## **Electronic Supplementary Material**

**Title:** Patterns of occurrence and implications of neratinib-associated diarrhea in patients with HER2positive breast cancer: analyses from the randomized phase 3 ExteNET trial

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## Supplementary Table 1. Diarrhea grading (National Cancer Institute Common Terminology Criteria, version 3.0)

Grade	Description
1	Increase of <4 stools per day or mild increase in ostomy output compared with baseline
2	Increase of 4–6 stools per day or moderate increase in ostomy output compared with baseline, intravenous fluids <24 hours, and no interference with activities of daily living
3	Increase of $\geq$ 7 stools per day or severe increase in ostomy output compared with baseline, incontinence, intravenous fluids $\geq$ 24 hours, hospitalization, and interference with activities of daily living
4	Life-threatening consequences (e.g. hemodynamic collapse) or death

Characteristic	Neratinib ( <i>N</i> = 1420)	Placebo ( <i>N</i> = 1420)
Region		
North America	519 (37)	477 (34)
Western Europe, Australia, New Zealand and South Africa	487 (34)	532 (38)
Asia Pacific, East Europe and South America	414 (29)	411 (29)
Race		
White	1165 (82)	1135 (80)
Black	27 (2)	47 (3)
Asian	188 (13)	197 (14)
Other	40 (3)	41 (3)
Age at randomization, years		
<35	46 (3)	55 (4)
35–49	523 (37)	515 (36)
50–59	497 (35)	488 (34)
≥60	354 (25)	362 (26)
Age, years		
Median (range)	52.0 (25.0-83.0)	52.0 (23.0-82.0
Menopausal status at diagnosis		
Premenopausal	663 (47)	664 (47)
Postmenopausal	757 (53)	756 (53)
Nodal status <sup>b</sup>		
Negative	335 (24)	336 (24)
1–3 positive nodes	664 (47)	664 (47)
$\geq$ 4 positive nodes	421 (30)	420 (30)
Hormone receptor status <sup>b</sup>		
Positive (ER and/or PR positive)	816 (58)	815 (57)
Negative (ER and PR negative)	604 (43)	605 (43)
Prior trastuzumab regimen <sup>b</sup>		
Concurrent	884 (62)	886 (62)
Sequential	536 (38)	534 (38)
T category		
T1	440 (31)	459 (32)
T2	585 (41)	555 (39)
T3 and above	144 (10)	117 (8)
Unknown	250 (18)	288 (20)
Missing	1 (<1)	1 (<1)
Histologic grade of tumor		
Undifferentiated/poorly differentiated	670 (47)	689 (49)

## Supplementary Table 2. Baseline characteristics of patients (intention-to-treat population)<sup>a</sup>

			11 6 (20)
	oderately differentiated	461 (33)	416 (29)
W	ell differentiated	76 (5)	65 (5)
Uı	nknown	213 (15)	241 (17)
Prior surge	ry		
Lı	impectomy only	468 (33)	511 (36)
М	astectomy	951 (67)	908 (64)
М	issing	1 (<1)	1 (<1)
Prior radiot	therapy		
Ye	es	1130 (80)	1150 (81)
No	0	290 (20)	270 (19)
Prior (neo)a	adjuvant therapy <sup>c</sup>		
Yes		1420 (100)	1420 (100)
Tr	rastuzumab	1420 (100)	1420 (100)
Aı	nthracycline only	136 (10)	135 (10)
Aı	nthracycline plus taxane	962 (68)	965 (68)
Ta	axane only	318 (22)	316 (22)
No	on-anthracycline or taxane	4 (<1)	4 (<1)
Duration of	f prior adjuvant trastuzumab therapy, months	<i>N</i> = 1413	<i>N</i> = 1416
Median (IQ	)R)	11.5 (10.9-11.9)	11.4 (10.8-11.9)
Time since	last dose of trastuzumab to randomization, months		
Median (IQ	(R)	4.4 (1.6-10.4)	4.6 (1.5-10.8)
Concomitat disease <sup>d</sup>	nt endocrine therapy for patients with hormone-positive		
No		56 (7)	51 (6)
Yes		760 (93)	764 (94)
Aı	nti-estrogen only	375 (46)	347 (43)
Aı	nti-estrogen and aromatase inhibitor (sequential)	20 (3)	34 (4)
Aı	romatase inhibitor only	362 (44)	379 (47)
No	on-anti-estrogen or aromatase inhibitor	3 (<1)	4 (<1)

Data are N(%), unless otherwise stated.

