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Sponsor

Novartis Pharmaceuticals

Generic Drug Name

NIZ985, spartalizumab (PDR001), tislelizumab (VDT482)

Trial Indication(s)

Advanced solid tumors and lymphoma

Protocol Number

CNIZ985B12101

Protocol Title

A phase I/Ib Study of Subcutaneous Recombinant Human NIZ985 ((hetIL-15) (IL-15/sIL-15Rα)) in combination with Spartalizumab in patients with check point inhibitor (CPI) relapsed advanced solid tumors and lymphoma

Clinical Trial Phase

Phase 1

Phase of Drug Development

Phase 1 (NIZ985), Phase 3 (spartalizumab), Phase 4 (tislelizumab)

Study Start/End Dates

Study Start Date: February 27, 2020 (Actual)

Primary Completion Date: December 27, 2023 (Actual)
Study Completion Date: December 27, 2023 (Actual)

Reason for Termination (If applicable)

Recruitment of patients with melanoma in the expansion part of this study was not conducted due to limited efficacy seen in dose escalation and recruitment into the whole study was suspended on 01-Mar-2023. This decision was not a consequence of any safety concerns. At the time of the recruitment halt, 60 patients (56 in the escalation part and 4 in the expansion part) had been enrolled and the treatment of active patients continued according to the protocol.

Study Design/Methodology

This was a phase I/Ib, open-label, global, multi-center study of NIZ985 as a single-agent and in combination with an anti-programmed cell death-protein 1 (PD-1) antibody (either spartalizumab in escalation or tislelizumab in expansion) in patients with advanced solid tumors and lymphomas, who had previously responded to check point inhibitor (CPI) and progressed (secondary resistant patients).

The study design consisted of two parts: dose escalation and dose expansion. Dose escalation was guided by an adaptive Bayesian Hierarchical Logistic Regression Model (BHLRM) with overdose control (EWOC) principle that controlled the risk of dose-limiting toxicities (DLTs) for patients on study. In the dose escalation part of the study, patients were assigned to be treated with single agent NIZ985 (Arm 1 escalation) or they were treated with the NIZ985-spartalizumab combination (Arm 2 escalation). Patients who were assigned to Arm 1 had the opportunity to have spartalizumab added to their treatment regimen after their first scheduled or unscheduled post-baseline disease evaluation, regardless of the response. Patients were permitted to initiate combination therapy with spartalizumab 400 mg intravenous every 4 weeks (i.v. Q4W), provided the patient had not experienced unacceptable toxicity, continued to meet eligibility criteria and did not meet criteria for study discontinuation, other than progressive disease (PD).

Arm 2 escalation evaluated NIZ985 and spartalizumab as a combination treatment starting from Cycle 1 Day 1 (C1D1) and enrolled patients in parallel to Arm 1 escalation. In Arm 2 escalation the dose of NIZ985 within the combination never

exceeded the highest single-agent dose tested in Arm 1 escalation that had been shown to be safe and tolerable. Spartalizumab was administered at a fixed dose of 400 mg i.v Q4W.

Arm 2 expansion evaluated the combination of 12 mcg/kg NIZ985 subcutaneous, weekly, 3 weeks on 1 week off (SC QW X 3 Q28d) and tislelizumab at a fixed dose of 300 mg i.v Q4W. Only patients with advanced or unresectable non-small cell lung cancer (NSCLC) were enrolled in this arm after the recommended dose for expansion (RDE) was declared to be 12 mcg/kg NIZ985 SC QW X 3 Q28d either as a single agent or when dosed in combination with spartalizumab 400 mg i.v. Q4W.

The expansion arm in patients with melanoma did not open for enrollment and as of 01 Mar 2023 recruitment to the study was halted.

Centers

9 centers in 7 countries/regions: Japan(1), Taiwan(1), Belgium(1), Italy(1), Spain(2), United States(2), Germany(1)

Objectives:

The primary objective of the trial was to characterize safety and tolerability of NIZ985 as a single agent and in combination with spartalizumab or tislelizumab in patients with solid tumors and lymphomas that previously responded to CPI and progressed (secondary resistant patients).

The secondary objectives were:

- To assess preliminary anti-tumor activity of the NIZ985-spartalizumab (escalation) and NIZ985-tislelizumab (expansion) combinations
- To characterize the pharmacokinetics (PK) of NIZ985 (as a single agent and in combination), spartalizumab (in combination), and tislelizumab (in combination)
- To characterize the prevalence and incidence of immunogenicity of NIZ985 (single agent and in combination), spartalizumab (in combination), and tislelizumab (in combination)

Test Product (s), Dose(s), and Mode(s) of Administration

For this study, the investigational drugs were NIZ985, spartalizumab (PDR001) and tislelizumab (VDT482).

The dose escalation part of the study consisted of two arms:

- Arm 1: NIZ985 was administered as a single agent. Patients could add spartalizumab after their first disease re-evaluation regardless of the result. The treatment period prior to the addition of spartalizumab was defined as the lead-in period for these Arm 1 escalation patients and will be referred to as such throughout this summary. During the lead-in period, if a patient receiving single-agent NIZ985 added spartalizumab after their first disease reevaluation, they were required to reduce NIZ985 to a dose level already tested within Arm 2 combination treatment escalation and deemed to be safe and tolerable. Patients were permitted to re-escalate their dose of NIZ985 to a higher dose once the next combination treatment dose level was deemed to be safe and tolerable.
- Arm 2: NIZ985 and spartalizumab were administered in combination starting at Cycle 1 Day 1 (C1D1).

The expansion in Arm 2 started once the recommended dose (RD) was determined for the latter arm and included NIZ985 in combination with tislelizumab.

The treatment period began on Cycle 1 Day 1 and each treatment cycle consisted of 28 days.

- NIZ985 was administered subcutaneously once a week for 3 weeks, followed by a one-week break during each treatment cycle (SC QW X 3 Q28d). NIZ985 was administered at a dose of 2, 4, 8, 12 and 16 mcg/kg.
- Spartalizumab was administered intravenously (i.v.) at a fixed dose of 400 mg over 30 minutes on Day 1 of each 28-day cycle.
- Tislelizumab was administered via i.v. infusion at a fixed dose of 300 mg over 90 minutes on Day 1 of each 28-day cycle. If administration was well tolerated, then subsequent infusions was administered over 45 minutes.

Patients were monitored and continued study treatment until they experienced unacceptable toxicity, disease progression per iRECIST/RECIST 1.1/Cheson et al (2014), withdrew the consent, or treatment was discontinued at the discretion of the

Investigator or the patient. Patients were permitted to continue study treatment at the time of disease progression (per iRECIST/RECIST 1.1/Cheson et al (2014)), if the Investigator considered it was in the patient's best interest to remain on study and provided there was no evidence of clinical deterioration or significant, unacceptable, and irreversible toxicities related to study treatment.

Statistical Methods

Safety: AEs were coded using MedDRA version 26.1 and assessed according to CTCAE version 5.0. AEs were assessed in the Safety Set comprising all patients who received at least one dose of study treatment (i.e., NIZ985 in single agent group, and at least one dose of either component of the combination therapy, NIZ985, spartalizumab or tislelizumab, in the combination groups). Patients were analyzed according to the study treatment received, defined as the treatment most frequently taken between Study Day 1 and the end of the DLT evaluation period (i.e. the first 28 days of dosing or the first cycle of treatment for both the single agent and combination arms), until the onset of a Dose Limiting Toxicity (DLT) or treatment discontinuation, whichever occurred first.

Tolerability of study drug was assessed by summarizing dose interruptions and dose reductions. Dose intensity of study treatment was also tabulated by treatment group for each component of the study treatment.

Incidence of DLTs in Cycle 1 (during DLT evaluation period) for NIZ985 as a single agent (escalation only) and in combination with spartalizumab (escalation) or tislelizumab (expansion) was assessed in the Dose Determining Set (DDS. The DDS for the experimental dose escalation included all patients who received at least one dose of study treatment and met the minimum exposure criterion defined in the protocol and had sufficient safety evaluations (as determined by Novartis and Investigator) or experienced a DLT during the DLT evaluation period.

Efficacy: Full analysis set (FAS) was used for the secondary efficacy. The FAS comprised all patients who received at least one dose of study treatment. Efficacy was assessed by the investigator per Response Evaluation Criteria in Solid Tumors version 1.1 (RECIST v1.1) and Cheson et al 2014 for lymphomas.

Pharmacokinetics: All PK data analysis and PK summary statistics were based on the Pharmacokinetic analysis set (PAS). The PAS included all patients who received at least one of the planned treatments and provided at least one evaluable PK

sample. Only PK blood samples with date and time and for which the last prior dose dates and times were adequately recorded were included in the PK analyses.

Immunogenicity: The immunogenicity was summarized by treatment group for each study treatment.

Study Population: Key Inclusion/Exclusion Criteria

Inclusion Criteria:

1. Signed informed consent must be obtained prior to participation in the study.
2. Male or female patients ≥ 18 years of age.
3. Histologically confirmed and documented advanced solid tumors and lymphoma (includes locally advanced malignancies that are not curable by surgery or radiotherapy, and those with metastatic disease) with documented progression following standard therapy, and for whom, no standard therapy is available, tolerated or appropriate. Disease must be measurable as determined by RECIST 1.1 or Cheson et al (2014).

- Escalation: Patients previously treated with CPI (anti PD-1/PD-L1 and/or anti CTLA-4) who have previously responded and progressed at any time prior to enrollment. Previous response is an initial radiographic CR/PR (a confirmatory scan is not required). If the most recent regimen included CPI, patients with SD lasting ≥ 6 months are also eligible.
- Expansion in melanoma: Patients with cutaneous melanoma previously treated with CPI (anti PD 1/ PD-L1 and/or anti CTLA-4) who have previously responded and progressed at any time prior to enrollment. Previous response is radiographic CR/PR (a confirmatory scan is not required). If the most recent regimen included CPI, patients with SD lasting ≥ 6 months are also eligible.
- Expansion in NSCLC: Patients with locally advanced or unresectable NSCLC who have been treated with up to 2 prior lines of therapies, at least one of which was a CPI-containing regimen (anti PD 1/ PD-L1 and/or anti CTLA-4). Patients must have previously responded to CPI and progressed at any time prior to enrollment. Previous response is radiographic CR/PR (a confirmatory scan is not required). If the most recent regimen included CPI, patients with SD lasting ≥ 6 months are also eligible. Patients with actionable mutations will be excluded.

