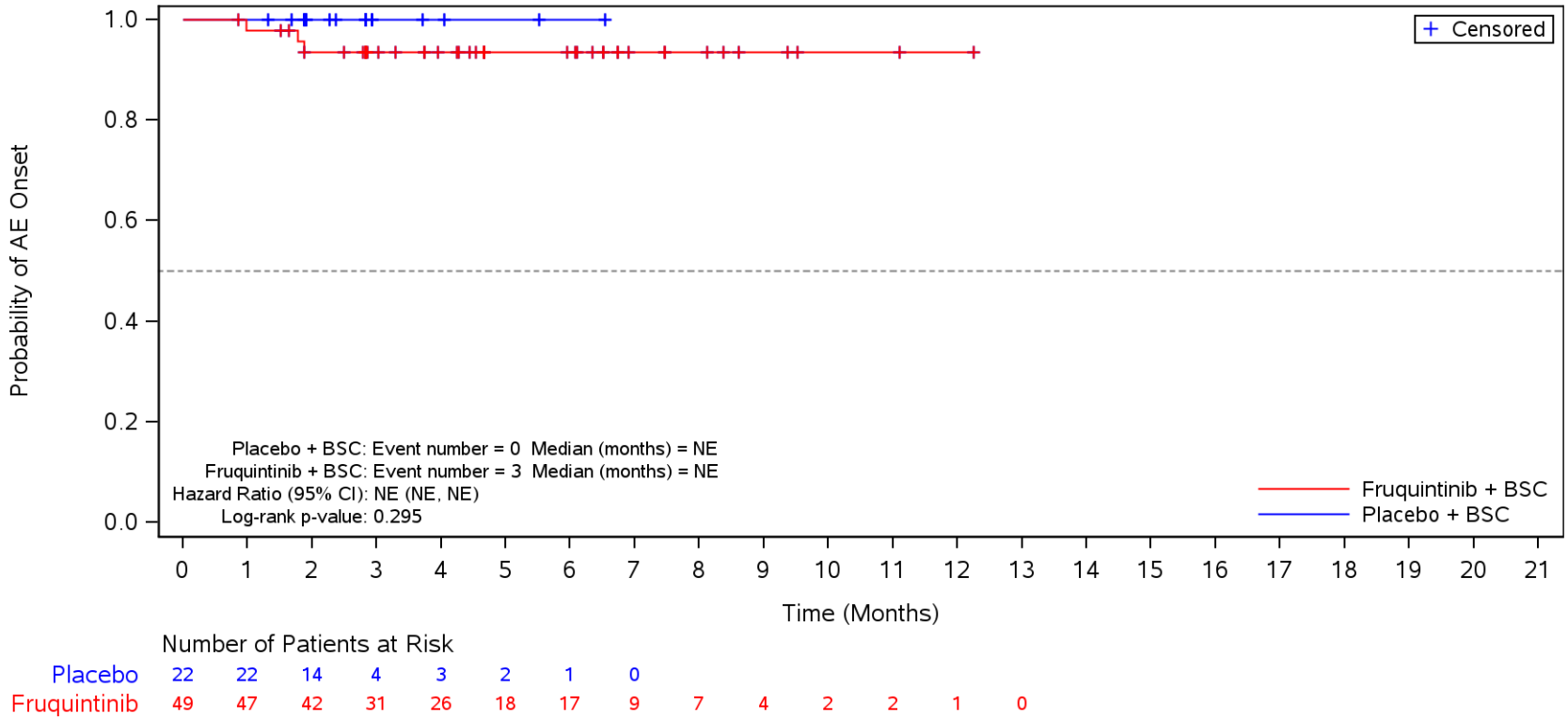
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
Asia



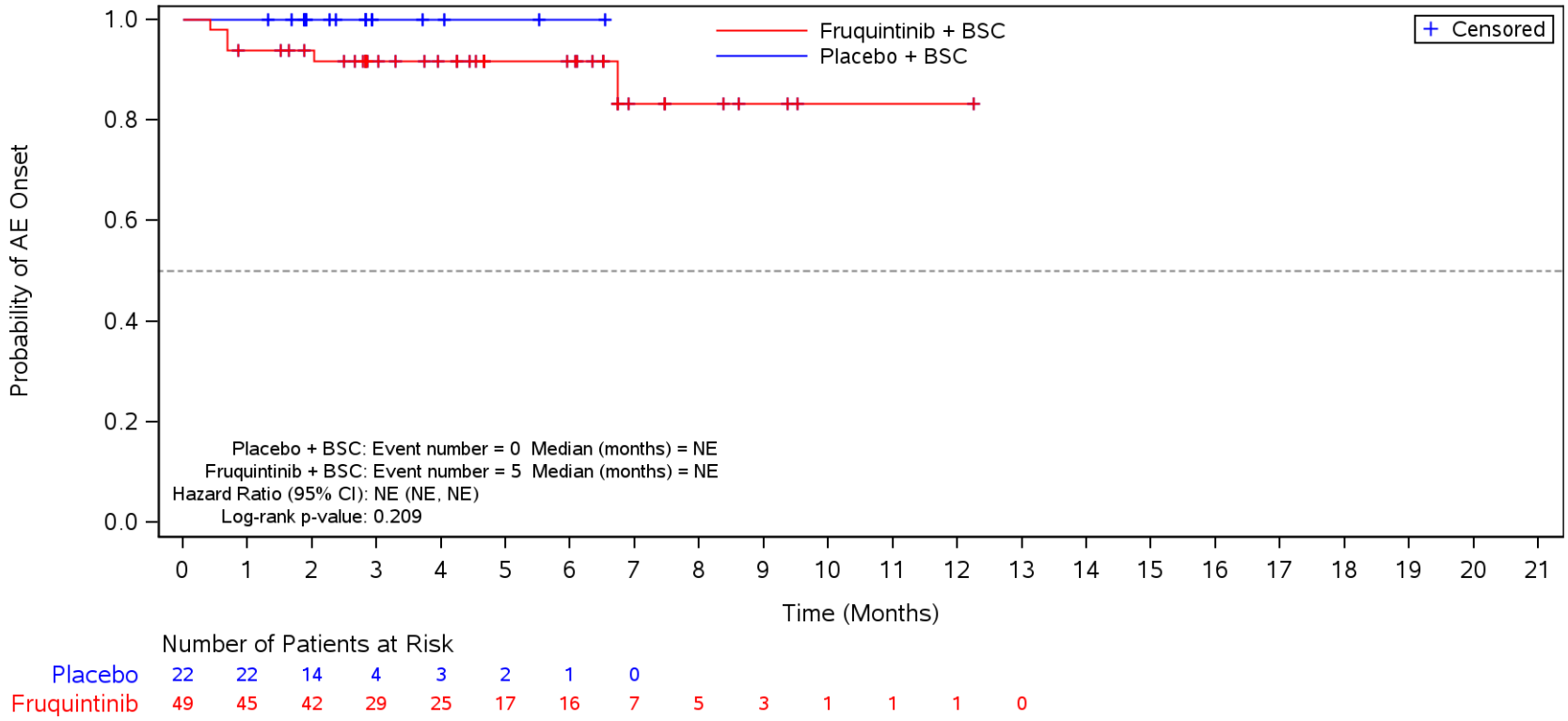
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
Asia



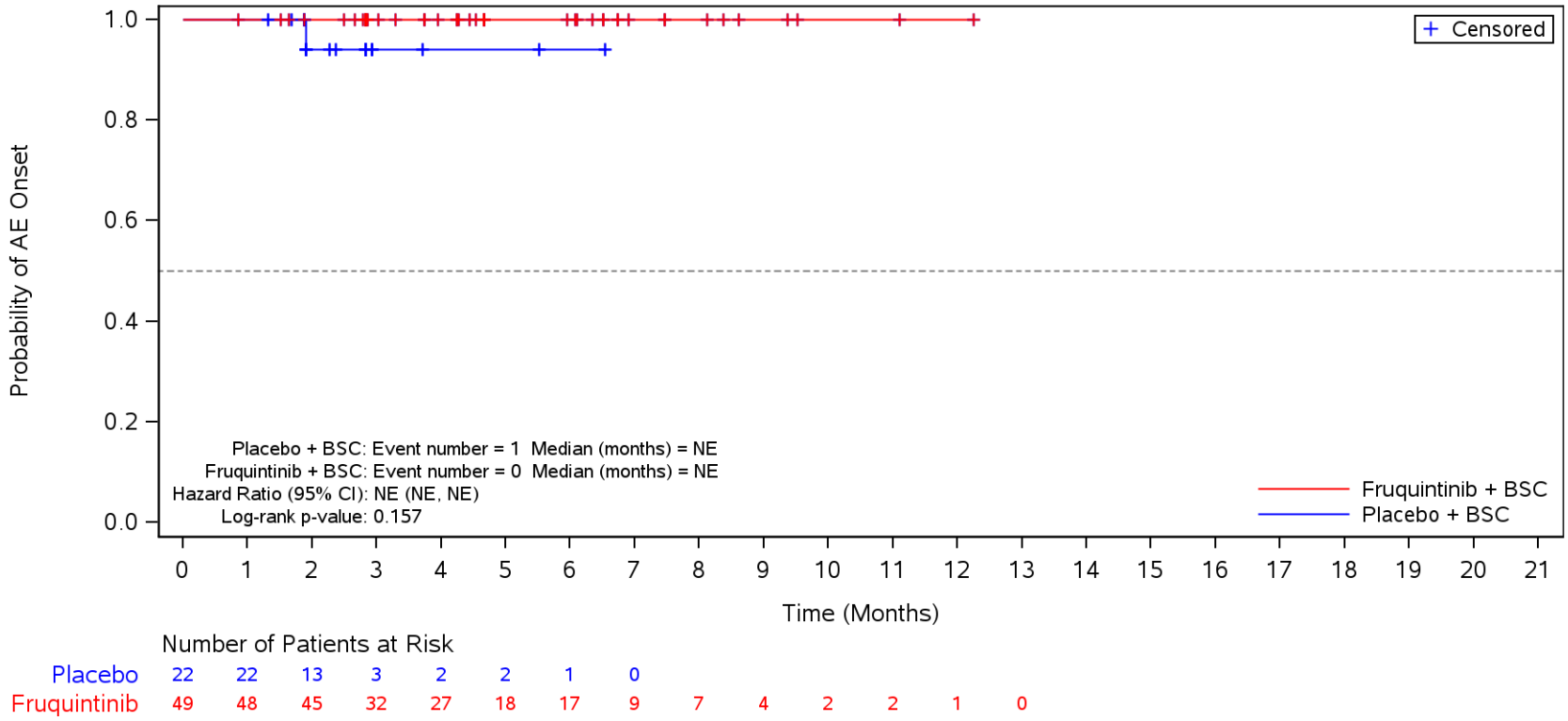
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
Asia



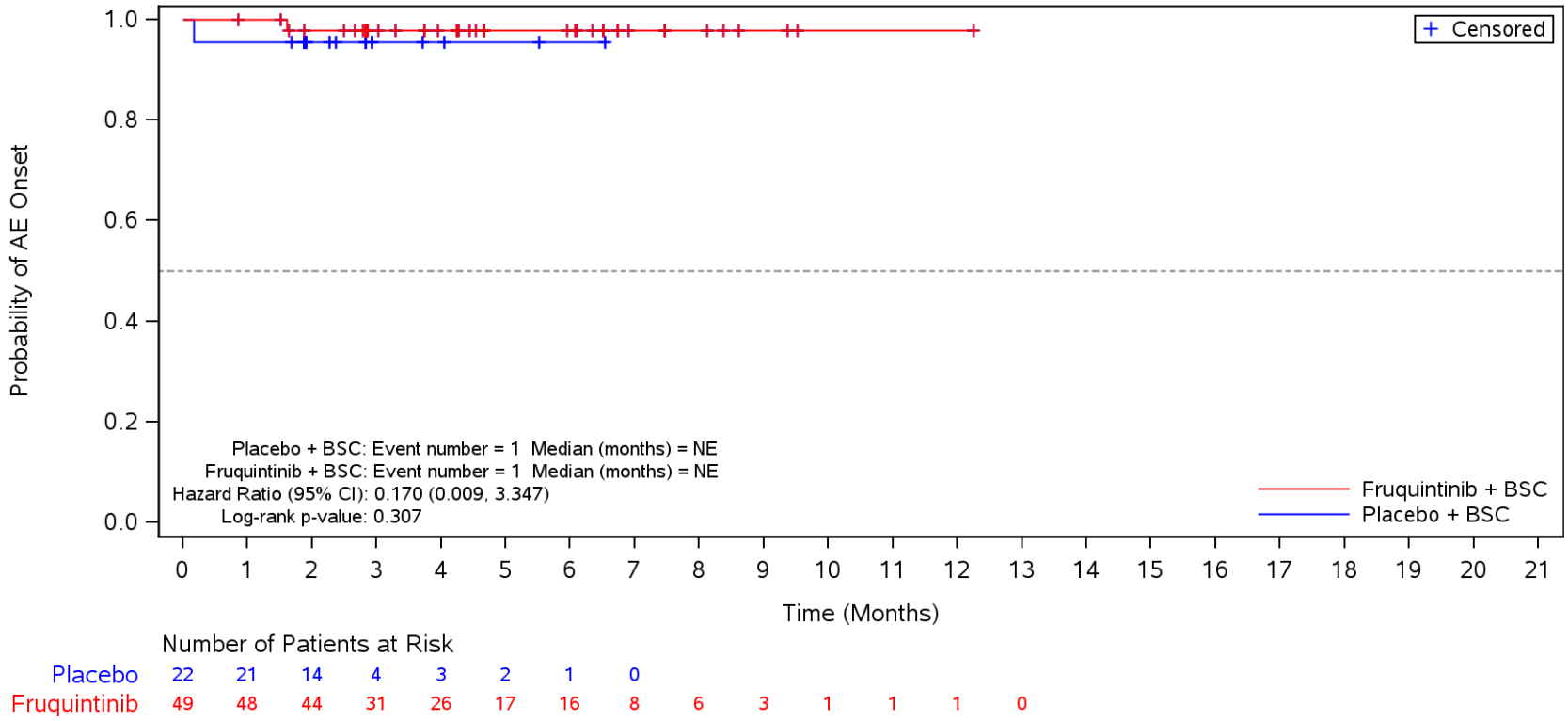
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
Asia



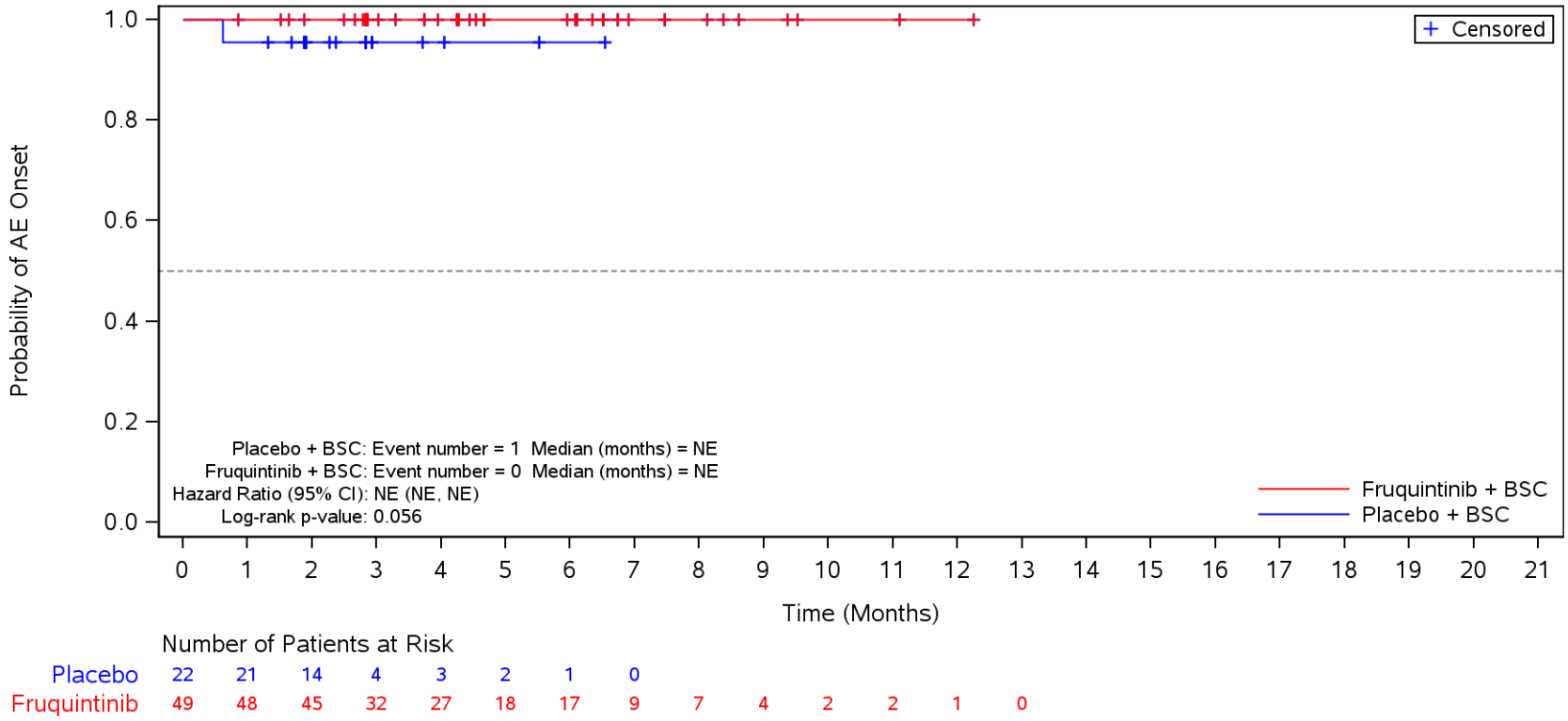
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
Asia



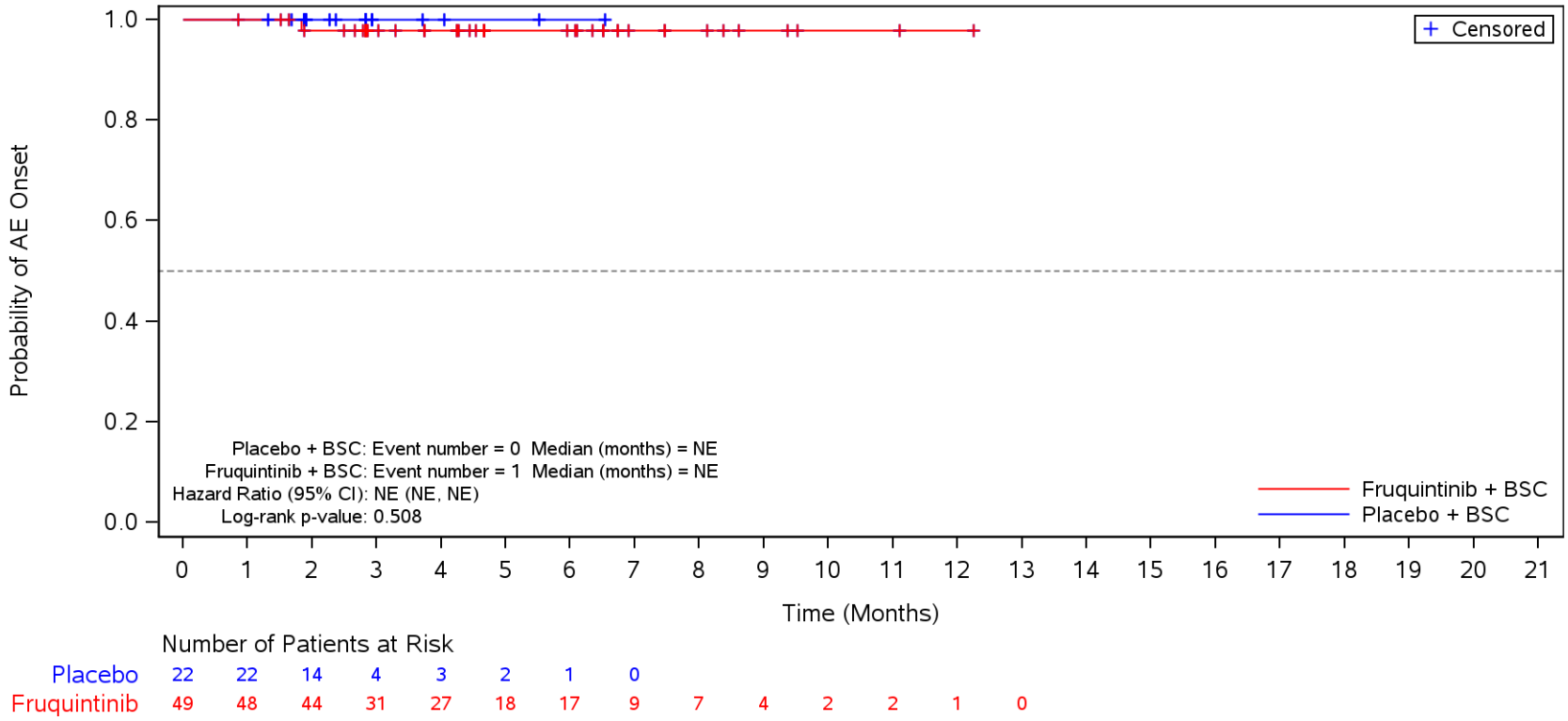
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
Asia



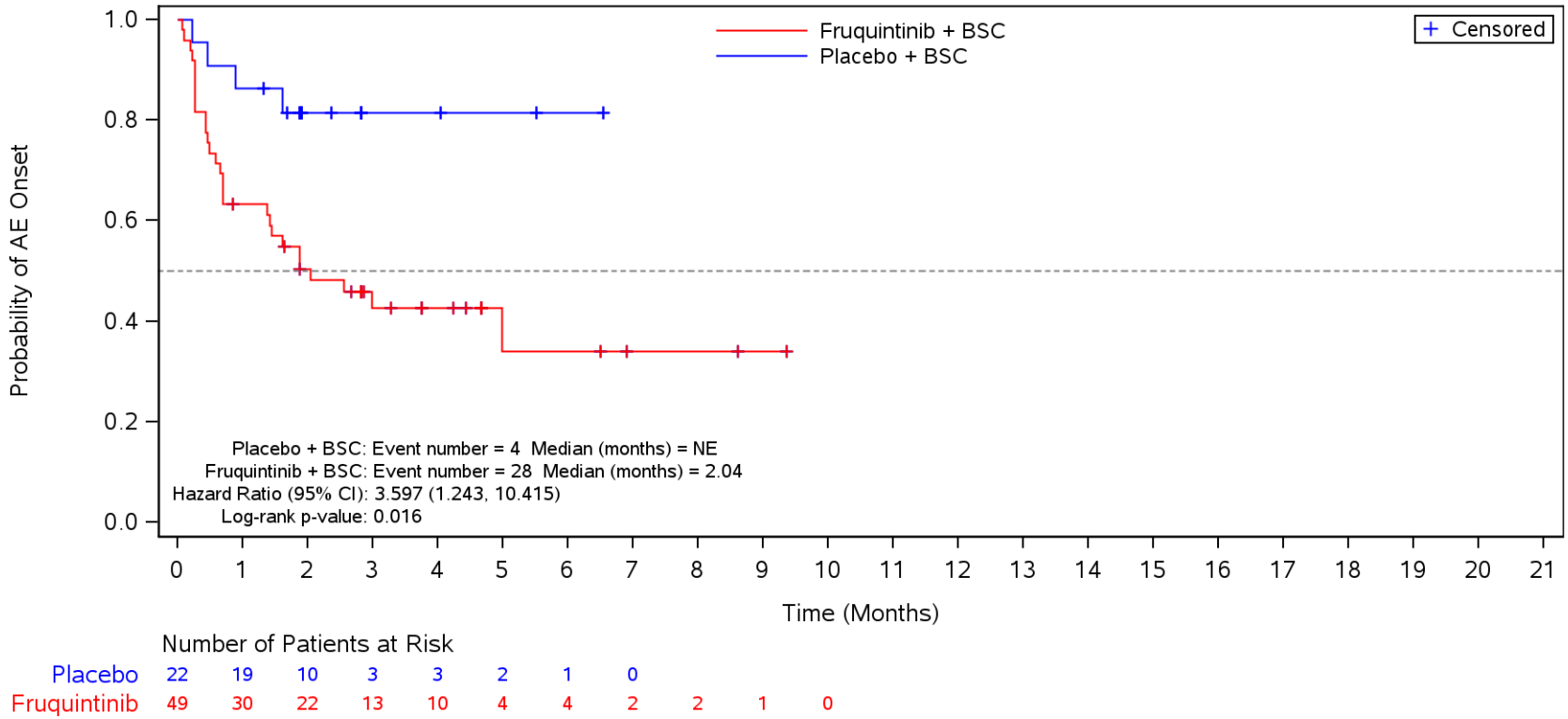
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
Asia



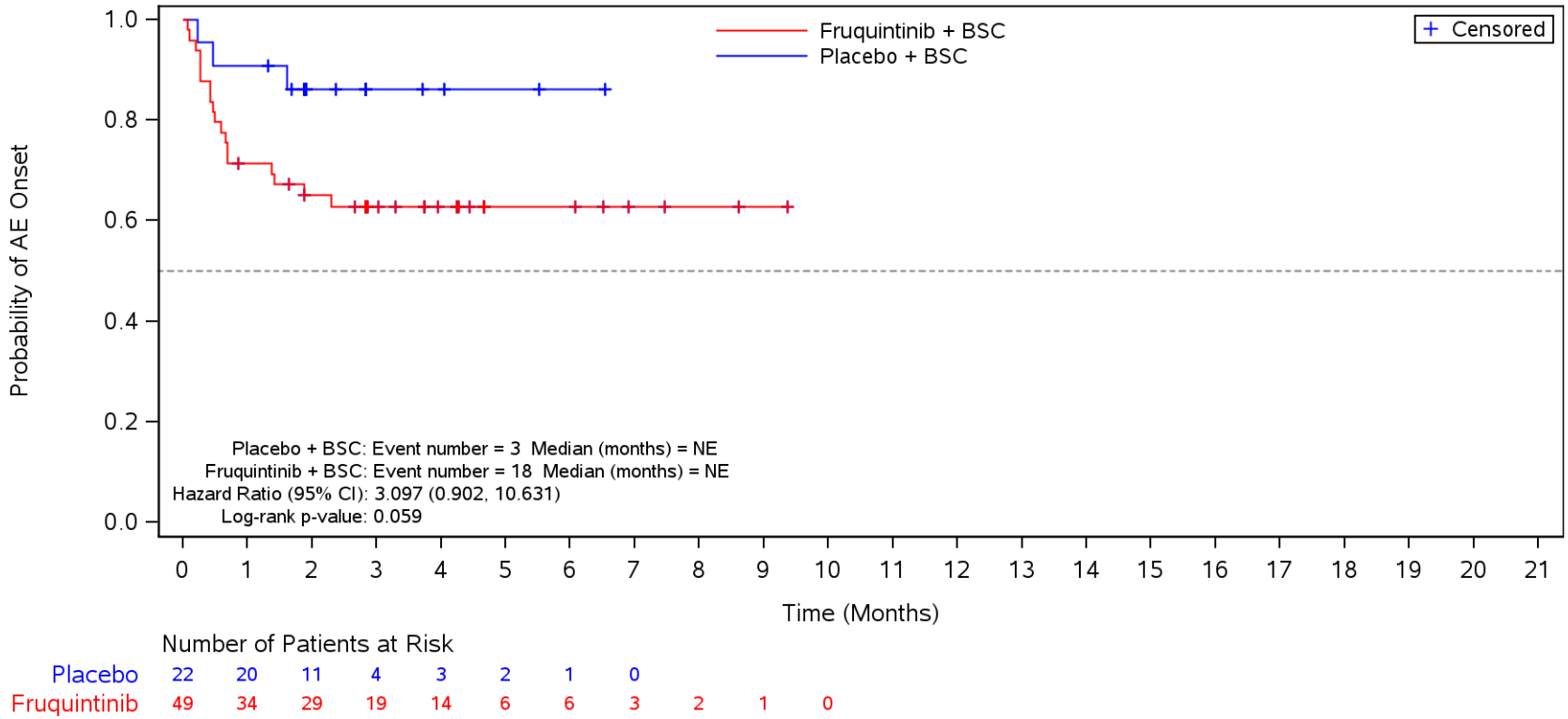
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
Asia



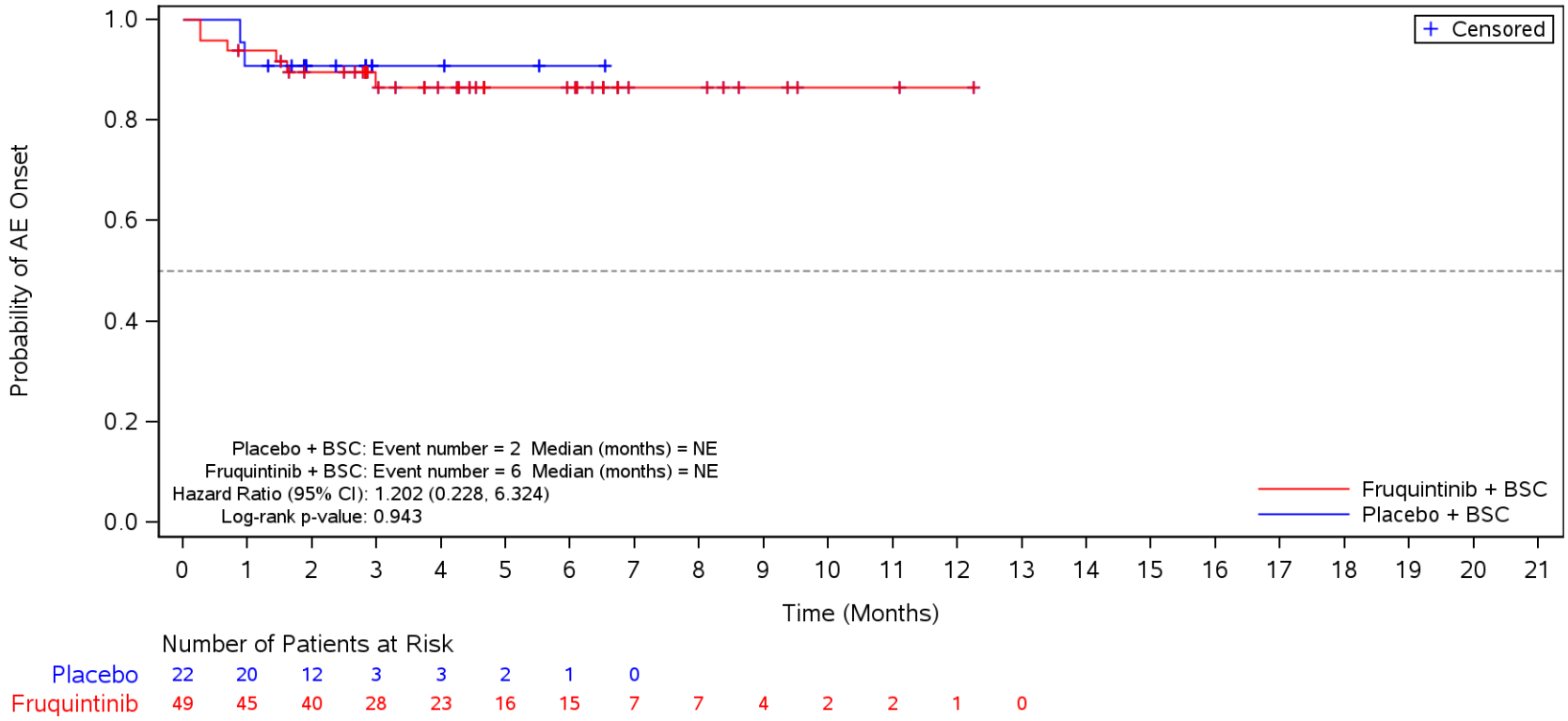
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
Asia



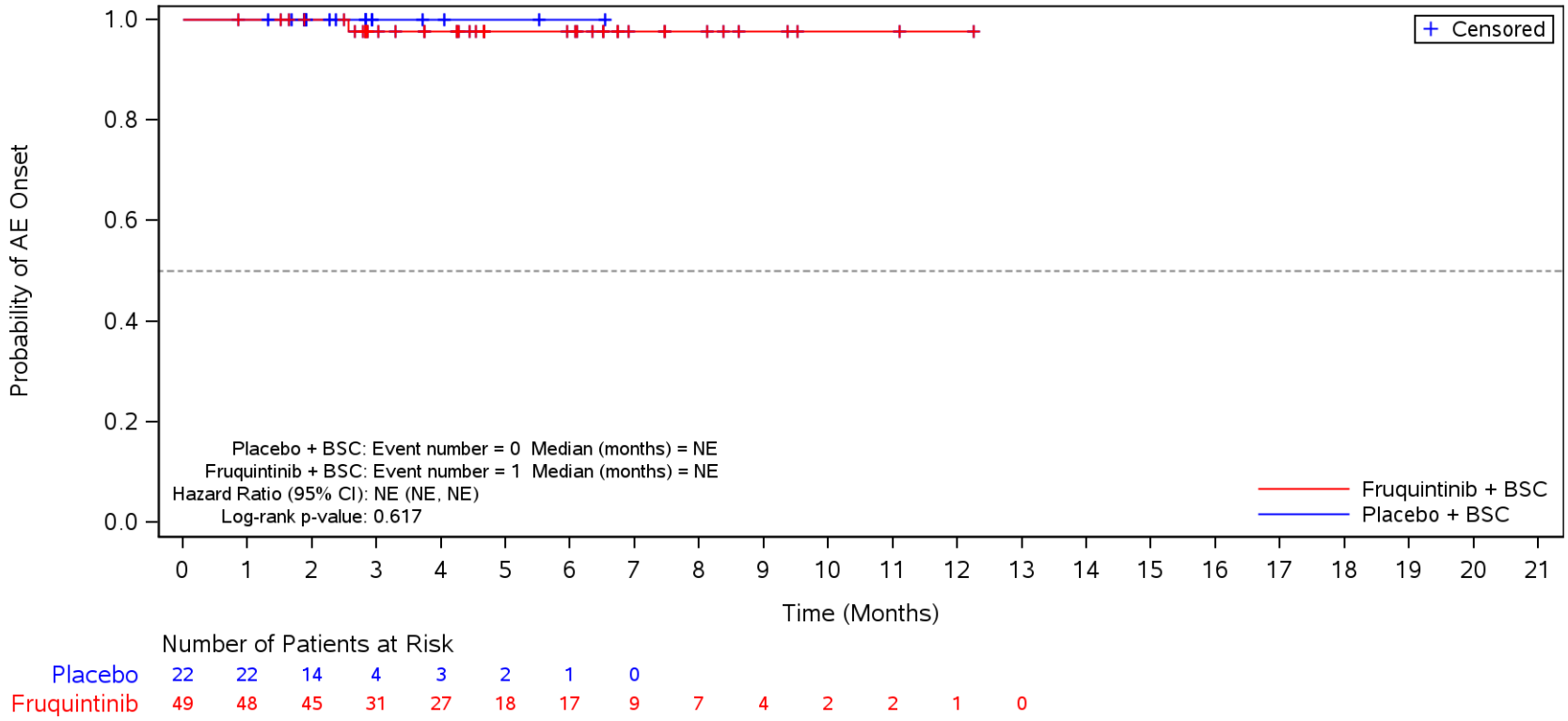
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
Asia



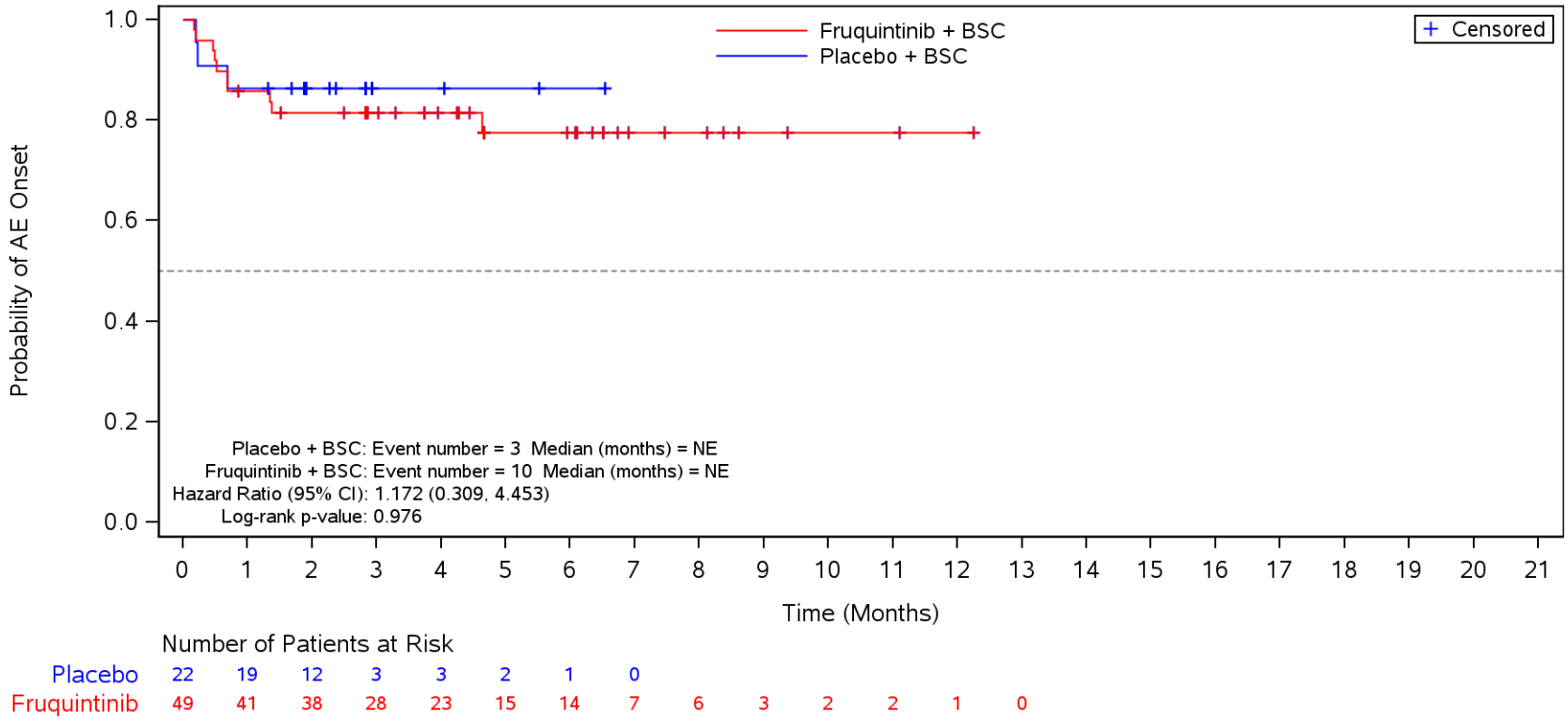
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
Asia



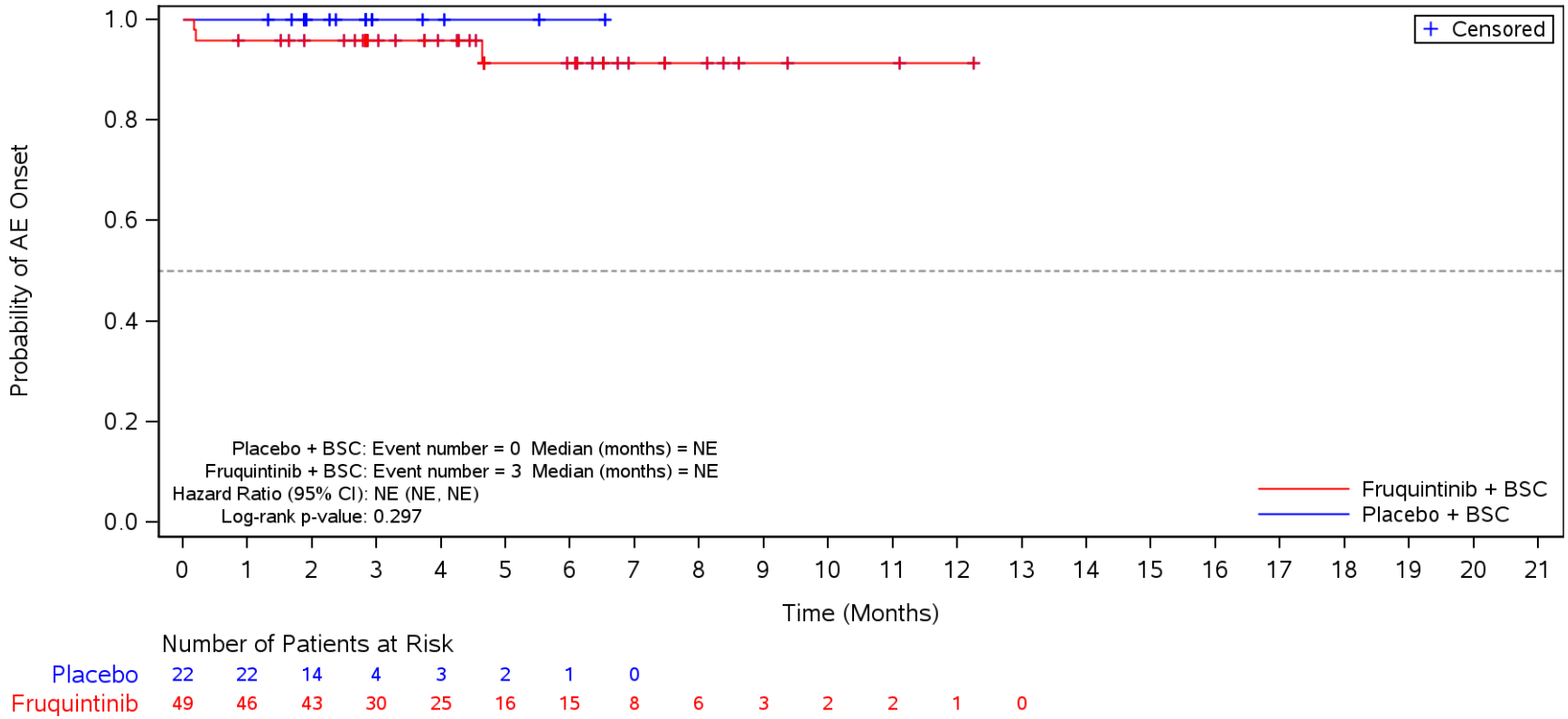
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders**
Asia



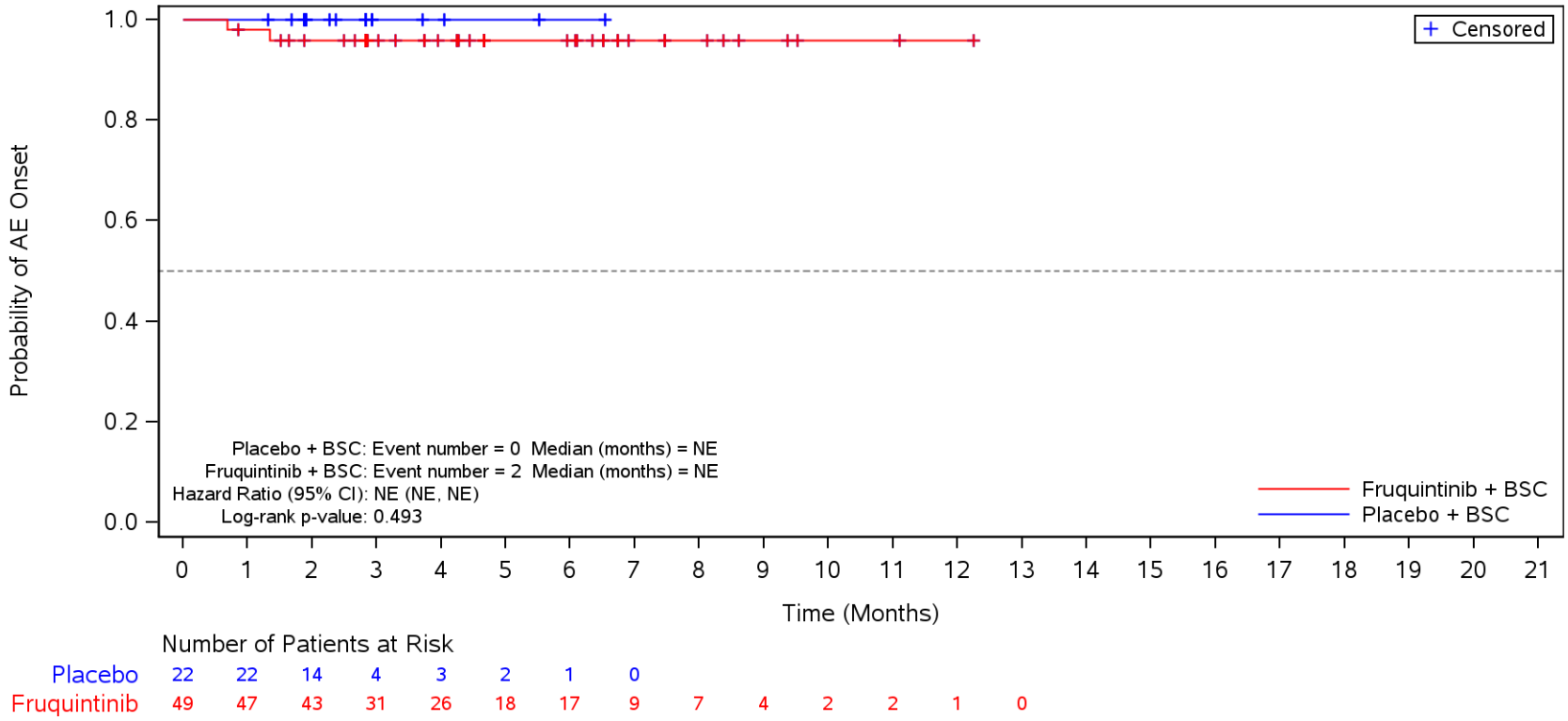
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
Asia



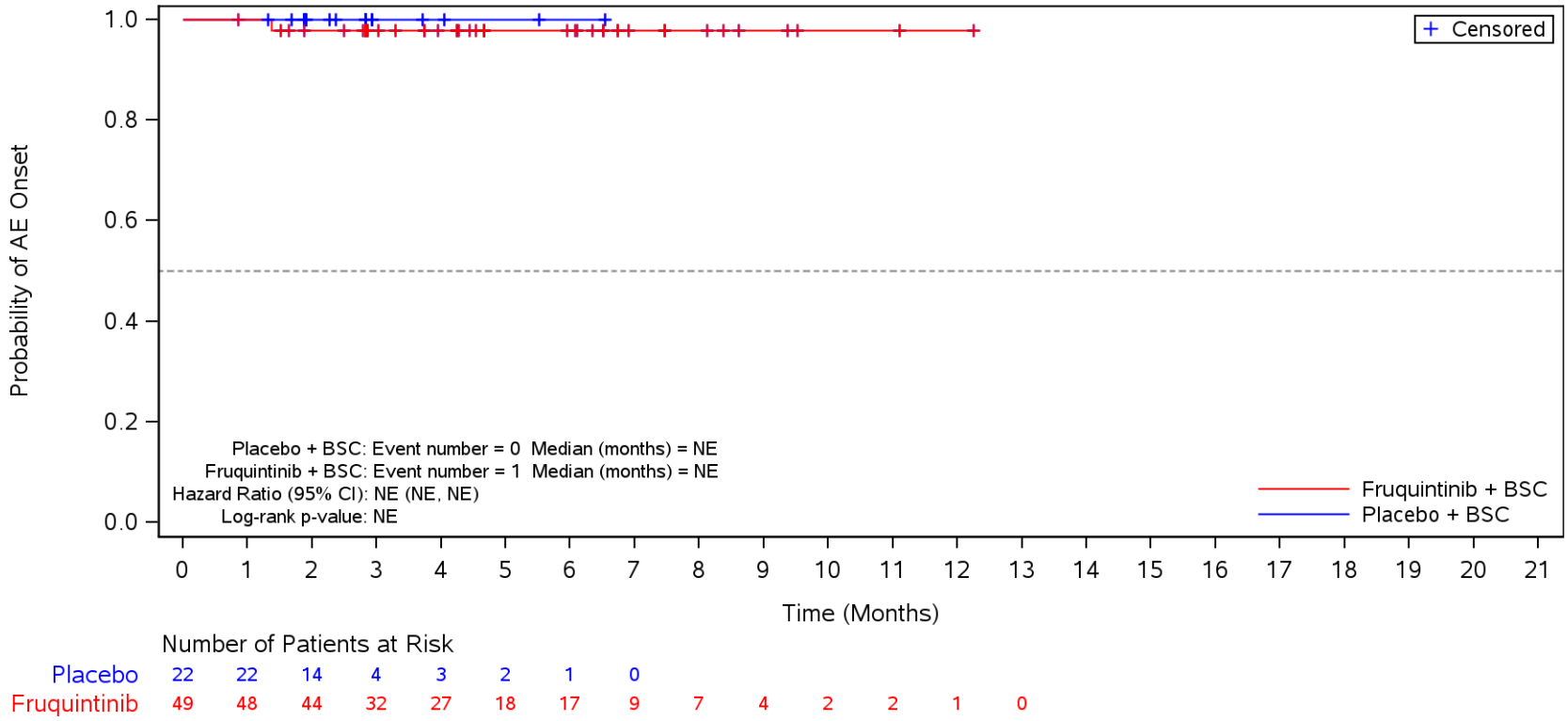
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
Asia



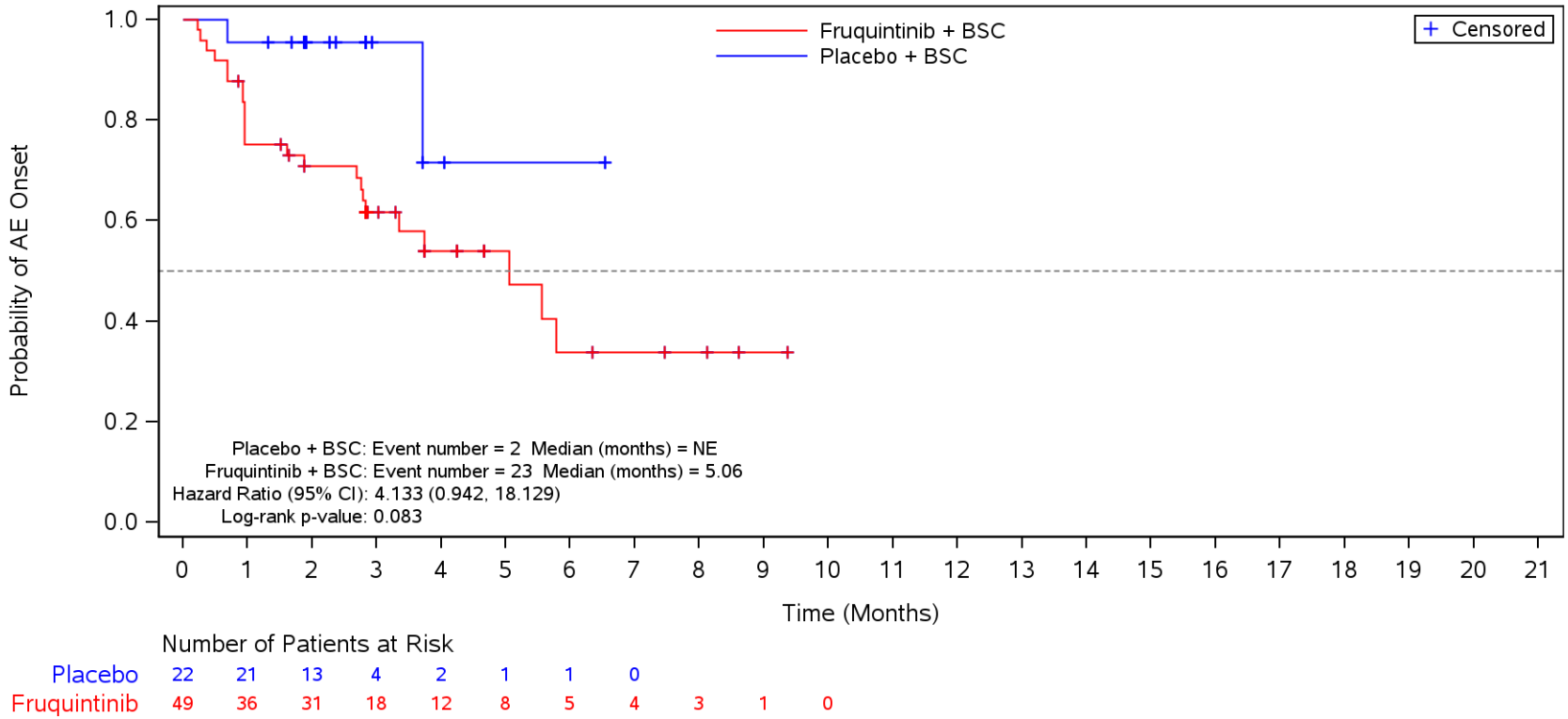
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
Asia



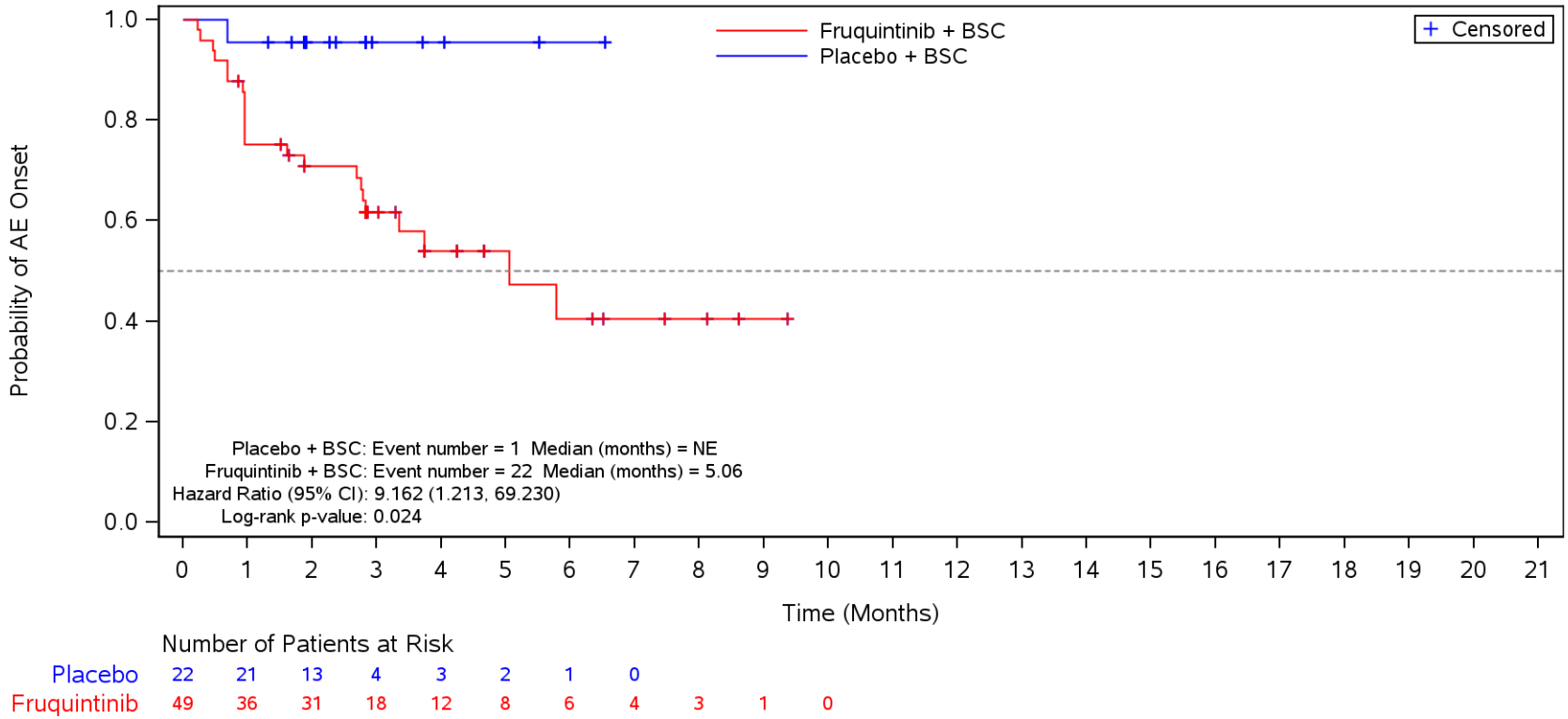
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
Asia



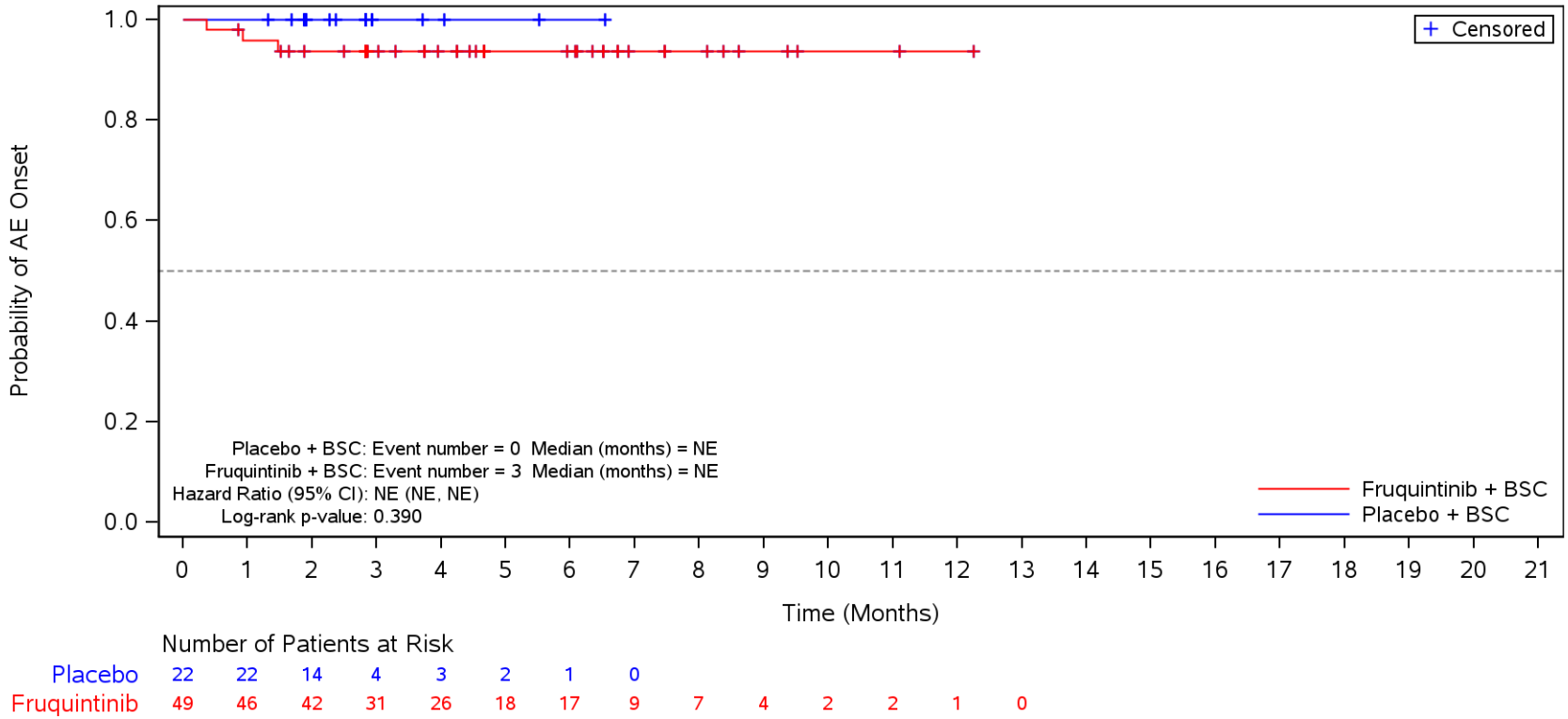
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
Asia



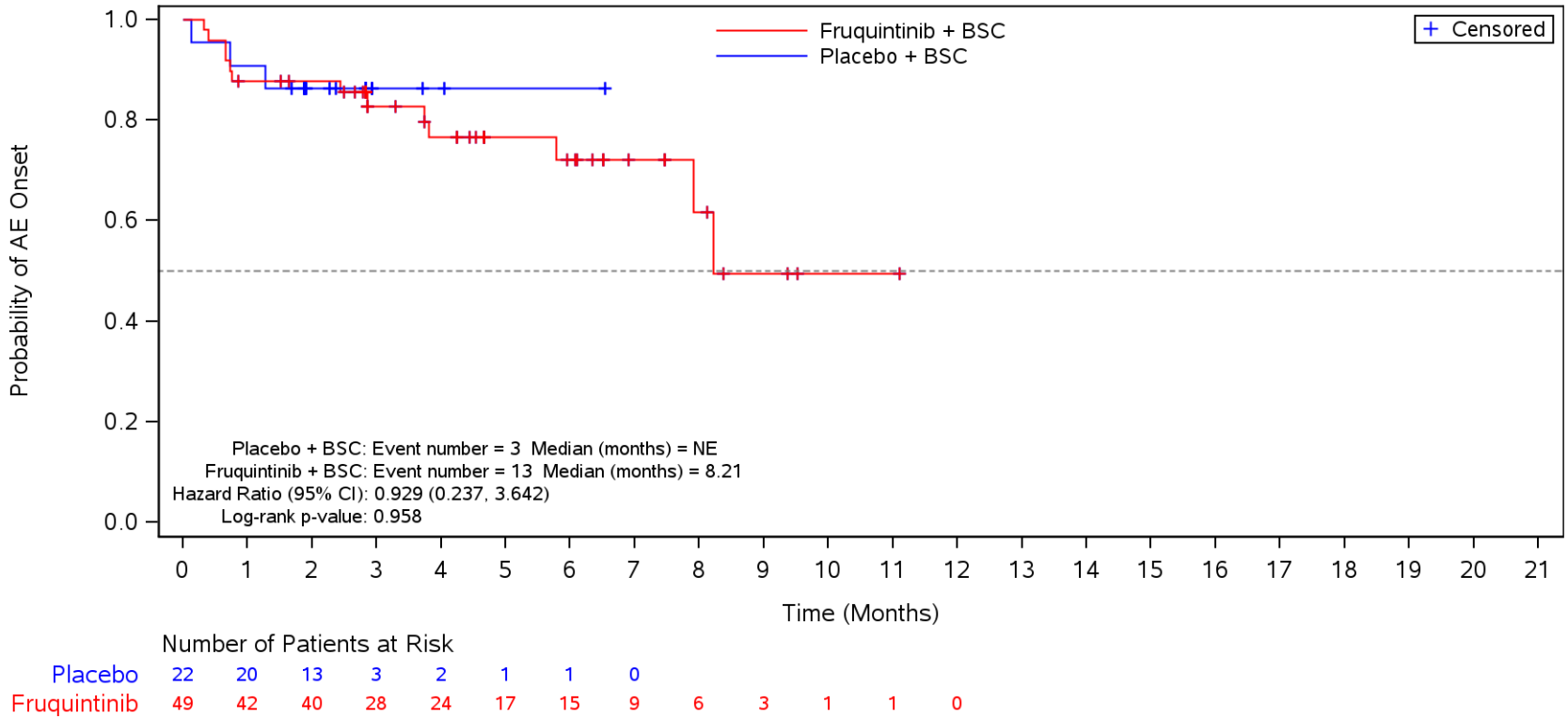
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**
Asia



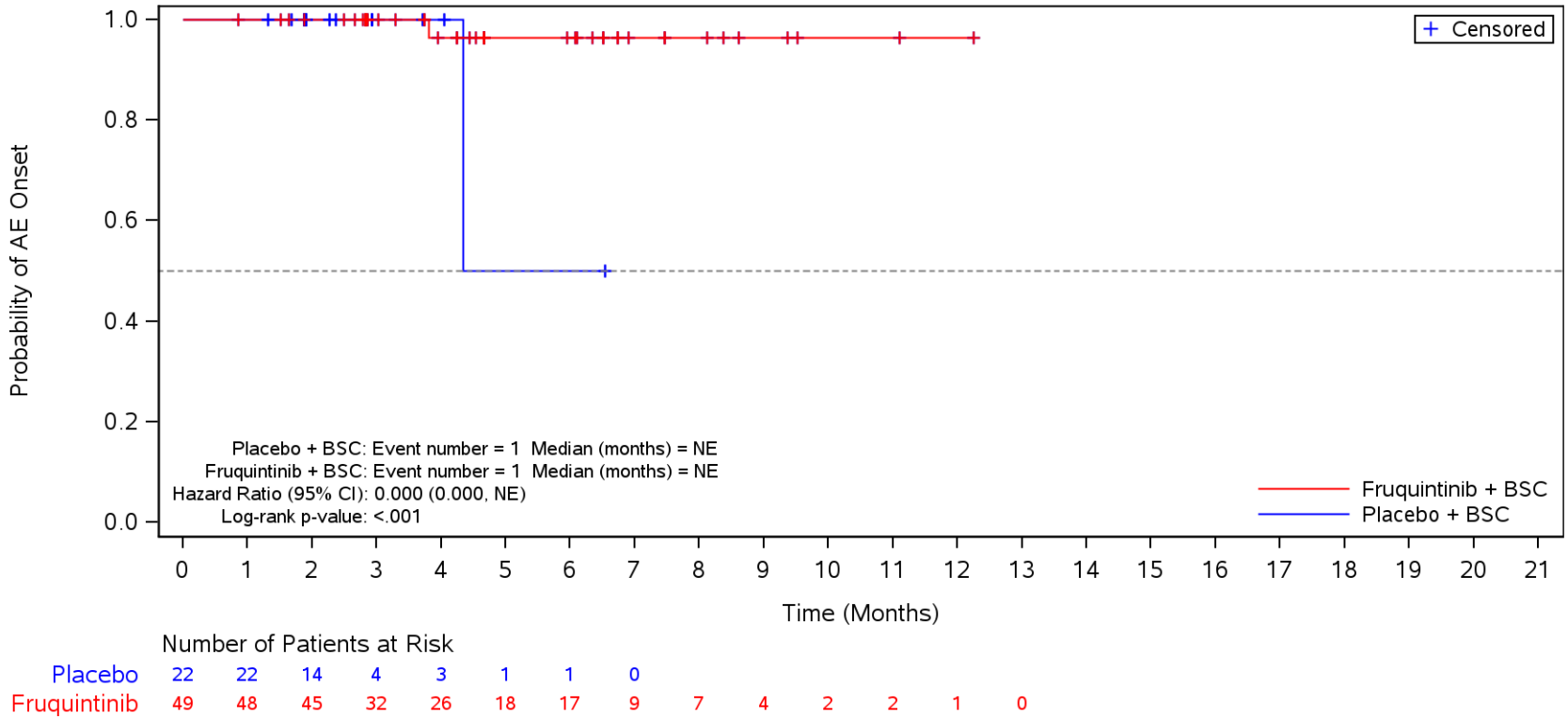
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations**
Asia



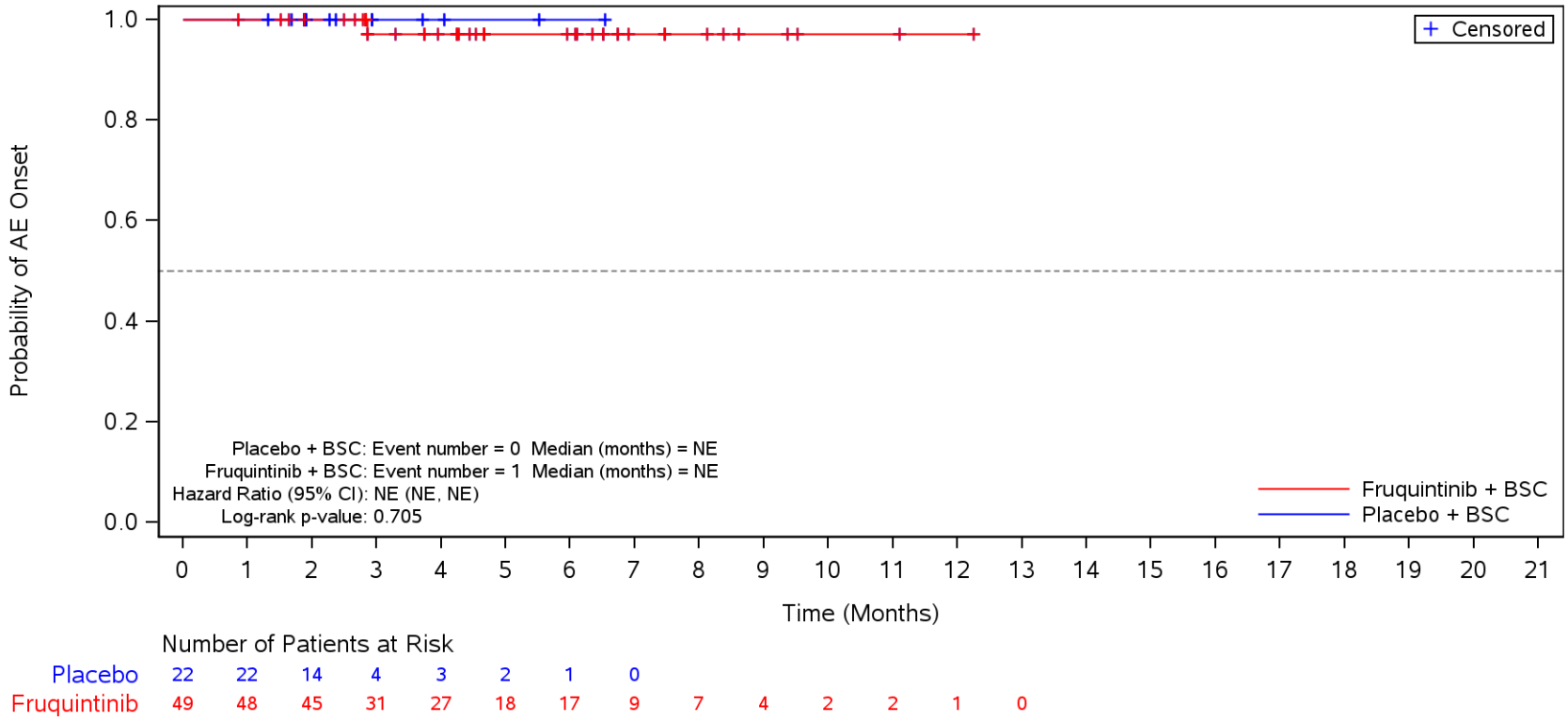
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
Asia



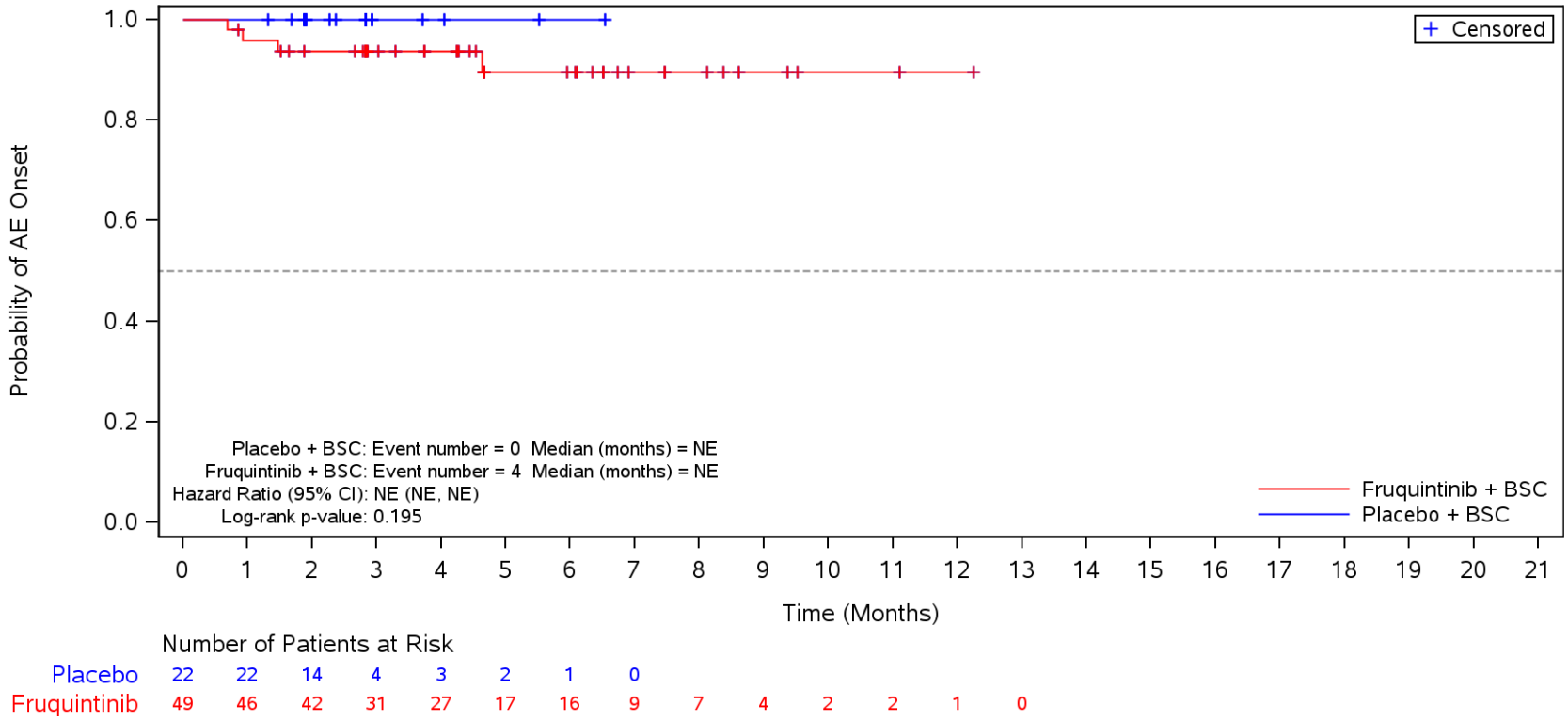
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**
Asia



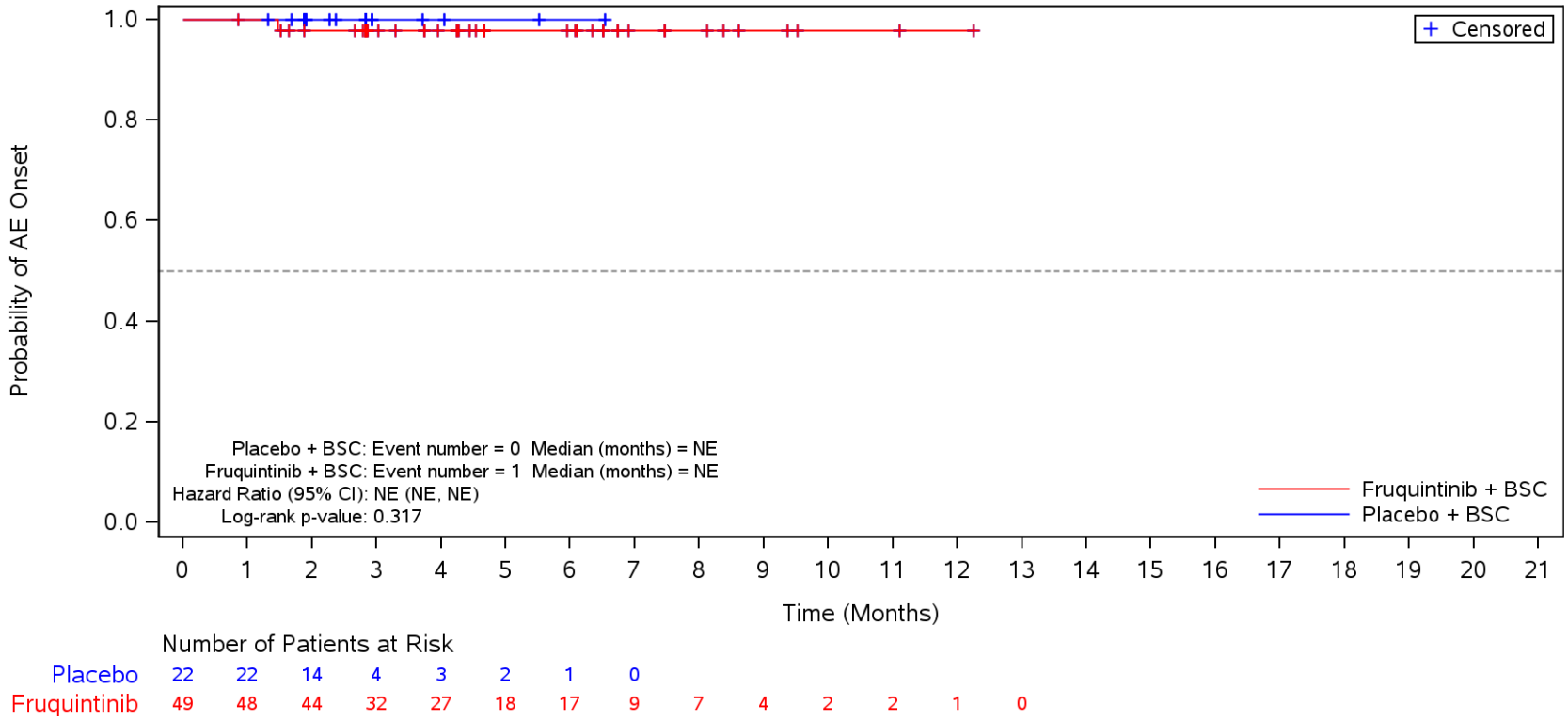
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
Asia



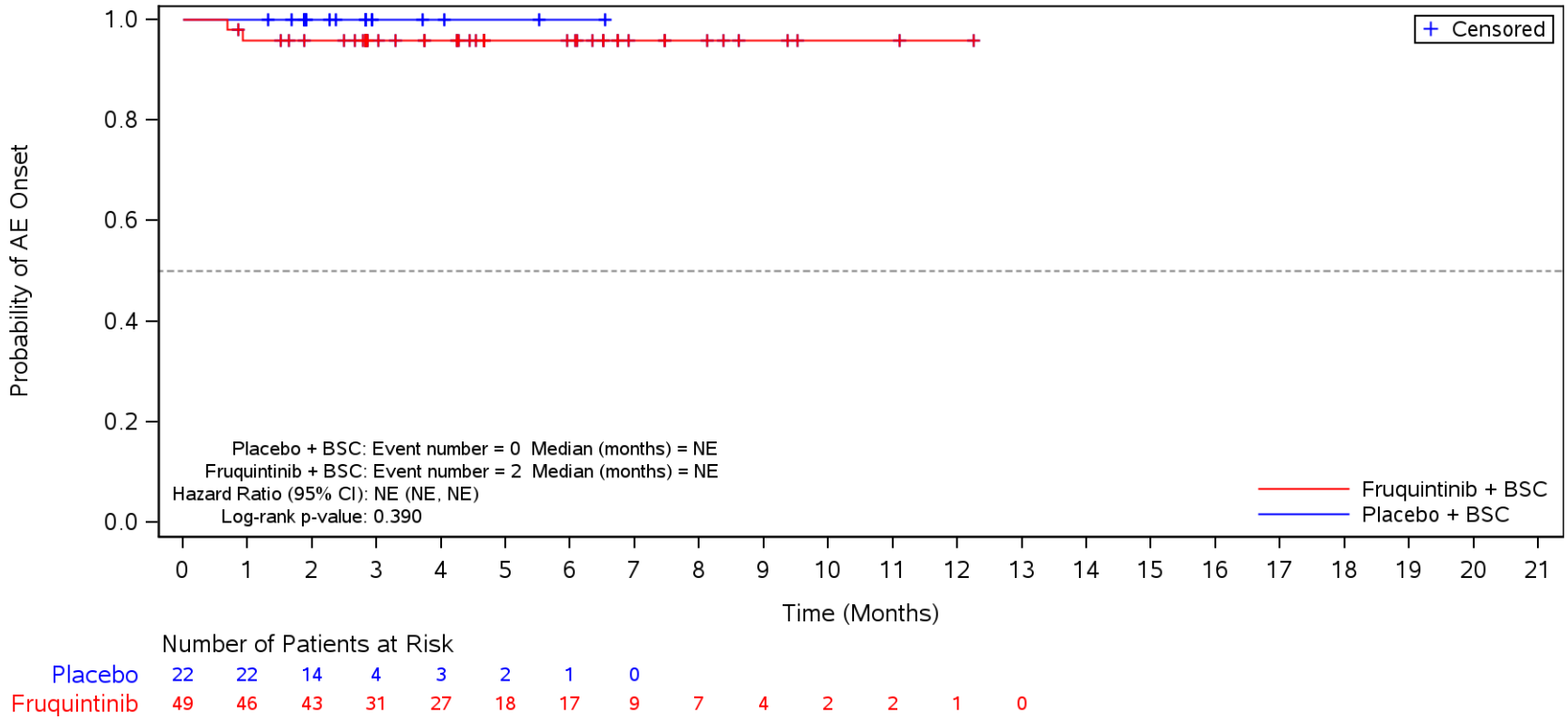
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
Asia



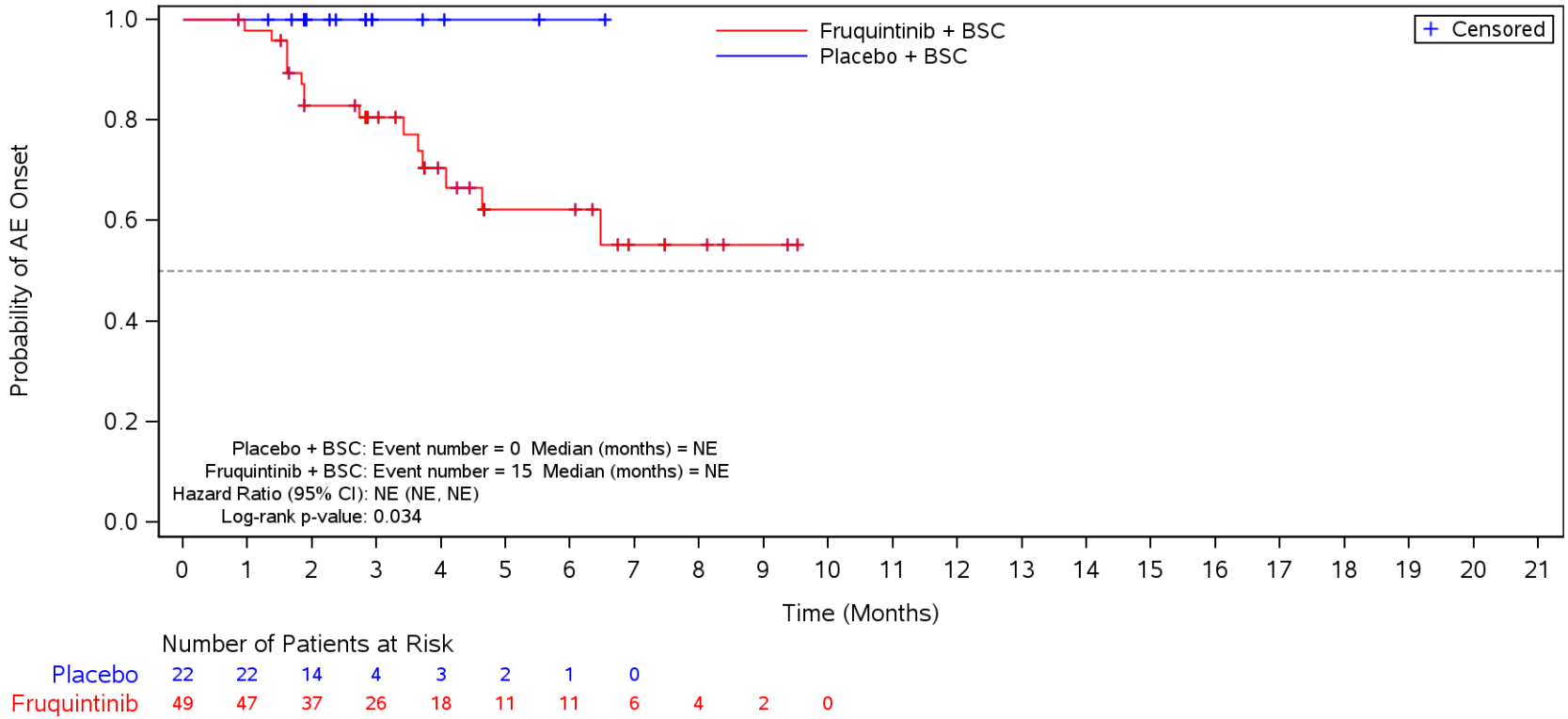
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
Asia



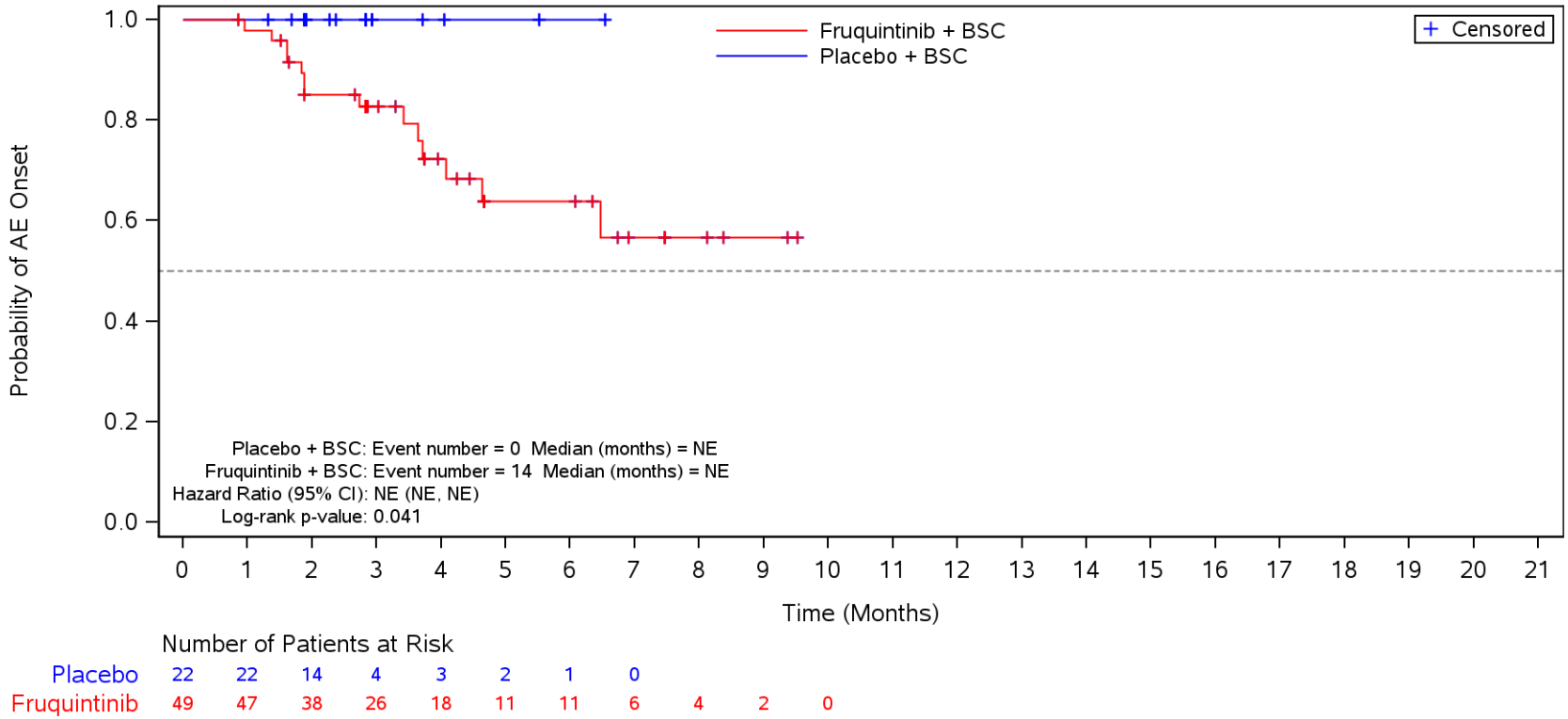
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Endocrine disorders**
Asia



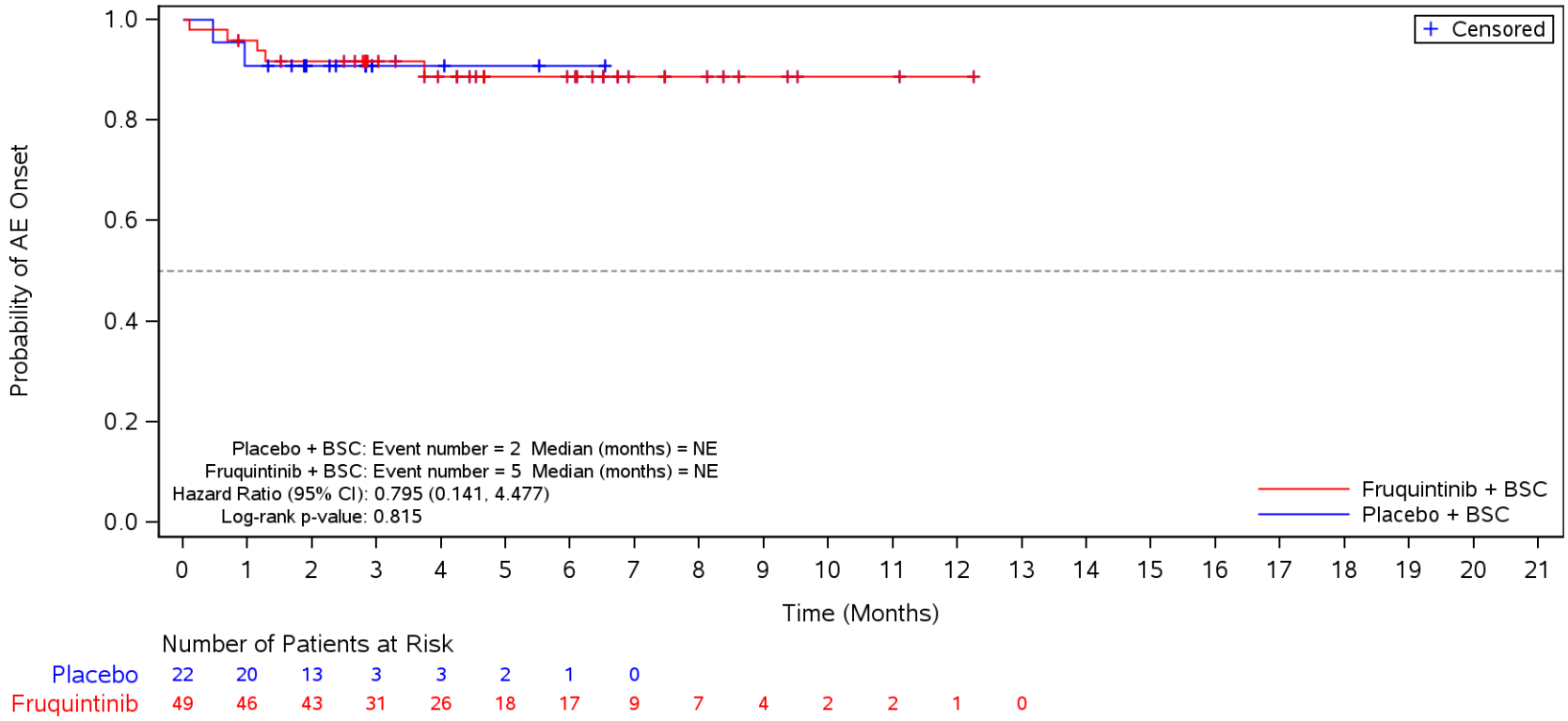
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
Asia



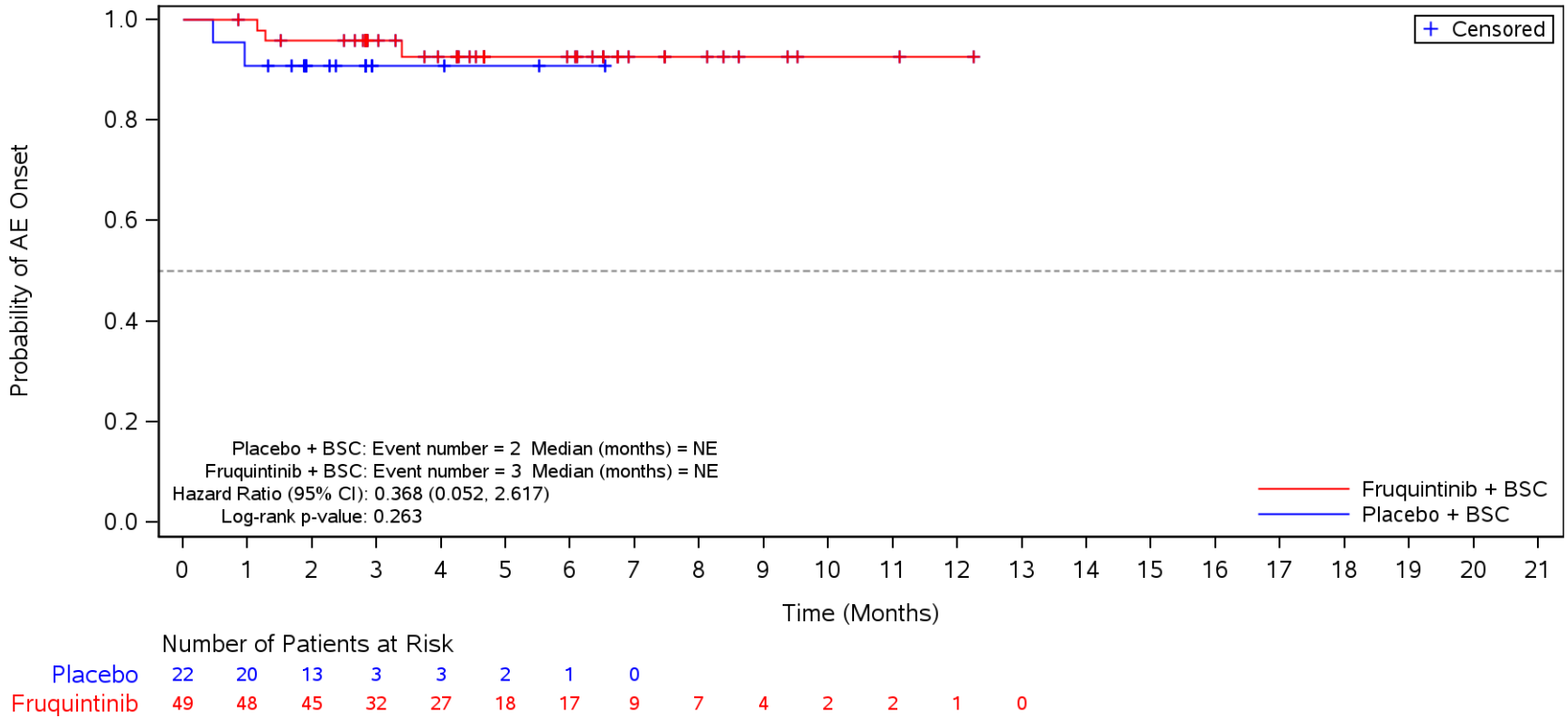
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders**
Asia



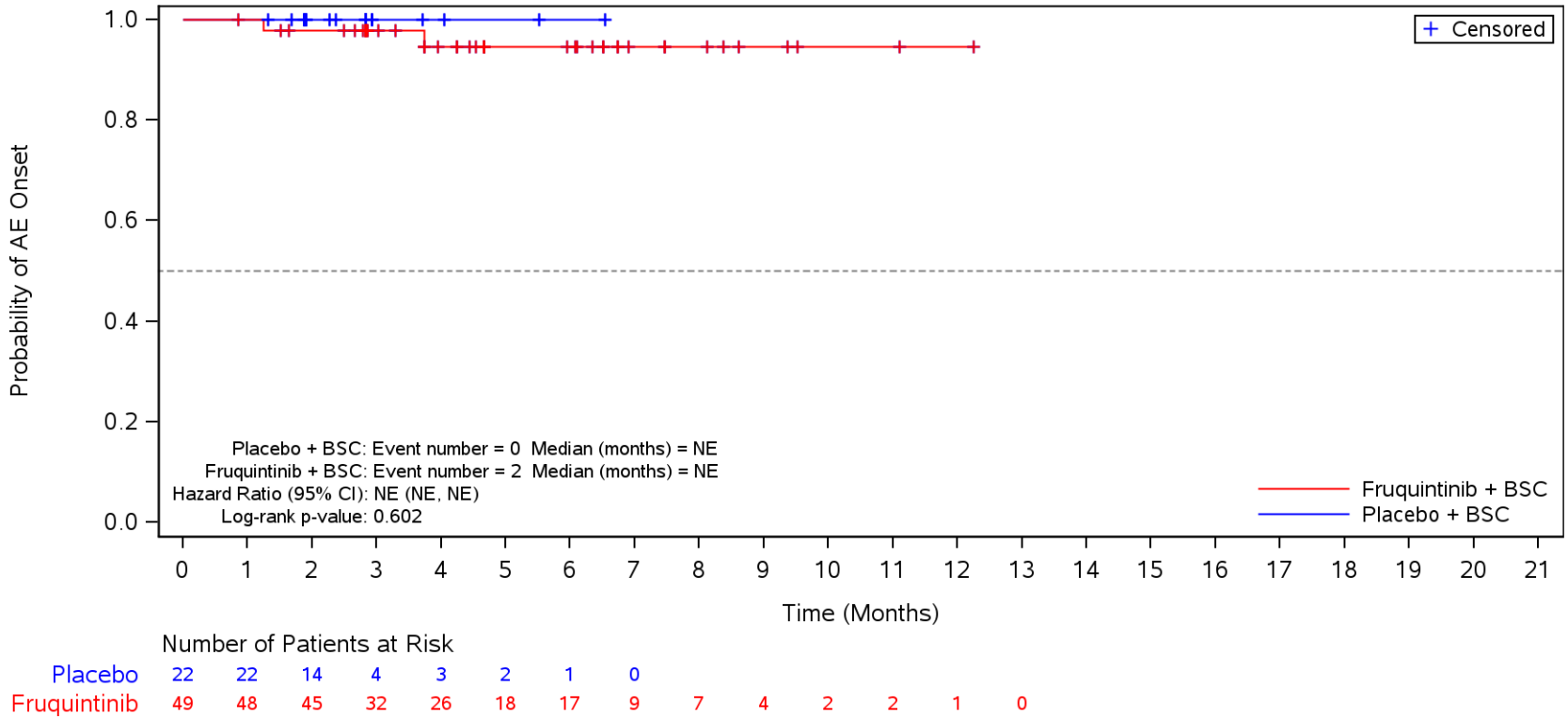
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
Asia



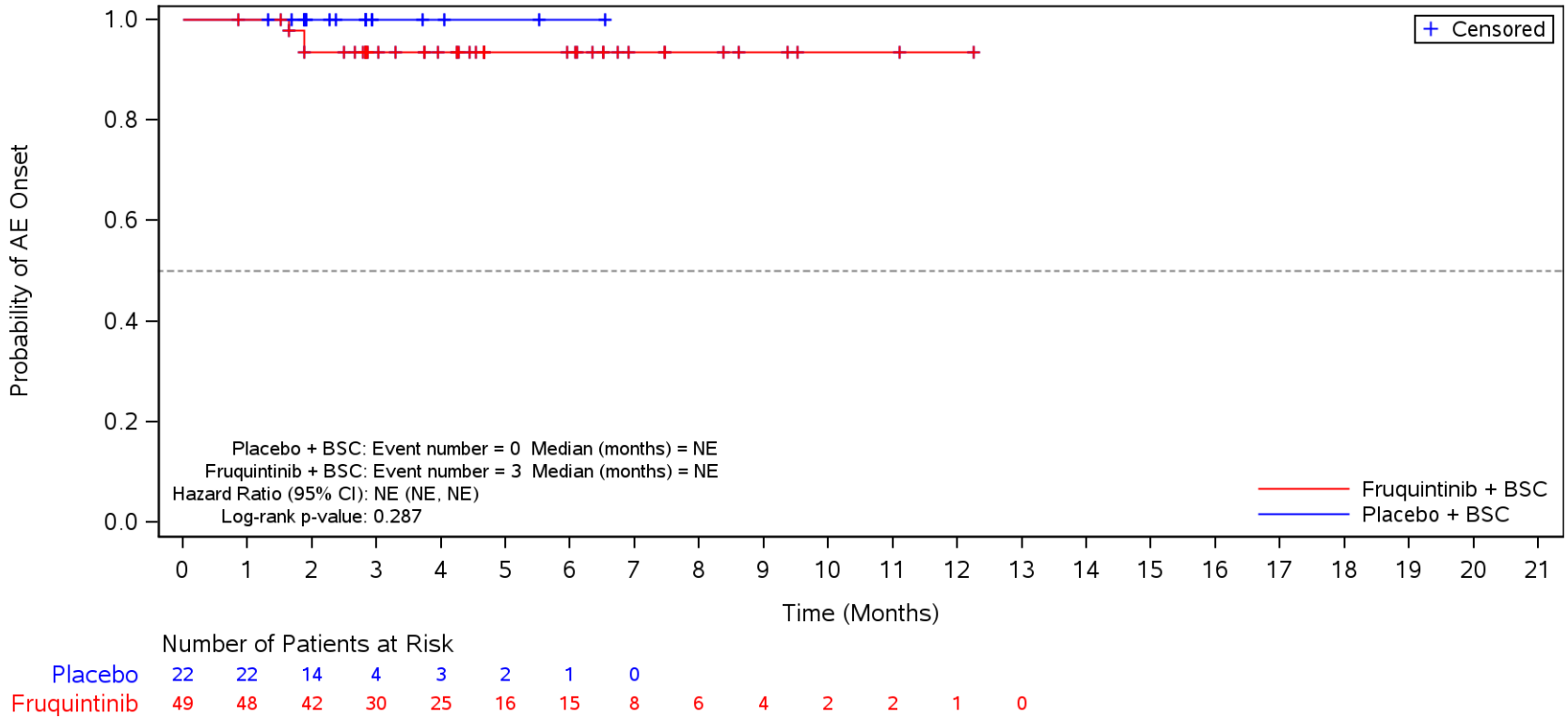
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3D
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Geographic Region
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
Asia



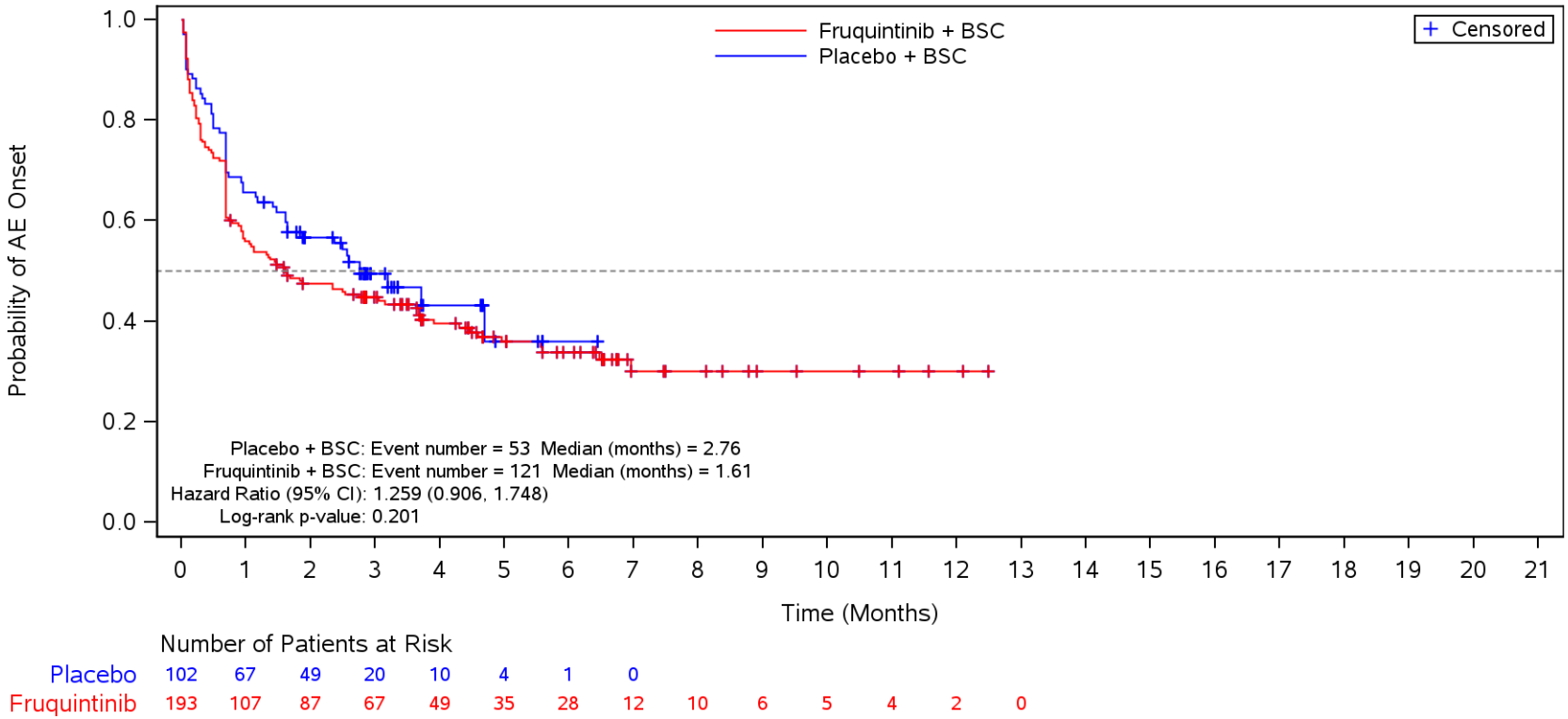
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
ECOG: 0



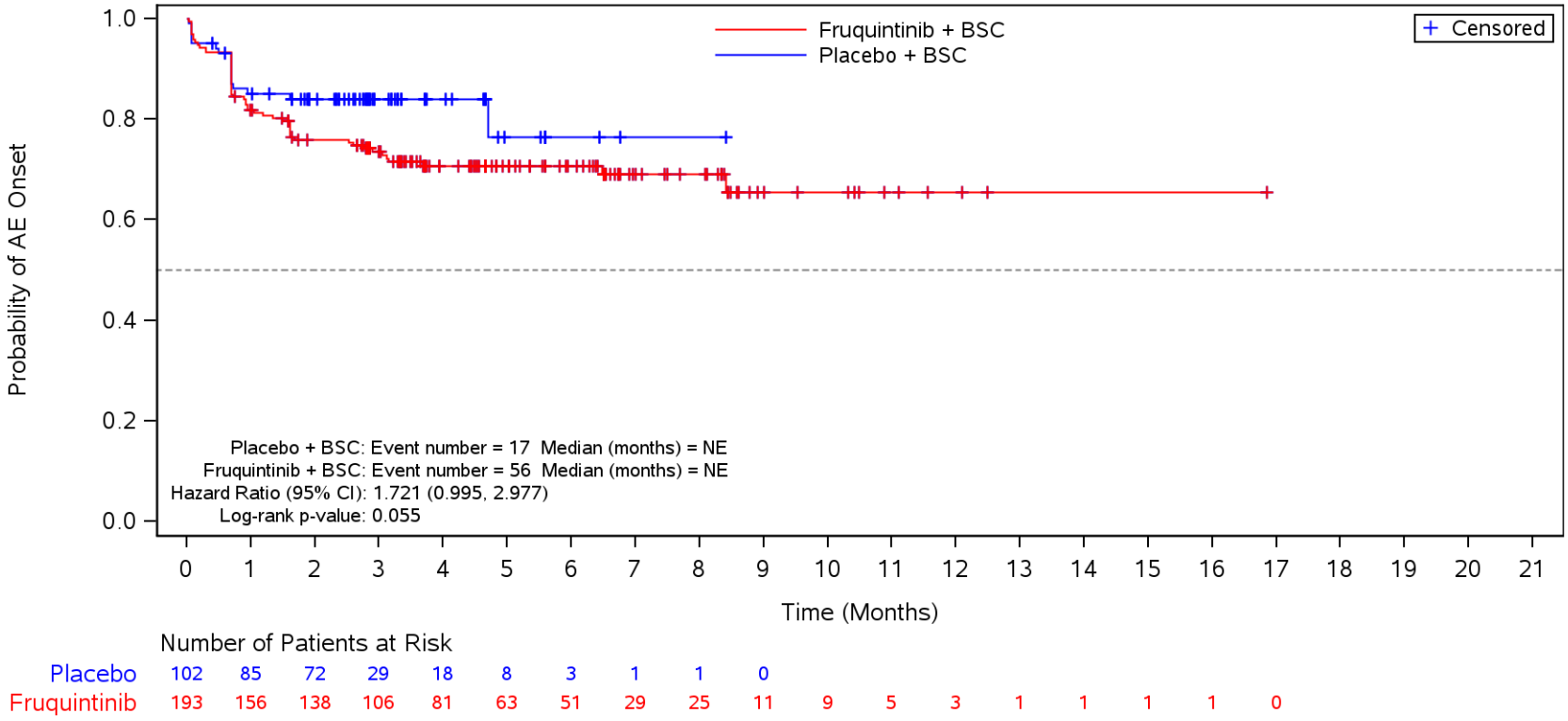
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
ECOG: 0



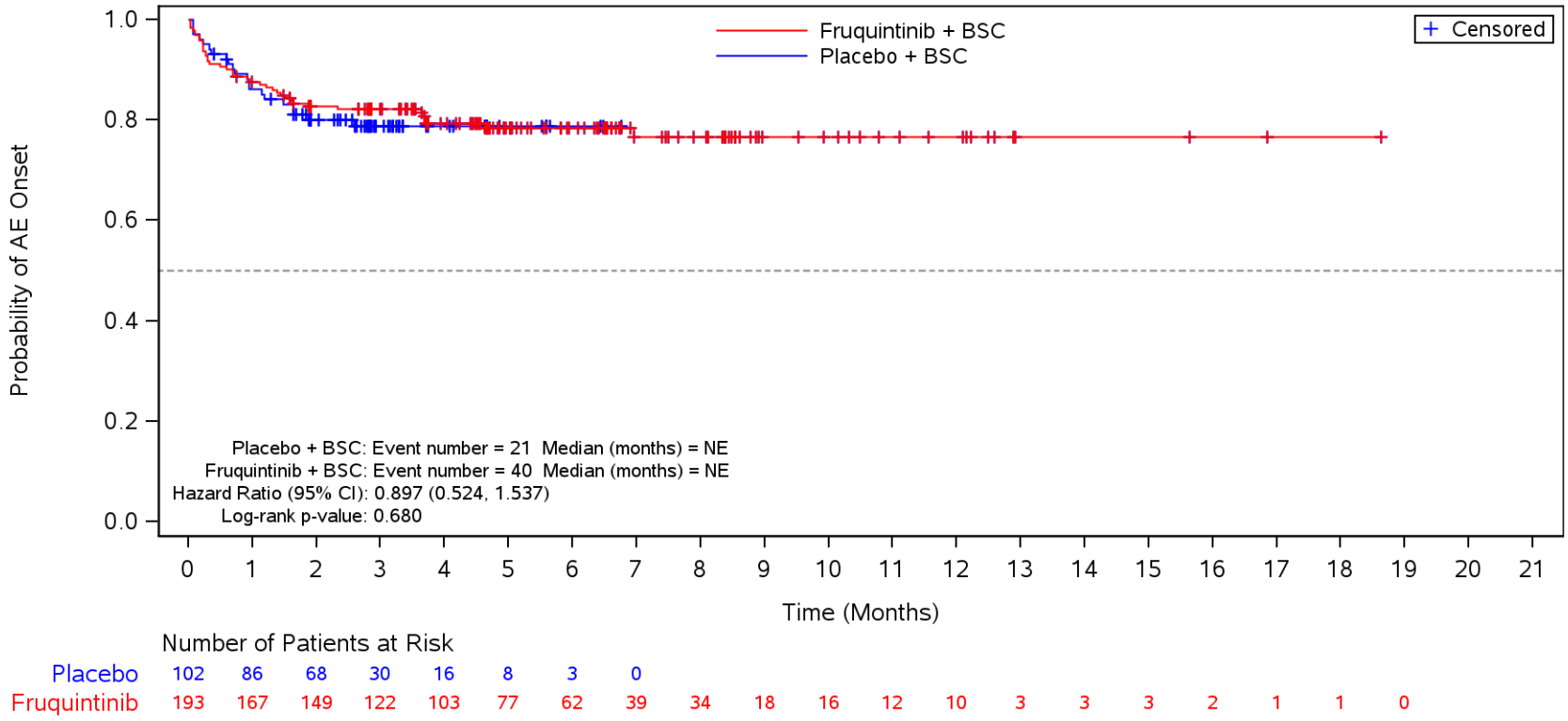
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
ECOG: 0



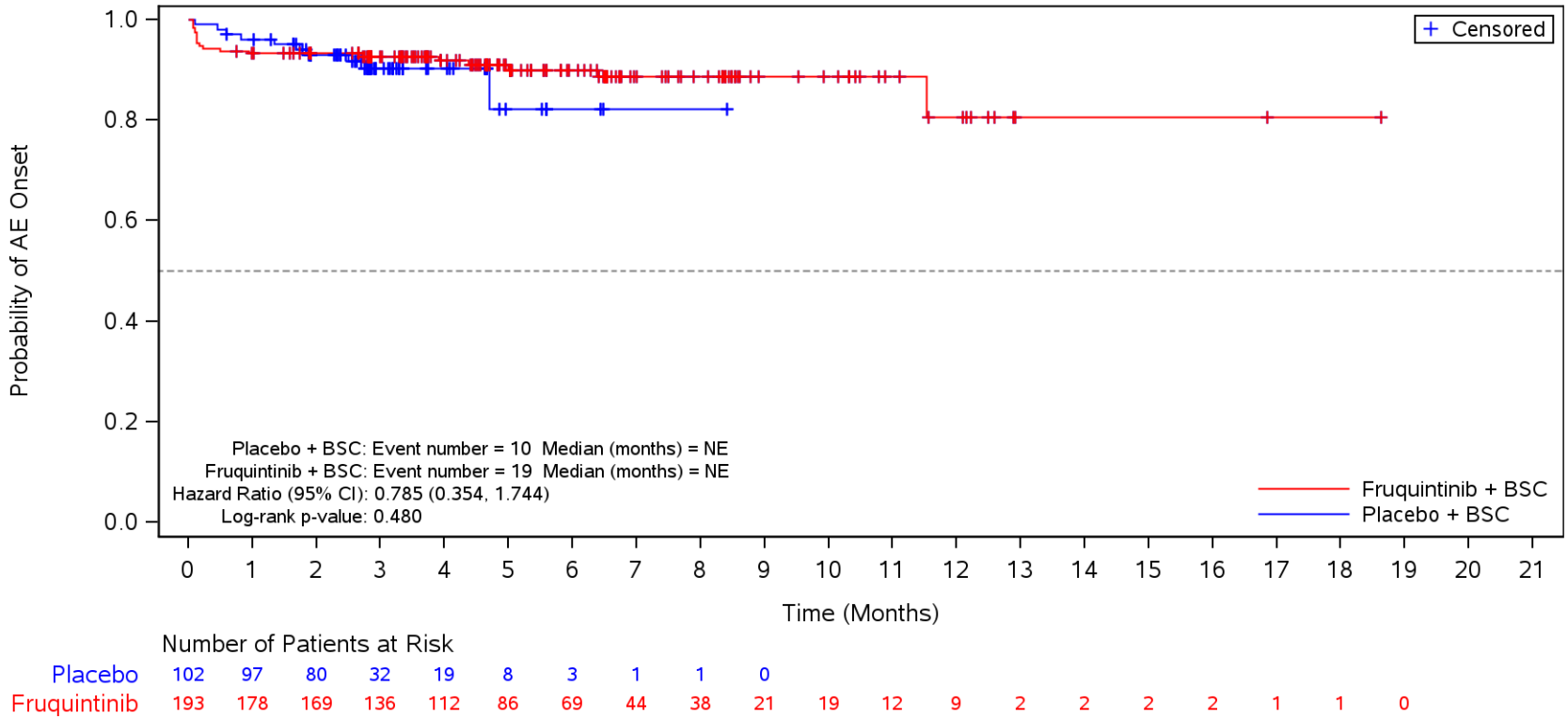
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
ECOG: 0



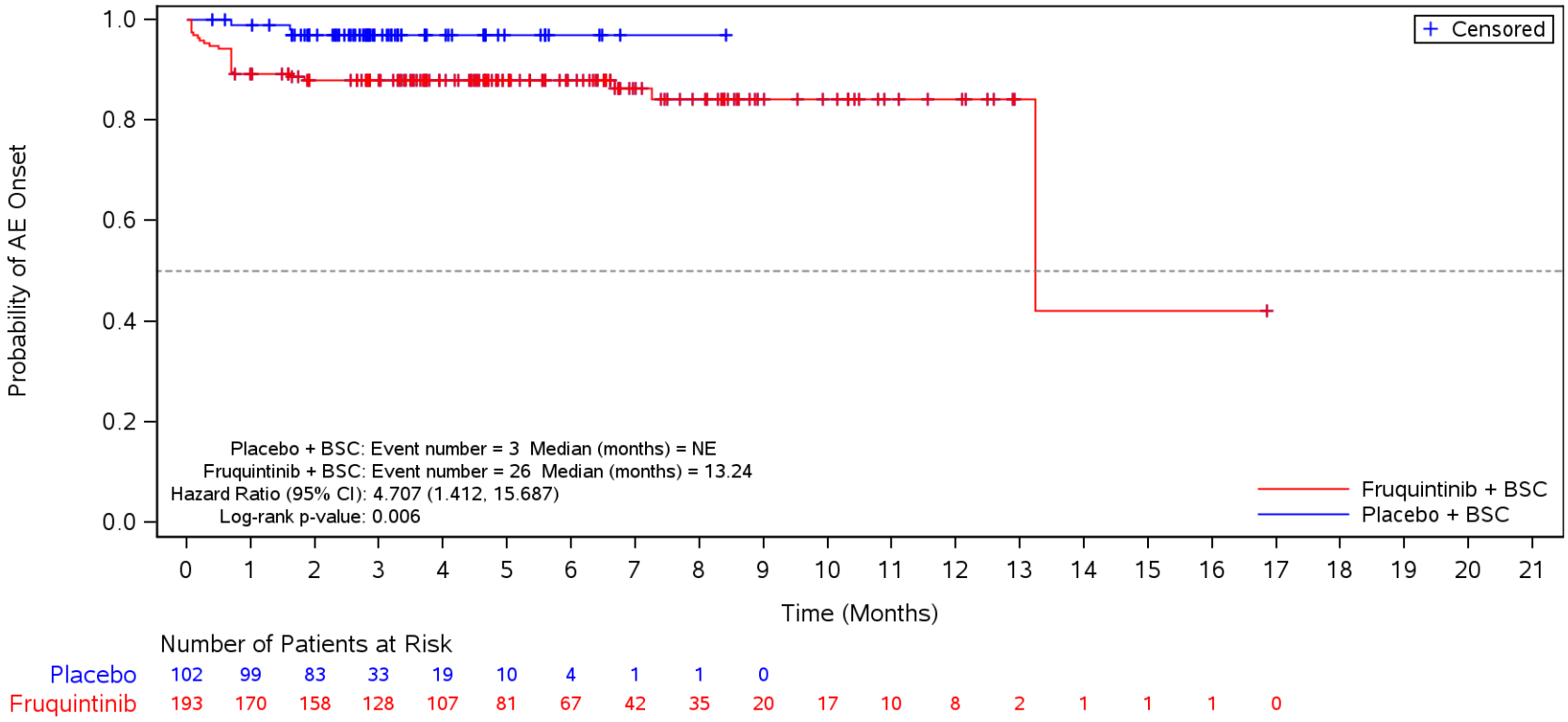
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
ECOG: 0



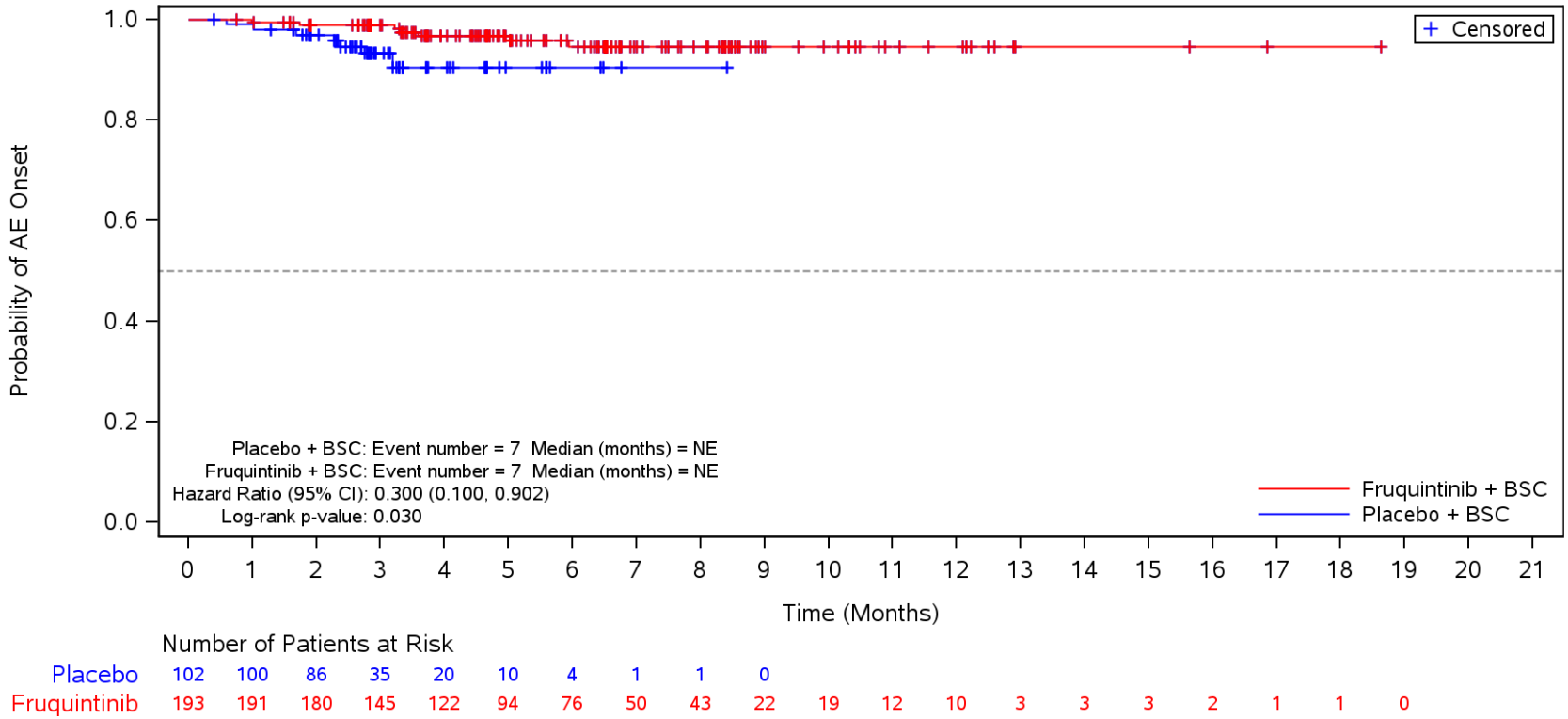
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
ECOG: 0



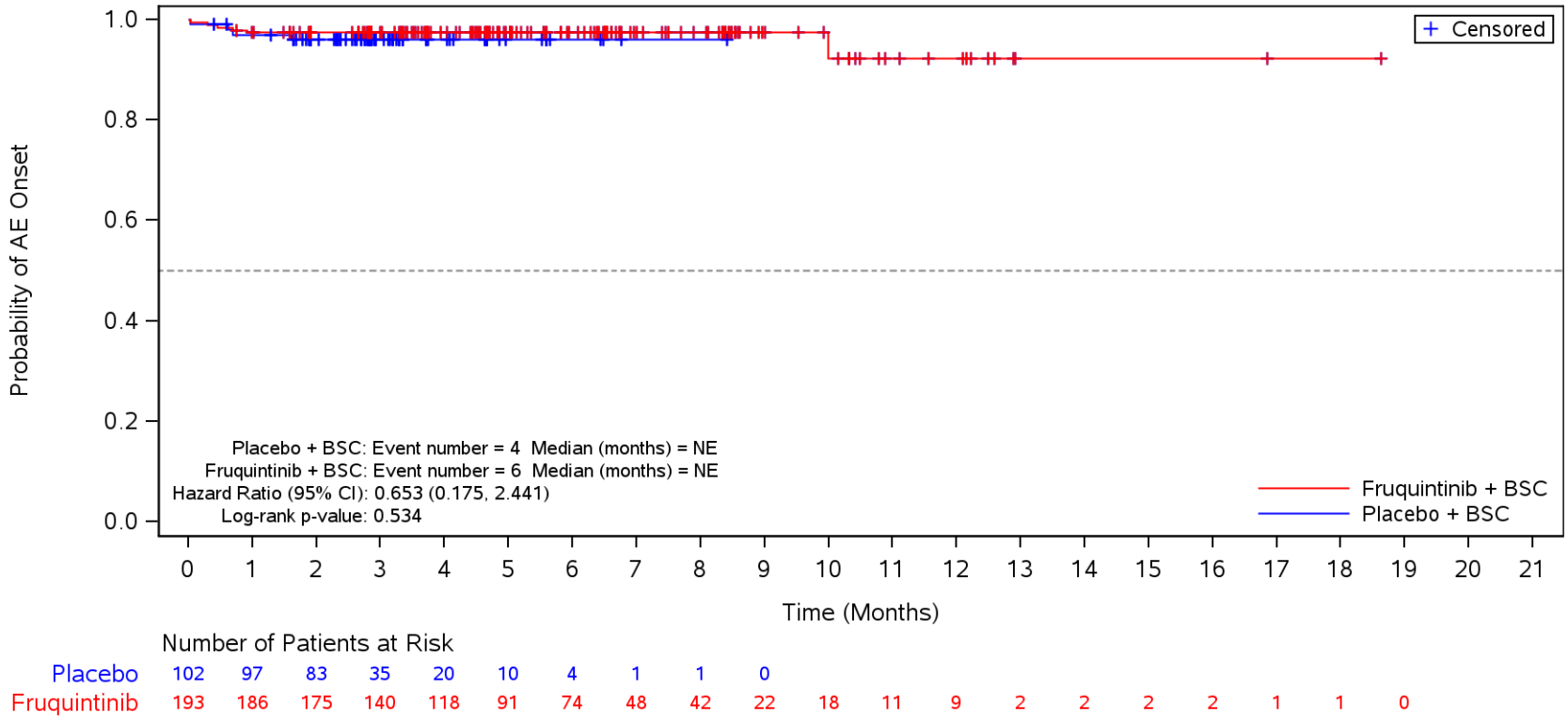
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
ECOG: 0



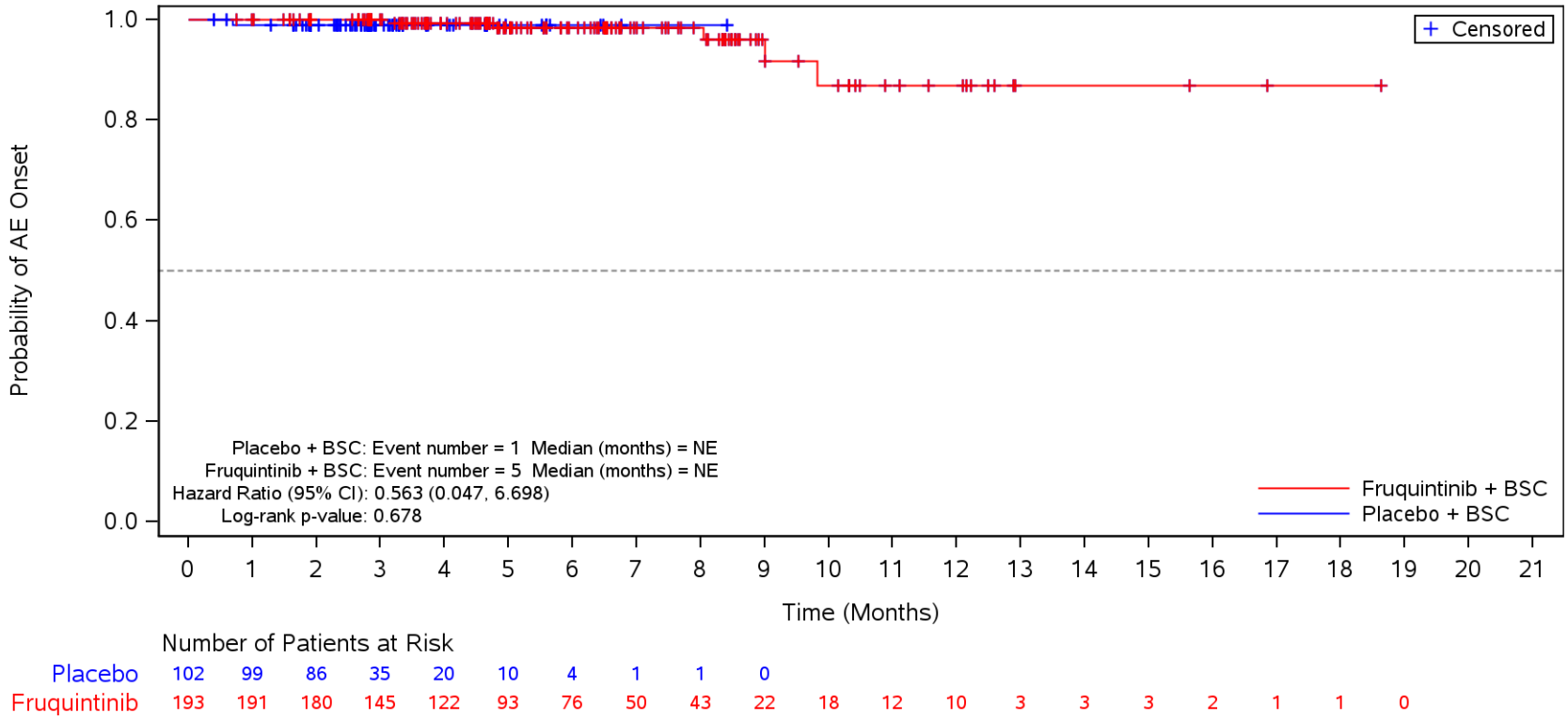
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
ECOG: 0



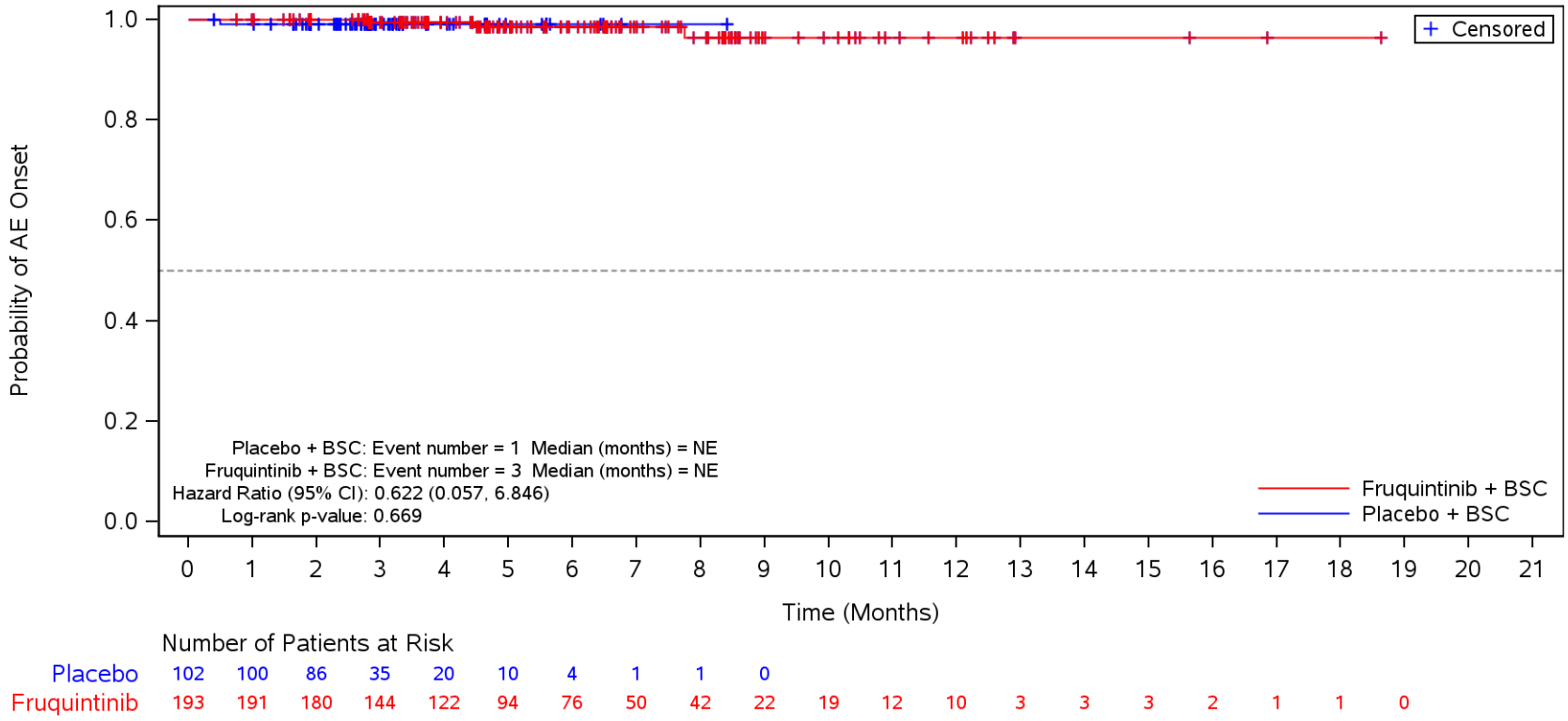
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**
ECOG: 0



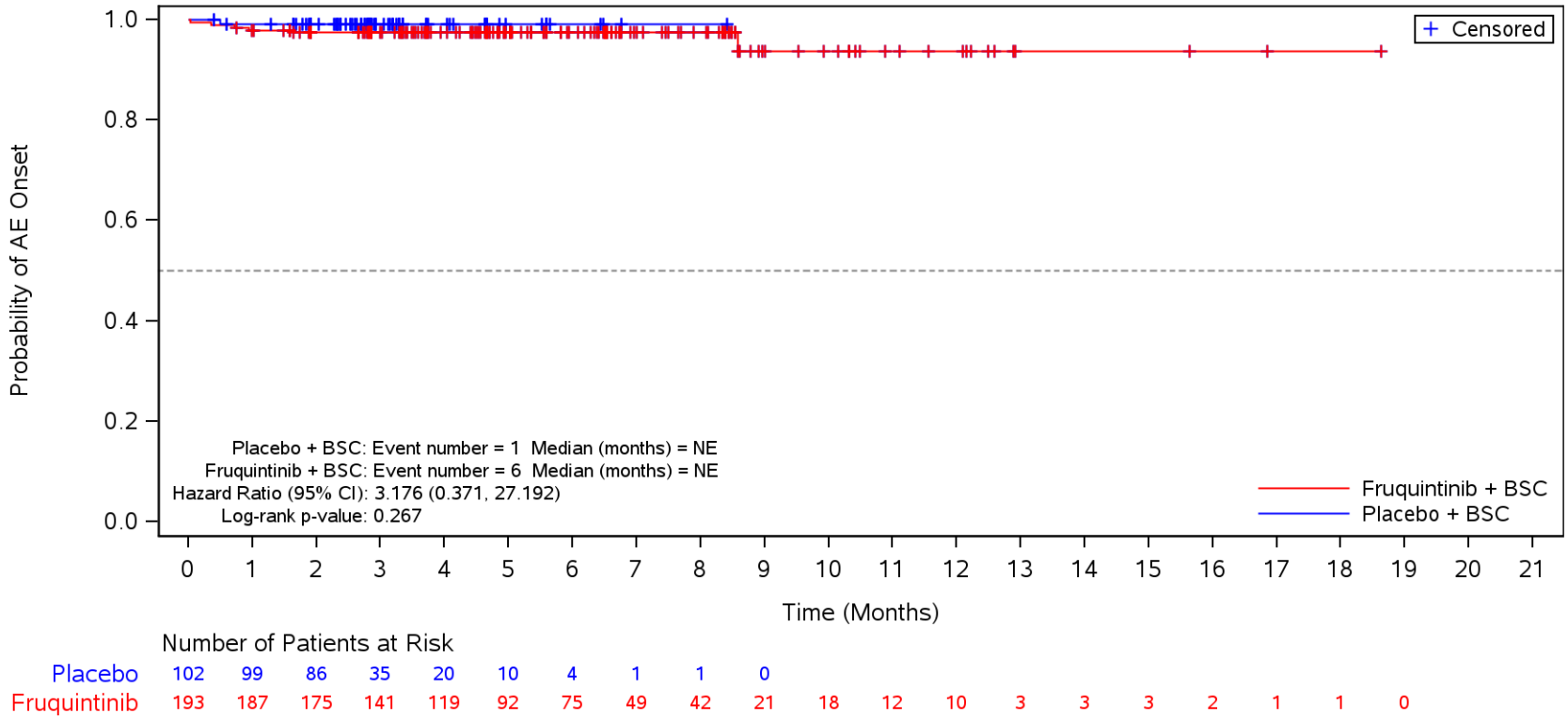
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Condition aggravated**
ECOG: 0



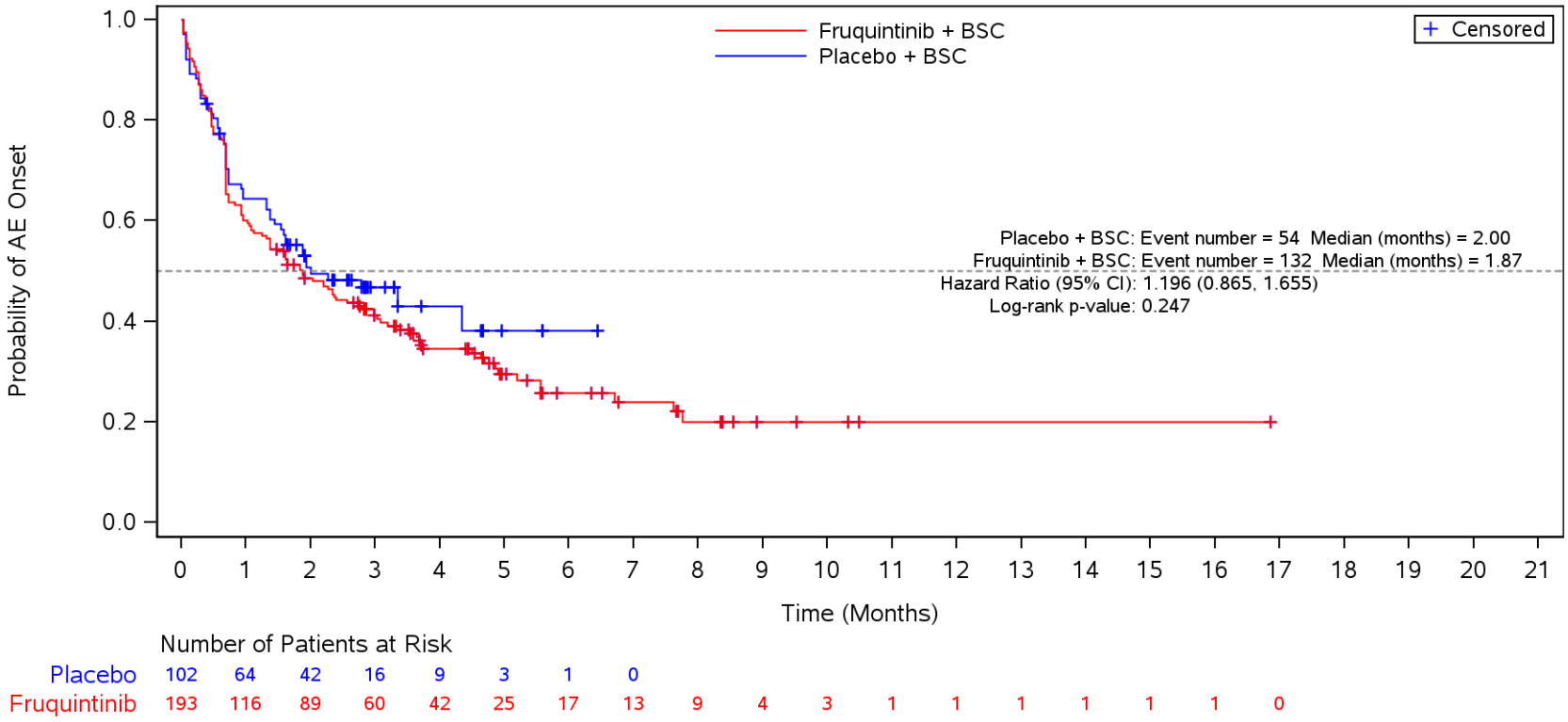
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**
ECOG: 0



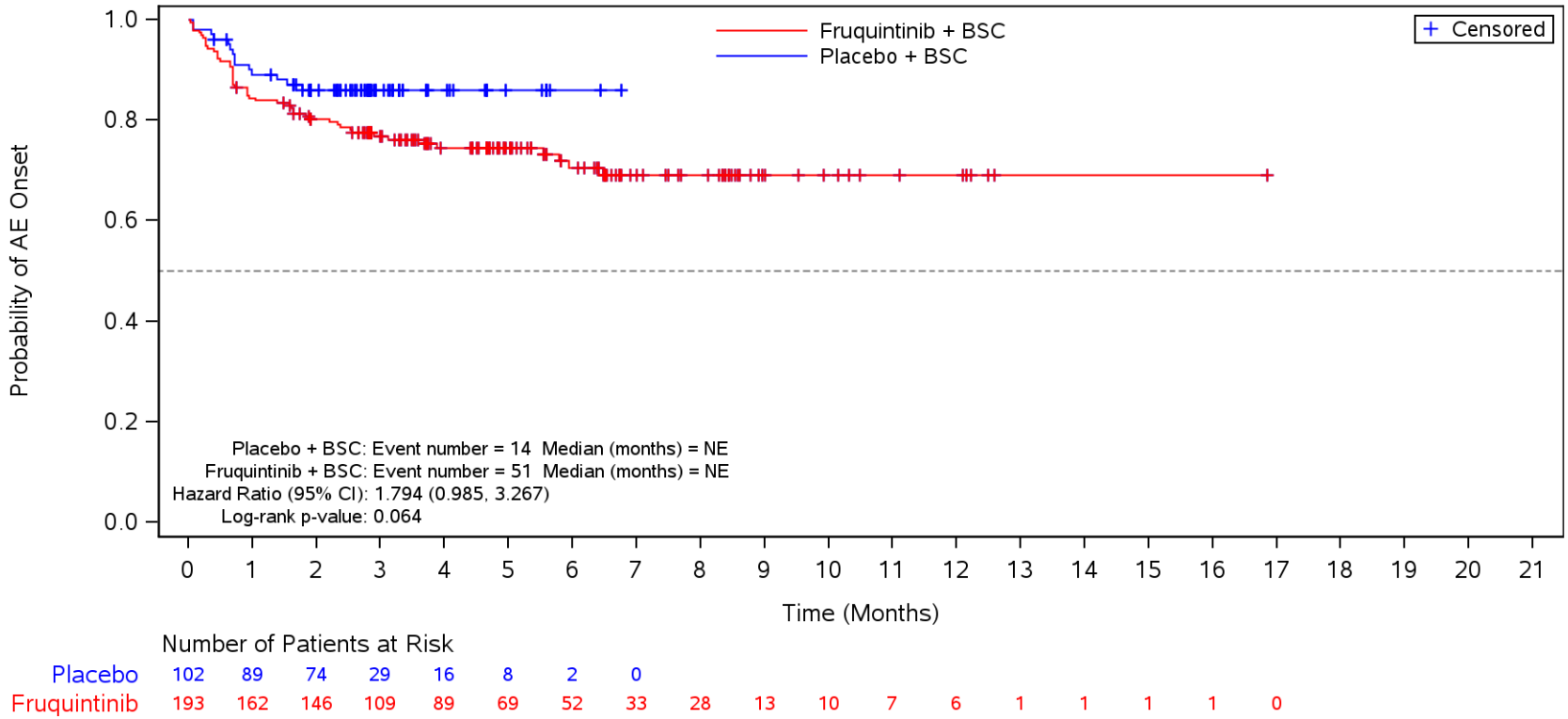
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
ECOG: 0



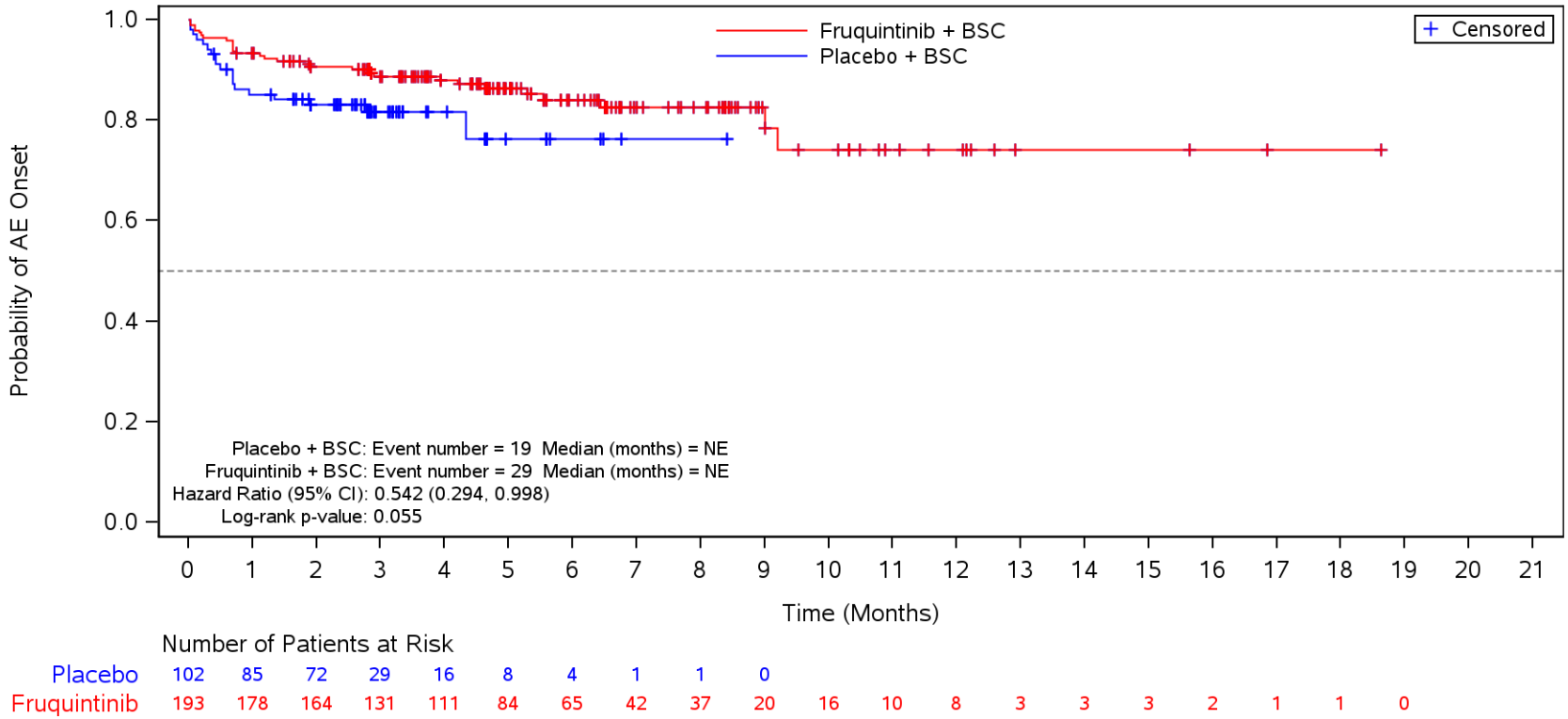
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
ECOG: 0



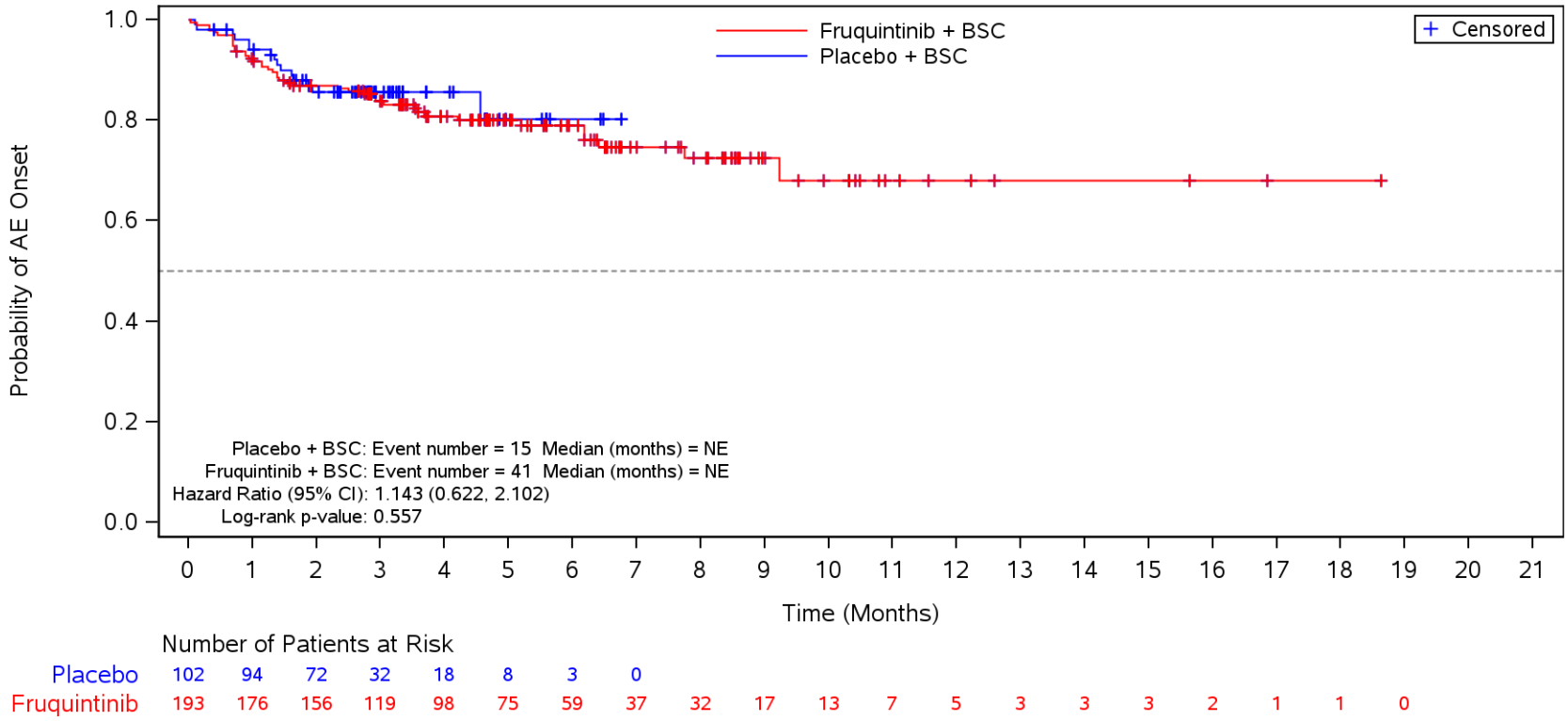
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
ECOG: 0



