CLINICAL TRIAL RESULTS

This summary reports the results of only one study. Researchers must look at the results of many types of studies to understand if a study medicine works, how it works, and if it is safe to prescribe to patients. The results of this study might be different than the results of other studies that the researchers review.

Sponsor: Pfizer, Inc.

Medicine(s) Studied: PF-06747775

Protocol Number: B7971001

Dates of Trial: 14 May 2015 to 28 May 2020

Title of this Trial: Study For Patients With NSCLC EGFR Mutations (Del 19 or L858R ± T790M)

[Phase 1/2 Open-Label Study of PF-06747775 (Epidermal Growth Factor Receptor T790M Inhibitor) in Patients With Advanced Epidermal Growth Factor Receptor Mutant (Del 19 or L858R ± T790M) Non-Small Cell Lung Cancer]

Date(s) of this Report: 03 December 2020

– Thank You –

Pfizer, the Sponsor, would like to thank you for your participation in this clinical trial and provide you a summary of results representing everyone who participated. If you have any questions about the study or results, please contact the doctor or staff at your study site.

WHY WAS THIS STUDY DONE?

Non-small-cell lung cancer (NSCLC) is the most common type of lung cancer. In some patients with NSCLC, their cancer cells have changes (mutations) in the gene that makes a protein called epidermal growth factor receptor, or "EGFR". These mutations in EGFR help stimulate cancer cells to grow and multiply. Researchers are looking for better treatments for patients with NSCLC whose cancer cells have mutations in the EGFR gene.

PF-06747775 is an investigational medicine being studied to treat patients with NSCLC with specific mutations (changes) in the EGFR gene. An investigational drug is one that is currently not approved for sale in this country. Researchers think that PF-06747775 works by blocking the activity of enzymes called 'tyrosine kinases' that help cells grow. These enzymes may be too active or found at high levels in some types of cancer cells. By blocking the activity of these proteins, PF-06747775 can help limit the growth and spread of cancer cells. PF-06747775 was provided as tablets and taken by mouth once every day.

This study was divided into 2 parts, or "phases". The main purpose of the first phase of the study (Phase 1) was to determine the best dose of PF-06747775 to use in the second phase of the study (Phase 1b/2). To do this, the researchers asked:

- **What dose-limiting toxicities, or "DLTs", did patients have when taking PF-06747775?**

  DLTs are certain medical problems caused by taking PF-06747775 which require the patient to lower the dose or stop taking the medicine temporarily or permanently.

The main purposes of the Phase 1b/2 part of the study were to see if the patients' cancer improved with PF-06747775 treatment, and to find the best dose of PF-06747775 to use with another cancer drug called palbociclib (Ibrance®). To do this, researchers asked these questions:

- **What dose-limiting toxicities, or "DLTs", did patients have when taking PF-06747775 with palbociclib?**

- **What percentage of all patients in the study had their NSCLC get better when taking PF-06747775?**

  To answer this, the researchers looked to see if the patients' tumors got smaller after taking the study medications.

- **How long do patients live when taking PF-06747775 before their NSCLC got worse, or before dying of any cause?**

  To answer this, the researchers measured the "median time" between starting the study medicines and the patients' NSCLC getting worse, or dying of any cause. The median time was the time point where half (50%) of the patients taking PF-06747775 had their NSCLC get worse, or they had passed away from any cause.

Researchers also wanted to learn more about the safety of PF-06747775. They monitored the patients for any medical problems that happened while they were in the study.

WHAT HAPPENED DURING THE STUDY?

This study compared several groups of patients taking PF-06747775 to see what DLTs the patients had, and to see if their NSCLC improved.