4. Patients must be willing and able to comply with the protocol for the duration of the study.
5. Patients must have a site of disease amenable to biopsy and be a candidate for tumor biopsy according to the treating institution's guidelines. Patient must be willing to undergo a new tumor biopsy at screening and during therapy on the study.
6. ECOG performance status ≤1 and in the opinion of the investigator, likely to complete at least 28 days of treatment.

Exclusion Criteria:

1. Patients that have received any prior IL-15 treatment.
2. History of severe hypersensitivity reactions to any ingredient of study drug(s) and other mAbs and/or their excipients. In addition, patients with a history of immune mediated toxicities from CPI that led to permanent discontinuation of CPI treatment will be excluded.
3. Patients with primary CNS tumors are excluded. Presence of symptomatic CNS metastases, or CNS metastases that require local CNS-directed therapy (such as radiotherapy or surgery), or increasing doses of corticosteroids 2 weeks prior to study entry. Patients with treated symptomatic brain metastases should be neurologically stable (for 4 weeks post-treatment and prior to study entry) and at a dose of ≤ 10 mg per day prednisone or equivalent for at least 2 weeks before administration of any study treatment.
4. Systemic chronic steroid therapy (> 10mg/day prednisone or equivalent) or any immunosuppressive therapy, other than replacement-dose steroids in the setting of adrenal insufficiency, within 7 days of the first dose of study treatment. Topical, inhaled, nasal and ophthalmic steroids are allowed.
5. Malignant disease, other than that being treated in this study, that is progressing or requires active treatment. Exceptions include basal cell carcinoma of the skin or squamous cell carcinoma of the skin that has undergone potentially curative therapy or in situ cervical cancer or other tumors that will not affect life expectancy.

6. Patients having out of range lab values during screening and before the first dose of study treatment. Out of range lab values are defined as:
   - Absolute neutrophil count (ANC) <1.0 x 109/L.
   - Platelets <75 x 109/L.
   - Hemoglobin (Hgb) < 9 g/dL.
   - Serum creatinine > 1.5 x ULN or creatinine clearance < 60mL/min using Cockcroft-Gault formula.
   - Total bilirubin > 1.5 x ULN, (except for patients with Gilbert's syndrome > 3.0 x ULN or direct bilirubin > 1.5 x ULN).
   - Aspartate transaminase (AST) > 3 x ULN.
   - Alanine transaminase (ALT) > 3x ULN.
   - Serum electrolytes ≥ grade 2 despite adequate supplementation.
7. Impaired cardiovascular function or clinically significant cardiovascular disease, including any of the following:
   - Clinically significant and/or uncontrolled heart disease such as congestive heart failure requiring treatment (NYHA Grade ≥ 2), uncontrolled hypertension or clinically significant arrhythmia.
   - QTcF >470 msec on screening ECG or congenital long QT syndrome.
   - Acute myocardial infarction or unstable angina < 3 months prior to study entry.
8. Infection(s):
   - HIV infection
   - Active HBV or HCV infection (per institutional guidelines). Patients with chronic HBV or HCV disease that is controlled under antiviral therapy are allowed in expansion but not in escalation.

- Documented infection. Patients requiring systemic antibiotics for infection must have completed treatment before screening is initiated.

9. Active, known or suspected autoimmune disease. Patients with vitiligo, type I diabetes, residual hypothyroidism only requiring hormone replacement, psoriasis not requiring systemic treatment or conditions not expected to recur may be considered. Patients previously exposed to CPI treatment who were adequately treated for skin rash or with replacement therapy for endocrinopathies should not be excluded.
10. History of or current interstitial lung disease or pneumonitis grade ≥ 2.
11. Radiotherapy within 2 weeks of the first dose of study drug, except for palliative radiotherapy to a limited field. To allow evaluation for response to study treatment, patients enrolled in the expansion must have remaining measurable disease that has not been irradiated.
12. Treatment with cytotoxic or targeted antineoplastics within 3 weeks of initiation of study treatment. For cytotoxic agents that have major delayed toxicities, a washout period of one cycle is indicated (examples are nitrosoureas and mitomycin C which typically require a 6 week washout). Prior antibodies or immunotherapies require a 4 week washout. Ongoing bisphosphonate therapy and growth hormone-releasing hormone (GHRH) agonist therapy is allowed. Supportive therapy with denosumab is allowed. For patients with lymphoma, the following washout criteria may be used:

- Systemic antineoplastic therapy (including cytotoxic chemotherapy, alfa-interferon, kinase inhibitors or other targeted small molecules, and toxin immunoconjugates) or any experimental therapy within 14 days or 5 half-lives, whichever is shorter, before the first dose of study treatment

13. Presence of Grade ≥ 2 toxicity according to National Cancer Institute (NCI) Common Terminology Criteria for Adverse Events (CTCAE v5.0), from prior cancer therapy with the exception of neuropathy (inclusion of patients with neuropathy of Grade 2 or less is permitted), ototoxicity, and alopecia.
14. Two weeks since major surgery treatment (mediastinoscopy, insertion of a central venous access device and insertion of a feeding tube are not considered major surgery)

15. Use of any live vaccines against infectious diseases within 4 weeks of initiation of study treatment.
16. Use of hematopoietic growth factors or transfusion support ≤ 2 weeks prior to start of study treatment. If growth factors were initiated more than 2 weeks prior to the first dose of study treatment and the patient is on a stable dose, they can be maintained.
17. Any medical condition that would, in the investigator's judgement, prevent the patient's participation in the clinical study due to safety concerns, compliance with clinical study procedures, or interpretation of study results.
18. Pregnant or nursing (lactating) women.
19. Women of child-bearing potential, defined as all women physiologically capable of becoming pregnant, unless they are using highly effective methods of contraception while taking study medication and for 30 days after the last dose of NIZ985 if receiving NIZ985 alone, 120 days after last dose of tislelizumab, or for 150 days after the last dose of spartalizumab. Highly effective methods of contraception methods include:

- Total abstinence (when this is in line with the preferred and usual lifestyle of the patient. Periodic abstinence (e.g. calendar, ovulation, symptothermal, post-ovulation methods) and withdrawal are not acceptable methods of contraception.
- Female bilateral tubal ligation, female sterilization (have had surgical bilateral oophorectomy with or without hysterectomy) or total hysterectomy at least six weeks before taking investigational drug(s). In case of oophorectomy alone, only when the reproductive status of the woman has been confirmed by follow up hormone level assessment.
- Male sterilization (at least 6 months prior to screening). For female patients on the study, the vasectomized male partner should be the sole partner for that patient.
- Use of oral (estrogen and progesterone), injected, or implanted hormonal methods of contraception or placement of an intrauterine device (IUD) or intrauterine system (IUS), or other forms of hormonal contraception that have comparable efficacy (failure rate <1%), for example, hormone vaginal ring or transdermal hormone contraception.

- In case of use of oral contraception women should have been stable on the same pill for a minimum of 3 months before taking study treatment.

  NOTE: Women are considered post-menopausal and not of child-bearing potential if they have had over 12 months of natural (spontaneous) amenorrhea with an appropriate clinical profile (e.g. age appropriate [generally age from 40 to 59 years], history of vasomotor symptoms [e.g. hot flush]) in the absence of other medical justification or have had surgical bilateral oophorectomy (with or without hysterectomy), total hysterectomy or bilateral tubal ligation at least six weeks prior to enrollment on study. In the case of oophorectomy alone, only when the reproductive status of the woman has been confirmed by follow up hormone level assessment is she considered not of child-bearing potential.

20. A condom is required for all sexually active male participants to prevent them from fathering a child AND to prevent delivery of study treatment via seminal fluid to their partner. Sexually active males receiving NIZ985 as a single agent or in combination with spartalizumab or tislelizumab must use a condom during intercourse for 30 days after their last dose of NIZ985. In addition, male participants must not donate sperm for 30 days after the last dose of NIZ985. Patients should not father a child during this post treatment period. A condom is required to be used also by vasectomized men as well as during intercourse with a male partner in order to prevent delivery of the drug via semen.

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Participant Flow Table

Overall Study

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg	Total
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.	
Started	3	4	6	7	7	6	4	6	6	7	4	60
Completed	0	0	0	0	0	0	0	0	0	0	0	0
Not Completed	3	4	6	7	7	6	4	6	6	7	4	60
Adverse Event	0	0	1	0	0	2	0	0	0	3	0	6
Death	1	0	0	0	0	1	0	0	0	0	0	2

Physician Decision	0	0	1	0	1	0	0	0	1	2	0	5
Progressive disease	2	4	3	7	6	3	4	5	4	2	4	44
Subject decision	0	0	1	0	0	0	0	1	1	0	0	3

Baseline Characteristics

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg	Total
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardles	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardles	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardles	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.	

