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Supplementary Materials

Supplement to: Drug–Drug Interaction Potential of Darolutamide: *In Vitro* and Clinical Studies.

Christian Zurth¹ · Mikko Koskinen² · Robert Fricke³ · Olaf Prien¹ · Timo Korjamo² · Kristina Graudenz¹ · Karsten Denner¹ · Michaela Bairlein³ · Clemens-Jeremias von Bühler³ · Gary Wilkinson¹ · Hille Gieschen¹

¹Bayer AG, Berlin, Germany; ²Orion Corporation Orion Pharma, Espoo, Finland, ³Bayer AG, Wuppertal, Germany.

Table of Contents

Table S1 Suppliers of materials for <i>in vitro</i> studies 3
Table S2 Blood and urine sampling schedules for phase I clinical trials with (a) a
strong CYP3A4/P-gp and BCRP inhibitor and a CYP3A4 / P-gp inducer, (b)
CYP3A4 and P-gp substrates, and (c) a substrate for BCRP, OATP1B1,
OATP1B3, and OAT38
Table S3 <i>In vitro</i> analysis of UGT isoform inhibition by (<i>S</i> , <i>R</i>)-darolutamide, (<i>S</i> , <i>S</i>)-
darolutamide, and keto-darolutamide in human liver microsomes using standard
substrates
Table S4 Potential risk for DDI induction with darolutamide in the clinic using the
RIS method

Table S5 Summary of PK data from the phase I studies: (a) effect of itraconazole
and rifampicin on the pharmacokinetics of darolutamide, its diastereomers, and
keto-darolutamide, (b) effect of rosuvastatin coadministration on the
pharmacokinetics of darolutamide, its diastereomers, and keto-darolutamide, and
(c) effect of darolutamide coadministration on pharmacokinetic parameters of
dabigatran, midazolam, and rosuvastatin
Table S6 Summary of the DDI potential of darolutamide and AR inhibitors with
CYP enzymes and drug transporters [1-7]
Fig. S1 In vitro effects of darolutamide on efflux transporters (a) P-gp, with digoxin
as the probe substrate, and (b) BCRP, with cladribine as the probe substrate 38
Fig. S2 Mean plasma concentration-time profiles of (a) darolutamide and (b) keto-
darolutamide after multiple oral doses of 600 mg BID (Day 7) and given in
combination with a single oral dose of 5 mg rosuvastatin (Day 8) in Treatment
Period 2 (N = 29)
Supplementary Methods: Bioanalytical Methods used in the Phase I Clinical Trials
References

Table S1 Suppliers of materials for *in vitro* studies

Study	Material	Supplier				
Substrate characteristics for drug metabolizing enzymes	Human male hepatocytes	Bioreclamation IVT, Baltimore, MD, USA; Triangle Research Labs, Triangle Research				
	Donor 1 HH-TWT, Donor 2 HH-TZU, Donor 3 HH-4070B	Park, NC, USA				
	Pooled human renal microsomes (15 mixed gender donors): lot 510251	Xenotech LLC, Lenexa, KS, USA				
	Pooled human liver cytosol (200 mixed gender donors): lot 1310087, 1410012					
	Pooled human liver microsomes (200 mixed gender donors): Xtreme 200 lot 1010420 and lot 1210223					
	Pooled human intestinal microsomes (15 mixed gender donors): lot 510408					
	Human liver microsomes (single donor): HH13, H023, HK25, H030, H032, H066, H088, H089, H093	BD Gentest Corp., Woburn, MA, USA				

	Recombinant CYP isoforms; Supersomes™	Corning, Woburn, MA, USA		
	Recombinant AKR isoforms	Bayer AG, Berlin, Germany		
	UDPGA	Sigma-Aldrich GmbH, Steinheim, Germany		
Substrate characteristics for drug transporters	Caco-2, CPT-B1 and CPT-P1 cells	American Type Culture Collections, Rockville, MD, USA		
	BCRP-MDCK cells	Absorption Systems, Exton, PA, USA		
	Atorvastatin, cladribine, cyclosporin A, digoxin, Ko143 and rifamycin; HEK cells	Sigma, St Louis, MO, USA		
	Decynium 22	Sigma-Aldrich GmbH, Steinheim, Germany		
	³ H-MPP+	American Radiolabeled Chemicals, St Louis, MO, USA		
Inhibitory potential of darolutamide for CYP isoforms	Pooled human liver microsomes Xtreme 200 lot 1210223 (200 mixed gender donors) and lot TWE (25 mixed gender donors)	In Vitro Technologies, Inc, Baltimore, MD and XenoTech LLC, Lenexa, KS, USA);		