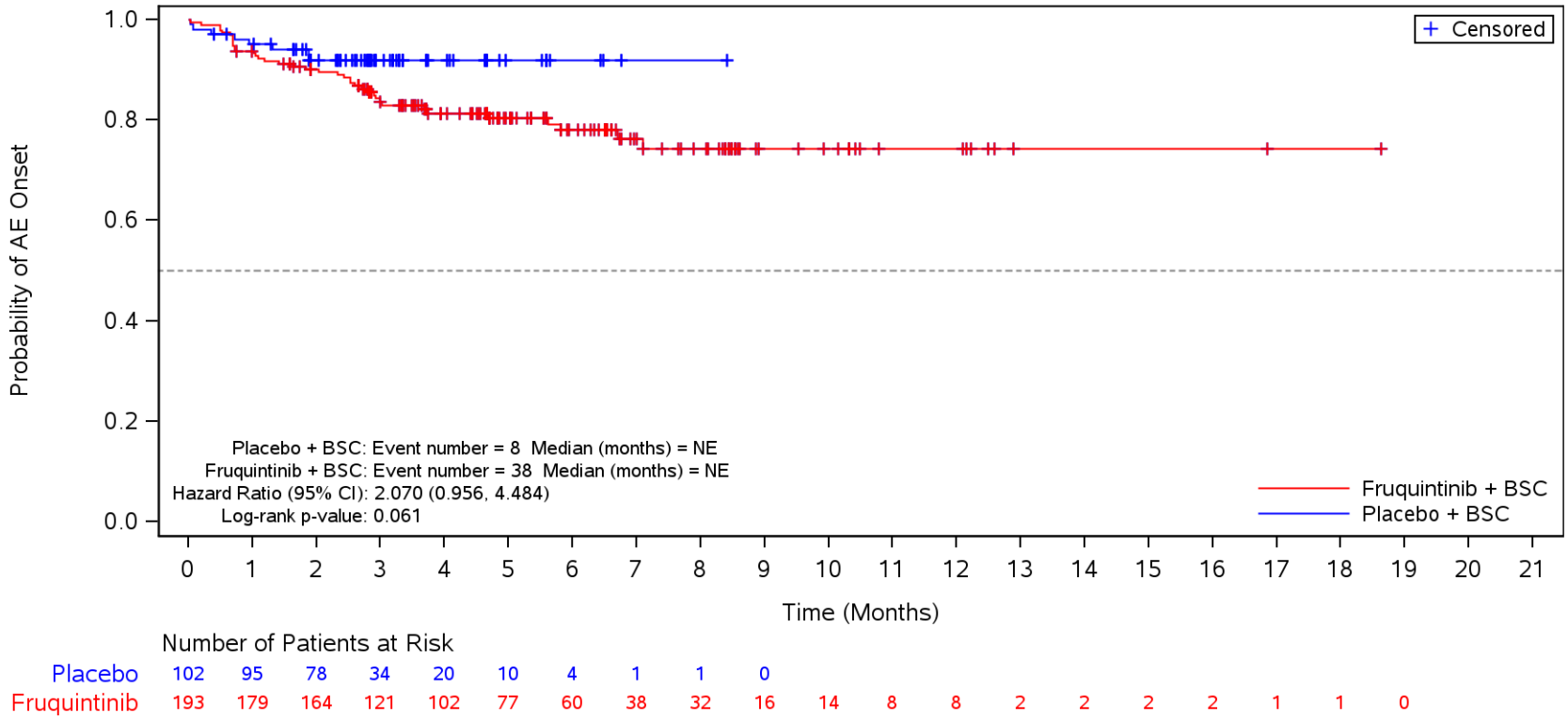
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
ECOG: 0



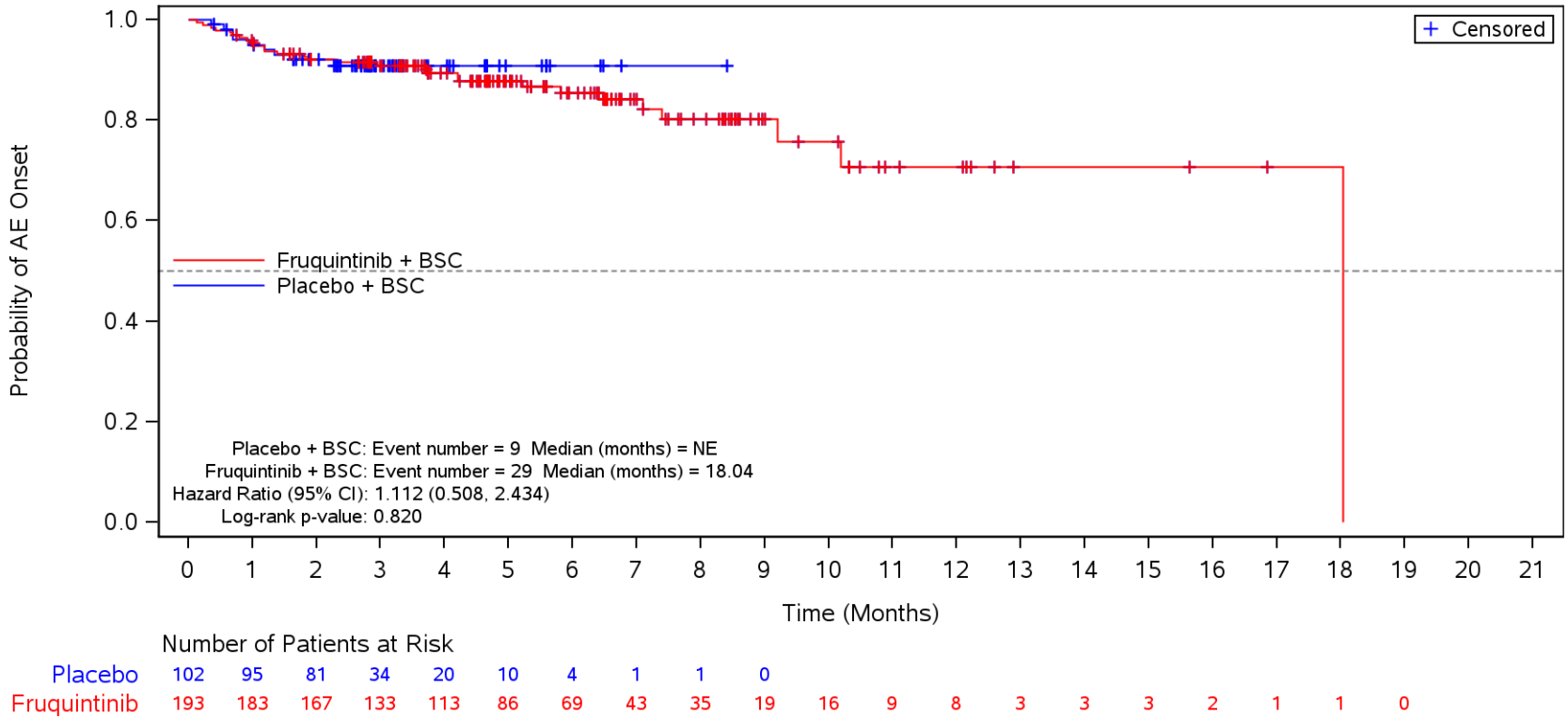
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
ECOG: 0



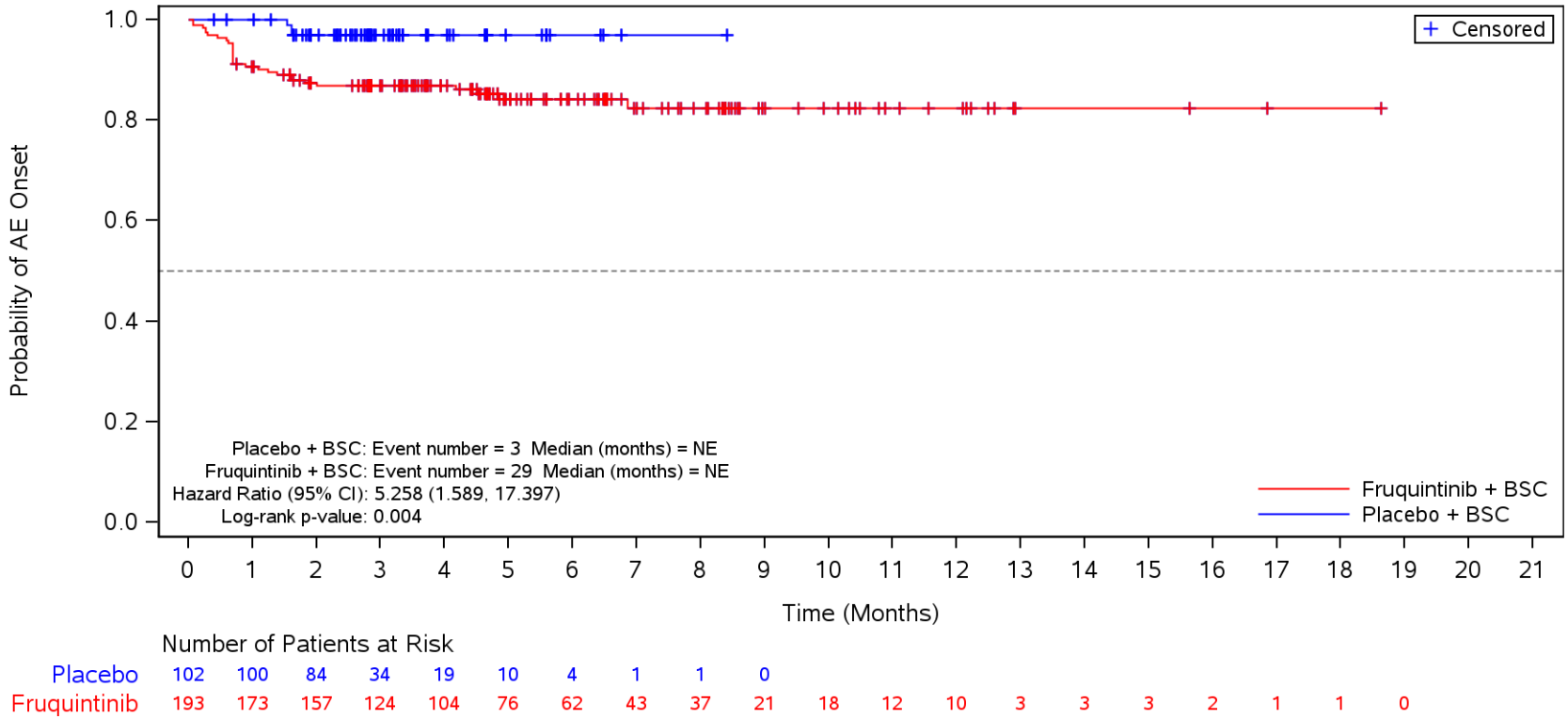
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
ECOG: 0



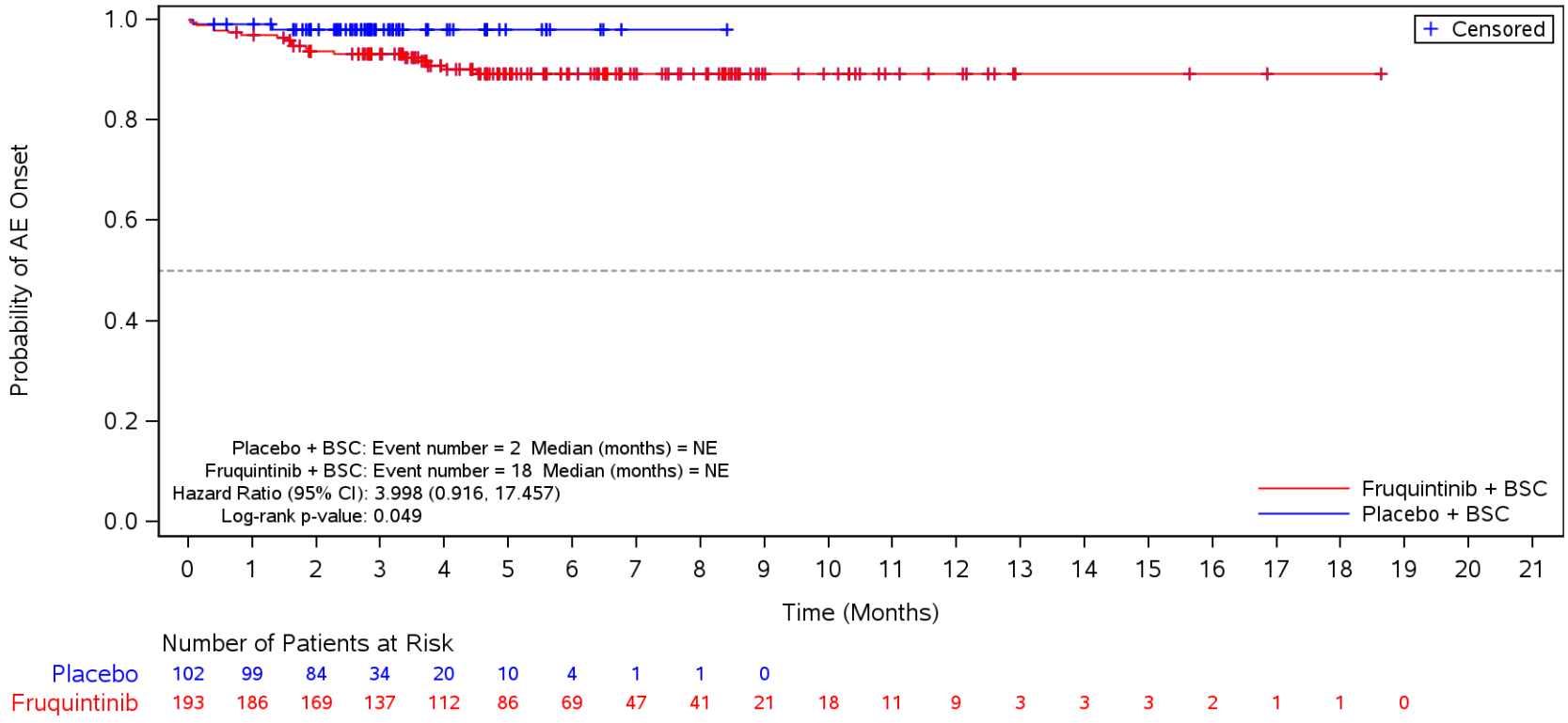
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
ECOG: 0



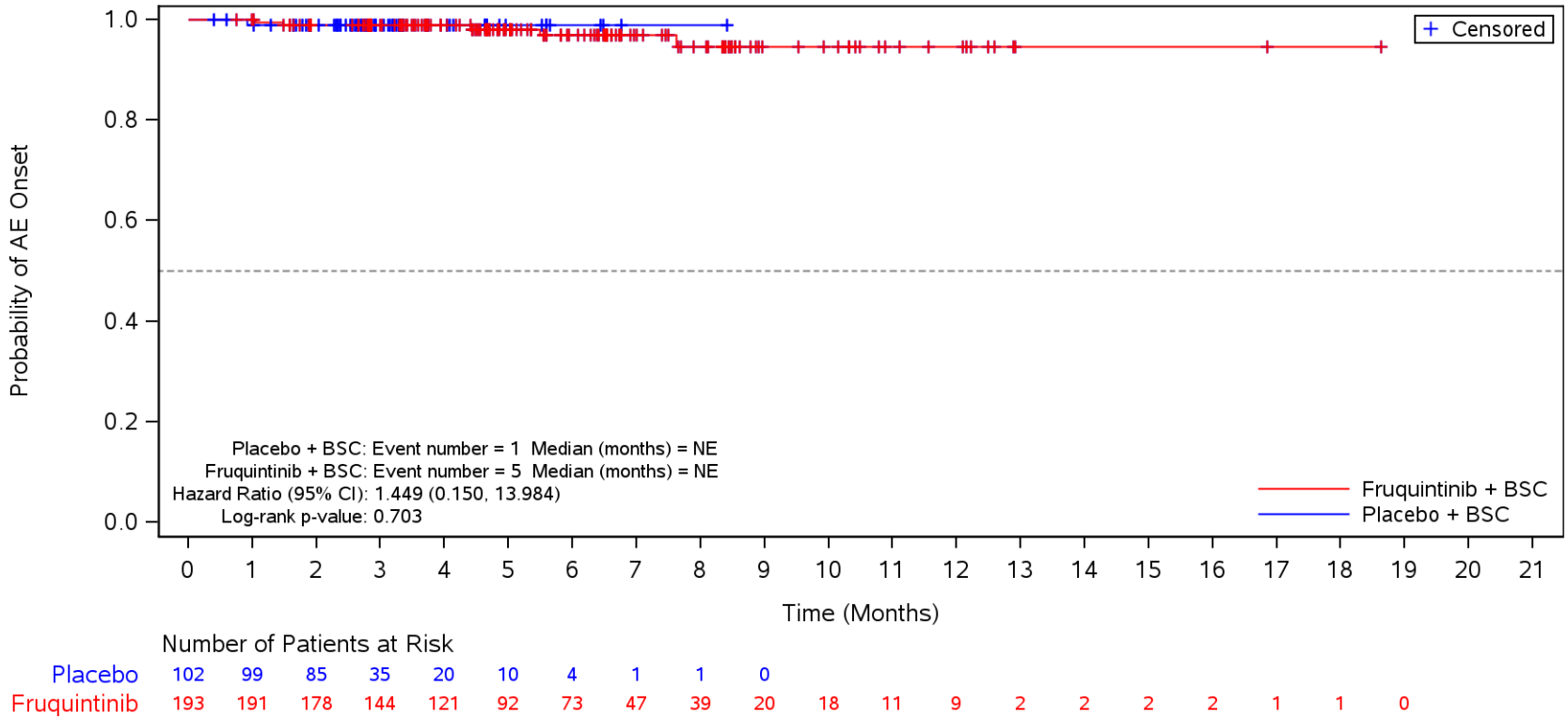
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
ECOG: 0



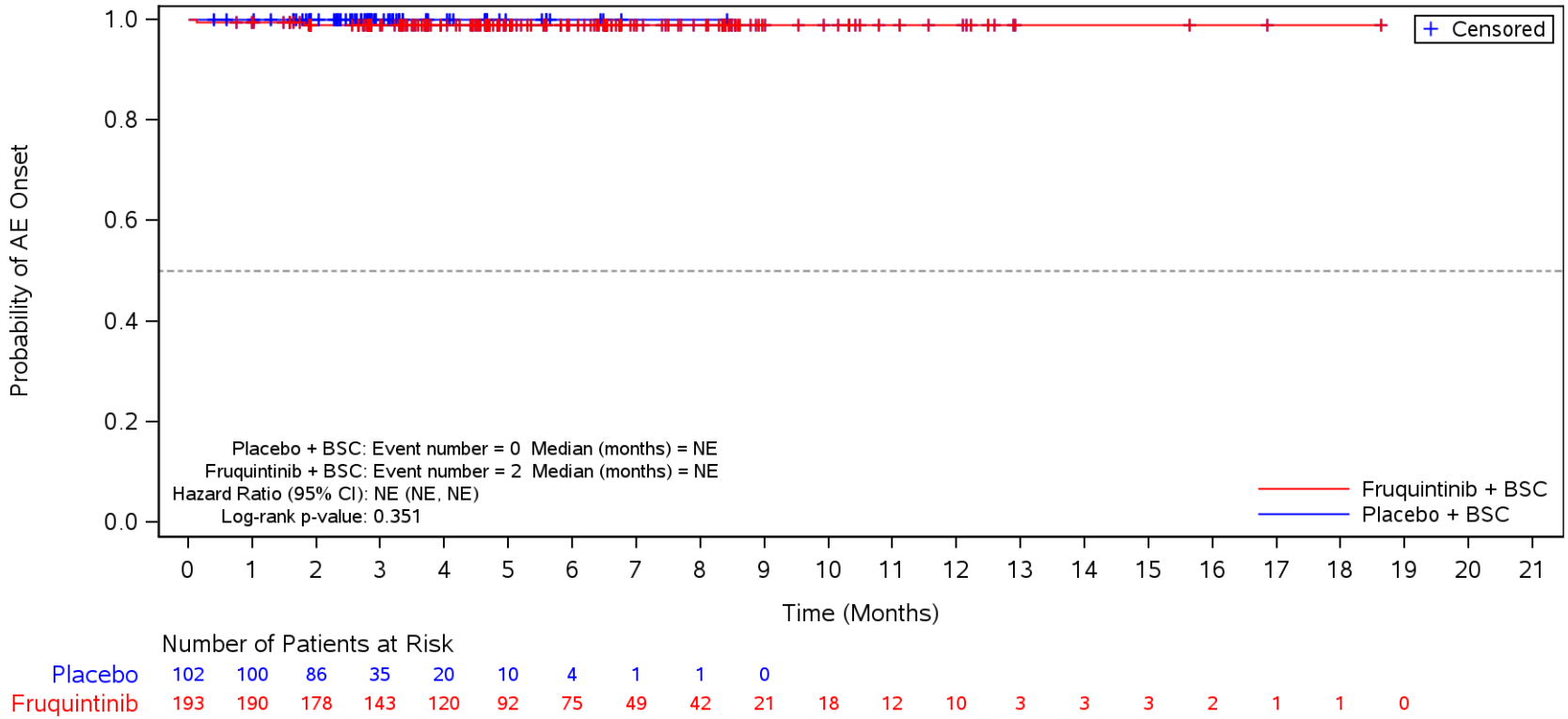
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
ECOG: 0



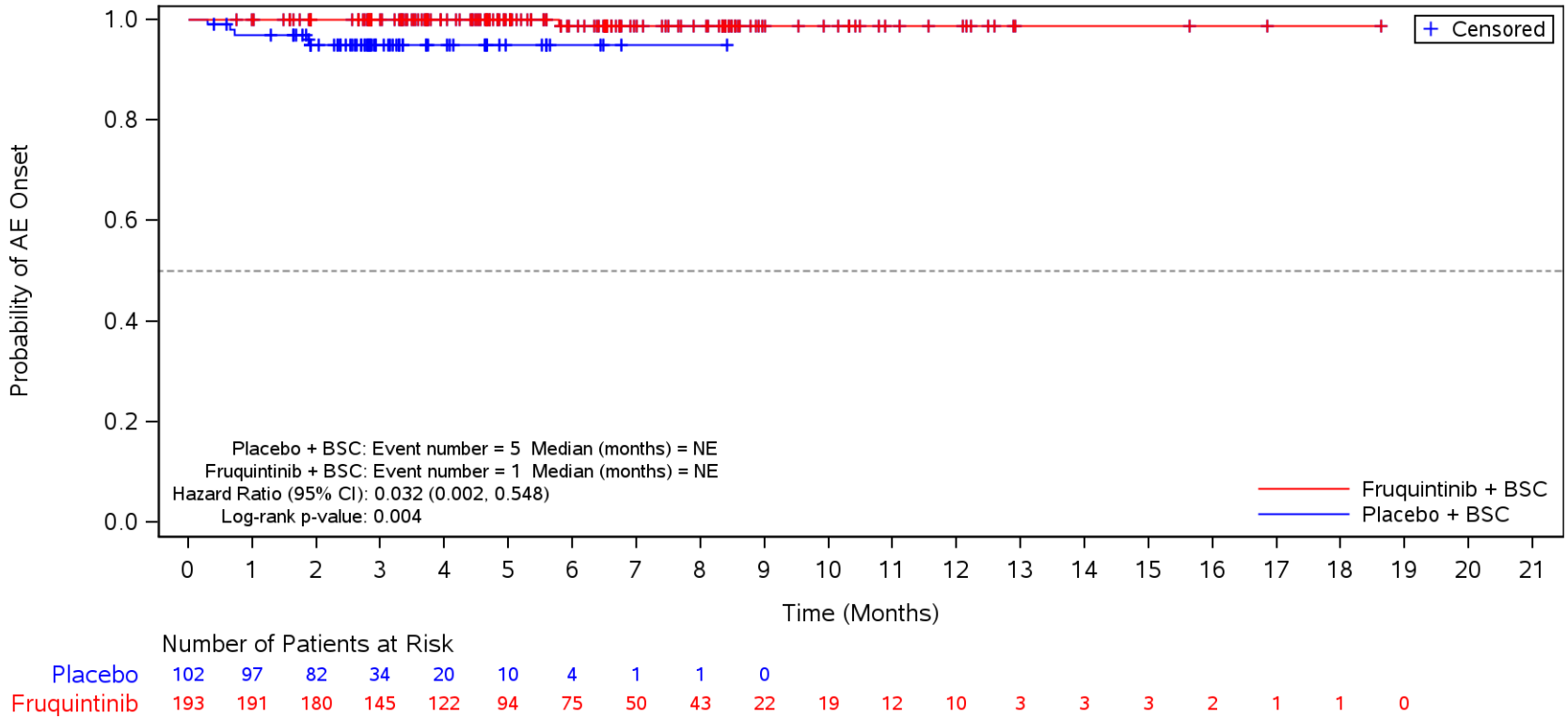
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
ECOG: 0



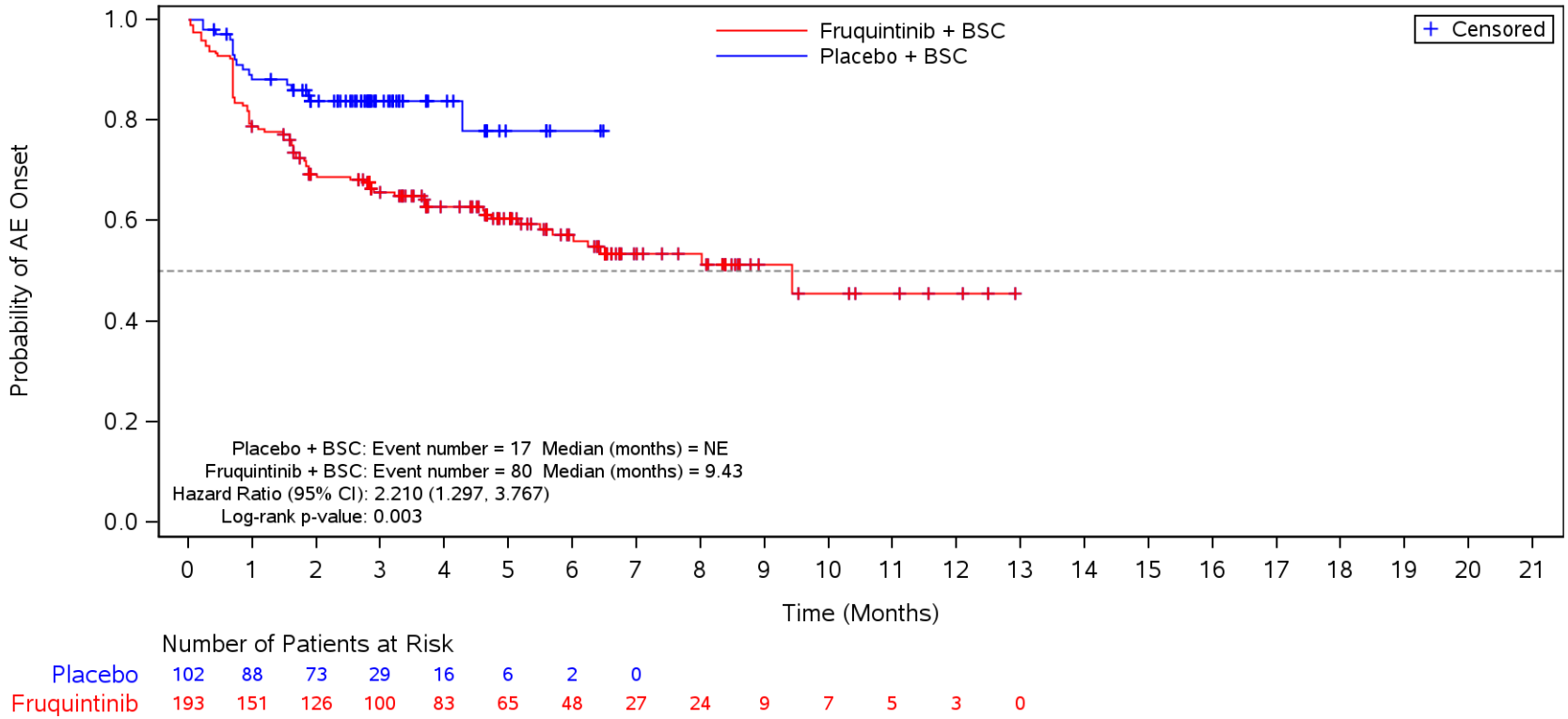
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
ECOG: 0



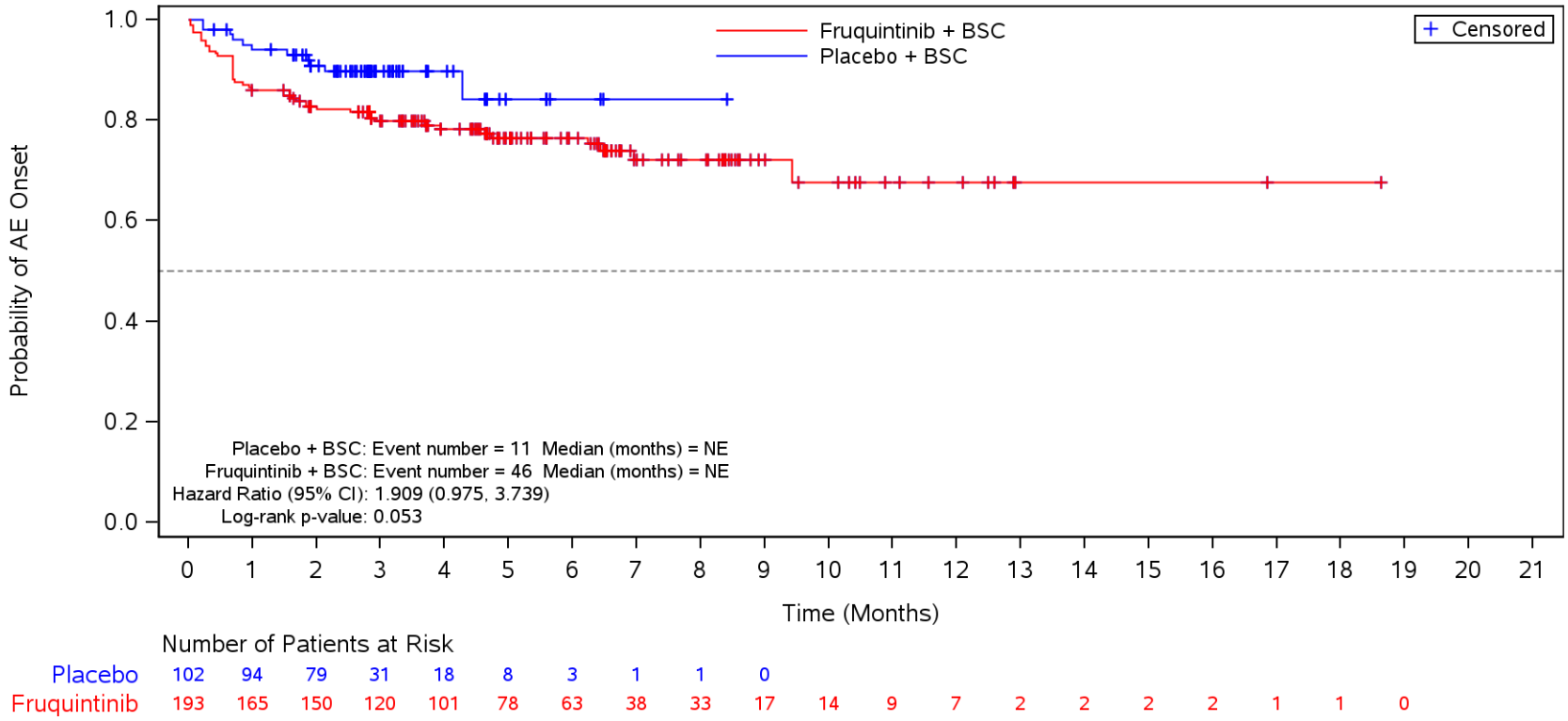
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
ECOG: 0



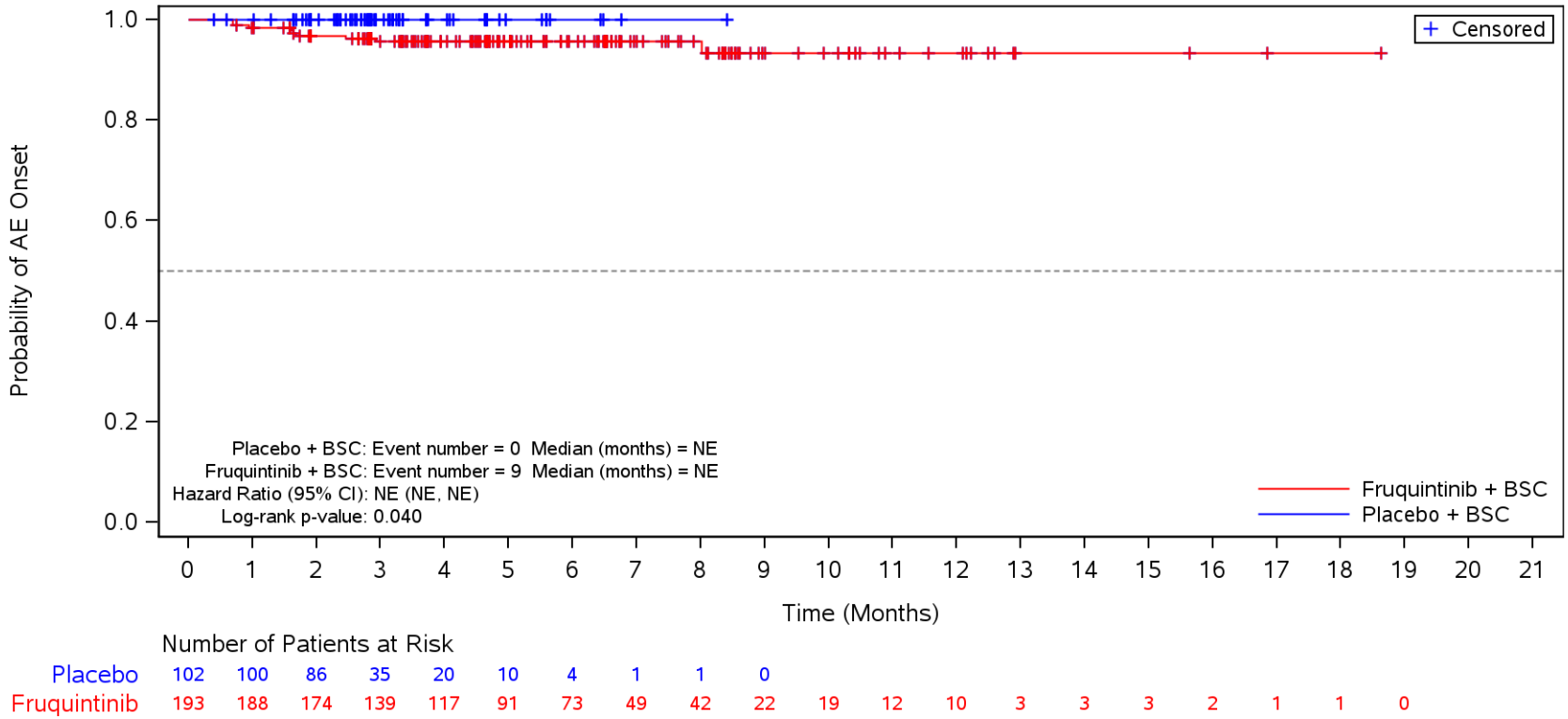
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
ECOG: 0



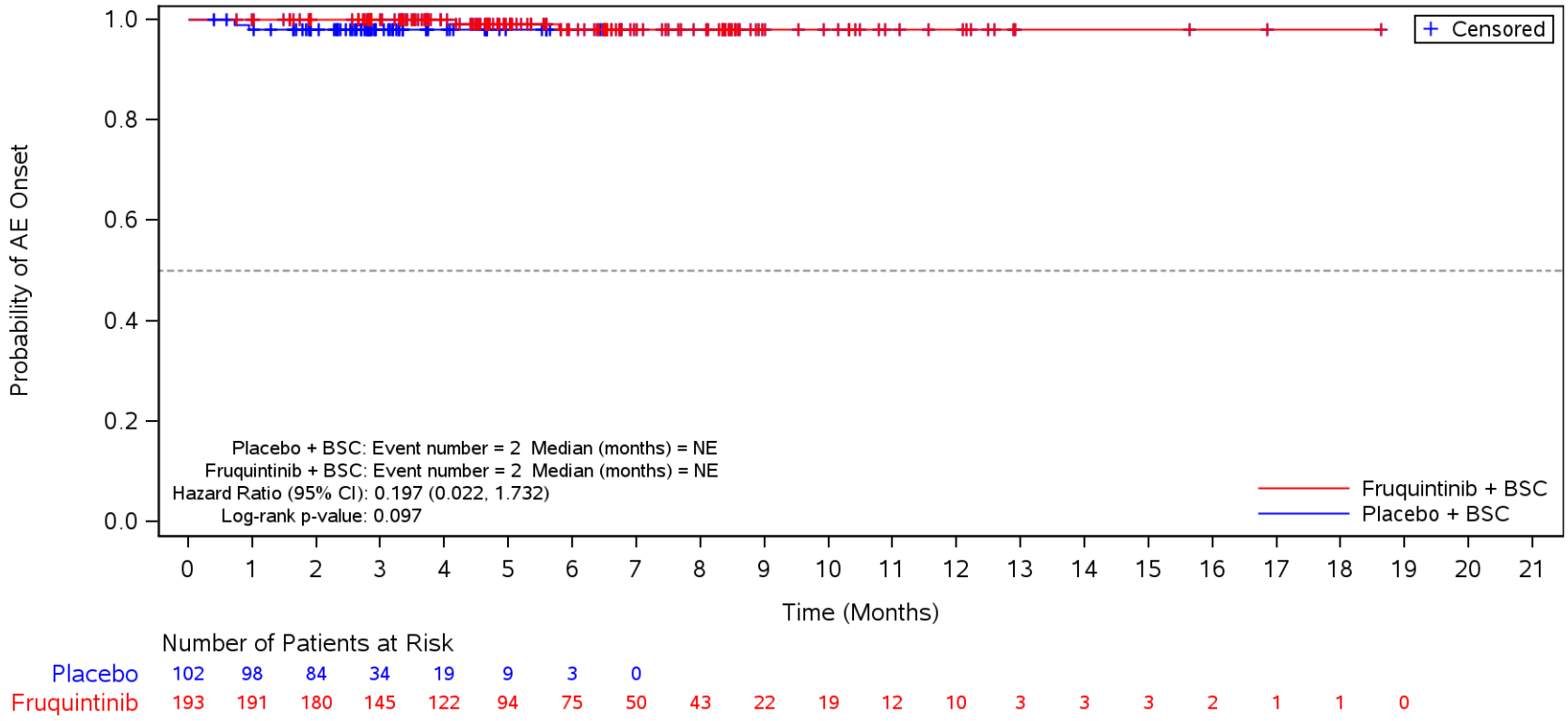
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
ECOG: 0



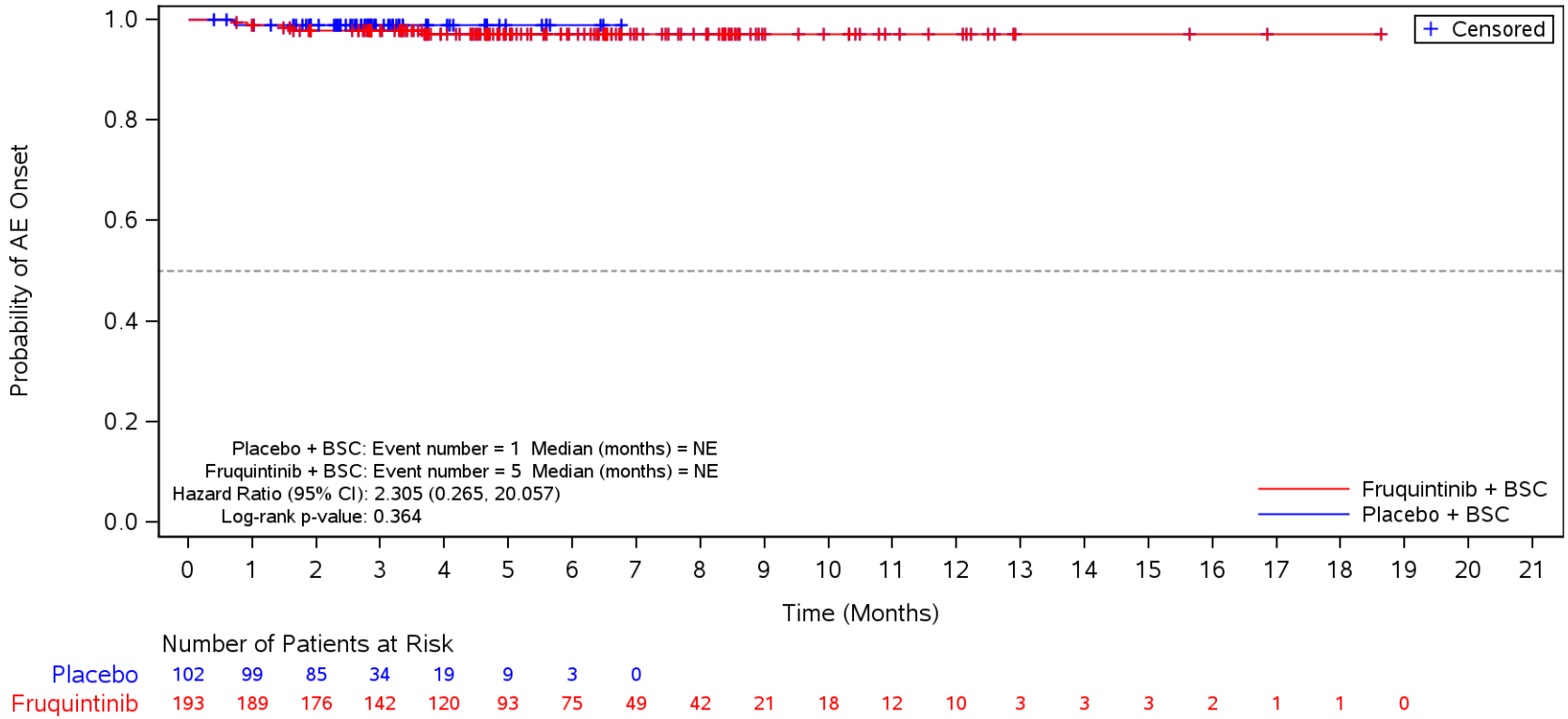
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
ECOG: 0



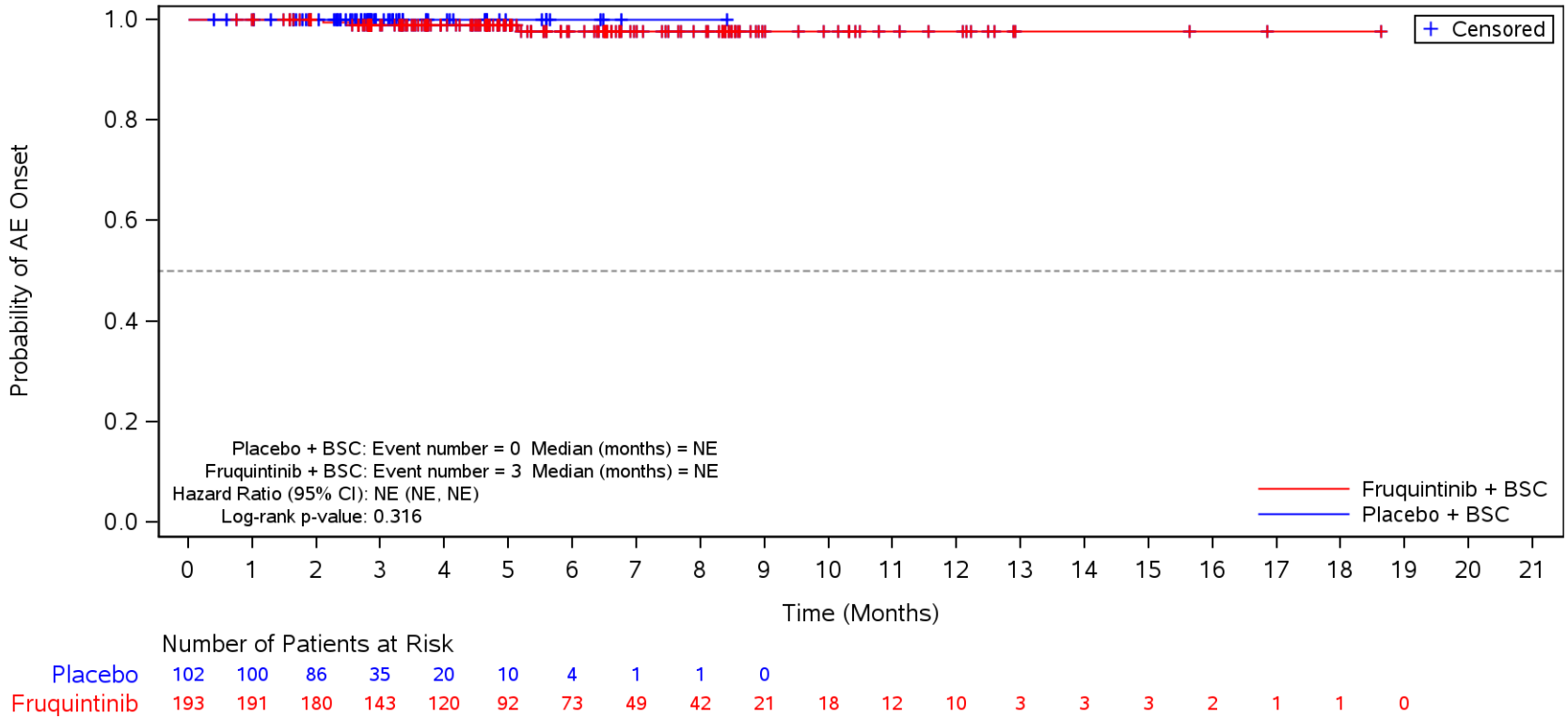
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
ECOG: 0



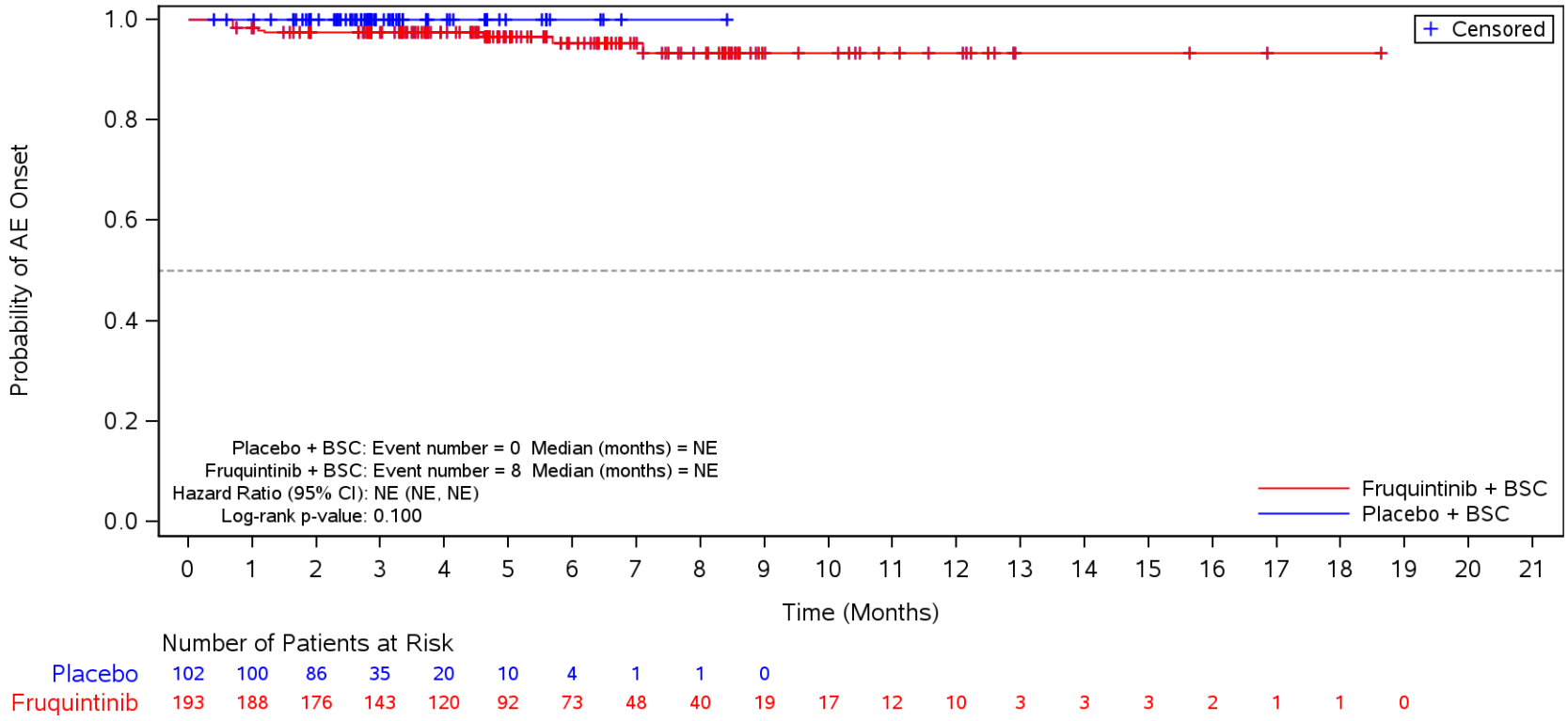
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
ECOG: 0



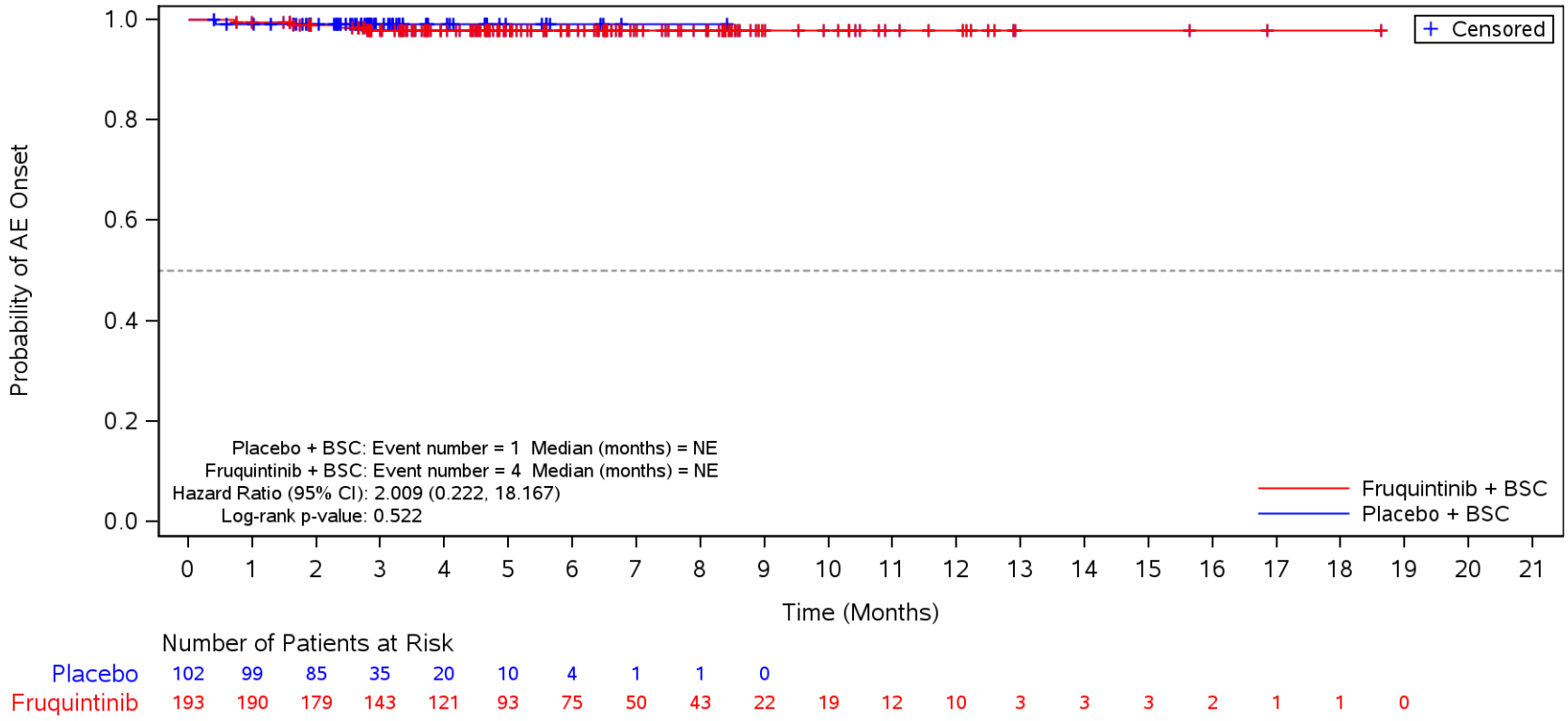
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
ECOG: 0



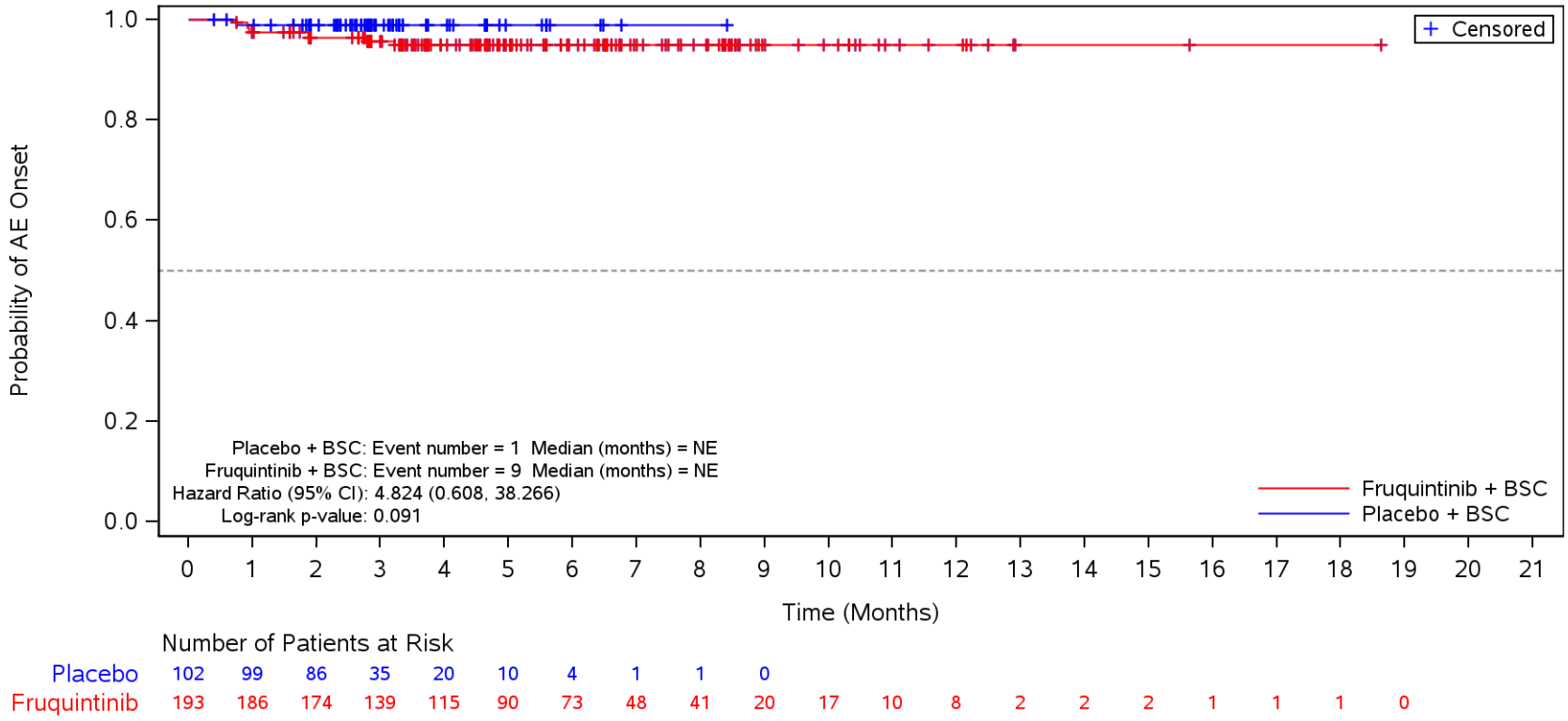
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
ECOG: 0



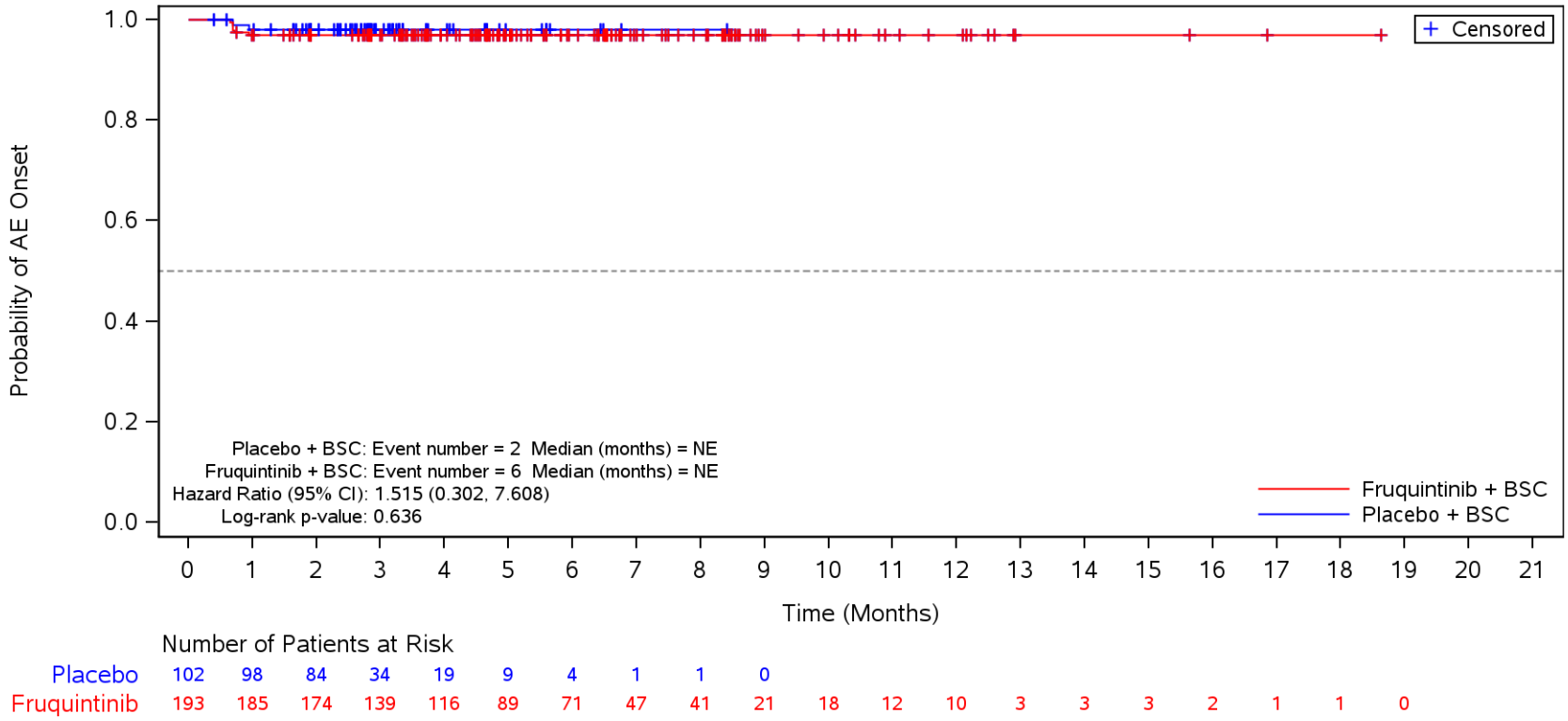
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**
ECOG: 0



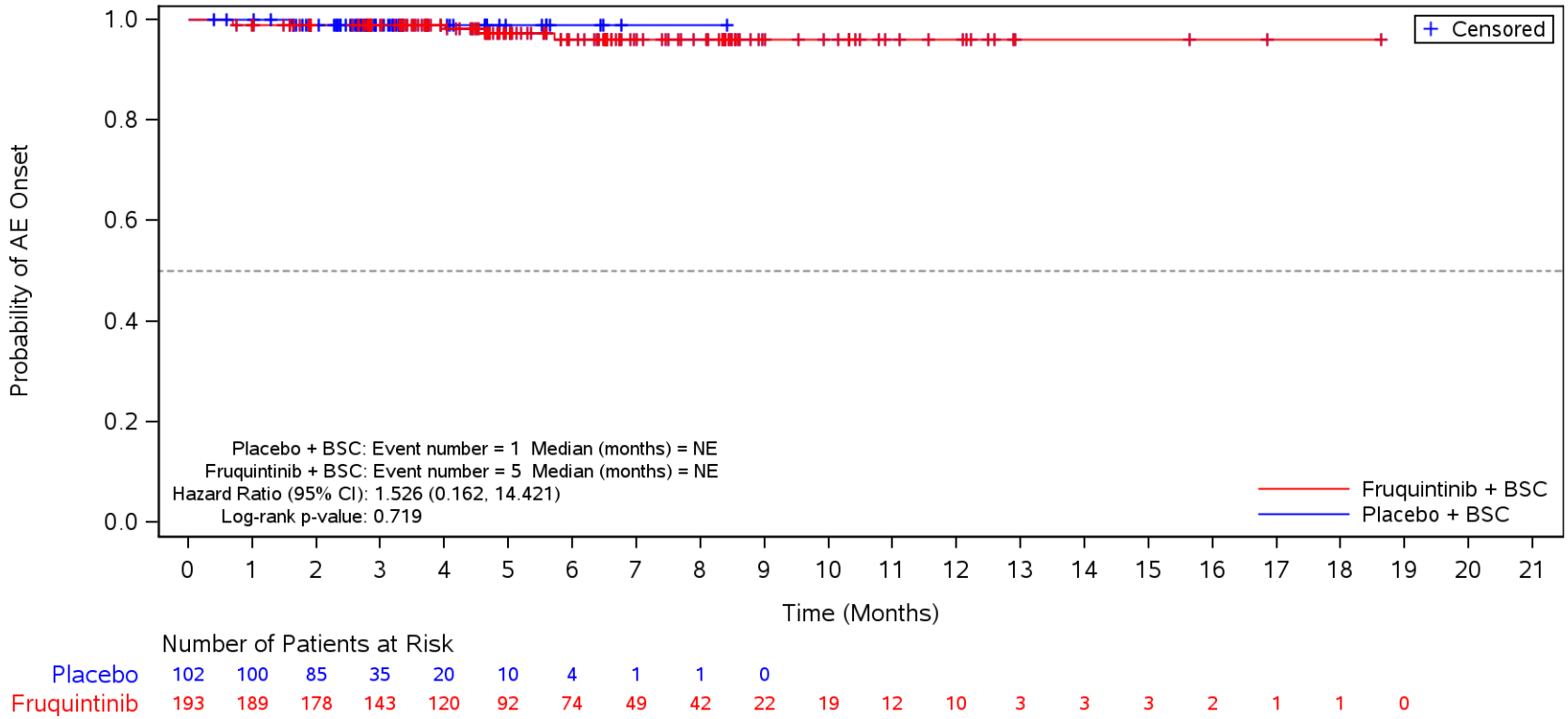
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
ECOG: 0



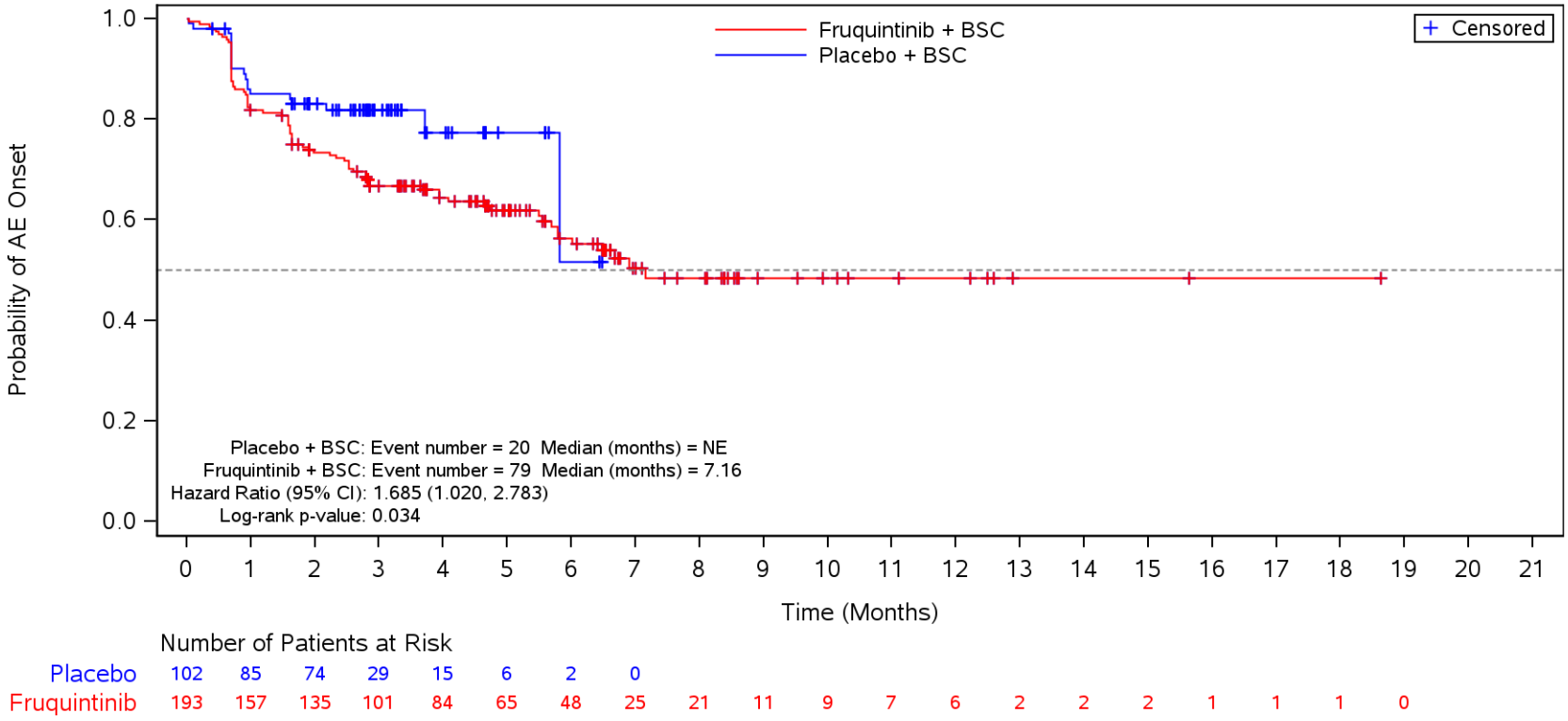
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
ECOG: 0



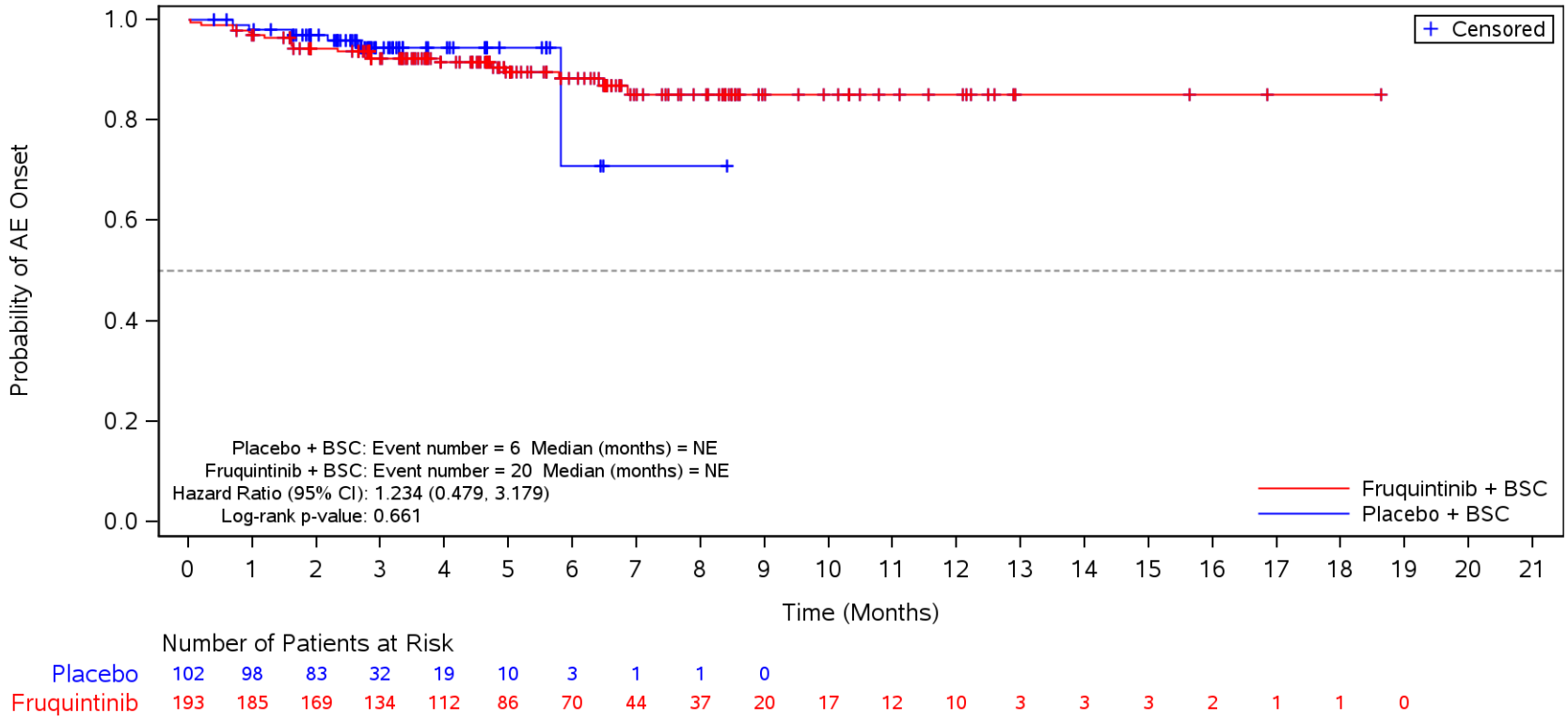
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations**
ECOG: 0



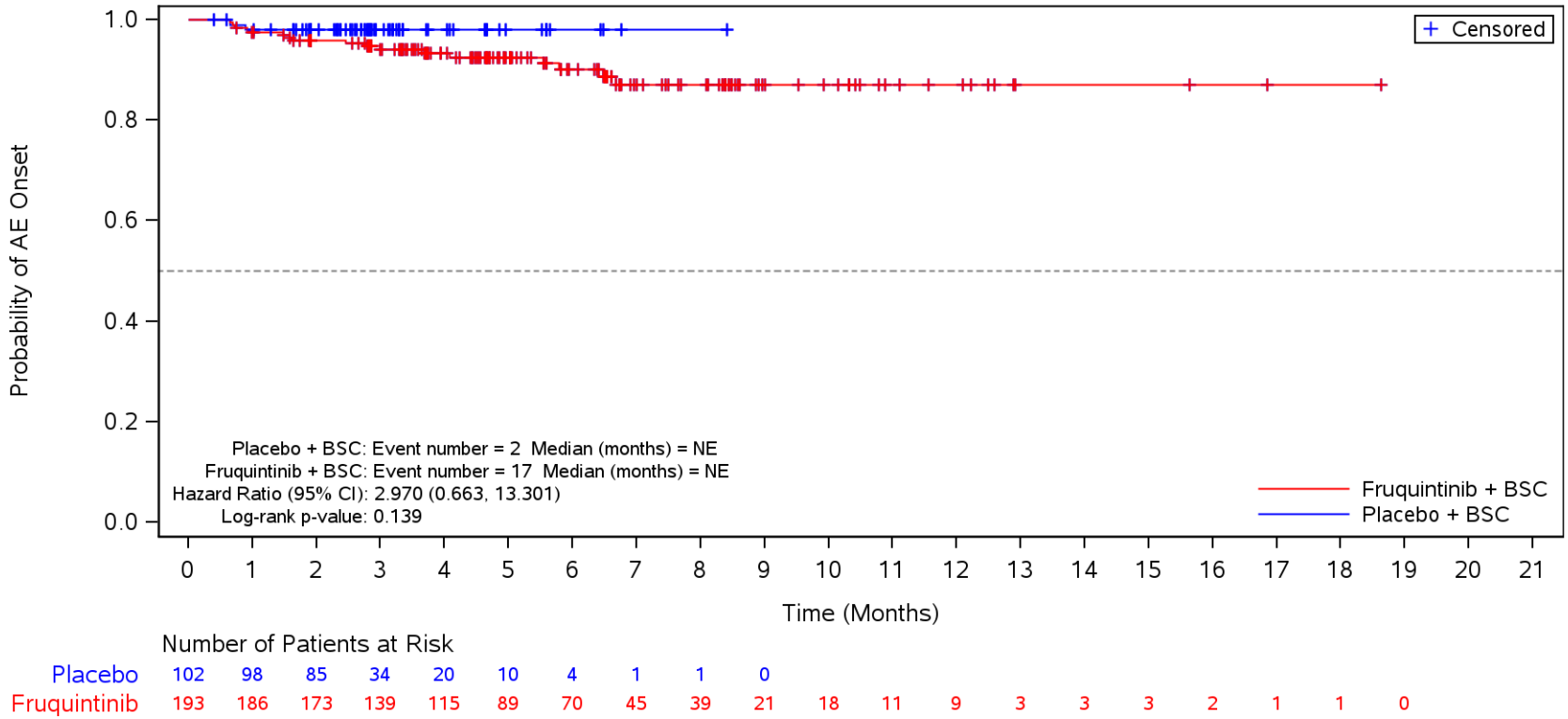
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
ECOG: 0



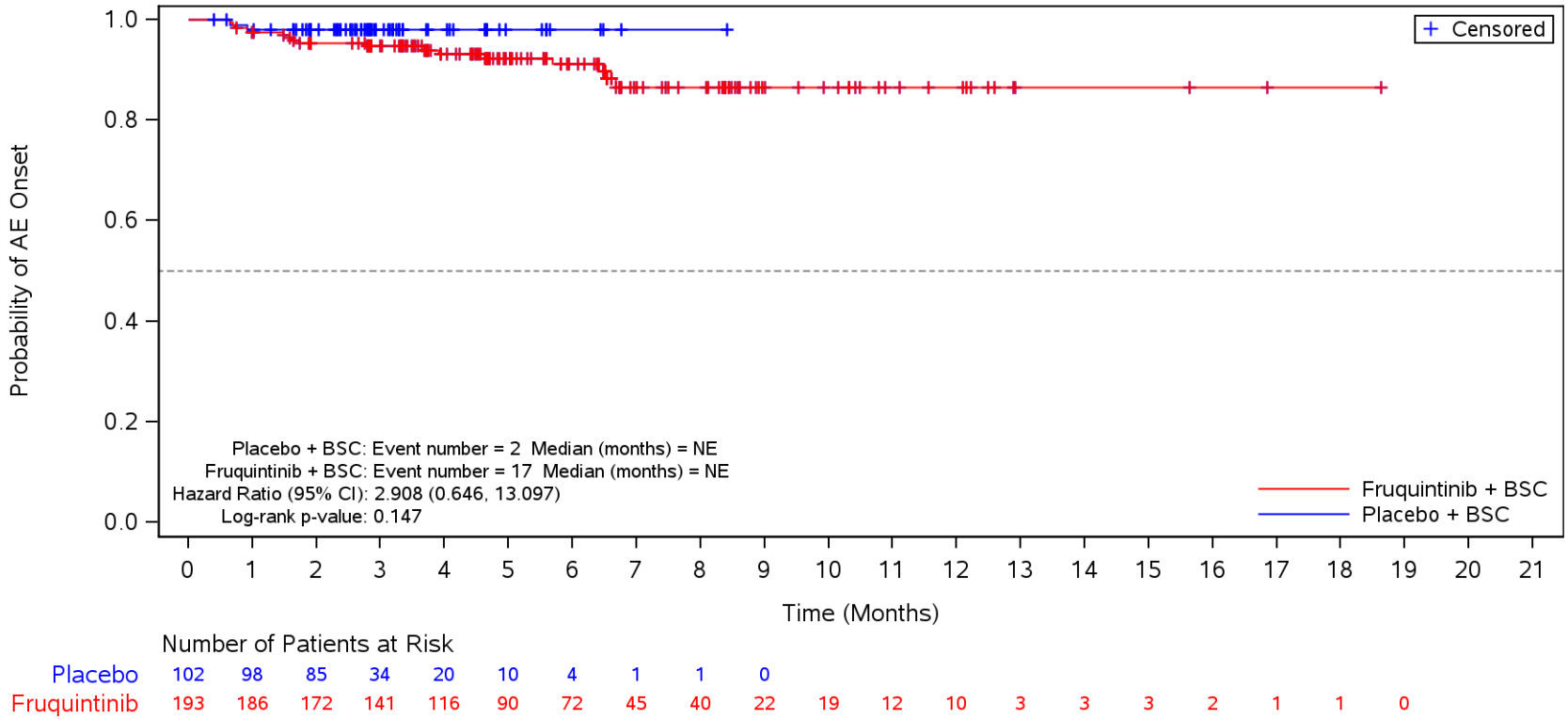
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
ECOG: 0



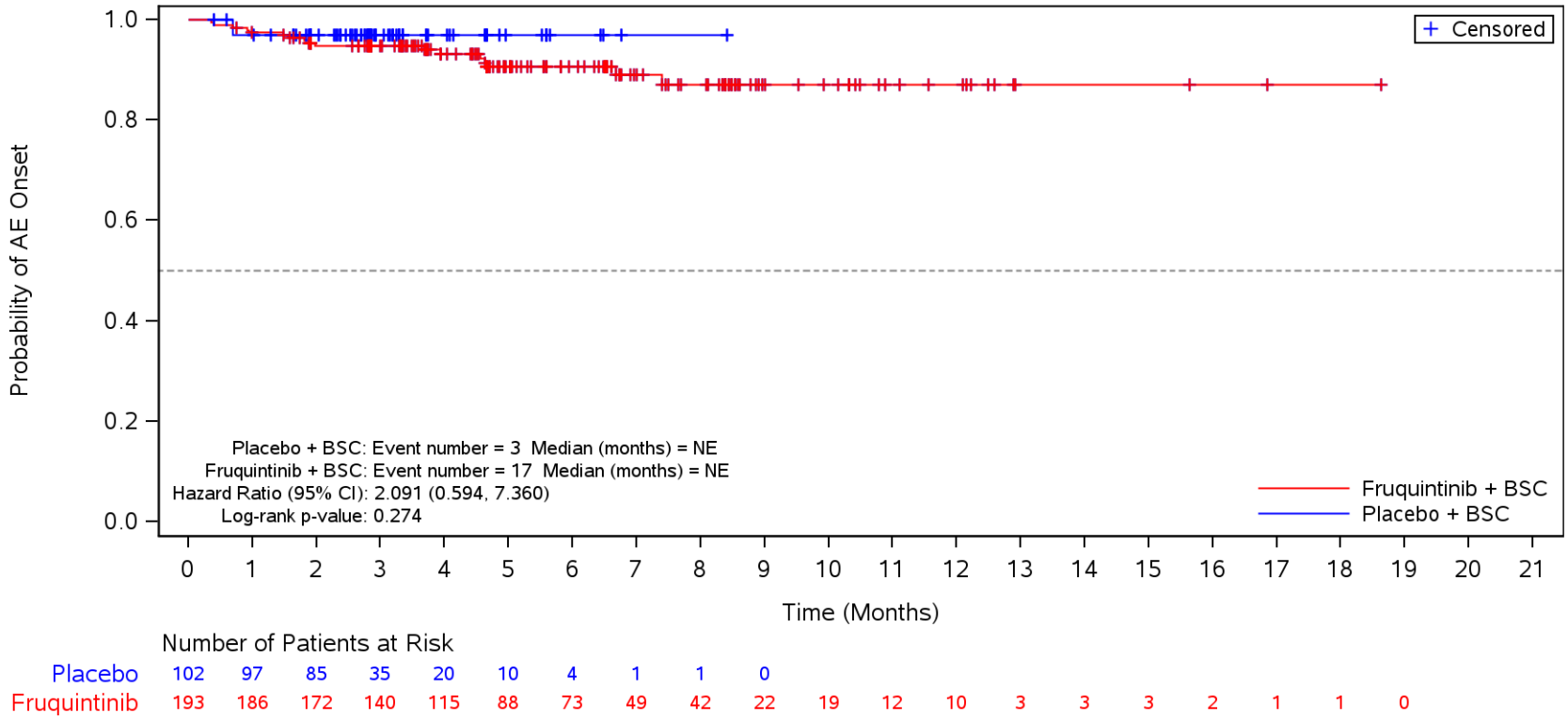
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
ECOG: 0



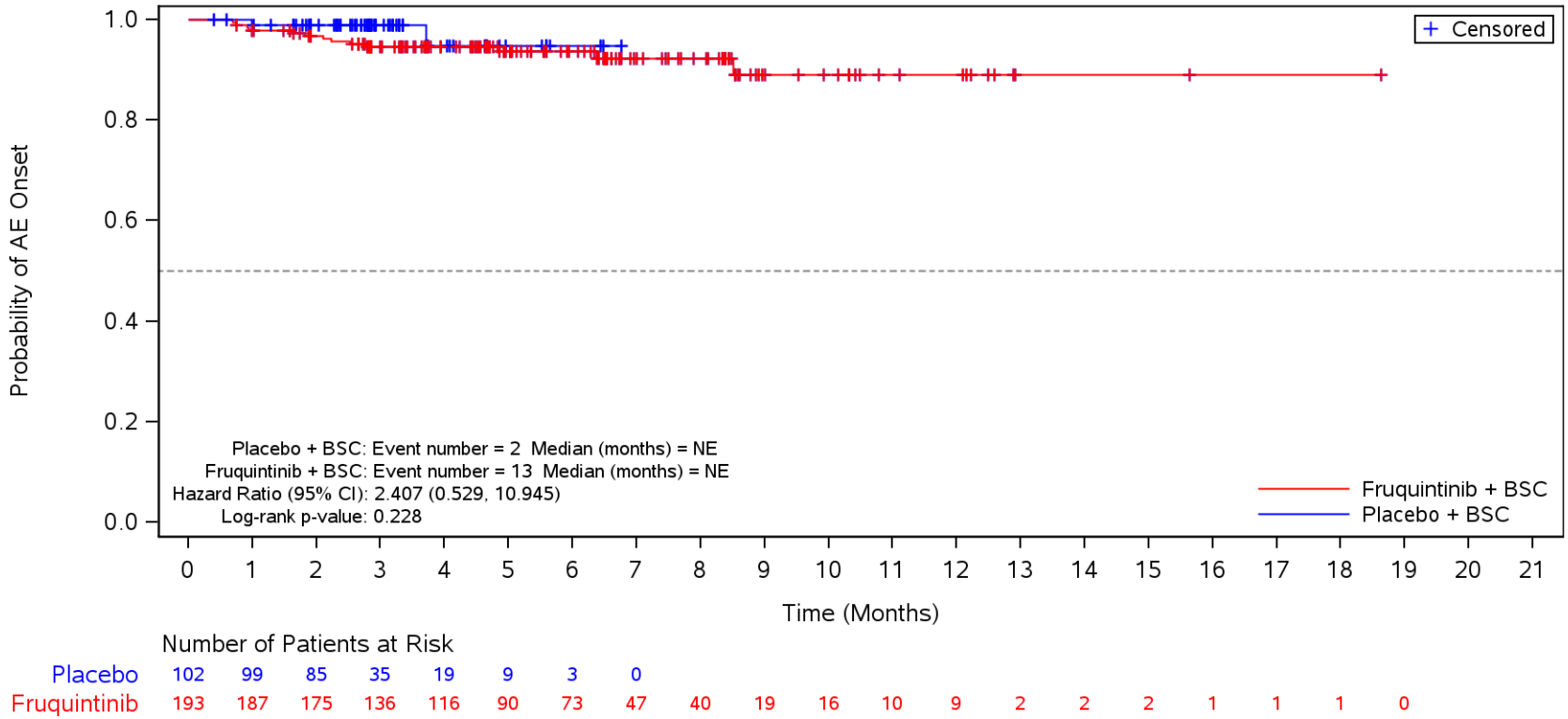
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
ECOG: 0



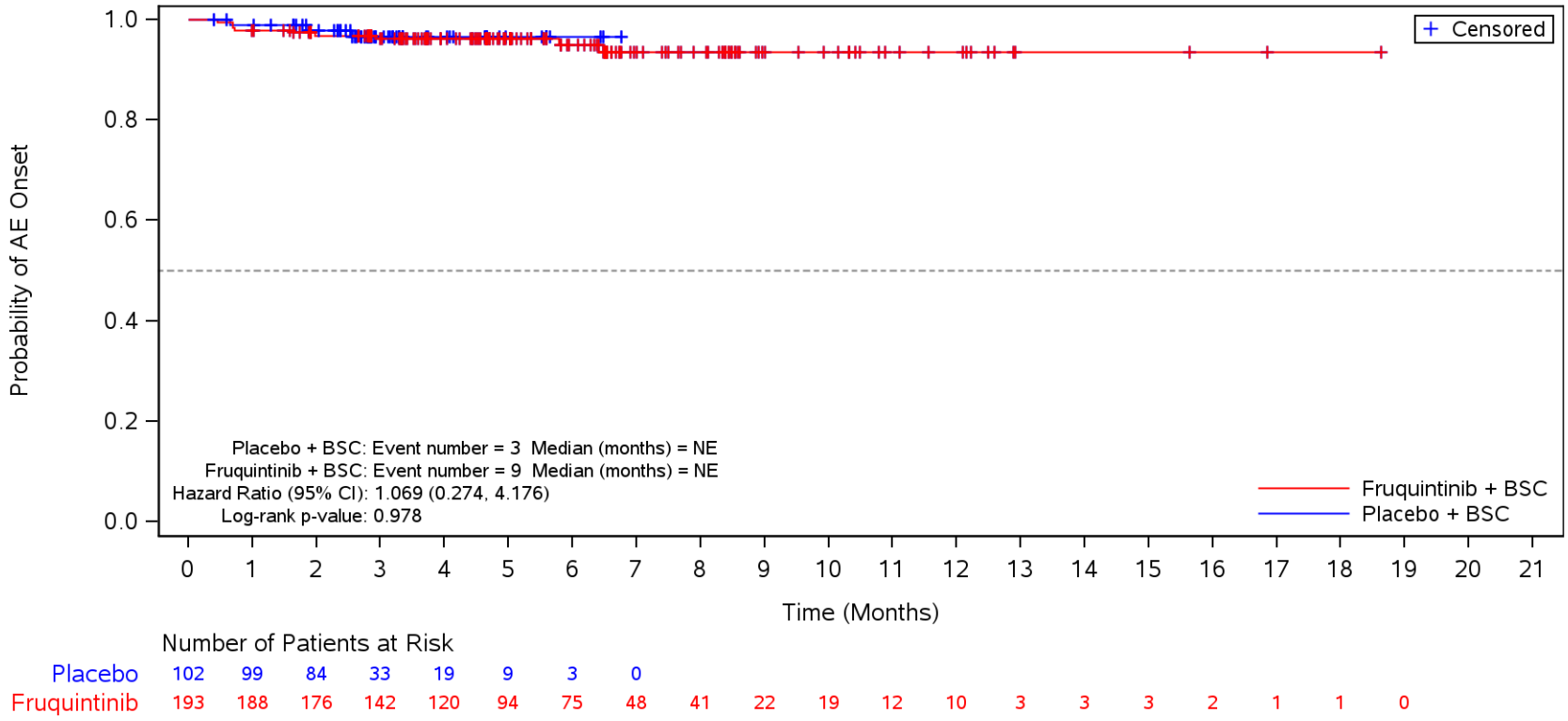
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
ECOG: 0



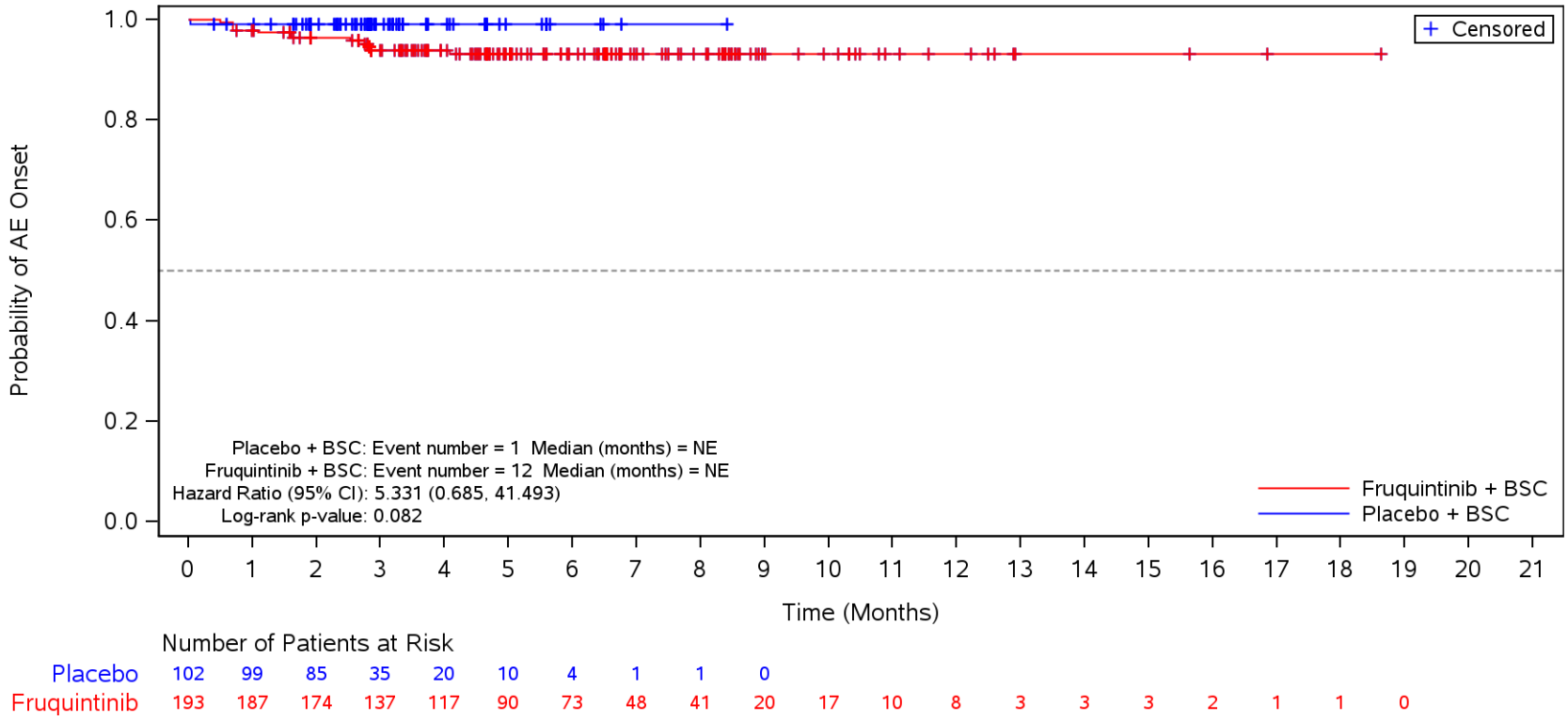
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
ECOG: 0



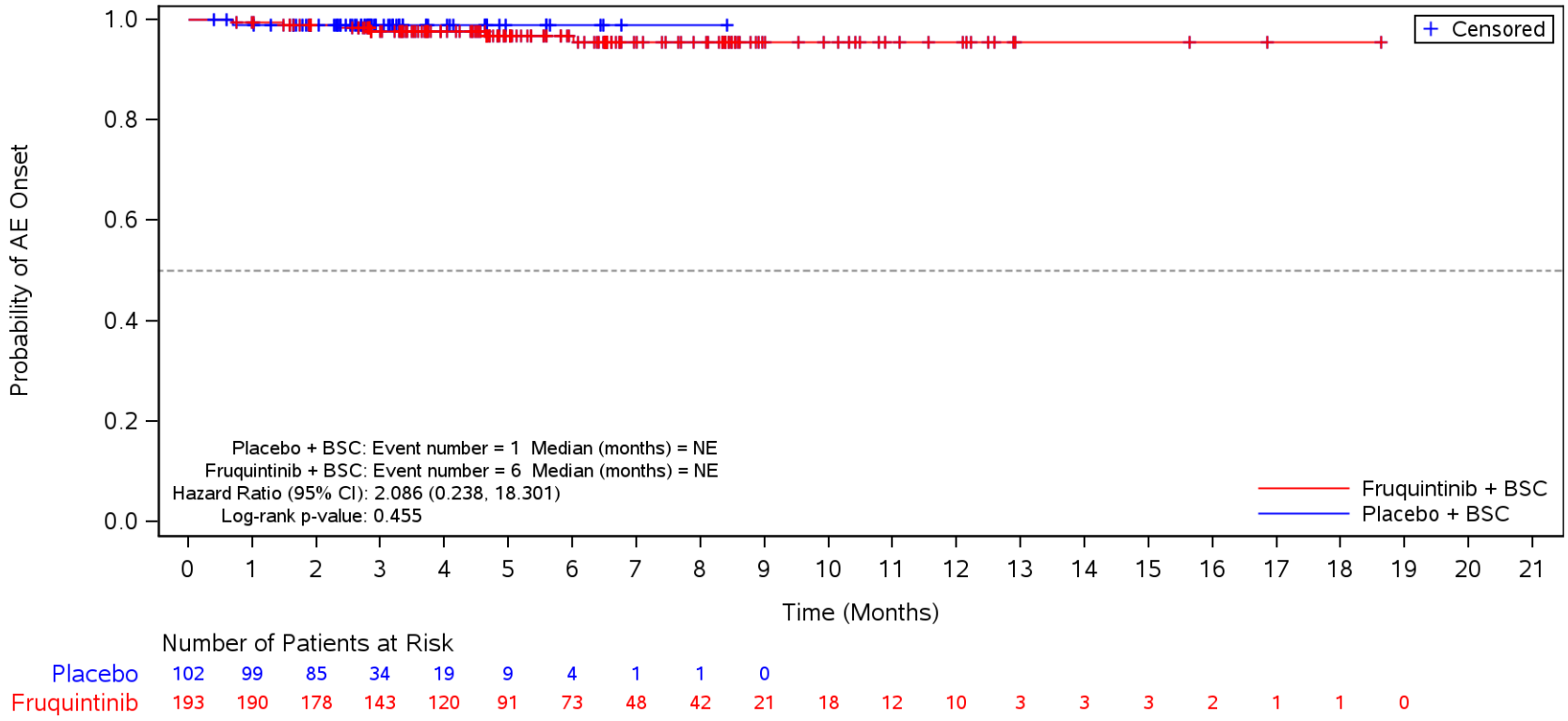
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
ECOG: 0



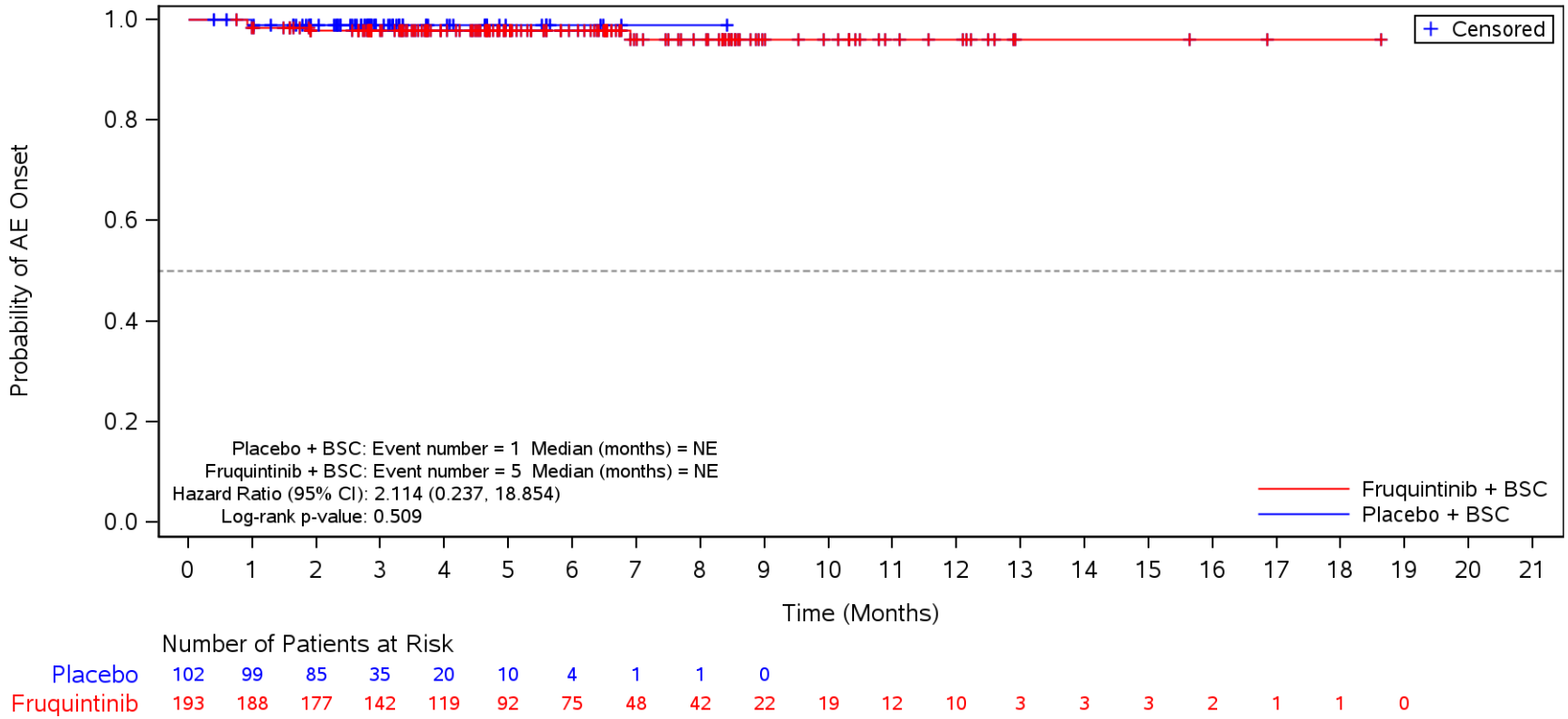
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
ECOG: 0



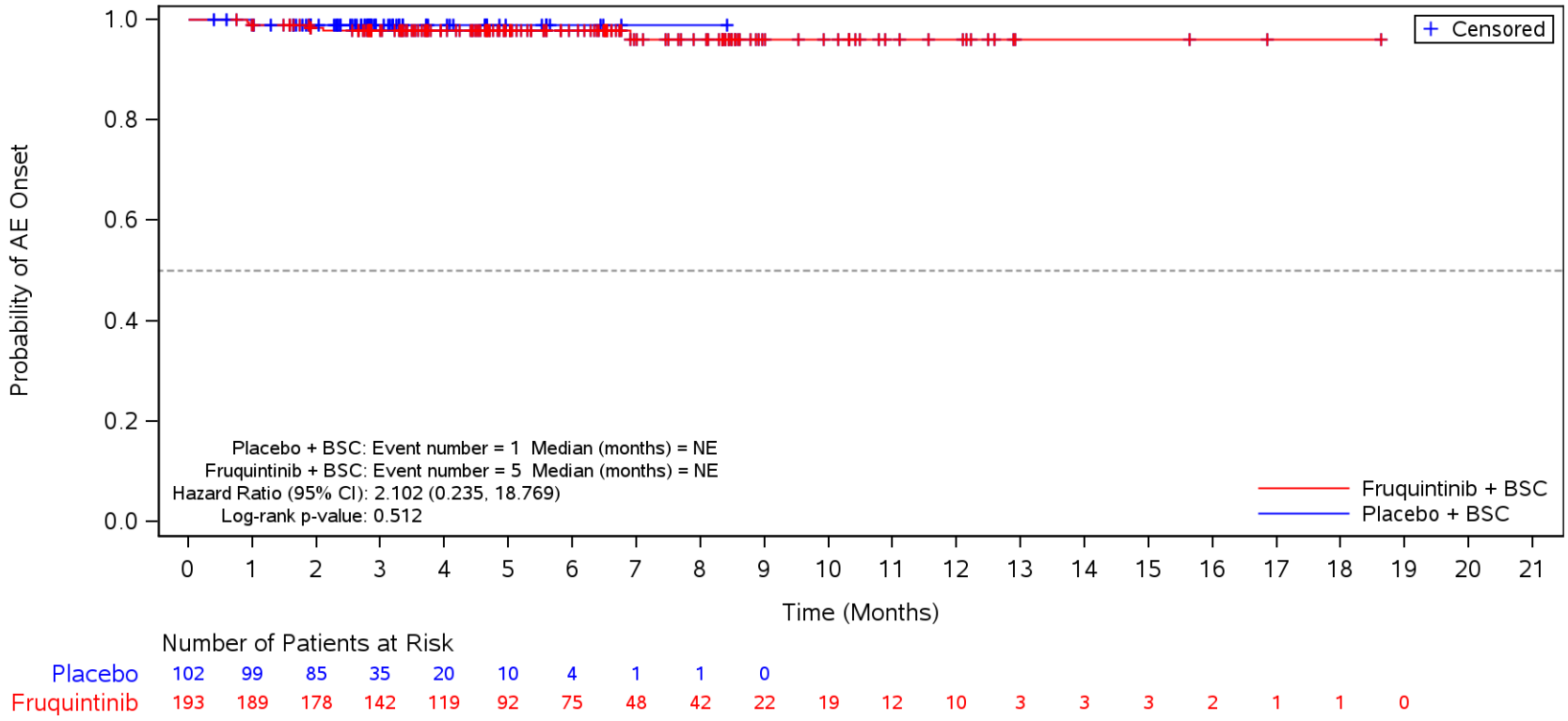
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
ECOG: 0



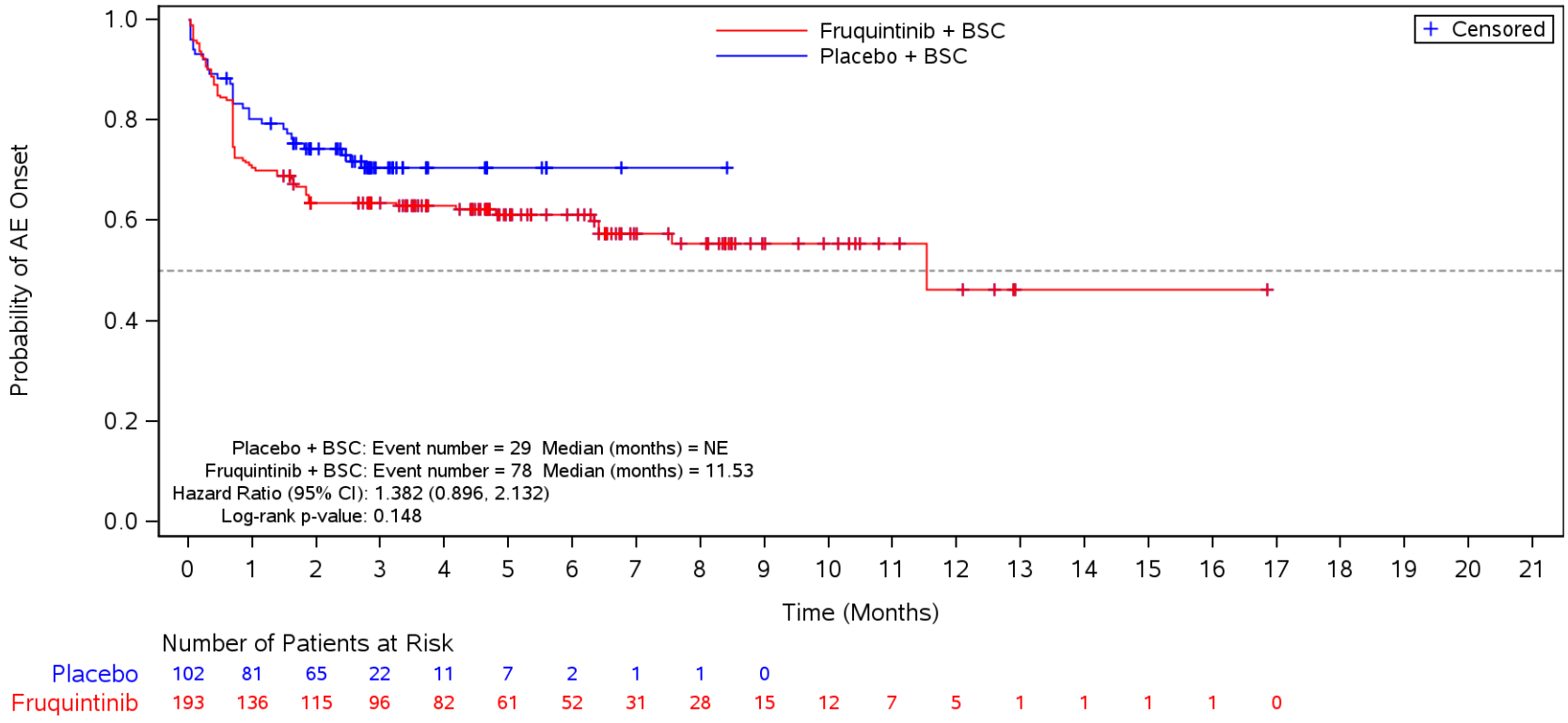
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
ECOG: 0



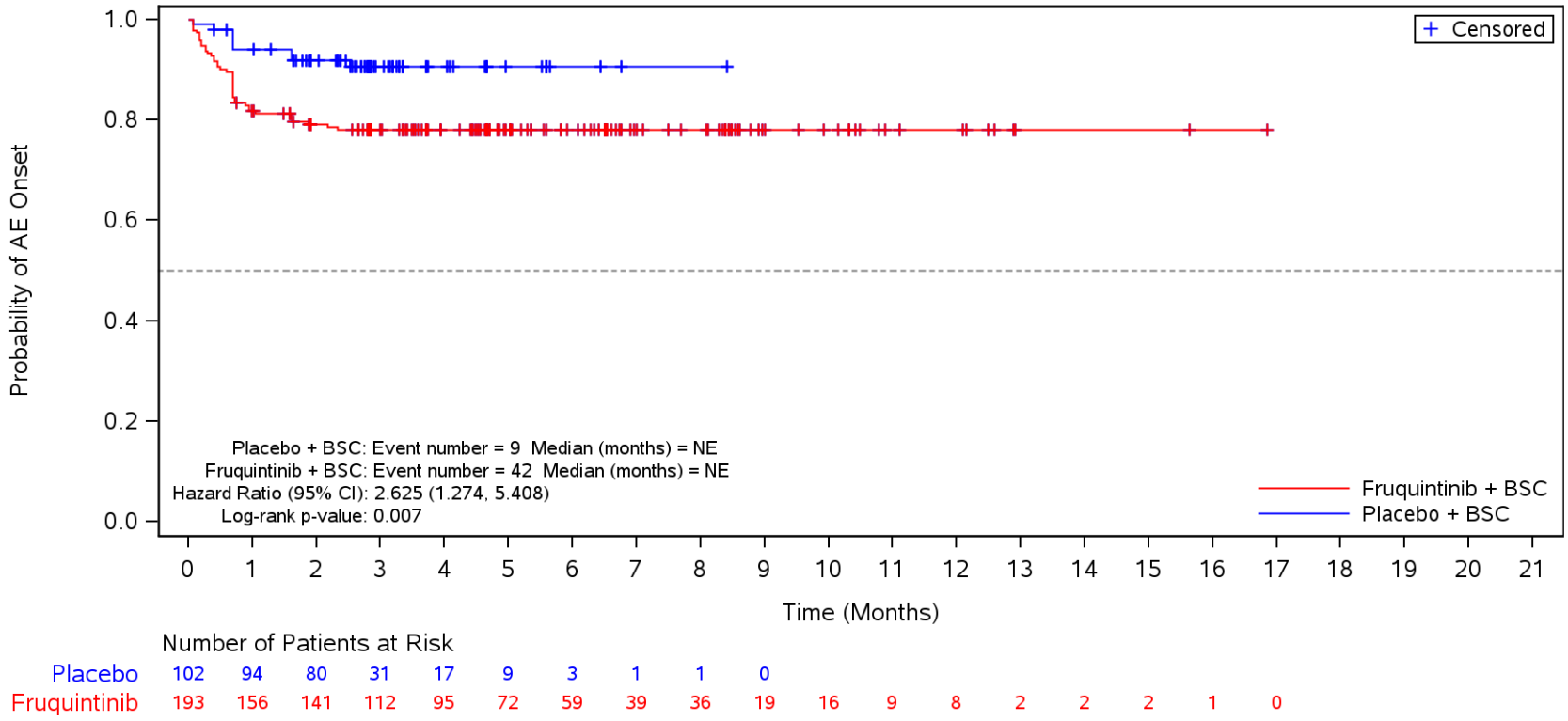
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
ECOG: 0



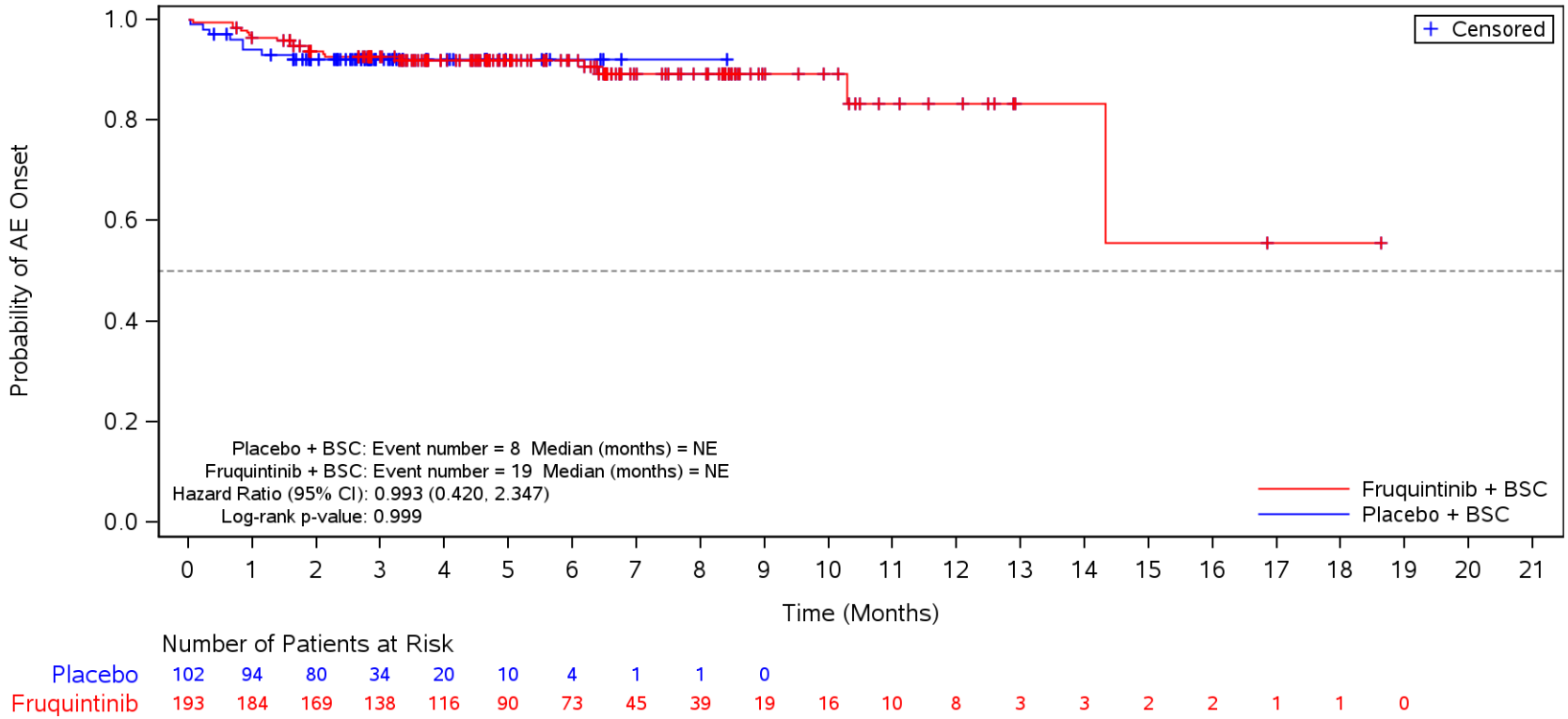
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
ECOG: 0



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
ECOG: 0

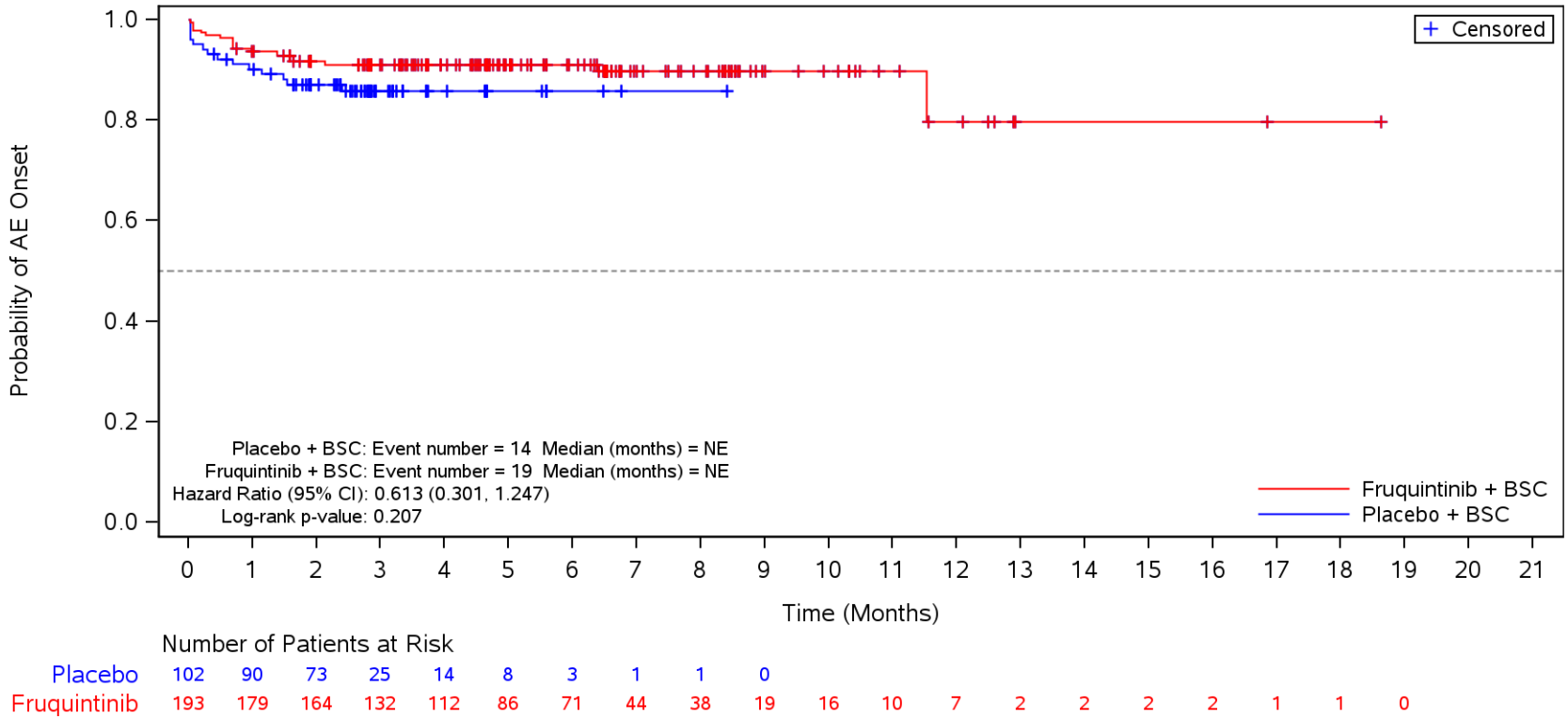


Number of Patients at Risk

Placebo	102	94	80	34	20	10	4	1	1	0										
Fruquintinib	193	184	169	138	116	90	73	45	39	19	16	10	8	3	3	2	2	1	1	0

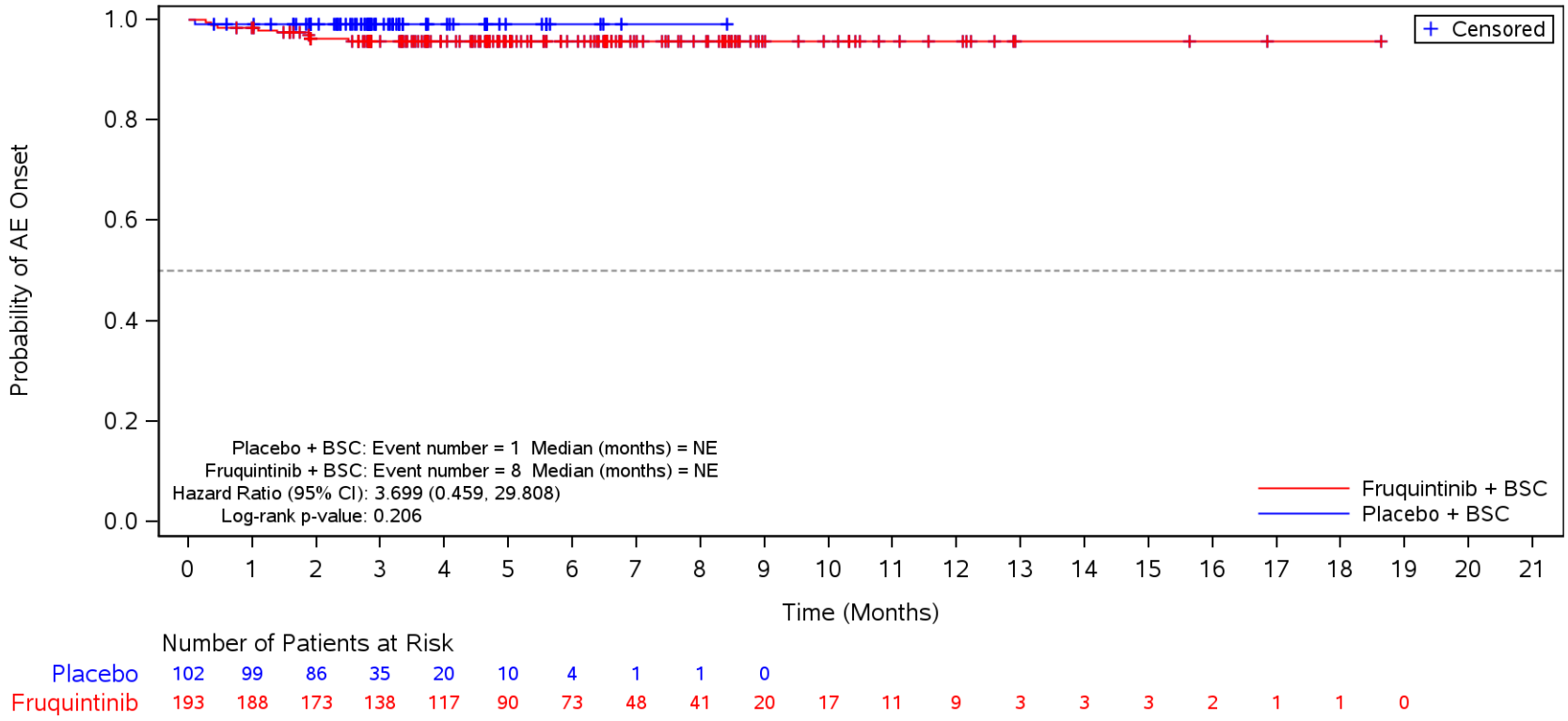
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
ECOG: 0



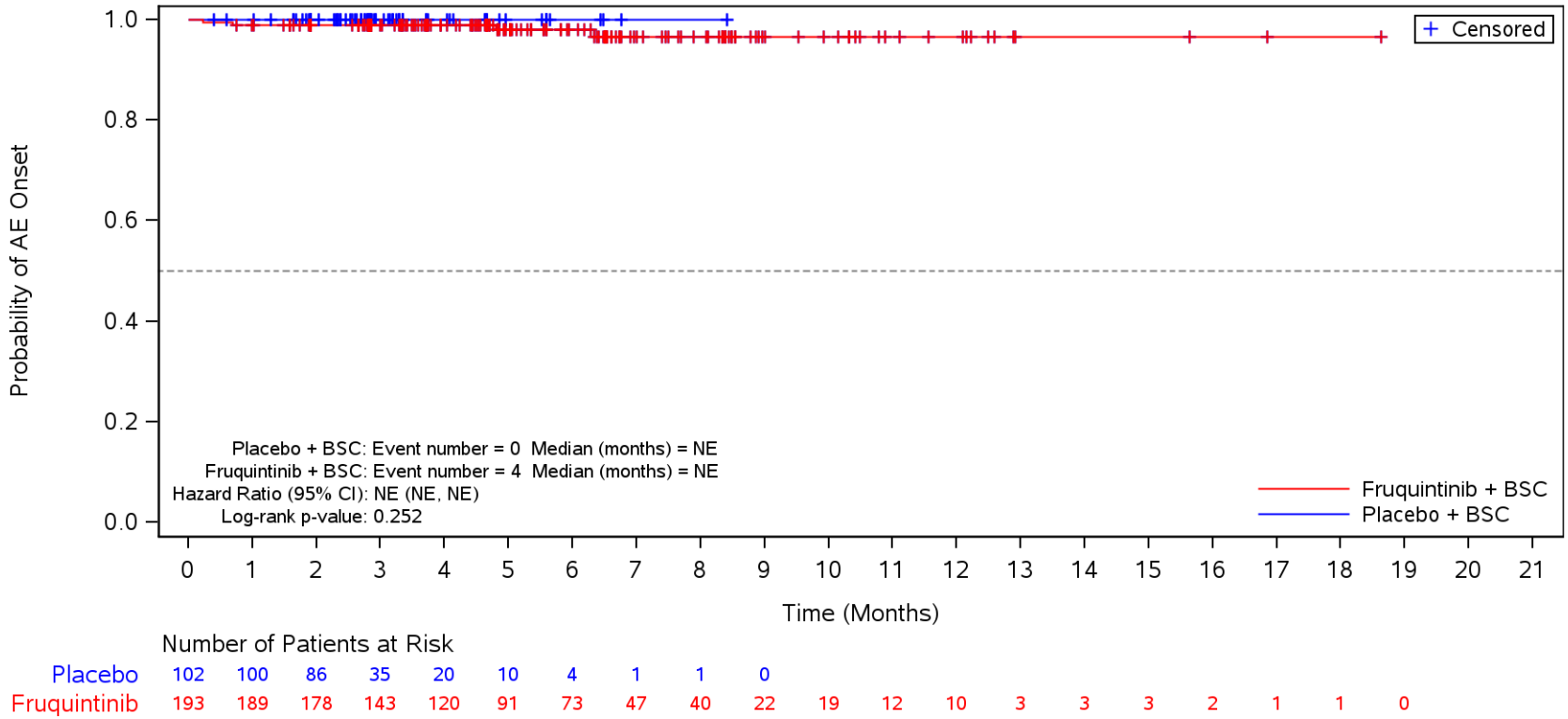
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
ECOG: 0



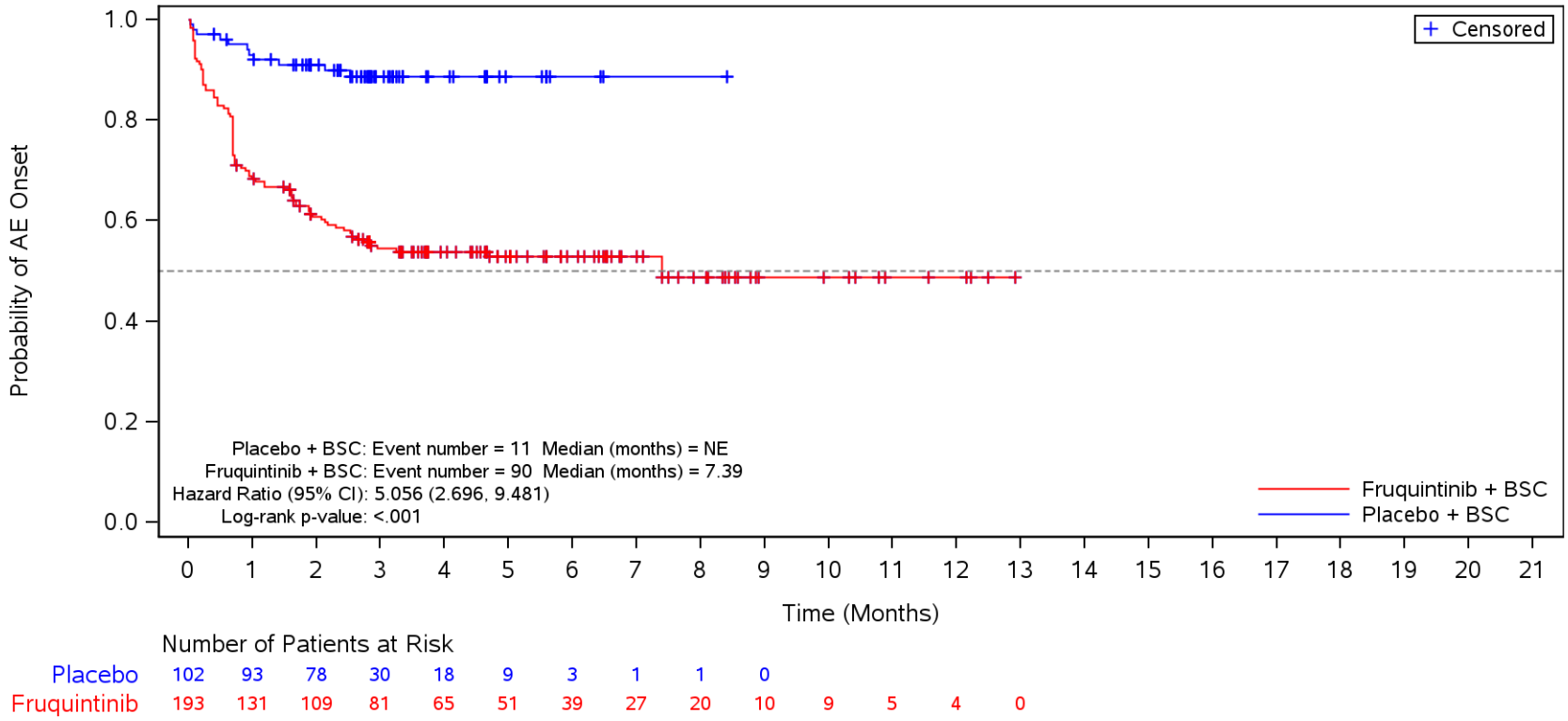
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
ECOG: 0



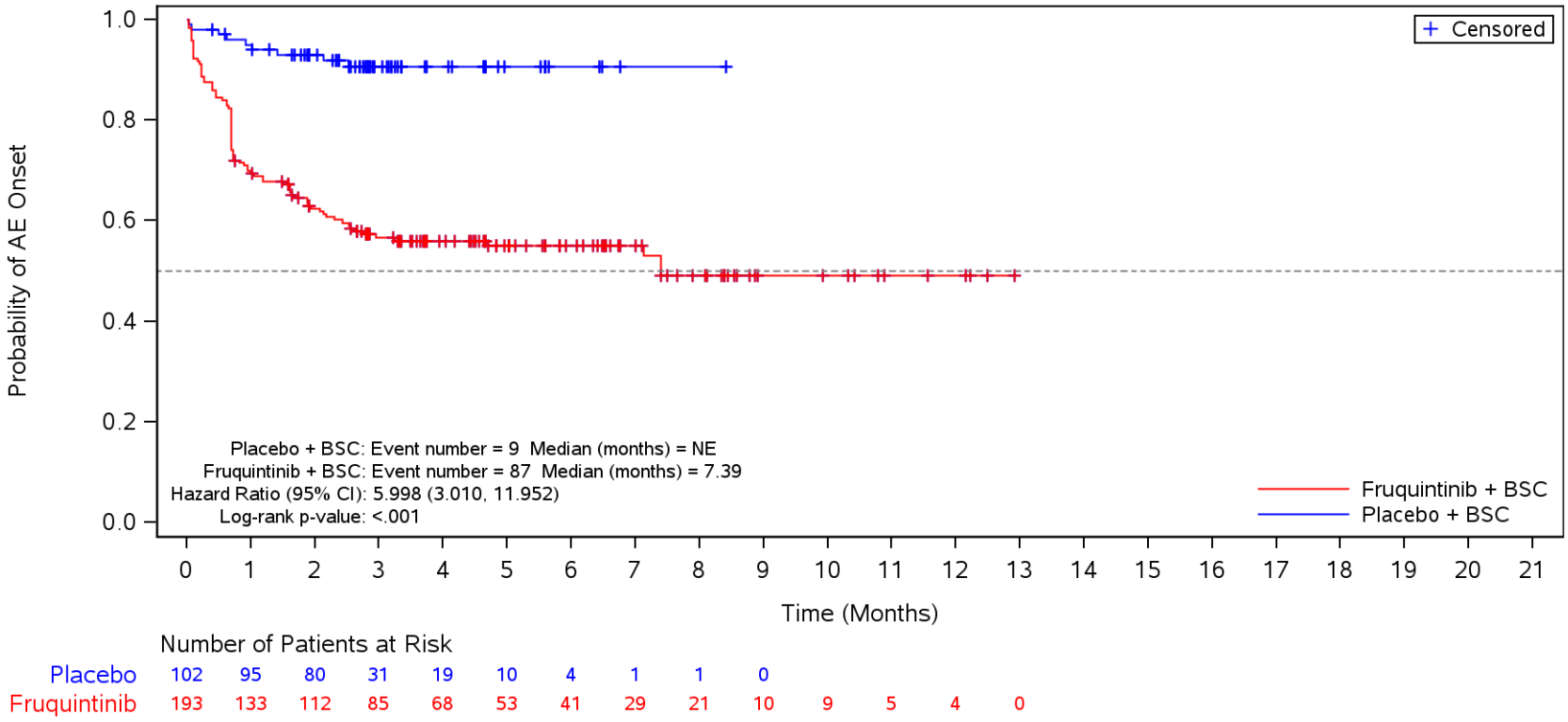
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Vascular disorders**
ECOG: 0



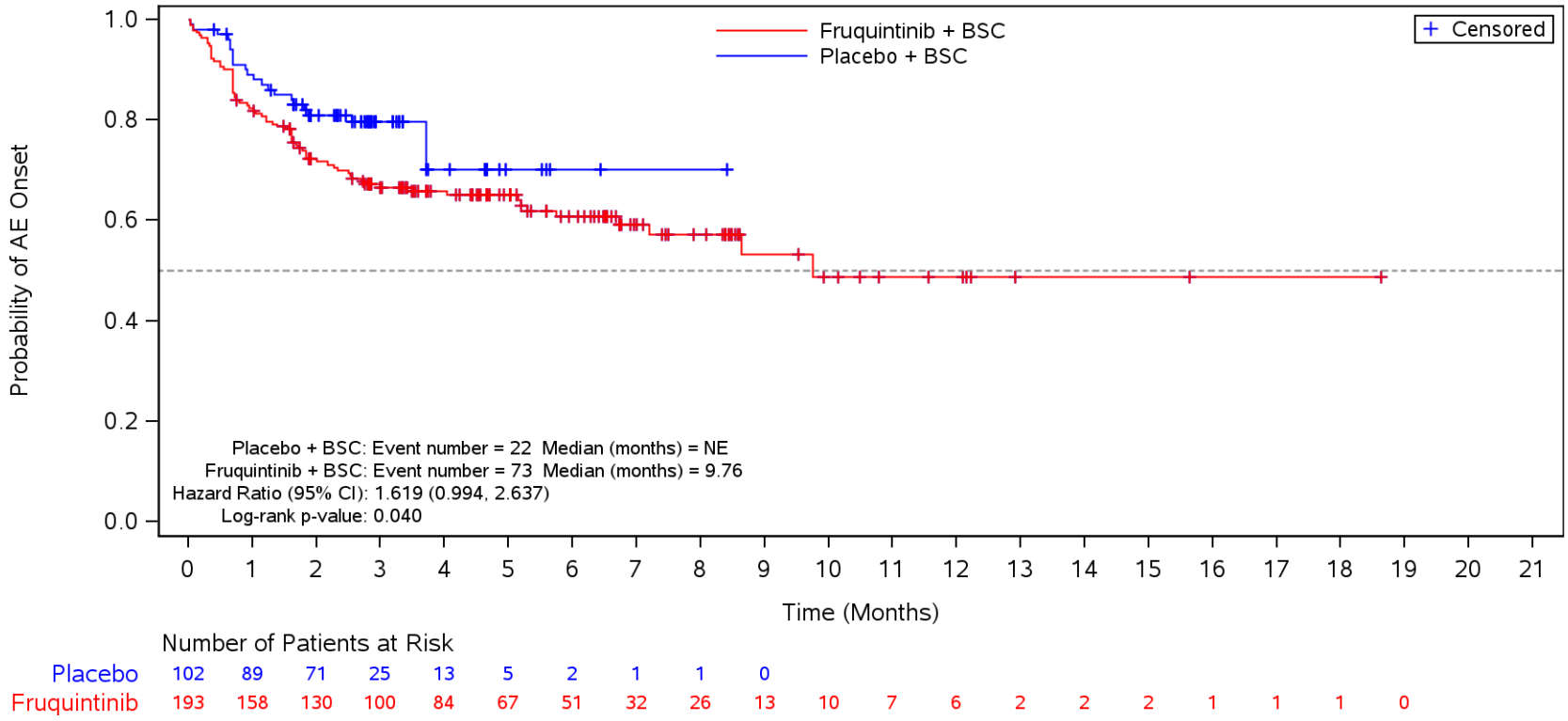
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
ECOG: 0



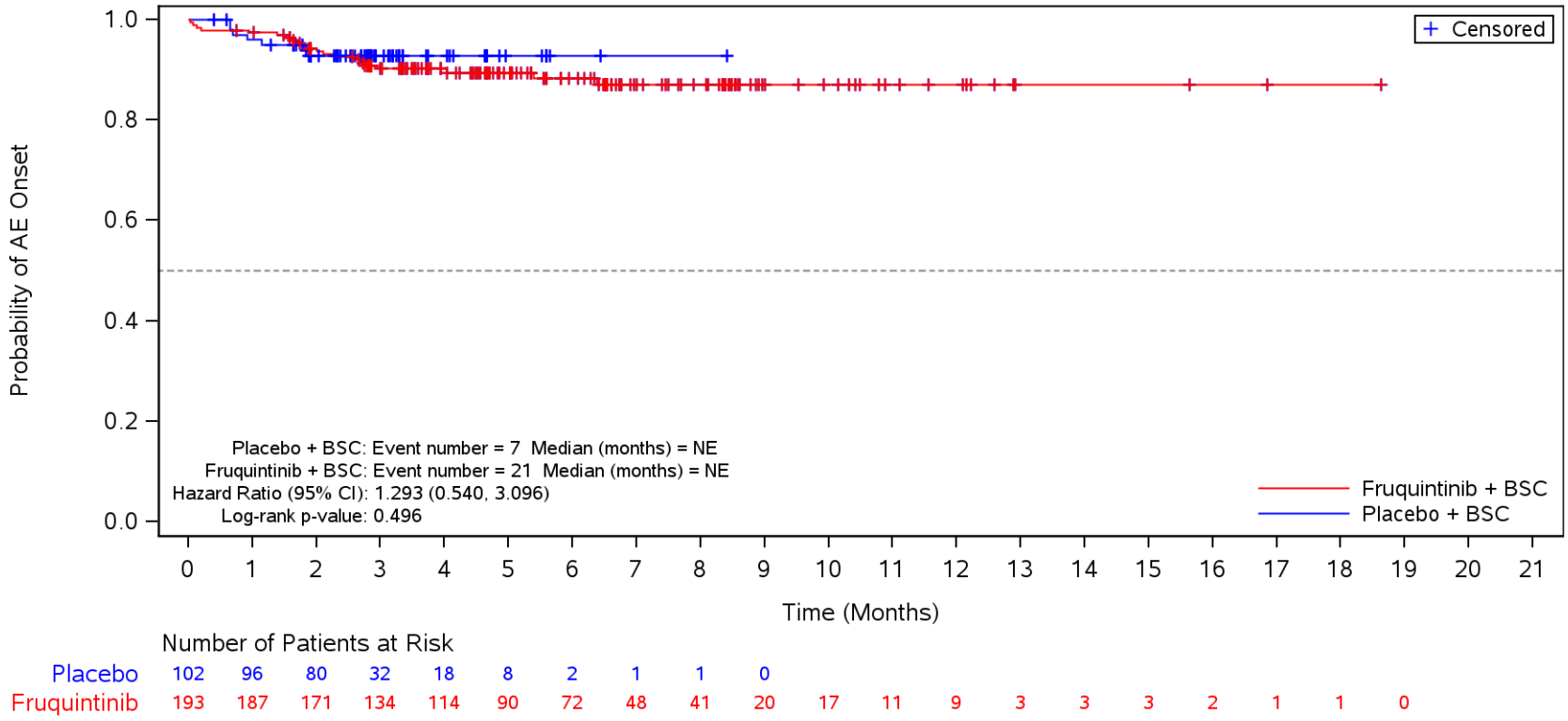
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
ECOG: 0



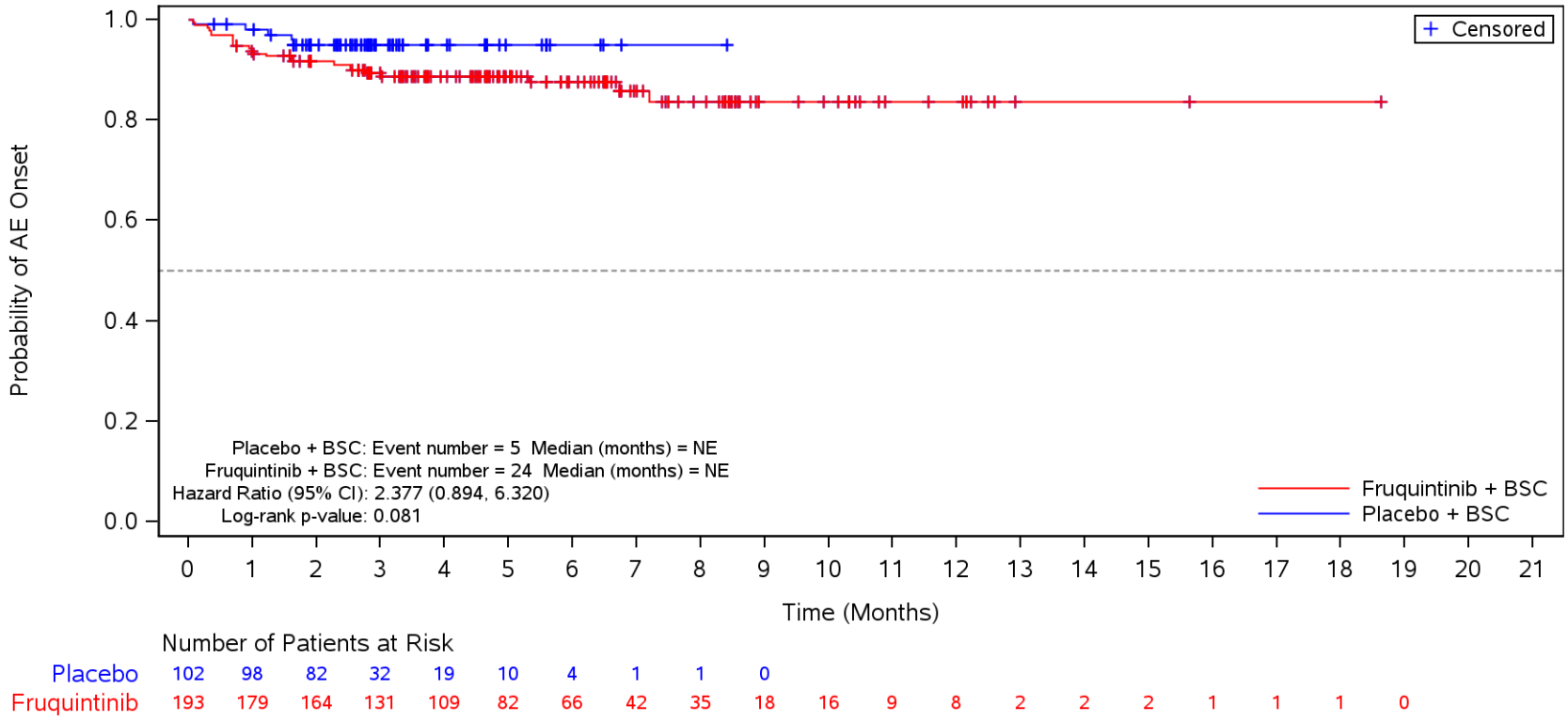
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
ECOG: 0



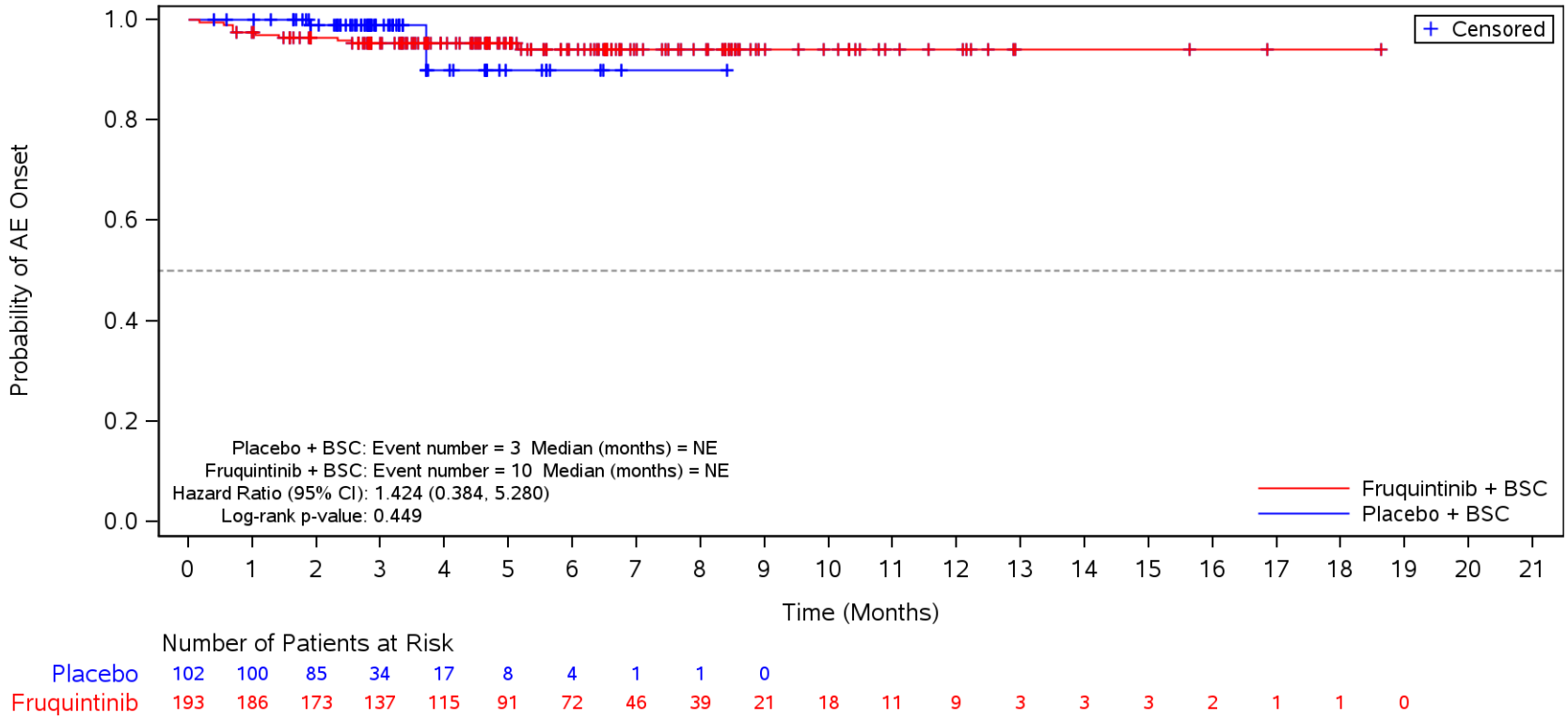
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
ECOG: 0



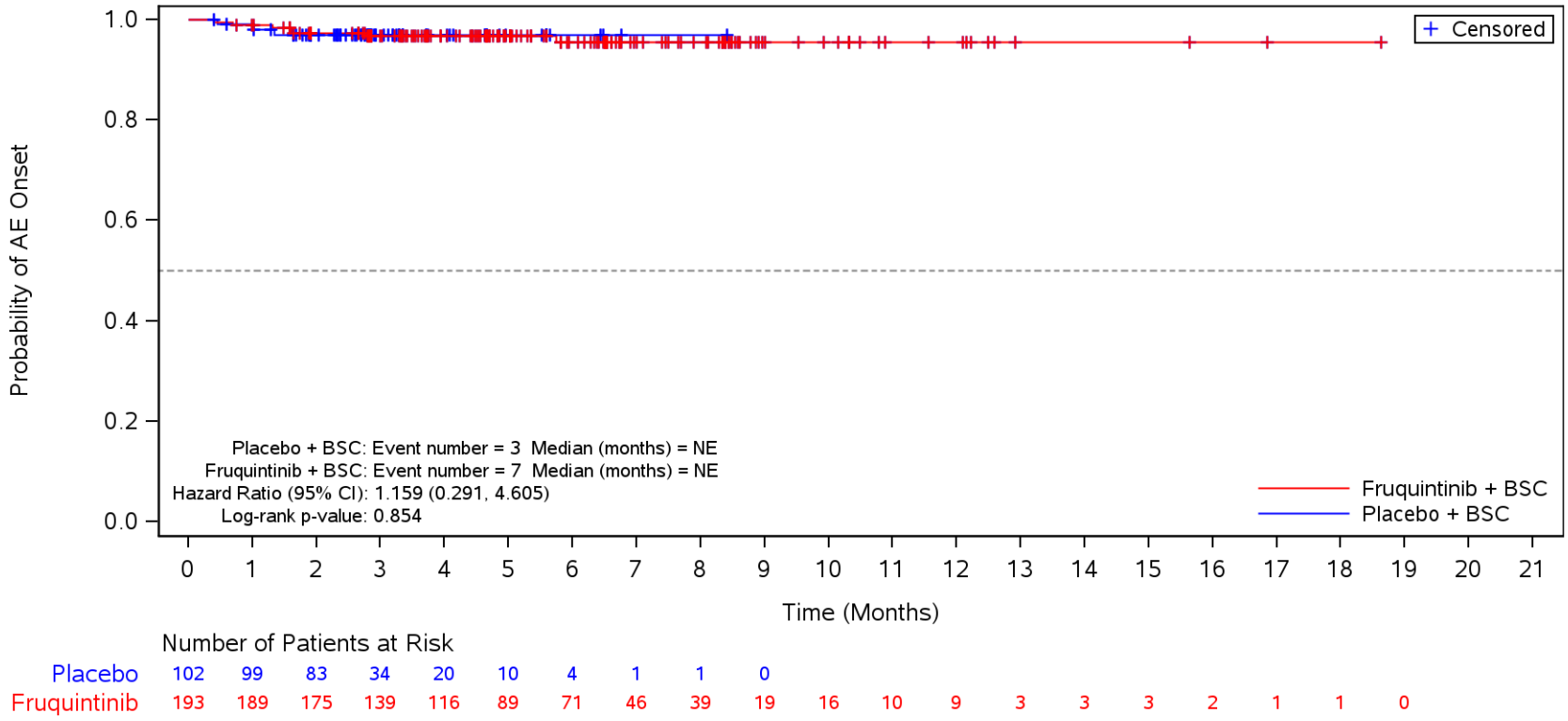
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
ECOG: 0



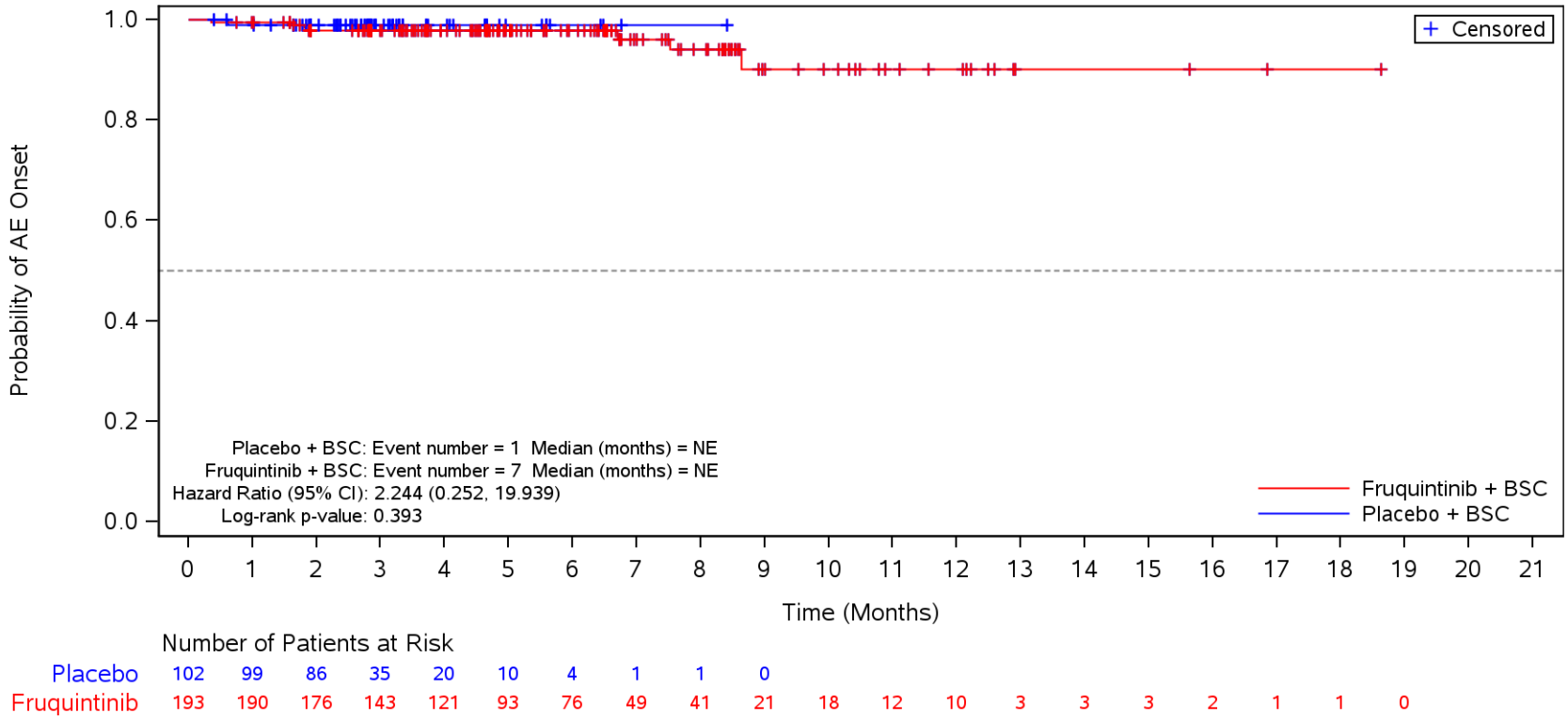
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
ECOG: 0