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Number of Participants [units: participants]	3	4	6	7	7	6	4	6	6	7	4	60
Baseline Analysis Population Description												
Age Continuous (units: years) Analysis Population Type: Participants Mean ± Standard Deviation												
	58.3±6.51	52.8±19.53	57.5±12.10	53.3±15.90	53.6±12.87	59.3±8.33	60.5±8.66	47.8±20.78	64.2±17.31	59.0±6.24	60.3±6.55	56.7±13.2
Age, Customized (units: participants) Analysis Population Type: Participants Count of Participants (Not Applicable)												
18 - < 65 years	2	3	4	5	6	4	3	4	2	6	2	41
65 - < 85 years	1	1	2	2	1	2	1	2	4	1	2	19
Sex: Female, Male (units: participants) Analysis Population Type: Participants Count of Participants (Not Applicable)												

Female	2	0	2	5	3	3	3	2	1	4	2	27
Male	1	4	4	2	4	3	1	4	5	3	2	33
Race/Ethnicity, Customized (units: participants) Analysis Population Type: Participants Count of Participants (Not Applicable)												
Asian	3	0	1	1	2	2	3	1	2	3	0	18
White	0	4	5	6	5	4	1	5	4	4	4	42

Primary Outcome Result(s)

Number of participants with Dose-Limiting Toxicities (DLTs)

Description	A dose-limiting toxicity (DLT) is defined as an adverse event or abnormal laboratory value of Common Terminology Criteria for Adverse Events (CTCAE) grade ≥ 3 that occurs within the DLT period (28 days) where the relationship to NIZ985 as single agent, the NIZ985-spartalizumab combination, or the NIZ985-tislelizumab combination, cannot be ruled out, and is not primarily related to disease, disease progression, inter-current illness, or concomitant medications. Other clinically significant toxicities could be considered to be DLTs, even if not CTCAE grade 3 or higher. A few grade 3 or 4 adverse events defined in the study protocol were not considered DLTs.
Time Frame	28 days (Cycle 1)
Analysis Population Description	All patients who received at least one dose of study treatment, and who met the minimum exposure criterion defined in the protocol and had sufficient safety evaluations or had experienced a DLT during the DLT evaluation period.

	NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + Tislelizumab 300mg**
Arm/Group	NIZ985 2 mcg/kg SC	NIZ985 4 mcg/kg SC	NIZ985 8 mcg/kg SC	NIZ985 12 mcg/kg SC	NIZ985 16 mcg/kg SC	NIZ985 2 mcg/kg	NIZ985 4 mcg/kg	NIZ985 8 mcg/kg	NIZ985 12 mcg/kg	NIZ985 16 mcg/kg	NIZ985 12 mcg/kg

Description	QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	6	4	4	6	6	6	2
Number of participants with Dose-Limiting Toxicities (DLTs) (units: participants)	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**
At least one DLT	0 (%)	0 (%)	0 (%)	1 (14.29%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (16.67%)	1 (16.67%)	0 (%)
-Fatigue	0 (%)	0 (%)	0 (%)	1 (14.29%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)

-Injection site reaction	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (16.67%)	1 (16.67%)	0 (%)
-Dermatitis bullous	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (16.67%)	0 (%)	0 (%)

Number of participants with Adverse Events (AEs) and Serious Adverse Events (SAEs) during the on-treatment period

Description	Number of participants with AEs (any AE regardless of seriousness) and SAEs, including changes from baseline in vital signs, electrocardiograms and laboratory results qualifying and reported as AEs. The on-treatment period is defined from the day of first administration of study treatment up to 30 days after the date of its last administration.
Time Frame	Up to approximately 3 years (NIZ985 single agent), 1.6 years (NIZ985+PDR001) and 0.6 years (NIZ985+tislelizumab)
Analysis Population Description	All patients who received at least one dose of study treatment.

	NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + Tislelizumab 300mg**
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.

	evaluation regardless of the result.	evaluation regardless of the result.	evaluation regardless of the result.	evaluation regardless of the result.	evaluation regardless of the result.	starting at Cycle 1 Day 1.	starting at Cycle 1 Day 1.	starting at Cycle 1 Day 1.	starting at Cycle 1 Day 1.	starting at Cycle 1 Day 1.	
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	6	6	7	4
Number of participants with Adverse Events (AEs) and Serious Adverse Events (SAEs) during the on-treatment period (units: participants)	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**
AEs	3 (100%)	4 (100%)	6 (100%)	7 (100%)	7 (100%)	6 (100%)	4 (100%)	6 (100%)	6 (100%)	7 (100%)	4 (100%)
Treatment-related AEs	3 (100%)	3 (75%)	6 (100%)	7 (100%)	7 (100%)	6 (100%)	4 (100%)	6 (100%)	6 (100%)	7 (100%)	4 (100%)
SAEs	1 (33.33%)	1 (25%)	1 (16.67%)	3 (42.86%)	1 (14.29%)	2 (33.33%)	1 (25%)	2 (33.33%)	2 (33.33%)	3 (42.86%)	3 (75%)

Treatment -related SAEs	0 (%)	0 (%)	1 (16.67%)	1 (14.29%)	1 (14.29%)	1 (16.67%)	1 (25%)	2 (33.33%)	1 (16.67%)	2 (28.57%)	1 (25%)
Fatal SAEs	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (25%)	0 (%)	0 (%)	0 (%)	0 (%)
Treatment -related fatal SAEs	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (25%)	0 (%)	0 (%)	0 (%)	0 (%)

Number of participants with dose reductions and dose interruptions of NIZ985

Description	Number of participants with at least one dose reduction and at least one dose interruption of NIZ985. Dose or schedule adjustments were permitted for patients who did not tolerate the protocol-specified dosing schedule.
Time Frame	Up to approximately 2.9 years (NIZ985 single agent), 1.5 years (NIZ985+PDR001) and 0.5 years (NIZ985+tislelizumab)
Analysis Population Description	All patients who received at least one dose of NIZ985

	NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + Tislelizumab 300mg**
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300

	re-evaluation regardless of the result.	re-evaluation regardless of the result.	re-evaluation regardless of the result.	re-evaluation regardless of the result.	re-evaluation regardless of the result.	Q4W starting at Cycle 1 Day 1.	Q4W starting at Cycle 1 Day 1.	Q4W starting at Cycle 1 Day 1.	Q4W starting at Cycle 1 Day 1.	Q4W starting at Cycle 1 Day 1.	mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	6	6	7	4
Number of participants with dose reductions and dose interruptions of NIZ985 (units: participants)	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**
At least one dose reduction or interruption	0 (%)	2 (50%)	2 (33.33%)	4 (57.14%)	5 (71.43%)	2 (33.33%)	0 (%)	3 (50%)	2 (33.33%)	5 (71.43%)	3 (75%)
At least one dose reduction	0 (%)	0 (%)	2 (33.33%)	1 (14.29%)	4 (57.14%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (25%)
At least one dose	0 (%)	2 (50%)	2 (33.33%)	3 (42.86%)	5 (71.43%)	2 (33.33%)	0 (%)	3 (50%)	2 (33.33%)	5 (71.43%)	3 (75%)

interruptio
n

Number of participants with dose reductions and dose interruptions of PDR001

Description	Number of participants with at least one dose reduction and at least one dose interruption of PDR001. Dose or schedule adjustments were permitted for patients who did not tolerate the protocol-specified dosing schedule. Dose reductions were not permitted for PDR001.
Time Frame	Up to approximately 2.7 years (NIZ985 single agent; PDR001 added after first disease reevaluation) and 1.5 years (NIZ985+PDR001 starting at Cycle 1 Day 1)
Analysis Population Description	All patients who received at least one dose of PDR001, including patients in the single-agent NIZ985 arm who added PDR001 after their first disease reevaluation.

	NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.
Number of Participants Analyzed [units:	0	4	3	2	4	6	4	6	6	7

participants]										
Number of participants with dose reductions and dose interruptions of PDR001 (units: participants)	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**
At least one dose reduction or interruption	(NaN%)	0 (%)	2 (66.67%)	0 (%)	1 (25%)	2 (33.33%)	0 (%)	2 (33.33%)	1 (16.67%)	1 (14.29%)
At least one dose reduction	(NaN%)	0 (%)	0 (%)	0 (%)	0 (%)	1 (16.67%)	0 (%)	0 (%)	0 (%)	0 (%)
At least one dose interruption	(NaN%)	0 (%)	2 (66.67%)	0 (%)	1 (25%)	1 (16.67%)	0 (%)	2 (33.33%)	1 (16.67%)	1 (14.29%)

Number of participants with dose reductions and dose interruptions of tislelizumab

Description	Number of participants with at least one dose reduction and at least one dose interruption of tislelizumab. Dose or schedule adjustments were permitted for patients who did not tolerate the protocol-specified dosing schedule.
Time Frame	Up to approximately 0.5 years
Analysis Population Description	All patients who received at least one dose of tislelizumab

	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	4
Number of participants with dose reductions and dose interruptions of tislelizumab (units: participants)	**Count of Participants (Percentage)**
At least one dose reduction or interruption	3 (75%)
At least one dose reduction	0 (%)
At least one dose interruption	3 (75%)

Dose intensity of NIZ985

Description	Dose intensity of NIZ985 was calculated as cumulative actual dose in micrograms/kilogram divided by duration of exposure in days.
Time Frame	Up to approximately 2.9 years (NIZ985 single agent), 1.5 years (NIZ985+PDR001) and 0.5 years (NIZ985+tislelizumab)
Analysis Population Description	All patients who received at least one dose of NIZ985

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizu	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizu	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizu	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizu	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizu	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off

	mab could be added after the first disease re-evaluation regardless of the result.	mab could be added after the first disease re-evaluation regardless of the result.	mab could be added after the first disease re-evaluation regardless of the result.	mab could be added after the first disease re-evaluation regardless of the result.	mab could be added after the first disease re-evaluation regardless of the result.	combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	6	6	7	4
Dose intensity of NIZ985 (units: mcg/kg/day)	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**
	0.23 (0.2 to 0.3)	0.47 (0.4 to 0.5)	0.91 (0.5 to 1.0)	1.16 (1.0 to 1.7)	1.05 (0.7 to 2.3)	0.23 (0.1 to 0.3)	0.47 (0.4 to 0.6)	0.84 (0.7 to 1.0)	1.32 (1.2 to 1.7)	1.71 (1.1 to 2.3)	1.12 (0.8 to 1.7)

Dose intensity of PDR001

Description	Dose intensity of PDR001 was calculated as cumulative actual dose in milligrams divided by duration of exposure in days and multiplied by 28 days.
Time Frame	Up to approximately 2.7 years (NIZ985 single agent; PDR001 added after first disease reevaluation) and 1.5 years (NIZ985+PDR001 starting at Cycle 1 Day 1)
Analysis Population Description	All patients who received at least one dose of PDR001, including patients in the single-agent NIZ985 arm who added PDR001 after their first disease reevaluation.