	Bufuralol, bupropion, coumarin, diclofenac, paclitaxel, phenacetin, <i>S</i> -mephenytoin,	Sigma-Aldrich GmbH, Steinheim, Germany
	Chlorzoxazone, testosterone,	Acros Organics, Geel, Belgium
	Midazolam	Fagron BV, Nieuwerkerk a/d IJssel, The Netherlands
	NADPH	Sigma, Zwijndrecht, The Netherlands
Inhibitory potential of darolutamide for UGT isoforms	Pooled human liver microsomes Xtreme 200 lot 1210223 (200 mixed gender donors) and lot 1010420 (200 mixed gender donors)	BD Biosciences, Woburn, MA, USA
	Pooled human liver microsomes UltraPool [™] HLM 150 lot 38290 (150 mixed gender donors)	
	Single donor: HH13, H023, HK25, H030, H032, H066, H088, H089, H093	
	UGT-selective substrates	
Induction potential of darolutamide for CYP isoforms	Primary-cultured human hepatocytes	Triangle Research Labs, LLC, NC and Bioreclamation IVT, LLC, NY, USA

	Donor 1 lot no. HUM4082A (male), Donor 2 lot no. HUM4112 (female), Donor 3 lot no. OII (female)	
	Omeprazole, penicillin, phenacetin, phenobarbital, pioglitazone, rifampicin	Sigma-Aldrich GmbH, Steinheim, Germany
	S-mephenytoin	Enzo Life Sciences GmbH, Lörrach, Germany
	Testosterone	Fluka, Munich, Germany
	Bosentan	USP, Maryland, United States
Inhibitory potential of darolutamide for drug transporters	Caco-2 cells	American Type Culture Collections, Rockville, MD, USA
	MDCK cells	Absorption Systems, Exton, PA, USA
	Sandwich-cultured human hepatocytes	Triangle Research Labs, LLC, NC, USA
	HEK cells (Cat# CRL-1573™)	American Type Culture Collections, Rockville, MD, USA

Atorvastatin, cladribine, digoxin, imipramine, MMP ⁺ , <i>p</i> -aminohippuric acid, probenecid	Sigma, St Louis, MO, USA
Taurocholic acid	Matrix Scientific, Columbia, SC, USA
5(6)-carboxy-2,'7'-dichlorofluorescein, benbromarone, cimetidine, cyclosporin A, decynium 22, estrone-3-sulfate, furosemide, gilbenclamide, metformin, pravastatin, pyrimethamine, rifamycin	Sigma Aldrich, Deisenhofen, Germany
2	

³H-MMP+

American Radiolabeled Chemicals, St Louis, MO, USA

³H-MPP+, ³H-N-Methyl-4-phenylpyridinium; AKR, aldo-keto reductase; BCRP, breast cancer resistance protein; Caco-2, wildtype human colon adenocarcinoma; CPT-B1 cells,

proprietary cell line with reduced expression on human BCRP; CPT-P1 cells, proprietary cell line with reduced expression on human P-gp; CYP, cytochrome P450; MDCK,

Madin-Darby Canine Kidney; NADPH, nicotinamide adenine dinucleotide phosphate; P-gp, P-glycoprotein; UDPGA, uridine 5'-diphospho-glucuronic acid; UGT, uridine-

diphosphate glucuronosyltransferase.

Table S2 Blood and urine sampling schedules for phase I clinical trials with (a) a strong CYP3A4/P-gp and BCRP inhibitor and a CYP3A4 / P-gp inducer, (b) CYP3A4 and P-gp substrates, and (c) a substrate for BCRP, OATP1B1, OATP1B3, and OAT3

(a)

Study Period Study Tim Day(s) relat darolu dos (ho	Study	Time in	Study d	lrug administra	ntion ^a	F	Blood / urine		
	relation to darolutamide dosing (hours)	Darolutamide	Itraconazole	Rifampicin	Darolutamide PK	ltraconazole PK	Rifampicin PK	samples for laboratory examination	
Screening	Days –28 to –1								X
	Day –1	Pre-dose (morning)							X
Period 1:	Day 1	-0.5 0	x			X			X

Study Period	Study	Time in	Study d	Study drug administration ^a			Plasma samples		
	Day(s)	relation to darolutamide dosing (hours)	Darolutamide	Itraconazole	Rifampicin	Darolutamide PK	ltraconazole PK	Rifampicin PK	samples for laboratory examination
Darolutamide reference period		0.5				Х			
		1.5				x			
		2.5				x			
		3 4				x x			Xp
		6				Х			
		8				X			
	Day 2	0				x			

Study Period	Study	Time in	Study drug administration ^a		F	Blood / urine			
	Day(s)	relation to							samples for
		darolutamide	Darolutamide	Itraconazole	Rifampicin	Darolutamide	Itraconazole	Rifampicin	laboratory
		dosina				РК	РК	РК	examination
		(here)							cxumnuton
		(nours)							
		10				×			
		12				^			
	Day 3	0				x			x
	Day 5	0				~			~
		12				×			
	Dav 4	0				x			х
	,								
Period 2:	Day 1	0		Х					Xc
darolutamide	-								
+ itraconazole		12		X					
	Day 2	0		X					
	Day 3	0		Х					
	Day 4	0		X					X ^{b,c}
	Day 5	-0.5				X	Х		Х
			X						
		U	X	X					
		0.5				~			
		0.5				^			
					l				