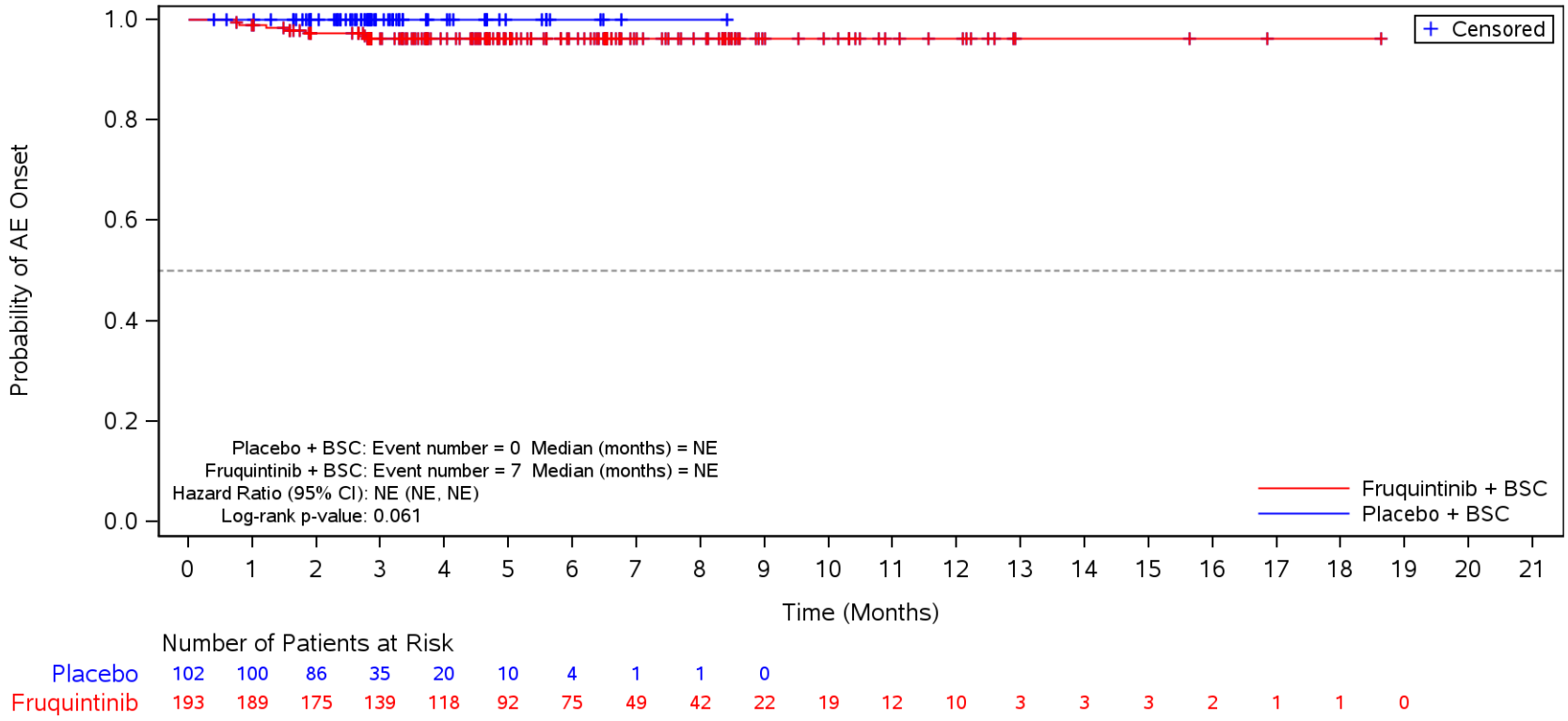
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
ECOG: 0



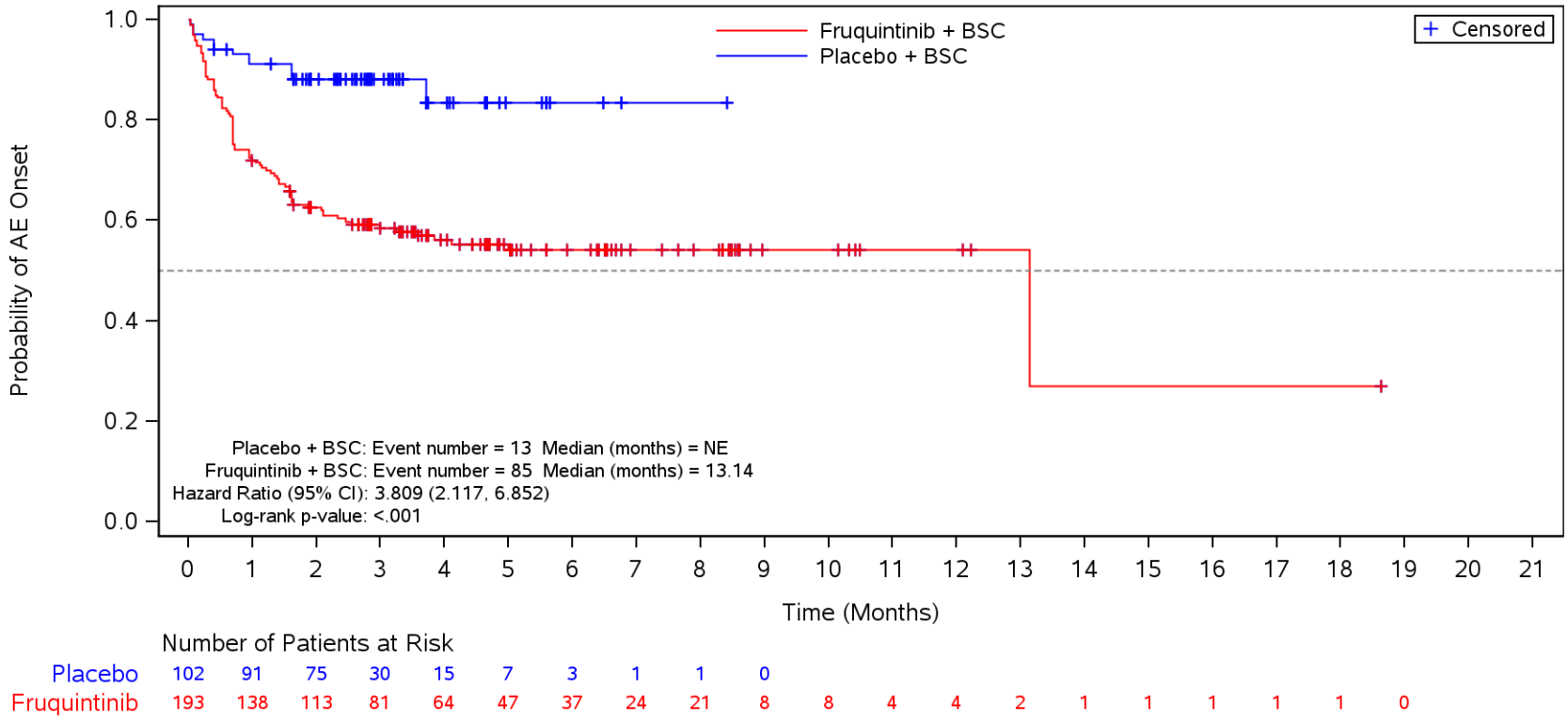
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
ECOG: 0



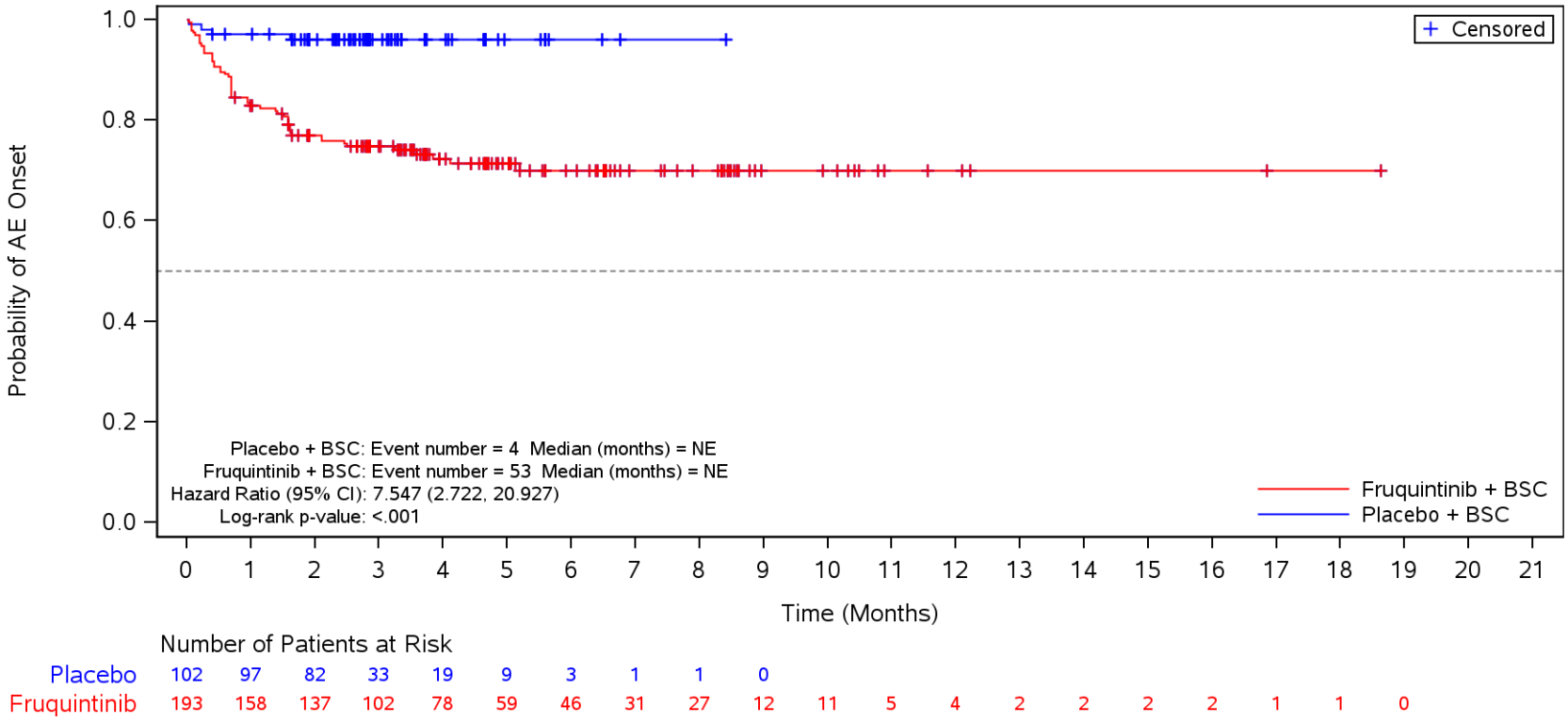
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
ECOG: 0



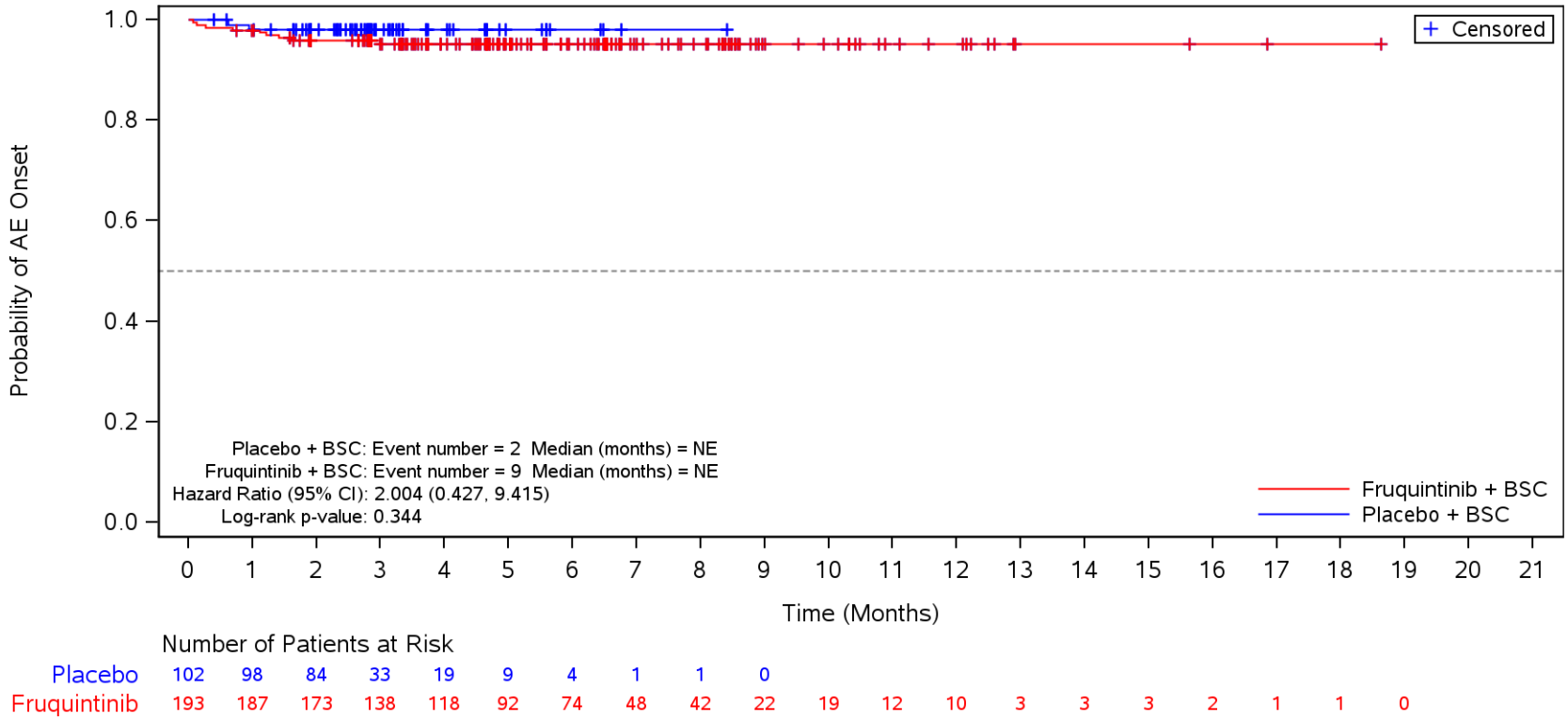
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
ECOG: 0



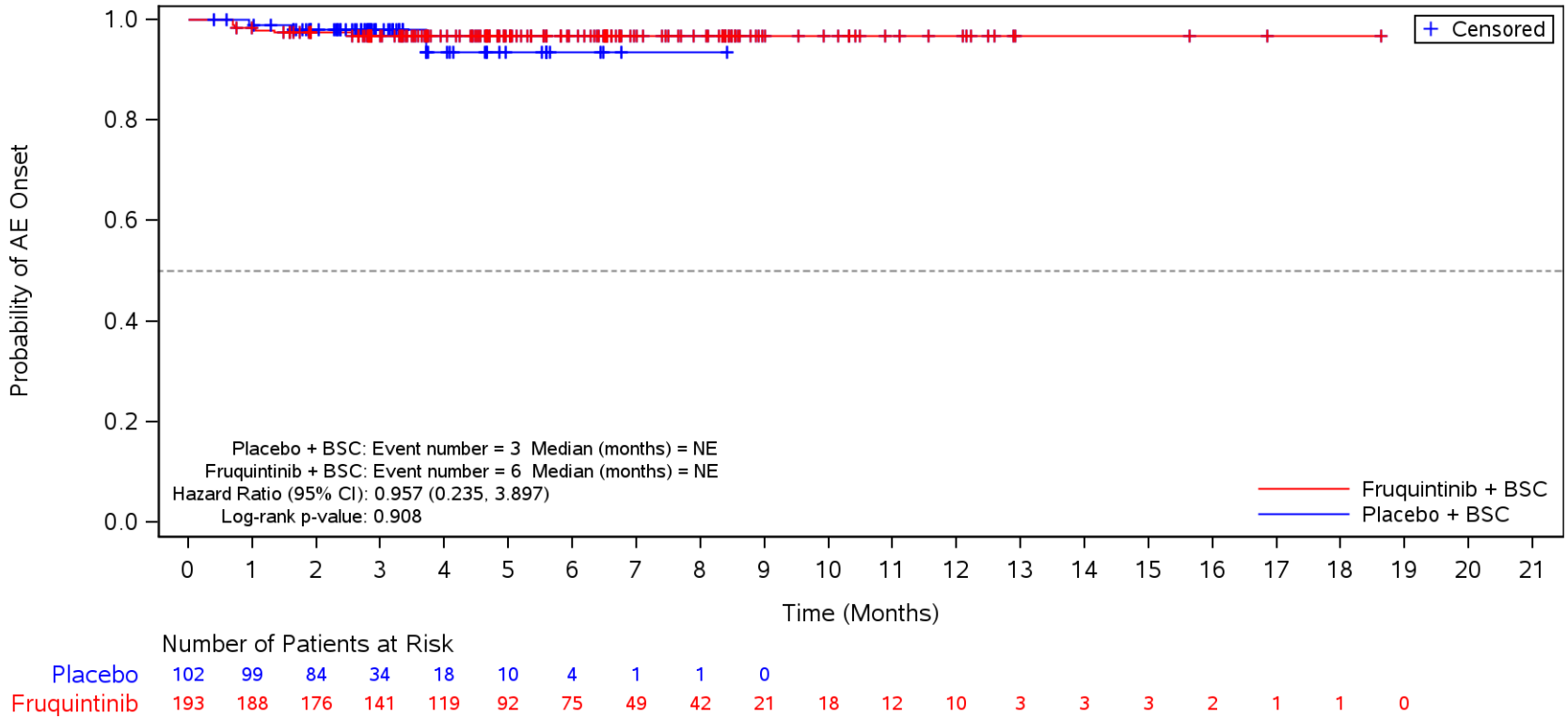
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
ECOG: 0



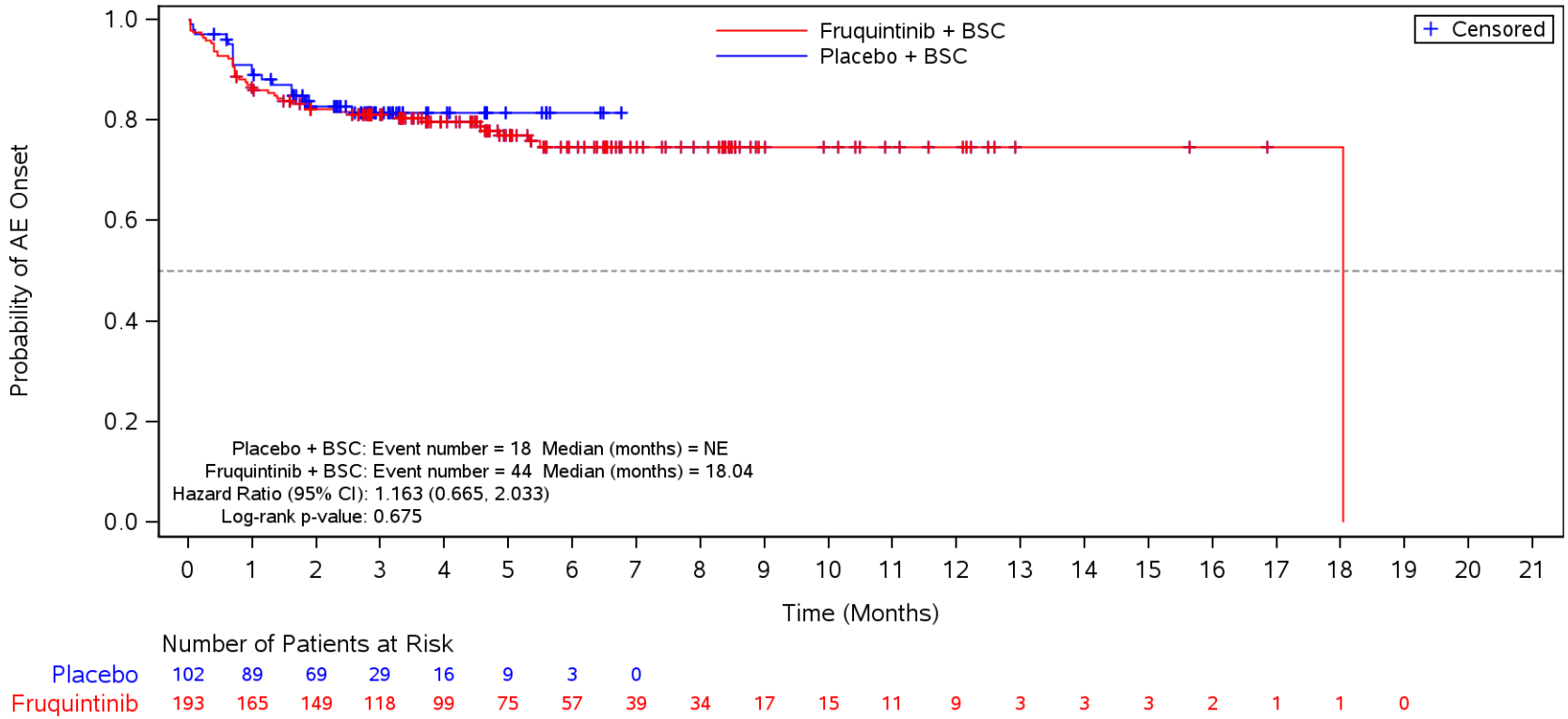
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
ECOG: 0



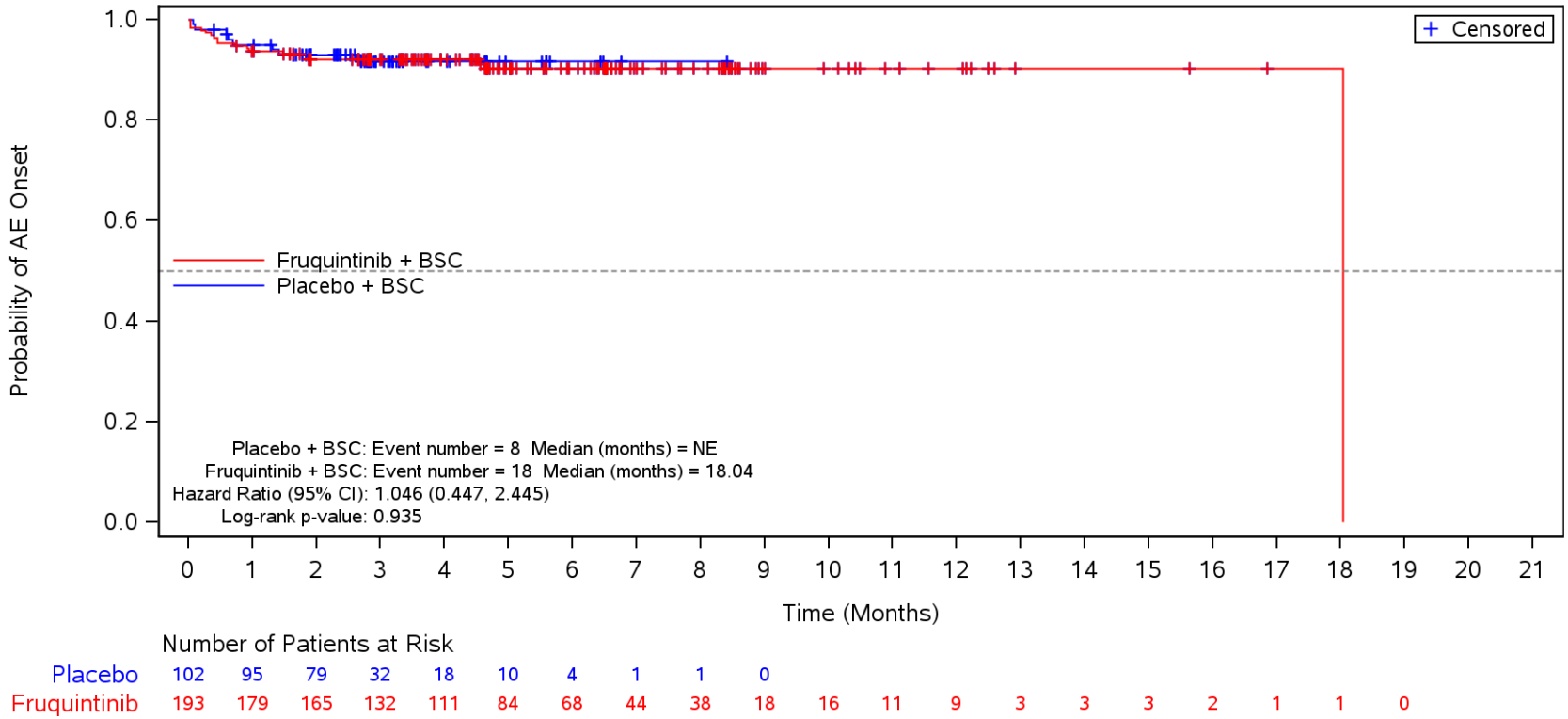
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Nervous system disorders**
ECOG: 0



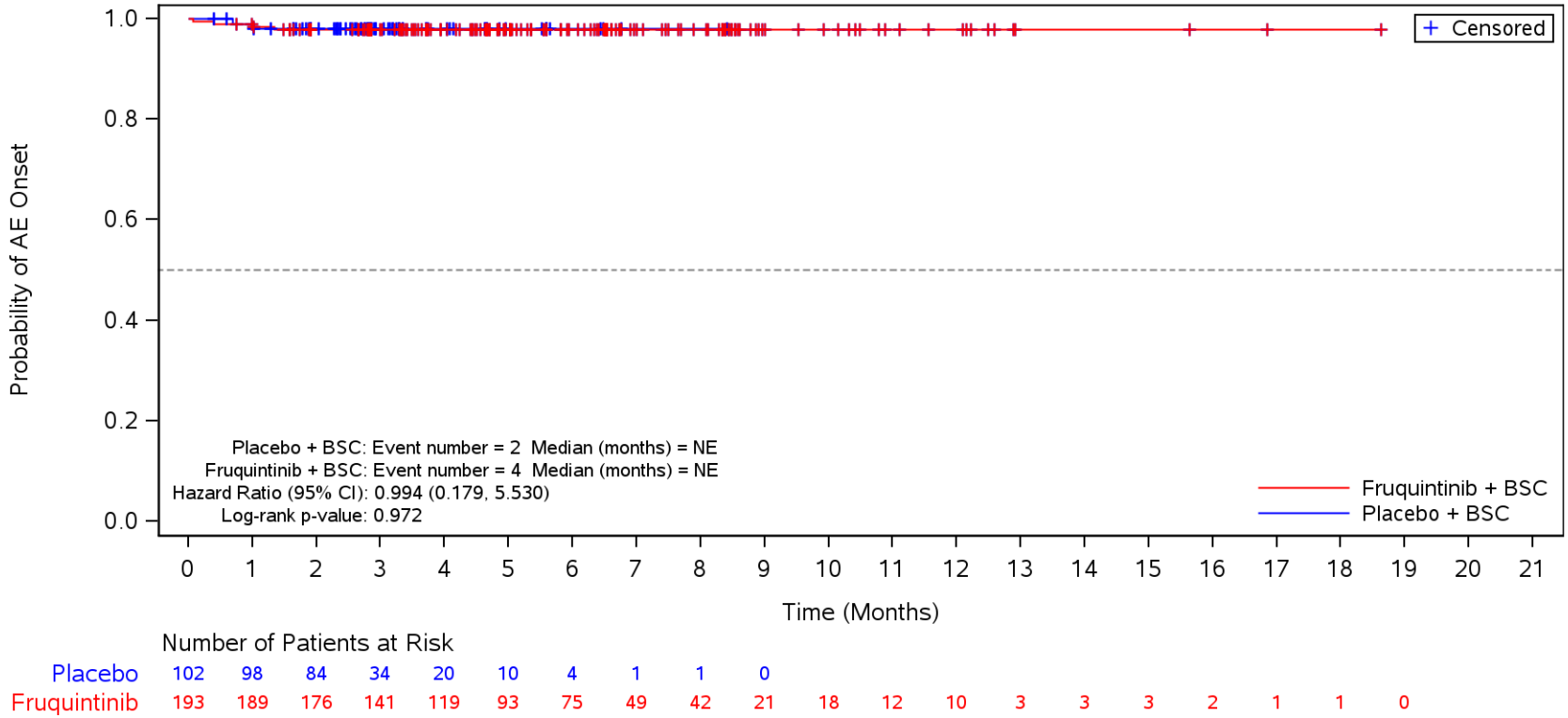
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
ECOG: 0



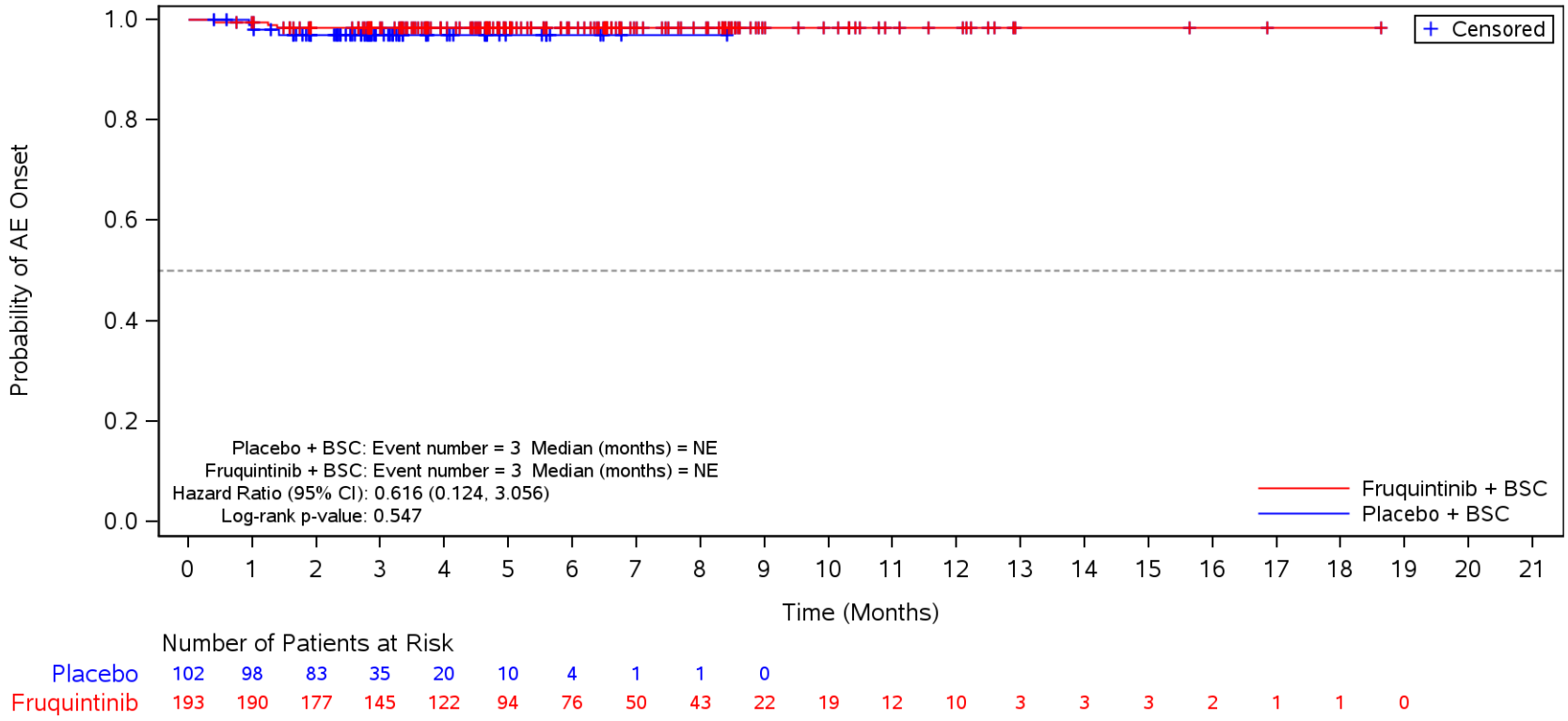
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
ECOG: 0



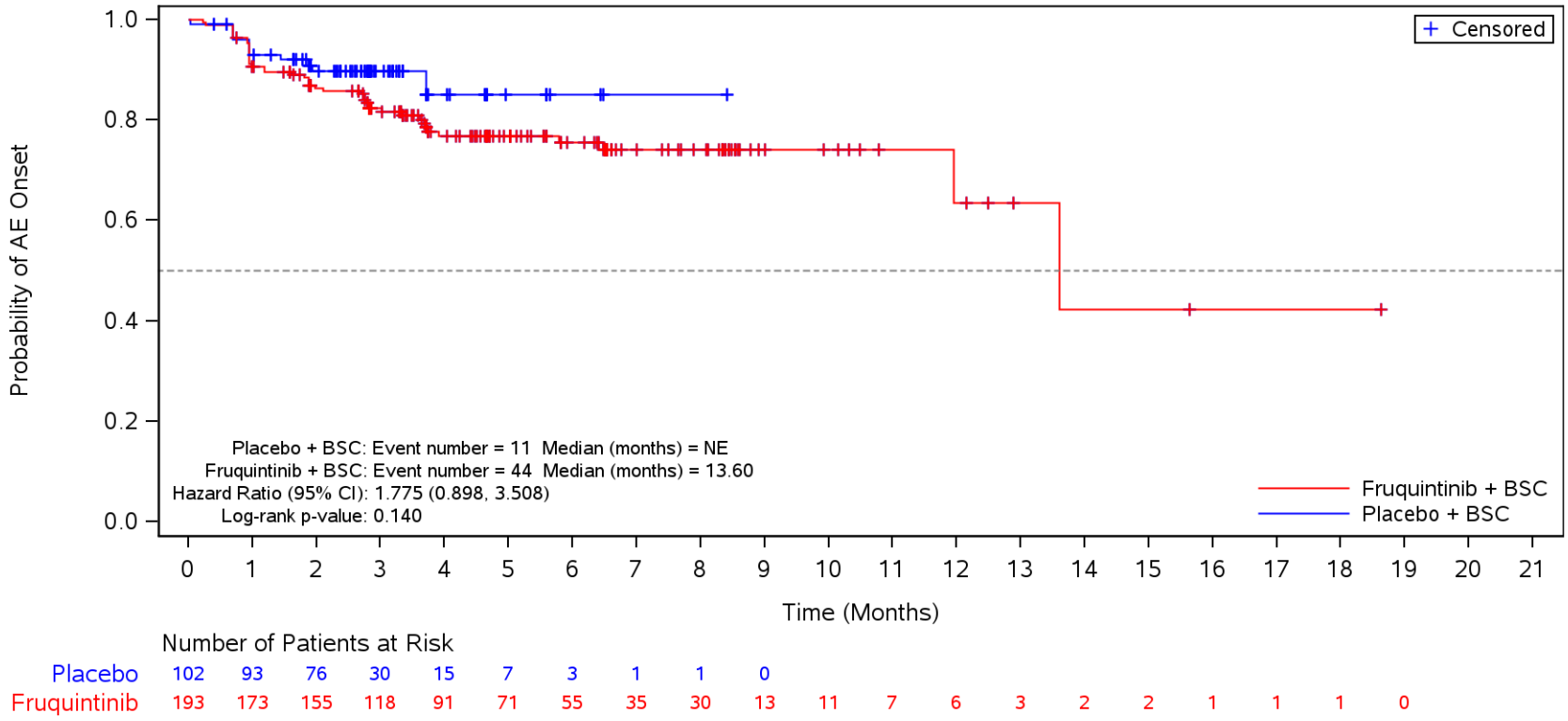
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
ECOG: 0



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
ECOG: 0

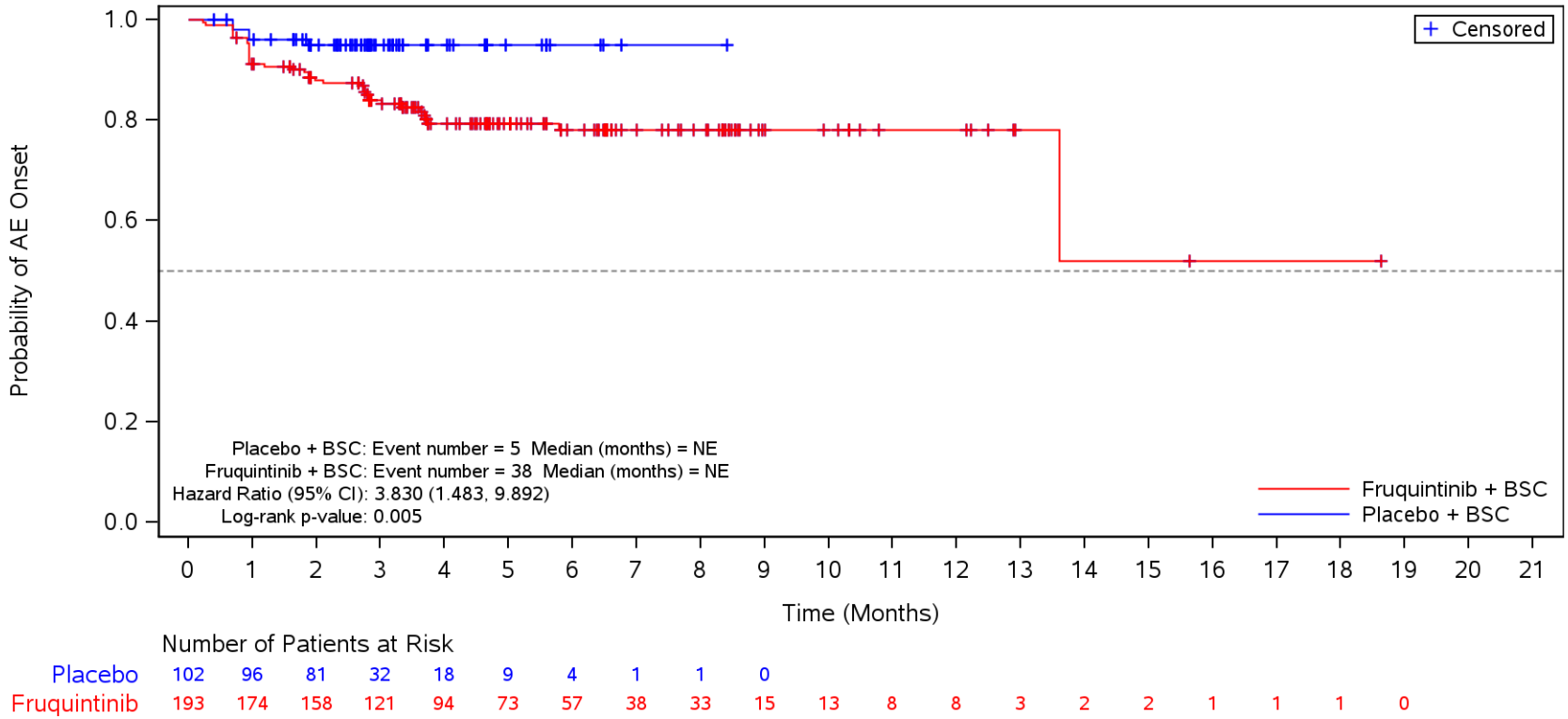


Number of Patients at Risk

Placebo	102	93	76	30	15	7	3	1	1	0										
Fruquintinib	193	173	155	118	91	71	55	35	30	13	11	7	6	3	2	2	1	1	1	0

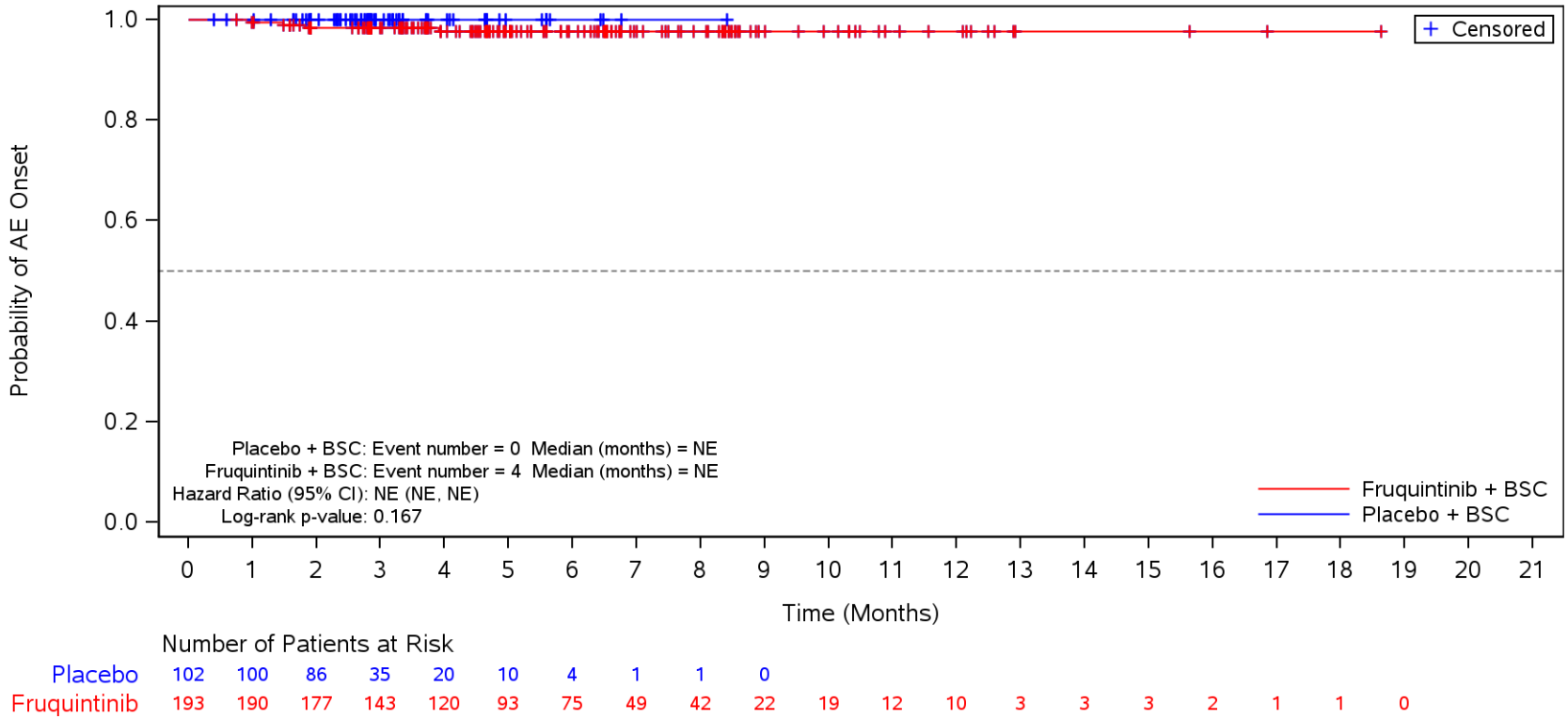
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
ECOG: 0



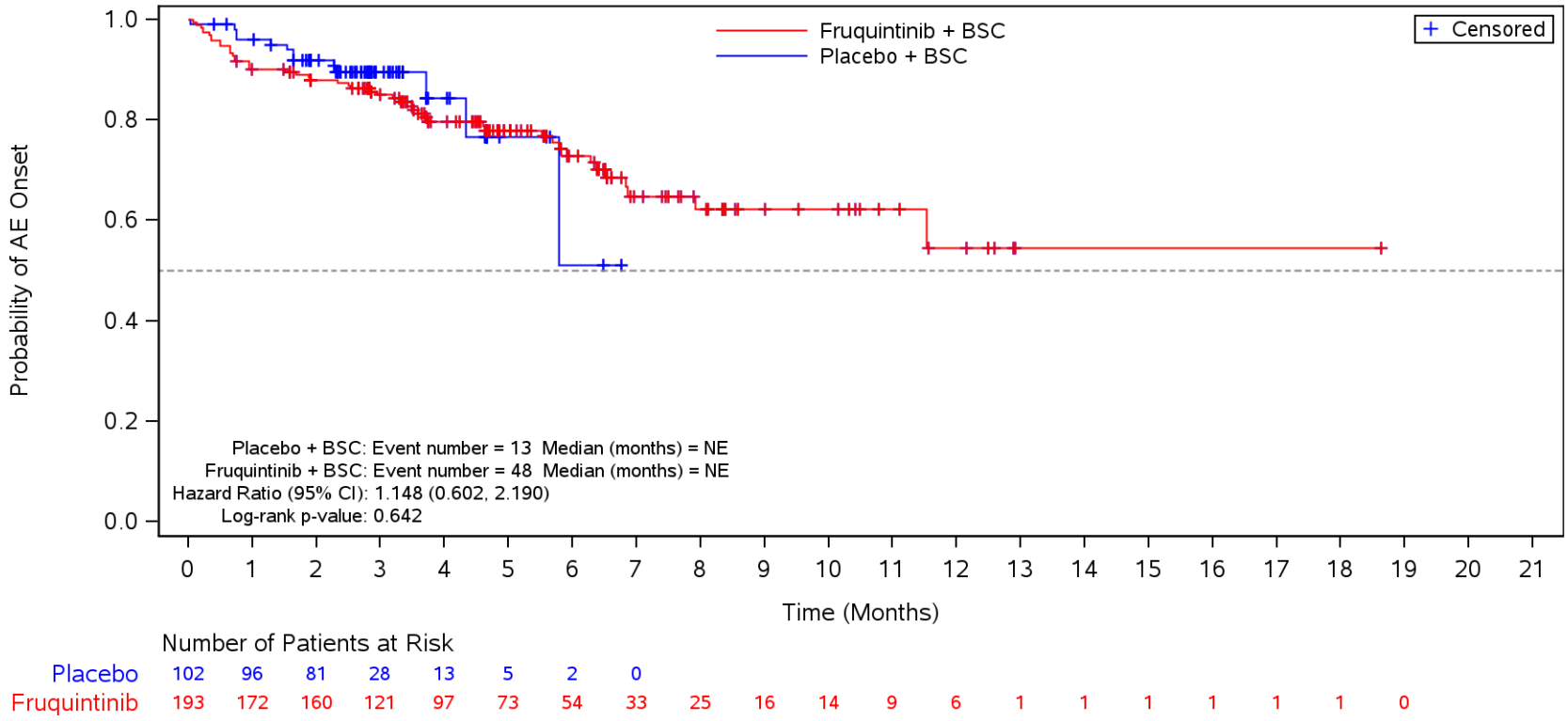
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**
ECOG: 0



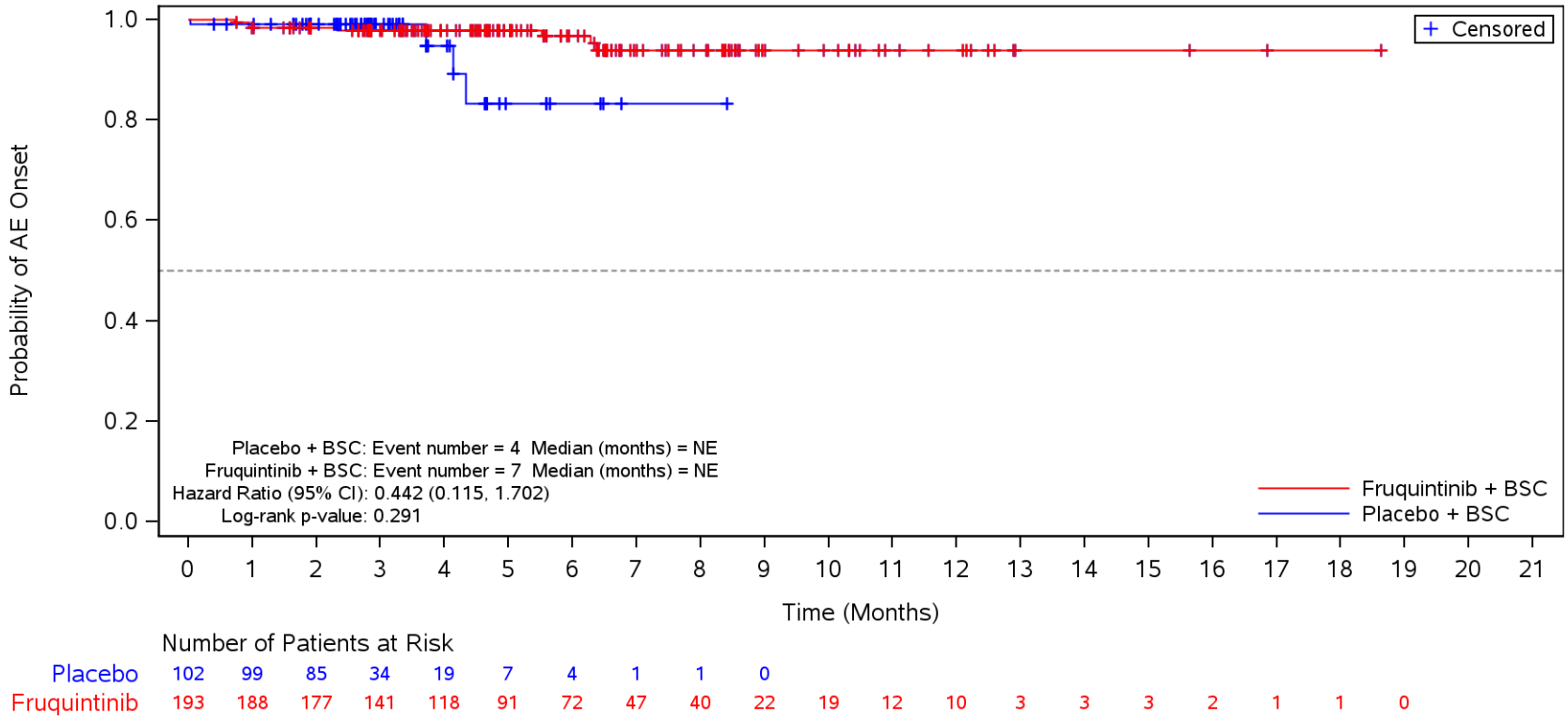
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Infections and infestations**
ECOG: 0



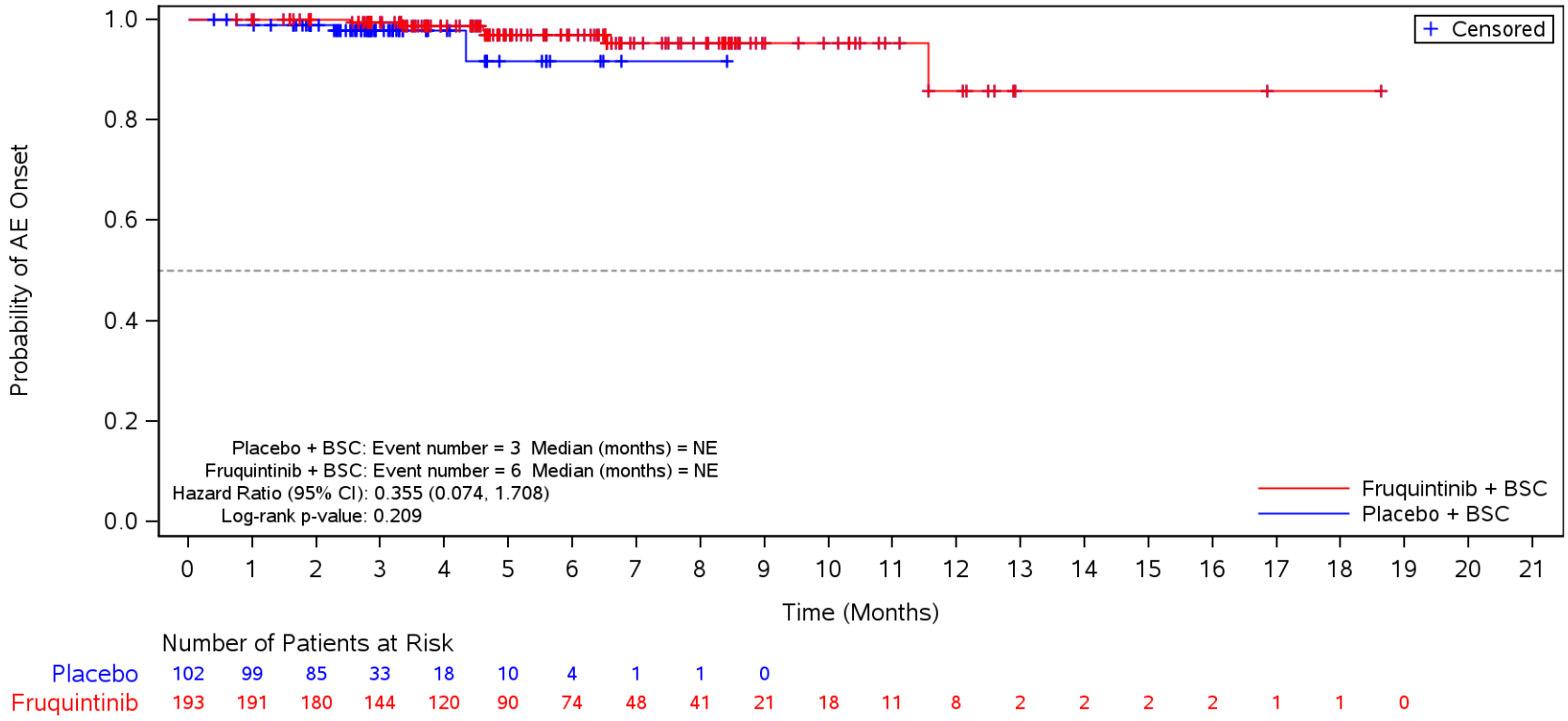
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
ECOG: 0



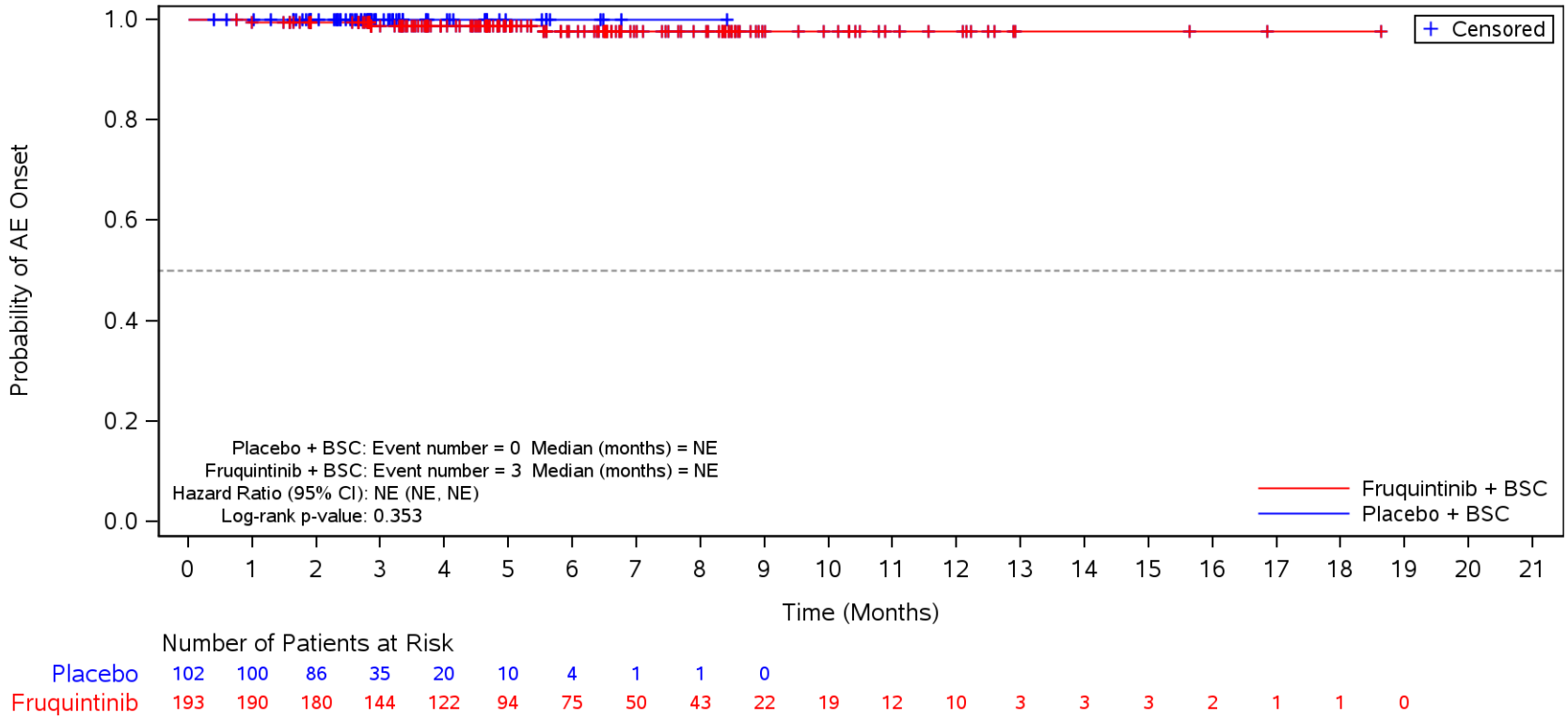
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**
ECOG: 0



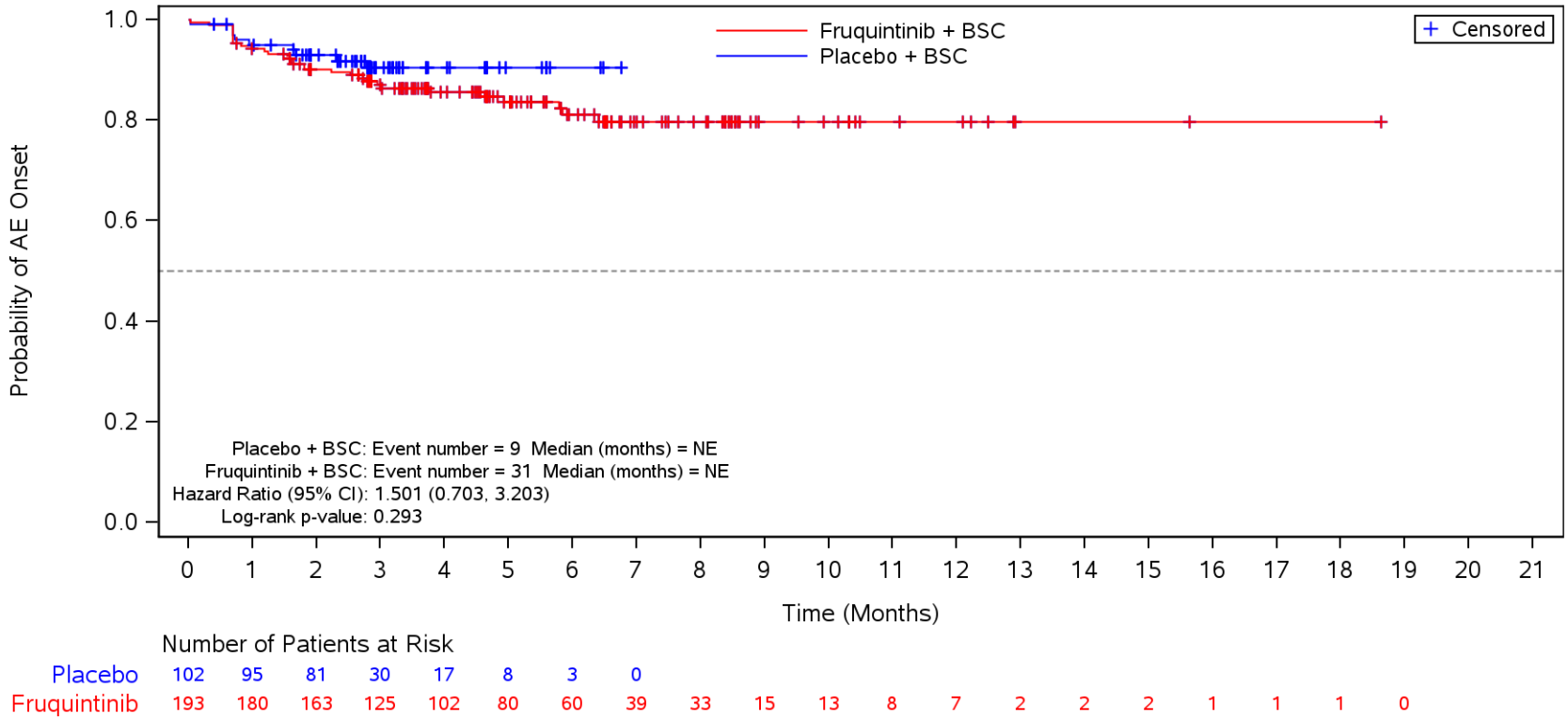
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**
ECOG: 0



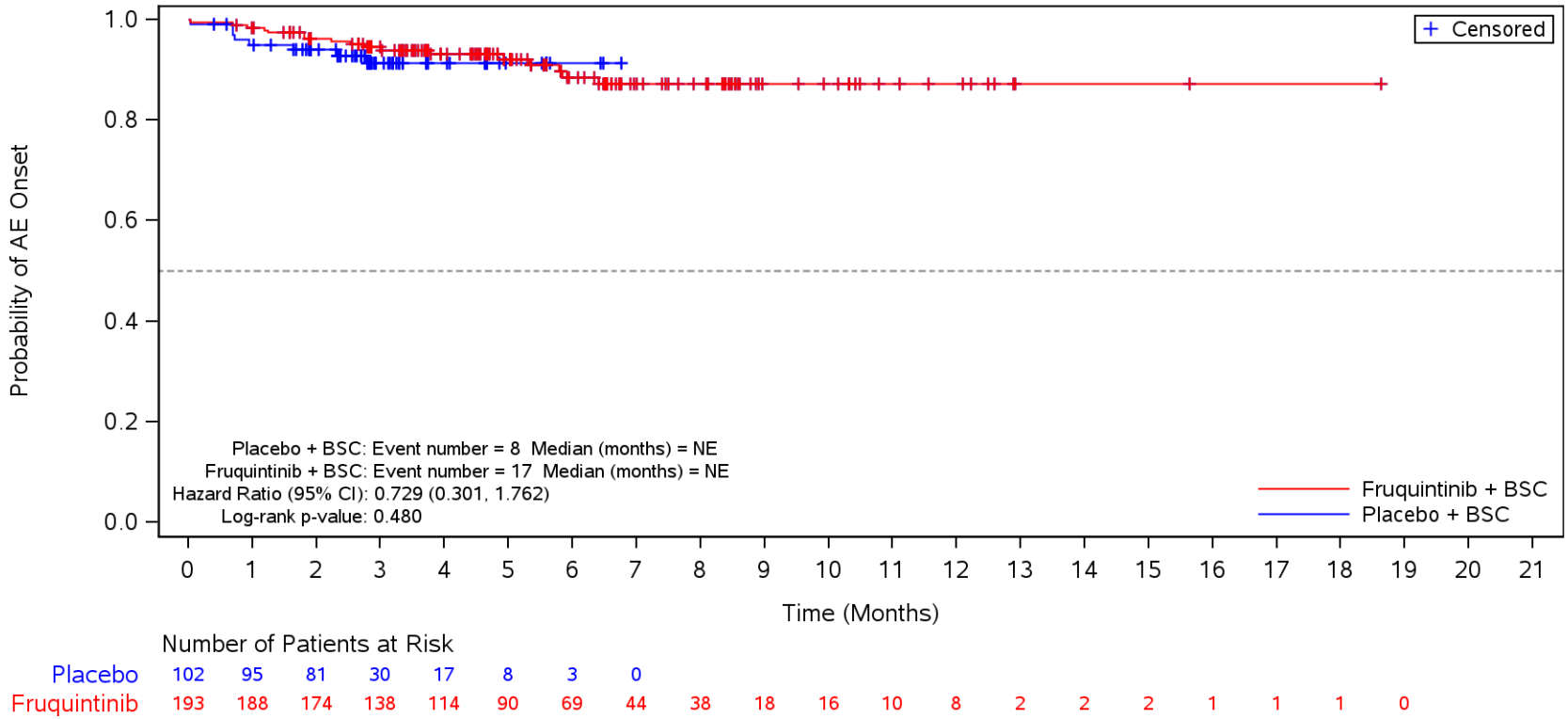
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
ECOG: 0



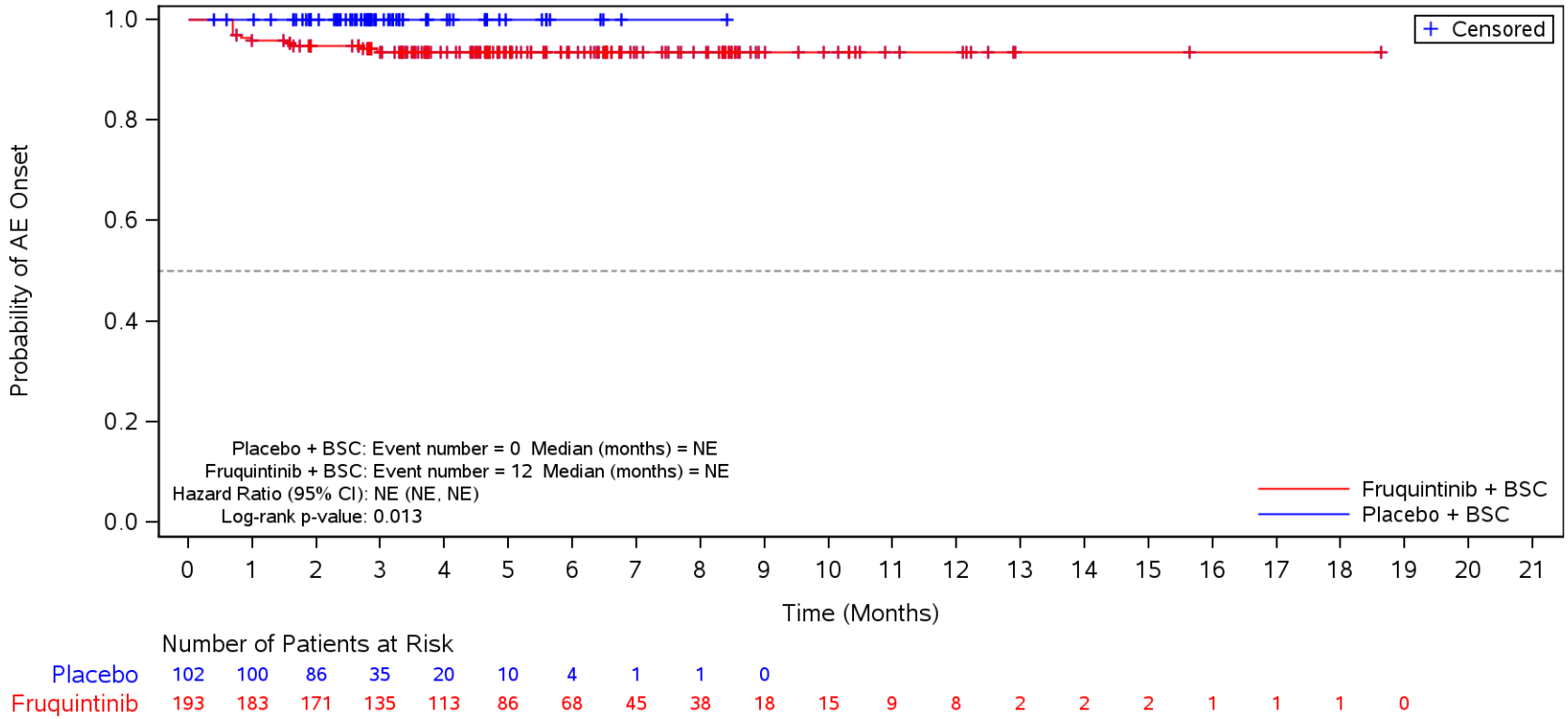
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
ECOG: 0



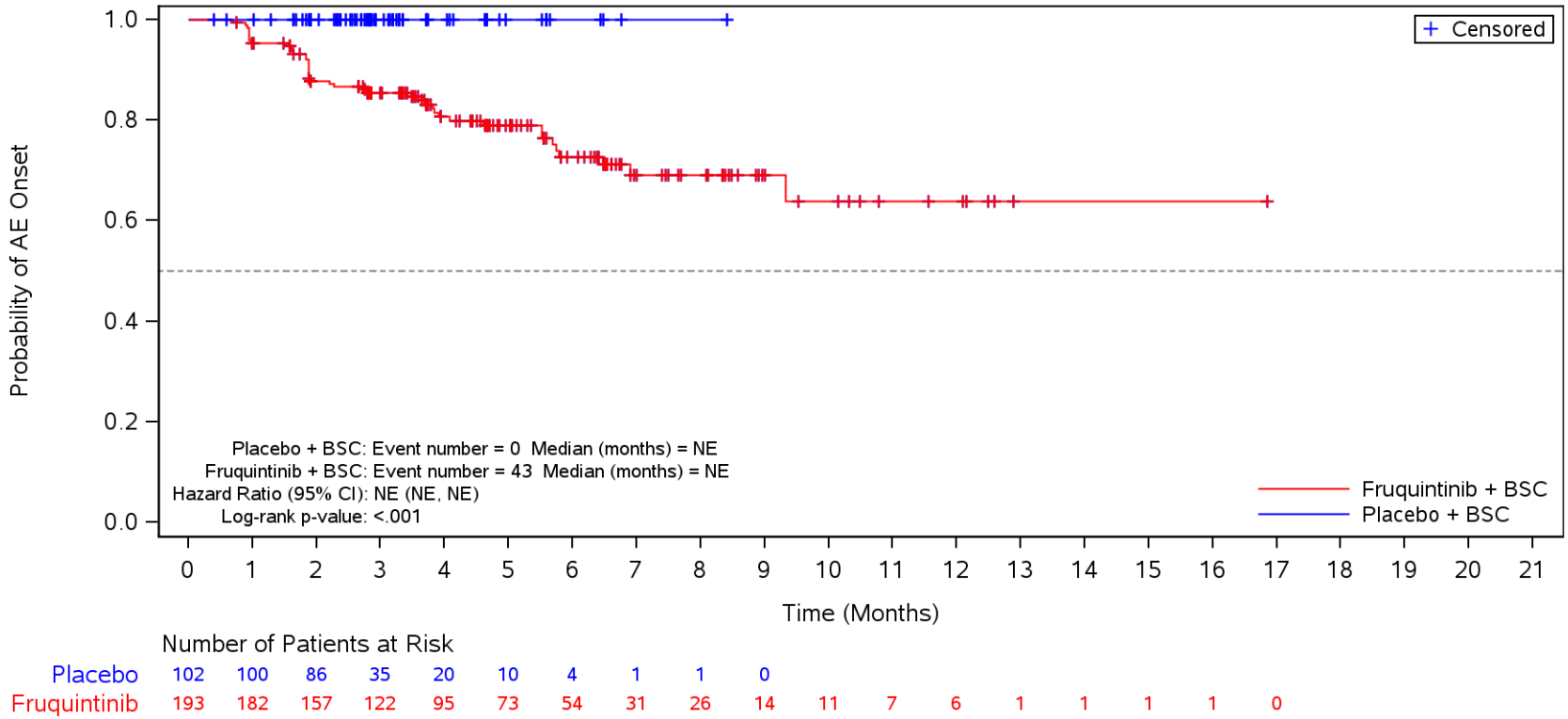
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
ECOG: 0



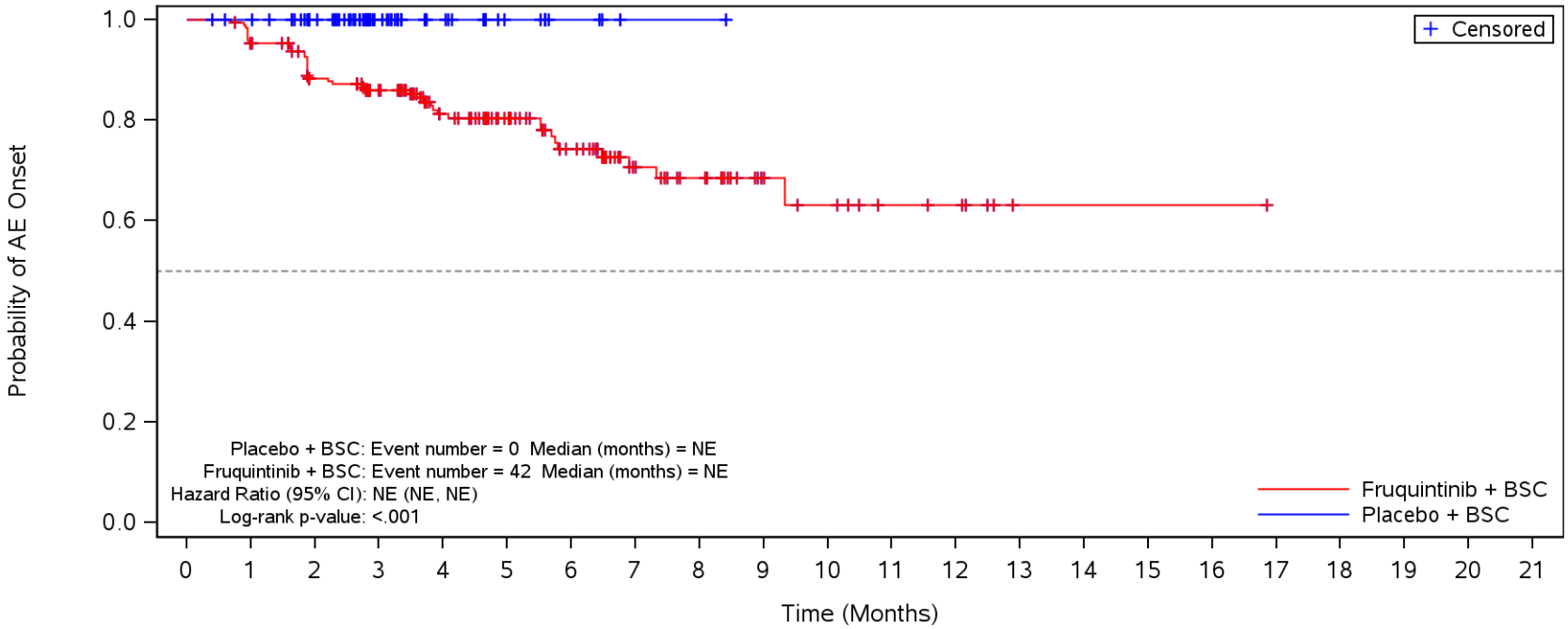
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Endocrine disorders**
ECOG: 0



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
ECOG: 0

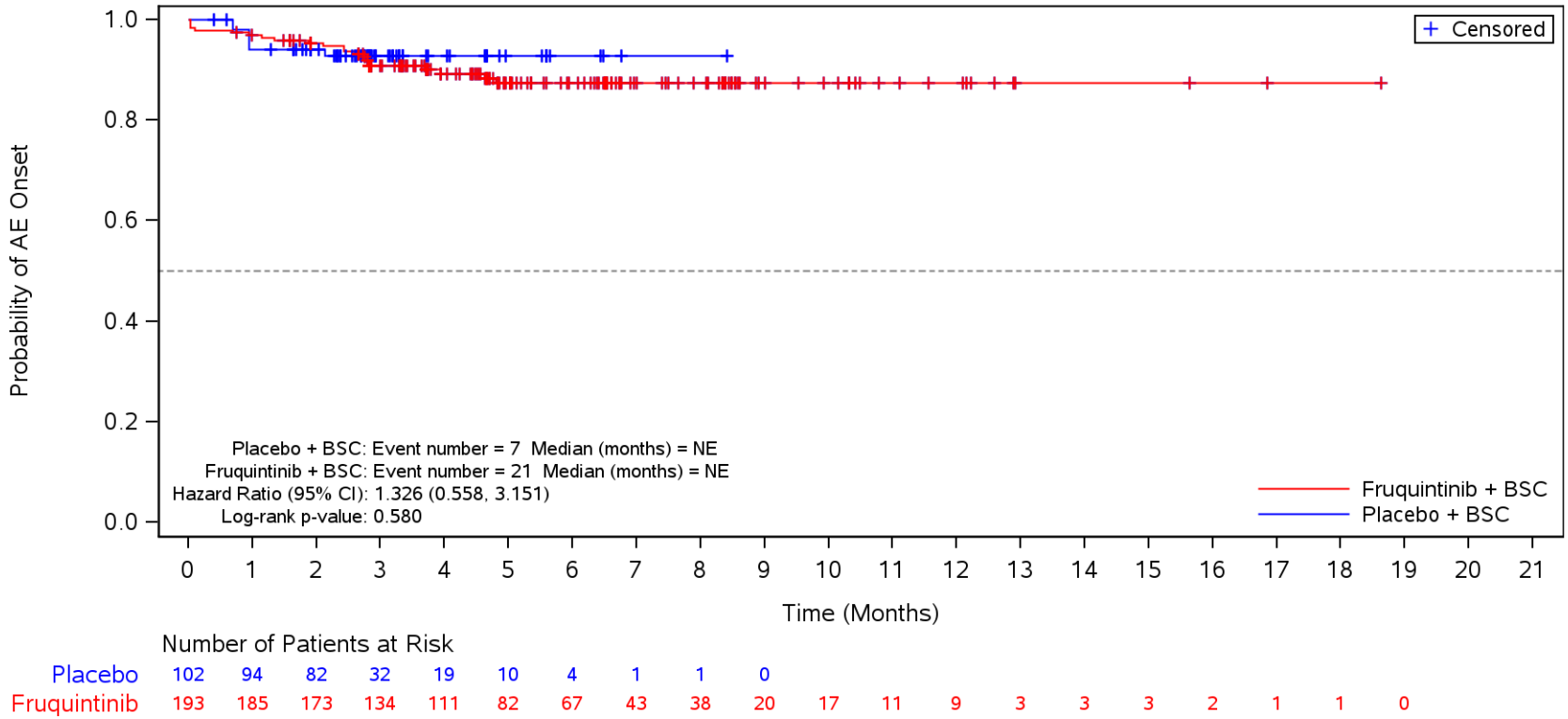


Number of Patients at Risk

Placebo	102	100	86	35	20	10	4	1	1	0								
Fruquintinib	193	182	158	123	96	75	56	32	26	14	11	7	6	1	1	1	1	0

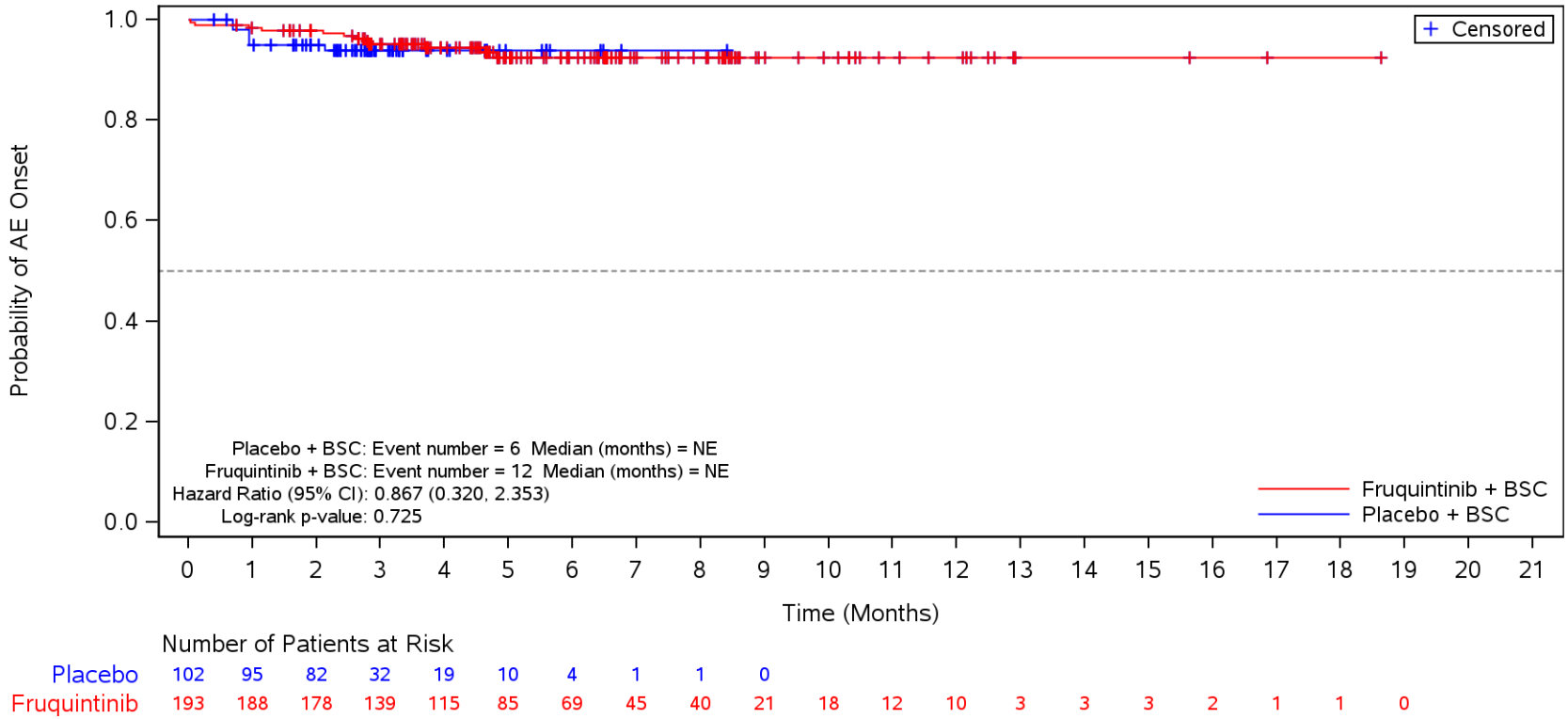
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Psychiatric disorders**
ECOG: 0



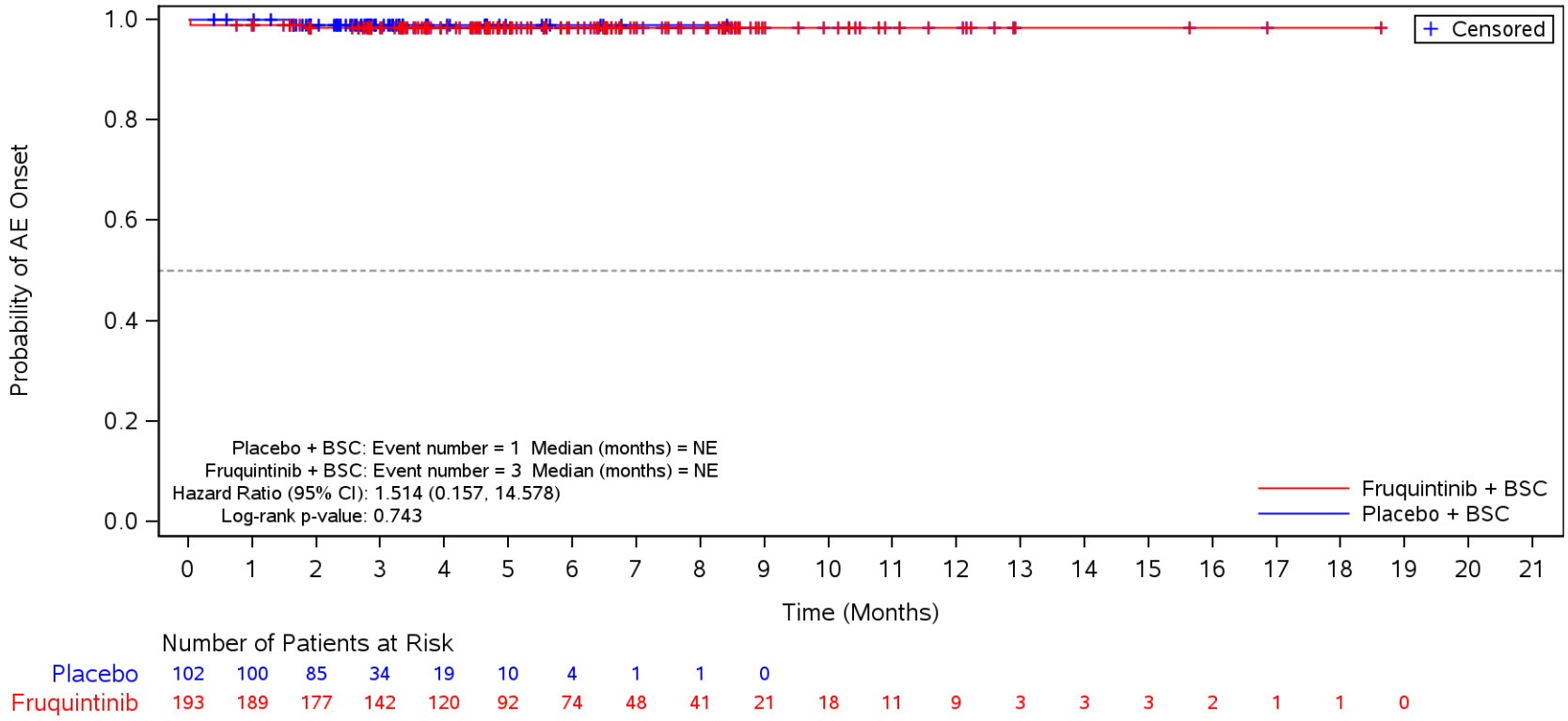
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
ECOG: 0



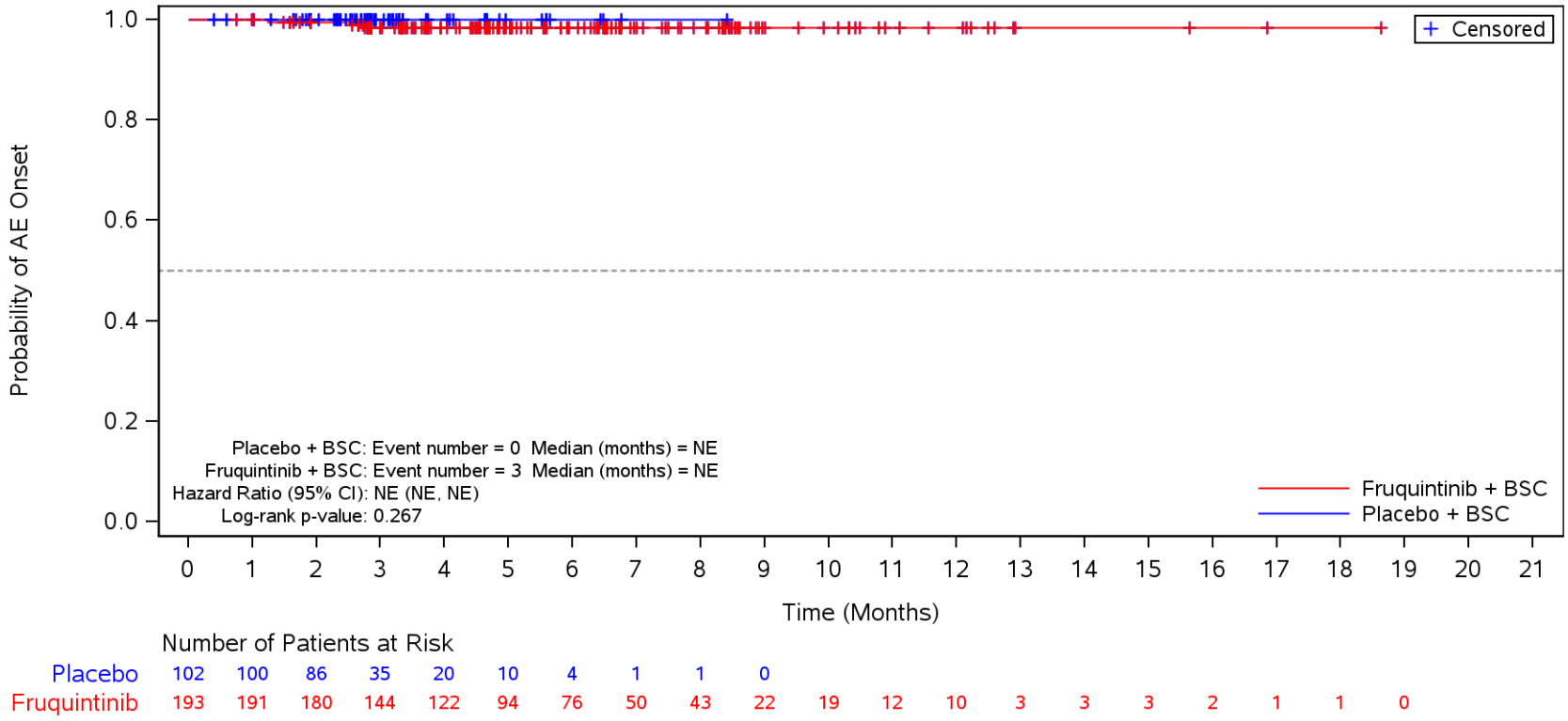
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**
ECOG: 0



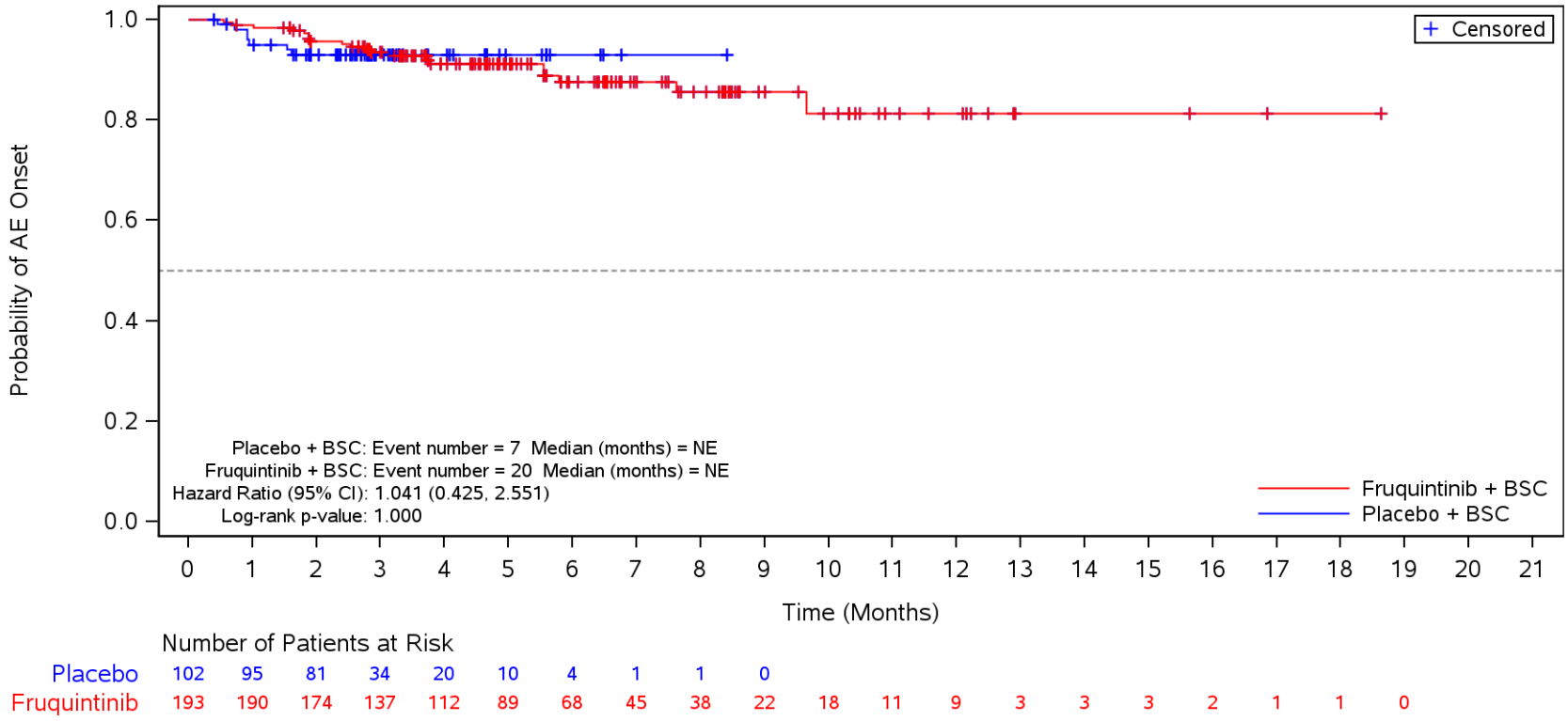
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
ECOG: 0



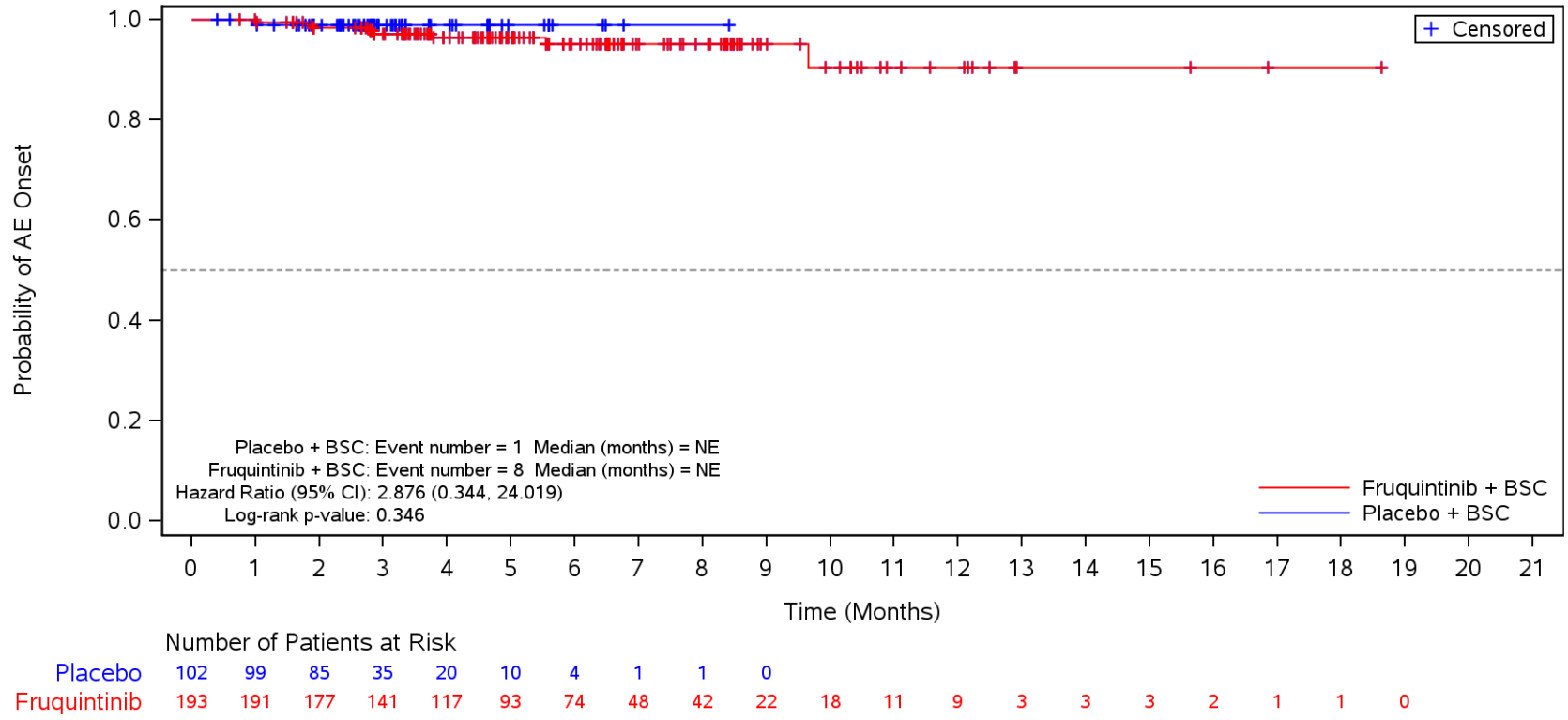
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**
ECOG: 0



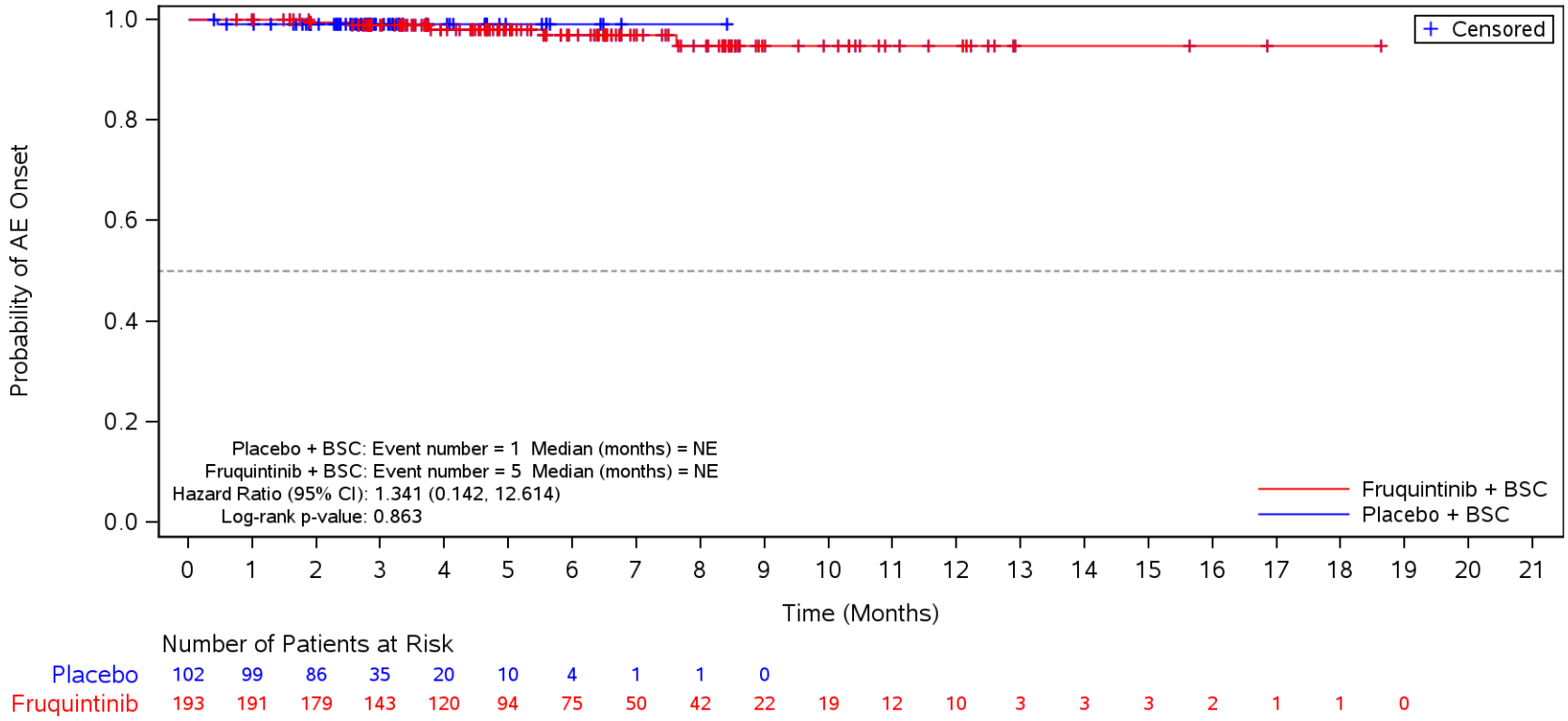
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hypertransaminasaemia**
ECOG: 0



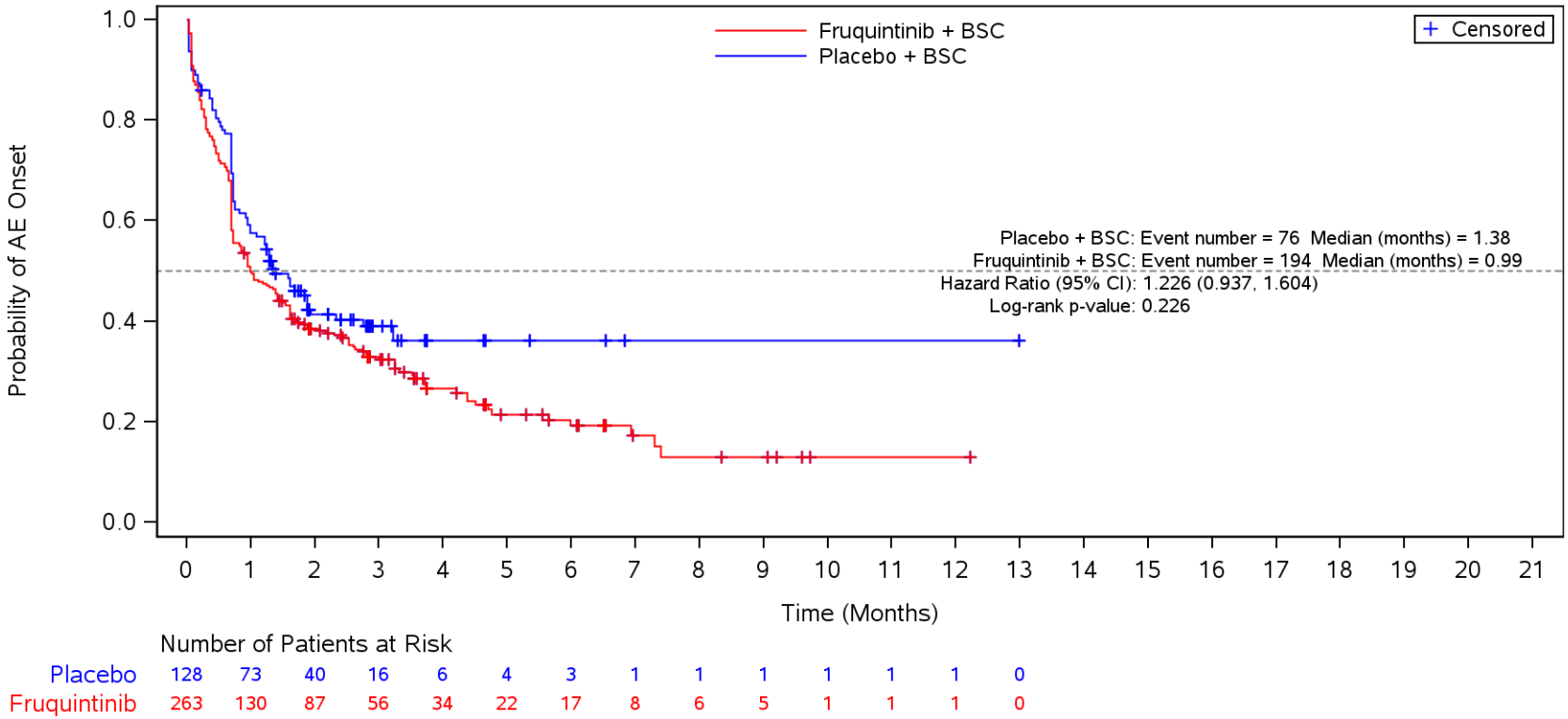
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hyperbilirubinaemia**
ECOG: 0



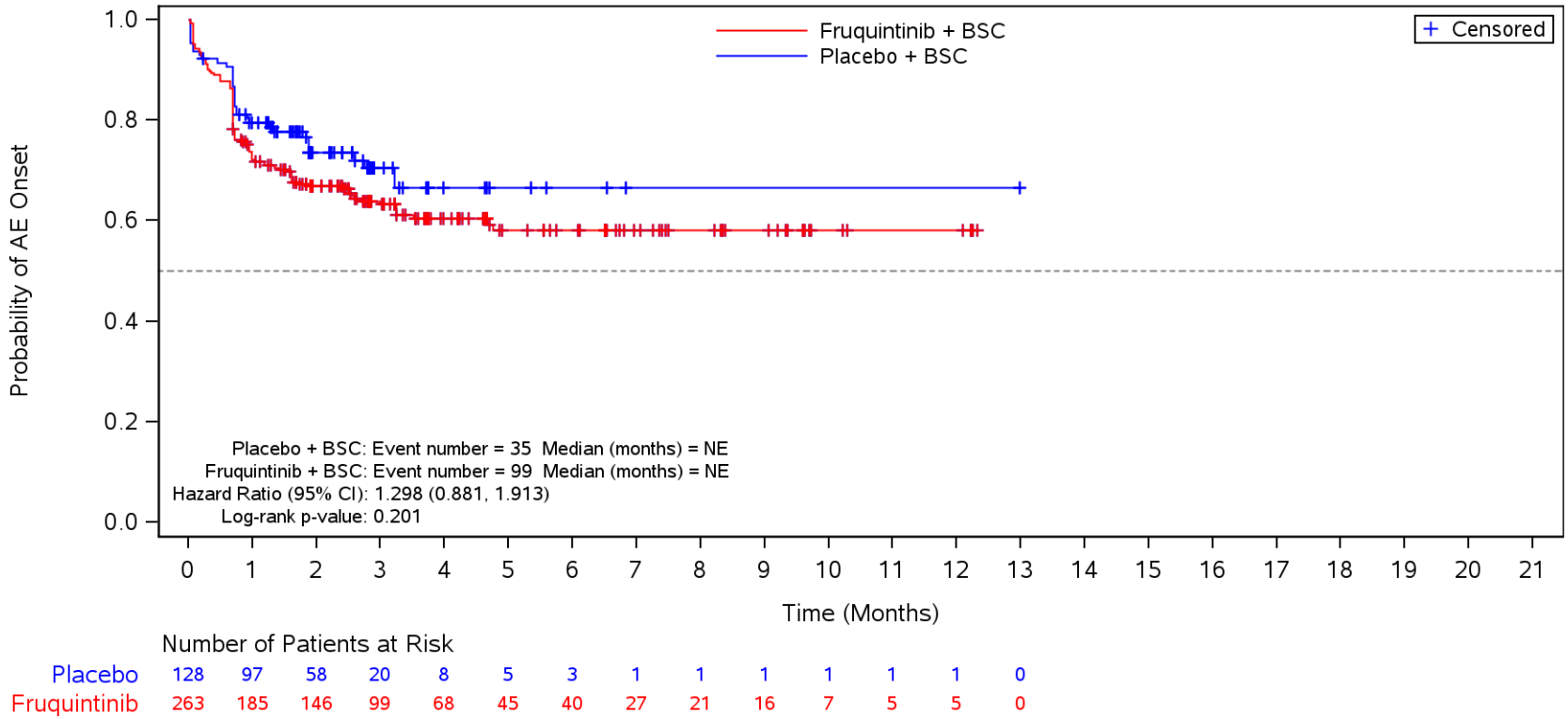
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
ECOG: 1



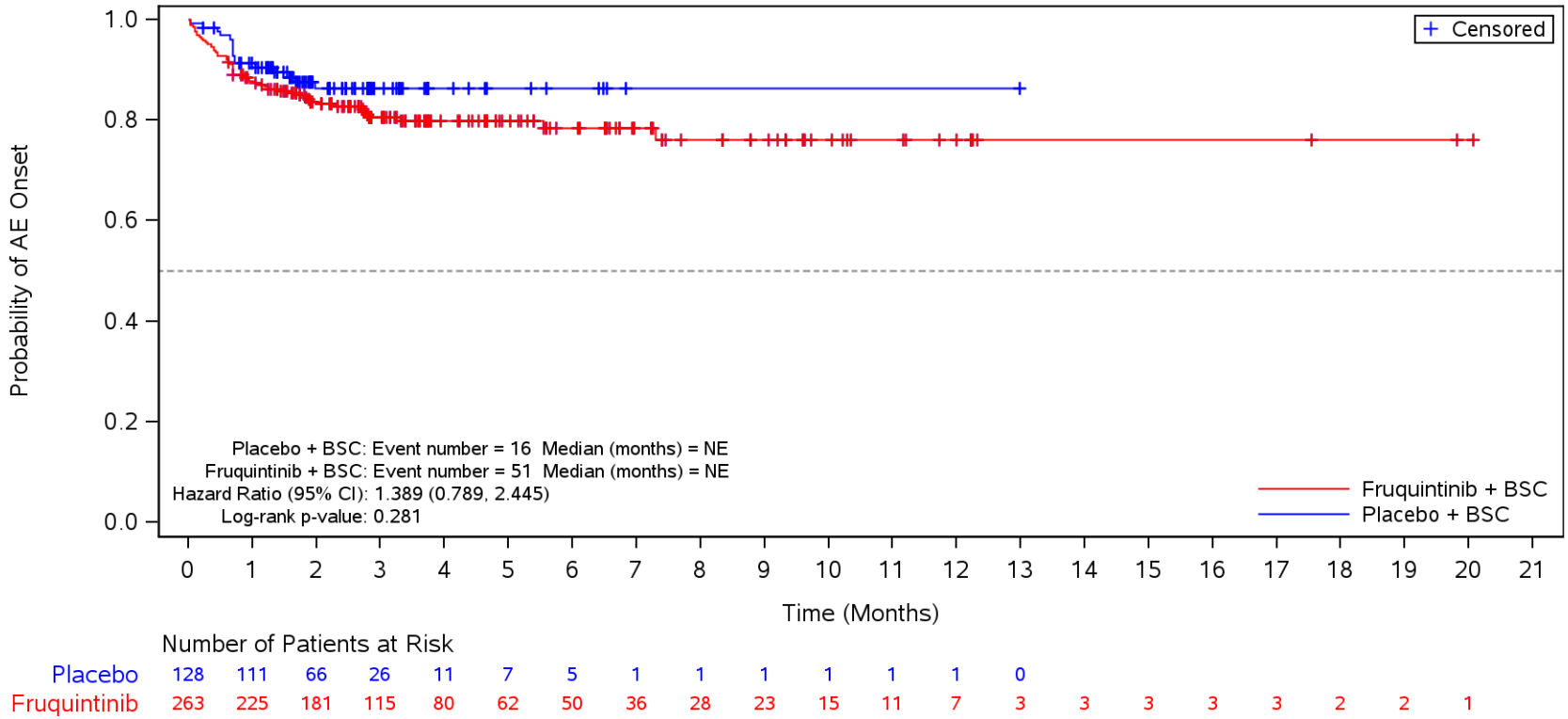
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
ECOG: 1



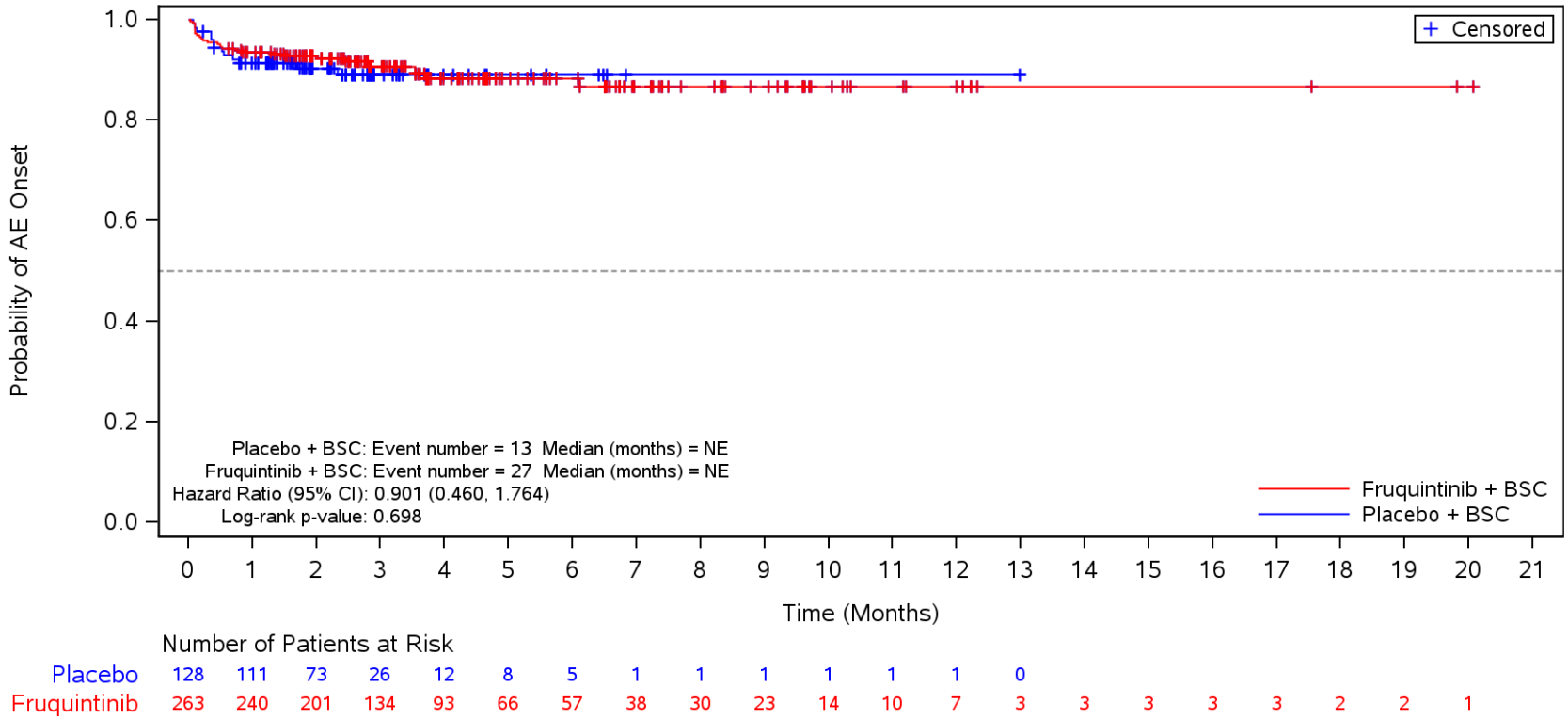
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
ECOG: 1



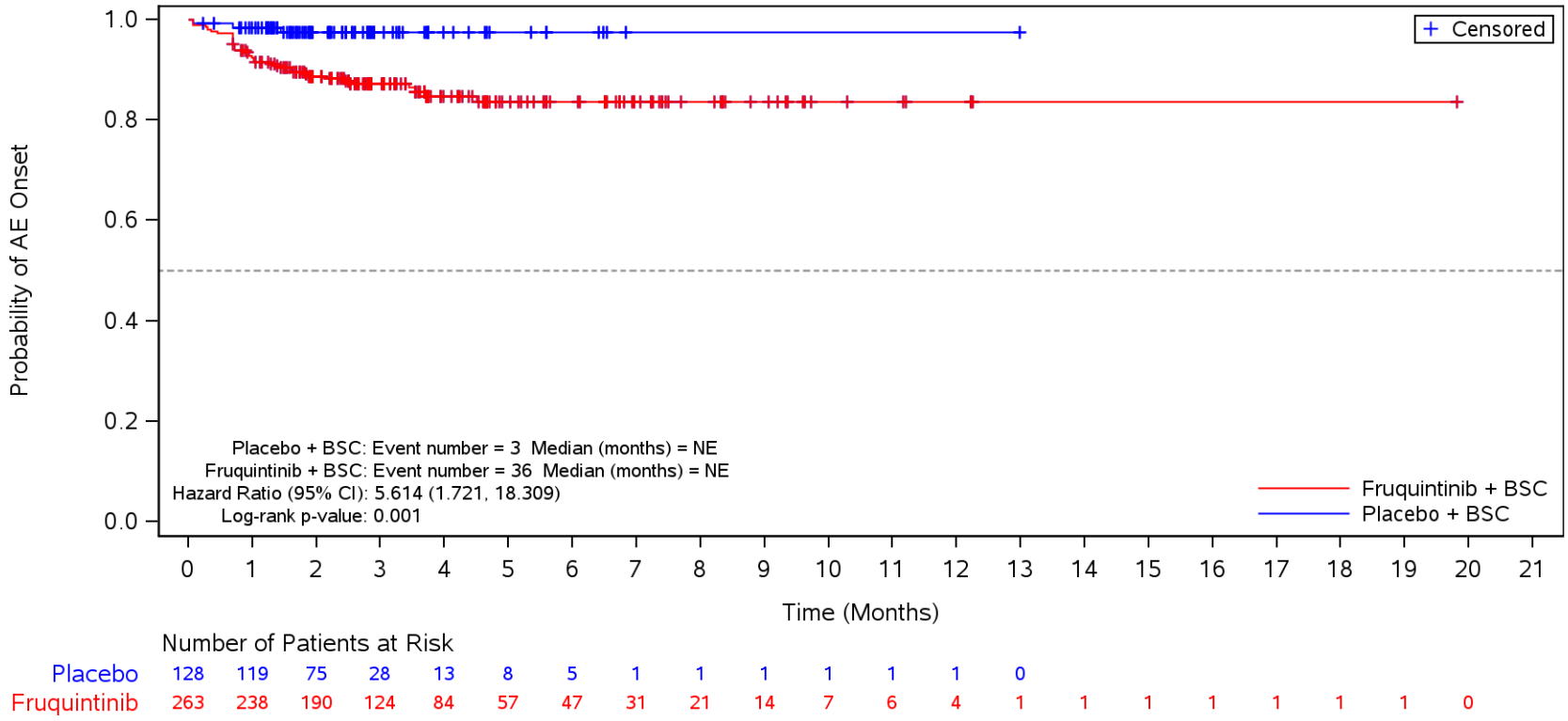
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
ECOG: 1



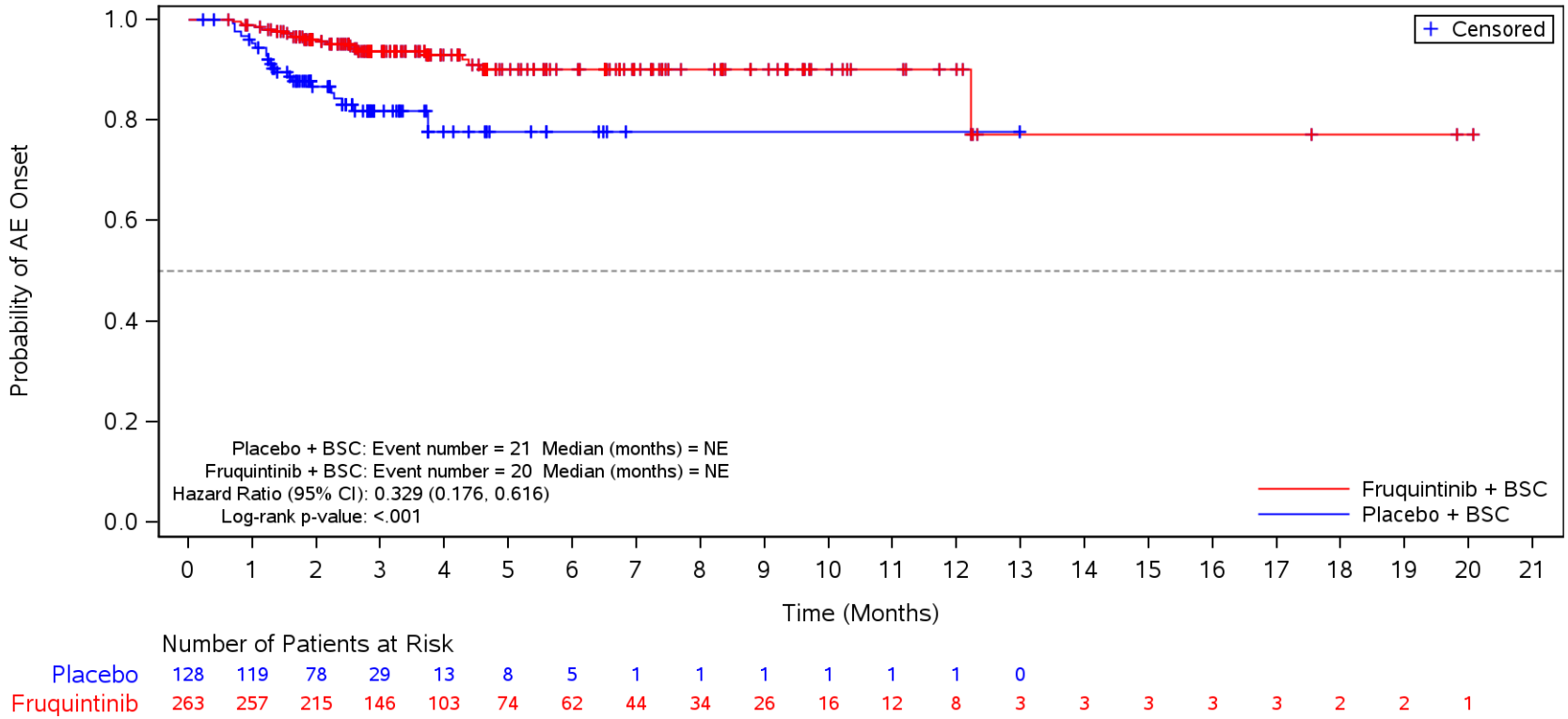
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
ECOG: 1



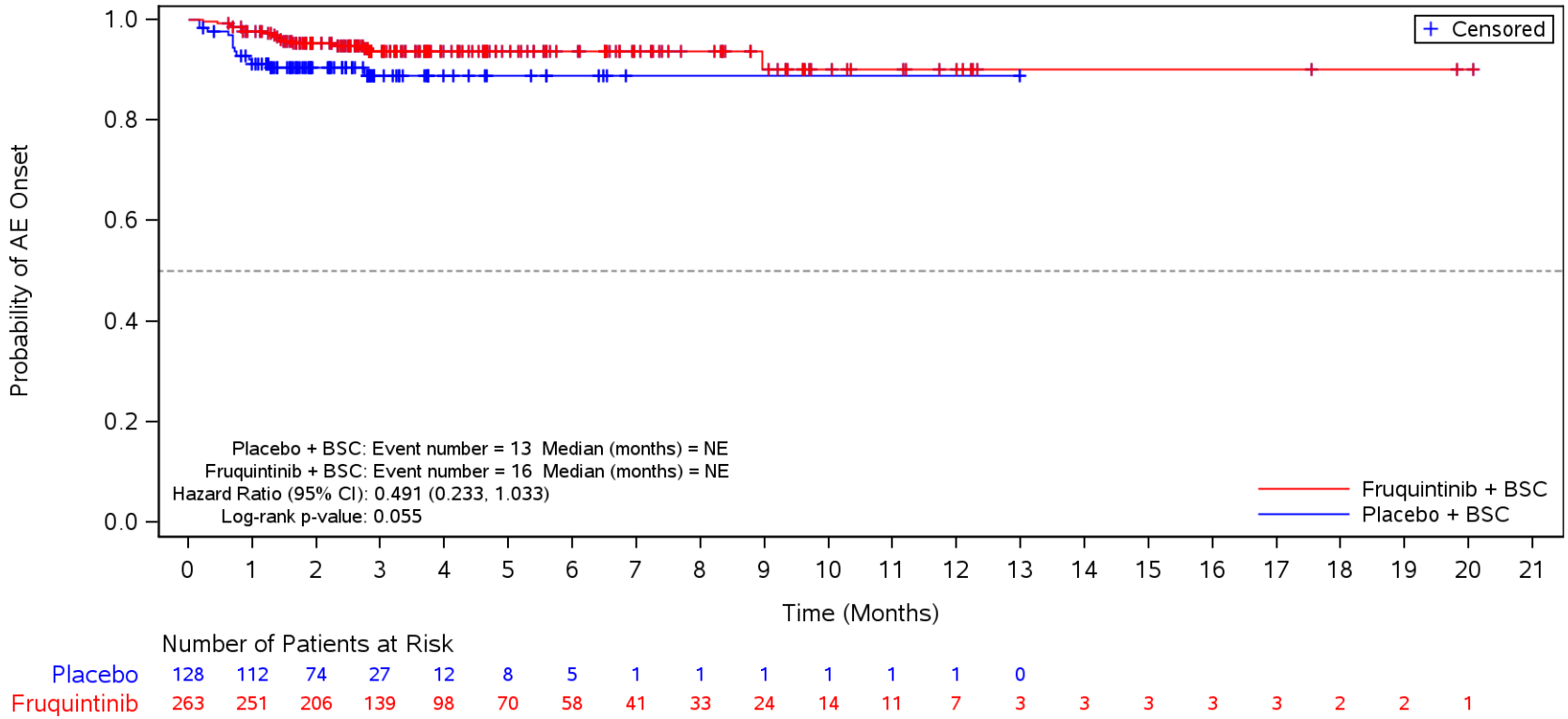
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
ECOG: 1



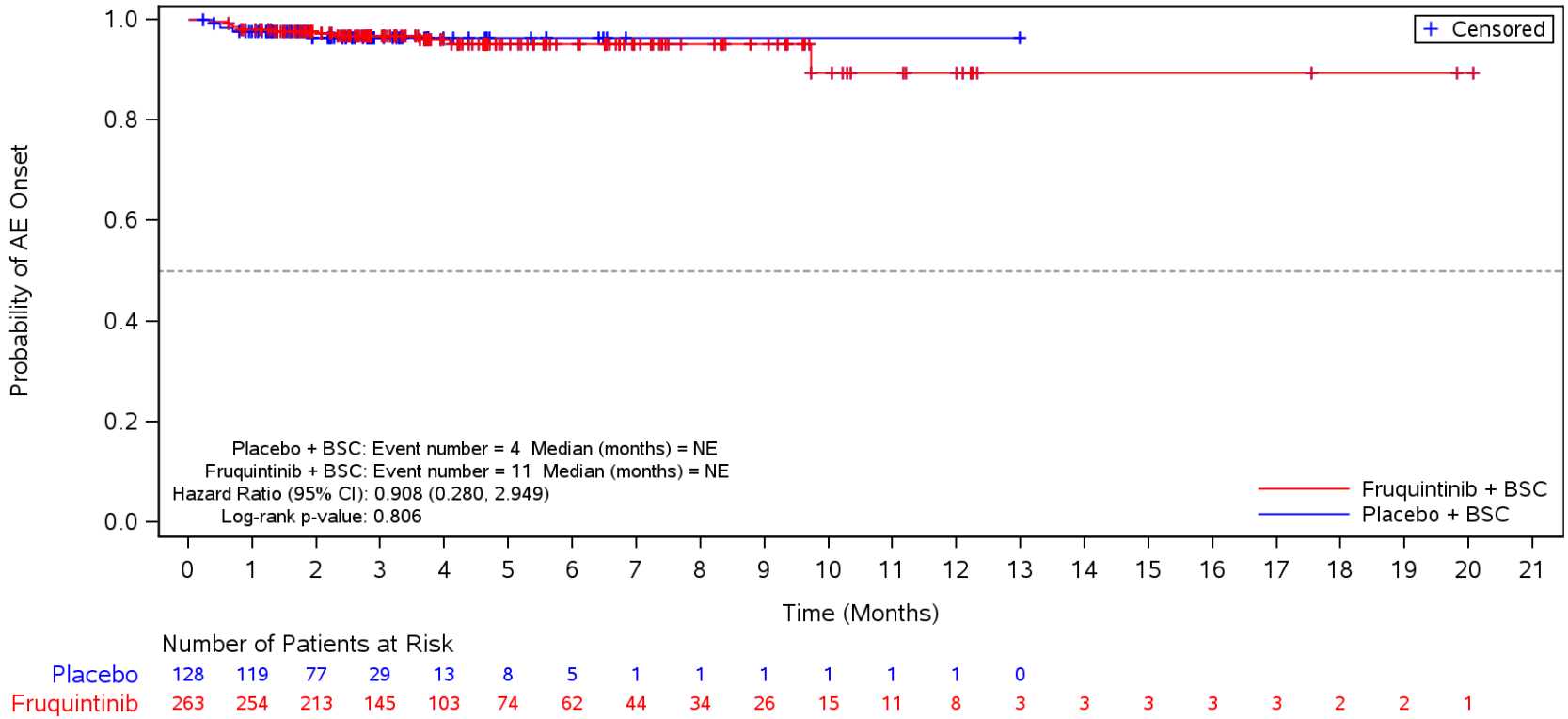
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
ECOG: 1



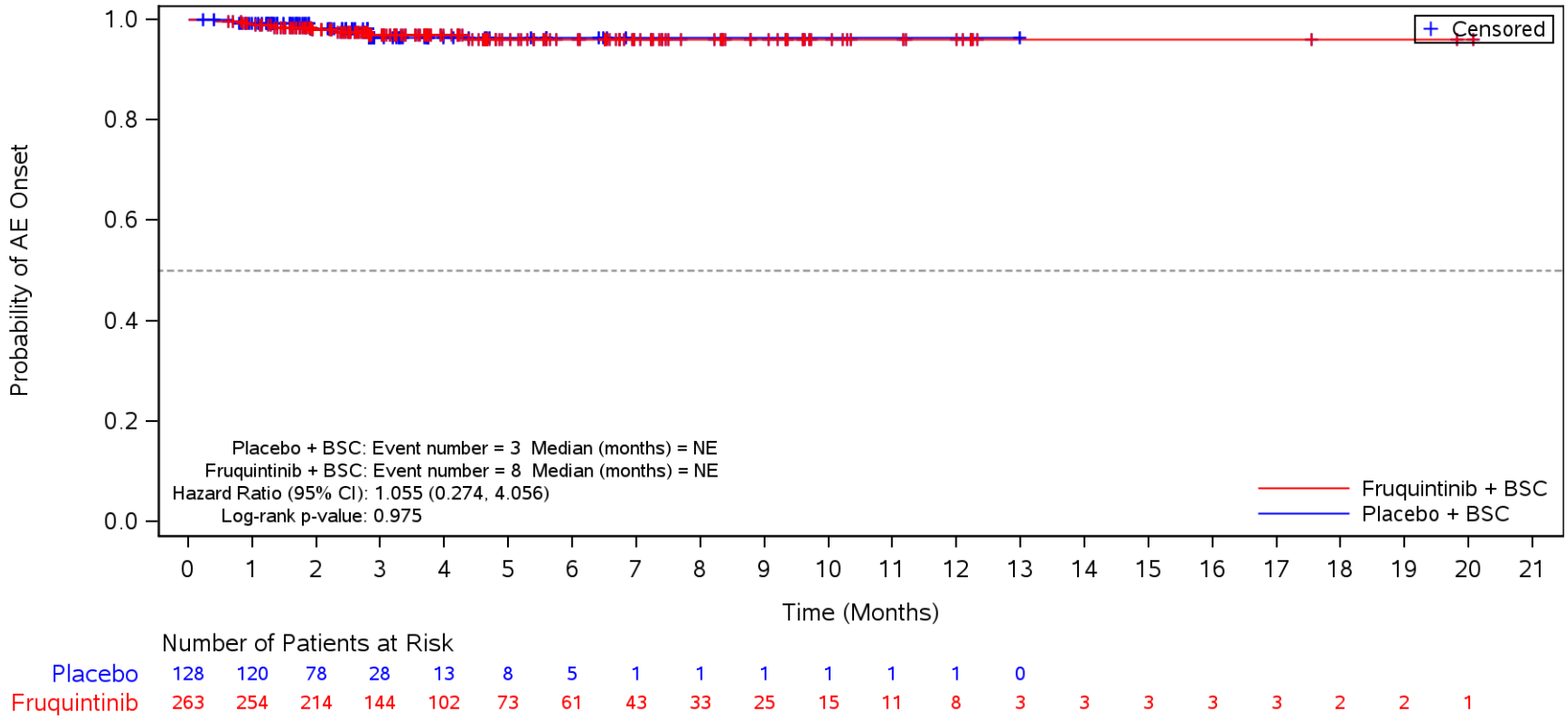
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**
ECOG: 1



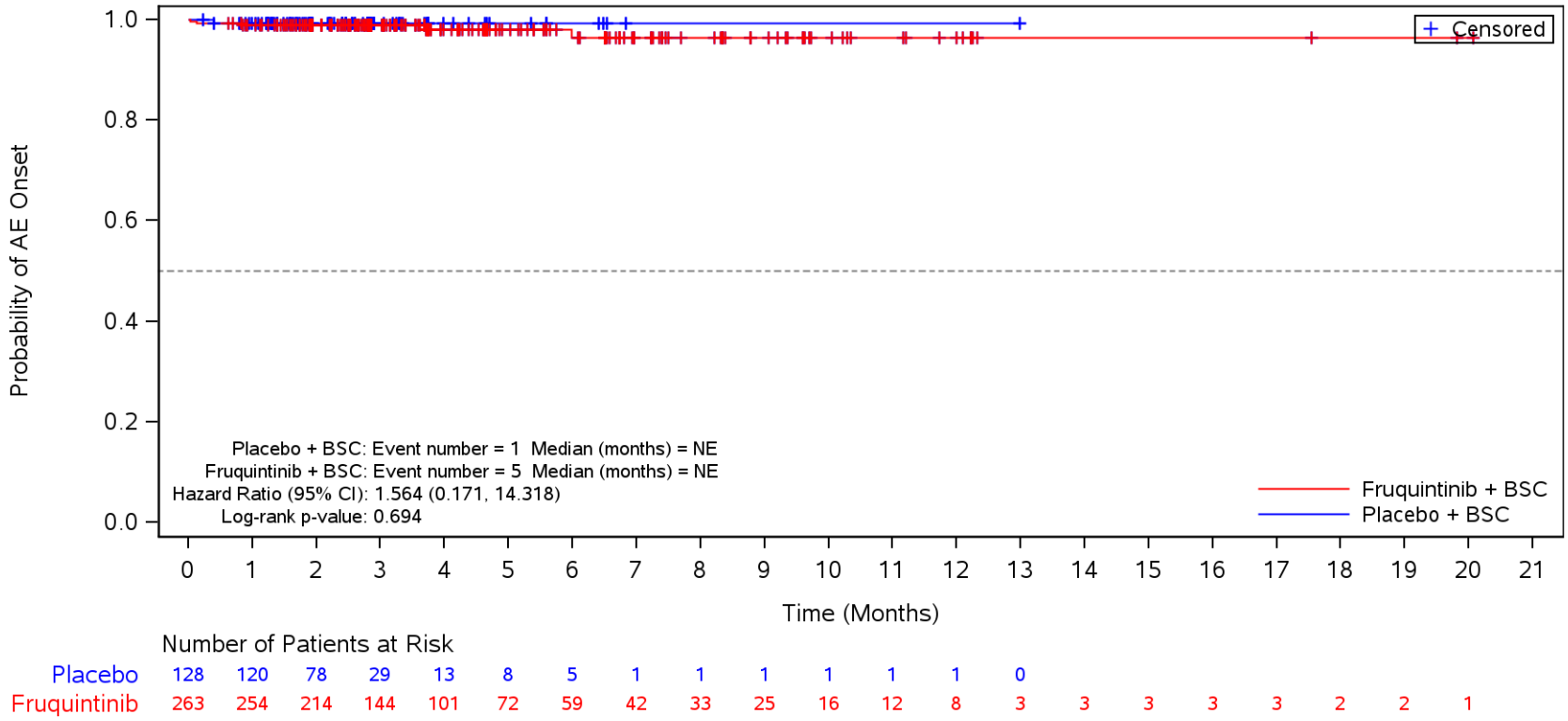
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Condition aggravated**
ECOG: 1



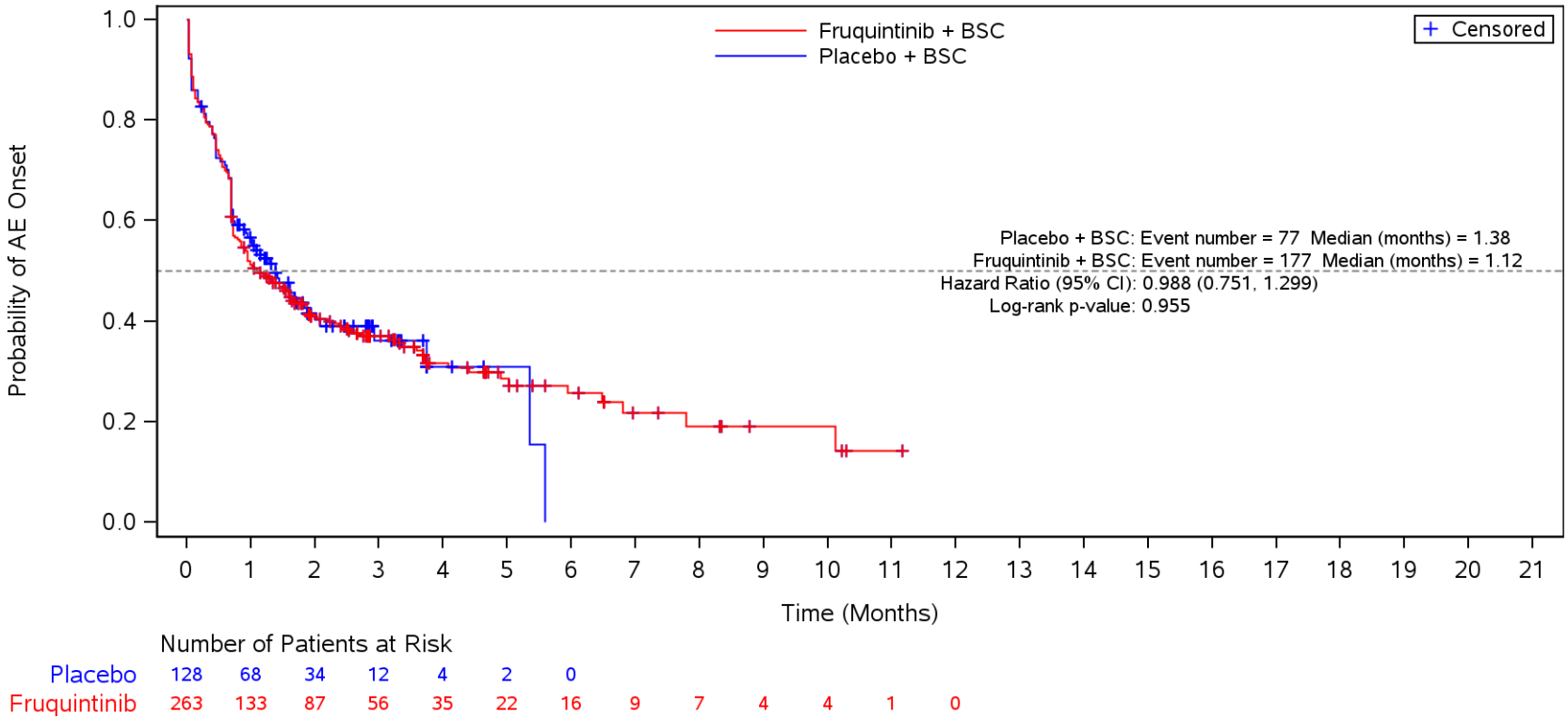
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**
ECOG: 1



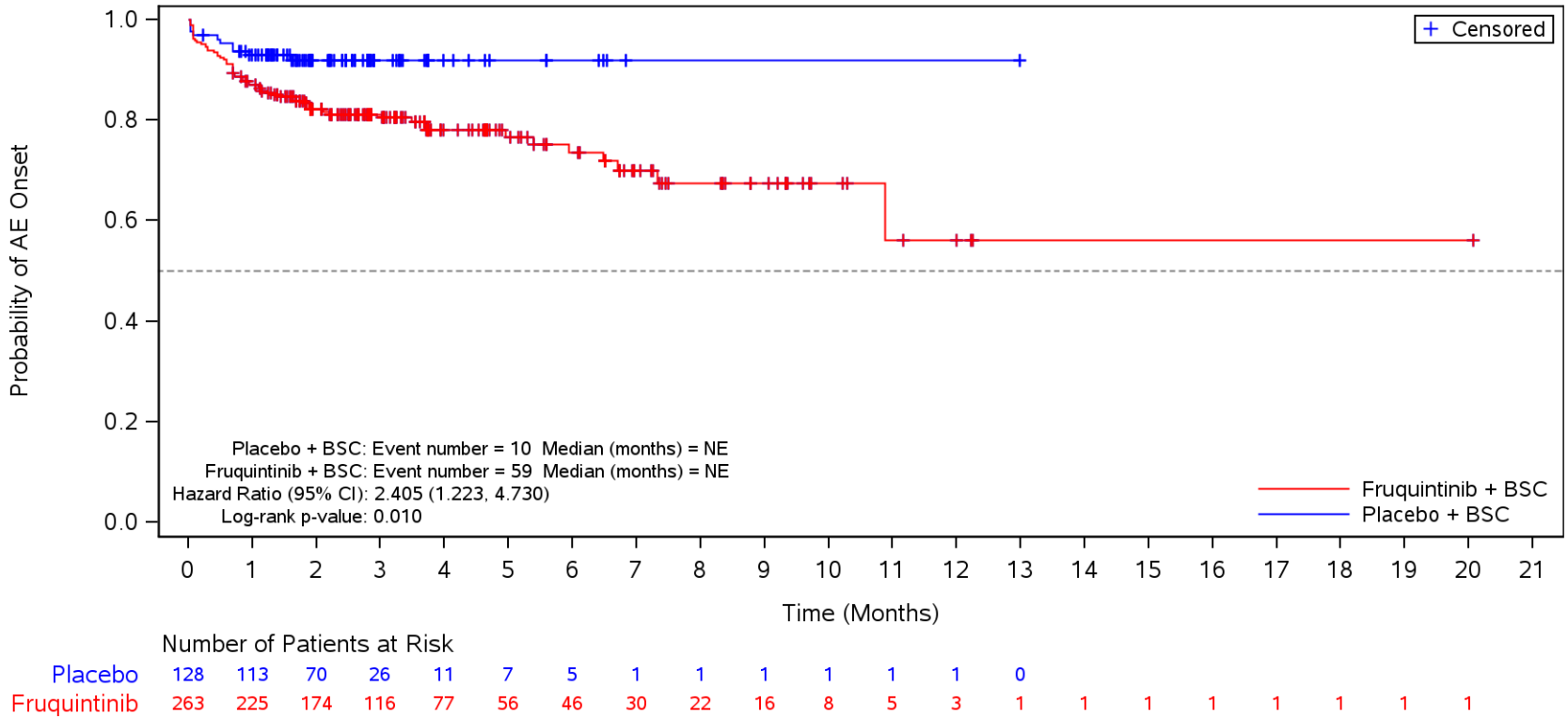
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
ECOG: 1



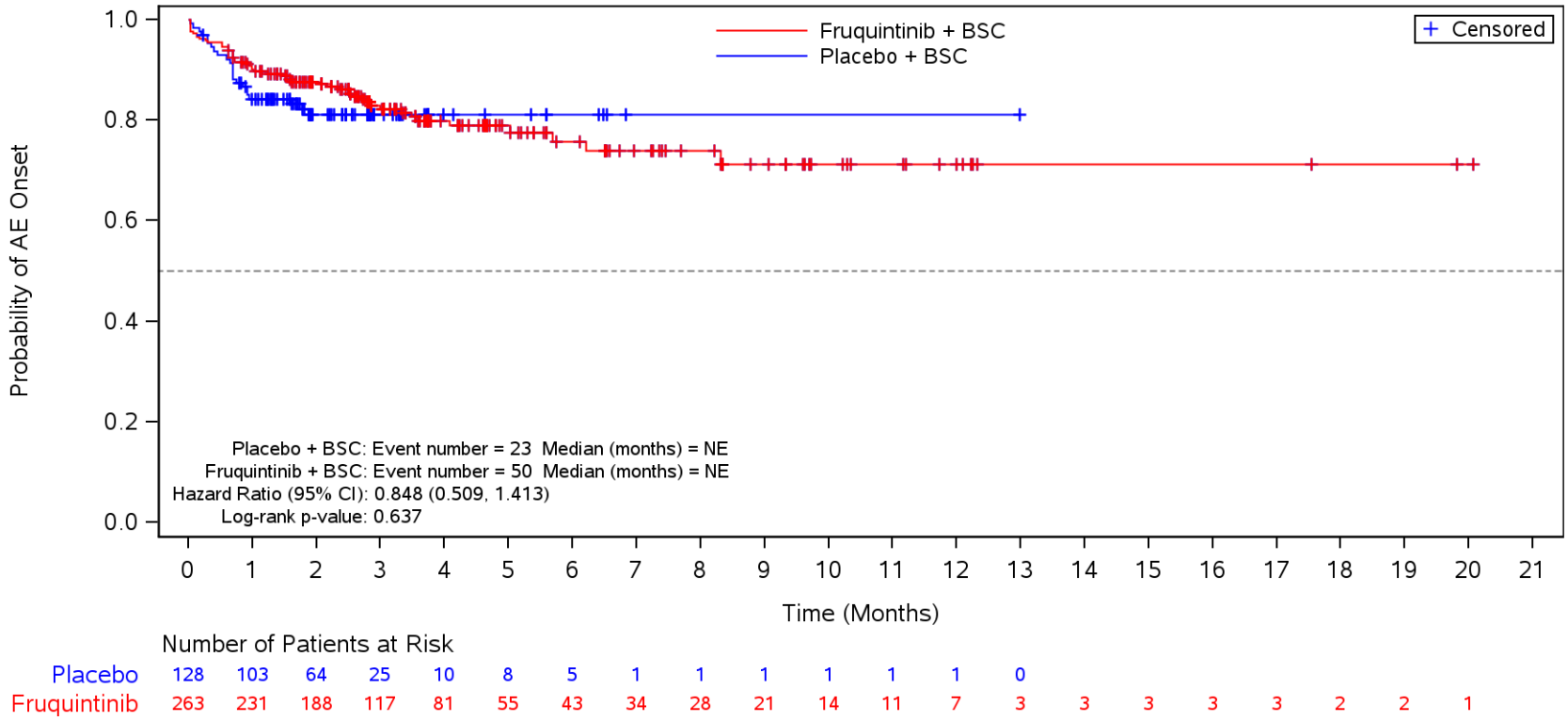
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
ECOG: 1



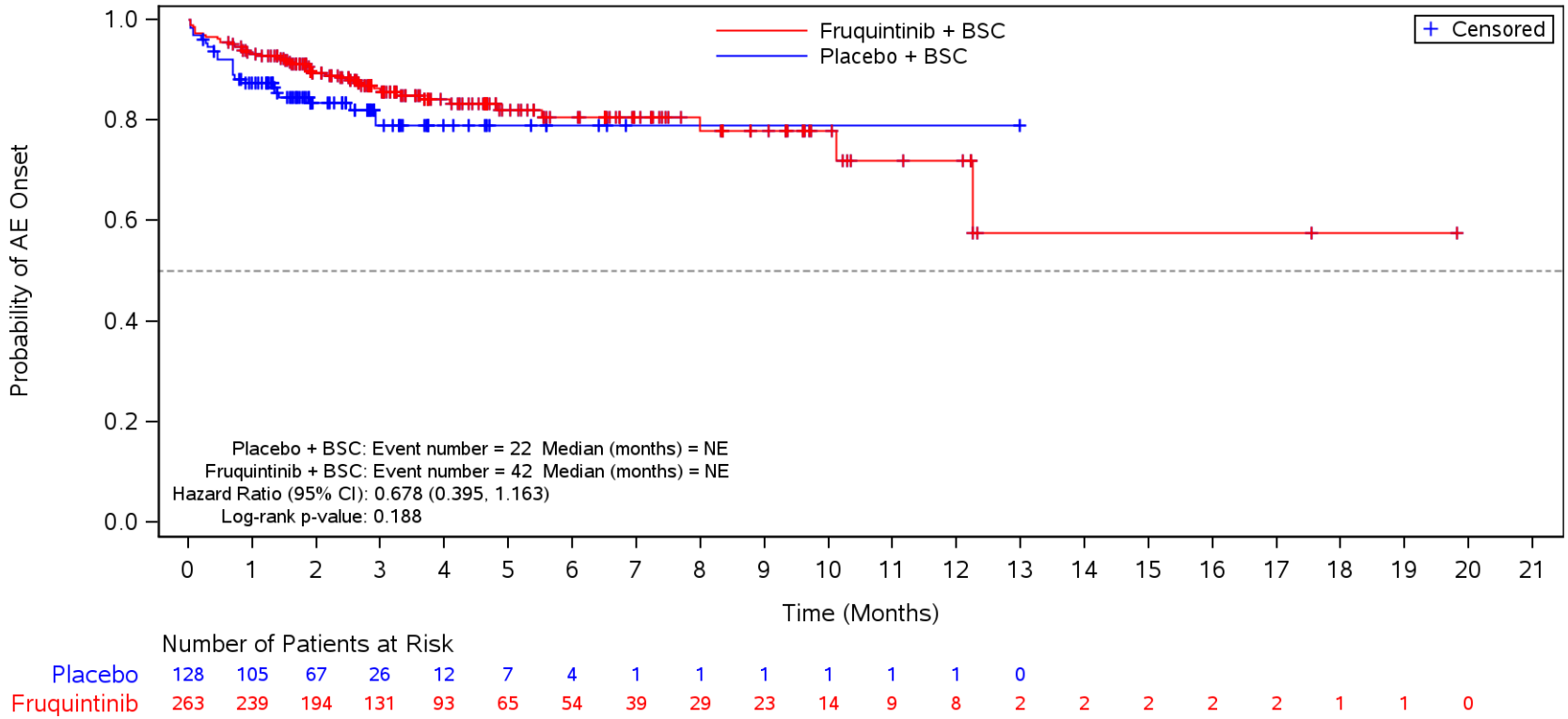
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
ECOG: 1



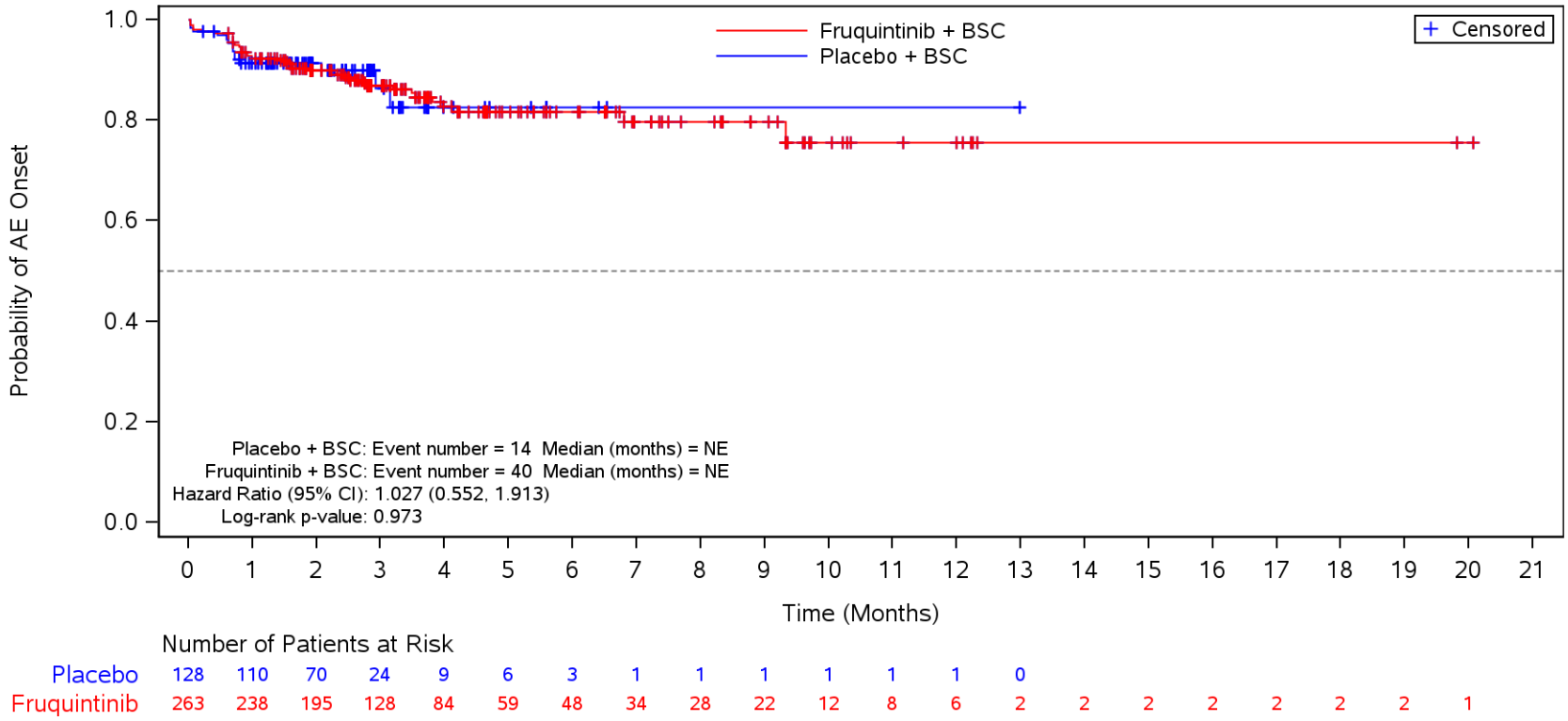
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
ECOG: 1



