

SUPPLEMENTARY MATERIAL

Week 240 Efficacy and Safety of Fostemsavir Plus Optimized Background Therapy in Heavily Treatment-Experienced Adults With HIV-1

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Supplementary Methods

Central laboratory facilities (Laboratory Corporation of America [Indianapolis, IN; Geneva Switzerland; The Synergy, Singapore]) conducted hematology, HIV-1 RNA testing, and other serology. Genotypic and phenotypic analyses were conducted at screening and after protocol-defined virologic failure, and performed by Monogram Biosciences (South San Francisco, CA) using the PhenoSense GT[®] Plus Integrase, PhenoSense[®] Entry, and Trofile[®] Co-receptor Tropism assays. Genotypic susceptibility was evaluated using pre-specified gp160 amino acid substitutions (S375H/I/M/N/T, M426L, M434I/K, M475I) and most relevant substitutions (S375H/I/M/N/Y, M426L, M434K). Phenotypic temsavir susceptibility was evaluated as the fold change in IC₅₀ for a test sample vs a laboratory control of HIV-1, with a >3-fold change in IC₅₀ considered meaningful.

Week 240 statistical analyses were performed by Parexel (Research Triangle Park, NC) and GSK using SAS[®] (SAS Institute, Cary, NC) and TIBCO Spotfire[®] Clinical Graphics (Palo Alto, CA).

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Table S1. Demographic and Baseline Disease Characteristics

Characteristic	Randomized Cohort (N=272)^a	Non-randomized Cohort (N=99)^a	Total (N=371)
Age, y, n (%)			
<35	61 (22)	14 (14)	75 (20)
35 to 49	100 (37)	30 (30)	130 (35)
≥50	111 (41)	55 (56)	166 (45)
Sex, n (%)			
Male	201 (74)	89 (90)	290 (78)
Female	71 (26)	10 (10)	81 (22)
Race (%)			
White	185 (68)	74 (75)	259 (70)
Black or African American	60 (22)	23 (23)	83 (22)
American Indian or Alaska Native	7 (3)	1 (1)	8 (2)
Asian	2 (<1)	0	2 (<1)
Native Hawaiian or Other Pacific Islander	1 (<1)	0	1 (<1)
Other races	17 (6)	1 (1)	18 (5)
HIV-1 RNA, median (IQR), log ₁₀ copies/mL	4.66 (3.87-5.09)	4.31 (3.64-4.77)	4.55 (3.85-5.02)
Baseline HIV-1 RNA, n (%), copies/mL			
<1000	31 (11)	9 (9)	40 (11)
1000 to <10,000	44 (16)	24 (24)	68 (18)
10,000 to <100,000	117 (43)	51 (52)	168 (45)
≥100,000	80 (29)	15 (15)	95 (26)
CD4+ T-cell count, median (IQR), cells/mm ³	99.5 (15-207)	41.0 (6-161)	80.0 (11-202)
Baseline CD4+ T-cell count, n (%), cells/mm ³			
<20	72 (26)	40 (40)	112 (30)
20 to <50	25 (9)	14 (14)	39 (11)
50 to <100	39 (14)	14 (14)	53 (14)
100 to <200	63 (23)	11 (11)	74 (20)
≥200	73 (27)	20 (20)	93 (25)
FAA ARVs in initial OBT, n (%)			
0	15 (6)	79 (80)	94 (25)
1	142 (52)	20 (20) ^b	162 (44)
2	115 (42)	0	115 (31)

ARV, antiretroviral; FAA, fully active and available; OBT, optimized background therapy.

^aN=267 and N=92 at Week 240 after 12 participants completed the study. ^b4 participants had 1 fully active and available ARV at screening, and 16 received ibalizumab, which was still investigational at study start.