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.
Number of Participants Analyzed [units: participants]	0	4	3	2	4	6	4	6	6	7
Dose intensity of PDR001 (units: mg/28 days)	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**
		400.00 (400.0 to 476.6)	393.97 (378.9 to 400.0)	400.00 (400.0 to 400.0)	400.00 (372.8 to 402.9)	400.00 (285.7 to 400.0)	400.00 (386.2 to 407.3)	389.19 (358.4 to 400.0)	396.49 (373.3 to 402.4)	392.45 (350.0 to 400.0)

Dose intensity of tislelizumab

Description	Dose intensity of tislelizumab was calculated as cumulative actual dose in milligrams divided by duration of exposure in days and multiplied by 28 days.
Time Frame	Up to approximately 0.5 years
Analysis Population Description	All patients who received at least one dose of tislelizumab

	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	4
Dose intensity of tislelizumab (units: mg/28 days)	**Median (Full Range)**
	277.45 (255.8 to 300.0)

Secondary Outcome Result(s)

Best Overall Response (BOR) per RECIST v1.1

Description	BOR is defined as the best response recorded from the start of the study treatment until disease progression/recurrence, based on local investigator assessment per Response Evaluation Criteria In Solid Tumors version 1.1 (RECIST v1.1). For RECIST v1.1, CR=Disappearance of all non-nodal target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; PR= At least a 30% decrease in the sum of diameters of all target lesions, taking as reference the baseline sum of diameters; PD= At least a 20% increase in the sum of diameters of all measured target lesions, taking as reference the smallest sum of diameter of all target lesions recorded at or after baseline. In addition, the sum must also demonstrate an absolute increase of at least 5 mm; SD= Neither sufficient shrinkage to qualify for PR or CR nor an increase in lesions which would qualify for progression).
Time Frame	Up to approximately 2.9 years (NIZ985 single agent), 1.5 years (NIZ985+PDR001) and 0.5 years (NIZ985+tislelizumab)

Analysis Population Description: All patients with solid tumors who received at least one dose of study treatment.

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	5	6	7	4
Best Overall Response (BOR)	**Count of Participants**	**Count of Participants**	**Count of Participants**	**Count of Participants**	**Count of Participants**	**Count of Participants**	**Count of Participants**	**Count of Participants**	**Count of Participants**	**Count of Participants**	**Count of Participants**

per RECIST v1.1 (units: participants)	**(Percentage)**	**(Percentage)**	**(Percentage)**	**(Percentage)**	**(Percentage)**	**(Percentage)**	**(Percentage)**	**(Percentage)**	**(Percentage)**	**(Percentage)**	**(Percentage)**
Complete Response (CR)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)
Partial Response (PR)	0 (%)	0 (%)	1 (16.67%)	0 (%)	1 (14.29%)	1 (16.67%)	0 (%)	0 (%)	1 (16.67%)	0 (%)	0 (%)
Stable Disease (SD)	0 (%)	1 (25%)	2 (33.33%)	1 (14.29%)	2 (28.57%)	2 (33.33%)	1 (25%)	3 (60%)	2 (33.33%)	2 (28.57%)	2 (50%)
Progressive Disease (PD)	2 (66.67%)	3 (75%)	2 (33.33%)	5 (71.43%)	3 (42.86%)	1 (16.67%)	2 (50%)	2 (40%)	2 (33.33%)	3 (42.86%)	1 (25%)
Not Evaluable (NE)	1 (33.33%)	0 (%)	1 (16.67%)	1 (14.29%)	1 (14.29%)	2 (33.33%)	1 (25%)	0 (%)	1 (16.67%)	2 (28.57%)	1 (25%)

Overall Response Rate (ORR) per RECIST v1.1

Description	ORR is the percentage of patients with a best overall response of complete response (CR) or partial response (PR), based on local investigator assessment per RECIST v1.1. PR or CR per RECIST v1.1 were confirmed by a new assessment after at least 4 weeks. For RECIST v1.1, CR=Disappearance of all non-nodal target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; PR= At least a 30% decrease in the sum of diameter of all target lesions, taking as reference the baseline sum of diameters.
Time Frame	Up to approximately 2.9 years (NIZ985 single agent), 1.5 years (NIZ985+PDR001) and 0.5 years (NIZ985+tislelizumab)
Analysis Population Description	All patients with solid tumors who received at least one dose of study treatment.

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	5	6	7	4
Overall Response Rate (ORR) per RECIST v1.1 (units: percentage of	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**

participants)											
	0 (0.0 to 63.2)	0 (0.0 to 52.7)	16.7 (0.9 to 58.2)	0 (0.0 to 34.8)	14.3 (0.7 to 52.1)	16.7 (0.9 to 58.2)	0 (0.0 to 52.7)	0 (0.0 to 45.1)	16.7 (0.9 to 58.2)	0 (0.0 to 34.8)	0 (0.0 to 52.7)

Disease Control Rate (DCR) per RECIST v1.1

Description	DCR is the percentage of patients with a best overall response of complete response (CR), partial response (PR) or stable disease (SD), based on local investigator assessment per RECIST v1.1. PR or CR per RECIST v1.1 were confirmed by a new assessment after at least 4 weeks. For RECIST v1.1, CR=Disappearance of all non-nodal target lesions. In addition, any pathological lymph nodes assigned as target lesions must have a reduction in short axis to < 10 mm; PR= At least a 30% decrease in the sum of diameter of all target lesions, taking as reference the baseline sum of diameters; SD= Neither sufficient shrinkage to qualify for PR or CR nor an increase in lesions which would qualify for progression.
Time Frame	Up to approximately 2.9 years (NIZ985 single agent), 1.5 years (NIZ985+PDR001) and 0.5 years (NIZ985+tislelizumab)
Analysis Population Description	All patients with solid tumors who received at least one dose of study treatment.

	NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + Tislelizumab 300mg**
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300

	evaluation regardless of the result.	evaluation regardless of the result.	evaluation regardless of the result.	evaluation regardless of the result.	evaluation regardless of the result.	starting at Cycle 1 Day 1.	starting at Cycle 1 Day 1.	starting at Cycle 1 Day 1.	starting at Cycle 1 Day 1.	starting at Cycle 1 Day 1.	mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	5	6	7	4
Disease Control Rate (DCR) per RECIST v1.1 (units: percentage of participants)	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**	**Number (90% Confidence Interval)**
	0 (0.0 to 63.2)	25.0 (1.3 to 75.1)	50.0 (15.3 to 84.7)	14.3 (0.7 to 52.1)	42.9 (12.9 to 77.5)	50.0 (15.3 to 84.7)	25.0 (1.3 to 75.1)	50.0 (18.9 to 92.4)	50.0 (15.3 to 84.7)	28.6 (5.3 to 65.9)	50.0 (9.8 to 90.2)

Overall Disease Response per Cheson 2014 for lymphoma

Description	Overall disease response is determined by assessing whether the combined radiological responses at each time point are appropriate, based on bone marrow biopsies and other clinical findings that may be available, such as cytology results, physical examination results of palpable lesions or skin lesions, and biopsies of lymph nodes or extra-nodal lesions. The possible outcomes for overall disease response are Complete Response (CR), Partial Response (PR), Stable Disease (SD) and Progressive Disease (PD).
Time Frame	Up to 63 days
Analysis Population Description	All patients with lymphoma who received at least one dose of study treatment.

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	0	0	0	0	0	0	0	1	0	0	0
Overall Disease Response per Cheson 2014 for lymphoma	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**

(units: participants)											
Progressive Disease (PD)	(NaN%)	(NaN%)	(NaN%)	(NaN%)	(NaN%)	(NaN%)	(NaN%)	1 (100%)	(NaN%)	(NaN%)	(NaN%)

Progression-Free Survival (PFS) per RECIST v1.1 (expansion group only)

Description	PFS is defined as the time from the date of start of treatment to the date of event defined as the first documented progression as per local review and according to RECIST v1.1 or death due to any cause. If a patient has not had an event, PFS was censored at the date of last adequate tumor assessment. PFS was analyzed using Kaplan-Meier estimates.
Time Frame	Up to approximately 0.5 years
Analysis Population Description	All patients in the expansion group (NIZ985+tislelizumab) who received at least one dose of study treatment.

	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	4
Progression-Free Survival (PFS) per RECIST v1.1 (expansion group only) (units: months)	**Median (90% Confidence Interval)**
	5.7 (1.8 to NA)[1]

[1] Not estimable due to insufficient number of participants with events.

Duration of Response (DOR) per RECIST v1.1 (expansion group only)

Description	DOR only applies to patients for whom best overall response is complete response (CR) or partial response (PR) based on local investigator assessment per RECIST v1.1. DOR is defined as the time from the date of first documented response (CR or PR) to the date of first

	documented progression or death due to underlying cancer. If a patient did not have an event, DOR was censored at the date of last adequate tumor assessment. DOR was analyzed using Kaplan-Meier estimates.
Time Frame	Up to approximately 0.5 years
Analysis Population Description	All patients in the expansion group (NIZ985+tislelizumab) for whom best overall response was CR or PR.

	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	0
Duration of Response (DOR) per RECIST v1.1 (expansion group only) (units: months)	**Median (90% Confidence Interval)**

Maximum observed serum concentration (Cmax) of NIZ985

Description	Pharmacokinetic (PK) parameters were calculated based on NIZ985 serum concentrations by using non-compartmental methods. Cmax is defined as the maximum (peak) observed concentration following a dose.
Time Frame	Cycle 1 Day 1 (C1D1) and Cycle 1 Day 15 (C1D15): pre-dose, 4, 8, 24, 48, 72 and 168 hours after injection. The duration of one cycle was 28 days.
Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received NIZ985 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received at least one of the planned treatments and provided at least one evaluable PK sample.

NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + Tislelizumab 300mg**

Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	6	6	7	4
Maximum observed serum concentration (Cmax) of NIZ985 (units: pg/mL)	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**
Cycle 1 Day 1 (n=3,4,6,7,7,6,4,6,6,6,3)	188 (18.3%)	591 (83.3%)	1430 (42.5%)	2840 (77.7%)	3780 (151.0%)	288 (29.9%)	638 (76.2%)	1270 (40.6%)	1610 (125.9%)	2560 (67.7%)	2230 (120.5%)
Cycle 1 Day 15 (n=2,4,6,5,6,3,4,6,4,5,2)	211 (83.4%)	158 (64.0%)	499 (33.7%)	1660 (120.5%)	1160 (158.0%)	349 (363.9%)	285 (171.8%)	688 (61.9%)	1150 (51.6%)	1130 (54.4%)	827 (26.3%)

Time to reach maximum serum concentration (Tmax) of NIZ985

Description	PK parameters were calculated based on NIZ985 serum concentrations by using non-compartmental methods. Tmax is defined as the time to reach maximum (peak) concentration following a dose. Actual recorded sampling times were considered for the calculations.
Time Frame	Cycle 1 Day 1 (C1D1) and Cycle 1 Day 15 (C1D15): pre-dose, 4, 8, 24, 48, 72 and 168 hours after injection. The duration of one cycle was 28 days.
Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received NIZ985 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received at least one of the planned treatments and provided at least one evaluable PK sample.

	NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + Tislelizumab 300mg**
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants	3	4	6	7	7	6	4	6	6	7	4

Analyzed [units: participants]											
Time to reach maximum serum concentration (Tmax) of NIZ985 (units: hours)	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**	**Median (Full Range)**
Cycle 1 Day 1 (n=3,4,6,7,7,6,4, 6,6,6,3)	23.3 (7.9 to 23.8)	24 (8 to 24.2)	24.2 (22.5 to 25.3)	24.5 (6.77 to 48.2)	23.7 (7.83 to 47.9)	23.2 (4.02 to 24.7)	15.9 (7.8 to 23.9)	24.5 (4.18 to 48.7)	22.2 (7.18 to 48)	23.5 (5.95 to 47.5)	23.8 (22.3 to 24)
Cycle 1 Day 15 (n=2,4,6,5,6,3,4, 6,4,5,2)	8.05 (7.95 to 8.15)	23.9 (8.05 to 48)	15.3 (7.83 to 48.1)	22.3 (4 to 23.9)	7.68 (3.78 to 23.9)	8.02 (7.88 to 8.1)	22.7 (3.98 to 23.3)	23.7 (7.75 to 25.6)	23.7 (6.38 to 24.5)	8 (7.77 to 23.9)	24.2 (22.7 to 25.7)

Area under the serum concentration-time curve from time zero to 48 hours post dose (AUC48) of NIZ985

Description	PK parameters were calculated based on NIZ985 serum concentrations by using non-compartmental methods. The linear trapezoidal method was used for AUC calculation.
Time Frame	Cycle 1 Day 1 (C1D1) and Cycle 1 Day 15 (C1D15): pre-dose, 4, 8, 24, 48, 72 and 168 hours after injection. The duration of one cycle was 28 days.
Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received NIZ985 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received at least one of the planned treatments and provided at least one evaluable PK sample.

	NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + Tislelizumab 300mg**
Arm/Group Description	NIZ985 2 mcg/kg	NIZ985 4 mcg/kg	NIZ985 8 mcg/kg	NIZ985 12	NIZ985 16 mcg/kg SC	NIZ985 2 mcg/kg	NIZ985 4 mcg/kg	NIZ985 8 mcg/kg	NIZ985 12 mcg/kg	NIZ985 16	NIZ985 12 mcg/kg

	SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	6	6	7	4
Area under the serum concentration-time curve from time zero to 48 hours post dose (AUC48) of NIZ985 (units: h*pg/mL)	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**
Cycle 1 Day 1 (n=3,4,6,7,7,5,4,6,6,6,3)	5340 (49.2%)	17300 (76.8%)	47600 (43.5%)	90500 (75.1%)	107000 (111.8%)	8970 (43.9%)	21100 (76.5%)	46100 (37.4%)	58200 (104.6%)	84500 (55.6%)	74900 (107.4%)
Cycle 1 Day 15 (n=2,4,6,5,6,3,4,6,4,5,2)	3860 (31.8%)	5280 (96.1%)	14900 (57.7%)	45900 (95.3%)	28400 (175.7%)	7090 (472.0%)	8990 (111.1%)	20900 (59.6%)	30600 (10.9%)	29300 (39.8%)	28500 (20.5%)

Area under the serum concentration-time curve from time zero to 72 hours post dose (AUC72) of NIZ985

Description	PK parameters were calculated based on NIZ985 serum concentrations by using non-compartmental methods. The linear trapezoidal method was used for AUC calculation.
Time Frame	Cycle 1 Day 1 (C1D1) and Cycle 1 Day 15 (C1D15): pre-dose, 4, 8, 24, 48, 72 and 168 hours after injection. The duration of one cycle was 28 days.
Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received NIZ985 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received at least one of the planned treatments and provided at least one evaluable PK sample.

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.

Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	6	6	7	4
Area under the serum concentration-time curve from time zero to 72 hours post dose (AUC72) of NIZ985 (units: h*pg/mL)	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**
Cycle 1 Day 1 (n=3,4,6,5,7,5,4,5,5,6,3)	5690 (56.0%)	20100 (78.8%)	58700 (36.9%)	108000 (76.3%)	130000 (99.8%)	9780 (49.0%)	26300 (76.3%)	62500 (32.1%)	63300 (84.9%)	107000 (55.6%)	90400 (96.6%)
Cycle 1 Day 15 (n=1,4,6,4,6,3,3,6,4,4,2)	3830	6580 (89.8%)	17700 (67.6%)	66400 (79.1%)	34400 (152.4%)	7380 (534.9%)	12600 (138.9%)	26200 (54.6%)	35000 (54.6%)	35900 (45.0%)	34300 (20.6%)

Area under the serum concentration-time curve from time zero to 168 hours post dose (AUC168) of NIZ985

Description	PK parameters were calculated based on NIZ985 serum concentrations by using non-compartmental methods. The linear trapezoidal method was used for AUC calculation.
Time Frame	Cycle 1 Day 1 (C1D1) and Cycle 1 Day 15 (C1D15): pre-dose, 4, 8, 24, 48, 72 and 168 hours after injection. The duration of one cycle was 28 days.
Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received NIZ985 and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received at least one of the planned treatments and provided at least one evaluable PK sample.

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	6	6	7	4
Area under the serum concentration-time curve from time zero to 168 hours post dose (AUC168) of NIZ985 (units: h*pg/mL)	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**	**Geometric Mean (Geometric Coefficient of Variation)**

Cycle 1 Day 1 (n=0,3,4,2,5,1,2,2,5,4,2)		25900 (102.0%)	73500 (38.6%)	67200 (73.2%)	166000 (101.5%)	16100	23000 (52.9%)	64500 (68.9%)	83300 (44.3%)	135000 (60.7%)	108000 (124.0%)
Cycle 1 Day 15 (n=1,4,6,4,6,3,3,6,3,4,2)	3830	7490 (115.0%)	20800 (87.2%)	78300 (68.1%)	44000 (123.5%)	7910 (669.2%)	15900 (132.7%)	38300 (53.6%)	42500 (23.0%)	42600 (45.9%)	44600 (19.3%)

Trough serum concentration (Ctrough) of PDR001

Description	Ctrough is defined as the concentration reached immediately before the next dose is administered. All drug concentrations below the lower limit of quantification were treated as zero for the calculation of PK parameters.
Time Frame	pre-dose Cycle 1 Day 1, Cycle 2 Day 1, Cycle 3 Day 1, Cycle 4 Day 1, Cycle 5 Day 1 and Cycle 6 Day 1. The duration of one cycle was 28 days.
Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received PDR001, including patients in the single-agent NIZ985 arm who added PDR001 after their first disease reevaluation, and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received at least one of the planned treatments and provided at least one evaluable PK sample.

	NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.

Number of Participants Analyzed [units: participants]	0	4	3	2	4	6	4	6	6	7
Trough serum concentration (Ctrough) of PDR001 (units: µg/mL)	**Mean ± Standard Deviation**	**Mean ± Standard Deviation**	**Mean ± Standard Deviation**	**Mean ± Standard Deviation**	**Mean ± Standard Deviation**	**Mean ± Standard Deviation**	**Mean ± Standard Deviation**	**Mean ± Standard Deviation**	**Mean ± Standard Deviation**	**Mean ± Standard Deviation**
Cycle 1 Day 1 (n=0,0,0,0,0,6,4,5, 6,6)						0 ± 0	0 ± 0	0 ± 0	0 ± 0	0 ± 0
Cycle 2 Day 1 (n=0,0,0,0,0,4,3,6, 4,4)						27.3 ± 14.1	23.7 ± 16.5	26.7 ± 7.85	21.9 ± 10.3	21.2 ± 11.1
Cycle 3 Day 1 (n=0,3,3,2,3,3,2,4, 3,3)		0 ± 0	0 ± 0	0 ± 0	0 ± 0	45.5 ± 23.2	39 ± 38.1	35.2 ± 17.2	32.8 ± 18	22 ± 10.9
Cycle 4 Day 1 (n=0,2,2,2,3,3,1,2, 3,1)		22.7 ± 2.4	31.2 ± 3.11	35.6 ± 0.495	24.7 ± 11.3	59.6 ± 36.9	77.5	45.8 ± 43	37.9 ± 18.7	25.7
Cycle 5 Day 1 (n=0,0,2,0,3,3,1,2, 3,1)			56.1 ± 4.03		39.2 ± 22	56.5 ± 55.8	96	59.9 ± 26.4	39.9 ± 20.5	30.9
Cycle 6 Day 1(n=0,0,2,0,4,3,1, 2,3,1)			64 ± 4.67		30.8 ± 29.7	70.4 ± 51.9	98	58.9 ± 24.3	44.9 ± 26.8	38.9

Trough serum concentration (Ctrough) of tislelizumab

Description	Ctrough is defined as the concentration reached immediately before the next dose is administered. All drug concentrations below the lower limit of quantification were treated as zero for the calculation of PK parameters.
Time Frame	pre-dose Cycle 1 Day 1, Cycle 2 Day 1, Cycle 3 Day 1, Cycle 4 Day 1, Cycle 5 Day 1 and Cycle 6 Day 1. The duration of one cycle was 28 days.