ER, estrogen receptor; IQR, interquartile range; PR, progesterone receptor.

<sup>a</sup>Because of rounding, not all percentages total to 100.

<sup>b</sup>Stratification factor collected from the interactive voice- and web-response system. For nodal status, the number of positive nodes was recorded at the time of initial diagnosis (for those who received adjuvant therapy) or surgery (for those who received neoadjuvant therapy). Patients with residual invasive disease in the breast but node negative or unknown nodal status in the axilla after neoadjuvant therapy were included under "1–3" positive nodes.

<sup>c</sup>Percentage is based on the number of patients with hormone receptor-positive disease. Tumors were assessed as being ER or PR positive based on local pathology laboratory cut-offs. There was no protocol specification as to whether a 1% or 10% threshold should be used.

<sup>d</sup>Proportion of patients who received neoadjuvant chemotherapy in the neratinib group was 25% and in the placebo group it was 27%.

	Neratinib	Placebo
	$(N = 1408)^{a}$	( <i>N</i> = <b>1408</b> )
Grade 1 or no diarrhea, N	388	1291
Median (IQR) treatment duration, months	11.7 (5.1–12.0)	11.8 (11.5–12.0)
Mean (SD) relative dose intensity, %	96 (10)	98 (5)
Dose reduction, $N(\%)$	52 (13)	96 (7)
Dose hold, $N(\%)$	154 (40)	554 (43)
Grade 2 diarrhea, N	458	94
Median (IQR) treatment duration, months	11.7 (3.2–12.0)	11.9 (11.5–12.0)
Mean (SD) relative dose intensity, %	90 (15)	97 (5)
Dose reduction, $N(\%)$	150 (33)	11 (12)
Dose hold, $N(\%)$	278 (61)	55 (59)
Grade 3 diarrhea, N	561	23
Median (IQR) treatment duration, months	11.5 (1.3–11.9)	11.6 (11.0–11.9)
Mean (SD) relative dose intensity, %	80 (21)	96 (7)
Dose reduction, $N(\%)$	317 (57)	2 (22)
Dose hold, $N(\%)$	417 (74)	14 (61)

Supplementary Table 3. Drug exposure by diarrhea grade (safety population)

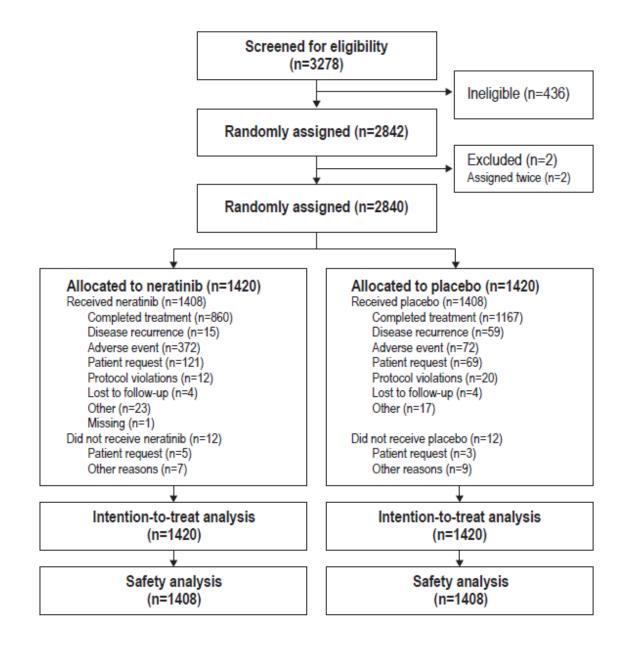
IQR, interquartile range; SD, standard deviation.

<sup>a</sup>In the neratinib group, 1 patient with grade 4 diarrhea was excluded.