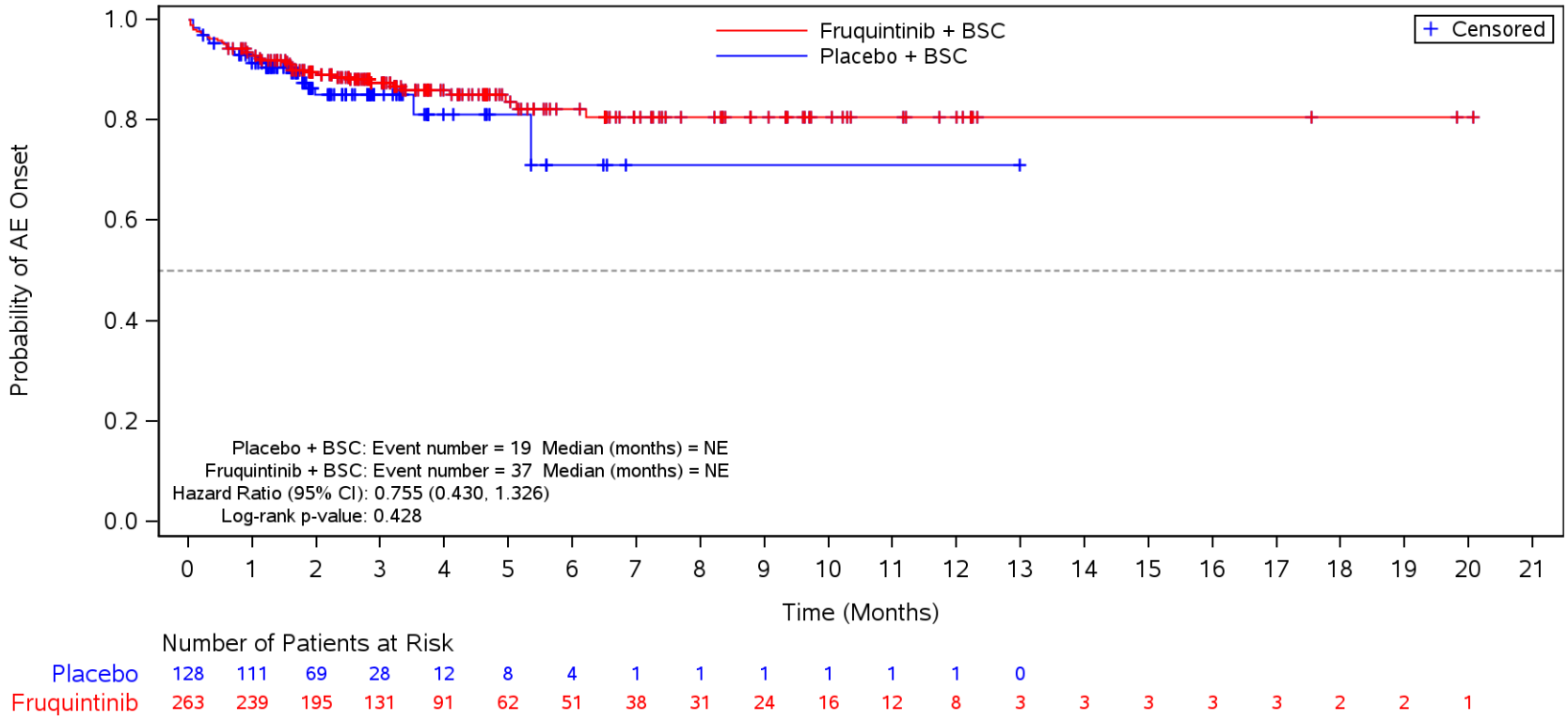
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
ECOG: 1



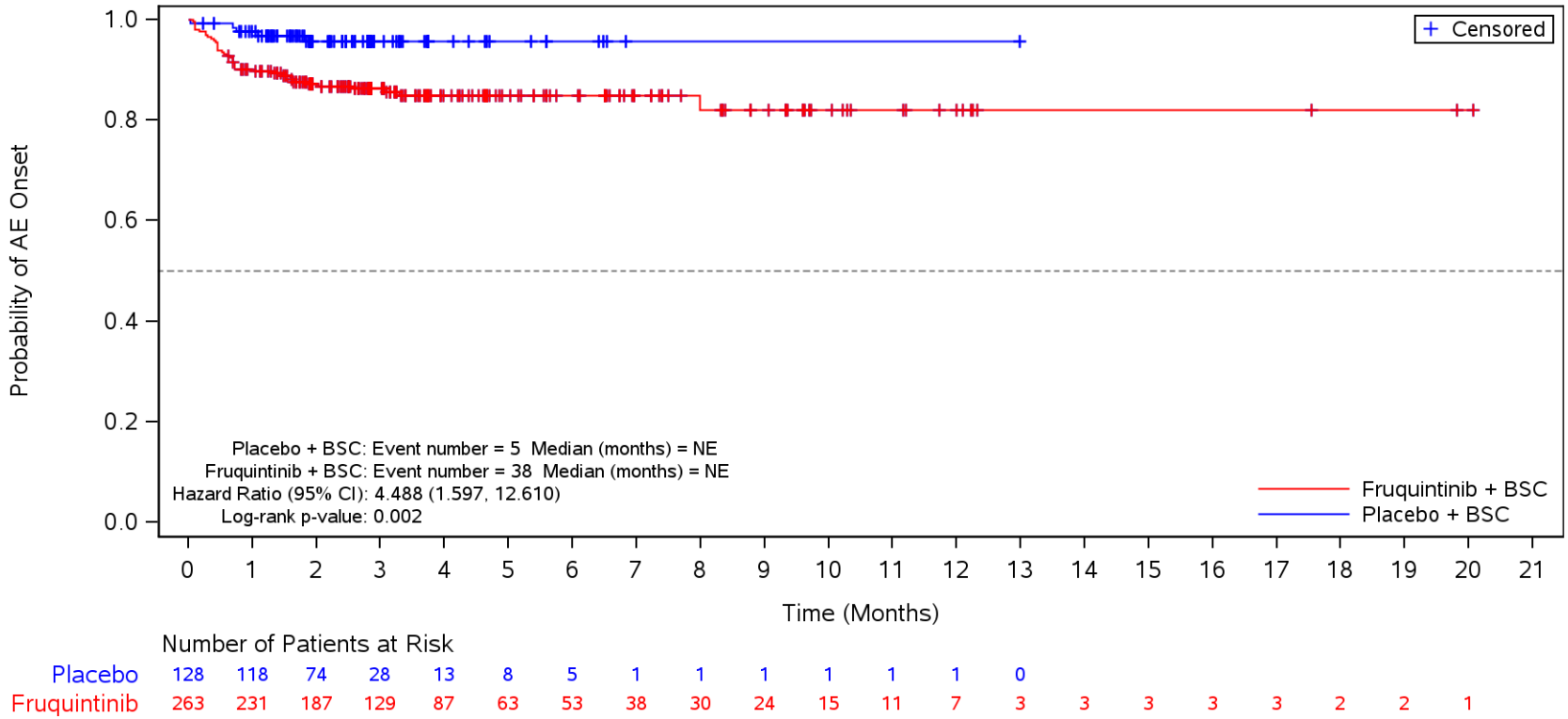
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
ECOG: 1



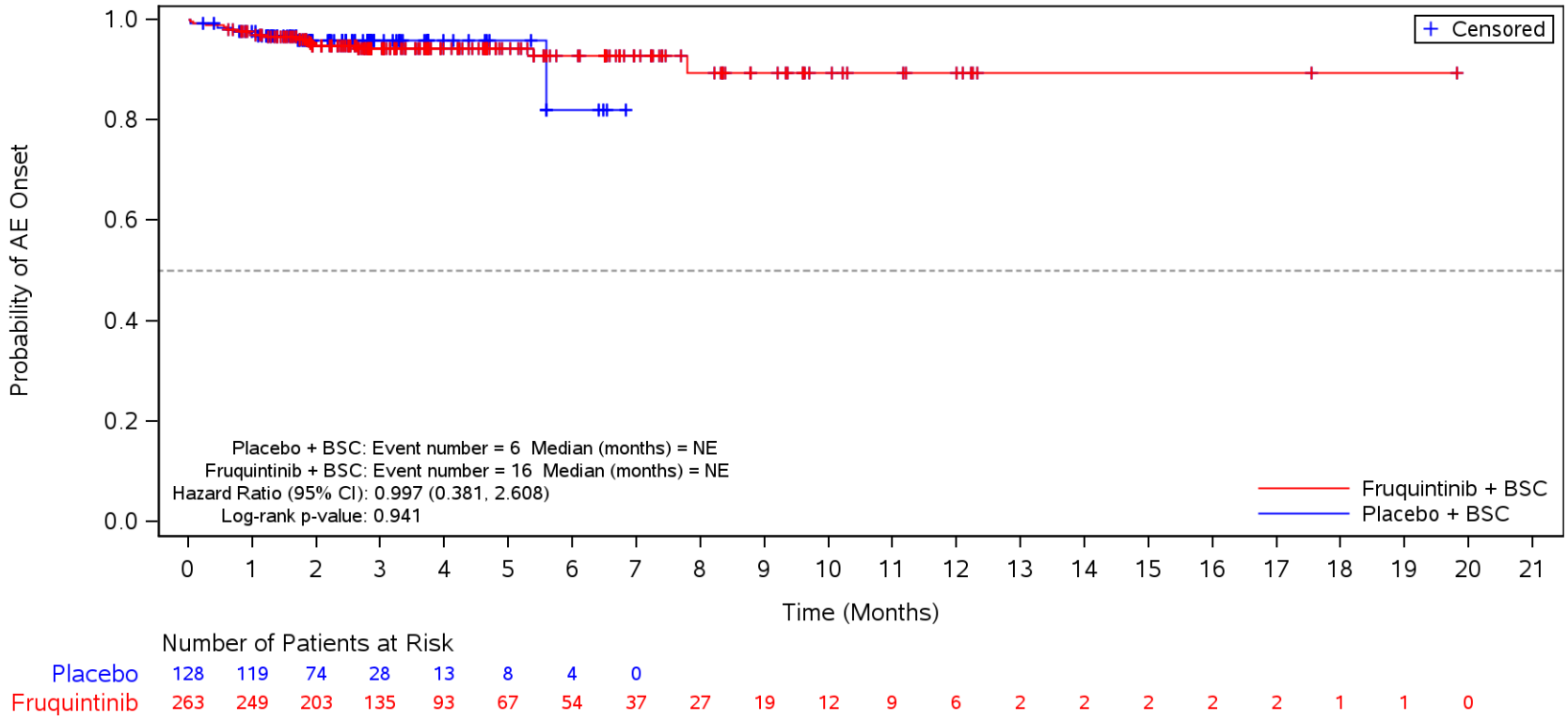
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
ECOG: 1



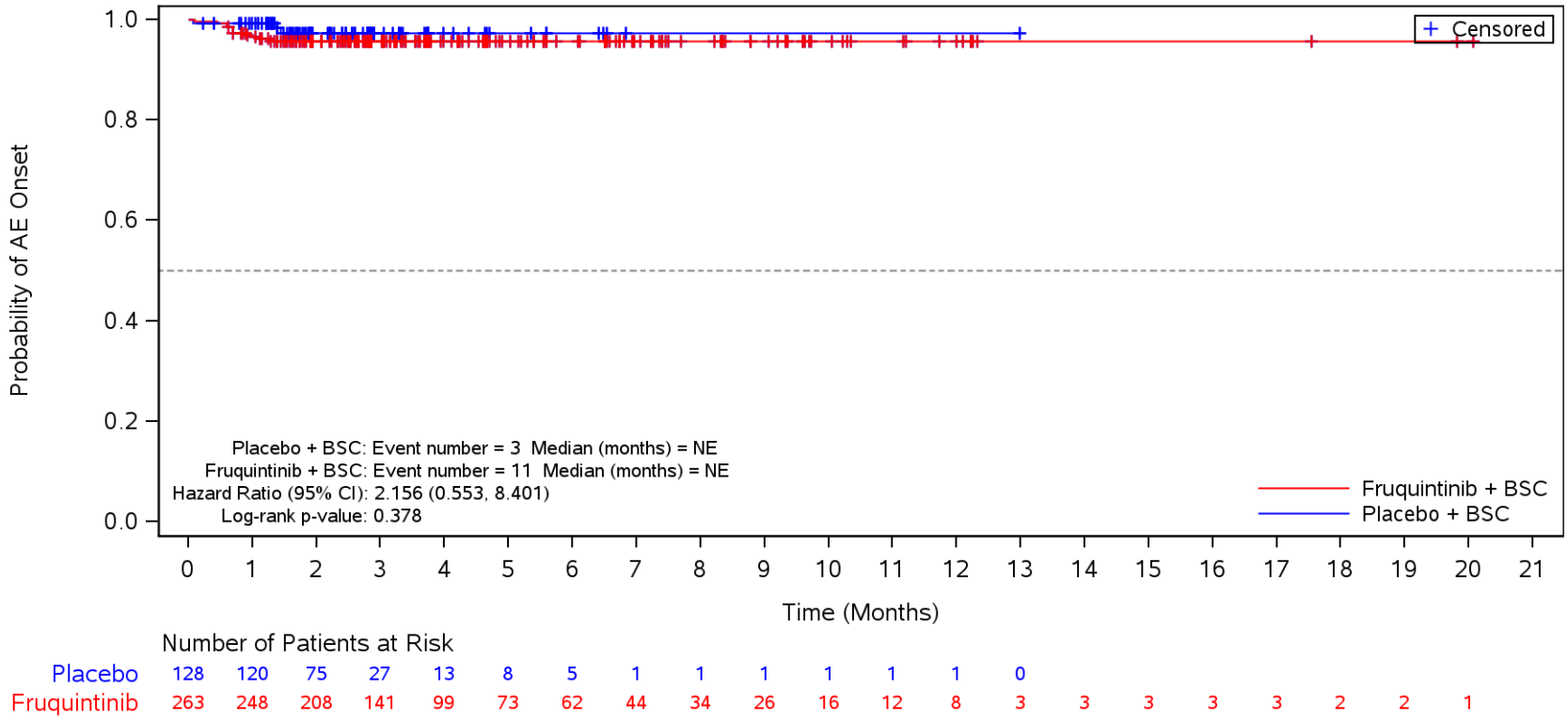
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
ECOG: 1



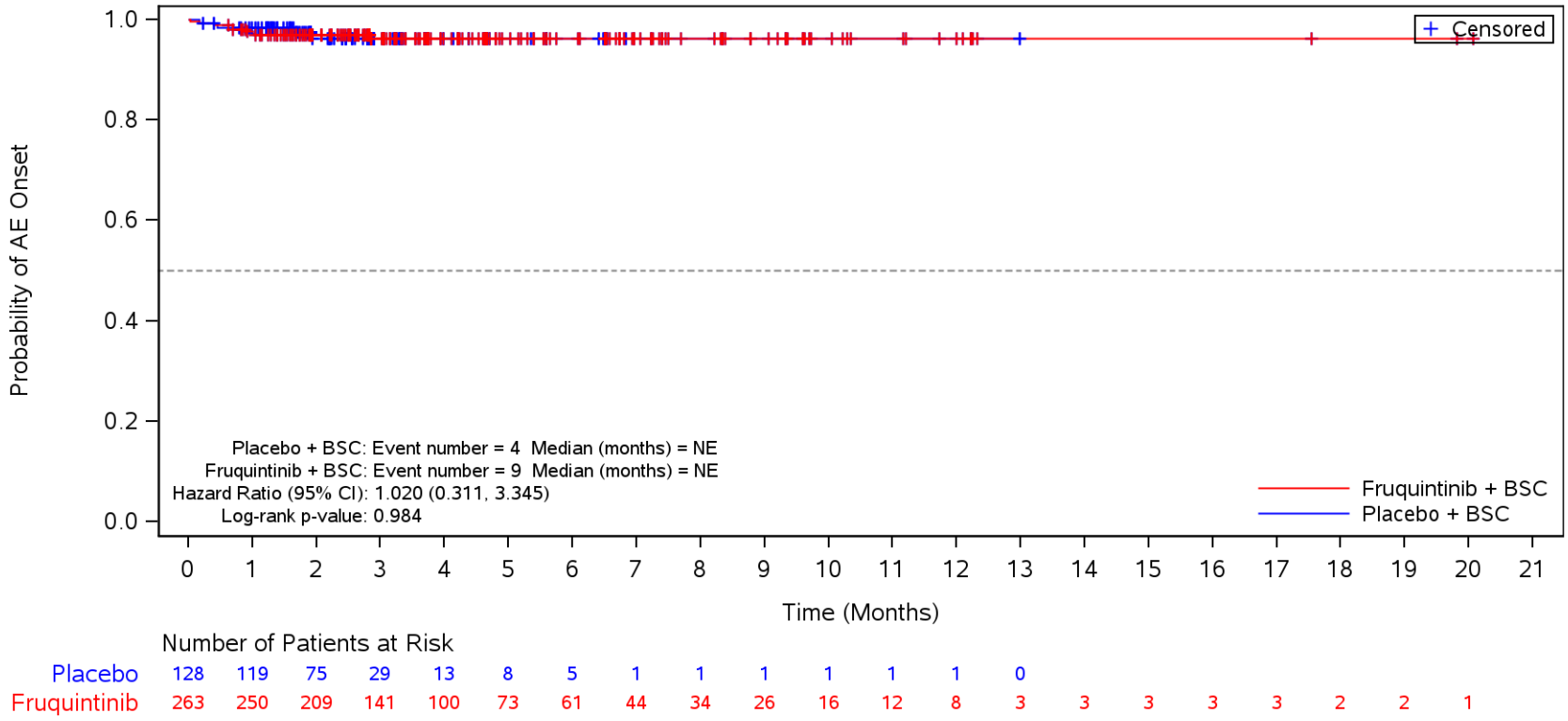
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
ECOG: 1



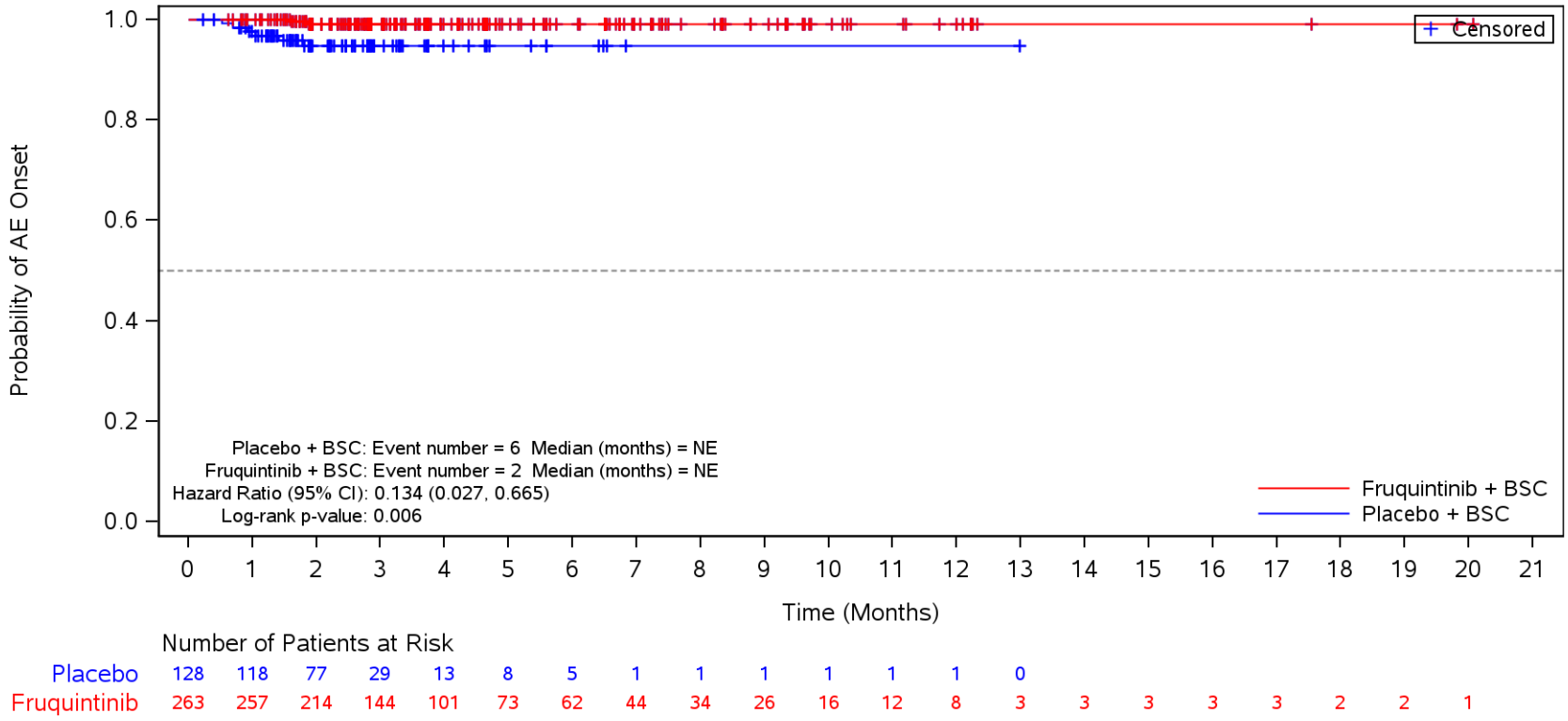
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
ECOG: 1



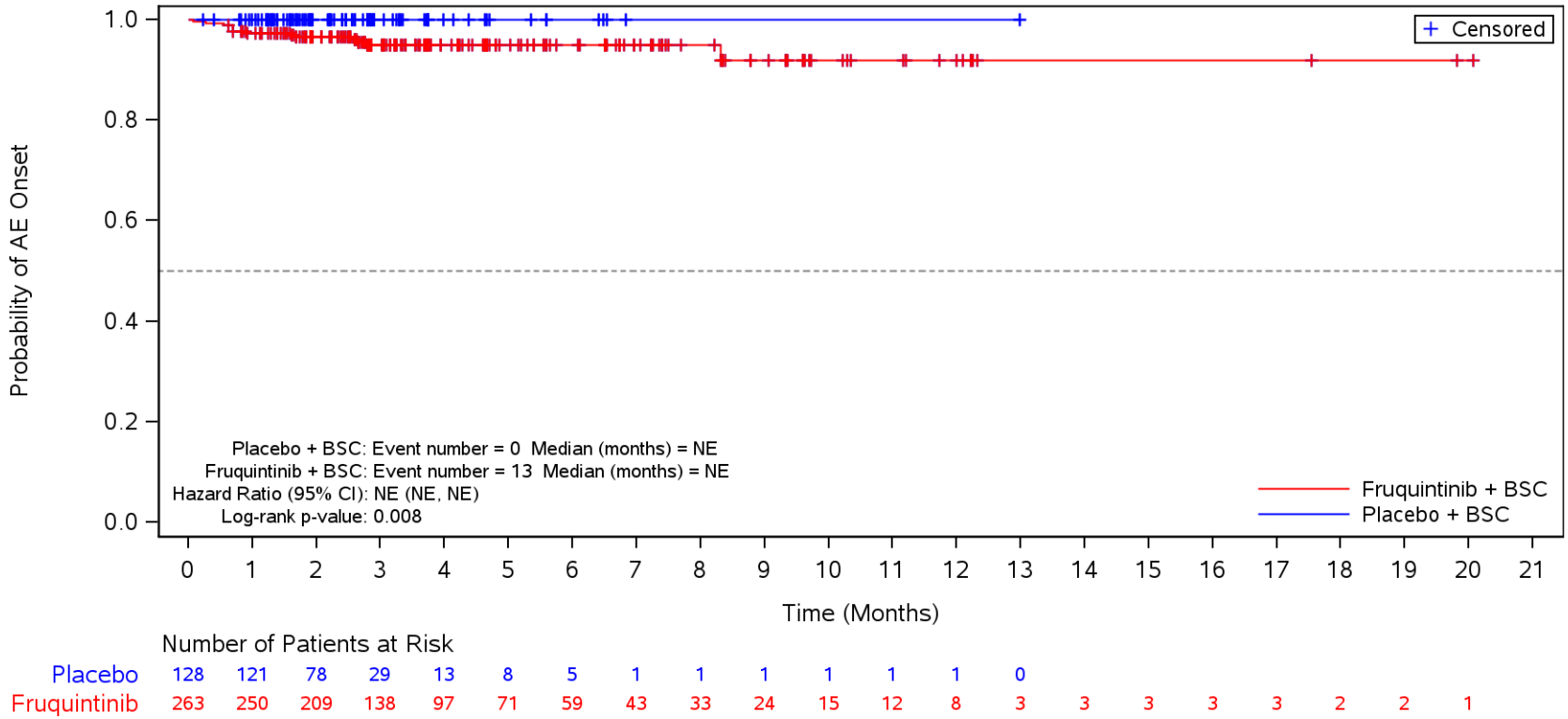
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
ECOG: 1



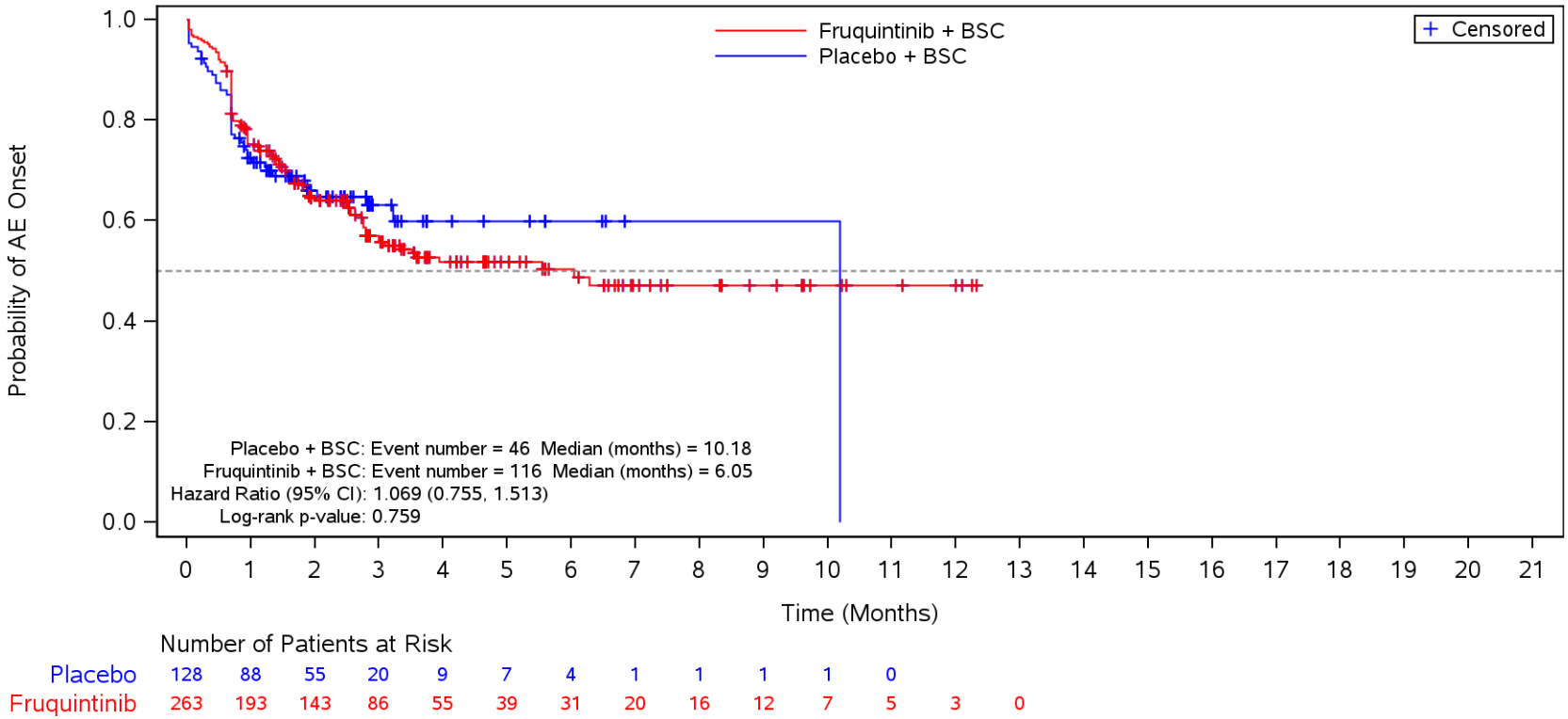
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**
ECOG: 1



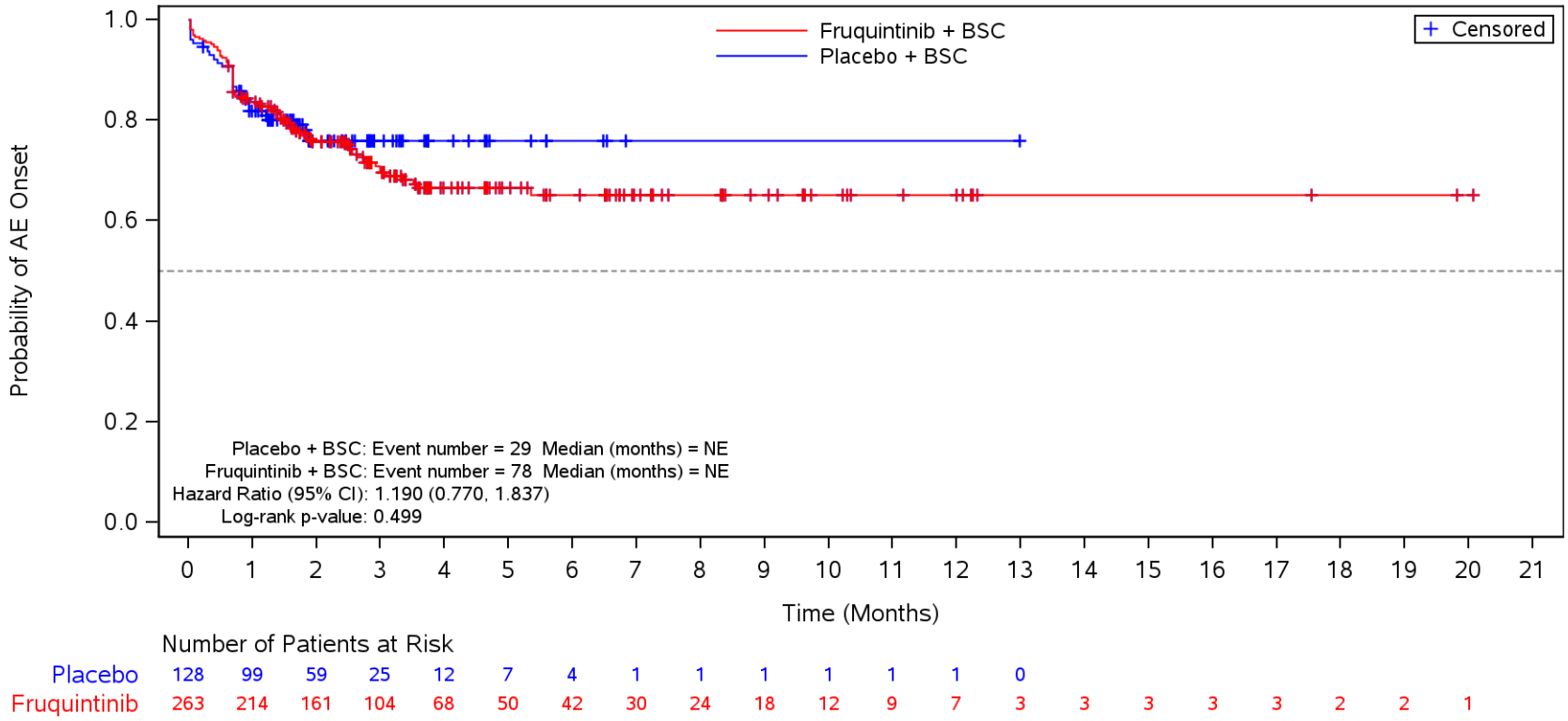
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
ECOG: 1



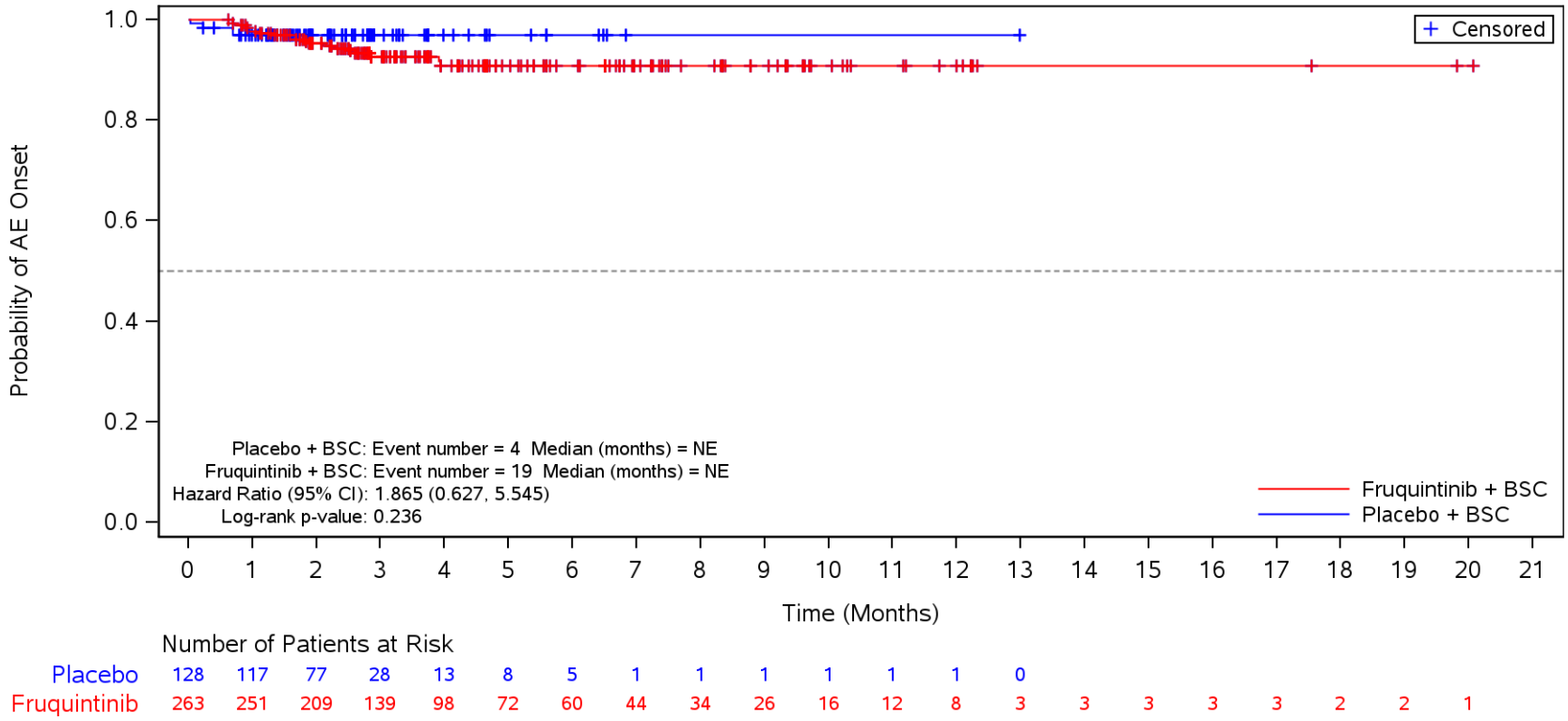
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
ECOG: 1



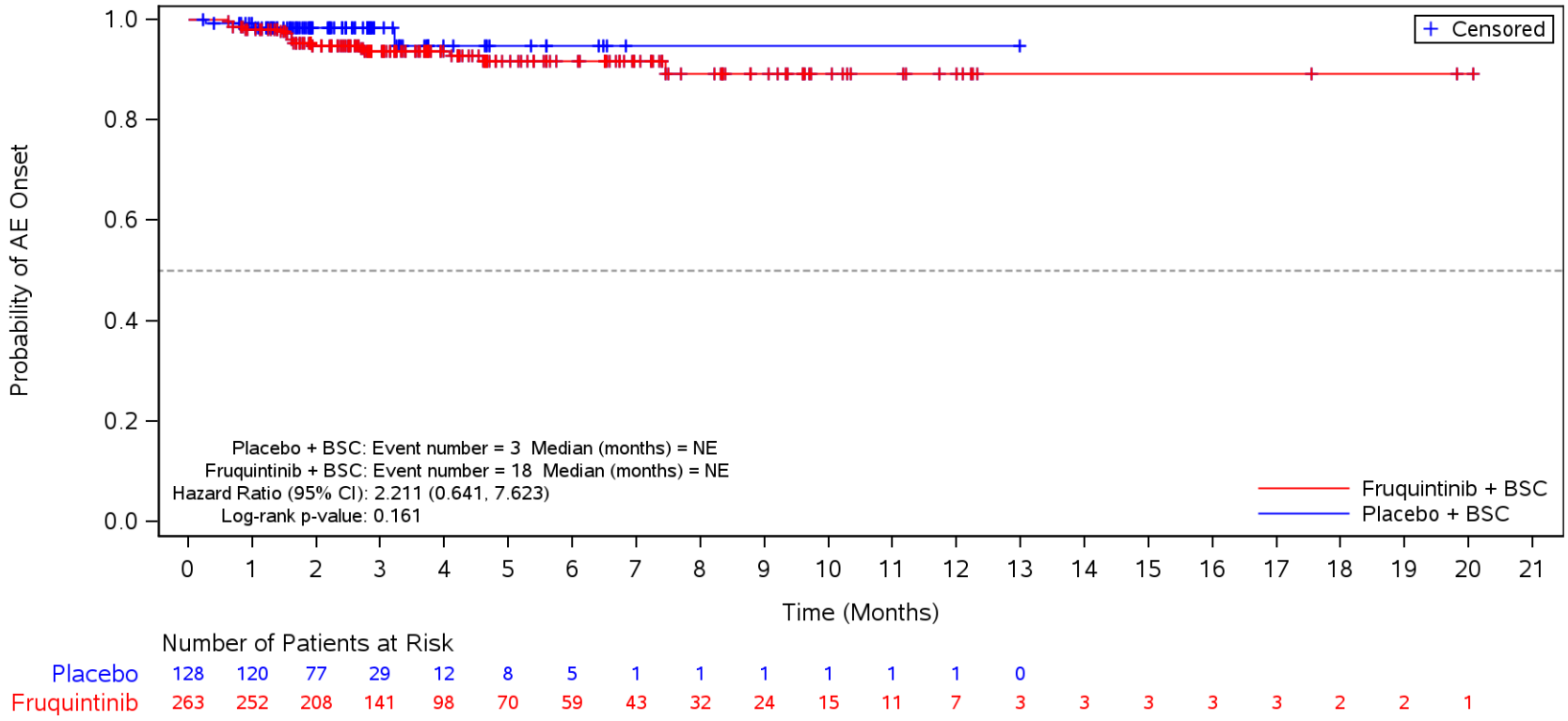
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
ECOG: 1



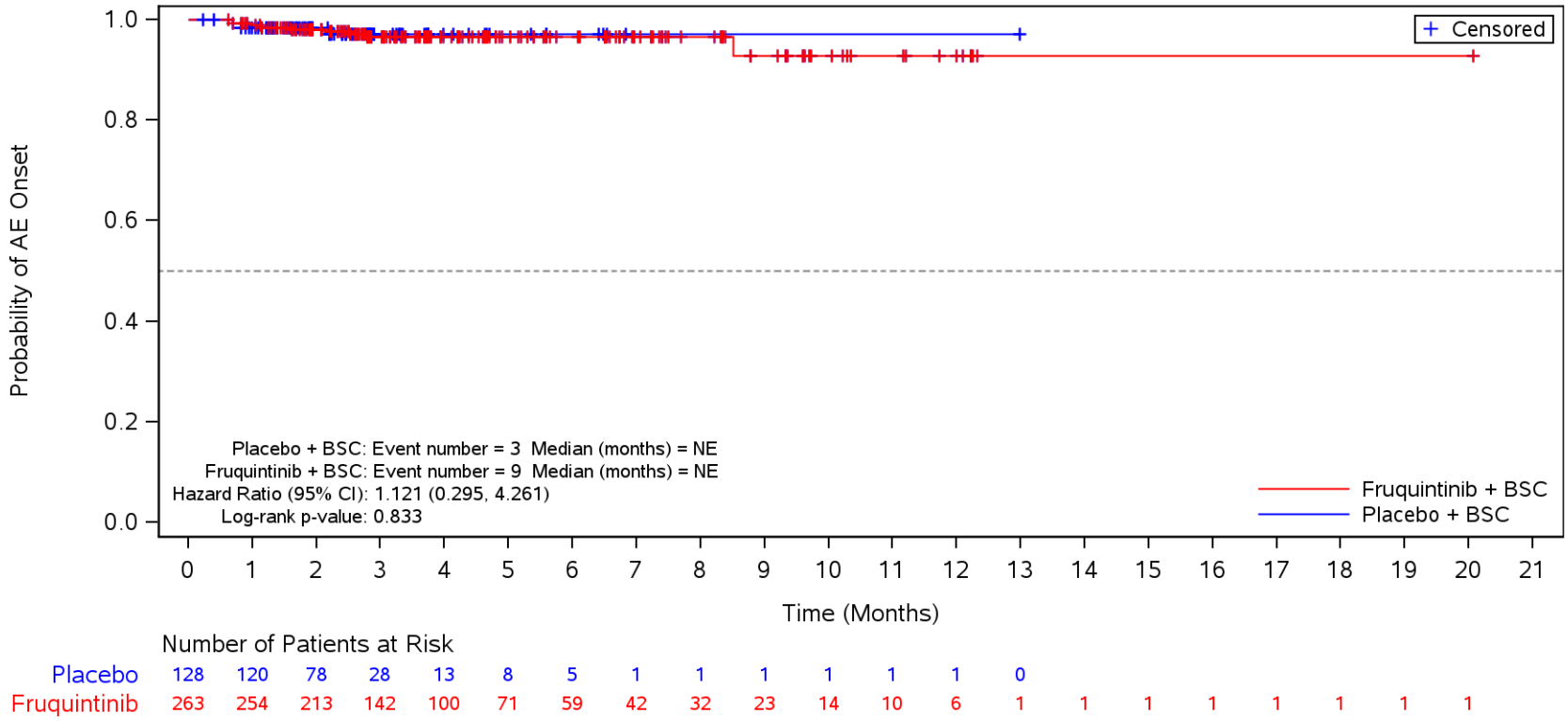
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
ECOG: 1



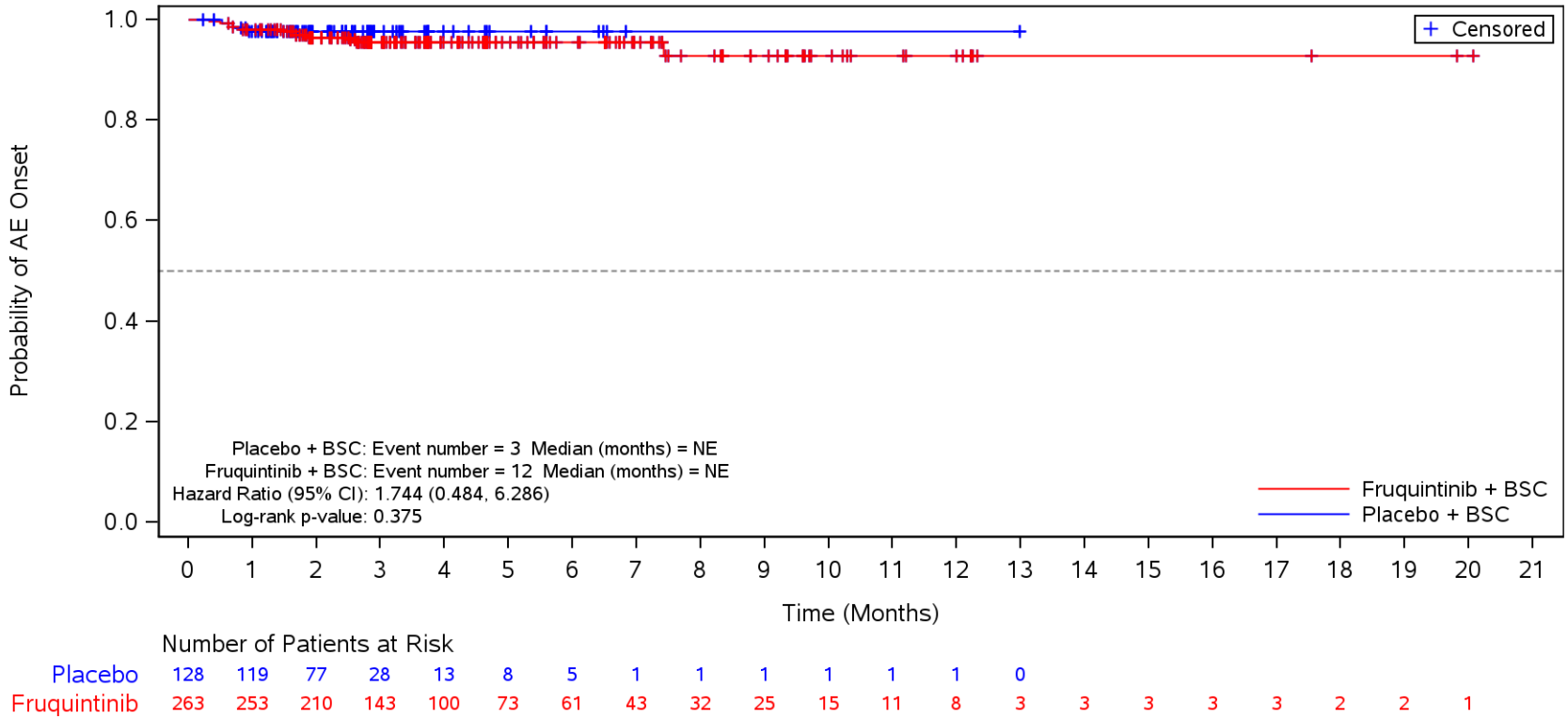
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
ECOG: 1



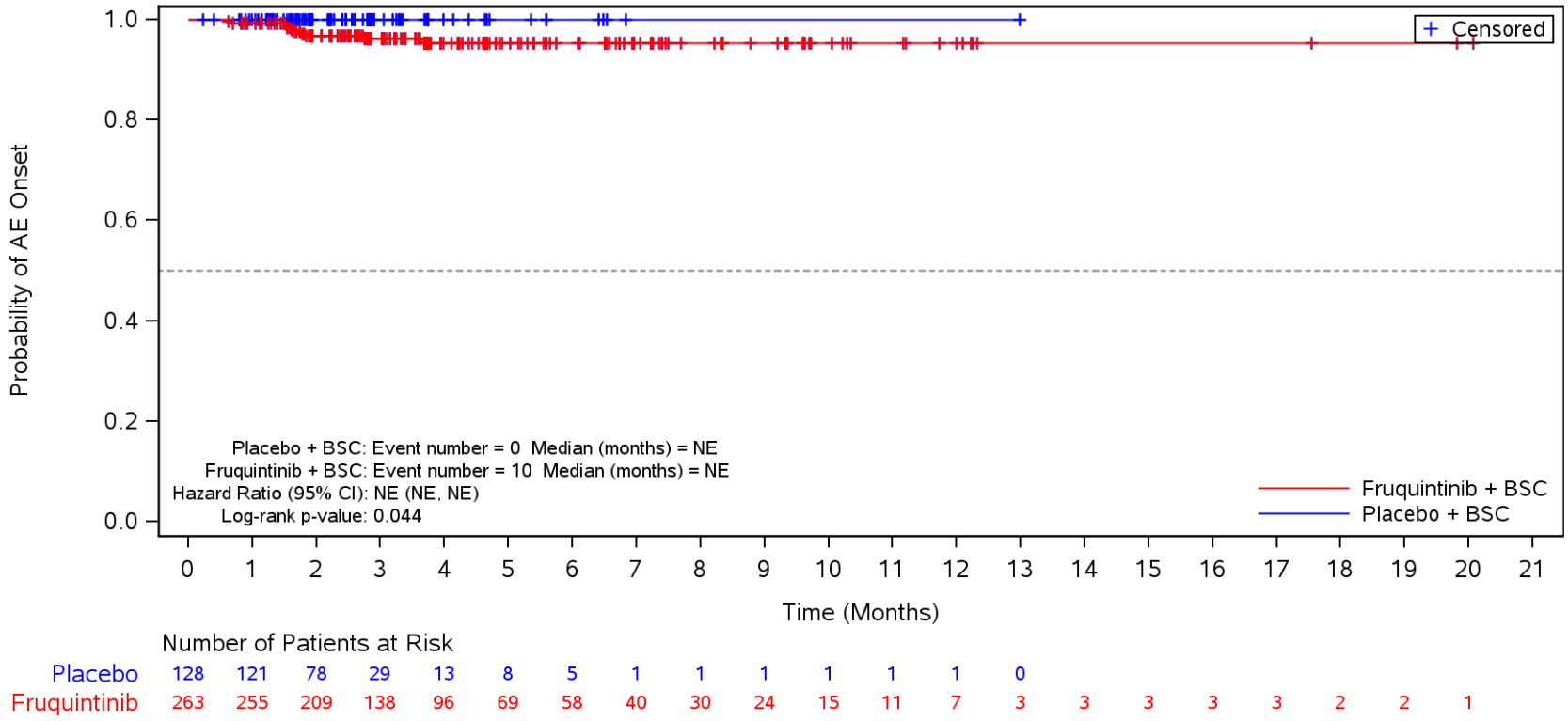
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
ECOG: 1



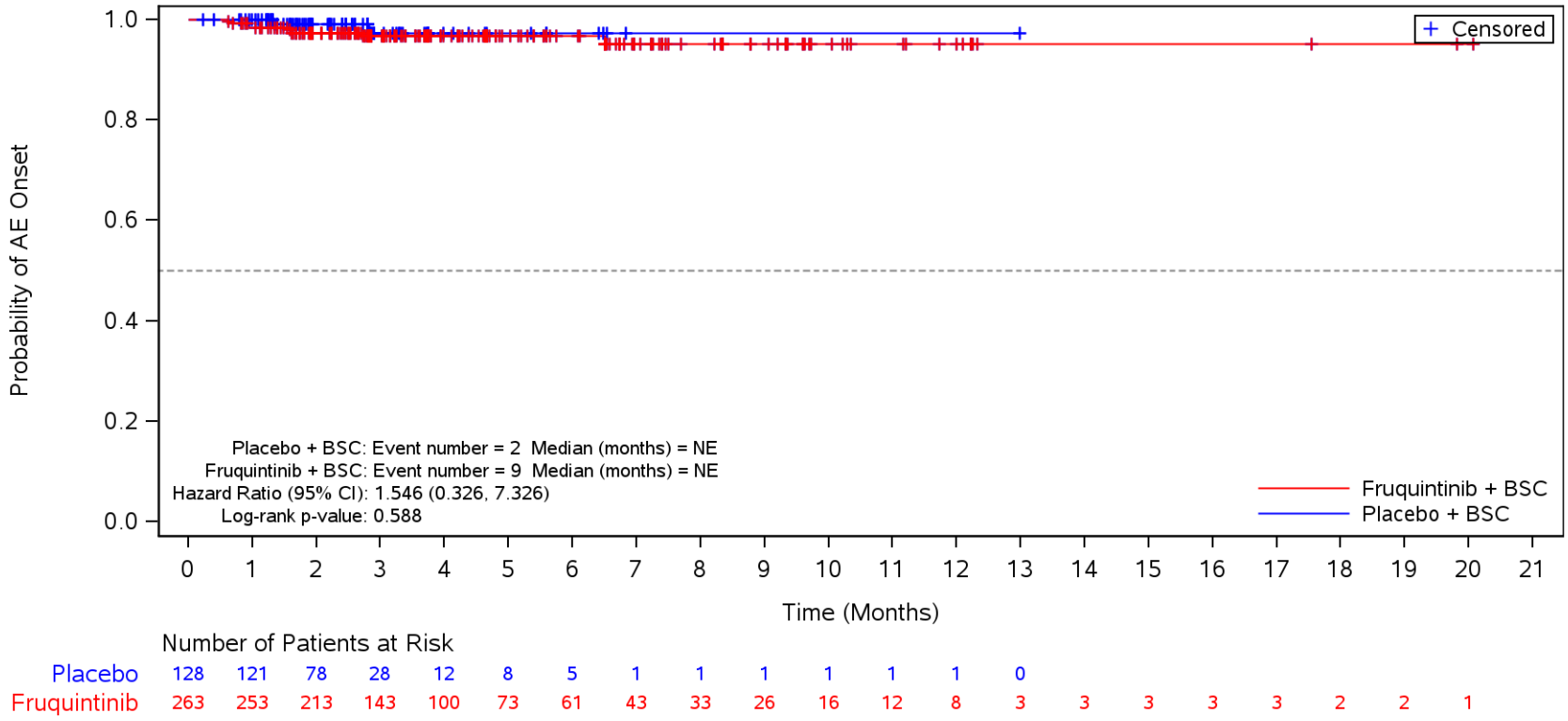
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
ECOG: 1



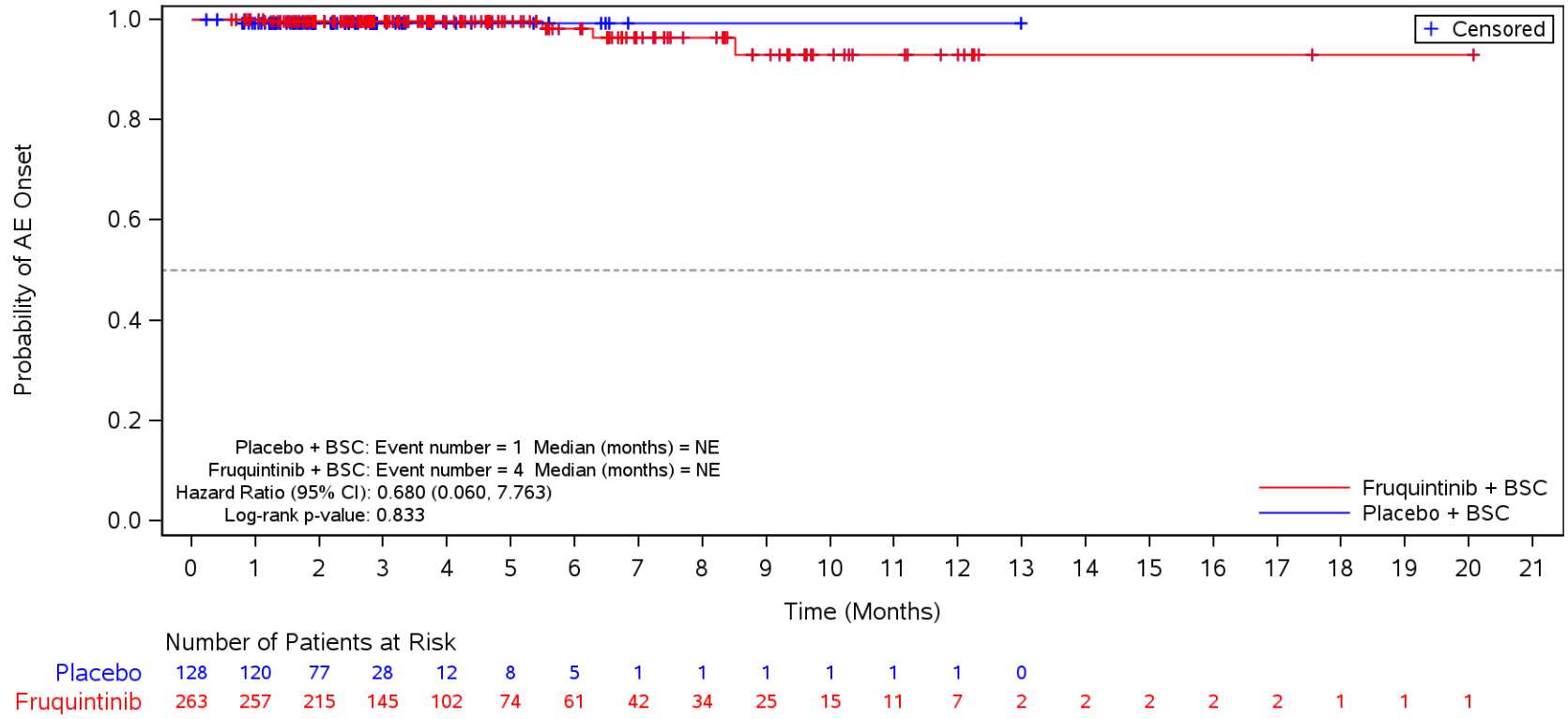
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
ECOG: 1



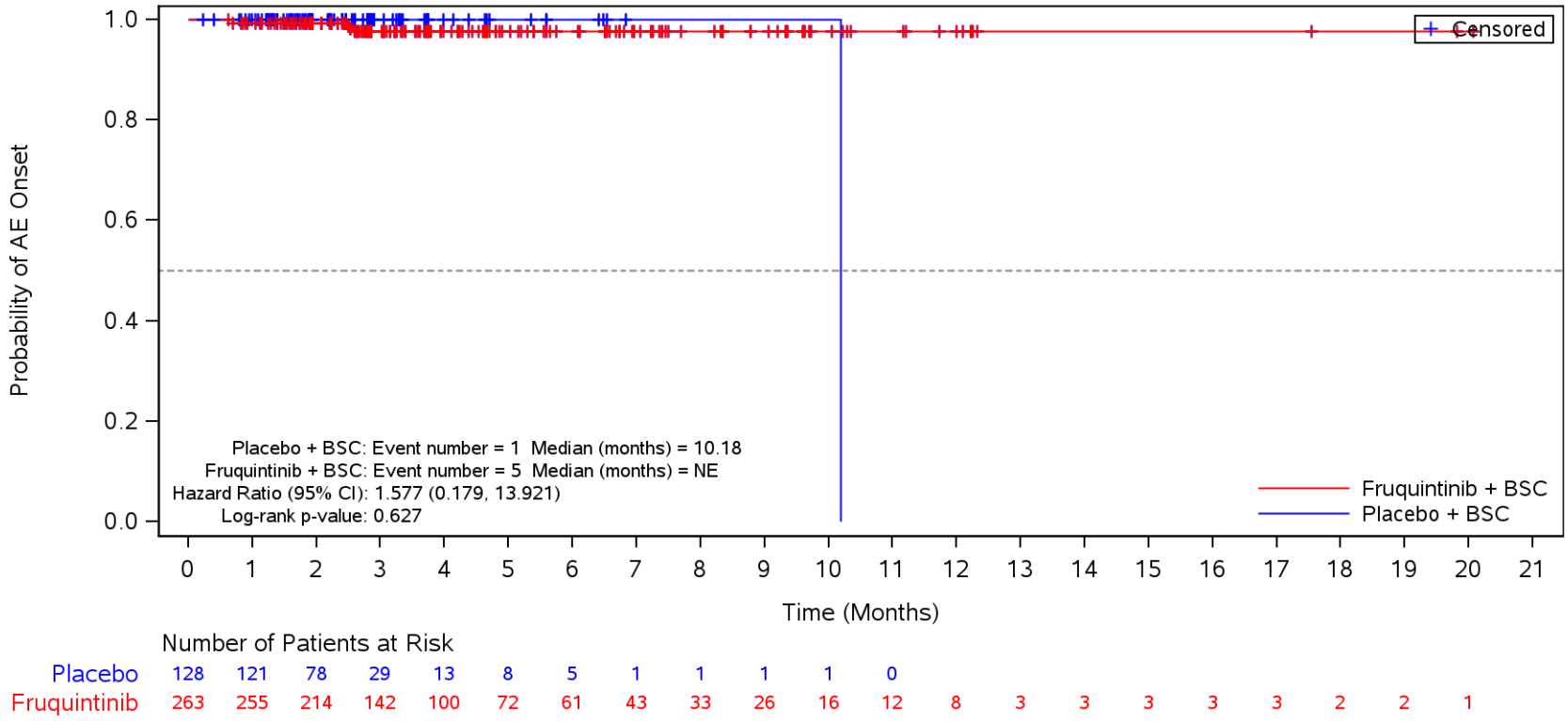
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**
ECOG: 1



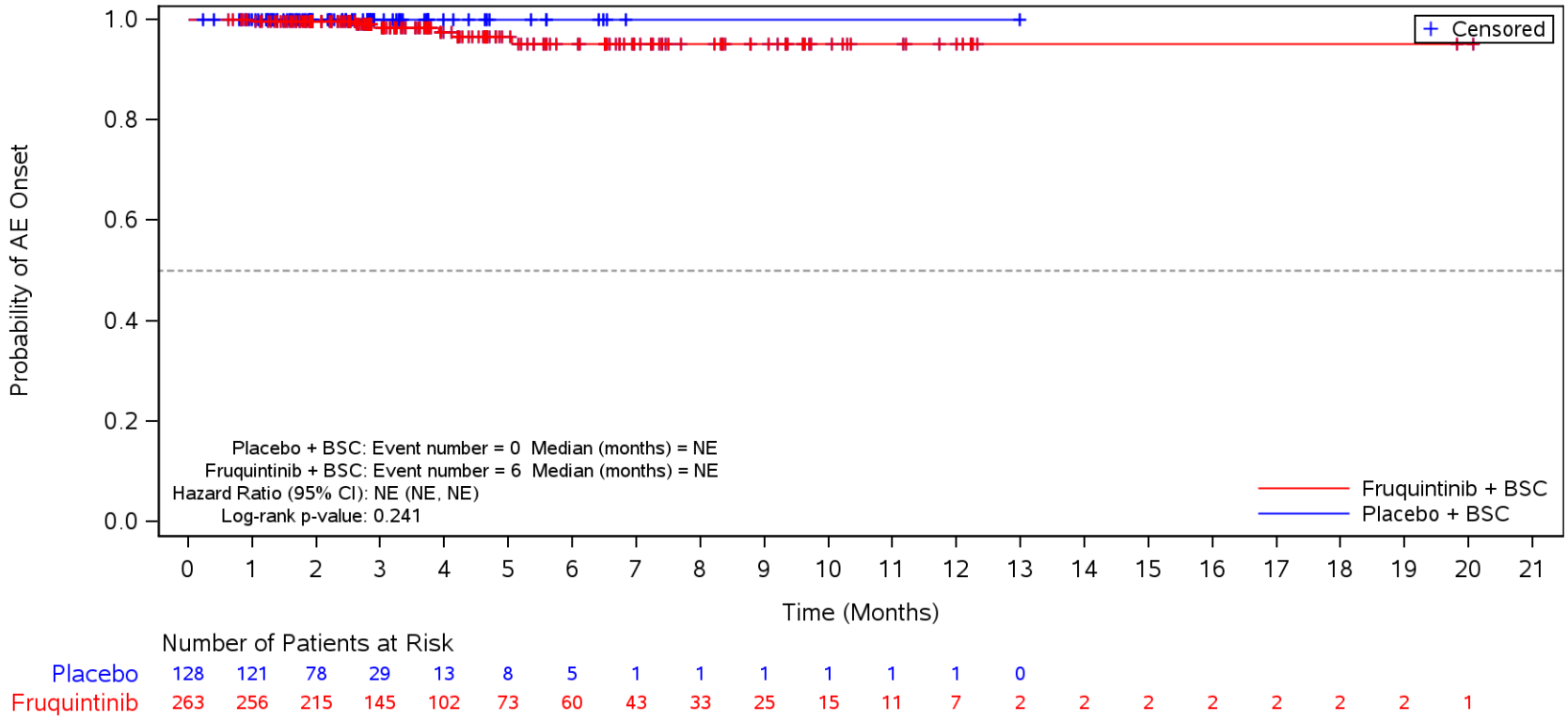
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
ECOG: 1



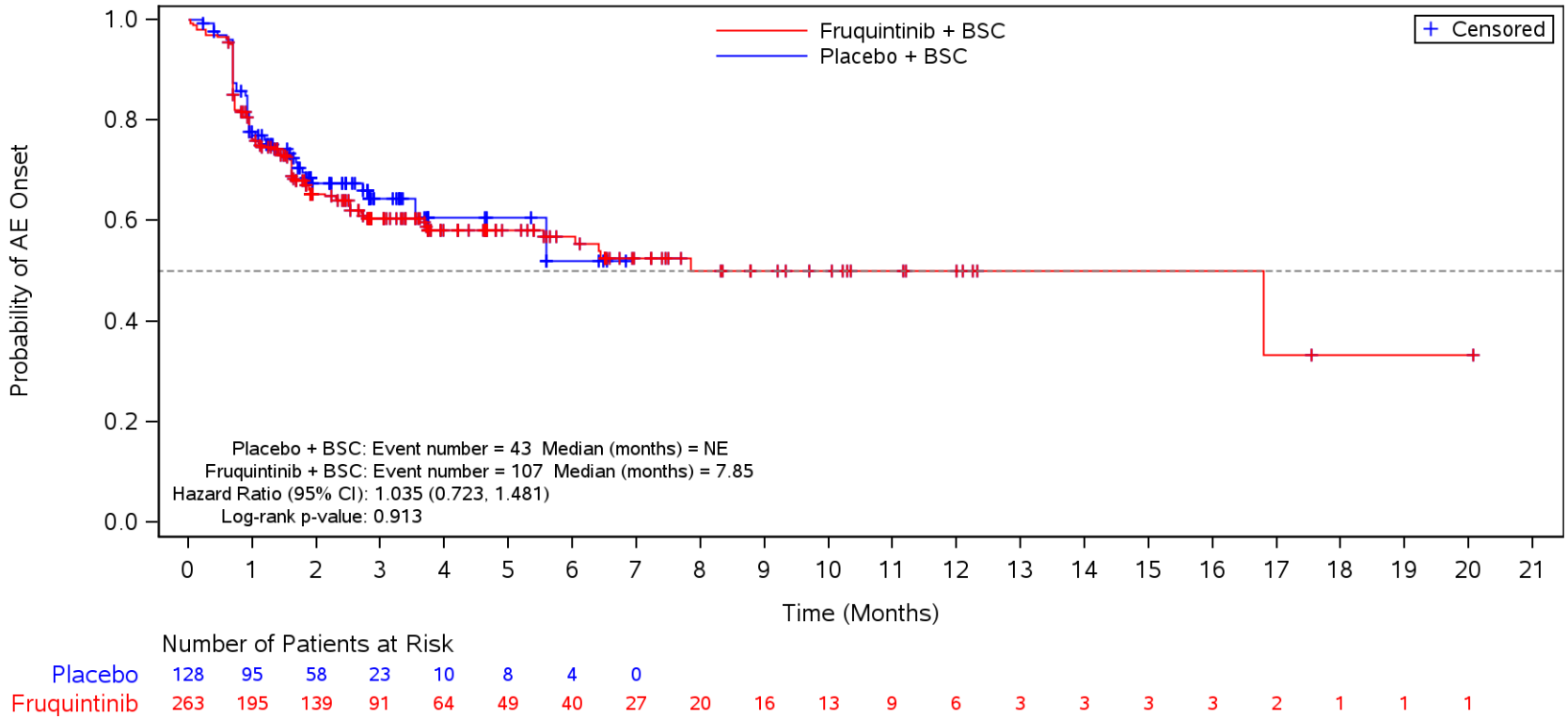
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
ECOG: 1



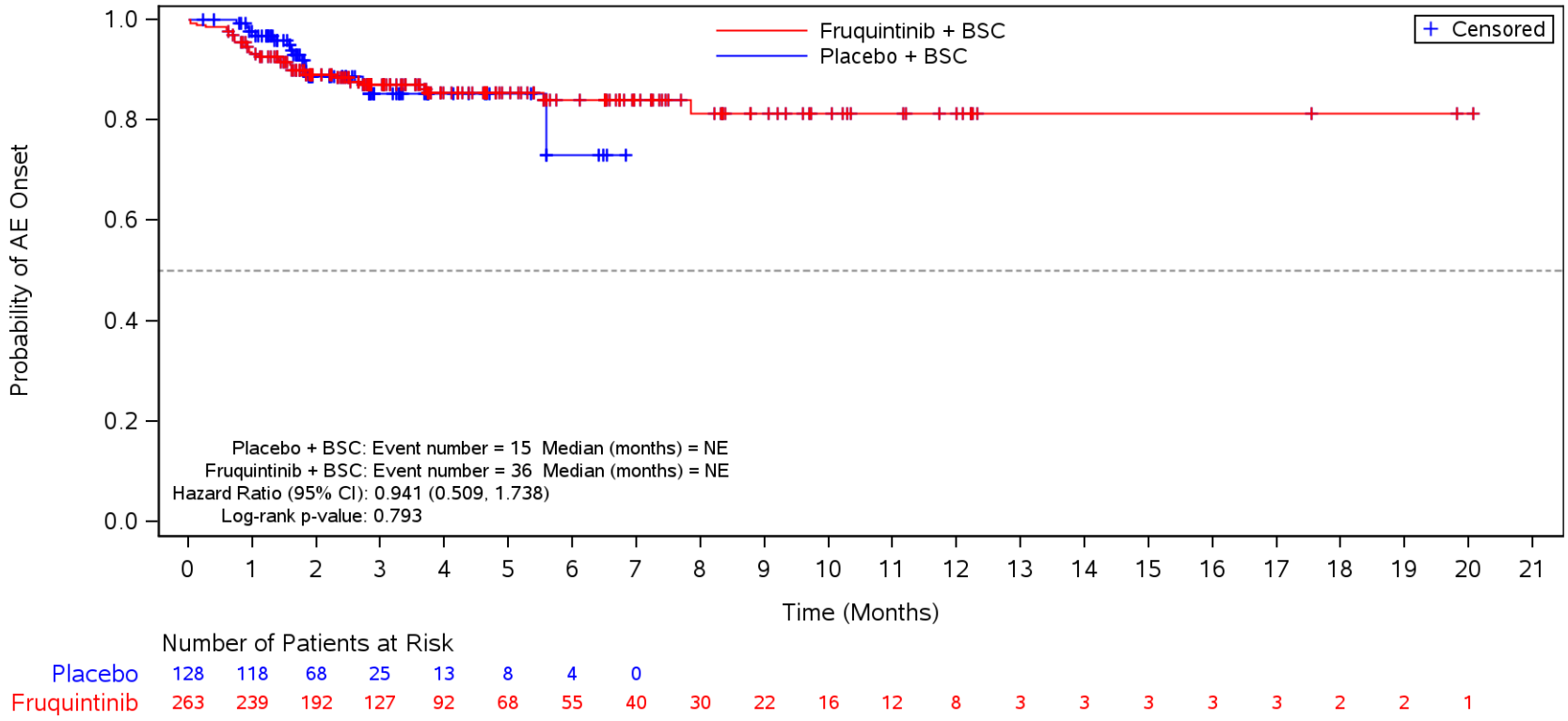
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations**
ECOG: 1



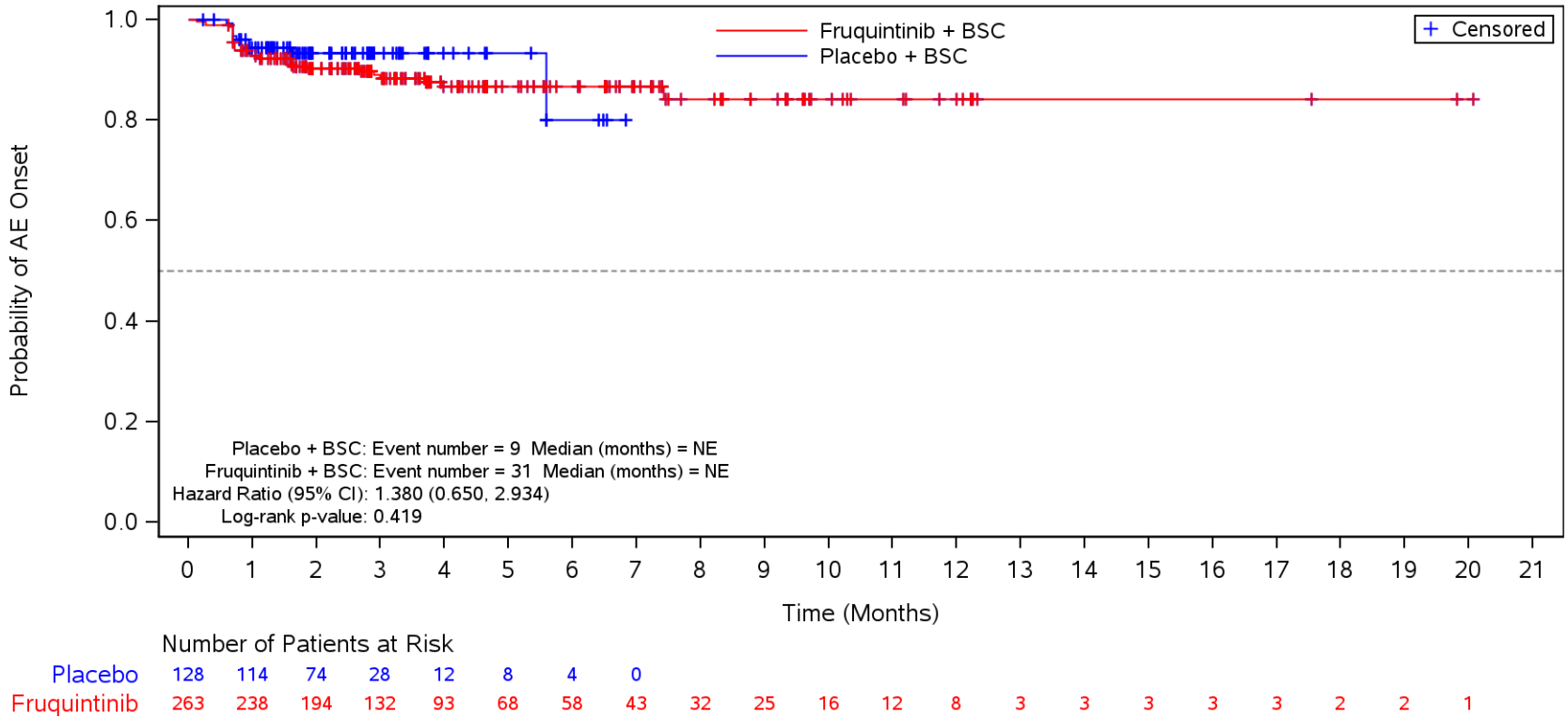
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
ECOG: 1



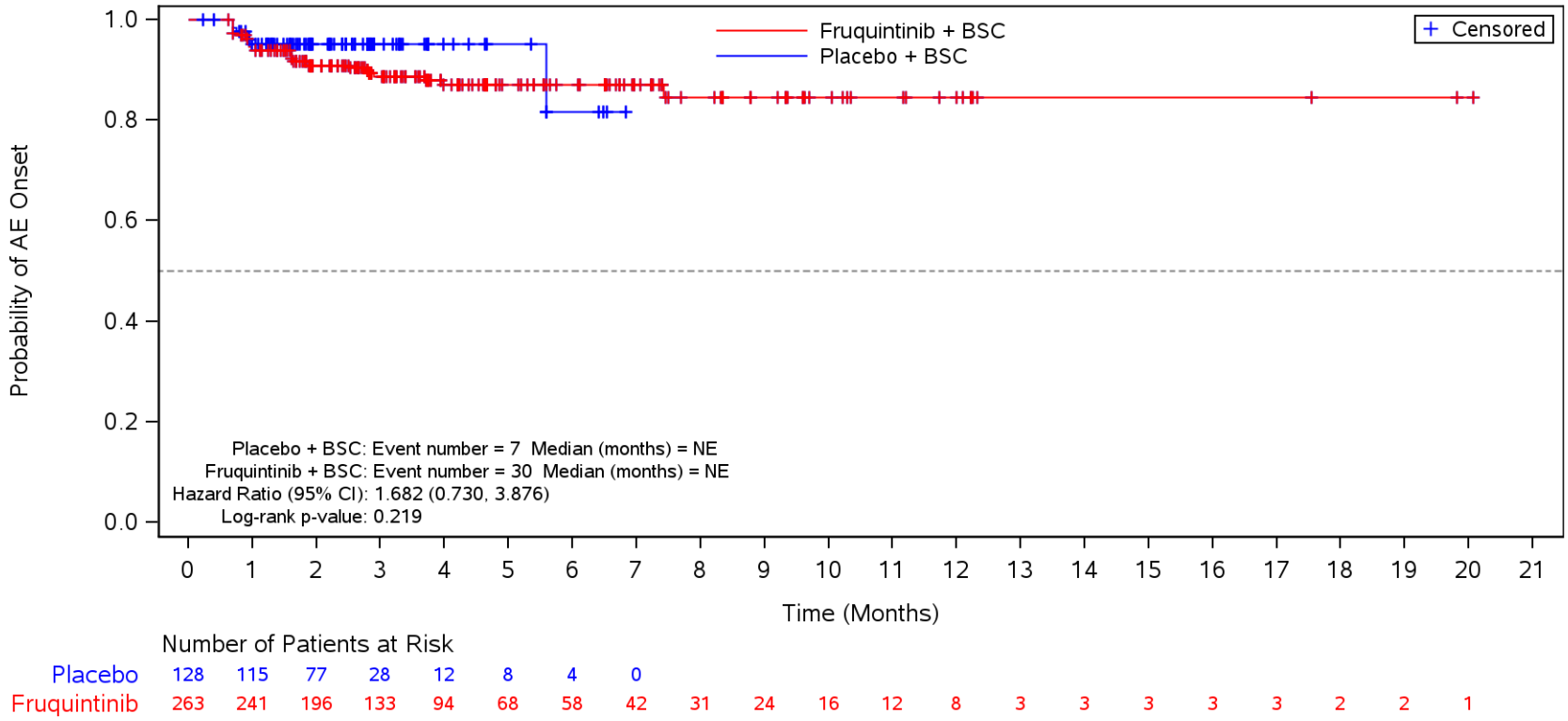
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
ECOG: 1



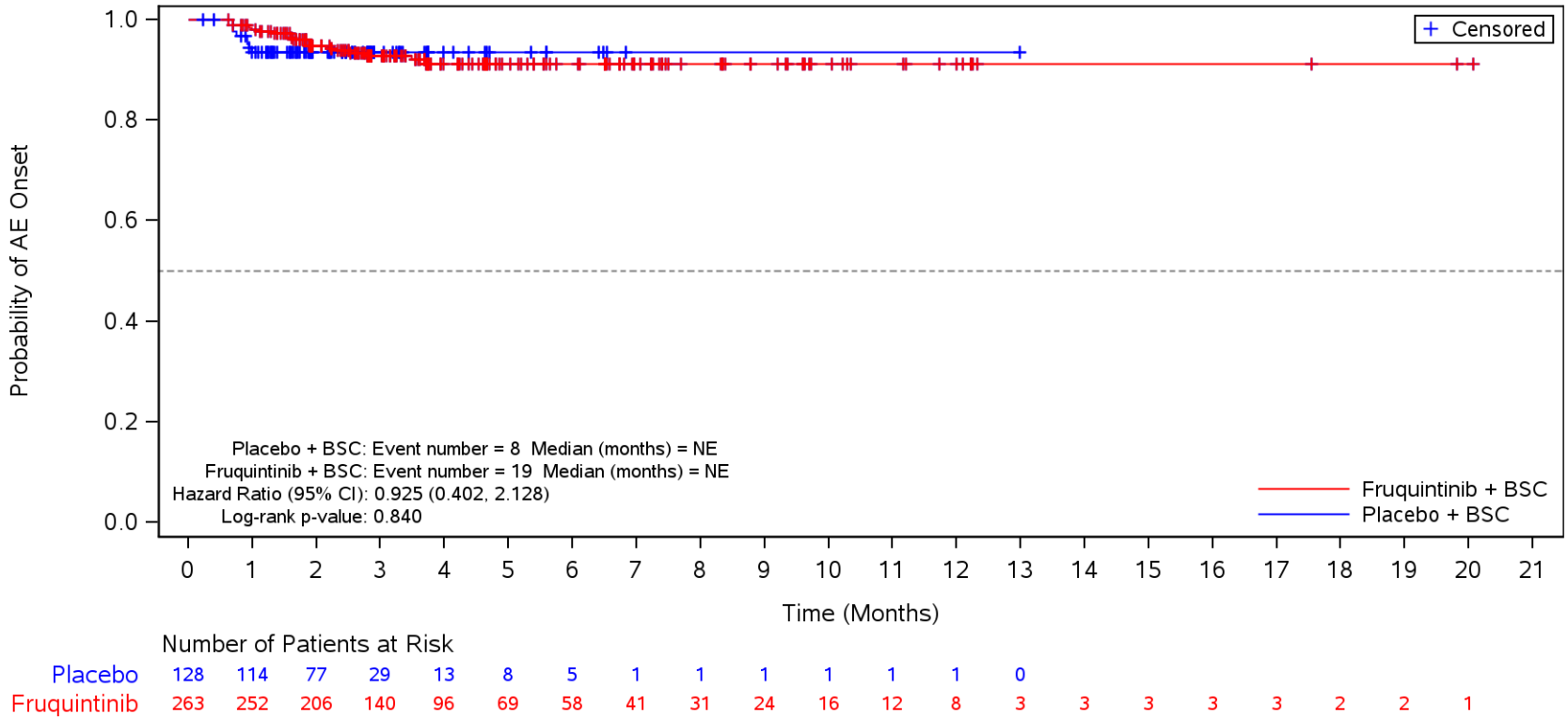
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
ECOG: 1



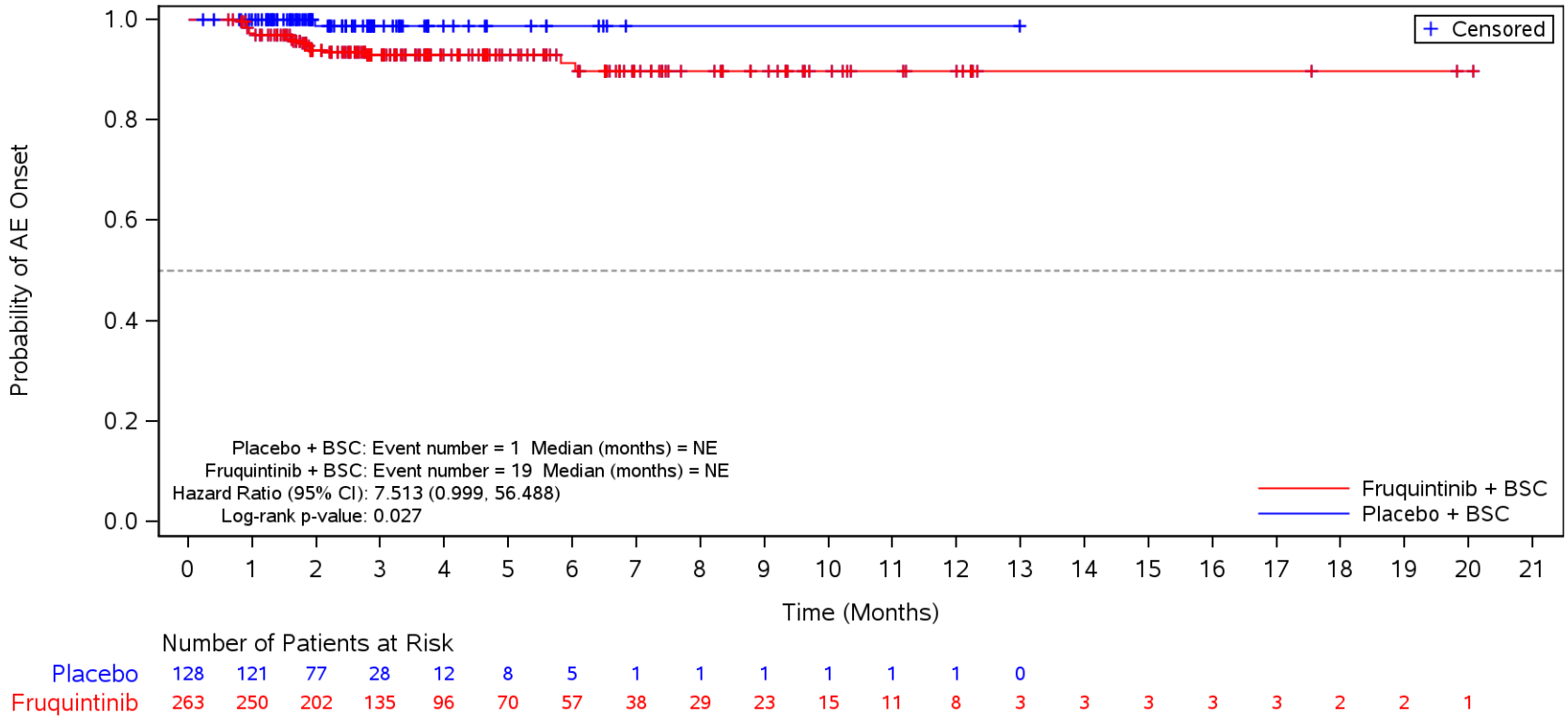
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
ECOG: 1



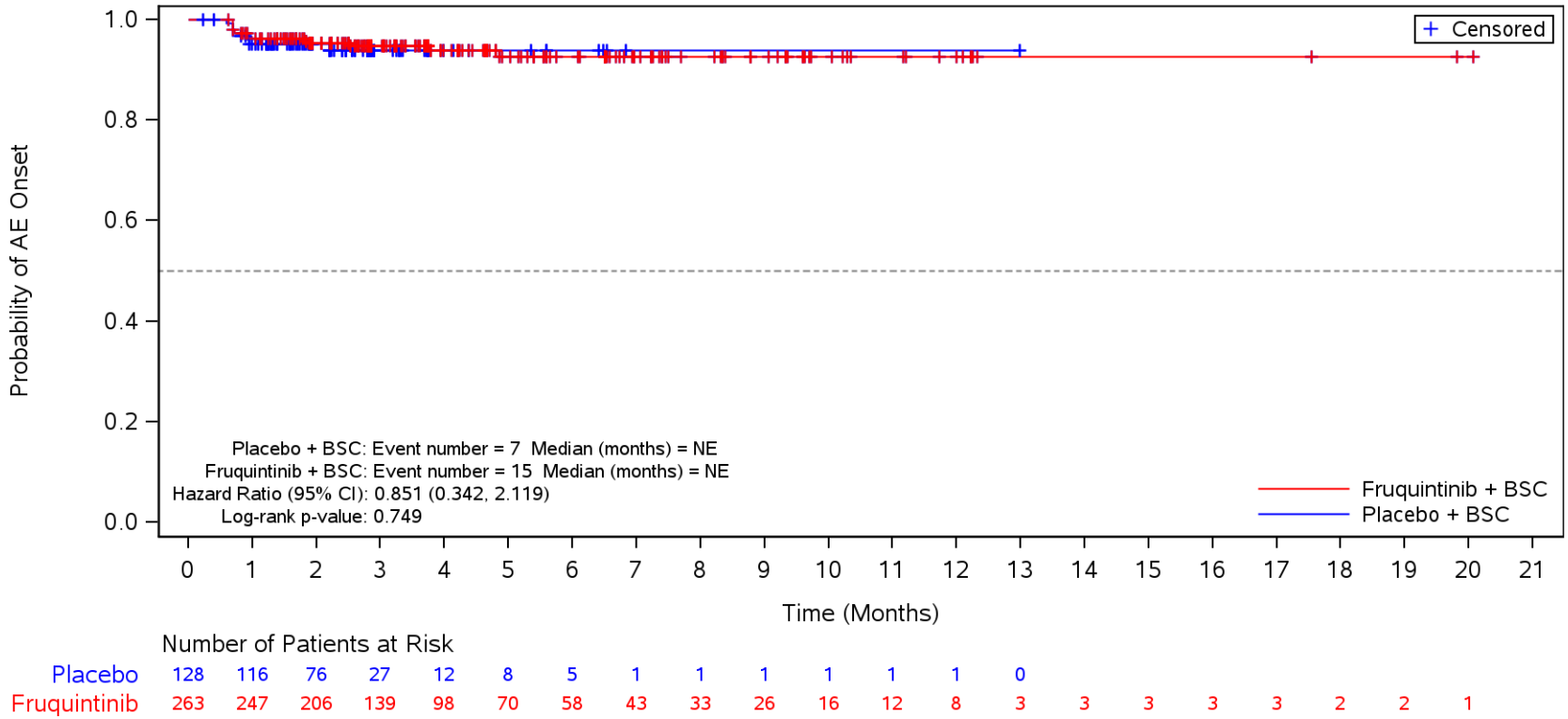
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
ECOG: 1



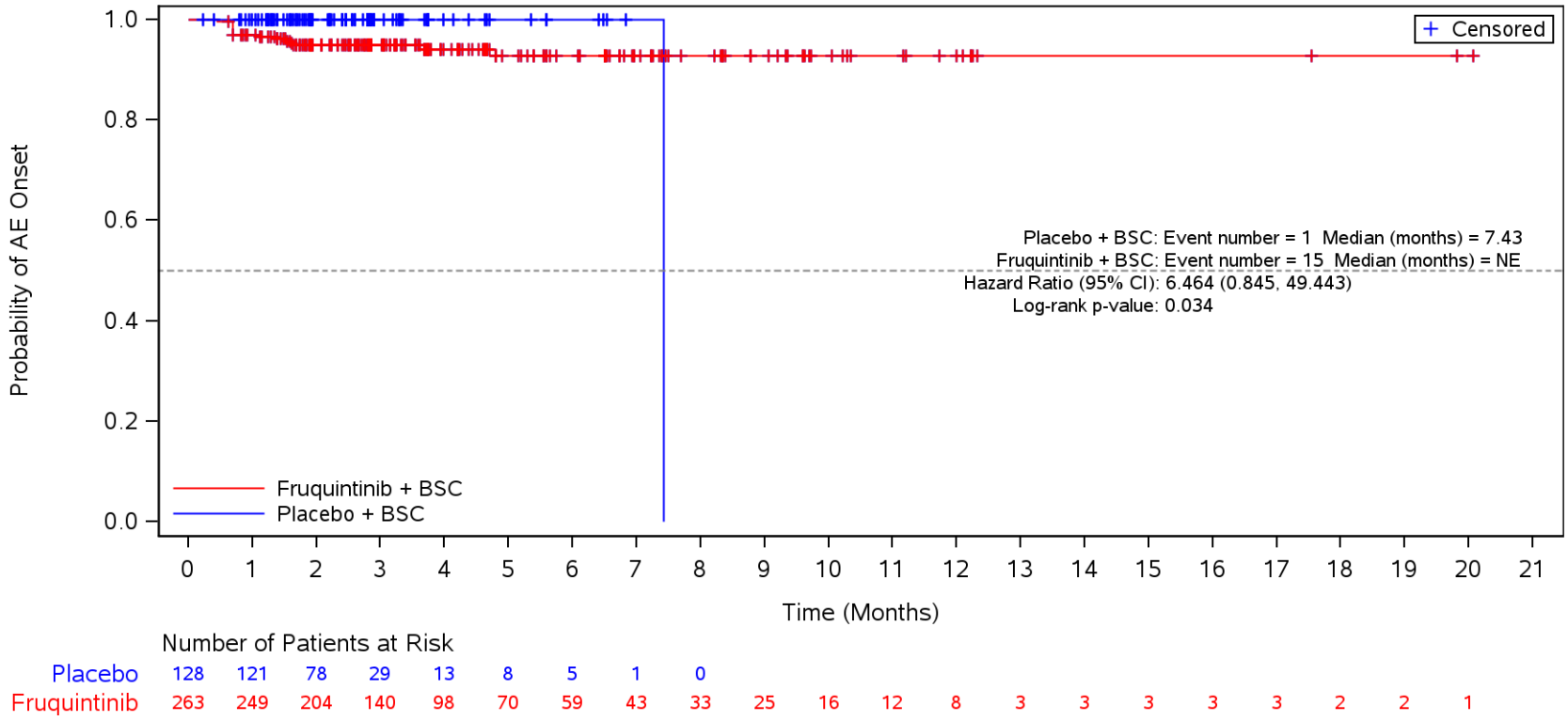
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
ECOG: 1



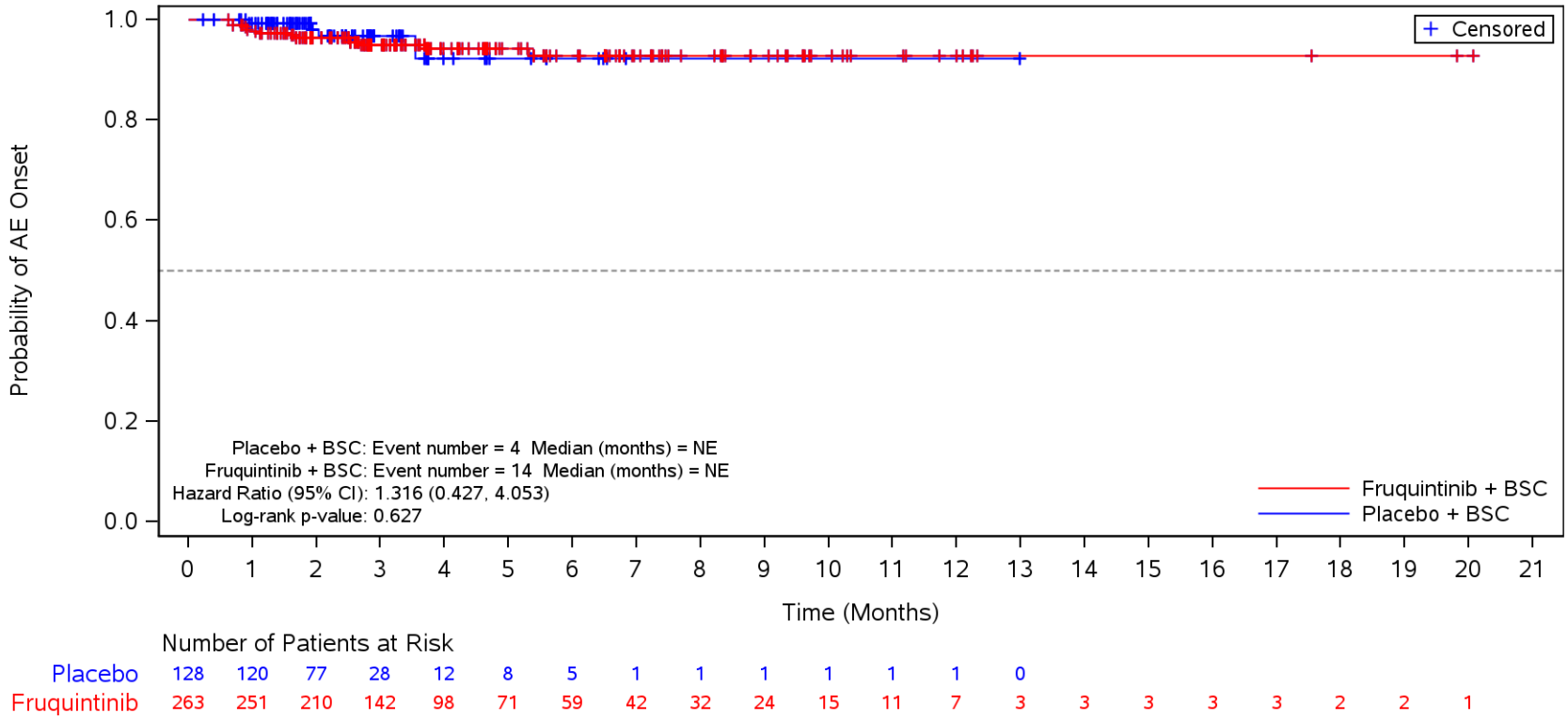
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
ECOG: 1



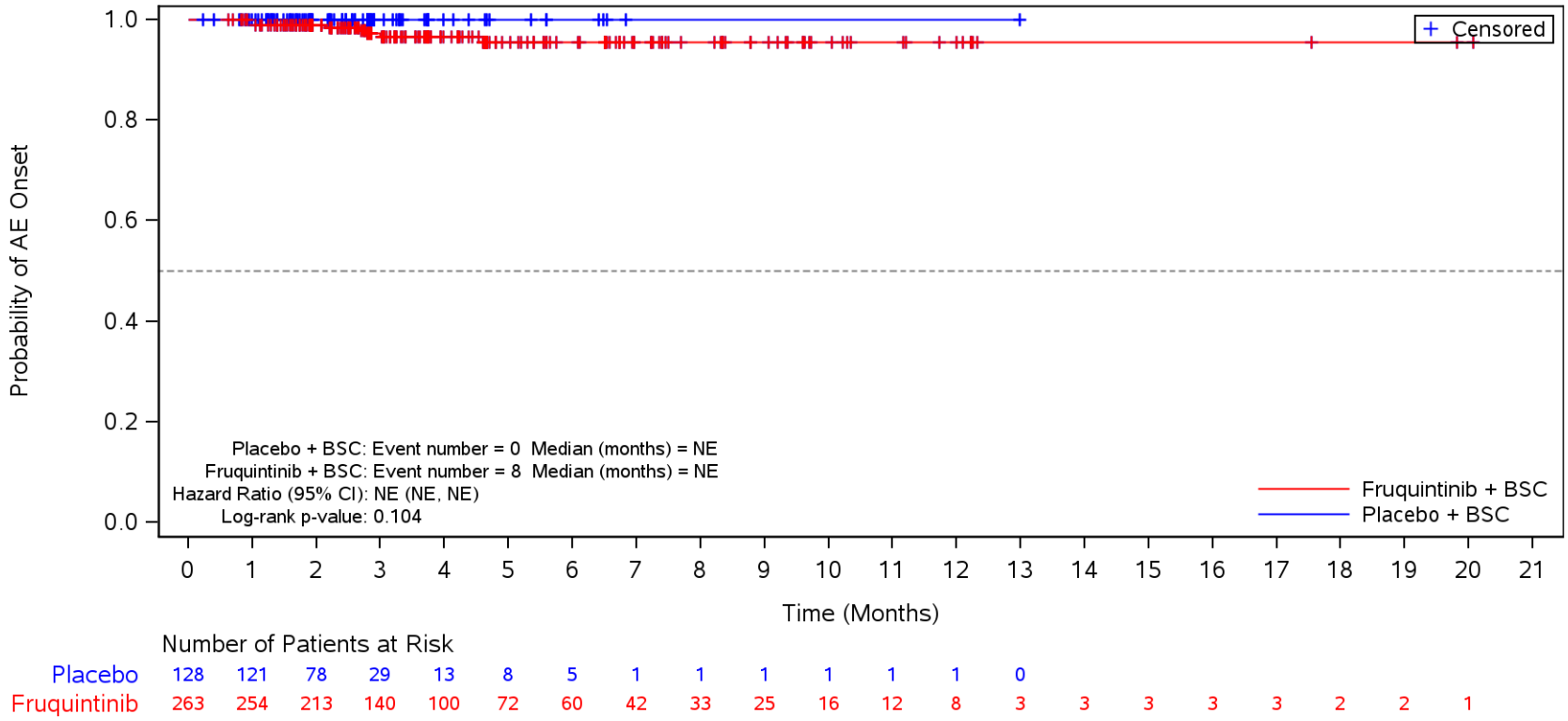
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
ECOG: 1



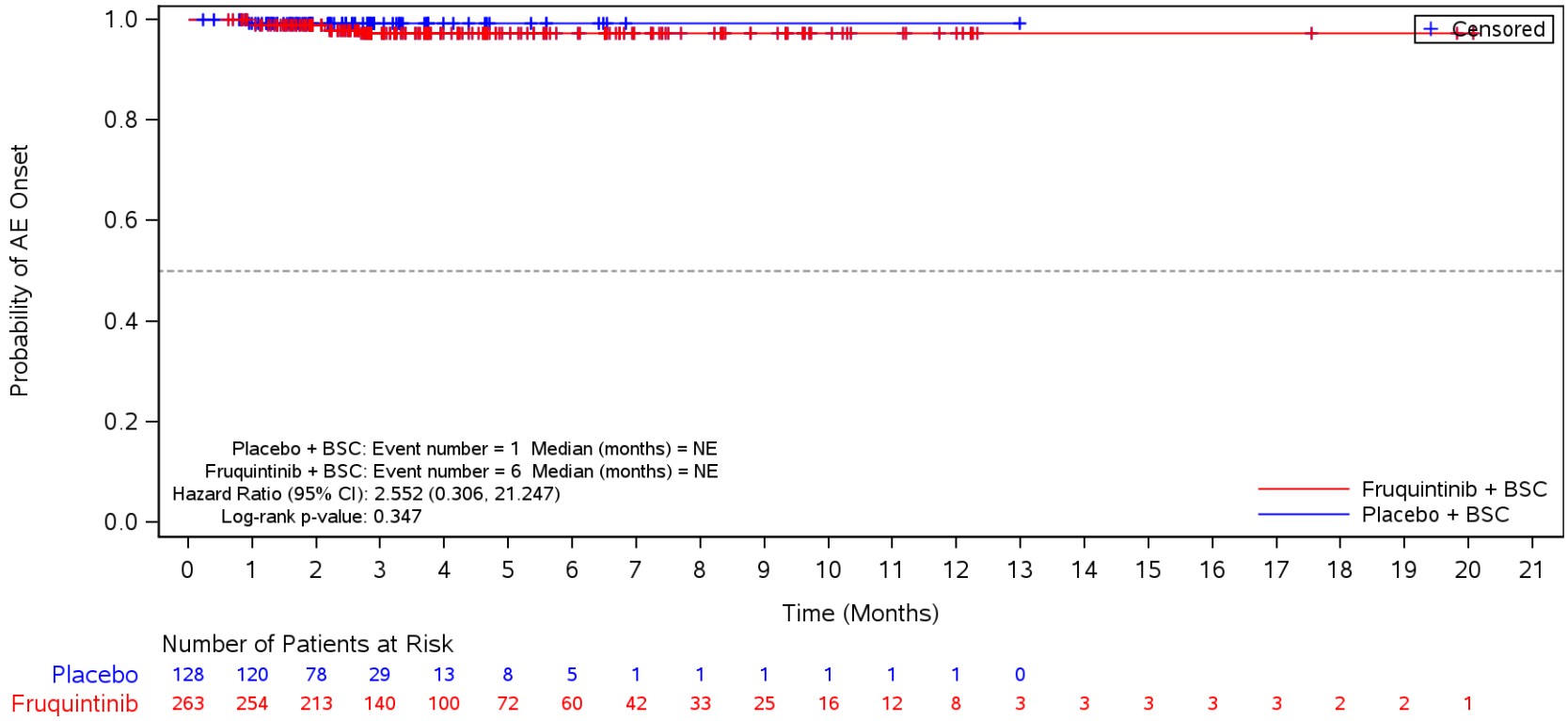
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
ECOG: 1



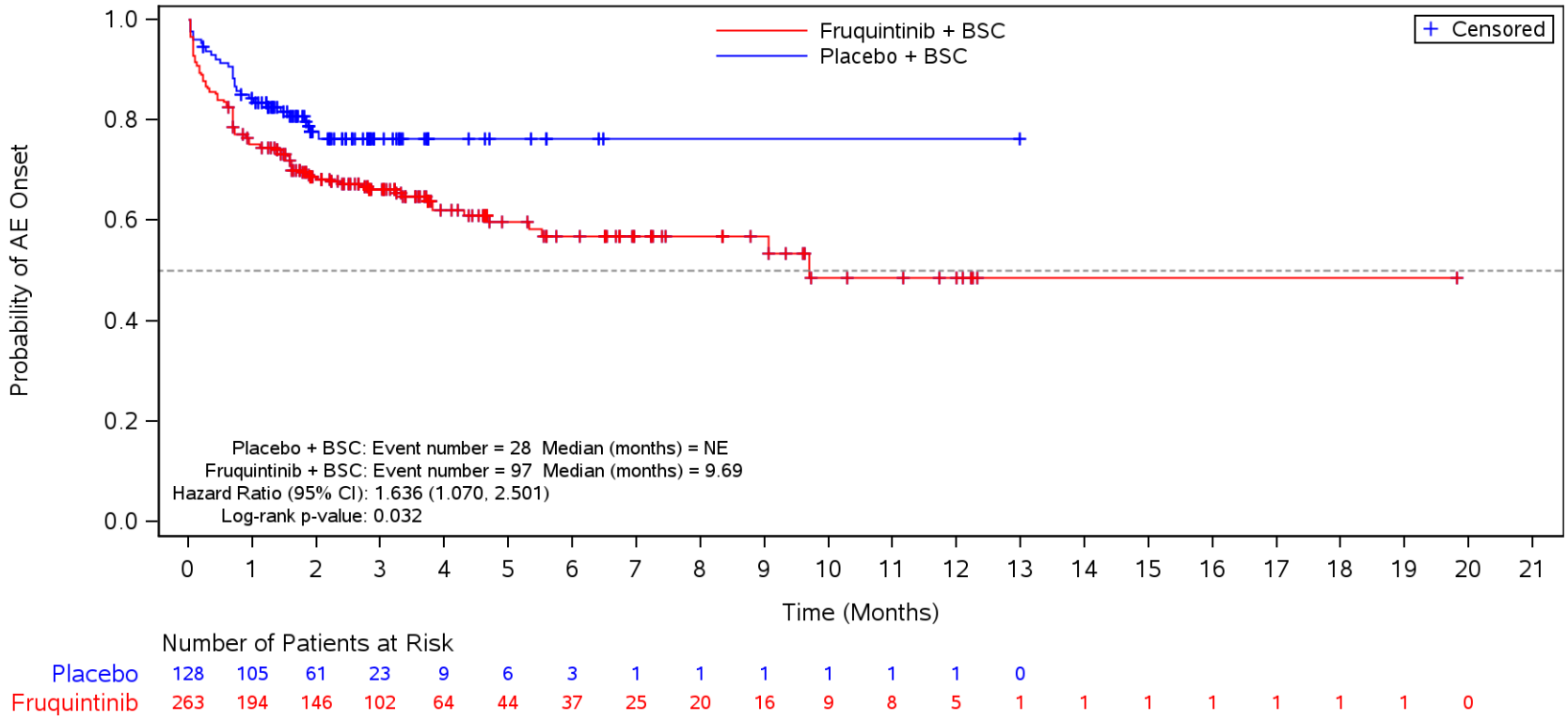
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
ECOG: 1



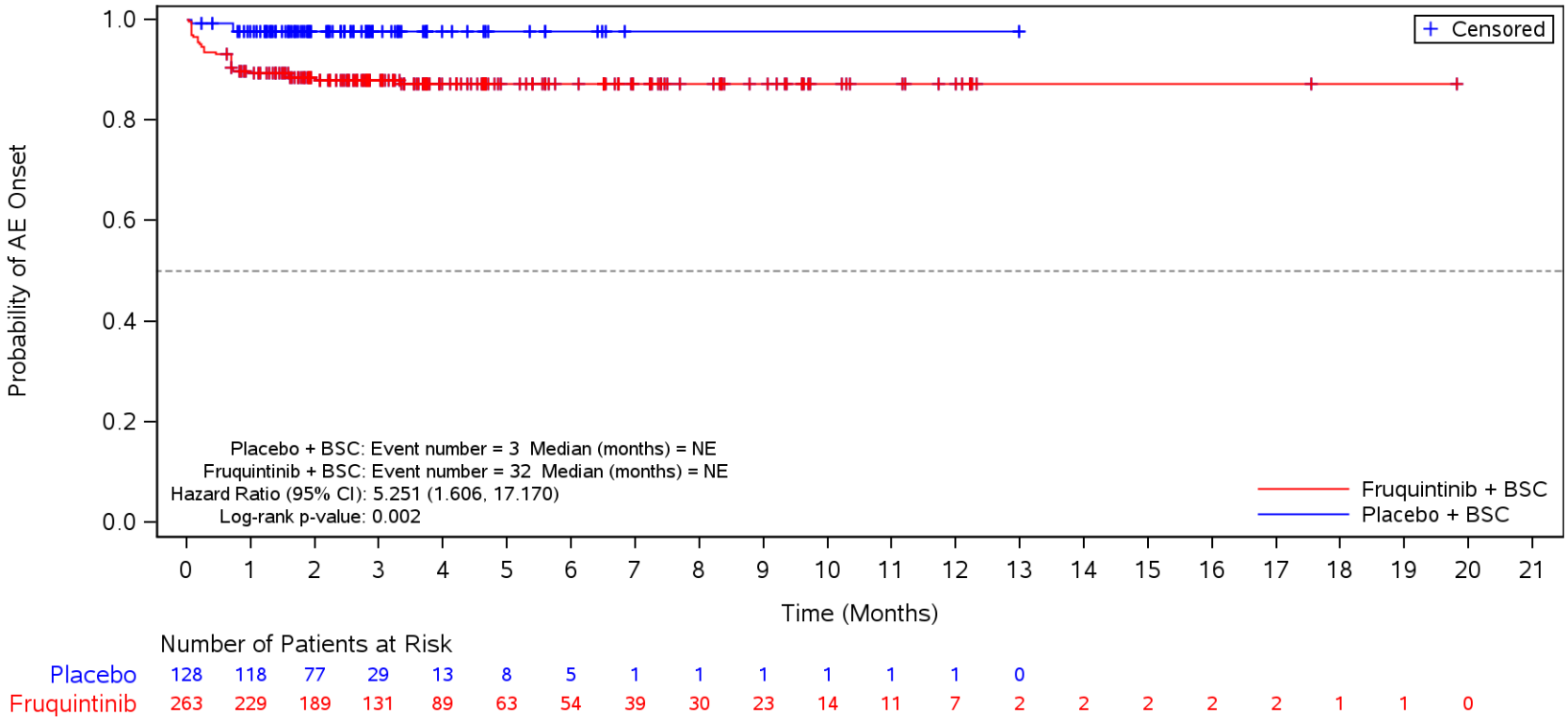
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
ECOG: 1



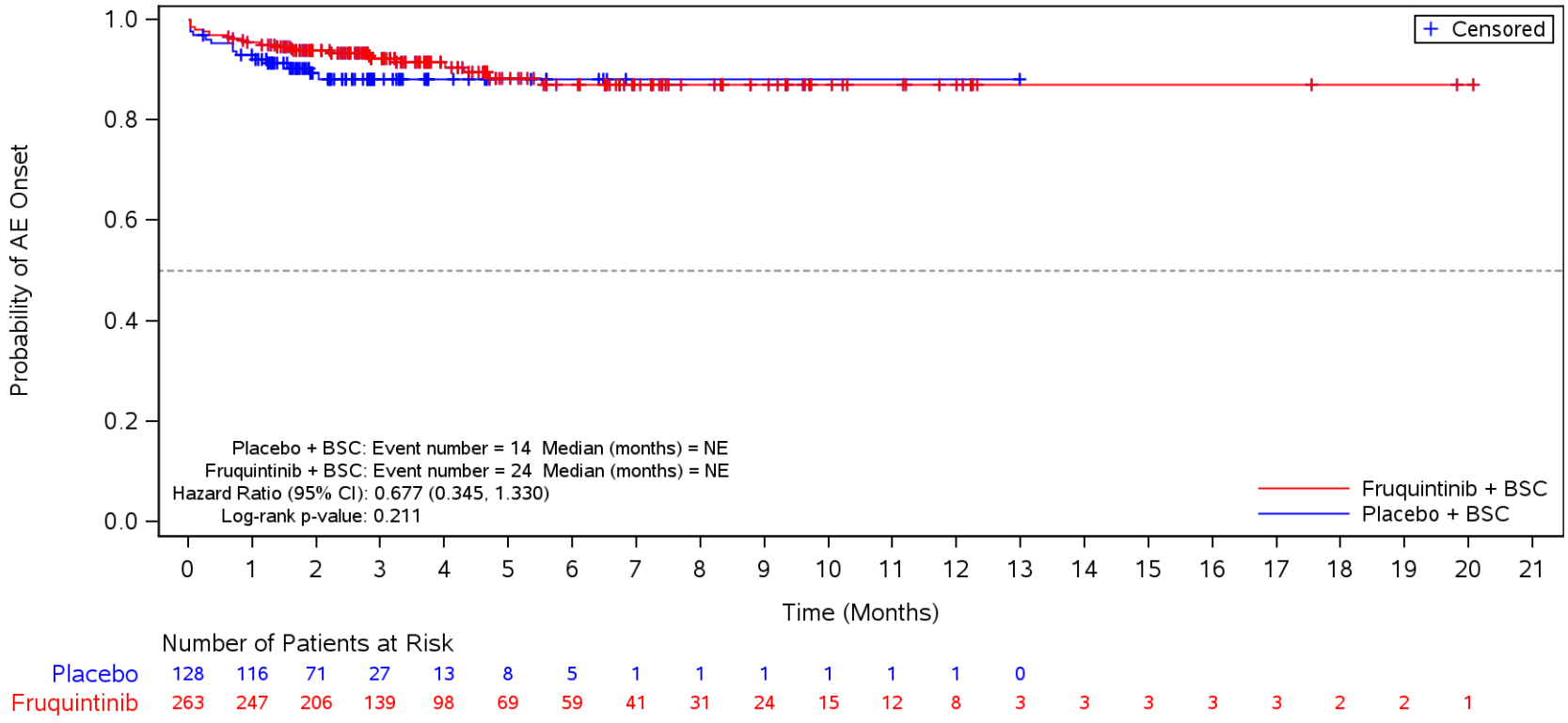
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
ECOG: 1



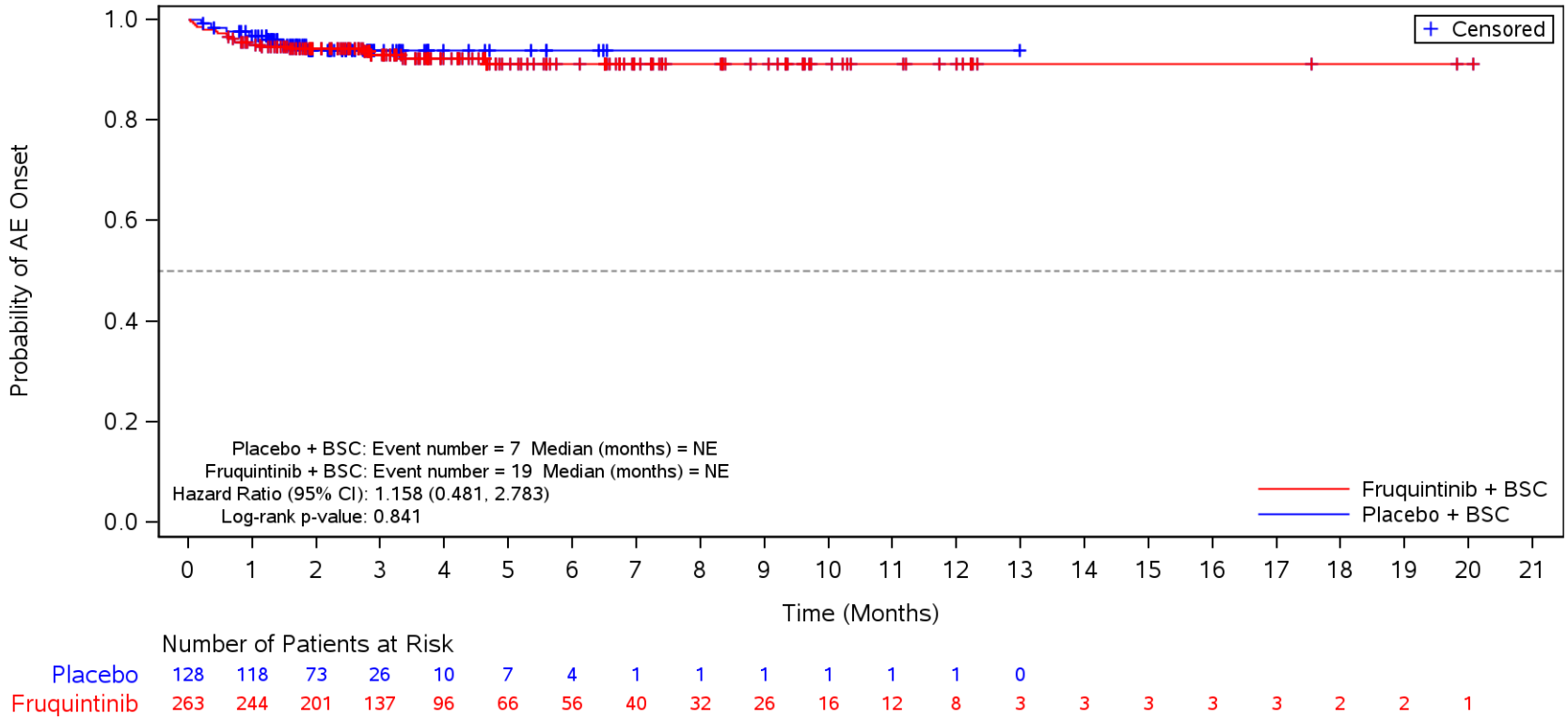
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
ECOG: 1



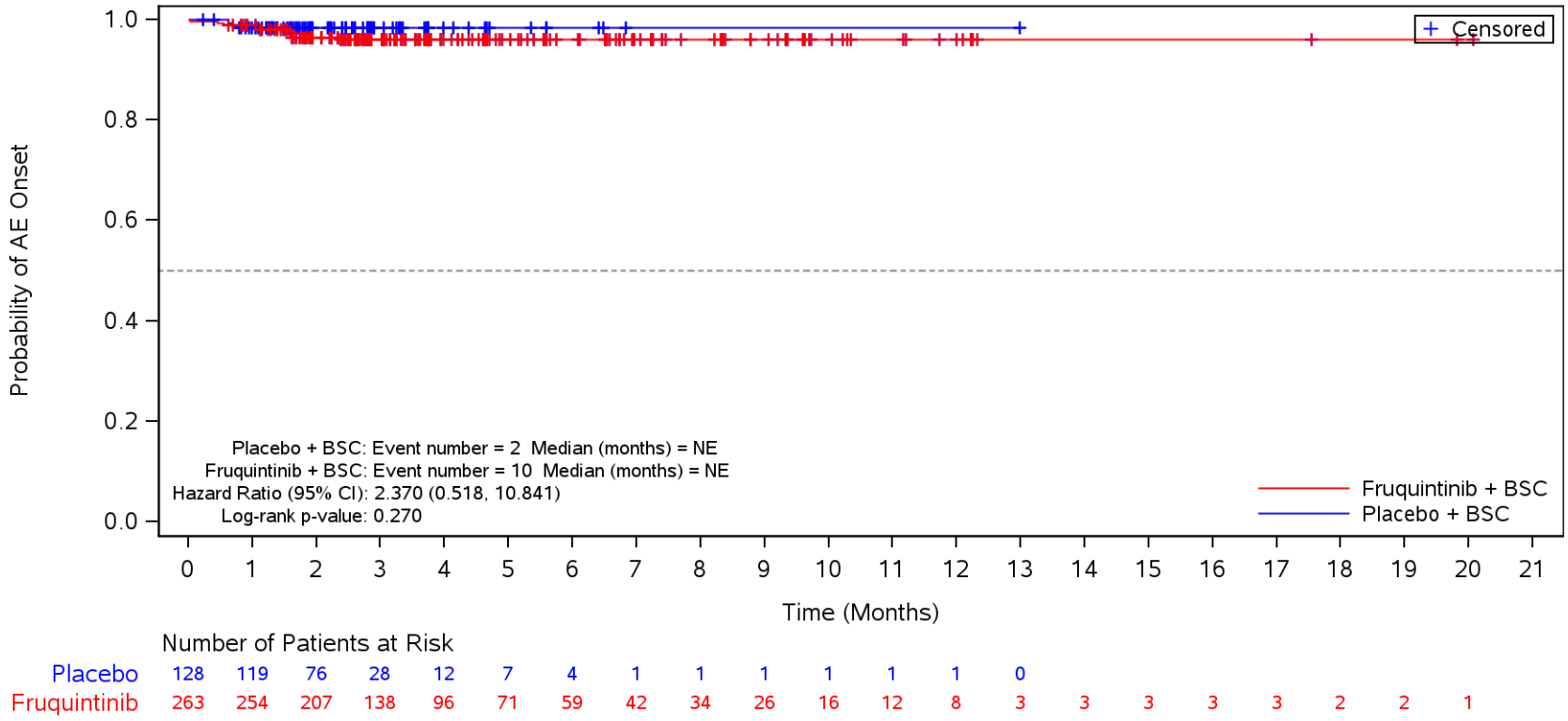
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
ECOG: 1



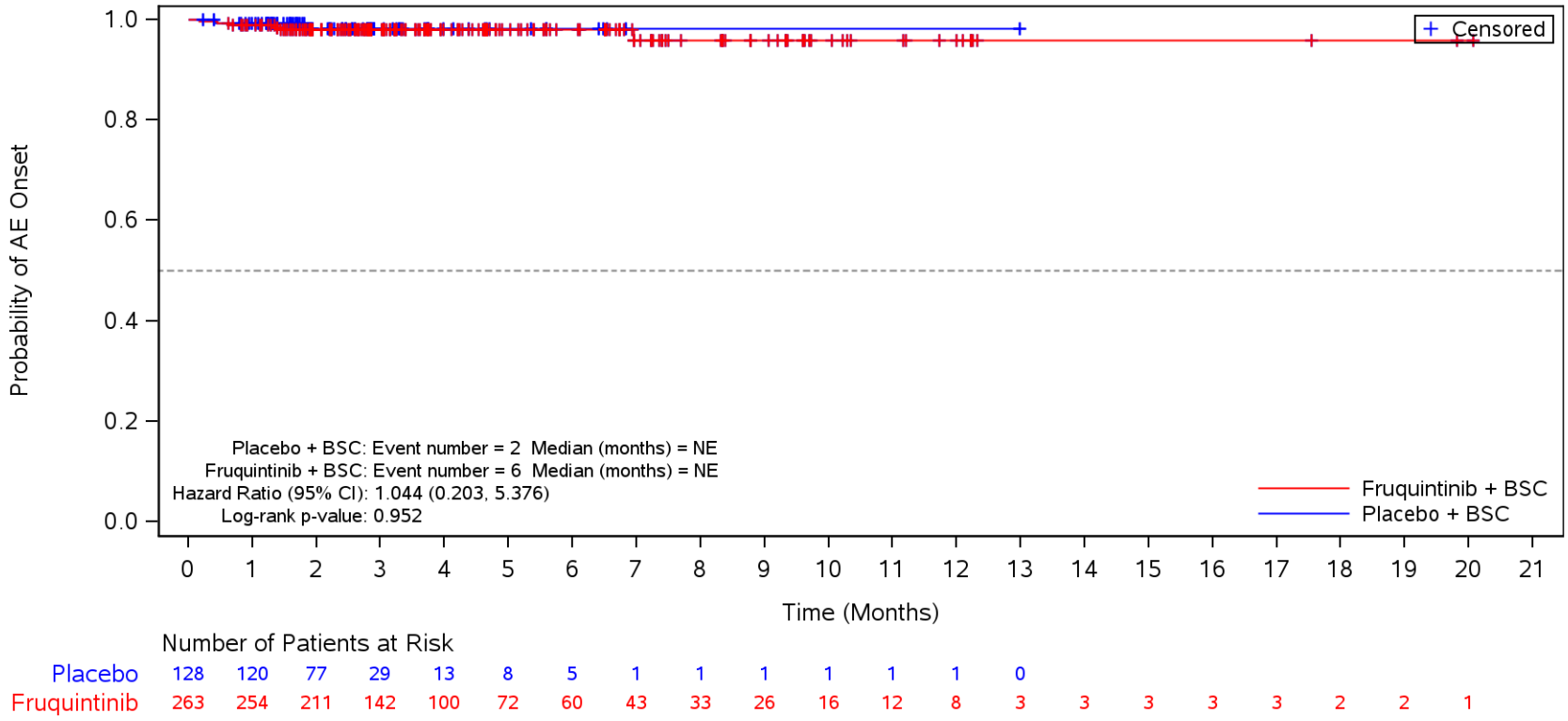
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
ECOG: 1



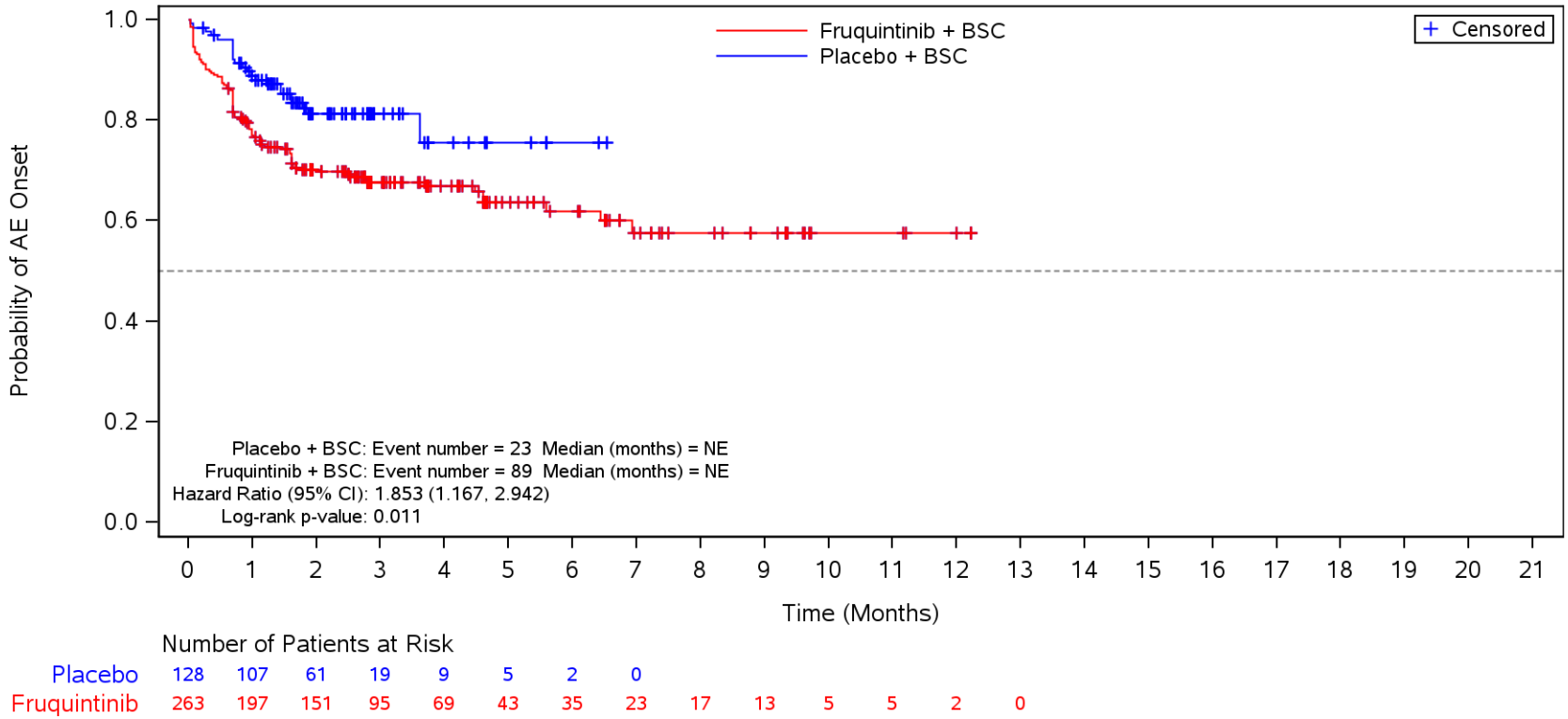
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
ECOG: 1



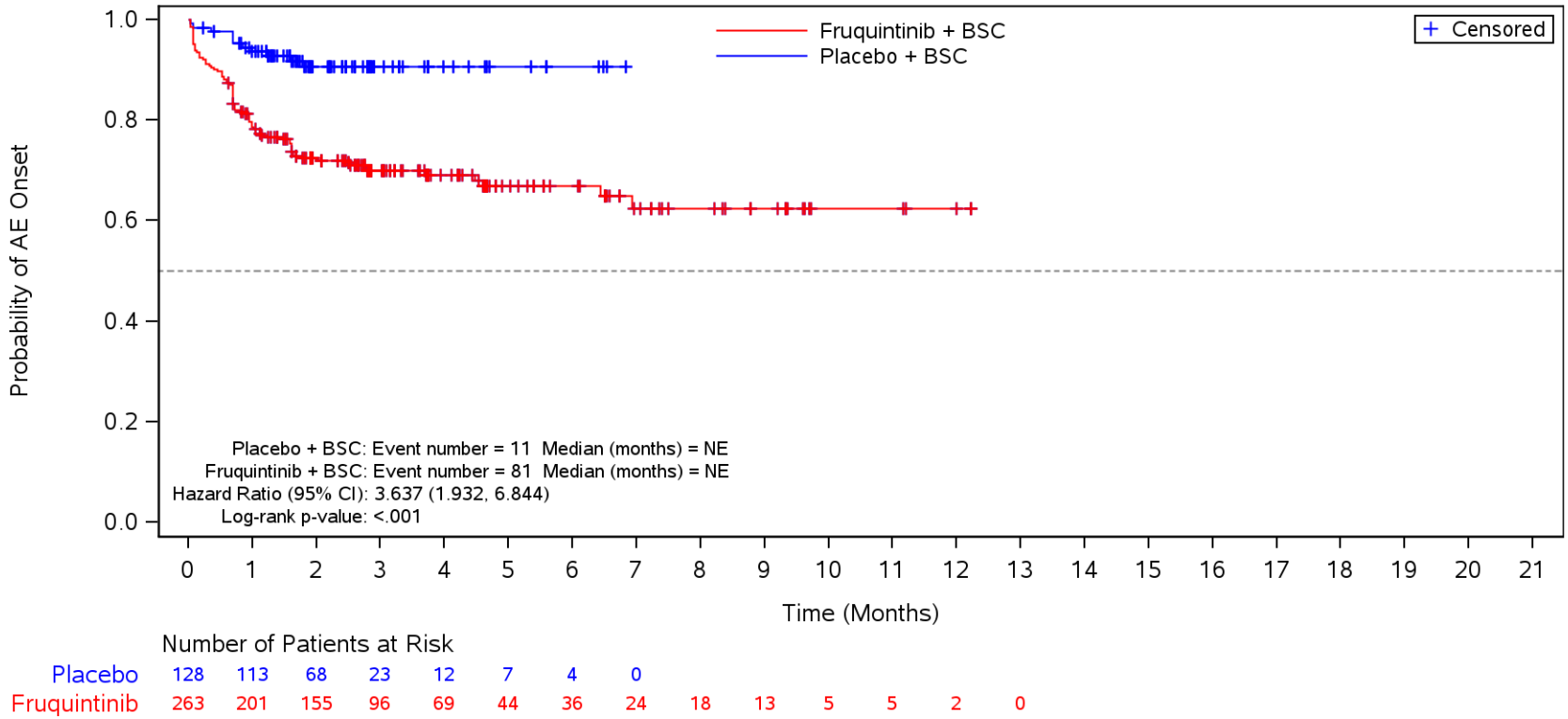
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Vascular disorders**
ECOG: 1



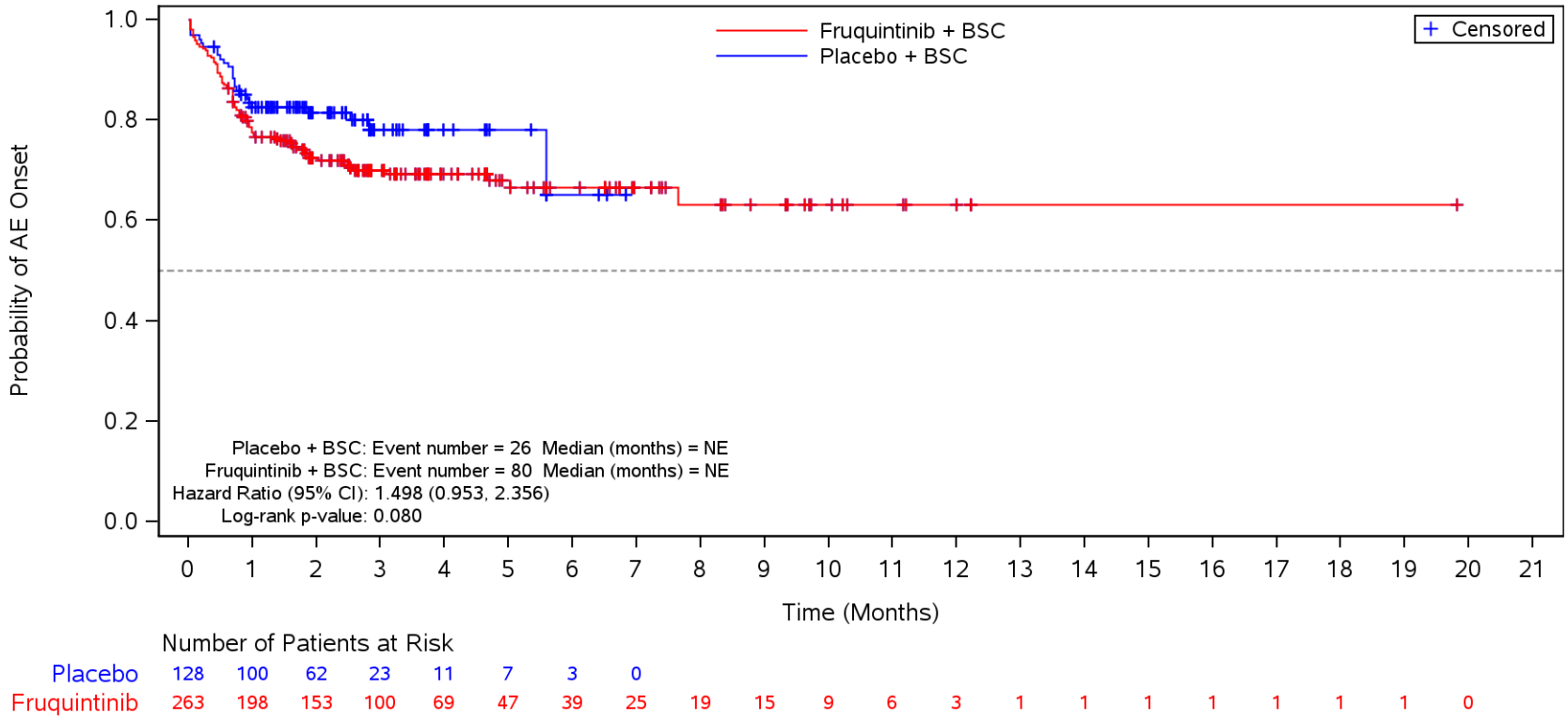
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
ECOG: 1



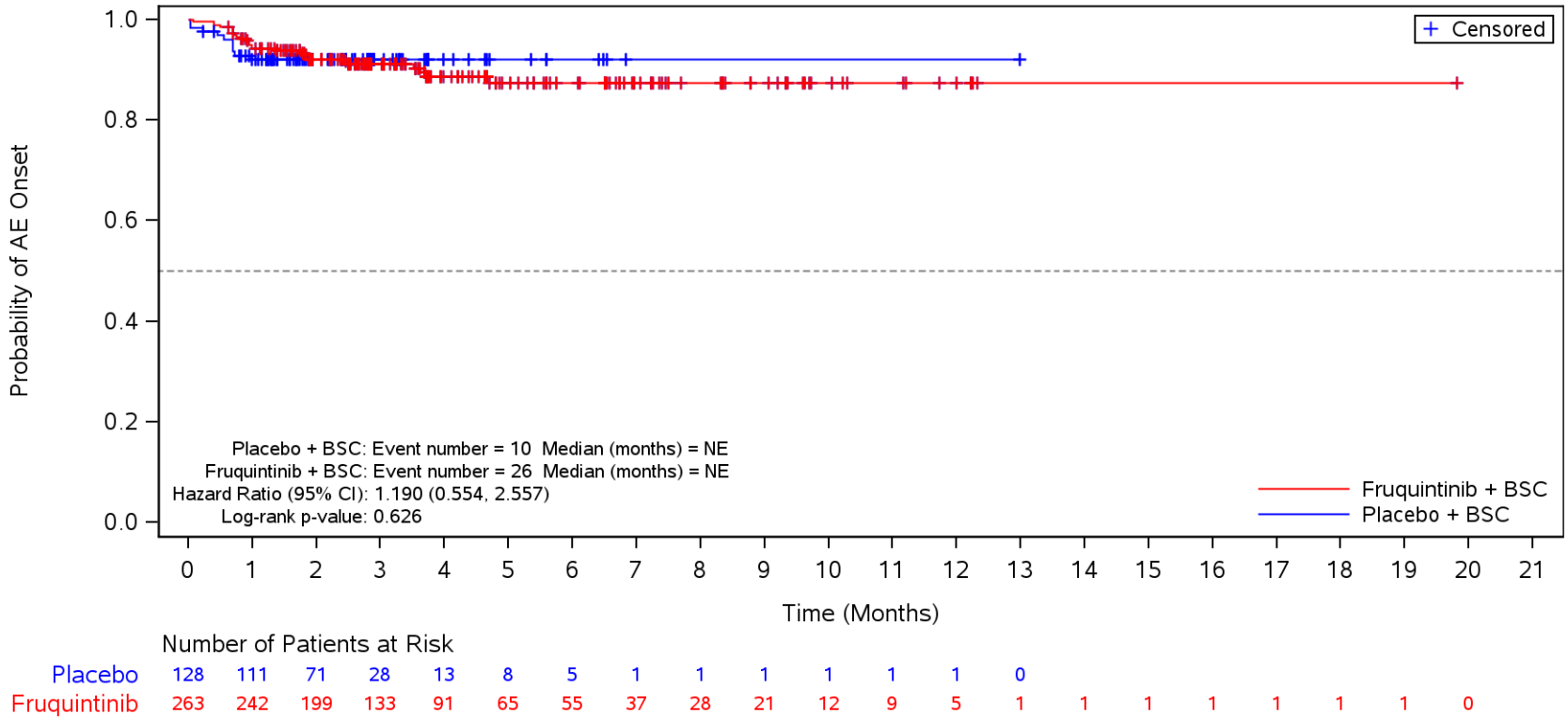
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
ECOG: 1



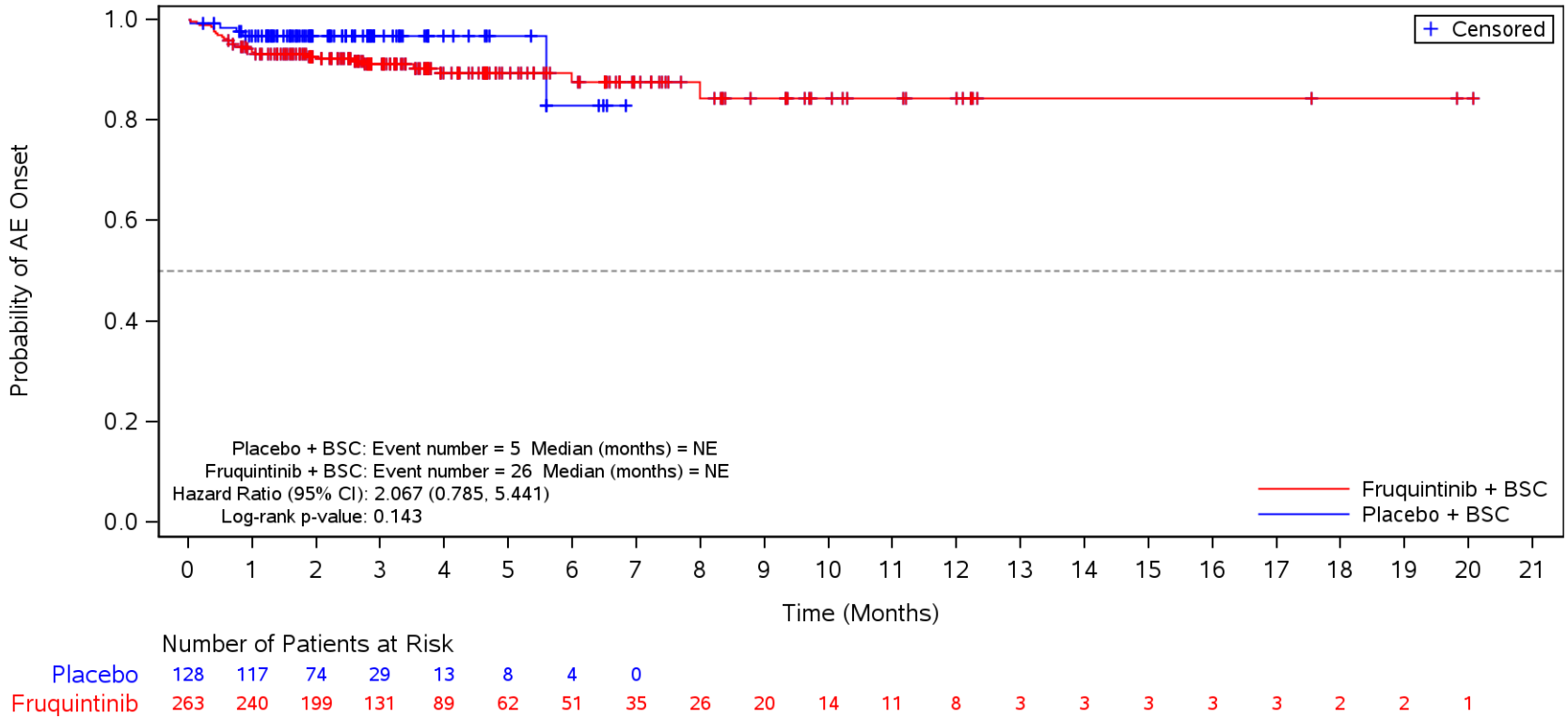
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
ECOG: 1



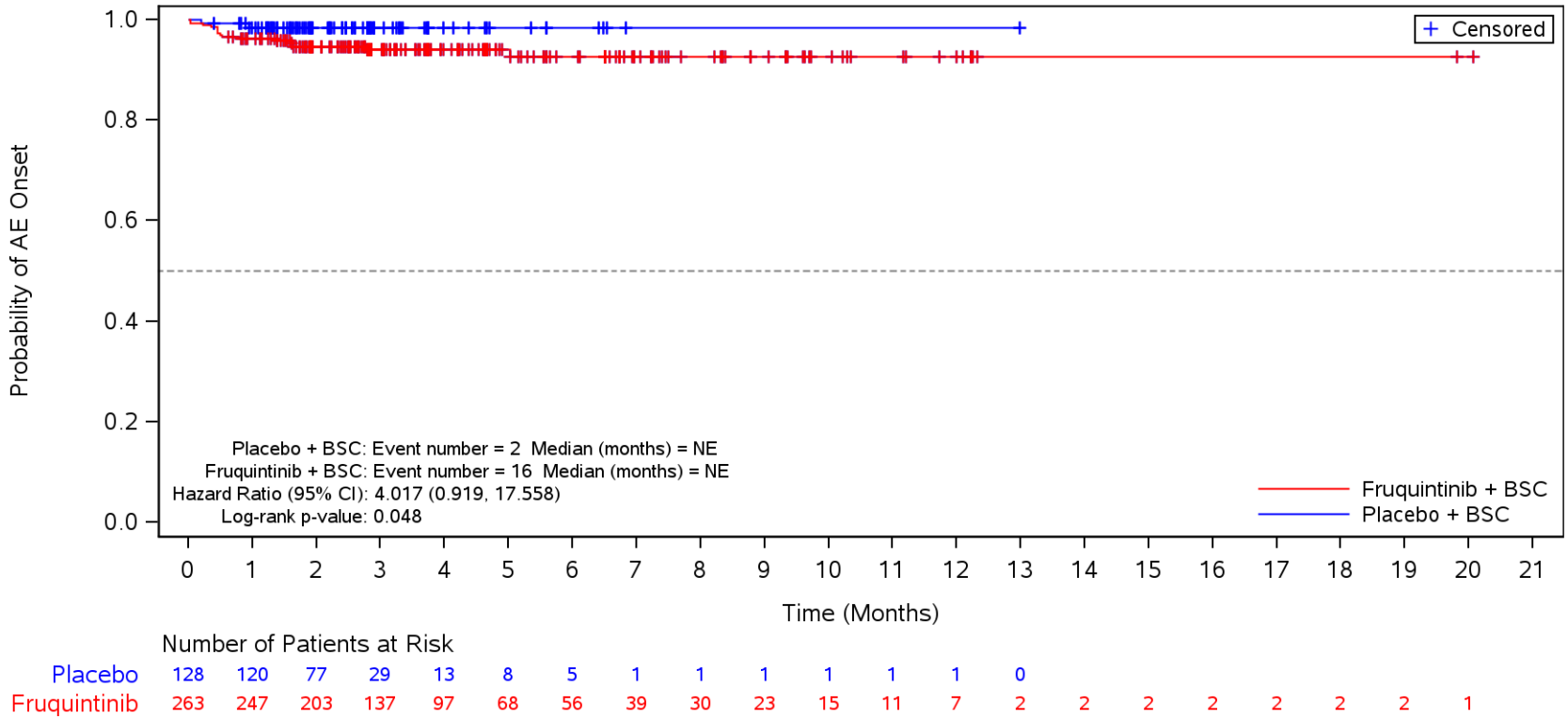
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
ECOG: 1



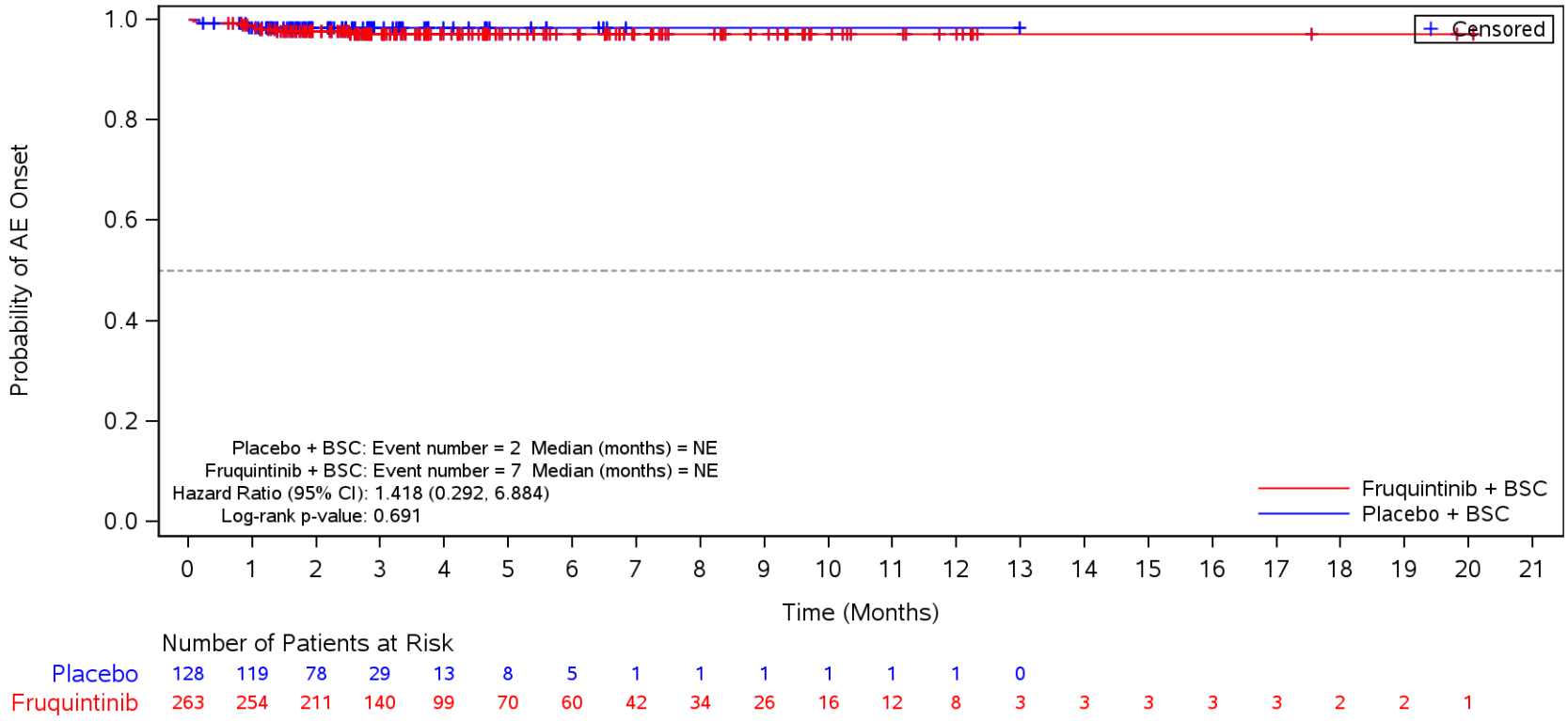
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
ECOG: 1



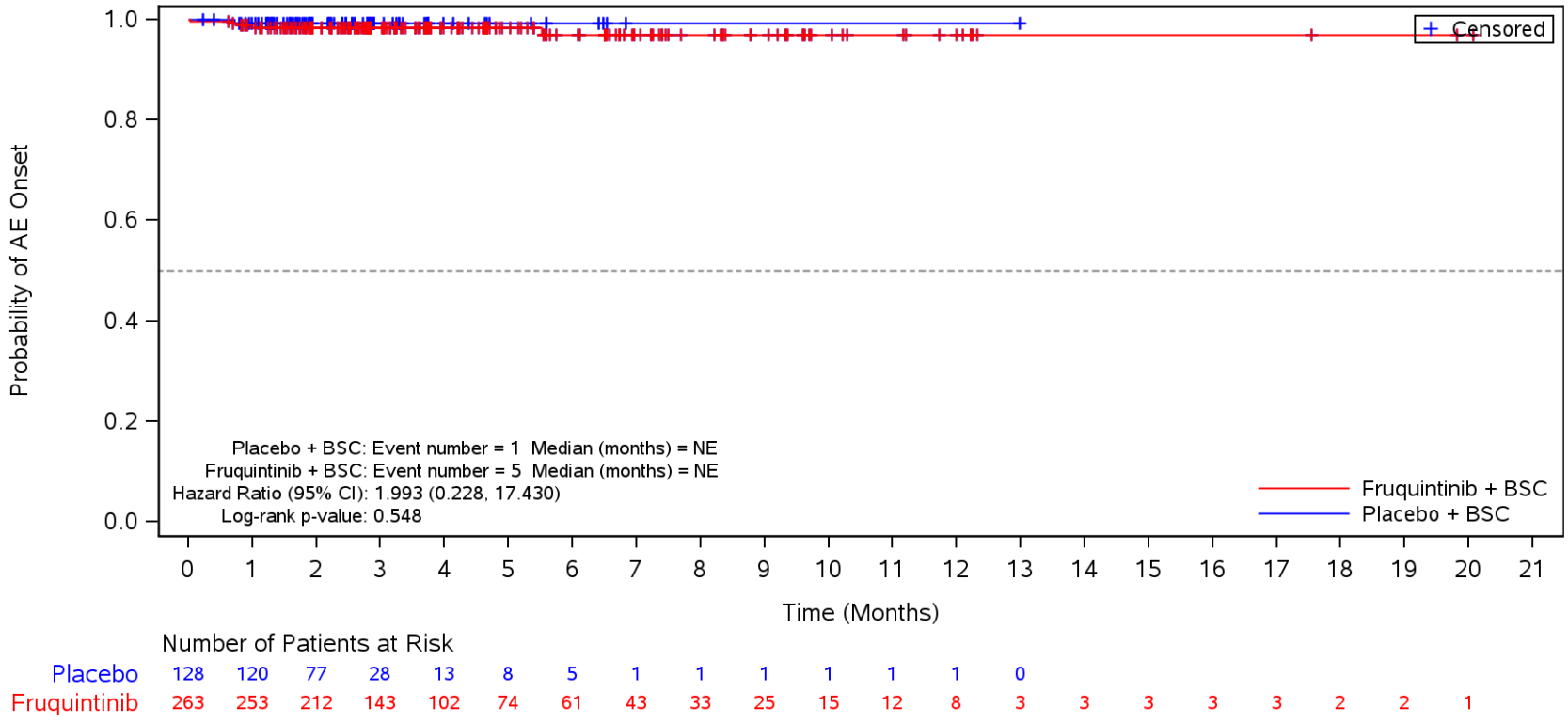
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
ECOG: 1