Study Period	Study	Time in	Study drug administration ^a		F	Blood / urine			
	Day(s)	relation to							samples for
		darolutamide	Darolutamide	Itraconazole	Rifampicin	Darolutamide	Itraconazole	Rifampicin	laboratory
		dosing				РК	РК	РК	examination
		(hours)							
		(
		1				Х			
		1.5				Х			
		2				х			
		2.5				х			
		3				х			
		4				х			Xp
		6				х			
		8				х			
		12				х			
	Day 6	0		x		Xc	Xc		Xc
		12				х			
	Day 7	0		X		Xc	Xc		Xc
I	I	I	l	I	I	l	l	I	I

Study Period	Study	Time in	Study drug administration ^a		F	Blood / urine			
	Day(s)	relation to					samples for		
		darolutamide	Darolutamide	Itraconazole	Rifampicin	Darolutamide	Itraconazole	Rifampicin	laboratory
		dosina				РК	PK	PK	examination
		uosing							examination
		(hours)							
		12				X			
		_							
	Day 8	0				X	Х		X
Period 3:	Day 1	0			X				Xc
darolutamide									
+ rifampicin	Day 2	0			Х				
-									
	Day 3	0			X				
		_							
	Day 4	0			X				X ^b
		-							
	Day 5	0			X				
					Ň				
	Day 6	0			X				
	D 7				N N) (h
	Day 7	0			X				X
	Durin	0.5				X		X	X
	Day 8	-0.5				X		X	X
			v						
		0	X						
		0.5				×			
		0.5				X			
					l				

Study Period	Study	Time in	Study drug administration ^a			F	Blood / urine		
	Day(s)	relation to							samples for
		darolutamide	Darolutamide	Itraconazole	Rifampicin	Darolutamide	Itraconazole	Rifampicin	laboratory
		dosing				PK	PK	PK	examination
		(hours)							
		(
		1				Х			
		2				х			
		2.5				х			
		3				х			
		4				х			Xp
		6				х			
		8				х			
		12			х	Xc			
	Day 9	0			х	Xc		Xc	x
		12				х			
	Day 10	0			х	Xc		Xc	x
		12				х			
l		I		I	I			l	I

Study Period	Study	Time in	Study d	lrug administra	ation ^a	F	Blood / urine		
	Day(s)	Day(s) relation to darolutamide dosing (hours)	Darolutamide	Itraconazole	Rifampicin	Darolutamide PK	Itraconazole PK	Rifampicin PK	laboratory examination
	Day 11	0				X		X	X
Follow-up	Day 14 ± 3 ^d								X

Study Period	Study	Time in	Study	y drug administr	ation ^a	Blood samples		Blood / urine
Screening	Day(s)	Days –28	Darolutamide	Midazolam	Dabigatran	Midazolam PK	Dabigatran PK	laboratory examination
Screening	Days –28 to –1 Day –1	Pre-dose (morning)						x
Period 1: midazolam and dabigatran reference period	Day 1	-0.5 ^e 0 0.25 0.5 1 1.5		X	X	x x x x x x	x x x x x x	X

Study Period	Study	Time in	Study drug administration ^a			Blood	Blood / urine	
	Day(s)	relation to						samples for
		darolutamide	Darolutamide	Midazolam	Dabigatran	Midazolam PK	Dabigatran PK	laboratory
		dosing						examination
		(hours)						
		2				Х	Х	
		2.5				х	Х	
		3				х	х	
		4				х	x	
		5				х	х	
		6				х	x	
		8				х	x	
		10				x	х	
		12				x	x	
		15				x	x	
	Day 2	0				x	x	Xp
		12					x	
	l			I			I	l

Study Period	Study	Time in	Study drug administration ^a			Blood	Blood / urine	
	Day(s)	relation to			-			samples for
		darolutamide	Darolutamide	Midazolam	Dabigatran	Midazolam PK	Dabigatran PK	laboratory
		dosing						examination
		(hours)						
	Day 3	0					X	
	Day 4	0					Х	
Period 2:	Day 1	-1						X ^f
darolutamide +								
dabigatran +		0	Х					
midazolam		12	Y					
		12	~					
	Day 2	0	Х					
		12	х					
	Day 3	_15			x		Xc	Xc
	Dayo	1.0						
		-1.25					х	
		-1					х	
		-0.5					x	
		0	х				Xe	