Table S2. Proportion of Participants With Virologic Response (HIV-1 RNA <40 Copies/mL) by Baseline HIV-1 RNA and CD4+ T-Cell Count, Snapshot: ITT-E Population^a

Subgroup, n/N (%)	Randomized Cohort (N=272)			Non-randomized Cohort (N=99)		
	Week 144	Week 192	Week 240 ^b	Week 144	Week 192	Week 240 ^c
Baseline HIV-1 RNA, copies/mL						
<1000	18/31 (58)	20/31 (65)	19/30 (63)	5/9 (56)	6/9 (67)	4/7 (57)
1000 to <10,000	28/44 (64)	28/44 (64)	23/42 (55)	11/24 (46)	8/24 (33)	4/23 (17)
10,000 to <100,000	71/117 (61)	70/117 (60)	56/116 (48)	16/51 (31)	15/51 (29)	11/48 (23)
≥100,000	31/80 (39)	27/80 (34)	22/79 (28)	3/15 (20)	3/15 (20)	1/14 (7)
Baseline CD4+ T-cell count, cells/mm ³						
<20	29/72 (40)	32/72 (44)	23/70 (33)	10/40 (25)	10/40 (25)	6/37 (16)
20 to <50	12/25 (48)	10/25 (40)	8/25 (32)	3/14 (21)	2/14 (14)	1/13 (8)
50 to <100	21/39 (54)	17/39 (44)	15/38 (39)	8/14 (57)	6/14 (43)	2/13 (15)
100 to <200	34/63 (54)	38/63 (60)	28/62 (45)	5/11 (45)	5/11 (45)	2/10 (20)
≥200	52/73 (71)	48/73 (66)	46/72 (64)	9/20 (45)	9/20 (45)	9/19 (47)

ITT-E, intention-to-treat exposed.

^aMissing and change in optimized background therapy counted as failure. ^bN=267. ^cN=92.

Table S3. Incidence of PDVF by Baseline Disease Characteristics Through Week 240

Category, n/N (%)^a	Randomized Cohort (N=272)	Non-randomized Cohort (N=99)
Baseline HIV-1 RNA, copies/mL		
<400	4/21 (19)	2/5 (40)
400 to <1000	2/10 (20)	0/4 (0)
1000 to 10,000	8/44 (18)	12/24 (50)
10,000 to <30,000	10/42 (24)	13/25 (52)
30,000 to <100,000	20/75 (27)	18/26 (69)
100,000 to <500,000	23/59 (39)	7/13 (54)
≥500,000	13/21 (62)	1/2 (50)
Baseline CD4+ T-cell count, cells/mm ³		
<20	29/72 (40)	27/40 (68)
20 to <50	8/25 (32)	6/14 (43)
50 to <100	12/39 (31)	6/14 (43)
100 to <200	20/63 (32)	4/11 (36)
200 to <350	8/44 (18)	10/15 (67)
350 to <500	1/14 (7)	0/3 (0)
≥500	2/15 (13)	0/2 (0)
History of AIDS		
Yes	77/231 (33)	50/89 (56)
No	3/41 (7)	3/10 (30)

PDVF, protocol-defined virologic failure.

^aPercentages are based on participants meeting PDVF out of the total number of participants for the particular row (n/N).

Table S4. Quantitative Plasma Viral Loads for Participants Who Included IBA in OBT