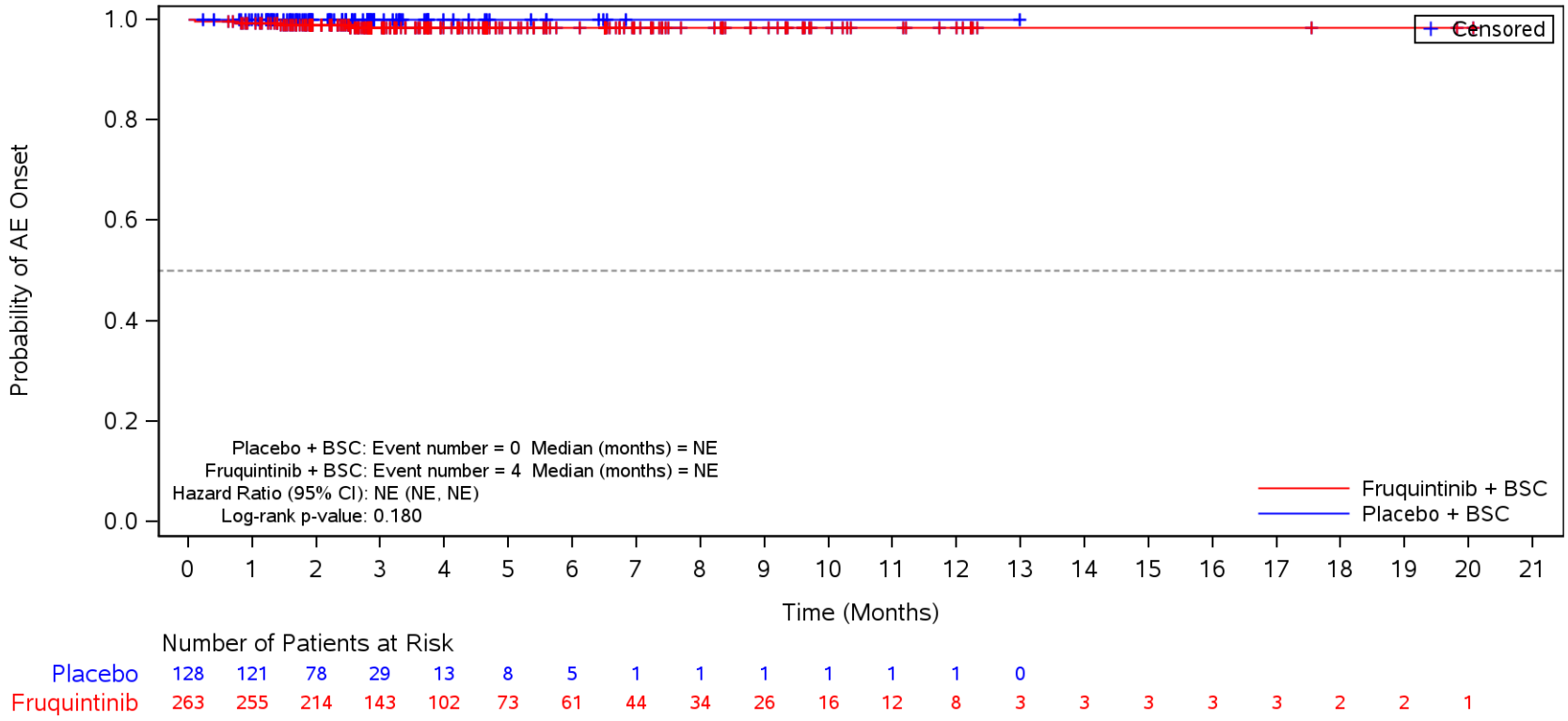
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
ECOG: 1



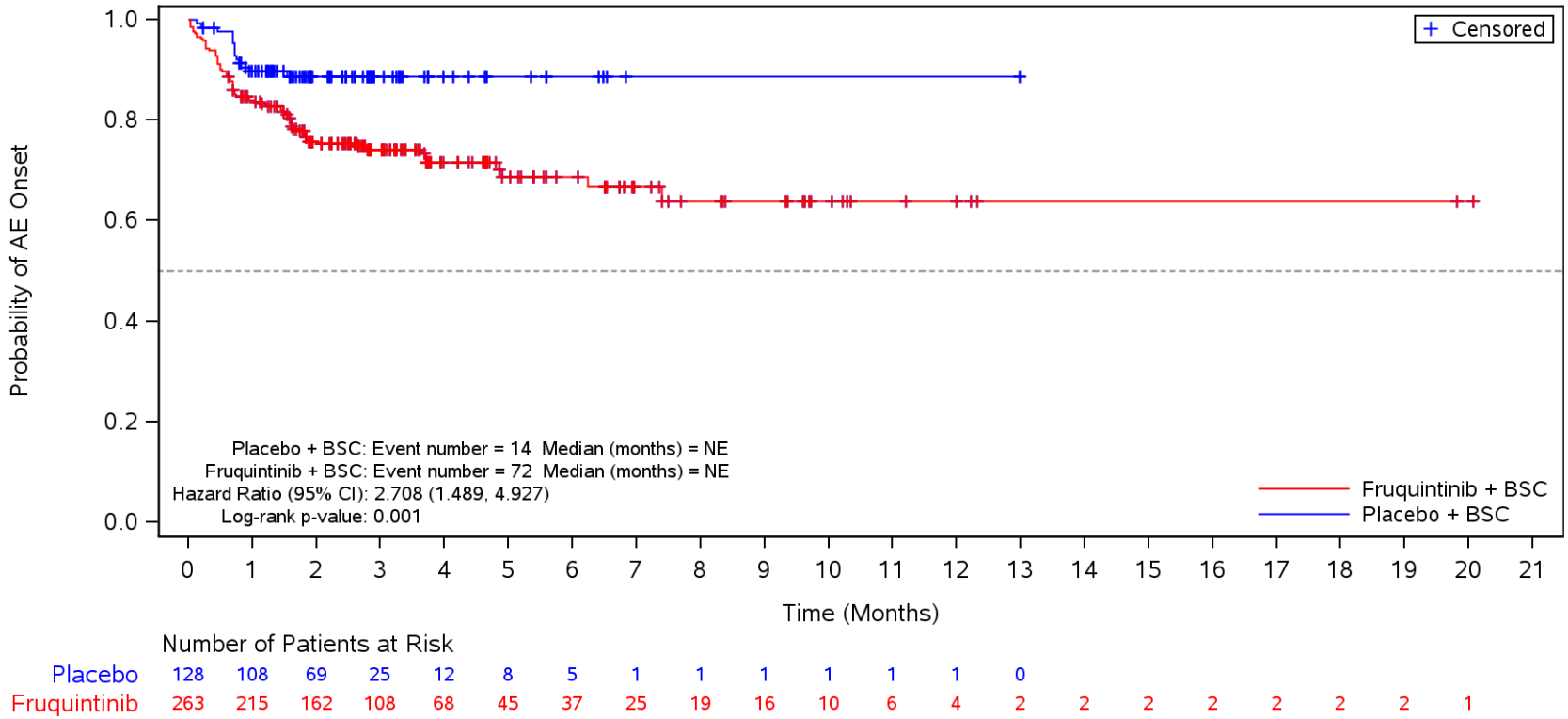
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
ECOG: 1



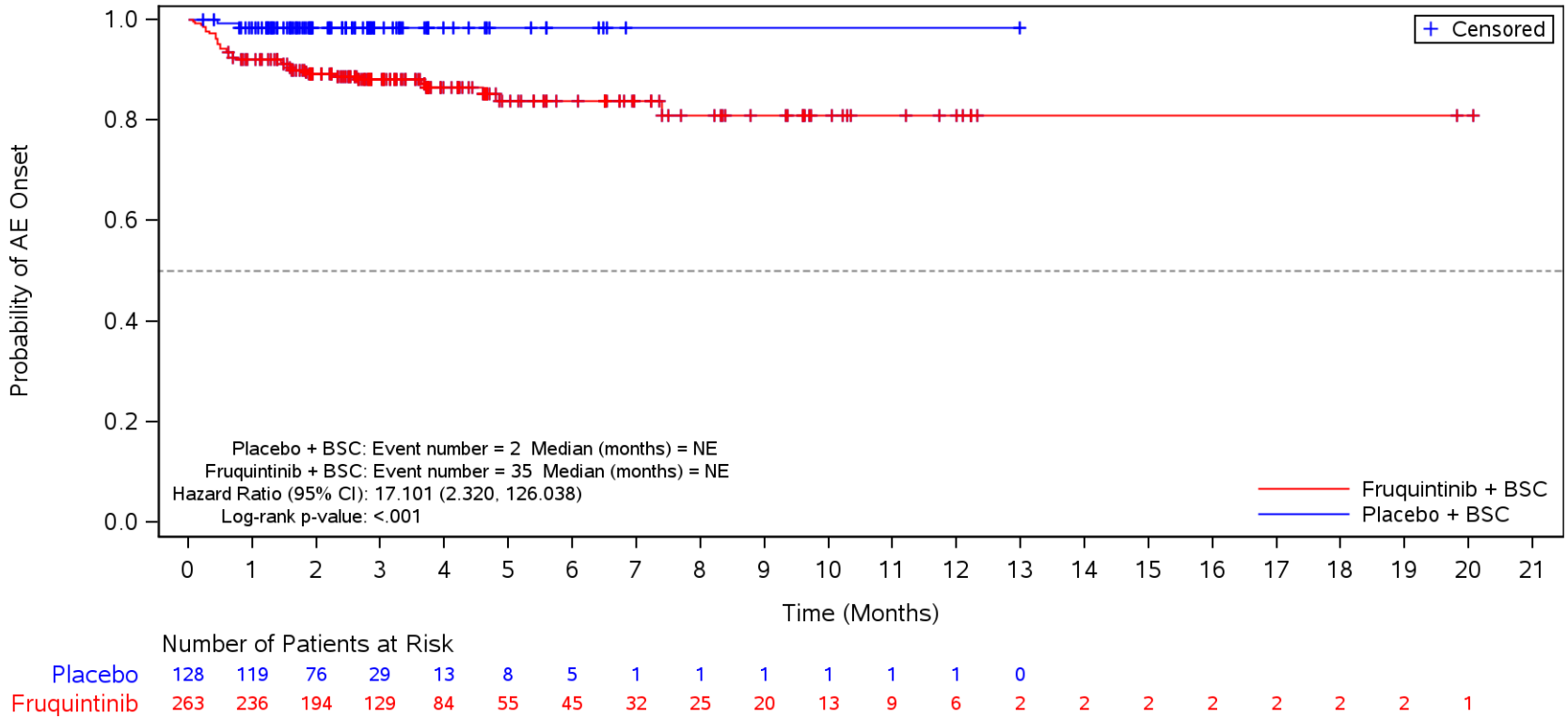
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
ECOG: 1



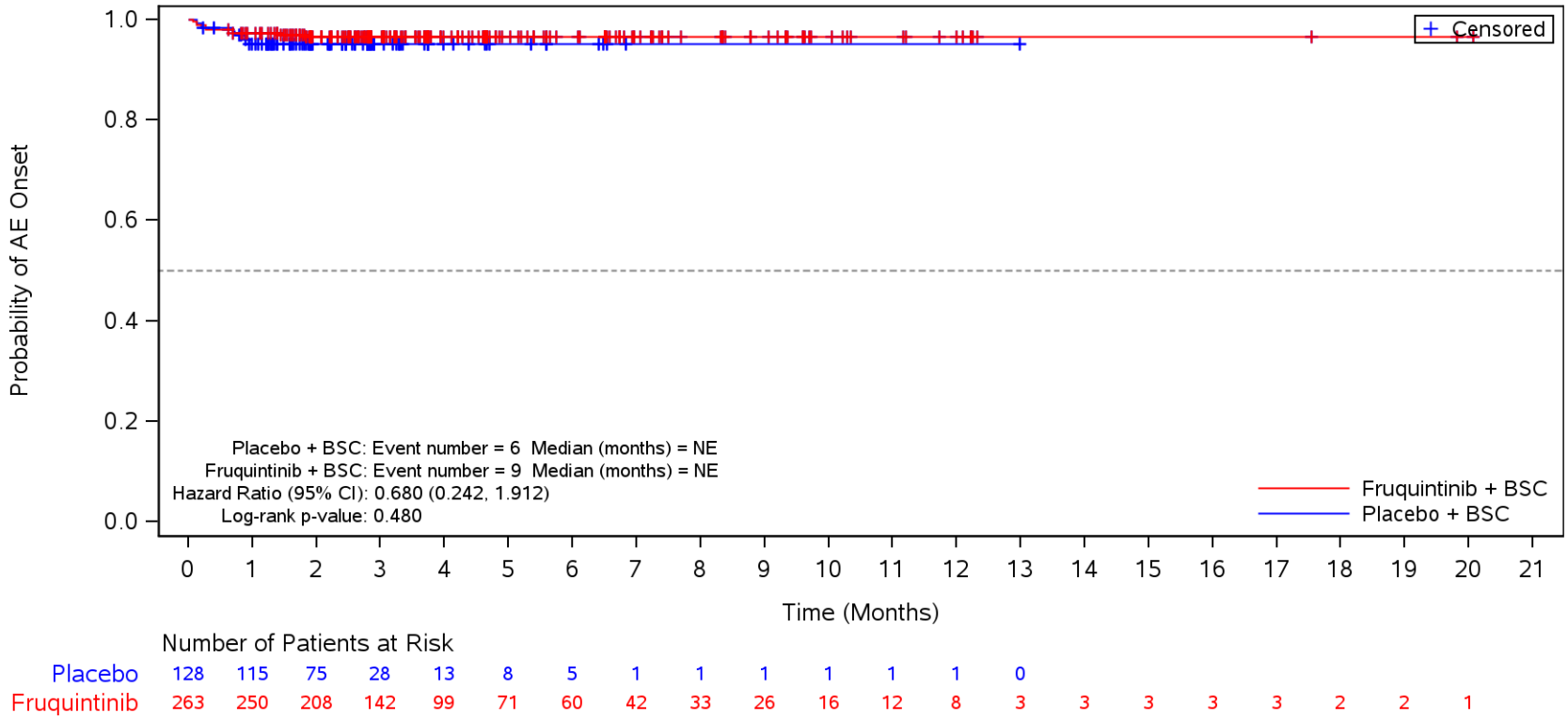
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
ECOG: 1



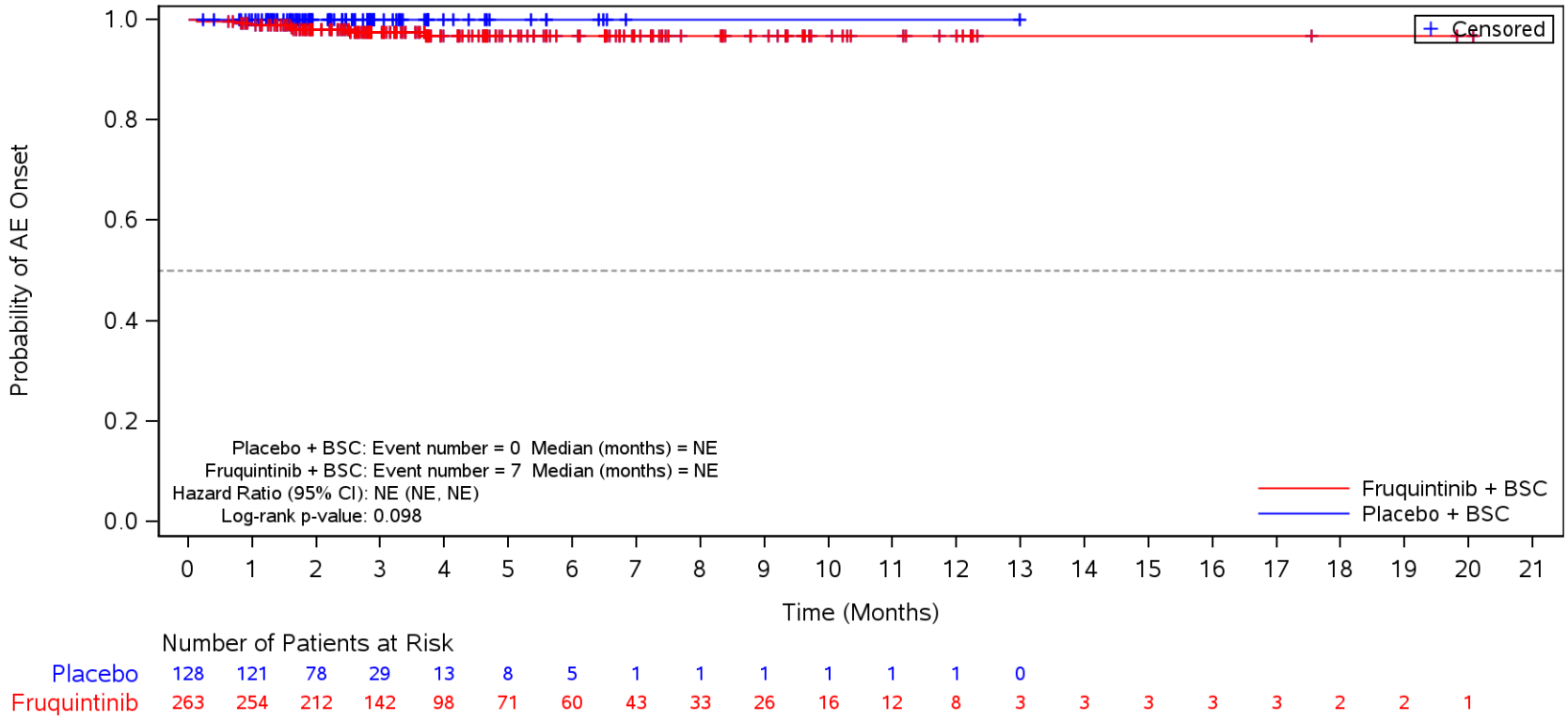
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
ECOG: 1



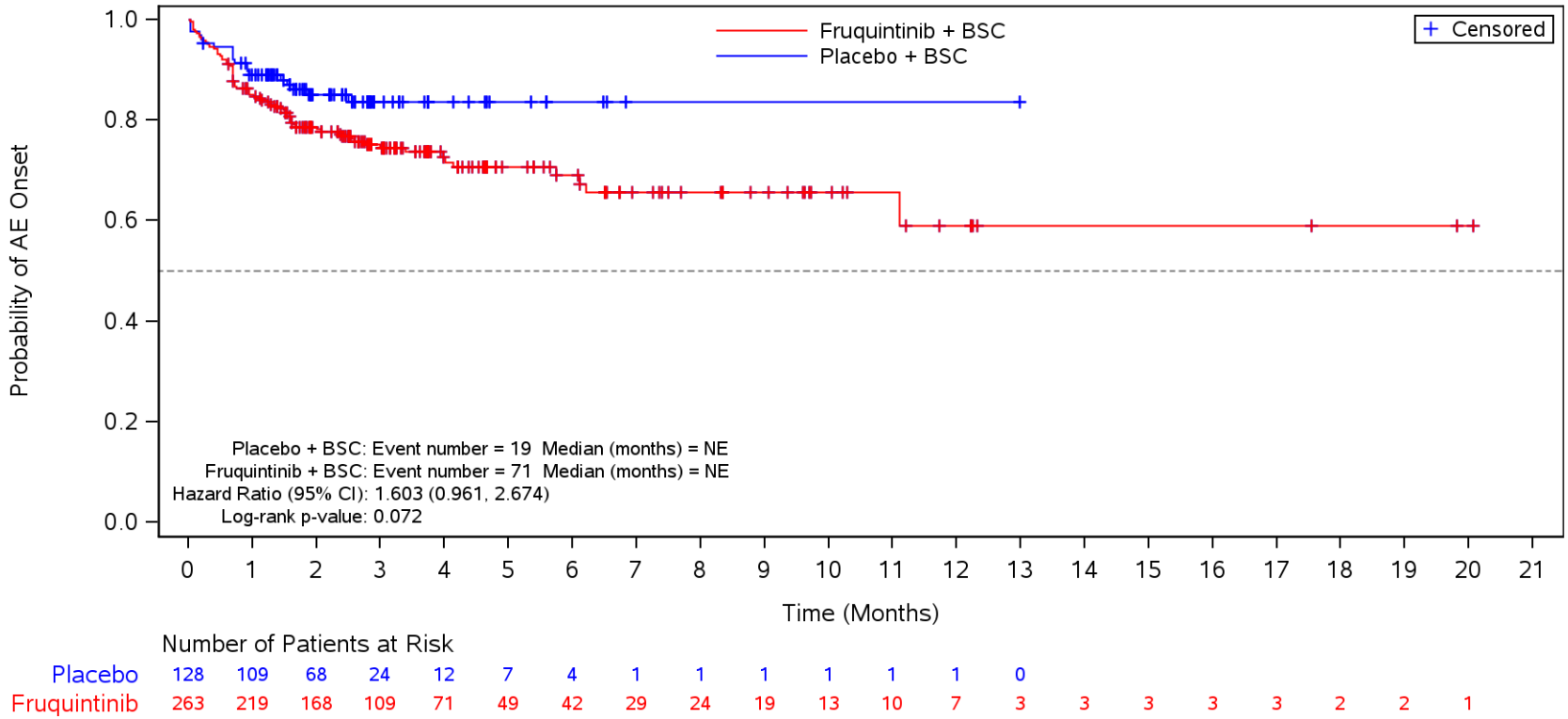
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
ECOG: 1



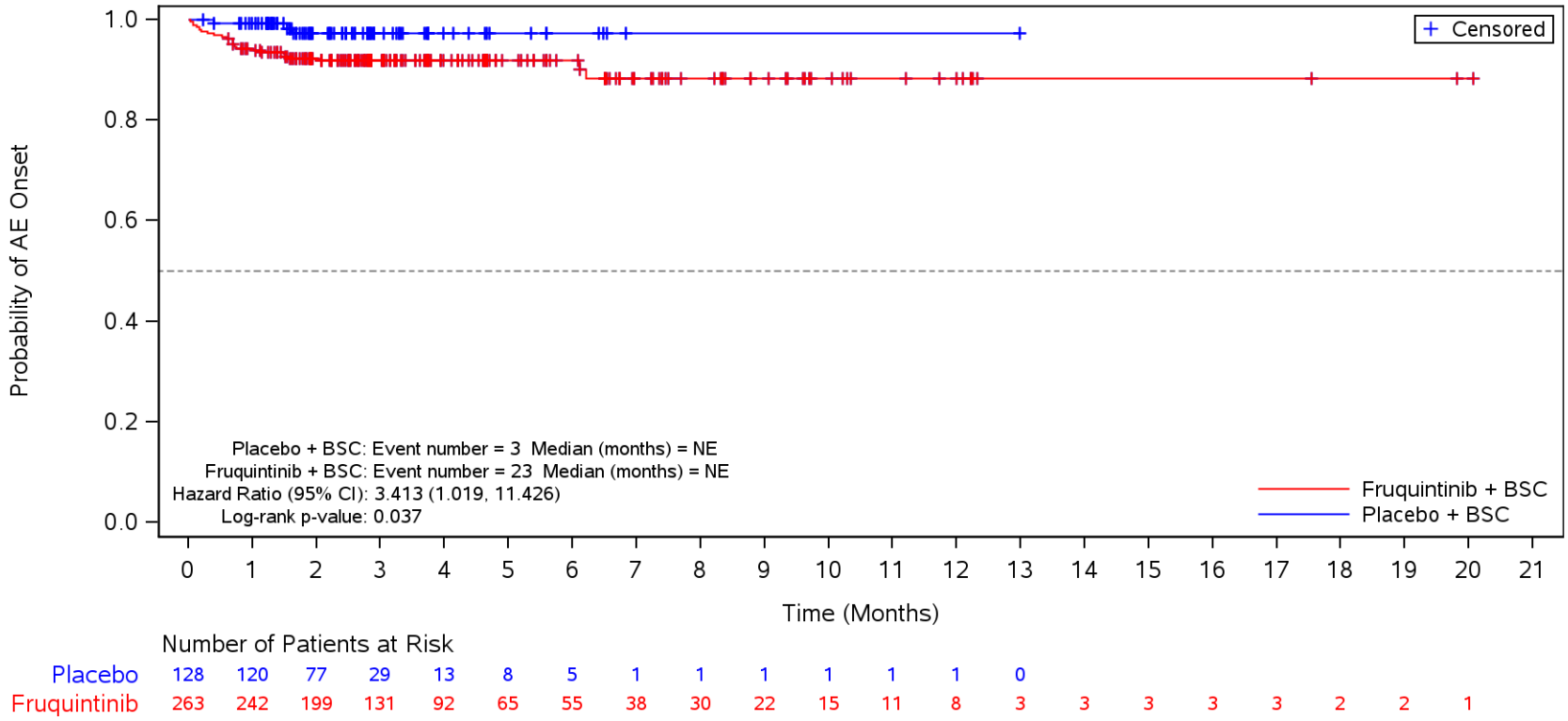
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Nervous system disorders**
ECOG: 1



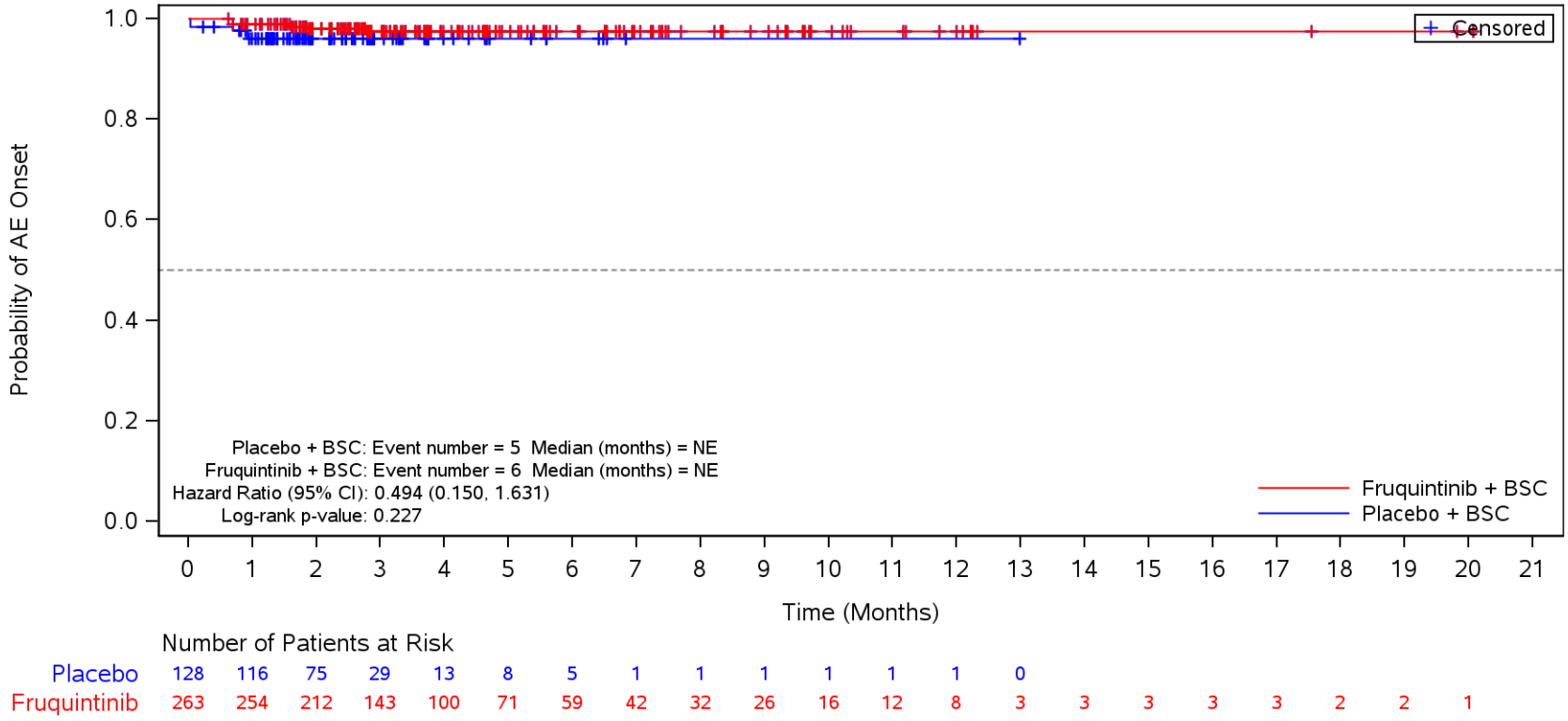
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
ECOG: 1



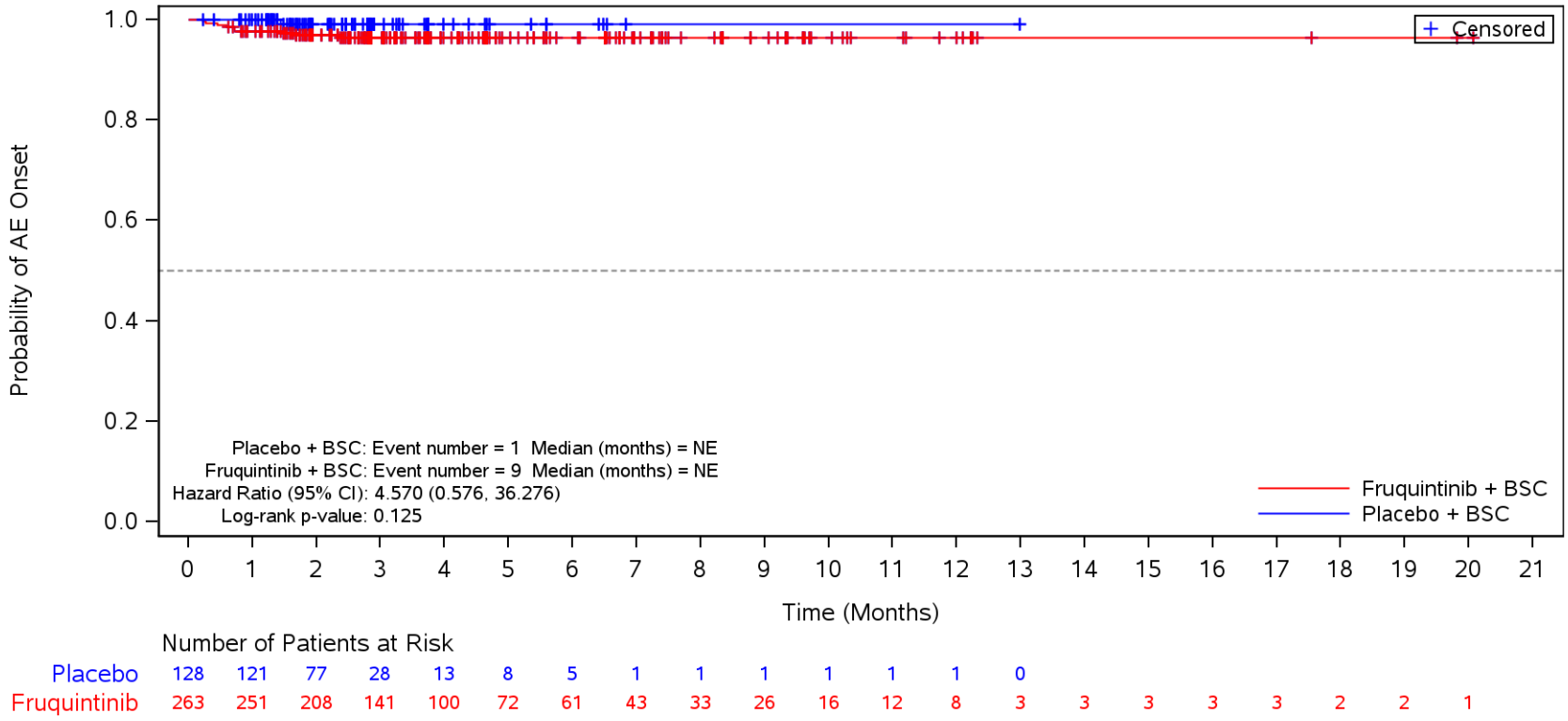
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
ECOG: 1



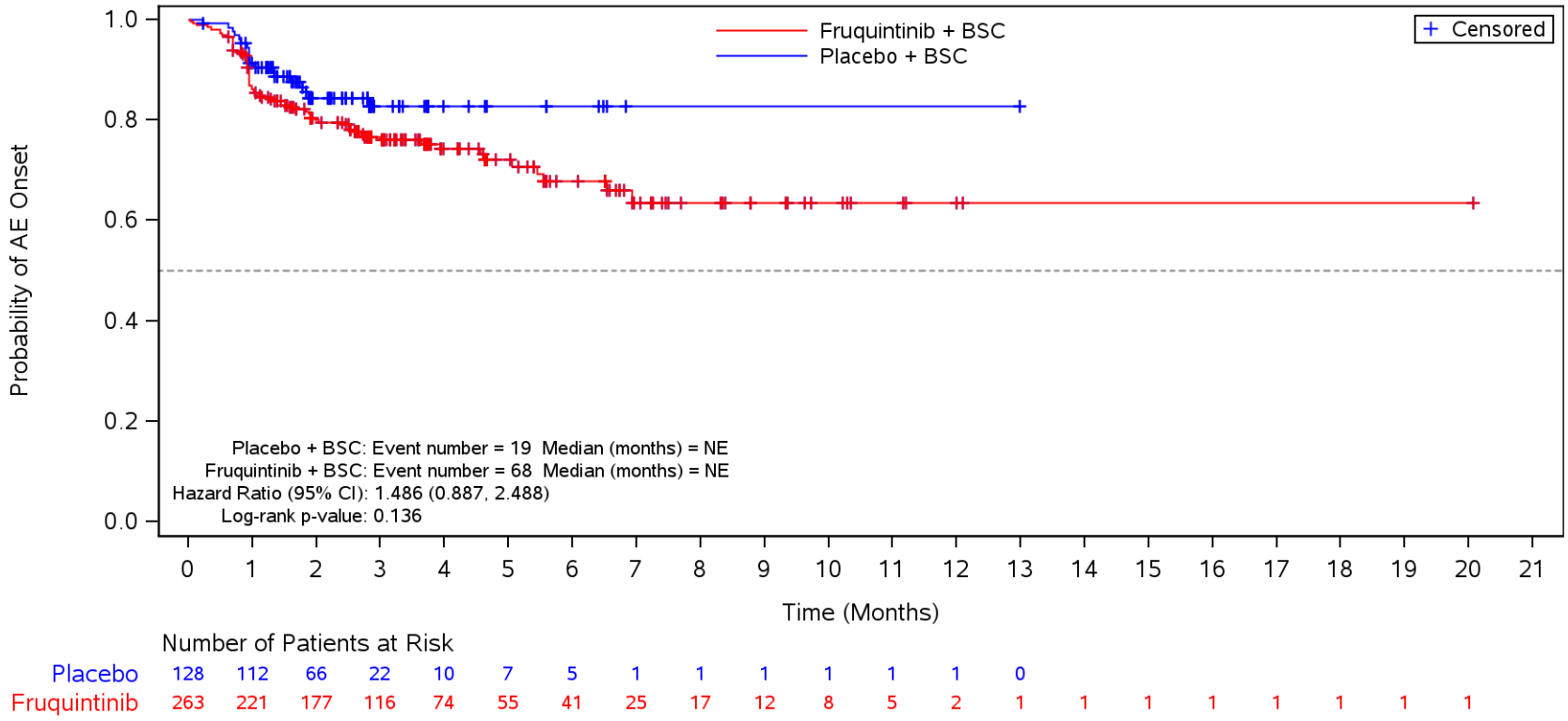
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
ECOG: 1



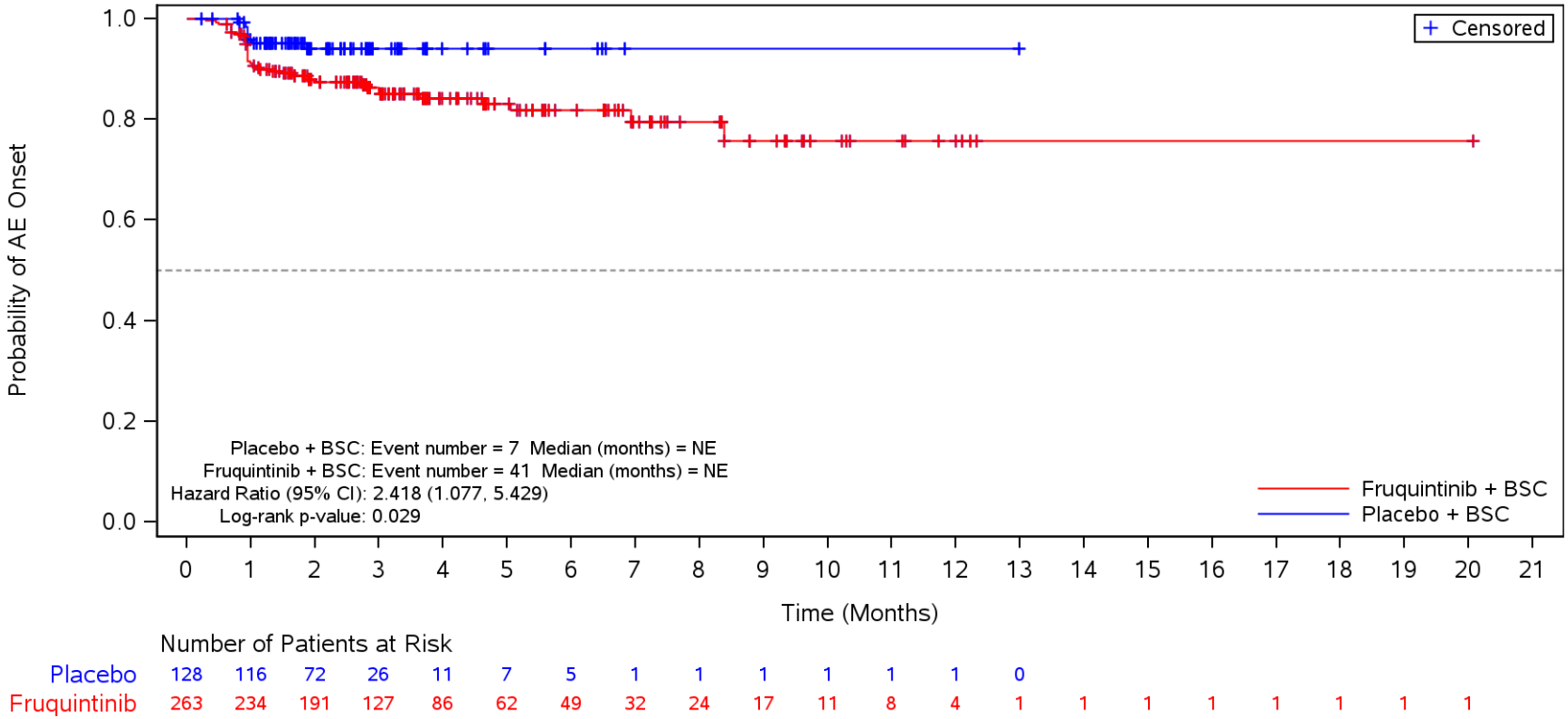
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
ECOG: 1



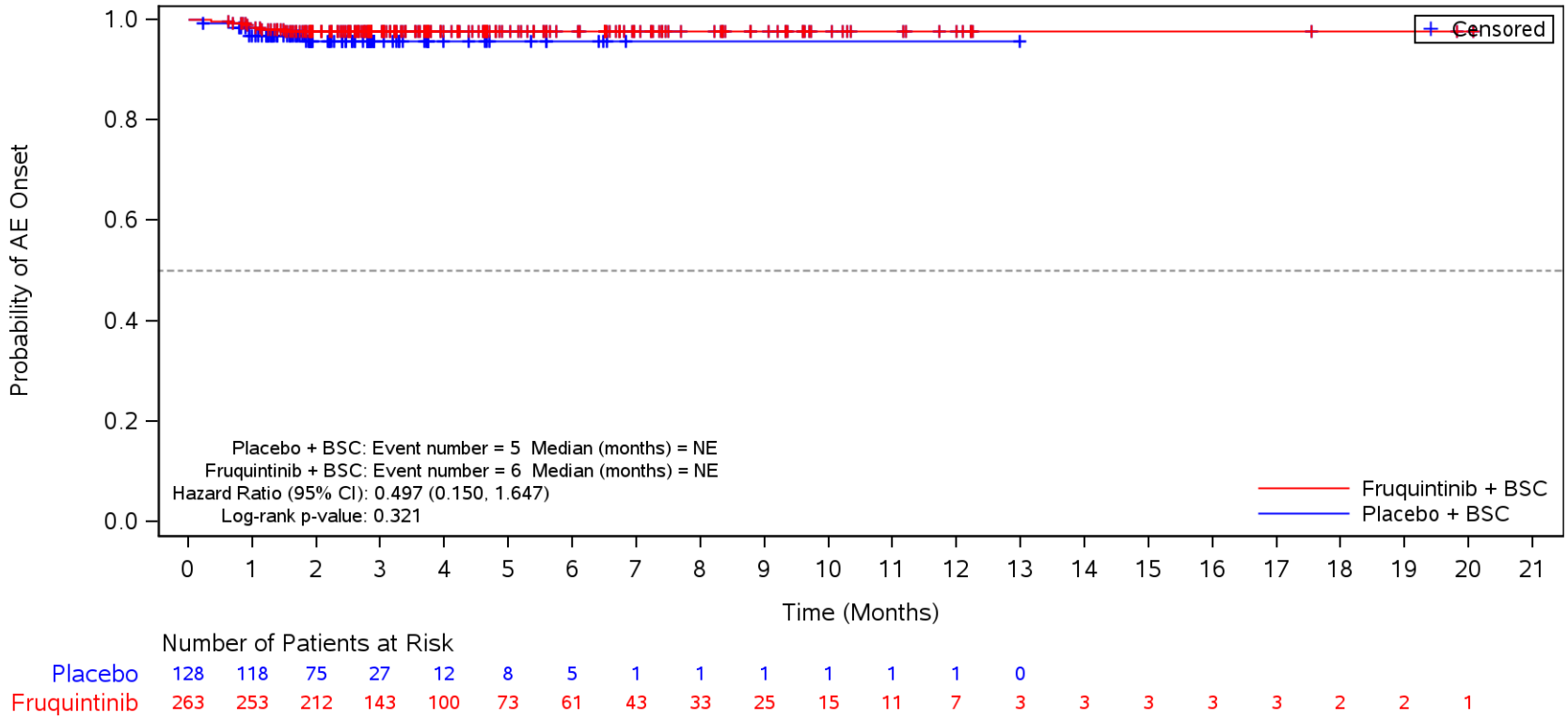
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
ECOG: 1



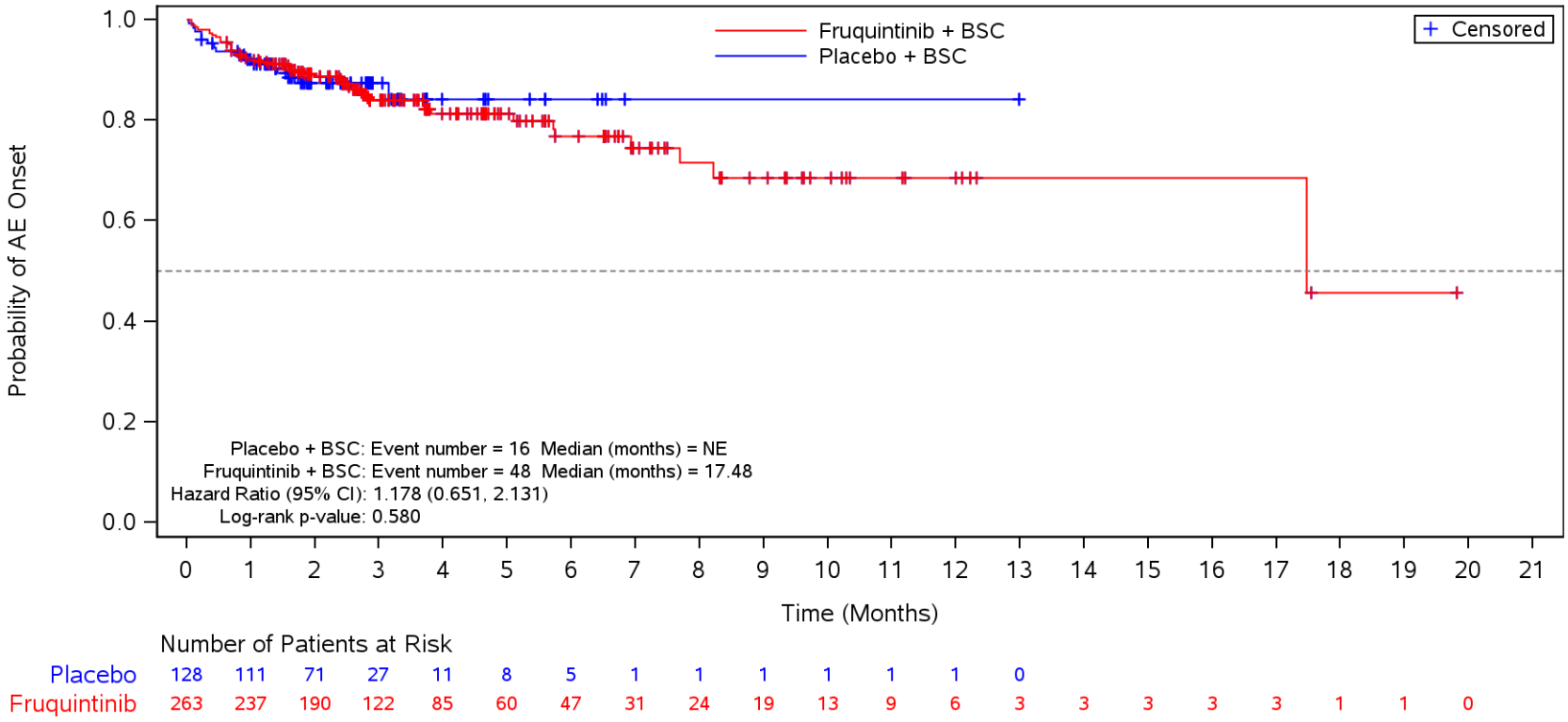
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**
ECOG: 1



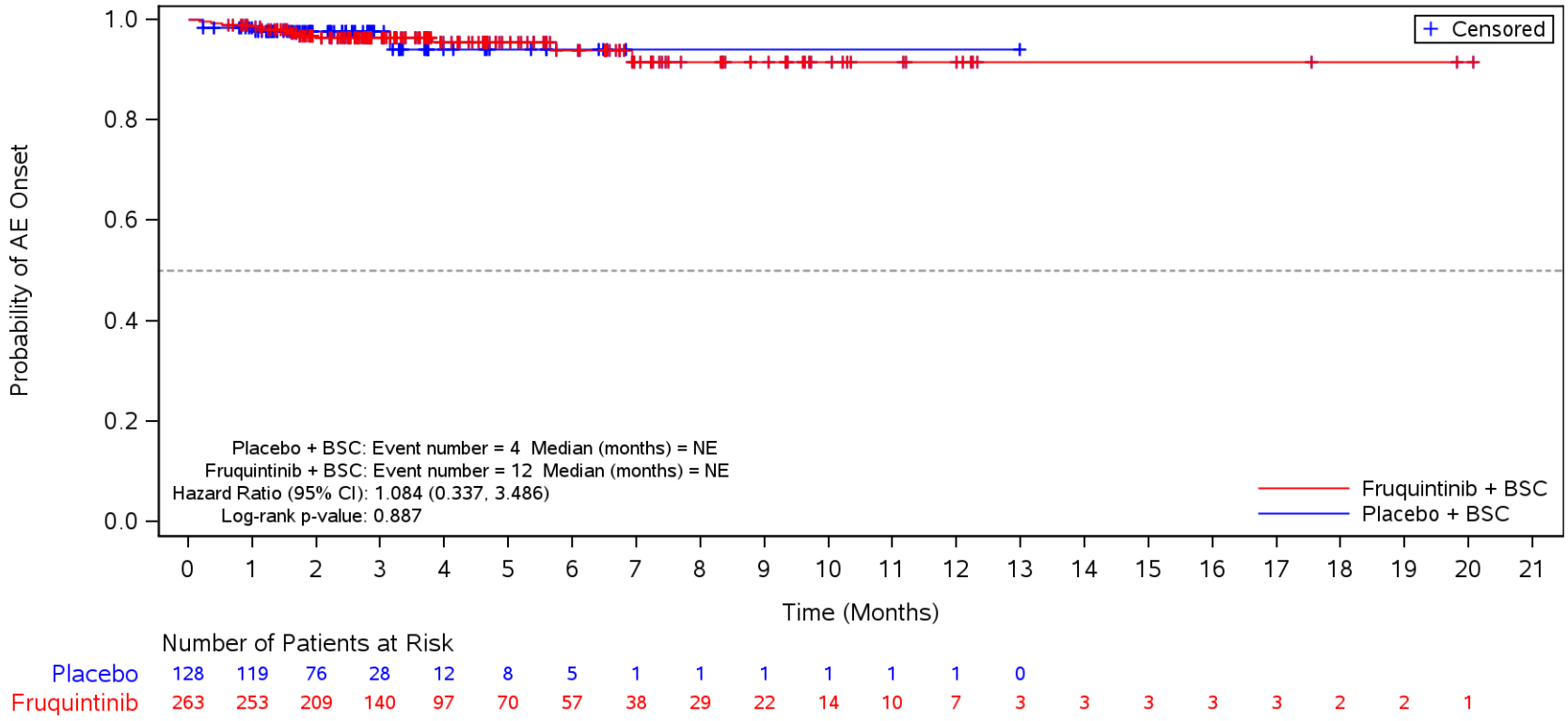
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Infections and infestations**
ECOG: 1



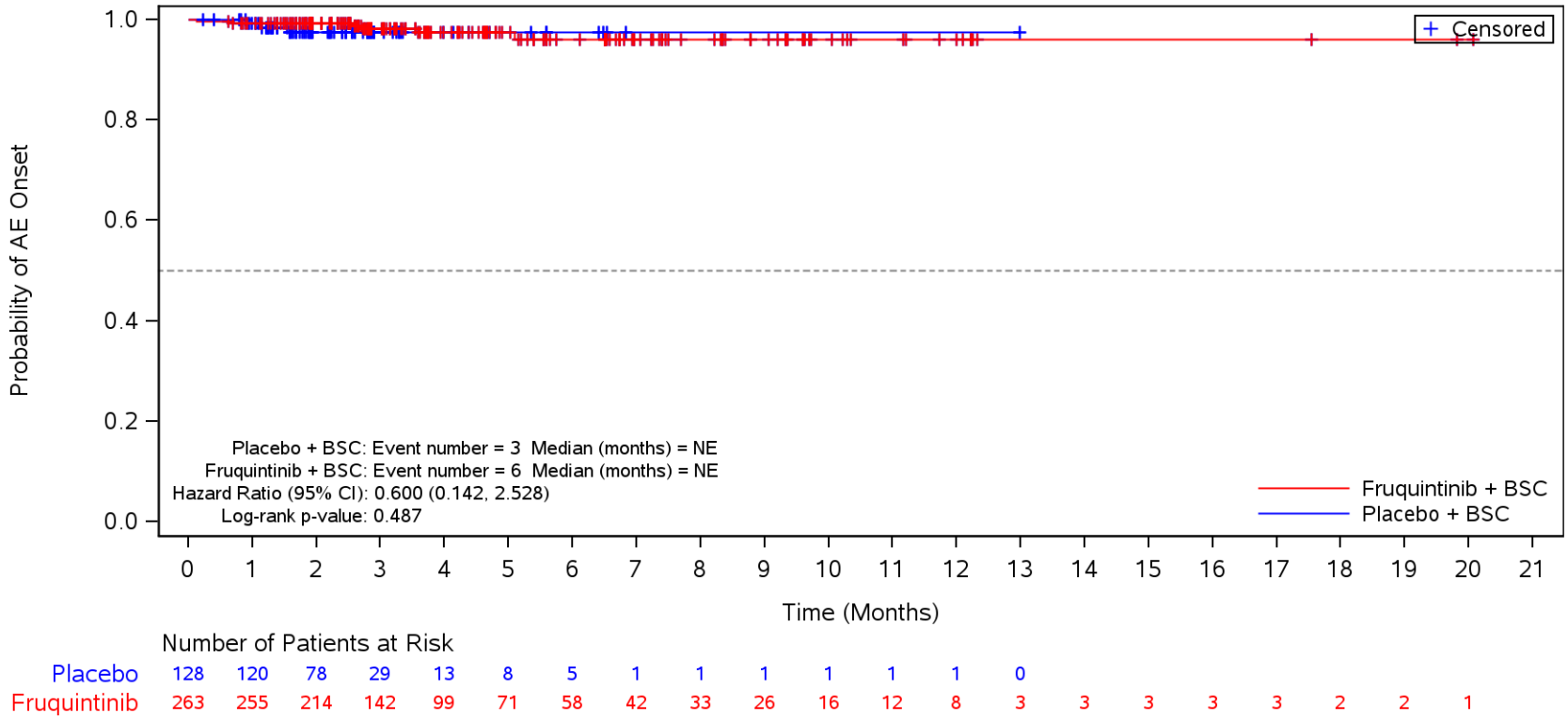
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
ECOG: 1



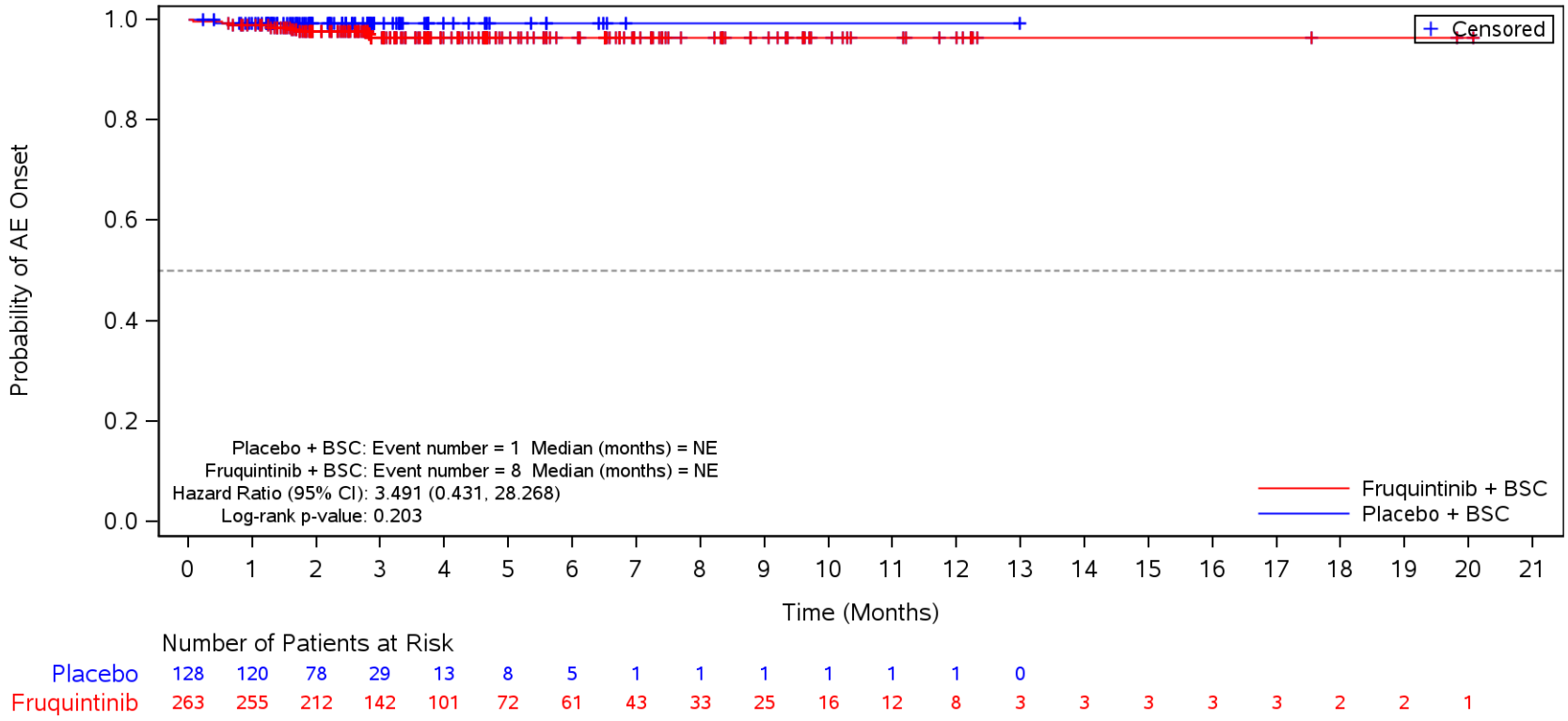
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**
ECOG: 1



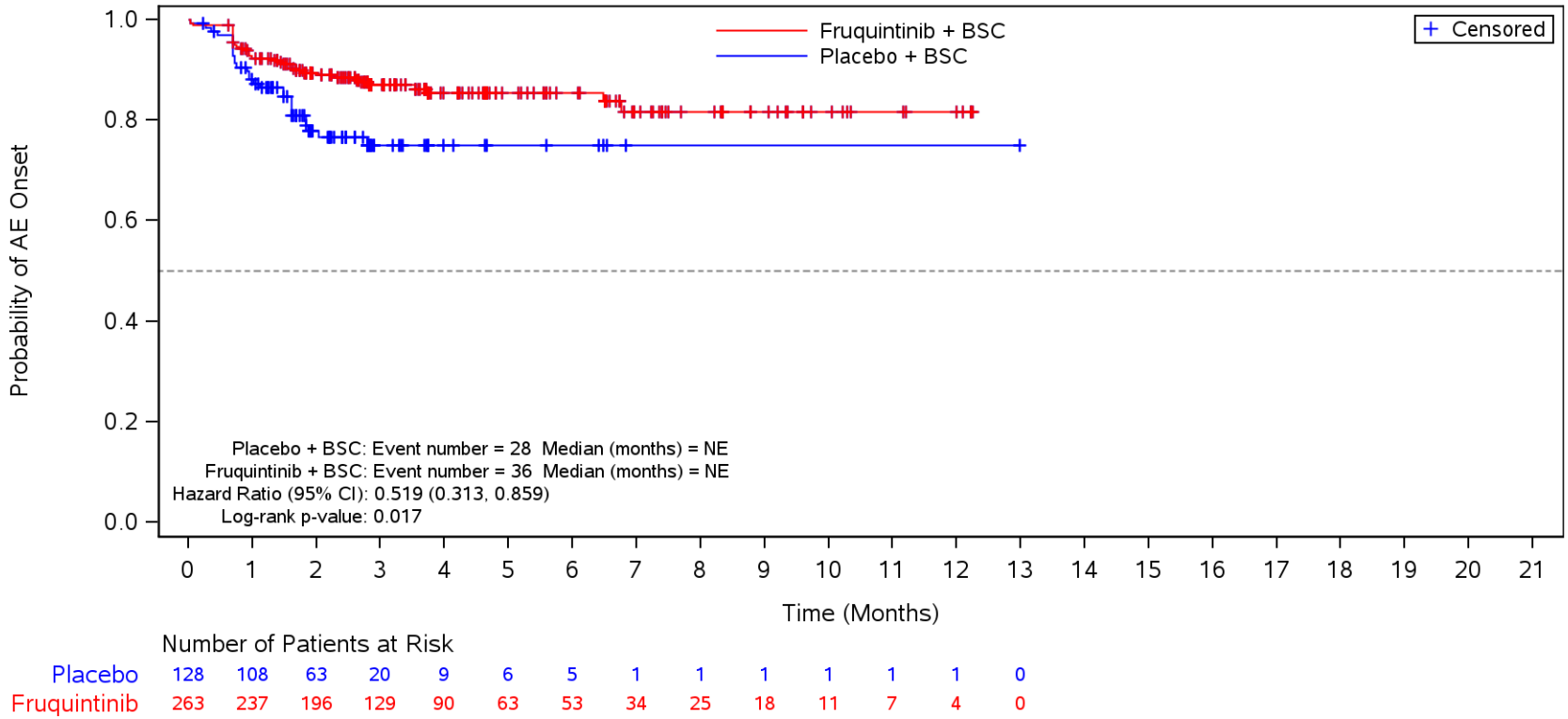
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Pneumonia**
ECOG: 1



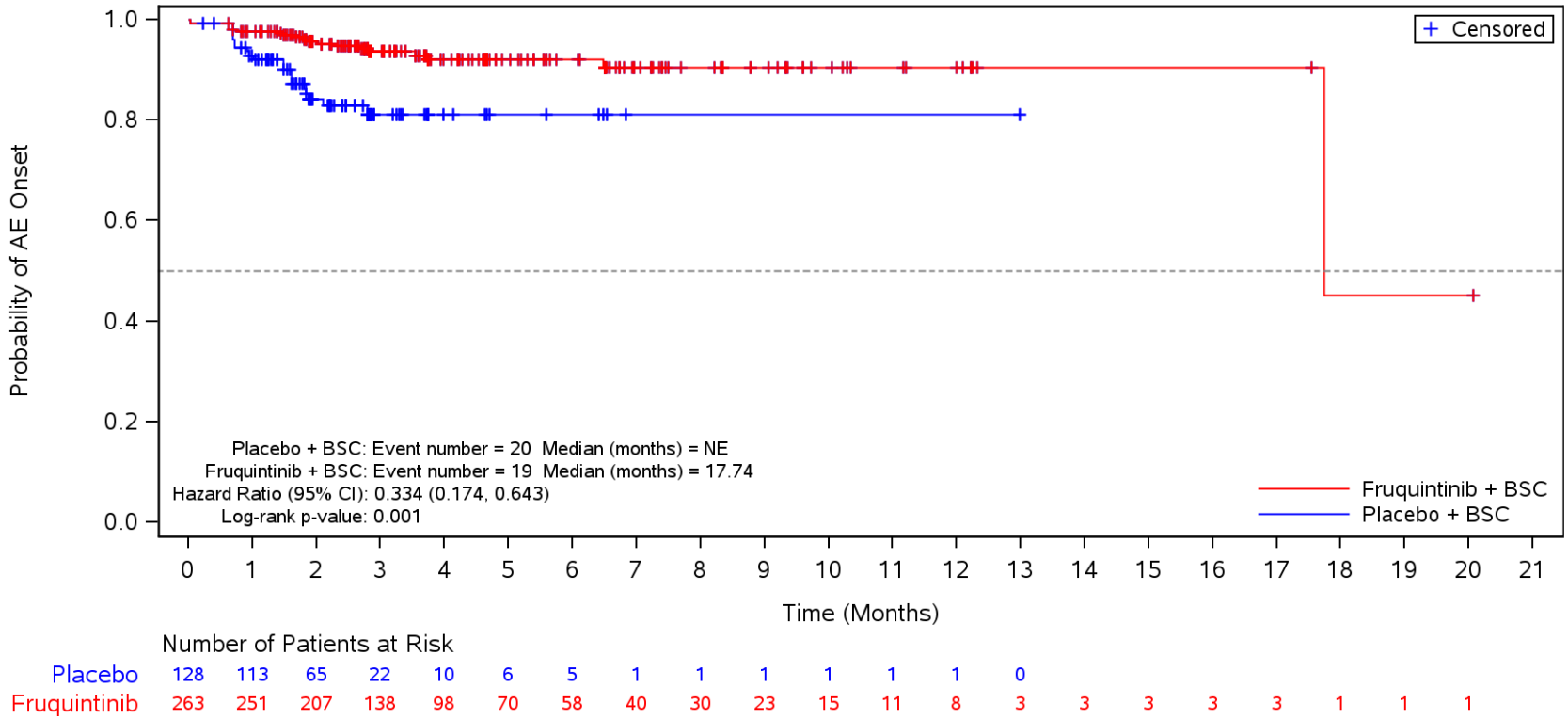
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
ECOG: 1



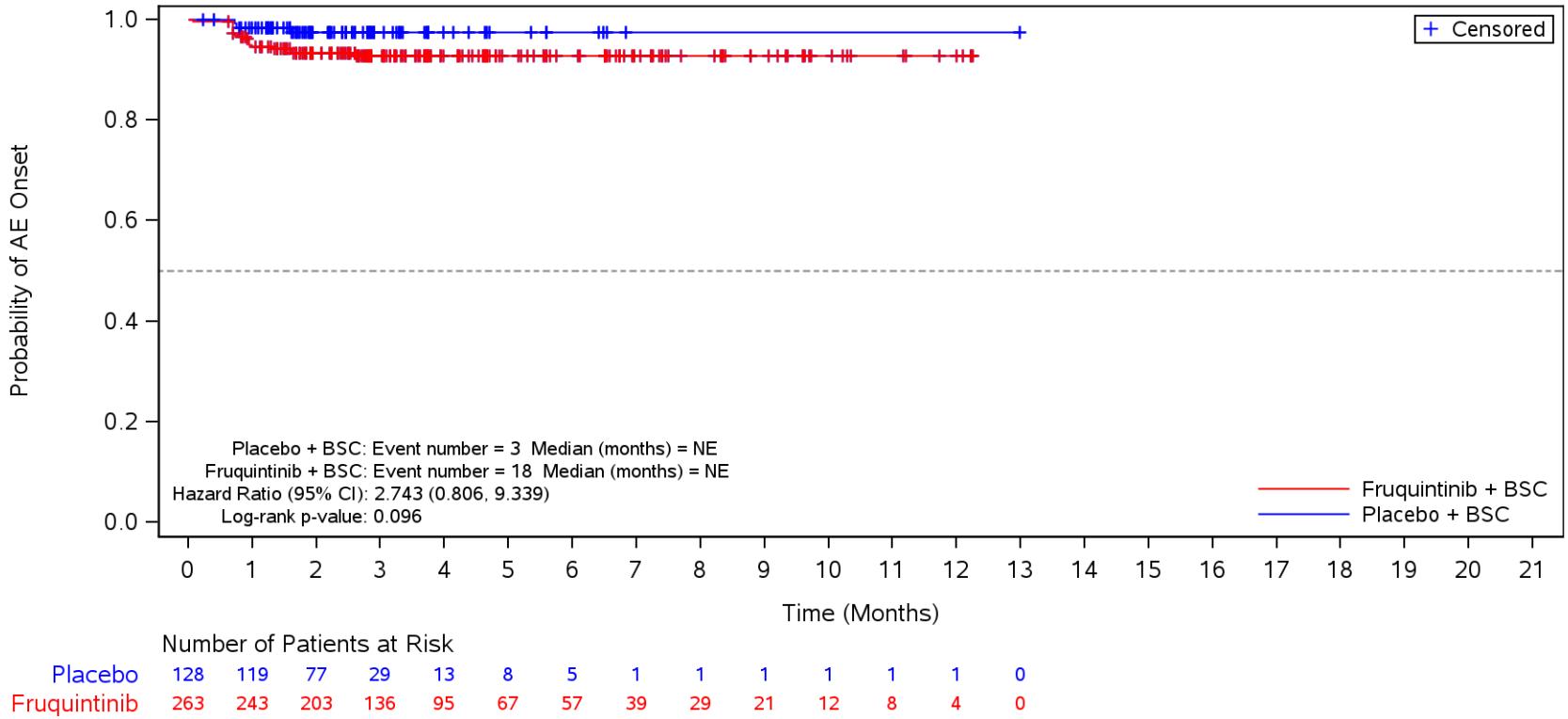
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
ECOG: 1



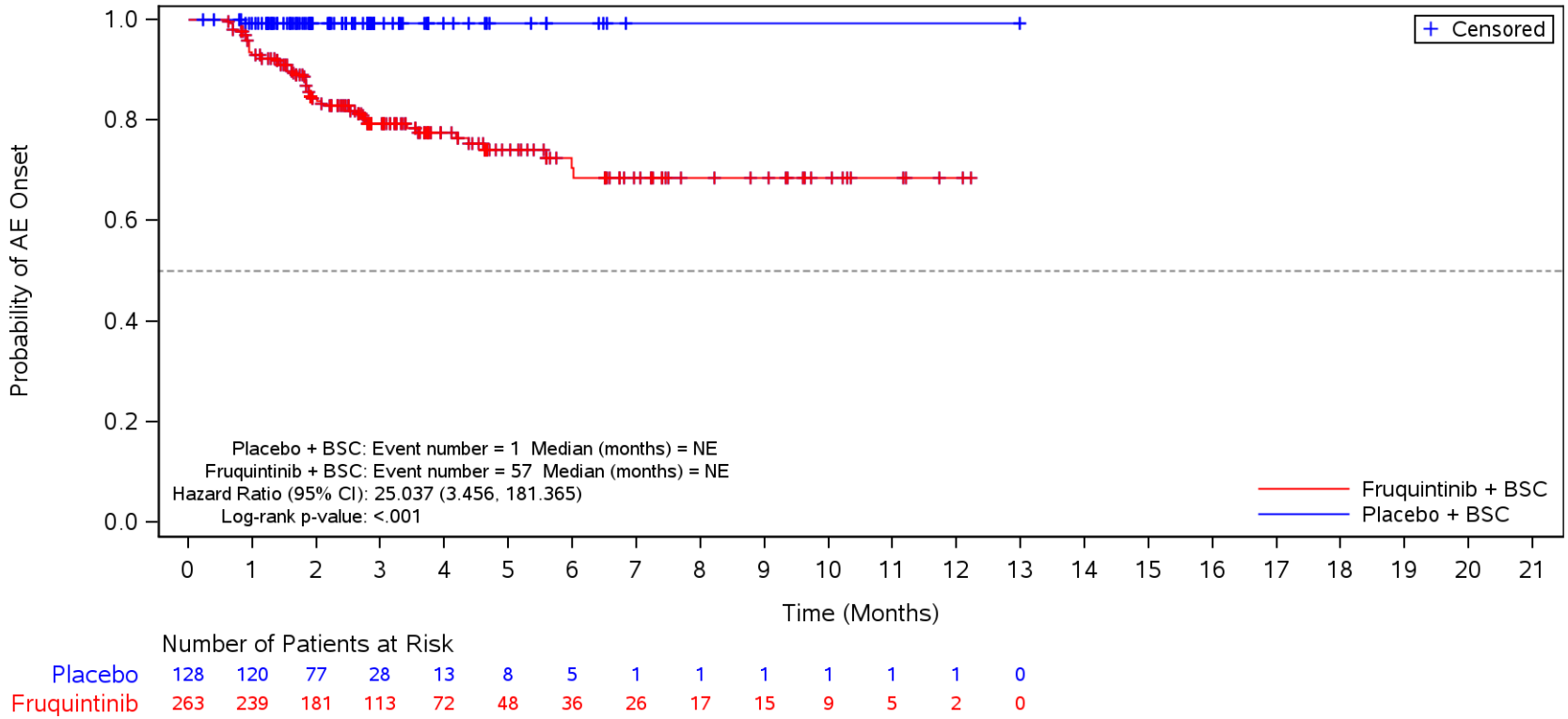
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
ECOG: 1



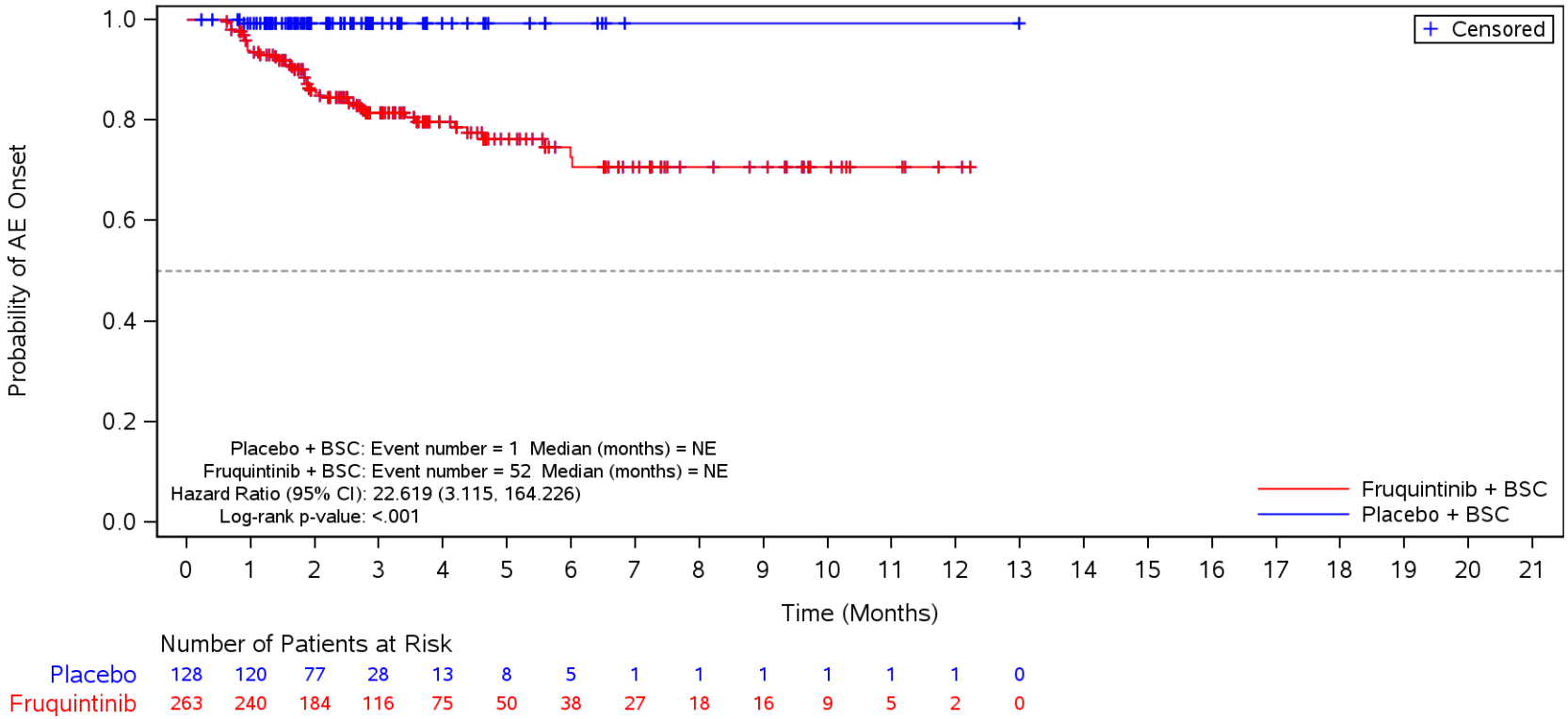
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Endocrine disorders**
ECOG: 1



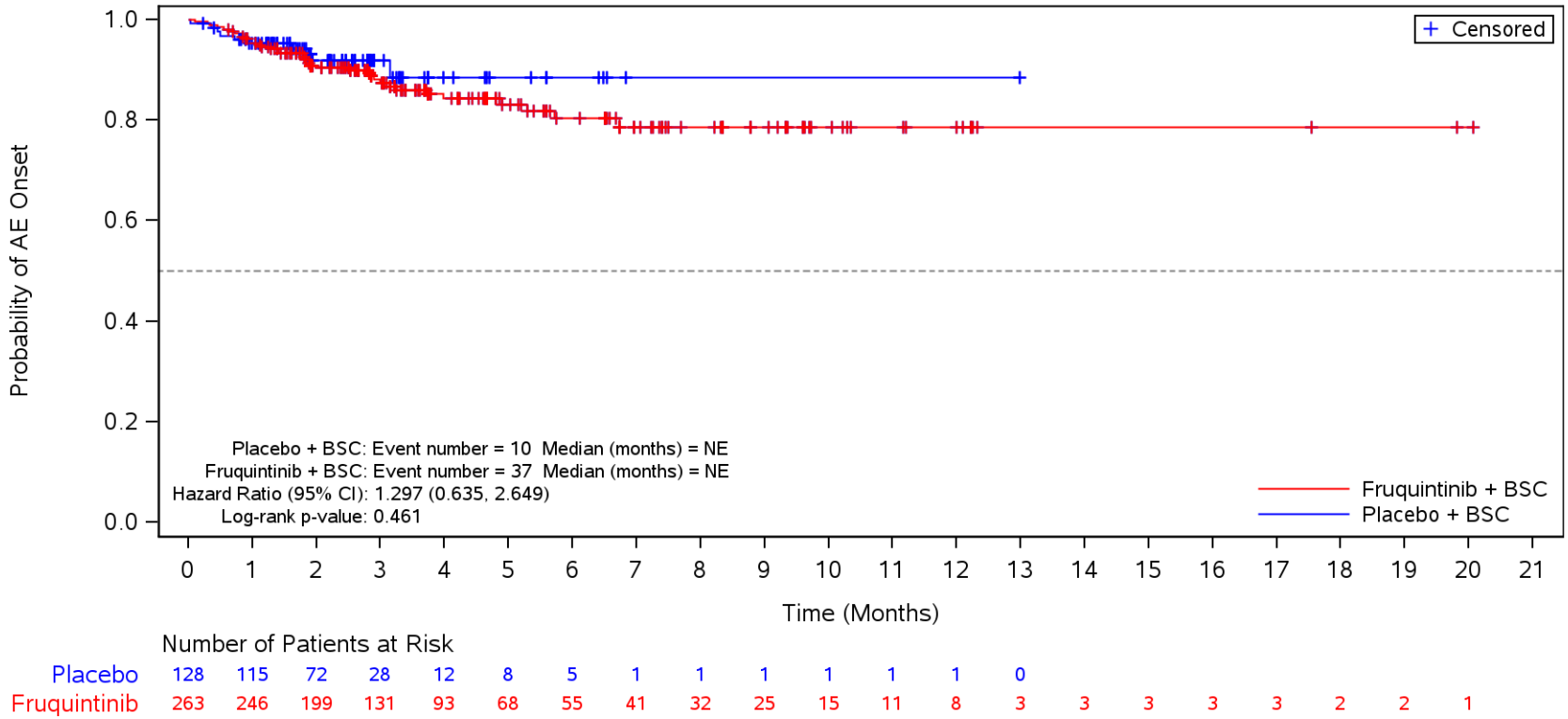
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
ECOG: 1



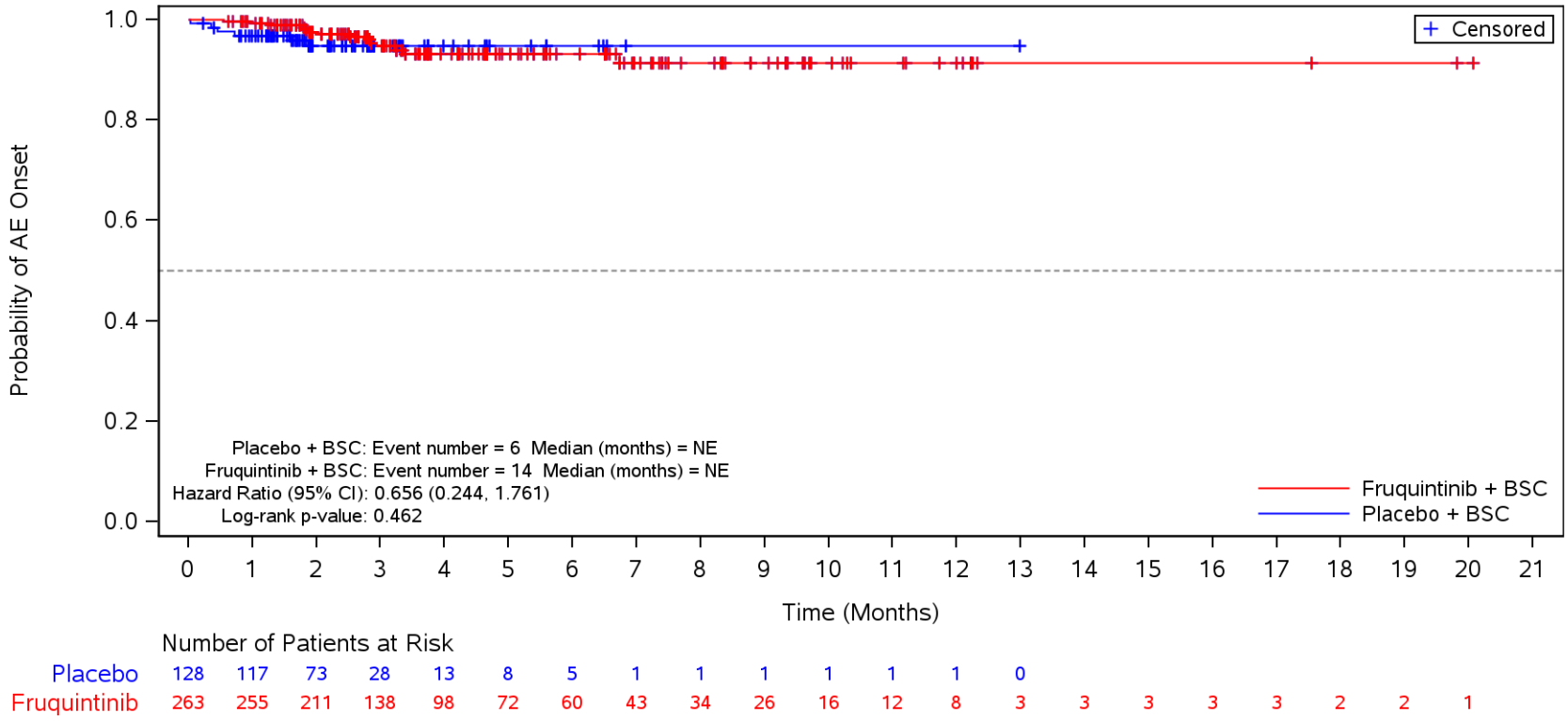
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Psychiatric disorders**
ECOG: 1



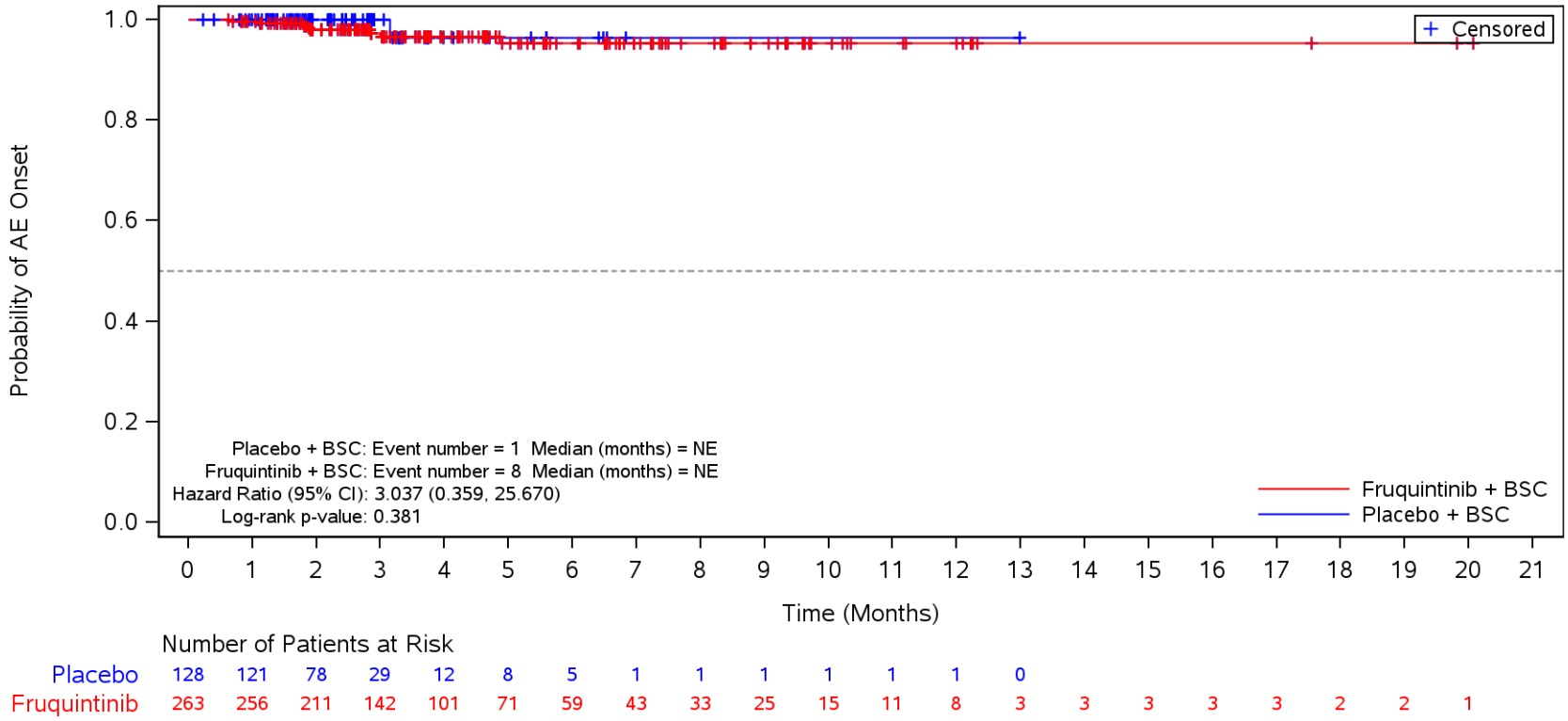
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
ECOG: 1



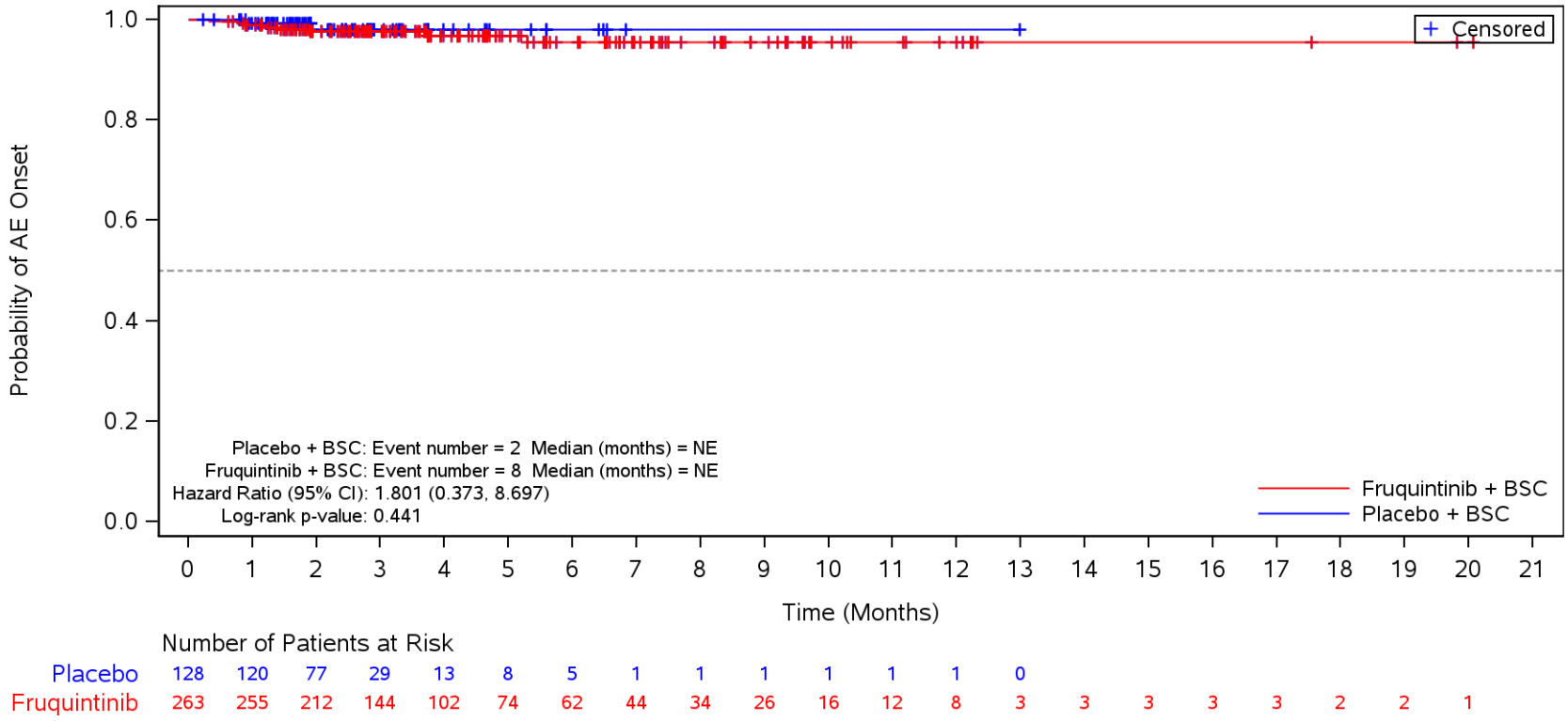
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**
ECOG: 1



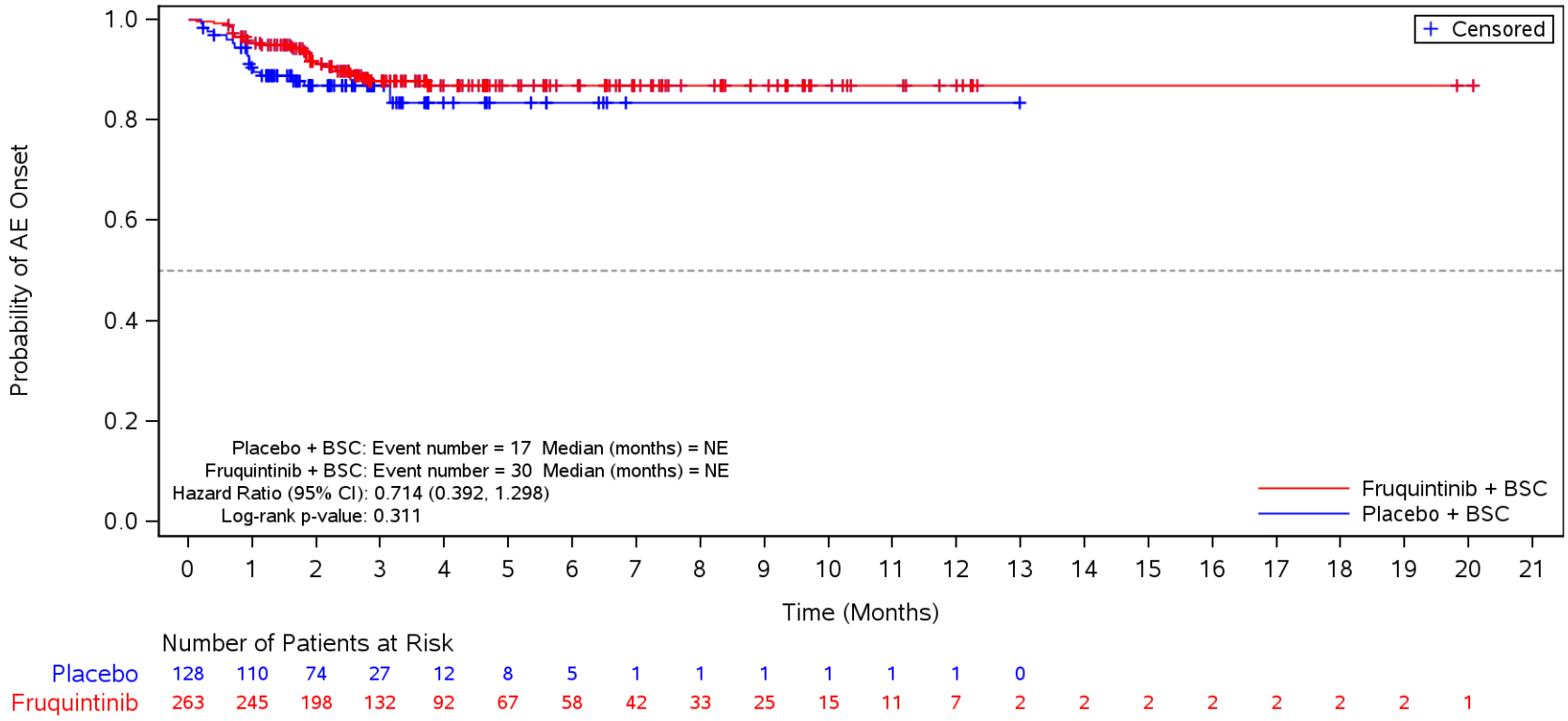
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
ECOG: 1



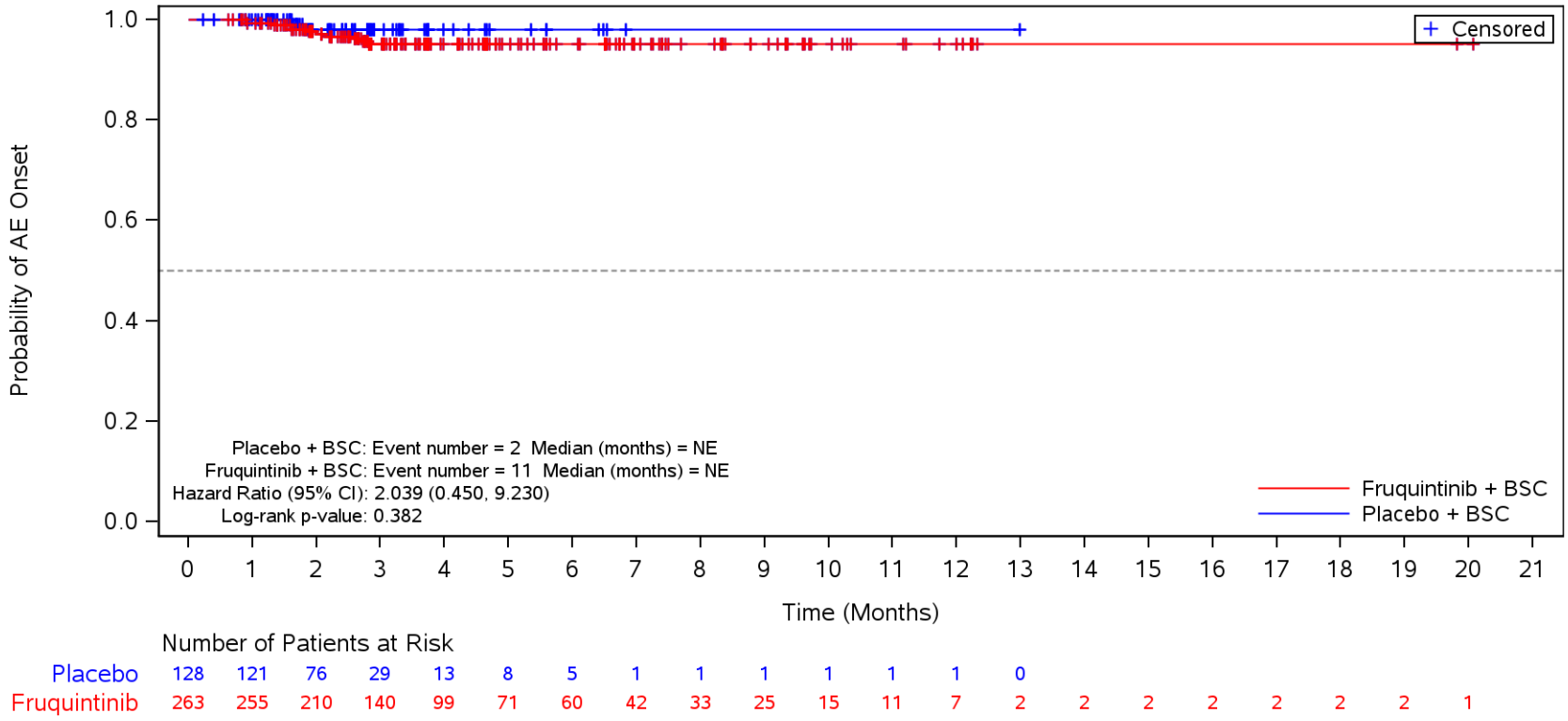
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**
ECOG: 1



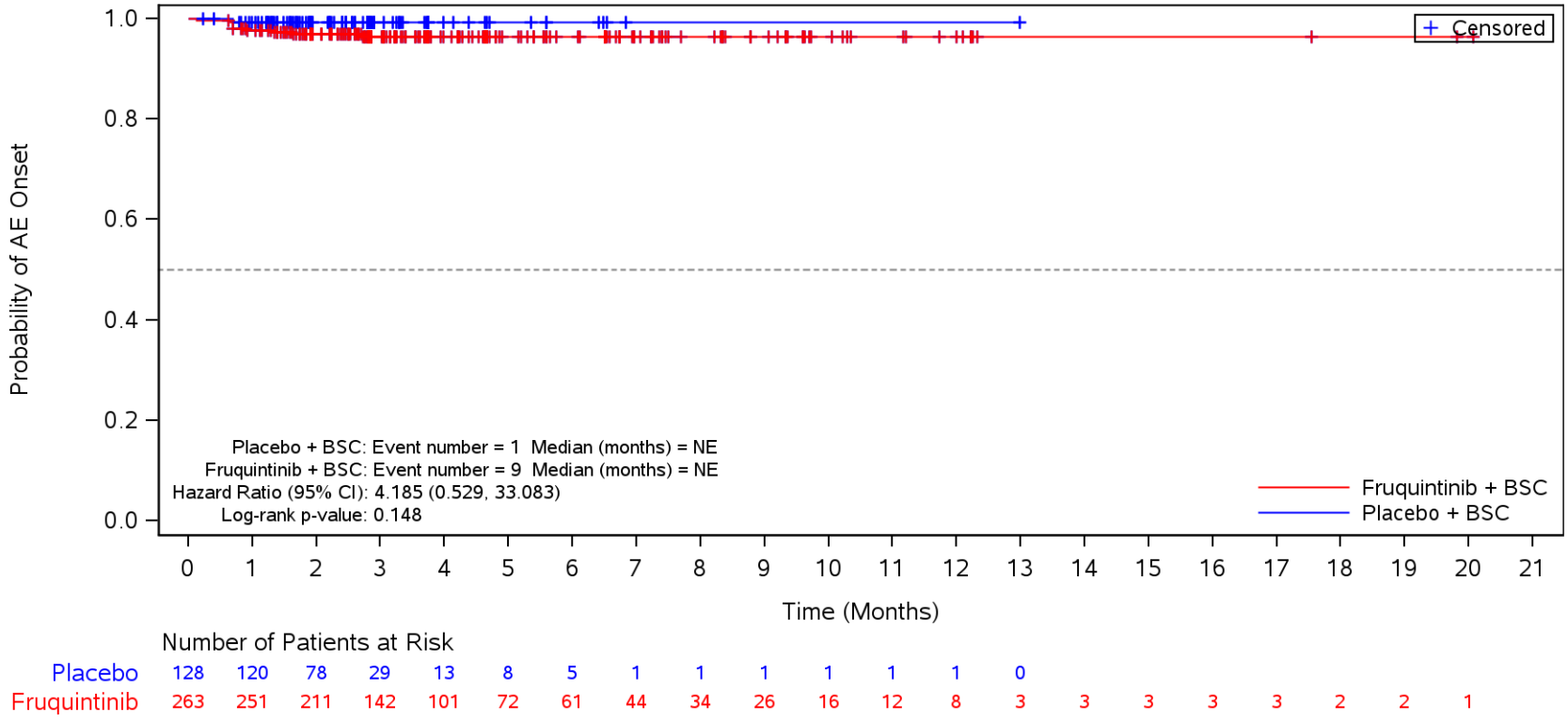
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3E
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by ECOG PS
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hypertransaminasaemia**
ECOG: 1



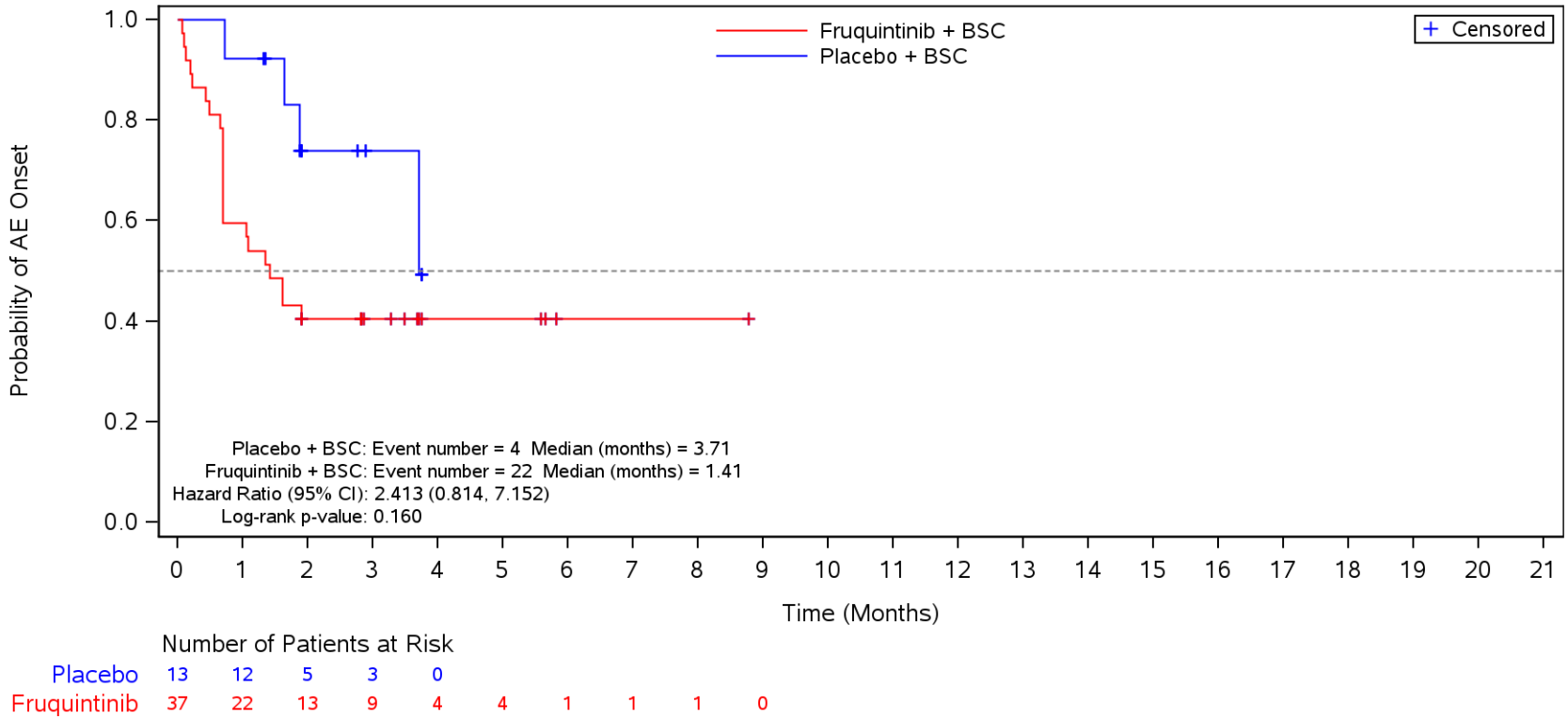
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
<= 18 months



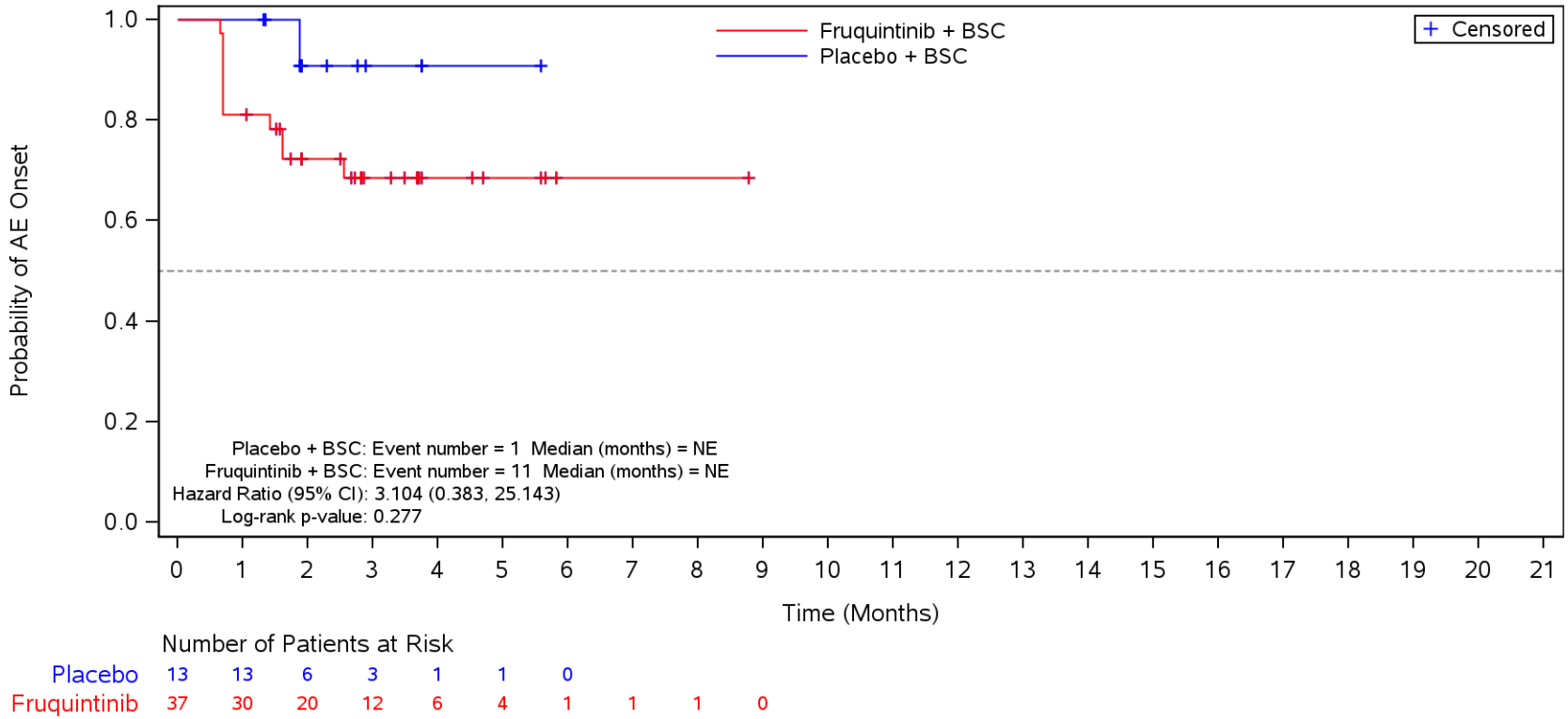
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
<= 18 months



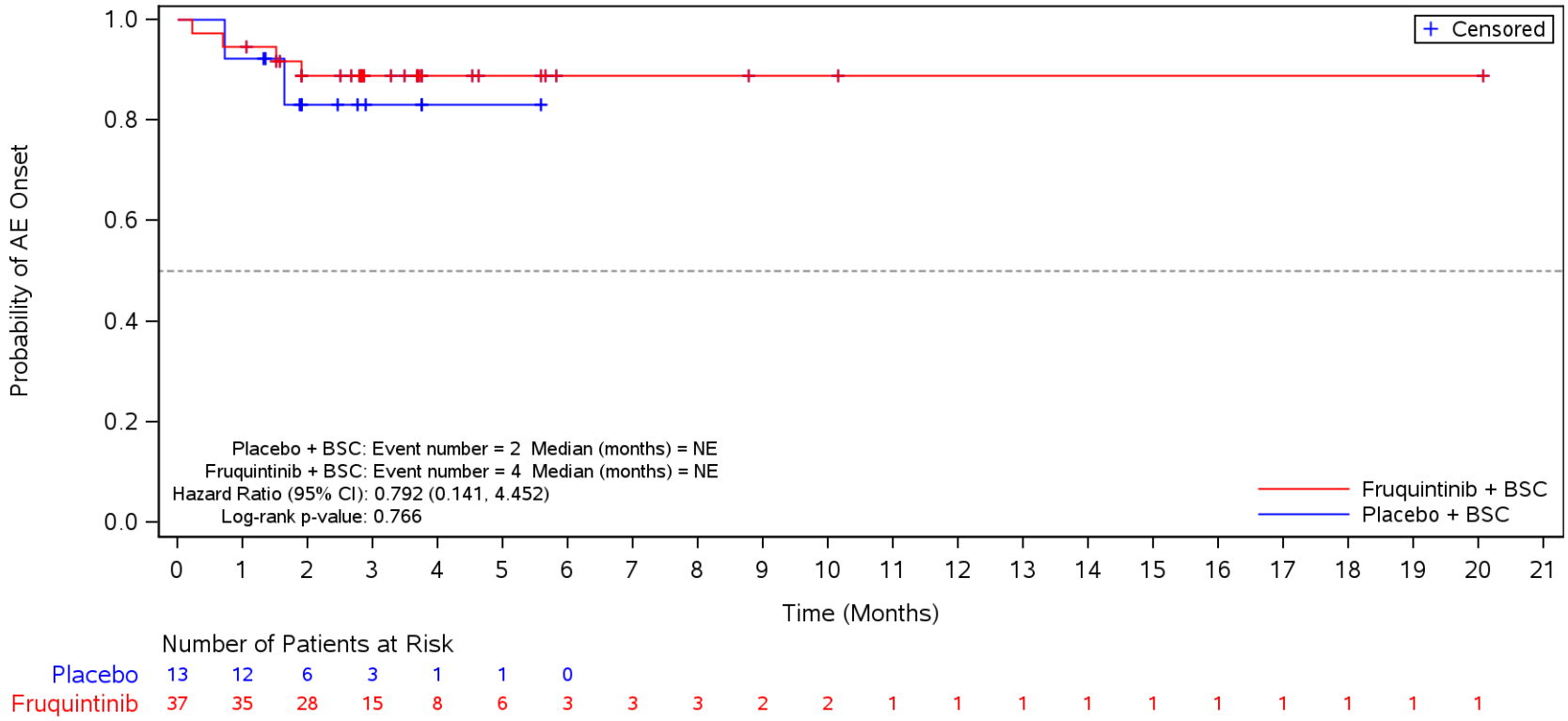
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
<= 18 months



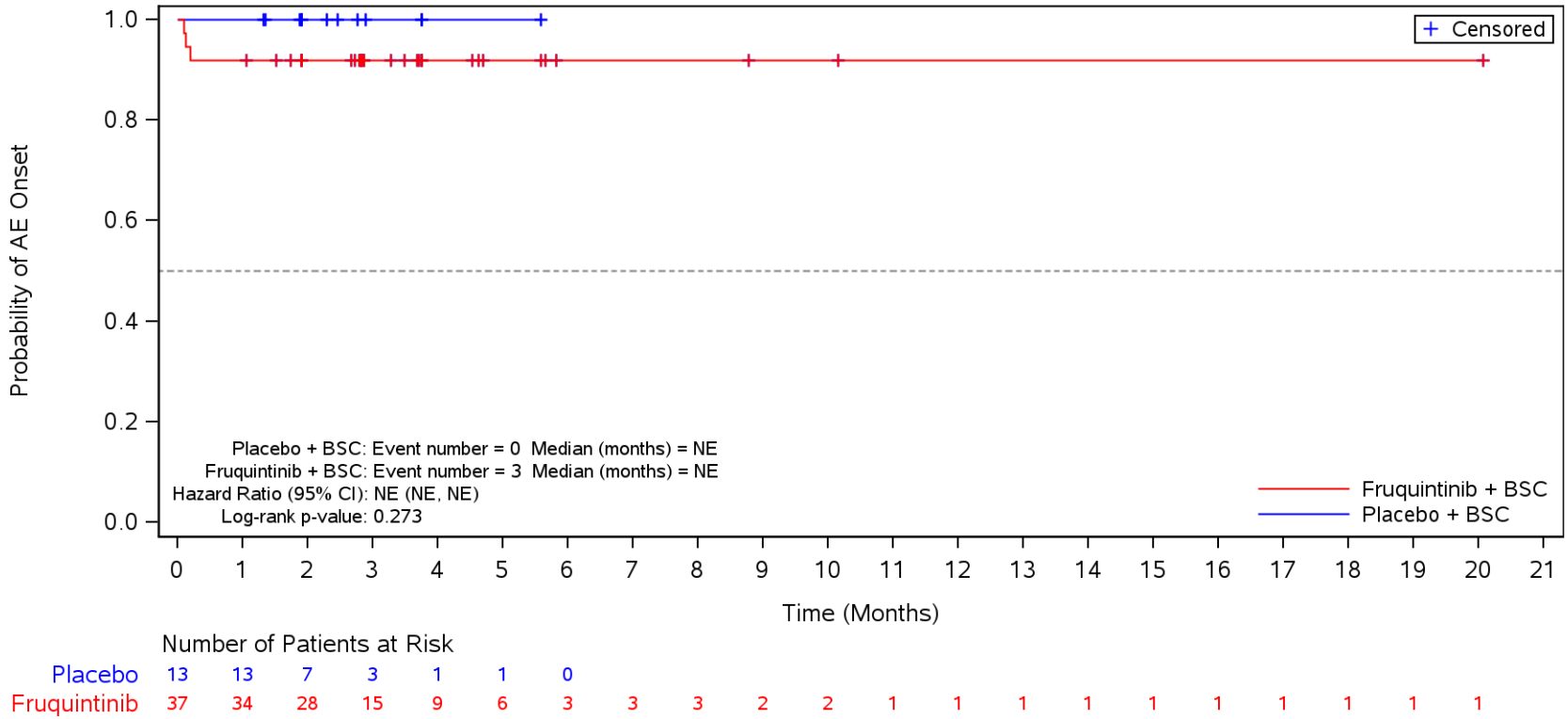
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
<= 18 months



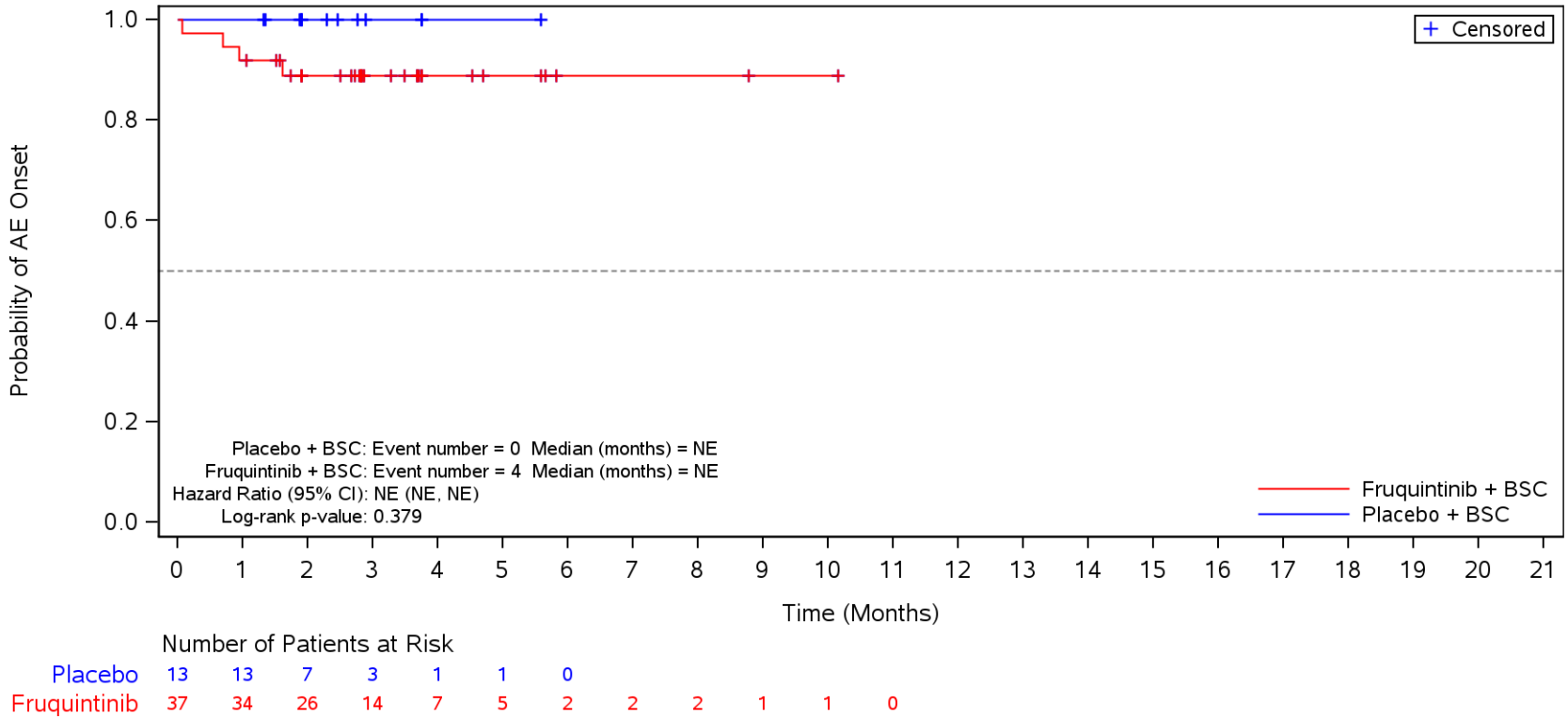
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
<= 18 months



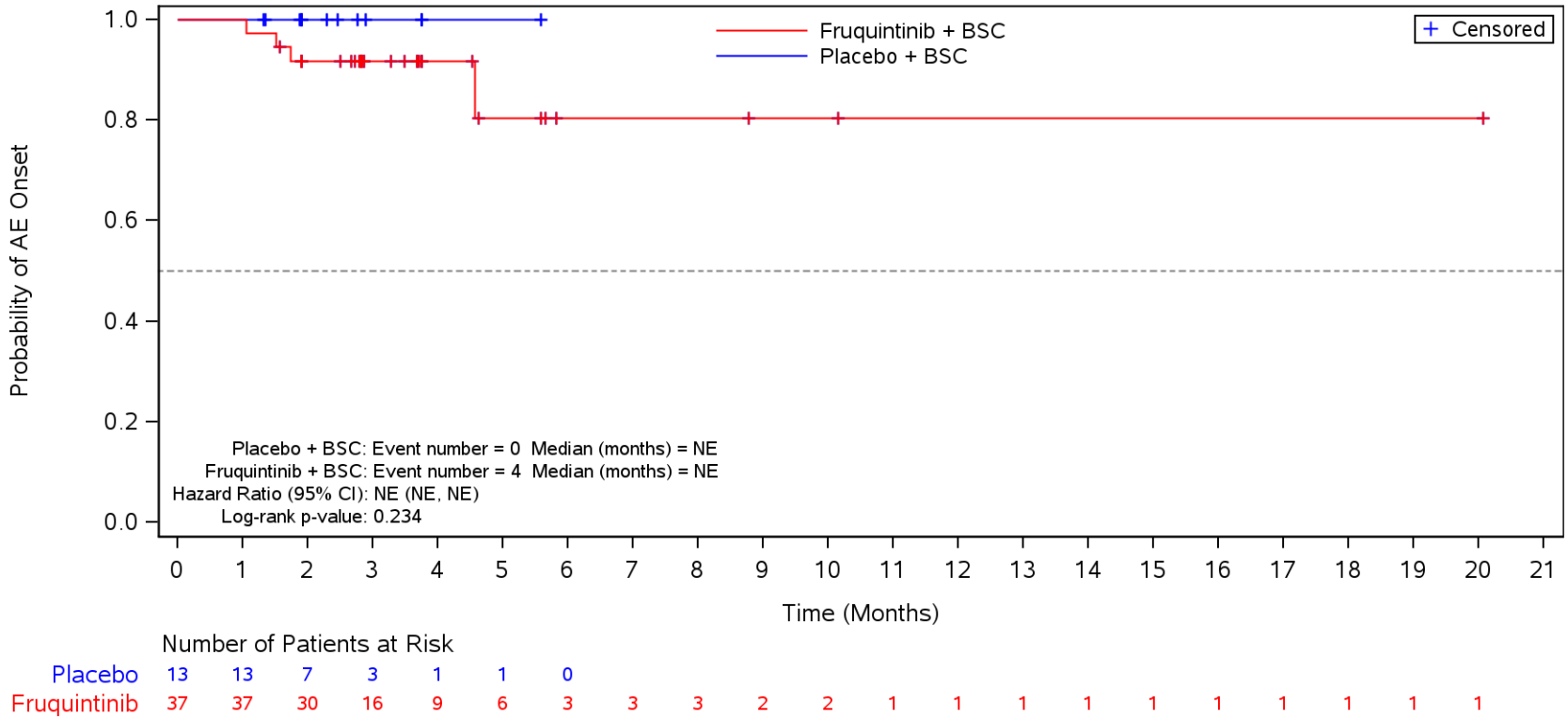
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
<= 18 months



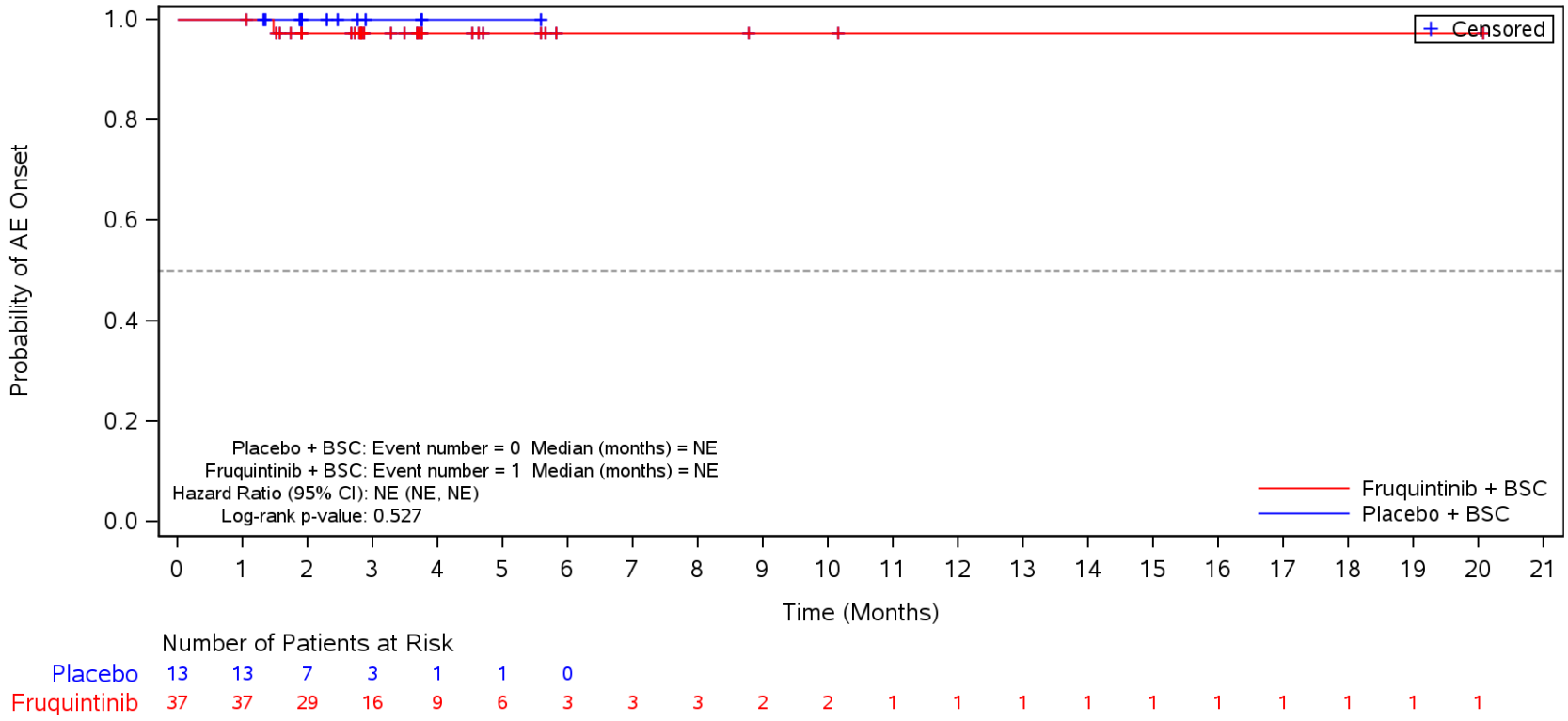
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
<= 18 months



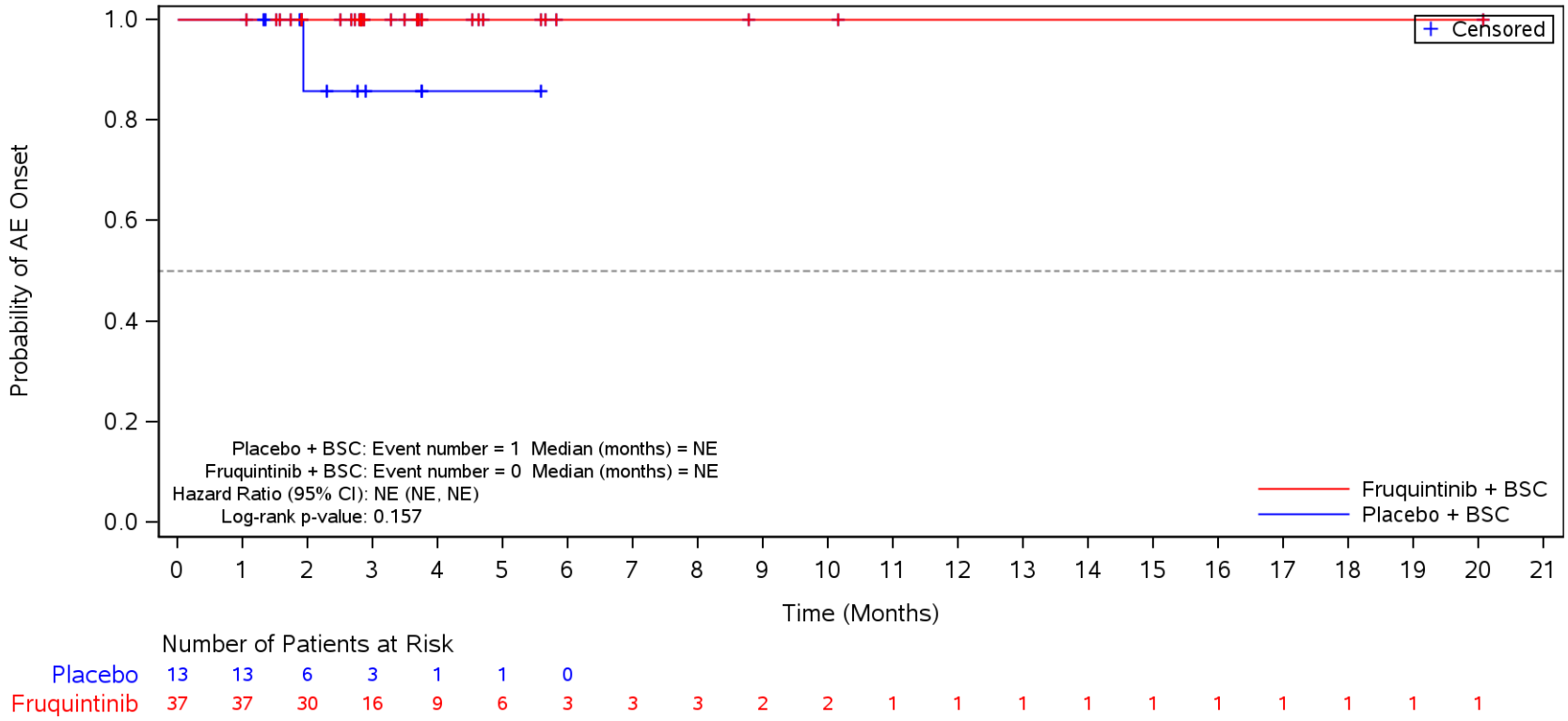
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
<= 18 months



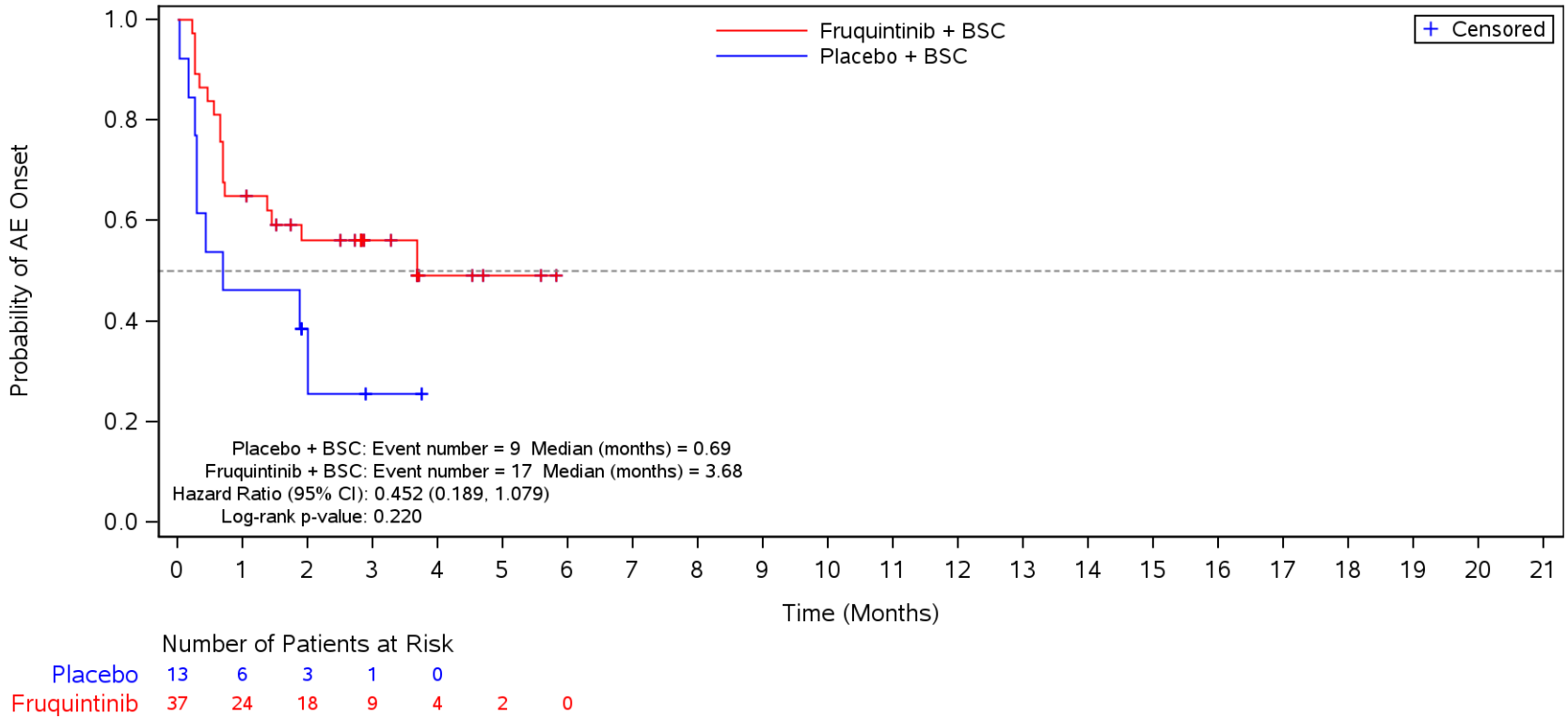
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**
<= 18 months



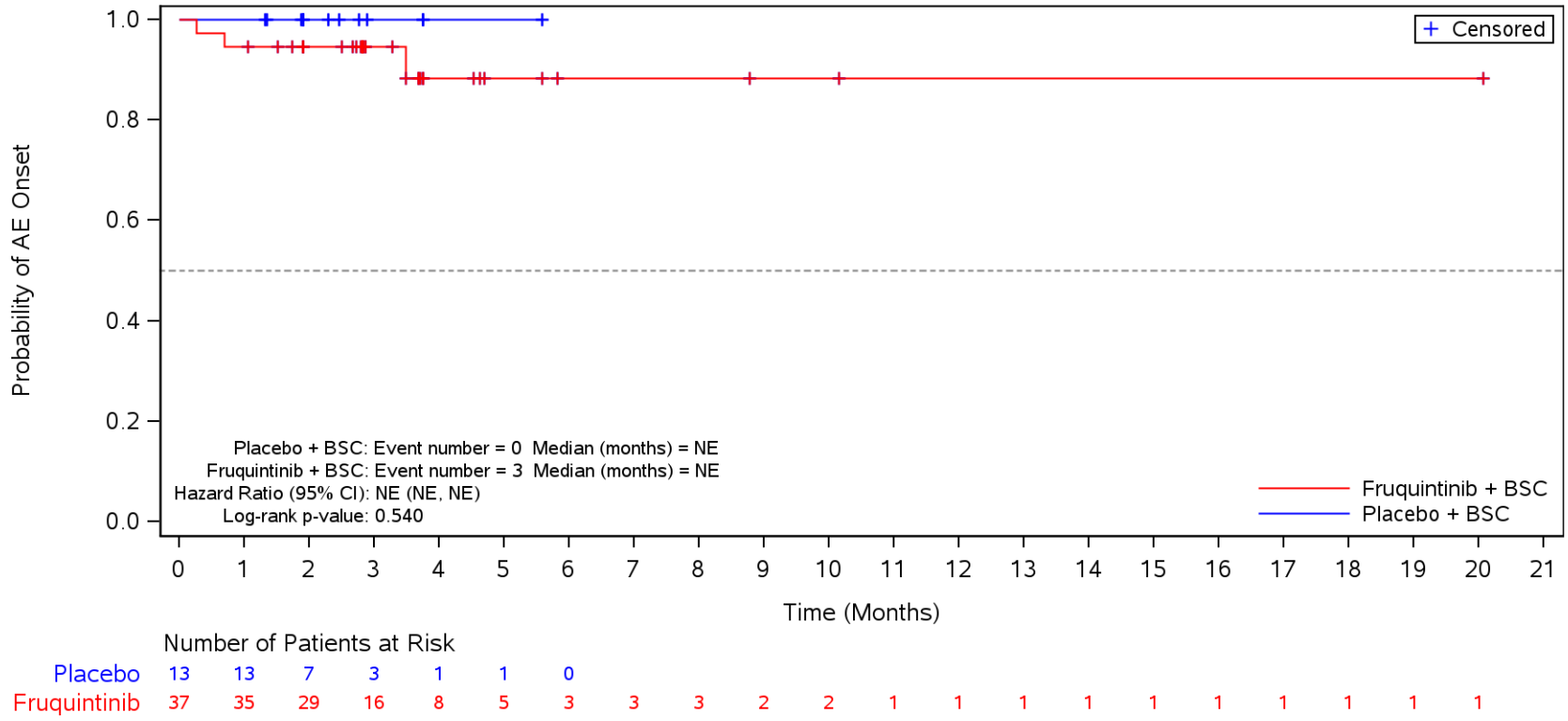
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
<= 18 months



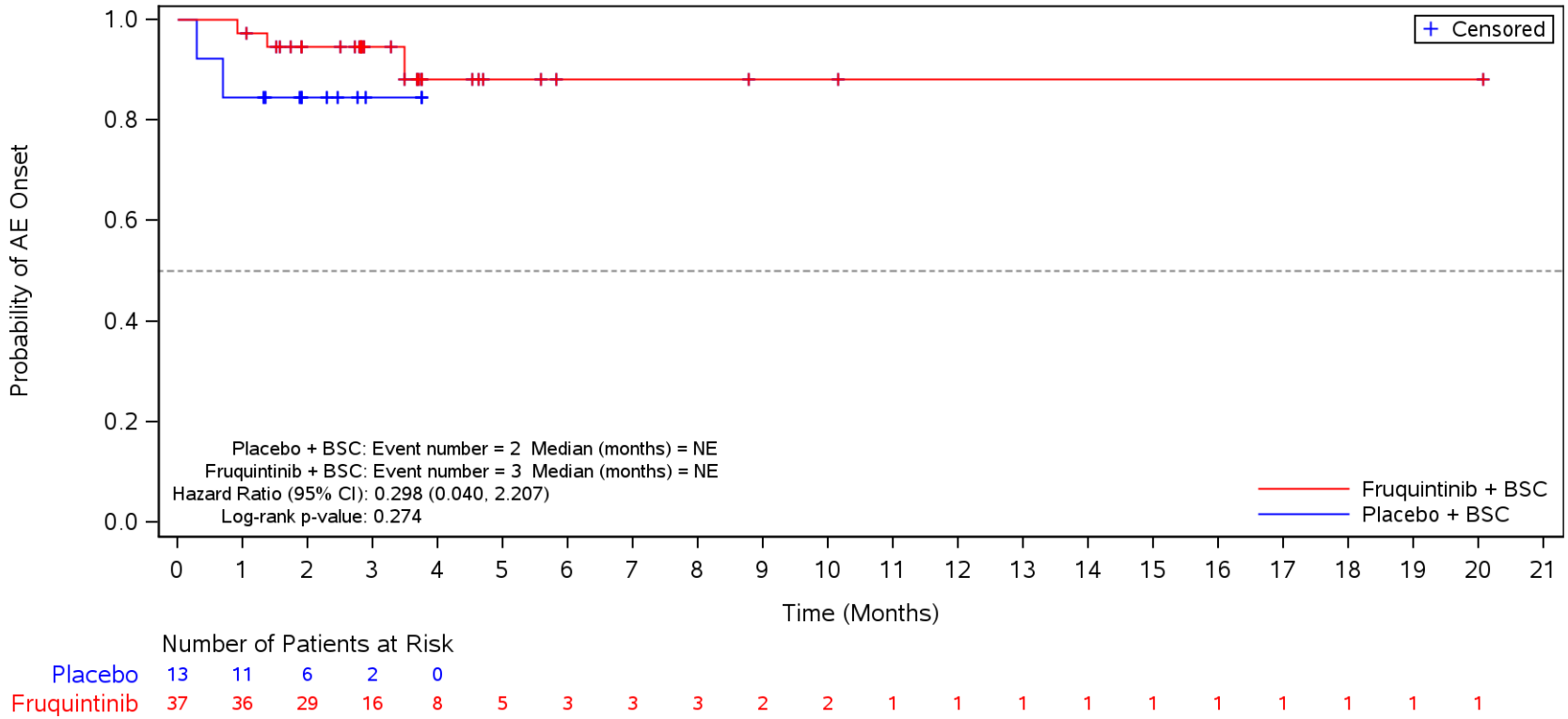
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
<= 18 months



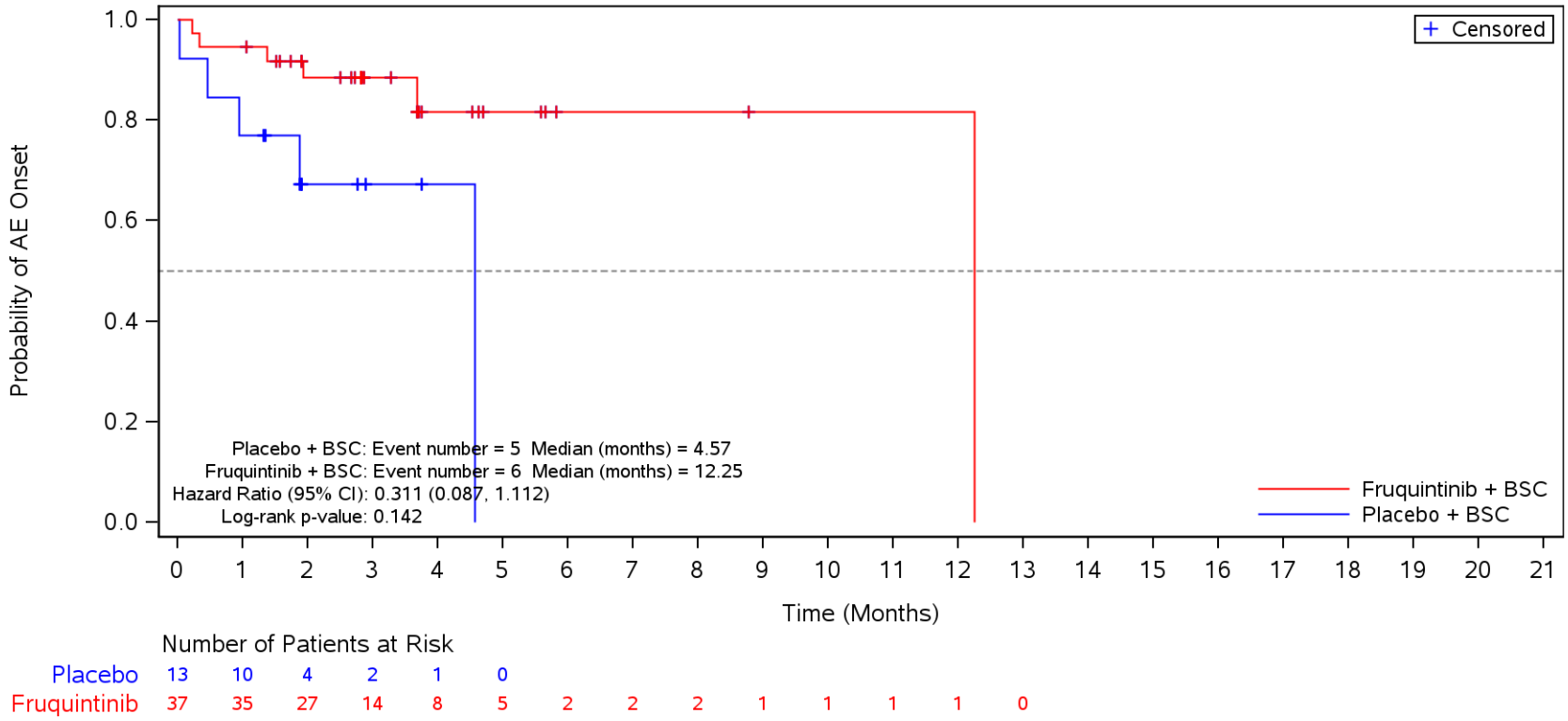
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
<= 18 months



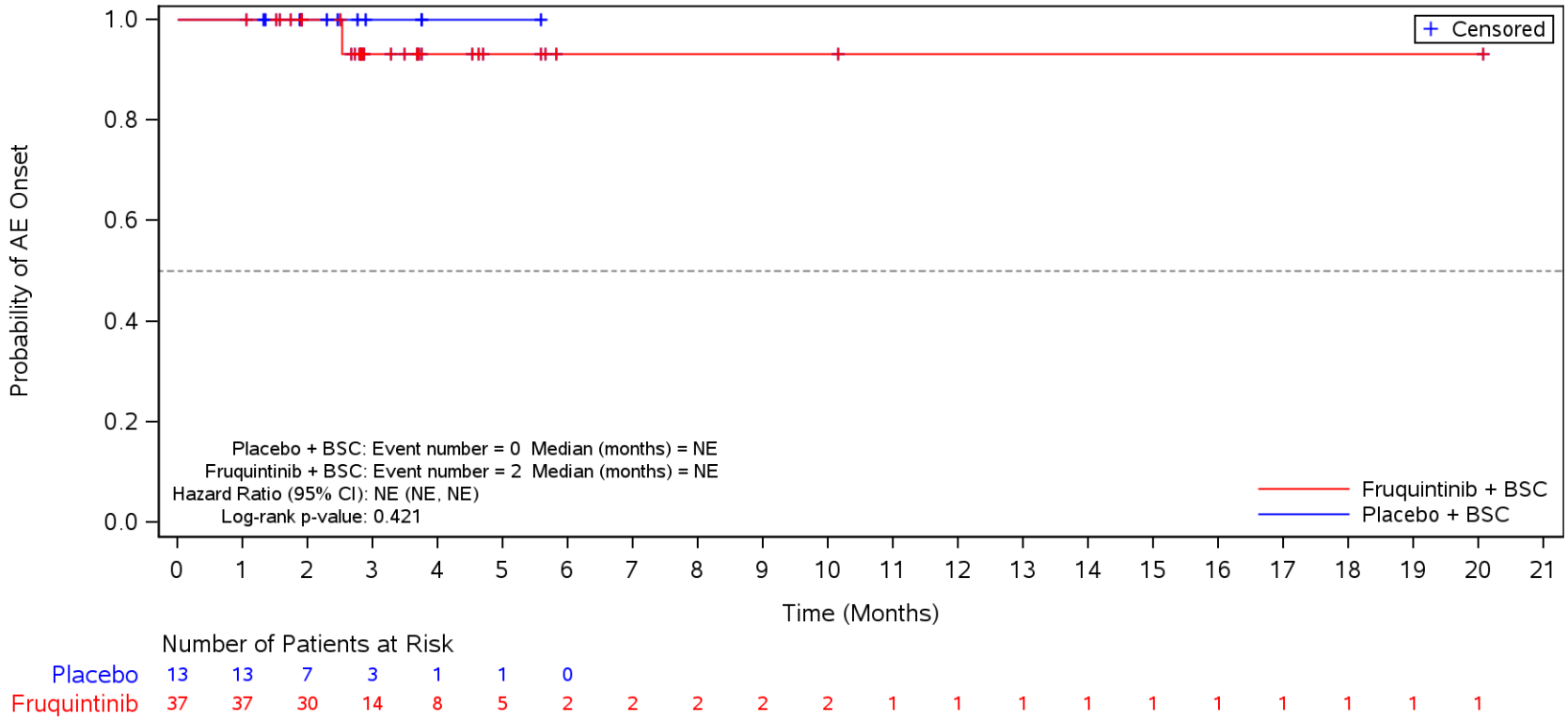
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
<= 18 months



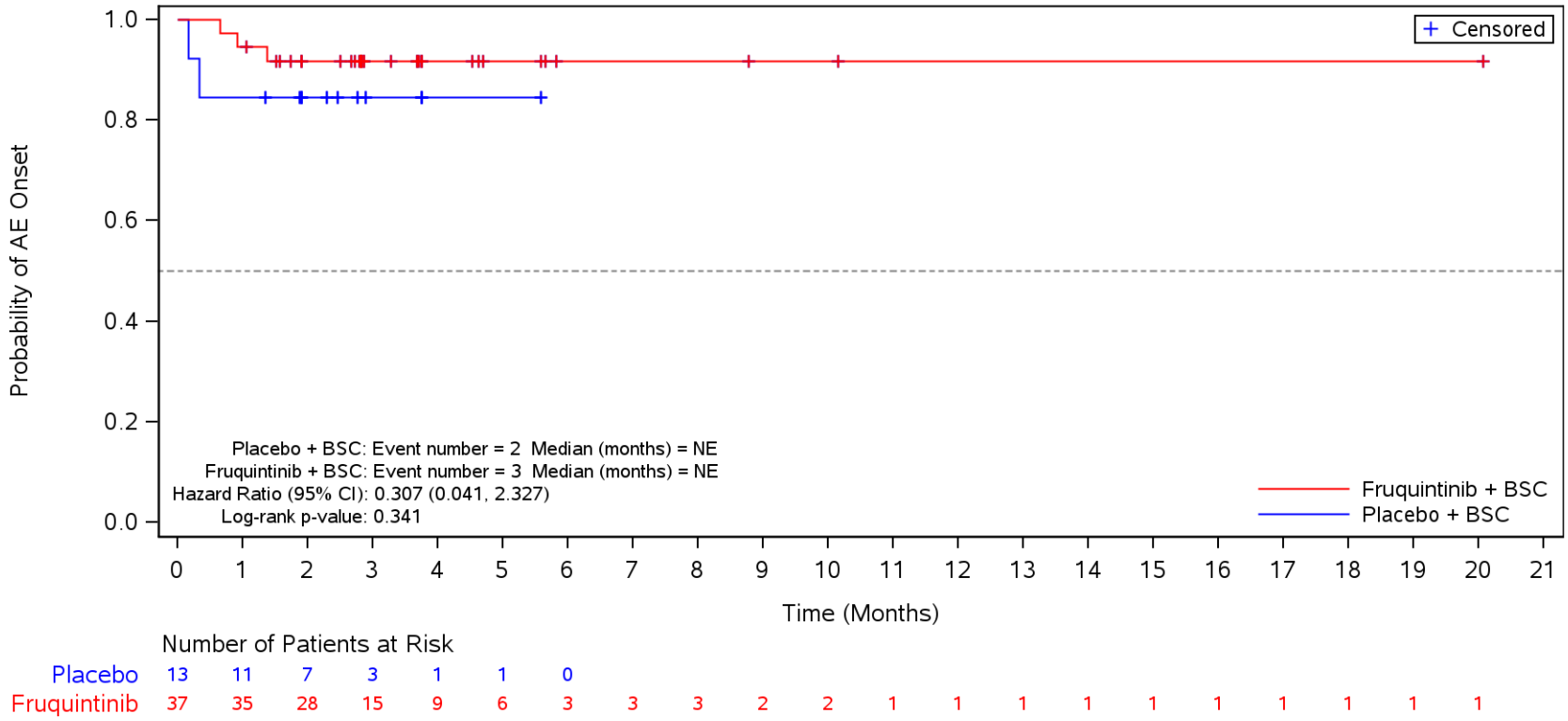
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
<= 18 months



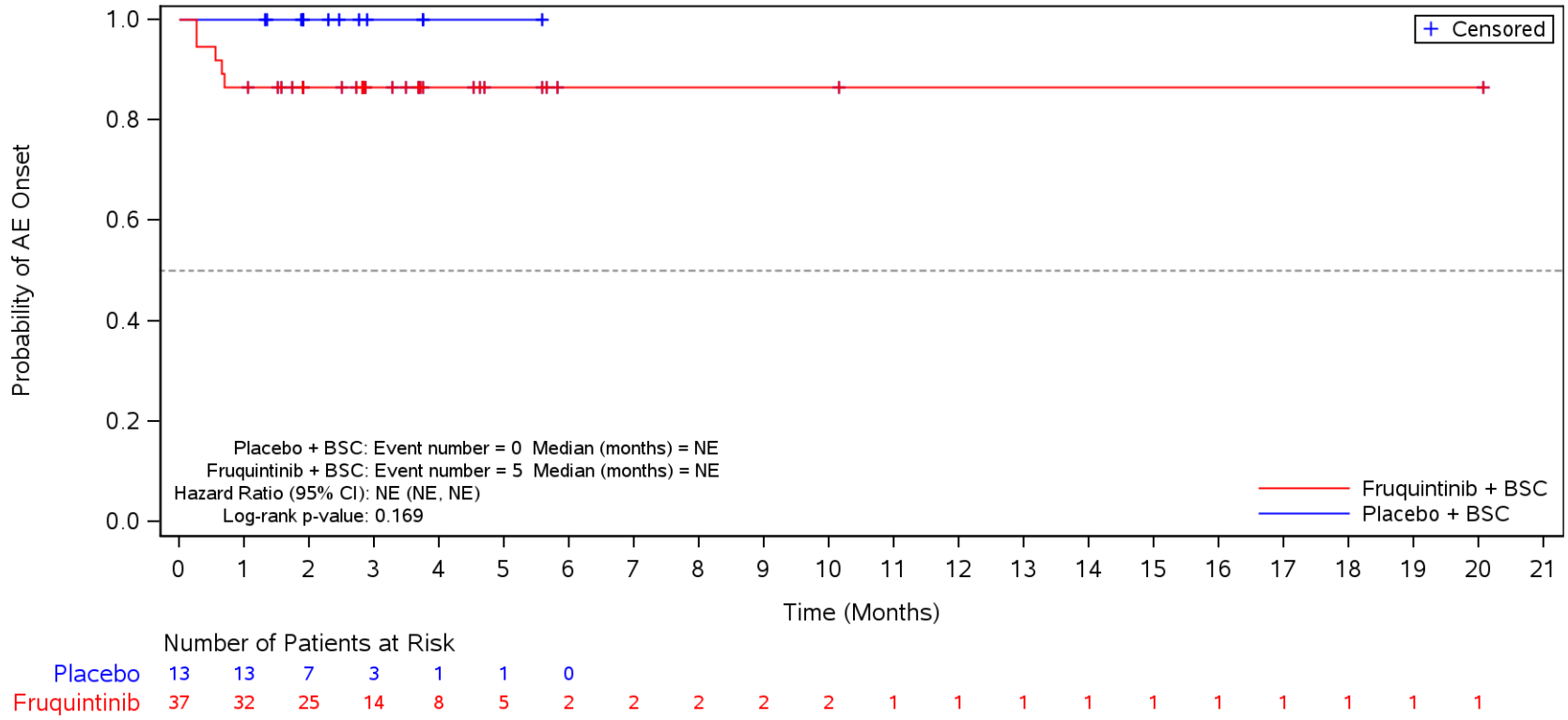
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
<= 18 months