Study Period	Study	Time in	Study drug administration ^a			Blood	Blood / urine	
	Day(s)	relation to						samples for
		darolutamide	Darolutamide	Midazolam	Dabigatran	Midazolam PK	Dabigatran PK	laboratory
		dosing						examination
		(hours)						
		0.5					Xc	
		1					x	
		1.5					x	
		2						
		2.5					x	
		3.5					x	
		4.5					x	
		6.5					x	
		8.5					x	
		10.5					x	
		12	х					
		13.5					x	
I	I				l		I	l

Study Period	Study	Time in	Study	y drug administra	ation ^a	Blood	Blood / urine	
	Day(s)	relation to						samples for
		darolutamide	Darolutamide	Midazolam	Dabigatran	Midazolam PK	Dabigatran PK	laboratory
		dosing						examination
		(hours)						
	Day 4	-1.5					Х	
		0	Х					X ^{b,c}
		10.5					x	
		12	Х					
	Day 5	-1.5					x	
		0	Х					
		12	х					
	Day 6	-1.5					x	
	,							
		-0.5						X ^{b,e}
		0	Х					
		12	Х					
	Day 7	0	х					

Study Period	Study	Time in	Study drug administration ^a			Blood samples		Blood / urine
	Day(s)	relation to						samples for
		darolutamide	Darolutamide	Midazolam	Dabigatran	Midazolam PK	Dabigatran PK	laboratory
		dosing						examination
		(hours)						
		12	Х					
	Day 8	0	Х					
		12	х					
	Day 9	-0.5						Xe
		0	х	х	х	Xc	Xc	
		0.25				х	Х	
		0.5				Х	Х	
		1				Х	Х	
		1.5				Х	Х	
		2				Х	Х	
		2.5				X	Х	
		3				X	Х	
I	I						ļ	l

Study Period	Study	Time in	Study	y drug administra	ation ^a	Blood samples		Blood / urine
	Day(s)	relation to						samples for
		darolutamide	Darolutamide	Midazolam	Dabigatran	Midazolam PK	Dabigatran PK	laboratory
		dosing						examination
		(hours)						
		4				Х	Х	
		5				x	х	
		6				x	х	
		8				x	х	
		10				x	х	
		11.5						
		12	х			Xc	Xc	
		15				x	х	
	Day 10	0	х			Xc	Xc	X ^{b,c}
		12	х				Xc	
	Day 11	0	х				Xc	
		12	х					

Study Period	Study	ly Time in	Stud	y drug administra	ation ^a	Blood samples		Blood / urine
	Day(s)	relation to						samples for
		darolutamide	Darolutamide	Midazolam	Dabigatran	Midazolam PK	Dabigatran PK	laboratory
		dosing						examination
		(hours)						
	Day 12	0					X	Xp
Follow-up	Day 14 ±							X ^f
	3 ^e							

Study Period	Study	Time in	Study drug ad	Iministration ^a	Plasma	samples Urine samples		Blood / urine
Screening	Day(s)	relation to darolutamide dosing (hours)	Darolutamide	Rosuvastatin	Darolutamide PK	Rosuvastatin PK	Rosuvastatin PK	laboratory examination
Screening	Days –28 to –1 Day –1	Pre-dose (morning)						x
Period 1: rosuvastatin reference period	Day 1	0 0.5 1 1.5 2		X		X ^c X X X X	$\begin{array}{c c} & X^{g} \\ & \rightarrow \end{array}$	

Study Period	udy Period Study Time in		Study drug ad	ministration ^a	Plasma	samples	Urine samples	Blood / urine
	Day(s)	relation to darolutamide dosing (hours)	Darolutamide	Rosuvastatin	Darolutamide PK	Rosuvastatin PK	Rosuvastatin PK	samples for laboratory examination
		2.5				Х	\rightarrow	
		3				Х	\rightarrow	
		4				Х	\rightarrow	
		6				х	х	
		8				Х	\rightarrow	
		12				Х	\rightarrow	
	Day 2	0				Х	Х	
Period 2: darolutamide +	Day –2	0						X ^h
rosuvastatin	Day 1	0	Х		Xc			
		0.5			Х			
		1			х			

Study Period	Study	Time in	Study drug administration ^a		Plasma	samples	Urine samples	Blood / urine
	Day(s)	relation to		F		1		samples for
		darolutamide	Darolutamide	Rosuvastatin	Darolutamide	Rosuvastatin	Rosuvastatin	laboratory
		dosing				PK	PK	examination
		(hours)			PK			
		(nouro)						
		1.5			Х			
		2			х			
		2.5			х			
		3			х			
		4			х			
		6			х			
		8			х			
		12			х			
	Day 2	0			х			х
		12			х			
	Day 3	0			Х			
		12			Х			
ļ	ļ	ļ			ļ	ļ	I	ļ