Participant	Study days with IBA in OBT		Plasma HIV-1 RNA, copies/mL						
	First	Last	Baseline	Week 24	Week 48	Week 96	Week 144	Week 192	Week 240
Non-randomized Cohort									
1	1	1956	149,227	<40	<40	<40	TND	<40/TND	TND
2	1	1666	220	TND	TND	TND	TND	TND	TND
3	1	1848	22,499	<40	TND	TND	TND	TND	Missing ^a
4	1	1217	1806	TND	<40	TND	TND	TND	Unavailable ^b
5	1	1597	740	TND	TND	TND	TND	TND	Completed ^c
6	1	1573	11,447	44/<40	TND	<40	2290/1910	95,333	Completed ^c
7	1	988	6427	1060	51	40	<40	TND	Completed ^c
8	8	932	1097	13,305	8401	4622/4316	Last observation: Week 132, 8034 copies/mL		
9	1	864	169	582	31,679	33,182	Last observation: Week 120, 5567 copies/mL		
10	1	510	53,430	TND	438/TND	Last observation: Week 72, TND			
11	1	177	39,610	134,480	318,669/343,151	Last observation: Week 48			
12	6	510	9203	<40/<40	<40	Last observation: Week 72, 672 copies/mL			
13	6	610	<40	8825	15,235	Last observation: Week 84, 3343 copies/mL			
14	1	495	112,009	TND	TND	Last observation: Week 48			
15	1	28	1356	Last observation: Week 4, 82 copies/mL					
16	8	142	25,660	Last observation: Week 16, 83 copies/mL					
17 ^d	13	155	16,234	33,543	34,884	32,981	15,864	8022	6937
18 ^d	292	1814	22,074	9424/22,337	<40	<40	TND	TND	<40
19 ^d	415	1437	24,608	63,595	199,246	117,142	100,289	160,174	Unavailable ^e
20 ^d	841	925	40,815	37,176	19,738	50,706	Last observation: Week 120, 21,402 copies/mL		
21 ^d	413	484	42,894	85,379	85,810	Last observation: Week 72, 58,467 copies/mL			
22 ^d	208	585	21,252	28,703	13,760	Last observation: Week 48			
Randomized Cohort									
23 ^d	1217	1791	61,093	236	54	<40/<40	933	<40	3300/6778
24 ^d	1133	1990	52,610	<40	<40	TND	TND	TND	TND
25 ^d	1073	1912	38,019	755	1540/889/325	<40	TND	TND	TND

26 ^d	1101	1907	245,036	112	<40	<40	15,415	<40	<40
27 ^d	991	1998	911,694	630	133	52/516	142,841/443	80,776/16,168	546
28 ^d	1517	1769	91,433	314	121	43	TND	TND	TND

IBA, ibalizumab; OBT, optimized background therapy; TND, target not detected.

^aWeek 240 data missing but later observations recorded. ^bLast observation Week 204, TND. ^cCompleted the study at Week 228. ^dDid not include IBA in initial OBT. ^eLast observation at follow-up visit, 119,202 c/mL.

Table S5. Summary of Emergent Viral Genotypic Substitutions of Interest in gp160: Protocol-Defined Virologic Failure Population Through Week 240^a

n (%)	Randomized	Non-randomized	Total (N=133)
	Cohort (N=80)	Cohort (N=53)	
Sequenced	71 (89)	51 (96)	122 (92)
Pre-specified substitutions ^{b,c}	30 (42)	33 (65)	63 (52)
Most relevant substitutions ^{b,d}	24 (34)	32 (63)	56 (46)
S375	17 (24)	21 (41)	38 (31)
S375H	0	1 (2)	1 (<1)
S375H/N	1 (1)	1 (2)	2 (2)
S375M	0	3 (6)	3 (2)
S375N	8 (11)	8 (16)	16 (13)
S375N/T	1 (1)	2 (4)	3 (2)
S375S/H	1 (1)	0	1 (<1)
S375S/I	0	1 (2)	1 (<1)
S375S/M/T	1 (1)	0	1 (<1)
S375S/N	4 (6)	5 (10)	9 (7)
S375S/T	1 (1)	0	1 (<1)
M426	16 (23)	20 (39)	36 (30)
M426L	10 (14)	13 (25)	23 (19)
M426M/L	6 (8)	7 (14)	13 (11)
M434	6 (8)	4 (8)	10 (8)
M434I	1 (1)	1 (2)	2 (2)
M434K	1 (1)	0	1 (<1)
M434M/I	3 (4)	3 (6)	6 (5)
M434M/I/T	1 (1)	0	1 (<1)
M475	8 (11)	6 (12)	14 (11)
M475I	4 (6)	2 (4)	6 (5)
M475M/I	4 (6)	4 (8)	8 (7)

^aSequencing results at additional on-treatment time points around the time of protocol-defined virologic failure are included where available (not limited to only the protocol-defined virologic failure time point).