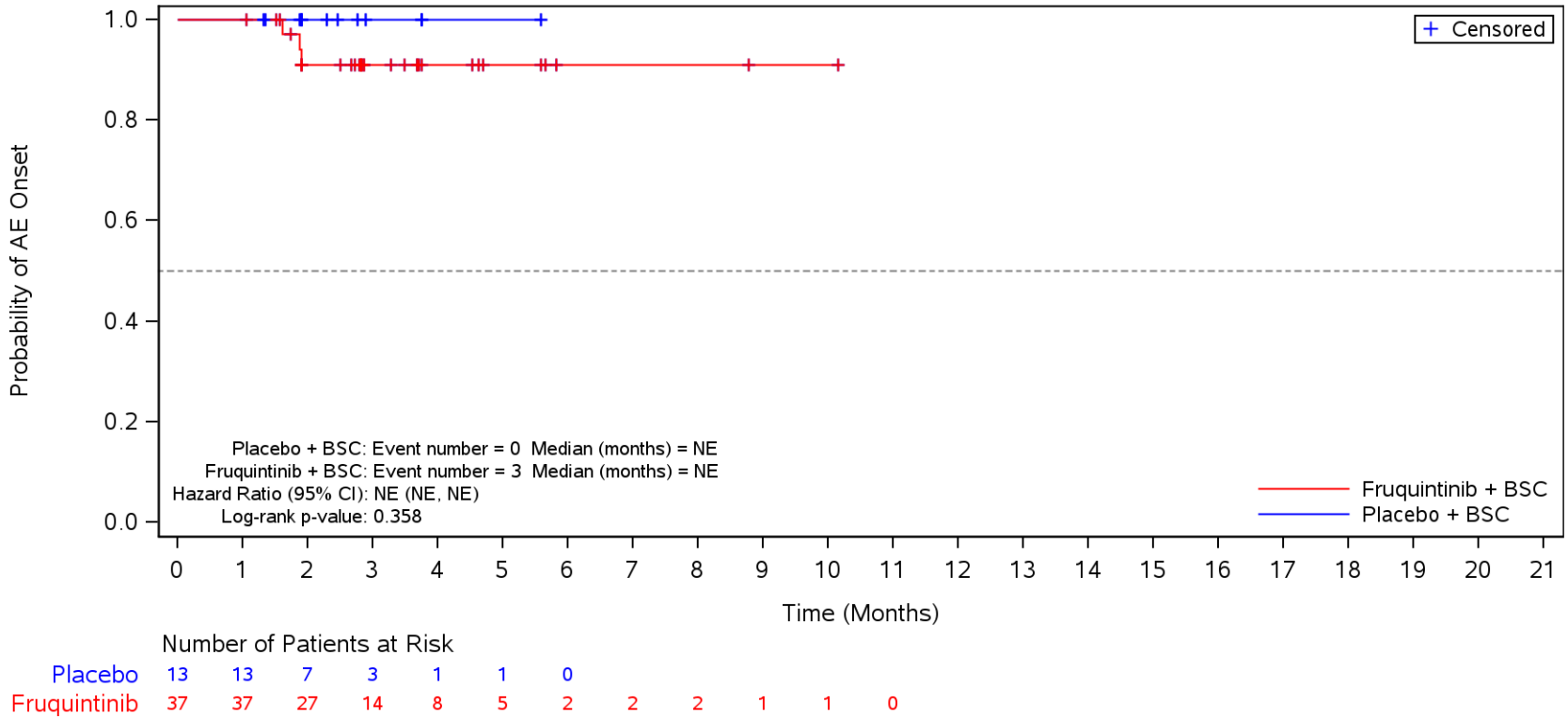
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
<= 18 months



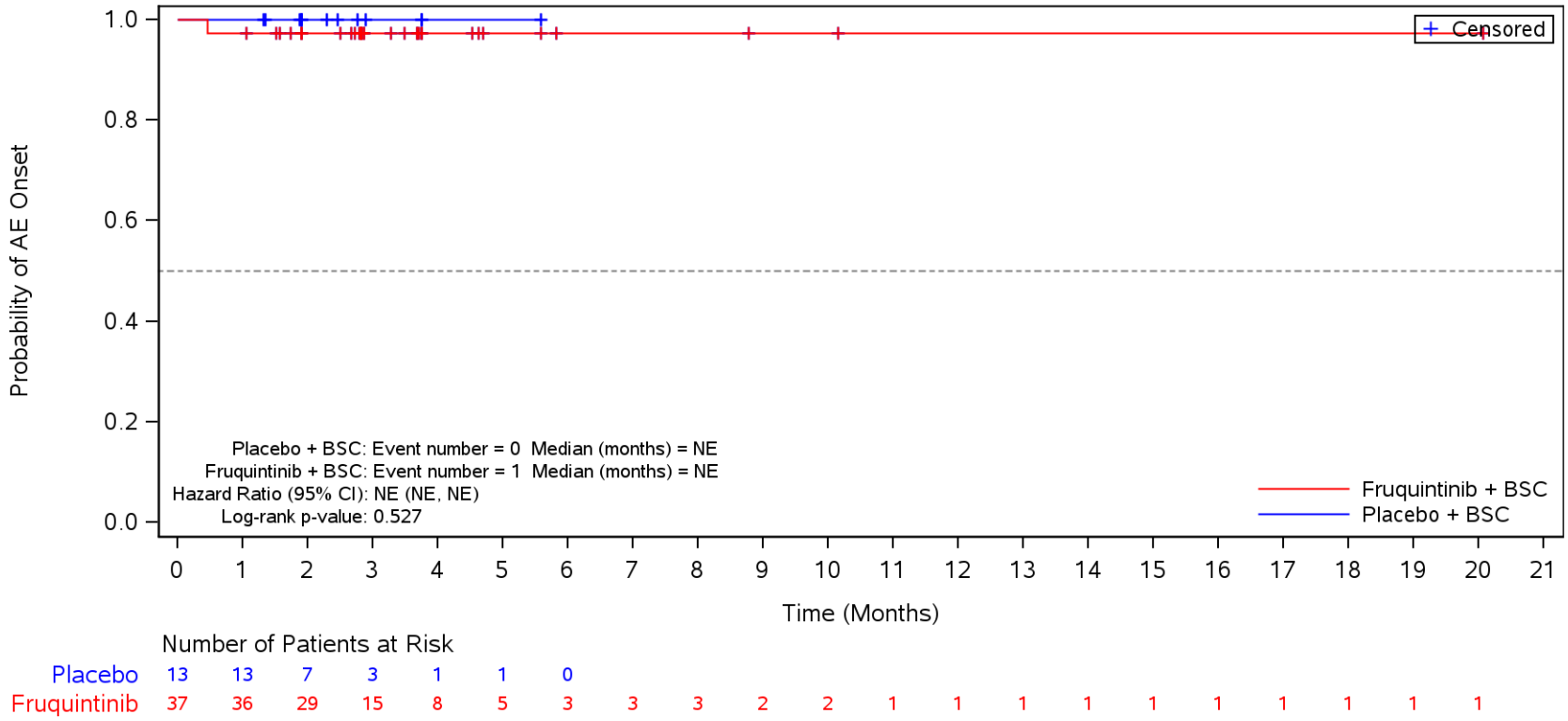
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
<= 18 months



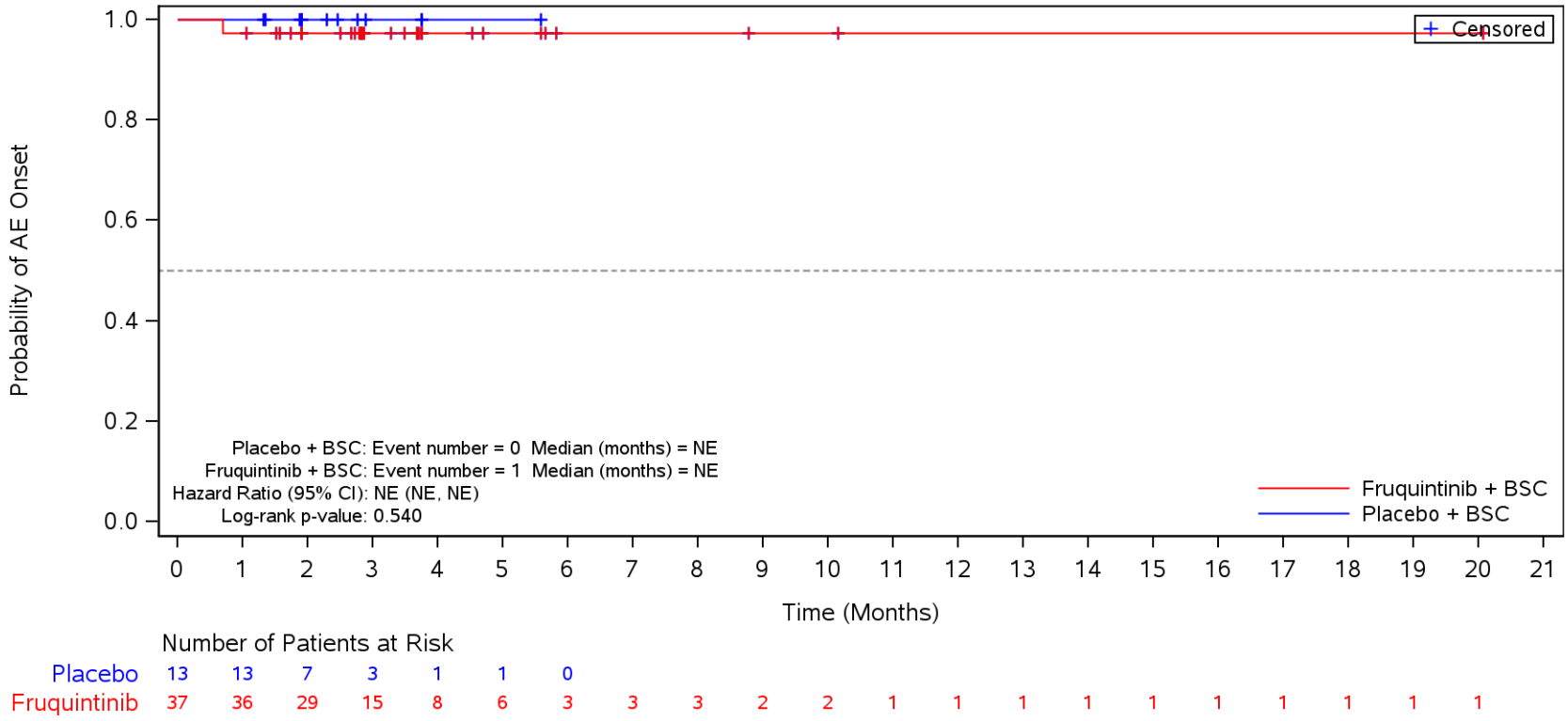
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
<= 18 months



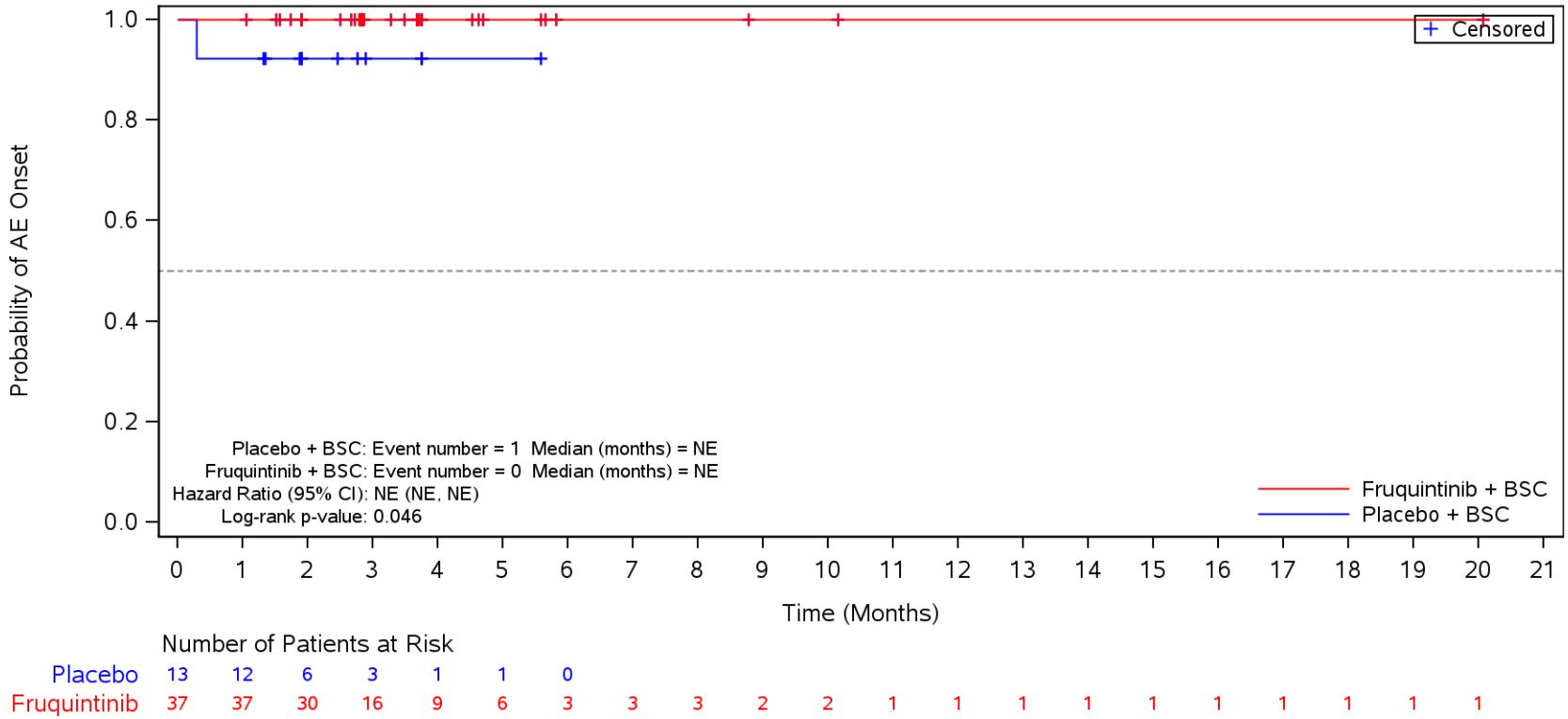
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
<= 18 months



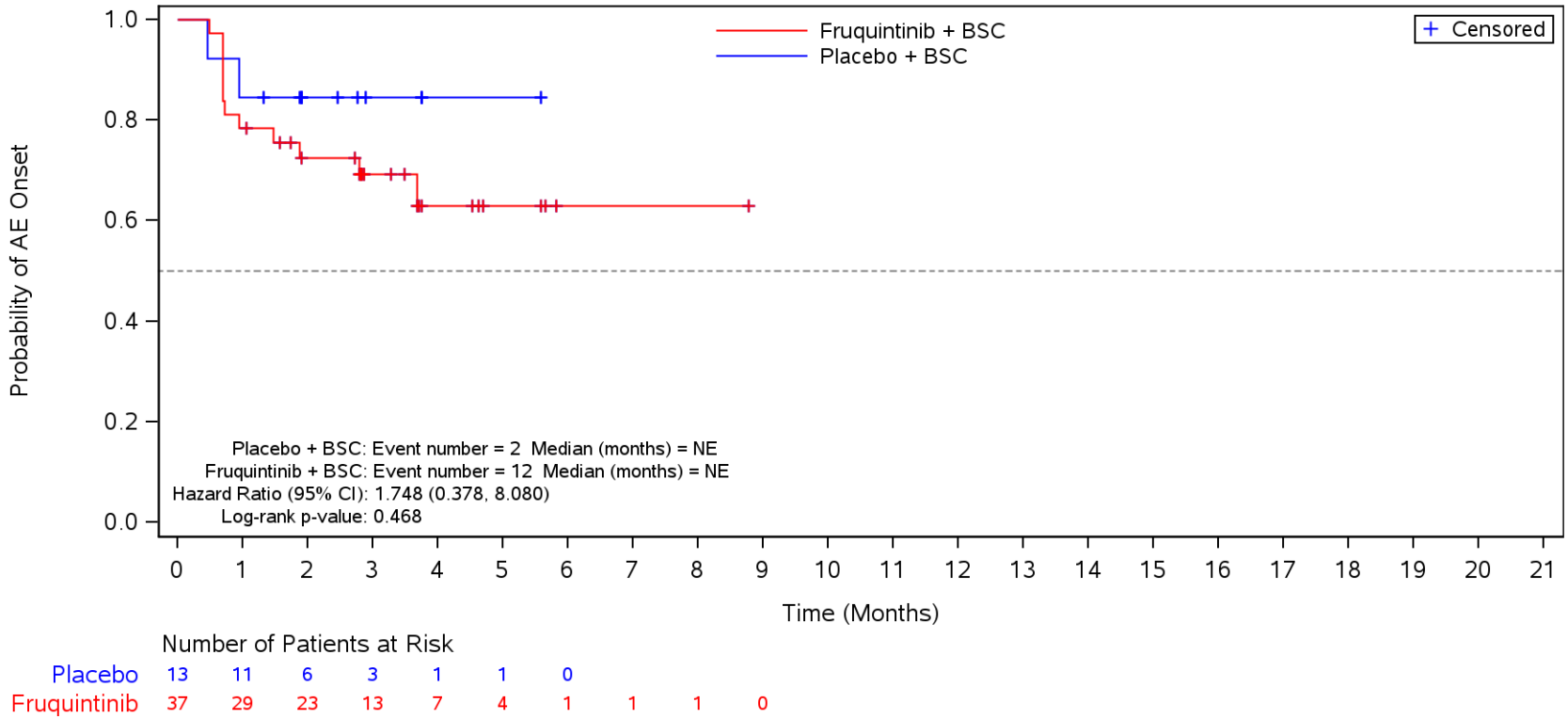
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
<= 18 months



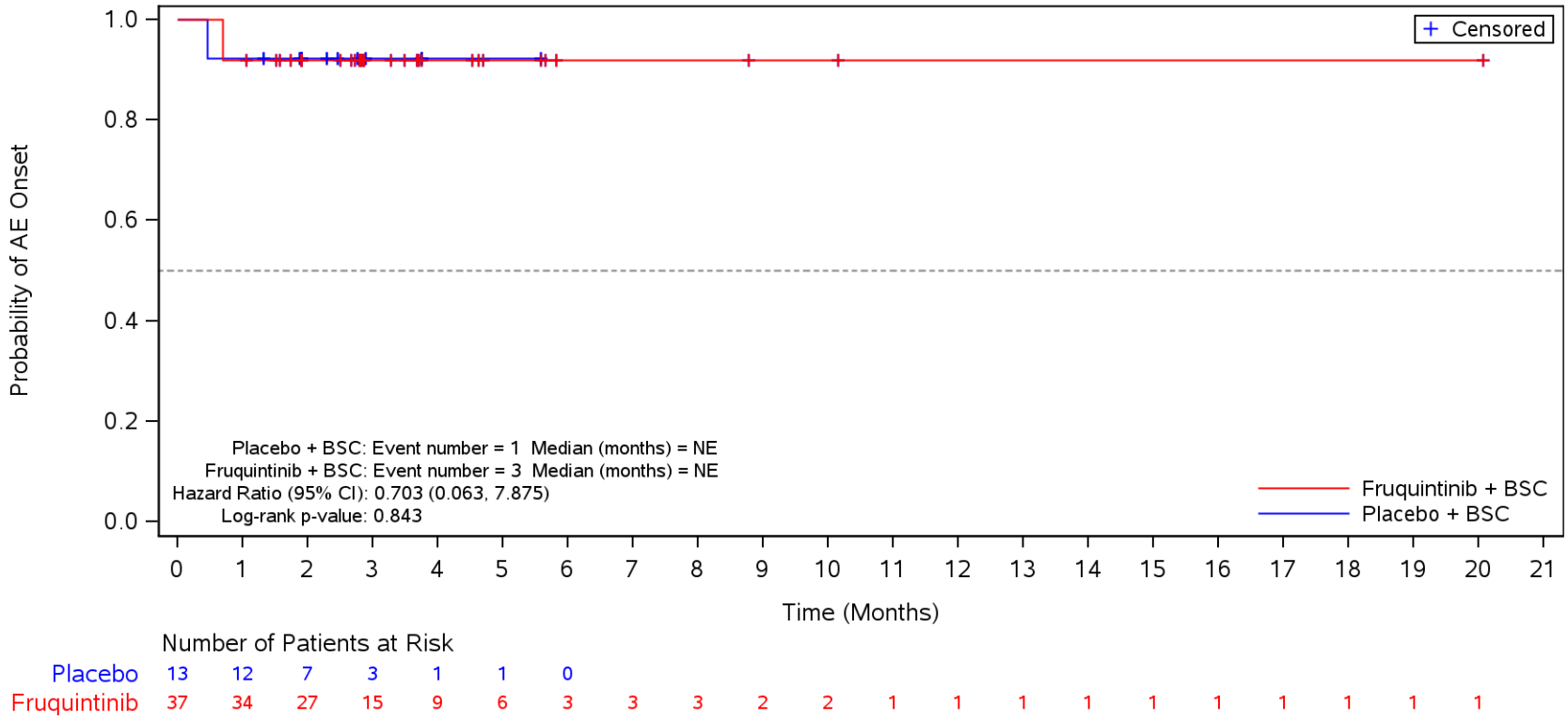
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
<= 18 months



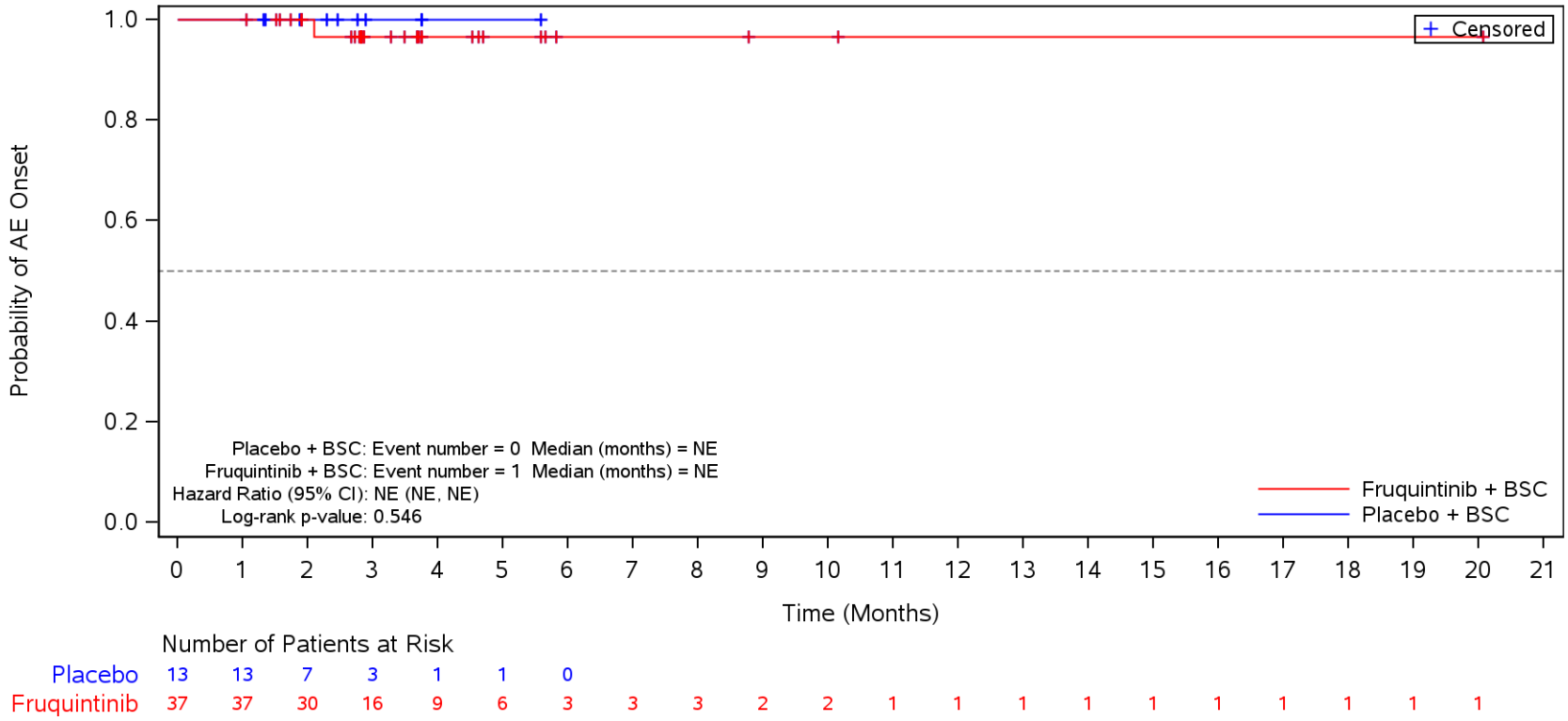
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
<= 18 months



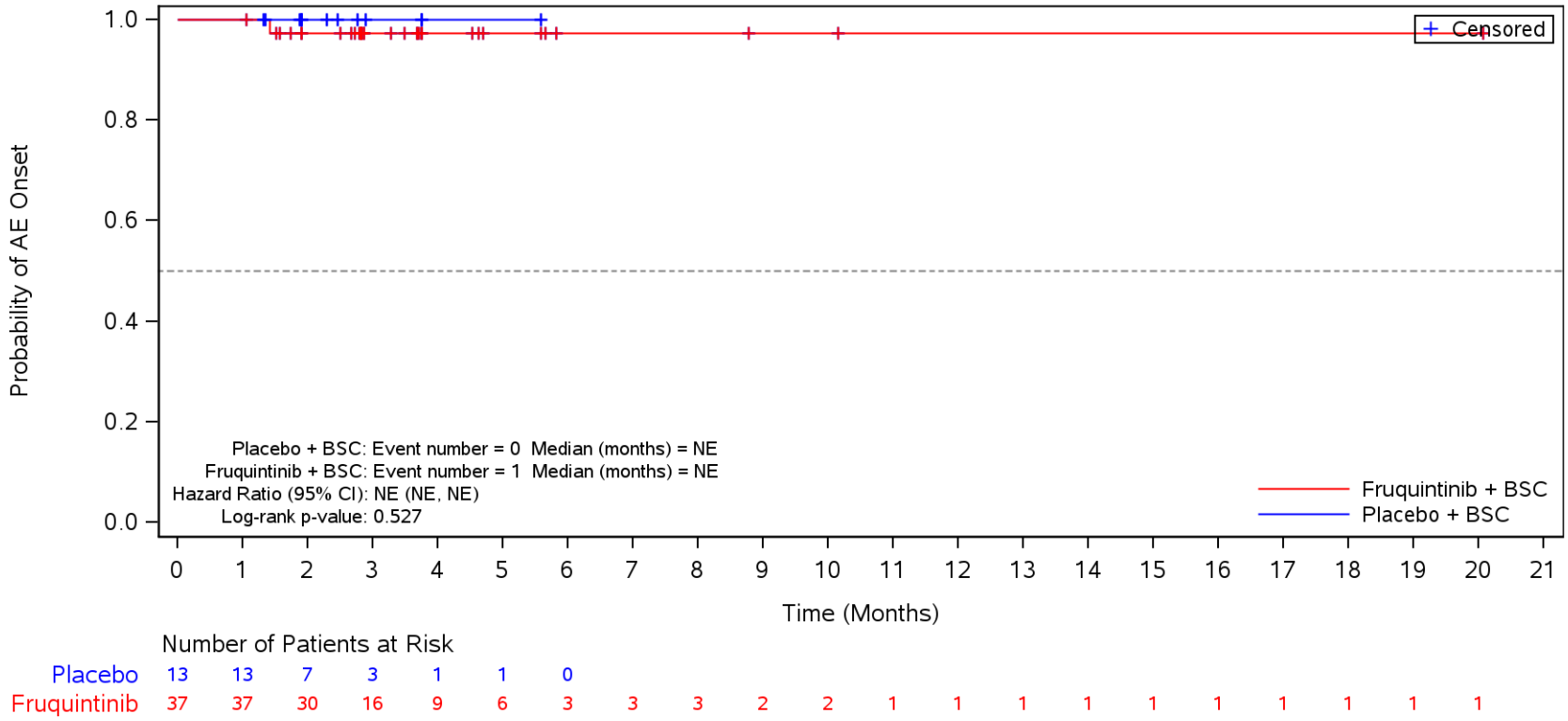
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
<= 18 months



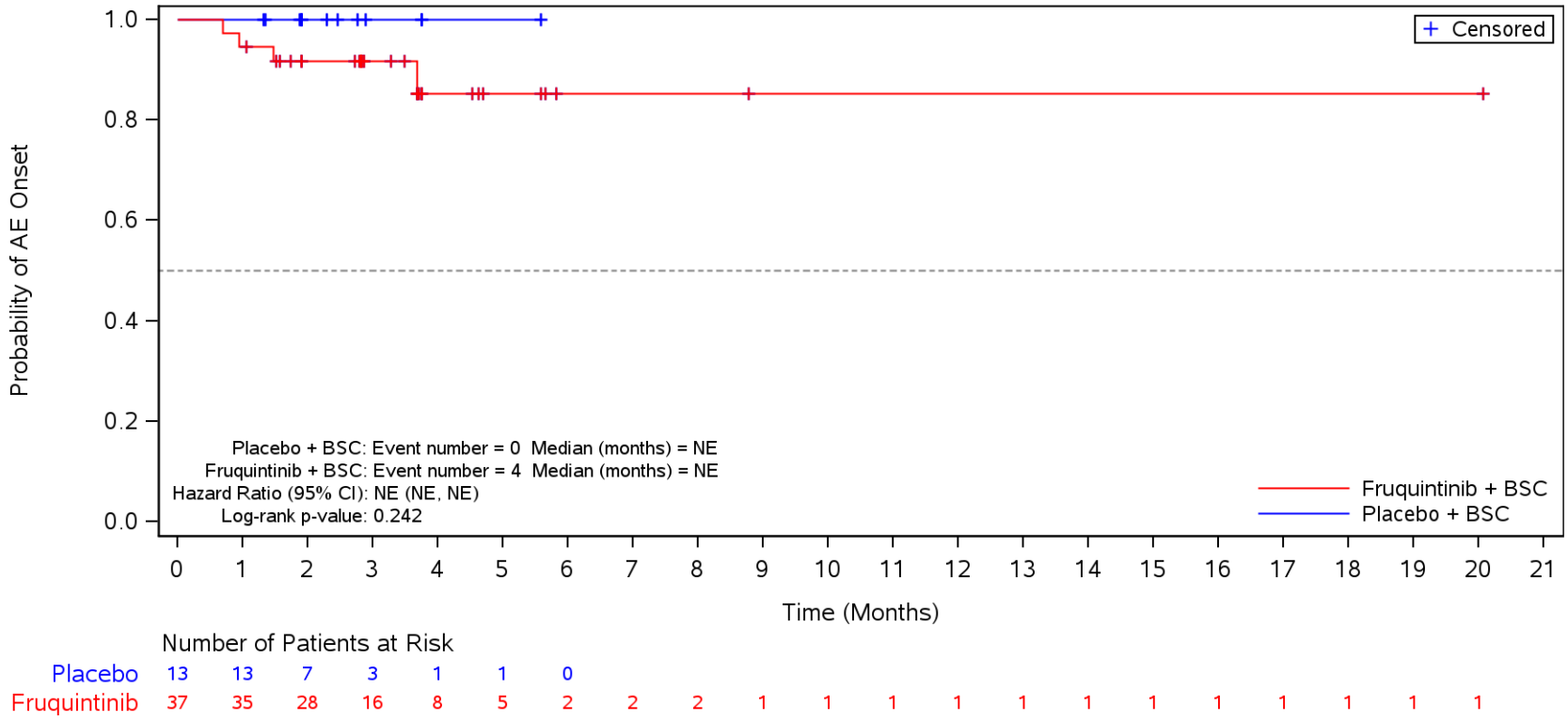
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
<= 18 months



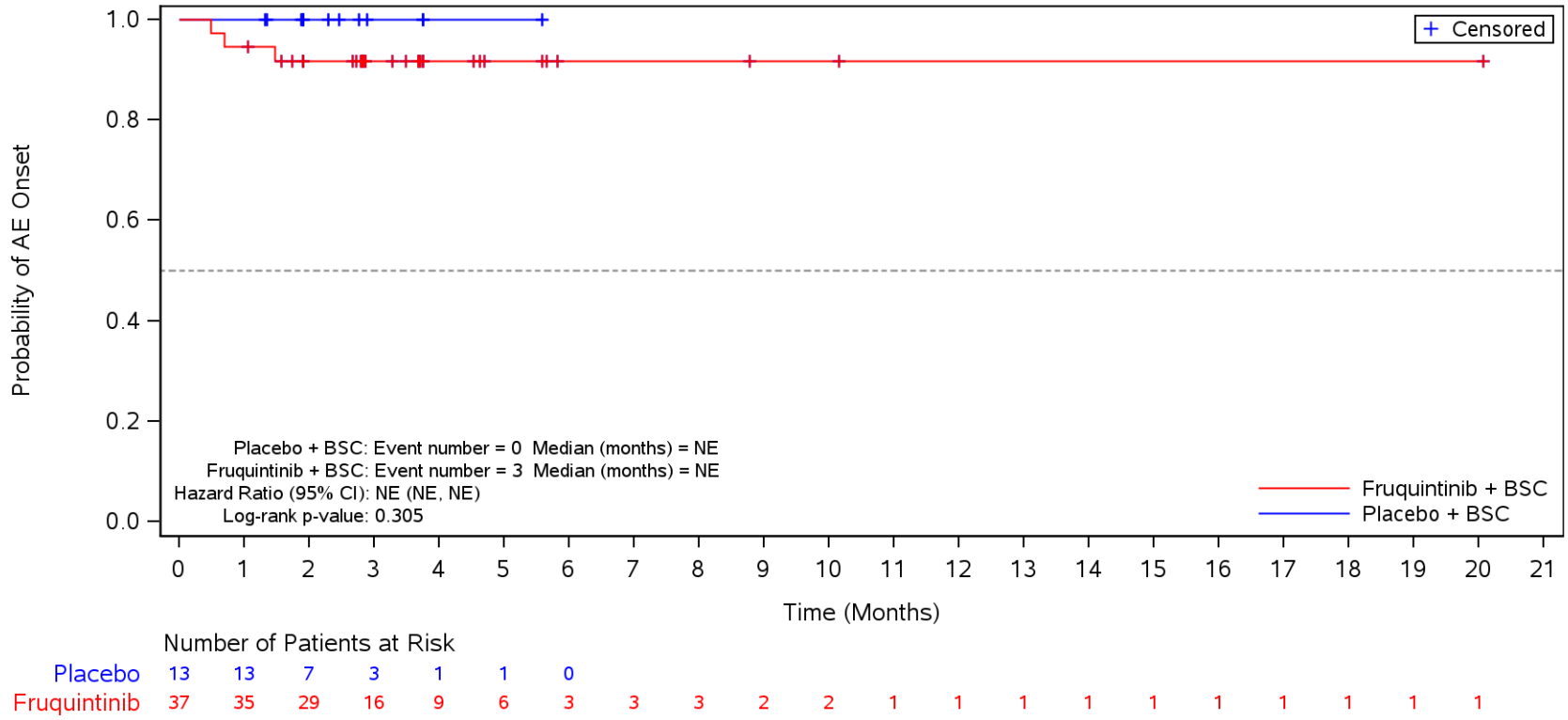
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
<= 18 months



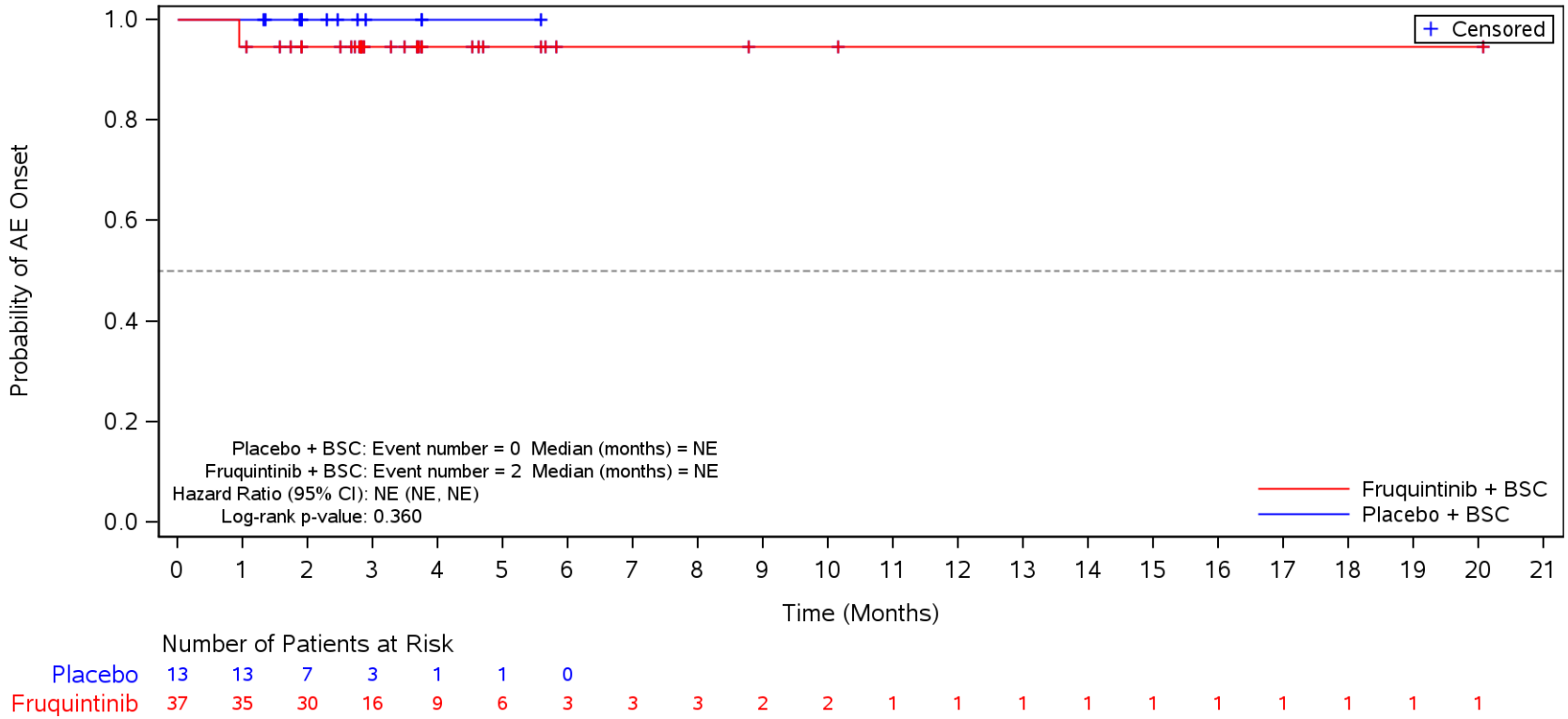
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
<= 18 months



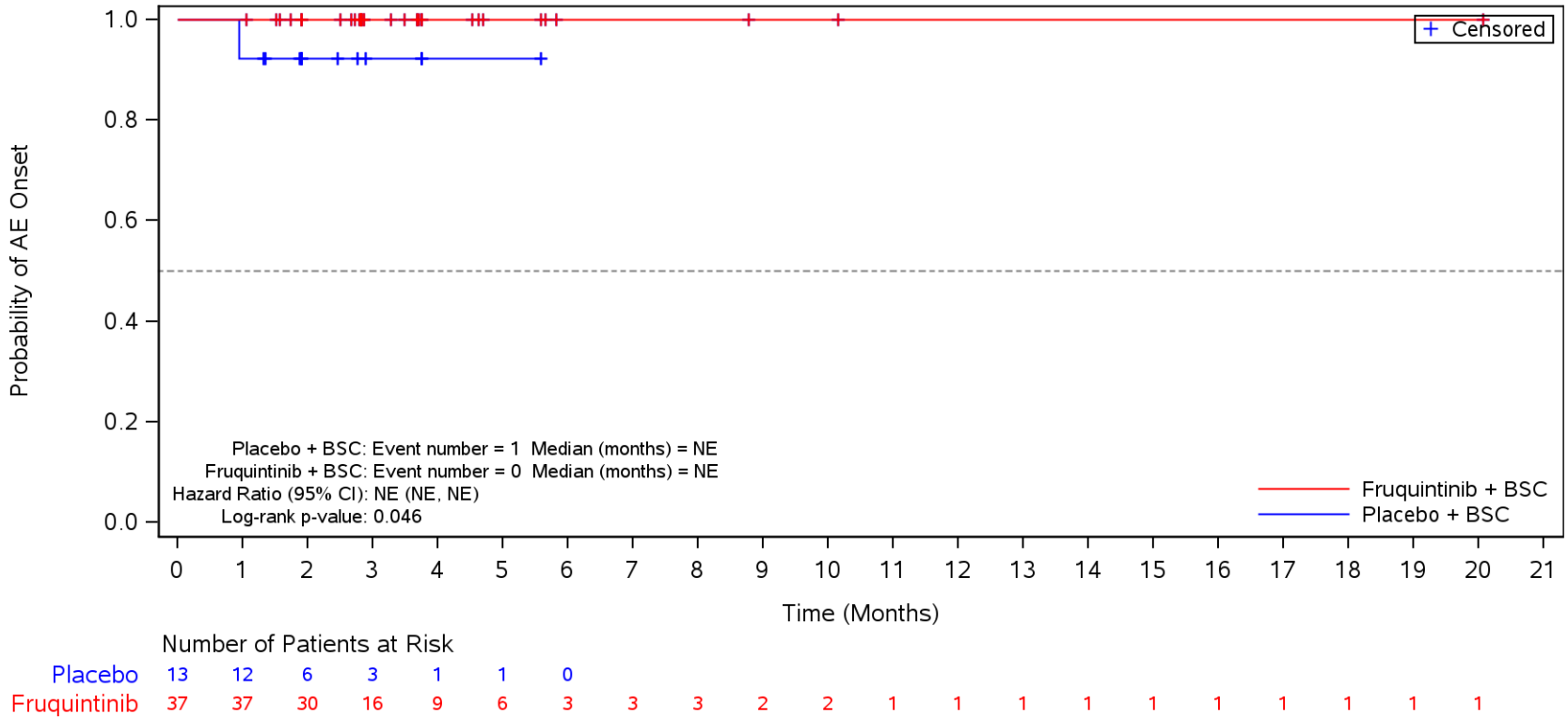
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
<= 18 months



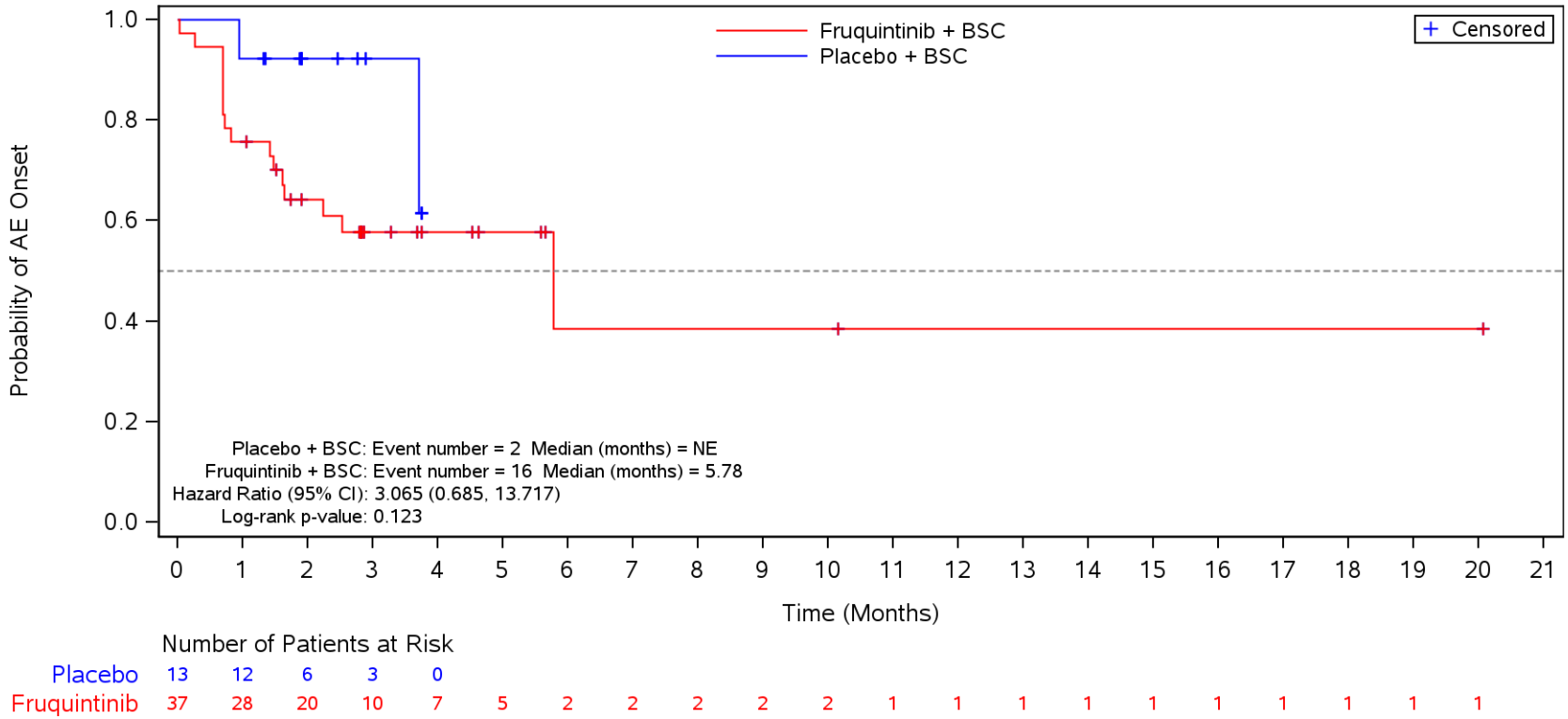
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
<= 18 months



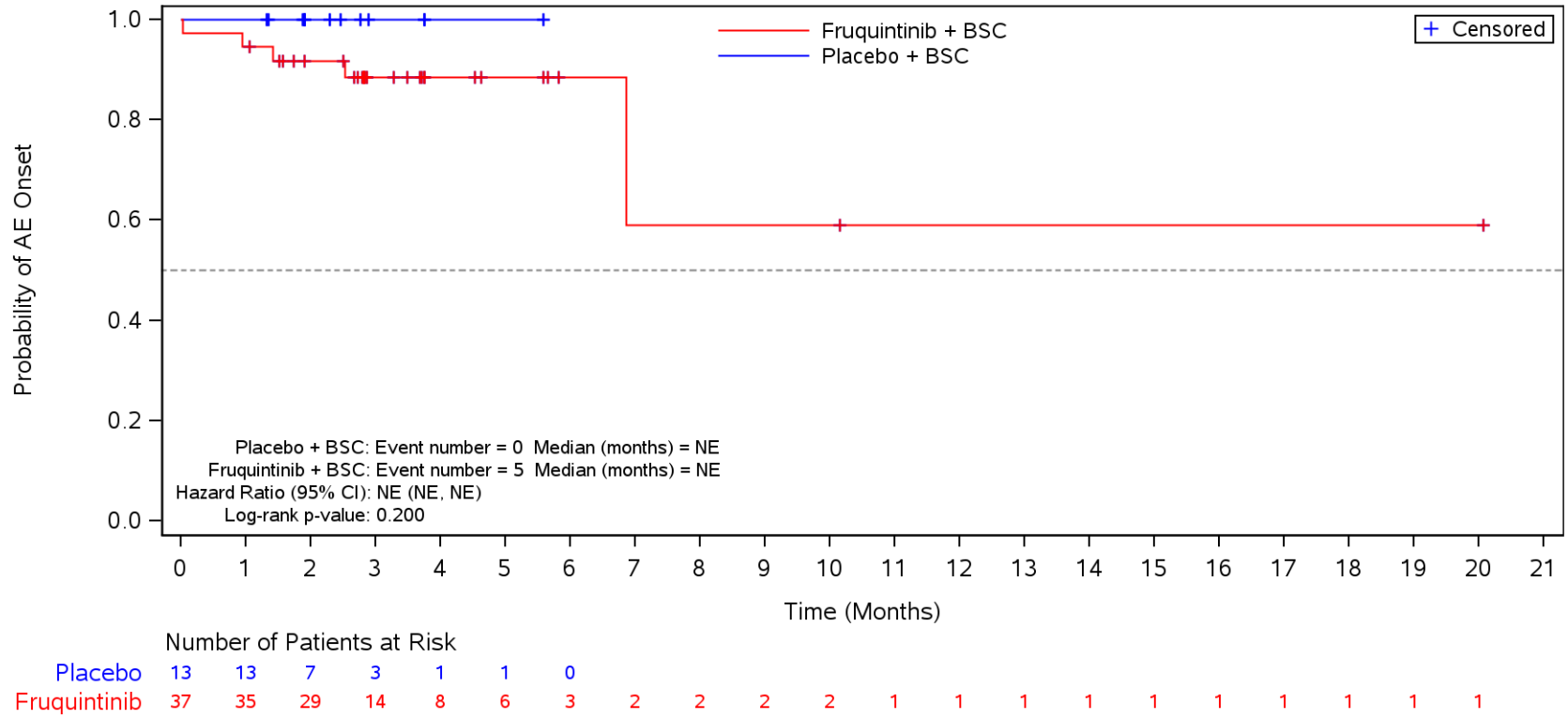
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations**
<= 18 months



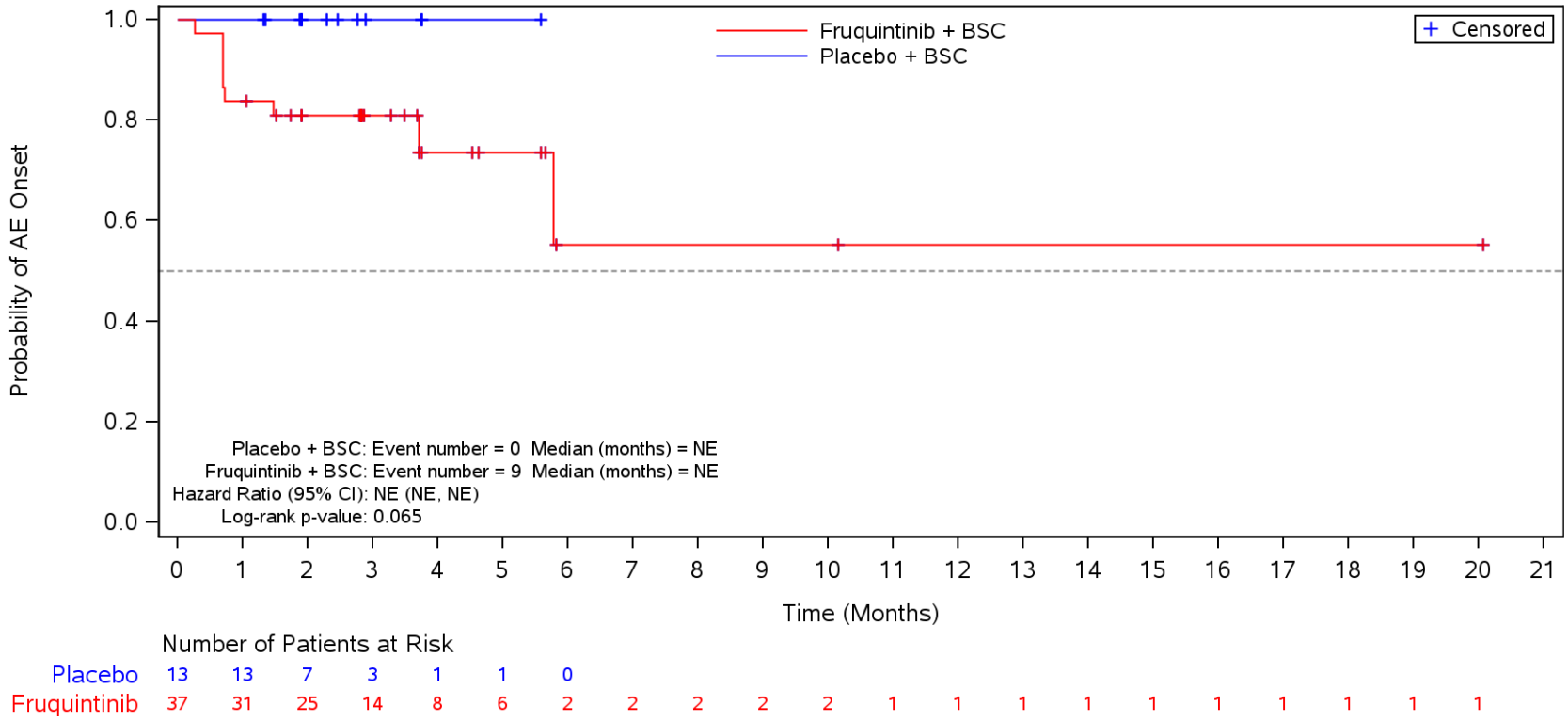
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
<= 18 months



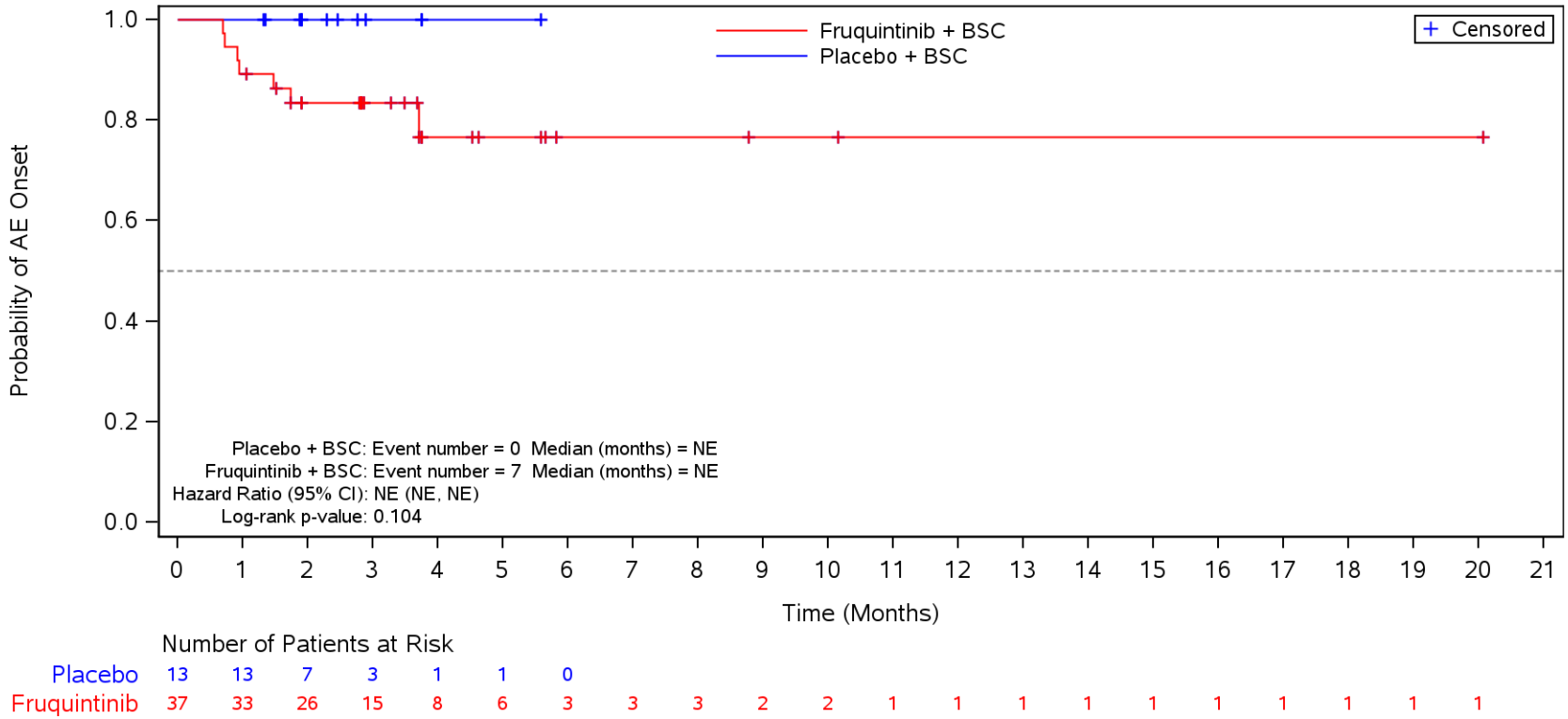
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
<= 18 months



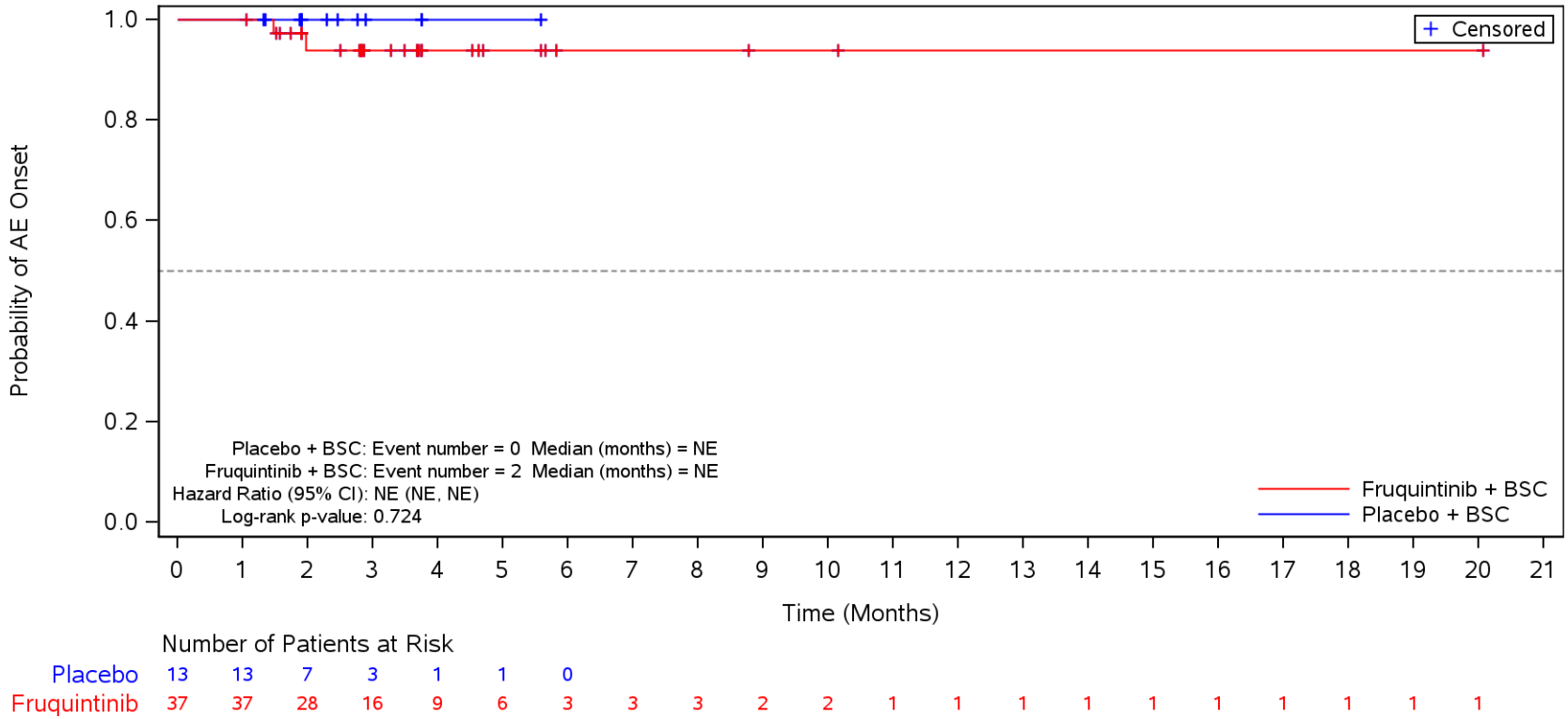
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
<= 18 months



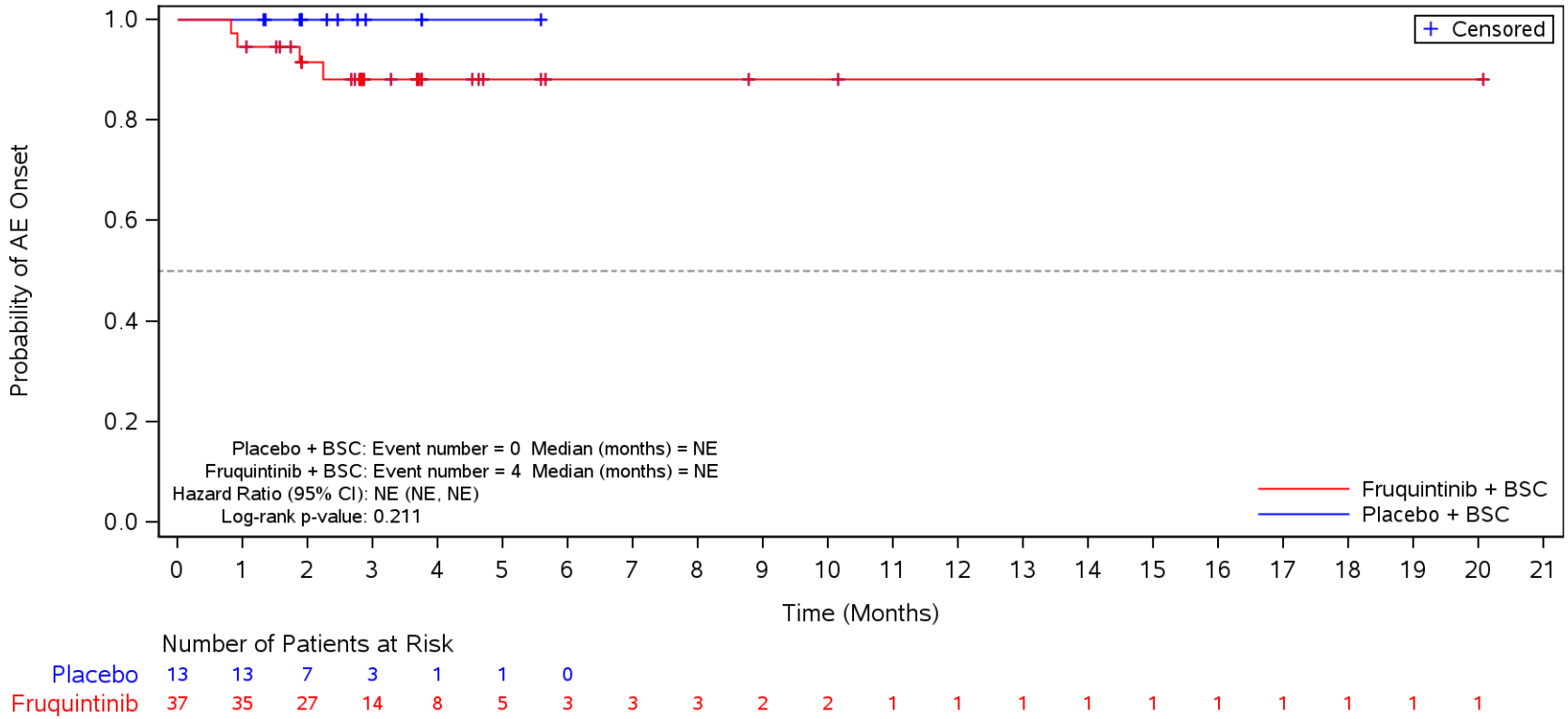
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
<= 18 months



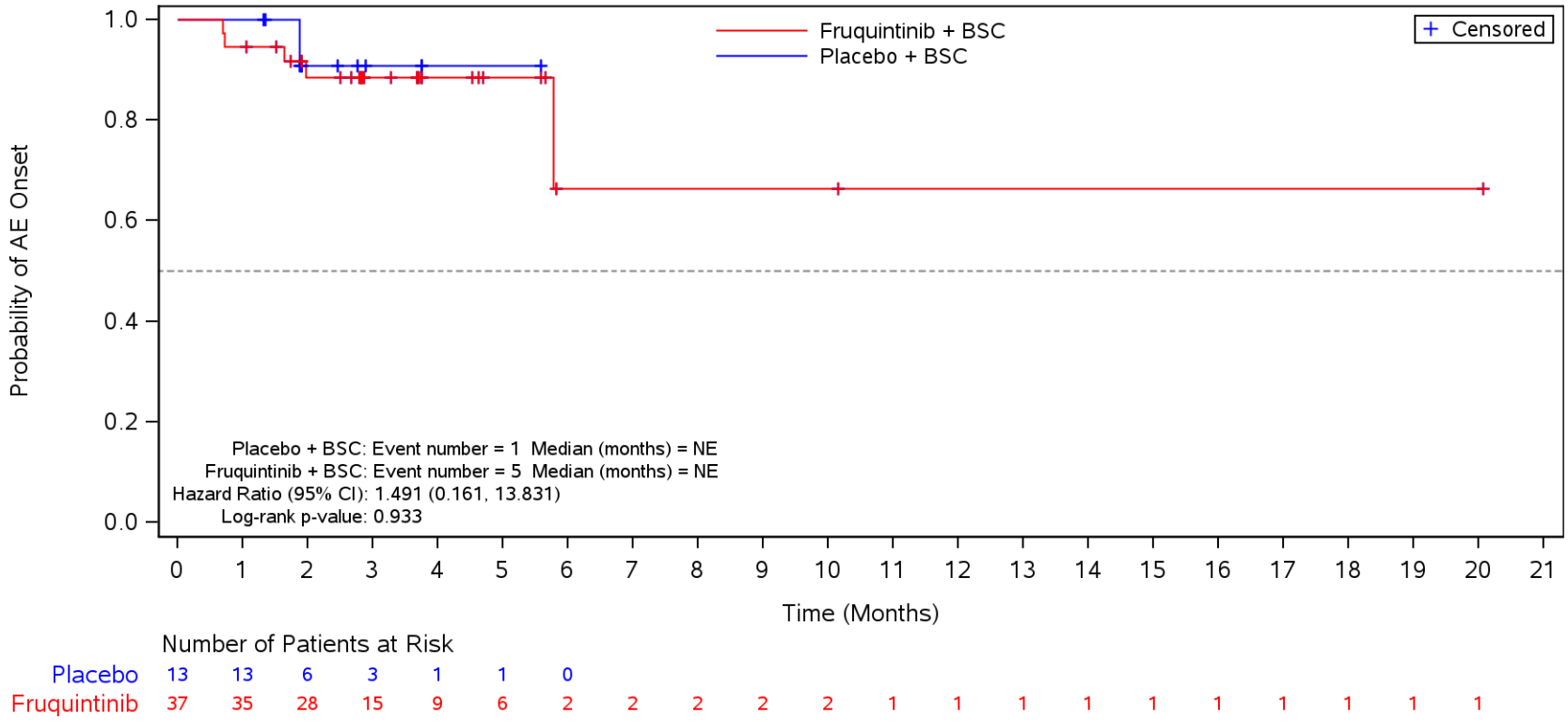
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
<= 18 months



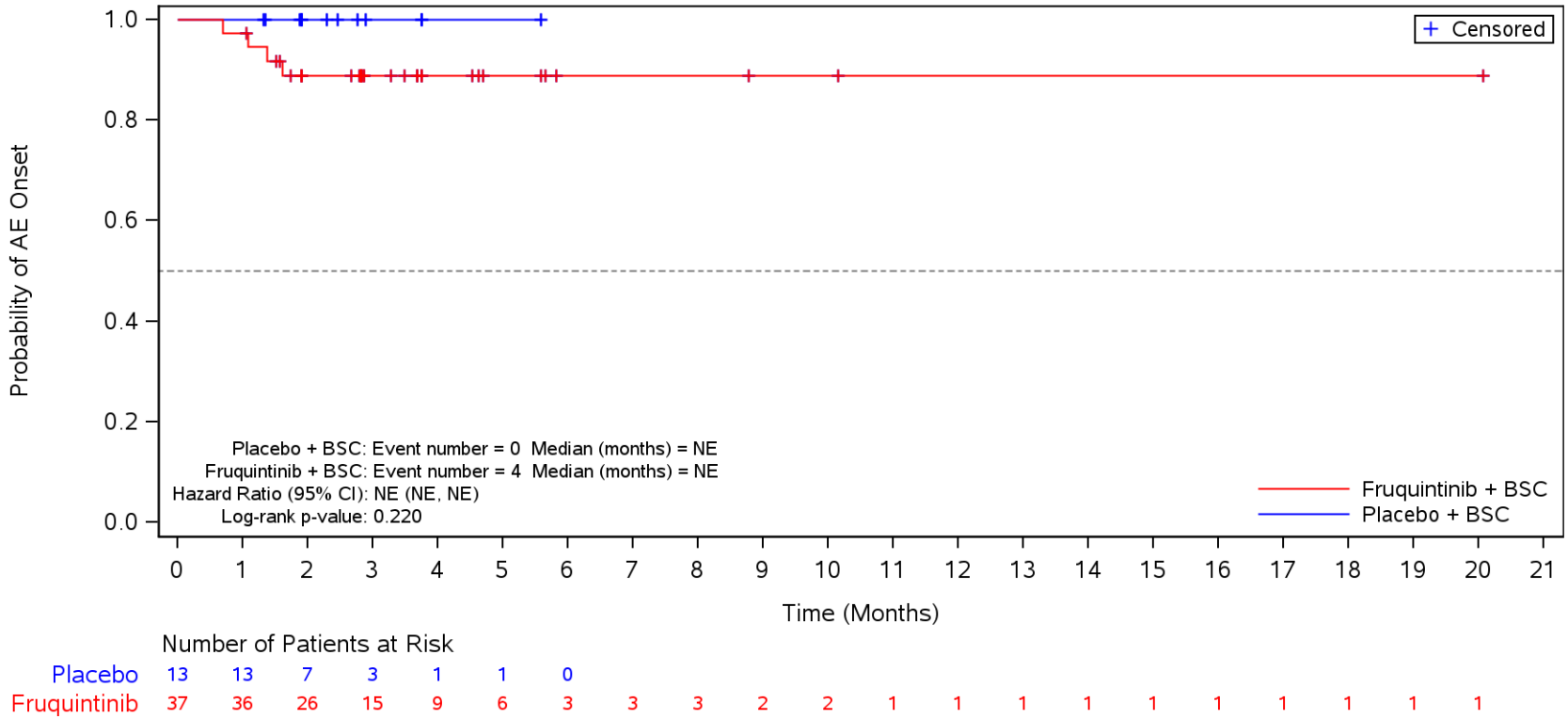
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
<= 18 months



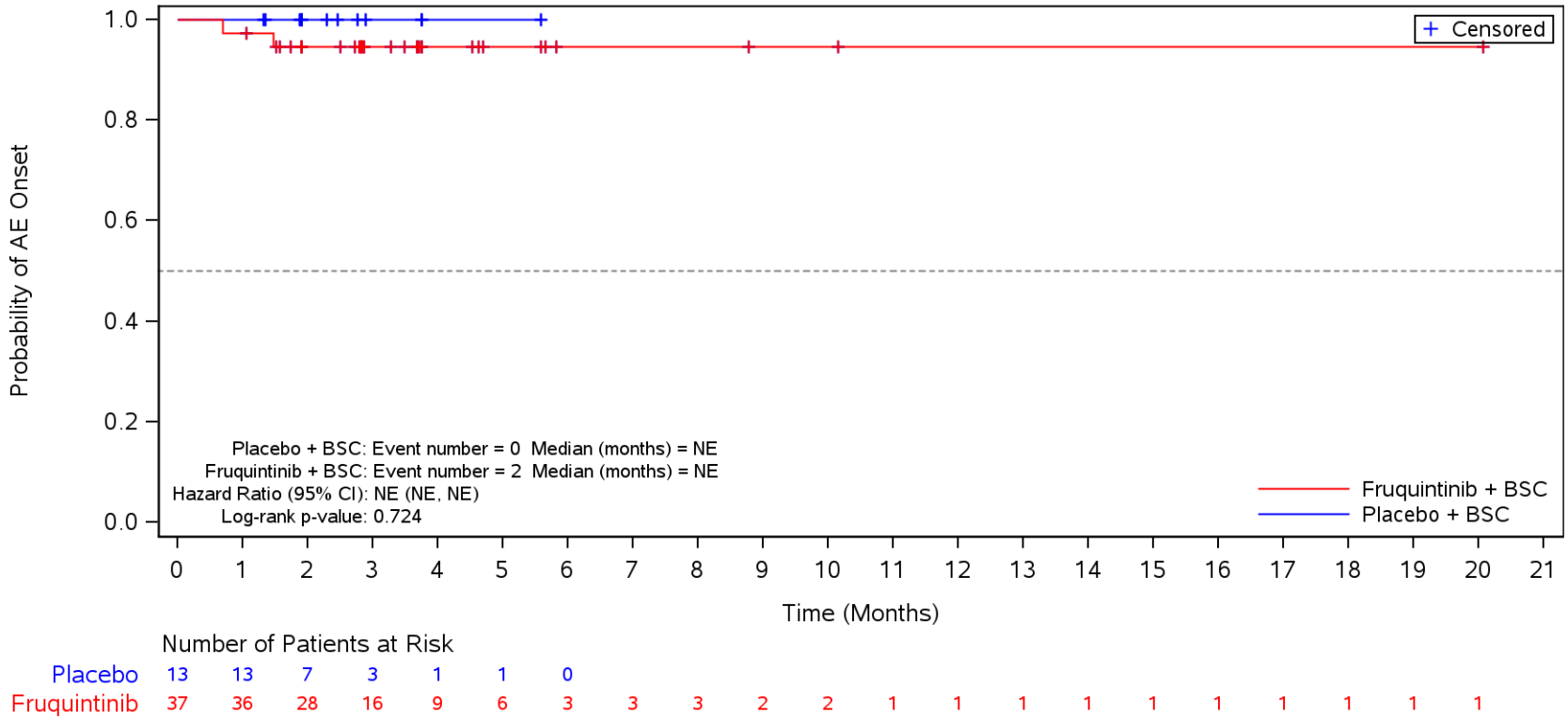
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
<= 18 months



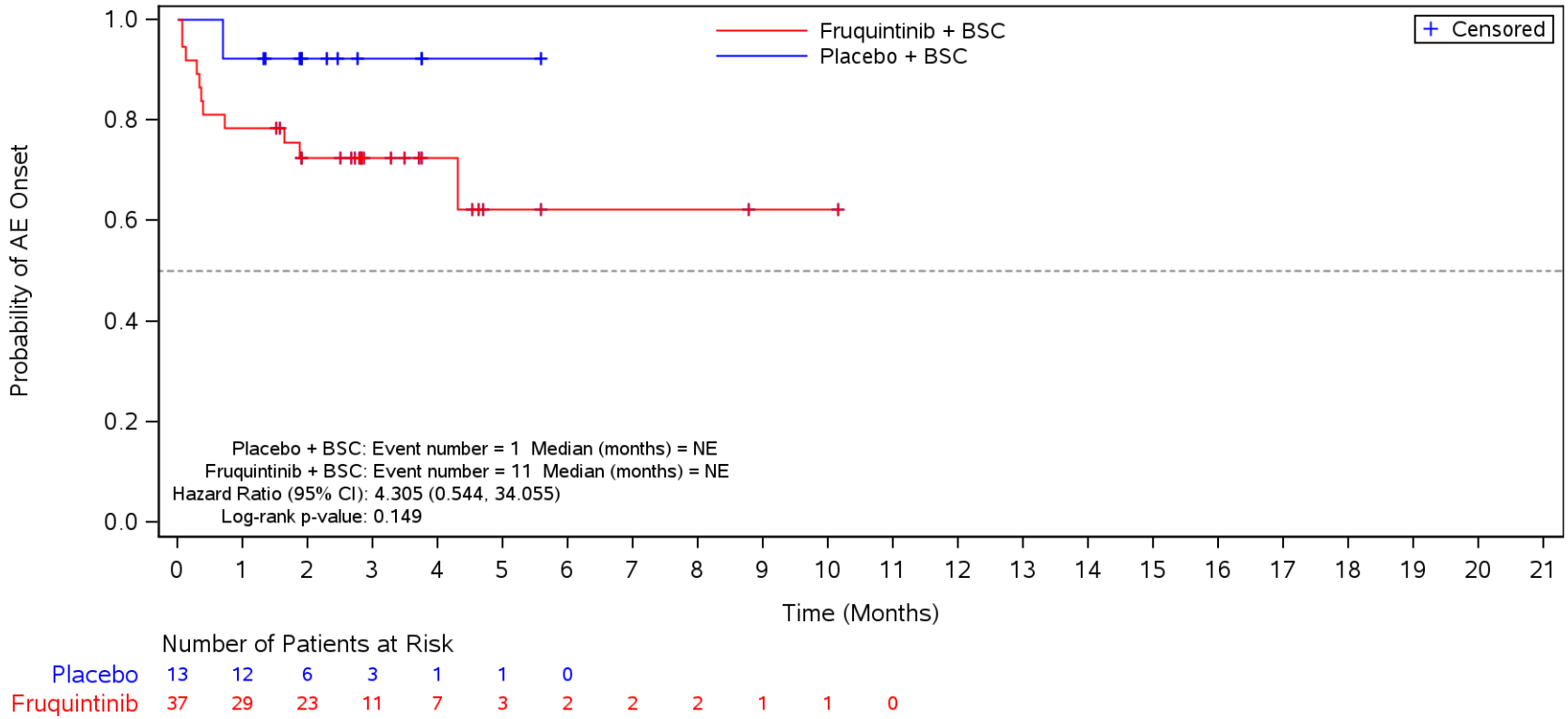
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
<= 18 months



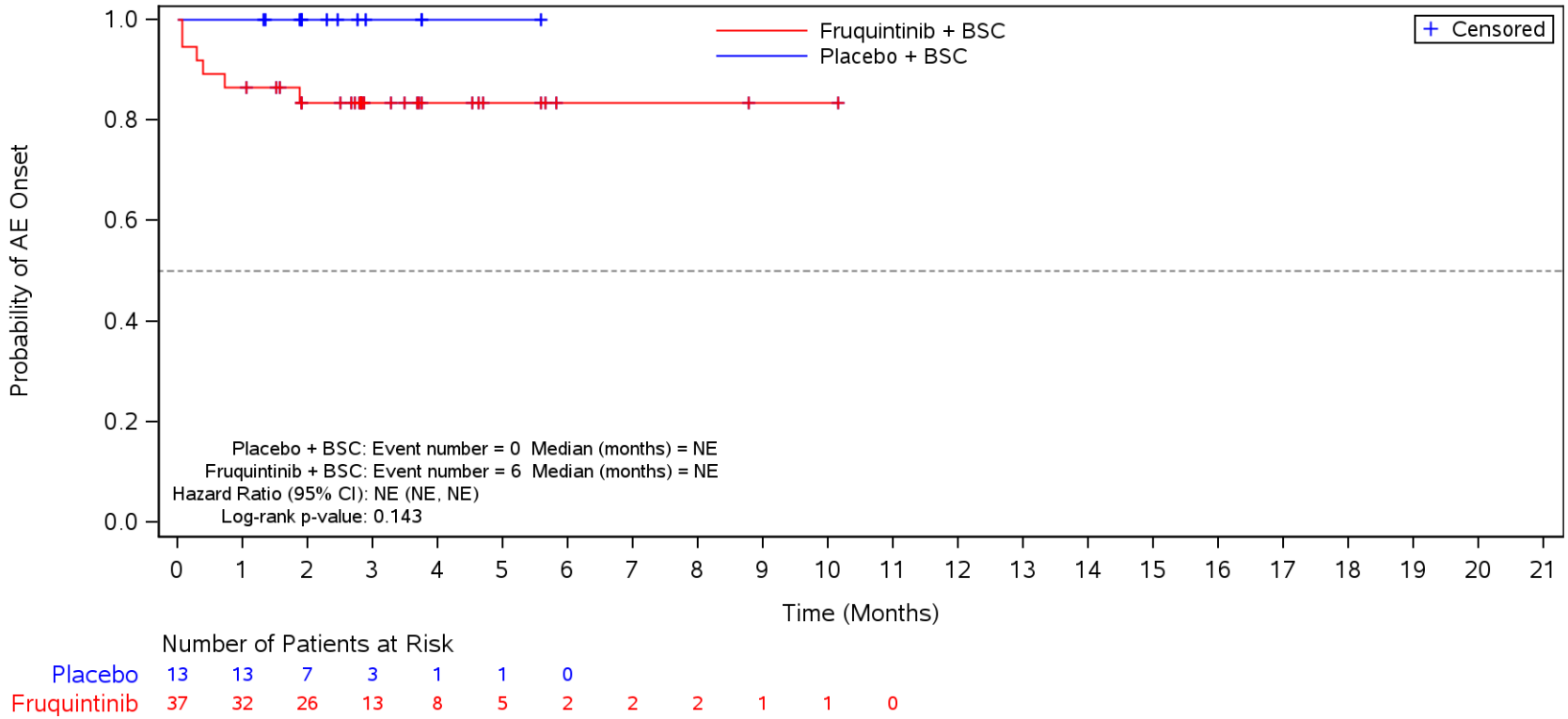
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
<= 18 months



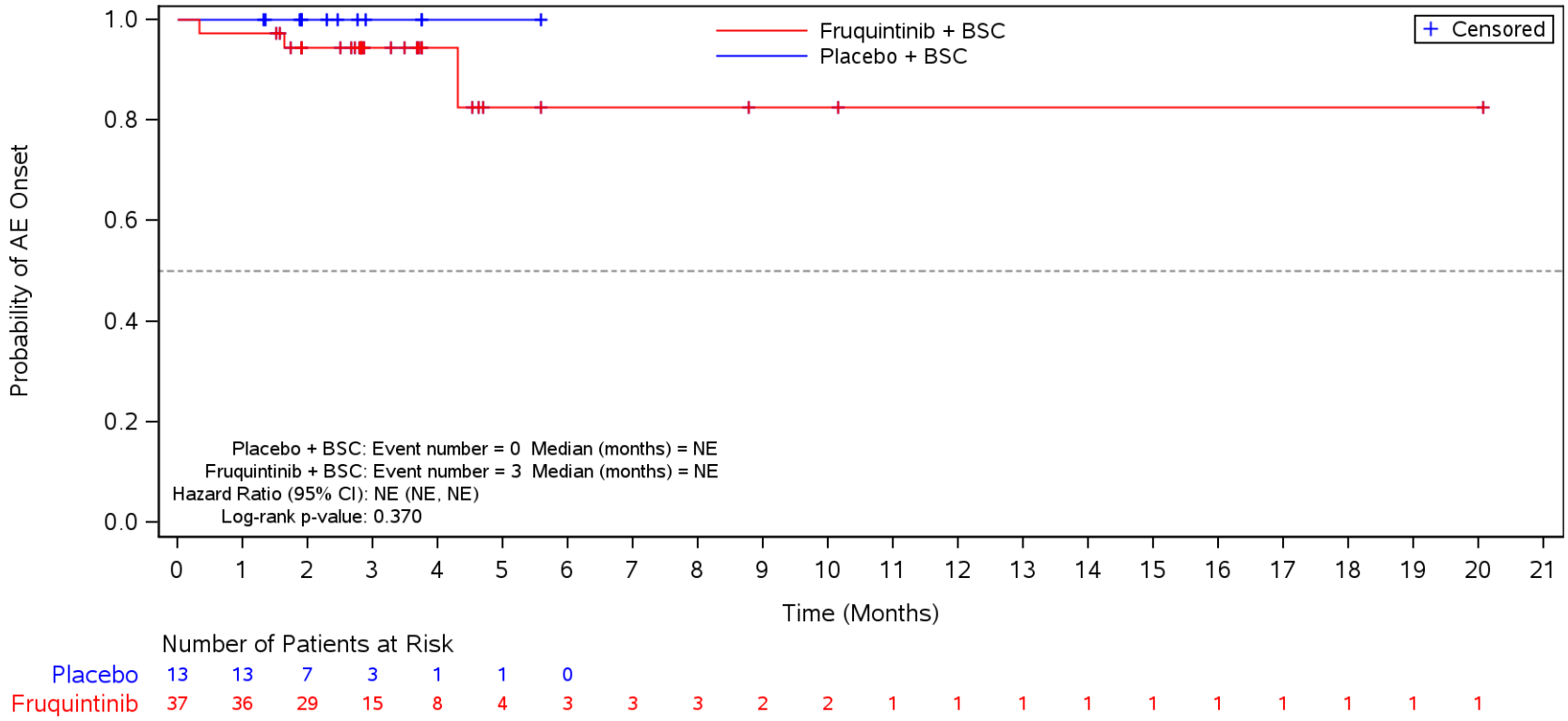
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
<= 18 months



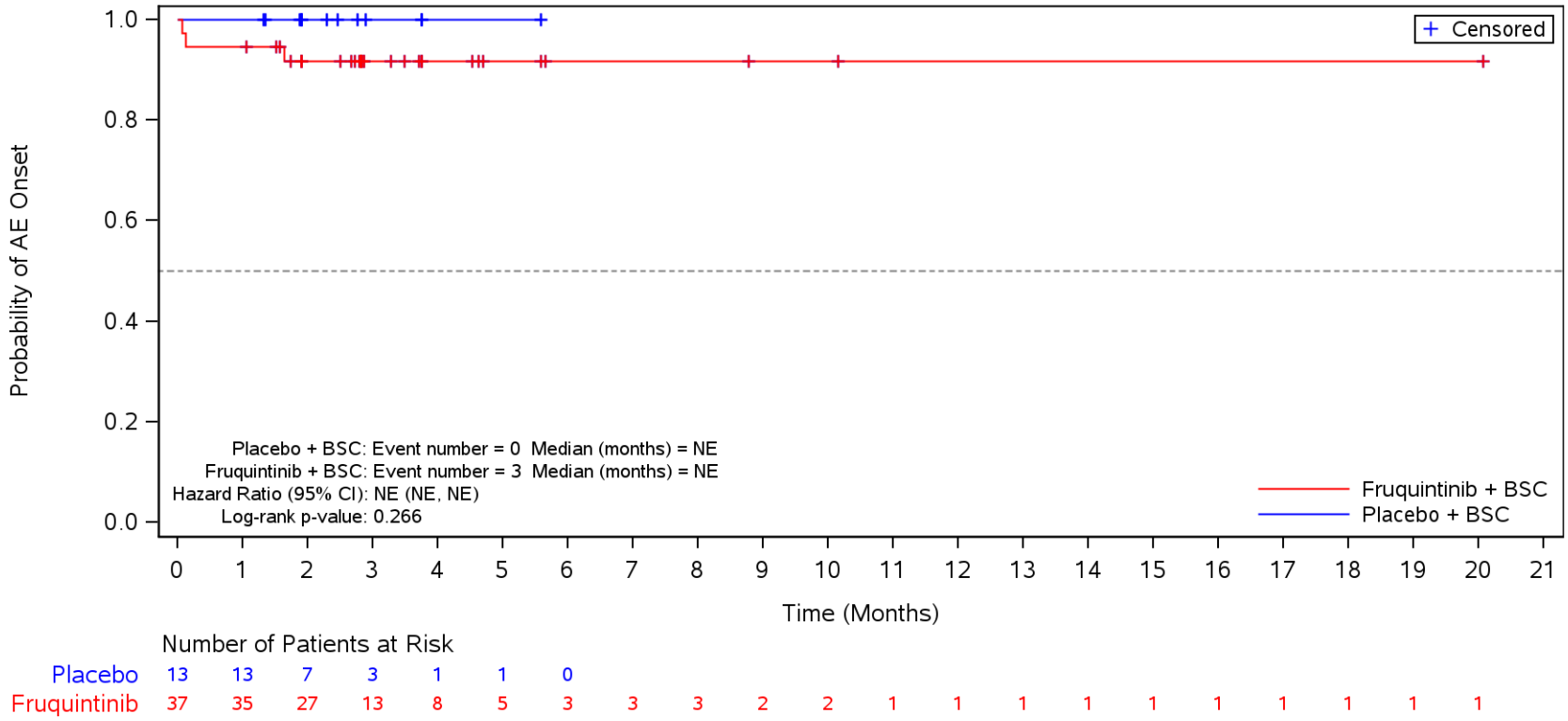
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
<= 18 months



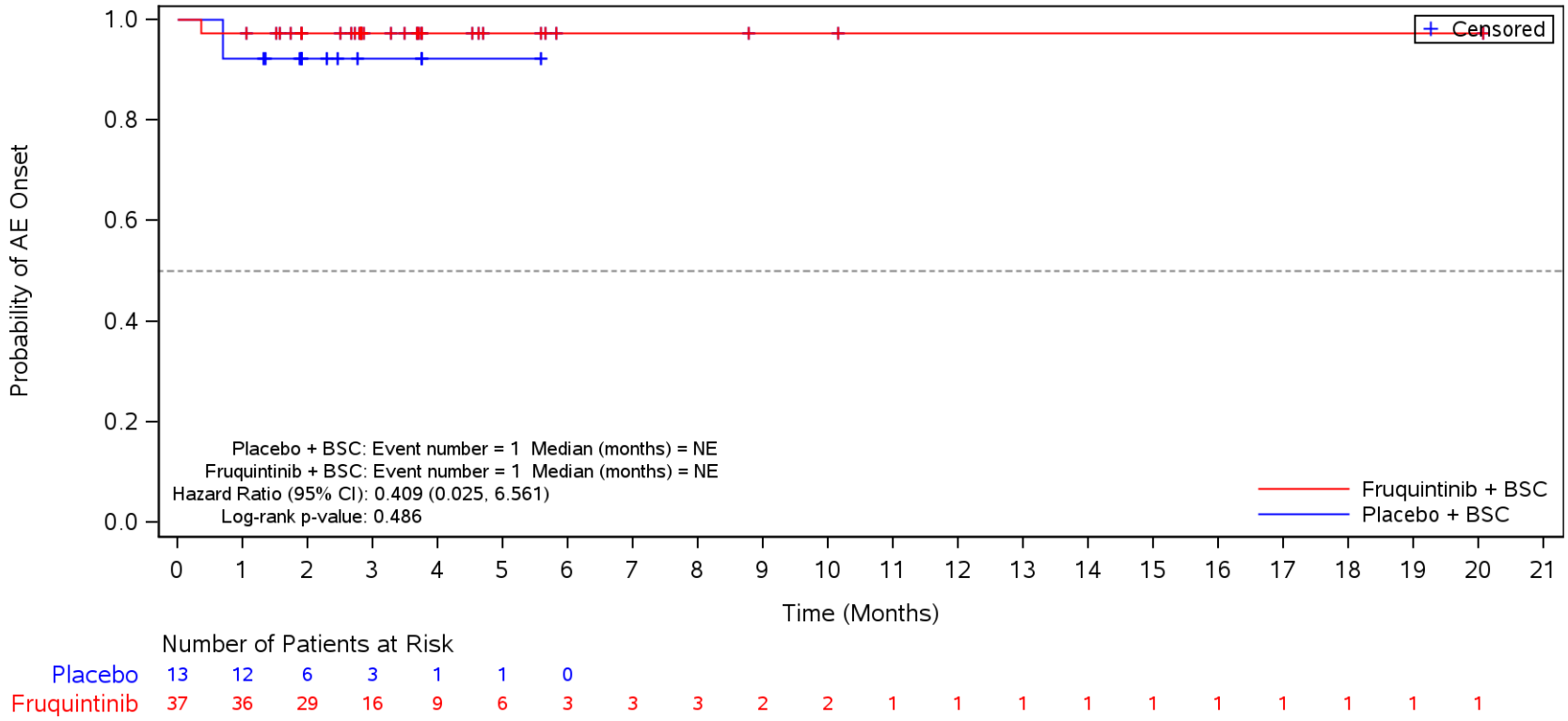
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
<= 18 months



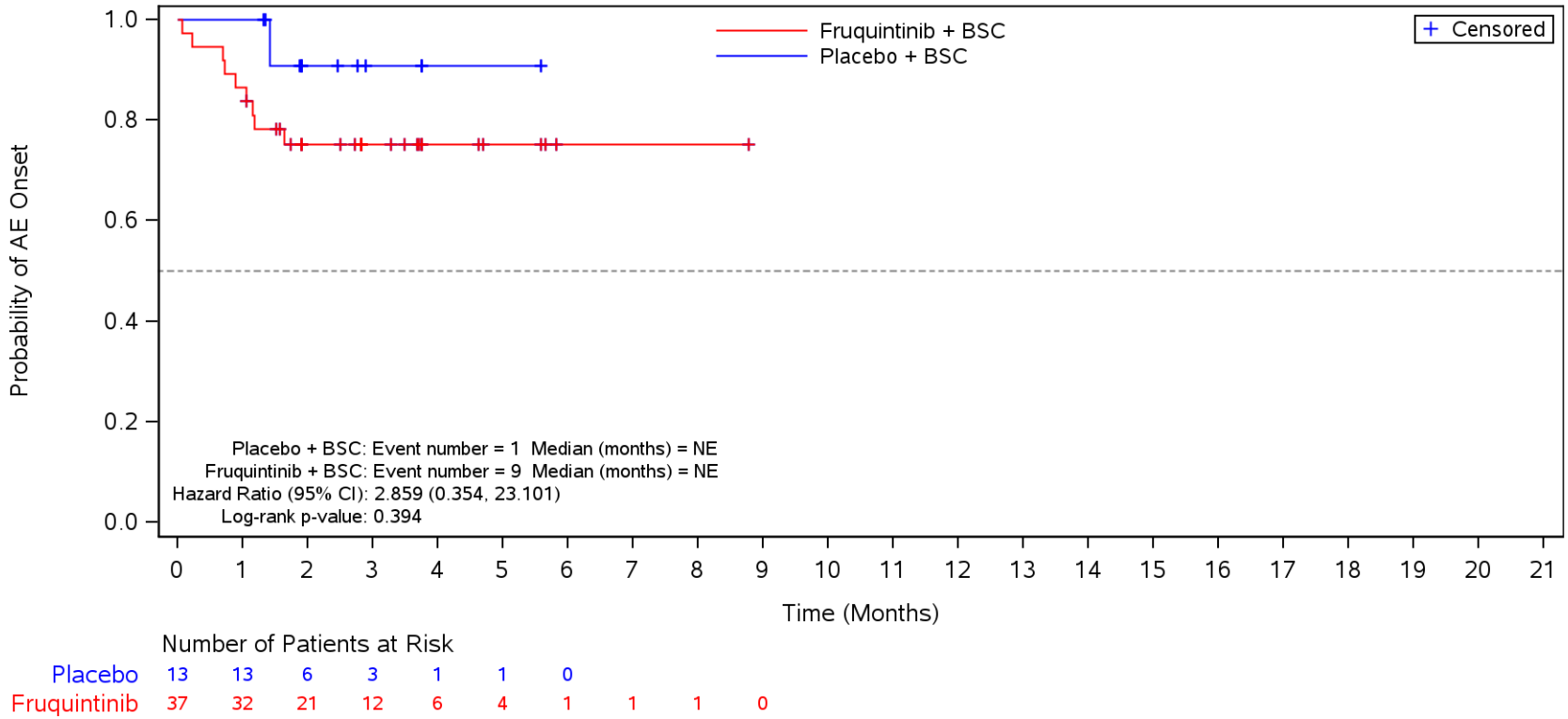
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
<= 18 months



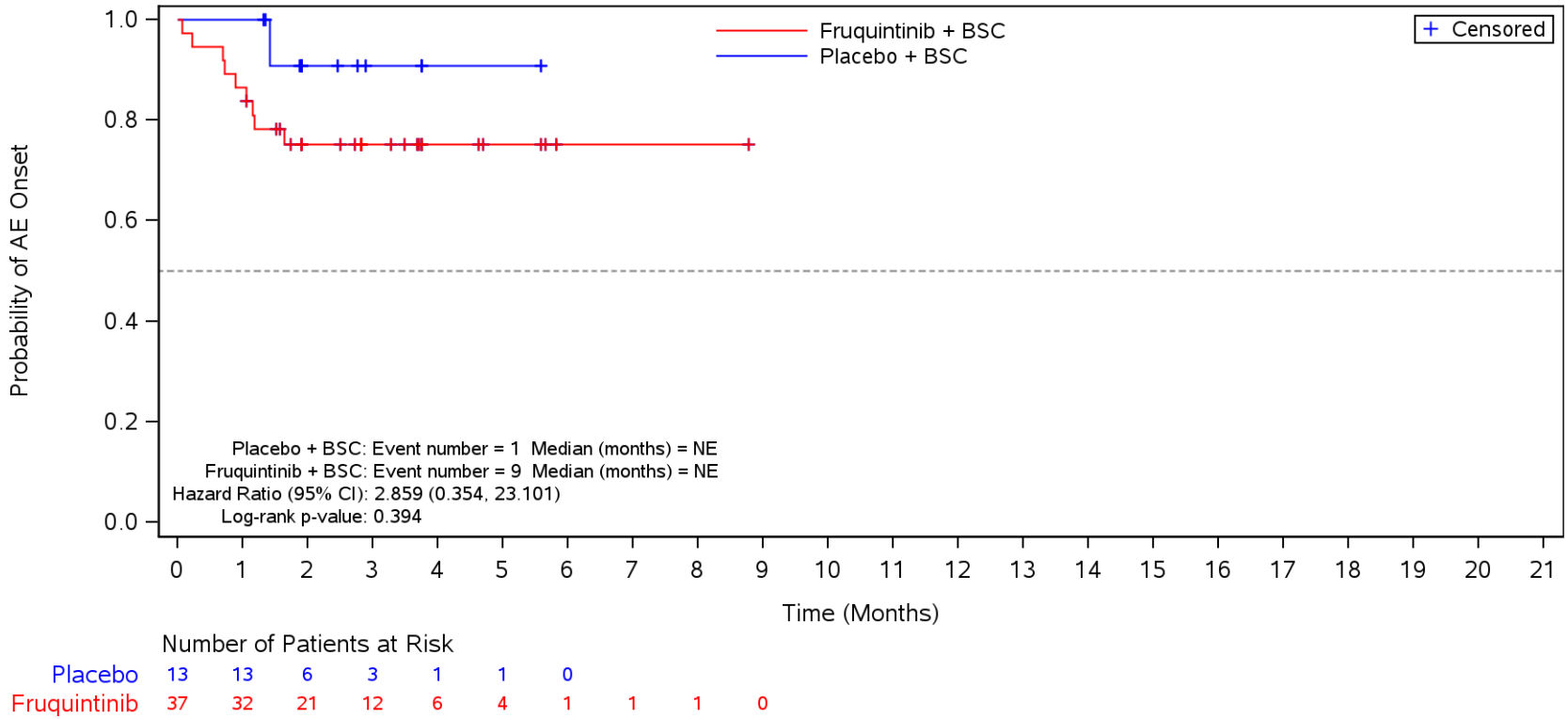
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Vascular disorders**
<= 18 months



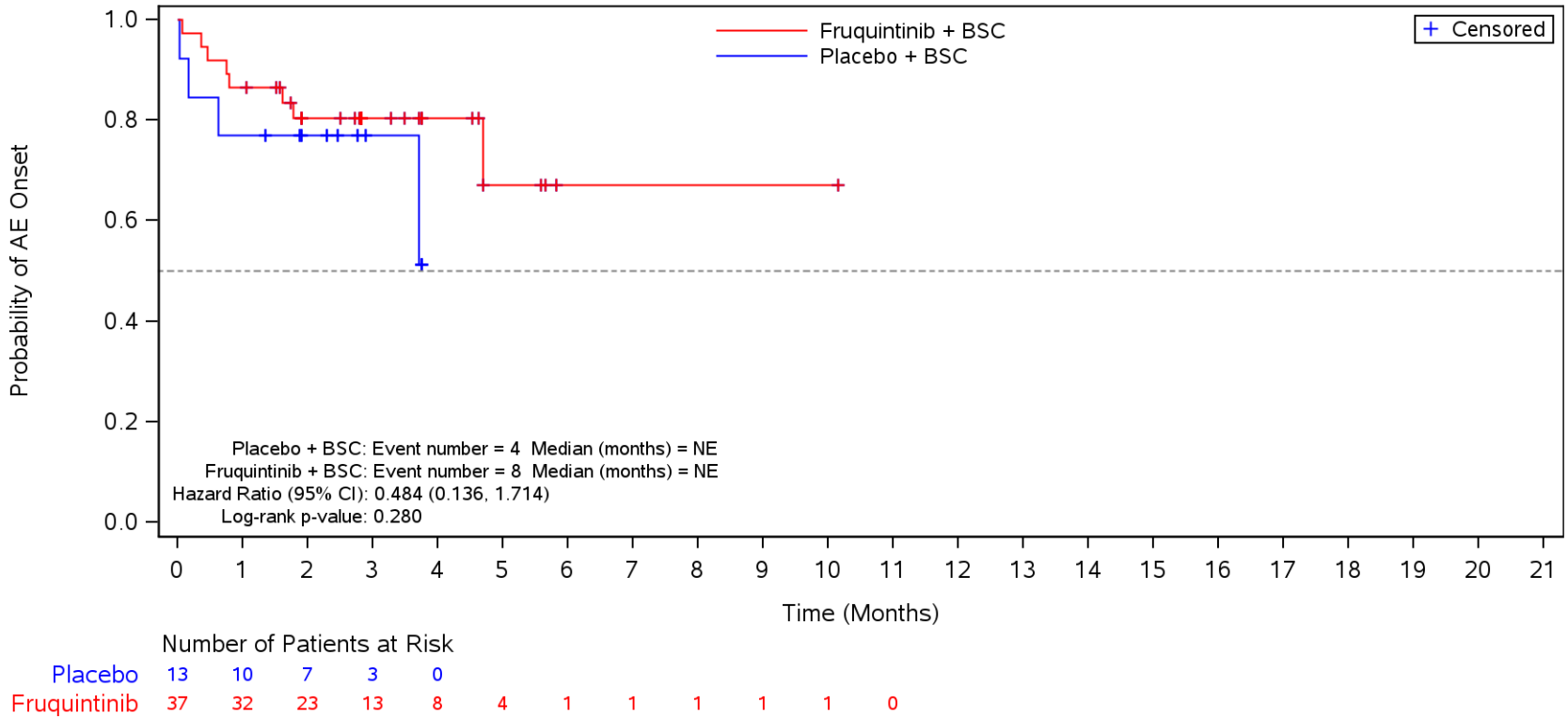
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
<= 18 months



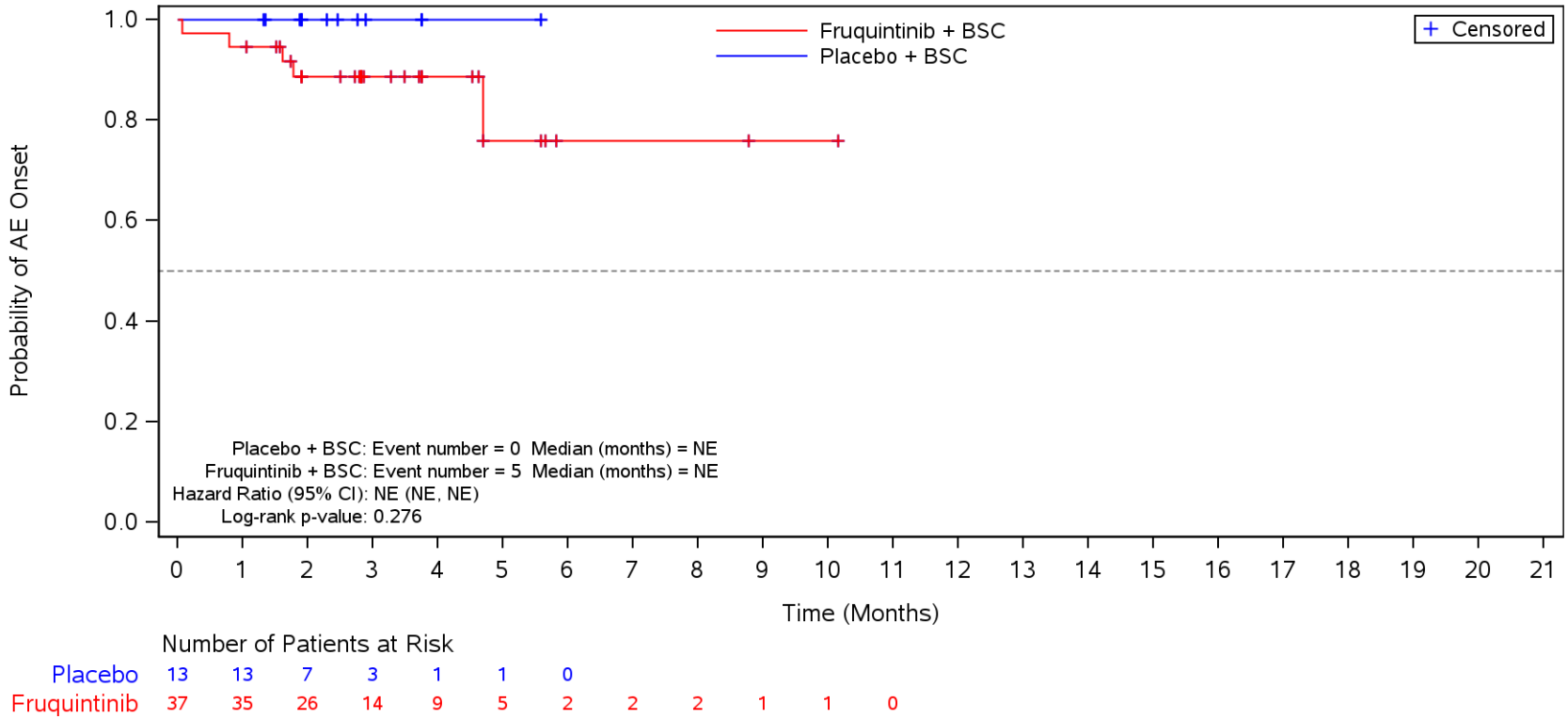
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
<= 18 months



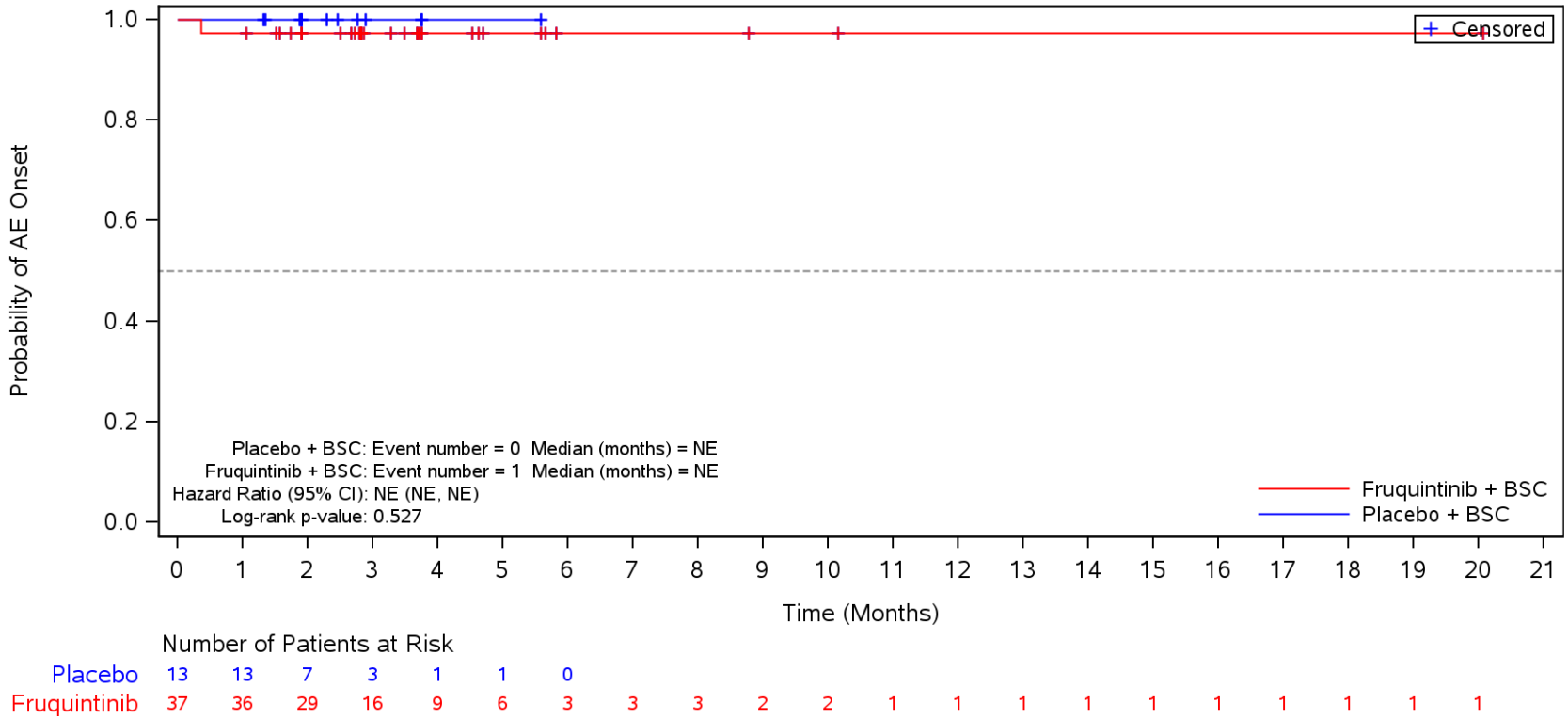
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
<= 18 months



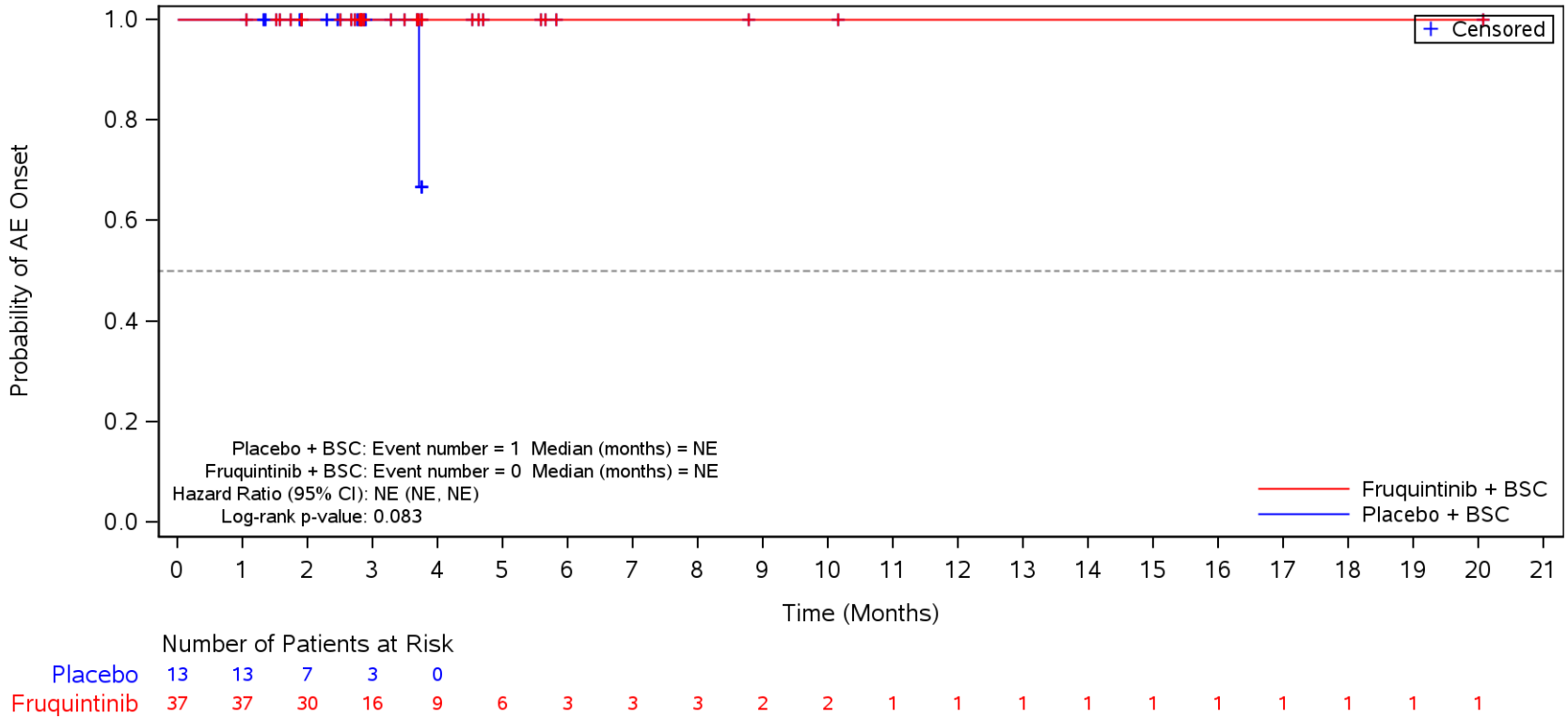
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
<= 18 months



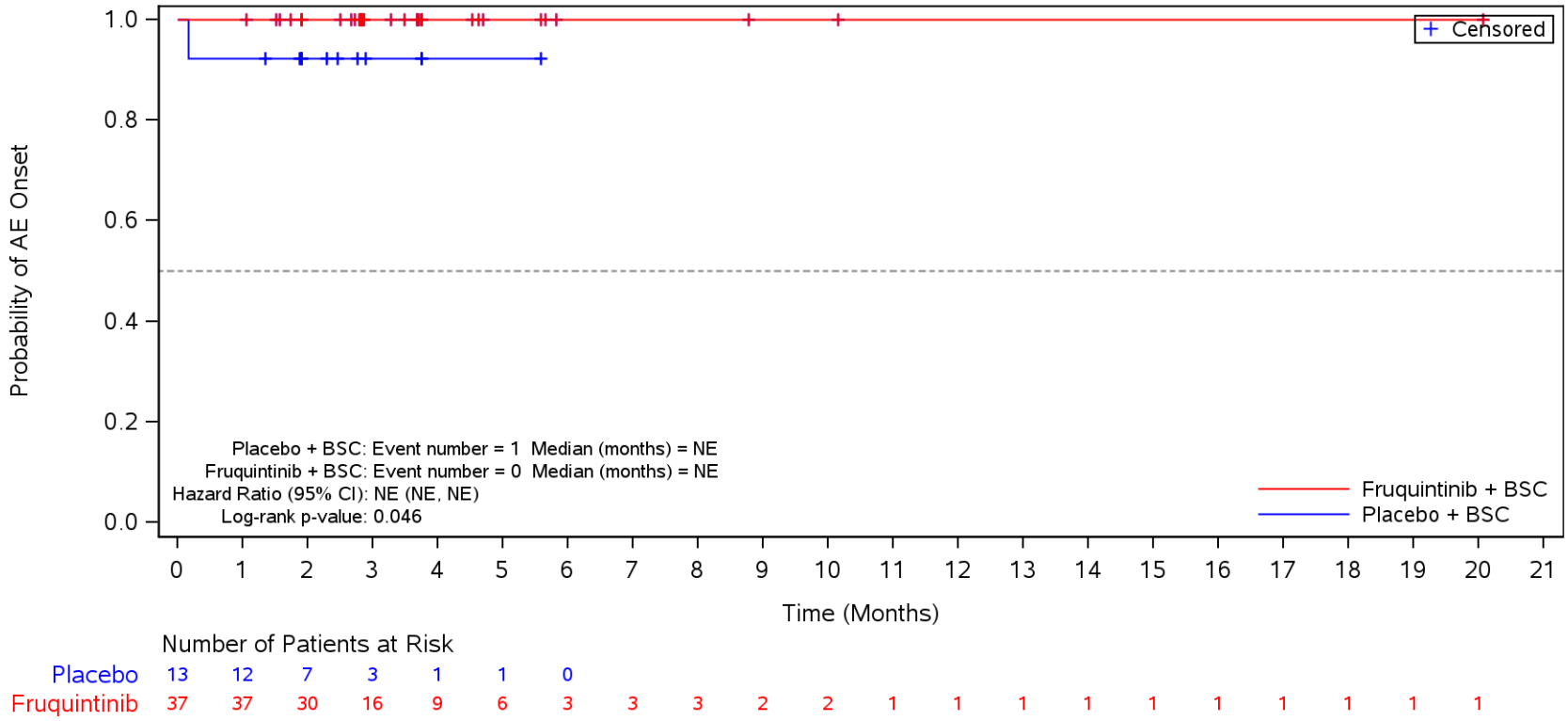
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
<= 18 months



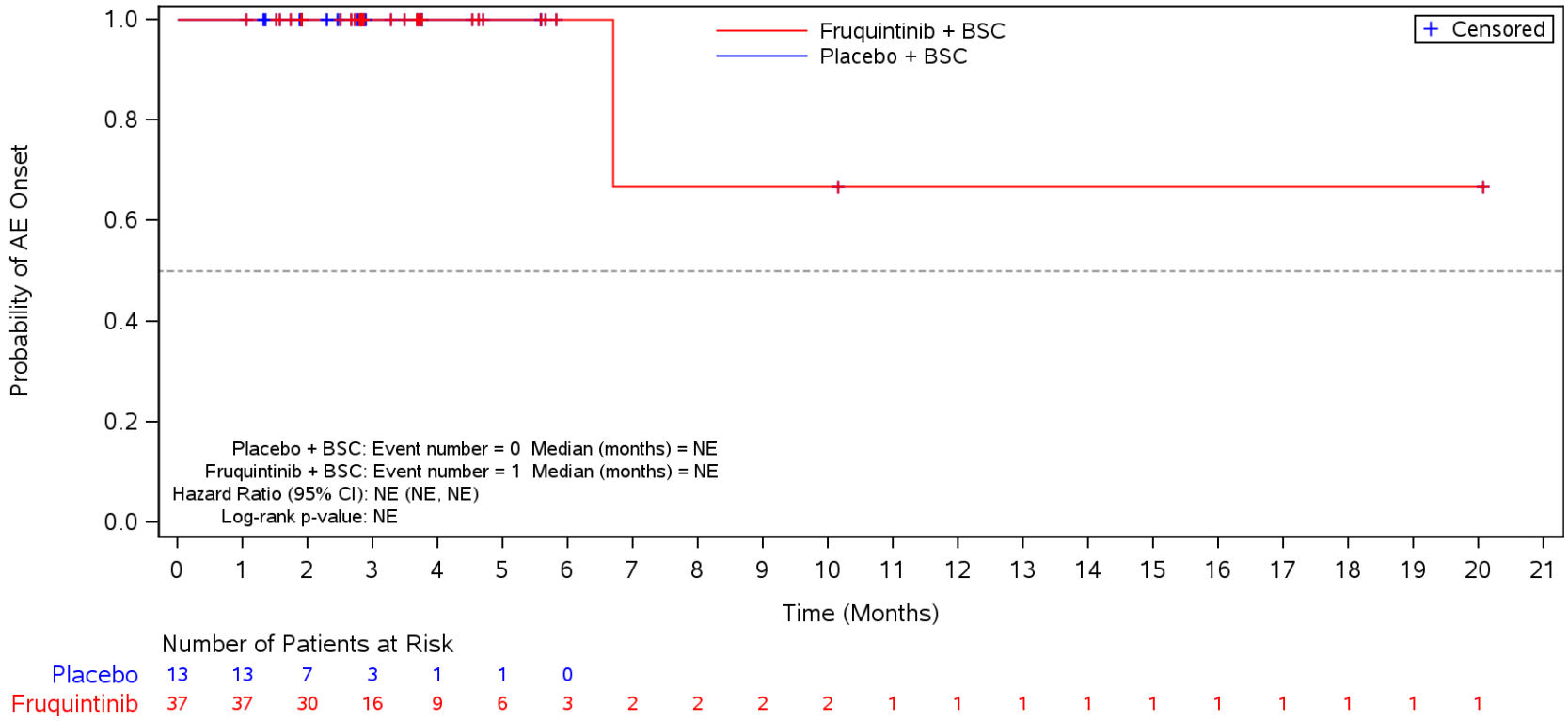
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
<= 18 months



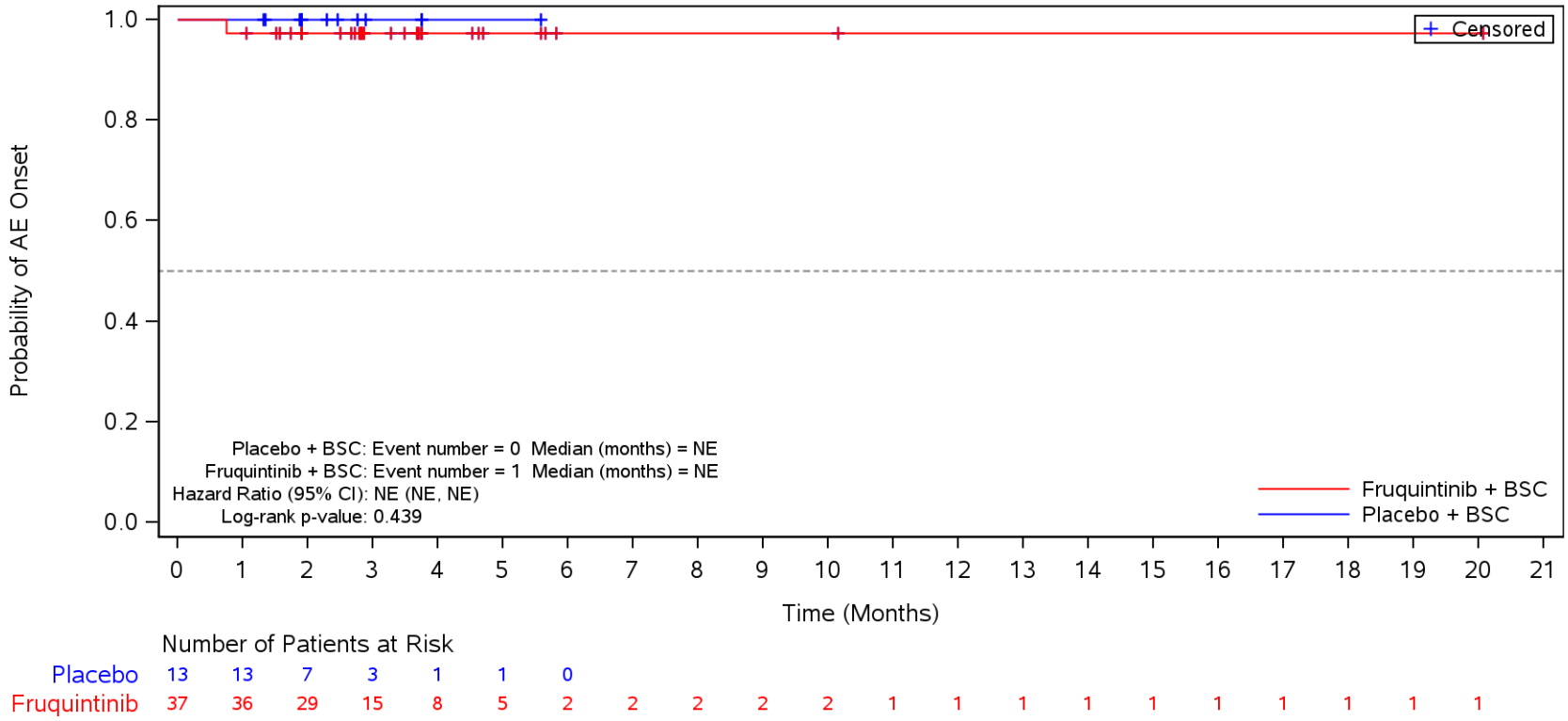
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
<= 18 months



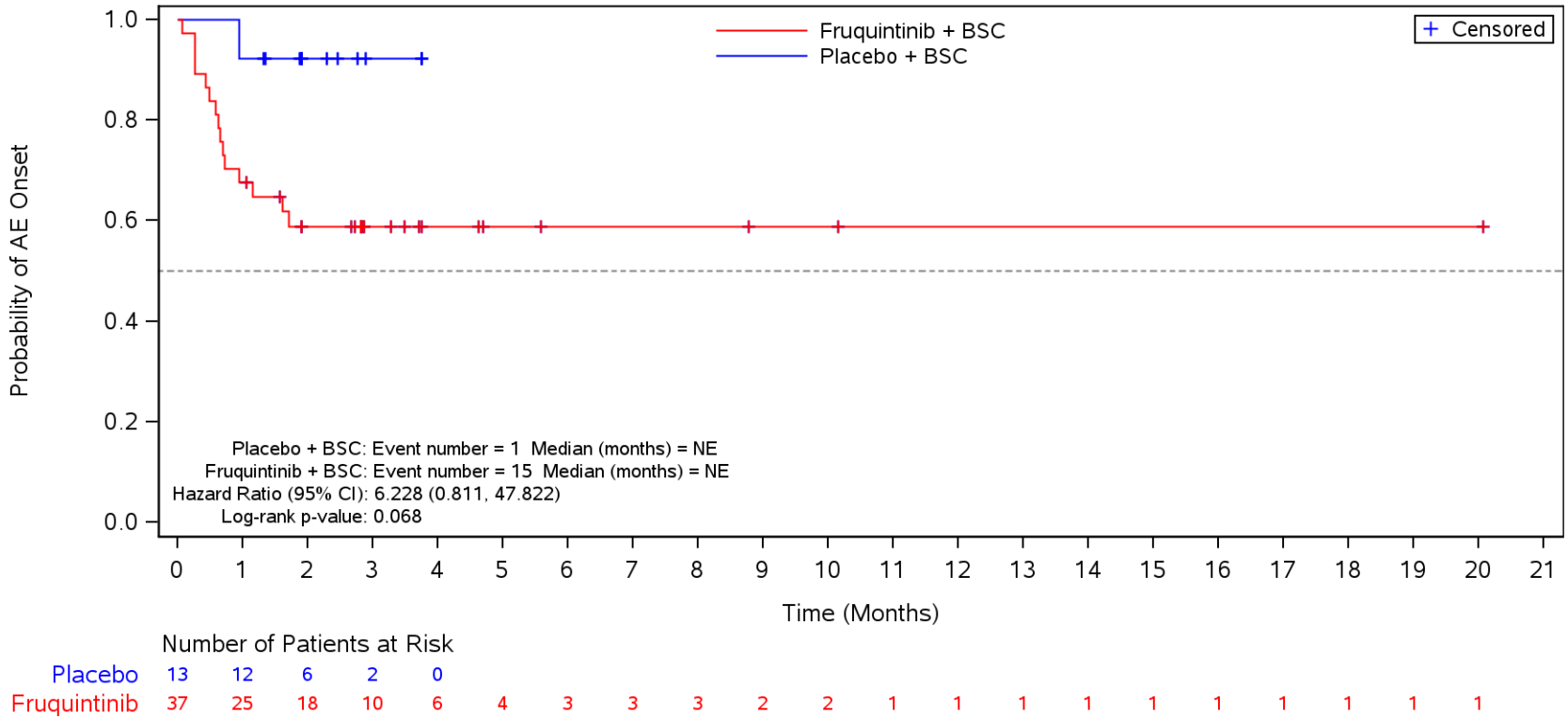
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
<= 18 months



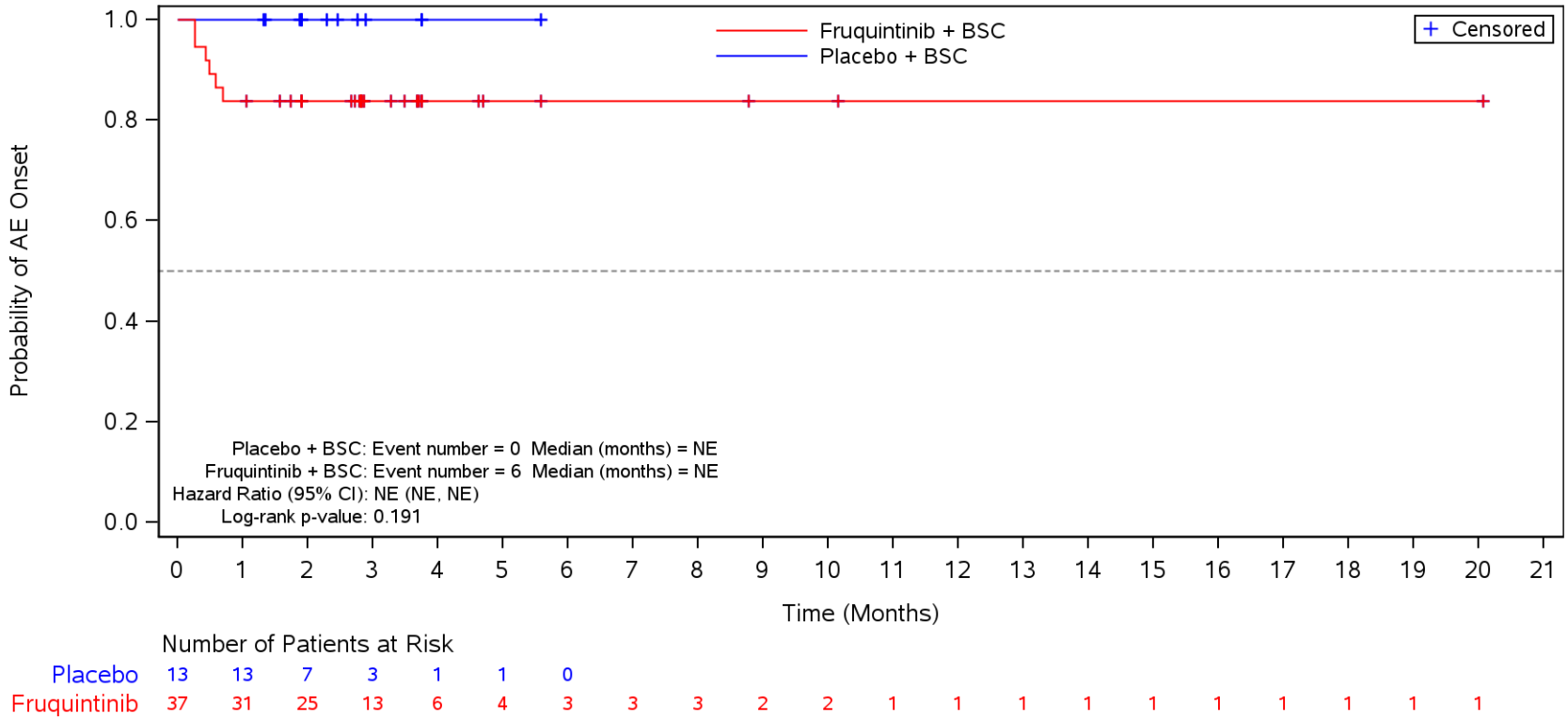
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
<= 18 months



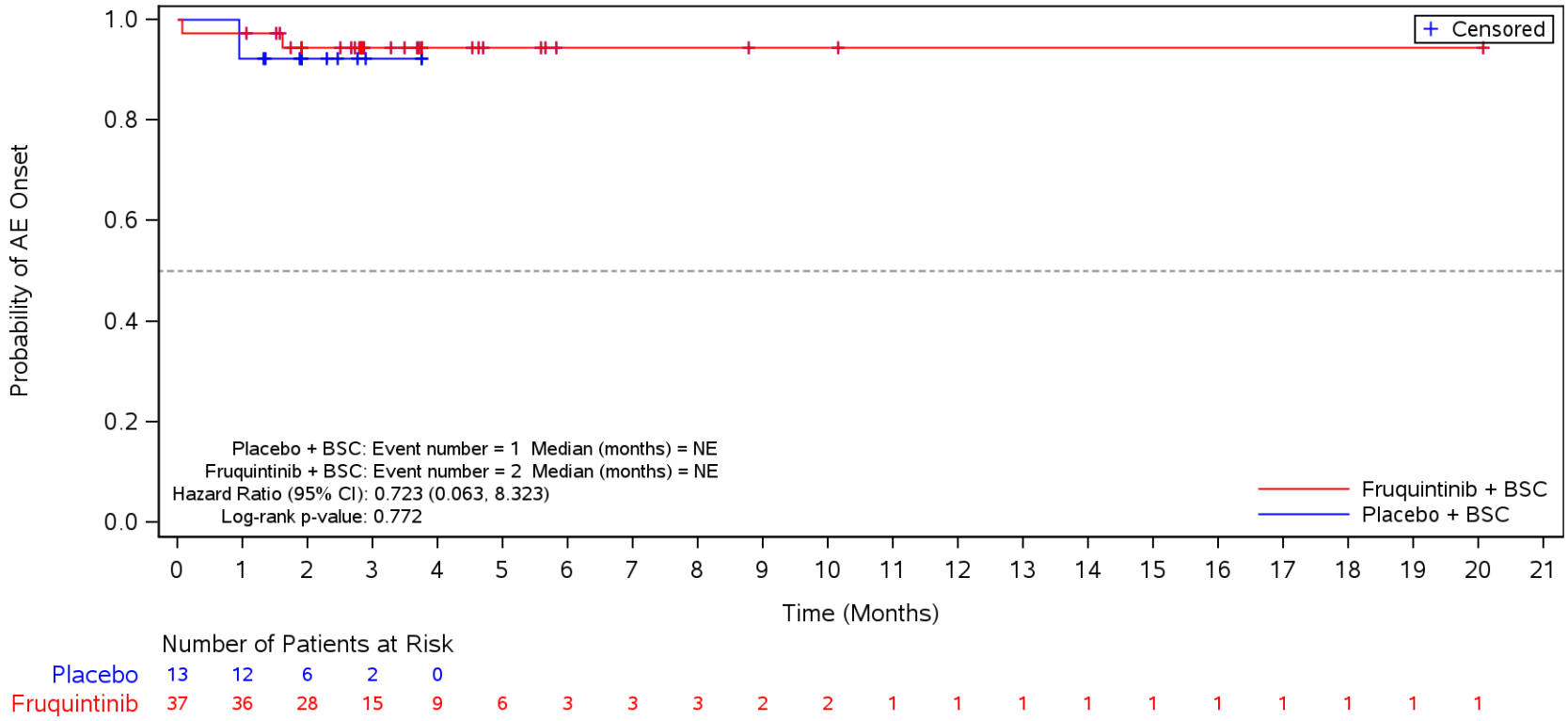
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
<= 18 months



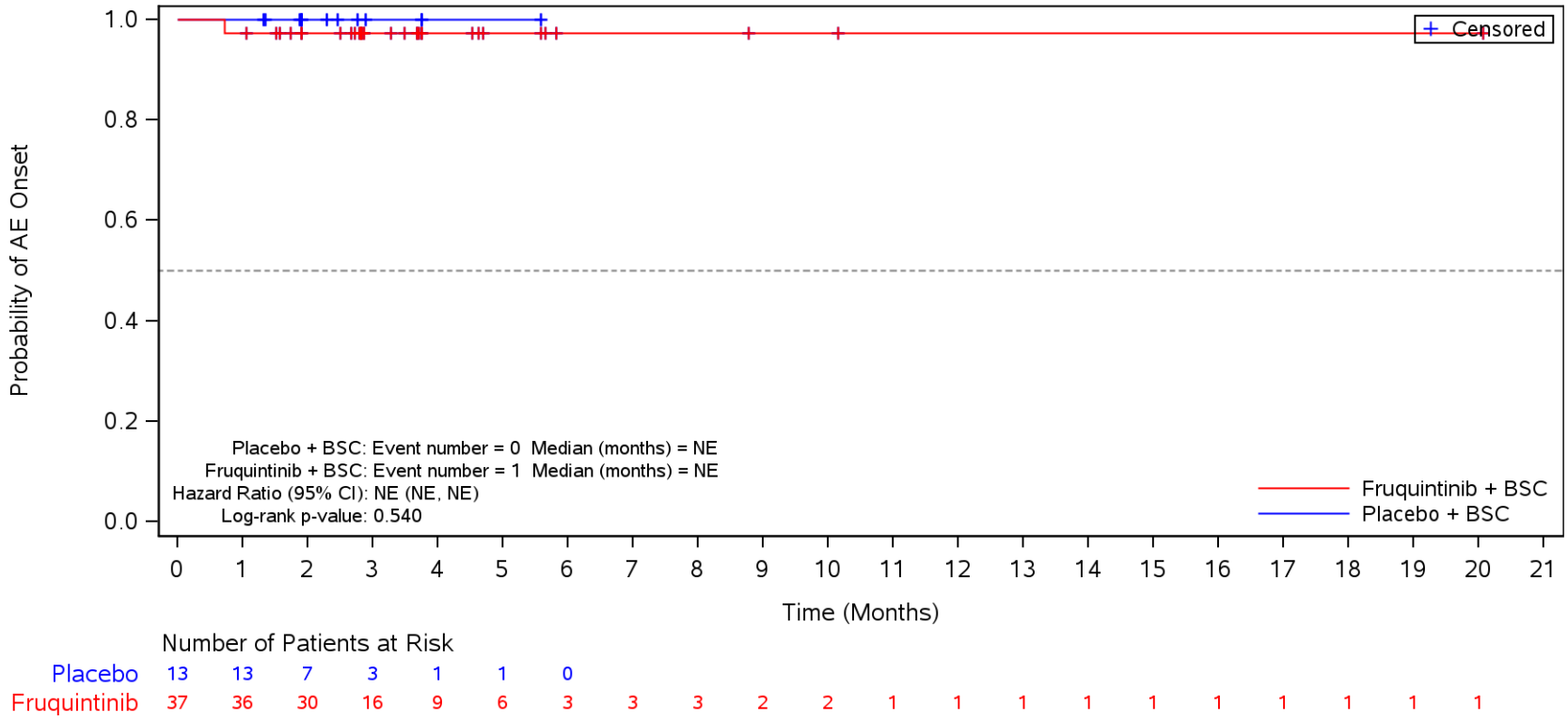
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
<= 18 months



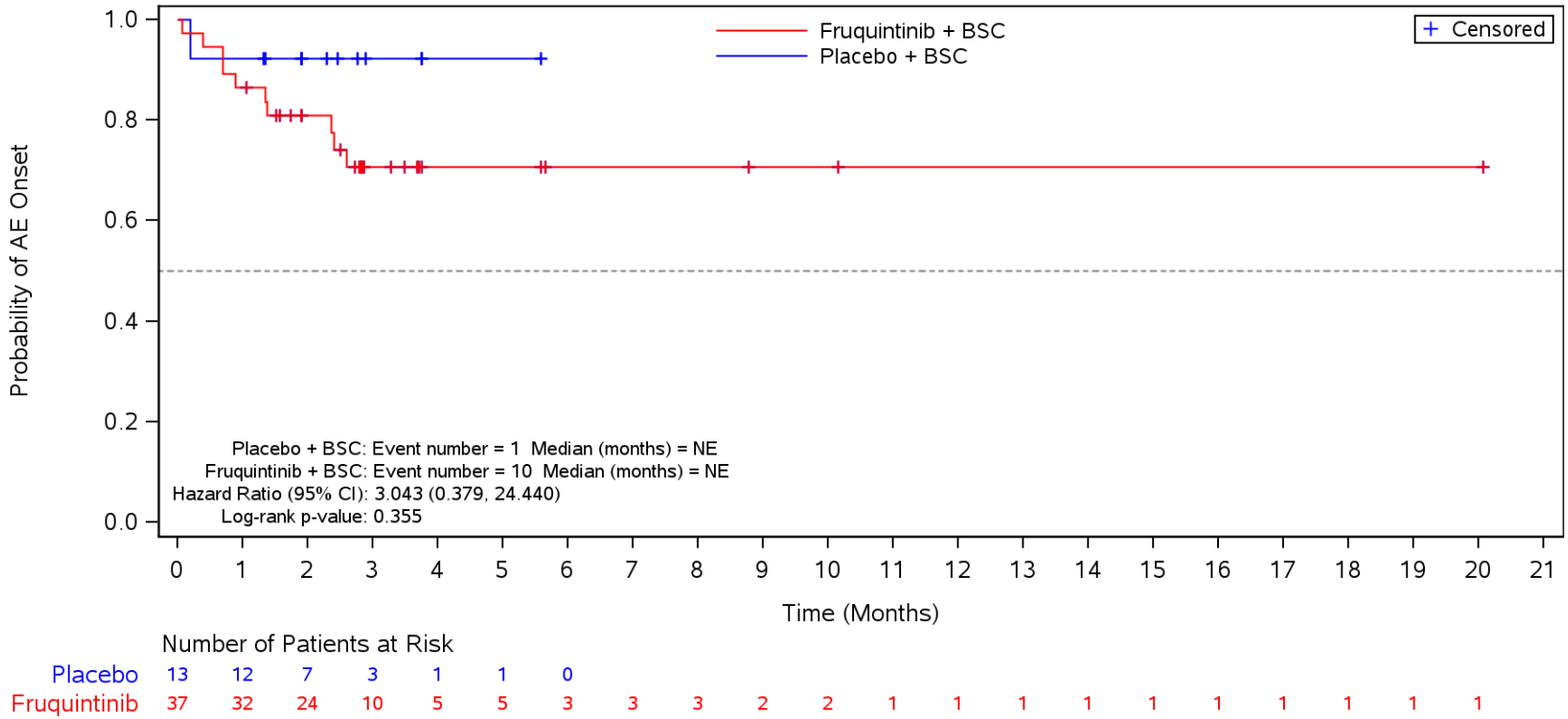
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
<= 18 months



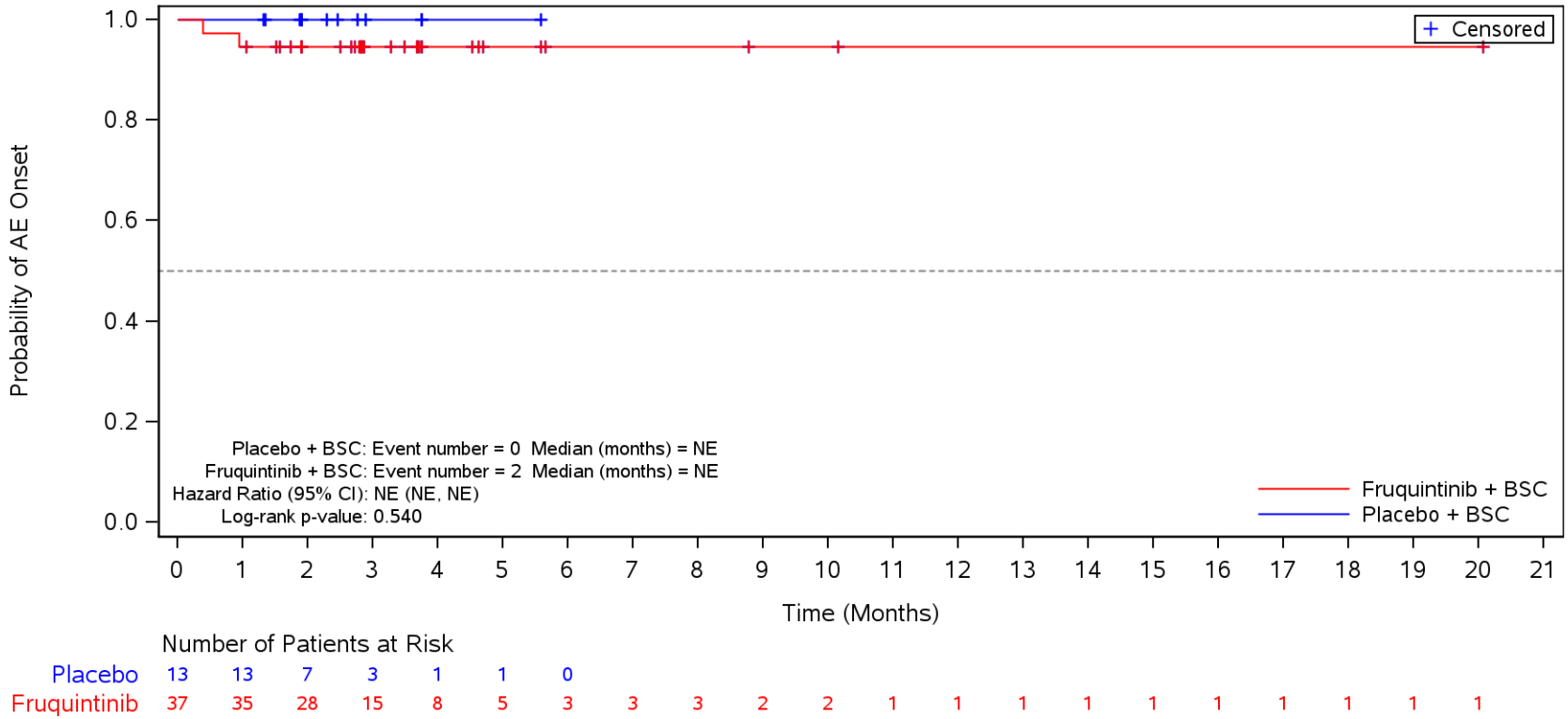
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Nervous system disorders**
<= 18 months



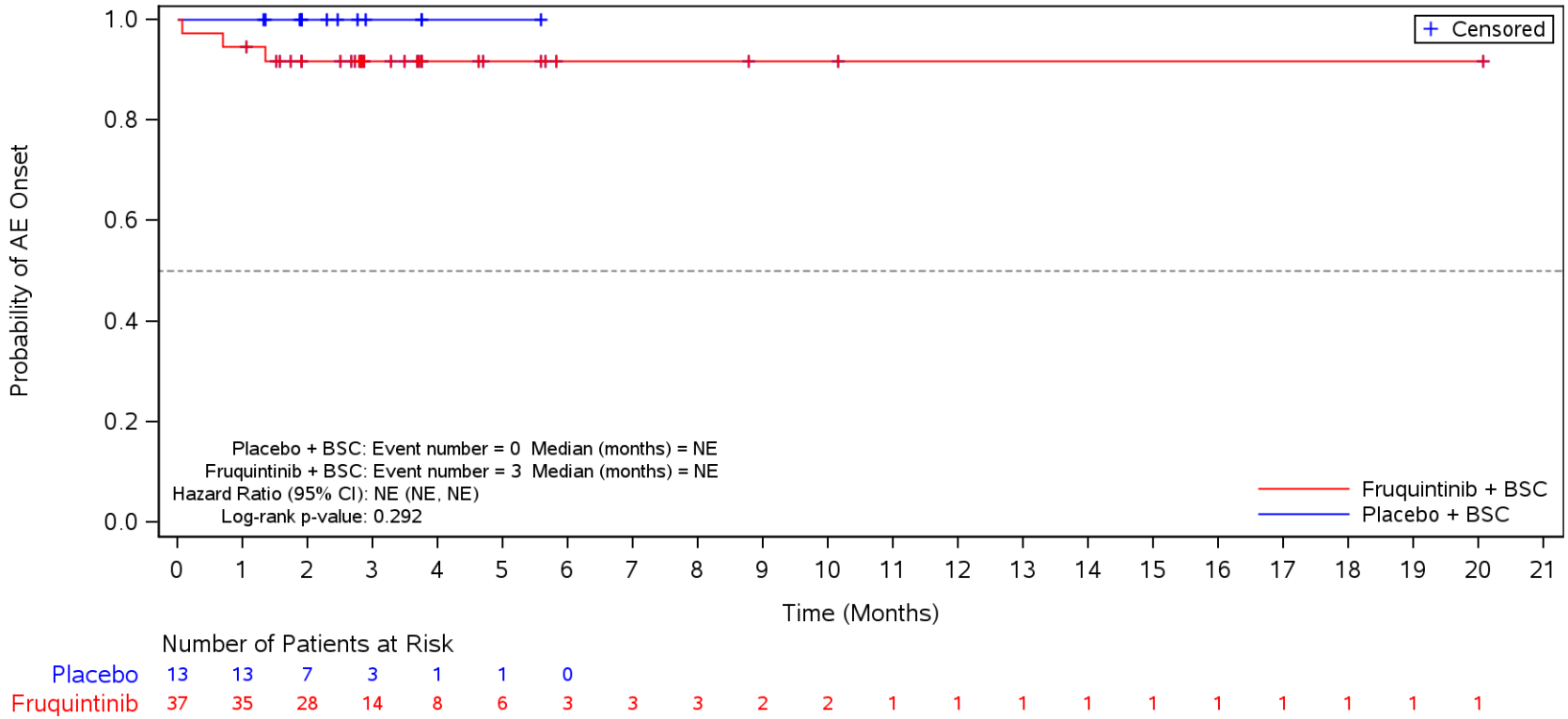
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
<= 18 months



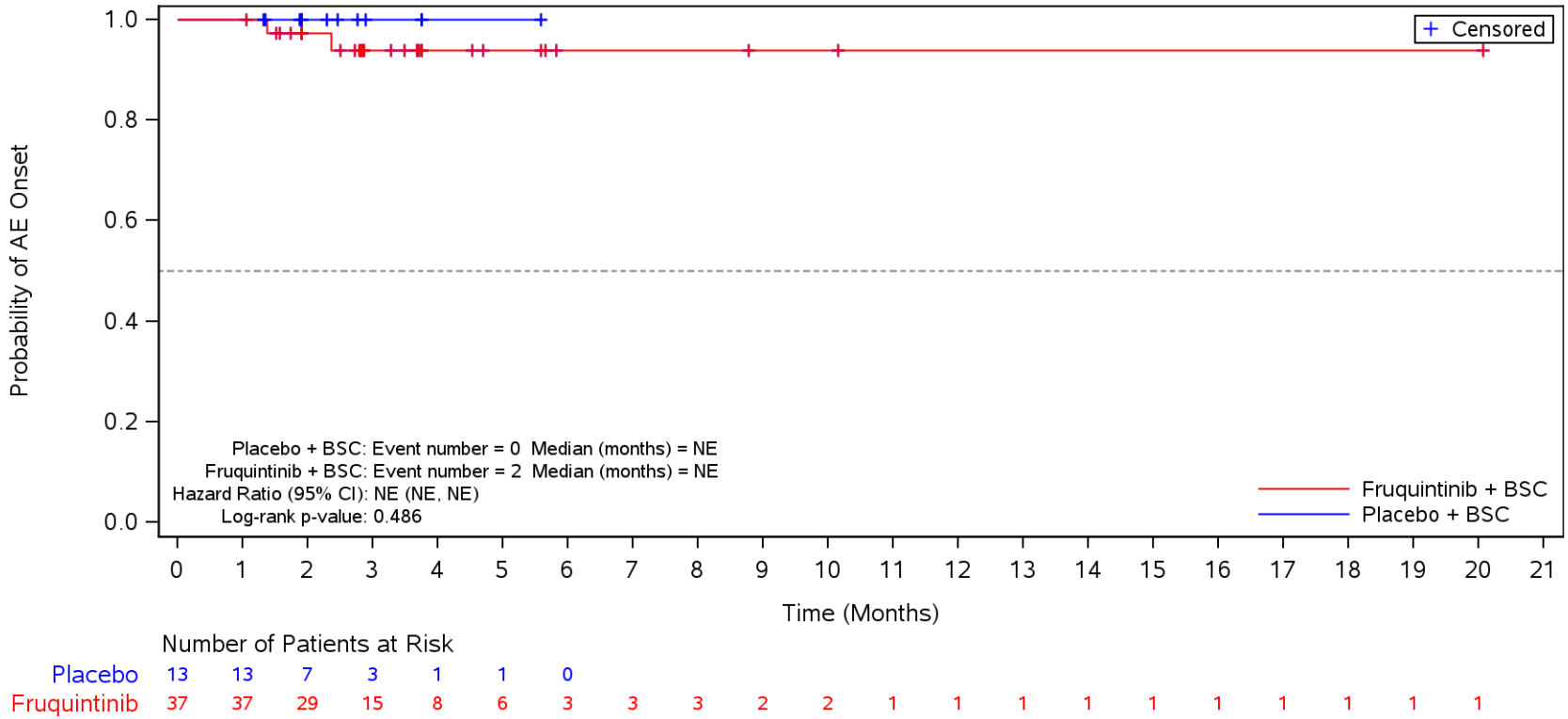
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
<= 18 months