Study Period	Study	Time in	Study drug administration ^a		Plasma	samples	Urine samples	Blood / urine
	Day(s)	relation to						samples for
		darolutamide	Darolutamide	Rosuvastatin	Darolutamide	Rosuvastatin	Rosuvastatin	laboratory
		dosina				PK	PK	examination
		(hours)			PK			
		(110013)						
	Dav 4	0	Х		Xc			Xc
	,							
		12	Х		Xc			
	Day 5	0	Х		Xc			
		12	Х		Xc			
	Day 6	0	Х		Xc			
		10	v		VC			
		12	^		^			
	Day 7	0	х		Xc			Xh
		0.5			х			
		1			Х			
		1.5			Х			
		2			X			
		2.5			~			
		2.3			^			
				l		l	I	l

Study Period	Study	Time in	Study drug ad	ministration ^a	Plasma samples		Urine samples	Blood / urine
	Day(s)	relation to						samples for
		darolutamide	Darolutamide	Rosuvastatin	Darolutamide	Rosuvastatin	Rosuvastatin	laboratory
		dosing			РК	РК	РК	examination
		(hours)						
		3			X			
		4			v			
		4			X			
		6			Х			
		8			x			
		12	х		Xc			
	Day 8	0	х	х	Xc	Xc	Xg	x
		0.5			x	х	\rightarrow	
		1			x	х	\rightarrow	
		1.5			x	х	\rightarrow	
		2			x	х	\rightarrow	
		2.5			x	х	\rightarrow	
		2.5			X	X	\rightarrow	

Study Period	Study	Time in	Study drug ad	ministration ^a	Plasma samples		Urine samples	Blood / urine
	Day(s)	relation to	Darolutamide	Rosuvastatin	Darolutamide	Rosuvastatin	Rosuvastatin	samples for
		dosing			РК	РК	РК	examination
		(hours)						
		3			Х	Х	\rightarrow	
		4			х	Х	\rightarrow	Xi
		6			х	х	х	
		8			х	х	\rightarrow	
		12	х		Xc	х	\rightarrow	
	Day 9	0			х	х	х	х
	Day 10	12			х			
	Day 11	0			х			
Follow-up	Day 14 ± 3 ^e							Xţ

^aDarolutamide, itraconazole, midazolam, dabigatran and rosuvastatin were administered orally 30 minutes after starting a standardized meal and with 240 mL of water, whereas rifampicin was administered 1 hour before starting a standardized meal and, on the day of co-administration with darolutamide, 12 hour after darolutamide and 1 hour prior to a standardized evening meal); ^bonly blood sample for creatine kinase, liver enzymes (AST, ALT, GGT), and alkaline phosphatase; ^cbefore study drug administration; ^dafter last dose of study medication; ^emeasures/actions completed before the start of the standardized breakfast; ^fin fasted state; ^gadditional urine sample before dosing of rosuvastatin; ^hresults were checked the same day (latest in the evening) to decide whether the subject could continue participating in the study; ⁱblood sample for creatine kinase and liver enzymes.

→, Done continuously from the time point indicated; ALT, alanine aminotransferase; AST, aspartate aminotransferase; GGT, gamma glutamyl transpeptidase.

Table S3 In vitro analysis of UGT isoform inhibition by (S,R)-darolutamide, (S,S)-darolutamide, and keto-darolutamide in

human liver microsomes using standard substrates

UGT isoform	Substrate		IC ₅₀ (μΜ)				
		(S <i>,R</i>)- darolutamide	(S,S)- darolutamide	Keto- darolutamide			
1A1	Estradiol	26.5	31.7	6.4			
1A4	Trifluoperazine	>100	>100	>50			
1A6	Serotonin	>100	>100	>50			
1A9	Propofol	12.5	>100	>50			
2B7	AZT	>100	>100	>50			

AZT, 3'-azido-3'-deoxythymidine; IC₅₀, concentration required for 50% inhibition; UGT, uridine diphosphate glucuronosyltransferase.

Table S4 Potential risk for DDI induction with darolutamide in the clinic using the RIS method

Test compound	% de	ecrease in AUC of midaz	olam	Overall assessment
	Donor 1	Donor 2	Donor 3	
Darolutamide	82	84	82	Strong inducer
(<i>S,R</i>)-darolutamide	65	71	64	Moderate inducer
(S,S)-darolutamide	80	83	81	Moderate to strong inducer
Keto-darolutamide	58	50	51	Weak to moderate inducer

AUC, area under the curve; DDI, drug-drug interaction, RIS, relative induction score.

Table S5 Summary of PK data from the phase I studies: (a) effect of itraconazole and rifampicin on the pharmacokinetics of darolutamide, its diastereomers, and keto-darolutamide, (b) effect of rosuvastatin coadministration on the pharmacokinetics of darolutamide, its diastereomers, and keto-darolutamide, and (c) effect of darolutamide coadministration on pharmacokinetic parameters of dabigatran, midazolam, and rosuvastatin

a.