^bDenominator for proportions with substitutions is the number sequenced for each cohort and overall.

^cS375H/I/M/N/T, M426L, M434I/K, M475I. ^dS375H/I/M/N/Y, M426L, M434K.

Table S6. Baseline and Last Available CD4+ T-Cell Count for Participants Who Died

Participant	Baseline CD4+ T-cell count, cells/mm³	Last available CD4+ T-cell count, cells/mm³	Day of last available CD4+ T-cell count	Day of study withdrawal	Day of death	Primary cause of death
1	98	160	1387	1632	Unknown	Rectal cancer
2	92	171	1776	1821	1821	Pneumonia
3	80	2	1764	1772	1772	Progression of AIDS disease
4	5	0	1189	1266	1266	Pulmonary septic shock
5	1	4	1008	1112	1112	HIV wasting syndrome
6	28	148	1021	1094	1094	Hodgkin's disease
7	4	1	1010	1089	1089	Respiratory insufficiency possibly due to AIDS-defining illness
8	22	189	840	879	879	Cerebrovascular accident (left middle cerebral artery stroke)
9	349	494	847	875	875	Cholangiocarcinoma
10	249	257	508	736	765	Anal squamous cell carcinoma
11	1	3	577	661	661	Disseminated cytomegaloviral infection
12	0	5	588	660	660	Hodgkin's disease
13	160	172	511	603	603	Pseudomonal sepsis
14	35	18	504	580	580	Sepsis
15	1	2	515	537	537	Hepatic failure (due to hepatitis B)
16	27	30	486	486	535	Squamous cell carcinoma
17	6	34	498	530	530	Cardiovascular disorder
18	173	7	510	510	515	Tonsil cancer
19	1	3	425	511	511	Clostridium difficile colitis

20	7	37	347	504	504	Sepsis
21	166	176	424	466	466	Staphylococcal sepsis
22	42	234	335	392	392	Pulmonary/Cutaneous sepsis
23	3	1	259	277	354	Cytomegalovirus colitis
24	1	4	253	350	350	Acute kidney injury (advanced AIDS)
25	12	37	264	334	334	Septic shock
26	55	55	262	287	287	Progressive multifocal leukoencephalopathy
27	1	1	179	179	228	Pneumonia
28	1	1	121	199	199	Pneumonia
29	2	10	127	160	160	Kaposi's sarcoma
30	4	6	142	158	158	Encephalitis cytomegalovirus
31	1	2	119	142	142	Hepatic failure
32	11	8	83	101	101	Meningoencephalitis viral
33	42	24	15	33	33	Lymphoma
34	1	5	8	32	32	Immune reconstitution inflammatory syndrome
35	14	14	1	11	11	Acute respiratory failure (community-acquired pneumonia)

Figure S1. Participant disposition through the Week 240 database lock. ARV, antiretroviral.

^aThe 2 most common reasons for not meeting study criteria were >2 ARV classes remaining at screening and/or not failing current ARV regimen with a confirmed plasma HIV-1 RNA \geq 400 copies/mL. ^b80 participants completed the study by the time of the Week 240 database lock, though only 12 did so before their Week 240 observations. ^cPrimary reasons listed. Each participant may have only 1 primary reason. ^dA total of 35 participants died. Death was recorded as the reason for withdrawal in 28/35 cases. ^eOther reasons for discontinuation were investigator decision, HIV resistance, investigator discretion due to the rapid progression of participant's malignancy, and participant developed transportation obstacles preventing ongoing participation.