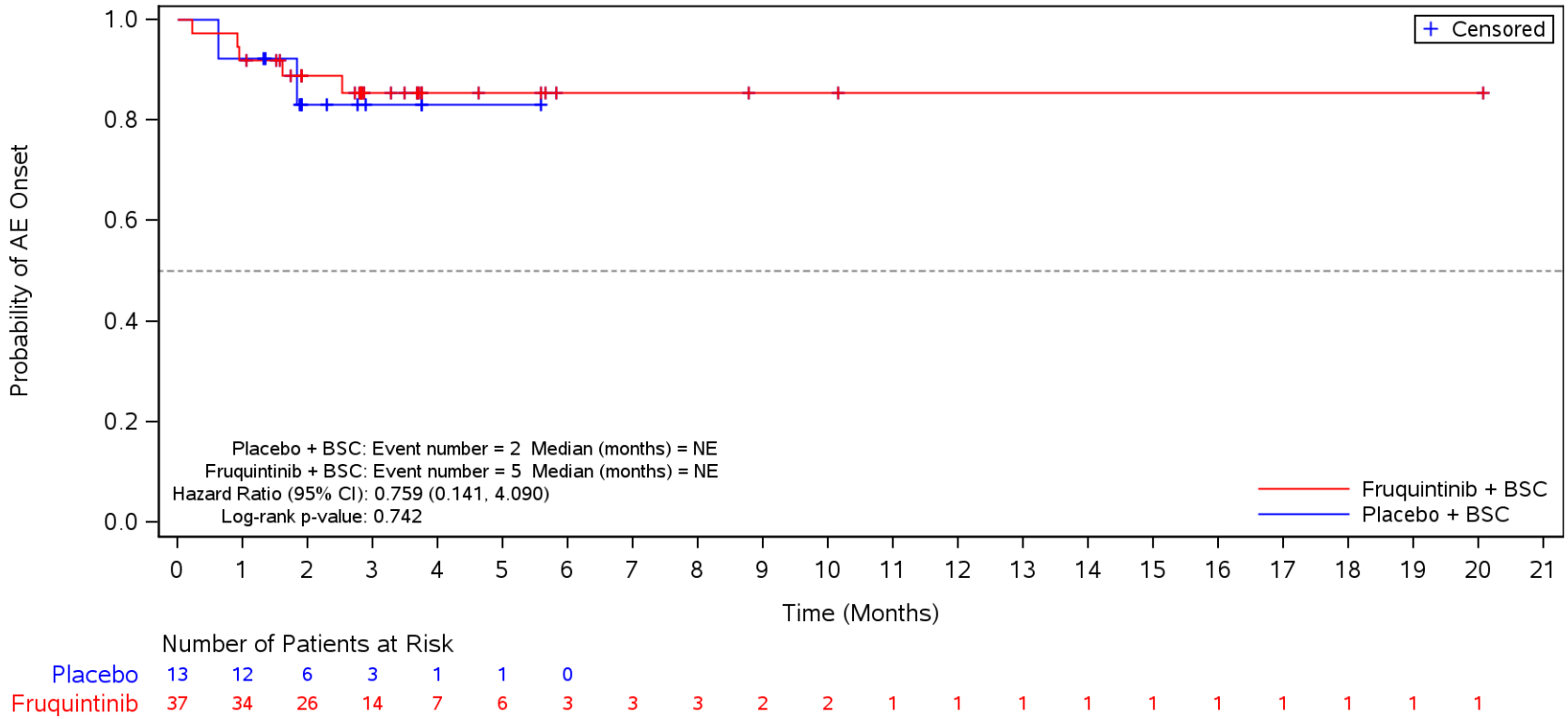
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
<= 18 months



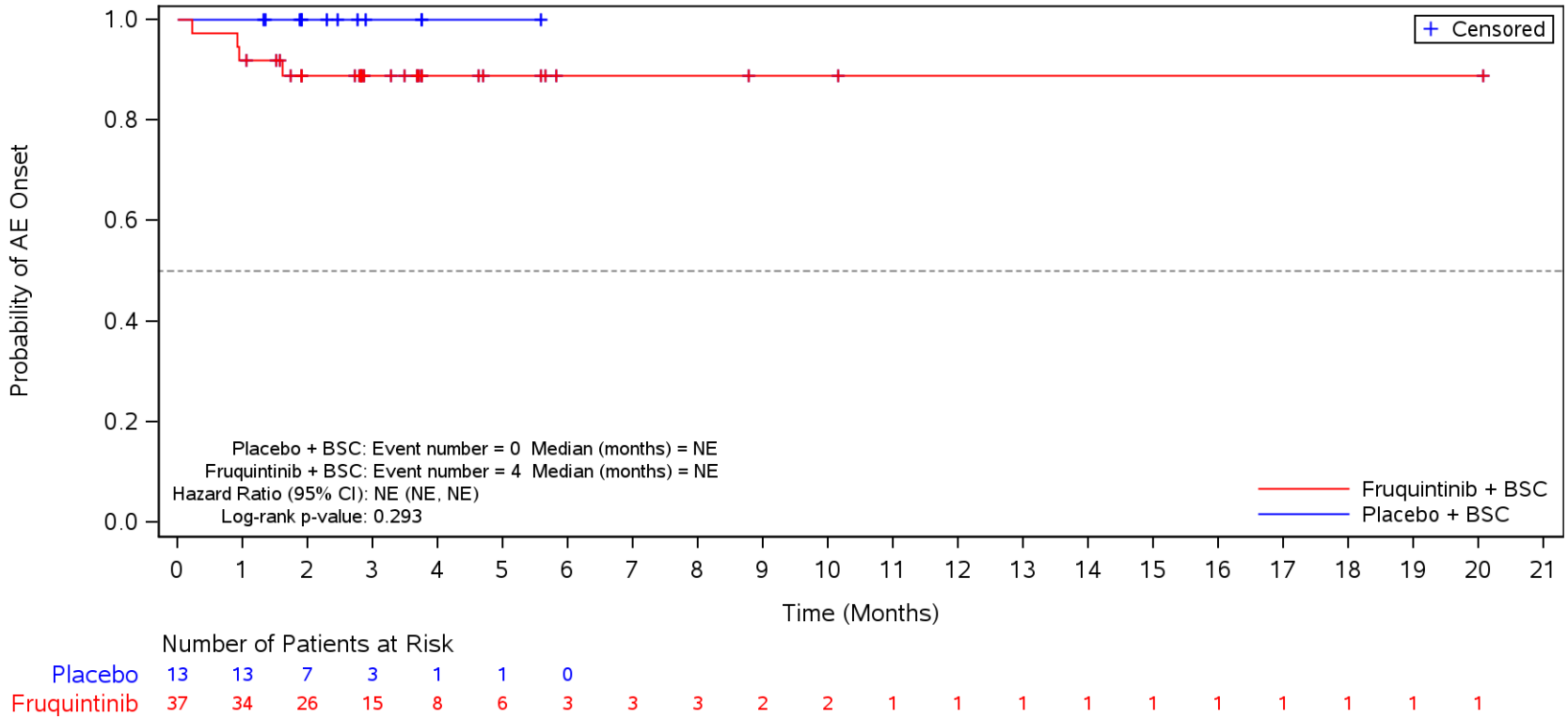
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
<= 18 months



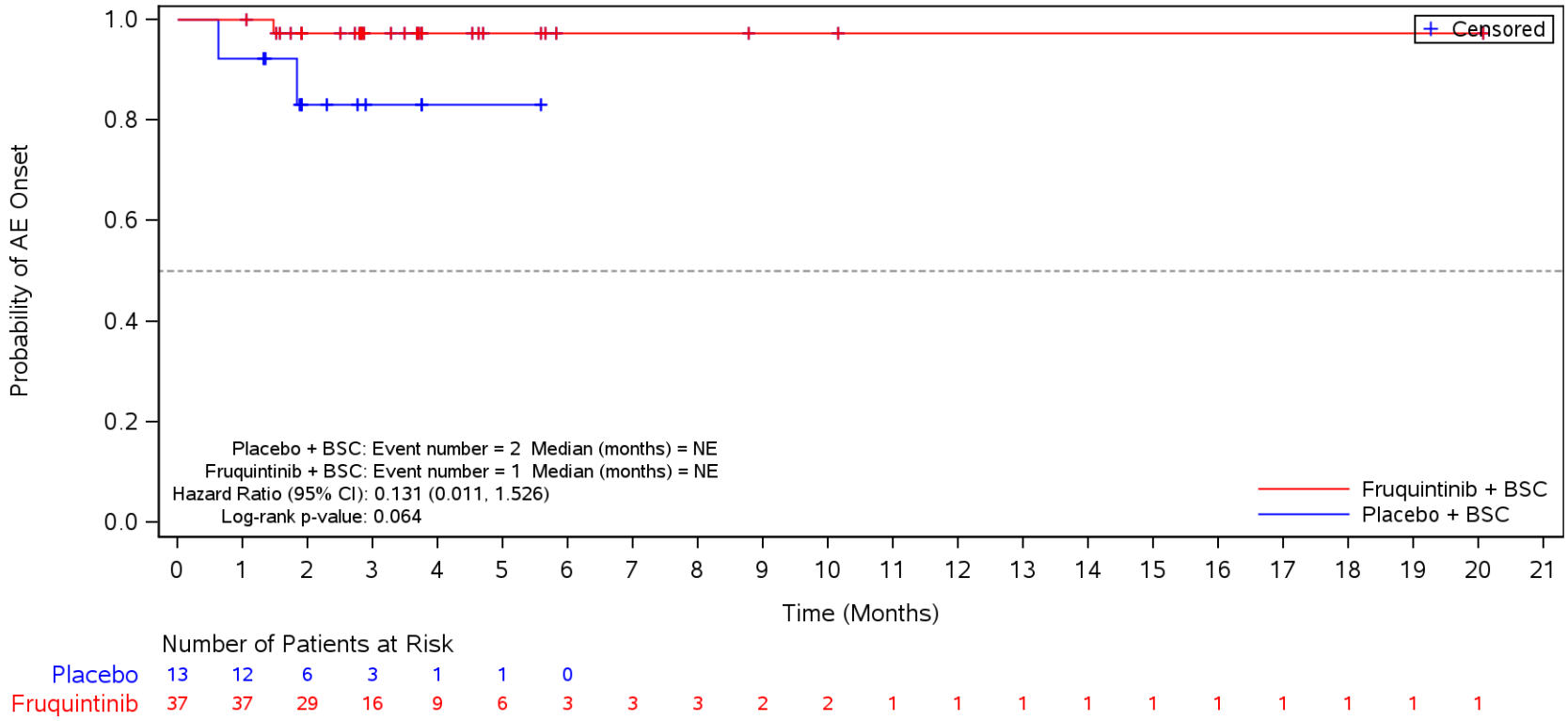
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Proteinuria**
<= 18 months



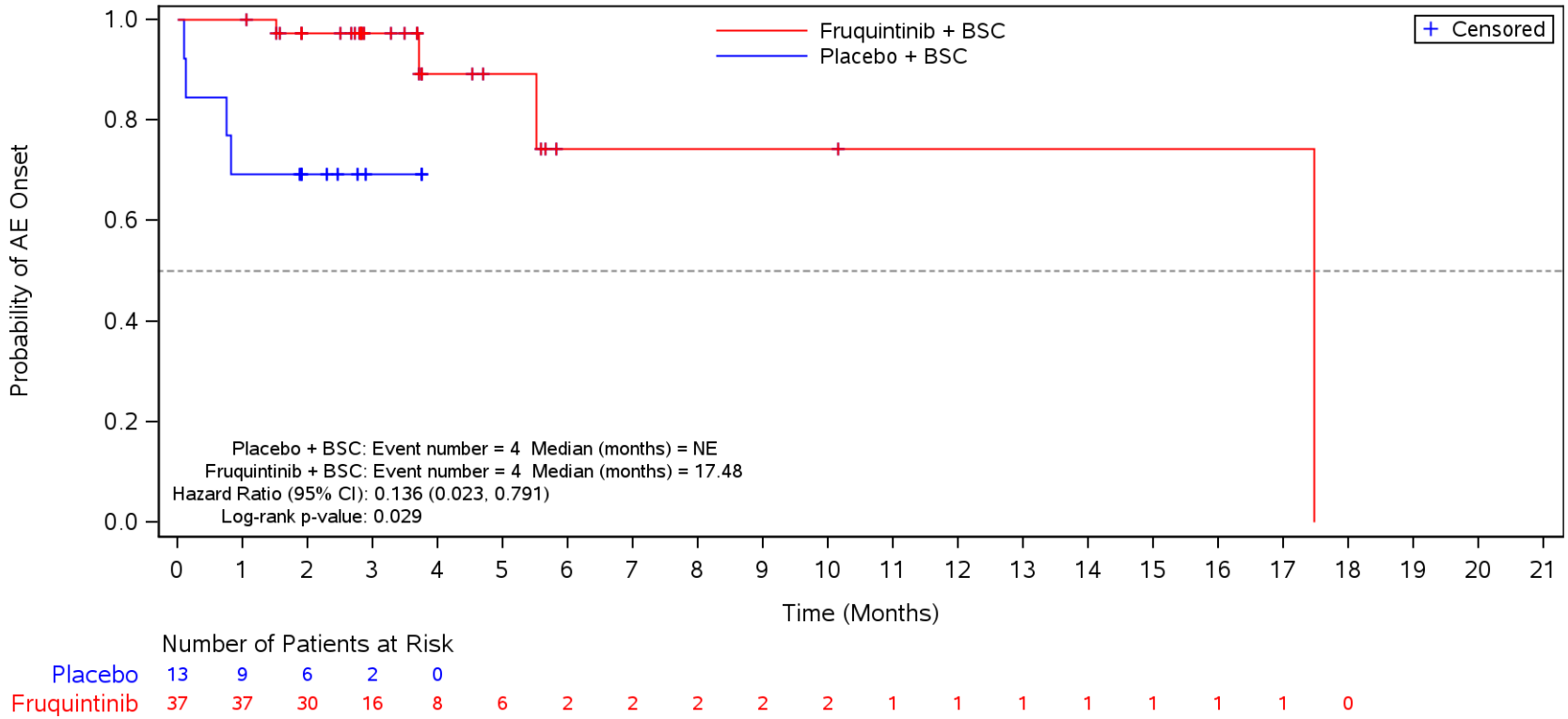
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Renal and urinary disorders** and Preferred Term **Haematuria**
<= 18 months



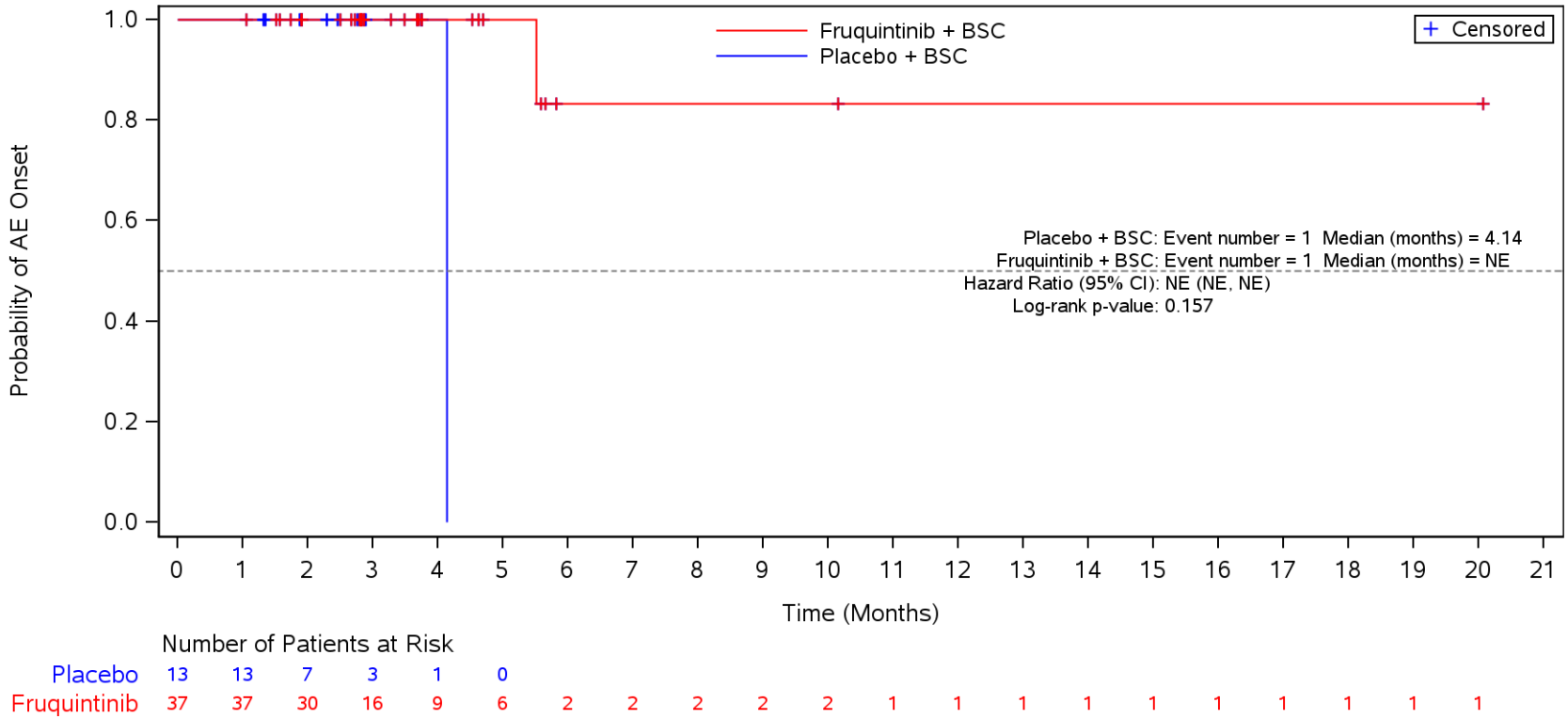
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Infections and infestations**
<= 18 months



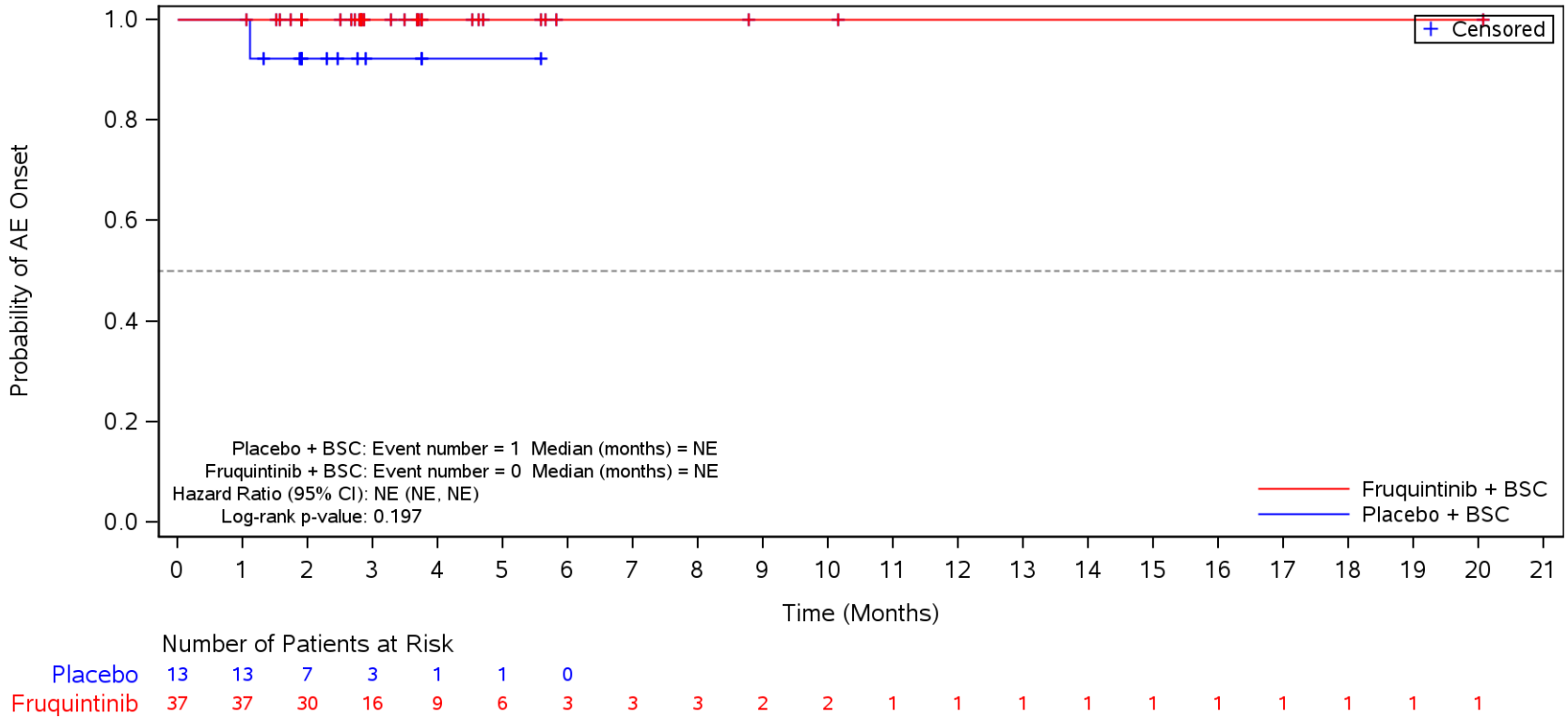
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **Urinary tract infection**
<= 18 months



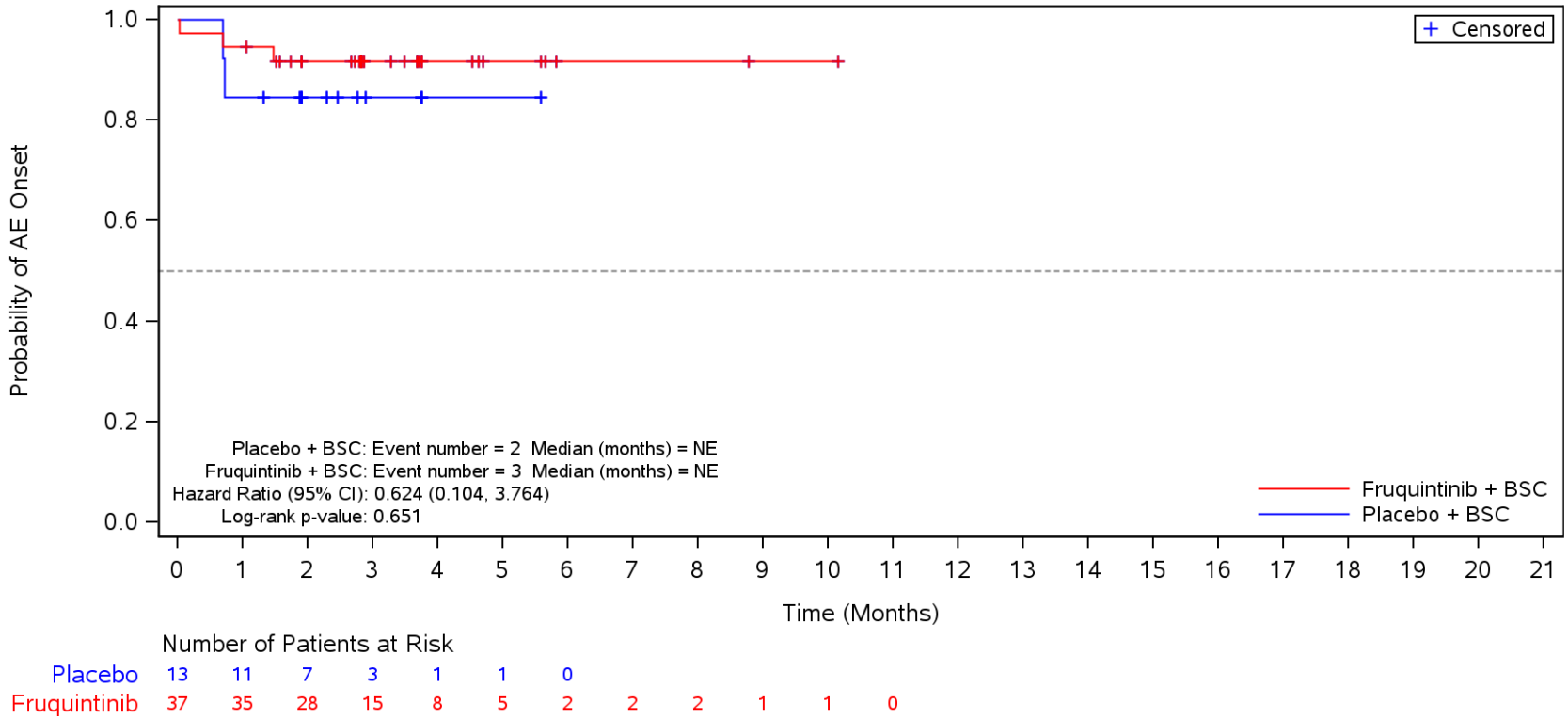
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Infections and infestations** and Preferred Term **COVID-19**
<= 18 months



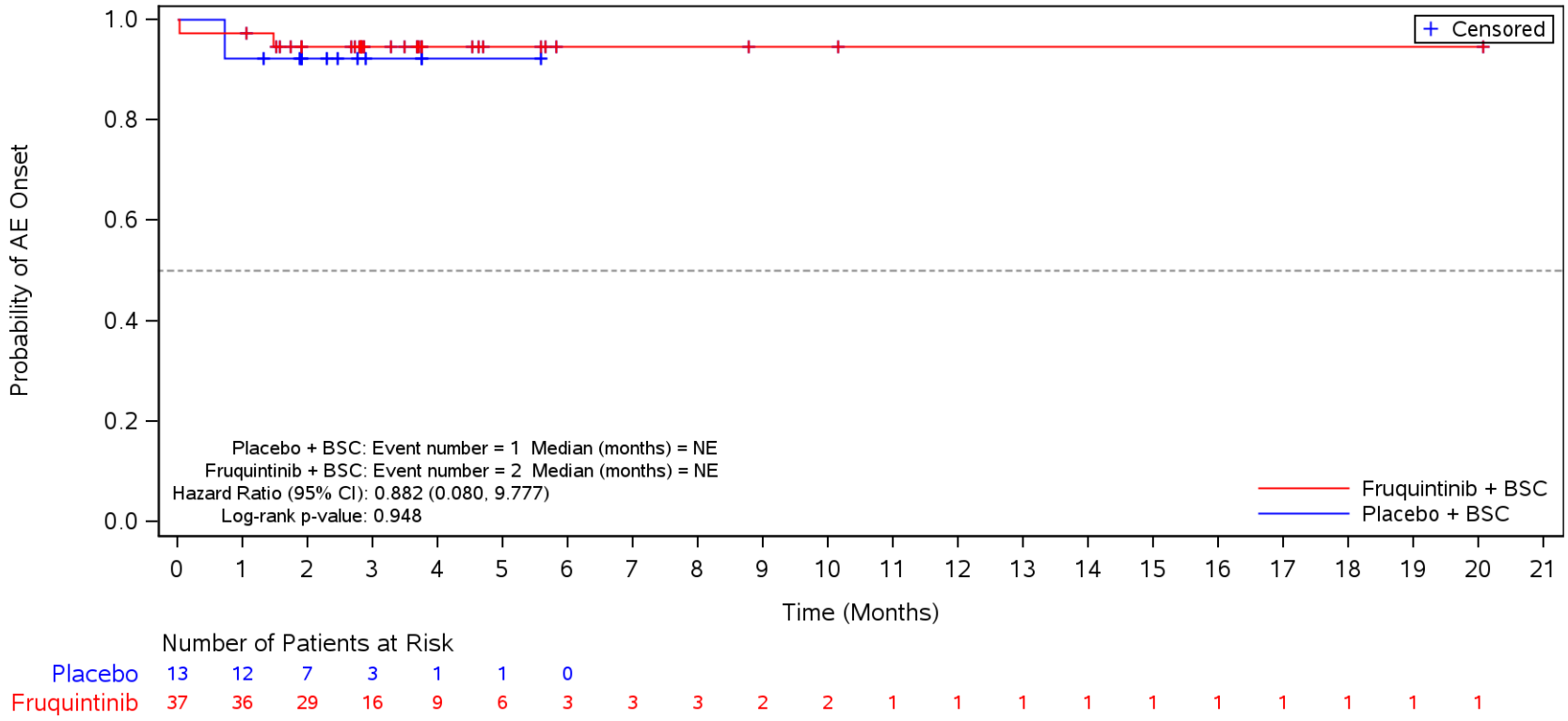
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders**
<= 18 months



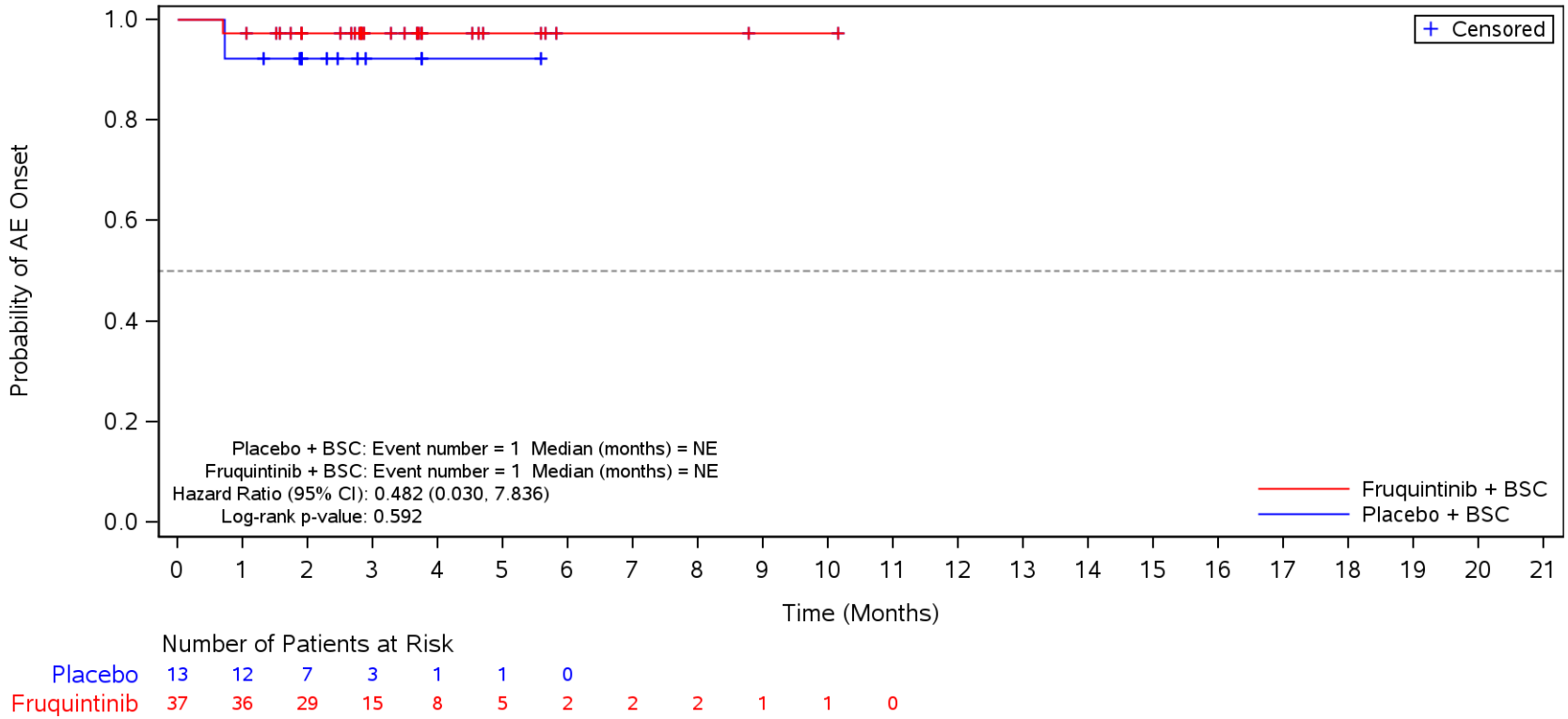
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Anaemia**
<= 18 months



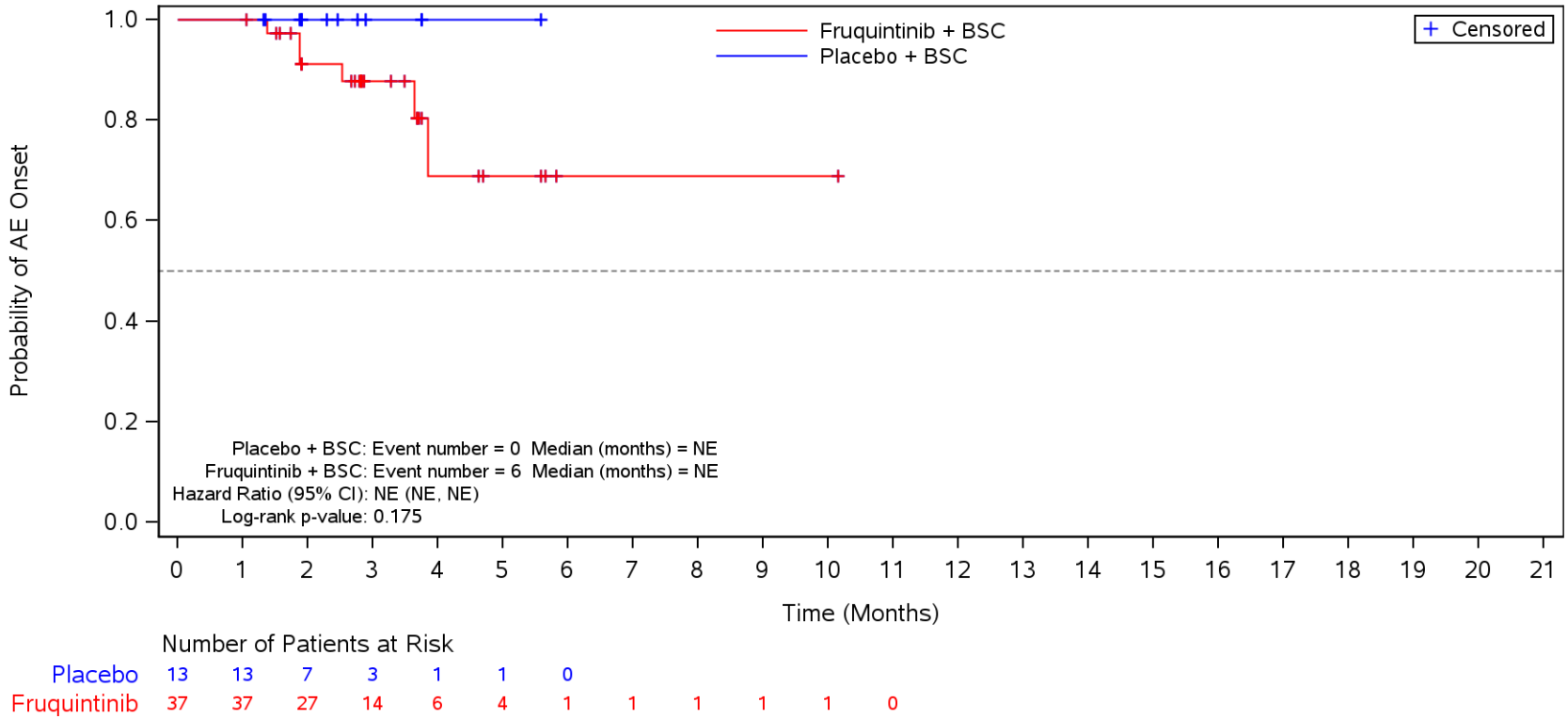
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Blood and lymphatic system disorders** and Preferred Term **Thrombocytopenia**
<= 18 months



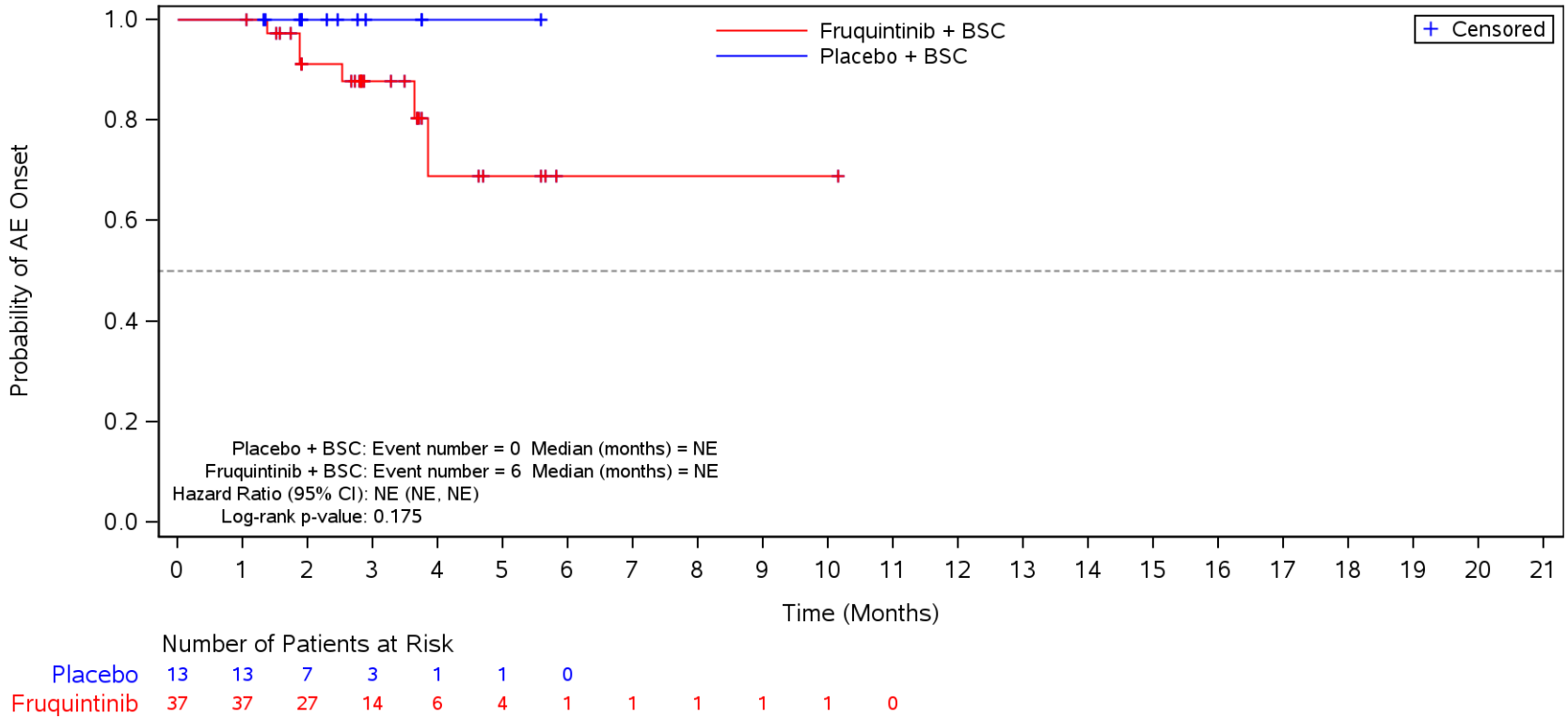
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Endocrine disorders**
<= 18 months



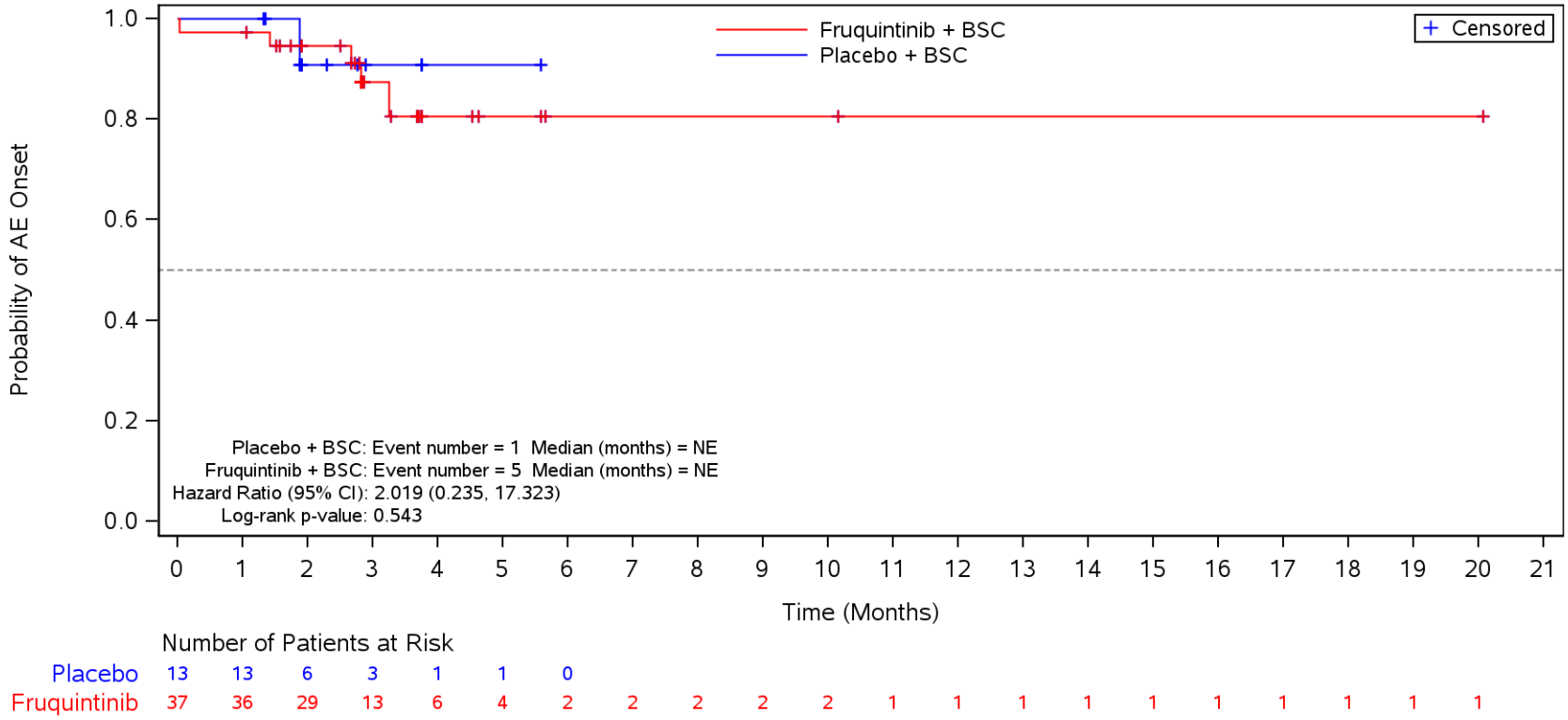
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Endocrine disorders** and Preferred Term **Hypothyroidism**
<= 18 months



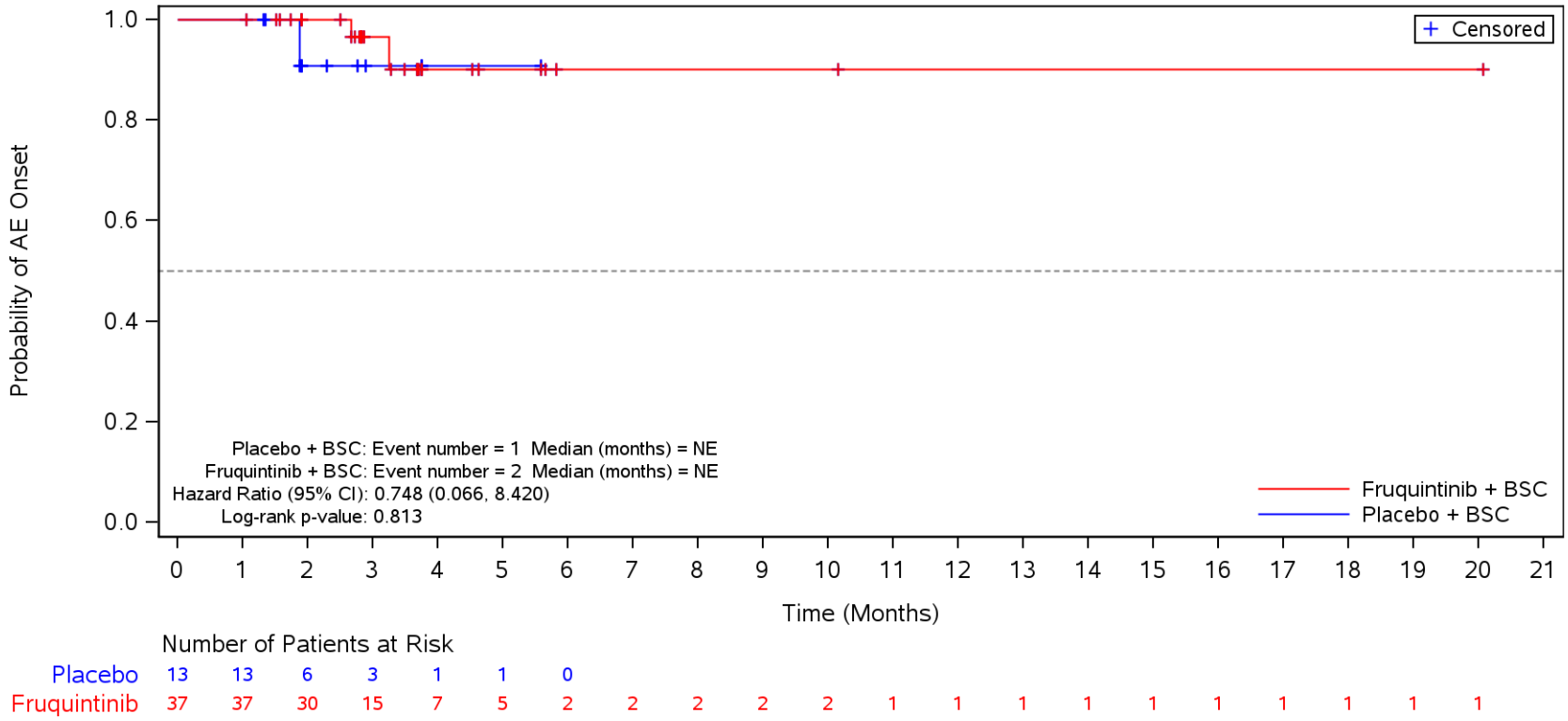
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Psychiatric disorders**
<= 18 months



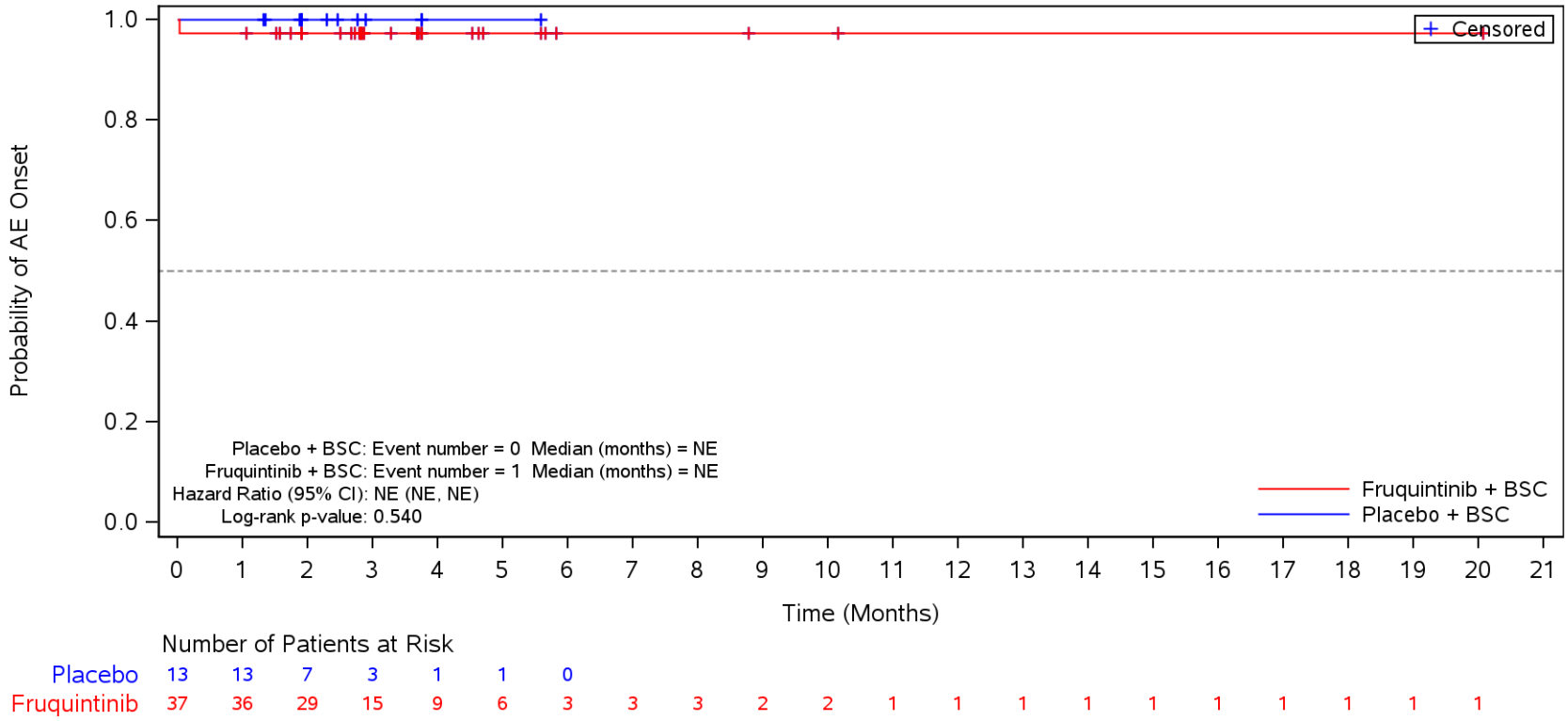
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Insomnia**
<= 18 months



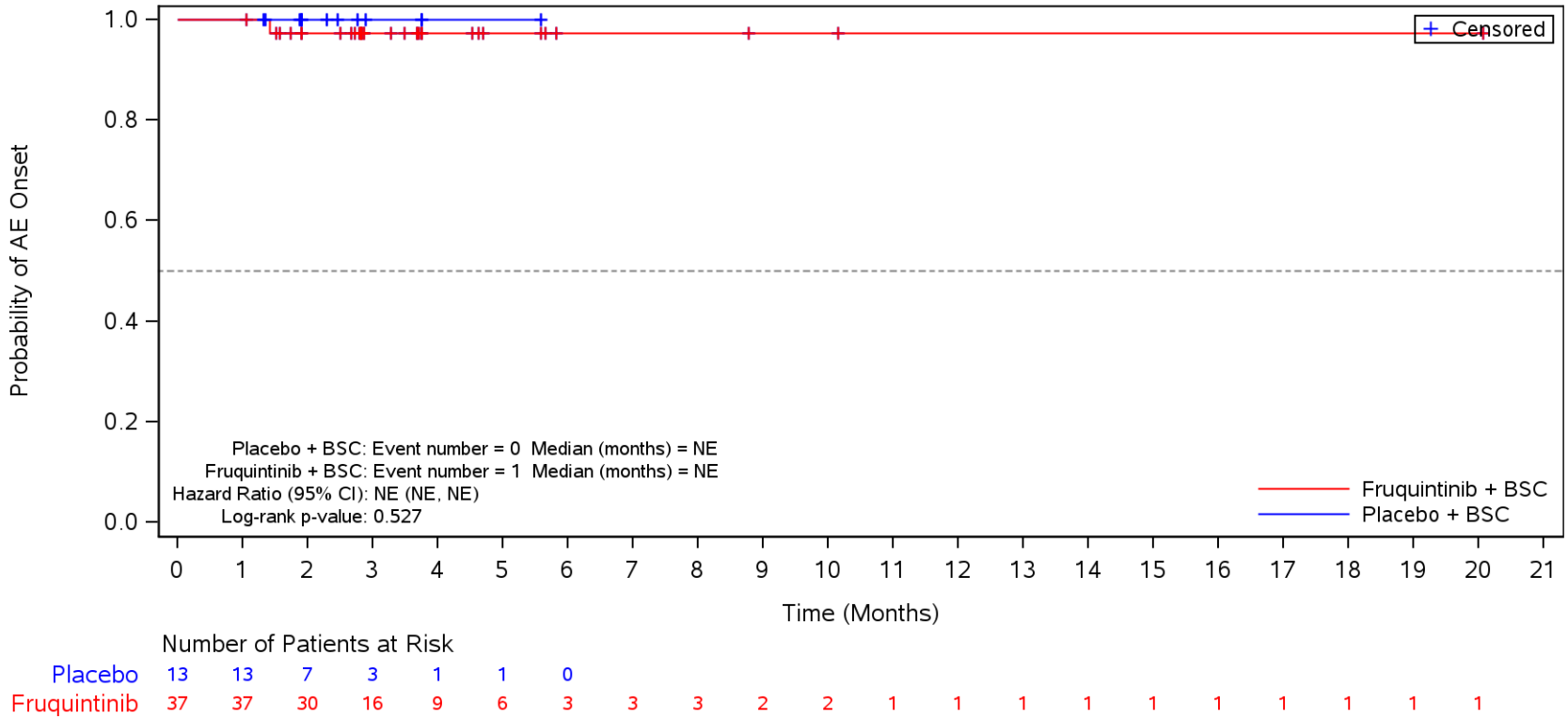
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Anxiety**
<= 18 months



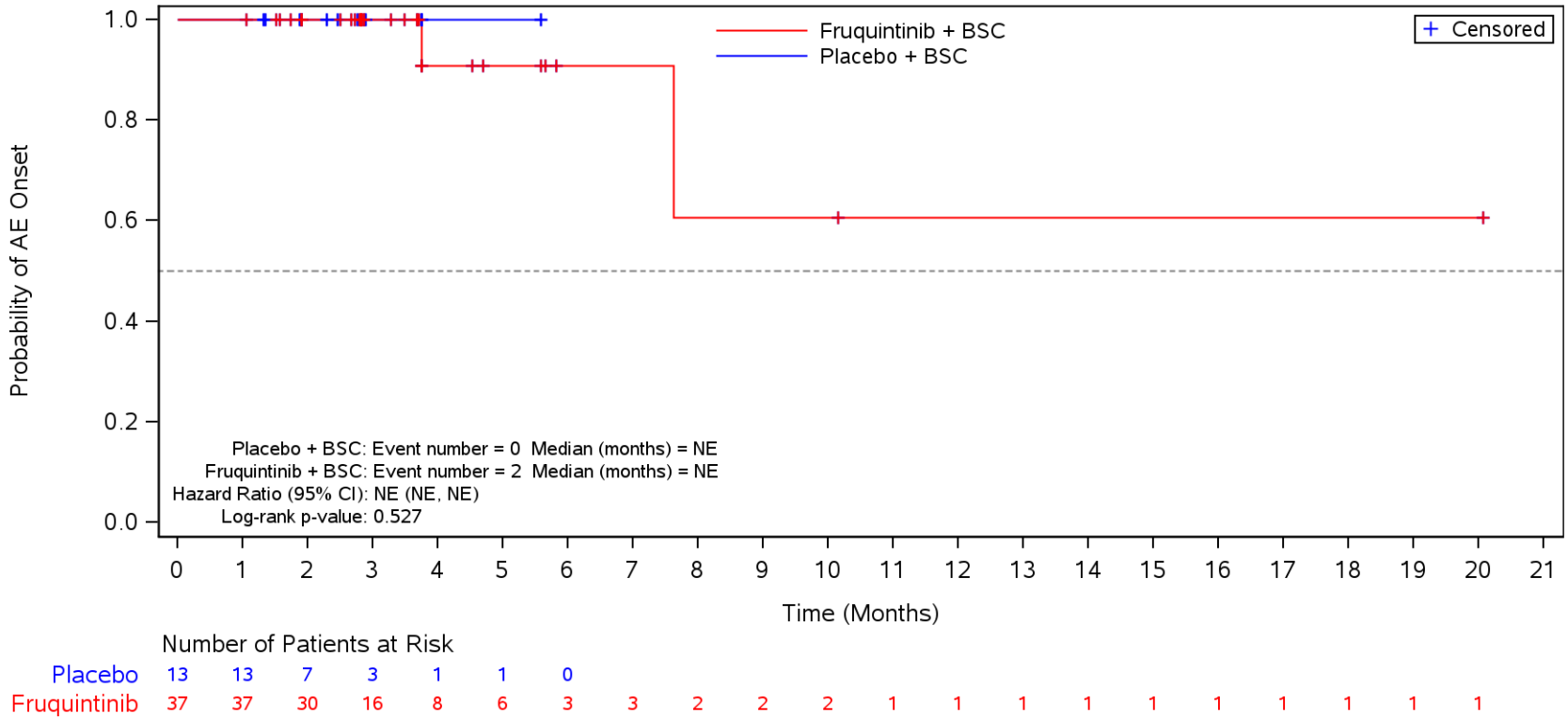
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Psychiatric disorders** and Preferred Term **Confusional state**
<= 18 months



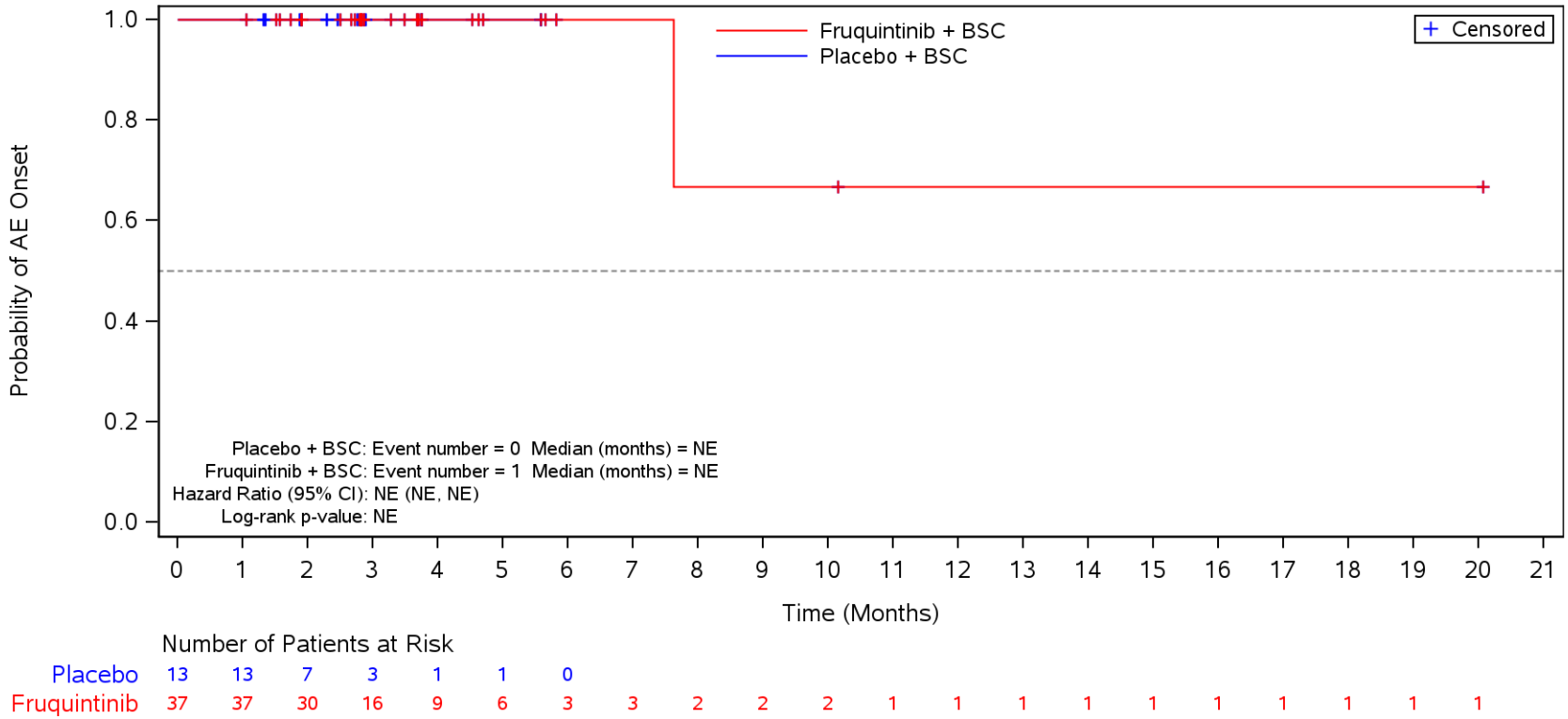
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Hepatobiliary disorders**
<= 18 months



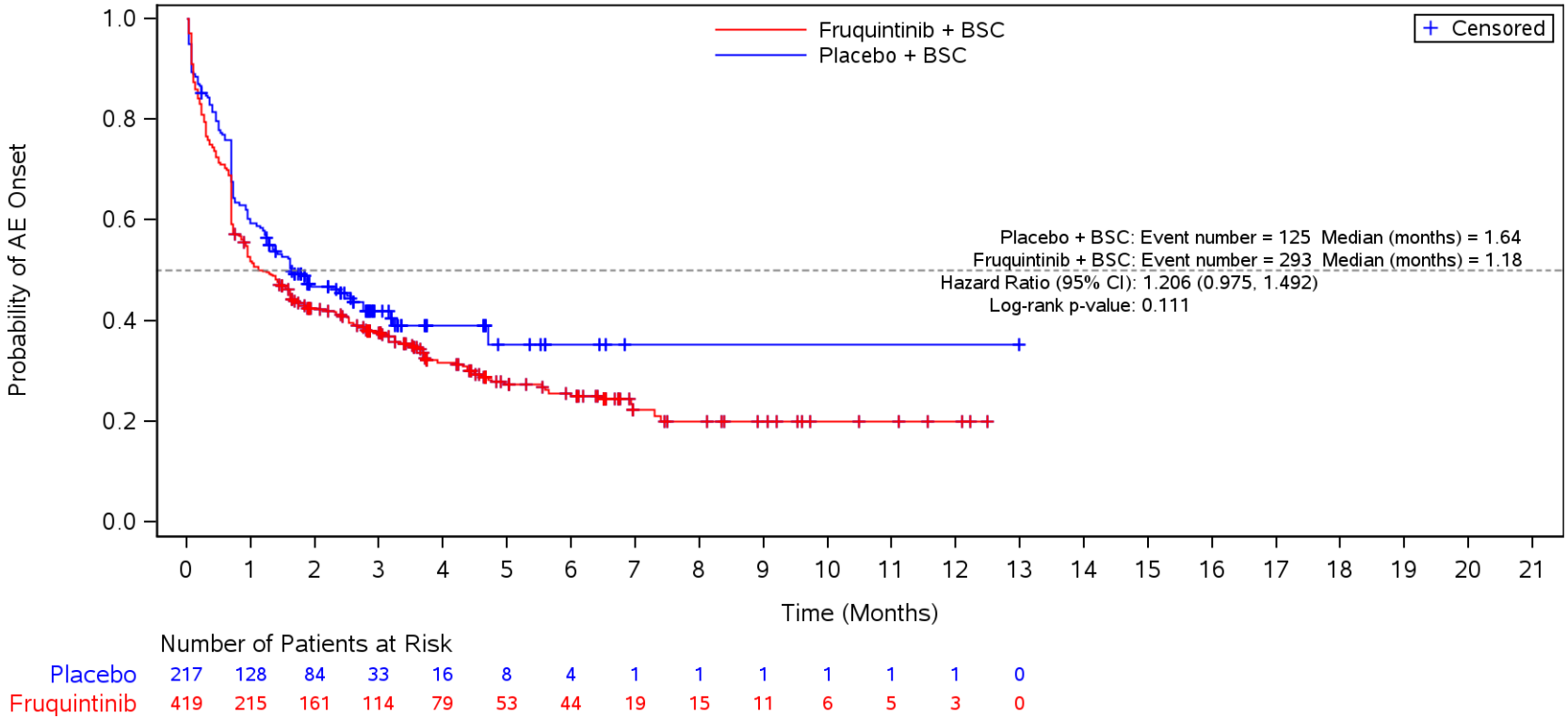
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Hepatobiliary disorders** and Preferred Term **Hyperbilirubinaemia**
<= 18 months



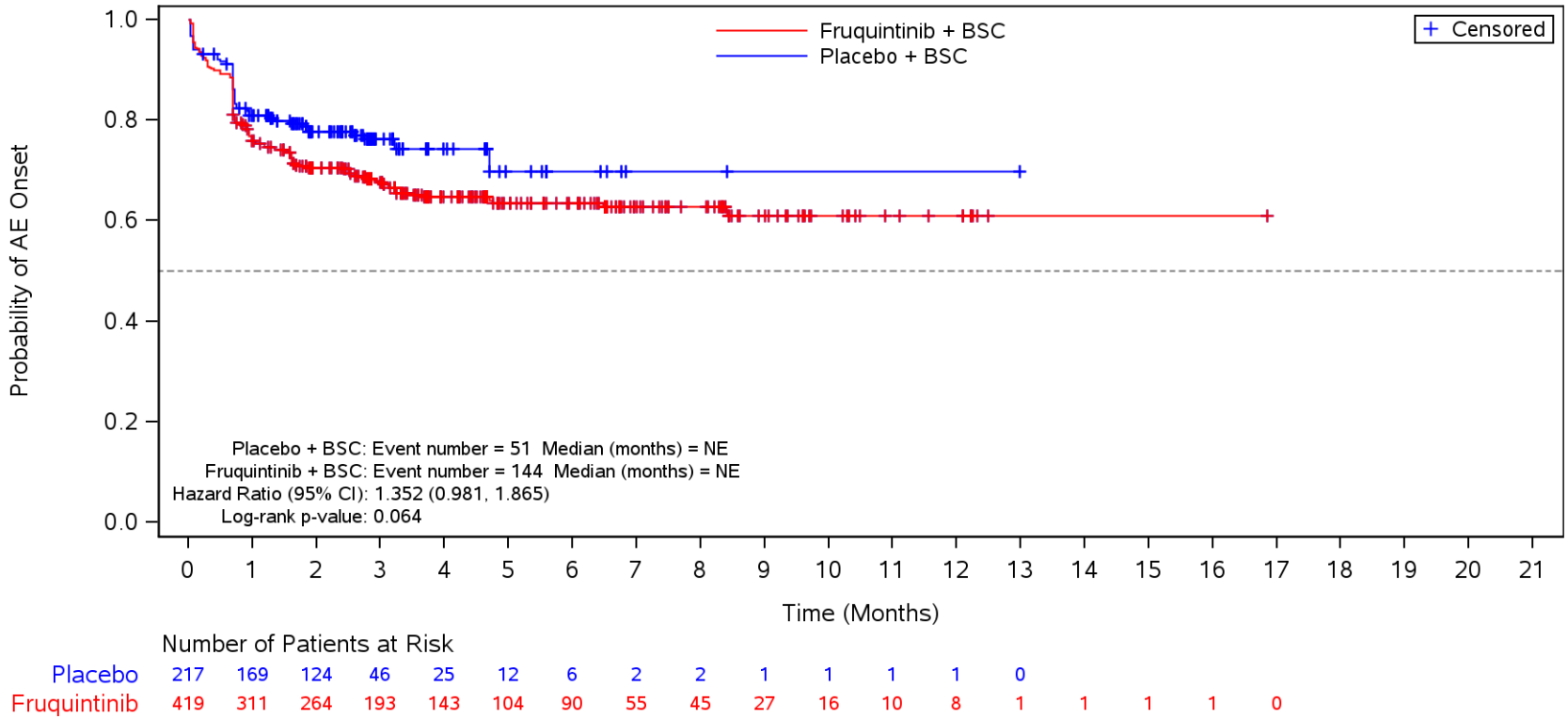
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions**
> 18 months



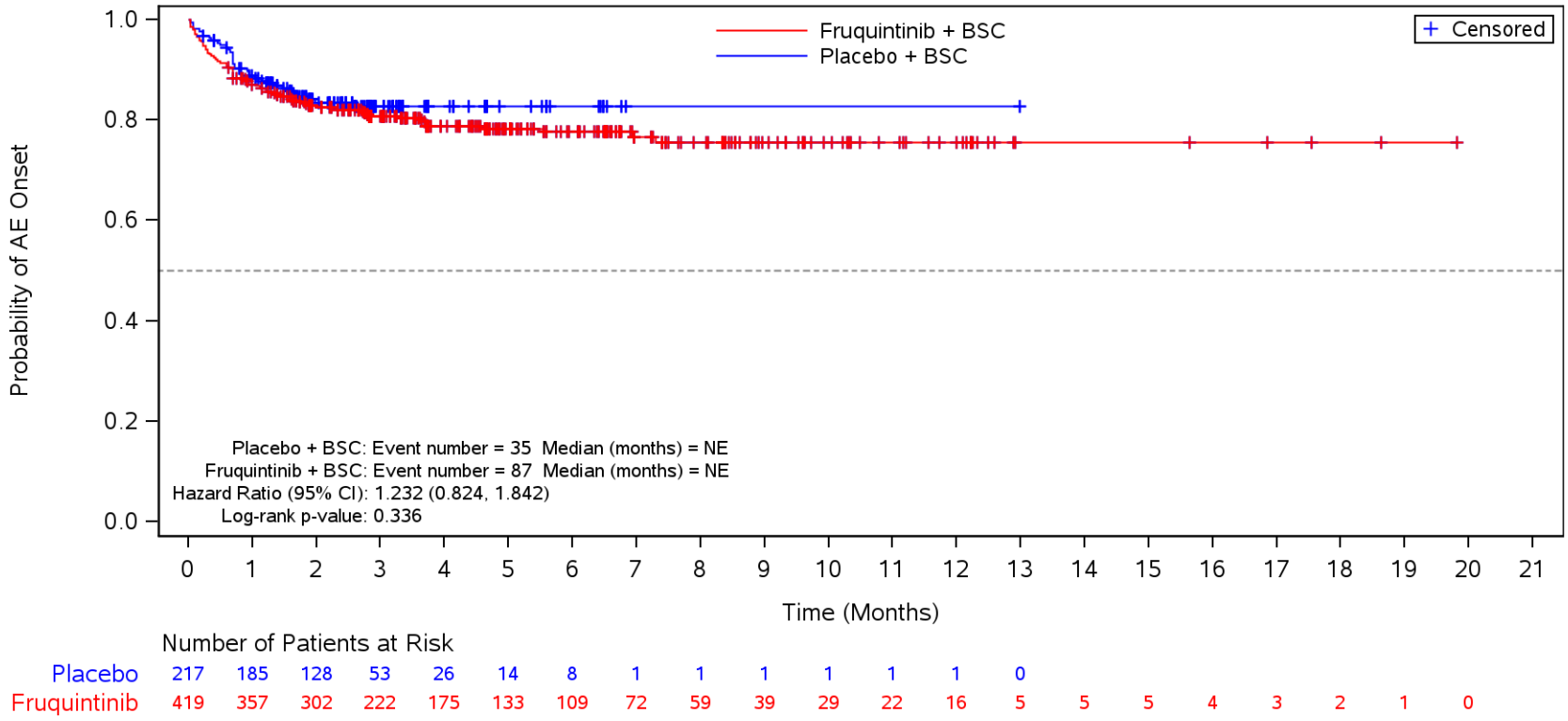
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Asthenia**
> 18 months



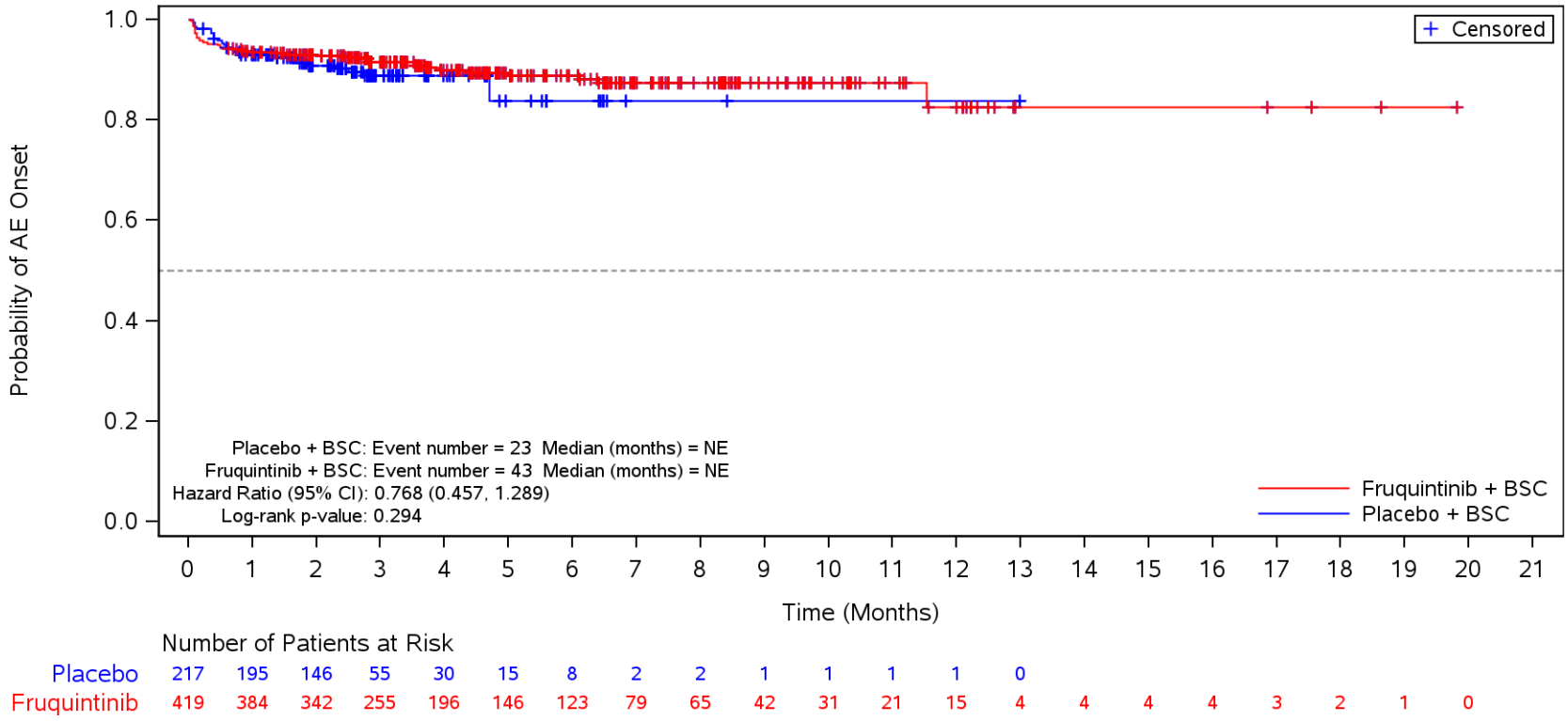
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Fatigue**
> 18 months



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Pyrexia**
> 18 months

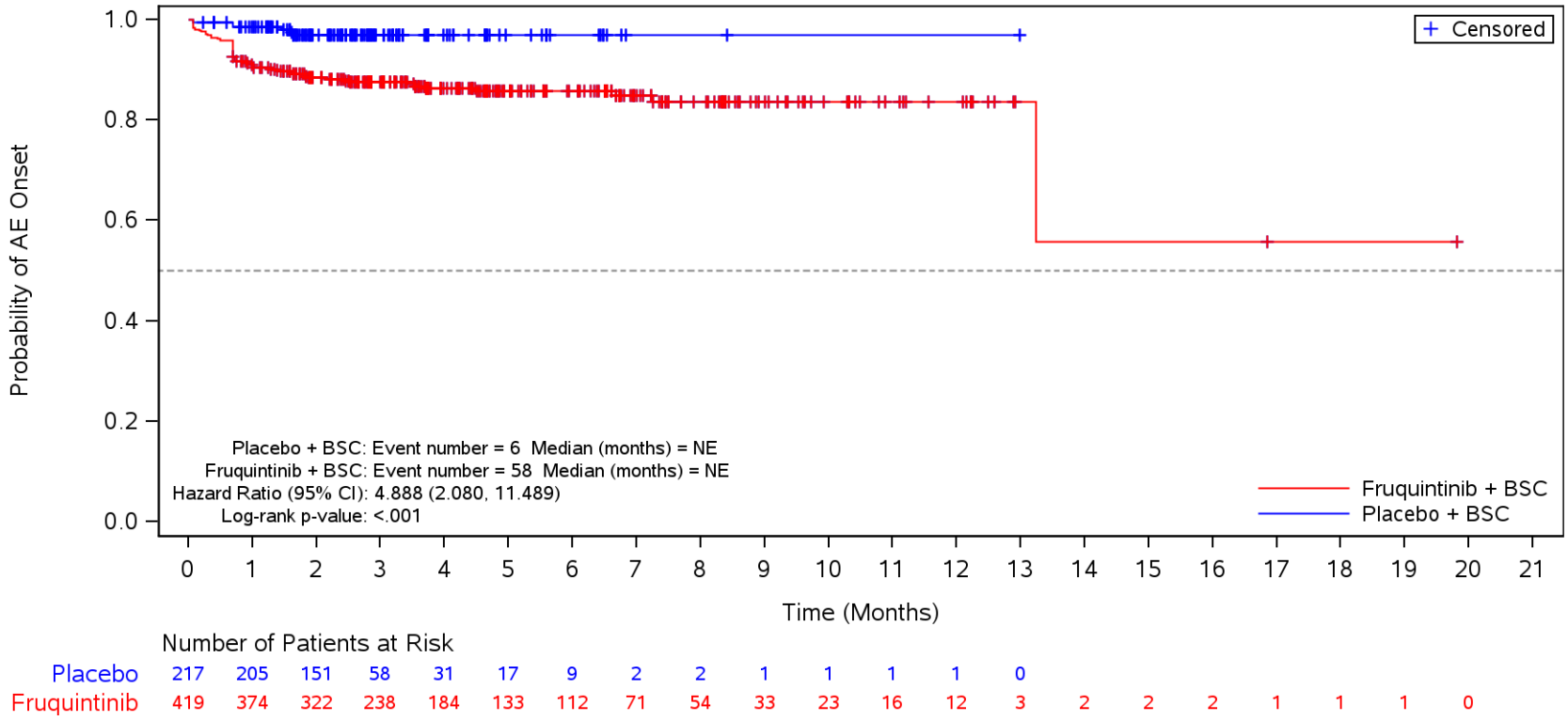


Number of Patients at Risk

Placebo	217	195	146	55	30	15	8	2	2	1	1	1	1	0							
Fruquintinib	419	384	342	255	196	146	123	79	65	42	31	21	15	4	4	4	4	3	2	1	0

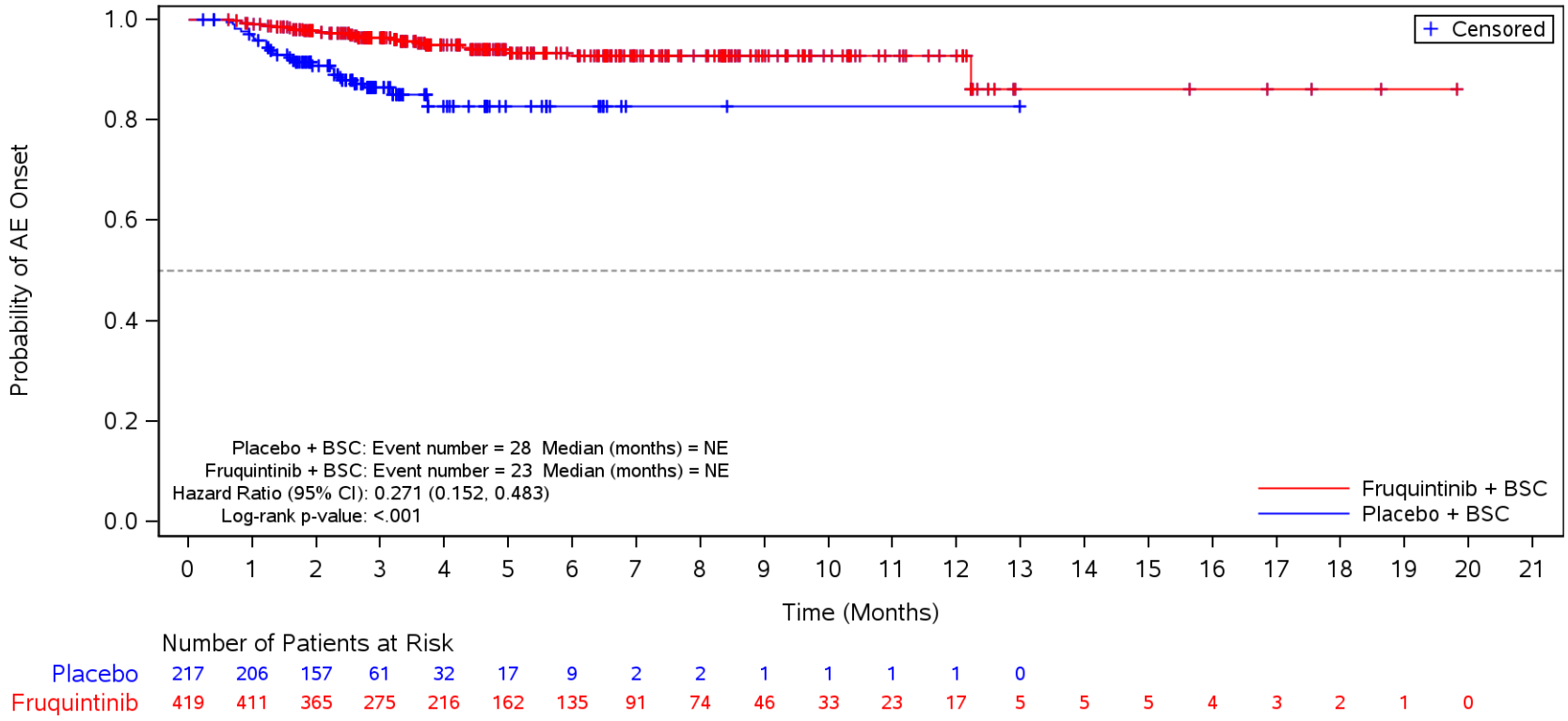
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Mucosal inflammation**
> 18 months



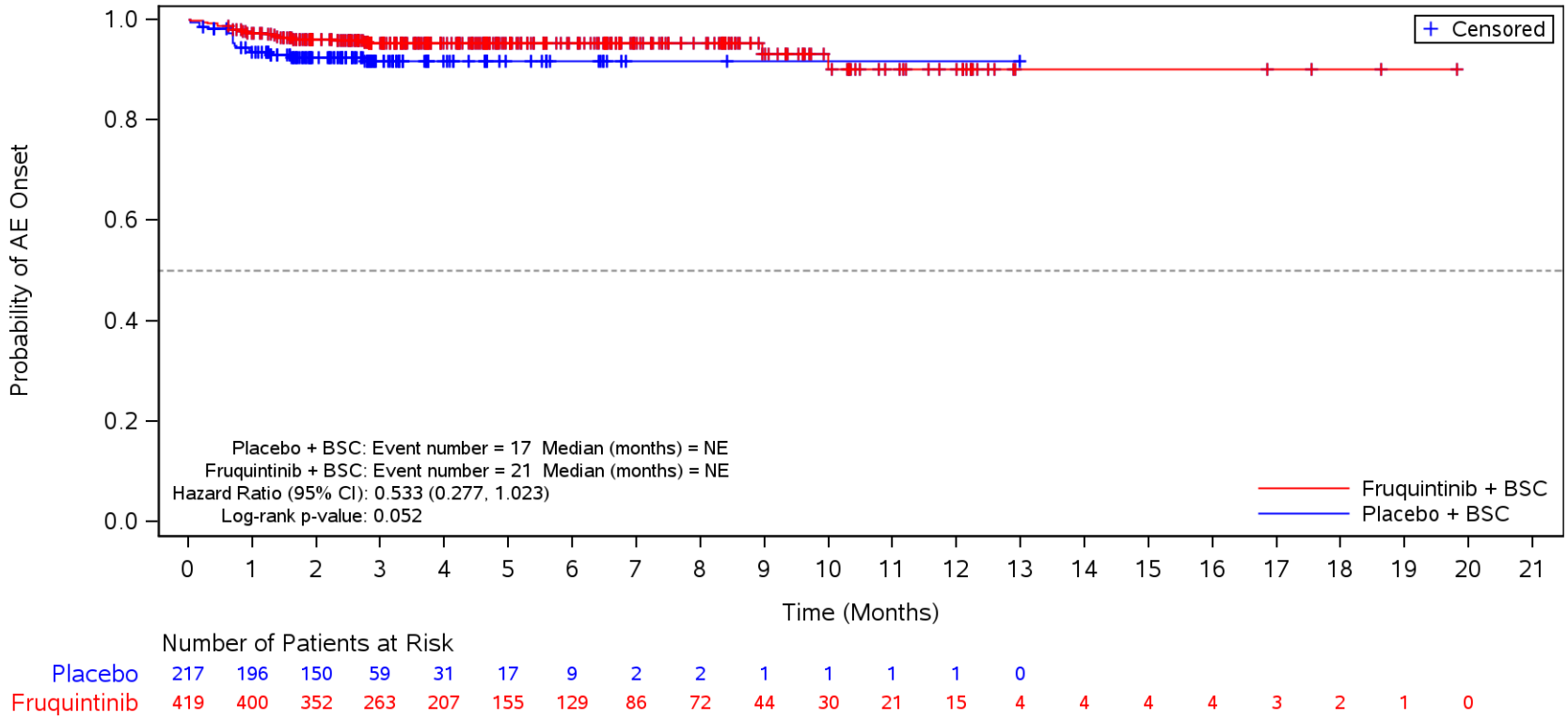
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Disease progression**
> 18 months



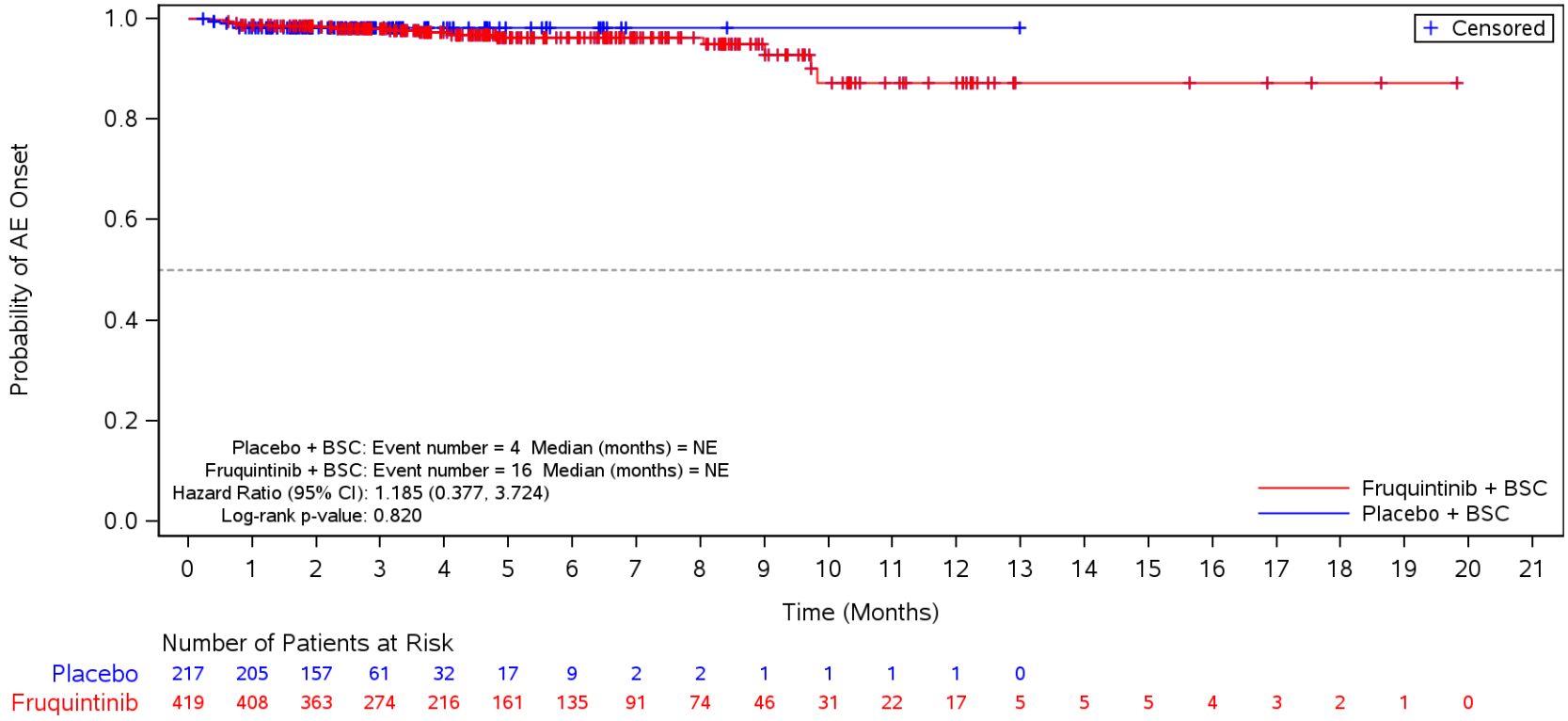
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Oedema peripheral**
> 18 months



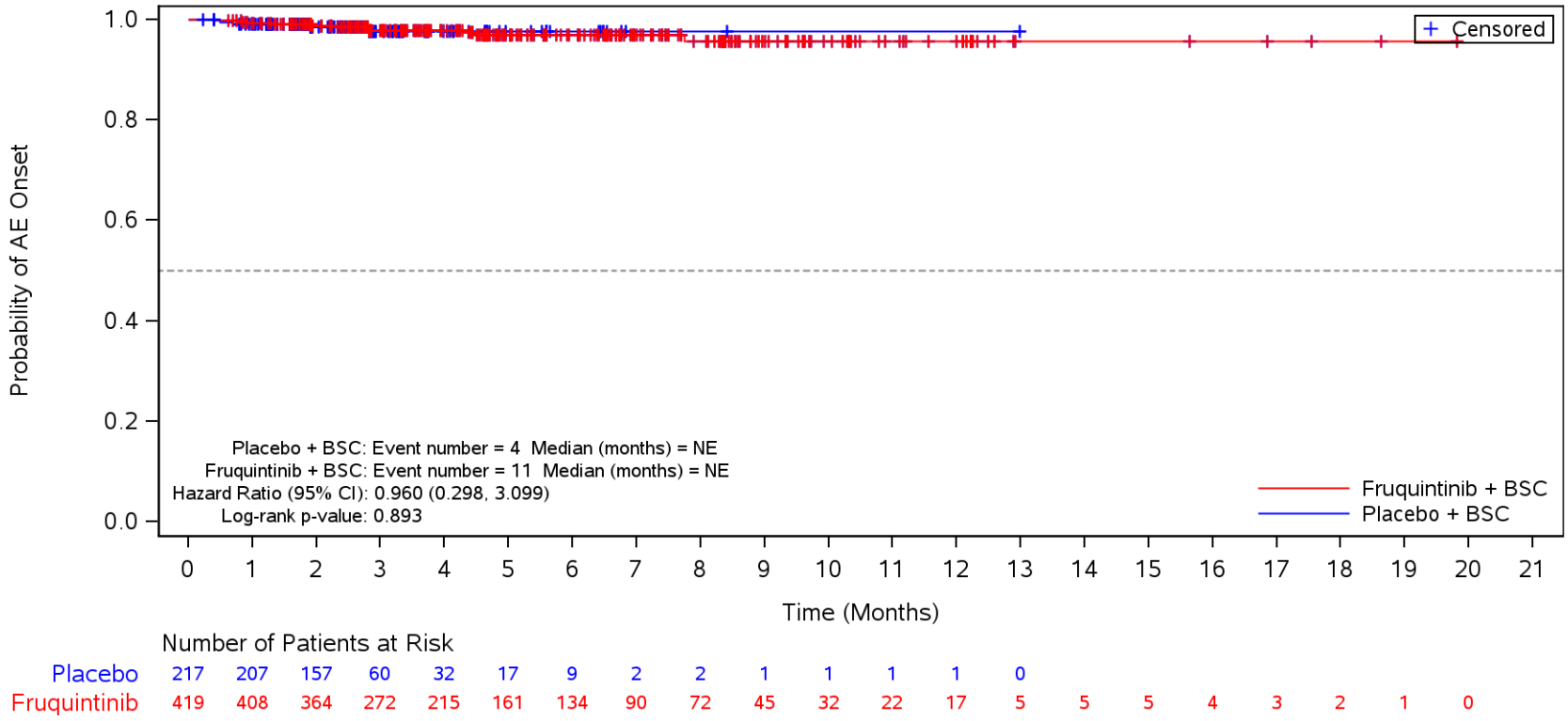
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **General physical health deterioration**
> 18 months



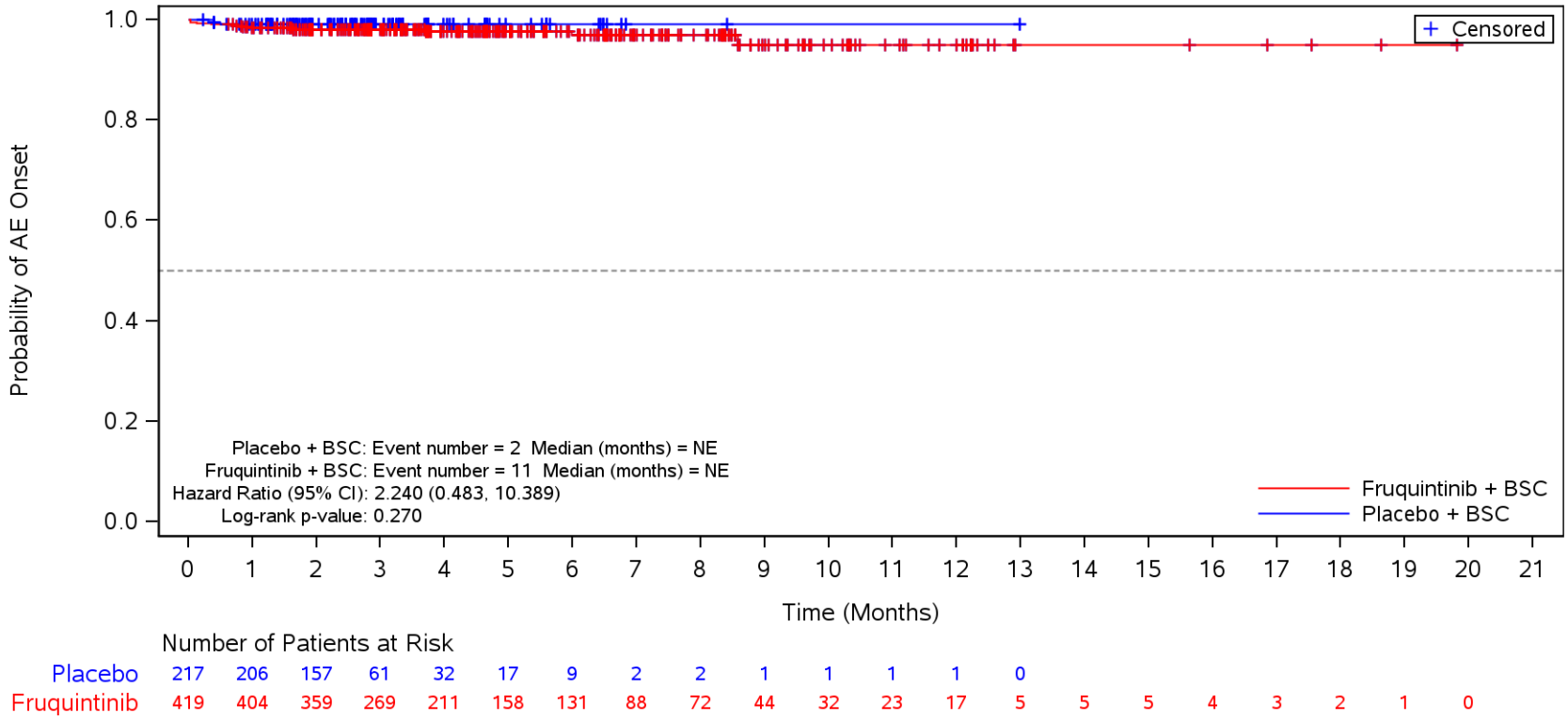
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Condition aggravated**
> 18 months



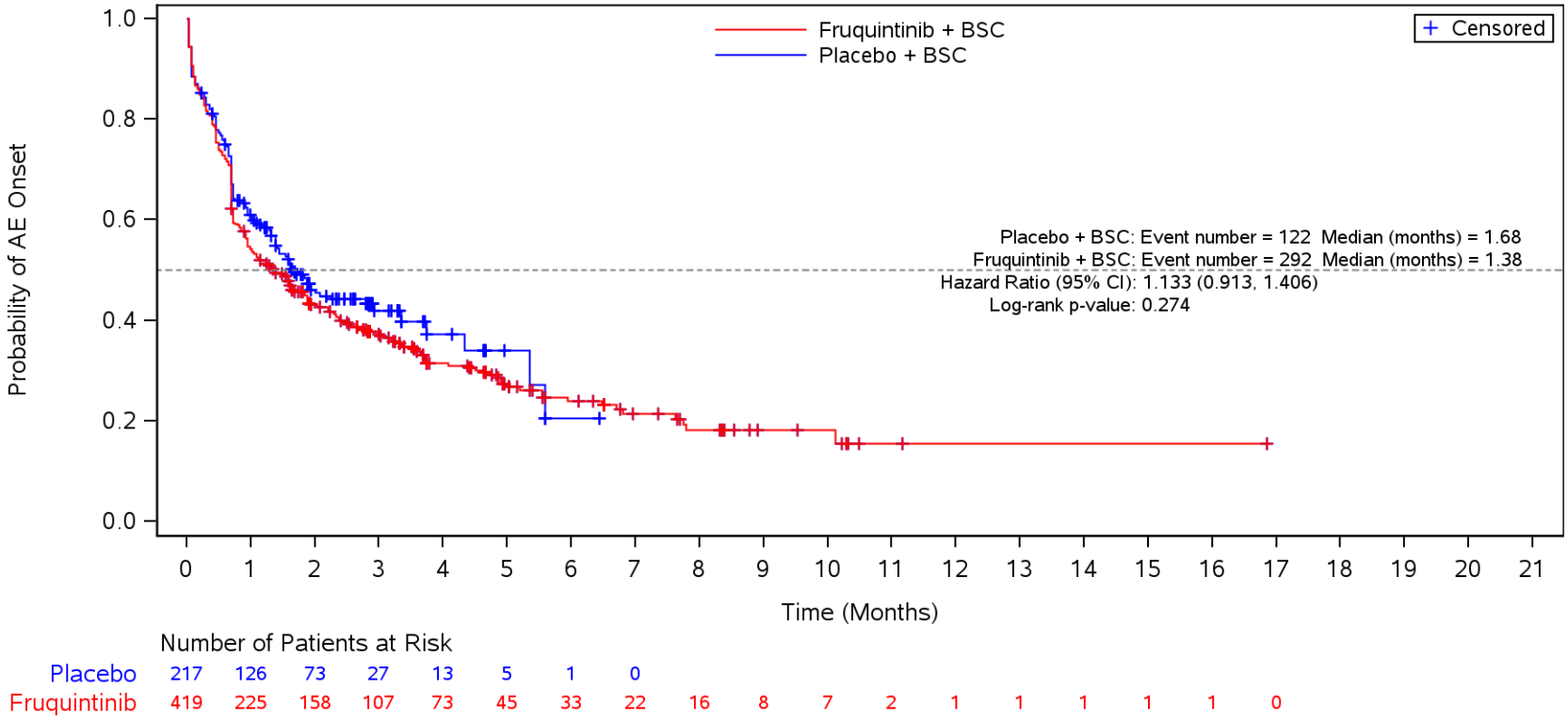
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **General disorders and administration site conditions** and Preferred Term **Chills**
> 18 months



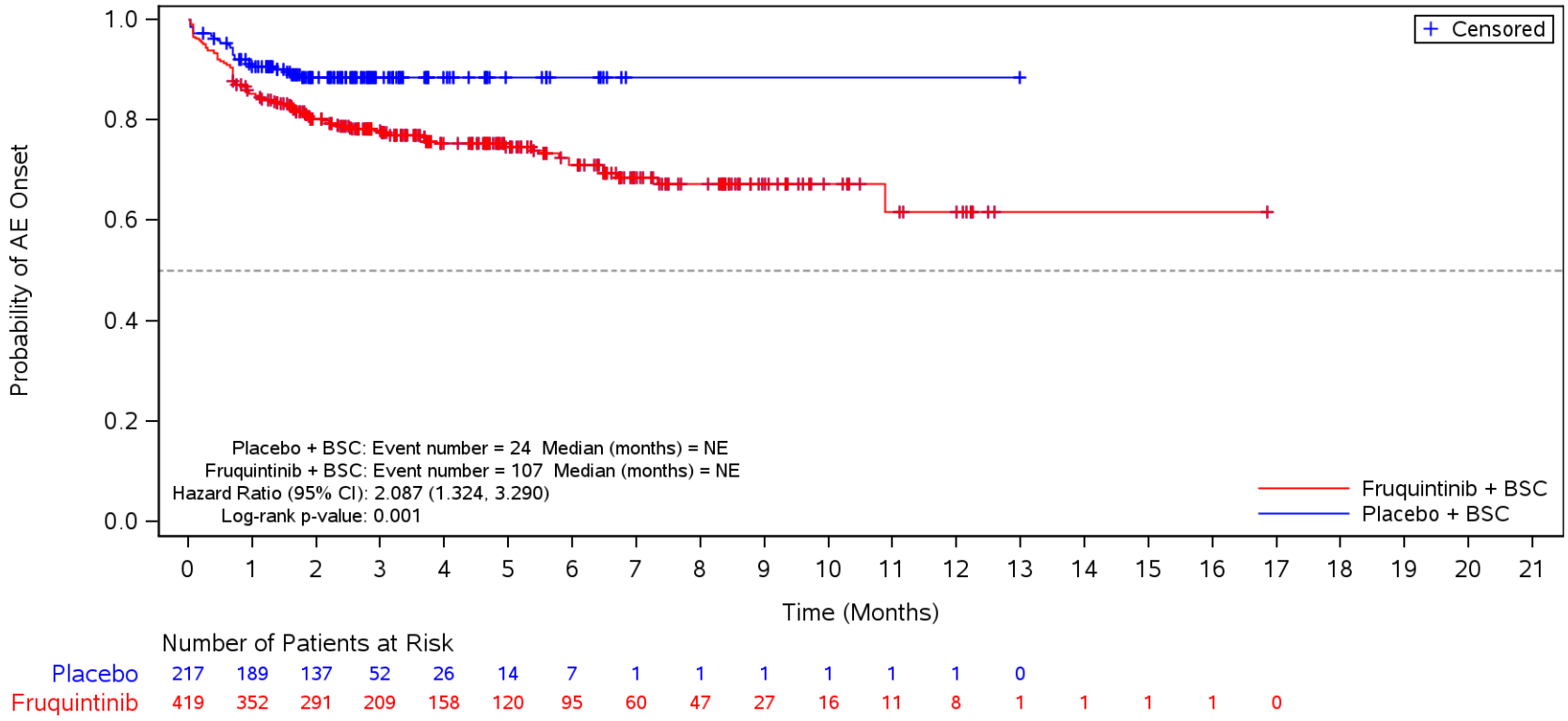
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders**
> 18 months



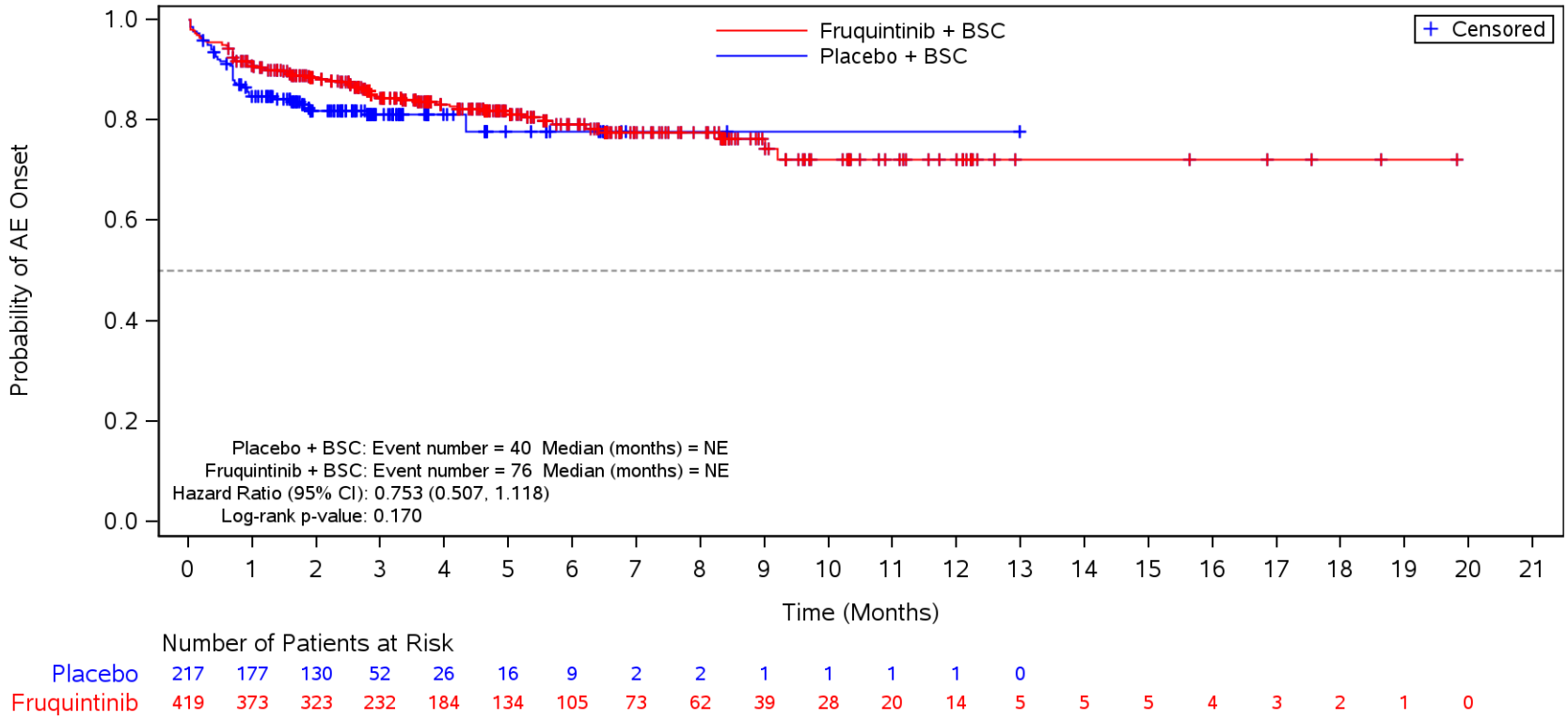
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Diarrhoea**
> 18 months



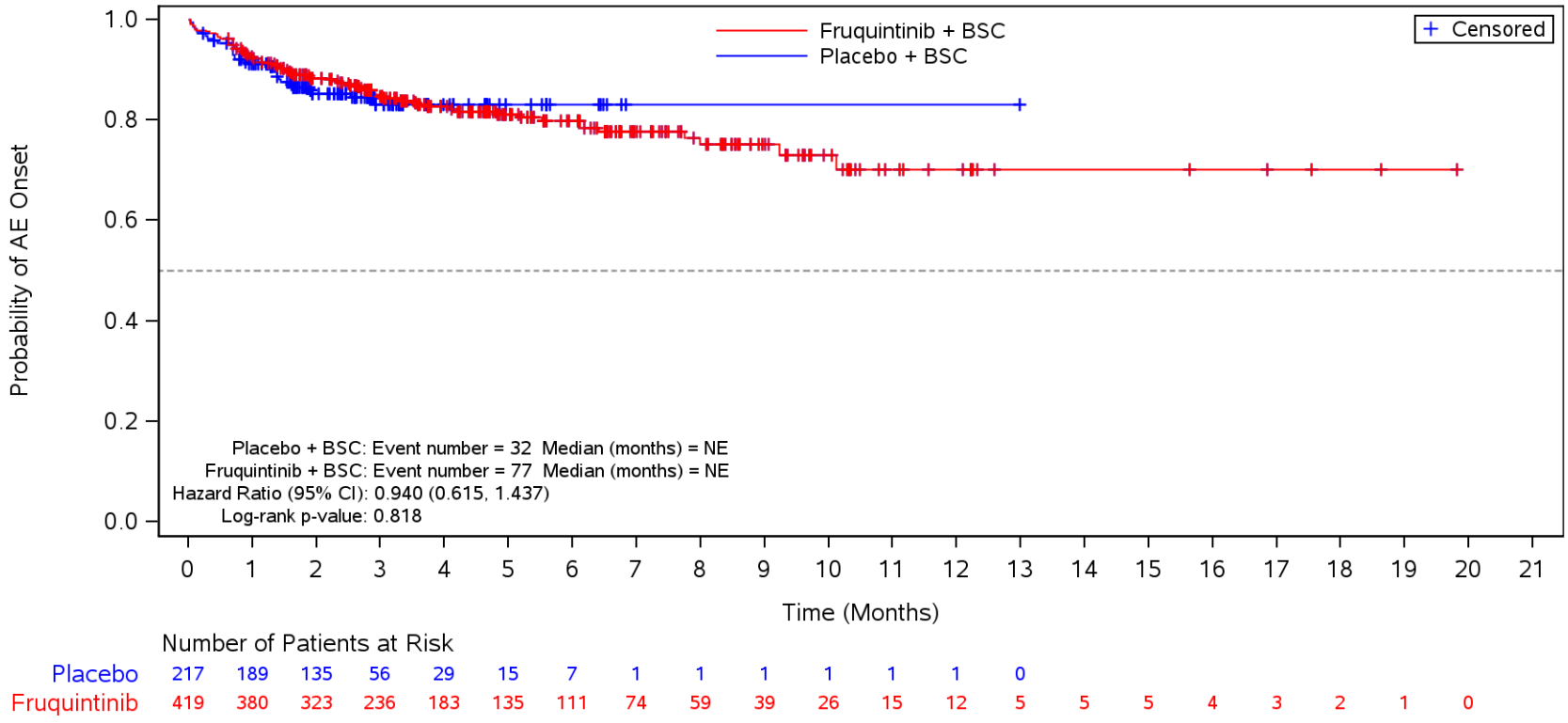
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Nausea**
> 18 months



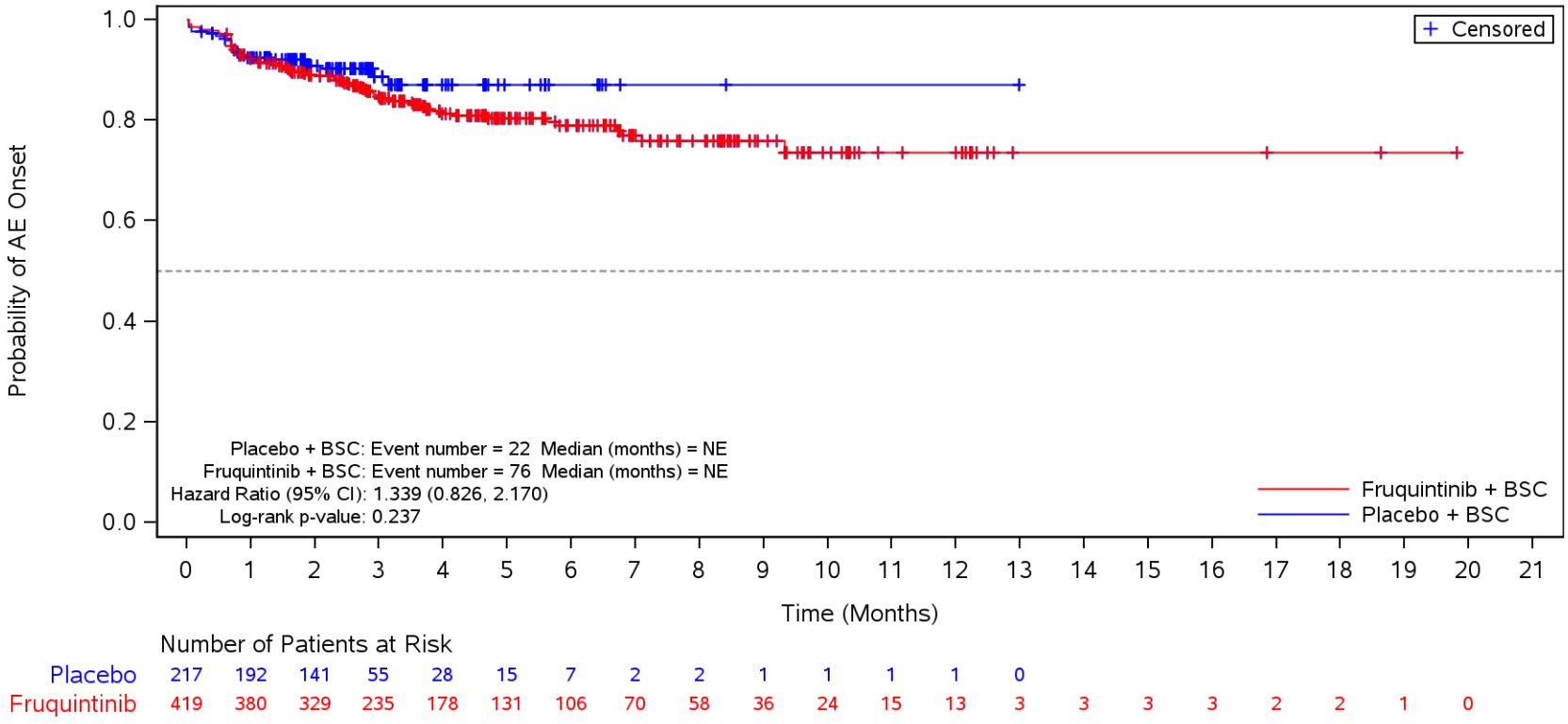
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain**
> 18 months



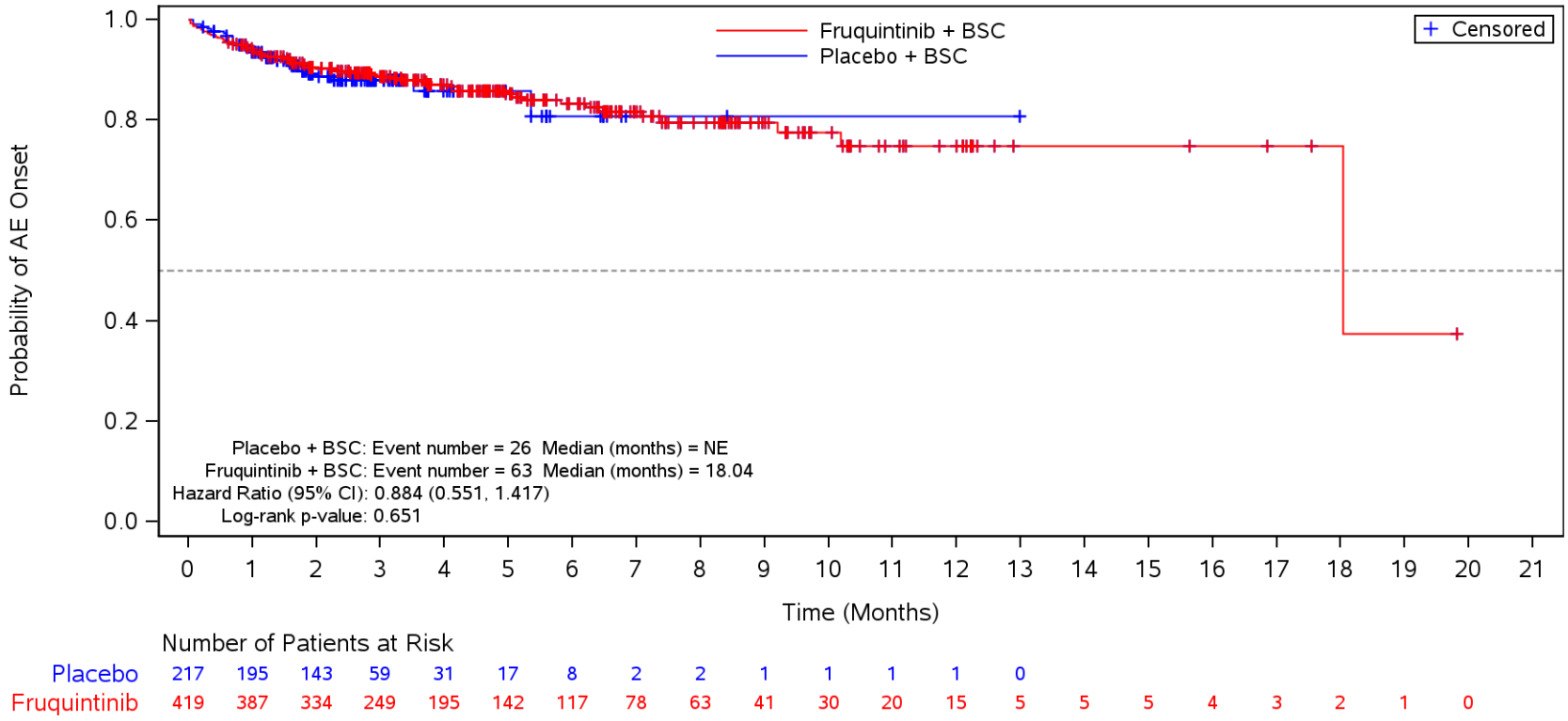
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Constipation**
> 18 months



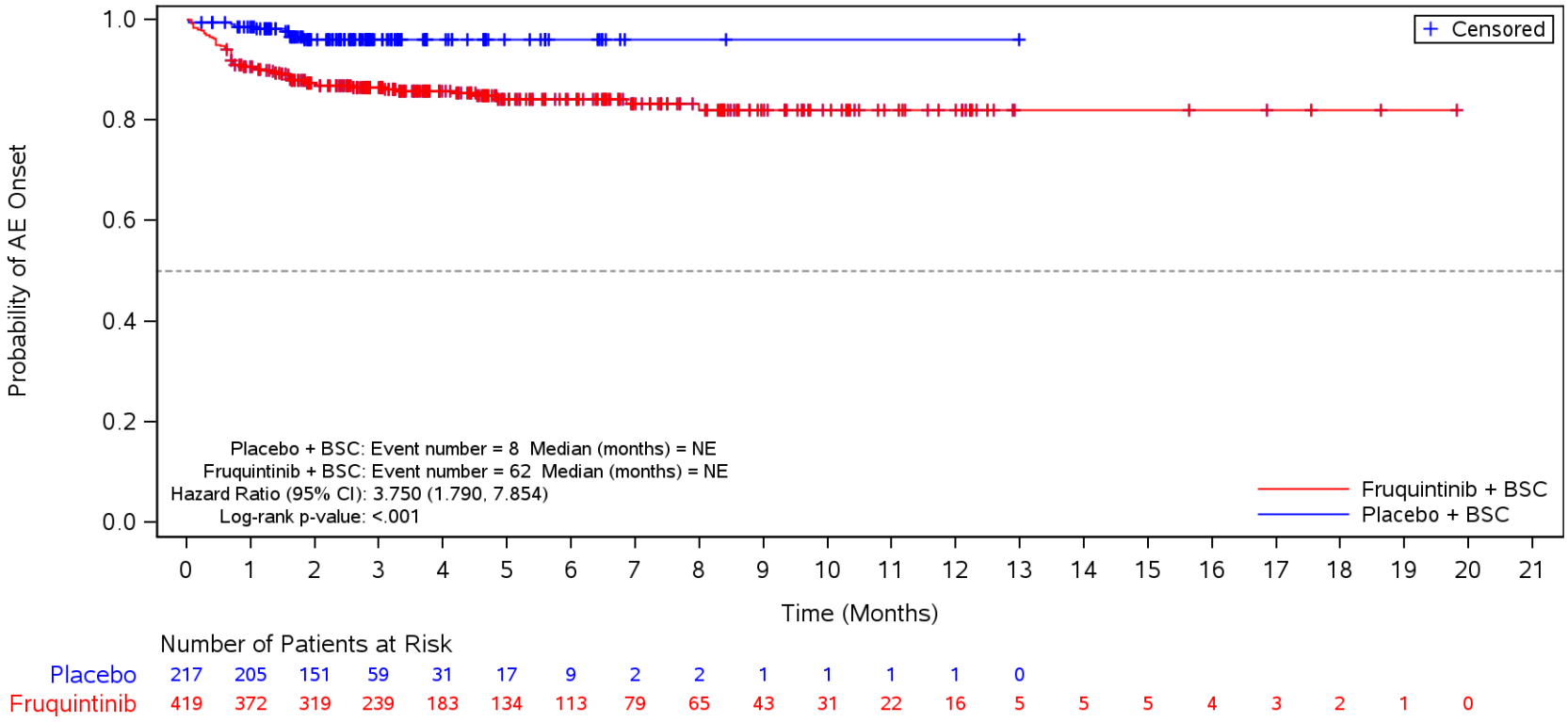
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Vomiting**
> 18 months



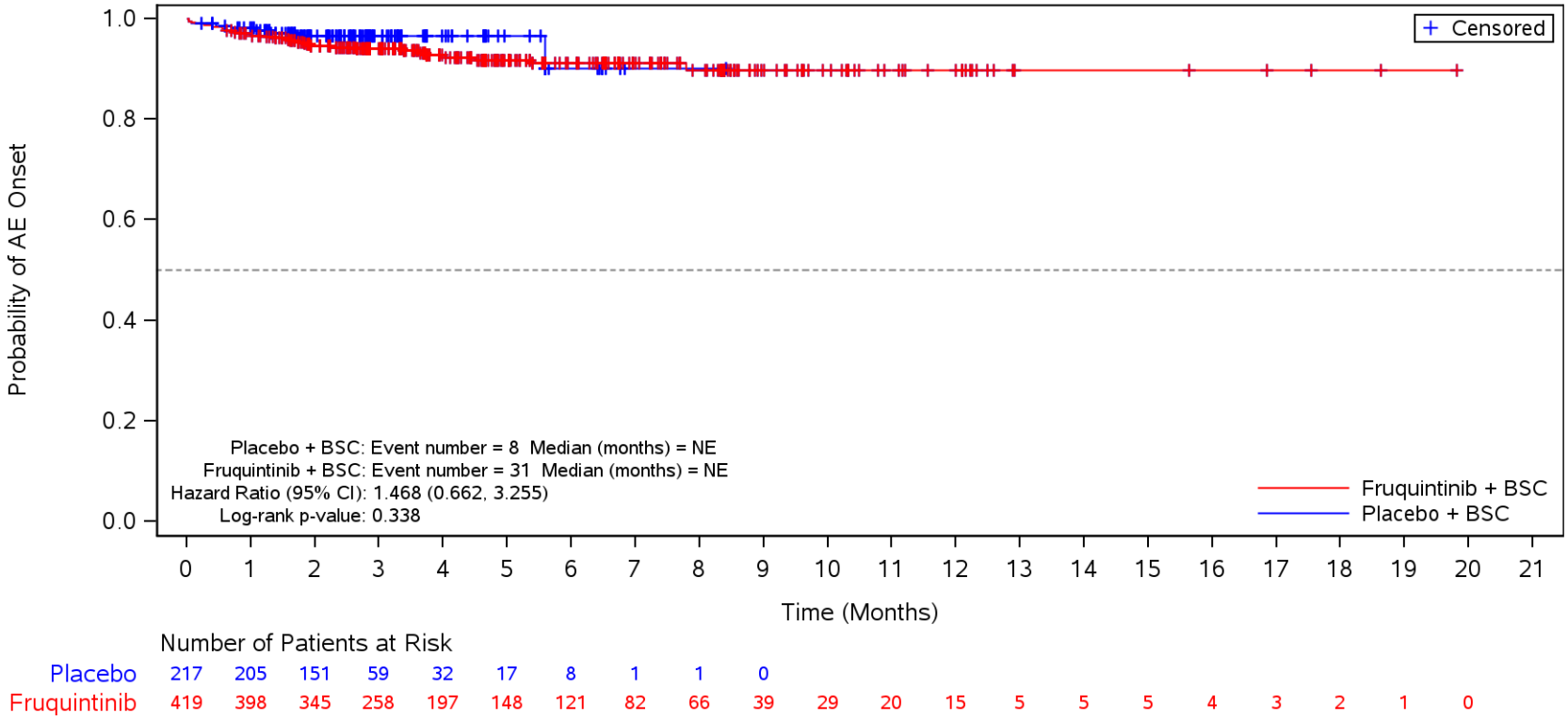
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Stomatitis**
> 18 months



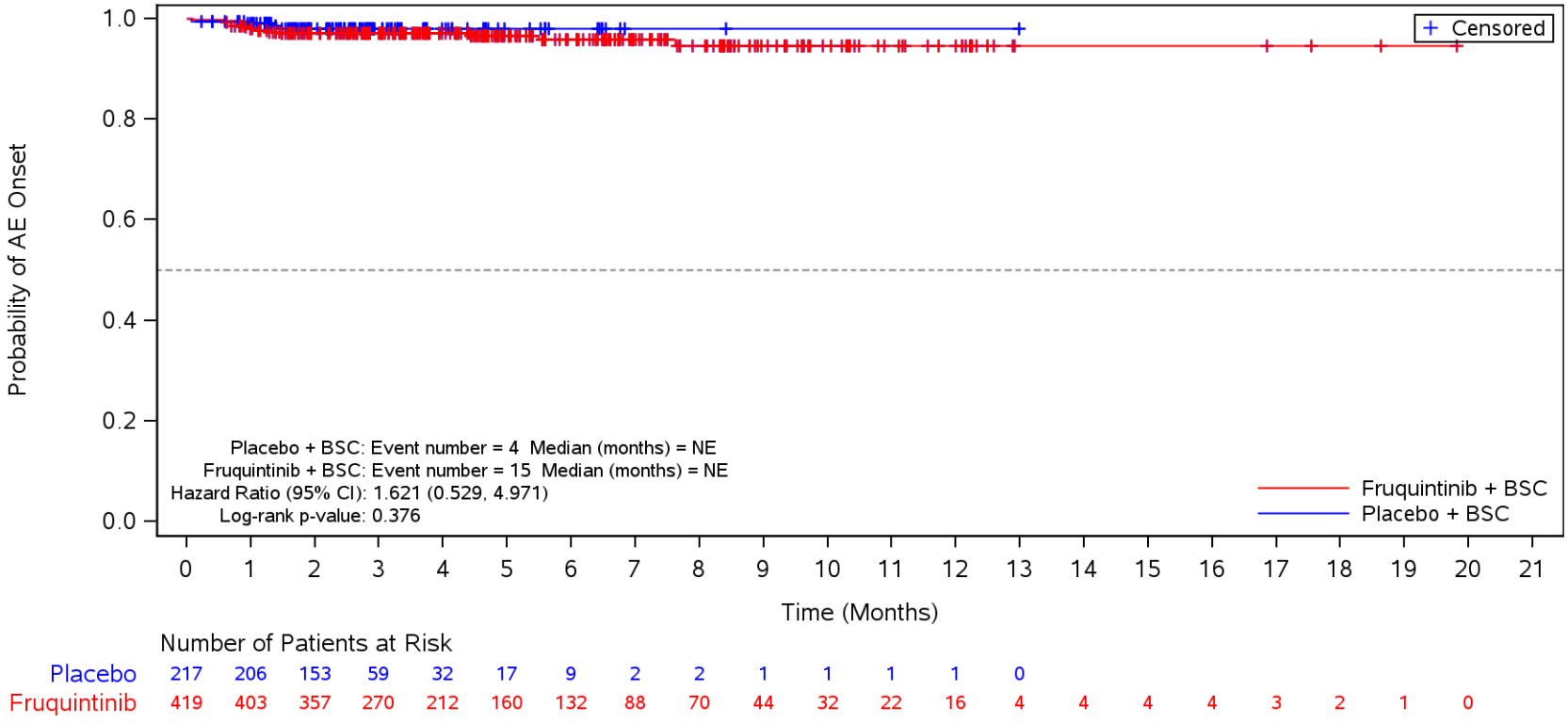
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Abdominal pain upper**
> 18 months



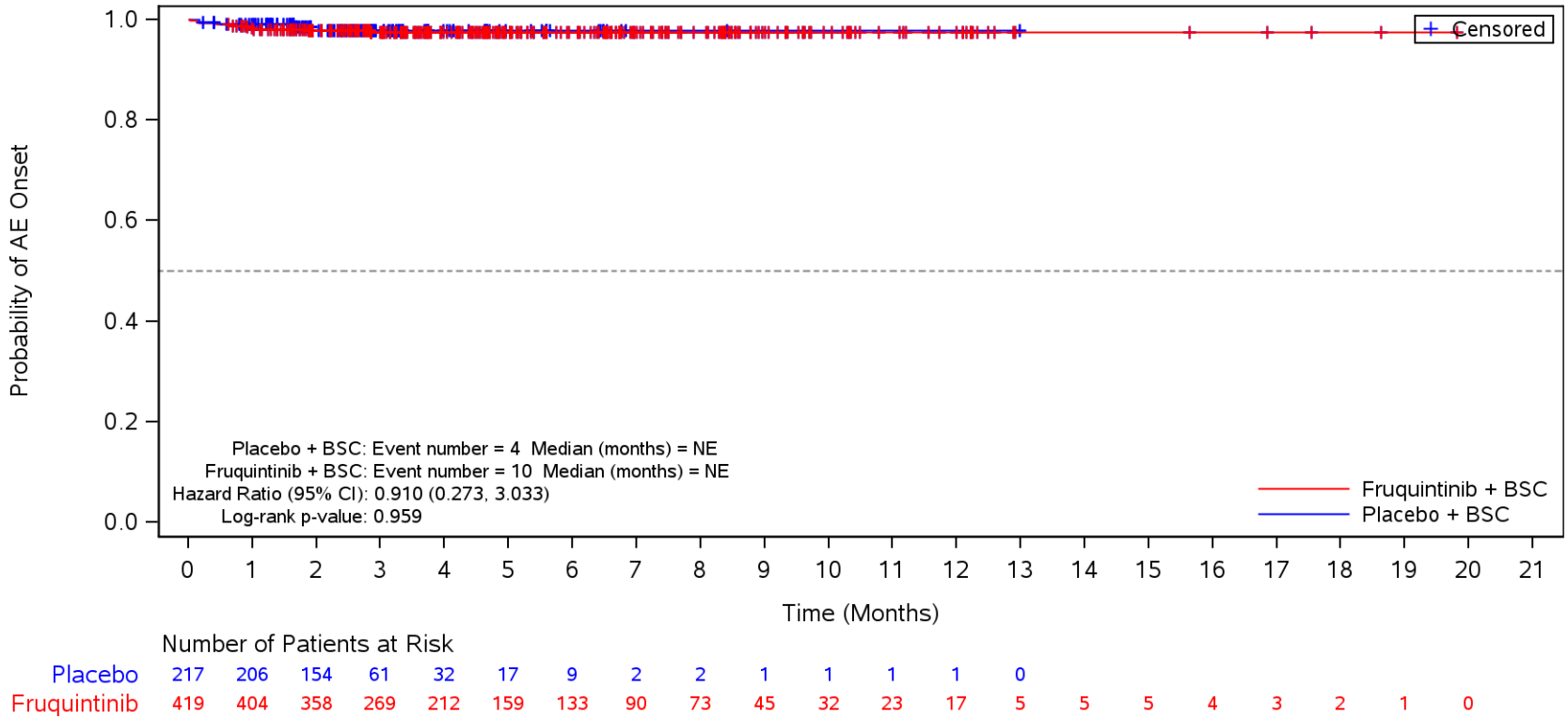
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Proctalgia**
> 18 months



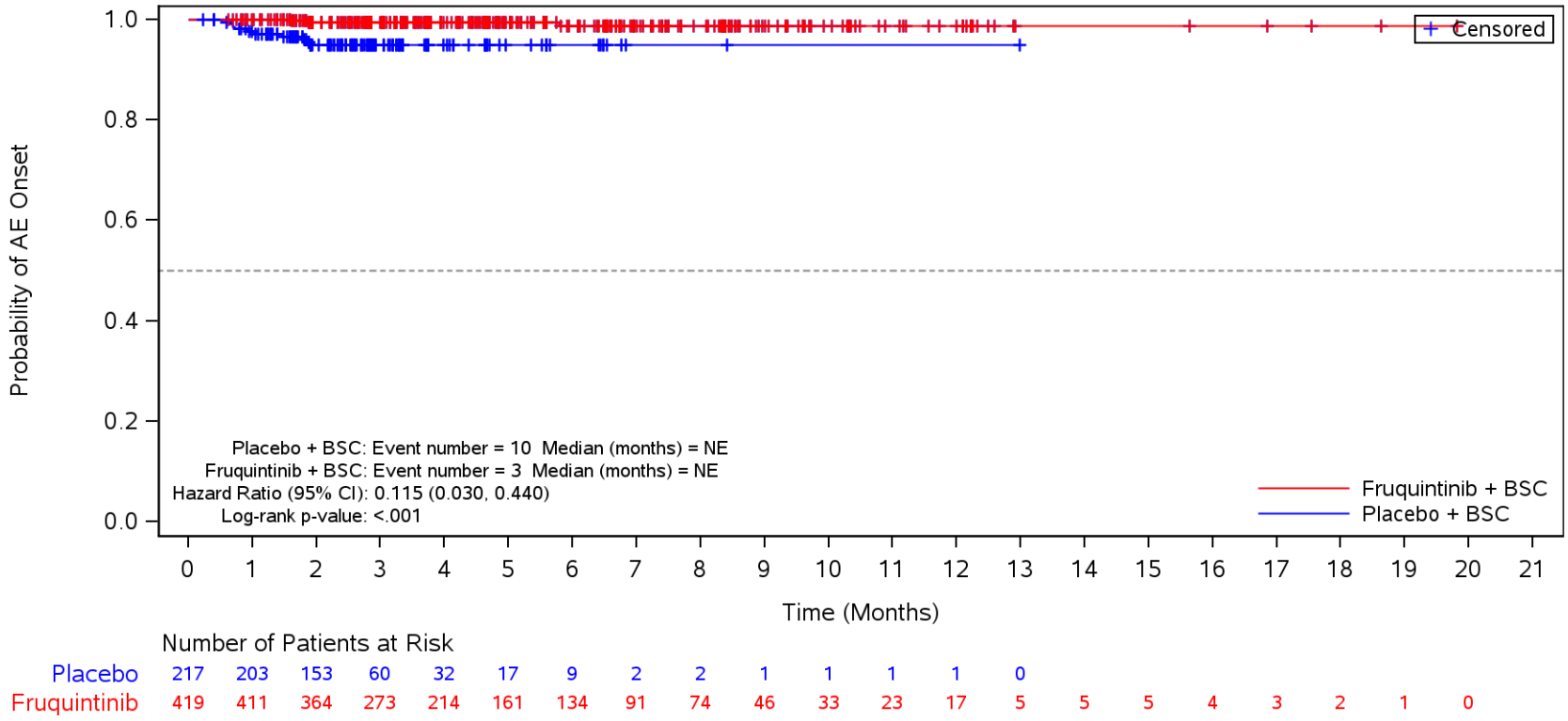
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dry mouth**
> 18 months



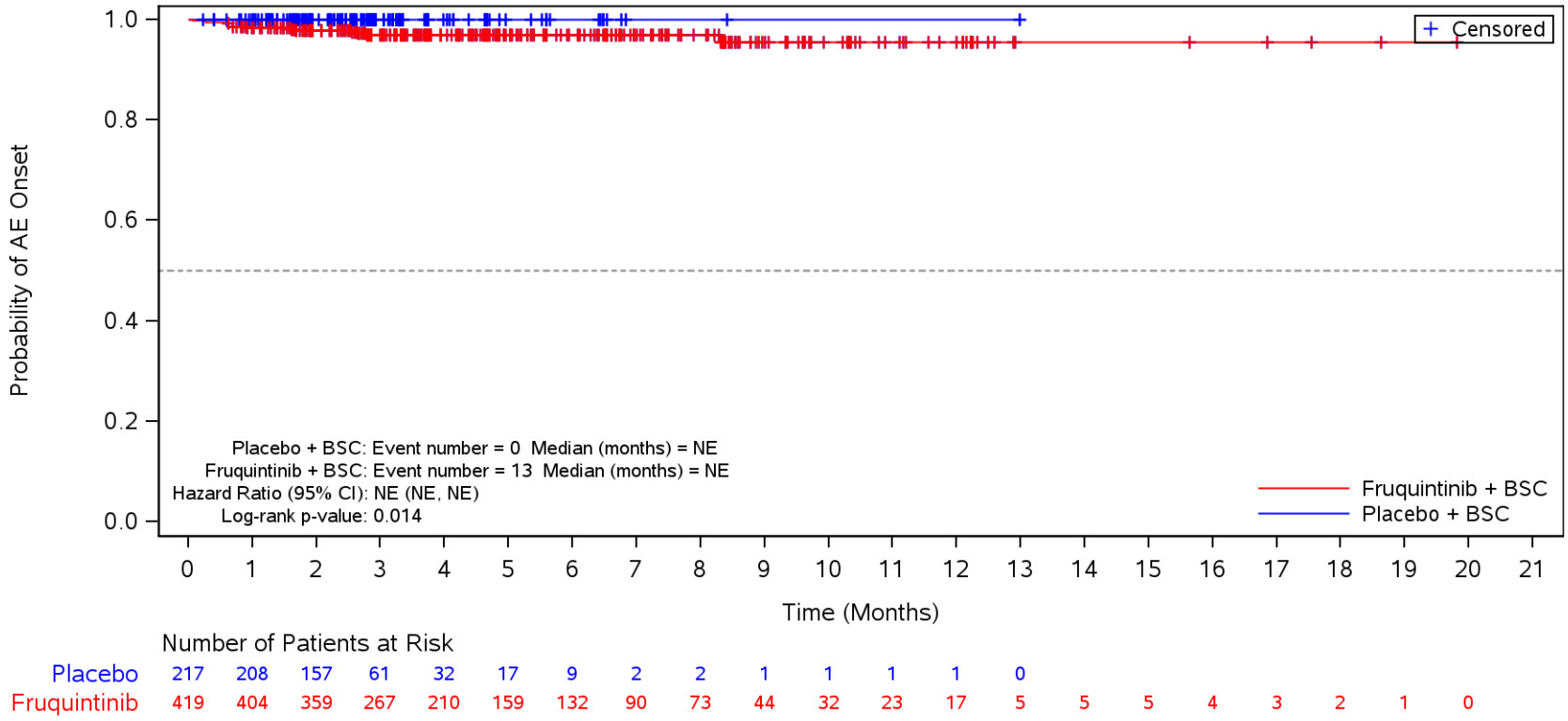
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Ascites**
> 18 months



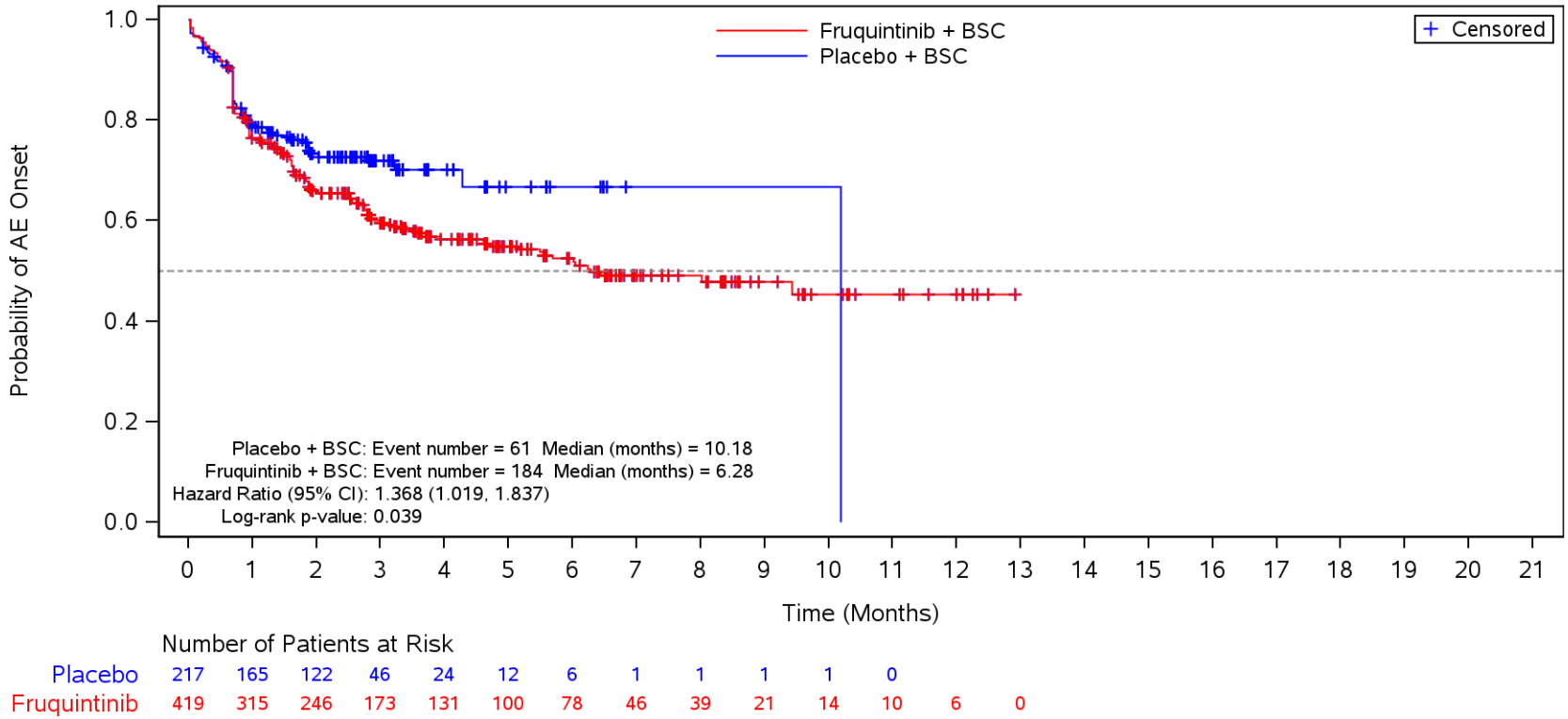
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Gastrointestinal disorders** and Preferred Term **Dyspepsia**
> 18 months



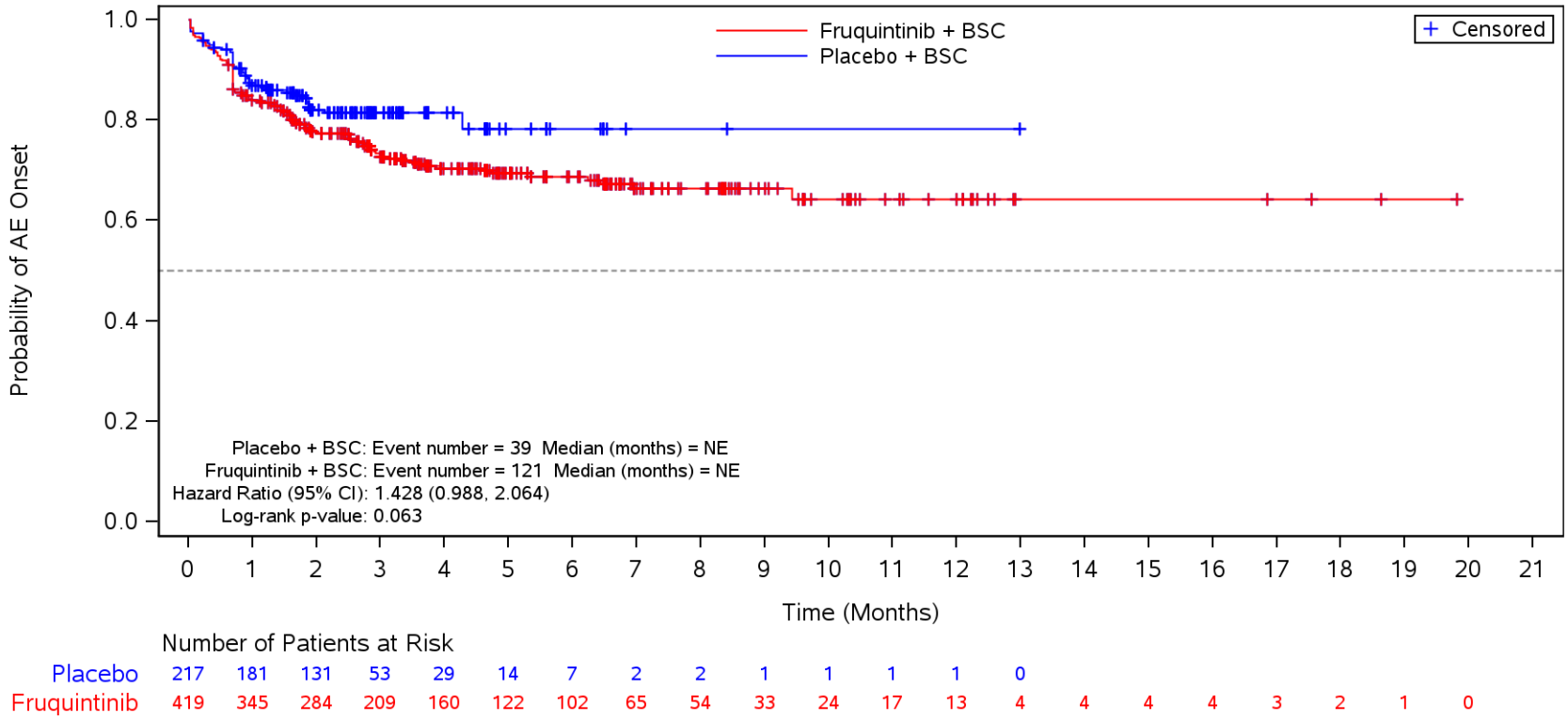
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders**
> 18 months



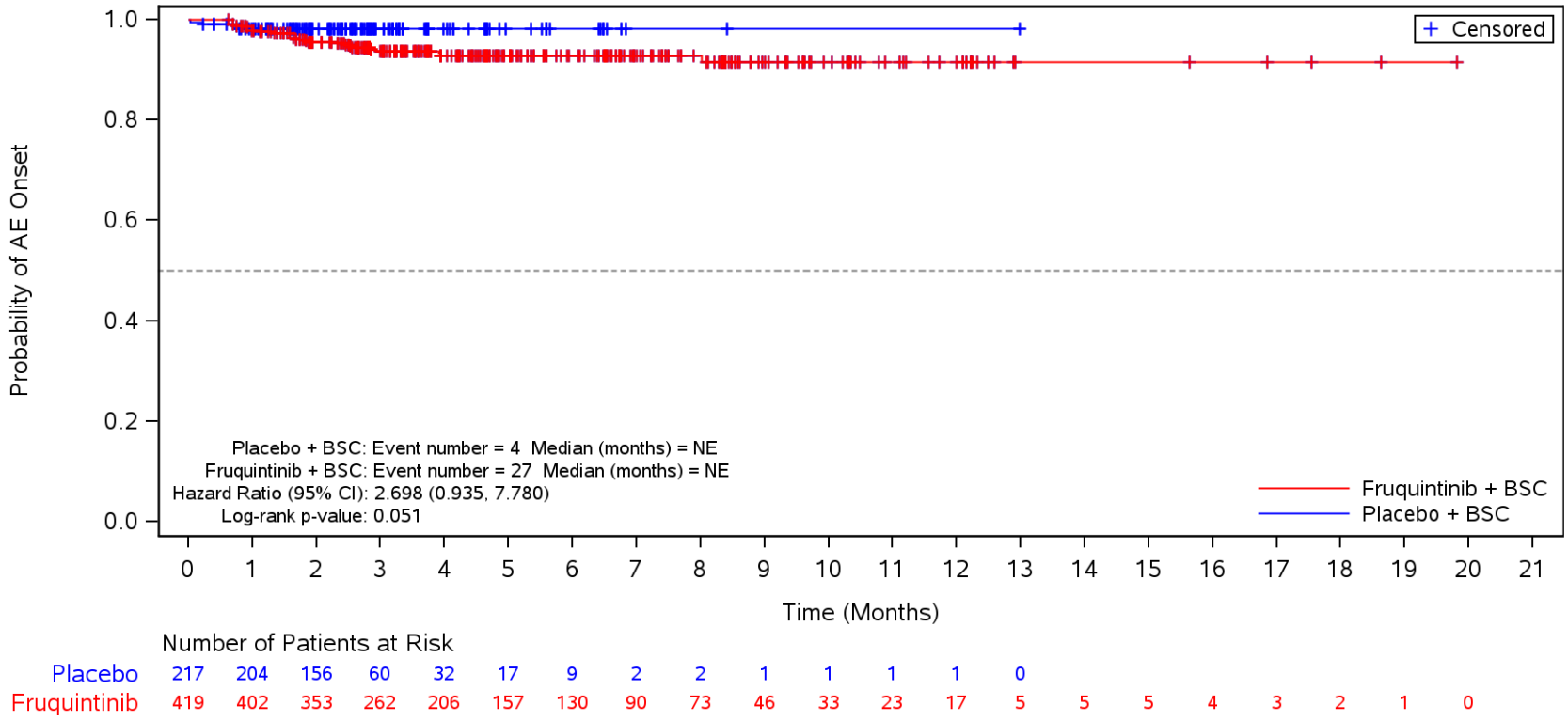
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Decreased appetite**
> 18 months