	Period 1	Period 2	Period 3
	Reference Treatment	Darolutamide 600 mg QD (Fed) +	Darolutamide 600 mg QD (Fed) +
Parameter	Darolutamide 600 mg QD (Fed)	Itraconazole 200 mg BID (Fed)	Rifampicin 600 mg QD (Fasted)
Darolutamide			
AUC ₍₀₋₁₂₎ µg·h/mL	14.1/29.5 (7.41 - 22.0)	20.7 /24.1 (12.1 - 27.7)	5.42/31.7 (2.51 - 9.23)
C _{max} µg/mL	1.86/25.1 (1.07-2.63)	2.53/19.6 (1.66-3.53)	0.883/27.8 (0.514-1.48)
(S,R)-darolutamide			
AUC ₍₀₋₁₂₎ μg·h/mL	3.34/38.1 (1.77-5.83)	5.32/28.7 (3.02-7.30)	0.934/42.2 (0.360-1.76)
C _{max,} µg/mL	0.573/31.0 (0.269-0.835)	0.862/26.6 (0.539-1.33)	0.210/39.3 (0.0957-0.412)
(S,S)-darolutamide			
AUC ₍₀₋₁₂₎ μg·h/mL	10.7/27.8 (5.61-16.3)	15.2/24.0 (9.06-20.3)	4.45/30.4 (2.12-7.46)
C _{max} µg/mL	1.36/23.5 (0.794-1.94)	1.87/20.0 (1.30-2.64)	0.696/25.8 (0.418-1.07)
Keto-darolutamide			
AUC ₍₀₋₁₂₎ µg⋅h/mL	31.4/29.1 (17.7-45.3)	47.2/24.3 (29.8-77.8)	10.8/36.5 (4.81-20.0)
C _{max} µg/mL	4.32/23.3 (2.64-6.10)	5.99/17.7 (4.33-8.85)	2.04/27.2 (1.18-3.27)

b.

	<u>Period 2, Day 1</u>		Period 2, Day 8
	Darolutamide 600 mg,	<u>Period 2, Day 7</u>	Rosuvastatin 5 mg QD, Single Dose +
	Single Dose	Darolutamide 600 mg BID	Darolutamide 600 mg BID
Darolutamide			
AUC ₍₀₋₁₂₎ µg⋅h/mL	16.7/30.2 (8.90-29.7)	34.5/27.8 (20.2-56.9)	34.1/28.9 (18.6-54.3)
C _{max} µg/mL	2.10/27.7 (1.14-3.30)	3.84/25.1 (2.28-6.38)	3.72/25.3 (2.07-5.44)
(S,R)-darolutamide			
AUC ₍₀₋₁₂₎ µg·h/mL	3.76/31.1 (1.85-7.03)	4.67/32.4 (2.07-8.01)	4.75/28.8 (2.46-7.79)
C _{max} , µg/mL	0.62/0.03 (0.34-0.11)	0.73/0.03 (0.42-0.11)	0.71/0.02 (0.39-0.11)
(S,S)-darolutamide			
AUC ₍₀₋₁₂₎ µg·h/mL	12.9/30.6 (6.60-22.6)	29.8/27.8 (17.6-48.9)	29.3/29.4 (15.7-46.9)
C _{max} µg/mL	1.61/27.4 (0.910-2.45)	3.17/25.1 (1.93-5.24)	3.09/27.0 (1.70-4.51)
Keto-darolutamide			
AUC ₍₀₋₁₂₎ μg·h/mL	37.0/36.2 (19.0-69.2)	82.8/39.5 (29.1-152)	82.5/38.7 (38.0-152)
C _{max} µg/mL	4.89/35.6 (2.51-9.31)	9.40/35.4 (3.66-16.7)	9.20/33.3 (4.35-16.2)

C.

		<u>Period 2, Day 9</u>		<u>Period 2, Day 9</u>		<u>Period 2, Day 8</u>
	Period 1, Day 1	Dabigatran 75 mg, Single	<u>Period 1, Day 1</u>	Midazolam 1 mg, Single	Period 1, Day 1	Rosuvastatin 5 mg, Single
	Dabigatran 75 mg, Single	Dose (Fed) + Darolutamide	Midazolam 1 mg, Single	Dose (Fed) + Darolutamide	Rosuvastatin 5 mg, Single	Dose + Darolutamide 600
	Dose (Fed)	600 mg BID (Fed)	Dose (Fed)	600 mg BID	Dose	mg BID
AUC	502 / 27.9 (338-929)	475 /39.9 (214-818)	12.9 / 0.04 (5.90-20.1)	9.22 / 0.03 (4.75-14.0)	-	-
µg∙h/mL						
AUC ₍₀₋₂₄₎	_	-	-	-	6.52/40.5 (3.35-14.7)	33.8/41.3 (14.7-74.3)
µg∙h/mL						
C _{max} µg/L	52.6 / 28.8 (32.2-87.3)	44.1 / 60.1 (13.1-88.8)	3.17 / 0.03 (2.22-4.68)	2.15 / 0.03 (1.22-2.99)	0.660/47.4 (0.325-1.69)	3.31/42.5 (1.49-6.70)

Data are presented as geometric means/CV% (range) for PK populations.