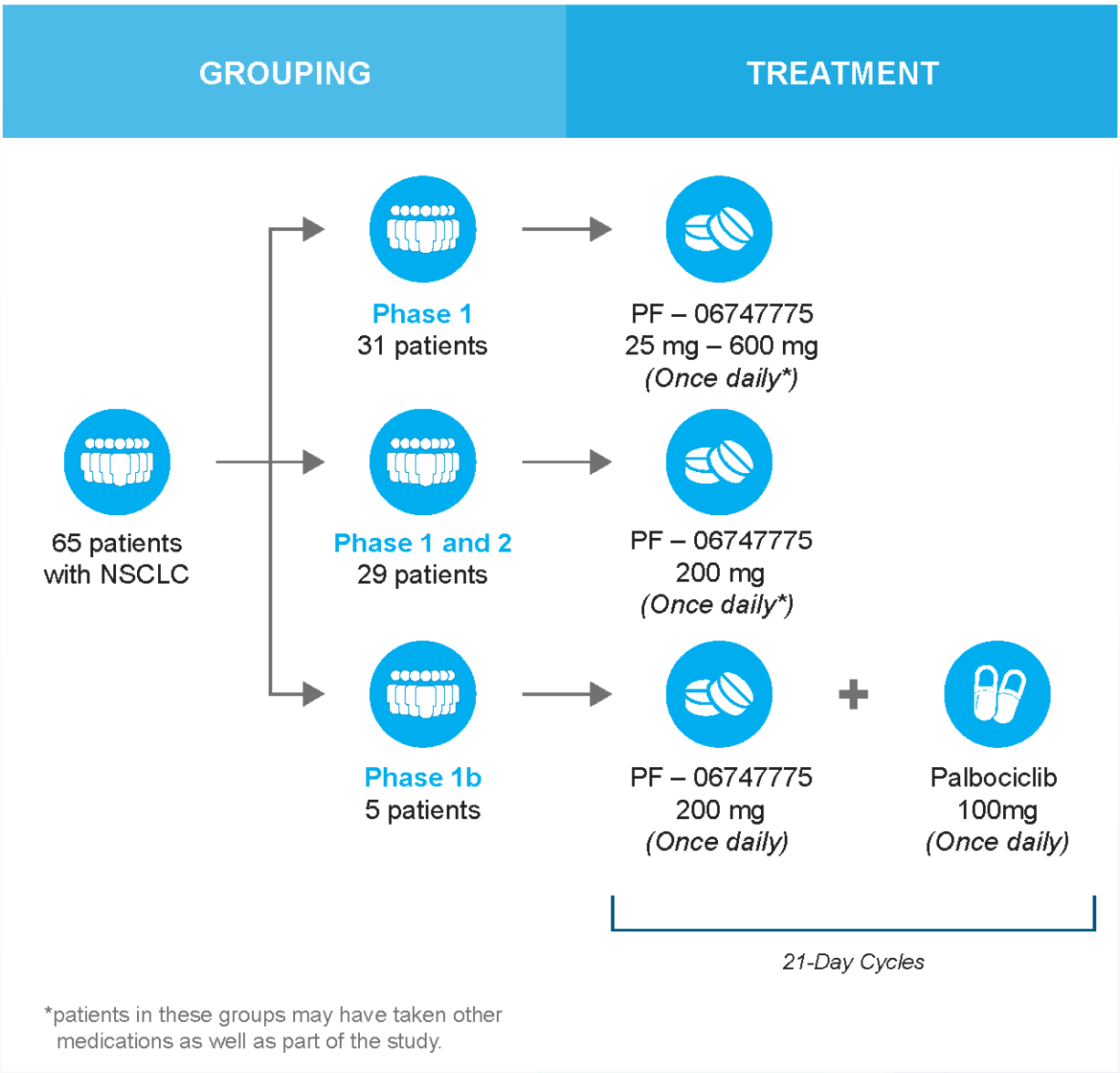
The study included patients ≥ 18 years old who met the following conditions:

- All patients: had an acceptable medical history and a confirmed diagnosis of the specific type of NSCLC that this treatment may help, as well as available tissue biopsy samples from the tumor.
- Japanese patients only: patients whose cancer was advanced/metastatic (spread to other parts of the body). The patient's cancer either did not respond to standard therapy, or there was no standard therapy available, or the patients did not want to receive standard therapy for their cancer.

There was no maximum number of treatment cycles. Patients continued in the study as long as they responded to treatment and as long as they were willing to participate. This was a "randomized, open-label" study, which means that the patients were

assigned to each group by chance alone. This also means that the doctors and patients knew what they were being treated with.

A diagram of the study design is shown below.



While patients were only in the study for as long as they safely tolerated PF-06747775 treatment and responded to treatment, the entire study took 5 years to complete. The Sponsor ran this study at 15 locations in 4 countries: Australia, Japan, Korea, and United States (US). It began 14 May 2015 and ended 28 May 2020.

Twenty-five (25) men and 40 women participated. All patients were between the ages of 37 and 81.

Patients were to be treated until their cancer got worse, their general health got worse, they had too many medical problems, the patient wanted to stop, or until the patient had passed away. Of the 65 patients who started the study, all patients stopped study treatment early. Thirty (30) of the 65 patients (46%) left before the study was over by their choice or a doctor decided it was best for a patient to stop being in the study.

This study was stopped early because of changes to the way that NSCLC is now treated. When the study ended in May 2020, the Sponsor began reviewing the information collected. The Sponsor then created a report of the results. This is a summary of that report.

WHAT WERE THE RESULTS OF THE STUDY?

What dose-limiting toxicities (DLTs) did patients have when taking PF-06747775?

No DLTs were reported for the 26 patients in the dose escalation group (taking 25 mg to 600 mg PF-06747775 once per day) or for 6 patients taking PF-06747775 200 mg once per day.

What dose-limiting toxicities (DLTs) did patients have when taking PF-06747775 with palbociclib?