Analysis Population Description	Patients in the pharmacokinetic analysis set (PAS) who received tislelizumab and had an available value for the outcome measure at each timepoint. PAS consisted of all patients who received at least one of the planned treatments and provided at least one evaluable PK sample.

	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	4
Trough serum concentration (Ctrough) of tislelizumab (units: ng/mL)	**Mean ± Standard Deviation**
Cycle 1 Day 1 (n=2)	0 ± 0
Cycle 2 Day 1 (n=3)	26600 ± 20900
Cycle 3 Day 1 (n=2)	38700 ± 25000
Cycle 4 Day 1 (n=2)	30800 ± 28200
Cycle 5 Day 1 (n=2)	36100 ± 32600
Cycle 6 Day 1 (n=1)	56700

Number of participants with anti-NIZ985 antibodies

Description	NIZ985 immunogenicity was evaluated in serum samples. Patient anti-drug antibodies (ADA) status was defined as follows: • ADA-negative at baseline: ADA-negative sample at baseline • ADA-positive at baseline: ADA-positive sample at baseline • ADA-negative post-baseline: ADA-negative sample at baseline and at least 1 post-baseline sample, all of which are ADA-negative samples • Treatment-induced ADA-positive: ADA-negative sample at baseline and at least 1 treatment-induced ADA-positive sample • Treatment-boosted ADA-positive: ADA-positive sample at baseline and at least 1 treatment-boosted ADA-positive sample • ADA-inconclusive: patient who does not qualify for any of the above definitions or a patient for which the baseline sample is missing
Time Frame	: Baseline (before first dose) and post-baseline (assessed throughout the treatment, up to approximately 2.9 years, 1.5 years and 0.5 years for NIZ985 single agent, NIZ985+PDR001 and NIZ985+tislelizumab, respectively)
Analysis Population Description	All patients who received at least 1 dose of NIZ985 and had a determinant baseline immunogenicity (IG) sample and at least 1 determinant post-baseline IG sample for assessing anti-NIZ985 antibodies.

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	6	6	7	4
Number of participants with anti-NIZ985 antibodies (units:	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**

participants)											
ADA-negative at baseline	3 (100%)	4 (100%)	6 (100%)	7 (100%)	7 (100%)	6 (100%)	4 (100%)	6 (100%)	6 (100%)	7 (100%)	4 (100%)
ADA-positive at baseline	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)
ADA-negative post-baseline	3 (100%)	2 (50%)	3 (50%)	6 (85.71%)	2 (28.57%)	4 (66.67%)	3 (75%)	3 (50%)	3 (50%)	4 (57.14%)	2 (50%)
ADA-inconclusive at baseline	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)
Treatment-induced ADA-positive	0 (%)	2 (50%)	3 (50%)	1 (14.29%)	5 (71.43%)	2 (33.33%)	1 (25%)	3 (50%)	3 (50%)	3 (42.86%)	2 (50%)
Treatment-boosted ADA-positive	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)

Number of participants with anti-PDR001 antibodies

Description	PDR001 immunogenicity was evaluated in serum samples. Patient anti-drug antibodies (ADA) status was defined as follows: • ADA-negative at baseline: ADA-negative sample at baseline • ADA-positive at baseline: ADA-positive sample at baseline • ADA-negative post-baseline: ADA-negative sample at baseline and at least 1 post-baseline sample, all of which are ADA-negative samples • Treatment-induced ADA-positive: ADA-negative sample at baseline and at least 1 treatment-induced ADA-positive sample • Treatment-boosted ADA-positive: ADA-positive sample at baseline and at least 1 treatment-boosted ADA-positive sample • ADA-inconclusive: patient who does not qualify for any of the above definitions or a patient for which the baseline sample is missing
Time Frame	Baseline (before first dose) and post-baseline (assessed throughout the treatment, up to approx. 2.7 years and 1.5 years for patients in the single-agent NIZ985 arm who added PDR001 and patients treated with NIZ985+PDR001 from the start, respectively)

Analysis Population Description	All patients who received at least 1 dose of PDR001 and had a determinant baseline immunogenicity (IG) sample and at least 1 determinant post-baseline IG sample for assessing anti-PDR001 antibodies.

	NIZ985 2mcg/kg	**NIZ985 4mcg/kg**	**NIZ985 8mcg/kg**	**NIZ985 12mcg/kg**	**NIZ985 16mcg/kg**	**NIZ985 2mcg/kg + PDR001 400mg**	**NIZ985 4mcg/kg + PDR001 400mg**	**NIZ985 8mcg/kg + PDR001 400mg**	**NIZ985 12mcg/kg + PDR001 400mg**	**NIZ985 16mcg/kg + PDR001 400mg**
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.
Number of Participants Analyzed [units: participants]	0	2	3	2	4	4	3	6	6	5
Number of participants with anti-PDR001 antibodies (units: participants)	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**	**Count of Participants (Percentage)**

ADA-negative at baseline	(NaN%)	2 (100%)	3 (100%)	2 (100%)	4 (100%)	4 (100%)	3 (100%)	6 (100%)	6 (100%)	5 (100%)
ADA-positive at baseline	(NaN%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)
ADA-negative post-baseline	(NaN%)	2 (100%)	3 (100%)	2 (100%)	4 (100%)	2 (50%)	2 (66.67%)	6 (100%)	5 (83.33%)	4 (80%)
ADA-inconclusive at baseline	(NaN%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)
Treatment-induced ADA-positive	(NaN%)	0 (%)	0 (%)	0 (%)	0 (%)	2 (50%)	1 (33.33%)	0 (%)	1 (16.67%)	1 (20%)
Treatment-boosted ADA-positive	(NaN%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)	0 (%)

Number of participants with anti-tislelizumab antibodies

Description	Tislelizumab immunogenicity was evaluated in serum samples. Patient anti-drug antibodies (ADA) status was defined as follows: • ADA-negative at baseline: ADA-negative sample at baseline • ADA-positive at baseline: ADA-positive sample at baseline • ADA-negative post-baseline: ADA-negative sample at baseline and at least 1 post-baseline sample, all of which are ADA-negative samples • Treatment-induced ADA-positive: ADA-negative sample at baseline and at least 1 treatment-induced ADA-positive sample • Treatment-boosted ADA-positive: ADA-positive sample at baseline and at least 1 treatment-boosted ADA-positive sample • ADA-inconclusive: patient who does not qualify for any of the above definitions or a patient for which the baseline sample is missing
Time Frame	Baseline (before first dose) and post-baseline (assessed throughout the treatment, up to approximately 0.5 years)
Analysis Population Description	All patients who received at least 1 dose of tislelizumab and had a determinant baseline immunogenicity (IG) sample and at least 1 determinant post-baseline IG sample for assessing anti-tislelizumab antibodies.

	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	4
Number of participants with anti-tislelizumab antibodies (units: participants)	**Count of Participants (Percentage)**
ADA-negative at baseline	4 (100%)
ADA-positive at baseline	0 (%)
ADA-negative post-baseline	4 (100%)
ADA-inconclusive at baseline	0 (%)
Treatment-induced ADA-positive	0 (%)
Treatment-boosted ADA-positive	0 (%)

Post-Hoc Outcome Result(s)

All-Collected Deaths

Description	On-treatment and post-treatment safety follow-up (FU) deaths were collected from first dose of study medication to 30 days after last dose of NIZ985, 150 days after last dose of NIZ985+PDR001 and 120 days after last dose of NIZ985+tislelizumab. Survival FU deaths were collected from 31 days after last dose of NIZ985, 151 days after last dose of NIZ985+PDR001 and 121 days after last dose of NIZ985+tislelizumab until end of study.
Time Frame	On-treatment and safety FU deaths: up to approximately 3 years (NIZ985), 1.9 years (NIZ985+PDR001) and 0.8 years (NIZ985+tislelizumab). Survival FU deaths: up to approximately 3 years (NIZ985), 1.9 years (NIZ985+PDR001) and 0.8 years (NIZ985+tislelizumab)

Analysis Population Description: All patients who received at least one dose of study treatment.

	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 2mcg/kg + PDR001 400mg	NIZ985 4mcg/kg + PDR001 400mg	NIZ985 8mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + PDR001 400mg	NIZ985 16mcg/kg + PDR001 400mg	NIZ985 12mcg/kg + Tislelizumab 300mg
Arm/Group Description	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off. Spartalizumab could be added after the first disease re-evaluation regardless of the result.	NIZ985 2 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 4 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 8 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 16 mcg/kg SC QW 3 weeks on 1 week off in combination with spartalizumab 400 mg i.v. Q4W starting at Cycle 1 Day 1.	NIZ985 12 mcg/kg SC QW 3 weeks on 1 week off in combination with tislelizumab 300 mg i.v. Q4W.
Number of Participants Analyzed [units: participants]	3	4	6	7	7	6	4	6	6	7	4
All-Collected Deaths (units: participants)											
On-treatment and post-	1	3	2	2	0	2	2	1	1	3	1

treatment safety FU deaths (n=3,4,6,7,7,6,4, 6,6,7,4)											
Survival FU deaths (n=2,1,4,5,7,4,2, 5,5,4,3)	0	0	0	0	1	0	0	0	0	0	1
All deaths (n=3,4,6,7,7,6,4, 6,6,7,4)	1	3	2	2	1	2	2	1	1	3	2

Safety Results

Time Frame	On- and post-treatment safety FU: from first dose of study drug to 30, 150 and 120 days after last dose of NIZ985, NIZ985+PDR001 and NIZ985+tislelizumab, respectively, up to 3 years (NIZ985), 1.9 years (NIZ985+PDR001) and 0.8 years (NIZ985+tislelizumab). Deaths in survival period: from 31, 151 and 121 days after last dose of NIZ985, NIZ985+PDR001 and NIZ985+tislelizumab, respectively, until end of study, up to 3 years (NIZ985), 1.9 years (NIZ985+PDR001) and 0.8 years (NIZ985+tislelizumab).
Additional Description	Deaths in the survival period are not considered Adverse Events (AEs). No AEs were collected in the survival period.
Source Vocabulary for Table Default	MedDRA (26.1)
Collection Approach for Table Default	Systematic Assessment