AUC₍₀₋₁₂₎, area under the plasma concentration time curve from time 0 to 12 hours; BID, twice-daily; C_{max}, peak concentration; CV%, coefficient of variation; DABE, dabigatran etexilate; ICZ, itraconazole; MDZ, midazolam; PK, pharmacokinetic; RIF, rifampicin; RSV, rosuvastatin.

Category	Enzyme/Transporter	Apalutamide	Enzalutamide	Darolutamide
Substrates	CYP3A4	√	√	
Addition of an AR inhibitor may affect the concentration of other medications	CYP2C9	√	√	
	CYP2C19	√	√	
	UGT	√	√	
	P-gp	√	√	
	BCRP	\checkmark	\checkmark	\checkmark^{\dagger}
	OATP1B1	✓	✓	
Inhibitors	CYP3A4	√		✓ [‡]
Other medications may increase	CYP2C8	✓	√	

Table S6 Summary of the DDI potential of darolutamide and AR inhibitors with CYP enzymes and drug transporters [1-7]

CYP3A4	✓	√ [§]
	CYP3A4	CYP3A4 ✓

reduction of BCRP substrate drug. ‡If P-gp and strong CYP3A4 inhibitors are used together, monitor patients more frequently for darolutamide adverse reactions. §Avoid concomitant use of P-gp and strong or moderate CPY3A4 inducers.

AR, androgen receptor; BCRP, breast cancer resistance protein; CYP, cytochrome P450; mCRPC, metastatic castration-resistant prostate cancer; P-gp, P-glycoprotein; UGT,

Uridine 5'-diphospho-glucuronosyltransferase.

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Fig. S1 *In vitro* effects of darolutamide on efflux transporters (a) P-gp, with digoxin as the probe substrate, and (b) BCRP, with cladribine as the probe substrate



Darolutamide showed a concentration-dependent inhibition towards P-gp in Caco-2 cells, and its $IC_{_{50}}$ value was 16.4 μM



For the purpose of fitting, the data at 0.741 μM of ODM-201 was excluded in the BCRP IC_{_{50}} assessment, and its IC_{_{50}} value was 1.33 $\mu M.$

BCRP, breast cancer resistance protein; P-gp, P-glycoprotein.

Fig. S2 Mean plasma concentration–time profiles of (a) darolutamide and (b) keto-darolutamide after multiple oral doses of 600 mg BID (Day 7) and given in combination with a single oral dose of 5 mg rosuvastatin (Day 8) in Treatment Period 2 (N = 29)



BID, twice daily.

Supplementary Methods: Bioanalytical Methods used in the Phase I Clinical Trials

Validation of bioanalytical methods and analysis of study samples were performed in compliance with internal standard operating procedures of the clinical research organizations and regulatory guidelines on bioanalytical method validation (e.g. from the FDA and EMA [8, 9]). Bioanalytical results are summarized in the table.

To determine the concentrations of the diastereomers (*S*,*R*)- and (*S*,*S*)-darolutamide and the major metabolite, keto-darolutamide, K₂EDTA plasma samples were spiked with internal standard and extracted using a solid phase extraction procedure. The extracted samples were analyzed by liquid chromatography with tandem mass spectrometry. Concentrations of darolutamide were calculated as the sum of the two diastereomers (*S*,*R*)- and (*S*,*S*)-darolutamide. All samples were stored at –20°C; stability data indicated that the analytes were stable for the storage period (\geq 506 days and \leq 94 days in the studies evaluating the effects of darolutamide on midazolam/dabigatran and rosuvastatin, respectively).

Itraconazole was determined in human K₃EDTA plasma samples after addition of the internal standard itraconazole-d₃ and automated liquid-liquid extraction with methyl tert-butyl ether. Rifampicin was determined in human K₂EDTA plasma samples after addition of the internal standard rifampin-d₃ and automated protein precipitation with methanol. Total dabigatran and non-conjugated dabigatran (free form) were determined in human K₂ EDTA plasma after addition of the internal standard rifampin-d₃ and automated protein precipitation with methanol. Total dabigatran and non-conjugated dabigatran (free form) were determined in human K₂ EDTA plasma after addition of the internal standard dabigatran-d₇ and solid phase extraction. Dabigatran was found in study samples as free form and as dabigatran-acyl- β -D-glucuronide. To obtain the total dabigatran concentrations, study samples were hydrolyzed to cleave the glucuronide from

dabigatran-acyl- β -D-glucuronide and form free dabigatran. Midazolam and α hydroxymidazolam (1-OH midazolam) were determined in human lithium heparinized plasma after addition of the internal standards midazolam-d₄ and α hydroxymidazolam-d₄ and automated liquid-liquid extraction with methyl tert butyl ether. Rosuvastatin was determined in human EDTA K₂ plasma or urine after addition of the internal standard rosuvastatin-d₃ and automated liquid-liquid extraction with a mixture of methyl tertbutyl ether.