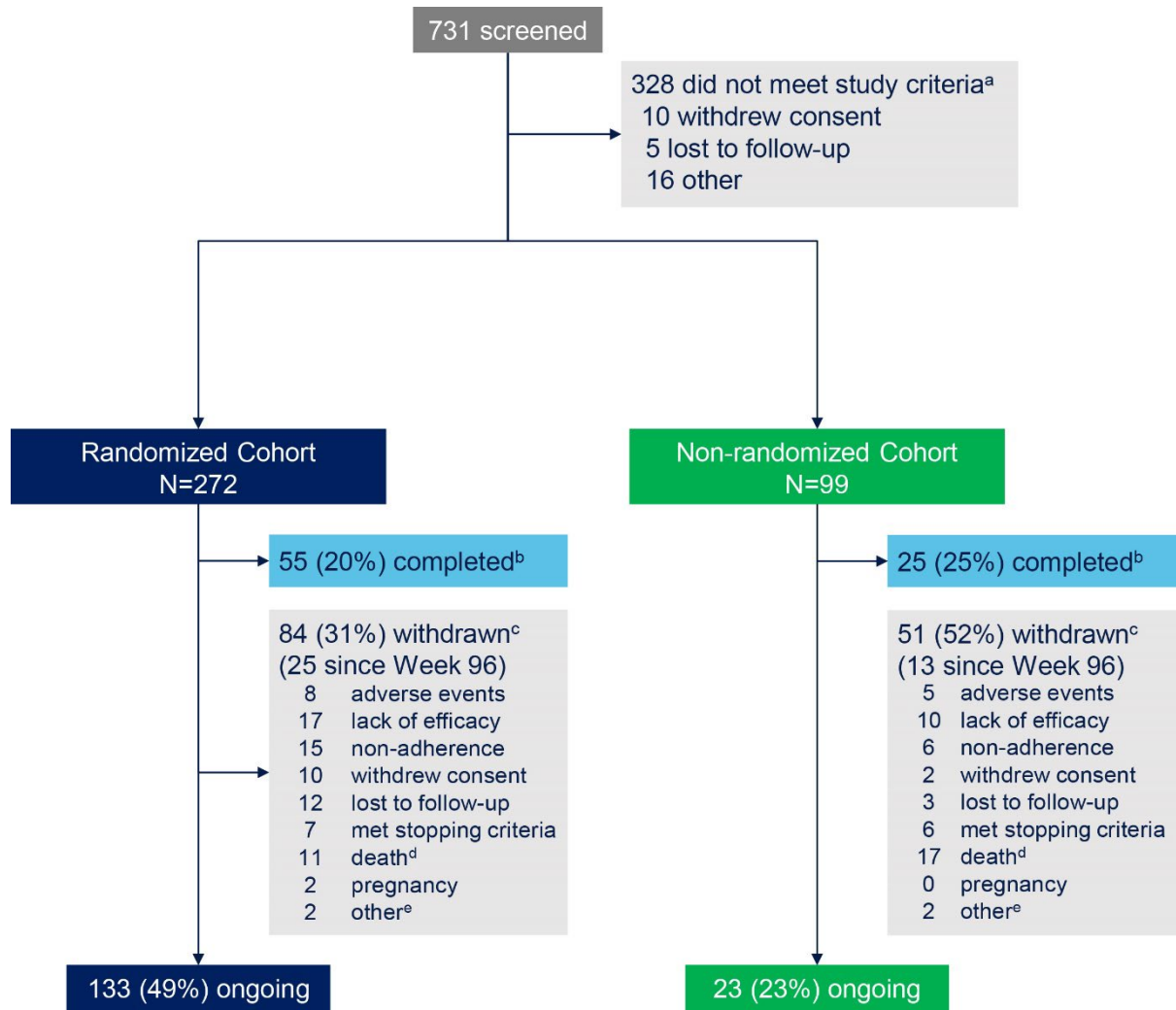


Figure S2. Proportion of participants with virologic response (HIV-1 RNA <40 copies/mL) at Weeks 192 and 240 by initial OBТ, intention-to-treat–exposed population (Snapshot analysis). The 12 participants who completed before the Week 240 analysis were excluded. IBA, ibalizumab; INSTI, integrase strand transfer inhibitor; MVC, maraviroc; NNRTI, non-nucleoside reverse transcriptase inhibitor; NRTI, nucleoside reverse transcriptase inhibitor; OBТ, optimized background therapy; PI, protease inhibitor; T20, enfuvirtide. ^aIBA was an investigational agent at the beginning of BRIGHTE and was not available to