Two (2) of the 5 patients in the group taking PF-06747775 200 mg + palbociclib 100 mg had DLTs. One (1) patient had low numbers of total white blood cells, low numbers of blood platelets, and low numbers of a type of white blood cell called neutrophils. The second patient had increased levels of liver enzymes in their blood (called ALT and AST).

What percentage of all patients in the study had their NSCLC get better when taking PF 06747775?

None of the patients had a 'Complete Response', which means that none of the patients' NSCLC completely disappeared. Twenty-seven (27) patients (42%) achieved a Partial Response, which means that their NSCLC got a little better. The Objective Response Rate (Complete Response + Partial Response) for all patients, was therefore 42%. Thirty-one (48%) of patients' NSCLC stayed the same.

How long did patients live when taking PF-06747775 before their NSCLC got worse, or before dying of any cause?

Patients in this study lived a median of 8 months before their NSCLC got worse, or before they passed away from any cause (such as from a medical problem or an accident). The median time was the time point where half (50%) of the patients taking PF-06747775 had their NSCLC get worse, or they had passed away from any cause.

This study was not designed to test if one medicine was better than another, so the results could be due to chance. This does not mean that everyone in this study had these results. Other studies may produce different results, as well. These are just some of the main findings of the study, and more information may be available at the websites listed at the end of this summary.

WHAT MEDICAL PROBLEMS DID PARTICIPANTS HAVE DURING THE STUDY?

The researchers recorded any medical problems the participants had during the study. Participants could have had medical problems for reasons not related to the study (for example, caused by an underlying disease or by chance). Or, medical problems could also have been caused by a study treatment or by another medicine the participant was taking. Sometimes the cause of a medical problem is unknown. By comparing medical problems across many treatment groups in many studies, doctors try to understand what the side effects of an experimental drug might be.

All of the patients in this study had at least 1 medical problem. A total of 12 (18%) patients stopped taking the study medication because of medical problems. A total of 3 (5%) patients left the study because of medical problems. The most common medical problems are listed below.

Most Common Medical Problems (Reported by 15% or More of Patients)	
Medical Problem	**Number (%) of Patients (65 Patients Treated)**
Diarrhea	45 (69%)
Infection of skin around nails	45 (69%)
Rash	39 (60%)
Mouth sores	30 (46%)
Skin infection that looks like acne	28 (43%)
Dry skin	27 (42%)
Increase in blood creatinine	24 (37%)
Runny nose	22 (34%)
Itchiness	21 (32%)
Low appetite	16 (25%)
Nausea	16 (25%)
Hair loss	15 (23%)
Low red blood cell count	15 (23%)
Difficulty breathing	15 (23%)
Inflammation of digestive tract	14 (22%)

Dizziness	**13 (20%)**
Pneumonia	**13 (20%)**
Flat, red, raised skin rash	**12 (18%)**
Increased liver enzyme in blood (ALT)	**11 (17%)**
Headache	**11 (17%)**
Cough	**10 (15%)**
Dehydration	**10 (15%)**
Nose bleed	**10 (15%)**
Dry nose	**10 (15%)**

WERE THERE ANY SERIOUS MEDICAL PROBLEMS?

A medical problem is considered "serious" when it is life-threatening, needs hospital care, or causes lasting problems.

Eighteen (18) patients (28%) had serious medical problems. Six (6) patients (9%) had serious medical problems that were thought to be related to the study medicines. Two (2) patients passed away within 28 days after the last dose of study medicine. One (1) patient passed away due to pneumonia and 1 patient passed away due to pneumonia aspiration, but these deaths were not thought to be related to the study medicines. Four (4) patients passed away in the follow up period (more than 28 days after the last dose) and all of them passed away due to their NSCLC getting worse.

Serious medical problems are listed in the table on the next page.

Most Common Serious Medical Problems (Reported by 2% or More of Patients)	
Serious Medical Problem	Number (%) of Patients (65 Patients Treated)
Pneumonia	7 (11%)
Difficulty breathing	3 (5%)
Increased liver enzyme in blood (ALT)	2 (3%)
Heart failure	2 (3%)
Decreased appetite	2 (3%)
Dehydration	2 (3%)
Low blood sodium	2 (3%)
Fever	2 (3%)

WHERE CAN I LEARN MORE ABOUT THIS STUDY?

If you have questions about the results of your study, please speak with the doctor or staff at your study site.

The full scientific report of this study is available online at:

www.clinicaltrials.gov	Use the study identifier **NCT02349633**
www.pfizer.com/research/research_clinical_trials/trial_results	Use the protocol number **B7971001**

Please remember that researchers look at the results of many studies to find out which medicines can work and are safe for patients.

Again, **thank you** for volunteering. We do research to try to find the best ways to help patients, and you helped us to do that!