For agents co-administered with darolutamide, separation was achieved by means of a liquid chromatographic system. For the mass spectrometric detection, a triple quadrupole mass spectrometer in positive TurbolonSpray[™] ionization mode was applied. All samples were stored at –20°C and analyzed within 50 days (itraconazole), 28 days (rifampicin), 48 days (total dabigatran), 47 days (nonconjugated dabigatran, midazolam, 1-OH midazolam), 87 days (rosuvastatin, plasma), or 90 days (rosuvastatin, urine) after sample collection; stability data indicated that the analytes were stable for these time periods.

	Calibration		Mean inter-assay accuracy		Accuracy a	nd precision	(QC samples	
	range ((ng/mL)	and precisi	on of back-	of lowest calibrator				
			calculated co	ncentrations ^a	(LLOQ)				
	LLOQ	ULOQ	Accuracy	Precision, %	Accuracy,	Precision,	Concentration	Accuracy	Precision,
			(bias), %		%	%	range, ng/mL	(bias), %	%
Effects of itraconazole a	and rifam	picin on c	larolutamide						
(S,R)-darolutamide	4.9	4940	-3.9 to 3.9	≤5.8	0.3	2.4	14.8 to 3950	0.8 to 3.0	≤8.3
(S,S)-darolutamide	5.1	5060	-3.1 to 2.8	≤6.7	0.2	3.7	15.2 to 4050	1.5 to 3.8	≤6.5
Keto-darolutamide	10.0	10 000	-3.9 to 3.4	≤5.7	1.1	3.1	30.0 to 8000	3.2 to 3.7	≤7.9
Itraconazole	1.0	1 000	96.0 to 102.5	≤2.8	102.0	1.6	3.0 to 750	92.6 to 95.7	0.6 to 2.5
Rifampicin	5.0	5000	97.8 to 102.0	≤7.7	100.0	9.4	15.0 to 3750	85.6 to 99.6	2.8 to 12.5
Effects of darolutamide	on midaz	olam and	l dabigatran						

(<i>S,R</i>)-darolutamide	4.9	4940	95.9 to 105.2	≤5.9	101.4	3.1	14.8 to 3950	99.5 to 101.8	≤6.1
(S,S)-darolutamide	5.1	5060	96.2 to 103.7	≤9.0	102.0	4.5	15.2 to 4050	96.6 to 100.5	≤7.2
Keto-darolutamide	10.0	10 000	98.0 to 104.0	≤17.1	101.1	7.8	30.0 to 8000	98.6 to 103.2	≤8.2
Total dabigatran	1.0	400	97.9 to 101.0	≤4.7	99.7	2.6	3.3 to 330	94.5 to 95.8	3.3 to 5.3
Non-conjugated dabigatran	1.0	400	97.6 to 101.8	≤5.4	100.0	6.2	3.0 to 300	97.3 to 101.7	2.6 to 4.7
Midazolam	0.002	2	98.9 to 101.5	≤4.1	99.5	3.6	0.006 to 1.5	97.3 to 101.6	1.8 to 2.9
1-OH midazolam	0.005	5	98.2 to 102.0	≤2.3	99.2	3.8	0.015 to 3.8	96.8 to 102.0	1.6 to 2.8
Effects of darolutamide	on rosuv	astatin							
(<i>S,R</i>)-darolutamide	4.9	4940	-3.6 to 3.8	≤7.0	-0.7	4.7	14.8 to 3950	-0.6 to 5.7	≤7.4
(S,S)-darolutamide	5.1	5060	-4.8 to 3.7	≤5.4	3.2	5.4	15.2 to 4050	-5.3 to 7.3	≤6.1
Keto-darolutamide	10.0	10000	-3.3 to 3.4	≤6.6	3.4	5.4	30.0 to 8000	-3.4 to 7.2	≤6.4
Rosuvastatin, plasma	0.05	15	98.7 to 100.7	≤3.4	100.0	2.8	0.15 to 11.3	97.4 to 102.4	3.2 to 4.7

Rosuvastatin, urine	5	2000	99.4 to 101.0	≤2.5	99.6	3.5	15 to 1500	94.6 to 100.7	0.96 to 3.16

^aExcept LLOQ.

1-OH midazolam, α-hydroxymidazolam; LLOQ, lower limit of quantification; QC, quality control; ULOQ, upper limit of quantification.

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