the Randomized Cohort as part of their initial OBТ. After regulatory approval of IBA, 6 participants in the Randomized Cohort added IBA to their OBТ.

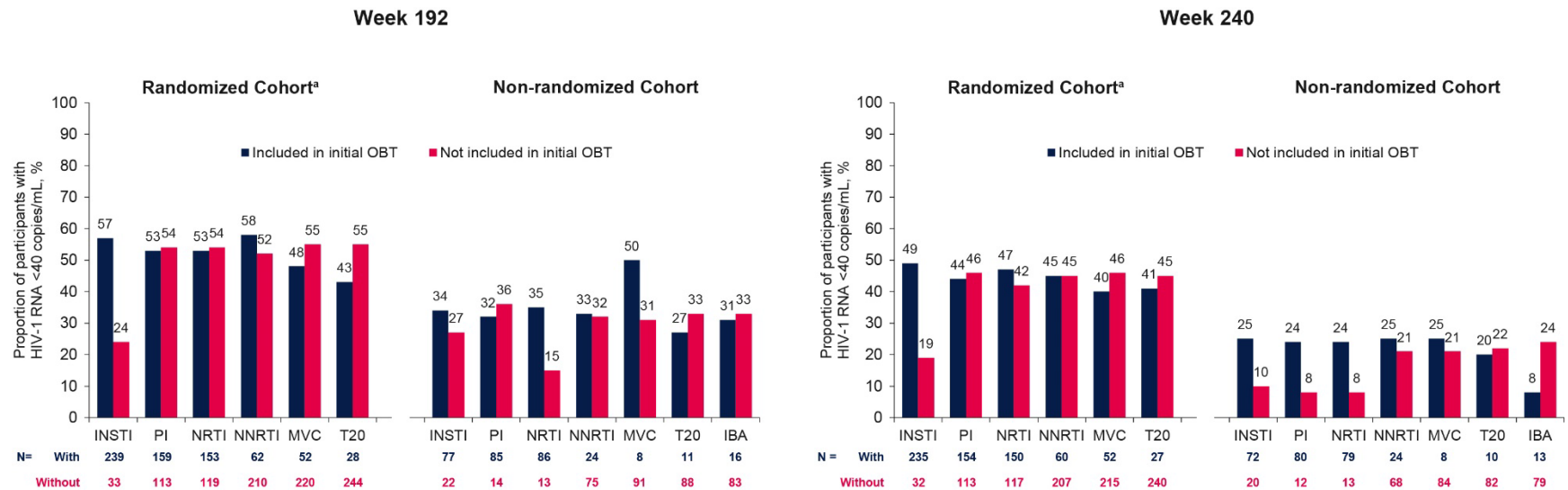


Figure S3. Change in CD4+ T-cell count from baseline to Week 240 by **(a)** baseline CD4+ T-cell count, **(b)** baseline viral load, and **(c)** virologic response at the same time point (Randomized Cohort, observed analysis). Mean baseline CD4+ T-cell count by baseline viral load subgroup was <1000 copies/mL: 388.7 cells/mm³; 1000 to <10,000 copies/mL: 200.4 cells/mm³; 10,000 to <100,000 copies/mL: 135.3 cells/mm³; ≥100,000 copies/mL: 59.9 cells/mm³.