NOVARTIS

All-Cause Mortality

On-treatment and post-treatment FU

	NIZ985 2mcg/kg N = 3	NIZ985 4mcg/kg N = 4	NIZ985 8mcg/kg N = 6	NIZ985 12mcg/kg N = 7	NIZ985 16mcg/kg N = 7	NIZ985 2mcg/kg + PDR001 400mg N = 6	NIZ985 4mcg/kg + PDR001 400mg N = 4	NIZ985 8mcg/kg + PDR001 400mg N = 6	NIZ985 12mcg/kg + PDR001 400mg N = 6	NIZ985 16mcg/kg + PDR001 400mg N = 7	NIZ985 12mcg/kg + Tislelizumab 300mg N = 4
Arm/Group Description	Safety data up to 30 days after last dose of NIZ985	Safety data up to 30 days after last dose of NIZ985, or 150 days after last dose if PDR001 was added after first disease reevaluation	Safety data up to 30 days after last dose of NIZ985, or 150 days after last dose if PDR001 was added after first disease reevaluation	Safety data up to 30 days after last dose of NIZ985, or 150 days after last dose if PDR001 was added after first disease reevaluation	Safety data up to 30 days after last dose of NIZ985, or 150 days after last dose if PDR001 was added after first disease reevaluation	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 120 days after last dose of NIZ985+tislelizumab
Total Number Affected	1	3	2	2	0	2	2	1	1	3	1
Total Number At Risk	3	4	6	7	7	6	4	6	6	7	4

Survival FU period

	NIZ985 2mcg/kg_	NIZ985 4mcg/kg_	NIZ985 8mcg/kg_	NIZ985 12mcg/kg_	NIZ985 16mcg/kg_	NIZ985 2mcg/kg	NIZ985 4mcg/kg	NIZ985 8mcg/kg	NIZ985 12mcg/kg	NIZ985 16mcg/kg	NIZ985 12mcg/kg +

	Survival period N = 2	Survival period N = 1	Survival period N = 4	Survival period N = 5	Survival period N = 7	+ PDR001 400mg_Survival period N = 4	+ PDR001 400mg_Survival period N = 2	+ PDR001 400mg_Survival period N = 5	+ PDR001 400mg_Survival period N = 5	+ PDR001 400mg_Survival period N = 4	Tislelizumab 300mg_Survival period N = 3
Arm/Group Description	Deaths collected in the survival follow-up period (starting from 31 days after last dose of NIZ985). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 31 days after last dose of NIZ985 or 151 days after last dose if PDR001 was added after first disease reevaluation). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 31 days after last dose of NIZ985 or 151 days after last dose if PDR001 was added after first disease reevaluation). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 31 days after last dose of NIZ985 or 151 days after last dose if PDR001 was added after first disease reevaluation). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 31 days after last dose of NIZ985 or 151 days after last dose if PDR001 was added after first disease reevaluation). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 151 days after last dose of NIZ985+PDR001). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 151 days after last dose of NIZ985+PDR001). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 151 days after last dose of NIZ985+PDR001). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 151 days after last dose of NIZ985+PDR001). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 151 days after last dose of NIZ985+PDR001). No AEs were collected during this period.	Deaths collected in the survival follow-up period (starting from 121 days after last dose of NIZ985+tislelizumab). No AEs were collected during this period.
Total Number Affected	0	0	0	0	1	0	0	0	0	0	1
Total Number At Risk	2	1	4	5	7	4	2	5	5	4	3

Serious Adverse Events

Time Frame	On- and post-treatment safety FU: from first dose of study drug to 30, 150 and 120 days after last dose of NIZ985, NIZ985+PDR001 and NIZ985+tislelizumab, respectively, up to 3 years (NIZ985), 1.9 years (NIZ985+PDR001) and 0.8 years (NIZ985+tislelizumab). Deaths in survival period: from 31, 151 and 121 days after last dose of NIZ985, NIZ985+PDR001 and NIZ985+tislelizumab, respectively, until end of study, up to 3 years (NIZ985), 1.9 years (NIZ985+PDR001) and 0.8 years (NIZ985+tislelizumab).
Additional Description	Deaths in the survival period are not considered Adverse Events (AEs). No AEs were collected in the survival period.
Source Vocabulary for Table Default	MedDRA (26.1)
Collection Approach for Table Default	Systematic Assessment

	NIZ985 2mcg/kg N = 3	**NIZ985 4mcg/kg N = 4**	**NIZ985 8mcg/kg N = 6**	**NIZ985 12mcg/kg N = 7**	**NIZ985 16mcg/kg N = 7**	**NIZ985 2mcg/kg + PDR001 400mg N = 6**	**NIZ985 4mcg/kg + PDR001 400mg N = 4**	**NIZ985 8mcg/kg + PDR001 400mg N = 6**	**NIZ985 12mcg/kg + PDR001 400mg N = 6**	**NIZ985 16mcg/kg + PDR001 400mg N = 7**	**NIZ985 12mcg/kg + Tislelizumab 300mg N = 4**
Arm/Group Description	Safety data up to 30 days after last dose of NIZ985	Safety data up to 30 days after last dose of NIZ985, or 150	Safety data up to 30 days after last dose of NIZ985, or 150	Safety data up to 30 days after last dose of NIZ985, or 150	Safety data up to 30 days after last dose of NIZ985, or 150	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 120 days after last dose of NIZ985+tislelizumab

		days after last dose if PDR001 was added after first disease reevaluation	days after last dose if PDR001 was added after first disease reevaluation	days after last dose if PDR001 was added after first disease reevaluation	days after last dose if PDR001 was added after first disease reevaluation						
Total # Affected by any Serious Adverse Event	1	1	1	3	1	2	1	2	2	3	4
Total # at Risk by any Serious Adverse Event	3	4	6	7	7	6	4	6	6	7	4
Blood and lymphatic system disorders											
Anaemia	0 (0.00 %)	1 (25.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Gastrointestinal disorders											
Dysphagia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.29 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
General disorders and administrati											

on site conditions											
Chest pain	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Disease progressio n	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	1 (25.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Fatigue	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Injection site reaction	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	1 (14.29%)	1 (25.00%)
Immune system disorders											
Cytokine release syndrome	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	1 (14.29%)	0 (0.00%)
Infections and infestations											
Device related infection	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Pneumoni a	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Septic shock	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Soft tissue infection	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Investigatio ns											

Blood bilirubin increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Transaminases increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Metabolism and nutrition disorders											
Hyperglycaemia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)											
Tumour pain	1 (33.33%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Respiratory, thoracic and mediastinal disorders											
Acute respiratory failure	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Dyspnoea	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	1 (25.00%)
Hypoxia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.29 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)

Interstitial lung disease	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Skin and subcutaneous tissue disorders											
Cutaneous vasculitis	0 (0.00 %)	0 (0.00 %)	1 (16.67 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Linear IgA disease	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.29 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Vascular disorders											
Vasculitis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.29 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)

Other (Not Including Serious) Adverse Events

Time Frame	On- and post-treatment safety FU: from first dose of study drug to 30, 150 and 120 days after last dose of NIZ985, NIZ985+PDR001 and NIZ985+tislelizumab, respectively, up to 3 years (NIZ985), 1.9 years (NIZ985+PDR001) and 0.8 years (NIZ985+tislelizumab). Deaths in survival period: from 31, 151 and 121 days after last dose of NIZ985, NIZ985+PDR001 and NIZ985+tislelizumab, respectively, until end of study, up to 3 years (NIZ985), 1.9 years (NIZ985+PDR001) and 0.8 years (NIZ985+tislelizumab).
Additional Description	Deaths in the survival period are not considered Adverse Events (AEs). No AEs were collected in the survival period.
Source Vocabulary for Table Default	MedDRA (26.1)
Collection Approach for Table Default	Systematic Assessment

Frequent Event Reporting Threshold 5%

	NIZ985 2mcg/kg N = 3	NIZ985 4mcg/kg N = 4	NIZ985 8mcg/kg N = 6	NIZ985 12mcg/kg N = 7	NIZ985 16mcg/kg N = 7	NIZ985 2mcg/kg + PDR001 400mg N = 6	NIZ985 4mcg/kg + PDR001 400mg N = 4	NIZ985 8mcg/kg + PDR001 400mg N = 6	NIZ985 12mcg/kg + PDR001 400mg N = 6	NIZ985 16mcg/kg + PDR001 400mg N = 7	NIZ985 12mcg/kg + Tislelizumab 300mg N = 4
Arm/Group Description	Safety data up to 30 days after last dose of NIZ985	Safety data up to 30 days after last dose of NIZ985, or 150 days after last dose if PDR001 was added after first disease reevaluation	Safety data up to 30 days after last dose of NIZ985, or 150 days after last dose if PDR001 was added after first disease reevaluation	Safety data up to 30 days after last dose of NIZ985, or 150 days after last dose if PDR001 was added after first disease reevaluation	Safety data up to 30 days after last dose of NIZ985, or 150 days after last dose if PDR001 was added after first disease reevaluation	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 150 days after last dose of NIZ985+PDR001	Safety data up to 120 days after last dose of NIZ985+tislelizumab
Total # Affected by any Other Adverse Event	3	4	6	7	7	6	4	6	6	7	4

Total # at Risk by any Other Adverse Event	3	4	6	7	7	6	4	6	6	7	4
Blood and lymphatic system disorders											
Anaemia	2 (66.67%)	0 (0.00%)	2 (33.33%)	4 (57.14%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	1 (16.67%)	2 (28.57%)	1 (25.00%)
Eosinophilia	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Hypochromic anaemia	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Leukocytosis	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Lymphocytosis	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Neutropenia	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Thrombocytopenia	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Thrombocytosis	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Cardiac disorders											
Cardiomegaly	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Sinus tachycardia	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Eye disorders											
Conjunctival haemorrhage	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)