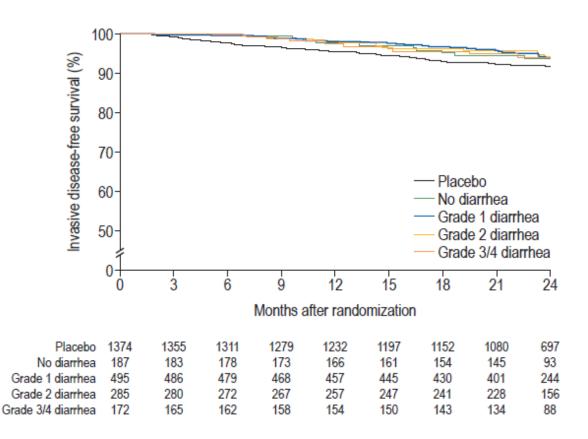
		Neratinib	Placebo ( <i>N</i> = 1408)
Parameter, N (%)	Normal range	( <i>N</i> = <b>1408</b> )	
Albumin	35–50 g/L	<i>N</i> = 1384	<i>N</i> = 1389
High		86 (6)	104 (8)
Low		103 (7)	91 (7)
Blood urea nitrogen	3.6-7.1 mmol/L	<i>N</i> = 700	<i>N</i> = 703
High		237 (34)	221 (31)
Low		212 (30)	242 (34)
Calcium	2.25–2.62 mmol/L	<i>N</i> = 1405	<i>N</i> = 1407
High		52 (4)	72 (5)
Low		687 (49)	604 (43)
Creatinine	44–97 Umol/L	<i>N</i> = 1403	<i>N</i> = 1407
High		176 (13)	129 (9)
Low		62 (4)	100 (7)
Lactate dehydrogenase	105–333 U/L	<i>N</i> = 1394	<i>N</i> = 1400
High		348 (25)	370 (26)
Low		25 (2)	32 (2)
Magnesium	0.65-1.0 mmol/L	<i>N</i> = 1392	<i>N</i> = 1400
High		72 (5)	84 (6)
Low		100 (7)	71 (5)
Phosphate	0.97-1.45 mmol/L	<i>N</i> = 1386	<i>N</i> = 1398
High		161 (12)	196 (14)
Low		630 (46)	604 (43)
Potassium	3.5–5 mmol/L	<i>N</i> = 1406	<i>N</i> = 1407
High		158 (11)	176 (13)
Low		105 (8)	111 (8)
Sodium	136–145 mmol/L	<i>N</i> = 1407	<i>N</i> = 1407
High		146 (10)	150 (11)
Low		162 (12)	153 (11)

Supplementary Table 4. Blood chemistry results outside of normal range (safety population)

## Supplementary Fig 1. ExteNET CONSORT flowchart

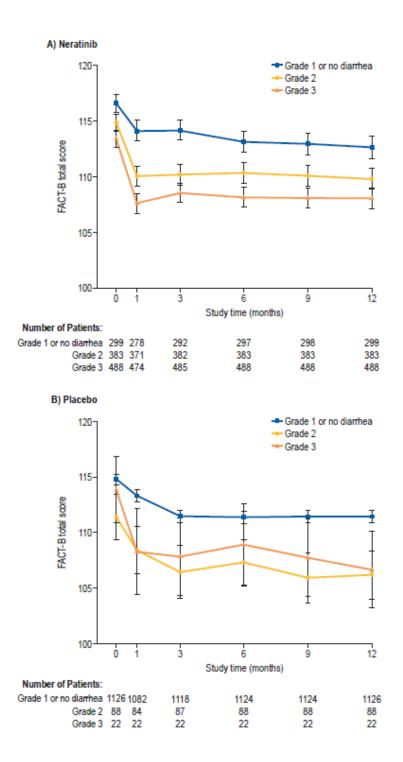


Supplementary Fig 2. Kaplan-Meier curves of invasive disease-free survival by worst grade of diarrhea experienced by patients in the neratinib group in the first 7 days (intention-to-treat population with a treatment duration >1 month)



Invasive disease-free survival defined as the time from randomization to first occurrence of invasive ipsilateral tumor recurrence, invasive contralateral breast cancer, local/regional invasive recurrence, distant recurrence, or death from any cause.

Supplementary Fig 3. Mean (± standard deviation) Functional Assessment of Cancer Therapy – Breast (FACT-B) total scores over time by diarrhea grade for (A) neratinib and (B) placebo with last observation carried forward



Minimally important difference: 7-8 points. A higher score indicates better quality of life.