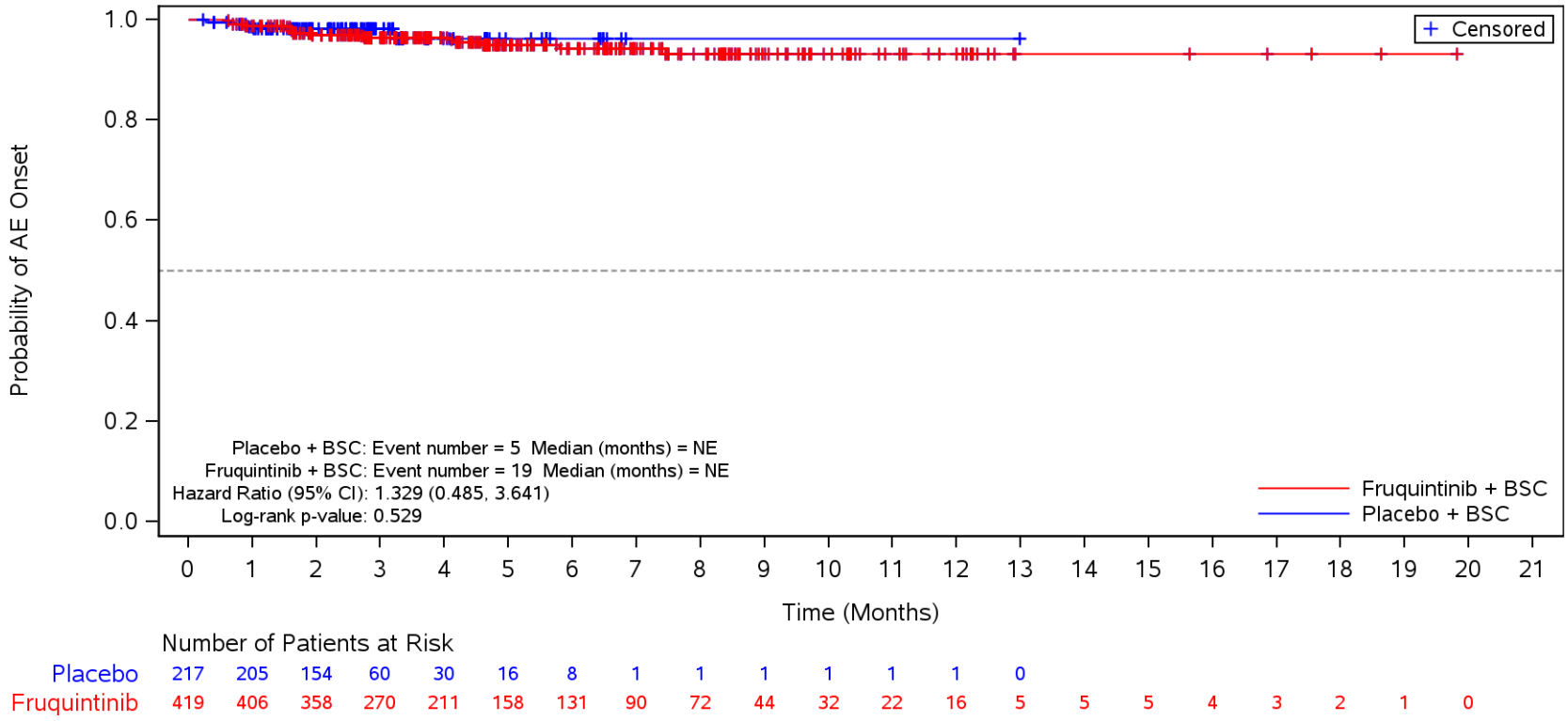
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypokalaemia**
> 18 months



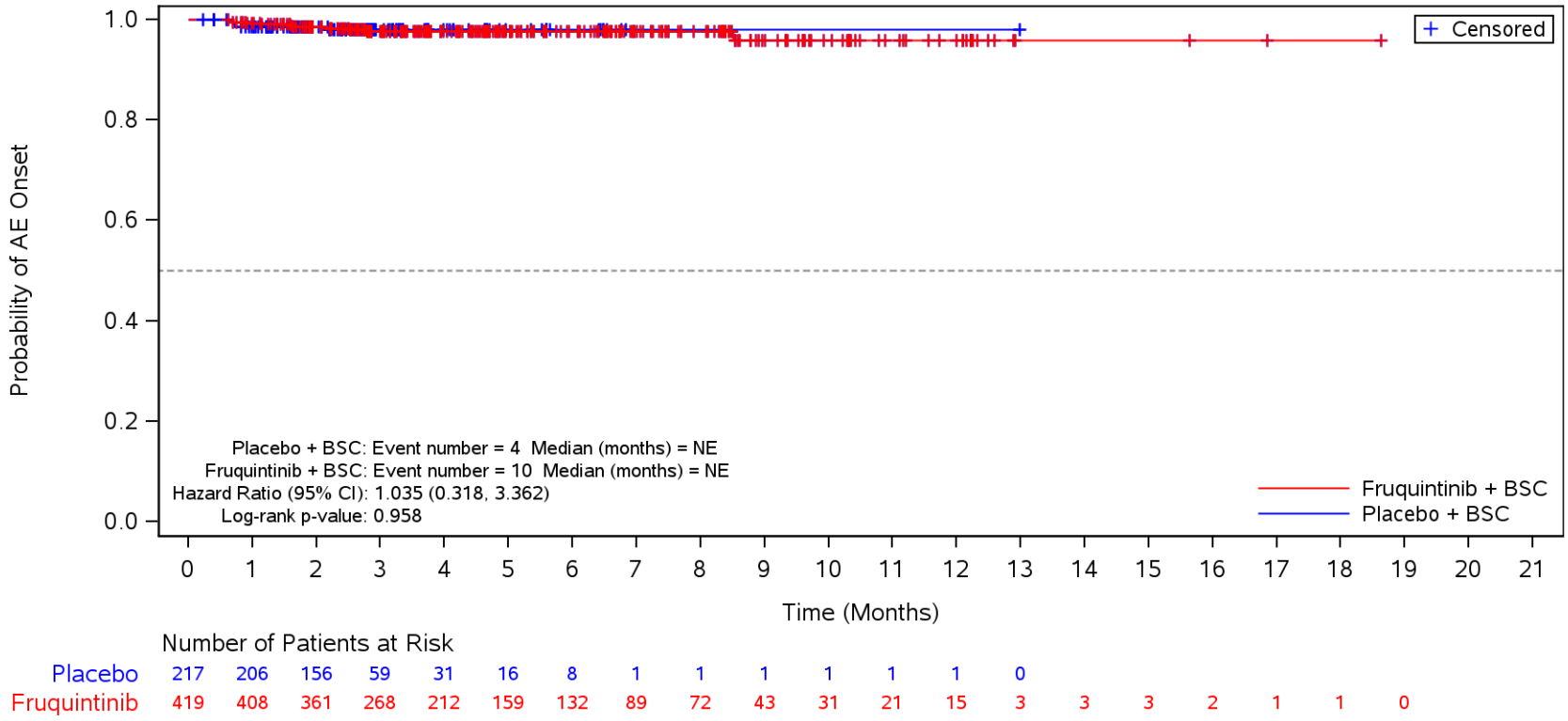
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyponatraemia**
> 18 months



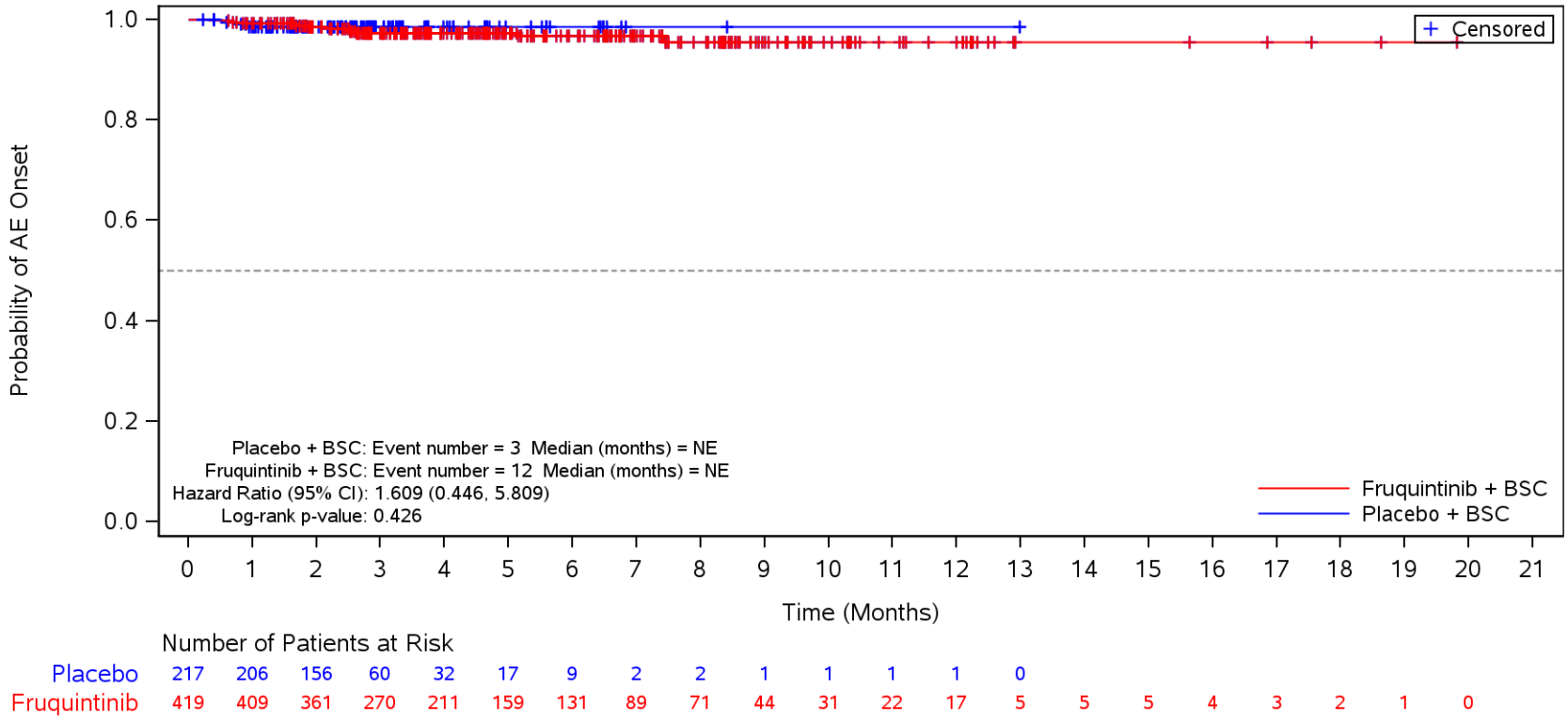
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperuricaemia**
> 18 months



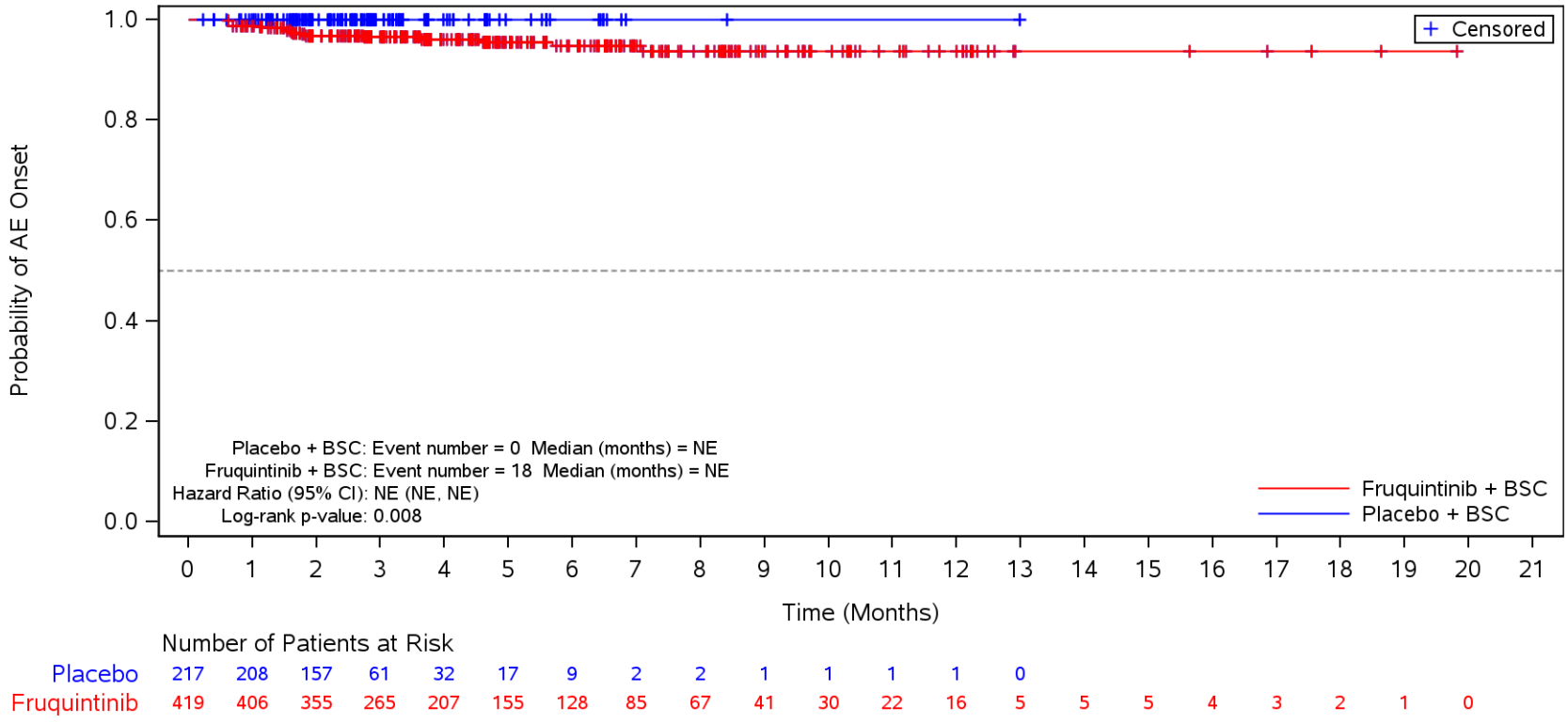
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypoalbuminaemia**
> 18 months



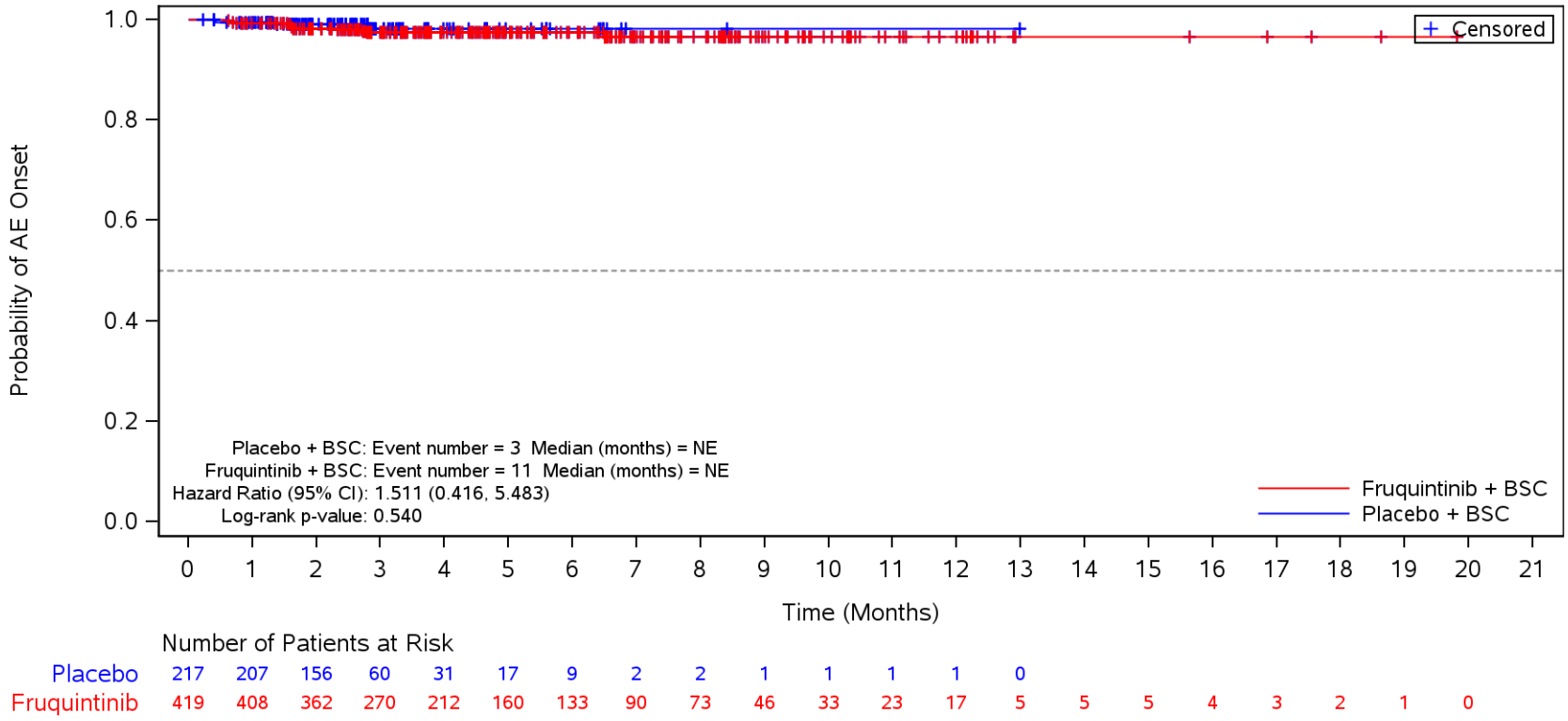
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypomagnesaemia**
> 18 months



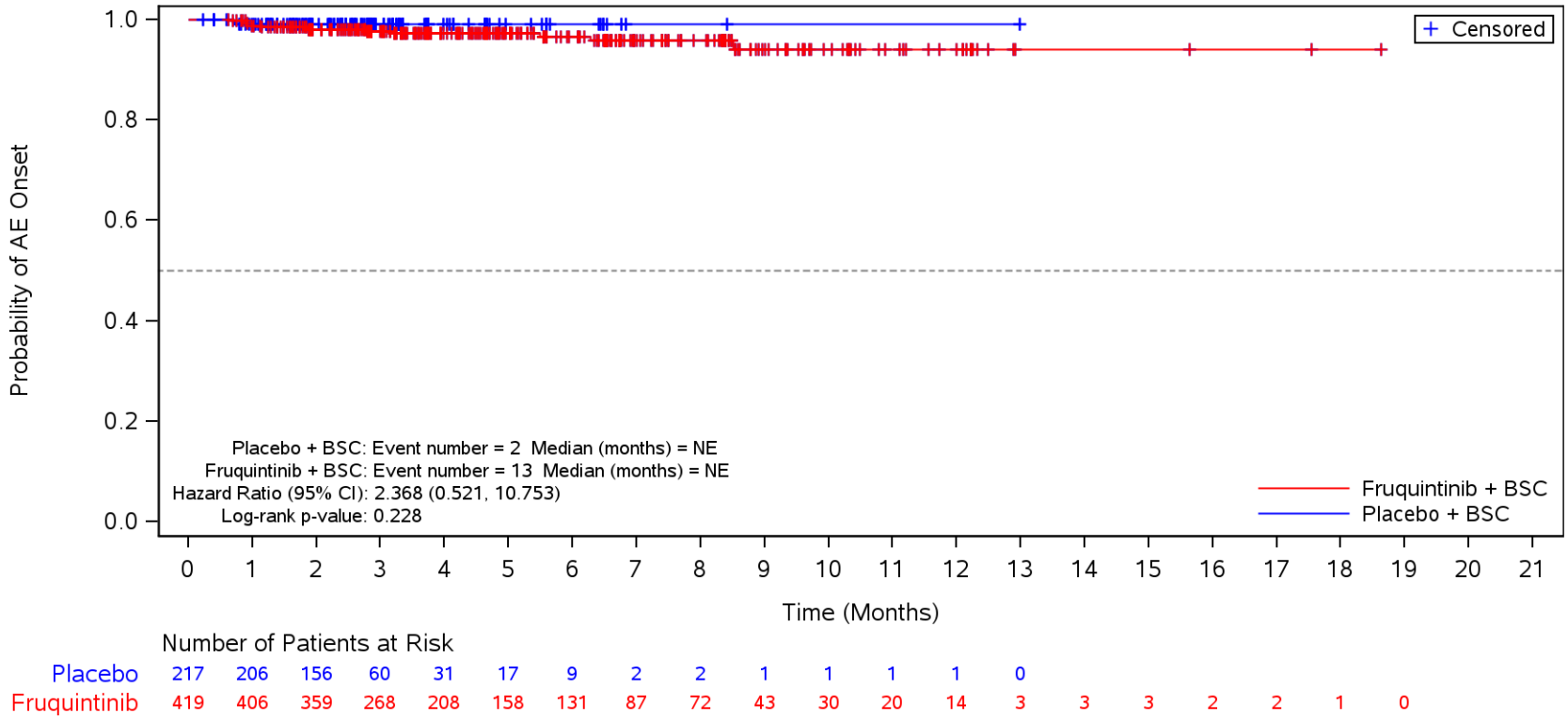
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Dehydration**
> 18 months



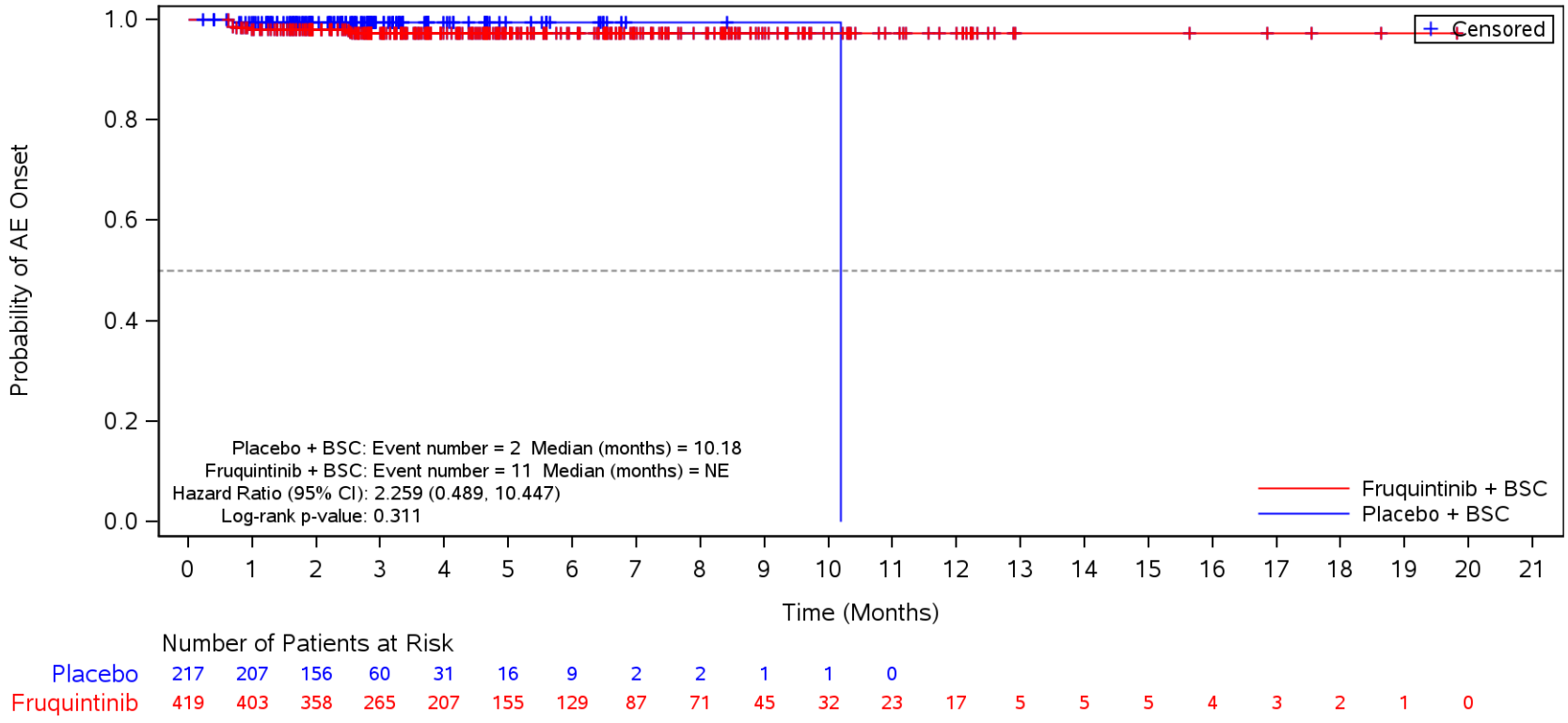
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hyperglycaemia**
> 18 months



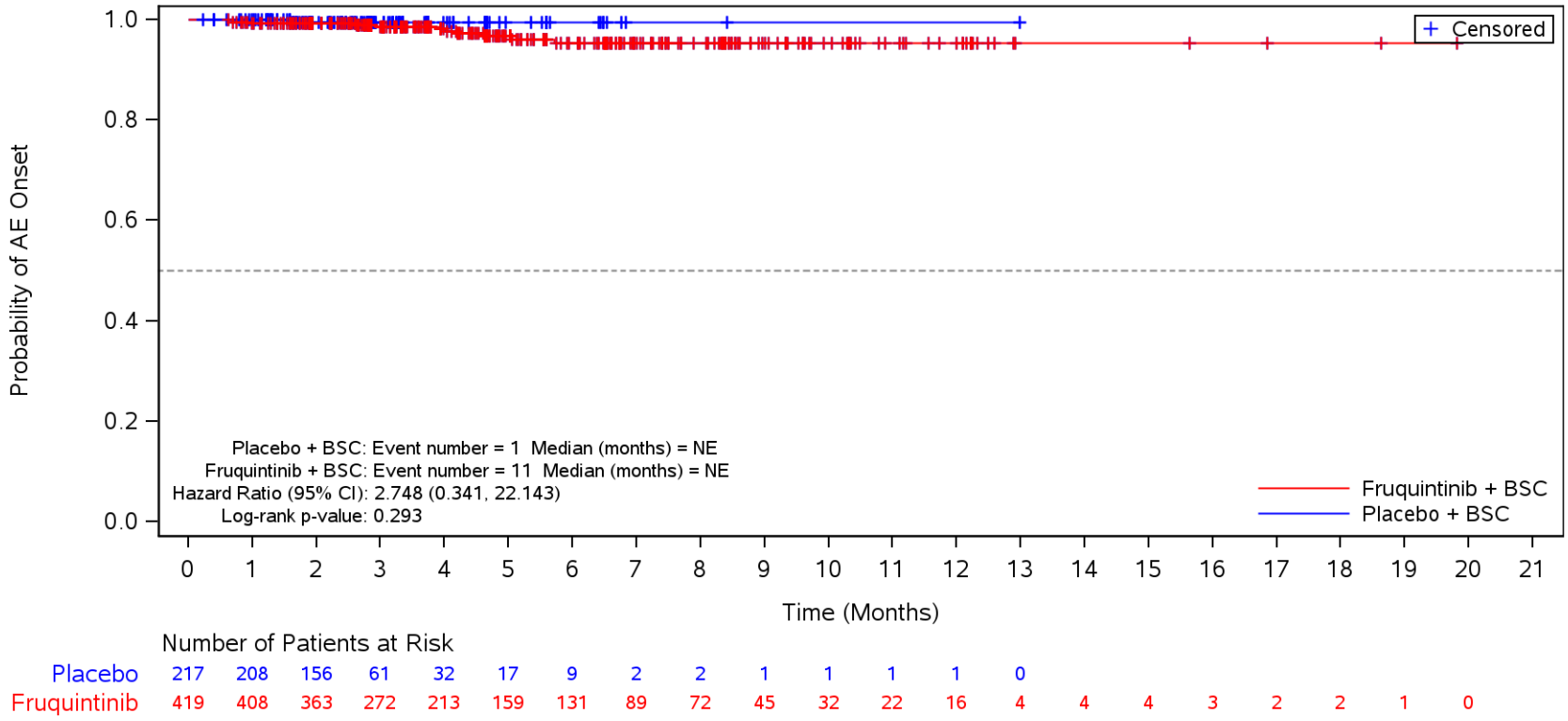
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypertriglyceridaemia**
> 18 months



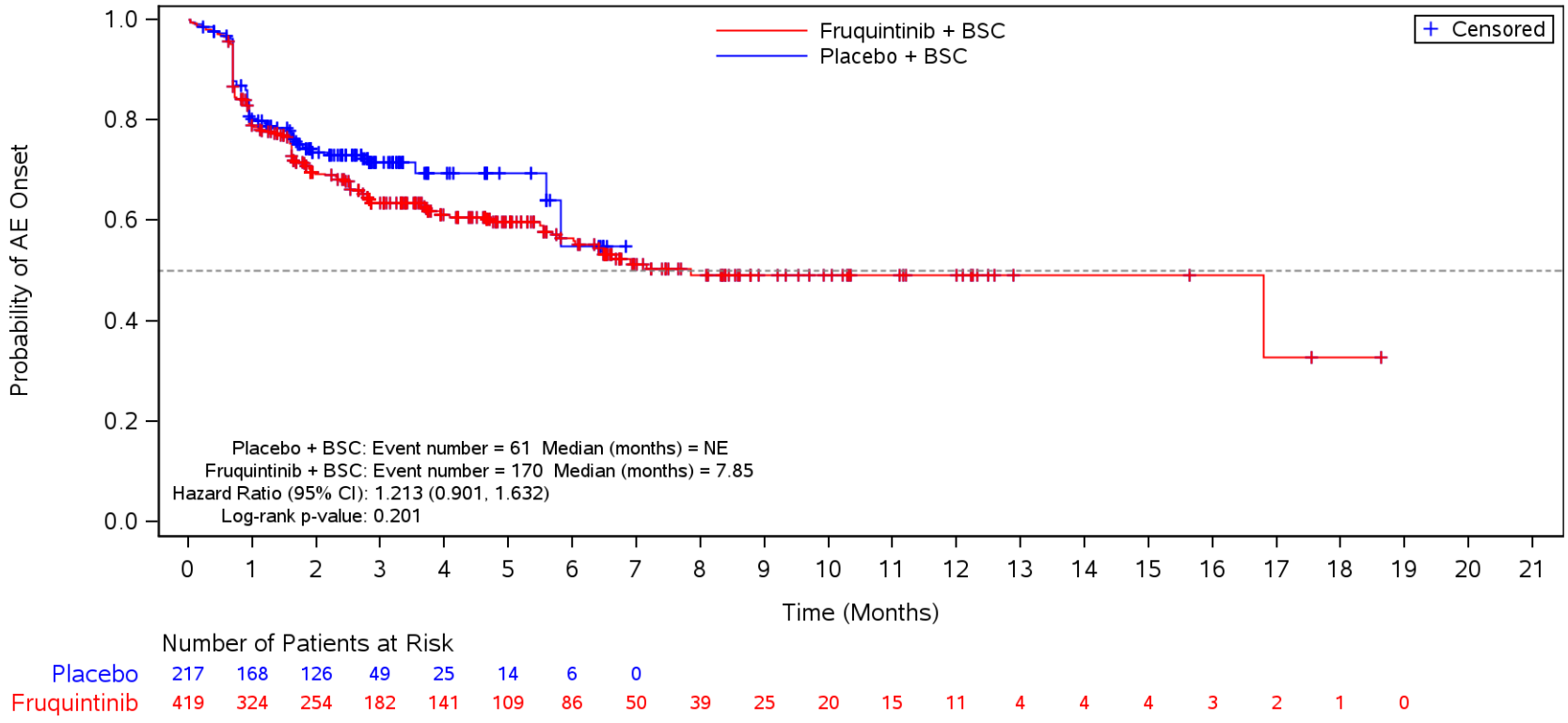
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Metabolism and nutrition disorders** and Preferred Term **Hypophosphataemia**
> 18 months



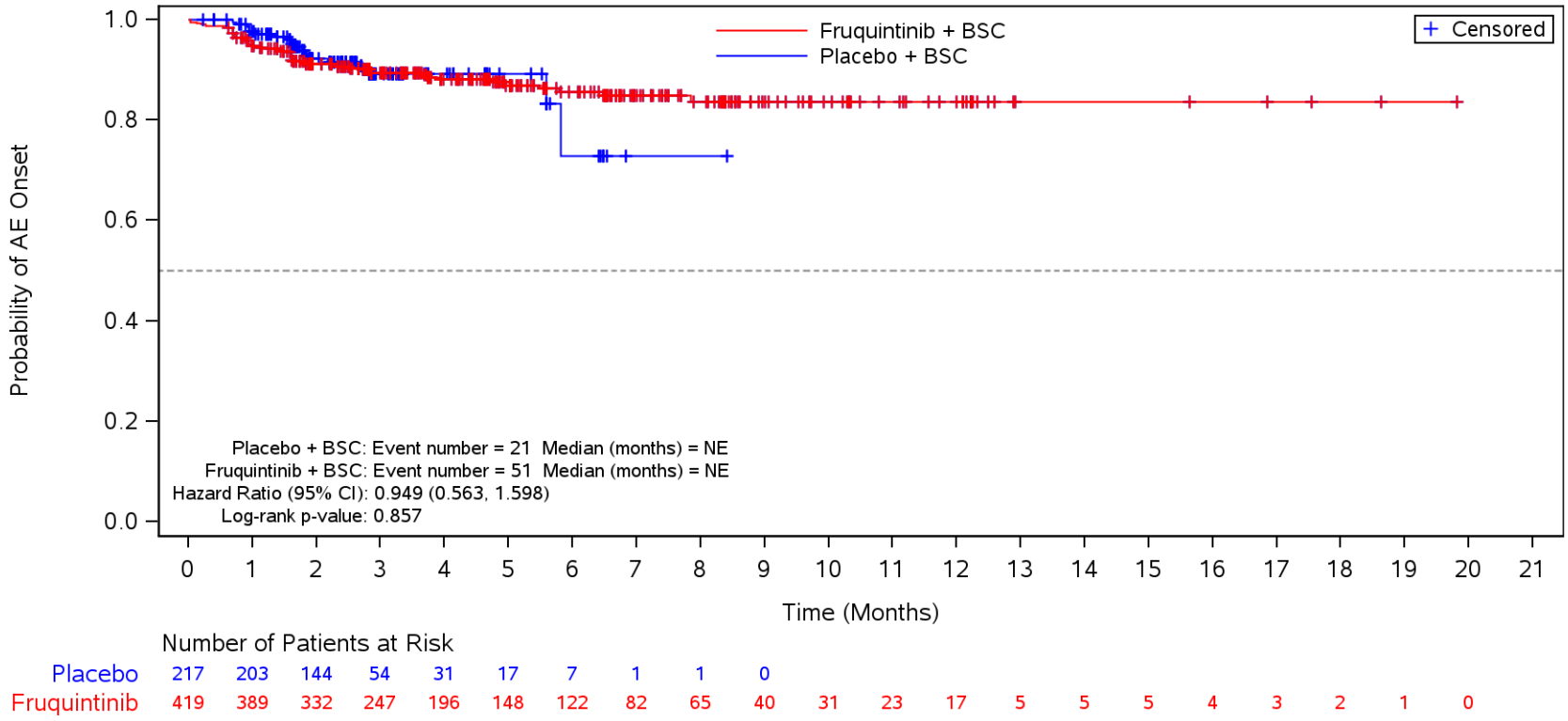
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations**
> 18 months



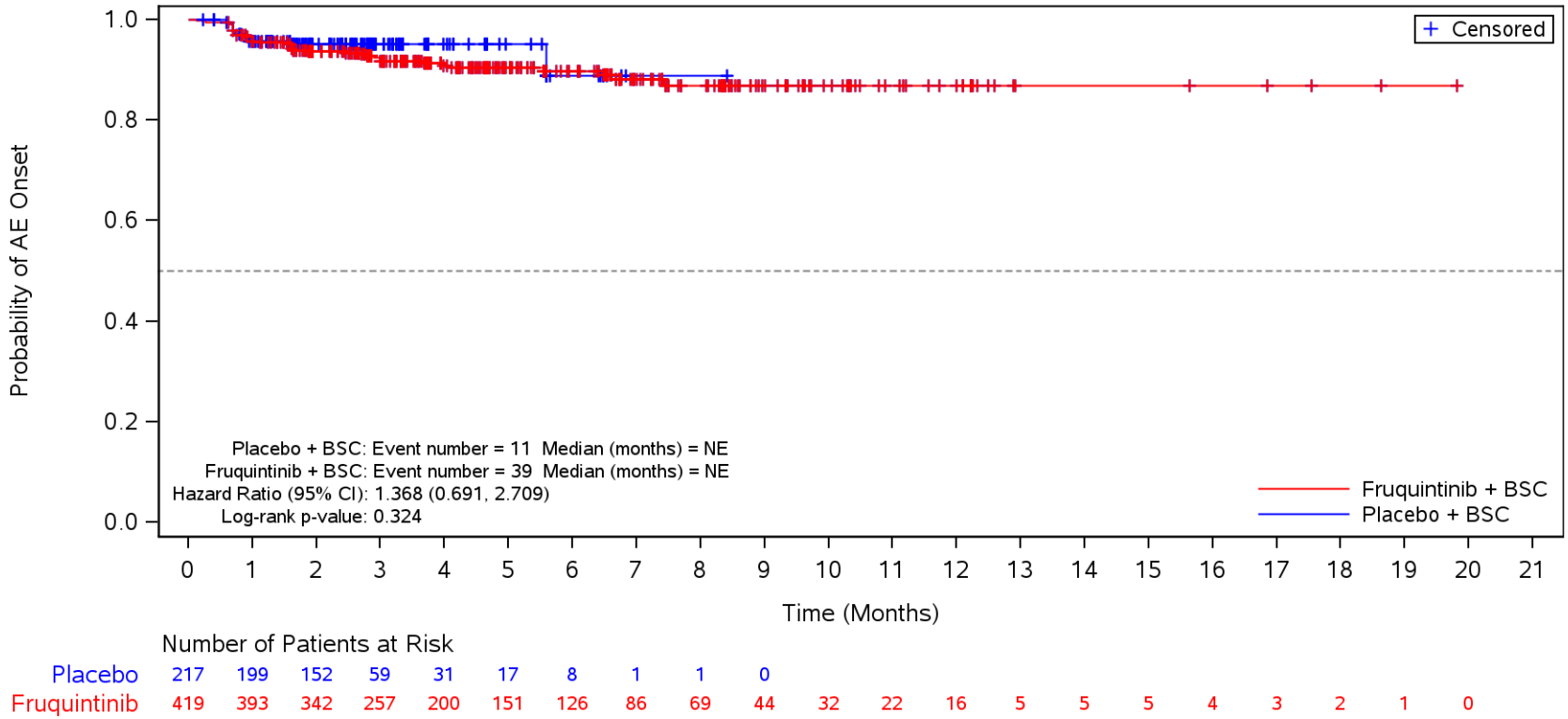
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Weight decreased**
> 18 months



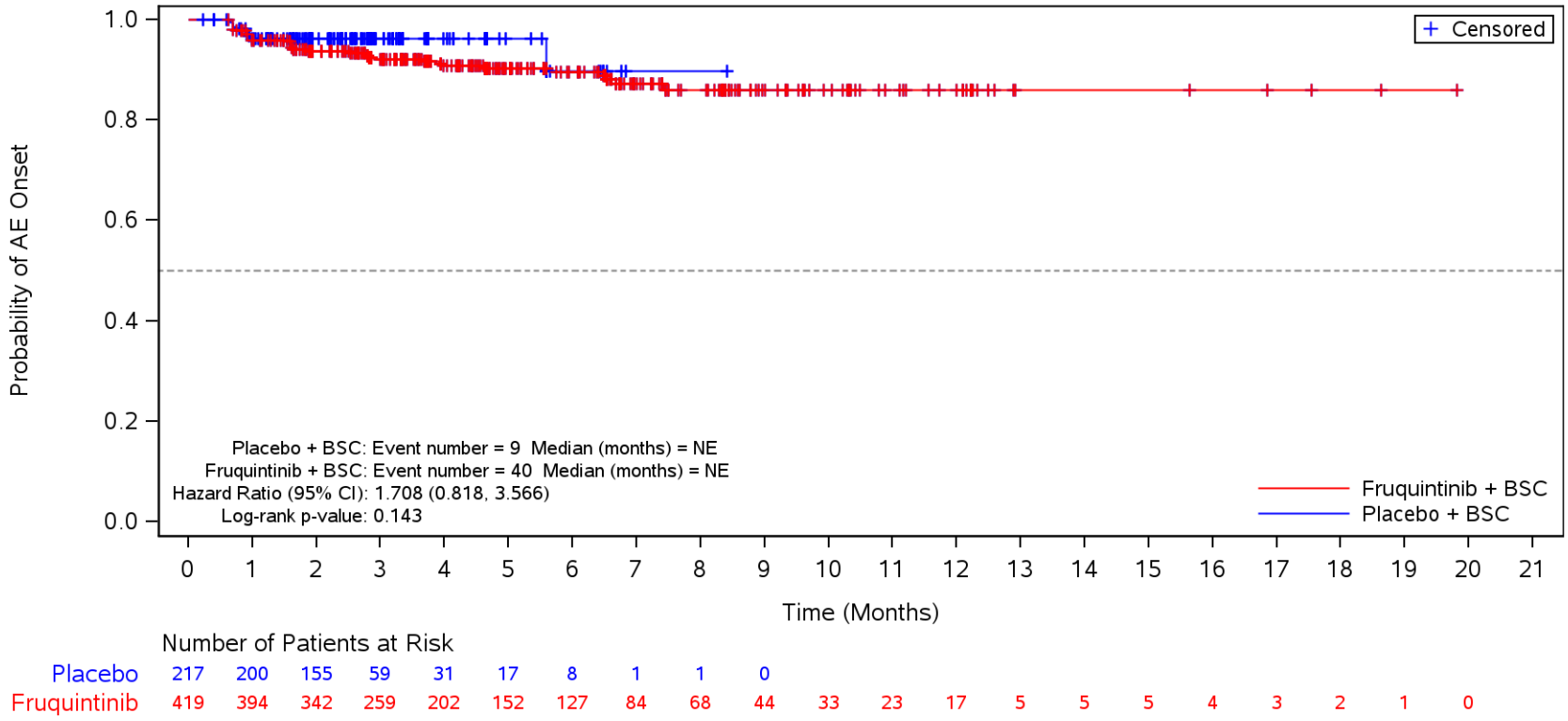
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Aspartate aminotransferase increased**
> 18 months



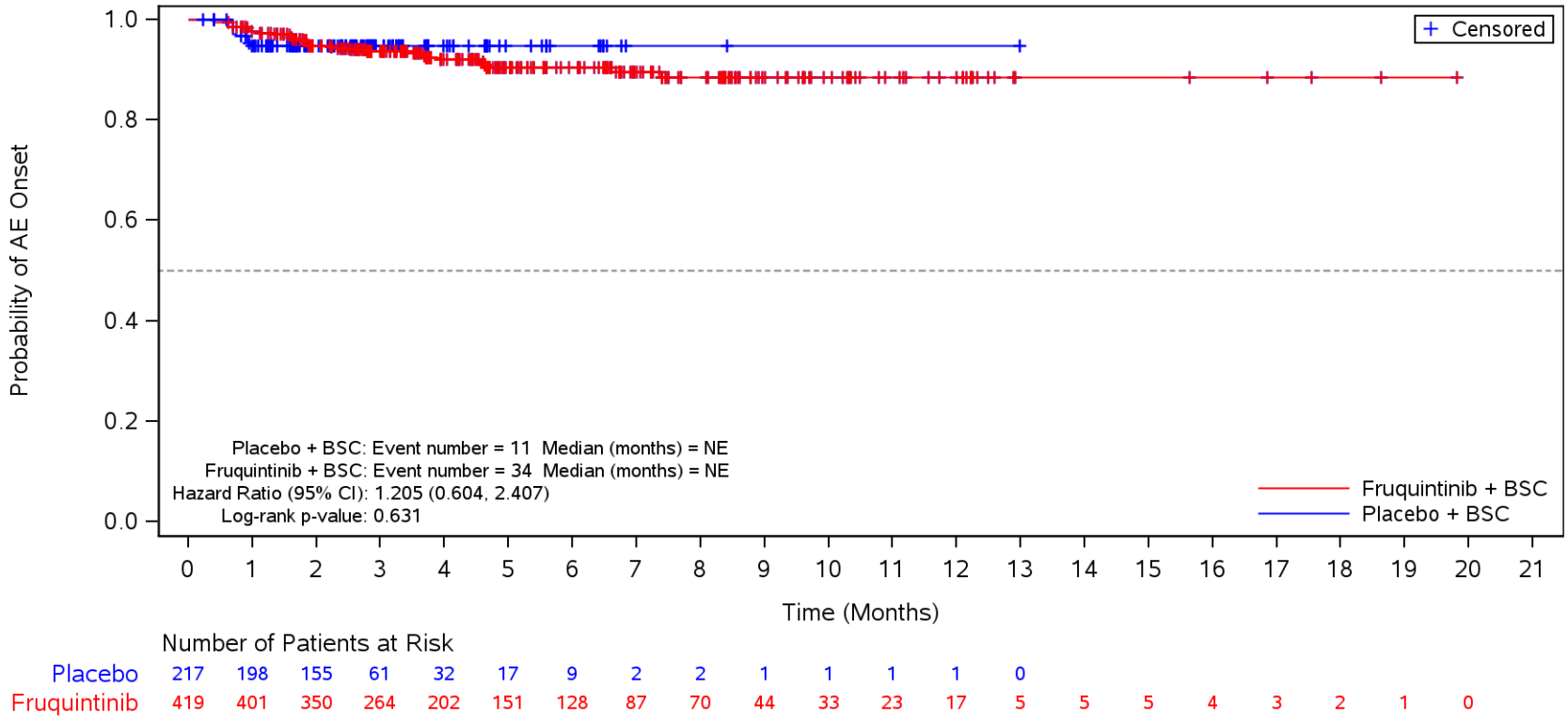
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Alanine aminotransferase increased**
> 18 months



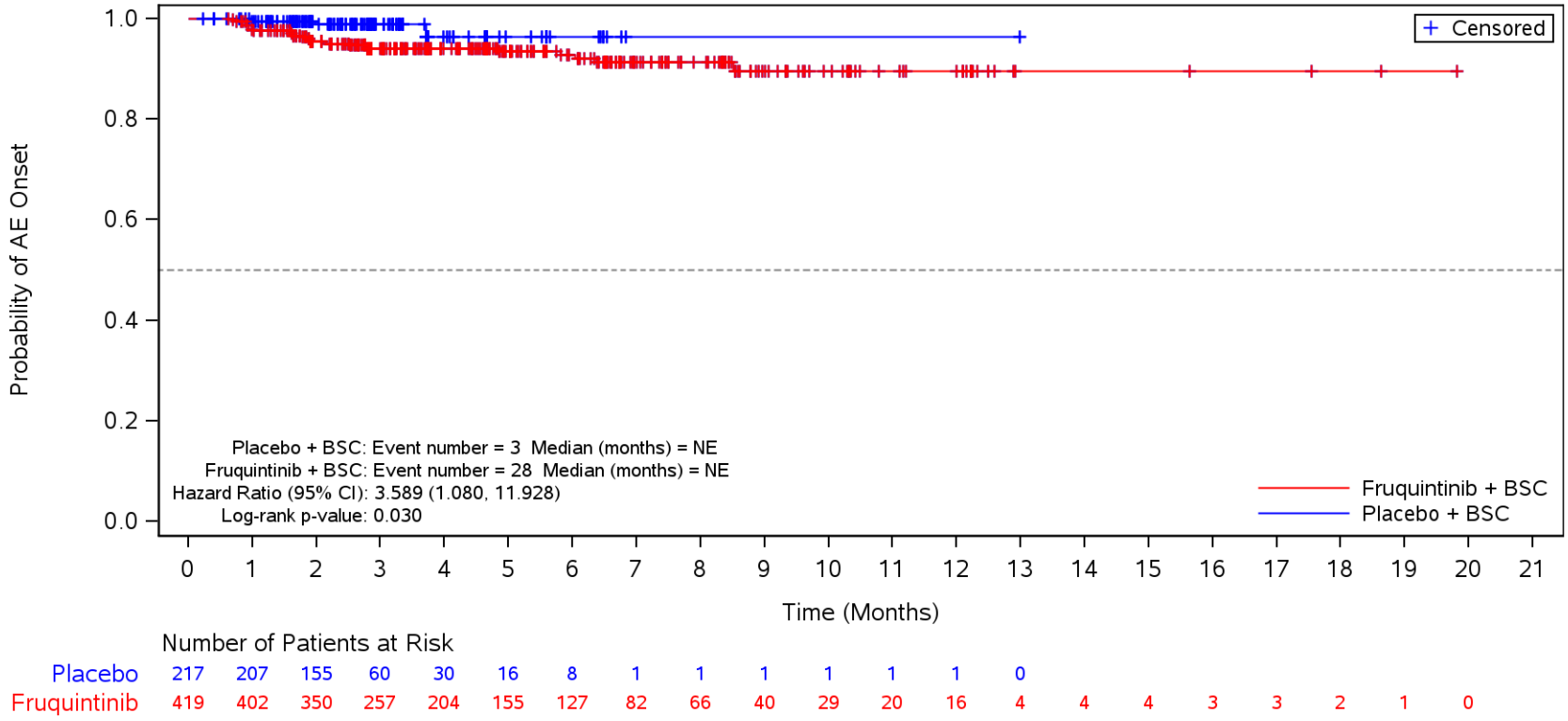
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood bilirubin increased**
> 18 months



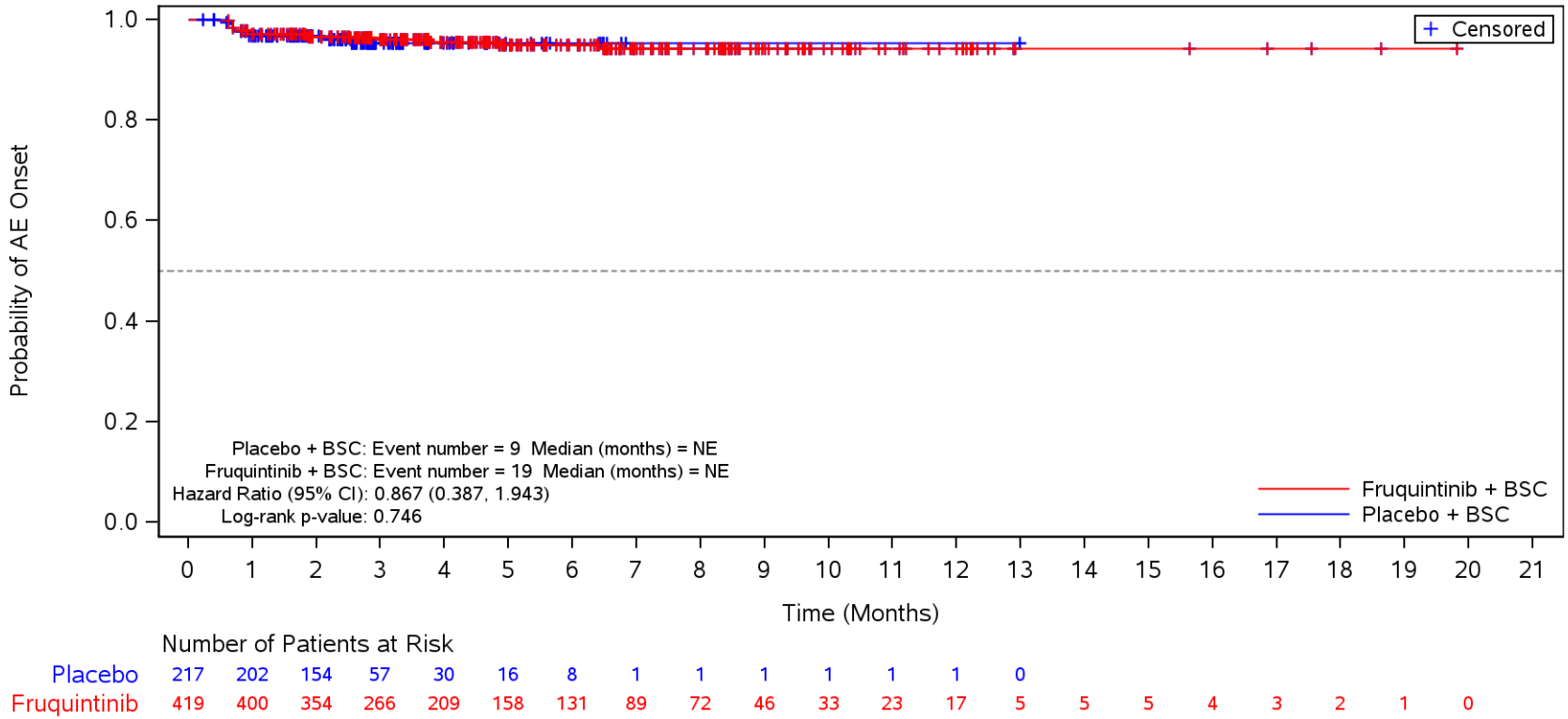
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood thyroid stimulating hormone increased**
> 18 months



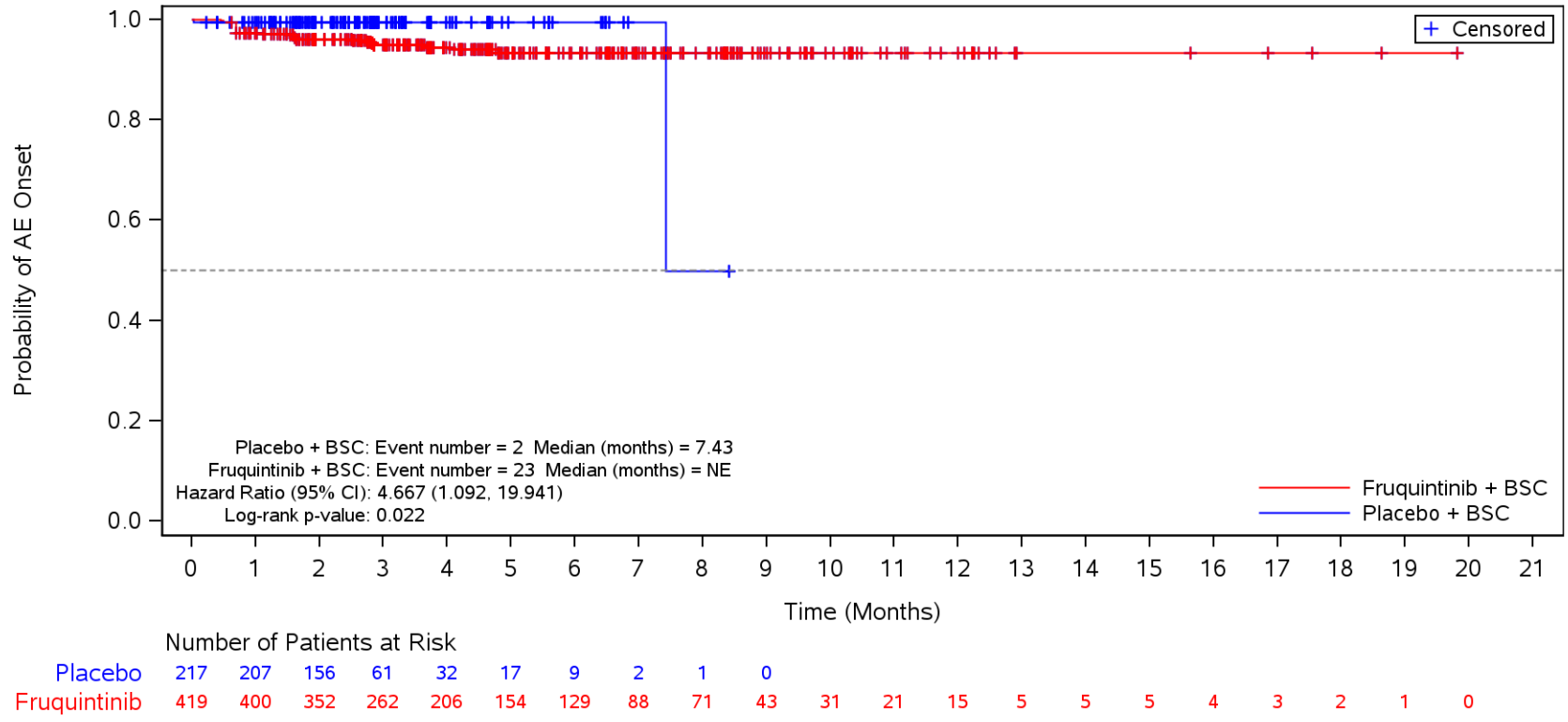
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood alkaline phosphatase increased**
> 18 months



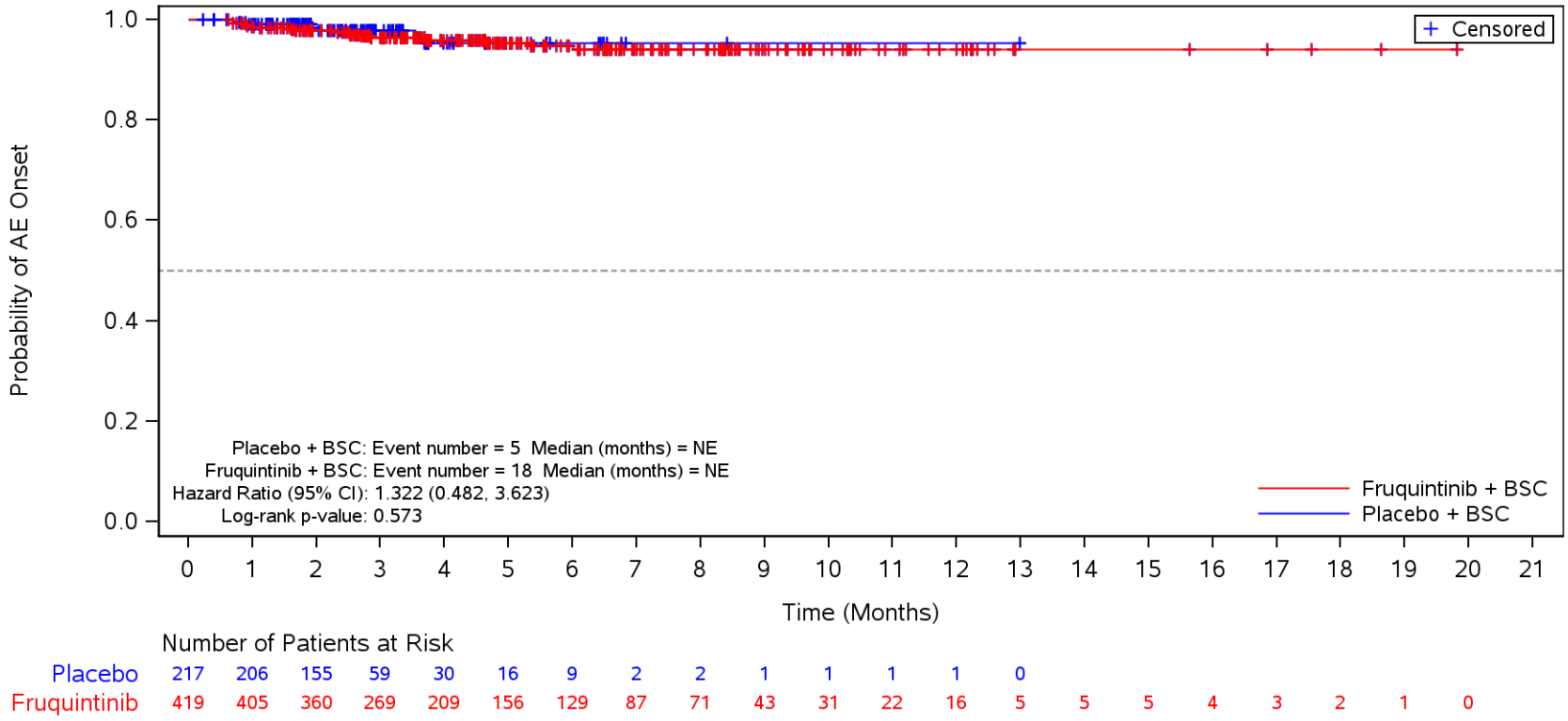
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Platelet count decreased**
> 18 months



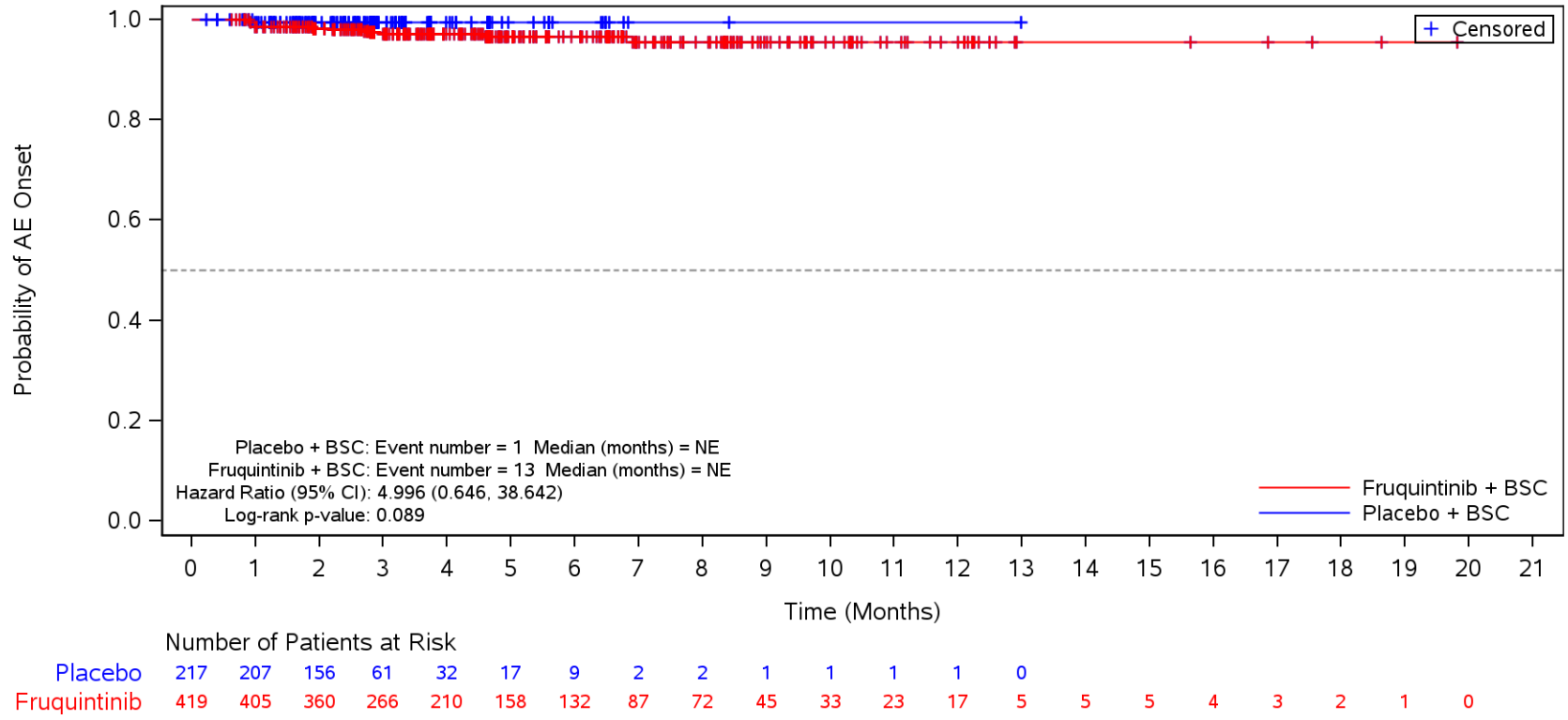
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Blood creatinine increased**
> 18 months



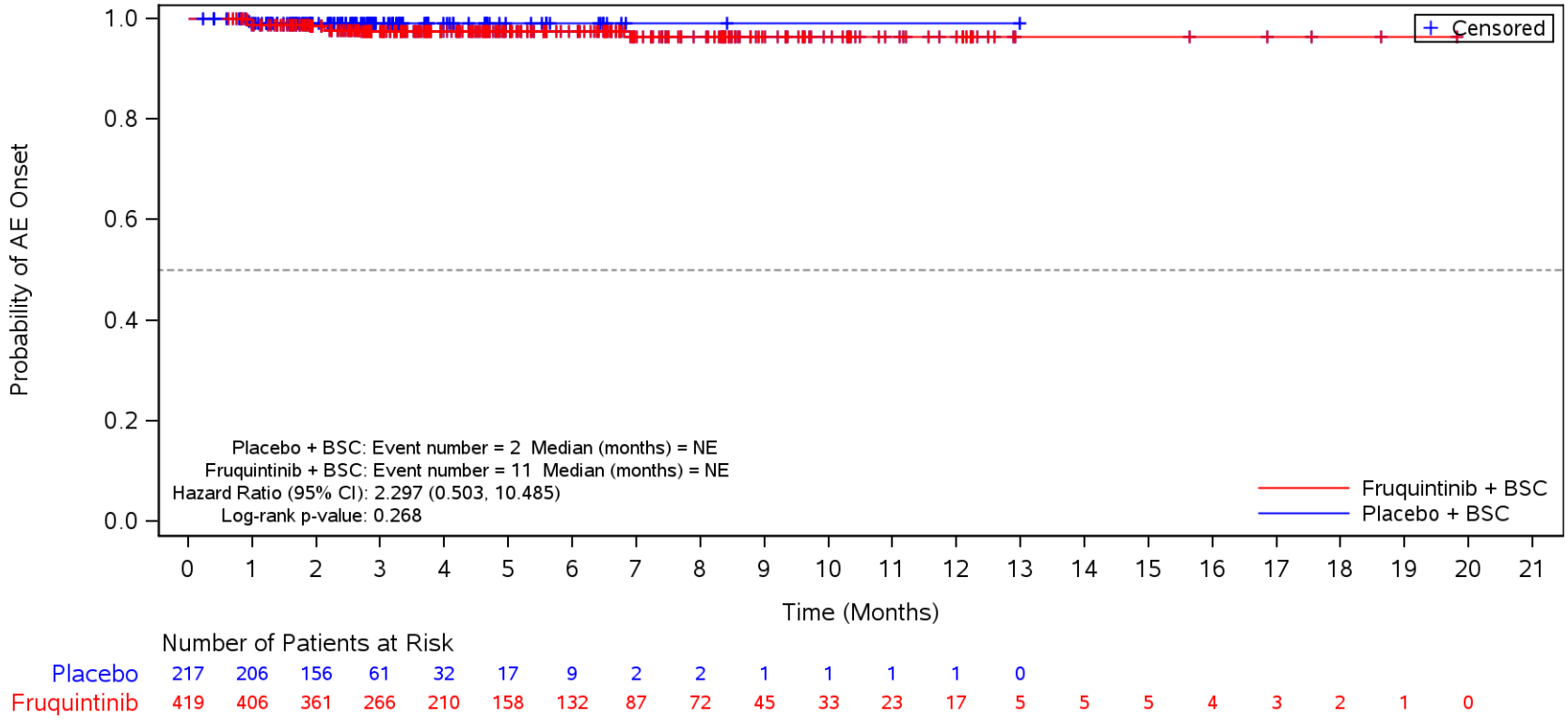
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Amylase increased**
> 18 months



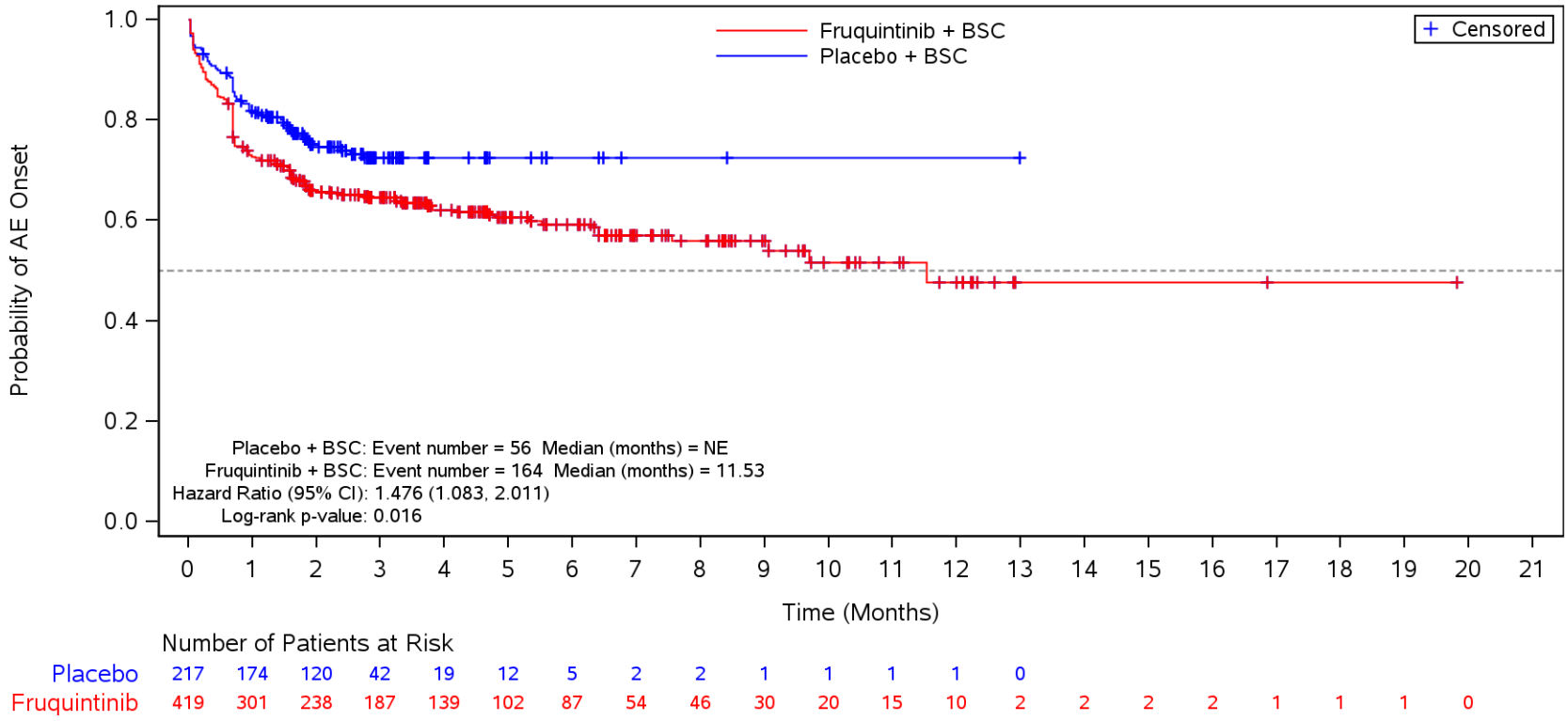
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Investigations** and Preferred Term **Lipase increased**
> 18 months



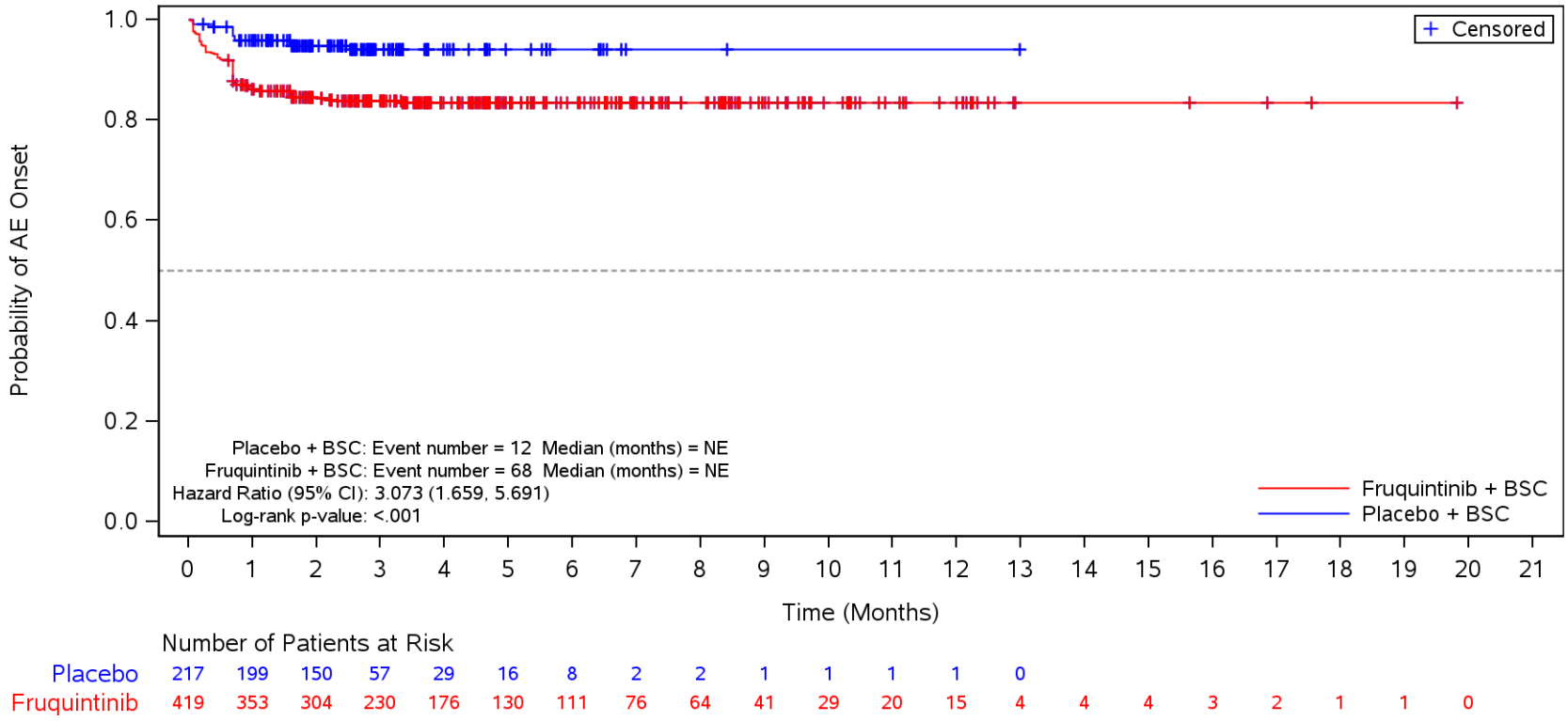
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders**
> 18 months



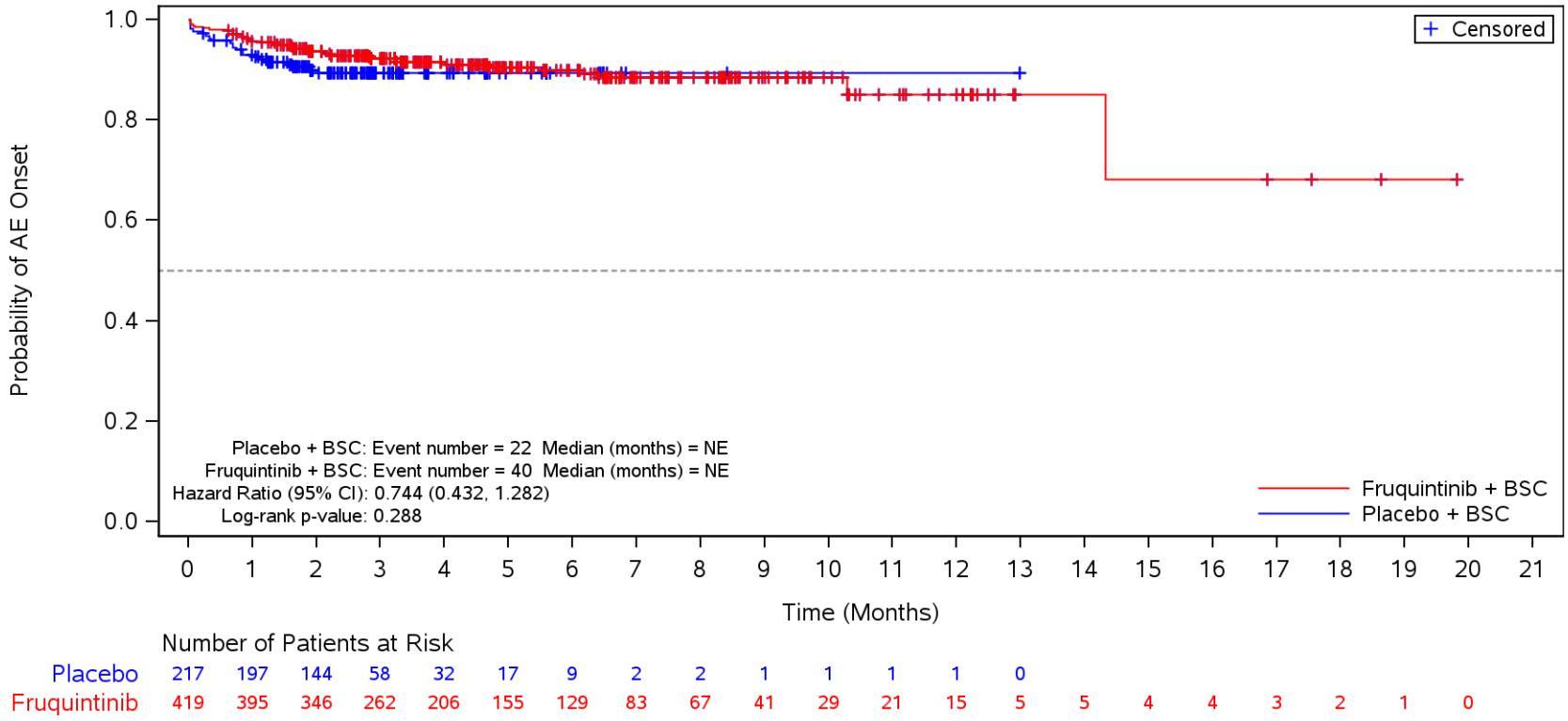
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dysphonia**
> 18 months



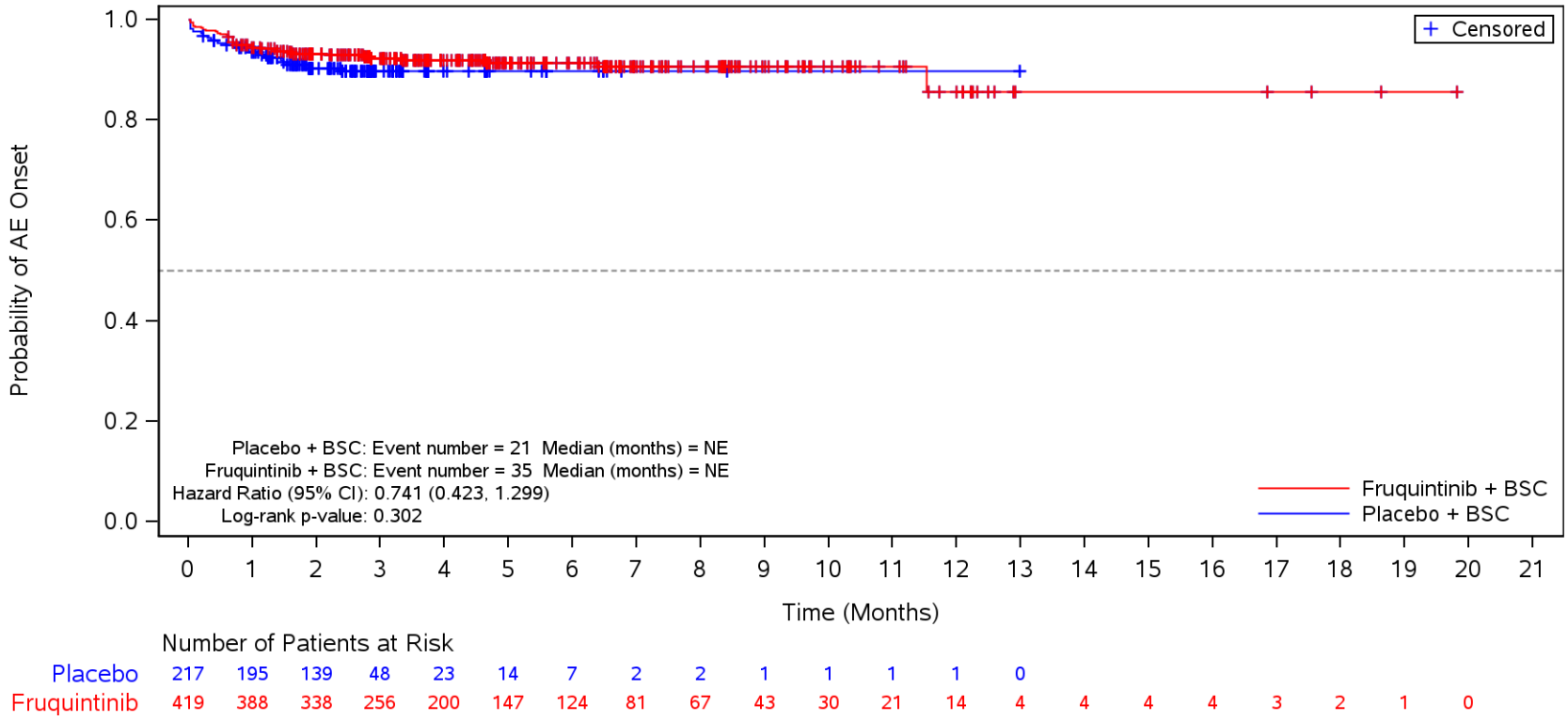
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Dyspnoea**
> 18 months



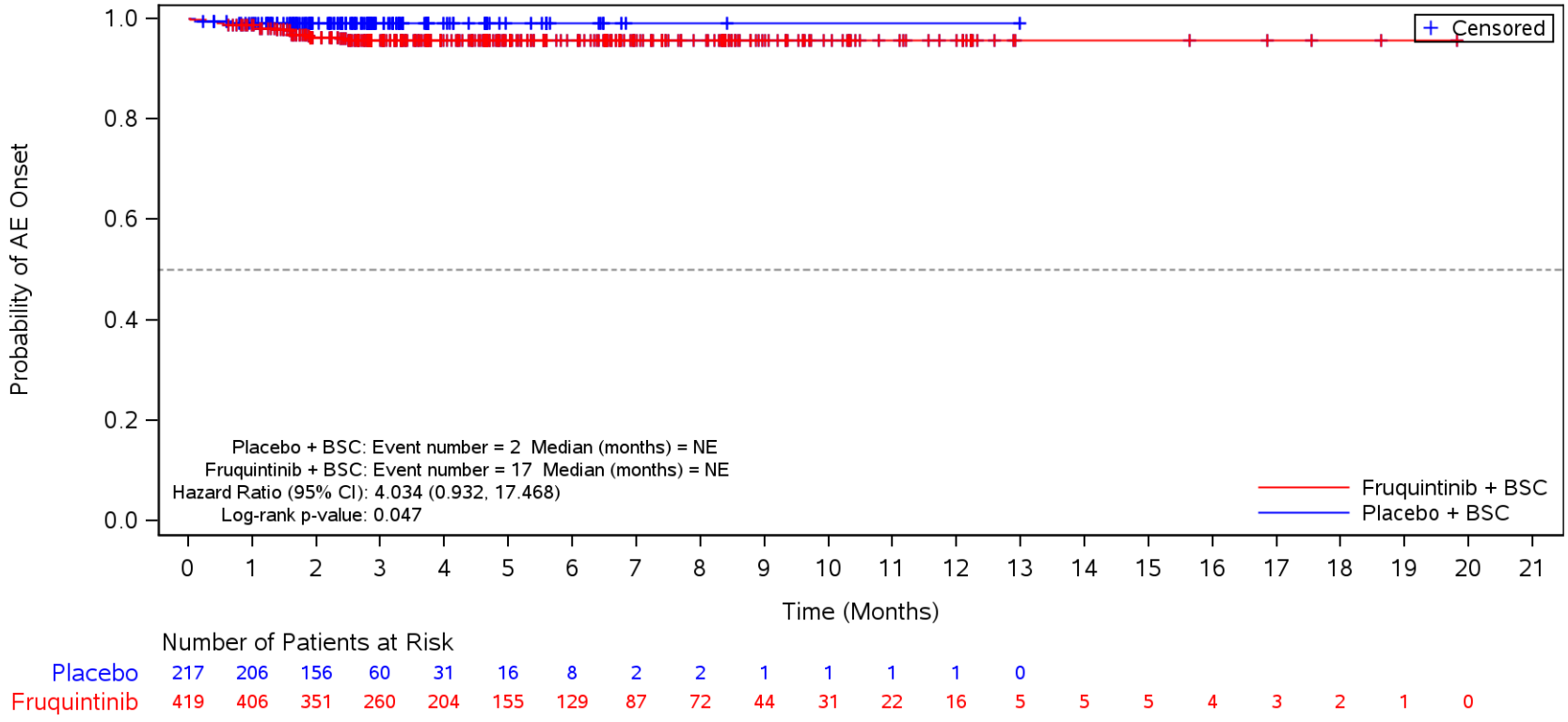
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Cough**
> 18 months



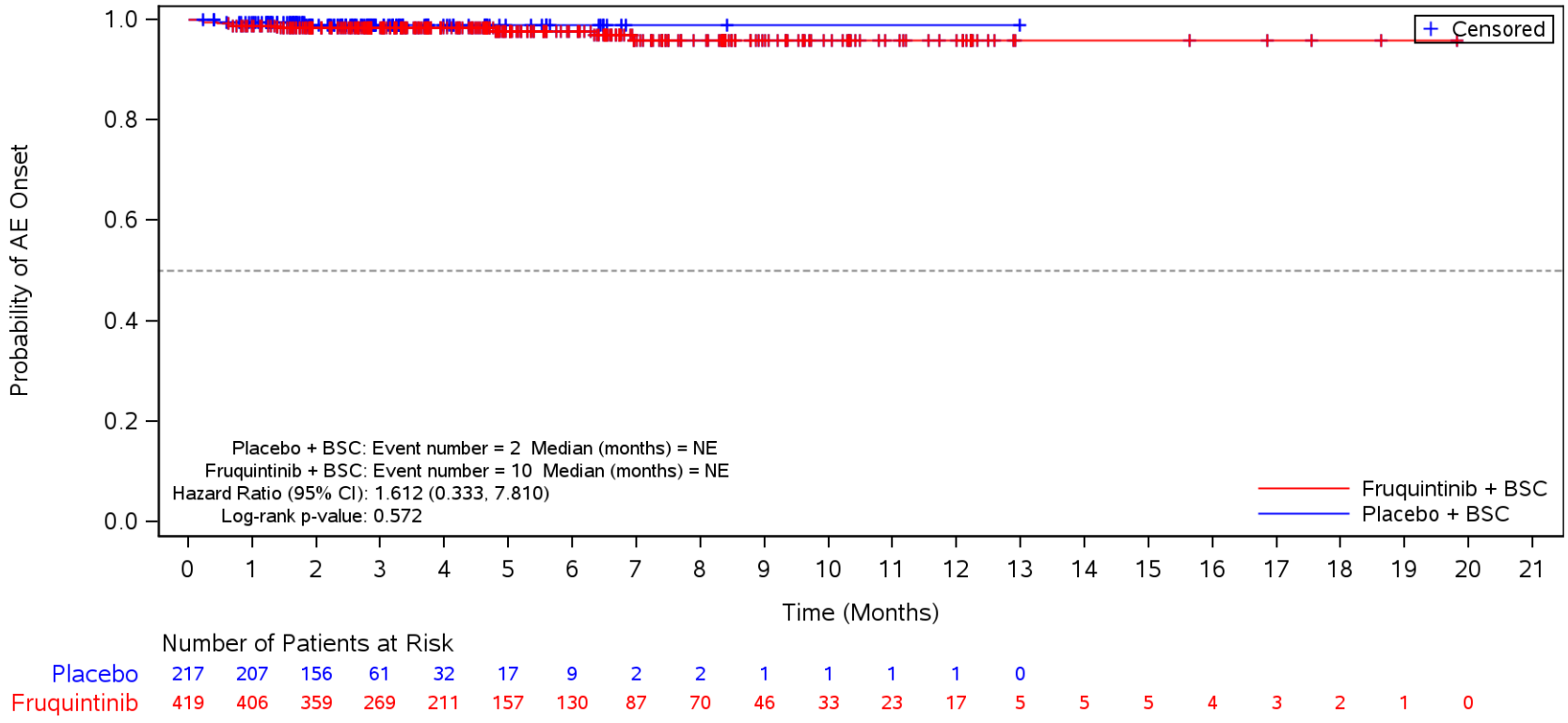
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Epistaxis**
> 18 months



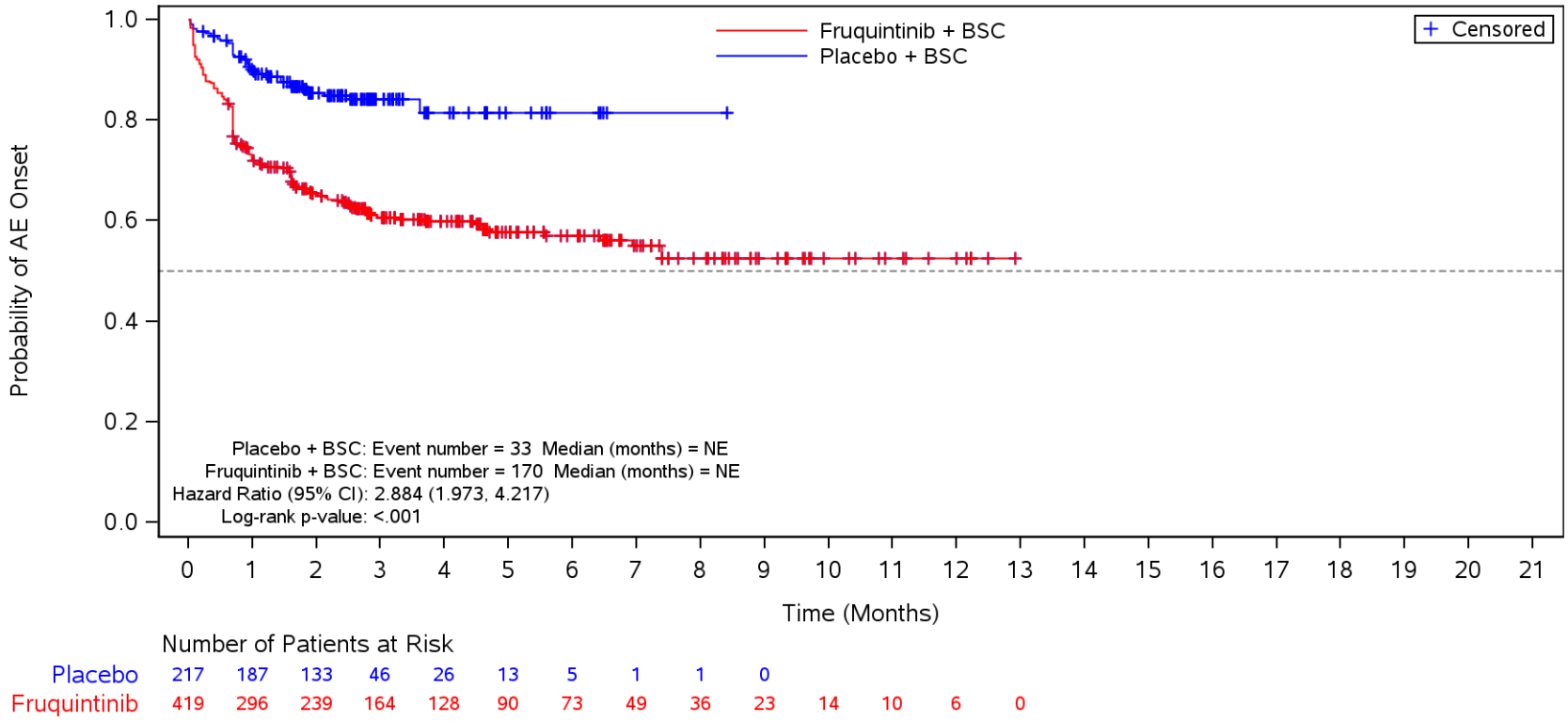
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Respiratory, thoracic and mediastinal disorders** and Preferred Term **Oropharyngeal pain**
> 18 months



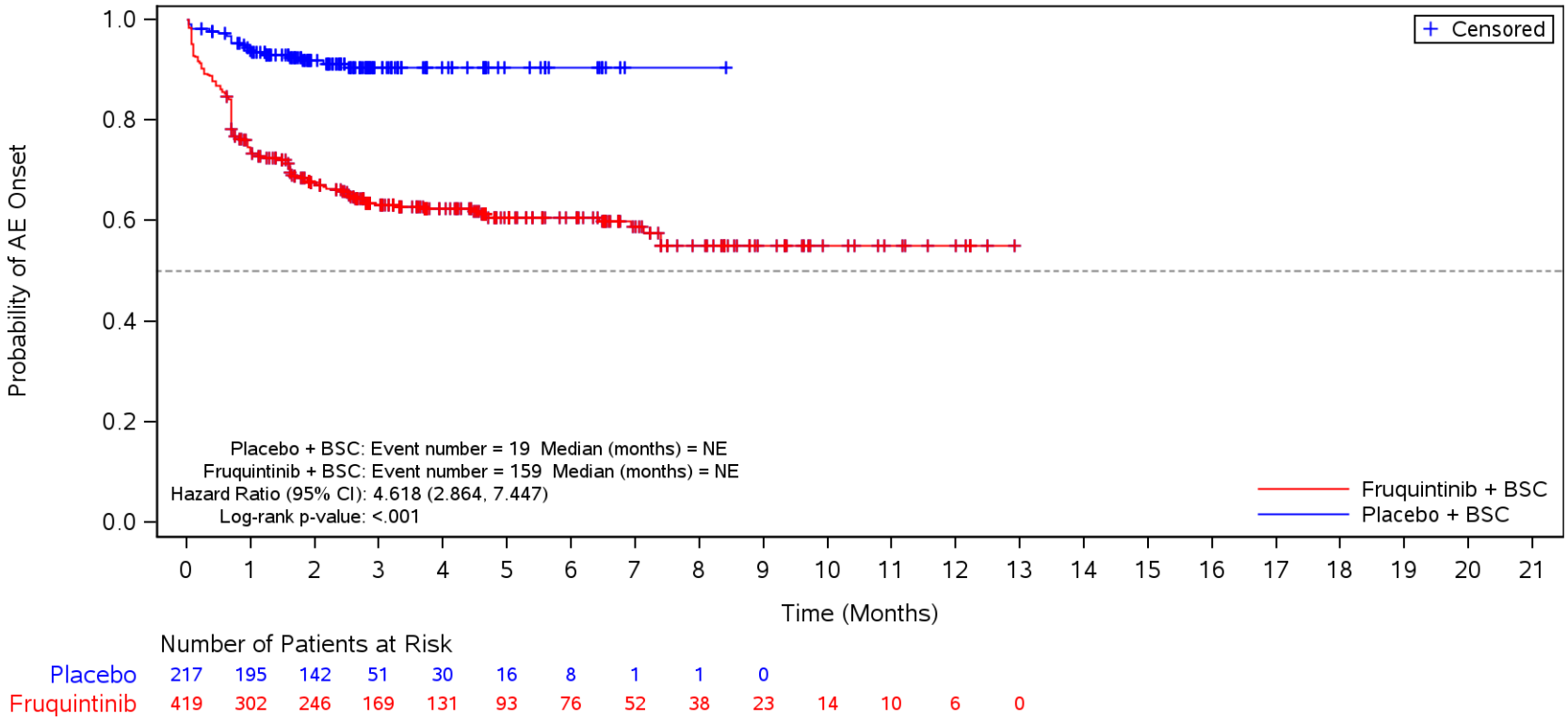
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Vascular disorders**
> 18 months



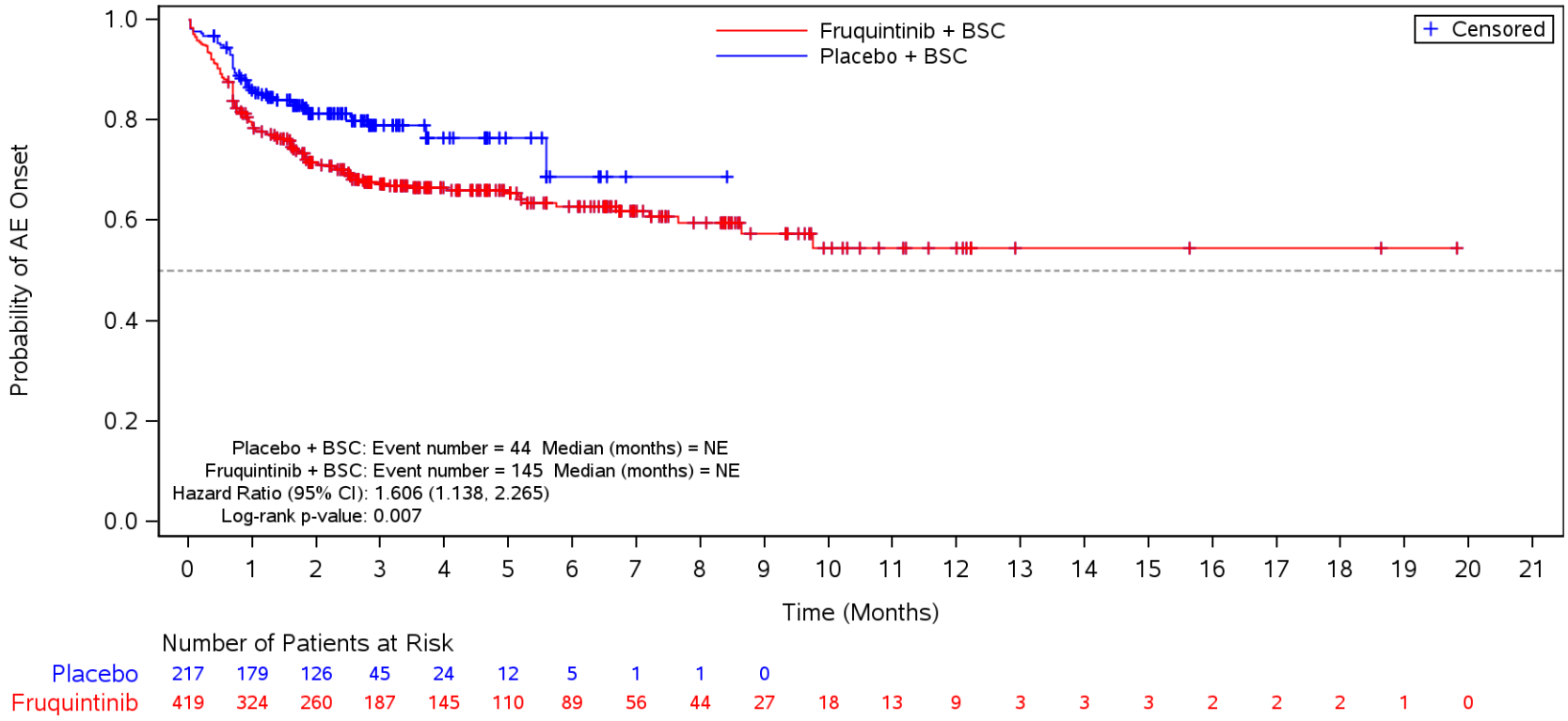
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Vascular disorders** and Preferred Term **Hypertension**
> 18 months



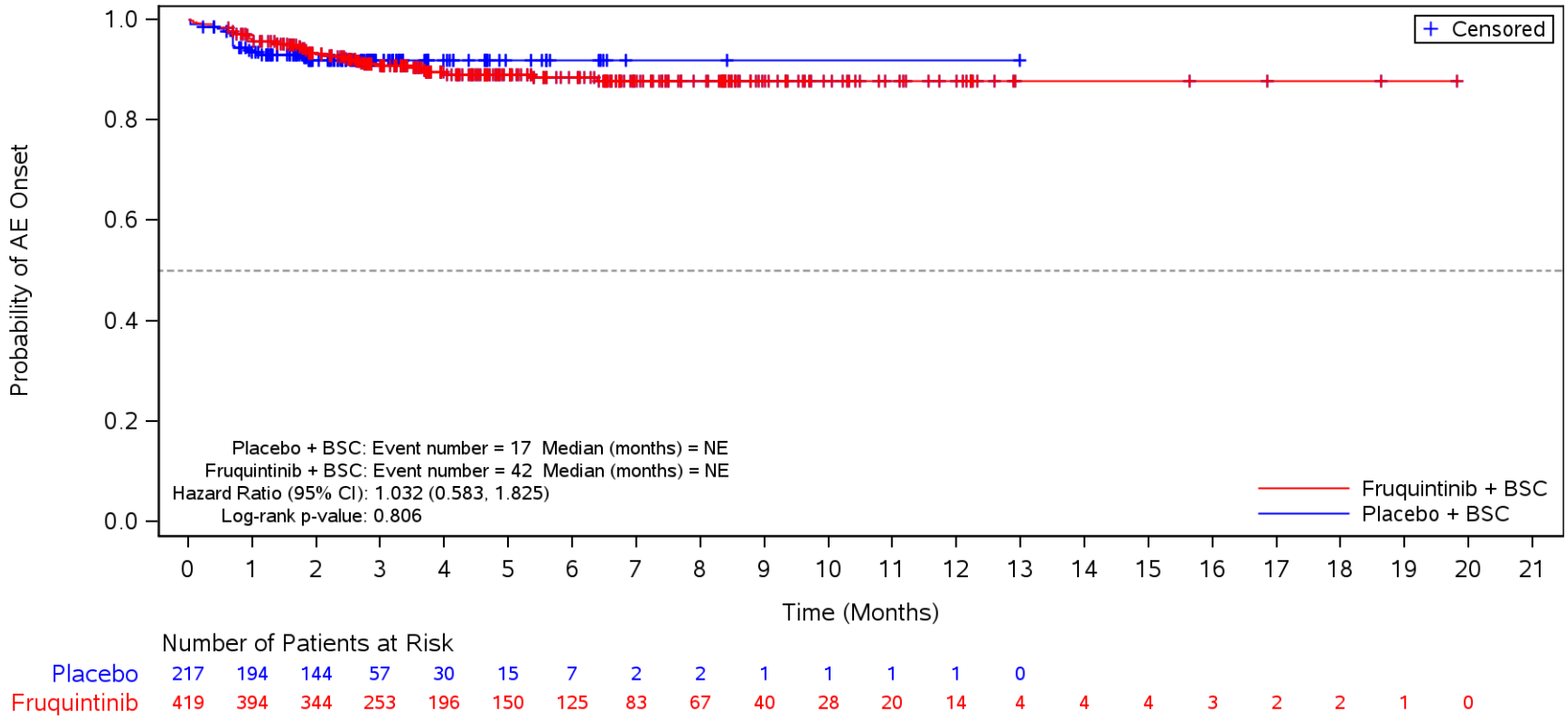
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders**
> 18 months



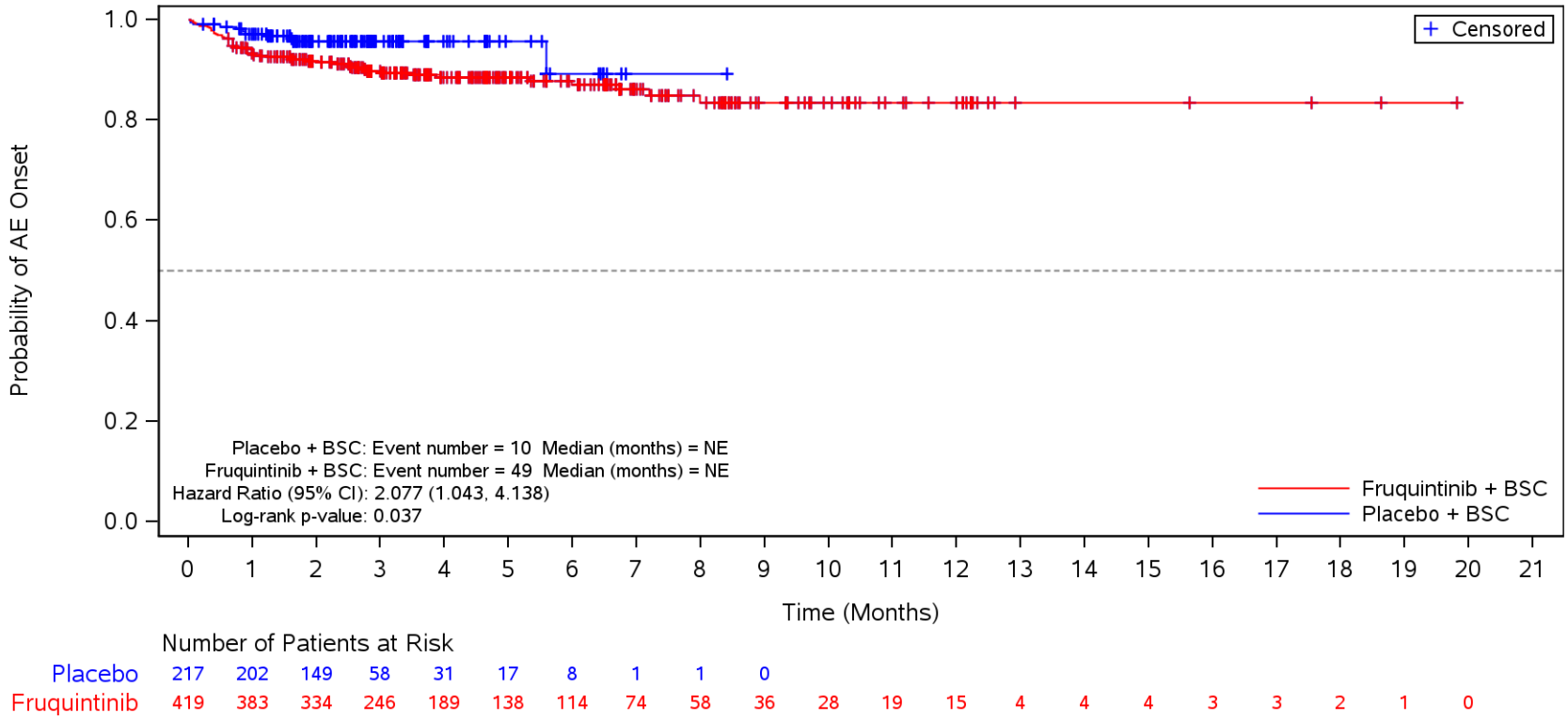
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Back pain**
> 18 months



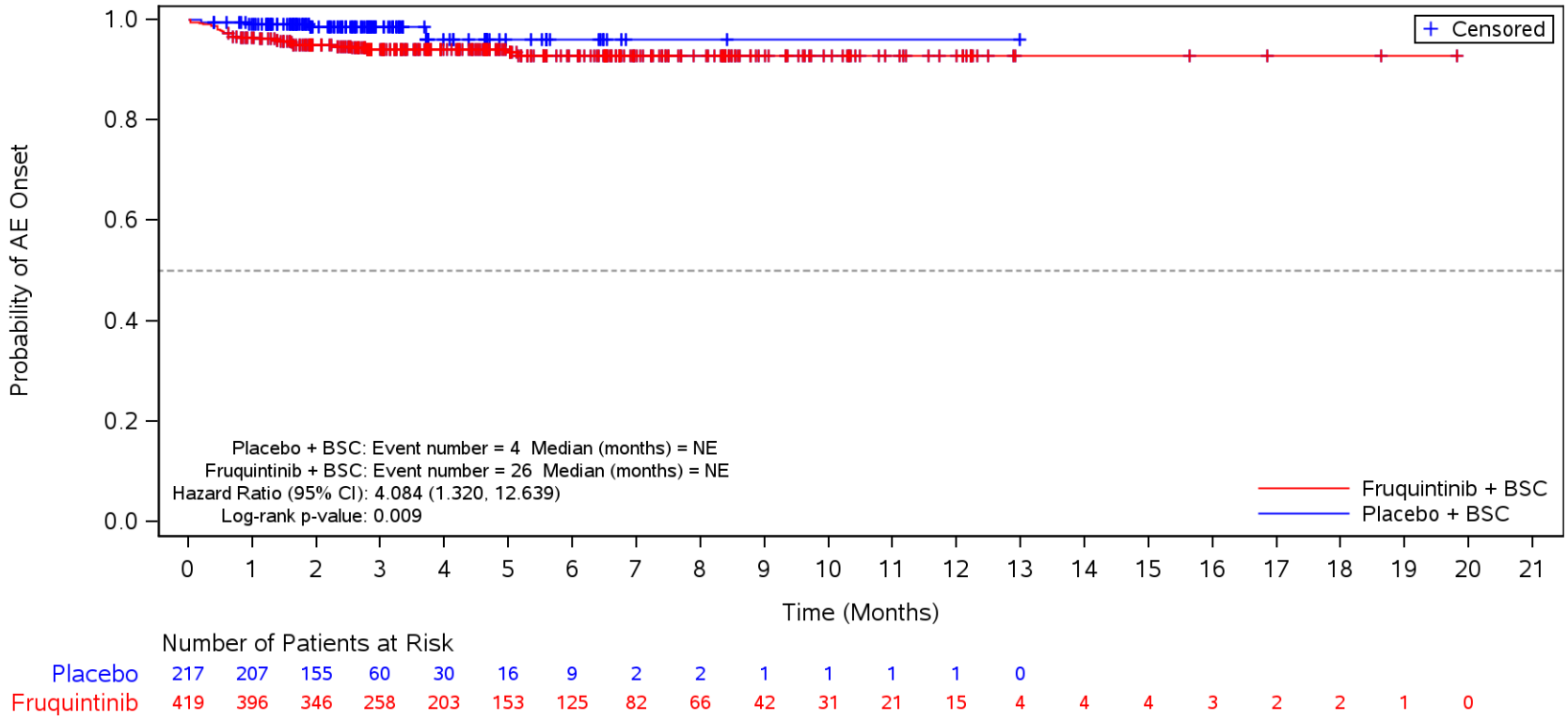
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Arthralgia**
> 18 months



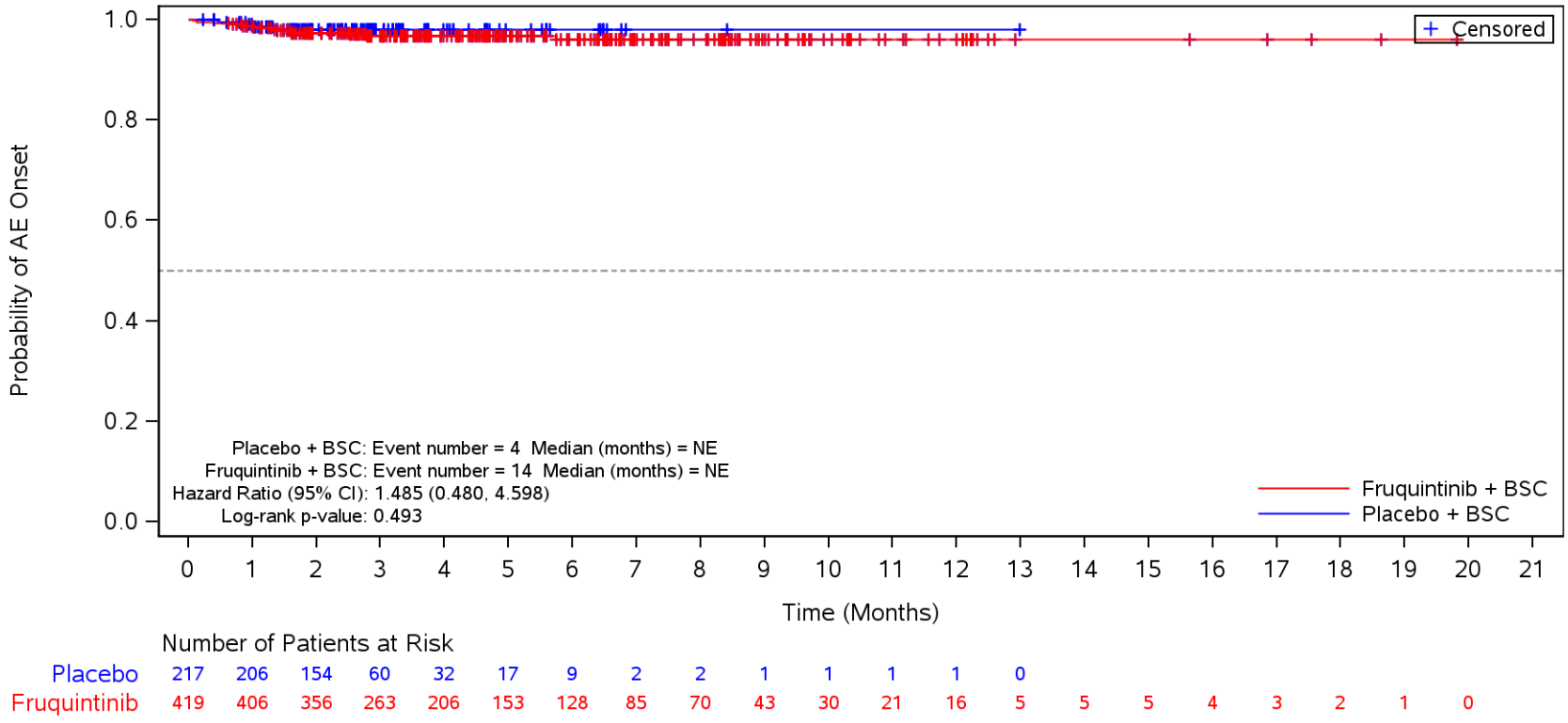
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Pain in extremity**
> 18 months



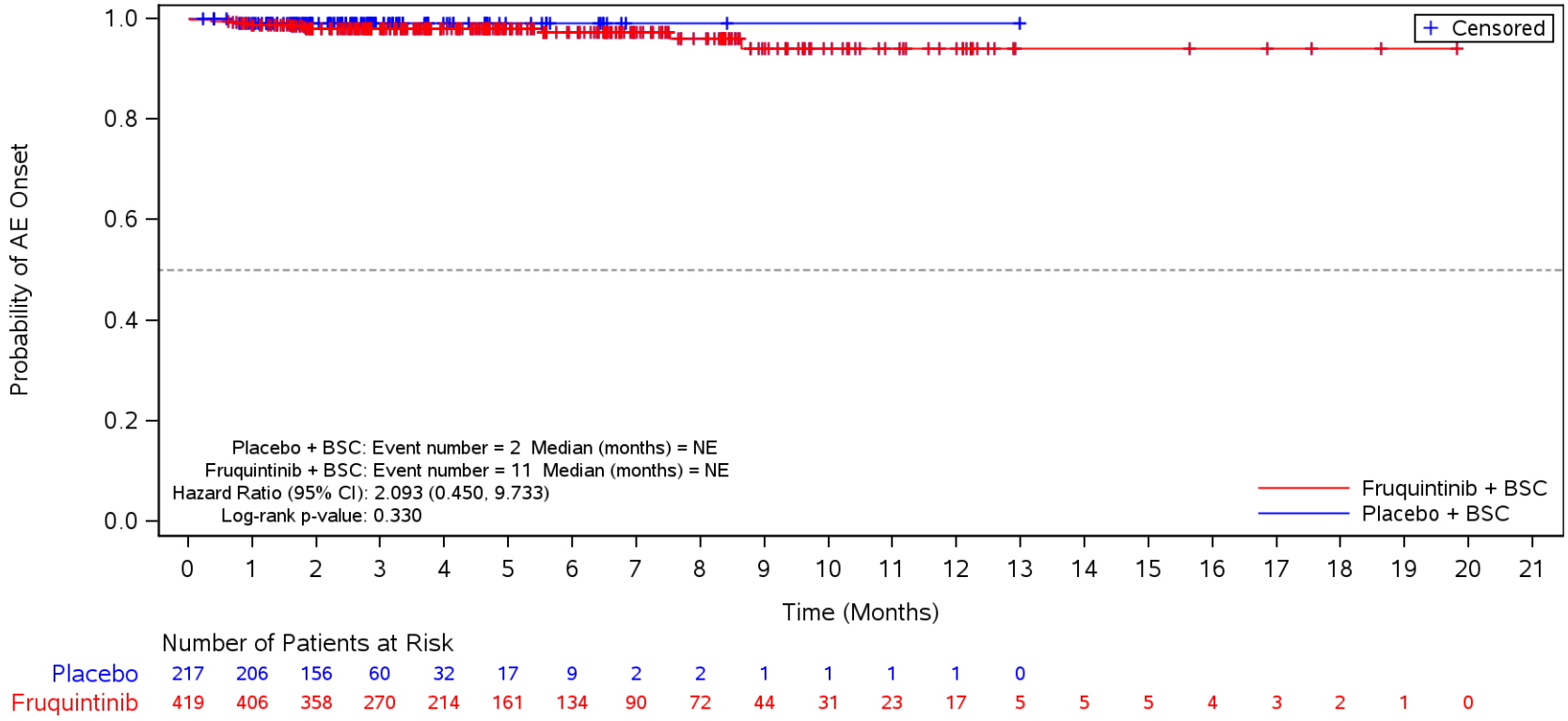
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Myalgia**
> 18 months



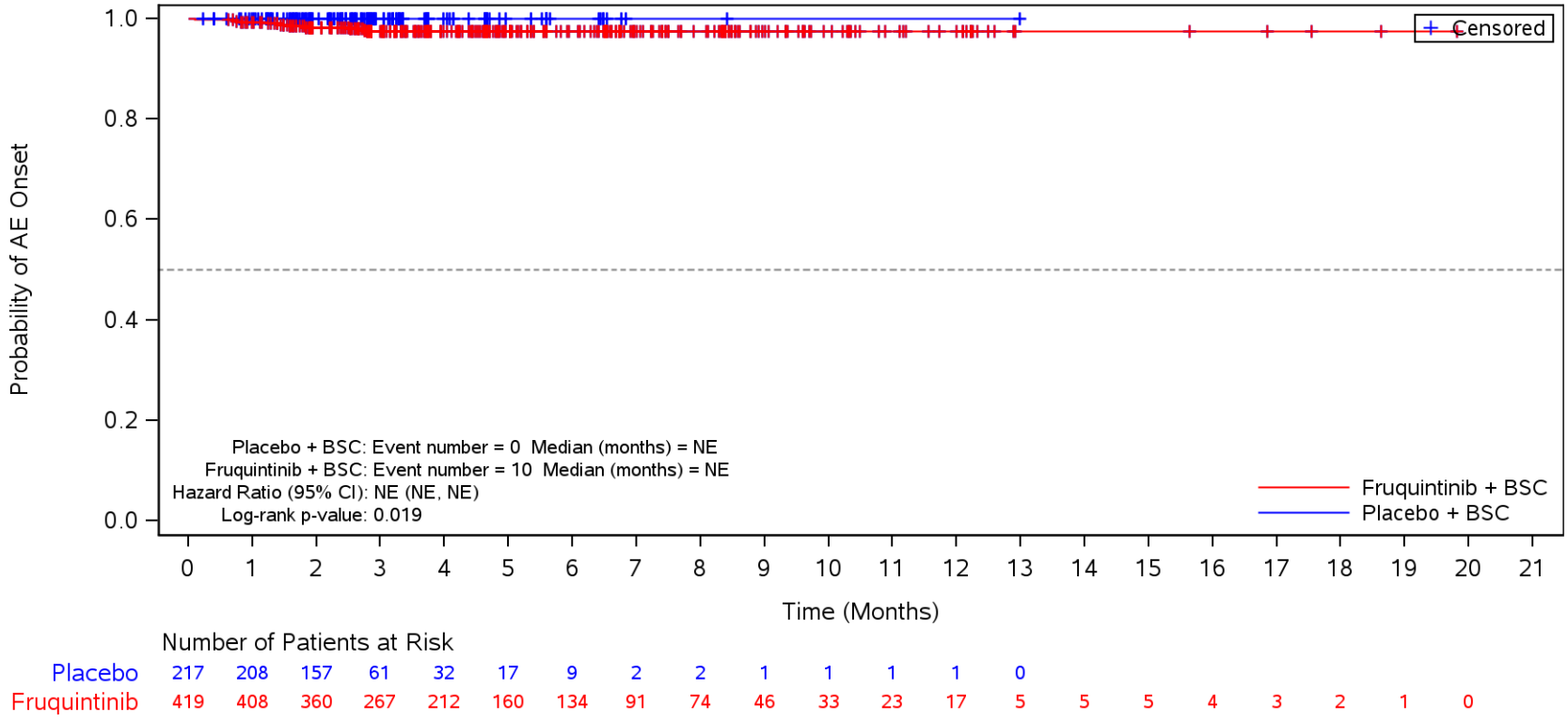
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Musculoskeletal chest pain**
> 18 months



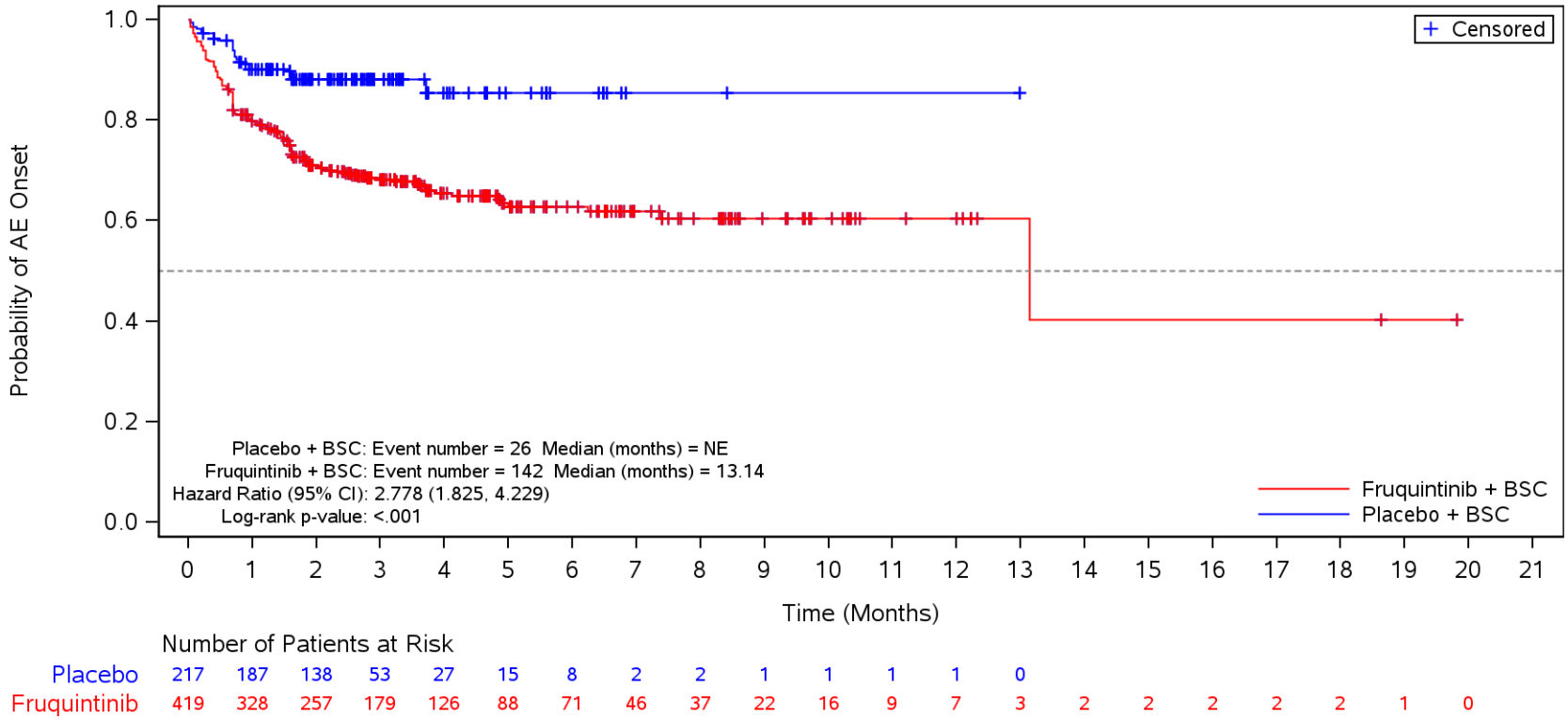
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Musculoskeletal and connective tissue disorders** and Preferred Term **Muscle spasms**
> 18 months



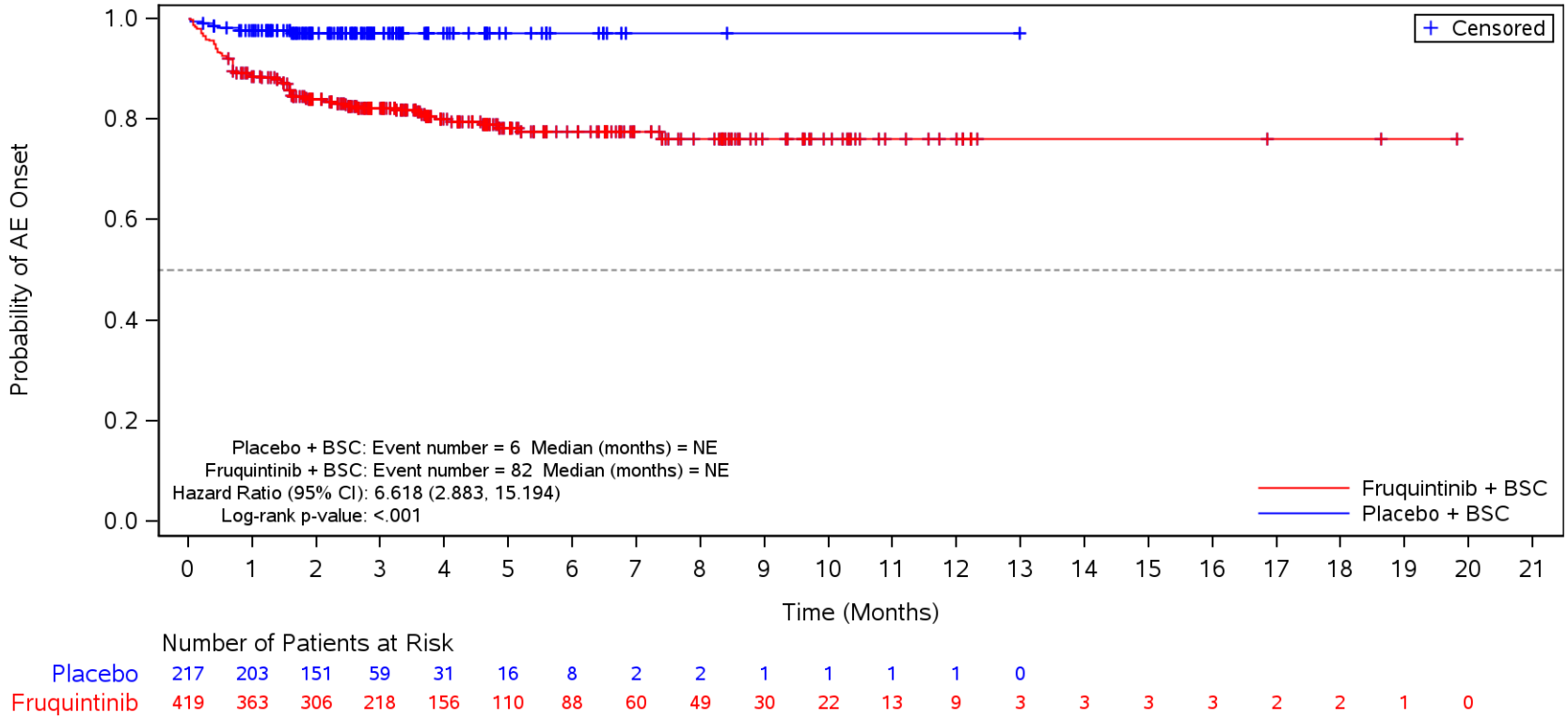
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders**
> 18 months



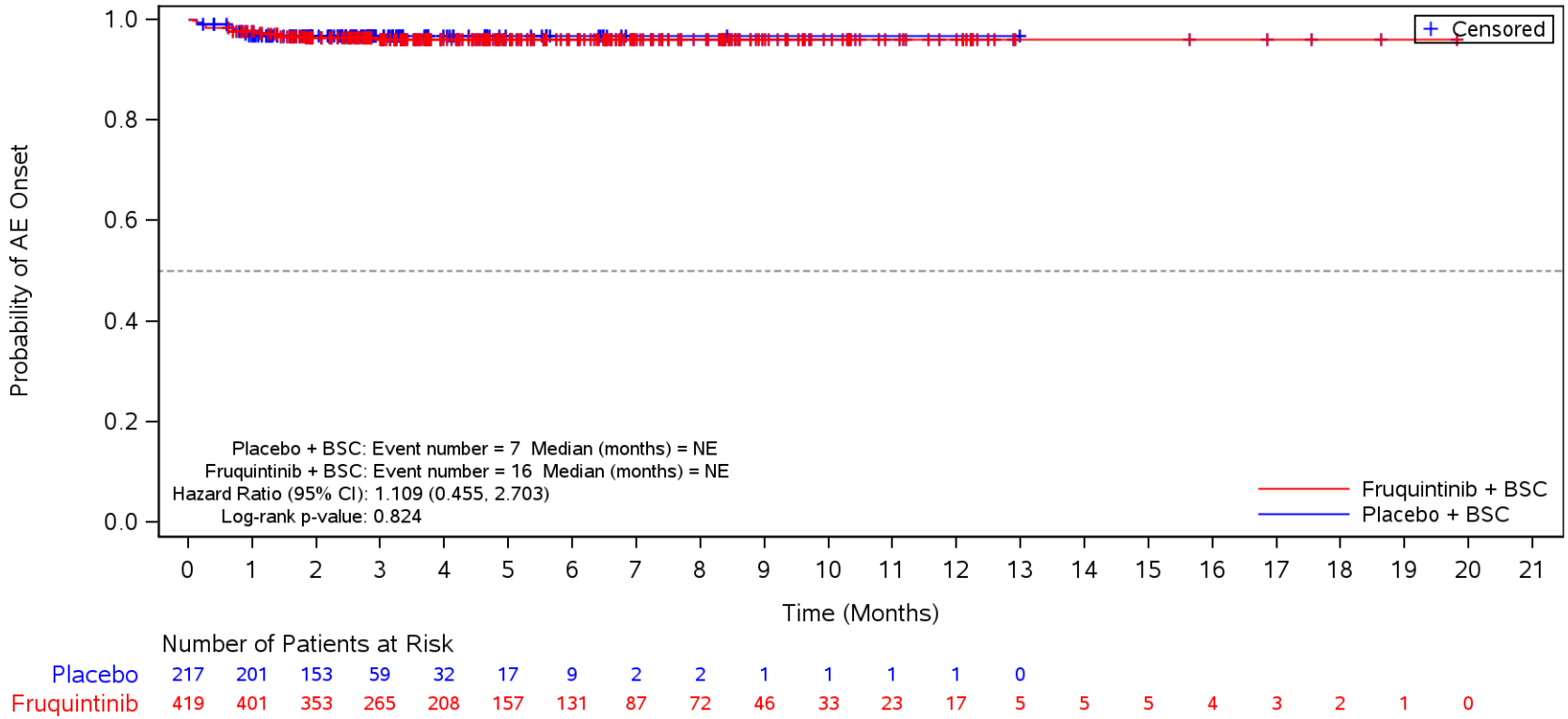
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Palmar-plantar erythrodysaesthesia syndrome**
> 18 months



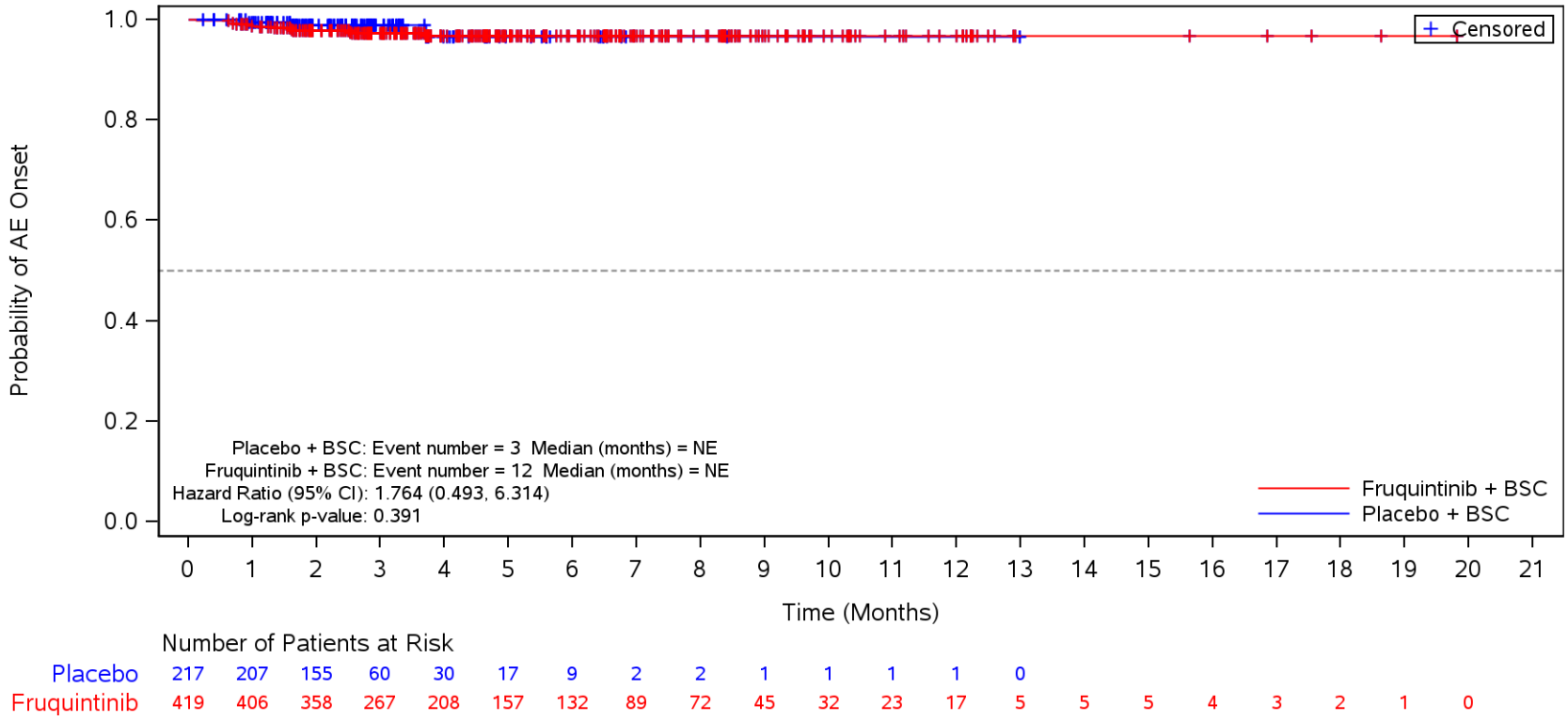
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Rash**
> 18 months



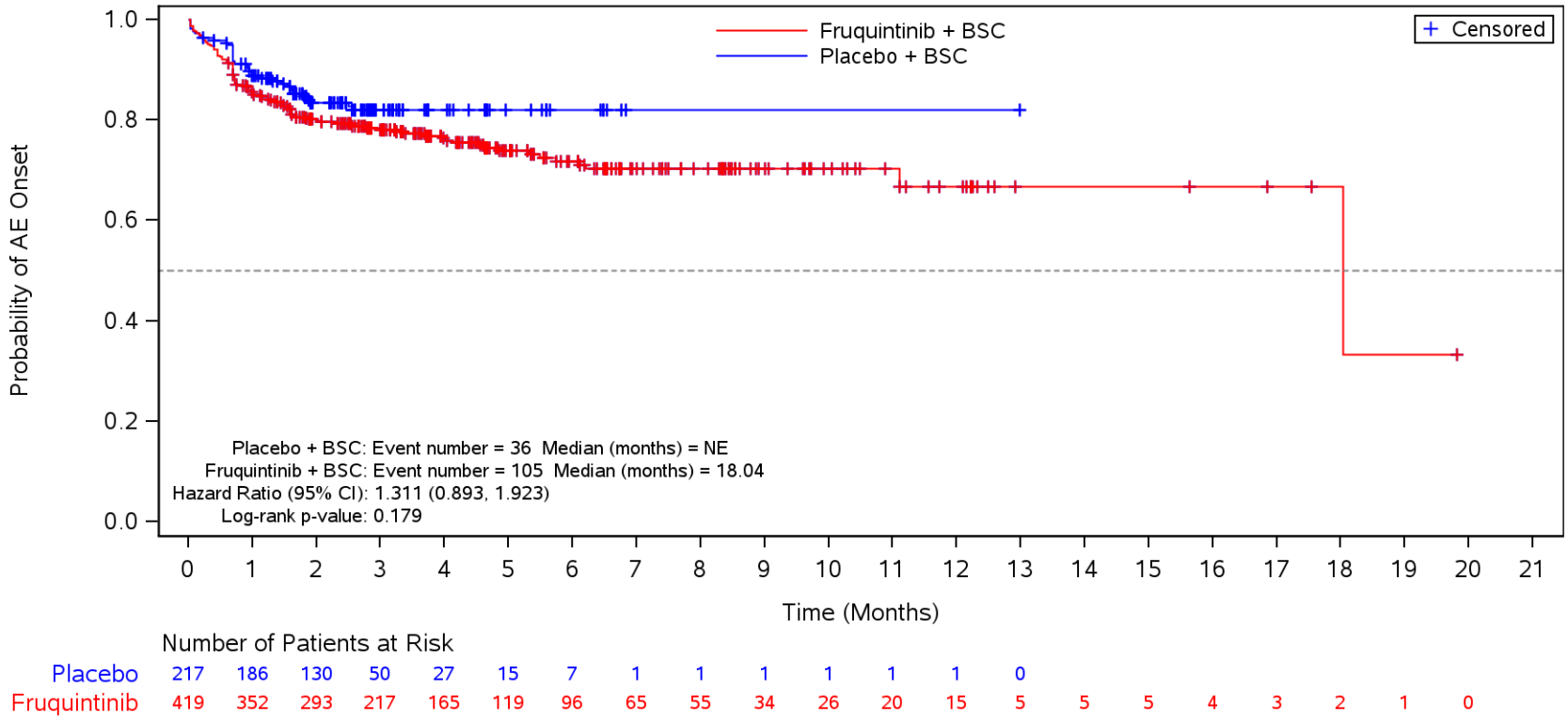
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Skin and subcutaneous tissue disorders** and Preferred Term **Dry skin**
> 18 months



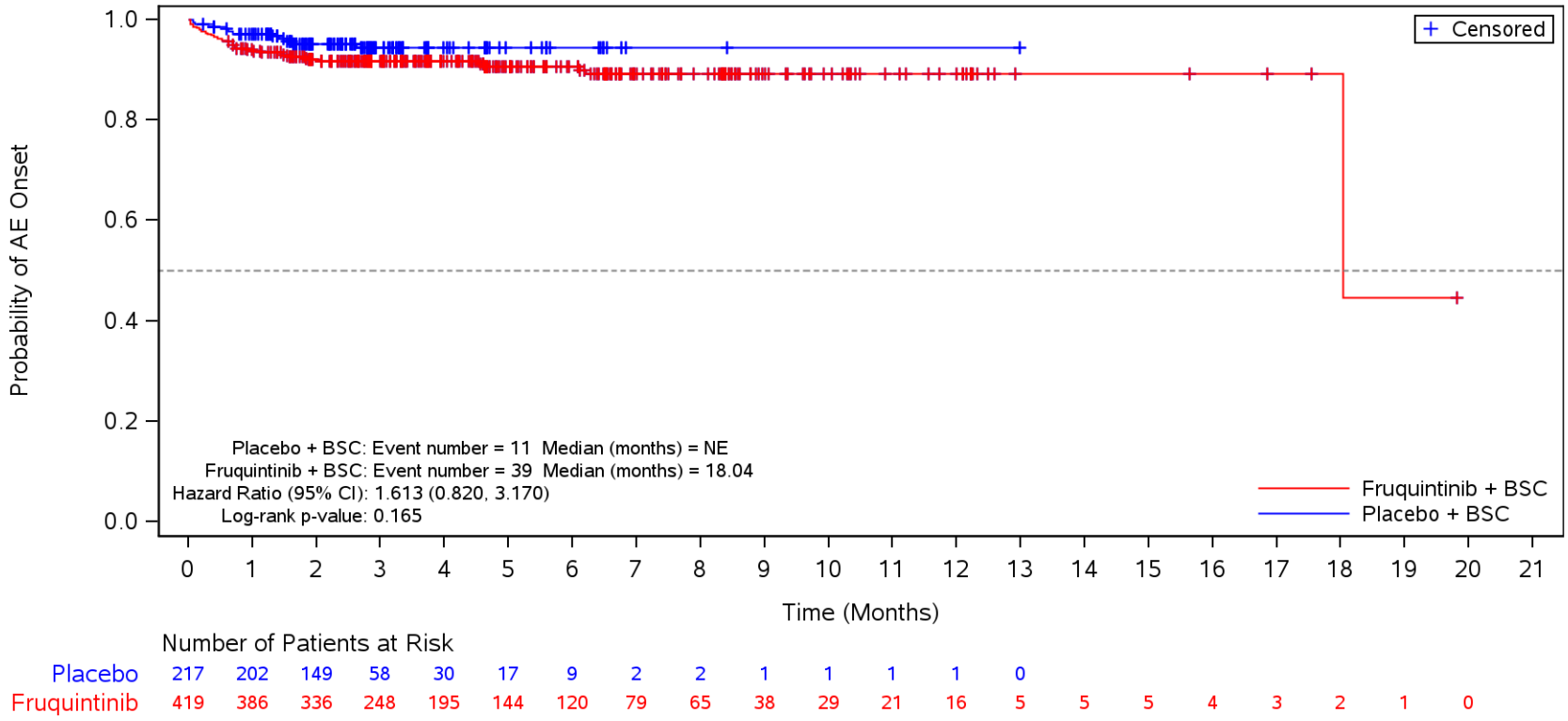
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Nervous system disorders**
> 18 months



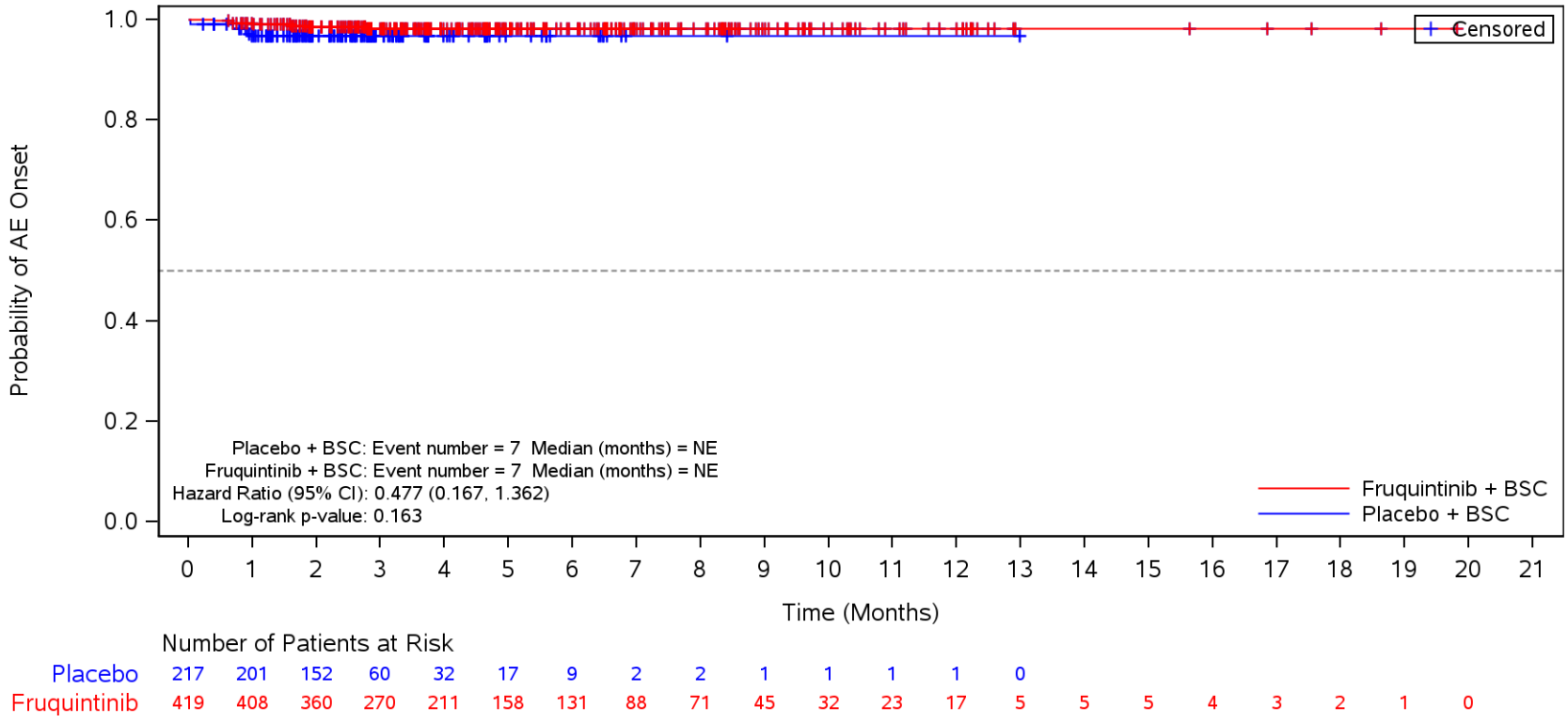
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Headache**
> 18 months



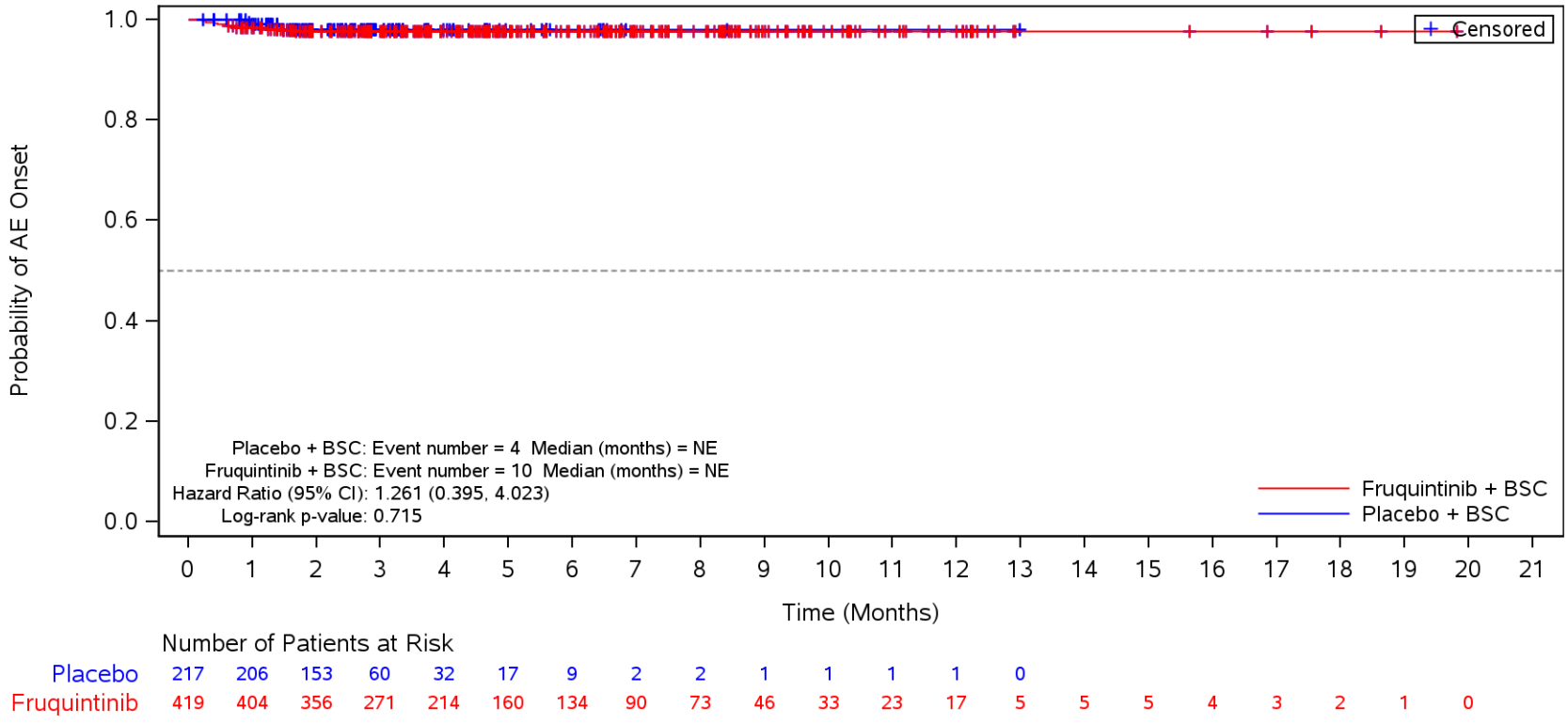
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dysgeusia**
> 18 months



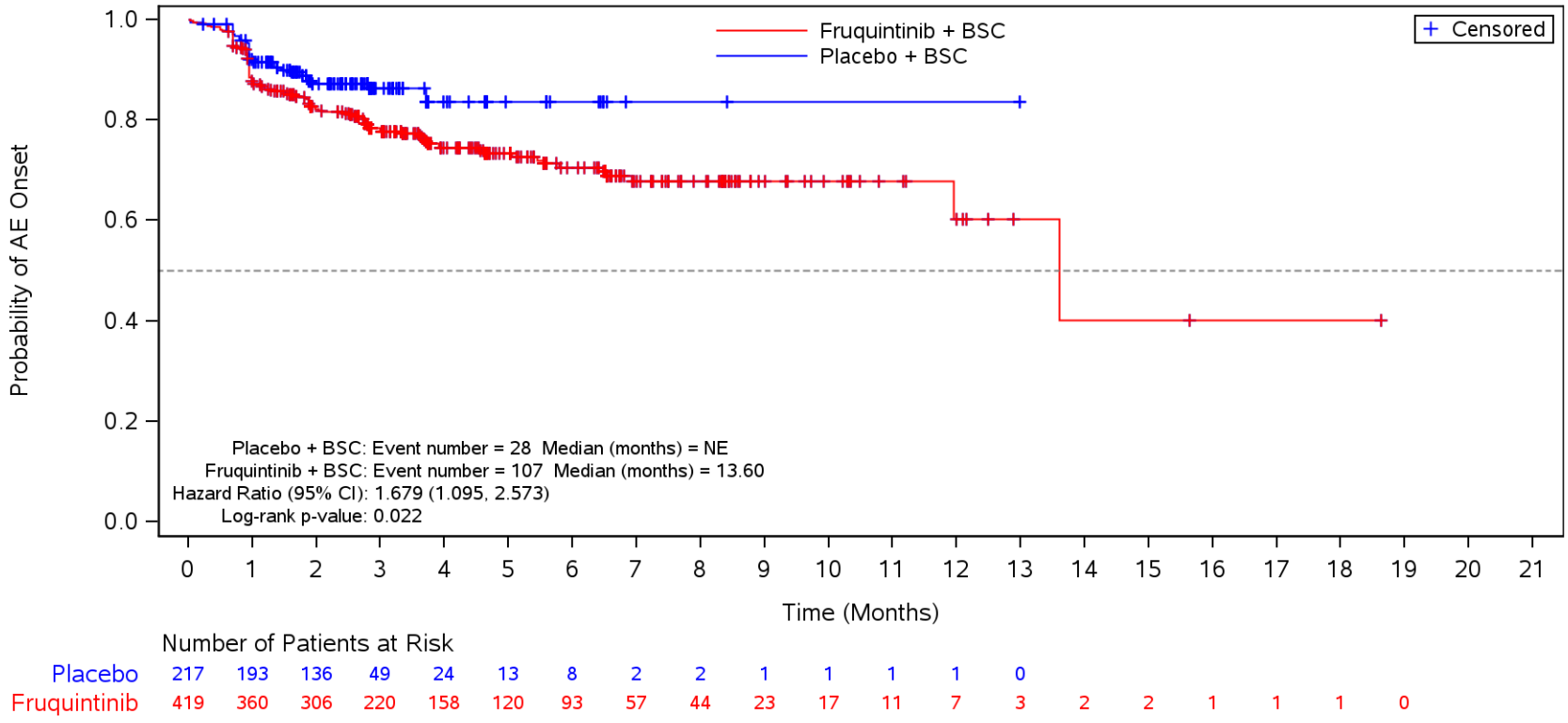
BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Nervous system disorders** and Preferred Term **Dizziness**
> 18 months



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.

Figure 35.1.1.6.1.3F
Kaplan-Meier Plot for Time to Onset of TEAE by SOC/PT by Duration of Metastatic Disease
Safety Population
TEAE in SOC Term **Renal and urinary disorders**
> 18 months



BSC=Best supportive care, TEAE=Treatment Emergent Adverse Event.