Gastrointestinal disorders											
Abdominal distension	1 (33.33%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Abdominal pain	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	3 (42.86%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	2 (28.57%)	0 (0.00%)
Abdominal pain lower	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Abdominal pain upper	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Ascites	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Constipation	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	1 (14.29%)	0 (0.00%)
Diarrhoea	1 (33.33%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	2 (28.57%)	0 (0.00%)
Dry mouth	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Duodenal ulcer	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Dyspepsia	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Dysphagia	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Flatulence	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Gastrooesophageal reflux disease	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Nausea	0 (0.00%)	1 (25.00%)	2 (33.33%)	1 (14.29%)	2 (28.57%)	3 (50.00%)	0 (0.00%)	2 (33.33%)	0 (0.00%)	0 (0.00%)	1 (25.00%)

Toothache	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Vomiting	0 (0.00 %)	1 (25.0 0%)	0 (0.00 %)	1 (14.2 9%)	1 (14.2 9%)	1 (16.67%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
General disorders and administration site conditions											
Asthenia	0 (0.00 %)	1 (25.0 0%)	2 (33.3 3%)	0 (0.00 %)	2 (28.5 7%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	1 (16.67%)	2 (28.57%)	3 (75.00%)
Chills	0 (0.00 %)	0 (0.00 %)	1 (16.6 7%)	1 (14.2 9%)	1 (14.2 9%)	0 (0.00%)	1 (25.00%)	2 (33.33%)	1 (16.67%)	0 (0.00%)	2 (50.00%)
Fatigue	0 (0.00 %)	2 (50.0 0%)	3 (50.0 0%)	1 (14.2 9%)	0 (0.00 %)	3 (50.00%)	1 (25.00%)	3 (50.00%)	0 (0.00%)	1 (14.29%)	1 (25.00%)
General physical health deterioration	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Influenza like illness	0 (0.00 %)	1 (25.0 0%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (33.33%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Injection site erythema	0 (0.00 %)	1 (25.0 0%)	2 (33.3 3%)	0 (0.00 %)	1 (14.2 9%)	1 (16.67%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	2 (28.57%)	1 (25.00%)
Injection site inflammation	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Injection site oedema	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Injection site pain	0 (0.00 %)	1 (25.0 0%)	1 (16.6 7%)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Injection site pruritus	0 (0.00 %)	1 (25.0 0%)	1 (16.6 7%)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Injection site rash	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Injection site reaction	3 (100. 00%)	1 (25.0 0%)	4 (66.6 7%)	6 (85.7 1%)	6 (85.7 1%)	5 (83.33%)	2 (50.00%)	6 (100.00 %)	6 (100.00 %)	4 (57.14%)	3 (75.00%)

Injection site swelling	0 (0.00 %)	1 (25.0 0%)	1 (16.6 7%)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Malaise	1 (33.3 3%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Mucosal inflammation	0 (0.00 %)	0 (0.00 %)	1 (16.6 7%)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Non-cardiac chest pain	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Oedema	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Oedema peripheral	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Pain	0 (0.00 %)	1 (25.0 0%)	2 (33.3 3%)	0 (0.00 %)	0 (0.00 %)	3 (50.00%)	1 (25.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Pyrexia	1 (33.3 3%)	2 (50.0 0%)	5 (83.3 3%)	6 (85.7 1%)	6 (85.7 1%)	3 (50.00%)	2 (50.00%)	5 (83.33%)	4 (66.67%)	4 (57.14%)	2 (50.00%)
Thirst decreased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Ulcer	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	1 (25.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Hepatobiliary disorders											
Hypertransaminasaemia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	2 (28.57%)	0 (0.00%)
Immune system disorders											
Cytokine release syndrome	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (28.5 7%)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Infections and infestations											

Bronchitis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Cellulitis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
COVID-19	0 (0.00 %)	1 (25.0 0%)	1 (16.6 7%)	1 (14.2 9%)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Furuncle	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Gastroenteritis clostridial	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Herpes zoster	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Infection	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Nasopharyngitis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Osteomyelitis	1 (33.3 3%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Pneumonia aspiration	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Sepsis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Sinusitis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Skin infection	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Urinary tract infection	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Injury, poisoning and procedural complications											

Injection related reaction	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Vaccination complication	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Investigations											
Alanine aminotransfera se increased	1 (33.3 3%)	0 (0.00 %)	0 (0.00 %)	3 (42.8 6%)	3 (42.8 6%)	0 (0.00%)	1 (25.00%)	2 (33.33%)	2 (33.33%)	3 (42.86%)	2 (50.00%)
Amylase increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Aspartate aminotransfera se increased	1 (33.3 3%)	0 (0.00 %)	0 (0.00 %)	2 (28.5 7%)	3 (42.8 6%)	0 (0.00%)	0 (0.00%)	2 (33.33%)	3 (50.00%)	3 (42.86%)	2 (50.00%)
Blood alkaline phosphatase increased	1 (33.3 3%)	0 (0.00 %)	1 (16.6 7%)	2 (28.5 7%)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	1 (16.67%)	3 (50.00%)	1 (14.29%)	0 (0.00%)
Blood bilirubin increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Blood creatinine increased	0 (0.00 %)	0 (0.00 %)	1 (16.6 7%)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Blood lactate dehydrogenase increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
C-reactive protein increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	2 (28.57%)	0 (0.00%)
Fibrin D dimer increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Gamma-glutamyltransfe rase increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (28.5 7%)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	2 (33.33%)	1 (14.29%)	0 (0.00%)

Lipase increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (28.5 7%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Neutrophil count decreased	0 (0.00 %)	0 (0.00 %)	1 (16.6 7%)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Platelet count decreased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Red blood cell count decreased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Transaminases increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Weight decreased	0 (0.00 %)	0 (0.00 %)	2 (33.3 3%)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	2 (50.00%)	0 (0.00%)	1 (16.67%)	1 (14.29%)	0 (0.00%)
Weight increased	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Metabolism and nutrition disorders											
Cachexia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Decreased appetite	0 (0.00 %)	1 (25.0 0%)	1 (16.6 7%)	0 (0.00 %)	0 (0.00 %)	3 (50.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Dehydration	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Hyperammonaemia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Hyperkalaemia	0 (0.00 %)	0 (0.00 %)	1 (16.6 7%)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Hypoalbuminaemia	1 (33.3 3%)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Hypocalcaemia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)

Hypokalaemia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Hypomagnesaemia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Hyponatraemia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	2 (28.57%)	1 (25.00%)
Hypophosphataemia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Lactic acidosis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Musculoskeletal and connective tissue disorders											
Arthralgia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Back pain	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Muscular weakness	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.29%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Myalgia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.29%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Pain in extremity	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	1 (25.00%)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)											
Cancer pain	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Seborrhoeic keratosis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)

Tumour haemorrhage	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Tumour pain	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Nervous system disorders											
Aphasia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Dysgeusia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Headache	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	2 (28.5 7%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	1 (25.00%)
Intercostal neuralgia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Myoclonus	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Paralysis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Syncope	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Tonic clonic movements	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Psychiatric disorders											
Delirium	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Insomnia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	2 (28.57%)	0 (0.00%)
Renal and urinary disorders											

Nephritis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Renal failure	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Urinary retention	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Respiratory, thoracic and mediastinal disorders											
Acute respiratory failure	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Atelectasis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Bronchospasm	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Cough	0 (0.00 %)	1 (25.0 0%)	0 (0.00 %)	1 (14.2 9%)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	1 (16.67%)	1 (14.29%)	2 (50.00%)
Dyspnoea	0 (0.00 %)	0 (0.00 %)	1 (16.6 7%)	0 (0.00 %)	1 (14.2 9%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	1 (14.29%)	0 (0.00%)
Hypercapnia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Hypoxia	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Increased upper airway secretion	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Pleural effusion	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Pneumonitis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)

Productive cough	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Pulmonary oedema	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Respiratory acidosis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Rhinorrhoea	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Tonsillolith	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Skin and subcutaneous tissue disorders											
Cutaneous vasculitis	0 (0.00 %)	0 (0.00 %)	1 (16.6 7%)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Dermatitis acneiform	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Dermatitis allergic	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Dermatitis bullous	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Drug eruption	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Hyperhidrosis	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Pruritus	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	1 (14.2 9%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	1 (16.67%)	0 (0.00%)	1 (25.00%)
Pruritus allergic	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Purpura	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00 %)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)

Rash	1 (33.33%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	2 (33.33%)	1 (16.67%)	1 (14.29%)	0 (0.00%)
Urticaria	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Vancomycin infusion reaction	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Vitiligo	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)
Vascular disorders											
Aortic aneurysm	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Aortic dilatation	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)
Hypertension	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	2 (33.33%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	2 (28.57%)	0 (0.00%)
Hypotension	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	1 (25.00%)
Vasculitis	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (14.29%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)
Vasoconstriction	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	0 (0.00%)	1 (16.67%)	0 (0.00%)	0 (0.00%)	0 (0.00%)

Conclusion:

The study successfully characterized the safety and tolerability of NIZ985 12 mcg/kg QW as a single agent and in combination with spartalizumab. Based on the safety and tolerability data supported by the BHLRM + EWOC, PK and efficacy data, the RDE was determined to be 12 mcg/kg NIZ985 QW (3 weeks on 1 week off) in single-agent and in combination with spartalizumab. Similar mechanisms of action and safety/toxicity profiles between both anti PD-1

antibodies, spartalizumab and tislelizumab, supported the use of tislelizumab in the Arm 2 expansion cohort in combination with 12 mcg/kg NIZ985 QW. Furthermore, the safety profile of Chinese Hamster Ovary (CHO)-derived NIZ985 in this study was consistent with the previously known safety profile of Human Embryonic Kidney (HEK)-derived NIZ985.

Additionally, overall data from the study (along with the limited PK and safety data from combination with tislelizumab in the expansion cohort) supports the potential use of NIZ985 in combination with PD-1 inhibitors as a potential therapeutic option for patients with advanced solid tumors and lymphomas.

Date of Clinical Trial Report

05-September-2024